Dossier zur Nutzenbewertung gemäß § 35a SGB V

Olaparib (Lynparza®)

AstraZeneca GmbH

Anhang 4-G

Erhaltungstherapie in Kombination mit Bevacizumab von erwachsenen Patientinnen mit einem fortgeschrittenen (FIGO-Stadien III und IV) high-grade epithelialen Ovarialkarzinom, Eileiterkarzinom oder primären Peritonealkarzinom, die nach einer abgeschlossenen Platin-basierten Erstlinien-Chemotherapie in Kombination mit Bevacizumab ein Ansprechen (vollständig oder partiell) haben und deren Tumor mit einem positiven Status der homologen Rekombinations-Defizienz (HRD) assoziiert ist

Stand: 28.10.2022

Table 2.1 PAOLA1: Summary of observation period (months) for PRO endpoints
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

		Olaparib + bevacizumab (N=255)	Placebo + bevacizumab (N=132)
EORTC-QLQ-C30	n	255	132
	Median	24.18	24.05
	Min	0.0	0.0
	Max	52.5	41.2
EORTC-QLQ-OV28	n	255	132
	Median	24.18	24.05
	Min	0.0	0.0
	Max	52.5	41.2
EQ-5D-5L	n	255	132
	Median	24.18	24.05
	Min	0.0	0.0
	Max	52.5	41.2

Observation period for PROs is defined as the time from randomisation to the earliest date of the DCO, death and last assessment for each questionnaire (including date of Patient too ill status).
Patients without any measurements/Patient too ill status collected post randomisation are summarised with duration of 1 day.

Table 2.2.1 PAOLA1: Summary of analysis of time to worsening in EORTC QLQ-C30 global QoL/health status, functional, symptom and single item scales
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EORTC QLQ-C30 Global QoL/health status	255	146 (57.3)	16.6 (11.5,21.8)	132	81 (61.4)	13.8 (9.3,17.2)	0.85	0.65, 1.12	0.2343
EORTC QLQ-C30 Functional scale: Physical	255	125 (49.0)	20.0 (13.9,52.5)	132	74 (56.1)	16.4 (11.5,22.4)	0.85	0.64, 1.14	0.2790
EORTC QLQ-C30 Functional scale: Role	255	167 (65.5)	8.4 (5.8,11.2)	132	82 (62.1)	9.3 (6.1,16.2)	1.11	0.85, 1.46	0.4501
EORTC QLQ-C30 Functional scale: Cognitive	255	174 (68.2)	11.1 (8.5,14.0)	132	85 (64.4)	8.5 (5.9,13.6)	0.91	0.70, 1.19	0.4835
EORTC QLQ-C30 Functional scale: Emotional	255	158 (62.0)	13.8 (9.0,19.3)	132	85 (64.4)	11.1 (8.3,13.8)	0.93	0.71, 1.22	0.5708
EORTC QLQ-C30 Functional scale: Social	255	148 (58.0)	13.5 (8.6,19.6)	132	81 (61.4)	11.3 (8.5,16.4)	0.91	0.69, 1.20	0.4710
EORTC QLQ-C30 Single item symptom scale: Loss of appetite	255	146 (57.3)	13.6 (11.1,22.1)	132	65 (49.2)	22.3 (16.6,28.7)	1.42	1.06, 1.92	0.0227*
EORTC QLQ-C30 Single item symptom scale: Constipation	255	133 (52.2)	19.9 (16.6,23.4)	132	69 (52.3)	19.7 (14.0,22.3)	1.03	0.77, 1.39	0.8313
EORTC QLQ-C30 Single item symptom scale: Diarrhoea	255	124 (48.6)	24.0 (16.6,25.9)	132	58 (43.9)	23.5 (19.9,35.0)	1.15	0.84, 1.58	0.4093

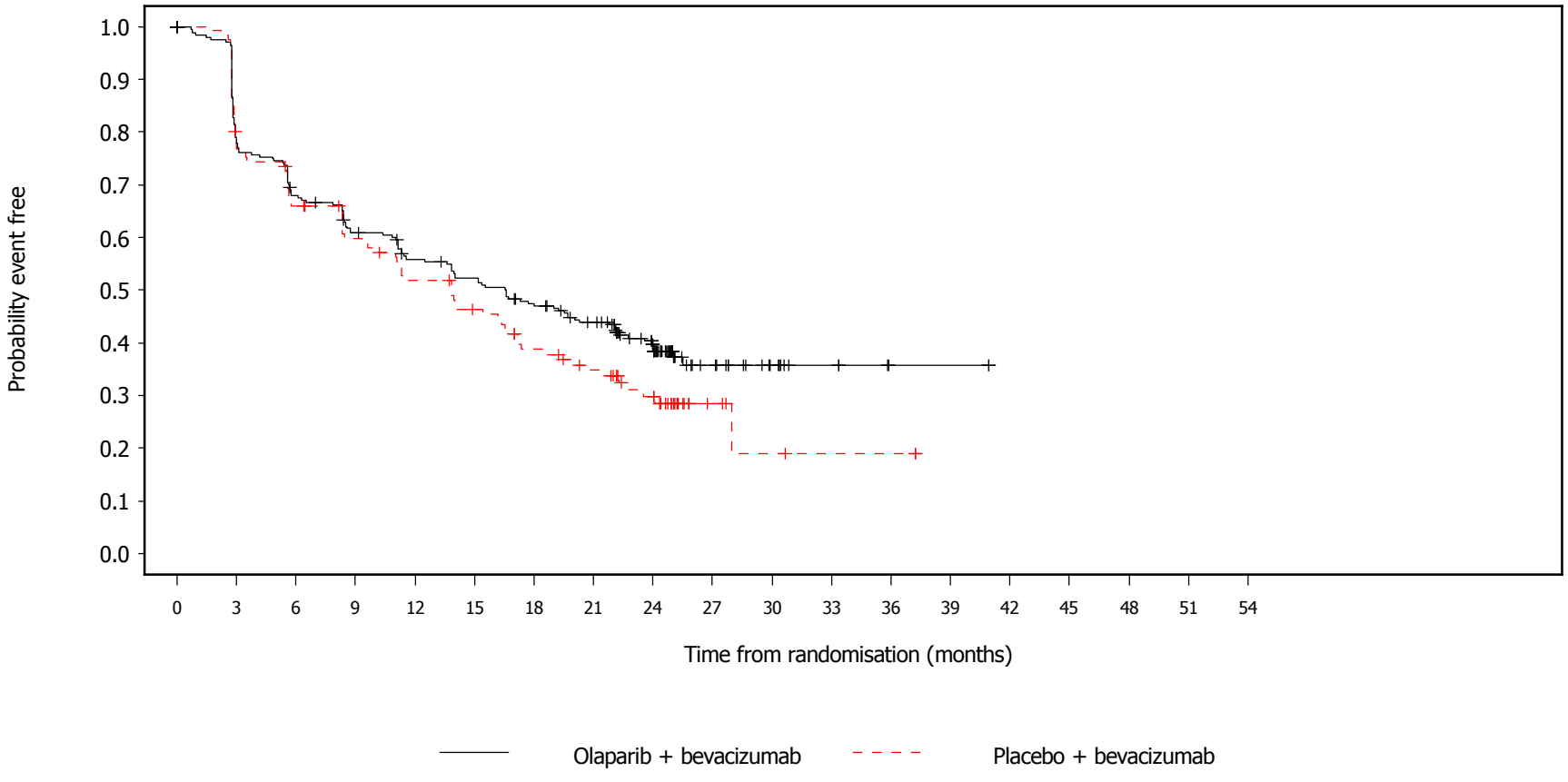
Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.

Table 2.2.1 PAOLA1: Summary of analysis of time to worsening in EORTC QLQ-C30 global QoL/health status, functional, symptom and single item scales
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)						
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]		2-sided p-value [c]
EORTC QLQ-C30 Single item symptom scale: Dyspnoea	255	125 (49.0)	20.7 (16.0,52.5)	132	67 (50.8)	18.7 (12.3,24.9)	0.92	0.68,	1.25	0.5796
EORTC QLQ-C30 Symptom scale: Fatigue	255	199 (78.0)	5.6 (3.1, 6.0)	132	98 (74.2)	5.7 (5.5,11.1)	1.10	0.86,	1.41	0.4815
EORTC QLQ-C30 Single item symptom scale: Financial difficulties	255	77 (30.2)	38.4 (38.4, NE)	132	48 (36.4)	NE (NE, NE)	0.72	0.50,	1.04	0.0709
EORTC QLQ-C30 Symptom scale: Nausea and vomiting	255	178 (69.8)	5.8 (5.6, 8.7)	132	70 (53.0)	19.2 (12.7,23.5)	1.81	1.37,	2.42	<0.0001*
EORTC QLQ-C30 Symptom scale: Pain	255	183 (71.8)	5.8 (5.6, 8.3)	132	95 (72.0)	5.6 (3.0, 8.1)	0.92	0.72,	1.19	0.5505
EORTC QLQ-C30 Single item symptom scale: Insomnia	255	159 (62.4)	11.3 (8.4,14.0)	132	91 (68.9)	8.3 (5.6,11.1)	0.73	0.56,	0.95	0.0185*

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.

Figure 2.2.2.1 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

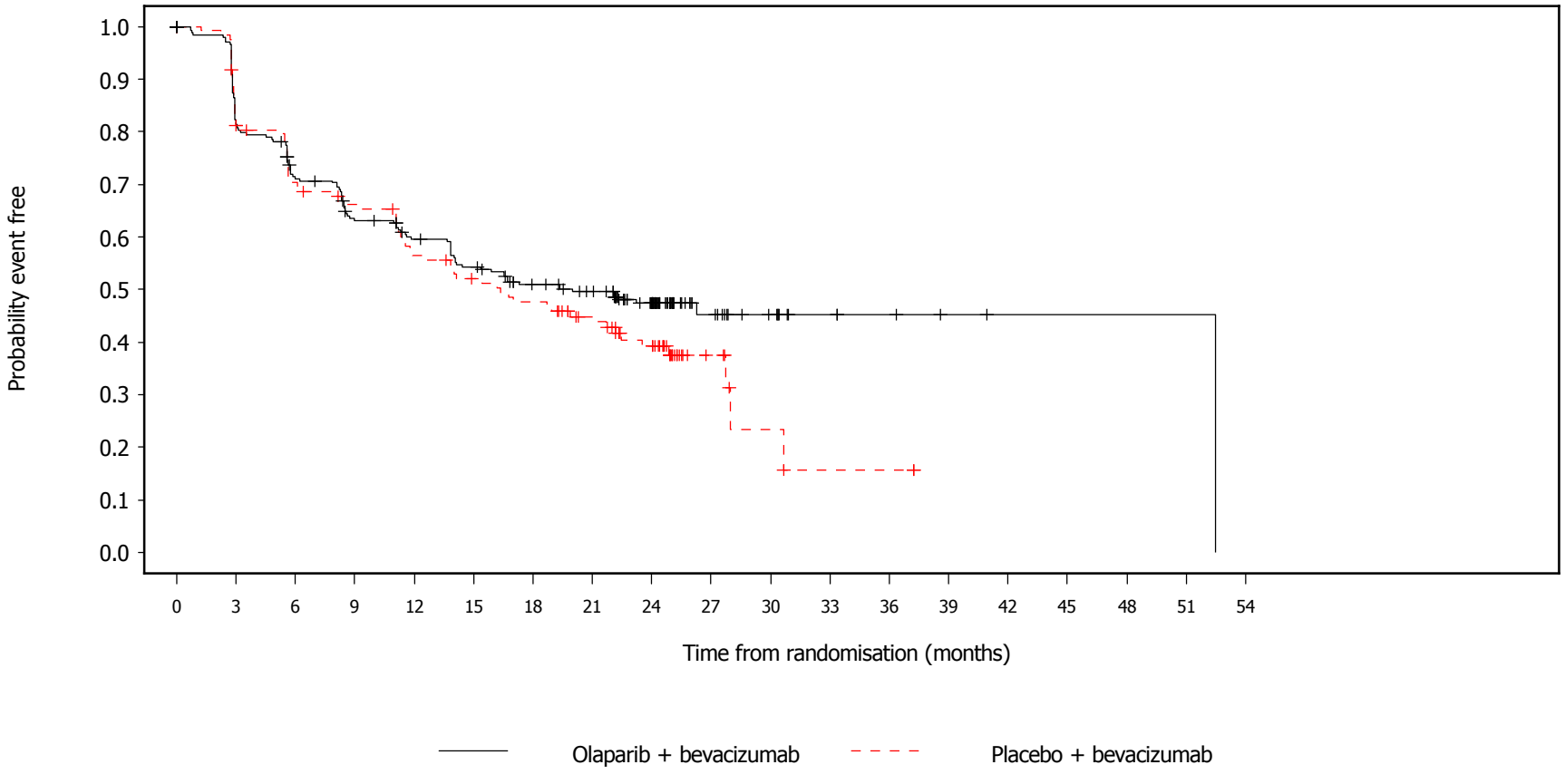


Number of patients at risk:

255	191	164	145	130	121	108	95	65	20	10	5	1	1	0	0	0	0	0	Olaparib + bevacizumab
132	95	78	68	58	50	40	33	23	5	2	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.2 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Physical time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

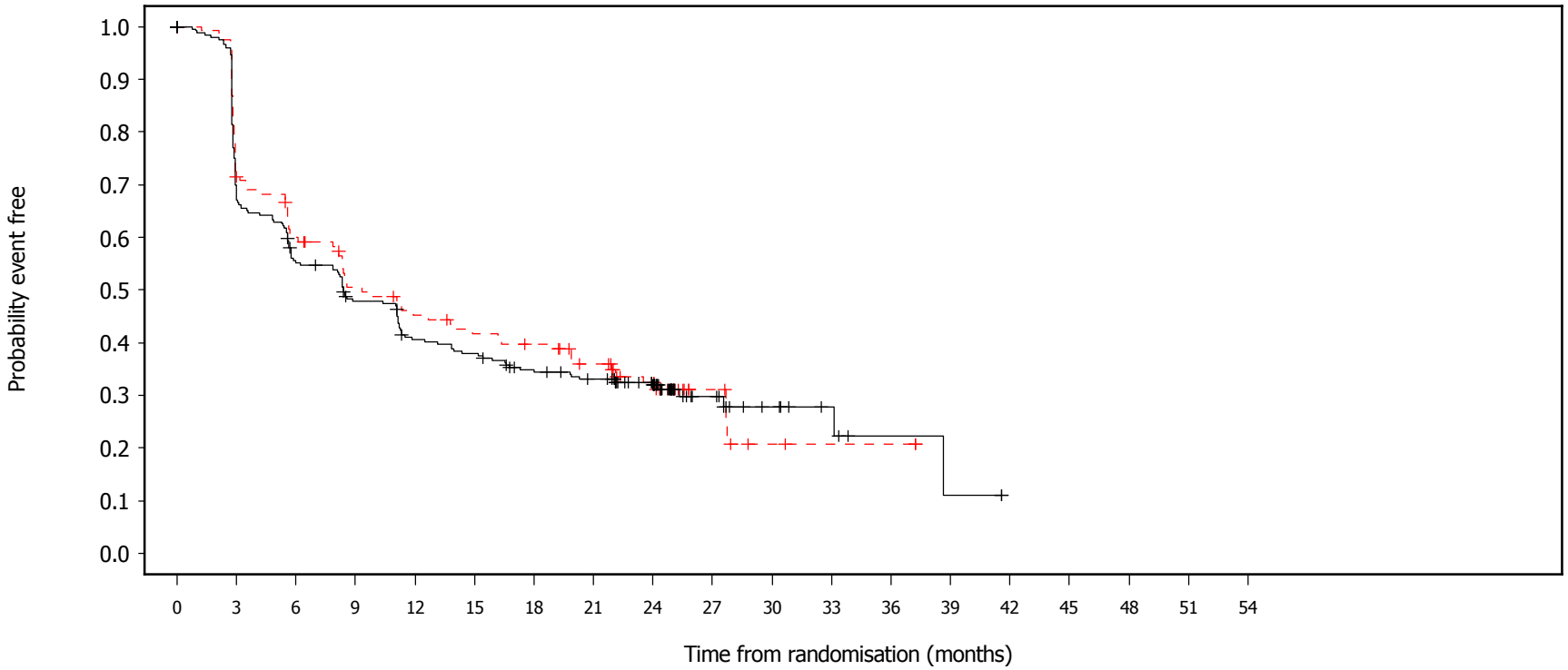


Number of patients at risk:

255	199	169	148	135	122	108	100	72	20	12	6	4	2	1	1	1	1	0	Olaparib + bevacizumab
132	101	84	77	65	58	53	43	32	8	3	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.3 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Role time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

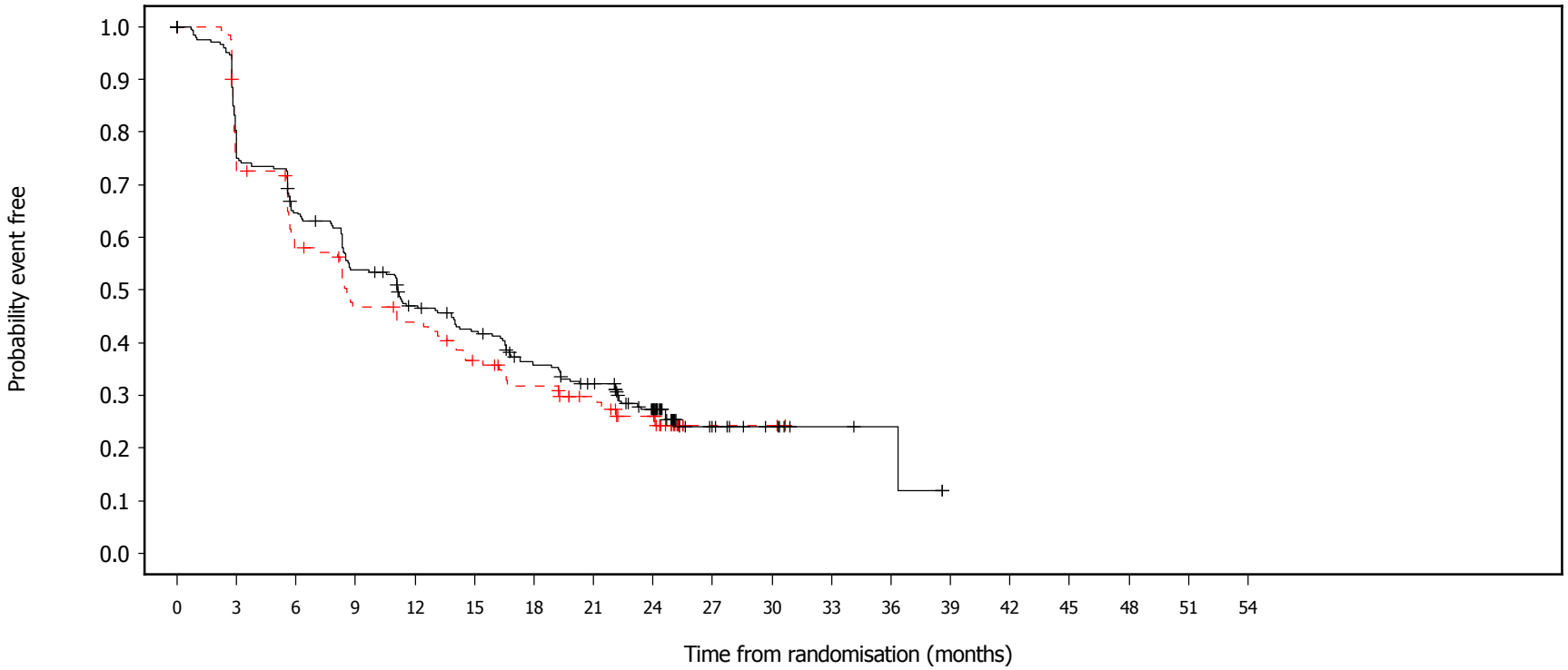


Number of patients at risk:

255	165	132	112	93	87	76	69	53	17	9	5	2	1	0	0	0	0	0	Olaparib + bevacizumab
132	89	72	58	51	46	43	35	26	7	2	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.4 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Cognitive time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

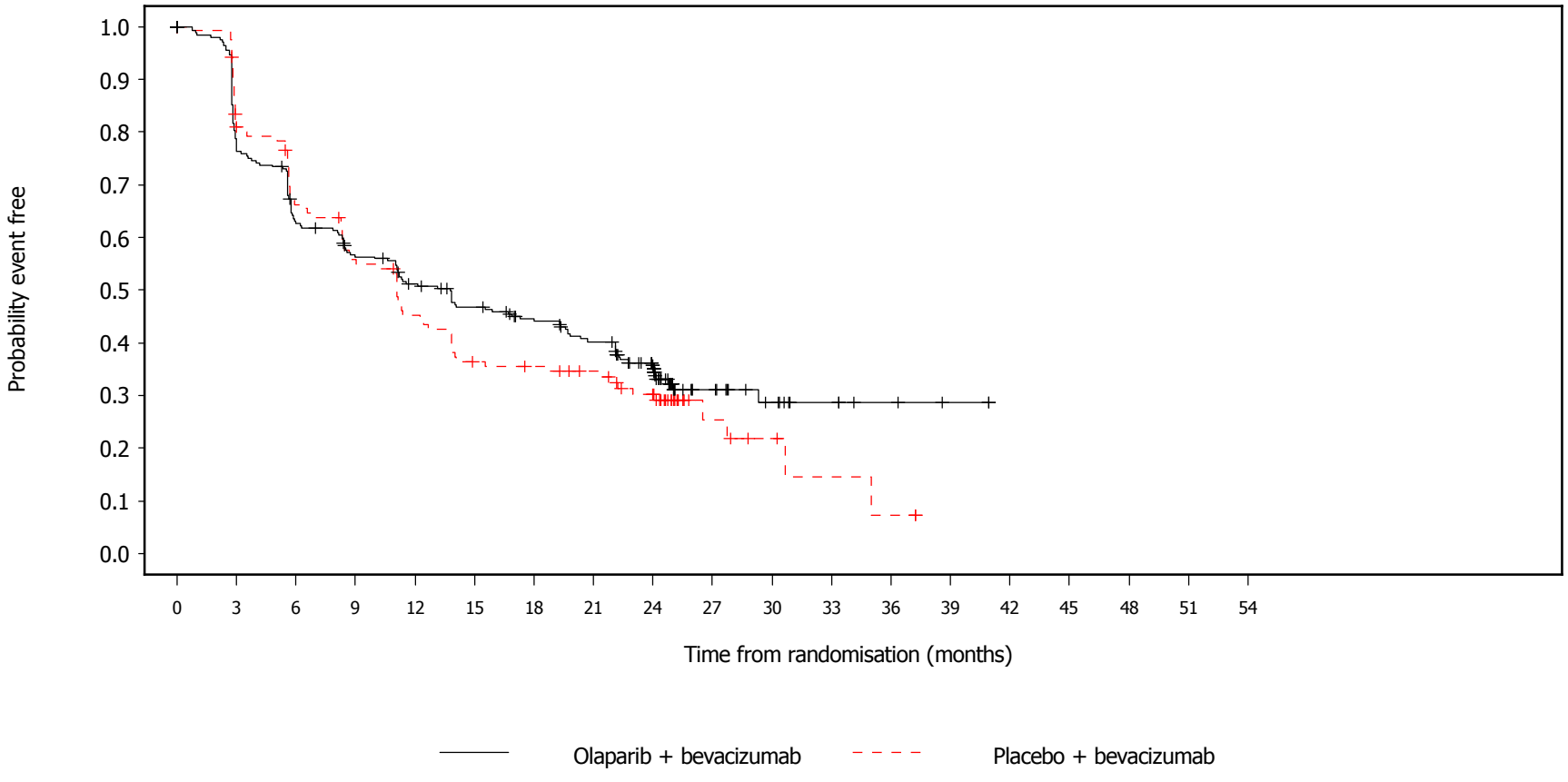


Number of patients at risk:

255	187	156	129	108	95	77	66	44	12	7	3	2	0	0	0	0	0	0	Olaparib + bevacizumab
132	89	68	53	49	39	32	25	18	2	2	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.5 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Emotional time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

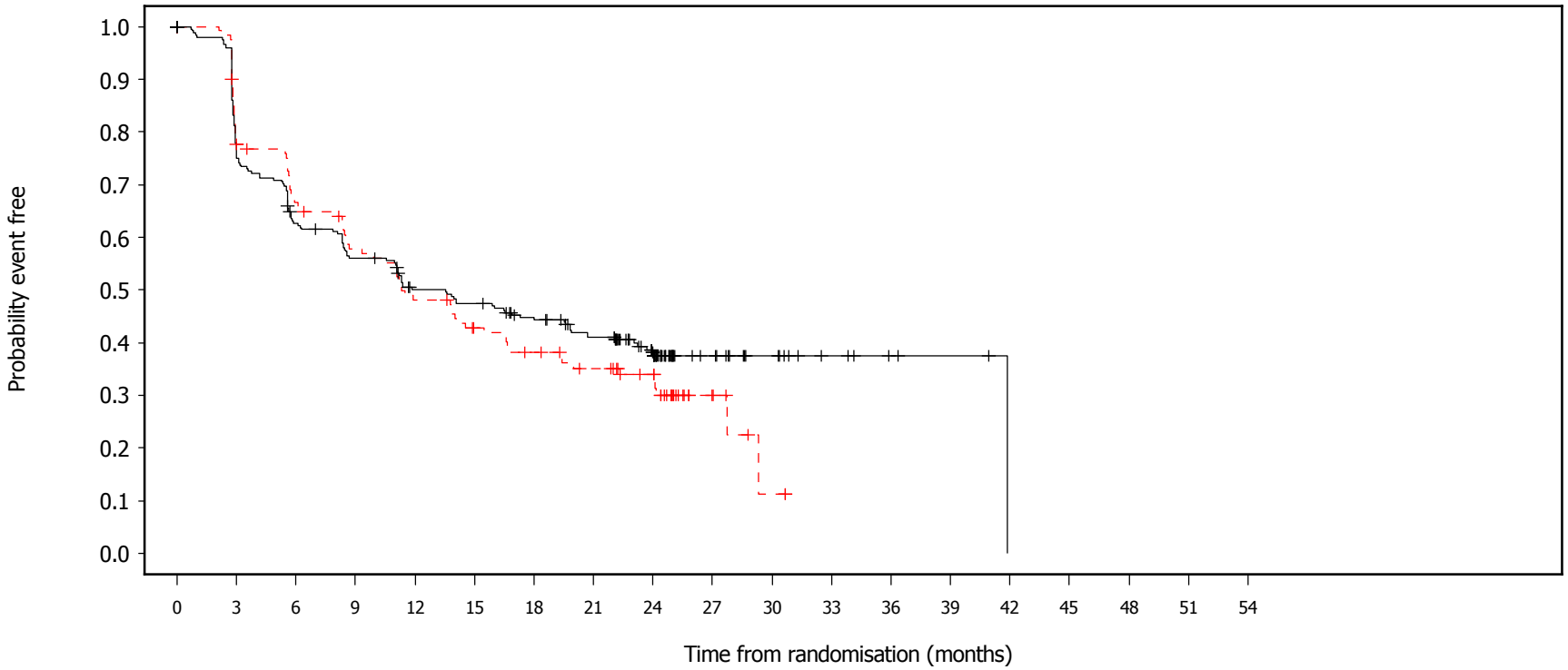


Number of patients at risk:

255	187	151	134	118	105	95	84	61	19	11	6	3	1	0	0	0	0	0	Olaparib + bevacizumab
132	98	77	64	51	40	38	34	26	7	4	2	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.6 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Social time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

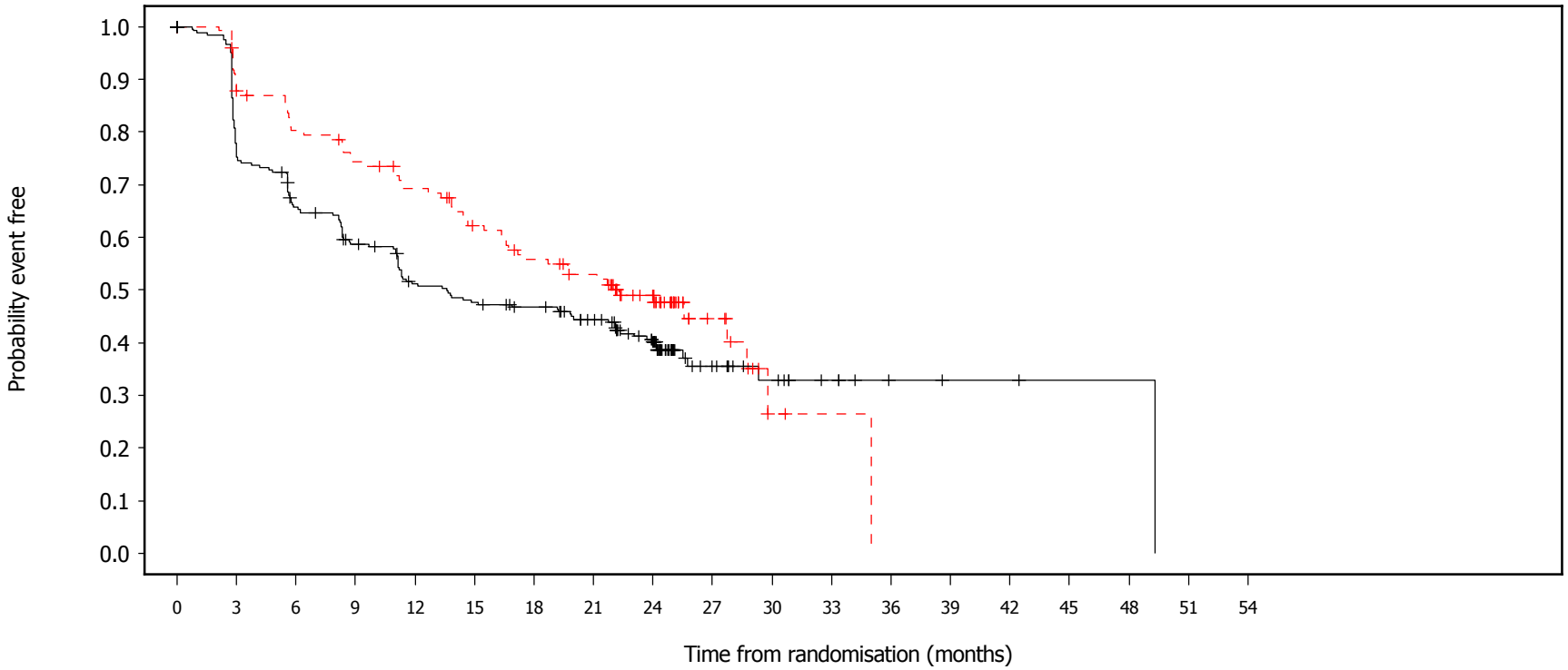


Number of patients at risk:

255	186	151	134	115	109	98	85	58	20	12	6	3	2	0	0	0	0	0	Olaparib + bevacizumab
132	94	78	66	55	46	40	34	27	6	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.7 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Loss of appetite time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

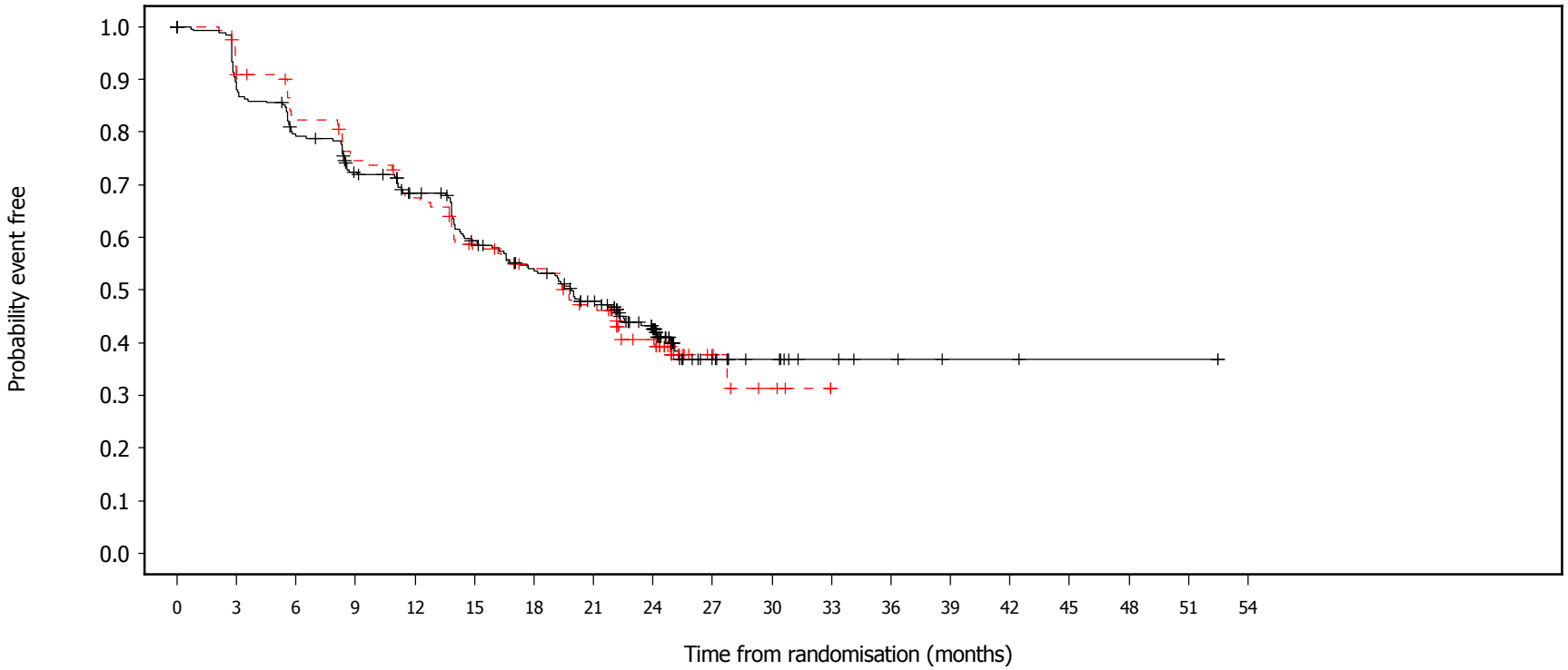


Number of patients at risk:

255	185	157	137	116	108	102	90	67	19	12	7	3	2	2	1	1	0	0	Olaparib + bevacizumab
132	110	96	88	80	69	61	55	39	12	2	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.8 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Constipation time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

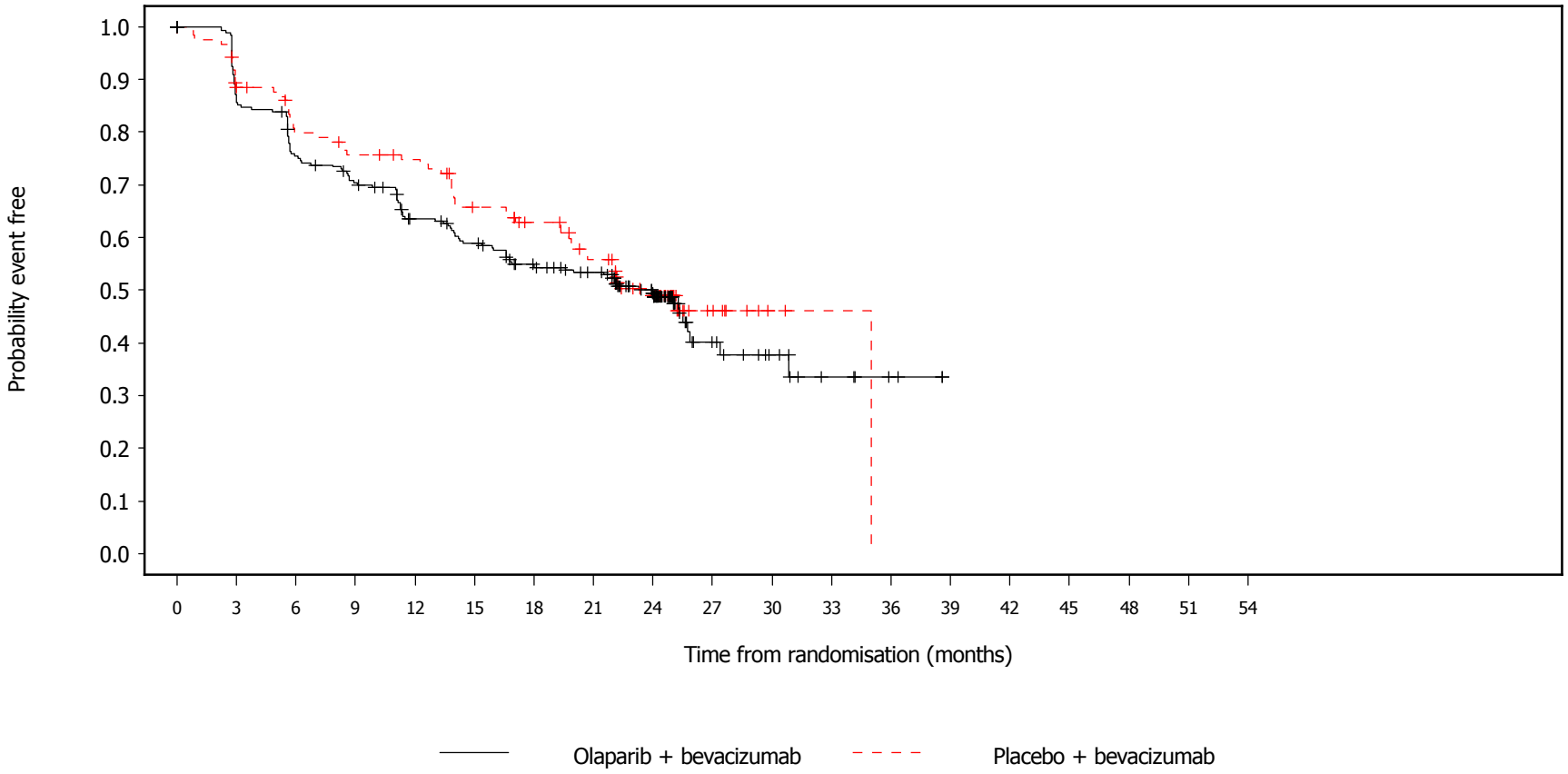


Number of patients at risk:

255	213	189	168	152	128	113	94	65	17	11	6	4	2	2	1	1	1	0	Olaparib + bevacizumab
132	110	97	86	77	64	56	47	33	7	3	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.9 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Diarrhoea time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

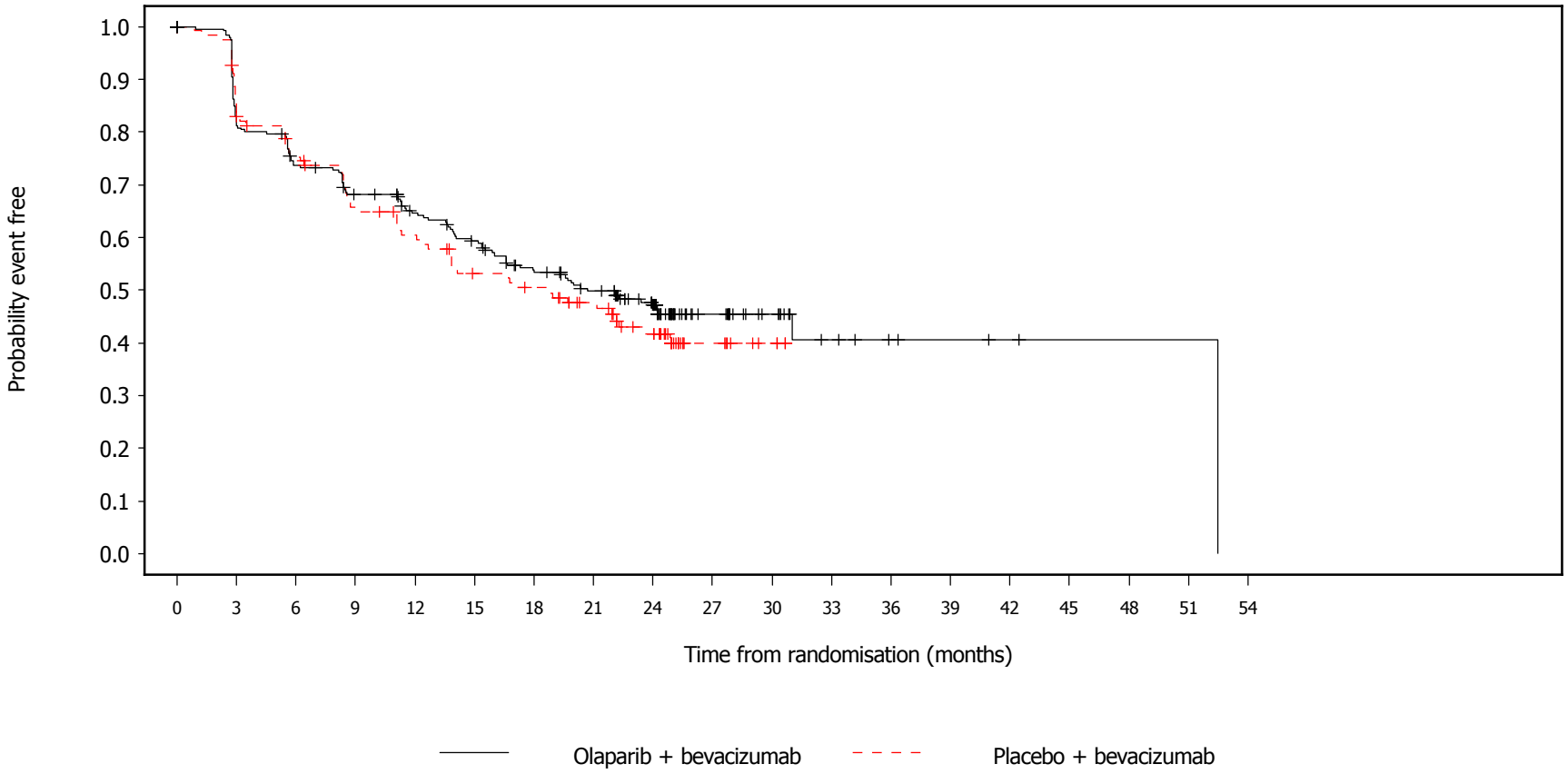


Number of patients at risk:

255	207	180	166	143	131	115	105	76	18	11	5	2	0	0	0	0	0	0	Olaparib + bevacizumab
132	107	93	87	84	71	64	54	39	9	2	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.10 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Dyspnoea time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

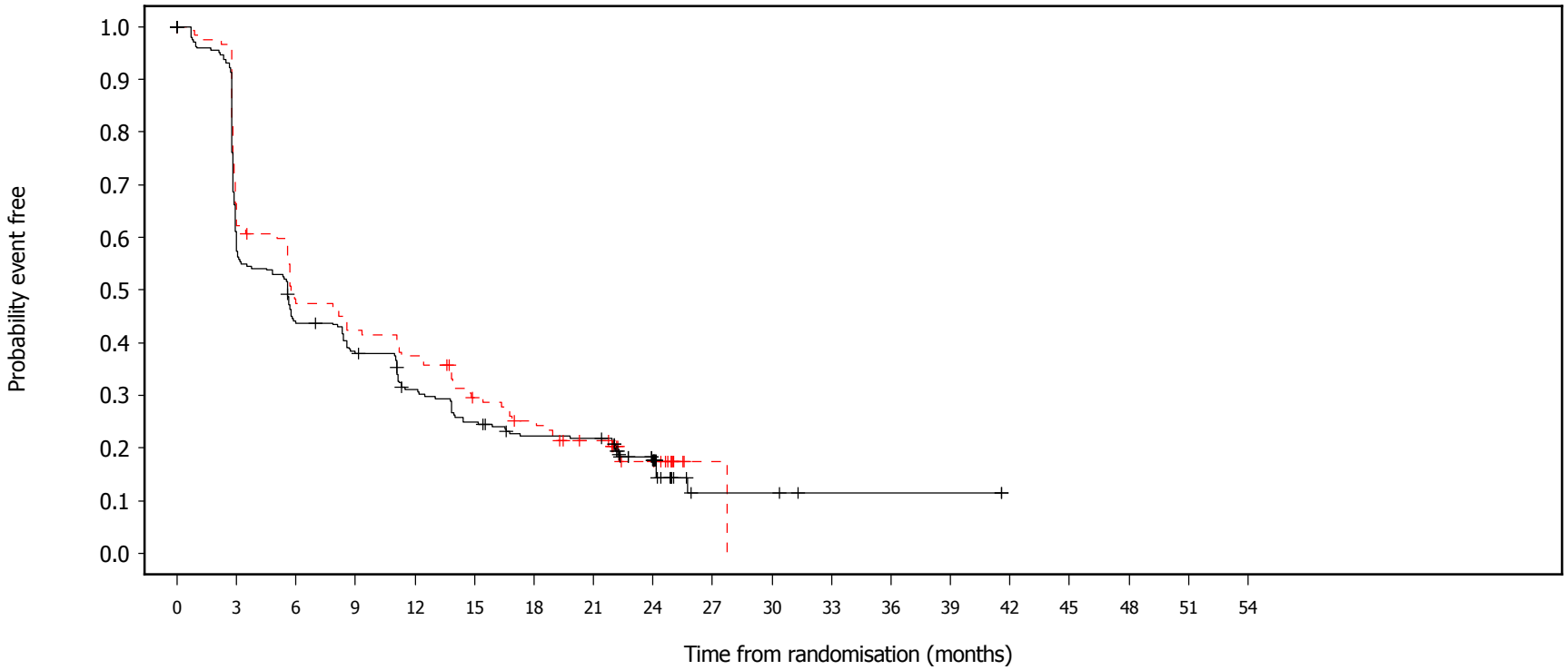


Number of patients at risk:

255	197	175	159	145	131	114	101	75	27	15	7	4	3	2	1	1	1	0	Olaparib + bevacizumab
132	104	89	76	68	57	53	44	32	9	3	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.11 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Fatigue time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

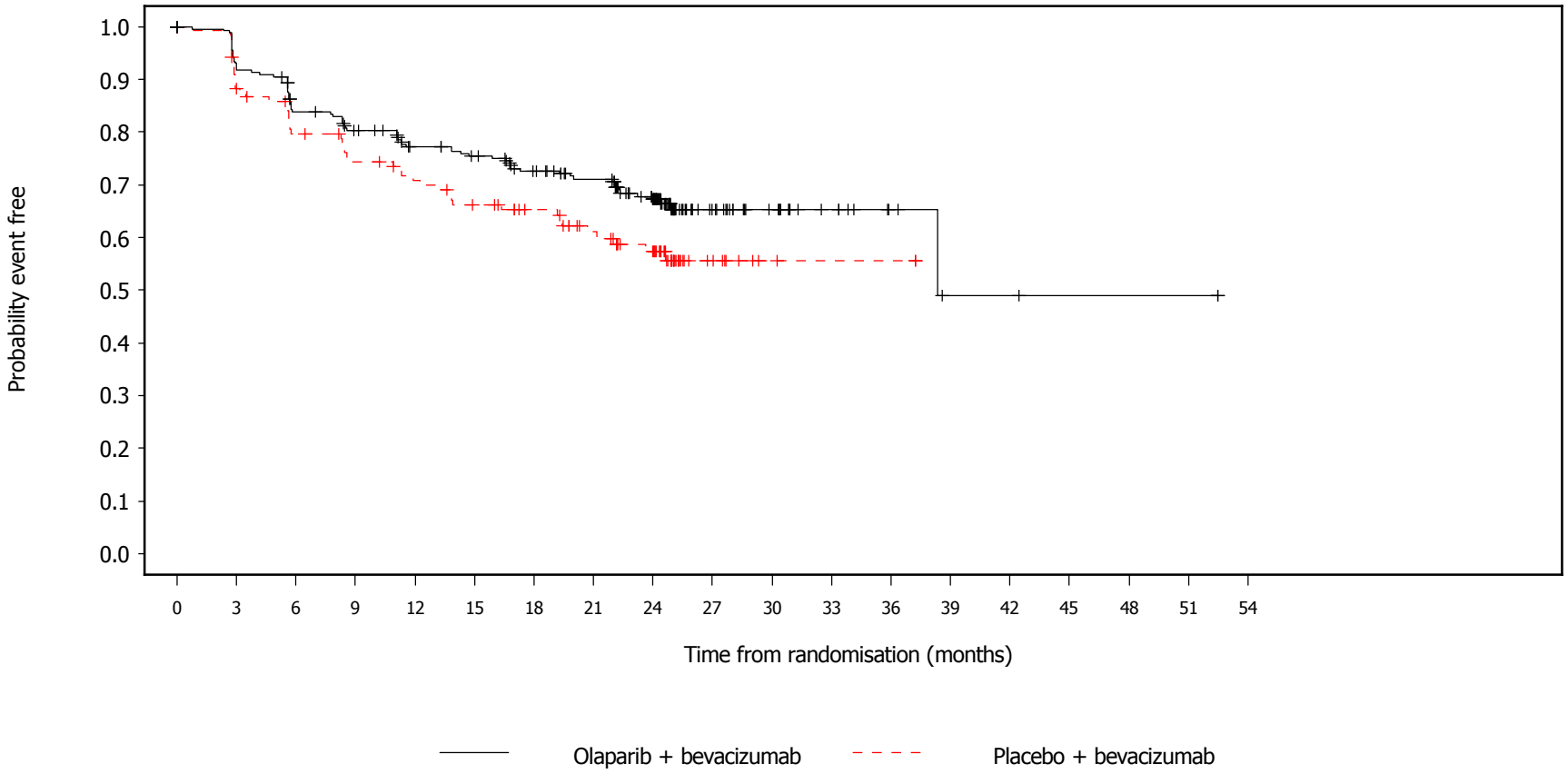


Number of patients at risk:

255	142	105	91	71	57	48	47	26	3	3	1	1	1	0	0	0	0	0	Olaparib + bevacizumab
132	80	57	51	45	33	27	20	11	1	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.12 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Financial difficulties time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

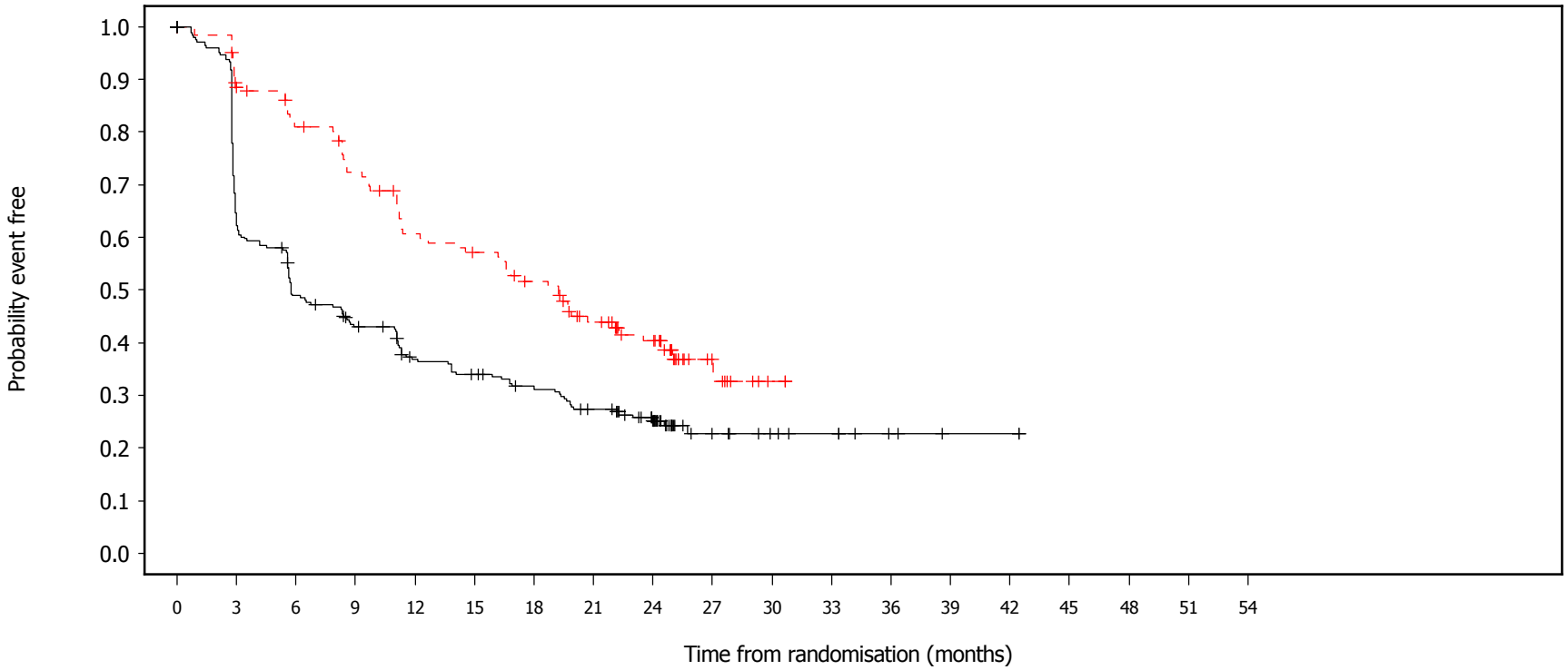


Number of patients at risk:

255	223	198	186	171	164	151	140	106	32	20	11	5	2	2	1	1	1	0	Olaparib + bevacizumab
132	105	92	84	78	71	64	54	43	9	2	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.13 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Nausea and vomiting time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

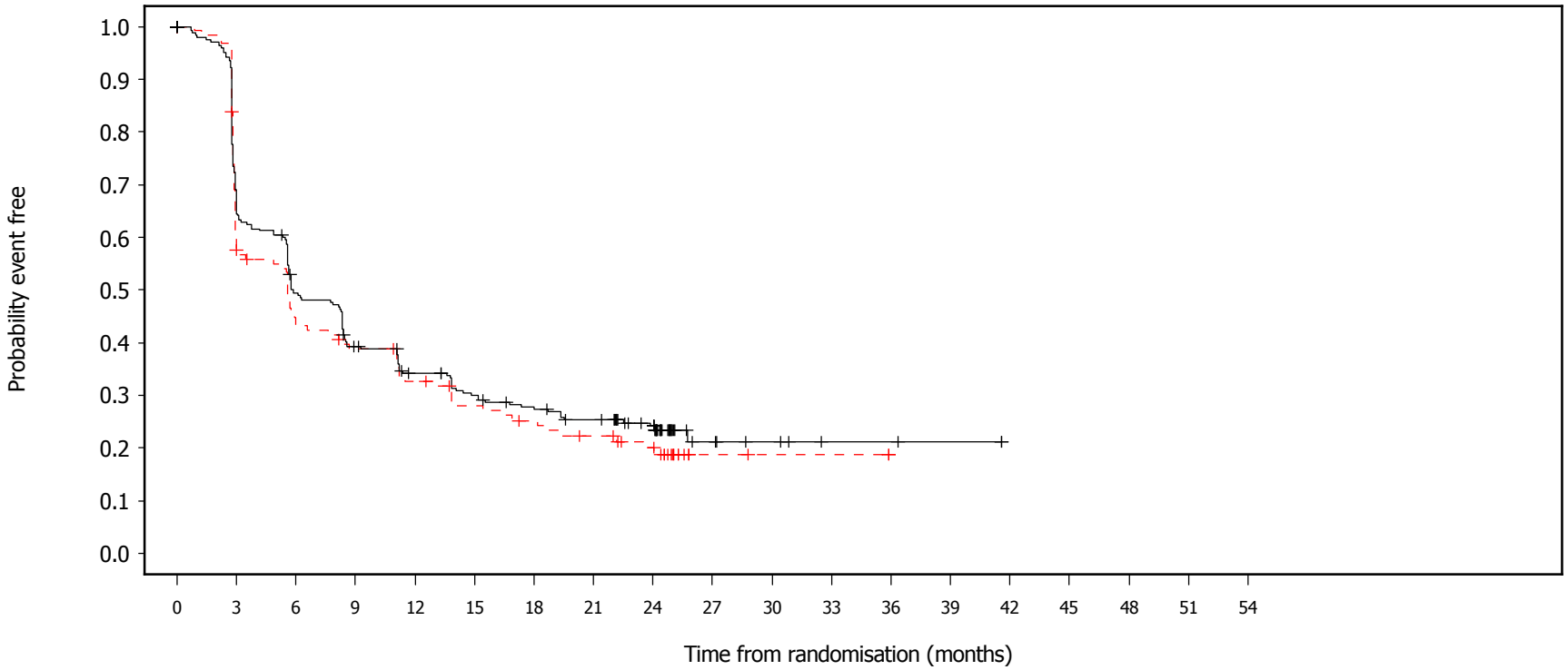


Number of patients at risk:

255	152	117	100	81	74	66	55	39	13	9	7	3	1	1	0	0	0	0	Olaparib + bevacizumab
132	108	95	83	68	63	55	42	31	9	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.14 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Pain time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

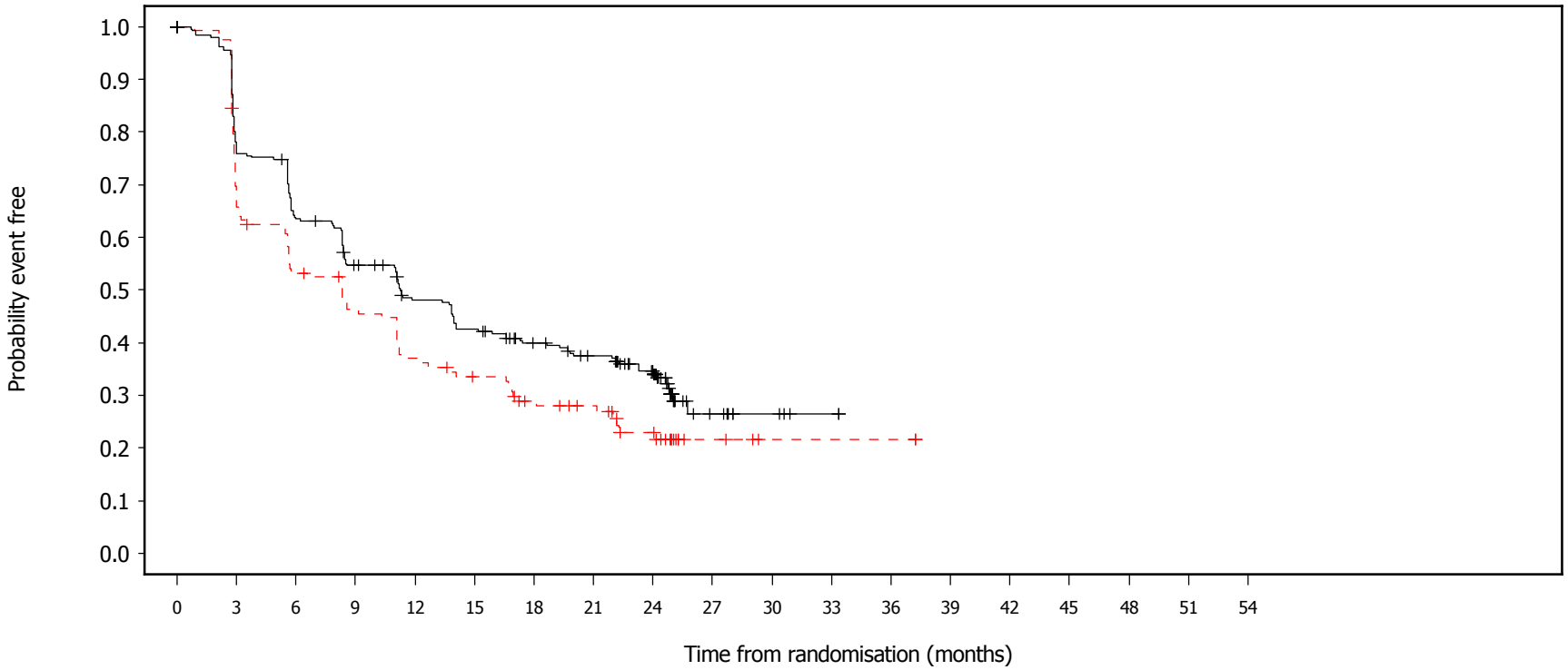


Number of patients at risk:

255	160	119	93	77	66	59	52	39	8	5	2	2	1	0	0	0	0	0	Olaparib + bevacizumab
132	71	52	45	37	30	26	22	17	2	1	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.2.2.15 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Insomnia time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	185	152	128	108	96	83	74	54	9	4	1	0	0	0	0	0	0	Olaparib + bevacizumab
132	84	64	54	43	37	29	25	17	4	1	1	1	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Table 2.2.3.1 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Global QoL/health status time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	49 (53.3)	20.0 (13.6, NE)	48	28 (58.3)	14.0 (5.6,22.7)	0.72	0.46, 1.16	0.1747
NED/CR [IDS]	74	46 (62.2)	11.1 (6.5,16.6)	38	20 (52.6)	13.8 (5.5, NE)	1.17	0.70, 2.02	0.5567
NED/CR [Chemo]	40	23 (57.5)	19.7 (8.3, NE)	20	15 (75.0)	9.8 (3.5,22.3)	0.68	0.36, 1.34	0.2578
PR	49	28 (57.1)	15.3 (5.6,24.0)	26	18 (69.2)	14.0 (5.6,19.9)	0.75	0.42, 1.38	0.3464
Interaction p-value									0.4751
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	78 (52.0)	19.7 (14.0,25.5)	65	40 (61.5)	11.3 (8.3,21.4)	0.75	0.51, 1.11	0.1446
non-tBRCAm	105	68 (64.8)	11.4 (8.4,17.7)	67	41 (61.2)	13.9 (8.3,17.4)	0.94	0.64, 1.40	0.7568
Interaction p-value									0.4128
First line treatment outcome (eCRF)									
NED [PDS]	89	50 (56.2)	18.0 (11.0, NE)	47	28 (59.6)	13.8 (5.6,22.7)	0.77	0.49, 1.24	0.2767
NED/CR [IDS]	74	44 (59.5)	11.5 (6.5,22.1)	32	17 (53.1)	13.8 (5.6, NE)	1.04	0.61, 1.88	0.8796
NED/CR [Chemo]	39	19 (48.7)	22.1 (15.2, NE)	18	14 (77.8)	8.3 (3.0,17.2)	0.44	0.22, 0.90	0.0255*
PR	50	32 (64.0)	10.9 (4.9,23.6)	34	22 (64.7)	14.0 (8.3,23.5)	1.03	0.60, 1.80	0.9087
Interaction p-value									0.2199
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	76 (51.7)	20.3 (13.8,25.5)	67	40 (59.7)	11.3 (8.3,22.3)	0.77	0.52, 1.13	0.1773
non-tBRCAm	108	70 (64.8)	13.6 (8.4,16.7)	65	41 (63.1)	13.9 (8.3,17.2)	0.91	0.62, 1.35	0.6255
Interaction p-value									0.5368
Age group									
<65 years	185	109 (58.9)	15.2 (11.0,19.7)	98	56 (57.1)	16.2 (9.3,20.8)	0.97	0.70, 1.34	0.8427
>=65 years	70	37 (52.9)	22.1 (11.3, NE)	34	25 (73.5)	9.9 (5.5,15.4)	0.51	0.31, 0.86	0.0126*
Interaction p-value									0.0411*

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.1 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Global QoL/health status time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	105 (57.7)	16.6 (11.5,21.8)	90	54 (60.0)	11.5 (8.3,17.4)	0.80	0.58, 1.12	0.1990
IV	73	41 (56.2)	15.6 (8.4,25.0)	42	27 (64.3)	14.0 (8.3,21.4)	0.85	0.53, 1.40	0.5261
Interaction p-value									0.8411
Region									
Europe	245	141 (57.6)	16.6 (11.4,20.3)	126	77 (61.1)	13.8 (9.3,17.2)	0.83	0.63, 1.10	0.1954
Japan	10	5 (50.0)	24.0 (2.8,24.0)	6	4 (66.7)	10.1 (2.8, NE)	0.60	0.16, 2.42	0.4524
Interaction p-value									0.6370
ECOG performance status at Baseline									
(0) Normal activity	190	110 (57.9)	15.2 (11.1,19.7)	100	66 (66.0)	11.2 (5.8,16.4)	0.77	0.57, 1.05	0.1012
(1) Restricted activity	61	33 (54.1)	22.1 (11.4, NE)	31	15 (48.4)	18.6 (11.3, NE)	0.99	0.55, 1.88	0.9734
Interaction p-value									0.4725
Baseline CA-125 value									
<=ULN	228	125 (54.8)	19.0 (13.8,22.8)	118	73 (61.9)	13.9 (8.3,17.2)	0.74	0.56, 0.99	0.0440*
>ULN	27	21 (77.8)	5.9 (2.9,11.2)	14	8 (57.1)	11.3 (5.5, NE)	1.90	0.88, 4.58	0.1065
Interaction p-value									0.0253*
Histological grade									
High grade	255	146 (57.3)	16.6 (11.5,21.8)	132	81 (61.4)	13.8 (9.3,17.2)	0.82	0.63, 1.08	0.1557
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	95 (57.2)	15.2 (11.1,20.3)	80	45 (56.3)	14.0 (8.3,19.3)	0.88	0.62, 1.27	0.5001
Residue	79	45 (57.0)	21.8 (11.3,25.0)	44	29 (65.9)	12.6 (8.3,17.2)	0.76	0.48, 1.23	0.2577
Interaction p-value									0.6172

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.1 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Global QoL/health status time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	81 (55.5)	20.3 (15.3,25.0)	79	47 (59.5)	13.8 (8.3,19.3)	0.73	0.51, 1.06	0.0957
Interval	99	59 (59.6)	11.1 (6.1,16.6)	45	27 (60.0)	14.0 (5.6,23.5)	1.04	0.67, 1.67	0.8544
Interaction p-value									0.2306
Myriad tumour BRCA mutation status									
tBRCAm	158	81 (51.3)	21.8 (13.8, NE)	77	45 (58.4)	11.3 (8.3,21.4)	0.76	0.53, 1.10	0.1390
Non-tBRCAm	97	65 (67.0)	11.4 (8.4,17.7)	55	36 (65.5)	13.9 (8.3,17.2)	0.93	0.62, 1.41	0.7284
Interaction p-value									0.4575
Status somatic BRCA mutations									
sBRCAm	22	9 (40.9)	25.5 (3.0, NE)	7	3 (42.9)	NE (NE, NE)	0.81	0.24, 3.64	0.7526
gBRCAm	66	37 (56.1)	13.8 (5.7, NE)	31	17 (54.8)	19.3 (8.3, NE)	1.10	0.63, 2.01	0.7389
Non-BRCAm	41	26 (63.4)	16.6 (8.3,22.1)	22	16 (72.7)	11.5 (3.5,16.6)	0.72	0.39, 1.38	0.3146
Interaction p-value									0.6127

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.2 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Physical time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	41 (44.6)	52.5 (13.8,52.5)	48	30 (62.5)	11.5 (6.2,22.4)	0.57	0.36, 0.92	0.0230*
NED/CR [IDS]	74	37 (50.0)	20.0 (8.5, NE)	38	20 (52.6)	18.9 (8.5, NE)	0.98	0.58, 1.72	0.9444
NED/CR [Chemo]	40	24 (60.0)	11.3 (5.5,22.1)	20	9 (45.0)	NE (NE, NE)	1.80	0.87, 4.10	0.1170
PR	49	23 (46.9)	19.4 (11.9, NE)	26	15 (57.7)	19.9 (5.6,28.0)	0.67	0.35, 1.32	0.2432
Interaction p-value									0.0595
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	76 (50.7)	19.4 (11.5, NE)	65	37 (56.9)	14.2 (11.2,24.9)	0.86	0.58, 1.28	0.4449
non-tBRCAm	105	49 (46.7)	22.3 (13.8,52.5)	67	37 (55.2)	18.7 (8.3,28.0)	0.78	0.51, 1.21	0.2641
Interaction p-value									0.7581
First line treatment outcome (eCRF)									
NED [PDS]	89	40 (44.9)	52.5 (13.8,52.5)	47	30 (63.8)	11.5 (5.7,22.4)	0.56	0.35, 0.90	0.0177*
NED/CR [IDS]	74	35 (47.3)	23.2 (8.6, NE)	32	18 (56.3)	17.0 (6.1, NE)	0.84	0.48, 1.52	0.5532
NED/CR [Chemo]	39	25 (64.1)	11.2 (4.5,16.7)	18	8 (44.4)	19.9 (5.7, NE)	1.87	0.88, 4.44	0.1058
PR	50	23 (46.0)	22.3 (11.0, NE)	34	18 (52.9)	21.7 (11.3, NE)	0.82	0.44, 1.53	0.5183
Interaction p-value									0.0670
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	75 (51.0)	17.3 (11.3, NE)	67	38 (56.7)	15.4 (11.2,23.5)	0.87	0.59, 1.29	0.4790
non-tBRCAm	108	50 (46.3)	22.3 (13.8,52.5)	65	36 (55.4)	18.9 (8.1,28.0)	0.77	0.50, 1.19	0.2310
Interaction p-value									0.6781
Age group									
<65 years	185	89 (48.1)	20.0 (13.8, NE)	98	55 (56.1)	16.4 (11.5,27.8)	0.84	0.60, 1.18	0.3016
>=65 years	70	36 (51.4)	19.4 (11.3,52.5)	34	19 (55.9)	15.4 (6.1,22.2)	0.78	0.45, 1.39	0.3869
Interaction p-value									0.8299

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.2 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Physical time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	91 (50.0)	19.4 (13.8,52.5)	90	51 (56.7)	14.0 (11.1,22.2)	0.80	0.57, 1.14	0.2089
IV	73	34 (46.6)	26.3 (7.9, NE)	42	23 (54.8)	21.7 (11.2,30.7)	0.87	0.52, 1.50	0.6163
Interaction p-value									0.7873
Region									
Europe	245	123 (50.2)	16.7 (13.8,52.5)	126	72 (57.1)	15.4 (11.3,21.7)	0.82	0.61, 1.10	0.1791
Japan	10	2 (20.0)	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	0.67	0.08, 5.61	0.6931
Interaction p-value									0.8477
ECOG performance status at Baseline									
(0) Normal activity	190	97 (51.1)	16.6 (13.8,52.5)	100	57 (57.0)	16.8 (11.1,24.9)	0.88	0.64, 1.23	0.4528
(1) Restricted activity	61	26 (42.6)	26.3 (13.8, NE)	31	17 (54.8)	15.4 (11.2, NE)	0.67	0.37, 1.26	0.2056
Interaction p-value									0.4389
Baseline CA-125 value									
<=ULN	228	109 (47.8)	23.2 (14.0,52.5)	118	67 (56.8)	16.2 (11.5,23.5)	0.77	0.57, 1.05	0.0952
>ULN	27	16 (59.3)	9.0 (5.6,20.0)	14	7 (50.0)	21.2 (9.3, NE)	1.48	0.63, 3.86	0.3763
Interaction p-value									0.1607
Histological grade									
High grade	255	125 (49.0)	20.0 (13.9,52.5)	132	74 (56.1)	16.4 (11.5,22.4)	0.82	0.62, 1.10	0.1913
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	77 (46.4)	26.3 (14.2,52.5)	80	48 (60.0)	13.8 (8.5,21.2)	0.67	0.47, 0.97	0.0360*
Residue	79	43 (54.4)	14.1 (8.5, NE)	44	21 (47.7)	24.9 (13.9, NE)	1.27	0.76, 2.19	0.3597
Interaction p-value									0.0478*

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.2 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Physical time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	69 (47.3)	22.3 (13.9,52.5)	79	44 (55.7)	13.9 (11.2,27.8)	0.73	0.50, 1.07	0.1046
Interval	99	51 (51.5)	17.3 (8.5, NE)	45	25 (55.6)	21.2 (9.3, NE)	1.05	0.66, 1.72	0.8480
Interaction p-value									0.2393
Myriad tumour BRCA mutation status									
tBRCAm	158	78 (49.4)	19.4 (13.7, NE)	77	42 (54.5)	16.8 (11.3,27.8)	0.85	0.59, 1.25	0.4114
Non-tBRCAm	97	47 (48.5)	22.1 (11.9,52.5)	55	32 (58.2)	16.4 (8.1,28.0)	0.78	0.50, 1.24	0.2957
Interaction p-value									0.7782
Status somatic BRCA mutations									
sBRCAm	22	5 (22.7)	NE (NE, NE)	7	2 (28.6)	NE (NE, NE)	0.63	0.14, 4.42	0.5984
gBRCAm	66	36 (54.5)	15.9 (8.5, NE)	31	17 (54.8)	16.8 (11.1, NE)	0.98	0.56, 1.79	0.9503
Non-BRCAm	41	18 (43.9)	52.5 (14.2,52.5)	22	9 (40.9)	NE (NE, NE)	1.04	0.47, 2.44	0.9246
Interaction p-value									0.8724

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.3 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Role time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	58 (63.0)	11.1 (5.8,18.0)	48	29 (60.4)	11.3 (3.2,24.1)	0.95	0.61, 1.50	0.8191
NED/CR [IDS]	74	51 (68.9)	5.6 (3.0,11.1)	38	20 (52.6)	9.6 (8.3, NE)	1.70	1.03, 2.92	0.0374*
NED/CR [Chemo]	40	23 (57.5)	8.5 (3.3, NE)	20	14 (70.0)	4.6 (2.9,13.8)	0.76	0.39, 1.51	0.4181
PR	49	35 (71.4)	8.5 (4.9,13.8)	26	19 (73.1)	11.1 (2.9,19.9)	0.88	0.51, 1.57	0.6567
Interaction p-value									0.1710
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	92 (61.3)	8.9 (5.8,16.8)	65	37 (56.9)	11.9 (5.7,27.7)	1.12	0.77, 1.66	0.5529
non-tBRCAm	105	75 (71.4)	8.3 (4.8,11.1)	67	45 (67.2)	8.3 (5.6,14.9)	1.06	0.74, 1.55	0.7386
Interaction p-value									0.8488
First line treatment outcome (eCRF)									
NED [PDS]	89	54 (60.7)	11.1 (8.1,24.4)	47	28 (59.6)	8.5 (3.0,24.1)	0.88	0.56, 1.41	0.5802
NED/CR [IDS]	74	52 (70.3)	5.5 (2.9,11.1)	32	17 (53.1)	9.6 (8.3, NE)	1.79	1.06, 3.19	0.0297*
NED/CR [Chemo]	39	25 (64.1)	8.2 (3.0,15.2)	18	13 (72.2)	5.7 (2.9,13.8)	0.86	0.45, 1.74	0.6711
PR	50	35 (70.0)	8.9 (5.7,15.4)	34	23 (67.6)	11.1 (3.0,22.1)	0.97	0.58, 1.66	0.9064
Interaction p-value									0.1821
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	89 (60.5)	8.9 (5.8,17.3)	67	38 (56.7)	11.3 (5.7,27.7)	1.08	0.75, 1.60	0.6790
non-tBRCAm	108	78 (72.2)	8.3 (4.8,11.1)	65	44 (67.7)	8.3 (5.6,14.9)	1.09	0.76, 1.60	0.6343
Interaction p-value									0.9713
Age group									
<65 years	185	121 (65.4)	8.5 (6.2,11.3)	98	61 (62.2)	8.5 (5.6,14.9)	1.03	0.76, 1.41	0.8594
>=65 years	70	46 (65.7)	5.8 (3.3,11.9)	34	21 (61.8)	13.8 (5.6,20.2)	1.17	0.71, 2.00	0.5526
Interaction p-value									0.6768

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.3 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Role time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	117 (64.3)	8.4 (5.7,11.2)	90	56 (62.2)	11.1 (5.7,19.9)	1.08	0.79, 1.50	0.6282
IV	73	50 (68.5)	10.4 (5.4,14.4)	42	26 (61.9)	8.3 (5.5,22.1)	1.02	0.64, 1.67	0.9201
Interaction p-value									0.8527
Region									
Europe	245	163 (66.5)	8.3 (5.8,11.1)	126	79 (62.7)	9.3 (5.7,16.2)	1.07	0.82, 1.40	0.6370
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	0.84	0.18, 4.25	0.8163
Interaction p-value									0.7558
ECOG performance status at Baseline									
(0) Normal activity	190	129 (67.9)	8.4 (5.8,11.1)	100	64 (64.0)	8.5 (5.6,16.4)	1.09	0.81, 1.48	0.5740
(1) Restricted activity	61	36 (59.0)	7.2 (3.0,25.3)	31	18 (58.1)	9.6 (5.5,27.7)	1.04	0.60, 1.88	0.8851
Interaction p-value									0.8931
Baseline CA-125 value									
<=ULN	228	149 (65.4)	8.4 (5.8,11.2)	118	73 (61.9)	8.5 (5.7,18.7)	1.07	0.81, 1.42	0.6454
>ULN	27	18 (66.7)	10.4 (3.5,19.9)	14	9 (64.3)	9.6 (2.8, NE)	1.03	0.47, 2.40	0.9481
Interaction p-value									0.9282
Histological grade									
High grade	255	167 (65.5)	8.4 (5.8,11.2)	132	82 (62.1)	9.3 (6.1,16.2)	1.06	0.82, 1.39	0.6480
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	107 (64.5)	8.3 (5.6,11.3)	80	46 (57.5)	9.3 (8.1,21.9)	1.17	0.83, 1.66	0.3804
Residue	79	53 (67.1)	8.5 (5.8,13.8)	44	30 (68.2)	7.9 (3.5,19.9)	0.92	0.59, 1.46	0.7197
Interaction p-value									0.4156

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.3 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Role time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	92 (63.0)	11.1 (8.2,14.0)	79	50 (63.3)	8.2 (3.5,16.4)	0.86	0.61, 1.22	0.4003
Interval	99	68 (68.7)	5.7 (3.1,11.1)	45	26 (57.8)	9.6 (8.3, NE)	1.52	0.98, 2.42	0.0636
Interaction p-value									0.0490*
Myriad tumour BRCA mutation status									
tBRCAm	158	100 (63.3)	8.5 (5.8,13.1)	77	45 (58.4)	11.1 (5.6,22.1)	1.06	0.75, 1.53	0.7257
Non-tBRCAm	97	67 (69.1)	8.3 (4.8,11.2)	55	37 (67.3)	8.3 (5.6,18.7)	1.08	0.73, 1.64	0.6910
Interaction p-value									0.9458
Status somatic BRCA mutations									
sBRCAm	22	11 (50.0)	11.1 (3.0, NE)	7	2 (28.6)	NE (NE, NE)	1.90	0.51, 12.26	0.3718
gBRCAm	66	46 (69.7)	5.6 (3.0,12.5)	31	16 (51.6)	23.5 (8.3, NE)	1.70	0.98, 3.10	0.0583
Non-BRCAm	41	27 (65.9)	9.7 (3.0,19.9)	22	16 (72.7)	8.2 (3.5,21.9)	0.94	0.51, 1.78	0.8444
Interaction p-value									0.3462

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.4 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Cognitive time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	63 (68.5)	11.1 (6.3,14.0)	48	31 (64.6)	8.5 (5.6,16.4)	0.91	0.60, 1.42	0.6812
NED/CR [IDS]	74	47 (63.5)	14.8 (8.3,19.4)	38	21 (55.3)	16.3 (5.6, NE)	1.07	0.65, 1.83	0.7821
NED/CR [Chemo]	40	28 (70.0)	15.2 (8.3,19.4)	20	17 (85.0)	5.6 (2.9, 8.5)	0.52	0.29, 0.97	0.0406*
PR	49	36 (73.5)	8.4 (3.7,11.3)	26	16 (61.5)	12.7 (5.5,15.4)	1.12	0.63, 2.08	0.6976
Interaction p-value									0.2601
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	104 (69.3)	11.3 (8.7,16.8)	65	44 (67.7)	8.3 (5.7,13.6)	0.84	0.59, 1.20	0.3237
non-tBRCAm	105	70 (66.7)	8.4 (5.8,14.8)	67	41 (61.2)	11.1 (5.7,14.6)	1.01	0.69, 1.50	0.9397
Interaction p-value									0.4651
First line treatment outcome (eCRF)									
NED [PDS]	89	59 (66.3)	11.1 (6.2,14.0)	47	30 (63.8)	8.7 (5.8,16.4)	0.92	0.60, 1.45	0.7268
NED/CR [IDS]	74	48 (64.9)	11.5 (8.3,17.3)	32	19 (59.4)	14.1 (5.6,22.2)	1.03	0.62, 1.80	0.9067
NED/CR [Chemo]	39	27 (69.2)	15.2 (8.3,22.1)	18	13 (72.2)	8.2 (5.5,13.1)	0.67	0.35, 1.34	0.2472
PR	50	37 (74.0)	8.5 (4.9,13.8)	34	22 (64.7)	8.6 (3.0,15.4)	1.03	0.61, 1.77	0.9151
Interaction p-value									0.7522
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	102 (69.4)	11.3 (8.7,16.8)	67	45 (67.2)	8.3 (5.7,13.6)	0.83	0.59, 1.20	0.3161
non-tBRCAm	108	72 (66.7)	8.4 (5.8,14.8)	65	40 (61.5)	11.1 (5.6,16.4)	1.02	0.70, 1.51	0.9299
Interaction p-value									0.4546
Age group									
<65 years	185	127 (68.6)	11.2 (8.5,14.8)	98	65 (66.3)	8.5 (5.7,13.1)	0.89	0.67, 1.21	0.4654
>=65 years	70	47 (67.1)	10.3 (5.8,16.6)	34	20 (58.8)	12.7 (5.7,21.4)	0.97	0.58, 1.67	0.9001
Interaction p-value									0.7981

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.4 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Cognitive time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	128 (70.3)	11.0 (8.3,13.8)	90	56 (62.2)	8.7 (5.7,14.4)	1.04	0.76, 1.43	0.8185
IV	73	46 (63.0)	14.8 (8.4,22.3)	42	29 (69.0)	8.3 (5.6,15.4)	0.67	0.42, 1.08	0.1014
Interaction p-value									0.1331
Region									
Europe	245	170 (69.4)	11.1 (8.4,13.8)	126	82 (65.1)	8.5 (5.8,12.7)	0.91	0.70, 1.18	0.4654
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	0.78	0.17, 3.94	0.7407
Interaction p-value									0.8416
ECOG performance status at Baseline									
(0) Normal activity	190	125 (65.8)	11.4 (8.5,16.3)	100	67 (67.0)	8.3 (5.7,12.5)	0.81	0.60, 1.09	0.1579
(1) Restricted activity	61	46 (75.4)	8.6 (5.6,14.0)	31	18 (58.1)	14.1 (5.6,21.4)	1.31	0.77, 2.31	0.3266
Interaction p-value									0.1194
Baseline CA-125 value									
<=ULN	228	155 (68.0)	11.2 (8.5,14.3)	118	77 (65.3)	8.5 (5.9,13.1)	0.88	0.67, 1.16	0.3674
>ULN	27	19 (70.4)	6.1 (3.0,16.6)	14	8 (57.1)	21.2 (2.8, NE)	1.23	0.56, 2.99	0.6143
Interaction p-value									0.4413
Histological grade									
High grade	255	174 (68.2)	11.1 (8.5,14.0)	132	85 (64.4)	8.5 (5.9,13.6)	0.91	0.71, 1.19	0.4856
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	110 (66.3)	11.1 (8.3,15.9)	80	50 (62.5)	8.7 (5.8,16.4)	0.96	0.69, 1.34	0.7879
Residue	79	56 (70.9)	12.1 (8.5,16.6)	44	29 (65.9)	8.3 (5.6,13.1)	0.85	0.55, 1.35	0.4796
Interaction p-value									0.6809

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.4 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Cognitive time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	100 (68.5)	11.1 (8.3,14.0)	79	52 (65.8)	8.5 (5.6,12.5)	0.86	0.62, 1.21	0.3738
Interval	99	66 (66.7)	13.0 (8.3,16.8)	45	27 (60.0)	11.1 (5.7,21.2)	1.03	0.67, 1.64	0.8939
Interaction p-value									0.5177
Myriad tumour BRCA mutation status									
tBRCAm	158	110 (69.6)	11.2 (8.7,16.3)	77	50 (64.9)	8.3 (5.8,14.1)	0.86	0.62, 1.21	0.3790
Non-tBRCAm	97	64 (66.0)	8.6 (5.8,15.2)	55	35 (63.6)	11.1 (5.6,14.6)	1.00	0.66, 1.52	0.9839
Interaction p-value									0.5854
Status somatic BRCA mutations									
sBRCAm	22	16 (72.7)	8.5 (2.9,19.4)	7	4 (57.1)	9.5 (2.8, NE)	1.10	0.40, 3.88	0.8596
gBRCAm	66	43 (65.2)	16.8 (8.7,20.3)	31	20 (64.5)	8.7 (5.6,19.2)	0.80	0.48, 1.40	0.4260
Non-BRCAm	41	31 (75.6)	8.3 (5.6,16.6)	22	14 (63.6)	14.0 (5.6,22.2)	1.21	0.66, 2.35	0.5436
Interaction p-value									0.6004

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.5 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Emotional time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	53 (57.6)	13.9 (8.7,24.2)	48	30 (62.5)	11.3 (5.7,27.8)	0.86	0.55, 1.36	0.5120
NED/CR [IDS]	74	50 (67.6)	8.3 (5.6,15.6)	38	27 (71.1)	8.7 (5.9,13.9)	0.92	0.58, 1.50	0.7442
NED/CR [Chemo]	40	23 (57.5)	19.7 (8.5,25.0)	20	11 (55.0)	22.0 (8.3, NE)	1.13	0.56, 2.41	0.7347
PR	49	32 (65.3)	12.1 (5.7,22.1)	26	17 (65.4)	9.0 (2.9,13.9)	0.72	0.41, 1.33	0.2881
Interaction p-value									0.8112
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	92 (61.3)	15.6 (10.6,22.1)	65	40 (61.5)	11.2 (6.9,22.2)	0.93	0.64, 1.36	0.6835
non-tBRCAm	105	66 (62.9)	11.1 (5.7,16.7)	67	45 (67.2)	11.1 (8.3,13.9)	0.90	0.61, 1.32	0.5703
Interaction p-value									0.9043
First line treatment outcome (eCRF)									
NED [PDS]	89	54 (60.7)	13.9 (8.7,22.1)	47	29 (61.7)	11.2 (5.7,27.8)	0.94	0.60, 1.50	0.7918
NED/CR [IDS]	74	48 (64.9)	10.6 (5.6,19.8)	32	23 (71.9)	11.0 (6.6,14.1)	0.87	0.54, 1.46	0.5876
NED/CR [Chemo]	39	22 (56.4)	19.6 (8.5,25.0)	18	10 (55.6)	22.0 (3.5, NE)	0.98	0.48, 2.17	0.9595
PR	50	33 (66.0)	9.0 (5.7,19.7)	34	22 (64.7)	11.1 (5.6,13.9)	0.86	0.51, 1.50	0.5942
Interaction p-value									0.9885
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	91 (61.9)	14.0 (8.5,20.7)	67	41 (61.2)	11.2 (8.3,21.4)	0.94	0.66, 1.38	0.7560
non-tBRCAm	108	67 (62.0)	11.2 (5.8,19.7)	65	44 (67.7)	10.2 (8.3,13.9)	0.86	0.59, 1.27	0.4427
Interaction p-value									0.7358
Age group									
<65 years	185	122 (65.9)	10.0 (5.9,14.0)	98	65 (66.3)	10.2 (6.9,11.4)	0.96	0.71, 1.30	0.7748
>=65 years	70	36 (51.4)	22.4 (12.1, NE)	34	20 (58.8)	14.0 (9.0,26.5)	0.75	0.44, 1.33	0.3183
Interaction p-value									0.4570

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.5 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Emotional time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	115 (63.2)	13.8 (8.7,19.4)	90	56 (62.2)	11.1 (8.3,14.0)	0.96	0.70, 1.33	0.7829
IV	73	43 (58.9)	12.1 (6.3,24.1)	42	29 (69.0)	11.0 (6.9,13.9)	0.77	0.48, 1.24	0.2787
Interaction p-value									0.4544
Region									
Europe	245	154 (62.9)	13.1 (8.5,18.0)	126	82 (65.1)	11.1 (8.3,12.5)	0.87	0.67, 1.15	0.3215
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	24.0 (13.8, NE)	1.09	0.24, 5.51	0.9146
Interaction p-value									0.7774
ECOG performance status at Baseline									
(0) Normal activity	190	118 (62.1)	13.1 (8.4,18.0)	100	63 (63.0)	11.2 (8.3,13.9)	0.96	0.71, 1.31	0.7748
(1) Restricted activity	61	37 (60.7)	13.8 (8.4,24.0)	31	22 (71.0)	8.4 (6.9,14.1)	0.71	0.42, 1.22	0.2053
Interaction p-value									0.3345
Baseline CA-125 value									
<=ULN	228	142 (62.3)	13.8 (10.0,19.3)	118	76 (64.4)	11.1 (8.4,13.9)	0.90	0.68, 1.19	0.4456
>ULN	27	16 (59.3)	9.0 (5.7,29.3)	14	9 (64.3)	6.9 (5.6,21.4)	0.87	0.39, 2.05	0.7314
Interaction p-value									0.9369
Histological grade									
High grade	255	158 (62.0)	13.8 (9.0,19.3)	132	85 (64.4)	11.1 (8.3,13.8)	0.89	0.69, 1.17	0.4051
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	103 (62.0)	11.4 (7.9,19.8)	80	53 (66.3)	11.1 (6.9,13.9)	0.90	0.65, 1.26	0.5355
Residue	79	49 (62.0)	16.7 (8.5,22.1)	44	26 (59.1)	10.0 (5.6,23.0)	0.89	0.56, 1.46	0.6446
Interaction p-value									0.9808

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.5 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Emotional time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	87 (59.6)	16.9 (11.4,22.1)	79	47 (59.5)	11.2 (8.3,23.0)	0.89	0.62, 1.27	0.5061
Interval	99	65 (65.7)	8.4 (5.7,15.6)	45	32 (71.1)	8.7 (5.9,13.9)	0.90	0.60, 1.40	0.6435
Interaction p-value									0.9421
Myriad tumour BRCA mutation status									
tBRCAm	158	98 (62.0)	13.9 (10.6,19.8)	77	47 (61.0)	11.2 (8.3,21.4)	0.94	0.67, 1.34	0.7195
Non-tBRCAm	97	60 (61.9)	11.1 (5.7,20.4)	55	38 (69.1)	9.0 (6.2,13.8)	0.85	0.57, 1.28	0.4251
Interaction p-value									0.7069
Status somatic BRCA mutations									
sBRCAm	22	12 (54.5)	11.1 (5.6, NE)	7	5 (71.4)	5.6 (2.8, NE)	0.53	0.19, 1.67	0.2569
gBRCAm	66	42 (63.6)	13.8 (6.0,22.1)	31	18 (58.1)	11.1 (5.7,35.0)	1.05	0.61, 1.88	0.8547
Non-BRCAm	41	23 (56.1)	19.7 (5.7, NE)	22	15 (68.2)	11.1 (8.3,13.9)	0.77	0.41, 1.51	0.4382
Interaction p-value									0.4989

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.6 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Social time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	54 (58.7)	13.9 (8.3,23.1)	48	34 (70.8)	10.4 (6.2,14.2)	0.70	0.46, 1.08	0.1088
NED/CR [IDS]	74	47 (63.5)	11.1 (5.7,19.8)	38	21 (55.3)	13.9 (5.9,29.3)	1.27	0.77, 2.16	0.3596
NED/CR [Chemo]	40	19 (47.5)	24.0 (8.6, NE)	20	13 (65.0)	14.3 (3.5, NE)	0.72	0.36, 1.49	0.3631
PR	49	28 (57.1)	8.5 (5.3, NE)	26	13 (50.0)	13.9 (2.9, NE)	0.94	0.50, 1.88	0.8546
Interaction p-value									0.3281
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	86 (57.3)	15.9 (8.6,23.1)	65	37 (56.9)	14.0 (11.1,24.1)	1.01	0.69, 1.50	0.9627
non-tBRCAm	105	62 (59.0)	11.2 (5.8,19.8)	67	44 (65.7)	9.9 (5.7,14.6)	0.78	0.53, 1.16	0.2221
Interaction p-value									0.3641
First line treatment outcome (eCRF)									
NED [PDS]	89	53 (59.6)	13.5 (8.3,23.1)	47	33 (70.2)	10.4 (6.2,16.4)	0.73	0.47, 1.14	0.1589
NED/CR [IDS]	74	46 (62.2)	11.1 (5.6,19.9)	32	19 (59.4)	11.5 (5.8,29.3)	1.10	0.66, 1.92	0.7216
NED/CR [Chemo]	39	19 (48.7)	23.7 (8.6, NE)	18	10 (55.6)	16.7 (8.3, NE)	0.86	0.41, 1.93	0.7066
PR	50	28 (56.0)	8.5 (5.5, NE)	34	18 (52.9)	13.9 (3.0, NE)	0.99	0.55, 1.82	0.9670
Interaction p-value									0.6684
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	83 (56.5)	15.9 (8.5,23.2)	67	38 (56.7)	14.0 (9.3,24.1)	0.98	0.67, 1.45	0.9046
non-tBRCAm	108	65 (60.2)	11.3 (5.8,19.6)	65	43 (66.2)	9.9 (5.7,15.5)	0.81	0.55, 1.19	0.2803
Interaction p-value									0.4913
Age group									
<65 years	185	105 (56.8)	13.6 (8.4,19.6)	98	60 (61.2)	13.9 (8.5,19.4)	0.92	0.67, 1.27	0.5964
>=65 years	70	43 (61.4)	11.3 (6.3,23.2)	34	21 (61.8)	9.9 (5.8,15.5)	0.77	0.46, 1.33	0.3483
Interaction p-value									0.5912

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.6 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Social time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	108 (59.3)	11.3 (8.4,18.0)	90	54 (60.0)	11.5 (8.5,20.0)	0.95	0.69, 1.32	0.7495
IV	73	40 (54.8)	16.0 (7.9, NE)	42	27 (64.3)	11.3 (5.8,19.4)	0.74	0.46, 1.22	0.2392
Interaction p-value									0.4186
Region									
Europe	245	145 (59.2)	11.4 (8.5,18.0)	126	79 (62.7)	11.2 (8.5,15.5)	0.87	0.66, 1.14	0.3071
Japan	10	3 (30.0)	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	1.02	0.17, 7.77	0.9800
Interaction p-value									0.8557
ECOG performance status at Baseline									
(0) Normal activity	190	105 (55.3)	16.0 (11.2,23.1)	100	67 (67.0)	11.2 (8.3,14.6)	0.72	0.53, 0.99	0.0421*
(1) Restricted activity	61	41 (67.2)	5.7 (3.0,11.9)	31	14 (45.2)	19.4 (6.1, NE)	1.74	0.97, 3.31	0.0628
Interaction p-value									0.0088*
Baseline CA-125 value									
<=ULN	228	129 (56.6)	14.1 (11.1,20.7)	118	72 (61.0)	13.8 (8.7,16.7)	0.86	0.65, 1.16	0.3268
>ULN	27	19 (70.4)	5.7 (3.5,16.6)	14	9 (64.3)	5.6 (2.8, NE)	1.00	0.46, 2.32	0.9984
Interaction p-value									0.7354
Histological grade									
High grade	255	148 (58.0)	13.5 (8.6,19.6)	132	81 (61.4)	11.3 (8.5,16.4)	0.88	0.67, 1.16	0.3632
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	101 (60.8)	13.5 (8.3,17.3)	80	53 (66.3)	10.4 (8.3,14.2)	0.85	0.61, 1.19	0.3403
Residue	79	41 (51.9)	19.6 (8.4, NE)	44	24 (54.5)	16.6 (11.1, NE)	0.92	0.56, 1.54	0.7403
Interaction p-value									0.7998

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.6 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Social time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	82 (56.2)	16.0 (10.6,24.0)	79	51 (64.6)	11.3 (8.5,16.6)	0.76	0.54, 1.08	0.1257
Interval	99	60 (60.6)	11.1 (5.8,19.9)	45	26 (57.8)	13.9 (6.1,29.3)	1.12	0.71, 1.80	0.6296
Interaction p-value									0.1835
Myriad tumour BRCA mutation status									
tBRCAm	158	89 (56.3)	15.9 (10.6,23.2)	77	44 (57.1)	14.0 (9.3,24.1)	0.93	0.65, 1.35	0.6942
Non-tBRCAm	97	59 (60.8)	11.1 (5.6,16.6)	55	37 (67.3)	9.9 (5.7,14.6)	0.83	0.56, 1.27	0.3941
Interaction p-value									0.6998
Status somatic BRCA mutations									
sBRCAm	22	8 (36.4)	NE (NE, NE)	7	1 (14.3)	NE (NE, NE)	2.94	0.54, 54.64	0.2436
gBRCAm	66	44 (66.7)	8.5 (4.2,14.1)	31	15 (48.4)	24.1 (11.3, NE)	1.79	1.02, 3.33	0.0425*
Non-BRCAm	41	26 (63.4)	11.9 (5.4,41.9)	22	16 (72.7)	11.0 (5.6,15.5)	0.70	0.38, 1.35	0.2807
Interaction p-value									0.0693

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.7 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Loss of appetite time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	44 (47.8)	25.5 (11.2,49.3)	48	23 (47.9)	25.6 (16.4,35.0)	1.01	0.62, 1.71	0.9650
NED/CR [IDS]	74	50 (67.6)	9.7 (6.2,19.3)	38	17 (44.7)	29.8 (13.9, NE)	2.08	1.23, 3.72	0.0059*
NED/CR [Chemo]	40	24 (60.0)	11.3 (8.1,24.2)	20	10 (50.0)	22.0 (8.7, NE)	1.51	0.74, 3.32	0.2585
PR	49	28 (57.1)	12.1 (5.8,25.7)	26	15 (57.7)	14.0 (6.4,21.7)	0.97	0.52, 1.87	0.9265
Interaction p-value									0.1822
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	86 (57.3)	13.6 (10.9,23.1)	65	30 (46.2)	25.6 (16.7,35.0)	1.50	1.003, 2.31	0.0484*
non-tBRCAm	105	60 (57.1)	13.8 (8.3,24.2)	67	35 (52.2)	17.4 (14.4,28.7)	1.18	0.78, 1.80	0.4476
Interaction p-value									0.4151
First line treatment outcome (eCRF)									
NED [PDS]	89	43 (48.3)	24.2 (11.3,49.3)	47	23 (48.9)	25.6 (16.4,35.0)	0.99	0.60, 1.68	0.9836
NED/CR [IDS]	74	52 (70.3)	8.3 (5.6,13.6)	32	14 (43.8)	29.8 (11.3,29.8)	2.39	1.36, 4.49	0.0019*
NED/CR [Chemo]	39	21 (53.8)	11.3 (8.2, NE)	18	7 (38.9)	NE (NE, NE)	1.67	0.74, 4.24	0.2214
PR	50	28 (56.0)	13.7 (5.8,25.7)	34	21 (61.8)	14.7 (8.3,21.7)	0.90	0.51, 1.60	0.7041
Interaction p-value									0.0571
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	84 (57.1)	13.6 (8.7,23.1)	67	30 (44.8)	25.6 (16.7,35.0)	1.53	1.02, 2.36	0.0395*
non-tBRCAm	108	62 (57.4)	13.8 (8.3,24.2)	65	35 (53.8)	17.4 (14.4,28.7)	1.15	0.76, 1.76	0.5118
Interaction p-value									0.3402
Age group									
<65 years	185	104 (56.2)	13.8 (11.0,22.1)	98	47 (48.0)	24.0 (16.7,28.7)	1.34	0.95, 1.90	0.0941
>=65 years	70	42 (60.0)	11.5 (7.9,24.2)	34	18 (52.9)	16.6 (12.7,29.8)	1.28	0.75, 2.29	0.3743
Interaction p-value									0.9004

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.7 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Loss of appetite time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	100 (54.9)	19.2 (11.1,24.2)	90	43 (47.8)	25.6 (16.7,35.0)	1.32	0.93, 1.90	0.1250
IV	73	46 (63.0)	11.2 (6.1,14.8)	42	22 (52.4)	19.7 (11.2,28.7)	1.36	0.83, 2.31	0.2245
Interaction p-value									0.9137
Region									
Europe	245	140 (57.1)	13.4 (11.0,21.7)	126	61 (48.4)	22.3 (16.4,29.8)	1.33	0.99, 1.82	0.0560
Japan	10	6 (60.0)	22.1 (2.8, NE)	6	4 (66.7)	23.0 (2.8,24.0)	1.15	0.33, 4.49	0.8293
Interaction p-value									0.8219
ECOG performance status at Baseline									
(0) Normal activity	190	106 (55.8)	13.6 (11.0,22.1)	100	48 (48.0)	25.6 (16.6,29.8)	1.38	0.99, 1.96	0.0591
(1) Restricted activity	61	36 (59.0)	12.8 (5.6,25.7)	31	17 (54.8)	16.7 (8.4, NE)	1.10	0.63, 2.01	0.7395
Interaction p-value									0.5129
Baseline CA-125 value									
<=ULN	228	129 (56.6)	13.7 (11.1,22.4)	118	59 (50.0)	22.3 (16.4,28.7)	1.26	0.93, 1.73	0.1390
>ULN	27	17 (63.0)	11.2 (5.6,22.1)	14	6 (42.9)	21.7 (9.3, NE)	2.03	0.84, 5.62	0.1185
Interaction p-value									0.3276
Histological grade									
High grade	255	146 (57.3)	13.6 (11.1,22.1)	132	65 (49.2)	22.3 (16.6,28.7)	1.32	0.99, 1.78	0.0571
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	97 (58.4)	13.6 (9.7,22.1)	80	37 (46.3)	25.6 (17.4,29.8)	1.49	1.03, 2.21	0.0333*
Residue	79	41 (51.9)	22.1 (10.9, NE)	44	21 (47.7)	21.7 (14.6, NE)	1.18	0.70, 2.03	0.5373
Interaction p-value									0.4773

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.7 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Loss of appetite time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	70 (47.9)	24.2 (15.2,49.3)	79	37 (46.8)	25.6 (17.4,35.0)	1.02	0.69, 1.53	0.9306
Interval	99	68 (68.7)	8.3 (5.7,11.5)	45	21 (46.7)	21.7 (14.6, NE)	2.17	1.36, 3.63	0.0010*
Interaction p-value									0.0172*
Myriad tumour BRCA mutation status									
tBRCAm	158	92 (58.2)	11.5 (8.7,22.4)	77	34 (44.2)	27.8 (19.7,35.0)	1.60	1.09, 2.40	0.0160*
Non-tBRCAm	97	54 (55.7)	15.2 (8.4,25.7)	55	31 (56.4)	16.4 (12.7,22.0)	1.02	0.66, 1.61	0.9283
Interaction p-value									0.1393
Status somatic BRCA mutations									
sBRCAm	22	12 (54.5)	11.0 (2.9, NE)	7	1 (14.3)	NE (NE, NE)	5.15	1.01, 93.99	0.0478*
gBRCAm	66	49 (74.2)	8.3 (4.6,11.3)	31	15 (48.4)	24.0 (11.3,35.0)	2.16	1.24, 3.99	0.0059*
Non-BRCAm	41	24 (58.5)	11.9 (4.8,49.3)	22	14 (63.6)	14.7 (8.7, NE)	1.03	0.54, 2.06	0.9239
Interaction p-value									0.1189

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.8 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Constipation time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	42 (45.7)	NE (NE, NE)	48	27 (56.3)	19.4 (11.3,27.8)	0.72	0.44, 1.18	0.1839
NED/CR [IDS]	74	46 (62.2)	19.8 (14.8,22.5)	38	19 (50.0)	19.7 (13.7, NE)	1.21	0.72, 2.11	0.4885
NED/CR [Chemo]	40	22 (55.0)	13.8 (8.3, NE)	20	9 (45.0)	NE (NE, NE)	1.61	0.76, 3.68	0.2177
PR	49	23 (46.9)	19.5 (14.0, NE)	26	14 (53.8)	19.9 (14.0,24.9)	0.84	0.44, 1.67	0.6017
Interaction p-value									0.2597
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	76 (50.7)	20.0 (16.3,25.3)	65	33 (50.8)	19.7 (13.7, NE)	0.99	0.67, 1.52	0.9781
non-tBRCAm	105	57 (54.3)	19.9 (13.9,24.2)	67	36 (53.7)	19.4 (13.9,24.9)	0.98	0.65, 1.50	0.9325
Interaction p-value									0.9670
First line treatment outcome (eCRF)									
NED [PDS]	89	41 (46.1)	NE (NE, NE)	47	26 (55.3)	19.4 (11.3,27.8)	0.78	0.48, 1.29	0.3285
NED/CR [IDS]	74	43 (58.1)	19.8 (15.9,24.0)	32	17 (53.1)	17.7 (10.8, NE)	0.97	0.57, 1.75	0.9223
NED/CR [Chemo]	39	20 (51.3)	19.2 (8.6, NE)	18	8 (44.4)	14.0 (6.0, NE)	1.22	0.56, 2.95	0.6276
PR	50	27 (54.0)	15.2 (13.8, NE)	34	18 (52.9)	22.2 (14.0, NE)	1.13	0.63, 2.08	0.6917
Interaction p-value									0.7305
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	74 (50.3)	20.0 (16.3,25.3)	67	33 (49.3)	19.7 (13.7, NE)	1.01	0.68, 1.54	0.9603
non-tBRCAm	108	59 (54.6)	19.8 (14.0,24.2)	65	36 (55.4)	19.4 (13.9,24.9)	0.96	0.64, 1.47	0.8536
Interaction p-value									0.8679
Age group									
<65 years	185	99 (53.5)	19.1 (14.8,22.5)	98	52 (53.1)	19.7 (13.8,24.9)	1.04	0.75, 1.47	0.8048
>=65 years	70	34 (48.6)	22.6 (16.6, NE)	34	17 (50.0)	18.7 (12.3, NE)	0.81	0.46, 1.49	0.4959
Interaction p-value									0.4748

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.8 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Constipation time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	103 (56.6)	17.3 (14.0,22.1)	90	47 (52.2)	19.4 (13.7,24.1)	1.06	0.75, 1.50	0.7580
IV	73	30 (41.1)	24.9 (19.4, NE)	42	22 (52.4)	19.7 (13.8, NE)	0.77	0.45, 1.35	0.3561
Interaction p-value									0.3431
Region									
Europe	245	128 (52.2)	19.8 (16.5,23.4)	126	65 (51.6)	19.7 (15.4,24.1)	1.01	0.75, 1.36	0.9692
Japan	10	5 (50.0)	25.1 (5.6,25.1)	6	4 (66.7)	8.3 (2.8, NE)	0.53	0.14, 2.15	0.3557
Interaction p-value									0.3624
ECOG performance status at Baseline									
(0) Normal activity	190	100 (52.6)	19.8 (16.3,22.5)	100	51 (51.0)	22.1 (14.0,27.8)	1.09	0.78, 1.54	0.6077
(1) Restricted activity	61	30 (49.2)	23.4 (13.8, NE)	31	18 (58.1)	15.4 (11.1,21.2)	0.63	0.35, 1.15	0.1261
Interaction p-value									0.1123
Baseline CA-125 value									
<=ULN	228	118 (51.8)	20.0 (16.5,24.2)	118	63 (53.4)	19.4 (13.9,22.3)	0.92	0.68, 1.25	0.5822
>ULN	27	15 (55.6)	19.9 (11.1,24.2)	14	6 (42.9)	22.1 (8.3, NE)	1.70	0.69, 4.78	0.2543
Interaction p-value									0.2087
Histological grade									
High grade	255	133 (52.2)	19.9 (16.6,23.4)	132	69 (52.3)	19.7 (14.0,22.3)	0.98	0.73, 1.31	0.8786
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	86 (51.8)	20.0 (16.8,25.1)	80	43 (53.8)	19.4 (13.7,22.3)	0.88	0.61, 1.28	0.5011
Residue	79	43 (54.4)	15.2 (13.8,24.2)	44	23 (52.3)	22.2 (13.9, NE)	1.19	0.72, 2.00	0.5005
Interaction p-value									0.3464

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.8 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Constipation time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	72 (49.3)	20.0 (14.5, NE)	79	41 (51.9)	19.7 (13.9,27.8)	0.96	0.66, 1.42	0.8331
Interval	99	57 (57.6)	19.8 (16.3,22.6)	45	25 (55.6)	19.4 (11.1, NE)	0.99	0.63, 1.61	0.9674
Interaction p-value									0.9190
Myriad tumour BRCA mutation status									
tBRCAm	158	80 (50.6)	19.5 (15.2,25.3)	77	37 (48.1)	21.2 (13.7, NE)	1.02	0.70, 1.53	0.9119
Non-tBRCAm	97	53 (54.6)	19.9 (14.5,24.2)	55	32 (58.2)	18.7 (13.8,24.1)	0.93	0.61, 1.46	0.7645
Interaction p-value									0.7658
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	15.2 (7.9, NE)	7	4 (57.1)	9.6 (2.8, NE)	0.73	0.24, 2.67	0.6046
gBRCAm	66	38 (57.6)	21.4 (14.5,25.1)	31	18 (58.1)	16.2 (11.3, NE)	0.91	0.53, 1.64	0.7568
Non-BRCAm	41	22 (53.7)	20.0 (13.8, NE)	22	14 (63.6)	13.8 (8.3, NE)	0.74	0.38, 1.48	0.3863
Interaction p-value									0.8729

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.9 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Diarrhoea time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	41 (44.6)	25.5 (16.8, NE)	48	22 (45.8)	22.3 (14.0,35.0)	0.94	0.57, 1.61	0.8216
NED/CR [IDS]	74	32 (43.2)	NE (NE, NE)	38	17 (44.7)	22.1 (13.8, NE)	0.93	0.52, 1.71	0.8080
NED/CR [Chemo]	40	21 (52.5)	22.1 (8.3, NE)	20	8 (40.0)	25.2 (17.1, NE)	1.72	0.79, 4.14	0.1744
PR	49	30 (61.2)	14.2 (11.3,21.6)	26	11 (42.3)	23.5 (8.3, NE)	1.36	0.70, 2.84	0.3765
Interaction p-value									0.5236
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	74 (49.3)	24.0 (16.8,27.4)	65	29 (44.6)	25.2 (20.0,35.0)	1.13	0.75, 1.77	0.5671
non-tBRCAm	105	50 (47.6)	21.6 (11.5, NE)	67	29 (43.3)	22.1 (14.0, NE)	1.11	0.71, 1.78	0.6406
Interaction p-value									0.9611
First line treatment outcome (eCRF)									
NED [PDS]	89	39 (43.8)	25.9 (16.6, NE)	47	20 (42.6)	35.0 (19.4,35.0)	1.02	0.60, 1.78	0.9448
NED/CR [IDS]	74	34 (45.9)	24.0 (13.0, NE)	32	15 (46.9)	22.1 (13.8, NE)	1.00	0.55, 1.89	0.9961
NED/CR [Chemo]	39	19 (48.7)	24.0 (8.7, NE)	18	7 (38.9)	25.2 (14.0, NE)	1.44	0.63, 3.69	0.3984
PR	50	30 (60.0)	15.3 (11.3,25.5)	34	15 (44.1)	23.5 (11.3, NE)	1.32	0.72, 2.53	0.3727
Interaction p-value									0.8377
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	72 (49.0)	24.0 (16.9,27.4)	67	29 (43.3)	25.2 (20.0,35.0)	1.14	0.75, 1.78	0.5531
non-tBRCAm	108	52 (48.1)	21.6 (11.4, NE)	65	29 (44.6)	22.1 (14.0, NE)	1.11	0.71, 1.77	0.6480
Interaction p-value									0.9406
Age group									
<65 years	185	86 (46.5)	25.3 (16.9,27.4)	98	40 (40.8)	35.0 (20.7,35.0)	1.15	0.80, 1.69	0.4605
>=65 years	70	38 (54.3)	16.6 (11.3,30.9)	34	18 (52.9)	19.9 (12.7,22.2)	1.03	0.59, 1.84	0.9316
Interaction p-value									0.7381

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.9 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Diarrhoea time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	91 (50.0)	23.3 (15.9,25.9)	90	40 (44.4)	22.2 (19.8,35.0)	1.16	0.81, 1.70	0.4296
IV	73	33 (45.2)	25.0 (11.4, NE)	42	18 (42.9)	25.2 (13.9, NE)	1.02	0.58, 1.85	0.9529
Interaction p-value									0.7081
Region									
Europe	245	119 (48.6)	24.0 (16.6,25.9)	126	54 (42.9)	25.2 (19.8,35.0)	1.13	0.82, 1.57	0.4584
Japan	10	5 (50.0)	16.6 (2.8, NE)	6	4 (66.7)	22.1 (5.5, NE)	1.01	0.27, 4.08	0.9893
Interaction p-value									0.8716
ECOG performance status at Baseline									
(0) Normal activity	190	88 (46.3)	24.0 (16.8, NE)	100	44 (44.0)	25.2 (20.7,35.0)	1.07	0.75, 1.55	0.7142
(1) Restricted activity	61	35 (57.4)	14.5 (8.7,25.7)	31	14 (45.2)	19.4 (12.3, NE)	1.32	0.72, 2.53	0.3741
Interaction p-value									0.5665
Baseline CA-125 value									
<=ULN	228	104 (45.6)	25.5 (21.6,30.9)	118	51 (43.2)	25.2 (19.8,35.0)	1.04	0.75, 1.46	0.8282
>ULN	27	20 (74.1)	11.1 (5.7,16.6)	14	7 (50.0)	20.7 (5.7, NE)	1.96	0.87, 5.01	0.1079
Interaction p-value									0.1626
Histological grade									
High grade	255	124 (48.6)	24.0 (16.6,25.9)	132	58 (43.9)	23.5 (19.9,35.0)	1.12	0.82, 1.54	0.4826
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	75 (45.2)	25.9 (16.8, NE)	80	36 (45.0)	22.2 (19.4,35.0)	1.00	0.68, 1.51	0.9954
Residue	79	43 (54.4)	21.9 (11.3,25.7)	44	17 (38.6)	25.2 (17.1, NE)	1.46	0.85, 2.64	0.1759
Interaction p-value									0.2785

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.9 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Diarrhoea time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	71 (48.6)	24.0 (16.6,25.9)	79	32 (40.5)	25.2 (20.0,35.0)	1.23	0.82, 1.89	0.3246
Interval	99	47 (47.5)	24.0 (13.4, NE)	45	21 (46.7)	22.2 (13.9, NE)	1.00	0.61, 1.71	NC
Interaction p-value									0.5412
Myriad tumour BRCA mutation status									
tBRCAm	158	74 (46.8)	25.3 (18.0,30.9)	77	32 (41.6)	25.2 (20.0,35.0)	1.08	0.72, 1.66	0.7041
Non-tBRCAm	97	50 (51.5)	15.3 (11.1, NE)	55	26 (47.3)	22.1 (14.0, NE)	1.20	0.76, 1.96	0.4420
Interaction p-value									0.7450
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	21.0 (5.6, NE)	7	2 (28.6)	NE (NE, NE)	2.18	0.57, 14.22	0.2788
gBRCAm	66	31 (47.0)	25.3 (14.5, NE)	31	13 (41.9)	23.5 (19.4,35.0)	1.29	0.69, 2.56	0.4346
Non-BRCAm	41	24 (58.5)	14.0 (5.7, NE)	22	13 (59.1)	19.4 (12.7, NE)	1.11	0.58, 2.25	0.7533
Interaction p-value									0.7106

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.10 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Dyspnoea time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	39 (42.4)	52.5 (17.9,52.5)	48	26 (54.2)	16.7 (8.5, NE)	0.63	0.39, 1.06	0.0797
NED/CR [IDS]	74	41 (55.4)	17.3 (11.5,24.2)	38	19 (50.0)	18.9 (11.1, NE)	1.15	0.67, 2.02	0.6226
NED/CR [Chemo]	40	20 (50.0)	22.1 (8.2, NE)	20	8 (40.0)	NE (NE, NE)	1.59	0.73, 3.84	0.2522
PR	49	25 (51.0)	15.4 (11.3, NE)	26	14 (53.8)	11.1 (2.9, NE)	0.71	0.37, 1.40	0.3087
Interaction p-value									0.1644
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	67 (44.7)	31.0 (17.3, NE)	65	34 (52.3)	17.0 (11.1, NE)	0.76	0.51, 1.16	0.1967
non-tBRCAm	105	58 (55.2)	15.4 (11.3,23.4)	67	33 (49.3)	18.9 (11.1, NE)	1.12	0.73, 1.73	0.6156
Interaction p-value									0.2043
First line treatment outcome (eCRF)									
NED [PDS]	89	37 (41.6)	52.5 (18.0,52.5)	47	24 (51.1)	17.0 (8.6, NE)	0.68	0.41, 1.15	0.1444
NED/CR [IDS]	74	41 (55.4)	14.8 (8.3,31.0)	32	17 (53.1)	18.9 (8.5, NE)	1.13	0.65, 2.04	0.6772
NED/CR [Chemo]	39	21 (53.8)	15.2 (4.5, NE)	18	8 (44.4)	11.1 (5.6, NE)	1.29	0.59, 3.09	0.5383
PR	50	24 (48.0)	22.3 (12.1, NE)	34	17 (50.0)	19.7 (9.0, NE)	0.82	0.45, 1.56	0.5463
Interaction p-value									0.4539
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	64 (43.5)	31.0 (18.0, NE)	67	35 (52.2)	17.0 (11.1, NE)	0.72	0.48, 1.10	0.1250
non-tBRCAm	108	61 (56.5)	15.3 (11.2,22.1)	65	32 (49.2)	18.9 (11.1, NE)	1.18	0.77, 1.83	0.4562
Interaction p-value									0.1061
Age group									
<65 years	185	89 (48.1)	22.1 (16.6, NE)	98	49 (50.0)	19.7 (11.3, NE)	0.90	0.64, 1.28	0.5527
>=65 years	70	36 (51.4)	19.7 (11.3,52.5)	34	18 (52.9)	13.8 (8.4, NE)	0.87	0.50, 1.57	0.6407
Interaction p-value									0.9293

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.10 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Dyspnoea time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	85 (46.7)	24.0 (17.9,52.5)	90	47 (52.2)	16.7 (11.1, NE)	0.81	0.57, 1.17	0.2532
IV	73	40 (54.8)	14.8 (8.3, NE)	42	20 (47.6)	21.2 (13.8, NE)	1.13	0.67, 1.98	0.6425
Interaction p-value									0.3026
Region									
Europe	245	121 (49.4)	20.7 (16.0,52.5)	126	64 (50.8)	18.7 (12.3,24.9)	0.90	0.66, 1.22	0.4878
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	0.81	0.18, 4.10	0.7814
Interaction p-value									0.8931
ECOG performance status at Baseline									
(0) Normal activity	190	96 (50.5)	19.4 (15.2,52.5)	100	53 (53.0)	18.7 (11.1, NE)	0.92	0.66, 1.30	0.6406
(1) Restricted activity	61	27 (44.3)	NE (NE, NE)	31	14 (45.2)	18.9 (8.5, NE)	0.82	0.44, 1.61	0.5549
Interaction p-value									0.7549
Baseline CA-125 value									
<=ULN	228	110 (48.2)	22.3 (16.0,52.5)	118	58 (49.2)	19.7 (11.1, NE)	0.90	0.66, 1.25	0.5363
>ULN	27	15 (55.6)	19.7 (5.6, NE)	14	9 (64.3)	13.8 (8.4,21.2)	0.85	0.38, 2.01	0.6936
Interaction p-value									0.8839
Histological grade									
High grade	255	125 (49.0)	20.7 (16.0,52.5)	132	67 (50.8)	18.7 (12.3,24.9)	0.89	0.67, 1.21	0.4678
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	80 (48.2)	20.7 (16.6,52.5)	80	42 (52.5)	17.0 (12.1,24.9)	0.85	0.59, 1.24	0.3948
Residue	79	38 (48.1)	23.4 (12.1, NE)	44	21 (47.7)	19.7 (8.7, NE)	0.97	0.57, 1.68	0.8997
Interaction p-value									0.6959

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.10 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Dyspnoea time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	66 (45.2)	52.5 (16.7,52.5)	79	40 (50.6)	18.7 (8.7, NE)	0.79	0.53, 1.17	0.2355
Interval	99	52 (52.5)	19.9 (12.5,31.0)	45	23 (51.1)	18.9 (11.1, NE)	1.06	0.66, 1.76	0.8160
Interaction p-value									0.3489
Myriad tumour BRCA mutation status									
tBRCAm	158	73 (46.2)	24.2 (16.6, NE)	77	38 (49.4)	19.7 (12.1, NE)	0.85	0.58, 1.27	0.4165
Non-tBRCAm	97	52 (53.6)	17.9 (12.5,24.2)	55	29 (52.7)	13.8 (8.5, NE)	0.98	0.62, 1.56	0.9207
Interaction p-value									0.6458
Status somatic BRCA mutations									
sBRCAm	22	7 (31.8)	NE (NE, NE)	7	4 (57.1)	19.5 (2.8, NE)	0.54	0.16, 2.05	0.3379
gBRCAm	66	33 (50.0)	17.3 (11.3, NE)	31	17 (54.8)	16.7 (3.0, NE)	0.80	0.45, 1.47	0.4661
Non-BRCAm	41	21 (51.2)	23.4 (14.8,52.5)	22	10 (45.5)	NE (NE, NE)	1.09	0.52, 2.43	0.8225
Interaction p-value									0.6141

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.11 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Fatigue time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	68 (73.9)	5.6 (2.9,11.1)	48	36 (75.0)	5.7 (3.0, 8.5)	0.95	0.64, 1.43	0.7942
NED/CR [IDS]	74	58 (78.4)	5.4 (2.9, 8.3)	38	26 (68.4)	11.1 (5.5,16.8)	1.49	0.95, 2.41	0.0829
NED/CR [Chemo]	40	33 (82.5)	3.9 (2.9, 5.8)	20	15 (75.0)	9.8 (3.0,22.3)	1.61	0.89, 3.05	0.1171
PR	49	40 (81.6)	8.6 (3.0,11.3)	26	21 (80.8)	2.9 (2.8,13.8)	0.64	0.38, 1.11	0.1093
Interaction p-value									0.0569
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	122 (81.3)	5.6 (3.0, 8.4)	65	50 (76.9)	5.7 (3.0, 9.3)	1.11	0.80, 1.55	0.5437
non-tBRCAm	105	77 (73.3)	5.6 (3.0, 8.3)	67	48 (71.6)	8.1 (3.5,13.9)	1.10	0.77, 1.59	0.5939
Interaction p-value									0.9885
First line treatment outcome (eCRF)									
NED [PDS]	89	65 (73.0)	5.6 (2.9, 8.4)	47	36 (76.6)	5.6 (3.0, 8.2)	0.89	0.60, 1.35	0.5792
NED/CR [IDS]	74	56 (75.7)	3.8 (2.8, 8.3)	32	22 (68.8)	10.2 (3.0,16.9)	1.45	0.90, 2.42	0.1311
NED/CR [Chemo]	39	32 (82.1)	5.2 (2.9, 8.6)	18	12 (66.7)	11.2 (3.0,22.3)	1.76	0.93, 3.57	0.0818
PR	50	43 (86.0)	8.5 (3.0,11.1)	34	28 (82.4)	5.5 (2.8,13.8)	0.83	0.52, 1.34	0.4354
Interaction p-value									0.1284
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	119 (81.0)	5.6 (3.0, 8.6)	67	50 (74.6)	5.7 (3.0,11.1)	1.12	0.81, 1.58	0.4830
non-tBRCAm	108	80 (74.1)	5.5 (3.0, 8.1)	65	48 (73.8)	7.9 (3.0,12.5)	1.09	0.77, 1.57	0.6264
Interaction p-value									0.9078
Age group									
<65 years	185	147 (79.5)	5.6 (3.0, 5.8)	98	71 (72.4)	5.7 (3.0, 8.5)	1.14	0.87, 1.53	0.3465
>=65 years	70	52 (74.3)	5.8 (3.0, 8.7)	34	27 (79.4)	11.1 (5.7,14.0)	1.03	0.65, 1.66	0.9081
Interaction p-value									0.6995

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.11 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Fatigue time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	138 (75.8)	5.6 (3.2, 8.3)	90	66 (73.3)	6.0 (3.0,11.1)	1.09	0.82, 1.47	0.5492
IV	73	61 (83.6)	4.2 (2.9, 8.4)	42	32 (76.2)	5.7 (3.0,13.9)	1.18	0.77, 1.83	0.4529
Interaction p-value									0.7814
Region									
Europe	245	194 (79.2)	5.6 (3.1, 5.8)	126	94 (74.6)	5.7 (5.5, 9.3)	1.13	0.89, 1.45	0.3285
Japan	10	5 (50.0)	8.3 (2.8, NE)	6	4 (66.7)	8.4 (2.8, NE)	0.69	0.18, 2.79	0.5834
Interaction p-value									0.4753
ECOG performance status at Baseline									
(0) Normal activity	190	153 (80.5)	5.4 (3.0, 5.7)	100	77 (77.0)	5.7 (5.6, 8.5)	1.22	0.93, 1.62	0.1439
(1) Restricted activity	61	43 (70.5)	8.5 (3.0,22.0)	31	21 (67.7)	11.2 (2.9,16.6)	0.88	0.53, 1.52	0.6370
Interaction p-value									0.2810
Baseline CA-125 value									
<=ULN	228	176 (77.2)	5.6 (3.1, 7.9)	118	86 (72.9)	5.7 (5.0,11.1)	1.12	0.87, 1.46	0.3772
>ULN	27	23 (85.2)	3.0 (2.9,11.1)	14	12 (85.7)	8.5 (2.8,11.3)	1.03	0.52, 2.15	0.9273
Interaction p-value									0.8274
Histological grade									
High grade	255	199 (78.0)	5.6 (3.1, 6.0)	132	98 (74.2)	5.7 (5.5,11.1)	1.11	0.88, 1.42	0.3865
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	124 (74.7)	5.1 (3.0, 5.7)	80	58 (72.5)	5.8 (5.0,11.1)	1.13	0.83, 1.55	0.4514
Residue	79	67 (84.8)	5.8 (3.0,11.0)	44	33 (75.0)	8.5 (3.0,14.0)	1.20	0.79, 1.84	0.3974
Interaction p-value									0.8231

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.11 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Fatigue time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	114 (78.1)	5.6 (3.1, 8.4)	79	59 (74.7)	5.7 (3.0, 8.5)	1.01	0.74, 1.39	0.9691
Interval	99	77 (77.8)	4.8 (2.9, 8.3)	45	32 (71.1)	11.1 (5.6,14.9)	1.43	0.96, 2.19	0.0832
Interaction p-value									0.1827
Myriad tumour BRCA mutation status									
tBRCAm	158	127 (80.4)	5.6 (3.1, 8.4)	77	55 (71.4)	5.7 (3.2,11.1)	1.16	0.85, 1.61	0.3426
Non-tBRCAm	97	72 (74.2)	5.4 (3.0, 5.8)	55	43 (78.2)	7.9 (3.0,12.5)	1.05	0.72, 1.54	0.8163
Interaction p-value									0.6706
Status somatic BRCA mutations									
sBRCAm	22	14 (63.6)	11.0 (5.6,22.1)	7	4 (57.1)	10.5 (2.8, NE)	1.03	0.37, 3.63	0.9621
gBRCAm	66	55 (83.3)	4.3 (2.9,11.1)	31	24 (77.4)	5.7 (2.9,13.9)	1.13	0.71, 1.85	0.6228
Non-BRCAm	41	29 (70.7)	5.4 (2.8,11.3)	22	19 (86.4)	5.7 (2.8,13.9)	0.84	0.47, 1.52	0.5485
Interaction p-value									0.7388

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.12 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Financial difficulties time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	24 (26.1)	NE (NE, NE)	48	17 (35.4)	NE (NE, NE)	0.59	0.32, 1.11	0.1007
NED/CR [IDS]	74	24 (32.4)	NE (NE, NE)	38	9 (23.7)	NE (NE, NE)	1.36	0.65, 3.09	0.4205
NED/CR [Chemo]	40	14 (35.0)	NE (NE, NE)	20	11 (55.0)	13.9 (5.7, NE)	0.63	0.28, 1.41	0.2517
PR	49	15 (30.6)	38.4 (22.3, NE)	26	11 (42.3)	19.2 (4.7, NE)	0.52	0.24, 1.15	0.1046
Interaction p-value									0.2519
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	50 (33.3)	38.4 (38.4, NE)	65	25 (38.5)	NE (NE, NE)	0.79	0.49, 1.30	0.3424
non-tBRCAm	105	27 (25.7)	NE (NE, NE)	67	23 (34.3)	NE (NE, NE)	0.61	0.35, 1.08	0.0872
Interaction p-value									0.4950
First line treatment outcome (eCRF)									
NED [PDS]	89	25 (28.1)	NE (NE, NE)	47	16 (34.0)	NE (NE, NE)	0.68	0.37, 1.30	0.2407
NED/CR [IDS]	74	24 (32.4)	NE (NE, NE)	32	7 (21.9)	NE (NE, NE)	1.49	0.68, 3.75	0.3352
NED/CR [Chemo]	39	10 (25.6)	NE (NE, NE)	18	10 (55.6)	13.3 (5.7, NE)	0.38	0.15, 0.92	0.0326*
PR	50	17 (34.0)	38.4 (22.3, NE)	34	15 (44.1)	19.4 (8.8, NE)	0.62	0.31, 1.27	0.1869
Interaction p-value									0.1401
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	50 (34.0)	38.4 (38.4, NE)	67	25 (37.3)	NE (NE, NE)	0.83	0.52, 1.36	0.4409
non-tBRCAm	108	27 (25.0)	NE (NE, NE)	65	23 (35.4)	NE (NE, NE)	0.58	0.33, 1.02	0.0563
Interaction p-value									0.3381
Age group									
<65 years	185	58 (31.4)	NE (NE, NE)	98	38 (38.8)	NE (NE, NE)	0.72	0.48, 1.10	0.1269
>=65 years	70	19 (27.1)	38.4 (38.4, NE)	34	10 (29.4)	NE (NE, NE)	0.72	0.34, 1.62	0.4114
Interaction p-value									0.9903

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.12 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Financial difficulties time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	58 (31.9)	NE (NE, NE)	90	32 (35.6)	NE (NE, NE)	0.77	0.50, 1.20	0.2466
IV	73	19 (26.0)	38.4 (38.4, NE)	42	16 (38.1)	NE (NE, NE)	0.59	0.30, 1.16	0.1236
Interaction p-value									0.5027
Region									
Europe	245	74 (30.2)	38.4 (38.4, NE)	126	47 (37.3)	NE (NE, NE)	0.68	0.48, 0.99	0.0450*
Japan	10	3 (30.0)	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	2.31	0.30, 46.77	0.4406
Interaction p-value									0.2612
ECOG performance status at Baseline									
(0) Normal activity	190	58 (30.5)	38.4 (38.4, NE)	100	38 (38.0)	NE (NE, NE)	0.72	0.48, 1.09	0.1191
(1) Restricted activity	61	17 (27.9)	NE (NE, NE)	31	10 (32.3)	NE (NE, NE)	0.67	0.31, 1.51	0.3186
Interaction p-value									0.8661
Baseline CA-125 value									
<=ULN	228	69 (30.3)	38.4 (38.4, NE)	118	42 (35.6)	NE (NE, NE)	0.72	0.49, 1.07	0.1036
>ULN	27	8 (29.6)	NE (NE, NE)	14	6 (42.9)	21.2 (11.3, NE)	0.68	0.24, 2.07	0.4808
Interaction p-value									0.9153
Histological grade									
High grade	255	77 (30.2)	38.4 (38.4, NE)	132	48 (36.4)	NE (NE, NE)	0.72	0.50, 1.03	0.0746
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	50 (30.1)	NE (NE, NE)	80	23 (28.8)	NE (NE, NE)	0.94	0.58, 1.57	0.8038
Residue	79	24 (30.4)	38.4 (38.4, NE)	44	21 (47.7)	19.4 (11.3, NE)	0.53	0.30, 0.97	0.0399*
Interaction p-value									0.1497

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.12 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Financial difficulties time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	40 (27.4)	NE (NE, NE)	79	32 (40.5)	NE (NE, NE)	0.54	0.34, 0.86	0.0107*
Interval	99	34 (34.3)	NE (NE, NE)	45	12 (26.7)	NE (NE, NE)	1.31	0.70, 2.64	0.4063
Interaction p-value									0.0264*
Myriad tumour BRCA mutation status									
tBRCAm	158	54 (34.2)	38.4 (38.4, NE)	77	31 (40.3)	NE (NE, NE)	0.72	0.47, 1.14	0.1617
Non-tBRCAm	97	23 (23.7)	NE (NE, NE)	55	17 (30.9)	NE (NE, NE)	0.67	0.36, 1.28	0.2187
Interaction p-value									0.8434
Status somatic BRCA mutations									
sBRCAm	22	7 (31.8)	38.4 (11.1, NE)	7	3 (42.9)	NE (NE, NE)	0.63	0.17, 2.95	0.5192
gBRCAm	66	22 (33.3)	NE (NE, NE)	31	9 (29.0)	NE (NE, NE)	1.11	0.53, 2.55	0.7828
Non-BRCAm	41	10 (24.4)	NE (NE, NE)	22	7 (31.8)	NE (NE, NE)	0.72	0.28, 1.98	0.5072
Interaction p-value									0.6861

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.13 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Nausea and vomiting time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=132)				
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	66 (71.7)	5.7 (3.0,11.1)	48	26 (54.2)	16.9 (9.7, NE)	1.75	1.12, 2.80	0.0125*
NED/CR [IDS]	74	54 (73.0)	5.6 (2.9, 8.7)	38	20 (52.6)	19.2 (11.1, NE)	2.05	1.25, 3.51	0.0042*
NED/CR [Chemo]	40	27 (67.5)	5.7 (3.1,13.8)	20	11 (55.0)	19.3 (8.3, NE)	1.87	0.95, 3.94	0.0694
PR	49	31 (63.3)	11.1 (3.1,16.9)	26	13 (50.0)	19.9 (9.7,27.0)	1.53	0.82, 3.02	0.1899
Interaction p-value									0.9149
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	104 (69.3)	5.8 (3.5,11.0)	65	34 (52.3)	19.7 (11.4,27.0)	1.90	1.31, 2.84	0.0006*
non-tBRCAm	105	74 (70.5)	5.7 (5.4,11.1)	67	36 (53.7)	17.4 (9.7,25.0)	1.72	1.16, 2.59	0.0062*
Interaction p-value									0.7212
First line treatment outcome (eCRF)									
NED [PDS]	89	65 (73.0)	5.6 (2.9,11.0)	47	25 (53.2)	17.4 (9.7, NE)	1.90	1.21, 3.06	0.0047*
NED/CR [IDS]	74	53 (71.6)	5.6 (2.9, 8.7)	32	19 (59.4)	16.2 (9.6,24.4)	1.74	1.05, 3.01	0.0322*
NED/CR [Chemo]	39	25 (64.1)	7.1 (4.5,16.8)	18	9 (50.0)	19.3 (11.1, NE)	1.84	0.89, 4.16	0.1034
PR	50	32 (64.0)	11.0 (3.0,19.4)	34	17 (50.0)	19.9 (9.7, NE)	1.57	0.88, 2.89	0.1256
Interaction p-value									0.9678
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	102 (69.4)	5.8 (3.4,11.0)	67	34 (50.7)	20.7 (14.3, NE)	1.95	1.34, 2.91	0.0004*
non-tBRCAm	108	76 (70.4)	5.7 (5.5,11.1)	65	36 (55.4)	16.6 (9.7,24.4)	1.67	1.13, 2.51	0.0093*
Interaction p-value									0.5883
Age group									
<65 years	185	133 (71.9)	5.7 (3.2, 8.4)	98	54 (55.1)	19.2 (11.2,24.4)	1.81	1.32, 2.50	0.0002*
>=65 years	70	45 (64.3)	11.1 (5.6,14.1)	34	16 (47.1)	19.9 (11.3, NE)	1.83	1.06, 3.34	0.0303*
Interaction p-value									0.9661

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.13 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Nausea and vomiting time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	125 (68.7)	6.2 (5.6,11.1)	90	46 (51.1)	19.7 (12.7,25.0)	1.87	1.35, 2.65	0.0002*
IV	73	53 (72.6)	5.6 (3.0,11.1)	42	24 (57.1)	16.6 (8.3,27.0)	1.69	1.05, 2.78	0.0294*
Interaction p-value									0.7267
Region									
Europe	245	171 (69.8)	5.8 (5.5, 8.7)	126	66 (52.4)	18.7 (11.4,23.5)	1.80	1.36, 2.41	<0.0001*
Japan	10	7 (70.0)	5.7 (2.8, NE)	6	4 (66.7)	23.6 (8.1,25.0)	1.83	0.55, 7.00	0.3252
Interaction p-value									0.9780
ECOG performance status at Baseline									
(0) Normal activity	190	140 (73.7)	5.7 (4.2, 8.3)	100	55 (55.0)	18.7 (11.3,25.0)	2.02	1.49, 2.79	<0.0001*
(1) Restricted activity	61	36 (59.0)	10.1 (4.5,25.7)	31	15 (48.4)	19.7 (11.1, NE)	1.33	0.74, 2.51	0.3406
Interaction p-value									0.2385
Baseline CA-125 value									
<=ULN	228	161 (70.6)	5.7 (5.5, 8.6)	118	65 (55.1)	18.7 (12.3,22.3)	1.74	1.31, 2.34	<0.0001*
>ULN	27	17 (63.0)	11.1 (3.0,20.0)	14	5 (35.7)	NE (NE, NE)	2.55	1.01, 7.76	0.0482*
Interaction p-value									0.4614
Histological grade									
High grade	255	178 (69.8)	5.8 (5.6, 8.7)	132	70 (53.0)	19.2 (12.7,23.5)	1.80	1.37, 2.39	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	121 (72.9)	5.6 (3.1, 8.4)	80	44 (55.0)	17.4 (11.1,22.1)	1.85	1.32, 2.65	0.0003*
Residue	79	52 (65.8)	8.3 (5.6,12.1)	44	23 (52.3)	18.7 (11.1, NE)	1.62	1.005, 2.70	0.0478*
Interaction p-value									0.6613

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.13 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Nausea and vomiting time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	105 (71.9)	5.8 (4.5,11.1)	79	41 (51.9)	18.7 (11.2, NE)	1.82	1.28, 2.64	0.0008*
Interval	99	68 (68.7)	5.7 (3.1,11.1)	45	26 (57.8)	16.2 (11.1,24.4)	1.72	1.11, 2.75	0.0152*
Interaction p-value									0.8490
Myriad tumour BRCA mutation status									
tBRCAm	158	109 (69.0)	5.8 (3.5,11.0)	77	37 (48.1)	22.1 (16.6, NE)	2.05	1.43, 3.02	<0.0001*
Non-tBRCAm	97	69 (71.1)	5.7 (5.4,11.1)	55	33 (60.0)	12.7 (8.5,19.9)	1.52	1.01, 2.33	0.0424*
Interaction p-value									0.2939
Status somatic BRCA mutations									
sBRCAm	22	11 (50.0)	13.8 (2.8, NE)	7	4 (57.1)	22.6 (2.8, NE)	1.02	0.35, 3.69	0.9713
gBRCAm	66	48 (72.7)	3.8 (2.9, 6.2)	31	18 (58.1)	19.2 (11.3,27.0)	1.90	1.13, 3.36	0.0156*
Non-BRCAm	41	33 (80.5)	5.6 (2.8, 8.3)	22	14 (63.6)	12.3 (8.1, NE)	1.91	1.04, 3.70	0.0352*
Interaction p-value									0.6275

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.14 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Pain time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	66 (71.7)	8.3 (5.6,11.2)	48	33 (68.8)	3.1 (2.9,11.5)	0.86	0.57, 1.33	0.4991
NED/CR [IDS]	74	58 (78.4)	5.6 (2.9, 5.9)	38	28 (73.7)	5.6 (2.9, 7.6)	1.12	0.72, 1.78	0.6241
NED/CR [Chemo]	40	29 (72.5)	5.6 (3.0,11.2)	20	13 (65.0)	7.3 (3.0, NE)	1.34	0.71, 2.67	0.3711
PR	49	30 (61.2)	8.3 (5.5,19.5)	26	21 (80.8)	5.6 (2.8,12.9)	0.55	0.31, 0.97	0.0382*
Interaction p-value									0.1467
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	105 (70.0)	5.8 (4.2, 8.4)	65	45 (69.2)	6.0 (4.9,13.8)	1.07	0.76, 1.53	0.7137
non-tBRCAm	105	78 (74.3)	5.9 (5.6, 8.4)	67	50 (74.6)	3.0 (2.9, 6.0)	0.77	0.55, 1.11	0.1652
Interaction p-value									0.2083
First line treatment outcome (eCRF)									
NED [PDS]	89	66 (74.2)	8.1 (5.3,11.1)	47	33 (70.2)	3.0 (2.9,11.2)	0.90	0.60, 1.38	0.6175
NED/CR [IDS]	74	59 (79.7)	5.5 (2.8, 5.9)	32	24 (75.0)	5.7 (2.9, 8.1)	1.23	0.77, 2.01	0.3920
NED/CR [Chemo]	39	25 (64.1)	8.5 (3.0,15.2)	18	11 (61.1)	8.7 (3.5, NE)	1.05	0.53, 2.22	0.8981
PR	50	32 (64.0)	8.3 (5.5,18.7)	34	26 (76.5)	5.6 (2.9,12.9)	0.65	0.39, 1.10	0.1050
Interaction p-value									0.3445
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	102 (69.4)	5.8 (4.2, 8.4)	67	46 (68.7)	5.9 (4.9,13.8)	1.05	0.74, 1.50	0.7960
non-tBRCAm	108	81 (75.0)	5.9 (5.6, 8.4)	65	49 (75.4)	3.0 (2.9, 8.1)	0.79	0.55, 1.13	0.1890
Interaction p-value									0.2586
Age group									
<65 years	185	138 (74.6)	5.8 (4.9, 8.3)	98	70 (71.4)	5.6 (3.0, 8.7)	0.97	0.73, 1.31	0.8627
>=65 years	70	45 (64.3)	5.8 (5.6,11.1)	34	25 (73.5)	5.6 (2.9,11.1)	0.75	0.47, 1.25	0.2664
Interaction p-value									0.3795

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.14 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Pain time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	127 (69.8)	7.8 (5.6, 8.5)	90	67 (74.4)	5.6 (3.0, 7.6)	0.81	0.60, 1.09	0.1571
IV	73	56 (76.7)	5.6 (3.0, 8.3)	42	28 (66.7)	5.6 (3.0,13.9)	1.23	0.79, 1.97	0.3571
Interaction p-value									0.1194
Region									
Europe	245	179 (73.1)	5.8 (5.6, 8.3)	126	91 (72.2)	5.6 (3.0, 7.6)	0.93	0.72, 1.20	0.5599
Japan	10	4 (40.0)	NE (NE, NE)	6	4 (66.7)	13.5 (2.8, NE)	0.51	0.12, 2.16	0.3469
Interaction p-value									0.4102
ECOG performance status at Baseline									
(0) Normal activity	190	140 (73.7)	5.7 (5.6, 8.3)	100	73 (73.0)	5.6 (3.0, 7.6)	0.94	0.71, 1.26	0.6922
(1) Restricted activity	61	40 (65.6)	8.3 (3.0,14.5)	31	22 (71.0)	5.6 (3.0,16.9)	0.85	0.51, 1.45	0.5429
Interaction p-value									0.7276
Baseline CA-125 value									
<=ULN	228	166 (72.8)	6.2 (5.6, 8.4)	118	86 (72.9)	5.6 (3.0, 8.1)	0.92	0.71, 1.20	0.5313
>ULN	27	17 (63.0)	5.6 (3.0, NE)	14	9 (64.3)	6.6 (2.8, NE)	0.85	0.39, 2.00	0.6954
Interaction p-value									0.8553
Histological grade									
High grade	255	183 (71.8)	5.8 (5.6, 8.3)	132	95 (72.0)	5.6 (3.0, 8.1)	0.91	0.71, 1.17	0.4717
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	126 (75.9)	5.7 (4.2, 8.3)	80	58 (72.5)	5.5 (3.0, 7.6)	0.99	0.73, 1.36	0.9652
Residue	79	50 (63.3)	8.5 (5.7,15.2)	44	30 (68.2)	6.0 (3.0,11.2)	0.78	0.50, 1.23	0.2779
Interaction p-value									0.3806

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.14 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Pain time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	102 (69.9)	8.4 (5.7,11.2)	79	53 (67.1)	5.7 (3.0,11.1)	0.90	0.65, 1.27	0.5516
Interval	99	74 (74.7)	5.6 (3.2, 6.3)	45	35 (77.8)	5.6 (2.9, 8.1)	0.94	0.63, 1.42	0.7522
Interaction p-value									0.8914
Myriad tumour BRCA mutation status									
tBRCAm	158	111 (70.3)	6.2 (4.9, 8.4)	77	50 (64.9)	6.0 (5.2,13.8)	1.11	0.80, 1.57	0.5234
Non-tBRCAm	97	72 (74.2)	5.8 (5.6, 8.3)	55	45 (81.8)	2.9 (2.9, 5.8)	0.68	0.47, 0.998	0.0488*
Interaction p-value									0.0557
Status somatic BRCA mutations									
sBRCAm	22	14 (63.6)	7.9 (2.9,19.4)	7	3 (42.9)	NE (NE, NE)	1.63	0.53, 7.09	0.4207
gBRCAm	66	48 (72.7)	4.9 (3.0,11.1)	31	21 (67.7)	11.5 (5.8,22.2)	1.26	0.76, 2.15	0.3716
Non-BRCAm	41	28 (68.3)	5.9 (4.9,14.8)	22	20 (90.9)	2.8 (2.8, 2.9)	0.39	0.22, 0.70	0.0021*
Interaction p-value									0.0062*

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.15 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Insomnia time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	57 (62.0)	11.0 (5.8,16.6)	48	36 (75.0)	5.6 (3.0, 9.2)	0.60	0.40, 0.92	0.0199*
NED/CR [IDS]	74	41 (55.4)	14.0 (7.9, NE)	38	26 (68.4)	8.5 (3.1,21.2)	0.72	0.44, 1.18	0.1886
NED/CR [Chemo]	40	29 (72.5)	11.3 (5.7,21.9)	20	15 (75.0)	7.8 (2.9,22.0)	0.89	0.48, 1.70	0.7120
PR	49	32 (65.3)	11.3 (5.8,22.3)	26	14 (53.8)	11.1 (5.6, NE)	1.05	0.57, 2.04	0.8717
Interaction p-value									0.4678
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	91 (60.7)	11.3 (8.4,16.6)	65	43 (66.2)	10.3 (5.6,13.9)	0.85	0.60, 1.23	0.3873
non-tBRCAm	105	68 (64.8)	11.2 (8.3,16.6)	67	48 (71.6)	5.7 (3.0,11.1)	0.67	0.46, 0.97	0.0351*
Interaction p-value									0.3588
First line treatment outcome (eCRF)									
NED [PDS]	89	53 (59.6)	11.0 (5.8,23.3)	47	35 (74.5)	5.6 (3.0, 8.5)	0.57	0.37, 0.88	0.0113*
NED/CR [IDS]	74	41 (55.4)	13.9 (8.3, NE)	32	22 (68.8)	8.4 (3.1,21.2)	0.69	0.42, 1.19	0.1766
NED/CR [Chemo]	39	27 (69.2)	11.3 (5.6,21.9)	18	13 (72.2)	10.3 (3.0,11.2)	0.81	0.42, 1.62	0.5310
PR	50	35 (70.0)	11.0 (5.6,17.4)	34	20 (58.8)	11.3 (5.6,22.3)	1.19	0.70, 2.10	0.5280
Interaction p-value									0.2071
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	88 (59.9)	13.4 (8.4,19.8)	67	44 (65.7)	10.3 (5.6,14.1)	0.83	0.58, 1.21	0.3282
non-tBRCAm	108	71 (65.7)	11.2 (8.3,14.0)	65	47 (72.3)	5.6 (2.9,11.1)	0.68	0.47, 0.99	0.0430*
Interaction p-value									0.4370
Age group									
<65 years	185	117 (63.2)	11.3 (8.4,15.2)	98	69 (70.4)	5.6 (3.0,10.3)	0.71	0.53, 0.96	0.0285*
>=65 years	70	42 (60.0)	11.3 (5.8,19.3)	34	22 (64.7)	11.1 (8.3,17.0)	0.87	0.53, 1.49	0.6127
Interaction p-value									0.4997

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.15 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Insomnia time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	117 (64.3)	11.3 (8.3,15.2)	90	61 (67.8)	8.5 (5.6,12.7)	0.85	0.62, 1.16	0.2989
IV	73	42 (57.5)	11.2 (8.3,22.3)	42	30 (71.4)	8.3 (2.8,11.2)	0.56	0.35, 0.91	0.0193*
Interaction p-value									0.1579
Region									
Europe	245	156 (63.7)	11.1 (8.4,13.9)	126	86 (68.3)	8.3 (5.6,11.1)	0.77	0.60, 1.01	0.0589
Japan	10	3 (30.0)	NE (NE, NE)	6	5 (83.3)	22.1 (2.8,24.0)	0.30	0.06, 1.22	0.0928
Interaction p-value									0.1942
ECOG performance status at Baseline									
(0) Normal activity	190	119 (62.6)	11.4 (8.4,16.6)	100	70 (70.0)	7.4 (5.2,11.1)	0.74	0.55, 1.001	0.0509
(1) Restricted activity	61	36 (59.0)	11.1 (5.8,25.7)	31	21 (67.7)	11.1 (3.2,16.9)	0.73	0.43, 1.28	0.2691
Interaction p-value									0.9756
Baseline CA-125 value									
<=ULN	228	143 (62.7)	11.4 (8.4,14.1)	118	81 (68.6)	8.3 (5.6,11.2)	0.76	0.58, 1.00002	0.0500
>ULN	27	16 (59.3)	11.0 (5.7,20.0)	14	10 (71.4)	8.3 (2.9,21.2)	0.70	0.32, 1.61	0.3906
Interaction p-value									0.8612
Histological grade									
High grade	255	159 (62.4)	11.3 (8.4,14.0)	132	91 (68.9)	8.3 (5.6,11.1)	0.75	0.58, 0.98	0.0330*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	97 (58.4)	11.3 (8.4,17.3)	80	58 (72.5)	5.7 (3.0, 8.5)	0.62	0.45, 0.86	0.0045*
Residue	79	58 (73.4)	11.1 (5.7,14.0)	44	29 (65.9)	11.1 (3.5,17.0)	1.07	0.69, 1.69	0.7705
Interaction p-value									0.0490*

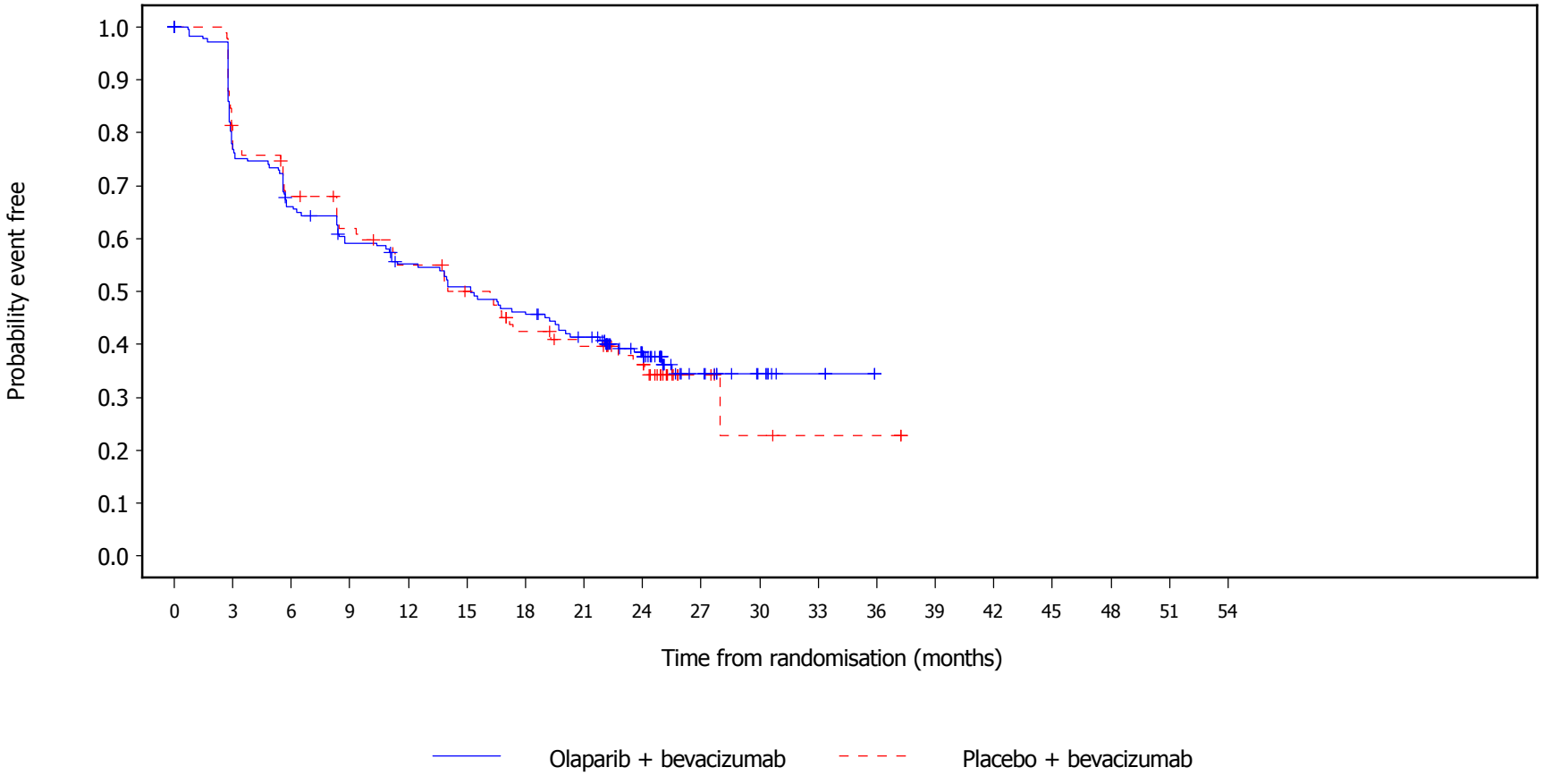
Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubpr_v3.sas ettesubpr_v3aao 25NOV2020:12:08 khcs324

Table 2.2.3.15 PAOLA1: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Insomnia time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	96 (65.8)	11.0 (8.3,13.8)	79	56 (70.9)	5.7 (3.0,10.3)	0.74	0.53, 1.03	0.0748
Interval	99	59 (59.6)	13.8 (8.3,18.6)	45	31 (68.9)	11.1 (5.6,16.9)	0.77	0.50, 1.20	0.2473
Interaction p-value									0.8742
Myriad tumour BRCA mutation status									
tBRCAm	158	95 (60.1)	11.3 (8.4,15.9)	77	50 (64.9)	8.5 (5.2,11.3)	0.79	0.56, 1.12	0.1840
Non-tBRCAm	97	64 (66.0)	11.2 (5.8,17.4)	55	41 (74.5)	8.3 (3.2,11.1)	0.71	0.48, 1.06	0.0909
Interaction p-value									0.6831
Status somatic BRCA mutations									
sBRCAm	22	15 (68.2)	8.5 (3.0,14.1)	7	5 (71.4)	2.8 (2.8, NE)	0.46	0.18, 1.42	0.1613
gBRCAm	66	43 (65.2)	8.4 (5.8,14.1)	31	20 (64.5)	13.9 (5.6,22.3)	1.09	0.65, 1.89	0.7512
Non-BRCAm	41	26 (63.4)	13.8 (8.5,25.7)	22	17 (77.3)	8.3 (2.8,12.7)	0.61	0.33, 1.15	0.1225
Interaction p-value									0.2111

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubpr_v3.sas ettesubpr_v3aao 25NOV2020:12:08 khcs324

Figure 2.2.4.1 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status time to clinically meaningful deterioration for Age group=<65 years
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

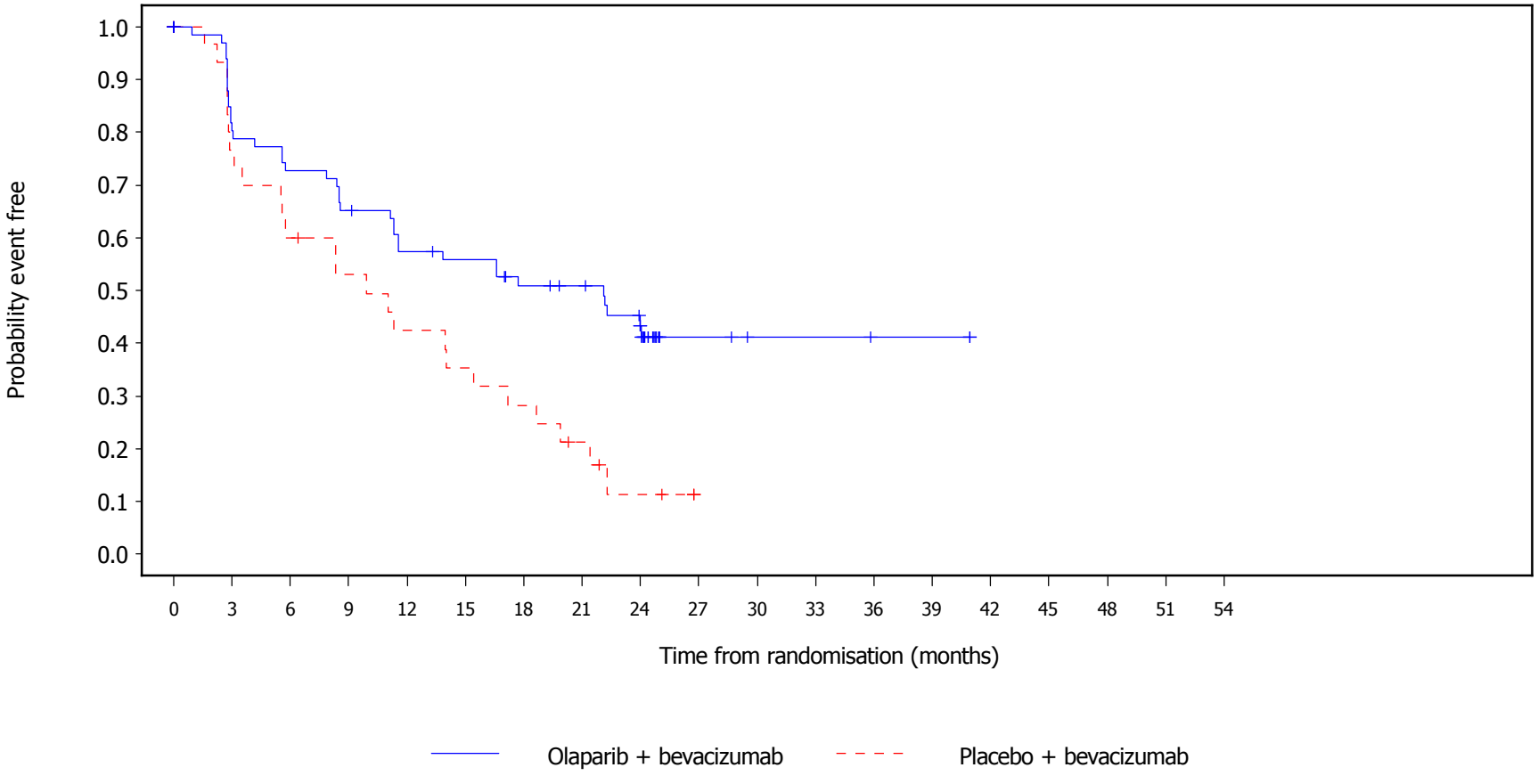


Number of patients at risk:

185	137	116	102	93	86	78	67	45	16	8	3	0	0	0	0	0	0	Olaparib + bevacizumab
98	72	60	53	46	40	32	28	21	5	2	1	1	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.2 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status time to clinically meaningful deterioration for
Age group=>=65 years
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

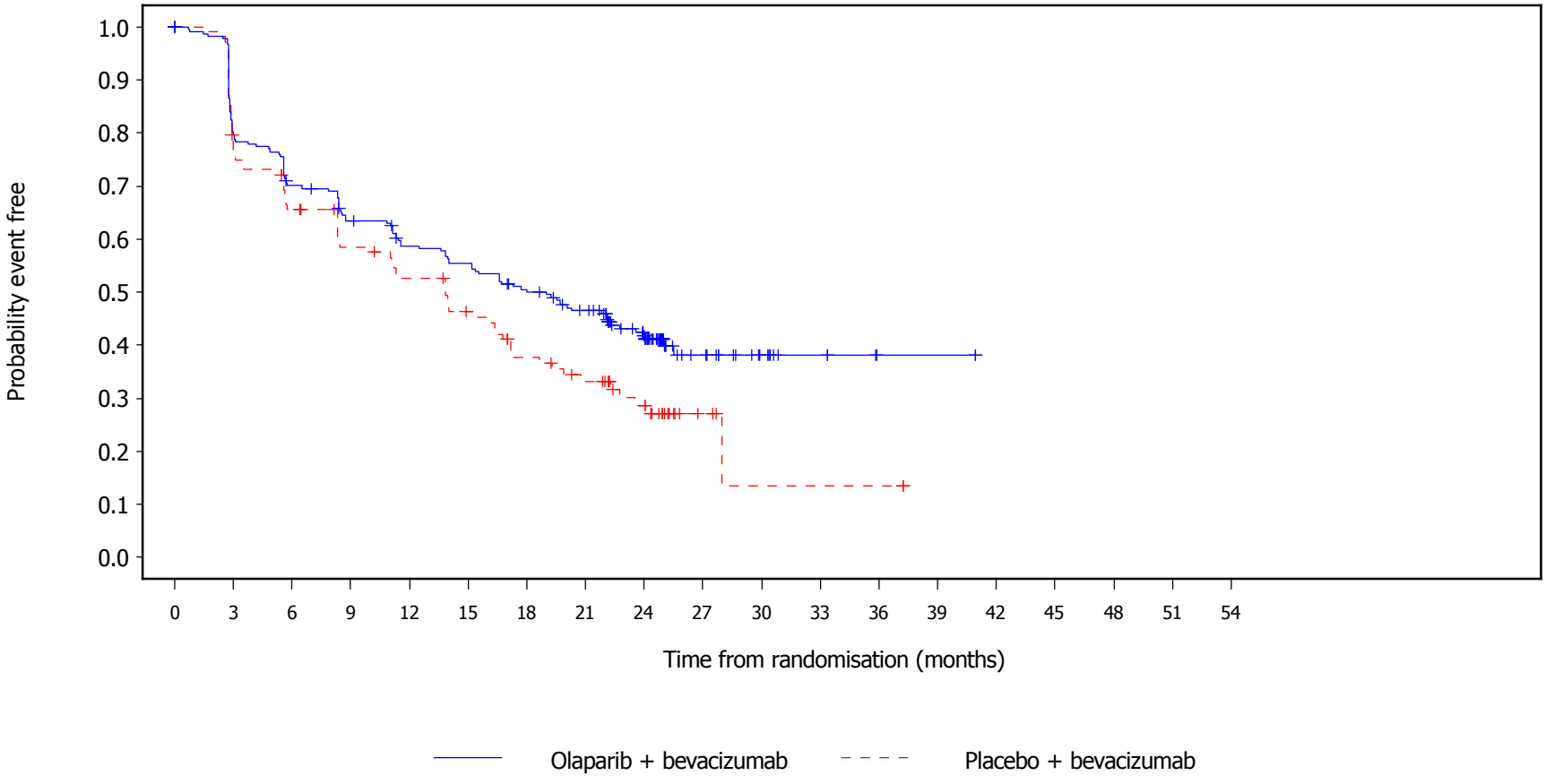


Number of patients at risk:

70	54	48	43	37	35	30	28	20	4	2	2	1	1	0	0	0	0	0	Olaparib + bevacizumab
34	23	18	15	12	10	8	5	2	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.3 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status time to clinically meaningful deterioration for Baseline CA-125 value=<=ULN
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

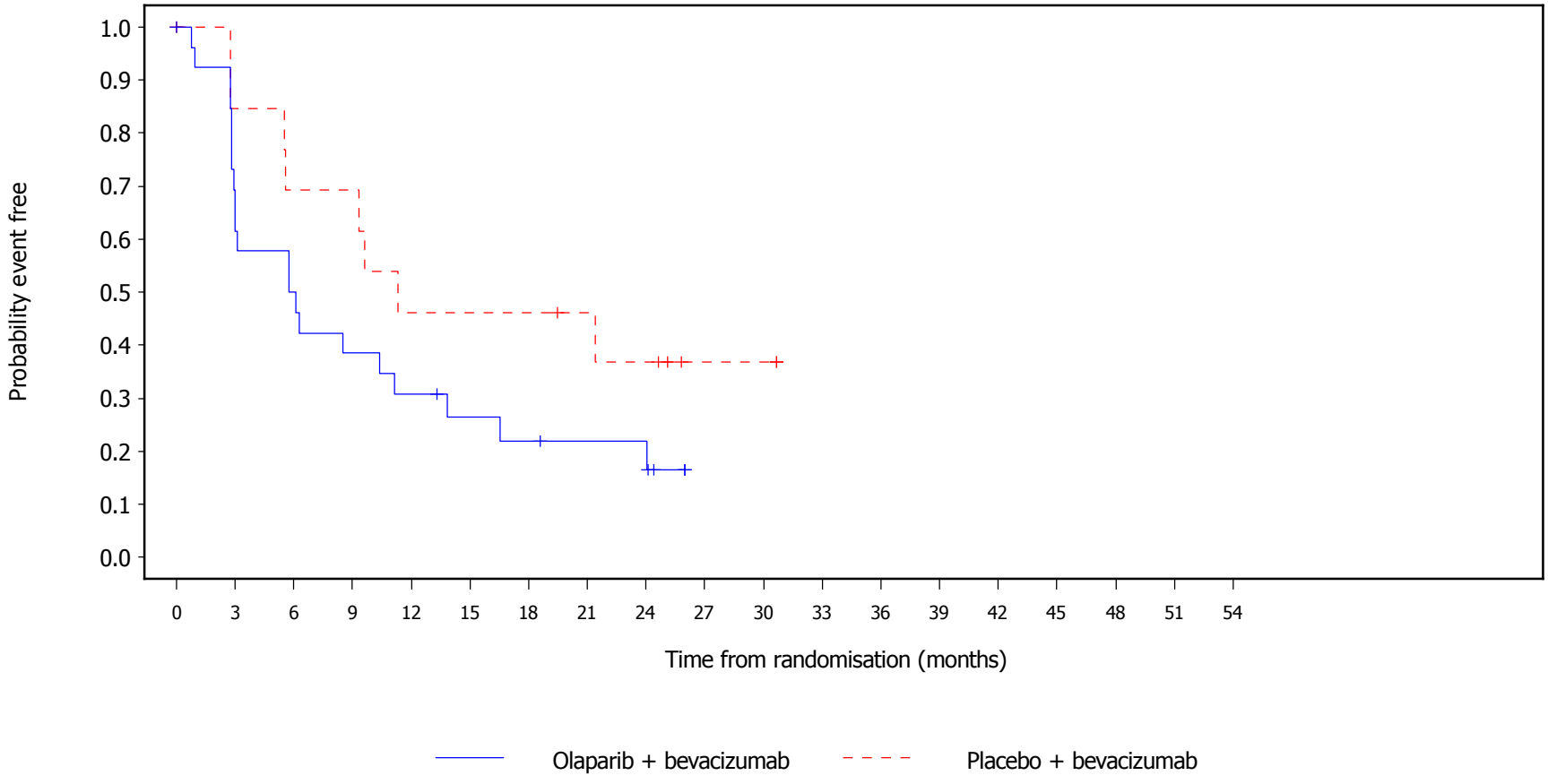


Number of patients at risk:

228	174	151	135	122	115	103	91	61	20	10	5	1	1	0	0	0	0	0	Olaparib + bevacizumab
118	84	69	59	52	44	34	28	19	4	1	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.4 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status time to clinically meaningful deterioration for Baseline CA-125 value=>ULN
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

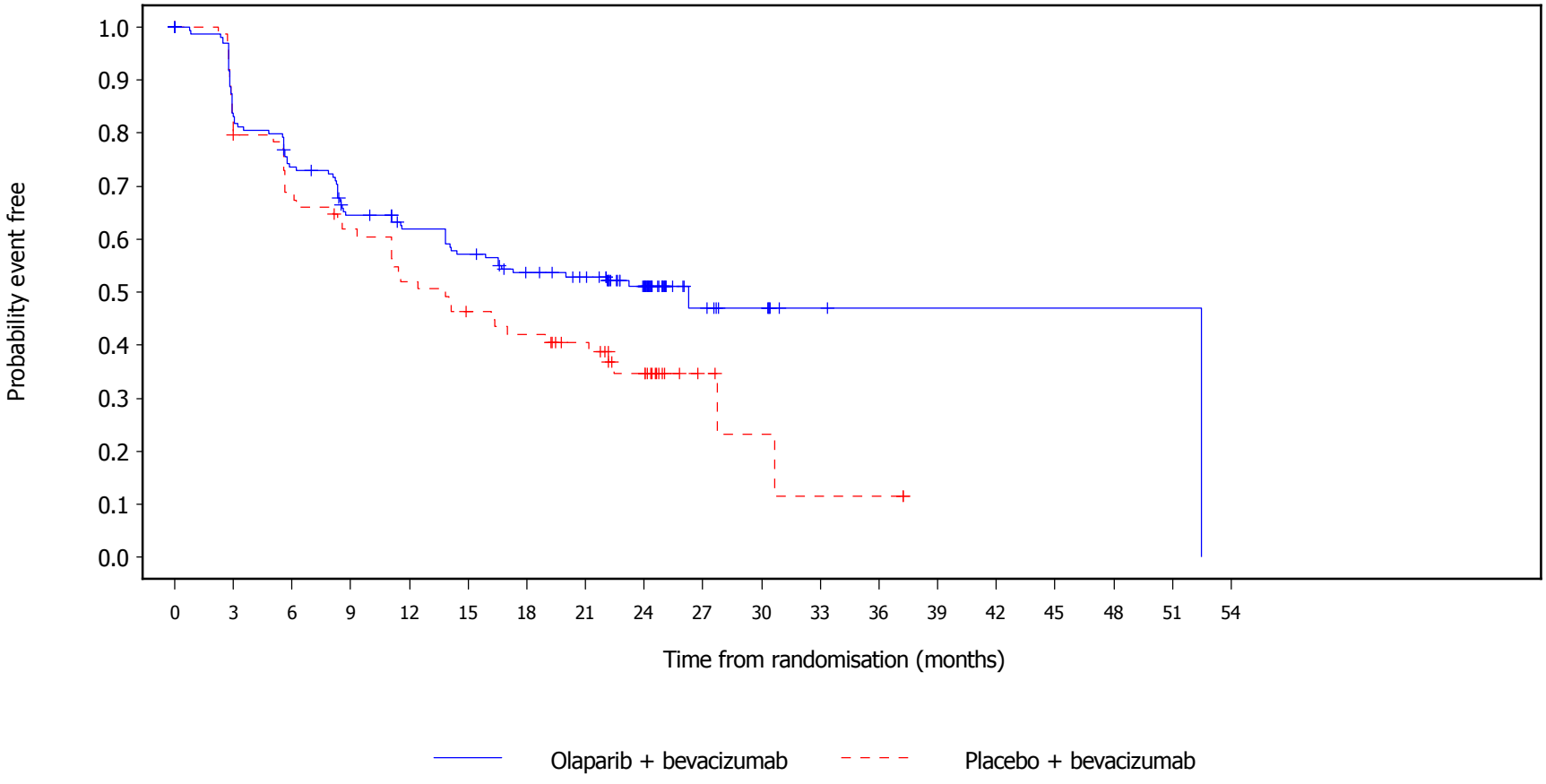


Number of patients at risk:

27	17	13	10	8	6	5	4	4	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
14	11	9	9	6	6	6	5	4	1	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.5 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Physical time to clinically meaningful deterioration
for Cytoreductive surgery outcome=No residue
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

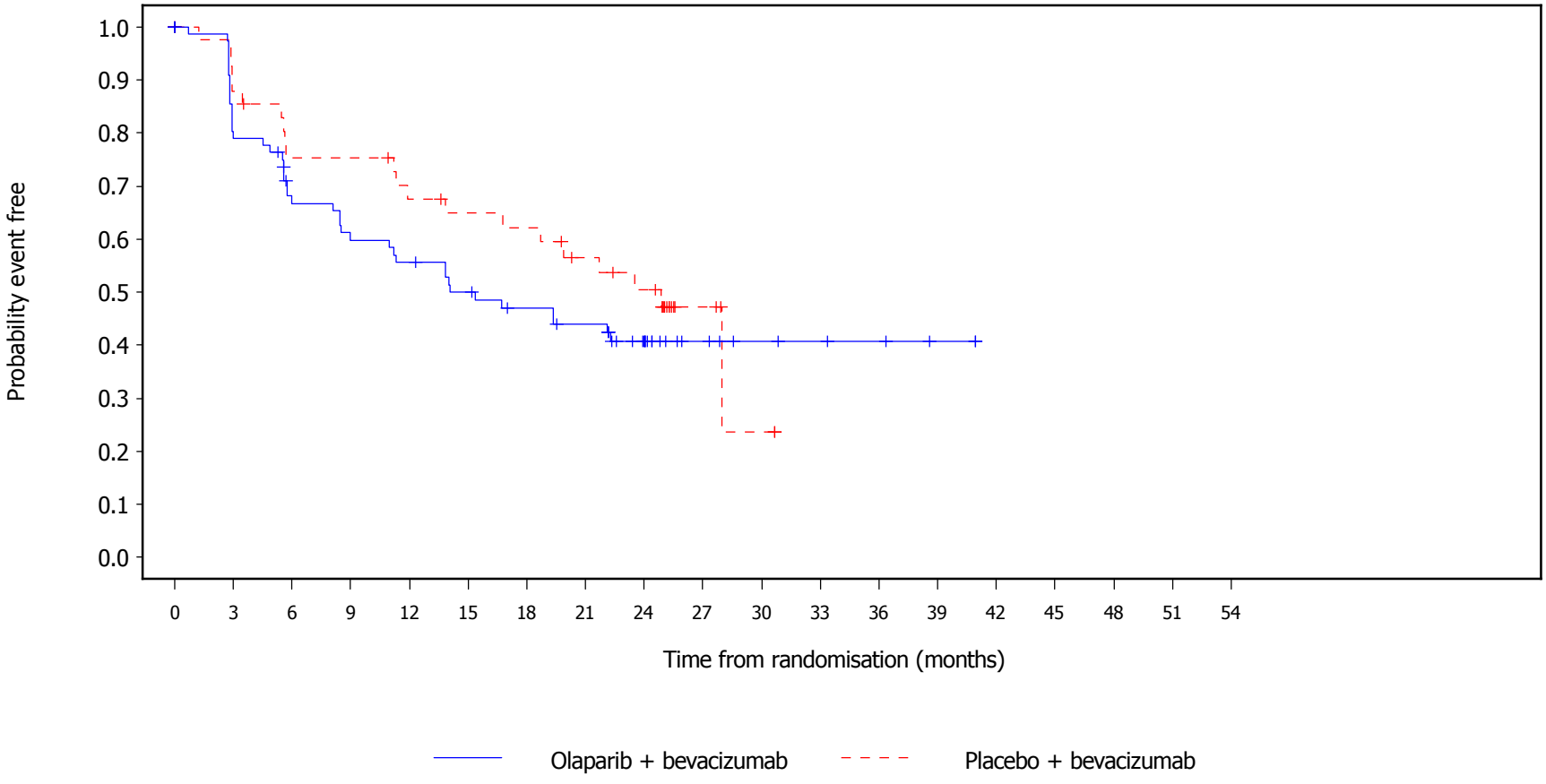


Number of patients at risk:

166	133	116	99	91	84	75	70	52	11	7	2	1	1	1	1	1	1	0 Olaparib + bevacizumab
80	61	50	44	37	32	29	24	16	4	2	1	1	0	0	0	0	0	0 Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.6 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Physical time to clinically meaningful deterioration
for Cytoreductive surgery outcome=Residue
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

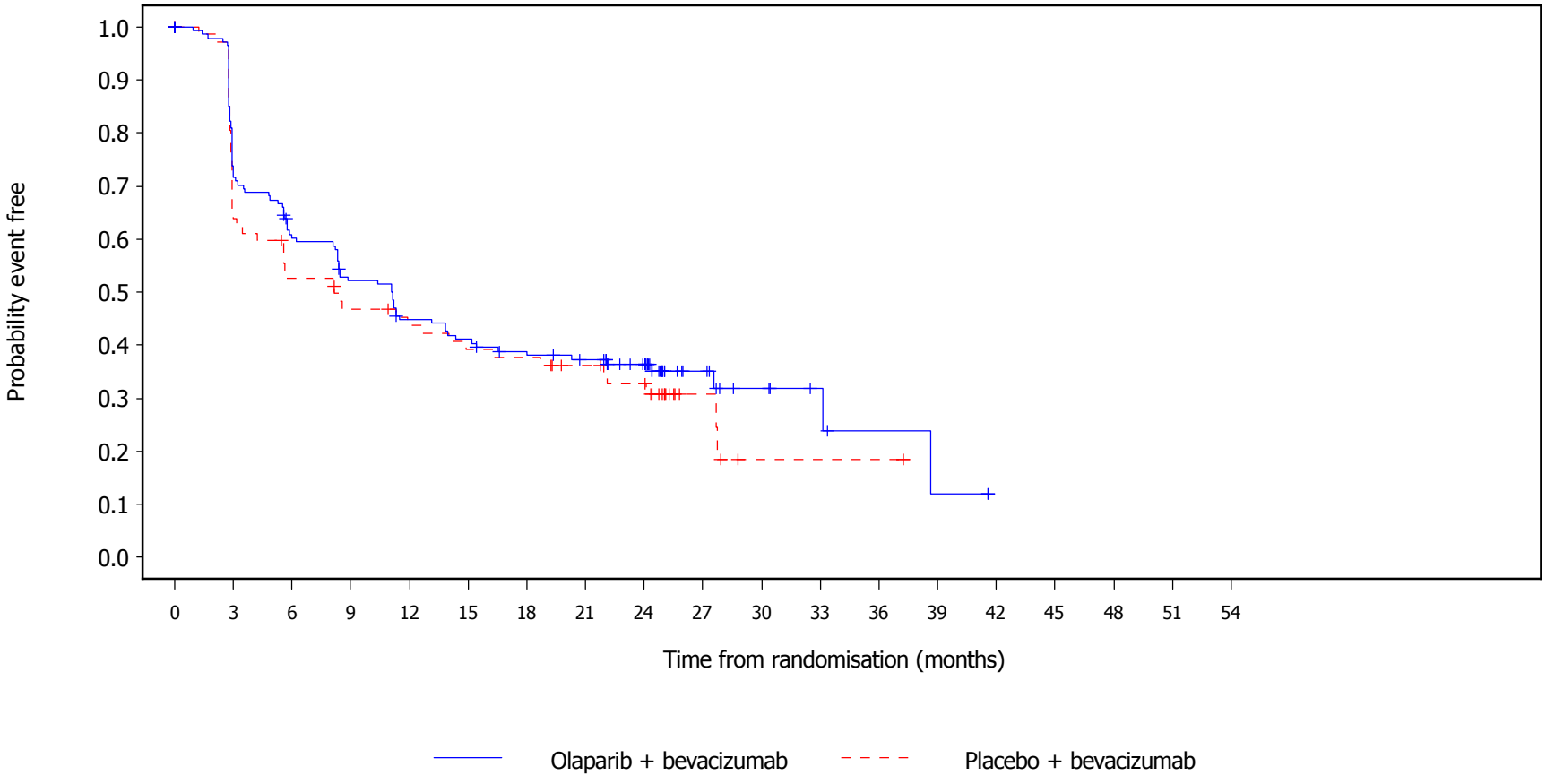


Number of patients at risk:

79	60	48	44	40	35	31	28	18	8	5	4	3	1	0	0	0	0	0	Olaparib + bevacizumab
44	36	30	30	26	24	23	19	16	4	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.7 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Role time to clinically meaningful deterioration for Timing of cytoreductive surgery=Upfront
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

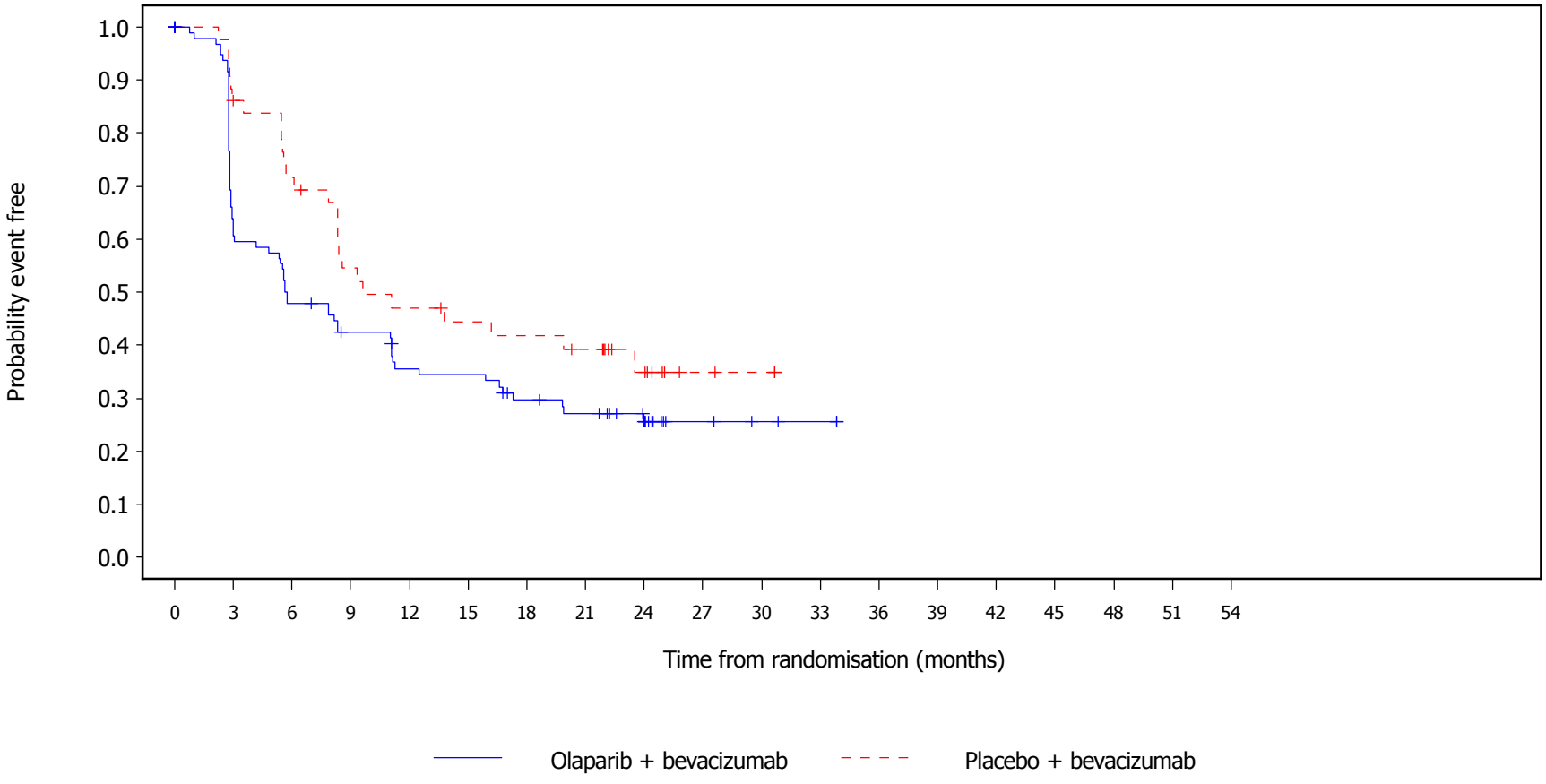


Number of patients at risk:

146	102	83	71	60	55	50	46	37	13	7	4	2	1	0	0	0	0	0	Olaparib + bevacizumab
79	47	37	32	29	26	25	21	18	5	1	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.8 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Role time to clinically meaningful deterioration for Timing of cytoreductive surgery=Interval
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

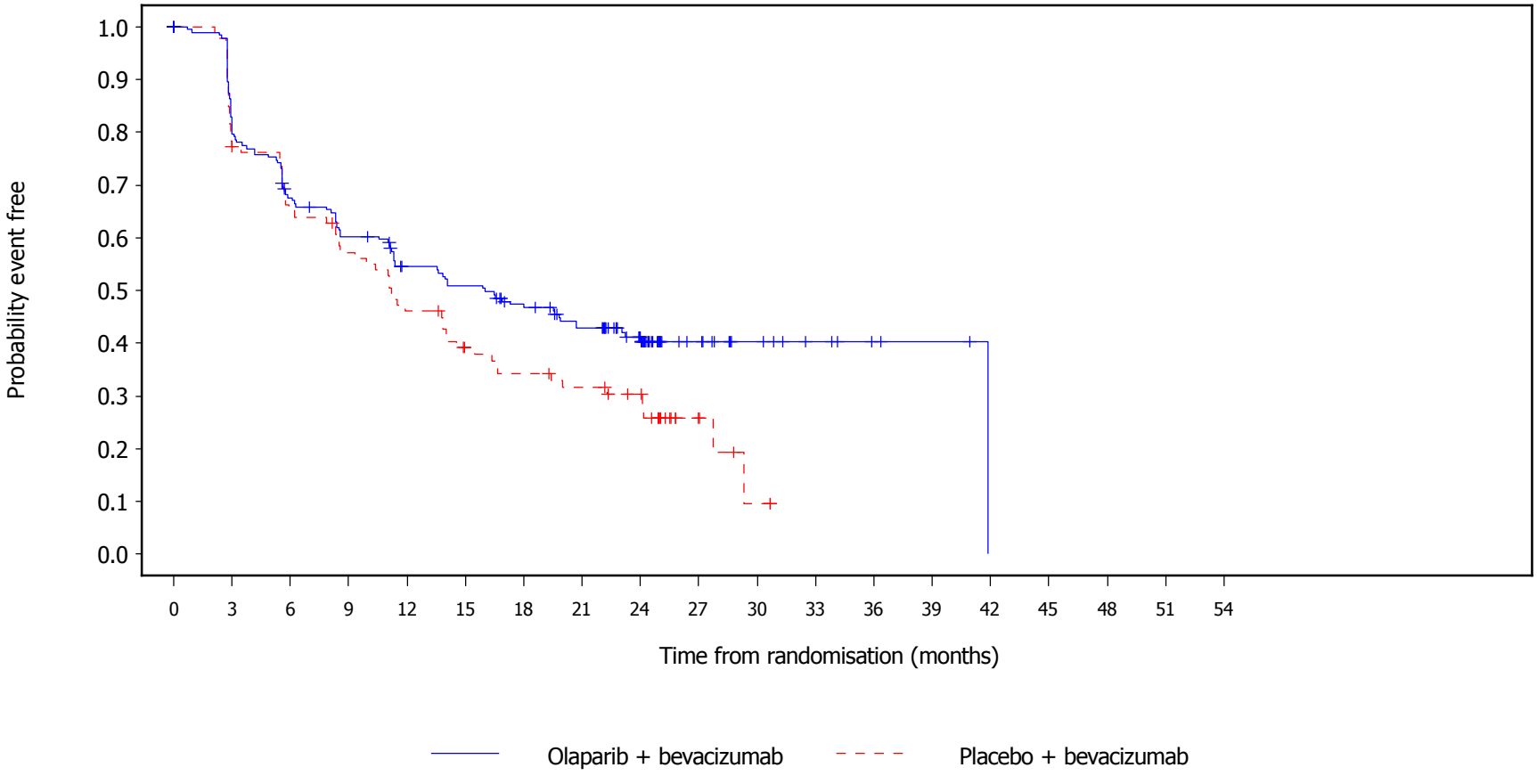


Number of patients at risk:

99	58	45	38	31	30	24	21	14	4	2	1	0	0	0	0	0	0	Olaparib + bevacizumab
45	37	30	22	19	17	16	14	8	2	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.9 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Social time to clinically meaningful deterioration for ECOG performance status at Baseline=(0) Normal activity
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

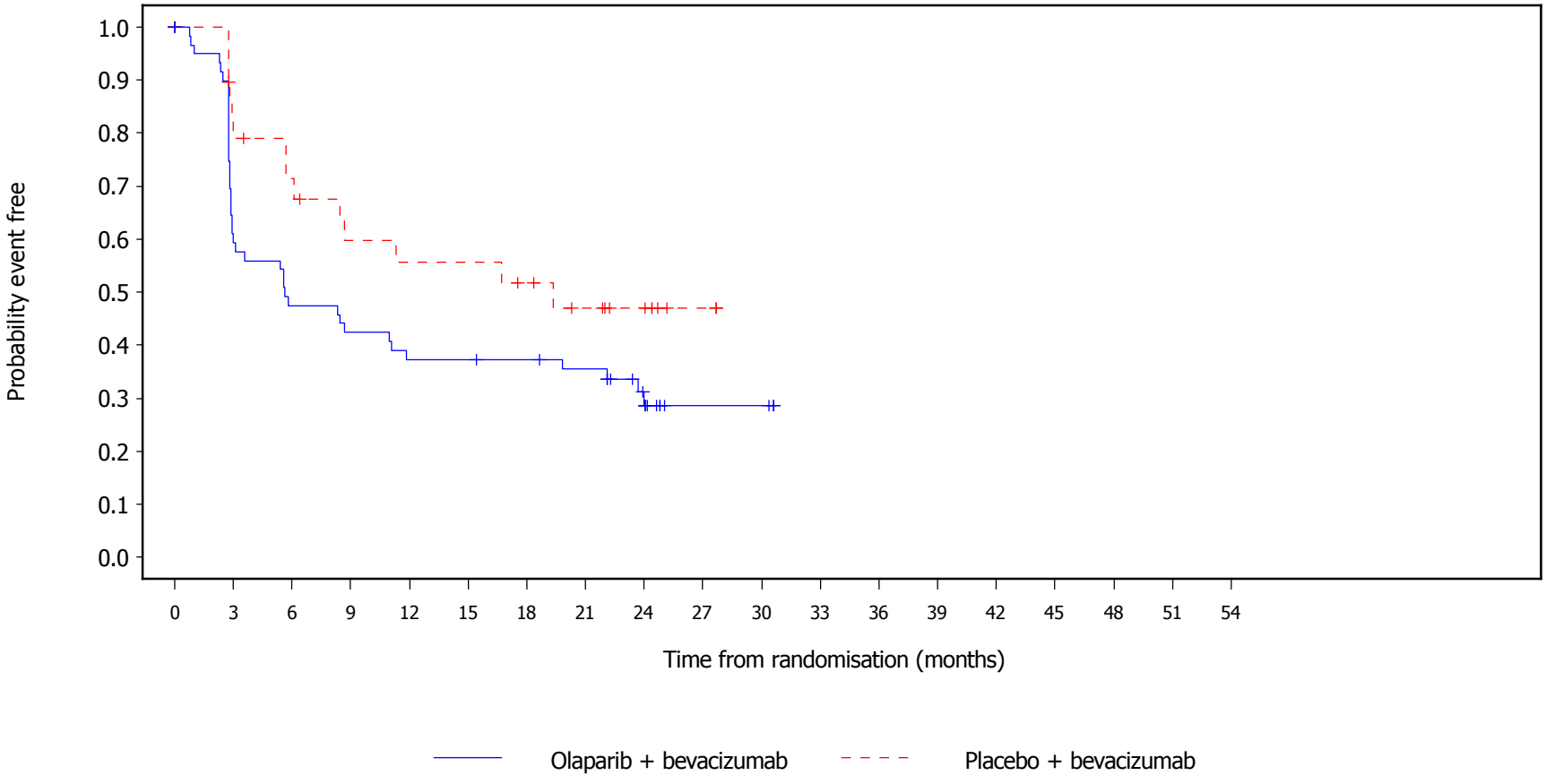


Number of patients at risk:

190	147	121	107	92	86	76	65	46	17	10	6	3	2	0	0	0	0	Olaparib + bevacizumab
100	71	59	51	41	32	28	25	21	5	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.10 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Social time to clinically meaningful deterioration for ECOG performance status at Baseline=(1) Restricted activity
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

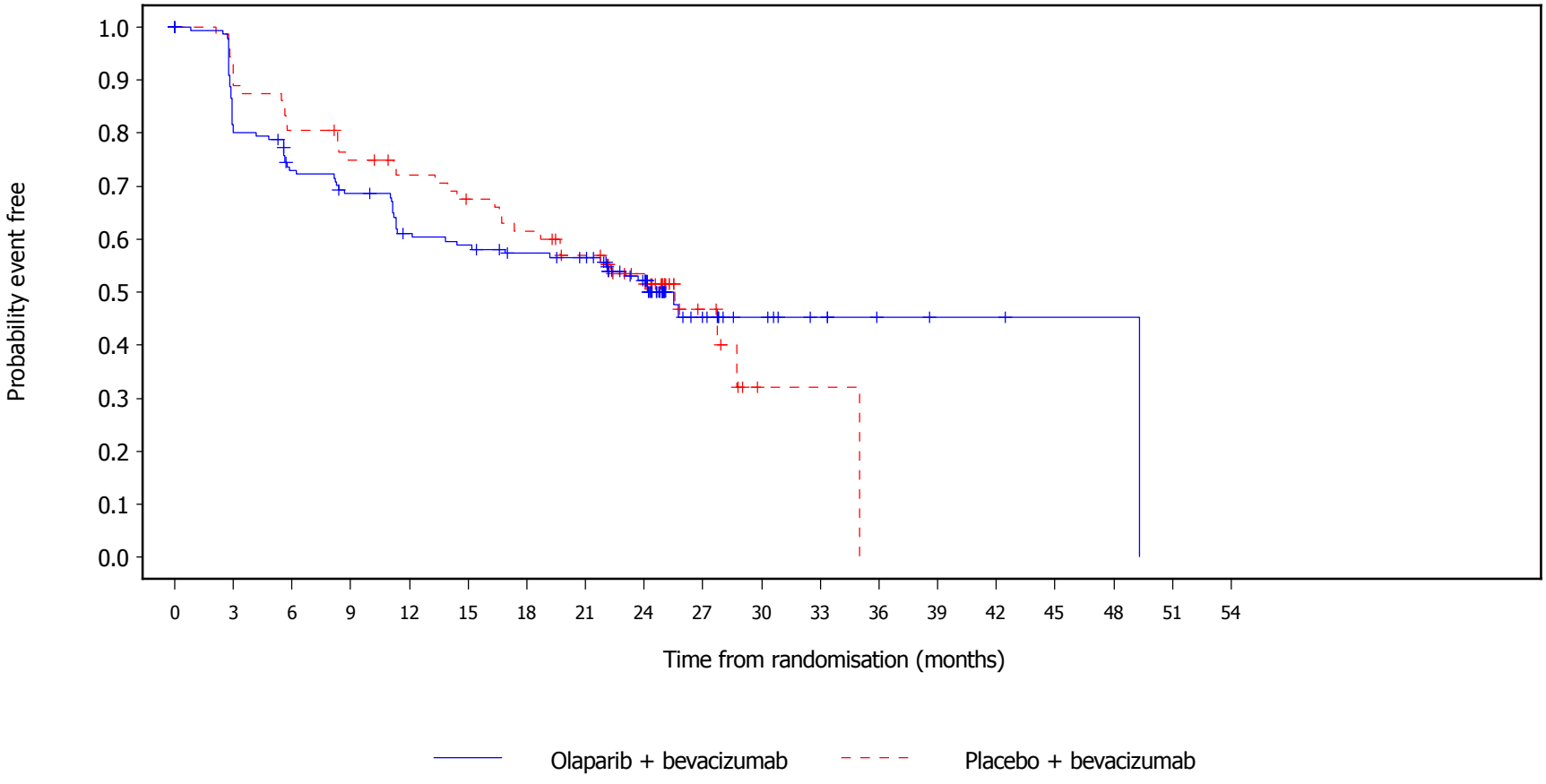


Number of patients at risk:

61	36	28	25	22	22	21	19	11	2	2	0	0	0	0	0	0	0	Olaparib + bevacizumab
31	23	19	15	14	14	12	9	6	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.11 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Loss of appetite time to clinically meaningful deterioration for Timing of cytoreductive surgery=Upfront
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

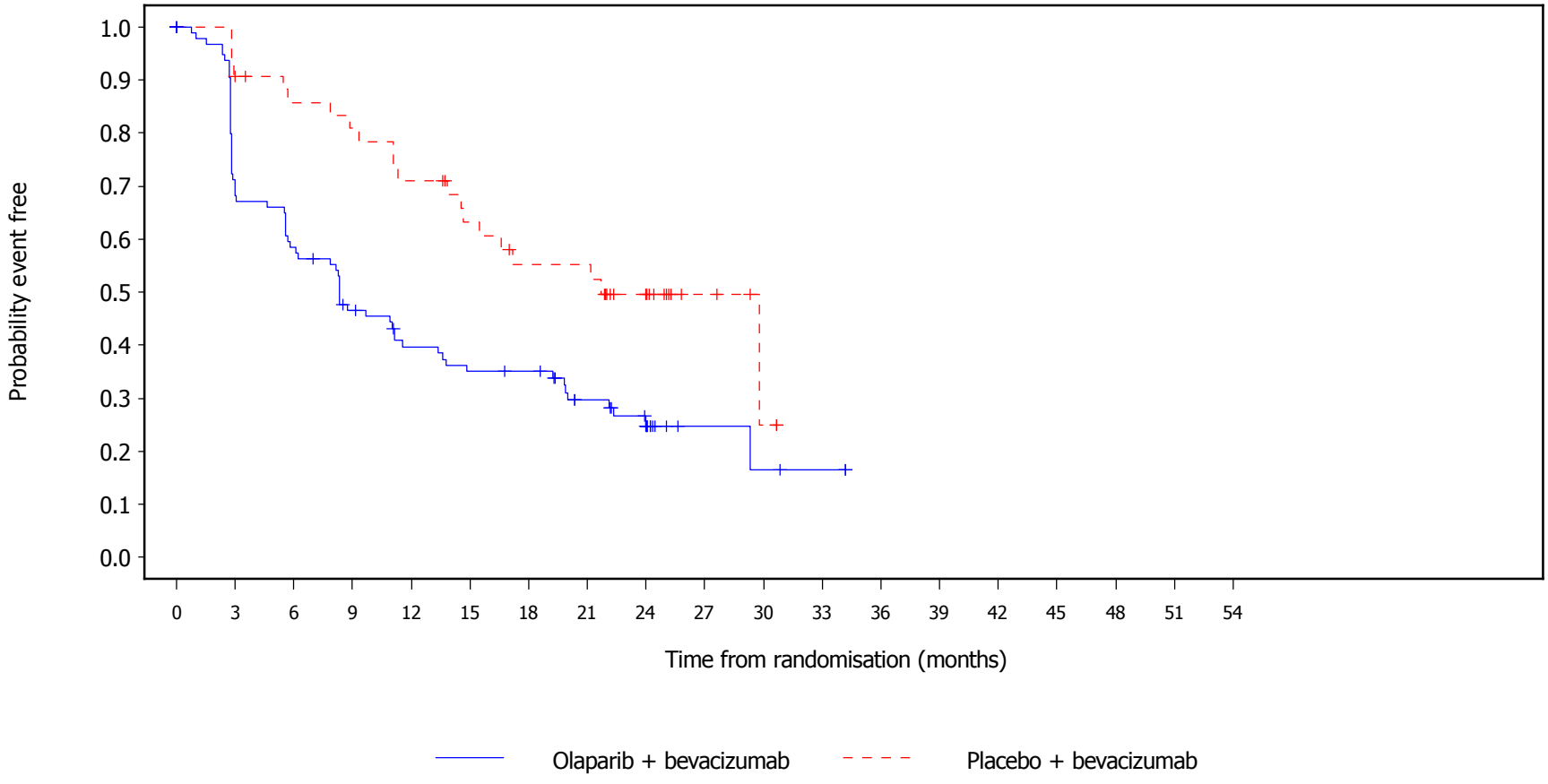


Number of patients at risk:

146	114	100	93	81	78	73	70	54	16	10	6	3	2	2	1	1	0	0	Olaparib + bevacizumab
79	67	58	53	49	45	41	35	27	8	1	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.12 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Loss of appetite time to clinically meaningful deterioration for Timing of cytoreductive surgery=Interval
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

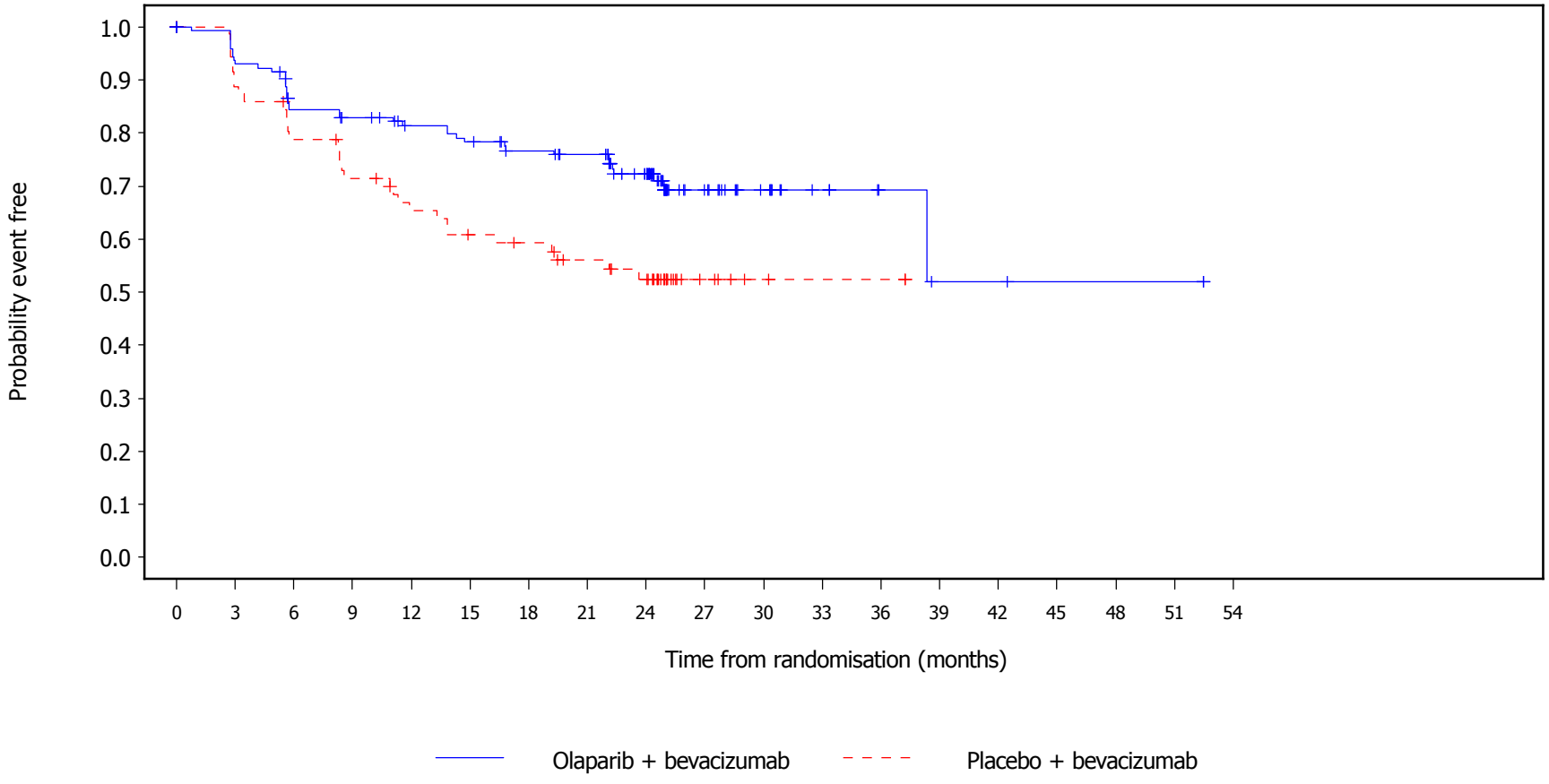


Number of patients at risk:

99	65	55	42	34	30	29	20	13	3	2	1	0	0	0	0	0	0	Olaparib + bevacizumab
45	39	35	33	29	24	20	20	12	4	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.13 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Financial difficulties time to clinically meaningful deterioration for Timing of cytoreductive surgery=Upfront
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

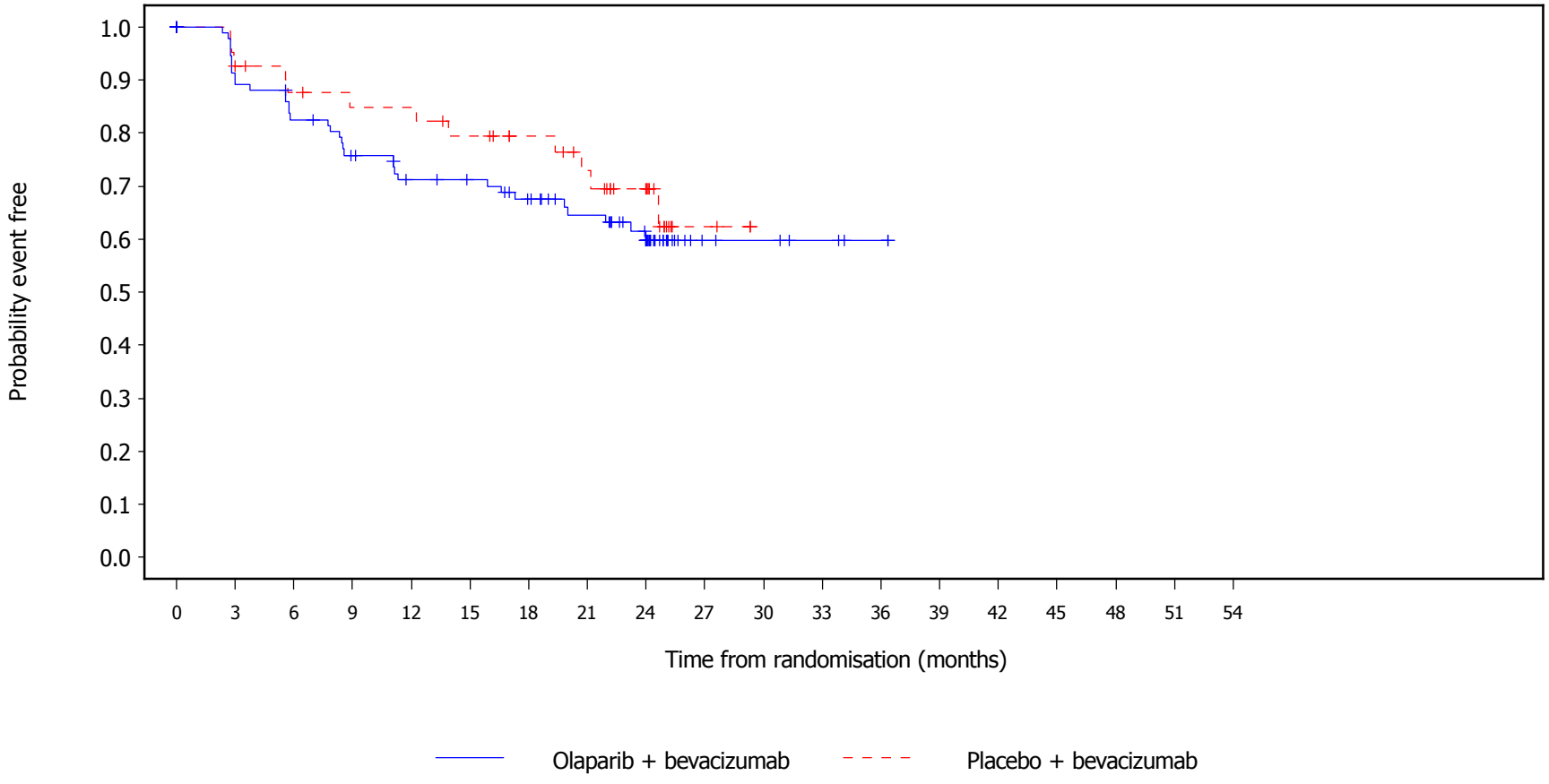


Number of patients at risk:

146	133	116	112	105	101	95	91	71	25	15	8	4	2	2	1	1	1	0 Olaparib + bevacizumab
79	63	55	49	43	39	37	32	28	6	2	1	1	0	0	0	0	0	0 Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.14 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Financial difficulties time to clinically meaningful deterioration for Timing of cytoreductive surgery=Interval
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

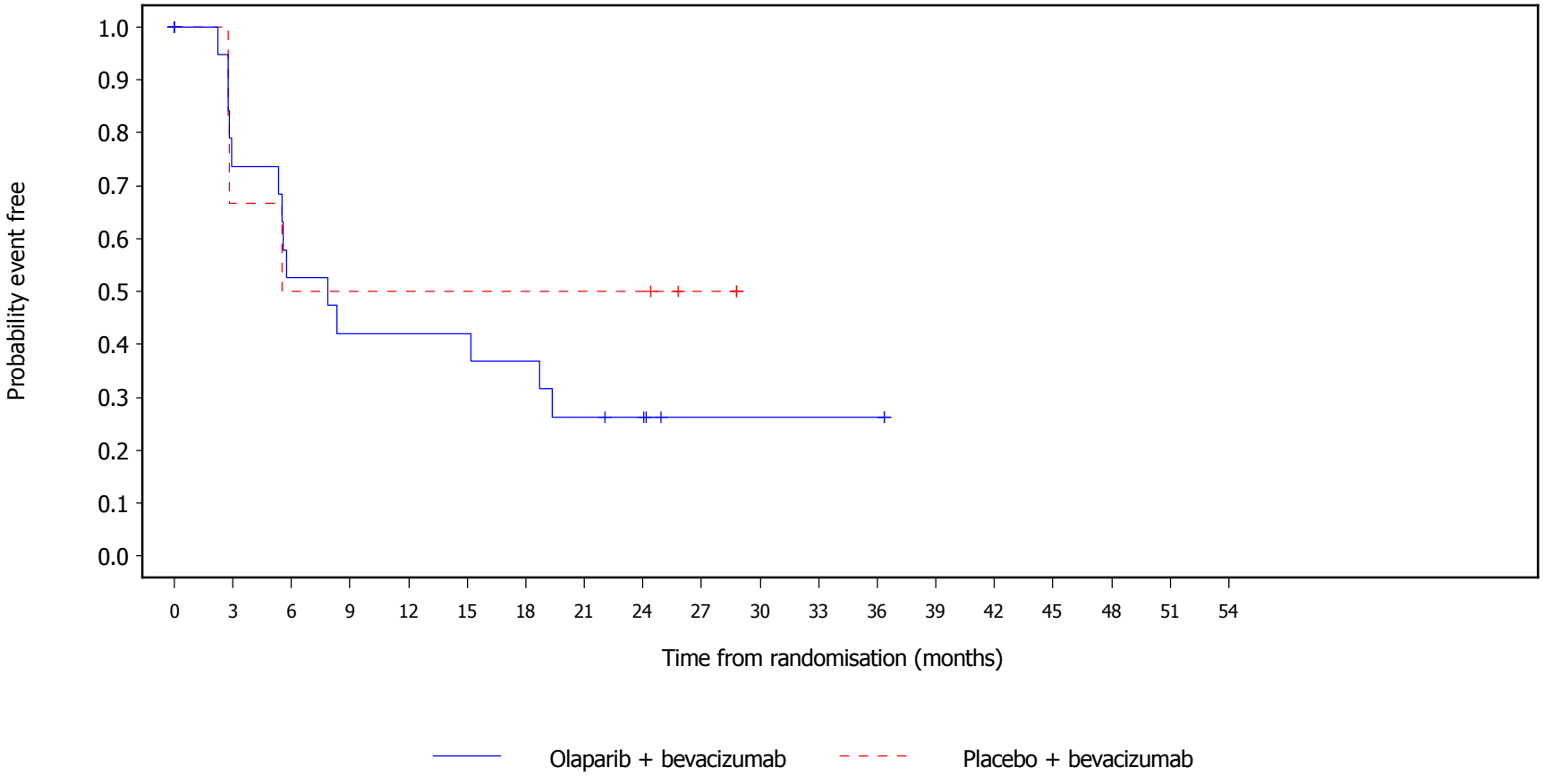


Number of patients at risk:

99	82	75	67	60	58	52	45	32	6	5	3	1	0	0	0	0	0	0 Olaparib + bevacizumab
45	38	34	32	32	29	25	21	14	2	0	0	0	0	0	0	0	0	0 Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.15 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Pain time to clinically meaningful deterioration for Status somatic BRCA mutations=sBRCAm
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

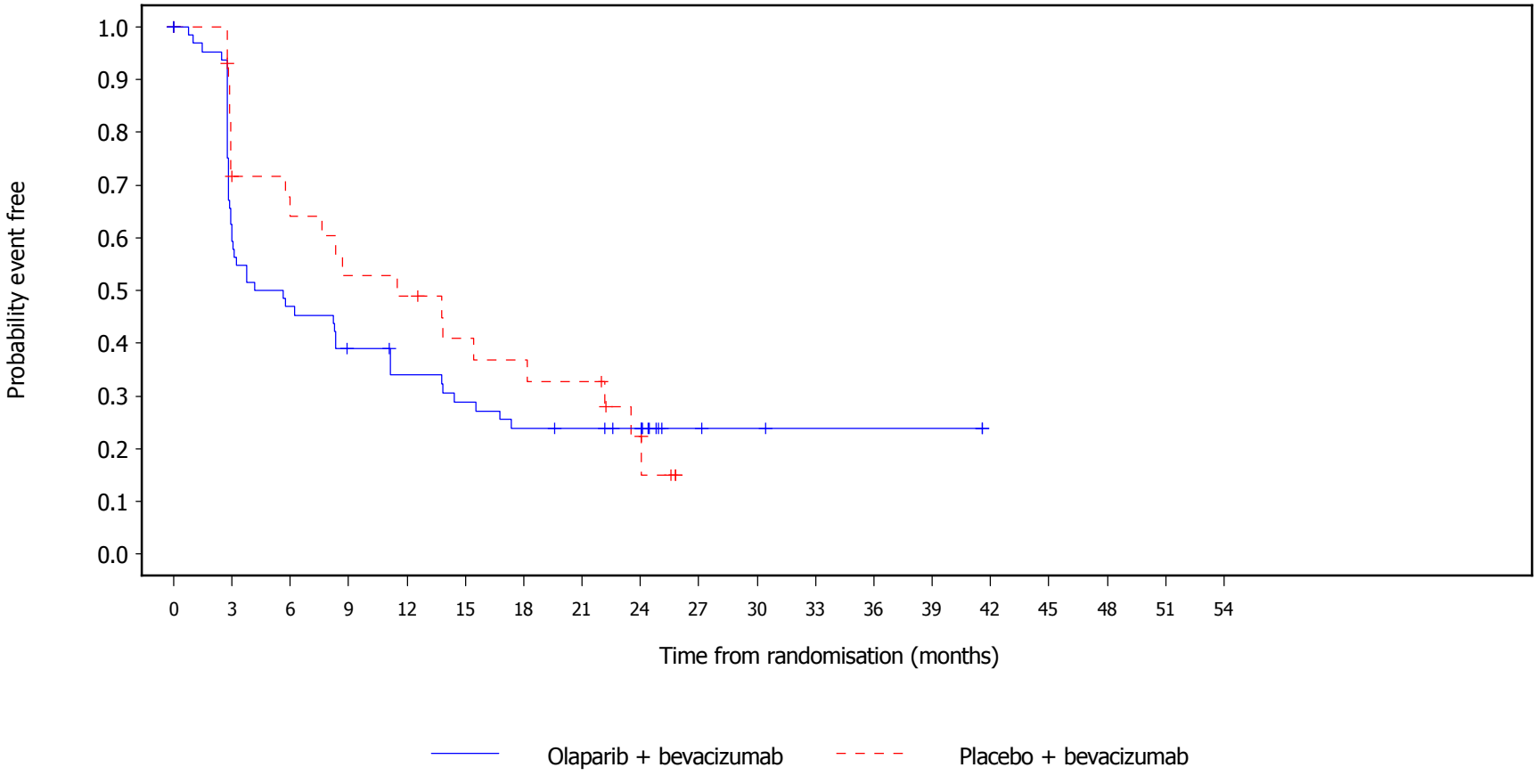


Number of patients at risk:

22	14	10	8	8	8	7	5	4	1	1	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
7	4	3	3	3	3	3	3	3	1	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.16 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Pain time to clinically meaningful deterioration for Status somatic BRCA mutations=gBRCAm
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

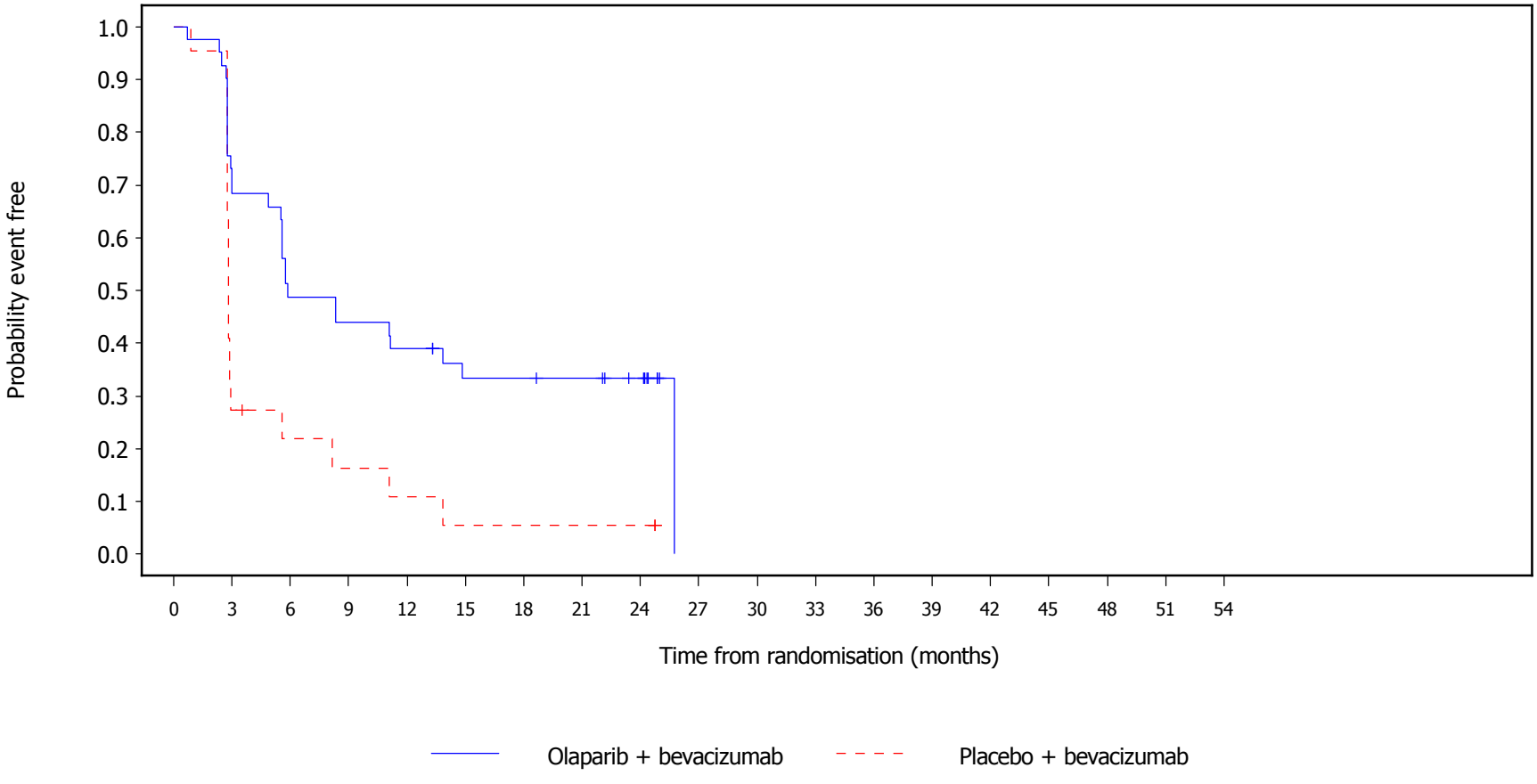


Number of patients at risk:

66	38	30	24	20	17	14	13	11	3	2	1	1	1	0	0	0	0	0	Olaparib + bevacizumab
31	20	17	14	13	10	9	8	4	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.17 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Pain time to clinically meaningful deterioration for Status somatic BRCA mutations=Non-BRCAm
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

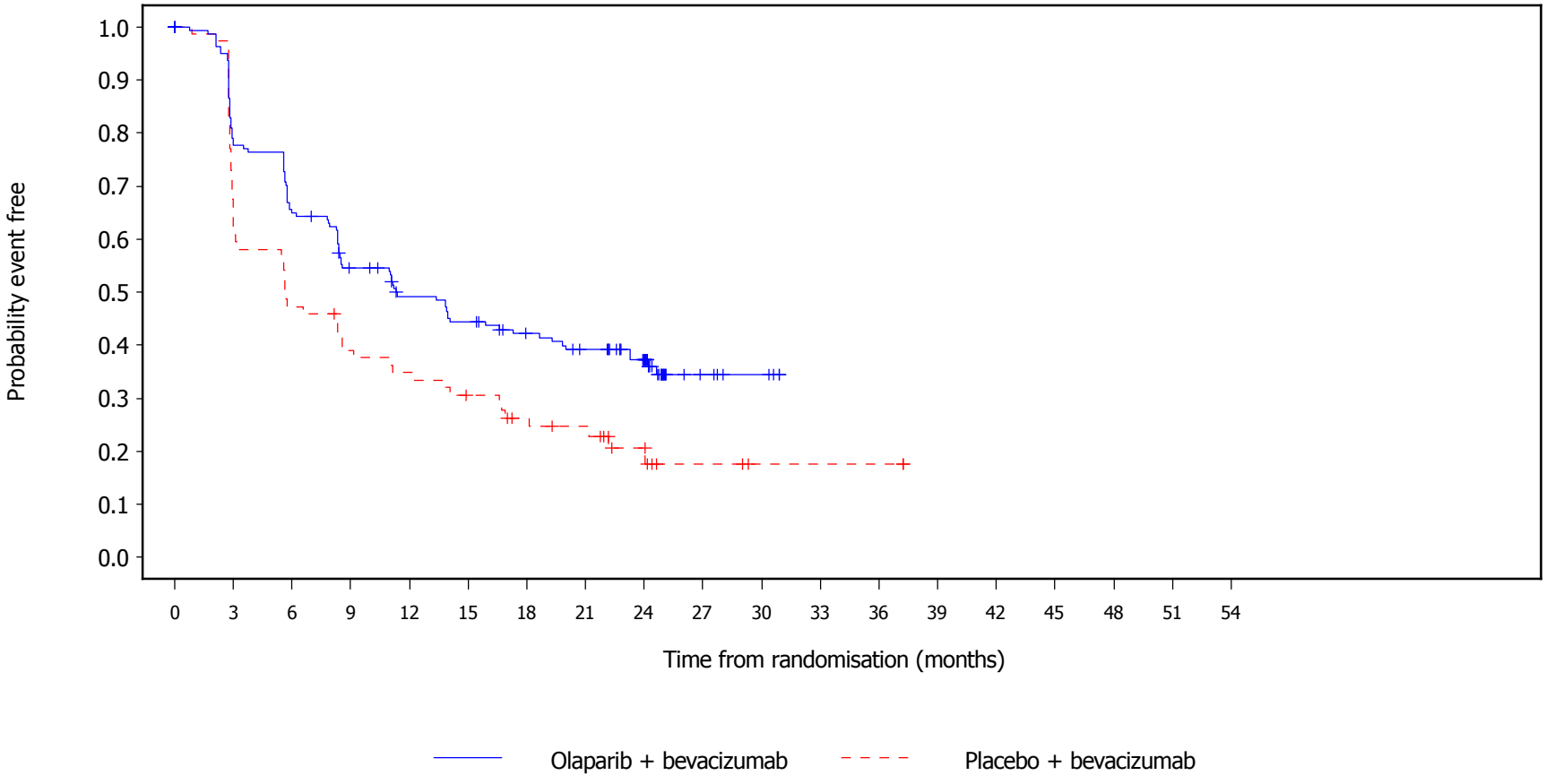


Number of patients at risk:

41	29	20	18	16	12	12	11	8	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
22	6	4	3	2	1	1	1	1	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.18 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Insomnia time to clinically meaningful deterioration for Cytoreductive surgery outcome=No residue
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

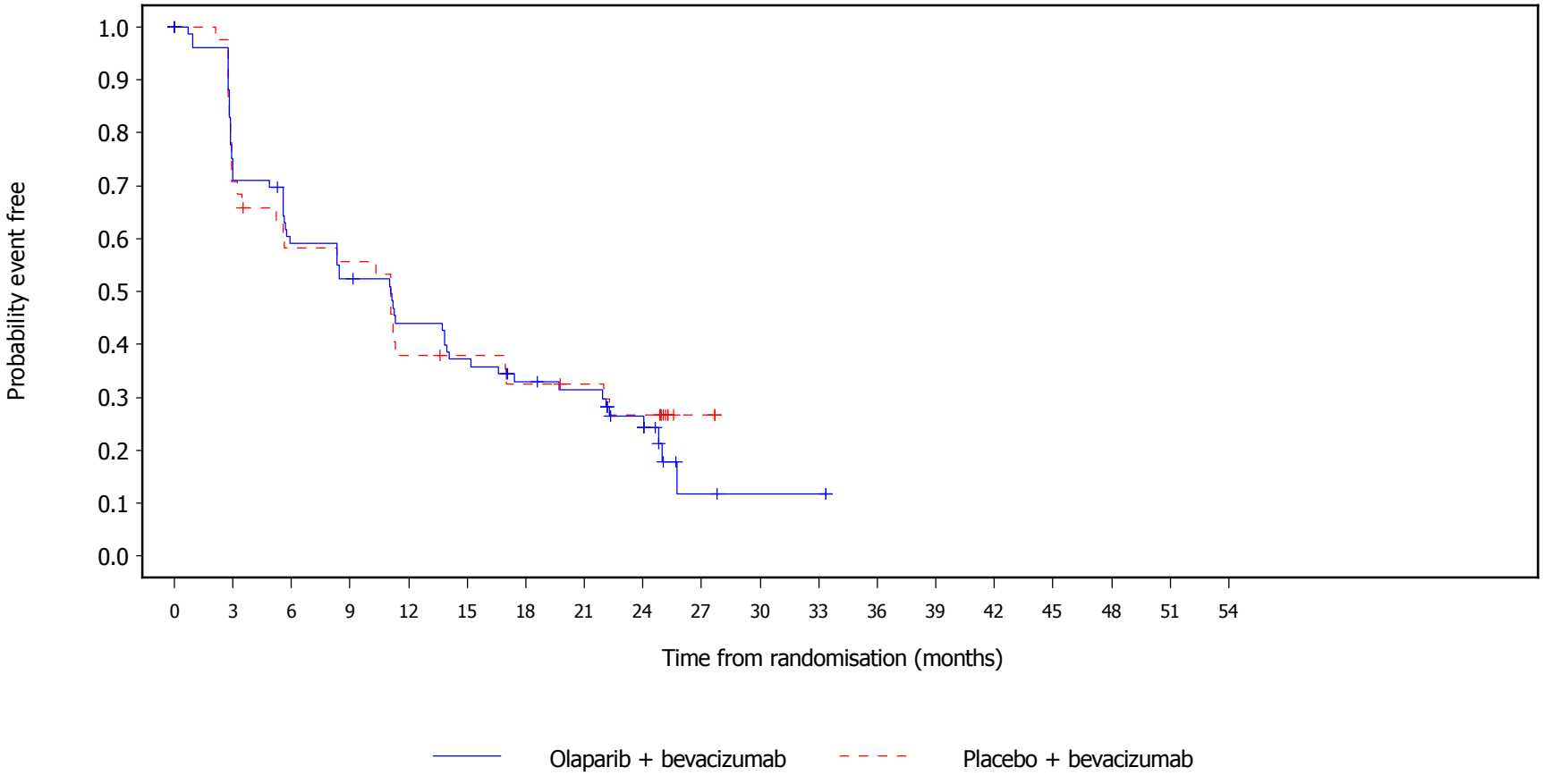


Number of patients at risk:

166	123	102	83	71	64	56	50	37	6	3	0	0	0	0	0	0	0	Olaparib + bevacizumab
80	49	35	28	25	21	16	14	8	3	1	1	1	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.19 PAOLA1: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Insomnia time to clinically meaningful deterioration for Cytoreductive surgery outcome=Residue
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

79	55	44	39	32	27	22	20	13	2	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
44	29	23	22	15	14	12	11	9	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

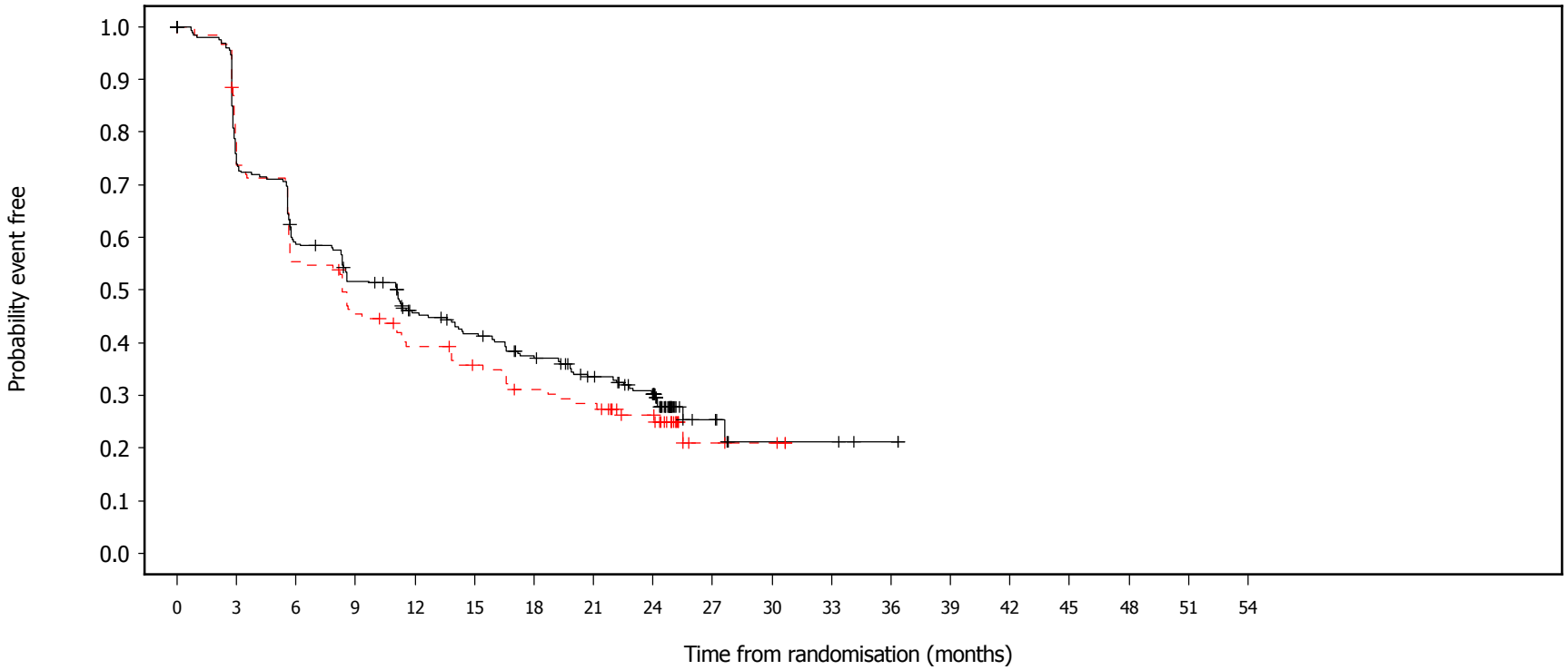
Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Table 2.3.1 PAOLA1: Summary of analysis of time to worsening in EORTC QLQ-OV28 symptom and single item scales
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI	255	169 (66.3)	11.1 (8.3,14.0)	132	89 (67.4)	8.3 (5.7,11.3)	0.88	0.68, 1.15	0.3509
EORTC QLQ-OV28 Symptom scale/items: Body image	255	126 (49.4)	21.9 (12.7, NE)	132	71 (53.8)	18.7 (11.5,25.1)	0.93	0.70, 1.26	0.6383
EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects	255	135 (52.9)	17.9 (12.0,24.6)	132	82 (62.1)	11.1 (8.3,16.6)	0.75	0.57, 0.997	0.0450*
EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment	255	134 (52.5)	12.2 (8.3,24.1)	132	65 (49.2)	17.5 (11.2, NE)	1.15	0.86, 1.57	0.3624
EORTC QLQ-OV28 Symptom scale/items: Hormonal	255	135 (52.9)	19.1 (14.3,24.2)	132	76 (57.6)	11.3 (5.6,19.1)	0.75	0.56, 0.996	0.0462*
EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy	255	114 (44.7)	25.3 (18.6, NE)	132	58 (43.9)	23.0 (12.7, NE)	0.93	0.68, 1.29	0.6541
EORTC QLQ-OV28 Symptom scale/items: Other single items	255	127 (49.8)	21.9 (16.6,25.7)	132	64 (48.5)	19.4 (16.4, NE)	1.01	0.75, 1.38	0.9536

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.

Figure 2.3.2.1 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

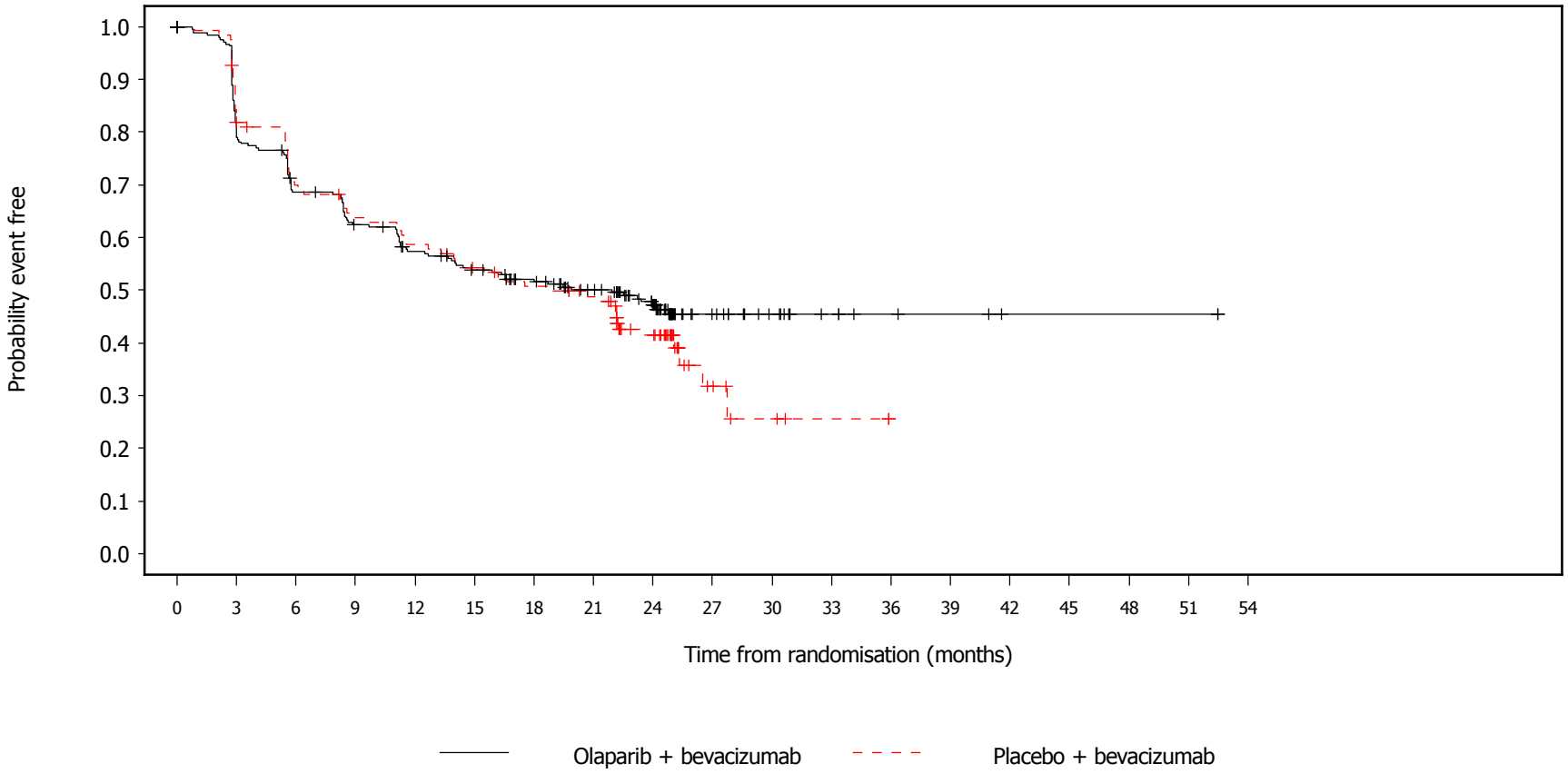


Number of patients at risk:

255	182	143	124	102	91	79	65	51	8	3	3	1	0	0	0	0	0	0	Olaparib + bevacizumab
132	92	67	54	45	39	33	30	22	3	2	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.3.2.2 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Body image time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

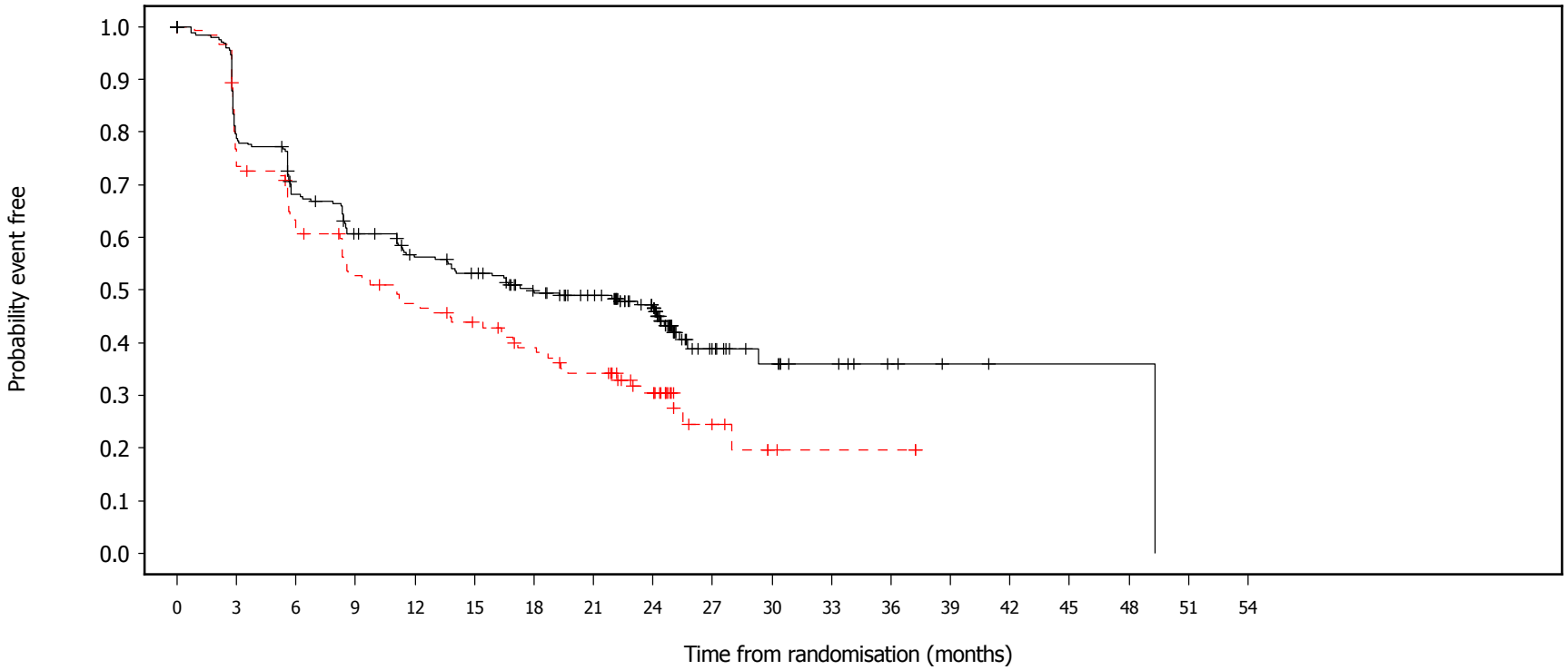


Number of patients at risk:

255	194	165	148	133	122	111	97	73	21	13	7	4	3	1	1	1	1	0	Olaparib + bevacizumab
132	101	82	74	68	61	56	51	33	7	3	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.3.2.3 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

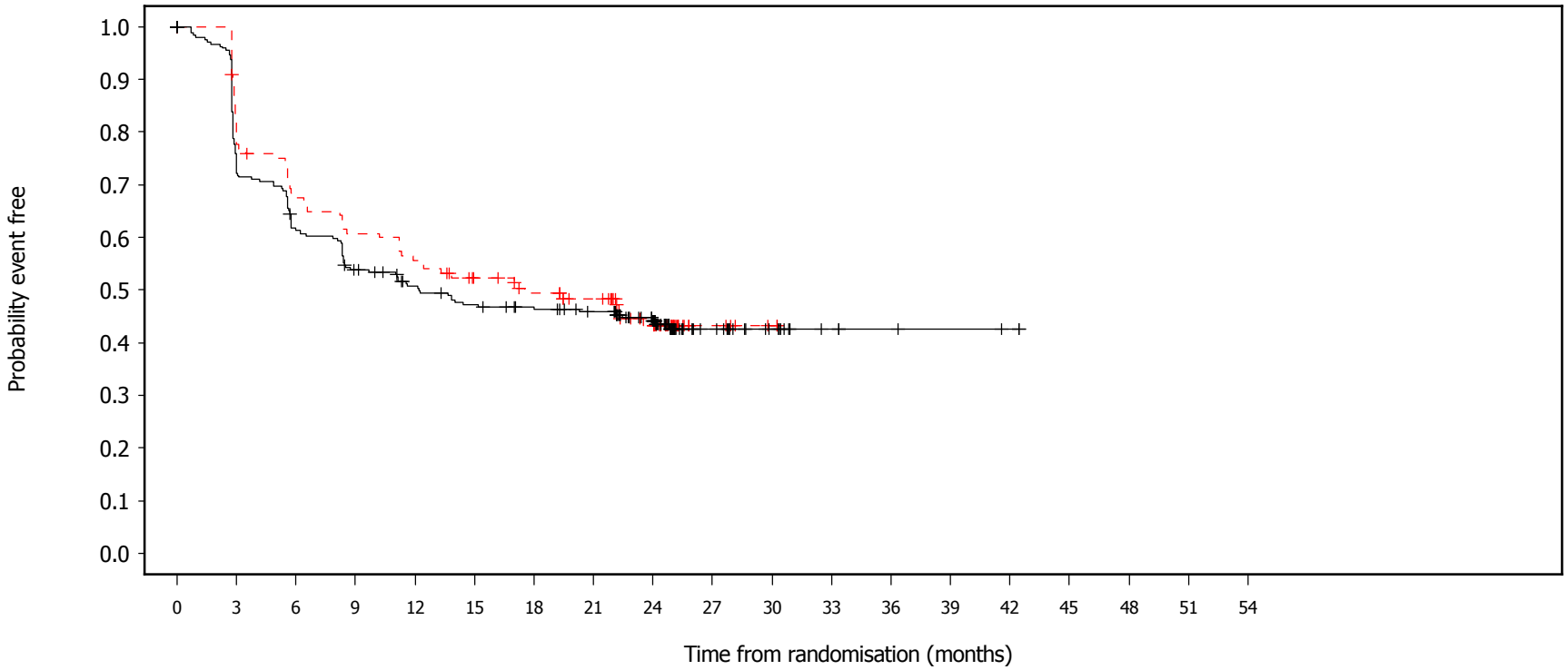


Number of patients at risk:

255	194	164	143	128	119	104	94	70	19	12	8	4	2	1	1	1	0	0	Olaparib + bevacizumab
132	90	73	60	53	47	40	34	23	6	2	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.3.2.4 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

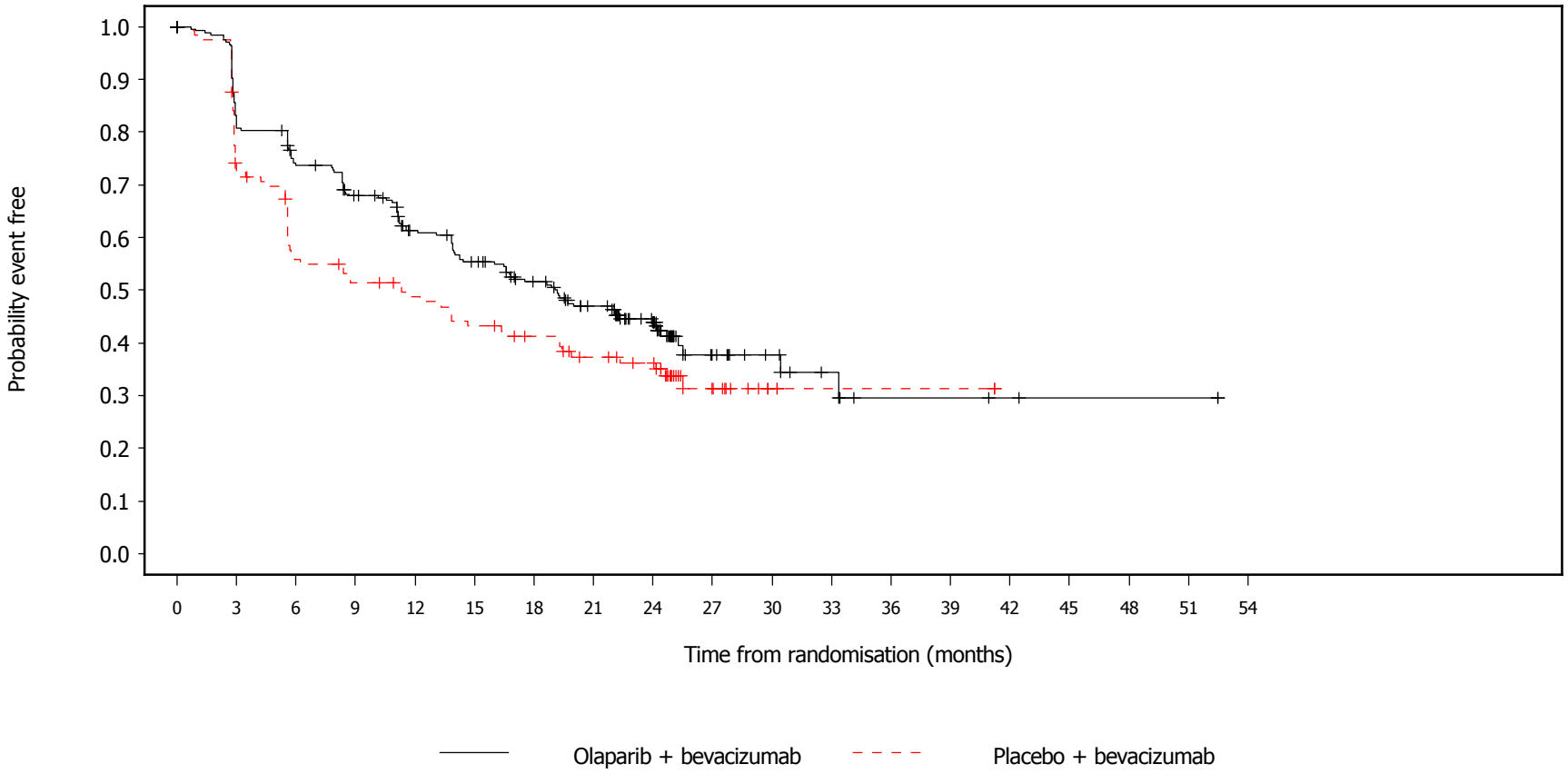


Number of patients at risk:

255	178	148	127	114	105	100	93	71	23	12	5	3	2	1	0	0	0	0	Olaparib + bevacizumab
132	98	80	72	66	57	51	45	31	5	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.3.2.5 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Hormonal time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

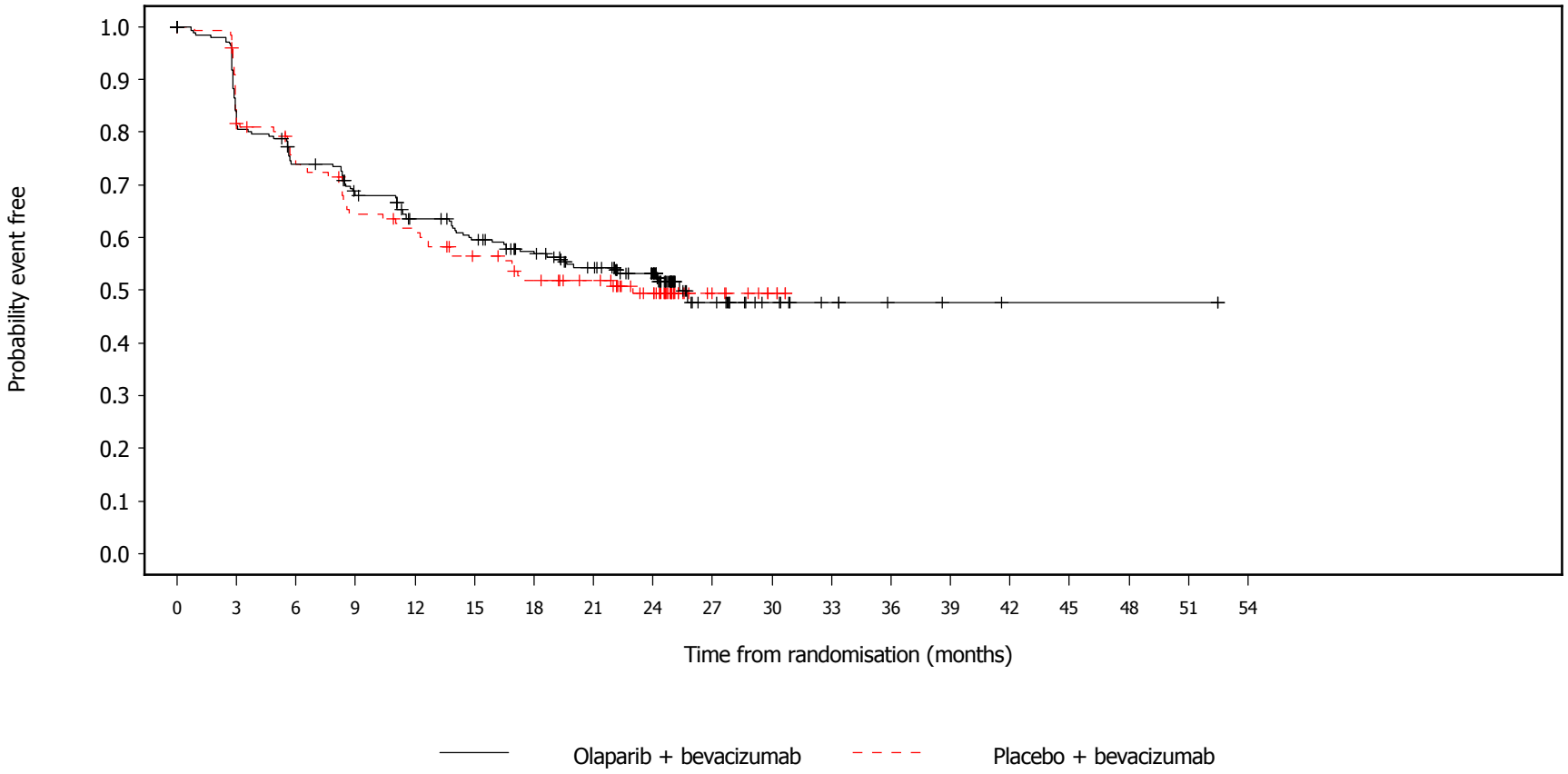


Number of patients at risk:

255	200	177	159	135	120	104	87	62	18	12	7	3	3	2	1	1	1	0	Olaparib + bevacizumab
132	87	64	58	53	47	42	35	31	12	3	1	1	1	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.3.2.6 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

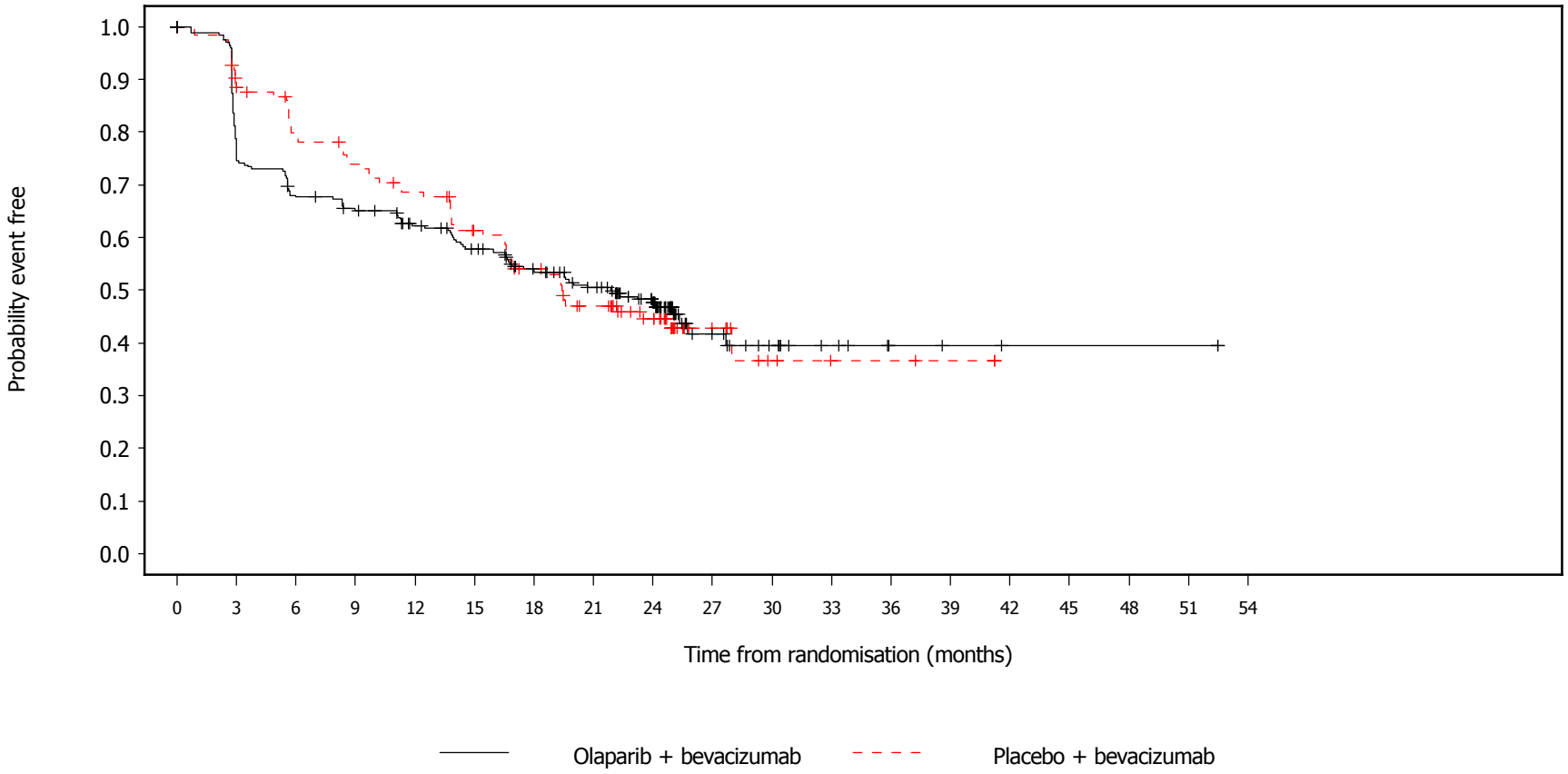


Number of patients at risk:

255	202	178	161	144	133	120	105	81	21	11	6	3	2	1	1	1	1	0	Olaparib + bevacizumab
132	99	87	74	69	61	54	49	36	9	3	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.3.2.7 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Other single items time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	186	164	156	142	128	112	98	72	19	12	7	3	2	1	1	1	1	0	Olaparib + bevacizumab
132	108	92	85	78	66	56	45	33	10	4	2	2	1	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Table 2.3.3.1 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	59 (64.1)	11.4 (5.8,18.0)	48	37 (77.1)	5.8 (5.6,11.1)	0.62	0.41, 0.94	0.0254*
NED/CR [IDS]	74	47 (63.5)	8.3 (5.6,20.0)	38	21 (55.3)	13.8 (5.6, NE)	1.28	0.78, 2.19	0.3372
NED/CR [Chemo]	40	27 (67.5)	11.3 (5.6,19.2)	20	13 (65.0)	8.5 (5.6, NE)	1.13	0.59, 2.25	0.7253
PR	49	36 (73.5)	8.5 (5.6,12.2)	26	18 (69.2)	7.9 (2.9,16.6)	0.89	0.51, 1.60	0.6861
Interaction p-value									0.1444
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	104 (69.3)	8.5 (5.7,13.6)	65	47 (72.3)	8.3 (5.6,11.5)	0.96	0.68, 1.36	0.8116
non-tBRCAm	105	65 (61.9)	11.9 (8.3,19.8)	67	42 (62.7)	8.5 (5.6,16.4)	0.82	0.56, 1.22	0.3288
Interaction p-value									0.5637
First line treatment outcome (eCRF)									
NED [PDS]	89	56 (62.9)	12.7 (5.8,18.0)	47	35 (74.5)	7.0 (5.6,11.1)	0.65	0.43, 1.01	0.0546
NED/CR [IDS]	74	49 (66.2)	8.3 (5.6,17.3)	32	16 (50.0)	13.9 (5.6, NE)	1.61	0.94, 2.93	0.0847
NED/CR [Chemo]	39	25 (64.1)	11.2 (5.6,19.2)	18	10 (55.6)	10.3 (5.6, NE)	1.30	0.64, 2.83	0.4797
PR	50	37 (74.0)	9.8 (5.7,16.6)	34	27 (79.4)	7.9 (2.9,11.3)	0.72	0.44, 1.20	0.2082
Interaction p-value									0.0406*
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	103 (70.1)	8.4 (5.7,12.7)	67	47 (70.1)	8.3 (5.7,11.5)	1.01	0.72, 1.43	0.9721
non-tBRCAm	108	66 (61.1)	12.2 (8.5,19.9)	65	42 (64.6)	8.3 (5.6,14.0)	0.78	0.53, 1.16	0.2125
Interaction p-value									0.3352
Age group									
<65 years	185	130 (70.3)	8.5 (5.7,12.2)	98	67 (68.4)	8.3 (5.7,11.4)	1.01	0.75, 1.36	0.9708
>=65 years	70	39 (55.7)	16.6 (8.5, NE)	34	22 (64.7)	8.5 (3.5,18.7)	0.68	0.41, 1.16	0.1523
Interaction p-value									0.2016

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubpr_v3.sas ettesubpr_v3baa 25NOV2020:12:08 khcs324

Table 2.3.3.1 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	118 (64.8)	11.1 (8.3,15.2)	90	61 (67.8)	8.5 (5.6,11.3)	0.89	0.66, 1.22	0.4623
IV	73	51 (69.9)	8.5 (5.6,13.6)	42	28 (66.7)	8.3 (5.6,15.4)	0.94	0.60, 1.51	0.7992
Interaction p-value									0.8415
Region									
Europe	245	162 (66.1)	11.1 (8.3,14.0)	126	86 (68.3)	8.3 (5.7,11.1)	0.87	0.67, 1.13	0.2857
Japan	10	7 (70.0)	8.3 (3.1, NE)	6	3 (50.0)	24.0 (5.5, NE)	2.01	0.56, 9.32	0.2947
Interaction p-value									0.2136
ECOG performance status at Baseline									
(0) Normal activity	190	131 (68.9)	8.6 (6.0,12.2)	100	69 (69.0)	8.3 (5.6,11.1)	0.94	0.71, 1.26	0.6801
(1) Restricted activity	61	35 (57.4)	14.2 (8.3, NE)	31	20 (64.5)	11.3 (5.6,21.2)	0.79	0.46, 1.39	0.4037
Interaction p-value									0.5823
Baseline CA-125 value									
<=ULN	228	151 (66.2)	11.1 (8.3,14.0)	118	80 (67.8)	8.3 (5.7,11.5)	0.90	0.69, 1.18	0.4305
>ULN	27	18 (66.7)	11.2 (5.6,20.0)	14	9 (64.3)	11.1 (2.9, NE)	0.97	0.45, 2.27	0.9461
Interaction p-value									0.8488
Histological grade									
High grade	255	169 (66.3)	11.1 (8.3,14.0)	132	89 (67.4)	8.3 (5.7,11.3)	0.90	0.70, 1.17	0.4429
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	107 (64.5)	11.1 (6.2,15.9)	80	52 (65.0)	8.5 (5.6,13.9)	0.93	0.67, 1.30	0.6490
Residue	79	57 (72.2)	11.1 (5.7,15.2)	44	31 (70.5)	8.3 (5.6,14.0)	0.94	0.61, 1.48	0.7985
Interaction p-value									0.9425

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubpr_v3.sas ettesubpr_v3baa 25NOV2020:12:08 khcs324

Table 2.3.3.1 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	99 (67.8)	11.1 (6.0,14.2)	79	57 (72.2)	8.3 (5.6,11.1)	0.79	0.57, 1.10	0.1636
Interval	99	65 (65.7)	9.7 (5.7,19.4)	45	26 (57.8)	11.1 (5.6, NE)	1.23	0.79, 1.98	0.3598
Interaction p-value									0.1164
Myriad tumour BRCA mutation status									
tBRCAm	158	105 (66.5)	11.0 (6.0,14.4)	77	51 (66.2)	8.5 (5.7,13.9)	0.94	0.68, 1.32	0.7189
Non-tBRCAm	97	64 (66.0)	11.1 (5.8,16.0)	55	38 (69.1)	8.1 (5.5,14.0)	0.86	0.58, 1.29	0.4480
Interaction p-value									0.7221
Status somatic BRCA mutations									
sBRCAm	22	12 (54.5)	16.6 (2.8, NE)	7	3 (42.9)	NE (NE, NE)	1.42	0.45, 6.25	0.5714
gBRCAm	66	48 (72.7)	6.0 (5.6,13.6)	31	24 (77.4)	8.8 (5.6,13.9)	0.93	0.58, 1.55	0.7875
Non-BRCAm	41	30 (73.2)	11.0 (5.6,19.8)	22	18 (81.8)	5.7 (2.9,13.8)	0.74	0.42, 1.36	0.3256
Interaction p-value									0.6128

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.2 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Body image time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	37 (40.2)	NE (NE, NE)	48	26 (54.2)	11.3 (3.0, NE)	0.55	0.33, 0.92	0.0224*
NED/CR [IDS]	74	41 (55.4)	14.8 (8.3, NE)	38	19 (50.0)	22.2 (8.8,26.5)	1.31	0.77, 2.31	0.3184
NED/CR [Chemo]	40	19 (47.5)	23.4 (11.6, NE)	20	12 (60.0)	12.4 (5.2, NE)	0.82	0.40, 1.74	0.6015
PR	49	29 (59.2)	11.2 (5.6,24.8)	26	14 (53.8)	17.5 (11.1,25.4)	1.24	0.67, 2.42	0.5046
Interaction p-value									0.0873
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	73 (48.7)	22.5 (11.6, NE)	65	33 (50.8)	21.2 (11.3, NE)	0.95	0.63, 1.45	0.8049
non-tBRCAm	105	53 (50.5)	19.5 (11.1, NE)	67	38 (56.7)	14.0 (8.5,25.4)	0.85	0.56, 1.30	0.4504
Interaction p-value									0.7143
First line treatment outcome (eCRF)									
NED [PDS]	89	36 (40.4)	NE (NE, NE)	47	25 (53.2)	11.5 (5.6, NE)	0.58	0.35, 0.98	0.0405*
NED/CR [IDS]	74	38 (51.4)	19.9 (8.3, NE)	32	17 (53.1)	22.0 (8.3,26.5)	1.08	0.62, 1.96	0.7991
NED/CR [Chemo]	39	20 (51.3)	21.9 (5.6, NE)	18	10 (55.6)	13.3 (3.5, NE)	0.92	0.44, 2.05	0.8303
PR	50	30 (60.0)	11.2 (5.7,24.8)	34	18 (52.9)	18.7 (12.7, NE)	1.36	0.76, 2.48	0.2999
Interaction p-value									0.1661
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	71 (48.3)	23.2 (12.5, NE)	67	34 (50.7)	21.2 (11.2, NE)	0.92	0.62, 1.40	0.6935
non-tBRCAm	108	55 (50.9)	18.7 (11.1, NE)	65	37 (56.9)	16.6 (8.5,25.4)	0.88	0.58, 1.34	0.5332
Interaction p-value									0.8653
Age group									
<65 years	185	90 (48.6)	22.5 (11.6, NE)	98	53 (54.1)	20.7 (11.1,25.4)	0.86	0.61, 1.21	0.3724
>=65 years	70	36 (51.4)	16.6 (8.4, NE)	34	18 (52.9)	18.7 (6.4, NE)	0.99	0.57, 1.78	0.9717
Interaction p-value									0.6649

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.2 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Body image time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	87 (47.8)	23.4 (13.7, NE)	90	48 (53.3)	18.7 (8.8,27.8)	0.85	0.60, 1.22	0.3652
IV	73	39 (53.4)	14.8 (8.4, NE)	42	23 (54.8)	20.7 (9.7,25.4)	1.00	0.60, 1.70	0.9950
Interaction p-value									0.6090
Region									
Europe	245	122 (49.8)	19.9 (12.5, NE)	126	68 (54.0)	17.5 (11.5,25.1)	0.89	0.66, 1.20	0.4241
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	0.98	0.22, 4.96	0.9759
Interaction p-value									0.8990
ECOG performance status at Baseline									
(0) Normal activity	190	95 (50.0)	18.0 (11.3, NE)	100	55 (55.0)	20.7 (11.2,25.4)	0.92	0.66, 1.29	0.6149
(1) Restricted activity	61	30 (49.2)	23.4 (8.4, NE)	31	16 (51.6)	17.5 (6.1, NE)	0.87	0.48, 1.64	0.6597
Interaction p-value									0.8836
Baseline CA-125 value									
<=ULN	228	112 (49.1)	22.5 (13.7, NE)	118	64 (54.2)	16.6 (11.1,25.1)	0.85	0.63, 1.16	0.3098
>ULN	27	14 (51.9)	11.3 (3.1, NE)	14	7 (50.0)	21.2 (2.9, NE)	1.30	0.54, 3.44	0.5632
Interaction p-value									0.3776
Histological grade									
High grade	255	126 (49.4)	21.9 (12.7, NE)	132	71 (53.8)	18.7 (11.5,25.1)	0.89	0.67, 1.20	0.4356
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	76 (45.8)	NE (NE, NE)	80	43 (53.8)	20.7 (8.3,26.5)	0.76	0.52, 1.11	0.1522
Residue	79	44 (55.7)	16.4 (8.4,24.8)	44	24 (54.5)	18.7 (11.2,25.4)	1.12	0.69, 1.86	0.6618
Interaction p-value									0.2202

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.2 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Body image time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	67 (45.9)	NE (NE, NE)	79	42 (53.2)	14.0 (8.3, NE)	0.74	0.50, 1.09	0.1248
Interval	99	53 (53.5)	16.6 (9.7,24.0)	45	25 (55.6)	22.1 (8.8,25.4)	1.11	0.70, 1.81	0.6735
Interaction p-value									0.1894
Myriad tumour BRCA mutation status									
tBRCAm	158	78 (49.4)	21.9 (11.3, NE)	77	39 (50.6)	21.2 (11.2,27.8)	0.94	0.64, 1.39	0.7375
Non-tBRCAm	97	48 (49.5)	19.9 (9.7, NE)	55	32 (58.2)	16.6 (9.7,25.4)	0.84	0.54, 1.32	0.4354
Interaction p-value									0.7067
Status somatic BRCA mutations									
sBRCAm	22	5 (22.7)	NE (NE, NE)	7	3 (42.9)	NE (NE, NE)	0.43	0.11, 2.11	0.2737
gBRCAm	66	37 (56.1)	12.5 (8.3, NE)	31	16 (51.6)	22.3 (11.3, NE)	1.23	0.70, 2.28	0.4784
Non-BRCAm	41	21 (51.2)	19.9 (5.8, NE)	22	13 (59.1)	16.6 (9.7, NE)	0.93	0.47, 1.91	0.8398
Interaction p-value									0.4216

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.3 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	51 (55.4)	17.9 (11.4,49.3)	48	26 (54.2)	11.4 (5.7,25.5)	0.81	0.51, 1.31	0.3798
NED/CR [IDS]	74	40 (54.1)	17.3 (6.3,29.3)	38	23 (60.5)	8.3 (5.5,25.1)	0.83	0.50, 1.41	0.4900
NED/CR [Chemo]	40	19 (47.5)	25.0 (5.6, NE)	20	16 (80.0)	7.1 (2.9,19.1)	0.50	0.26, 0.98	0.0442*
PR	49	25 (51.0)	13.7 (8.3, NE)	26	17 (65.4)	13.8 (8.3,19.4)	0.65	0.35, 1.22	0.1765
Interaction p-value									0.6138
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	71 (47.3)	24.3 (16.5, NE)	65	40 (61.5)	16.6 (5.8,22.2)	0.64	0.44, 0.95	0.0269*
non-tBRCAm	105	64 (61.0)	11.3 (5.8,22.3)	67	42 (62.7)	9.7 (6.0,12.7)	0.86	0.59, 1.28	0.4652
Interaction p-value									0.2823
First line treatment outcome (eCRF)									
NED [PDS]	89	47 (52.8)	18.0 (11.4,49.3)	47	25 (53.2)	16.4 (5.8, NE)	0.79	0.49, 1.30	0.3493
NED/CR [IDS]	74	39 (52.7)	17.3 (6.3, NE)	32	19 (59.4)	8.8 (5.5, NE)	0.83	0.49, 1.47	0.5075
NED/CR [Chemo]	39	17 (43.6)	25.0 (8.6, NE)	18	13 (72.2)	11.1 (3.5,19.1)	0.50	0.25, 1.06	0.0706
PR	50	30 (60.0)	11.3 (8.3,25.7)	34	24 (70.6)	9.7 (5.6,19.4)	0.71	0.42, 1.23	0.2177
Interaction p-value									0.7295
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	70 (47.6)	24.3 (15.9, NE)	67	41 (61.2)	15.4 (5.8,22.2)	0.64	0.44, 0.95	0.0271*
non-tBRCAm	108	65 (60.2)	11.3 (6.8,22.3)	65	41 (63.1)	8.6 (5.7,13.8)	0.85	0.57, 1.26	0.4087
Interaction p-value									0.3210
Age group									
<65 years	185	96 (51.9)	18.0 (11.4,25.4)	98	59 (60.2)	11.4 (6.0,19.4)	0.75	0.55, 1.05	0.0911
>=65 years	70	39 (55.7)	16.7 (8.4,49.3)	34	23 (67.6)	8.3 (5.8,13.8)	0.63	0.38, 1.07	0.0835
Interaction p-value									0.5529

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.3 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	103 (56.6)	16.5 (11.2,24.1)	90	54 (60.0)	12.3 (8.3,19.4)	0.87	0.63, 1.21	0.3975
IV	73	32 (43.8)	25.0 (8.6, NE)	42	28 (66.7)	8.3 (3.0,18.1)	0.45	0.27, 0.76	0.0027*
Interaction p-value									0.0358*
Region									
Europe	245	130 (53.1)	17.9 (12.0,24.6)	126	78 (61.9)	11.2 (8.3,17.0)	0.72	0.55, 0.96	0.0259*
Japan	10	5 (50.0)	8.4 (2.8, NE)	6	4 (66.7)	5.7 (2.8, NE)	0.65	0.17, 2.62	0.5243
Interaction p-value									0.8759
ECOG performance status at Baseline									
(0) Normal activity	190	99 (52.1)	19.3 (12.0,25.0)	100	65 (65.0)	9.3 (6.0,16.6)	0.68	0.50, 0.94	0.0194*
(1) Restricted activity	61	32 (52.5)	13.8 (6.8, NE)	31	17 (54.8)	12.3 (5.7,22.9)	0.79	0.45, 1.46	0.4454
Interaction p-value									0.6628
Baseline CA-125 value									
<=ULN	228	119 (52.2)	21.9 (13.6,25.0)	118	71 (60.2)	11.4 (8.2,18.7)	0.73	0.55, 0.99	0.0403*
>ULN	27	16 (59.3)	8.4 (5.6,29.3)	14	11 (78.6)	9.3 (2.8,17.0)	0.63	0.29, 1.39	0.2454
Interaction p-value									0.7205
Histological grade									
High grade	255	135 (52.9)	17.9 (12.0,24.6)	132	82 (62.1)	11.1 (8.3,16.6)	0.72	0.55, 0.95	0.0205*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	88 (53.0)	17.9 (11.5,29.3)	80	45 (56.3)	11.2 (5.8,19.7)	0.80	0.56, 1.16	0.2410
Residue	79	40 (50.6)	24.2 (8.6, NE)	44	33 (75.0)	8.6 (5.6,18.7)	0.54	0.34, 0.86	0.0104*
Interaction p-value									0.1848

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.3 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	73 (50.0)	24.1 (13.8,49.3)	79	49 (62.0)	8.6 (5.7,18.7)	0.62	0.43, 0.89	0.0110*
Interval	99	55 (55.6)	16.6 (8.3,24.3)	45	29 (64.4)	11.1 (5.6,23.5)	0.82	0.53, 1.31	0.4046
Interaction p-value									0.3282
Myriad tumour BRCA mutation status									
tBRCAm	158	75 (47.5)	24.3 (15.9, NE)	77	43 (55.8)	17.0 (8.3,22.9)	0.74	0.51, 1.08	0.1204
Non-tBRCAm	97	60 (61.9)	11.2 (6.8,22.3)	55	39 (70.9)	8.3 (3.5,12.3)	0.71	0.47, 1.07	0.0990
Interaction p-value									0.8760
Status somatic BRCA mutations									
sBRCAm	22	12 (54.5)	11.1 (2.8, NE)	7	5 (71.4)	12.6 (2.8, NE)	0.78	0.29, 2.44	0.6400
gBRCAm	66	35 (53.0)	24.2 (8.5,29.3)	31	17 (54.8)	17.2 (5.6,25.1)	0.82	0.46, 1.50	0.5020
Non-BRCAm	41	26 (63.4)	11.1 (5.7,49.3)	22	18 (81.8)	2.9 (2.8,12.3)	0.46	0.25, 0.86	0.0163*
Interaction p-value									0.3840

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.

Table 2.3.3.4 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	35 (38.0)	NE (NE, NE)	48	25 (52.1)	11.3 (5.6, NE)	0.60	0.36, 1.01	0.0525
NED/CR [IDS]	74	47 (63.5)	5.7 (3.0, 8.7)	38	15 (39.5)	NE (NE, NE)	2.34	1.34, 4.33	0.0023*
NED/CR [Chemo]	40	22 (55.0)	8.3 (3.1, NE)	20	12 (60.0)	12.6 (5.7, NE)	1.18	0.59, 2.46	0.6456
PR	49	30 (61.2)	12.1 (6.2,22.1)	26	13 (50.0)	17.0 (3.0, NE)	1.03	0.55, 2.04	0.9310
Interaction p-value									0.0059*
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	79 (52.7)	13.7 (8.3, NE)	65	33 (50.8)	19.4 (8.2, NE)	1.07	0.72, 1.63	0.7322
non-tBRCAm	105	55 (52.4)	12.1 (6.0, NE)	67	32 (47.8)	17.0 (8.3, NE)	1.16	0.76, 1.82	0.4935
Interaction p-value									0.7907
First line treatment outcome (eCRF)									
NED [PDS]	89	37 (41.6)	NE (NE, NE)	47	25 (53.2)	10.7 (3.0, NE)	0.64	0.38, 1.07	0.0855
NED/CR [IDS]	74	43 (58.1)	7.9 (5.4,24.0)	32	12 (37.5)	NE (NE, NE)	2.06	1.12, 4.09	0.0185*
NED/CR [Chemo]	39	19 (48.7)	11.2 (4.9, NE)	18	10 (55.6)	13.3 (5.5, NE)	1.00	0.47, 2.23	0.9933
PR	50	34 (68.0)	8.4 (5.7,13.7)	34	18 (52.9)	17.0 (8.3, NE)	1.39	0.79, 2.51	0.2551
Interaction p-value									0.0285*
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	78 (53.1)	13.7 (8.3, NE)	67	33 (49.3)	19.4 (8.2, NE)	1.11	0.75, 1.69	0.6103
non-tBRCAm	108	56 (51.9)	12.1 (6.0, NE)	65	32 (49.2)	13.9 (8.3, NE)	1.11	0.73, 1.74	0.6281
Interaction p-value									0.9954
Age group									
<65 years	185	97 (52.4)	12.3 (8.3, NE)	98	47 (48.0)	22.1 (11.2, NE)	1.15	0.82, 1.65	0.4163
>=65 years	70	37 (52.9)	11.5 (5.7, NE)	34	18 (52.9)	12.3 (6.4, NE)	0.98	0.57, 1.76	0.9476
Interaction p-value									0.6326

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.4 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	94 (51.6)	13.8 (8.4, NE)	90	43 (47.8)	22.1 (11.3, NE)	1.18	0.83, 1.71	0.3533
IV	73	40 (54.8)	8.5 (5.7, NE)	42	22 (52.4)	11.2 (5.6, NE)	0.96	0.57, 1.64	0.8661
Interaction p-value									0.5091
Region									
Europe	245	129 (52.7)	12.2 (8.3,24.1)	126	63 (50.0)	17.0 (10.2, NE)	1.09	0.81, 1.48	0.5805
Japan	10	5 (50.0)	22.1 (2.8, NE)	6	2 (33.3)	NE (NE, NE)	1.68	0.36, 11.70	0.5236
Interaction p-value									0.6022
ECOG performance status at Baseline									
(0) Normal activity	190	102 (53.7)	11.2 (8.3,24.9)	100	52 (52.0)	17.0 (6.6, NE)	1.07	0.77, 1.51	0.6879
(1) Restricted activity	61	30 (49.2)	22.5 (8.3, NE)	31	13 (41.9)	NE (NE, NE)	1.27	0.68, 2.52	0.4674
Interaction p-value									0.6475
Baseline CA-125 value									
<=ULN	228	119 (52.2)	12.3 (8.3,24.9)	118	60 (50.8)	17.0 (8.5, NE)	1.06	0.78, 1.45	0.7246
>ULN	27	15 (55.6)	11.2 (5.3, NE)	14	5 (35.7)	NE (NE, NE)	1.72	0.67, 5.29	0.2750
Interaction p-value									0.3540
Histological grade									
High grade	255	134 (52.5)	12.2 (8.3,24.1)	132	65 (49.2)	17.5 (11.2, NE)	1.11	0.83, 1.50	0.4970
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	81 (48.8)	22.5 (8.4, NE)	80	37 (46.3)	22.1 (6.6, NE)	1.06	0.73, 1.59	0.7564
Residue	79	46 (58.2)	11.1 (5.7,22.1)	44	24 (54.5)	17.0 (8.3, NE)	1.21	0.74, 2.01	0.4522
Interaction p-value									0.6934

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.4 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	69 (47.3)	24.1 (11.6, NE)	79	41 (51.9)	12.5 (8.2, NE)	0.84	0.57, 1.24	0.3763
Interval	99	58 (58.6)	8.1 (5.6,12.2)	45	20 (44.4)	23.5 (8.5, NE)	1.71	1.05, 2.91	0.0320*
Interaction p-value									0.0268*
Myriad tumour BRCA mutation status									
tBRCAm	158	83 (52.5)	13.7 (8.3, NE)	77	38 (49.4)	19.4 (8.2, NE)	1.07	0.73, 1.58	0.7377
Non-tBRCAm	97	51 (52.6)	12.1 (6.2, NE)	55	27 (49.1)	13.9 (8.3, NE)	1.17	0.74, 1.89	0.5012
Interaction p-value									0.7614
Status somatic BRCA mutations									
sBRCAm	22	9 (40.9)	24.1 (5.8, NE)	7	2 (28.6)	NE (NE, NE)	1.71	0.44, 11.23	0.4679
gBRCAm	66	42 (63.6)	8.3 (5.6,14.5)	31	11 (35.5)	NE (NE, NE)	2.23	1.19, 4.56	0.0113*
Non-BRCAm	41	17 (41.5)	NE (NE, NE)	22	12 (54.5)	12.3 (5.6, NE)	0.76	0.37, 1.63	0.4734
Interaction p-value									0.1031

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.5 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Hormonal time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	50 (54.3)	17.0 (13.8,33.4)	48	29 (60.4)	8.5 (5.5,19.3)	0.69	0.44, 1.10	0.1124
NED/CR [IDS]	74	39 (52.7)	19.3 (11.1, NE)	38	18 (47.4)	19.4 (5.6, NE)	1.07	0.62, 1.92	0.8006
NED/CR [Chemo]	40	20 (50.0)	21.9 (14.0, NE)	20	14 (70.0)	11.0 (2.9,24.6)	0.61	0.31, 1.23	0.1587
PR	49	26 (53.1)	19.5 (11.2,30.4)	26	15 (57.7)	5.6 (2.9,19.9)	0.62	0.33, 1.20	0.1480
Interaction p-value									0.4717
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	83 (55.3)	19.3 (13.9,24.2)	65	37 (56.9)	11.8 (5.6,24.1)	0.79	0.54, 1.18	0.2472
non-tBRCAm	105	52 (49.5)	18.6 (12.1, NE)	67	39 (58.2)	11.1 (5.6,19.3)	0.69	0.46, 1.06	0.0873
Interaction p-value									0.6425
First line treatment outcome (eCRF)									
NED [PDS]	89	46 (51.7)	18.9 (13.8, NE)	47	29 (61.7)	6.2 (5.5,19.3)	0.61	0.38, 0.97	0.0388*
NED/CR [IDS]	74	40 (54.1)	16.8 (8.7,25.3)	32	15 (46.9)	19.4 (5.6, NE)	1.09	0.62, 2.04	0.7742
NED/CR [Chemo]	39	19 (48.7)	21.9 (14.3, NE)	18	10 (55.6)	13.9 (3.0, NE)	0.74	0.35, 1.66	0.4521
PR	50	28 (56.0)	19.3 (10.9,30.4)	34	22 (64.7)	11.1 (4.7,19.9)	0.69	0.39, 1.21	0.1937
Interaction p-value									0.4754
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	81 (55.1)	19.2 (13.9,24.2)	67	38 (56.7)	11.3 (5.6,24.1)	0.78	0.54, 1.16	0.2201
non-tBRCAm	108	54 (50.0)	19.1 (12.1,33.4)	65	38 (58.5)	11.1 (5.6,19.4)	0.70	0.46, 1.07	0.1001
Interaction p-value									0.7082
Age group									
<65 years	185	101 (54.6)	17.5 (13.9,22.1)	98	60 (61.2)	8.4 (5.5,13.9)	0.68	0.50, 0.95	0.0227*
>=65 years	70	34 (48.6)	24.0 (11.5, NE)	34	16 (47.1)	19.9 (5.7, NE)	0.97	0.54, 1.80	0.9188
Interaction p-value									0.3066

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.5 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Hormonal time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	99 (54.4)	16.8 (13.9,24.0)	90	52 (57.8)	11.3 (5.7,19.4)	0.81	0.58, 1.14	0.2241
IV	73	36 (49.3)	22.3 (13.9, NE)	42	24 (57.1)	13.9 (3.0,24.6)	0.61	0.37, 1.04	0.0706
Interaction p-value									0.3820
Region									
Europe	245	130 (53.1)	19.1 (14.0,24.2)	126	72 (57.1)	11.3 (5.7,16.6)	0.75	0.57, 1.01	0.0579
Japan	10	5 (50.0)	22.1 (2.8, NE)	6	4 (66.7)	12.5 (2.9, NE)	0.62	0.16, 2.52	0.4866
Interaction p-value									0.7836
ECOG performance status at Baseline									
(0) Normal activity	190	94 (49.5)	20.0 (16.0,30.4)	100	60 (60.0)	11.1 (5.6,19.3)	0.68	0.49, 0.95	0.0226*
(1) Restricted activity	61	37 (60.7)	11.5 (8.4,24.0)	31	16 (51.6)	11.3 (5.6, NE)	0.94	0.53, 1.73	0.8269
Interaction p-value									0.3471
Baseline CA-125 value									
<=ULN	228	124 (54.4)	17.5 (13.9,24.0)	118	66 (55.9)	12.3 (5.7,19.4)	0.82	0.61, 1.11	0.1926
>ULN	27	11 (40.7)	25.3 (8.5,25.3)	14	10 (71.4)	5.6 (2.8,24.6)	0.33	0.14, 0.79	0.0142*
Interaction p-value									0.0543
Histological grade									
High grade	255	135 (52.9)	19.1 (14.3,24.2)	132	76 (57.6)	11.3 (5.6,19.1)	0.75	0.57, 0.99	0.0460*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	88 (53.0)	17.5 (13.8,25.3)	80	44 (55.0)	11.8 (5.6,22.3)	0.79	0.55, 1.14	0.1994
Residue	79	42 (53.2)	21.9 (14.3,25.5)	44	28 (63.6)	11.3 (5.6,19.1)	0.68	0.42, 1.11	0.1233
Interaction p-value									0.6431

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.5 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Hormonal time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	77 (52.7)	19.1 (14.0,30.4)	79	49 (62.0)	8.7 (5.6,16.4)	0.64	0.45, 0.92	0.0174*
Interval	99	53 (53.5)	19.3 (11.1,24.4)	45	23 (51.1)	14.7 (5.6, NE)	0.97	0.60, 1.62	0.9141
Interaction p-value									0.1740
Myriad tumour BRCA mutation status									
tBRCAm	158	87 (55.1)	19.3 (13.9,24.2)	77	42 (54.5)	11.3 (5.6,24.1)	0.81	0.56, 1.18	0.2711
Non-tBRCAm	97	48 (49.5)	18.6 (12.1, NE)	55	34 (61.8)	11.1 (5.6,19.3)	0.66	0.43, 1.03	0.0695
Interaction p-value									0.4860
Status somatic BRCA mutations									
sBRCAm	22	9 (40.9)	24.4 (8.3, NE)	7	2 (28.6)	NE (NE, NE)	1.05	0.27, 6.92	0.9455
gBRCAm	66	42 (63.6)	11.2 (5.8,19.5)	31	18 (58.1)	8.5 (4.2,24.1)	0.94	0.55, 1.68	0.8286
Non-BRCAm	41	22 (53.7)	16.6 (7.8, NE)	22	16 (72.7)	12.3 (4.7,19.3)	0.63	0.33, 1.23	0.1706
Interaction p-value									0.6185

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.

Table 2.3.3.6 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	33 (35.9)	NE (NE, NE)	48	22 (45.8)	16.4 (8.4, NE)	0.63	0.37, 1.10	0.1055
NED/CR [IDS]	74	37 (50.0)	18.6 (13.8, NE)	38	13 (34.2)	NE (NE, NE)	1.62	0.88, 3.16	0.1218
NED/CR [Chemo]	40	21 (52.5)	19.4 (3.0, NE)	20	11 (55.0)	17.2 (3.0, NE)	1.07	0.52, 2.30	0.8612
PR	49	23 (46.9)	25.3 (11.1, NE)	26	12 (46.2)	12.7 (3.0, NE)	0.80	0.41, 1.67	0.5401
Interaction p-value									0.1485
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	73 (48.7)	22.1 (14.5, NE)	65	33 (50.8)	13.9 (8.3, NE)	0.87	0.58, 1.33	0.5024
non-tBRCAm	105	41 (39.0)	NE (NE, NE)	67	25 (37.3)	NE (NE, NE)	1.00	0.62, 1.67	0.9865
Interaction p-value									0.6566
First line treatment outcome (eCRF)									
NED [PDS]	89	30 (33.7)	NE (NE, NE)	47	21 (44.7)	16.9 (8.3, NE)	0.61	0.35, 1.09	0.0931
NED/CR [IDS]	74	37 (50.0)	16.6 (11.5, NE)	32	11 (34.4)	NE (NE, NE)	1.62	0.86, 3.34	0.1422
NED/CR [Chemo]	39	24 (61.5)	13.7 (3.0,24.2)	18	10 (55.6)	17.2 (3.0, NE)	1.19	0.58, 2.61	0.6425
PR	50	21 (42.0)	25.7 (11.1, NE)	34	16 (47.1)	17.0 (8.3, NE)	0.77	0.41, 1.50	0.4416
Interaction p-value									0.1290
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	71 (48.3)	22.2 (14.5, NE)	67	33 (49.3)	16.9 (8.3, NE)	0.88	0.59, 1.34	0.5382
non-tBRCAm	108	43 (39.8)	NE (NE, NE)	65	25 (38.5)	NE (NE, NE)	1.01	0.62, 1.67	0.9767
Interaction p-value									0.6736
Age group									
<65 years	185	90 (48.6)	22.2 (15.9, NE)	98	46 (46.9)	17.2 (10.4, NE)	0.95	0.67, 1.36	0.7637
>=65 years	70	24 (34.3)	NE (NE, NE)	34	12 (35.3)	NE (NE, NE)	0.96	0.49, 1.99	0.9099
Interaction p-value									0.9708

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.6 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	79 (43.4)	25.7 (19.4, NE)	90	39 (43.3)	NE (NE, NE)	0.95	0.65, 1.41	0.7936
IV	73	35 (47.9)	19.6 (9.0, NE)	42	19 (45.2)	17.5 (8.7, NE)	0.96	0.56, 1.71	0.8834
Interaction p-value									0.9781
Region									
Europe	245	110 (44.9)	25.3 (18.0, NE)	126	56 (44.4)	21.9 (11.9, NE)	0.92	0.67, 1.28	0.6165
Japan	10	4 (40.0)	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	1.78	0.35, 12.82	0.4957
Interaction p-value									0.4436
ECOG performance status at Baseline									
(0) Normal activity	190	87 (45.8)	24.2 (15.9, NE)	100	46 (46.0)	21.9 (11.0, NE)	0.97	0.68, 1.40	0.8810
(1) Restricted activity	61	25 (41.0)	25.7 (16.6, NE)	31	12 (38.7)	NE (NE, NE)	0.89	0.46, 1.85	0.7529
Interaction p-value									0.8324
Baseline CA-125 value									
<=ULN	228	100 (43.9)	NE (NE, NE)	118	51 (43.2)	NE (NE, NE)	0.93	0.67, 1.31	0.6756
>ULN	27	14 (51.9)	19.6 (5.6,25.3)	14	7 (50.0)	17.0 (6.6, NE)	1.14	0.47, 3.00	0.7781
Interaction p-value									0.6804
Histological grade									
High grade	255	114 (44.7)	25.3 (18.6, NE)	132	58 (43.9)	23.0 (12.7, NE)	0.95	0.70, 1.31	0.7478
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	69 (41.6)	NE (NE, NE)	80	32 (40.0)	NE (NE, NE)	0.97	0.64, 1.49	0.8808
Residue	79	40 (50.6)	22.1 (8.9, NE)	44	21 (47.7)	17.2 (6.0, NE)	1.04	0.62, 1.79	0.8981
Interaction p-value									0.8465

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.6 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	58 (39.7)	NE (NE, NE)	79	35 (44.3)	23.0 (8.6, NE)	0.77	0.51, 1.18	0.2307
Interval	99	51 (51.5)	16.6 (11.5, NE)	45	18 (40.0)	NE (NE, NE)	1.41	0.84, 2.47	0.2020
Interaction p-value									0.0806
Myriad tumour BRCA mutation status									
tBRCAm	158	77 (48.7)	22.1 (14.1, NE)	77	34 (44.2)	17.5 (8.7, NE)	1.02	0.69, 1.55	0.9132
Non-tBRCAm	97	37 (38.1)	NE (NE, NE)	55	24 (43.6)	NE (NE, NE)	0.82	0.49, 1.39	0.4545
Interaction p-value									0.5099
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	8.5 (2.8, NE)	7	3 (42.9)	NE (NE, NE)	1.40	0.43, 6.24	0.5995
gBRCAm	66	32 (48.5)	24.2 (13.9, NE)	31	14 (45.2)	17.2 (8.7, NE)	0.89	0.49, 1.73	0.7254
Non-BRCAm	41	19 (46.3)	25.7 (13.7, NE)	22	9 (40.9)	NE (NE, NE)	1.11	0.52, 2.59	0.7881
Interaction p-value									0.7942

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.7 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Other single items time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	40 (43.5)	NE (NE, NE)	48	22 (45.8)	19.4 (13.8, NE)	0.97	0.58, 1.66	0.9172
NED/CR [IDS]	74	43 (58.1)	14.3 (8.3,24.0)	38	18 (47.4)	19.6 (9.3, NE)	1.42	0.83, 2.53	0.2007
NED/CR [Chemo]	40	20 (50.0)	21.9 (11.3, NE)	20	8 (40.0)	NE (NE, NE)	1.34	0.61, 3.23	0.4789
PR	49	24 (49.0)	19.6 (11.9, NE)	26	16 (61.5)	16.6 (4.9,24.9)	0.65	0.35, 1.25	0.1899
Interaction p-value									0.2895
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	80 (53.3)	20.0 (14.5,25.3)	65	31 (47.7)	19.6 (13.9, NE)	1.14	0.76, 1.75	0.5309
non-tBRCAm	105	47 (44.8)	25.7 (11.1, NE)	67	33 (49.3)	19.4 (13.8, NE)	0.95	0.61, 1.50	0.8311
Interaction p-value									0.5619
First line treatment outcome (eCRF)									
NED [PDS]	89	37 (41.6)	NE (NE, NE)	47	21 (44.7)	19.4 (13.8, NE)	0.96	0.57, 1.67	0.8875
NED/CR [IDS]	74	41 (55.4)	14.3 (8.3,27.7)	32	16 (50.0)	19.4 (9.3, NE)	1.26	0.72, 2.31	0.4238
NED/CR [Chemo]	39	22 (56.4)	19.6 (8.3,25.0)	18	7 (38.9)	NE (NE, NE)	1.50	0.67, 3.80	0.3319
PR	50	25 (50.0)	25.3 (11.9, NE)	34	20 (58.8)	18.7 (8.3,28.0)	0.76	0.42, 1.38	0.3561
Interaction p-value									0.4953
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	78 (53.1)	20.7 (14.5,25.3)	67	32 (47.8)	19.5 (15.4, NE)	1.13	0.76, 1.73	0.5626
non-tBRCAm	108	49 (45.4)	25.7 (13.8, NE)	65	32 (49.2)	19.4 (13.8, NE)	0.96	0.62, 1.52	0.8693
Interaction p-value									0.6094
Age group									
<65 years	185	95 (51.4)	19.6 (14.3,25.7)	98	46 (46.9)	22.2 (16.6, NE)	1.19	0.84, 1.70	0.3311
>=65 years	70	32 (45.7)	27.7 (13.7, NE)	34	18 (52.9)	14.0 (6.1, NE)	0.74	0.42, 1.35	0.3238
Interaction p-value									0.1802

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.7 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Other single items time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	86 (47.3)	24.0 (16.7, NE)	90	38 (42.2)	NE (NE, NE)	1.20	0.83, 1.78	0.3425
IV	73	41 (56.2)	17.5 (8.3,25.3)	42	26 (61.9)	15.4 (8.3,22.2)	0.84	0.52, 1.38	0.4798
Interaction p-value									0.2565
Region									
Europe	245	123 (50.2)	21.9 (16.6,25.7)	126	60 (47.6)	19.4 (16.4, NE)	1.07	0.79, 1.47	0.6495
Japan	10	4 (40.0)	NE (NE, NE)	6	4 (66.7)	20.8 (2.8, NE)	0.69	0.16, 2.92	0.6030
Interaction p-value									0.5449
ECOG performance status at Baseline									
(0) Normal activity	190	97 (51.1)	19.6 (12.5,27.7)	100	50 (50.0)	19.4 (16.6, NE)	1.13	0.81, 1.61	0.4708
(1) Restricted activity	61	30 (49.2)	24.0 (16.0, NE)	31	14 (45.2)	19.5 (10.2, NE)	0.95	0.51, 1.85	0.8811
Interaction p-value									0.6394
Baseline CA-125 value									
<=ULN	228	116 (50.9)	20.7 (14.6,25.7)	118	57 (48.3)	19.4 (16.6, NE)	1.11	0.81, 1.53	0.5319
>ULN	27	11 (40.7)	25.3 (9.0, NE)	14	7 (50.0)	11.3 (5.5, NE)	0.67	0.26, 1.83	0.4184
Interaction p-value									0.3366
Histological grade									
High grade	255	127 (49.8)	21.9 (16.6,25.7)	132	64 (48.5)	19.4 (16.4, NE)	1.05	0.78, 1.43	0.7355
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	80 (48.2)	23.2 (14.1, NE)	80	37 (46.3)	19.5 (16.4, NE)	1.12	0.76, 1.67	0.5677
Residue	79	40 (50.6)	21.9 (14.6, NE)	44	22 (50.0)	23.5 (11.2,28.0)	0.97	0.58, 1.65	0.8953
Interaction p-value									0.6563

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.7 PAOLA1: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Other single items time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	69 (47.3)	25.0 (16.7, NE)	79	35 (44.3)	19.5 (16.4, NE)	1.07	0.71, 1.62	0.7582
Interval	99	51 (51.5)	20.0 (12.5, NE)	45	24 (53.3)	19.4 (9.3, NE)	1.05	0.65, 1.73	0.8523
Interaction p-value									0.9563
Myriad tumour BRCA mutation status									
tBRCAm	158	81 (51.3)	21.9 (16.0,27.7)	77	33 (42.9)	23.5 (16.6, NE)	1.22	0.82, 1.85	0.3367
Non-tBRCAm	97	46 (47.4)	25.7 (9.0, NE)	55	31 (56.4)	16.7 (10.2,28.0)	0.88	0.56, 1.40	0.5848
Interaction p-value									0.2981
Status somatic BRCA mutations									
sBRCAm	22	11 (50.0)	16.7 (3.6, NE)	7	3 (42.9)	NE (NE, NE)	1.39	0.43, 6.16	0.5997
gBRCAm	66	37 (56.1)	16.6 (11.3,27.7)	31	12 (38.7)	NE (NE, NE)	1.57	0.84, 3.15	0.1588
Non-BRCAm	41	22 (53.7)	19.5 (3.0, NE)	22	17 (77.3)	9.7 (5.6,13.9)	0.63	0.34, 1.21	0.1640
Interaction p-value									0.1276

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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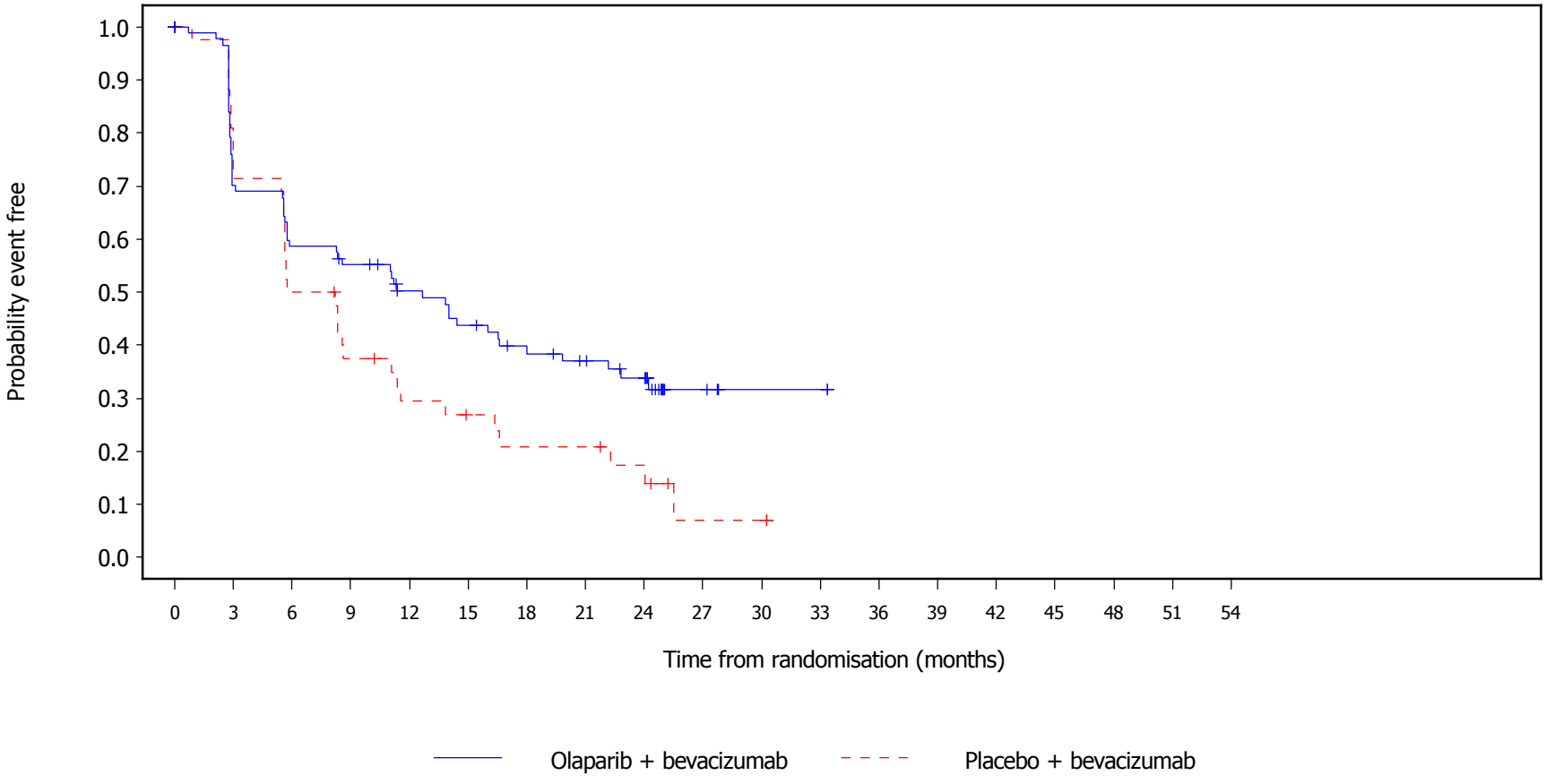
Figure 2.3.4.1 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI time to clinically meaningful deterioration for First line treatment outcome (eCRF)=NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

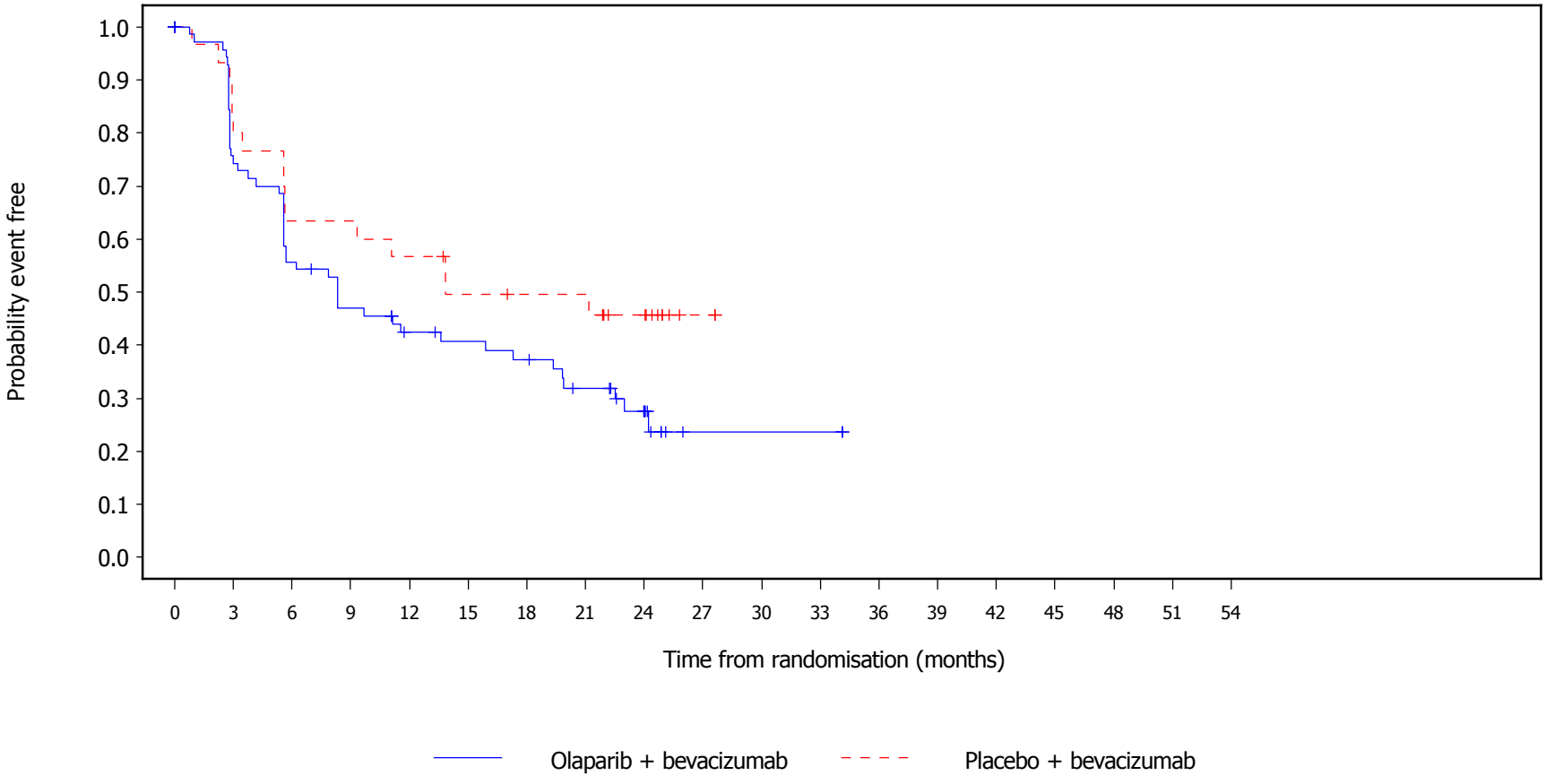


Number of patients at risk:

89	61	51	47	39	34	29	25	21	4	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
47	32	21	15	11	9	7	7	5	1	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.2 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI time to clinically meaningful deterioration for First line treatment outcome (eCRF)=NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

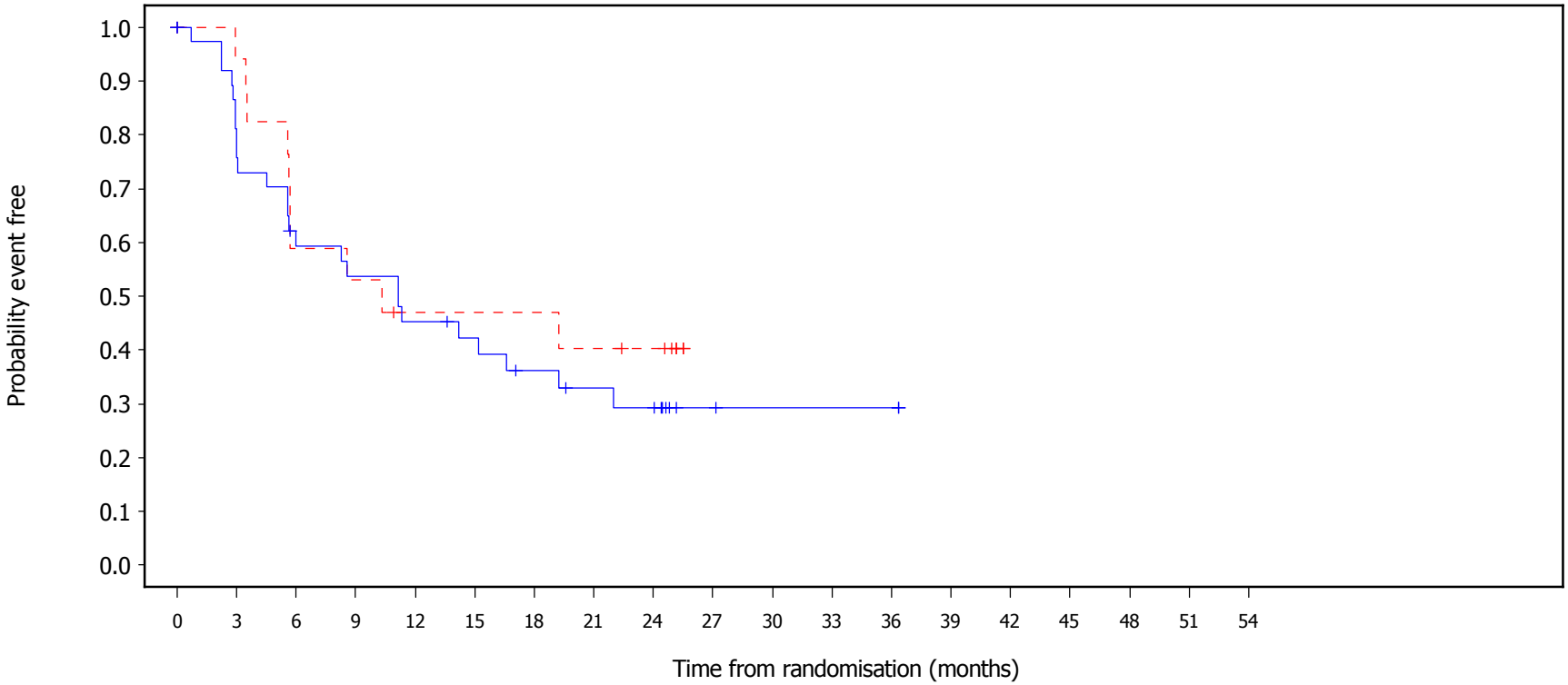


Number of patients at risk:

74	52	39	32	26	24	22	17	10	1	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
32	25	19	19	17	14	13	13	9	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.3 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI time to clinically meaningful deterioration for First line treatment outcome (eCRF)=NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

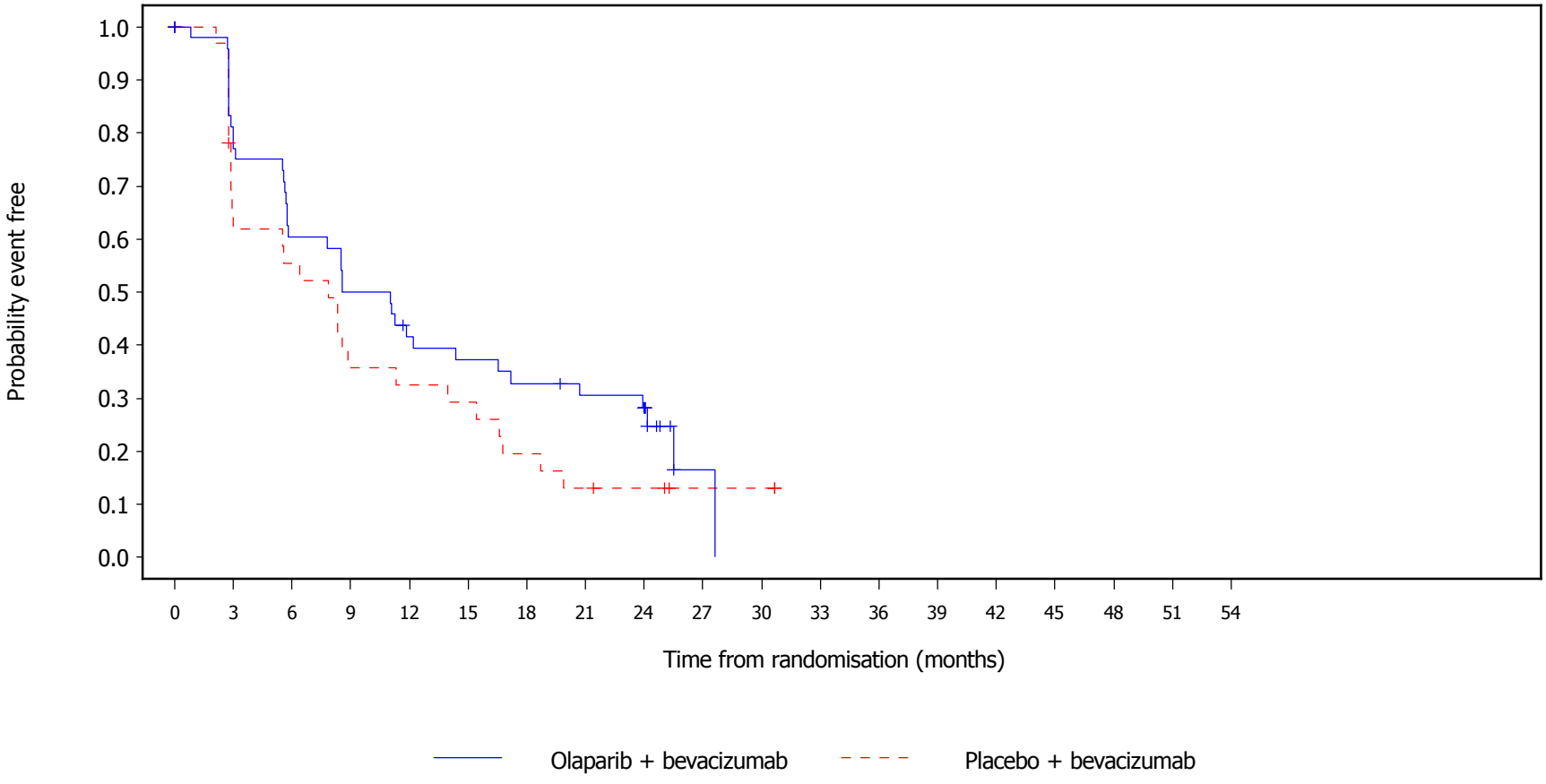


Number of patients at risk:

39	28	21	19	16	14	11	9	8	2	1	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
18	16	10	9	7	7	7	6	5	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.4 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI time to clinically meaningful deterioration for First line treatment outcome (eCRF)=PR
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

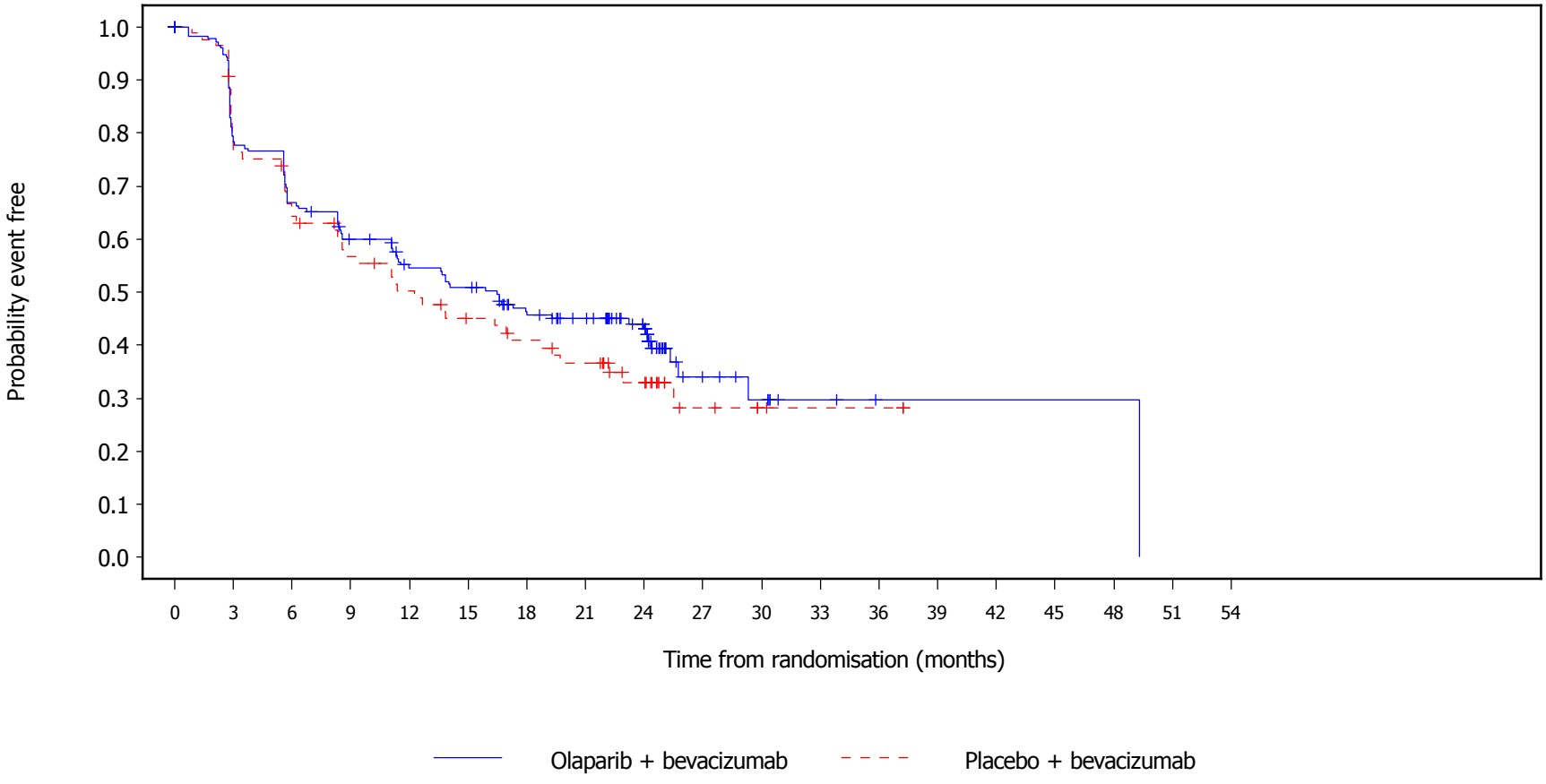


Number of patients at risk:

50	38	29	24	19	17	15	13	11	1	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
34	19	17	11	10	9	6	4	3	1	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.5 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects time to clinically meaningful deterioration for FIGO Stage (Disease state)=III
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

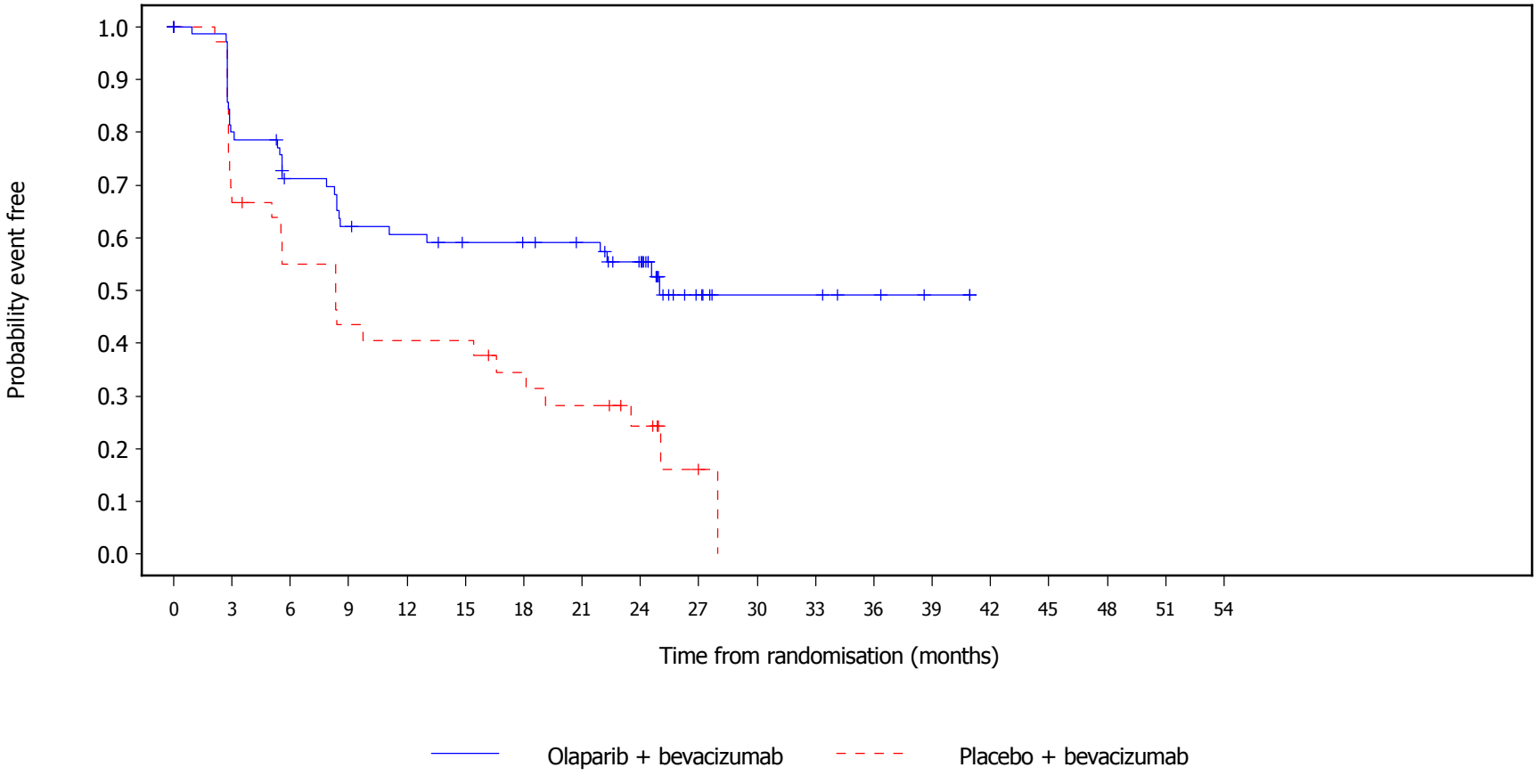


Number of patients at risk:

182	138	117	102	89	83	69	61	43	10	7	3	1	1	1	1	1	0	0	Olaparib + bevacizumab
90	65	54	45	39	33	29	25	17	5	2	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.6 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects time to clinically meaningful deterioration for FIGO Stage (Disease state)=IV
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

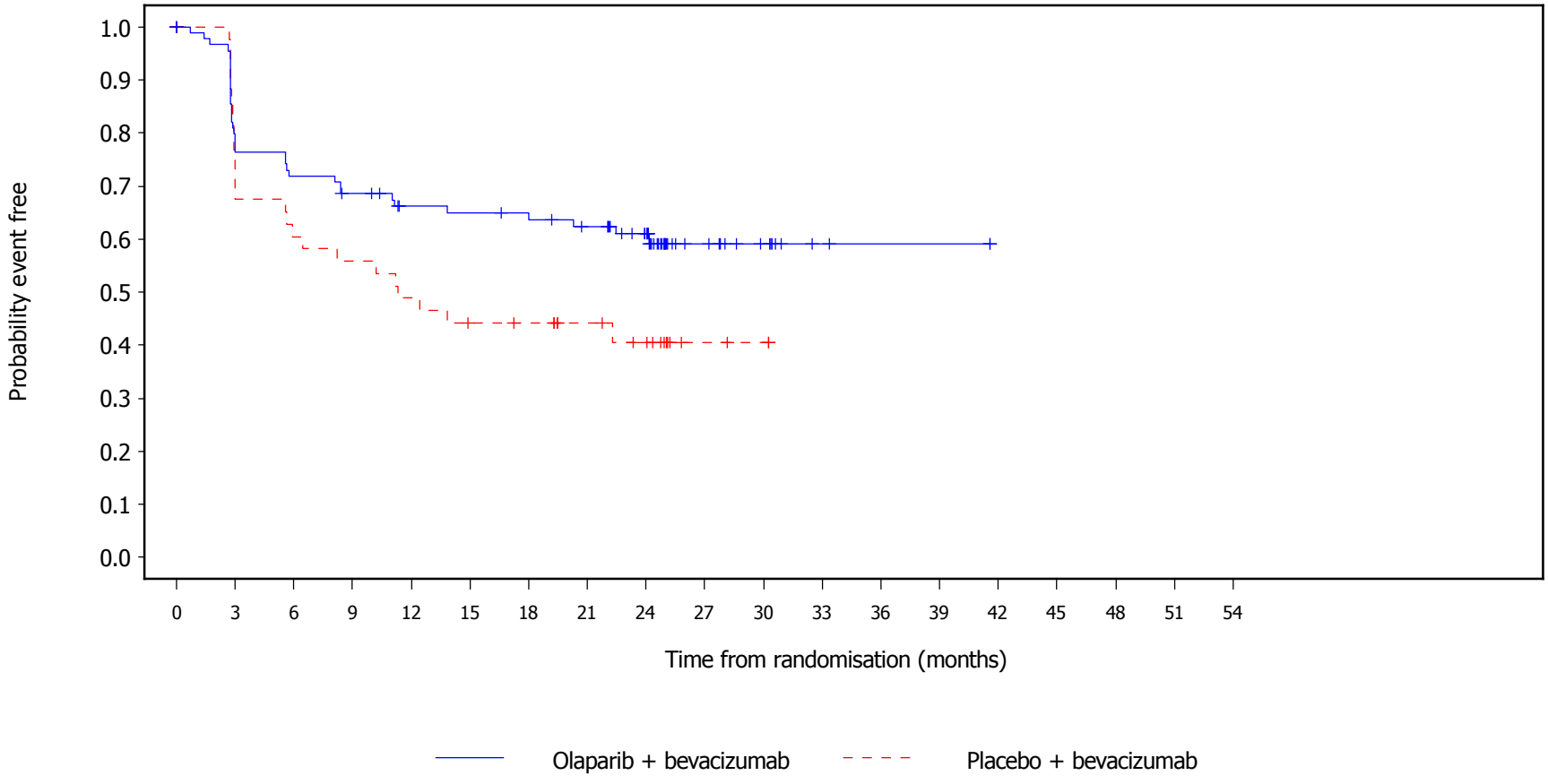


Number of patients at risk:

73	56	47	41	39	36	35	33	27	9	5	5	3	1	0	0	0	0	0	Olaparib + bevacizumab
42	25	19	15	14	14	11	9	6	1	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.7 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration for First line treatment outcome (IVRS)=NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

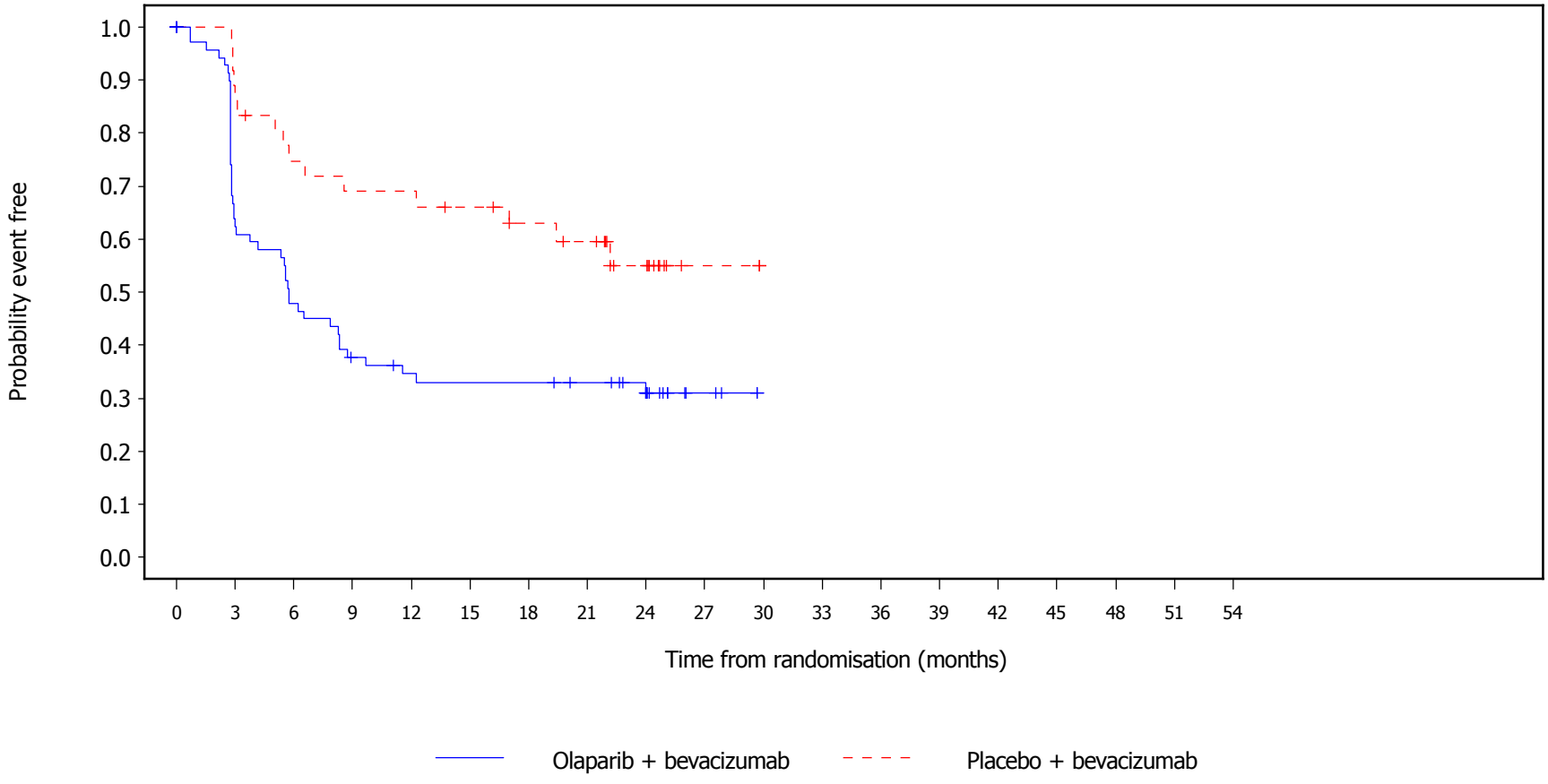


Number of patients at risk:

92	70	64	60	54	53	52	48	39	14	8	2	1	1	0	0	0	0	0	Olaparib + bevacizumab
48	32	26	24	21	18	17	13	10	2	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.8 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration for First line treatment outcome (IVRS)=NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

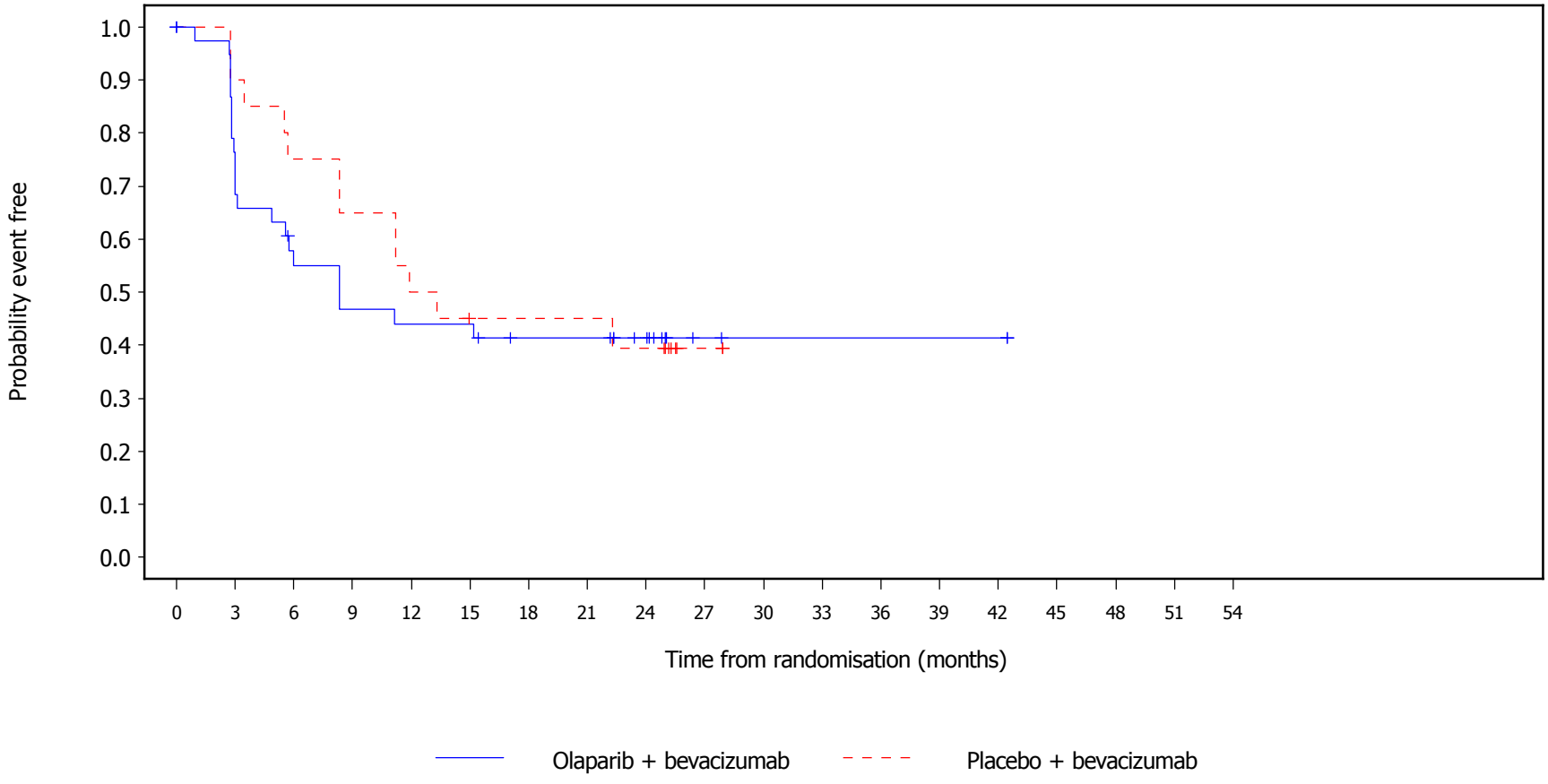


Number of patients at risk:

74	43	33	25	22	21	21	19	13	3	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
38	32	26	24	24	22	19	17	10	1	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.9 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration for First line treatment outcome (IVRS)=NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

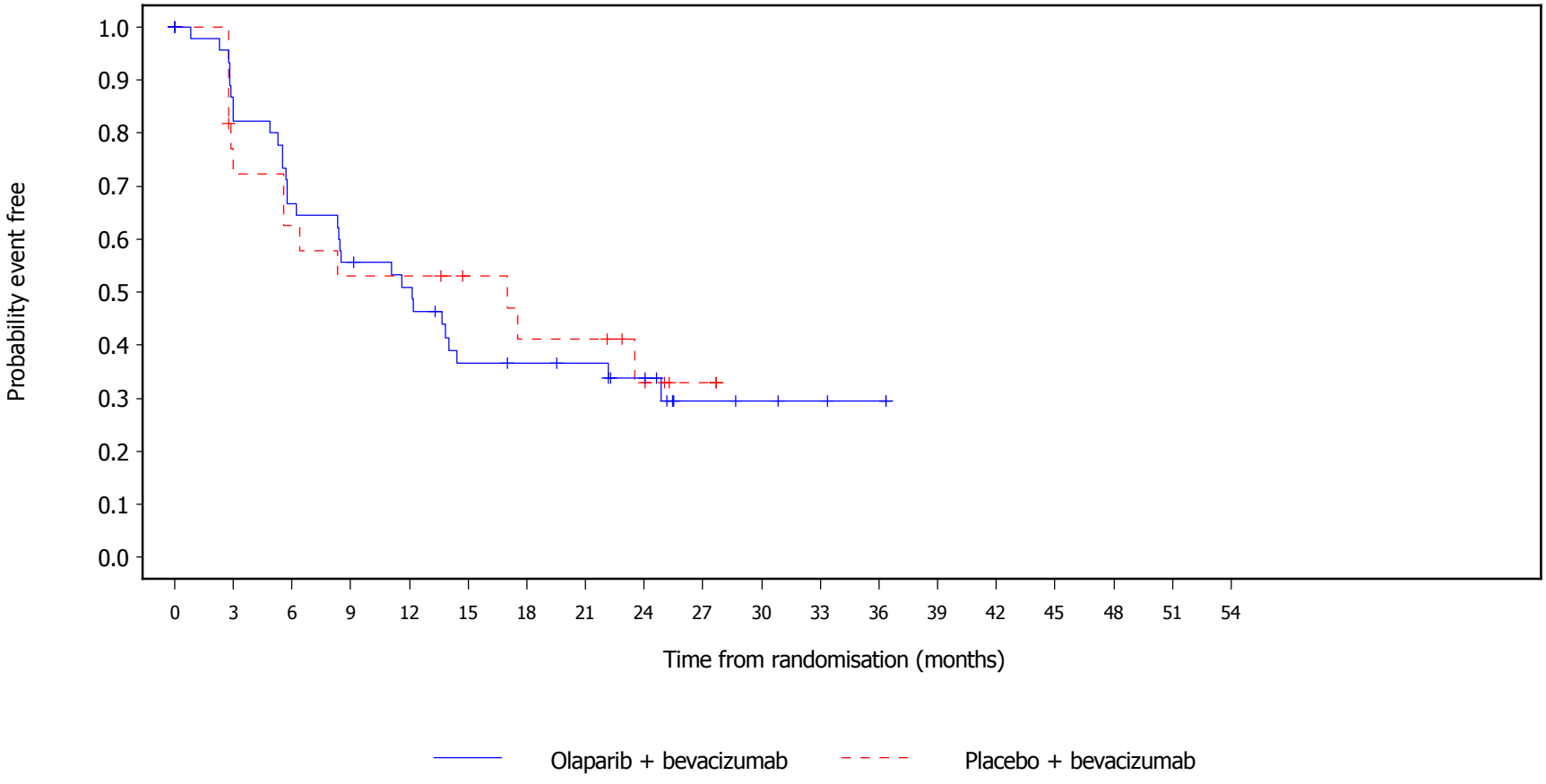


Number of patients at risk:

40	27	21	17	16	16	13	13	9	2	1	1	1	1	1	0	0	0	0 Olaparib + bevacizumab
20	18	15	13	10	8	8	8	7	1	0	0	0	0	0	0	0	0	0 Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.10 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration for First line treatment outcome (IVRS)=PR
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

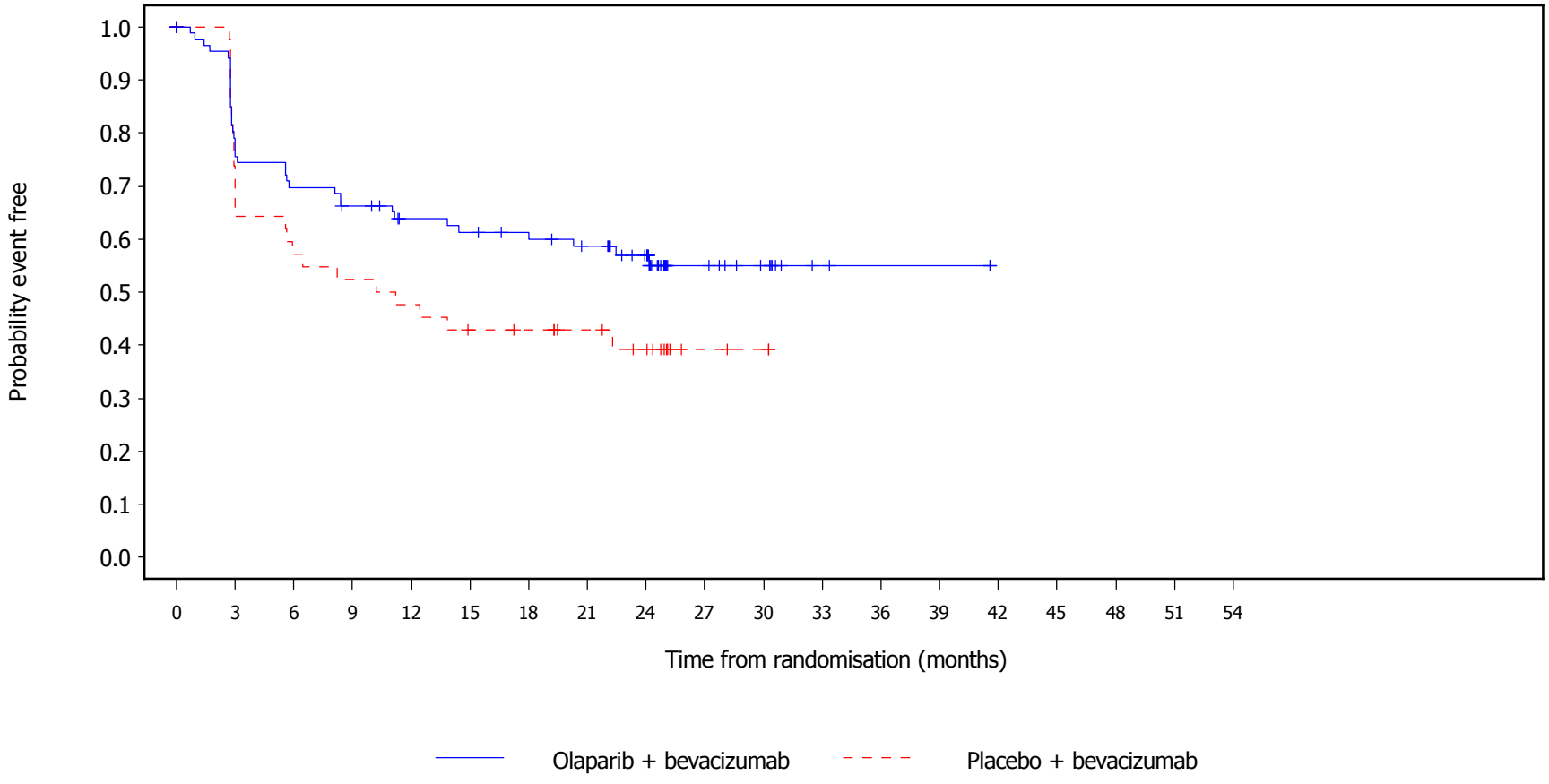


Number of patients at risk:

49	38	30	25	22	15	14	13	10	4	3	2	1	0	0	0	0	0	0 Olaparib + bevacizumab
26	16	13	11	11	9	7	7	4	1	0	0	0	0	0	0	0	0	0 Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.11 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration for First line treatment outcome (eCRF)=NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

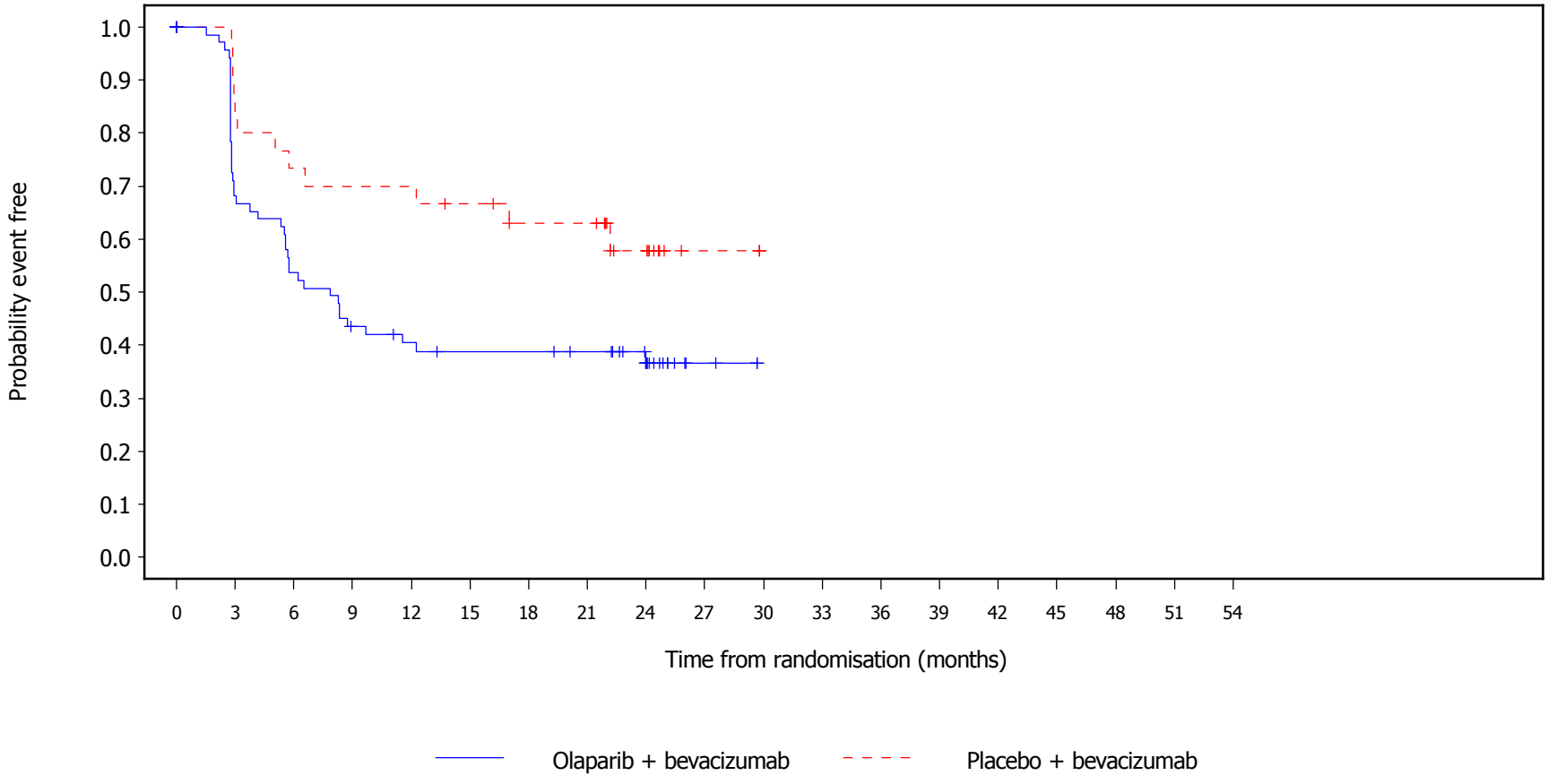


Number of patients at risk:

89	67	60	56	50	48	46	42	34	13	8	2	1	1	0	0	0	0	0	Olaparib + bevacizumab
47	30	24	22	20	17	16	13	10	2	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.12 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration for First line treatment outcome (eCRF)=NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

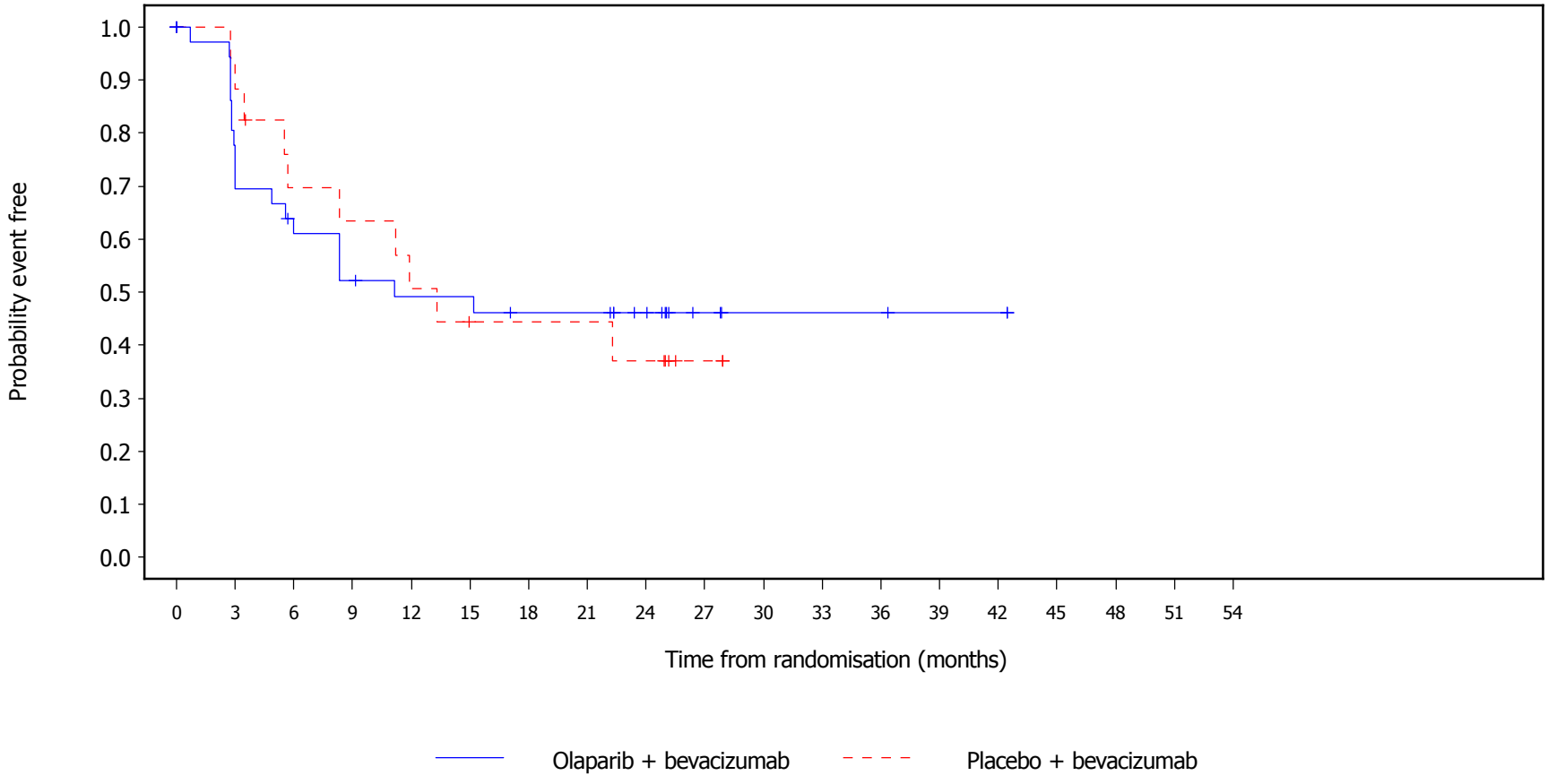


Number of patients at risk:

74	47	37	29	26	24	24	22	14	2	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
32	26	22	21	21	19	16	16	9	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.13 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration for First line treatment outcome (eCRF)=NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

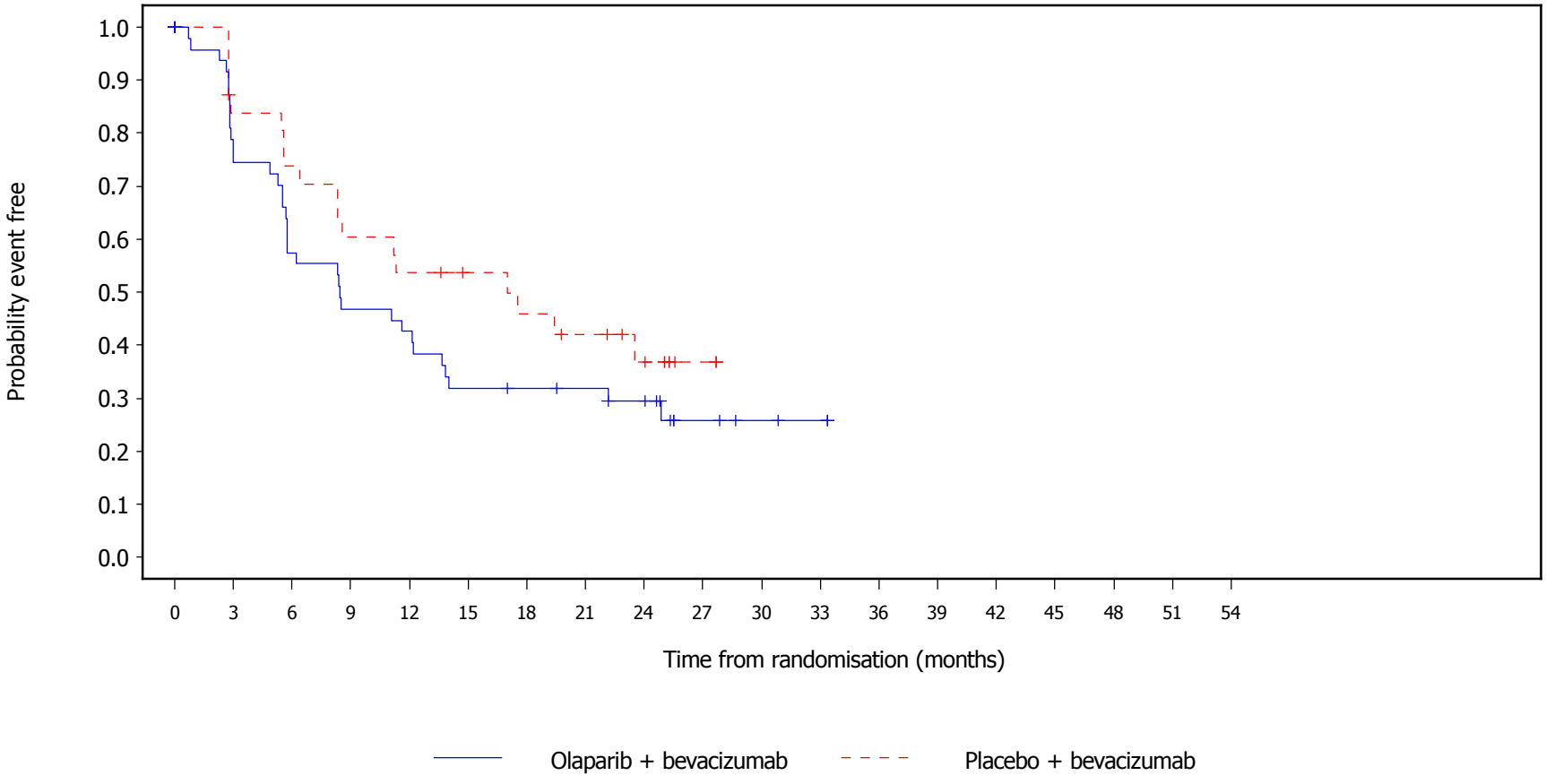


Number of patients at risk:

39	26	22	18	16	16	14	14	10	4	2	2	2	1	1	0	0	0	0	Olaparib + bevacizumab
18	16	11	10	8	6	6	6	5	1	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.14 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration for First line treatment outcome (eCRF)=PR
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

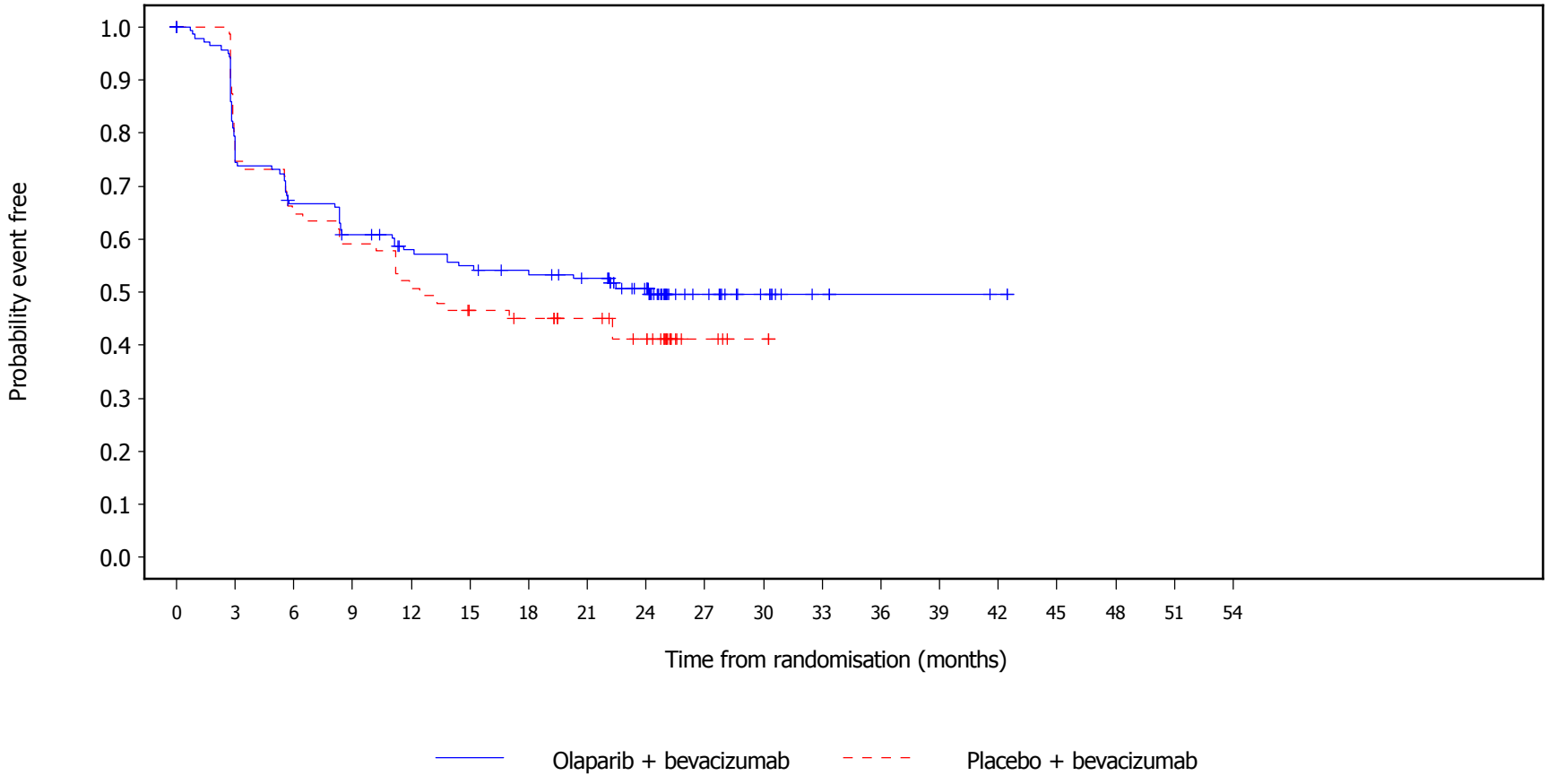


Number of patients at risk:

50	36	27	22	20	15	14	13	11	4	2	1	0	0	0	0	0	0	Olaparib + bevacizumab
34	25	22	18	16	14	12	10	7	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.15 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration for Timing of cytoreductive surgery=Upfront
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

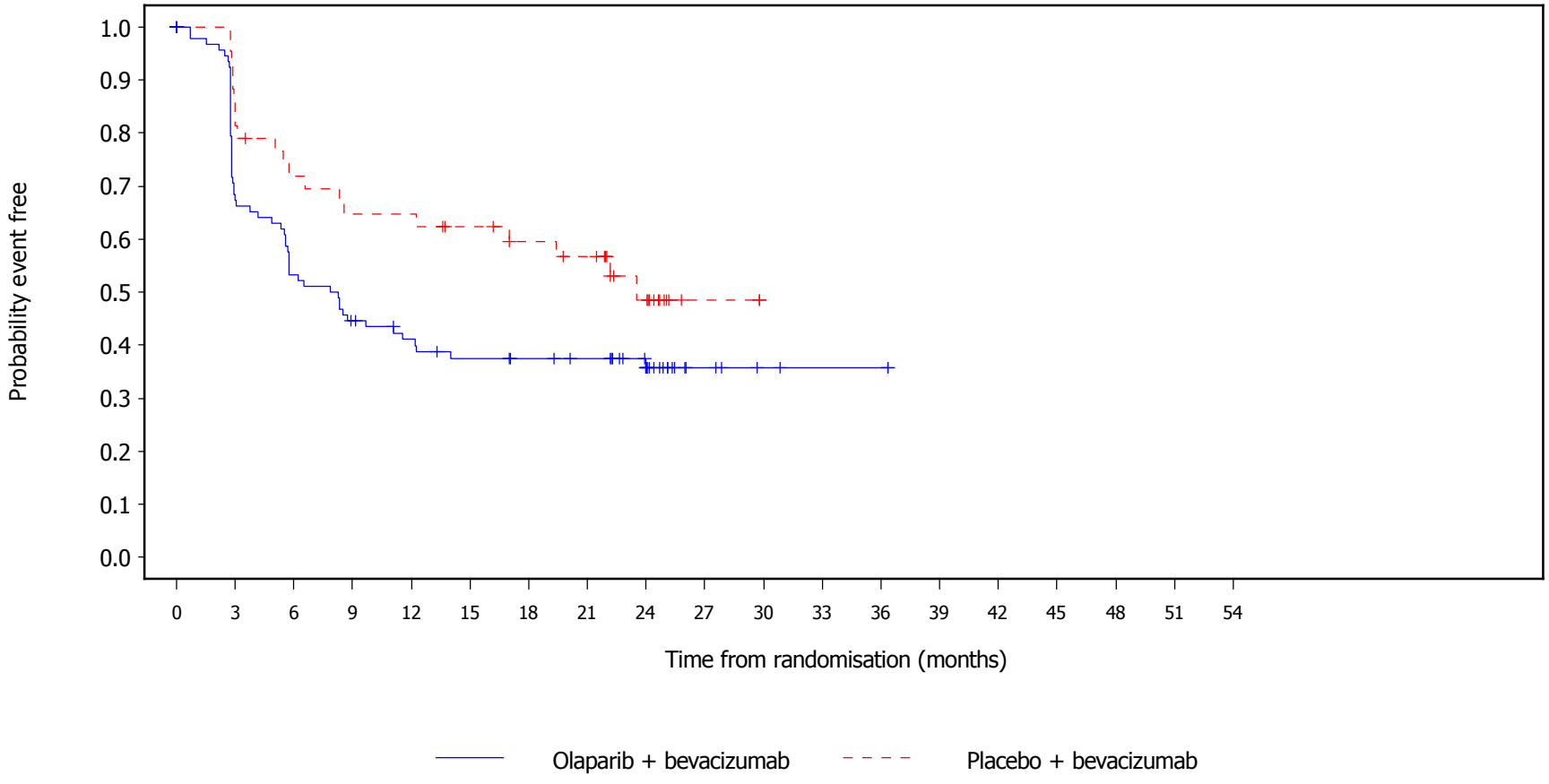


Number of patients at risk:

146	109	93	84	76	72	69	64	51	18	10	4	2	2	1	0	0	0	0 Olaparib + bevacizumab
79	56	46	42	36	31	29	25	20	4	1	0	0	0	0	0	0	0	0 Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.16 PAOLA1: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment time to clinically meaningful deterioration for Timing of cytoreductive surgery=Interval
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

99	62	49	40	35	31	29	27	18	5	2	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
45	37	30	27	27	24	21	19	11	1	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Table 2.4.1.1 PAOLA1: Summary of analysis of time to worsening in EQ-5D VAS (MID = 10)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EQ-5D-5L Visual analogue scale (MID = 10)	255	156 (61.2)	11.1 (8.3,13.9)	132	78 (59.1)	16.4 (9.6,21.9)	1.15	0.87, 1.52	0.3464

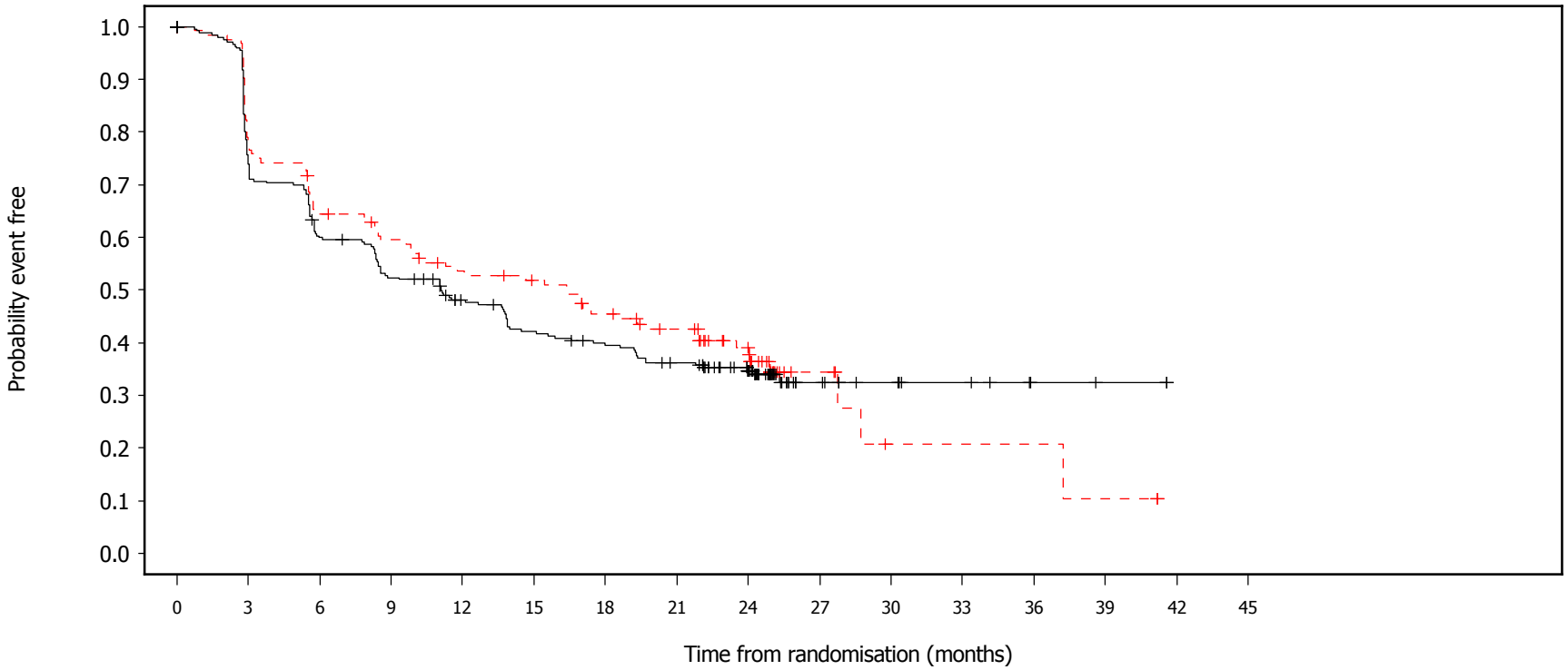
Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.

Table 2.4.1.2 PAOLA1: Summary of analysis of time to worsening in EQ-5D VAS (MID = 7)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EQ-5D-5L Visual analogue scale (MID = 7)	255	156 (61.2)	11.1 (8.3,13.9)	132	78 (59.1)	16.4 (9.6,21.9)	1.15	0.88, 1.52	0.3326

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.

Figure 2.4.2.1 PAOLA1: Kaplan-Meier plot of EQ-5D-5L Visual analogue scale (MID = 10) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

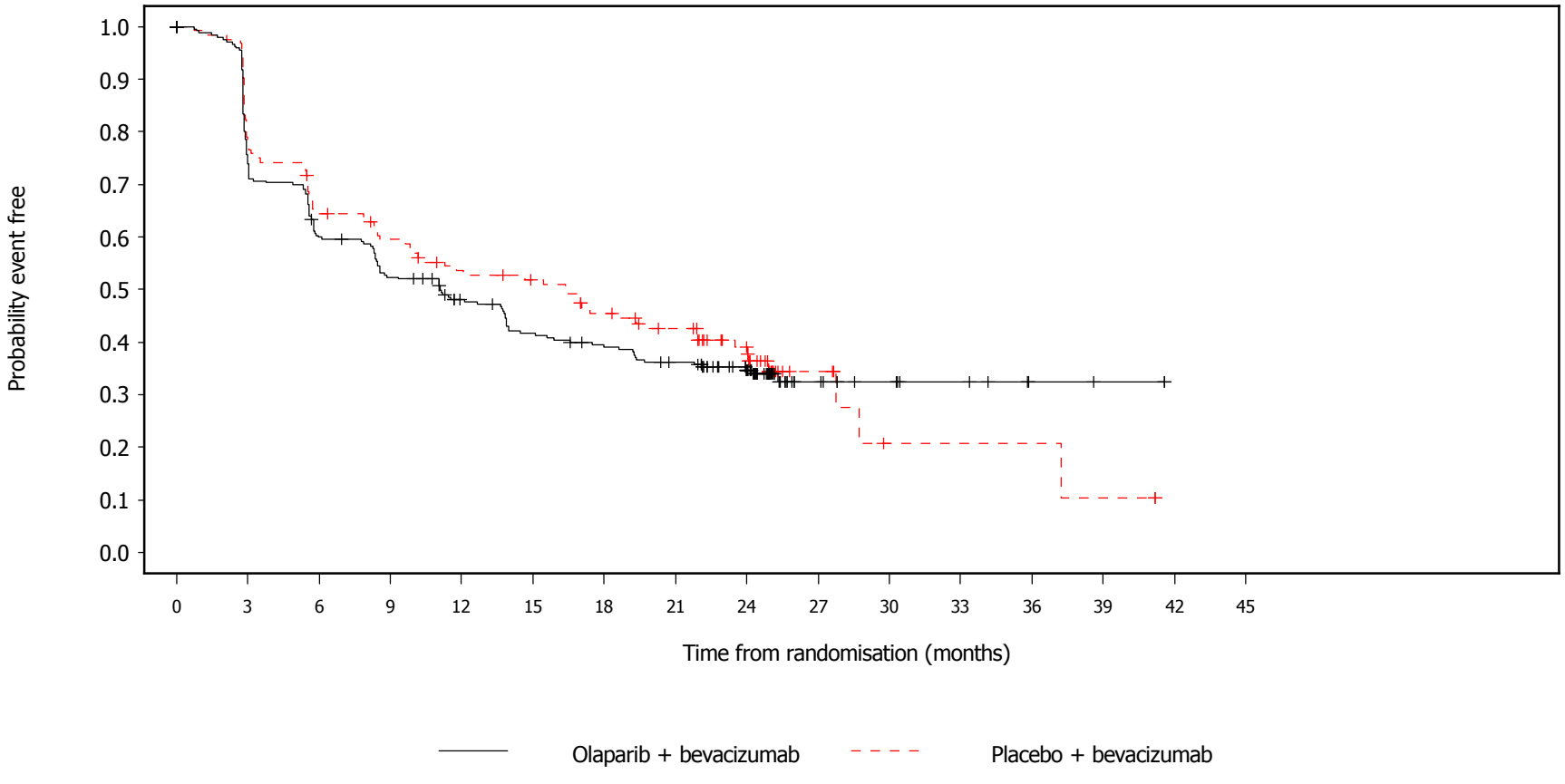


Number of patients at risk:

255	179	144	125	107	93	86	76	57	14	9	6	2	1	0	0	Olaparib + bevacizumab
132	97	79	71	62	58	49	42	30	7	2	2	2	1	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 2.4.2.2 PAOLA1: Kaplan-Meier plot of EQ-5D-5L Visual analogue scale (MID = 7) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	179	144	125	107	92	85	76	57	14	9	6	2	1	0	0	Olaparib + bevacizumab
132	97	79	71	62	58	49	42	30	7	2	2	2	1	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Table 2.4.3.1 PAOLA1: Summary of subgroup analysis of EQ-5D-5L Visual analogue scale (MID = 10) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	47 (51.1)	13.8 (8.3, NE)	48	30 (62.5)	17.0 (8.5,27.8)	0.85	0.54, 1.36	0.5034
NED/CR [IDS]	74	49 (66.2)	11.1 (5.6,15.9)	38	19 (50.0)	14.7 (5.6, NE)	1.44	0.86, 2.51	0.1652
NED/CR [Chemo]	40	24 (60.0)	13.9 (5.6, NE)	20	14 (70.0)	10.0 (3.0,19.4)	0.84	0.44, 1.66	0.6023
PR	49	36 (73.5)	5.9 (3.0,13.7)	26	15 (57.7)	18.7 (2.9,24.9)	1.43	0.80, 2.70	0.2330
Interaction p-value									0.3113
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	89 (59.3)	11.5 (8.3,15.9)	65	36 (55.4)	15.4 (8.5, NE)	1.15	0.79, 1.72	0.4729
non-tBRCAm	105	67 (63.8)	8.5 (5.7,13.9)	67	42 (62.7)	16.4 (5.6,21.9)	1.09	0.74, 1.61	0.6704
Interaction p-value									0.8381
First line treatment outcome (eCRF)									
NED [PDS]	89	48 (53.9)	13.6 (8.3, NE)	47	30 (63.8)	17.0 (8.3,24.1)	0.88	0.56, 1.41	0.5945
NED/CR [IDS]	74	49 (66.2)	11.1 (5.6,15.9)	32	16 (50.0)	12.1 (3.1, NE)	1.39	0.81, 2.53	0.2377
NED/CR [Chemo]	39	22 (56.4)	15.1 (5.6, NE)	18	11 (61.1)	10.3 (3.5, NE)	0.92	0.45, 1.96	0.8122
PR	50	36 (72.0)	6.0 (3.0,13.7)	34	21 (61.8)	14.7 (5.5,24.9)	1.34	0.79, 2.33	0.2871
Interaction p-value									0.5097
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	87 (59.2)	11.4 (8.3,18.0)	67	36 (53.7)	15.4 (8.5, NE)	1.18	0.81, 1.77	0.3924
non-tBRCAm	108	69 (63.9)	9.3 (5.7,14.0)	65	42 (64.6)	16.4 (5.6,21.9)	1.04	0.71, 1.54	0.8237
Interaction p-value									0.6556
Age group									
<65 years	185	110 (59.5)	12.7 (8.4,15.9)	98	57 (58.2)	17.0 (9.6,24.9)	1.08	0.79, 1.50	0.6362
>=65 years	70	46 (65.7)	8.4 (5.6,13.7)	34	21 (61.8)	14.7 (5.5,21.9)	1.12	0.68, 1.92	0.6605
Interaction p-value									0.9024

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.4.3.1 PAOLA1: Summary of subgroup analysis of EQ-5D-5L Visual analogue scale (MID = 10) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	108 (59.3)	13.6 (8.4,16.6)	90	51 (56.7)	17.4 (9.9,27.8)	1.13	0.82, 1.60	0.4546
IV	73	48 (65.8)	7.9 (3.0,15.1)	42	27 (64.3)	9.6 (5.6,19.4)	1.04	0.65, 1.68	0.8804
Interaction p-value									0.7604
Region									
Europe	245	151 (61.6)	11.1 (8.3,13.9)	126	75 (59.5)	15.4 (8.5,21.9)	1.08	0.82, 1.43	0.5863
Japan	10	5 (50.0)	13.9 (2.8, NE)	6	3 (50.0)	24.0 (2.9, NE)	1.36	0.33, 6.65	0.6681
Interaction p-value									0.7520
ECOG performance status at Baseline									
(0) Normal activity	190	119 (62.6)	11.0 (7.9,13.8)	100	63 (63.0)	11.8 (7.9,19.9)	1.06	0.78, 1.44	0.7210
(1) Restricted activity	61	34 (55.7)	13.7 (6.0, NE)	31	14 (45.2)	21.9 (9.8, NE)	1.30	0.71, 2.50	0.4039
Interaction p-value									0.5589
Baseline CA-125 value									
<=ULN	228	136 (59.6)	12.1 (8.5,15.1)	118	67 (56.8)	17.4 (9.8,24.1)	1.11	0.83, 1.49	0.4959
>ULN	27	20 (74.1)	3.0 (2.9, 6.1)	14	11 (78.6)	9.6 (2.8,14.7)	1.06	0.52, 2.29	0.8760
Interaction p-value									0.9161
Histological grade									
High grade	255	156 (61.2)	11.1 (8.3,13.9)	132	78 (59.1)	16.4 (9.6,21.9)	1.10	0.84, 1.44	0.5076
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	98 (59.0)	11.2 (8.3,15.9)	80	46 (57.5)	17.0 (8.3,24.1)	1.08	0.77, 1.55	0.6676
Residue	79	49 (62.0)	8.9 (5.7,19.2)	44	26 (59.1)	17.1 (8.1,24.9)	1.19	0.75, 1.94	0.4740
Interaction p-value									0.7503

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.4.3.1 PAOLA1: Summary of subgroup analysis of EQ-5D-5L Visual analogue scale (MID = 10) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	82 (56.2)	12.1 (8.3,19.4)	79	47 (59.5)	17.0 (9.9,24.1)	1.00	0.70, 1.44	0.9818
Interval	99	65 (65.7)	8.7 (5.6,15.6)	45	25 (55.6)	13.4 (5.7, NE)	1.31	0.84, 2.12	0.2417
Interaction p-value									0.3545
Myriad tumour BRCA mutation status									
tBRCAm	158	96 (60.8)	11.4 (8.3,15.6)	77	41 (53.2)	17.0 (9.6,28.7)	1.22	0.85, 1.77	0.2833
Non-tBRCAm	97	60 (61.9)	9.3 (5.7,17.5)	55	37 (67.3)	16.4 (5.6,19.9)	0.97	0.64, 1.47	0.8730
Interaction p-value									0.4097
Status somatic BRCA mutations									
sBRCAm	22	12 (54.5)	8.1 (2.8, NE)	7	4 (57.1)	12.6 (5.6, NE)	1.22	0.42, 4.37	0.7260
gBRCAm	66	39 (59.1)	13.8 (8.4,25.3)	31	17 (54.8)	23.5 (9.6, NE)	1.24	0.71, 2.25	0.4567
Non-BRCAm	41	25 (61.0)	13.9 (5.7, NE)	22	17 (77.3)	7.7 (2.8,21.9)	0.69	0.37, 1.29	0.2382
Interaction p-value									0.3567

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.4.3.2 PAOLA1: Summary of subgroup analysis of EQ-5D-5L Visual analogue scale (MID = 7) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	47 (51.1)	13.8 (8.3, NE)	48	30 (62.5)	17.0 (8.5,27.8)	0.86	0.55, 1.37	0.5156
NED/CR [IDS]	74	49 (66.2)	11.1 (5.6,15.9)	38	19 (50.0)	14.7 (5.6, NE)	1.44	0.86, 2.51	0.1658
NED/CR [Chemo]	40	24 (60.0)	13.9 (5.6, NE)	20	14 (70.0)	10.0 (3.0,19.4)	0.84	0.44, 1.66	0.6032
PR	49	36 (73.5)	5.9 (3.0,13.7)	26	15 (57.7)	18.7 (2.9,24.9)	1.43	0.80, 2.70	0.2326
Interaction p-value									0.3168
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	89 (59.3)	11.5 (8.3,15.9)	65	36 (55.4)	15.4 (8.5, NE)	1.15	0.79, 1.72	0.4724
non-tBRCAm	105	67 (63.8)	8.5 (5.7,13.9)	67	42 (62.7)	16.4 (5.6,21.9)	1.09	0.75, 1.62	0.6553
Interaction p-value									0.8491
First line treatment outcome (eCRF)									
NED [PDS]	89	48 (53.9)	13.6 (8.3, NE)	47	30 (63.8)	17.0 (8.3,24.1)	0.89	0.56, 1.41	0.6076
NED/CR [IDS]	74	49 (66.2)	11.1 (5.6,15.9)	32	16 (50.0)	12.1 (3.1, NE)	1.39	0.81, 2.53	0.2386
NED/CR [Chemo]	39	22 (56.4)	15.1 (5.6, NE)	18	11 (61.1)	10.3 (3.5, NE)	0.91	0.45, 1.96	0.8111
PR	50	36 (72.0)	6.0 (3.0,13.7)	34	21 (61.8)	14.7 (5.5,24.9)	1.34	0.79, 2.33	0.2853
Interaction p-value									0.5159
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	87 (59.2)	11.4 (8.3,18.0)	67	36 (53.7)	15.4 (8.5, NE)	1.18	0.81, 1.77	0.3912
non-tBRCAm	108	69 (63.9)	9.3 (5.7,14.0)	65	42 (64.6)	16.4 (5.6,21.9)	1.05	0.72, 1.55	0.8091
Interaction p-value									0.6641
Age group									
<65 years	185	110 (59.5)	12.7 (8.4,15.6)	98	57 (58.2)	17.0 (9.6,24.9)	1.08	0.79, 1.50	0.6265
>=65 years	70	46 (65.7)	8.4 (5.6,13.7)	34	21 (61.8)	14.7 (5.5,21.9)	1.12	0.68, 1.92	0.6593
Interaction p-value									0.9069

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.4.3.2 PAOLA1: Summary of subgroup analysis of EQ-5D-5L Visual analogue scale (MID = 7) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	108 (59.3)	13.6 (8.4,15.9)	90	51 (56.7)	17.4 (9.9,27.8)	1.14	0.82, 1.60	0.4470
IV	73	48 (65.8)	7.9 (3.0,15.1)	42	27 (64.3)	9.6 (5.6,19.4)	1.04	0.65, 1.68	0.8782
Interaction p-value									0.7565
Region									
Europe	245	151 (61.6)	11.1 (8.3,13.9)	126	75 (59.5)	15.4 (8.5,21.9)	1.08	0.82, 1.43	0.5775
Japan	10	5 (50.0)	13.9 (2.8, NE)	6	3 (50.0)	24.0 (2.9, NE)	1.36	0.33, 6.66	0.6667
Interaction p-value									0.7525
ECOG performance status at Baseline									
(0) Normal activity	190	119 (62.6)	11.0 (7.9,13.8)	100	63 (63.0)	11.8 (7.9,19.9)	1.06	0.78, 1.45	0.7125
(1) Restricted activity	61	34 (55.7)	13.7 (6.0, NE)	31	14 (45.2)	21.9 (9.8, NE)	1.30	0.71, 2.50	0.4011
Interaction p-value									0.5595
Baseline CA-125 value									
<=ULN	228	136 (59.6)	12.1 (8.5,14.5)	118	67 (56.8)	17.4 (9.8,24.1)	1.11	0.83, 1.49	0.4887
>ULN	27	20 (74.1)	3.0 (2.9, 6.1)	14	11 (78.6)	9.6 (2.8,14.7)	1.06	0.52, 2.30	0.8706
Interaction p-value									0.9178
Histological grade									
High grade	255	156 (61.2)	11.1 (8.3,13.9)	132	78 (59.1)	16.4 (9.6,21.9)	1.10	0.84, 1.45	0.4994
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	98 (59.0)	11.2 (8.3,15.6)	80	46 (57.5)	17.0 (8.3,24.1)	1.08	0.77, 1.55	0.6577
Residue	79	49 (62.0)	8.9 (5.7,19.2)	44	26 (59.1)	17.1 (8.1,24.9)	1.19	0.75, 1.94	0.4728
Interaction p-value									0.7552

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.4.3.2 PAOLA1: Summary of subgroup analysis of EQ-5D-5L Visual analogue scale (MID = 7) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	82 (56.2)	12.1 (8.3,19.3)	79	47 (59.5)	17.0 (9.9,24.1)	1.00	0.70, 1.44	0.9956
Interval	99	65 (65.7)	8.7 (5.6,15.6)	45	25 (55.6)	13.4 (5.7, NE)	1.31	0.84, 2.12	0.2428
Interaction p-value									0.3612
Myriad tumour BRCA mutation status									
tBRCAm	158	96 (60.8)	11.4 (8.3,15.6)	77	41 (53.2)	17.0 (9.6,28.7)	1.22	0.85, 1.78	0.2826
Non-tBRCAm	97	60 (61.9)	9.3 (5.7,14.0)	55	37 (67.3)	16.4 (5.6,19.9)	0.97	0.65, 1.48	0.8891
Interaction p-value									0.4179
Status somatic BRCA mutations									
sBRCAm	22	12 (54.5)	8.1 (2.8, NE)	7	4 (57.1)	12.6 (5.6, NE)	1.22	0.43, 4.38	0.7235
gBRCAm	66	39 (59.1)	13.8 (8.4,25.3)	31	17 (54.8)	23.5 (9.6, NE)	1.24	0.71, 2.26	0.4544
Non-BRCAm	41	25 (61.0)	13.9 (5.7, NE)	22	17 (77.3)	7.7 (2.8,21.9)	0.69	0.38, 1.31	0.2508
Interaction p-value									0.3678

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Global QoL/health status	Olaparib + bevacizumab (N=255)	Baseline [a]	245	69.32	17.460	16.7	66.67	100.0
		Wk 12 (Day 85)	225	65.70	17.457	0.0	66.67	100.0
		Wk 24 (Day 169)	201	67.91	17.732	0.0	66.67	100.0
		Wk 36 (Day 253)	178	69.38	16.867	25.0	70.83	100.0
		Wk 48 (Day 337)	175	68.57	17.989	0.0	66.67	100.0
		Wk 60 (Day 421)	162	71.35	15.951	33.3	70.83	100.0
		Wk 72 (Day 505)	158	71.52	16.646	33.3	75.00	100.0
		Wk 84 (Day 589)	138	72.64	16.266	33.3	75.00	100.0
		Wk 96 (Day 673)	137	70.74	18.249	16.7	66.67	100.0
		Wk 108 (Day 757)	110	73.11	19.638	16.7	83.33	100.0
		Wk 120 (Day 841)	1	66.67	NC	66.7	66.67	66.7
		Wk 132 (Day 925)	1	66.67	NC	66.7	66.67	66.7
		Wk 144 (Day 1009)	1	66.67	NC	66.7	66.67	66.7
		Wk 156 (Day 1093)	1	83.33	NC	83.3	83.33	83.3
		End of Treatment	131	69.85	19.460	0.0	66.67	100.0
		30 day Follow-up	61	66.94	21.299	8.3	66.67	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	124	68.75	15.855	33.3	66.67	100.0
		Wk 12 (Day 85)	117	67.31	16.957	25.0	66.67	100.0
		Wk 24 (Day 169)	103	68.53	17.501	25.0	66.67	100.0
		Wk 36 (Day 253)	97	67.44	16.583	16.7	66.67	100.0
		Wk 48 (Day 337)	86	68.70	18.957	16.7	70.83	100.0
		Wk 60 (Day 421)	71	72.30	15.544	25.0	66.67	100.0
		Wk 72 (Day 505)	67	71.14	17.062	25.0	75.00	100.0
		Wk 84 (Day 589)	50	71.67	15.430	33.3	75.00	100.0
		Wk 96 (Day 673)	41	71.34	17.584	16.7	66.67	100.0
		Wk 108 (Day 757)	32	75.00	16.667	33.3	83.33	100.0
		End of Treatment	70	65.36	17.528	16.7	66.67	100.0
		30 day Follow-up	24	69.10	22.045	33.3	75.00	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Functional scale: Physical	Olaparib + bevacizumab (N=255)	Baseline [a]	245	79.27	16.865	20.0	80.00	100.0
		Wk 12 (Day 85)	225	77.47	18.485	6.7	80.00	100.0
		Wk 24 (Day 169)	202	78.28	19.534	0.0	86.67	100.0
		Wk 36 (Day 253)	177	78.99	19.241	6.7	80.00	100.0
		Wk 48 (Day 337)	174	79.25	18.870	0.0	80.00	100.0
		Wk 60 (Day 421)	162	80.20	17.123	13.3	86.67	100.0
		Wk 72 (Day 505)	156	81.53	19.063	6.7	86.67	100.0
		Wk 84 (Day 589)	138	83.44	17.991	13.3	86.67	100.0
		Wk 96 (Day 673)	136	84.14	16.804	20.0	86.67	100.0
		Wk 108 (Day 757)	110	83.80	17.676	26.7	86.67	100.0
		Wk 120 (Day 841)	1	100.00	NC	100.0	100.00	100.0
		Wk 132 (Day 925)	1	100.00	NC	100.0	100.00	100.0
		Wk 144 (Day 1009)	1	100.00	NC	100.0	100.00	100.0
		Wk 156 (Day 1093)	1	100.00	NC	100.0	100.00	100.0
		End of Treatment	131	80.28	18.569	20.0	86.67	100.0
		30 day Follow-up	61	80.08	18.857	26.7	80.00	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	126	76.67	18.614	20.0	80.00	100.0
		Wk 12 (Day 85)	118	76.91	18.890	20.0	80.00	100.0
		Wk 24 (Day 169)	103	78.95	16.547	26.7	86.67	100.0
		Wk 36 (Day 253)	97	78.95	16.835	33.3	86.67	100.0
		Wk 48 (Day 337)	86	78.80	17.723	26.7	80.00	100.0
		Wk 60 (Day 421)	71	82.42	16.556	40.0	86.67	100.0
		Wk 72 (Day 505)	67	80.55	18.743	26.7	86.67	100.0
		Wk 84 (Day 589)	51	83.66	16.935	40.0	86.67	100.0
		Wk 96 (Day 673)	41	82.80	17.169	13.3	86.67	100.0
		Wk 108 (Day 757)	31	82.37	19.667	33.3	86.67	100.0
		End of Treatment	69	79.64	18.985	25.0	86.67	100.0
		30 day Follow-up	24	82.78	18.328	40.0	86.67	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Functional scale: Role	Olaparib + bevacizumab (N=255)	Baseline [a]	245	72.93	26.556	0.0	66.67	100.0
		Wk 12 (Day 85)	224	68.90	25.548	0.0	66.67	100.0
		Wk 24 (Day 169)	202	73.93	26.172	0.0	66.67	100.0
		Wk 36 (Day 253)	178	72.19	24.912	0.0	66.67	100.0
		Wk 48 (Day 337)	175	72.67	25.904	0.0	66.67	100.0
		Wk 60 (Day 421)	162	75.41	25.143	0.0	83.33	100.0
		Wk 72 (Day 505)	158	77.11	25.826	0.0	83.33	100.0
		Wk 84 (Day 589)	140	79.29	23.980	0.0	83.33	100.0
		Wk 96 (Day 673)	137	79.68	25.140	0.0	83.33	100.0
		Wk 108 (Day 757)	110	79.09	25.386	0.0	83.33	100.0
		Wk 120 (Day 841)	1	100.00	NC	100.0	100.00	100.0
		Wk 132 (Day 925)	1	100.00	NC	100.0	100.00	100.0
		Wk 144 (Day 1009)	1	100.00	NC	100.0	100.00	100.0
		Wk 156 (Day 1093)	1	100.00	NC	100.0	100.00	100.0
		End of Treatment	131	74.81	27.298	0.0	83.33	100.0
		30 day Follow-up	61	69.67	29.425	0.0	66.67	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	126	72.35	27.338	0.0	66.67	100.0
		Wk 12 (Day 85)	118	69.35	25.688	0.0	66.67	100.0
		Wk 24 (Day 169)	103	71.52	25.633	16.7	66.67	100.0
		Wk 36 (Day 253)	97	71.48	23.809	33.3	66.67	100.0
		Wk 48 (Day 337)	86	76.36	23.910	0.0	75.00	100.0
		Wk 60 (Day 421)	71	76.29	22.122	16.7	66.67	100.0
		Wk 72 (Day 505)	68	78.19	21.405	16.7	75.00	100.0
		Wk 84 (Day 589)	51	82.35	21.963	33.3	100.00	100.0
		Wk 96 (Day 673)	41	79.67	21.574	16.7	83.33	100.0
		Wk 108 (Day 757)	32	79.69	22.294	33.3	83.33	100.0
		End of Treatment	70	72.62	23.058	16.7	66.67	100.0
		30 day Follow-up	24	78.47	28.009	0.0	100.00	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanpra 06OCT2020:14:59 kvbv306

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Functional scale: Cognitive	Olaparib + bevacizumab (N=255)	Baseline [a]	246	81.44	20.393	0.0	83.33	100.0
		Wk 12 (Day 85)	224	81.25	20.351	0.0	83.33	100.0
		Wk 24 (Day 169)	202	81.85	20.577	0.0	83.33	100.0
		Wk 36 (Day 253)	178	80.15	21.968	0.0	83.33	100.0
		Wk 48 (Day 337)	175	80.10	21.789	0.0	83.33	100.0
		Wk 60 (Day 421)	163	79.75	22.433	0.0	83.33	100.0
		Wk 72 (Day 505)	158	78.80	23.768	0.0	83.33	100.0
		Wk 84 (Day 589)	138	78.14	22.765	0.0	83.33	100.0
		Wk 96 (Day 673)	137	78.71	22.842	0.0	83.33	100.0
		Wk 108 (Day 757)	110	81.21	22.475	0.0	83.33	100.0
		Wk 120 (Day 841)	1	83.33	NC	83.3	83.33	83.3
		Wk 132 (Day 925)	1	66.67	NC	66.7	66.67	66.7
		Wk 144 (Day 1009)	1	83.33	NC	83.3	83.33	83.3
		Wk 156 (Day 1093)	1	83.33	NC	83.3	83.33	83.3
		End of Treatment	131	79.64	23.323	0.0	83.33	100.0
		30 day Follow-up	61	77.05	20.450	16.7	83.33	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	124	81.45	19.034	16.7	83.33	100.0
		Wk 12 (Day 85)	117	78.92	21.374	0.0	83.33	100.0
		Wk 24 (Day 169)	103	80.26	19.067	33.3	83.33	100.0
		Wk 36 (Day 253)	97	80.07	19.490	0.0	83.33	100.0
		Wk 48 (Day 337)	86	80.04	20.101	33.3	83.33	100.0
		Wk 60 (Day 421)	71	84.27	18.875	16.7	83.33	100.0
		Wk 72 (Day 505)	67	82.09	19.530	33.3	83.33	100.0
		Wk 84 (Day 589)	51	83.99	16.654	50.0	83.33	100.0
		Wk 96 (Day 673)	41	82.11	19.857	33.3	83.33	100.0
		Wk 108 (Day 757)	32	82.29	18.422	33.3	83.33	100.0
		End of Treatment	70	79.76	21.960	0.0	83.33	100.0
		30 day Follow-up	24	81.25	23.215	33.3	83.33	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Functional scale: Emotional	Olaparib + bevacizumab (N=255)	Baseline [a]	246	76.10	22.102	0.0	83.33	100.0
		Wk 12 (Day 85)	224	75.25	21.725	0.0	75.00	100.0
		Wk 24 (Day 169)	202	74.16	22.572	0.0	75.00	100.0
		Wk 36 (Day 253)	178	75.81	21.422	0.0	75.00	100.0
		Wk 48 (Day 337)	175	73.41	22.013	0.0	75.00	100.0
		Wk 60 (Day 421)	163	73.16	22.869	0.0	75.00	100.0
		Wk 72 (Day 505)	158	73.80	23.448	0.0	75.00	100.0
		Wk 84 (Day 589)	138	73.37	22.646	0.0	75.00	100.0
		Wk 96 (Day 673)	137	72.61	24.125	0.0	75.00	100.0
		Wk 108 (Day 757)	110	75.38	25.023	0.0	83.33	100.0
		Wk 120 (Day 841)	1	100.00	NC	100.0	100.00	100.0
		Wk 132 (Day 925)	1	100.00	NC	100.0	100.00	100.0
		Wk 144 (Day 1009)	1	100.00	NC	100.0	100.00	100.0
		Wk 156 (Day 1093)	1	91.67	NC	91.7	91.67	91.7
		End of Treatment	131	71.06	26.076	0.0	75.00	100.0
		30 day Follow-up	61	70.90	22.237	0.0	75.00	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	124	77.87	17.939	16.7	83.33	100.0
		Wk 12 (Day 85)	117	73.79	21.422	0.0	75.00	100.0
		Wk 24 (Day 169)	103	73.79	22.184	16.7	75.00	100.0
		Wk 36 (Day 253)	97	76.23	20.222	8.3	83.33	100.0
		Wk 48 (Day 337)	86	76.20	20.419	8.3	75.00	100.0
		Wk 60 (Day 421)	71	76.84	19.653	8.3	83.33	100.0
		Wk 72 (Day 505)	67	77.78	16.973	33.3	75.00	100.0
		Wk 84 (Day 589)	51	79.36	16.899	41.7	83.33	100.0
		Wk 96 (Day 673)	41	76.63	19.651	8.3	75.00	100.0
		Wk 108 (Day 757)	32	78.39	19.499	33.3	83.33	100.0
		End of Treatment	70	70.08	22.056	0.0	75.00	100.0
		30 day Follow-up	24	72.92	21.598	25.0	79.17	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanpra 06OCT2020:14:59 kvbv306

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Functional scale: Social	Olaparib + bevacizumab (N=255)	Baseline [a]	246	73.85	27.814	0.0	83.33	100.0
		Wk 12 (Day 85)	224	76.12	24.931	0.0	83.33	100.0
		Wk 24 (Day 169)	202	76.49	24.684	0.0	83.33	100.0
		Wk 36 (Day 253)	178	78.09	25.004	0.0	83.33	100.0
		Wk 48 (Day 337)	174	75.77	25.315	0.0	83.33	100.0
		Wk 60 (Day 421)	163	80.27	24.931	0.0	83.33	100.0
		Wk 72 (Day 505)	158	82.07	22.694	0.0	100.00	100.0
		Wk 84 (Day 589)	138	80.07	23.385	0.0	83.33	100.0
		Wk 96 (Day 673)	137	78.10	26.099	0.0	83.33	100.0
		Wk 108 (Day 757)	110	80.76	25.956	0.0	100.00	100.0
		Wk 120 (Day 841)	1	100.00	NC	100.0	100.00	100.0
		Wk 132 (Day 925)	1	100.00	NC	100.0	100.00	100.0
		Wk 144 (Day 1009)	1	100.00	NC	100.0	100.00	100.0
		Wk 156 (Day 1093)	1	100.00	NC	100.0	100.00	100.0
		End of Treatment	131	77.10	27.059	0.0	83.33	100.0
		30 day Follow-up	61	71.58	29.556	0.0	66.67	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	124	73.52	24.694	0.0	66.67	100.0
		Wk 12 (Day 85)	117	76.50	25.348	0.0	83.33	100.0
		Wk 24 (Day 169)	103	79.29	22.563	0.0	83.33	100.0
		Wk 36 (Day 253)	97	79.04	22.983	0.0	83.33	100.0
		Wk 48 (Day 337)	86	79.84	21.407	16.7	83.33	100.0
		Wk 60 (Day 421)	71	85.92	18.181	33.3	100.00	100.0
		Wk 72 (Day 505)	67	84.83	20.665	16.7	100.00	100.0
		Wk 84 (Day 589)	51	83.33	22.361	33.3	100.00	100.0
		Wk 96 (Day 673)	41	86.99	18.451	33.3	100.00	100.0
		Wk 108 (Day 757)	32	82.81	20.515	33.3	100.00	100.0
		End of Treatment	70	75.71	25.010	0.0	83.33	100.0
		30 day Follow-up	24	77.78	30.163	0.0	100.00	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanpra 06OCT2020:14:59 kvbv306

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Single item symptom scale: Loss of appetite	Olaparib + bevacizumab (N=255)	Baseline [a]	245	8.03	17.177	0.0	0.00	66.7
		Wk 12 (Day 85)	225	18.81	27.577	0.0	0.00	100.0
		Wk 24 (Day 169)	201	15.09	25.144	0.0	0.00	100.0
		Wk 36 (Day 253)	176	14.02	23.487	0.0	0.00	100.0
		Wk 48 (Day 337)	175	14.48	23.839	0.0	0.00	100.0
		Wk 60 (Day 421)	162	11.32	19.363	0.0	0.00	66.7
		Wk 72 (Day 505)	156	11.32	22.239	0.0	0.00	100.0
		Wk 84 (Day 589)	138	6.04	15.196	0.0	0.00	66.7
		Wk 96 (Day 673)	137	11.19	20.721	0.0	0.00	100.0
		Wk 108 (Day 757)	110	7.88	17.445	0.0	0.00	100.0
		Wk 120 (Day 841)	1	0.00	NC	0.0	0.00	0.0
		Wk 132 (Day 925)	1	0.00	NC	0.0	0.00	0.0
		Wk 144 (Day 1009)	1	0.00	NC	0.0	0.00	0.0
		Wk 156 (Day 1093)	1	0.00	NC	0.0	0.00	0.0
		End of Treatment	131	13.74	23.341	0.0	0.00	100.0
		30 day Follow-up	61	14.75	25.477	0.0	0.00	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	126	8.73	17.476	0.0	0.00	66.7
		Wk 12 (Day 85)	118	9.60	21.396	0.0	0.00	100.0
		Wk 24 (Day 169)	103	9.71	20.147	0.0	0.00	100.0
		Wk 36 (Day 253)	95	8.77	18.963	0.0	0.00	100.0
		Wk 48 (Day 337)	86	8.91	19.419	0.0	0.00	100.0
		Wk 60 (Day 421)	71	6.57	16.542	0.0	0.00	100.0
		Wk 72 (Day 505)	68	7.35	15.068	0.0	0.00	66.7
		Wk 84 (Day 589)	51	5.23	12.243	0.0	0.00	33.3
		Wk 96 (Day 673)	41	8.13	16.297	0.0	0.00	66.7
		Wk 108 (Day 757)	32	7.29	16.361	0.0	0.00	66.7
		End of Treatment	70	13.33	21.535	0.0	0.00	100.0
		30 day Follow-up	24	8.33	20.264	0.0	0.00	66.7

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Single item symptom scale: Constipation	Olaparib + bevacizumab (N=255)	Baseline [a]	243	17.83	27.311	0.0	0.00	100.0
		Wk 12 (Day 85)	221	13.42	24.532	0.0	0.00	100.0
		Wk 24 (Day 169)	200	15.33	25.414	0.0	0.00	100.0
		Wk 36 (Day 253)	178	14.98	25.557	0.0	0.00	100.0
		Wk 48 (Day 337)	175	14.48	25.395	0.0	0.00	100.0
		Wk 60 (Day 421)	161	20.29	29.621	0.0	0.00	100.0
		Wk 72 (Day 505)	155	20.00	27.287	0.0	0.00	100.0
		Wk 84 (Day 589)	139	21.82	29.410	0.0	0.00	100.0
		Wk 96 (Day 673)	136	19.61	26.441	0.0	0.00	100.0
		Wk 108 (Day 757)	110	20.00	27.539	0.0	0.00	100.0
		Wk 120 (Day 841)	1	33.33	NC	33.3	33.33	33.3
		Wk 132 (Day 925)	1	0.00	NC	0.0	0.00	0.0
		Wk 144 (Day 1009)	1	0.00	NC	0.0	0.00	0.0
		Wk 156 (Day 1093)	1	0.00	NC	0.0	0.00	0.0
		End of Treatment	130	18.46	27.550	0.0	0.00	100.0
		30 day Follow-up	61	24.04	31.110	0.0	0.00	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	124	14.78	24.529	0.0	0.00	100.0
		Wk 12 (Day 85)	117	11.97	22.515	0.0	0.00	100.0
		Wk 24 (Day 169)	100	15.00	23.391	0.0	0.00	100.0
		Wk 36 (Day 253)	97	12.37	20.593	0.0	0.00	66.7
		Wk 48 (Day 337)	85	14.90	23.852	0.0	0.00	100.0
		Wk 60 (Day 421)	70	13.81	20.059	0.0	0.00	66.7
		Wk 72 (Day 505)	67	15.92	24.862	0.0	0.00	100.0
		Wk 84 (Day 589)	50	16.67	25.422	0.0	0.00	100.0
		Wk 96 (Day 673)	41	24.39	27.913	0.0	33.33	100.0
		Wk 108 (Day 757)	32	18.75	25.312	0.0	0.00	100.0
		End of Treatment	69	20.29	26.945	0.0	0.00	100.0
		30 day Follow-up	24	19.44	27.657	0.0	0.00	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanpra 06OCT2020:14:59 kvbv306

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Single item symptom scale: Diarrhoea	Olaparib + bevacizumab (N=255)	Baseline [a]	243	9.60	19.146	0.0	0.00	100.0
		Wk 12 (Day 85)	223	12.71	22.661	0.0	0.00	100.0
		Wk 24 (Day 169)	199	13.23	25.693	0.0	0.00	100.0
		Wk 36 (Day 253)	178	8.99	19.896	0.0	0.00	100.0
		Wk 48 (Day 337)	174	9.20	16.955	0.0	0.00	66.7
		Wk 60 (Day 421)	162	10.49	19.824	0.0	0.00	100.0
		Wk 72 (Day 505)	158	9.70	19.295	0.0	0.00	100.0
		Wk 84 (Day 589)	138	7.73	18.583	0.0	0.00	100.0
		Wk 96 (Day 673)	137	9.49	19.364	0.0	0.00	100.0
		Wk 108 (Day 757)	110	6.06	15.099	0.0	0.00	66.7
		Wk 120 (Day 841)	1	0.00	NC	0.0	0.00	0.0
		Wk 132 (Day 925)	1	0.00	NC	0.0	0.00	0.0
		Wk 144 (Day 1009)	1	0.00	NC	0.0	0.00	0.0
		Wk 156 (Day 1093)	1	0.00	NC	0.0	0.00	0.0
		End of Treatment	131	10.18	20.628	0.0	0.00	100.0
		30 day Follow-up	61	9.29	18.390	0.0	0.00	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	125	13.07	24.647	0.0	0.00	100.0
		Wk 12 (Day 85)	117	10.83	22.244	0.0	0.00	100.0
		Wk 24 (Day 169)	102	12.75	25.279	0.0	0.00	100.0
		Wk 36 (Day 253)	95	13.33	24.982	0.0	0.00	100.0
		Wk 48 (Day 337)	86	14.34	26.341	0.0	0.00	100.0
		Wk 60 (Day 421)	70	11.90	22.725	0.0	0.00	100.0
		Wk 72 (Day 505)	66	9.60	21.693	0.0	0.00	100.0
		Wk 84 (Day 589)	51	10.46	22.598	0.0	0.00	100.0
		Wk 96 (Day 673)	41	13.01	22.209	0.0	0.00	66.7
		Wk 108 (Day 757)	32	8.33	22.401	0.0	0.00	100.0
		End of Treatment	70	11.43	23.320	0.0	0.00	100.0
		30 day Follow-up	24	9.72	23.008	0.0	0.00	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Single item symptom scale: Dyspnoea	Olaparib + bevacizumab (N=255)	Baseline [a]	242	23.97	26.723	0.0	33.33	100.0
		Wk 12 (Day 85)	223	26.31	28.040	0.0	33.33	100.0
		Wk 24 (Day 169)	200	23.33	26.524	0.0	33.33	100.0
		Wk 36 (Day 253)	178	23.22	27.631	0.0	16.67	100.0
		Wk 48 (Day 337)	175	23.43	26.809	0.0	33.33	100.0
		Wk 60 (Day 421)	162	24.49	28.728	0.0	33.33	100.0
		Wk 72 (Day 505)	157	23.14	26.057	0.0	33.33	100.0
		Wk 84 (Day 589)	138	21.01	23.853	0.0	33.33	100.0
		Wk 96 (Day 673)	137	22.14	25.654	0.0	33.33	100.0
		Wk 108 (Day 757)	109	21.41	24.226	0.0	33.33	100.0
		Wk 120 (Day 841)	1	0.00	NC	0.0	0.00	0.0
		Wk 132 (Day 925)	1	0.00	NC	0.0	0.00	0.0
		Wk 144 (Day 1009)	1	0.00	NC	0.0	0.00	0.0
		Wk 156 (Day 1093)	1	0.00	NC	0.0	0.00	0.0
		End of Treatment	130	24.10	26.255	0.0	33.33	100.0
		30 day Follow-up	61	28.96	28.203	0.0	33.33	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	126	23.28	27.087	0.0	16.67	100.0
		Wk 12 (Day 85)	118	20.62	25.382	0.0	0.00	100.0
		Wk 24 (Day 169)	103	21.68	25.866	0.0	0.00	100.0
		Wk 36 (Day 253)	97	23.02	27.370	0.0	0.00	100.0
		Wk 48 (Day 337)	86	19.77	24.722	0.0	0.00	100.0
		Wk 60 (Day 421)	71	22.07	26.394	0.0	0.00	100.0
		Wk 72 (Day 505)	67	17.41	21.987	0.0	0.00	66.7
		Wk 84 (Day 589)	51	16.99	25.274	0.0	0.00	100.0
		Wk 96 (Day 673)	41	22.76	24.082	0.0	33.33	66.7
		Wk 108 (Day 757)	32	21.87	21.767	0.0	33.33	66.7
		End of Treatment	70	20.48	23.599	0.0	16.67	100.0
		30 day Follow-up	24	23.61	26.882	0.0	33.33	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanpra 06OCT2020:14:59 kvbv306

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Symptom scale: Fatigue	Olaparib + bevacizumab (N=255)	Baseline [a]	244	33.15	23.035	0.0	33.33	100.0
		Wk 12 (Day 85)	225	39.70	23.039	0.0	33.33	100.0
		Wk 24 (Day 169)	202	35.04	21.919	0.0	33.33	100.0
		Wk 36 (Day 253)	177	35.00	23.025	0.0	33.33	100.0
		Wk 48 (Day 337)	175	35.02	23.536	0.0	33.33	100.0
		Wk 60 (Day 421)	162	33.57	23.984	0.0	33.33	100.0
		Wk 72 (Day 505)	157	31.00	24.020	0.0	33.33	100.0
		Wk 84 (Day 589)	139	31.65	22.329	0.0	33.33	100.0
		Wk 96 (Day 673)	137	30.25	23.771	0.0	33.33	100.0
		Wk 108 (Day 757)	109	29.66	22.696	0.0	22.22	100.0
		Wk 120 (Day 841)	1	22.22	NC	22.2	22.22	22.2
		Wk 132 (Day 925)	1	22.22	NC	22.2	22.22	22.2
		Wk 144 (Day 1009)	1	22.22	NC	22.2	22.22	22.2
		Wk 156 (Day 1093)	1	22.22	NC	22.2	22.22	22.2
		End of Treatment	130	33.33	23.973	0.0	33.33	100.0
		30 day Follow-up	61	37.25	24.540	0.0	33.33	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	125	34.31	22.357	0.0	33.33	100.0
		Wk 12 (Day 85)	118	37.19	24.347	0.0	33.33	100.0
		Wk 24 (Day 169)	103	34.57	20.946	0.0	33.33	88.9
		Wk 36 (Day 253)	97	34.25	20.549	0.0	33.33	88.9
		Wk 48 (Day 337)	86	31.85	22.245	0.0	33.33	100.0
		Wk 60 (Day 421)	71	28.95	21.164	0.0	33.33	88.9
		Wk 72 (Day 505)	68	31.54	20.686	0.0	33.33	88.9
		Wk 84 (Day 589)	51	27.45	21.006	0.0	22.22	66.7
		Wk 96 (Day 673)	41	27.24	20.100	0.0	22.22	88.9
		Wk 108 (Day 757)	32	28.30	18.686	0.0	33.33	66.7
		End of Treatment	69	34.14	23.207	0.0	33.33	100.0
		30 day Follow-up	24	31.25	21.907	0.0	33.33	66.7

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanpra 06OCT2020:14:59 kvbv306

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Single item symptom scale: Financial difficulties	Olaparib + bevacizumab (N=255)	Baseline [a]	244	17.76	29.686	0.0	0.00	100.0
		Wk 12 (Day 85)	222	16.82	29.704	0.0	0.00	100.0
		Wk 24 (Day 169)	199	17.42	29.743	0.0	0.00	100.0
		Wk 36 (Day 253)	176	16.67	28.508	0.0	0.00	100.0
		Wk 48 (Day 337)	173	16.57	28.217	0.0	0.00	100.0
		Wk 60 (Day 421)	162	15.64	28.579	0.0	0.00	100.0
		Wk 72 (Day 505)	154	16.23	28.325	0.0	0.00	100.0
		Wk 84 (Day 589)	138	15.70	27.373	0.0	0.00	100.0
		Wk 96 (Day 673)	137	15.57	28.311	0.0	0.00	100.0
		Wk 108 (Day 757)	110	13.64	25.660	0.0	0.00	100.0
		Wk 120 (Day 841)	1	0.00	NC	0.0	0.00	0.0
		Wk 132 (Day 925)	1	0.00	NC	0.0	0.00	0.0
		Wk 144 (Day 1009)	1	0.00	NC	0.0	0.00	0.0
		Wk 156 (Day 1093)	1	0.00	NC	0.0	0.00	0.0
		End of Treatment	130	14.10	25.875	0.0	0.00	100.0
		30 day Follow-up	59	13.56	27.065	0.0	0.00	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	122	19.13	29.665	0.0	0.00	100.0
		Wk 12 (Day 85)	117	19.66	29.084	0.0	0.00	100.0
		Wk 24 (Day 169)	102	17.32	27.643	0.0	0.00	100.0
		Wk 36 (Day 253)	97	15.46	25.029	0.0	0.00	100.0
		Wk 48 (Day 337)	86	17.05	26.442	0.0	0.00	100.0
		Wk 60 (Day 421)	71	15.49	26.922	0.0	0.00	100.0
		Wk 72 (Day 505)	66	14.65	23.482	0.0	0.00	100.0
		Wk 84 (Day 589)	51	12.42	24.001	0.0	0.00	100.0
		Wk 96 (Day 673)	41	12.20	20.758	0.0	0.00	66.7
		Wk 108 (Day 757)	32	12.50	20.302	0.0	0.00	66.7
		End of Treatment	70	18.10	28.762	0.0	0.00	100.0
		30 day Follow-up	24	15.28	27.766	0.0	0.00	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanpra 06OCT2020:14:59 kvbv306

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Symptom scale: Nausea and vomiting	Olaparib + bevacizumab (N=255)	Baseline [a]	245	4.35	11.750	0.0	0.00	100.0
		Wk 12 (Day 85)	225	14.89	20.637	0.0	0.00	100.0
		Wk 24 (Day 169)	202	10.97	16.518	0.0	0.00	83.3
		Wk 36 (Day 253)	178	9.64	14.897	0.0	0.00	83.3
		Wk 48 (Day 337)	175	11.71	17.893	0.0	0.00	100.0
		Wk 60 (Day 421)	162	10.70	16.986	0.0	0.00	83.3
		Wk 72 (Day 505)	157	9.77	17.300	0.0	0.00	100.0
		Wk 84 (Day 589)	139	8.03	15.195	0.0	0.00	100.0
		Wk 96 (Day 673)	137	7.06	12.414	0.0	0.00	66.7
		Wk 108 (Day 757)	110	5.91	13.656	0.0	0.00	100.0
		Wk 120 (Day 841)	1	0.00	NC	0.0	0.00	0.0
		Wk 132 (Day 925)	1	0.00	NC	0.0	0.00	0.0
		Wk 144 (Day 1009)	1	0.00	NC	0.0	0.00	0.0
		Wk 156 (Day 1093)	1	0.00	NC	0.0	0.00	0.0
		End of Treatment	131	9.16	17.198	0.0	0.00	100.0
		30 day Follow-up	61	9.56	24.430	0.0	0.00	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	126	3.17	8.873	0.0	0.00	50.0
		Wk 12 (Day 85)	118	4.52	11.251	0.0	0.00	66.7
		Wk 24 (Day 169)	103	3.07	7.286	0.0	0.00	33.3
		Wk 36 (Day 253)	97	5.33	10.904	0.0	0.00	50.0
		Wk 48 (Day 337)	86	4.84	11.395	0.0	0.00	66.7
		Wk 60 (Day 421)	71	2.11	5.585	0.0	0.00	16.7
		Wk 72 (Day 505)	68	1.96	5.410	0.0	0.00	16.7
		Wk 84 (Day 589)	51	3.27	8.178	0.0	0.00	33.3
		Wk 96 (Day 673)	41	6.91	17.864	0.0	0.00	83.3
		Wk 108 (Day 757)	32	5.73	16.725	0.0	0.00	66.7
		End of Treatment	70	6.19	15.061	0.0	0.00	66.7
		30 day Follow-up	24	11.11	25.380	0.0	0.00	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanpra 06OCT2020:14:59 kvbv306

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Symptom scale: Pain	Olaparib + bevacizumab (N=255)	Baseline [a]	247	22.81	23.268	0.0	16.67	100.0
		Wk 12 (Day 85)	225	28.89	25.394	0.0	33.33	100.0
		Wk 24 (Day 169)	202	28.30	26.354	0.0	16.67	100.0
		Wk 36 (Day 253)	178	29.03	25.738	0.0	33.33	100.0
		Wk 48 (Day 337)	175	29.71	26.375	0.0	33.33	100.0
		Wk 60 (Day 421)	164	25.81	24.790	0.0	16.67	100.0
		Wk 72 (Day 505)	159	25.05	23.109	0.0	16.67	100.0
		Wk 84 (Day 589)	139	21.22	22.948	0.0	16.67	100.0
		Wk 96 (Day 673)	137	20.68	23.788	0.0	16.67	100.0
		Wk 108 (Day 757)	110	18.64	24.076	0.0	0.00	100.0
		Wk 120 (Day 841)	1	33.33	NC	33.3	33.33	33.3
		Wk 132 (Day 925)	1	16.67	NC	16.7	16.67	16.7
		Wk 144 (Day 1009)	1	16.67	NC	16.7	16.67	16.7
		Wk 156 (Day 1093)	1	33.33	NC	33.3	33.33	33.3
		End of Treatment	131	21.88	23.758	0.0	16.67	100.0
		30 day Follow-up	61	26.23	26.080	0.0	16.67	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	126	23.94	22.949	0.0	16.67	100.0
		Wk 12 (Day 85)	118	32.77	26.414	0.0	33.33	100.0
		Wk 24 (Day 169)	104	30.13	22.646	0.0	33.33	100.0
		Wk 36 (Day 253)	97	30.76	24.807	0.0	33.33	100.0
		Wk 48 (Day 337)	86	29.26	25.041	0.0	33.33	100.0
		Wk 60 (Day 421)	71	27.23	20.362	0.0	33.33	83.3
		Wk 72 (Day 505)	68	25.49	24.344	0.0	16.67	83.3
		Wk 84 (Day 589)	51	23.20	20.569	0.0	16.67	66.7
		Wk 96 (Day 673)	41	18.29	21.668	0.0	0.00	66.7
		Wk 108 (Day 757)	32	19.27	23.988	0.0	8.33	83.3
		End of Treatment	70	27.14	23.938	0.0	33.33	83.3
		30 day Follow-up	24	31.94	31.051	0.0	33.33	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanpra 06OCT2020:14:59 kvbv306

Table 2.5.1 PAOLA1: Summary of EORTC QLQ-C30 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-C30 Single item symptom scale: Insomnia	Olaparib + bevacizumab (N=255)	Baseline [a]	243	28.40	30.049	0.0	33.33	100.0
		Wk 12 (Day 85)	226	30.97	30.051	0.0	33.33	100.0
		Wk 24 (Day 169)	202	33.17	31.805	0.0	33.33	100.0
		Wk 36 (Day 253)	178	30.90	30.279	0.0	33.33	100.0
		Wk 48 (Day 337)	174	30.27	30.043	0.0	33.33	100.0
		Wk 60 (Day 421)	160	33.33	33.017	0.0	33.33	100.0
		Wk 72 (Day 505)	157	28.03	31.011	0.0	33.33	100.0
		Wk 84 (Day 589)	139	31.89	29.725	0.0	33.33	100.0
		Wk 96 (Day 673)	136	32.11	33.063	0.0	33.33	100.0
		Wk 108 (Day 757)	109	32.11	30.404	0.0	33.33	100.0
		Wk 120 (Day 841)	1	0.00	NC	0.0	0.00	0.0
		Wk 132 (Day 925)	1	0.00	NC	0.0	0.00	0.0
		Wk 144 (Day 1009)	1	0.00	NC	0.0	0.00	0.0
		Wk 156 (Day 1093)	1	33.33	NC	33.3	33.33	33.3
		End of Treatment	130	35.64	30.834	0.0	33.33	100.0
		30 day Follow-up	61	32.24	31.604	0.0	33.33	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	126	21.96	25.002	0.0	33.33	100.0
		Wk 12 (Day 85)	118	32.49	29.706	0.0	33.33	100.0
		Wk 24 (Day 169)	103	28.80	30.625	0.0	33.33	100.0
		Wk 36 (Day 253)	97	28.87	29.513	0.0	33.33	100.0
		Wk 48 (Day 337)	86	29.07	28.375	0.0	33.33	100.0
		Wk 60 (Day 421)	71	30.99	26.018	0.0	33.33	100.0
		Wk 72 (Day 505)	68	26.96	25.273	0.0	33.33	100.0
		Wk 84 (Day 589)	51	28.10	32.912	0.0	33.33	100.0
		Wk 96 (Day 673)	40	30.00	23.631	0.0	33.33	100.0
		Wk 108 (Day 757)	32	33.33	26.774	0.0	33.33	100.0
		End of Treatment	69	34.30	27.399	0.0	33.33	100.0
		30 day Follow-up	24	30.56	30.954	0.0	33.33	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanpra 06OCT2020:14:59 kvbv306

Table 2.5.2.1 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Global QoL/health status (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	203	70.40 (17.296)	-4.17 (1.064)	111	69.37 (15.495)	-2.05 (1.438)	-2.12 (-5.639, 1.402)	0.2373
Wk 24 (Day 169)	186	70.74 (17.656)	-0.97 (1.032)	98	68.20 (16.203)	-0.47 (1.422)	-0.50 (-3.962, 2.960)	0.7758
Wk 36 (Day 253)	165	69.29 (17.138)	-0.23 (1.109)	91	68.68 (15.681)	-2.54 (1.509)	2.31 (-1.376, 5.997)	0.2184
Wk 48 (Day 337)	163	69.33 (18.090)	-0.35 (1.177)	76	69.85 (16.157)	-0.13 (1.709)	-0.22 (-4.306, 3.868)	0.9160
Wk 60 (Day 421)	151	68.65 (17.995)	2.18 (1.071)	67	69.78 (16.969)	0.20 (1.569)	1.98 (-1.761, 5.722)	0.2983
Wk 72 (Day 505)	147	69.27 (17.713)	2.39 (1.181)	59	70.90 (16.035)	2.25 (1.827)	0.13 (-4.155, 4.419)	0.9517
Wk 84 (Day 589)	131	68.77 (17.883)	2.91 (1.179)	45	73.52 (15.416)	-0.40 (1.905)	3.31 (-1.106, 7.736)	0.1410
Wk 96 (Day 673)	129	69.06 (17.927)	1.13 (1.396)	37	70.50 (17.524)	0.63 (2.429)	0.49 (-5.031, 6.020)	0.8600
Average over all visits	219	70.02 (17.125)	0.36 (0.783)	118	68.50 (15.981)	-0.31 (1.136)	0.67 (-2.042, 3.391)	0.6256
Hedges' g SMD							0.06 (-0.167, 0.281)	0.6194

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.2 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Functional scale: Physical (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	203	79.48 (17.057)	-1.04 (0.969)	114	76.84 (18.235)	-0.39 (1.299)	-0.64 (-3.837, 2.548)	0.6916
Wk 24 (Day 169)	188	78.94 (17.352)	0.14 (1.021)	100	76.27 (19.182)	1.79 (1.400)	-1.65 (-5.057, 1.767)	0.3435
Wk 36 (Day 253)	164	79.43 (17.334)	0.68 (1.110)	93	76.45 (19.393)	0.73 (1.501)	-0.05 (-3.724, 3.633)	0.9807
Wk 48 (Day 337)	164	79.09 (17.415)	0.43 (1.057)	78	78.16 (18.993)	0.59 (1.498)	-0.16 (-3.768, 3.454)	0.9318
Wk 60 (Day 421)	152	79.59 (16.997)	1.73 (1.047)	68	76.79 (20.001)	3.01 (1.516)	-1.28 (-4.912, 2.354)	0.4889
Wk 72 (Day 505)	146	78.90 (18.044)	3.67 (1.139)	61	77.02 (20.605)	2.76 (1.697)	0.91 (-3.117, 4.936)	0.6570
Wk 84 (Day 589)	132	79.38 (17.512)	4.54 (1.103)	47	76.88 (20.470)	5.55 (1.688)	-1.01 (-4.982, 2.966)	0.6180
Wk 96 (Day 673)	129	79.48 (17.293)	5.28 (1.066)	37	75.86 (21.277)	5.09 (1.760)	0.19 (-3.866, 4.249)	0.9260
Average over all visits	219	79.52 (16.897)	1.93 (0.833)	120	76.50 (18.826)	2.39 (1.174)	-0.46 (-3.295, 2.375)	0.7499
Hedges' g SMD							-0.04 (-0.259, 0.186)	0.7470

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.3 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Functional scale: Role (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	202	72.61 (26.557)	-3.46 (1.469)	114	72.95 (27.010)	-2.87 (1.962)	-0.59 (-5.412, 4.231)	0.8098
Wk 24 (Day 169)	188	72.52 (27.002)	2.24 (1.558)	100	71.67 (27.677)	0.09 (2.135)	2.15 (-3.050, 7.351)	0.4165
Wk 36 (Day 253)	165	72.12 (26.872)	0.67 (1.597)	93	71.51 (27.207)	-1.57 (2.146)	2.25 (-3.019, 7.511)	0.4019
Wk 48 (Day 337)	165	73.43 (27.540)	0.55 (1.603)	78	74.15 (25.432)	2.72 (2.295)	-2.17 (-7.675, 3.344)	0.4397
Wk 60 (Day 421)	152	72.26 (27.859)	4.19 (1.562)	68	72.30 (26.953)	1.04 (2.288)	3.14 (-2.312, 8.600)	0.2575
Wk 72 (Day 505)	148	71.51 (27.784)	4.83 (1.616)	62	72.85 (26.522)	3.47 (2.435)	1.36 (-4.394, 7.116)	0.6419
Wk 84 (Day 589)	134	72.76 (28.506)	6.58 (1.620)	47	72.70 (26.564)	6.29 (2.607)	0.30 (-5.751, 6.346)	0.9229
Wk 96 (Day 673)	129	72.48 (28.386)	7.29 (1.707)	37	71.17 (25.954)	3.83 (2.912)	3.46 (-3.191, 10.111)	0.3065
Average over all visits	219	72.53 (26.806)	2.86 (1.121)	120	72.50 (27.809)	1.62 (1.598)	1.24 (-2.602, 5.077)	0.5264
Hedges' g SMD							0.07 (-0.150, 0.296)	0.5205

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.4 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Functional scale: Cognitive (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	204	81.94 (19.975)	-1.17 (1.089)	111	81.53 (19.378)	-2.82 (1.479)	1.66 (-1.958, 5.269)	0.3681
Wk 24 (Day 169)	188	81.83 (19.932)	0.35 (1.127)	98	82.48 (17.968)	-2.18 (1.559)	2.53 (-1.261, 6.311)	0.1903
Wk 36 (Day 253)	166	81.93 (19.455)	-2.11 (1.375)	91	83.88 (16.565)	-3.97 (1.869)	1.86 (-2.709, 6.430)	0.4235
Wk 48 (Day 337)	164	81.71 (19.988)	-2.40 (1.329)	76	84.43 (15.714)	-2.24 (1.932)	-0.15 (-4.773, 4.465)	0.9477
Wk 60 (Day 421)	153	81.05 (20.507)	-0.90 (1.273)	67	85.32 (15.495)	-1.91 (1.882)	1.01 (-3.465, 5.494)	0.6560
Wk 72 (Day 505)	148	82.21 (20.171)	-2.71 (1.393)	59	83.62 (15.000)	-2.08 (2.153)	-0.63 (-5.687, 4.417)	0.8047
Wk 84 (Day 589)	131	81.30 (19.723)	-2.68 (1.317)	46	82.97 (14.694)	-1.46 (2.098)	-1.21 (-6.096, 3.668)	0.6247
Wk 96 (Day 673)	129	81.40 (19.613)	-3.35 (1.546)	37	81.53 (14.585)	-1.78 (2.657)	-1.56 (-7.621, 4.494)	0.6116
Average over all visits	220	81.52 (20.440)	-1.87 (0.930)	118	81.92 (19.069)	-2.31 (1.348)	0.44 (-2.787, 3.660)	0.7903
Hedges' g SMD							0.03 (-0.193, 0.255)	0.7868

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.5 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Functional scale: Emotional (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	204	76.44 (22.199)	-1.44 (1.152)	111	77.60 (18.011)	-3.36 (1.562)	1.92 (-1.897, 5.742)	0.3227
Wk 24 (Day 169)	188	75.72 (22.689)	-1.30 (1.246)	98	78.00 (17.876)	-3.97 (1.722)	2.67 (-1.519, 6.851)	0.2110
Wk 36 (Day 253)	166	76.32 (22.469)	-0.55 (1.278)	91	79.37 (16.309)	-2.98 (1.744)	2.44 (-1.823, 6.696)	0.2612
Wk 48 (Day 337)	164	76.13 (22.711)	-2.77 (1.238)	76	79.68 (16.907)	-1.64 (1.807)	-1.13 (-5.447, 3.185)	0.6064
Wk 60 (Day 421)	153	75.62 (23.432)	-2.30 (1.360)	67	80.35 (17.597)	-4.41 (2.030)	2.11 (-2.714, 6.925)	0.3904
Wk 72 (Day 505)	148	75.06 (23.536)	-2.44 (1.423)	59	79.19 (18.005)	-1.38 (2.175)	-1.06 (-6.190, 4.060)	0.6828
Wk 84 (Day 589)	131	73.54 (23.958)	-1.74 (1.410)	46	79.35 (17.457)	-0.80 (2.229)	-0.94 (-6.147, 4.266)	0.7222
Wk 96 (Day 673)	129	74.55 (23.595)	-3.28 (1.612)	37	78.60 (18.424)	-2.26 (2.737)	-1.02 (-7.285, 5.252)	0.7496
Average over all visits	220	75.73 (22.447)	-1.98 (0.961)	118	78.23 (17.836)	-2.60 (1.396)	0.62 (-2.717, 3.961)	0.7141
Hedges' g SMD							0.04 (-0.181, 0.266)	0.7091

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.6 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Functional scale: Social (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	204	74.51 (28.046)	2.55 (1.359)	111	73.72 (25.181)	3.52 (1.844)	-0.97 (-5.475, 3.538)	0.6728
Wk 24 (Day 169)	188	74.29 (27.434)	4.39 (1.399)	98	73.64 (24.397)	5.61 (1.935)	-1.22 (-5.920, 3.478)	0.6096
Wk 36 (Day 253)	166	74.30 (27.865)	3.79 (1.526)	91	73.08 (24.441)	5.13 (2.080)	-1.34 (-6.418, 3.742)	0.6045
Wk 48 (Day 337)	163	73.52 (28.493)	2.02 (1.533)	76	75.44 (23.170)	6.14 (2.228)	-4.12 (-9.445, 1.206)	0.1289
Wk 60 (Day 421)	153	72.11 (28.793)	7.08 (1.447)	67	73.38 (24.110)	9.92 (2.144)	-2.84 (-7.937, 2.250)	0.2726
Wk 72 (Day 505)	148	72.41 (28.816)	8.51 (1.537)	59	75.14 (23.030)	9.50 (2.380)	-0.99 (-6.576, 4.591)	0.7265
Wk 84 (Day 589)	131	73.03 (27.616)	5.57 (1.604)	46	75.36 (23.502)	7.27 (2.557)	-1.70 (-7.652, 4.244)	0.5730
Wk 96 (Day 673)	129	73.51 (27.998)	4.69 (1.771)	37	70.72 (23.042)	13.72 (3.054)	-9.03 (-15.991, -2.079)	0.0111*
Average over all visits	220	73.48 (28.160)	4.82 (1.055)	118	73.59 (25.067)	7.60 (1.529)	-2.78 (-6.433, 0.877)	0.1358
Hedges' g SMD							-0.17 (-0.397, 0.051)	0.1293

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.7 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Loss of appetite (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	204	8.50 (17.624)	10.95 (1.665)	114	8.19 (16.922)	1.56 (2.233)	9.39 (3.908, 14.868)	0.0008*
Wk 24 (Day 169)	187	8.02 (17.312)	6.12 (1.543)	100	8.67 (18.115)	2.54 (2.107)	3.58 (-1.559, 8.718)	0.1715
Wk 36 (Day 253)	163	7.98 (17.698)	5.02 (1.603)	91	8.06 (15.979)	1.54 (2.157)	3.48 (-1.809, 8.772)	0.1962
Wk 48 (Day 337)	165	7.68 (17.509)	6.32 (1.544)	78	6.84 (15.532)	1.83 (2.219)	4.49 (-0.832, 9.812)	0.0979
Wk 60 (Day 421)	152	8.11 (17.992)	2.30 (1.360)	68	6.37 (14.406)	0.52 (2.005)	1.78 (-2.994, 6.549)	0.4638
Wk 72 (Day 505)	146	9.13 (18.578)	2.27 (1.519)	62	6.99 (16.125)	0.25 (2.303)	2.02 (-3.421, 7.454)	0.4658
Wk 84 (Day 589)	132	8.84 (18.355)	-1.82 (1.191)	47	4.26 (13.219)	-2.35 (1.961)	0.54 (-3.994, 5.066)	0.8158
Wk 96 (Day 673)	129	8.01 (17.567)	2.02 (1.589)	37	7.21 (15.977)	0.77 (2.822)	1.25 (-5.138, 7.631)	0.7007
Average over all visits	219	8.07 (17.219)	4.15 (0.958)	120	8.89 (17.677)	0.83 (1.370)	3.31 (0.026, 6.603)	0.0483*
Hedges' g SMD							0.23 (0.005, 0.452)	0.0450*

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.8 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Constipation (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	198	16.84 (27.233)	-1.87 (1.420)	112	14.58 (24.824)	-2.53 (1.891)	0.66 (-3.996, 5.312)	0.7810
Wk 24 (Day 169)	185	16.40 (27.610)	-1.31 (1.496)	95	13.33 (24.982)	0.25 (2.077)	-1.56 (-6.604, 3.478)	0.5422
Wk 36 (Day 253)	164	16.06 (26.490)	-0.60 (1.582)	92	10.87 (21.602)	-0.19 (2.139)	-0.41 (-5.652, 4.833)	0.8778
Wk 48 (Day 337)	163	16.97 (26.802)	-0.84 (1.649)	77	12.12 (22.884)	1.73 (2.362)	-2.57 (-8.247, 3.111)	0.3741
Wk 60 (Day 421)	149	16.55 (27.020)	4.14 (1.863)	67	11.44 (23.608)	1.22 (2.778)	2.92 (-3.678, 9.519)	0.3842
Wk 72 (Day 505)	143	17.72 (27.636)	2.89 (1.969)	61	12.02 (24.368)	1.28 (2.980)	1.61 (-5.436, 8.666)	0.6522
Wk 84 (Day 589)	131	17.05 (27.848)	5.32 (2.039)	46	12.32 (25.684)	2.54 (3.342)	2.78 (-4.944, 10.511)	0.4784
Wk 96 (Day 673)	126	15.61 (25.884)	3.52 (2.037)	37	17.12 (28.997)	7.66 (3.678)	-4.14 (-12.432, 4.161)	0.3266
Average over all visits	216	17.44 (27.832)	1.41 (1.100)	118	14.12 (24.424)	1.49 (1.611)	-0.09 (-3.931, 3.757)	0.9643
Hedges' g SMD							-0.01 (-0.230, 0.219)	0.9635

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.9 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Diarrhoea (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	200	9.00 (17.905)	4.09 (1.394)	112	13.69 (25.529)	-1.25 (1.872)	5.34 (0.744, 9.942)	0.0229*
Wk 24 (Day 169)	184	8.88 (18.099)	2.81 (1.601)	98	14.29 (26.216)	0.36 (2.204)	2.46 (-2.918, 7.830)	0.3692
Wk 36 (Day 253)	163	8.38 (18.274)	0.57 (1.361)	90	14.07 (26.899)	2.17 (1.843)	-1.60 (-6.126, 2.924)	0.4867
Wk 48 (Day 337)	162	8.44 (16.744)	1.15 (1.376)	77	11.69 (24.041)	2.56 (1.982)	-1.41 (-6.173, 3.349)	0.5596
Wk 60 (Day 421)	149	8.95 (18.434)	0.75 (1.401)	67	11.44 (24.310)	2.16 (2.079)	-1.40 (-6.349, 3.543)	0.5767
Wk 72 (Day 505)	145	8.05 (16.328)	0.54 (1.455)	59	11.30 (22.836)	0.45 (2.246)	0.08 (-5.200, 5.366)	0.9755
Wk 84 (Day 589)	130	9.49 (18.670)	-2.04 (1.420)	46	10.14 (22.077)	3.07 (2.300)	-5.11 (-10.439, 0.224)	0.0603
Wk 96 (Day 673)	126	10.05 (19.446)	0.14 (1.606)	37	8.11 (21.380)	2.50 (2.831)	-2.37 (-8.788, 4.057)	0.4685
Average over all visits	217	9.37 (18.956)	1.00 (0.927)	119	13.17 (25.012)	1.50 (1.341)	-0.50 (-3.715, 2.714)	0.7593
Hedges' g SMD							-0.04 (-0.259, 0.188)	0.7546

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.10 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Dyspnoea (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	198	24.41 (27.369)	2.12 (1.649)	114	22.22 (26.110)	-2.27 (2.184)	4.39 (-0.994, 9.776)	0.1096
Wk 24 (Day 169)	183	24.77 (27.617)	-1.21 (1.642)	100	22.67 (27.167)	-1.59 (2.224)	0.38 (-5.056, 5.825)	0.8895
Wk 36 (Day 253)	163	23.72 (27.895)	-2.27 (1.848)	93	23.66 (27.619)	-0.38 (2.467)	-1.89 (-7.960, 4.175)	0.5397
Wk 48 (Day 337)	164	24.59 (28.328)	-1.10 (1.703)	78	21.37 (25.750)	-5.65 (2.436)	4.55 (-1.303, 10.402)	0.1271
Wk 60 (Day 421)	151	24.28 (28.004)	-1.14 (1.838)	68	23.53 (28.829)	-0.53 (2.673)	-0.61 (-6.997, 5.782)	0.8516
Wk 72 (Day 505)	146	24.89 (28.718)	-1.63 (1.708)	61	24.59 (27.823)	-7.09 (2.574)	5.46 (-0.621, 11.546)	0.0782
Wk 84 (Day 589)	131	24.68 (28.819)	-3.22 (1.776)	47	24.11 (27.542)	-8.14 (2.855)	4.93 (-1.700, 11.552)	0.1443
Wk 96 (Day 673)	128	24.74 (28.137)	-3.44 (1.779)	37	29.73 (29.169)	-1.55 (3.106)	-1.89 (-8.945, 5.159)	0.5973
Average over all visits	216	24.23 (27.174)	-1.48 (1.194)	120	22.78 (26.633)	-3.40 (1.697)	1.92 (-2.167, 5.997)	0.3567
Hedges' g SMD							0.11 (-0.117, 0.330)	0.3495

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.11 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Fatigue (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	202	32.89 (22.878)	6.90 (1.383)	113	34.37 (22.756)	3.27 (1.854)	3.63 (-0.921, 8.183)	0.1175
Wk 24 (Day 169)	187	32.86 (23.303)	1.10 (1.234)	99	33.84 (22.351)	0.66 (1.694)	0.44 (-3.680, 4.568)	0.8324
Wk 36 (Day 253)	164	32.59 (22.573)	1.79 (1.407)	93	34.47 (22.486)	2.02 (1.895)	-0.23 (-4.877, 4.417)	0.9224
Wk 48 (Day 337)	165	32.53 (23.468)	2.11 (1.440)	78	33.40 (21.665)	-1.58 (2.061)	3.69 (-1.254, 8.643)	0.1428
Wk 60 (Day 421)	152	32.53 (22.744)	0.44 (1.446)	68	34.31 (22.138)	-2.73 (2.121)	3.17 (-1.883, 8.230)	0.2177
Wk 72 (Day 505)	147	33.26 (23.686)	-2.81 (1.479)	62	33.06 (21.980)	-0.74 (2.227)	-2.07 (-7.339, 3.193)	0.4389
Wk 84 (Day 589)	133	33.00 (23.046)	-1.69 (1.474)	47	30.85 (21.354)	-5.42 (2.337)	3.73 (-1.715, 9.169)	0.1786
Wk 96 (Day 673)	129	32.30 (23.009)	-3.15 (1.587)	37	31.98 (21.573)	-6.40 (2.730)	3.24 (-2.979, 9.466)	0.3055
Average over all visits	218	32.77 (22.890)	0.59 (1.022)	119	34.50 (22.536)	-1.36 (1.459)	1.95 (-1.554, 5.457)	0.2743
Hedges' g SMD							0.13 (-0.097, 0.350)	0.2675

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/mmrmpr.sas emmrmprak 06OCT2020:16:04 kvbv306

Table 2.5.2.12 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Financial difficulties (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	201	18.24 (29.796)	-0.89 (1.388)	110	18.79 (29.445)	0.74 (1.879)	-1.63 (-6.226, 2.968)	0.4863
Wk 24 (Day 169)	183	20.04 (31.242)	-1.55 (1.467)	97	19.24 (29.594)	-2.02 (2.024)	0.47 (-4.451, 5.386)	0.8516
Wk 36 (Day 253)	162	18.31 (29.029)	-1.79 (1.592)	90	19.26 (30.386)	-3.92 (2.170)	2.13 (-3.167, 7.426)	0.4293
Wk 48 (Day 337)	162	18.52 (29.488)	-1.92 (1.554)	76	20.18 (30.346)	-3.55 (2.231)	1.63 (-3.720, 6.986)	0.5486
Wk 60 (Day 421)	150	18.89 (29.768)	-2.73 (1.677)	65	18.46 (28.886)	-1.56 (2.463)	-1.17 (-7.042, 4.694)	0.6940
Wk 72 (Day 505)	144	19.21 (30.172)	-1.77 (1.720)	58	18.39 (29.401)	-1.62 (2.618)	-0.15 (-6.319, 6.013)	0.9611
Wk 84 (Day 589)	130	17.95 (28.801)	-2.34 (1.712)	46	18.84 (31.152)	-1.61 (2.665)	-0.73 (-6.965, 5.508)	0.8183
Wk 96 (Day 673)	128	19.27 (29.463)	-3.64 (1.708)	37	25.23 (33.707)	-6.26 (2.877)	2.62 (-3.966, 9.214)	0.4336
Average over all visits	218	18.50 (30.006)	-2.08 (1.206)	117	18.80 (29.809)	-2.47 (1.730)	0.40 (-3.752, 4.544)	0.8510
Hedges' g SMD							0.02 (-0.203, 0.246)	0.8490

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.13 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Nausea and vomiting (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	203	4.52 (12.192)	10.64 (1.147)	114	3.22 (9.109)	0.33 (1.537)	10.31 (6.534, 14.084)	<0.0001*
Wk 24 (Day 169)	188	4.52 (12.499)	5.80 (0.889)	100	3.00 (8.335)	-0.70 (1.223)	6.50 (3.525, 9.479)	<0.0001*
Wk 36 (Day 253)	165	4.14 (10.477)	6.03 (0.985)	93	3.05 (8.130)	1.80 (1.327)	4.23 (0.975, 7.483)	0.0111*
Wk 48 (Day 337)	165	4.75 (12.858)	7.90 (1.138)	78	1.92 (5.995)	1.86 (1.639)	6.05 (2.111, 9.981)	0.0027*
Wk 60 (Day 421)	152	4.82 (13.098)	6.41 (1.063)	68	2.45 (6.607)	-0.33 (1.550)	6.74 (3.033, 10.445)	0.0004*
Wk 72 (Day 505)	147	5.10 (13.460)	5.21 (1.027)	62	2.15 (6.390)	-1.12 (1.543)	6.33 (2.671, 9.988)	0.0008*
Wk 84 (Day 589)	133	5.14 (13.481)	4.47 (1.093)	47	2.13 (6.609)	0.91 (1.772)	3.56 (-0.550, 7.677)	0.0892
Wk 96 (Day 673)	129	5.17 (13.944)	3.28 (1.148)	37	2.70 (7.363)	3.57 (2.057)	-0.29 (-4.940, 4.366)	0.9033
Average over all visits	219	4.41 (11.873)	6.22 (0.709)	120	3.33 (9.065)	0.79 (1.013)	5.43 (2.995, 7.863)	<0.0001*
Hedges' g SMD							0.51 (0.280, 0.732)	<0.0001*

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.14 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Pain (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	205	21.95 (23.056)	7.42 (1.541)	114	23.54 (22.916)	9.13 (2.072)	-1.70 (-6.784, 3.376)	0.5098
Wk 24 (Day 169)	188	22.78 (23.560)	4.71 (1.630)	101	23.27 (21.868)	6.85 (2.226)	-2.14 (-7.571, 3.287)	0.4381
Wk 36 (Day 253)	166	22.29 (22.738)	6.81 (1.766)	93	23.12 (22.392)	9.01 (2.378)	-2.20 (-8.027, 3.634)	0.4590
Wk 48 (Day 337)	165	22.63 (23.277)	6.66 (1.800)	78	22.44 (22.606)	5.77 (2.578)	0.89 (-5.299, 7.081)	0.7771
Wk 60 (Day 421)	155	22.80 (23.264)	2.68 (1.622)	68	23.04 (22.310)	5.78 (2.400)	-3.10 (-8.804, 2.604)	0.2855
Wk 72 (Day 505)	150	23.33 (23.412)	1.98 (1.653)	62	22.85 (23.422)	2.85 (2.499)	-0.87 (-6.774, 5.028)	0.7710
Wk 84 (Day 589)	133	22.81 (24.228)	-0.80 (1.737)	47	22.34 (23.384)	2.25 (2.817)	-3.05 (-9.573, 3.470)	0.3575
Wk 96 (Day 673)	130	22.44 (22.989)	-0.64 (1.752)	37	23.42 (23.060)	-4.03 (3.081)	3.39 (-3.593, 10.382)	0.3393
Average over all visits	221	22.78 (23.173)	3.60 (1.166)	120	23.47 (22.917)	4.70 (1.669)	-1.10 (-5.103, 2.908)	0.5901
Hedges' g SMD							-0.06 (-0.284, 0.160)	0.5847

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.2.15 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Insomnia (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	202	27.72 (29.392)	4.11 (1.809)	114	23.10 (25.524)	7.72 (2.408)	-3.61 (-9.540, 2.329)	0.2329
Wk 24 (Day 169)	187	28.70 (30.369)	5.55 (1.968)	100	22.00 (24.718)	4.22 (2.679)	1.33 (-5.225, 7.892)	0.6894
Wk 36 (Day 253)	164	27.03 (29.439)	5.42 (2.022)	93	21.15 (23.460)	4.92 (2.718)	0.50 (-6.183, 7.183)	0.8830
Wk 48 (Day 337)	164	26.02 (28.850)	4.90 (2.017)	78	21.37 (22.776)	3.46 (2.907)	1.44 (-5.536, 8.417)	0.6846
Wk 60 (Day 421)	149	27.07 (29.093)	7.41 (2.119)	68	20.10 (23.843)	7.79 (3.092)	-0.38 (-7.781, 7.018)	0.9192
Wk 72 (Day 505)	146	26.94 (29.378)	2.50 (1.994)	62	22.04 (24.100)	4.75 (3.021)	-2.25 (-9.392, 4.892)	0.5355
Wk 84 (Day 589)	132	27.53 (30.958)	4.01 (2.161)	47	20.57 (24.626)	5.76 (3.485)	-1.74 (-9.844, 6.354)	0.6715
Wk 96 (Day 673)	127	26.25 (30.176)	4.62 (2.331)	37	25.23 (26.534)	7.36 (3.935)	-2.73 (-11.755, 6.287)	0.5509
Average over all visits	217	28.26 (30.258)	4.81 (1.421)	120	22.50 (25.258)	5.74 (2.031)	-0.93 (-5.818, 3.957)	0.7083
Hedges' g SMD							-0.04 (-0.266, 0.180)	0.7031

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Figure 2.5.3.1 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Global QoL/health status across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

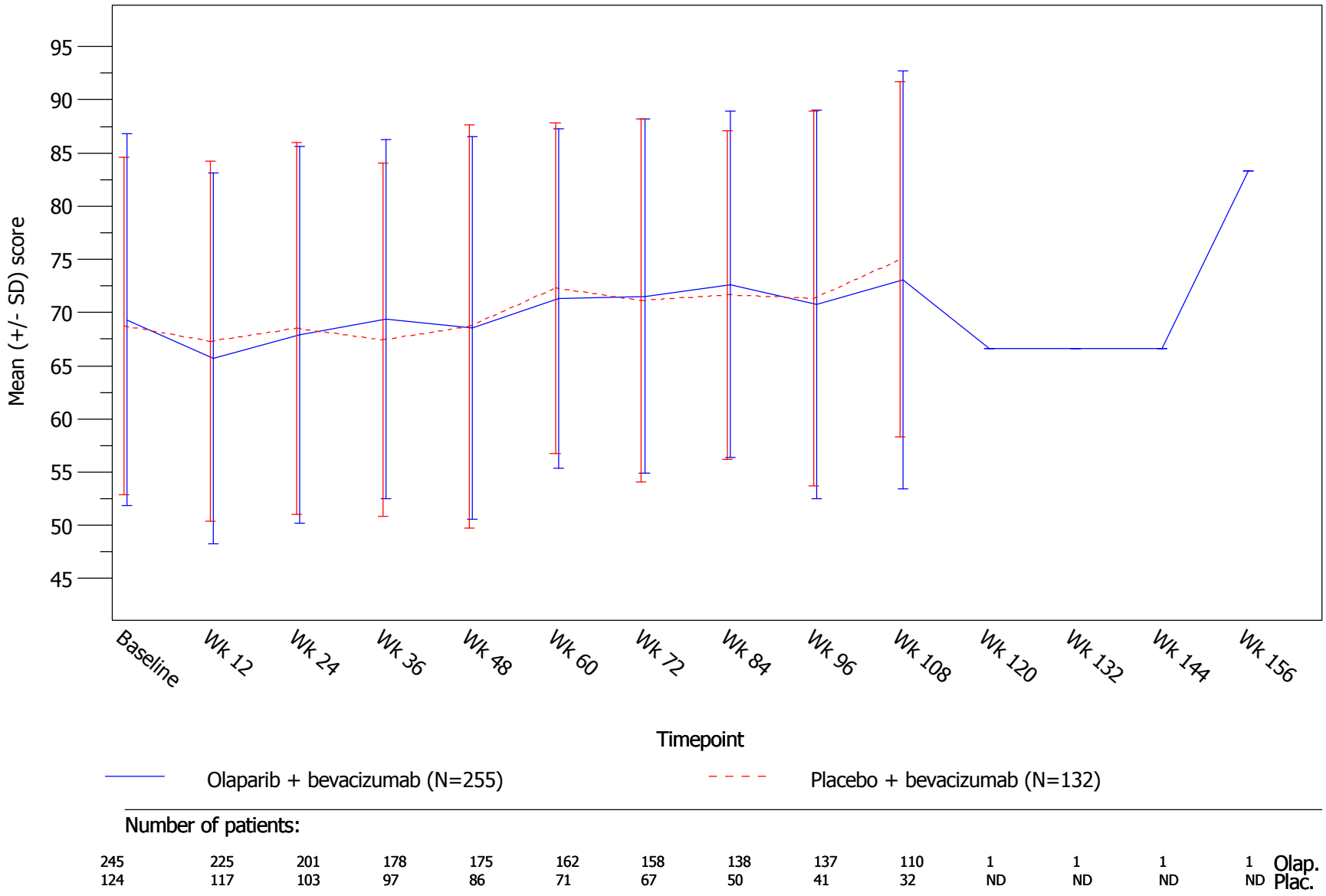


Figure 2.5.3.2 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Functional scale: Physical across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

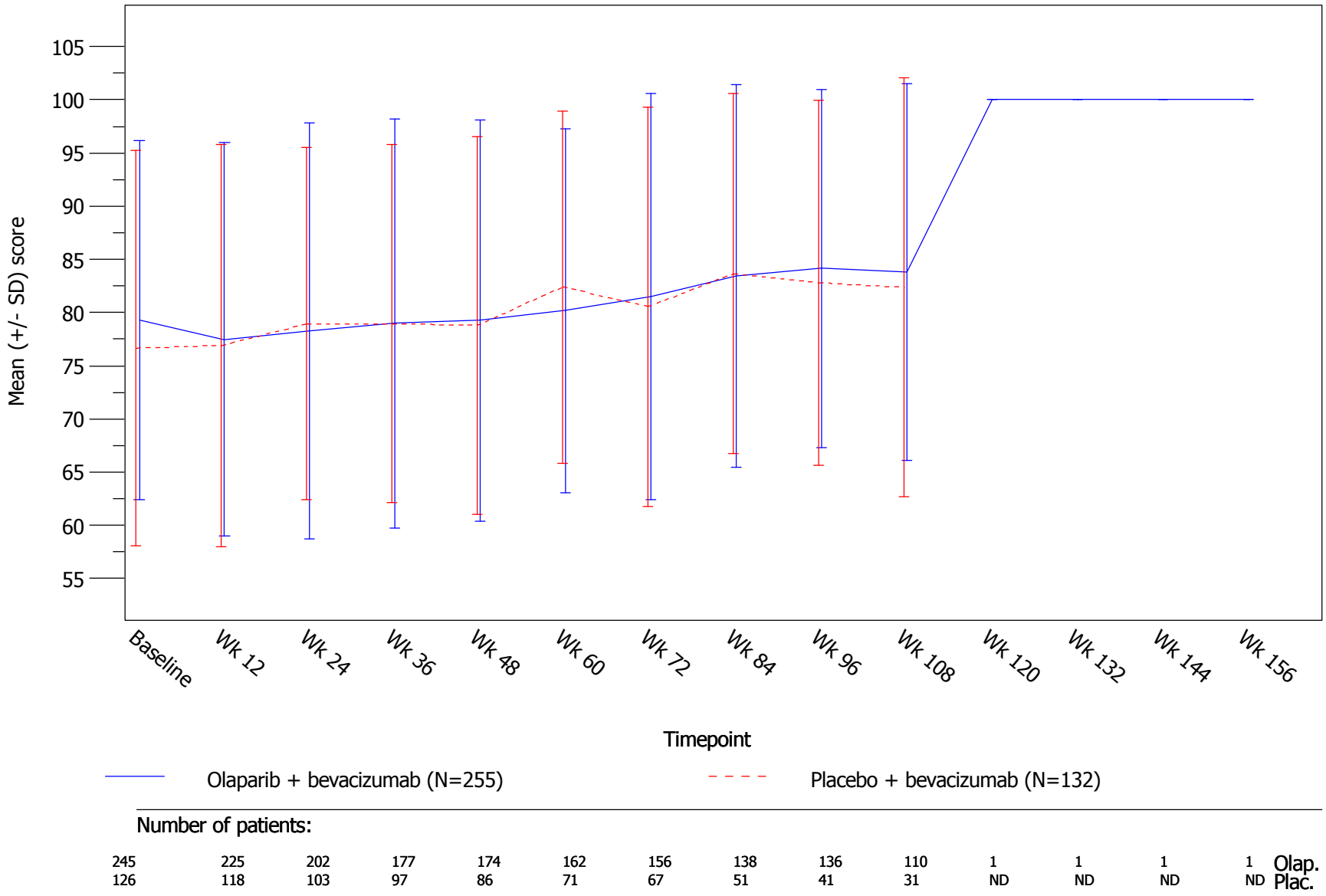


Figure 2.5.3.3 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Functional scale: Role across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

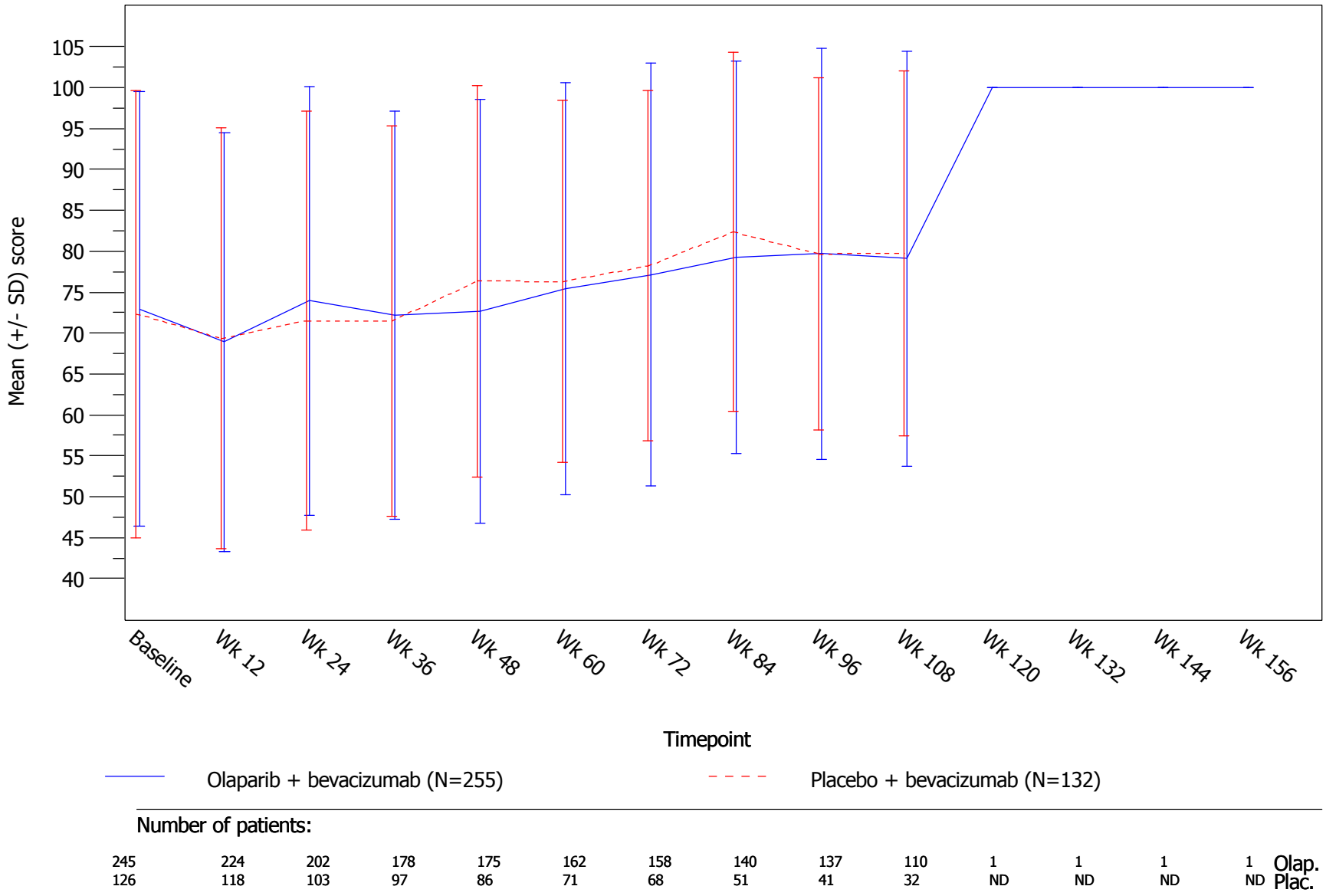


Figure 2.5.3.4 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Functional scale: Cognitive across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

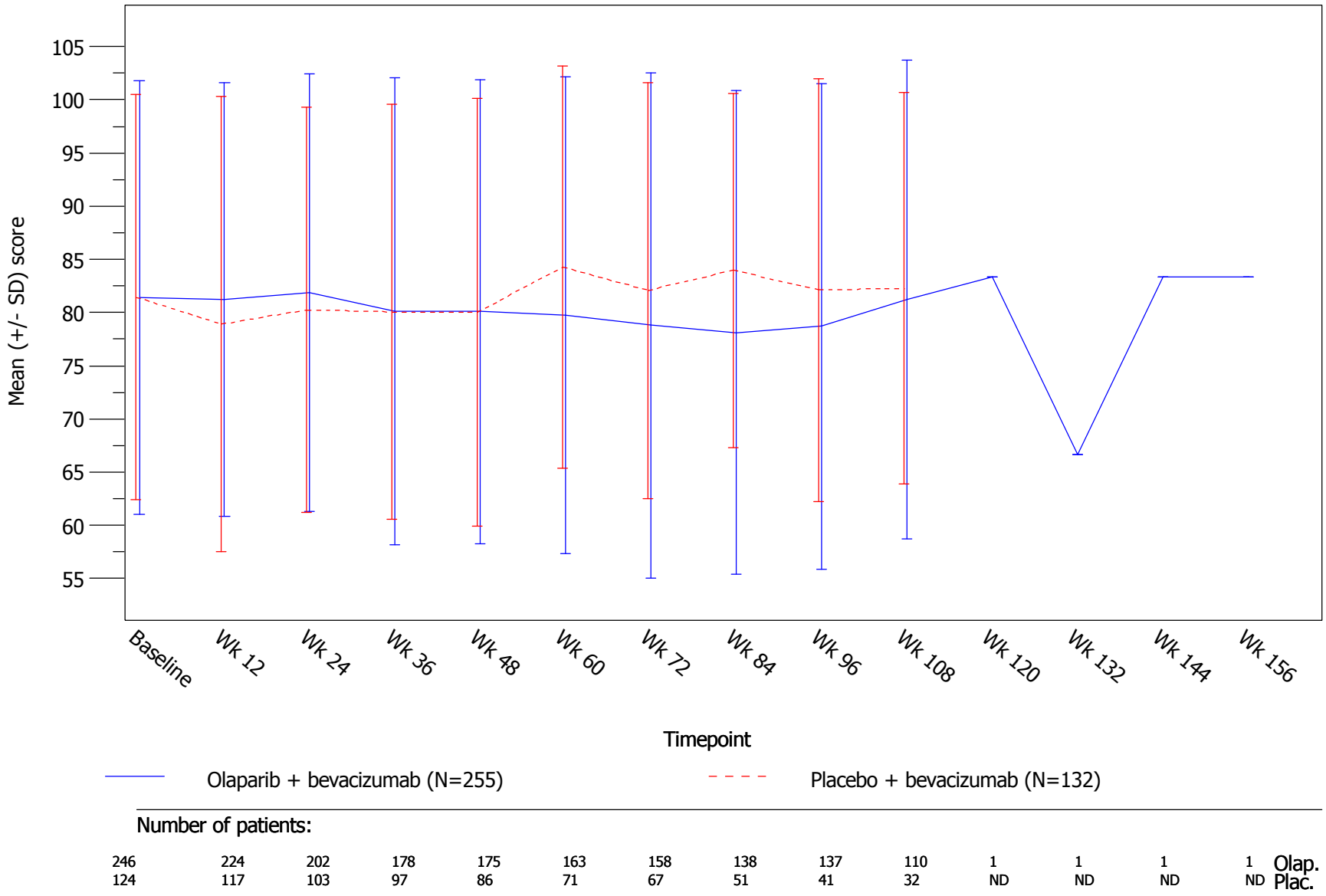
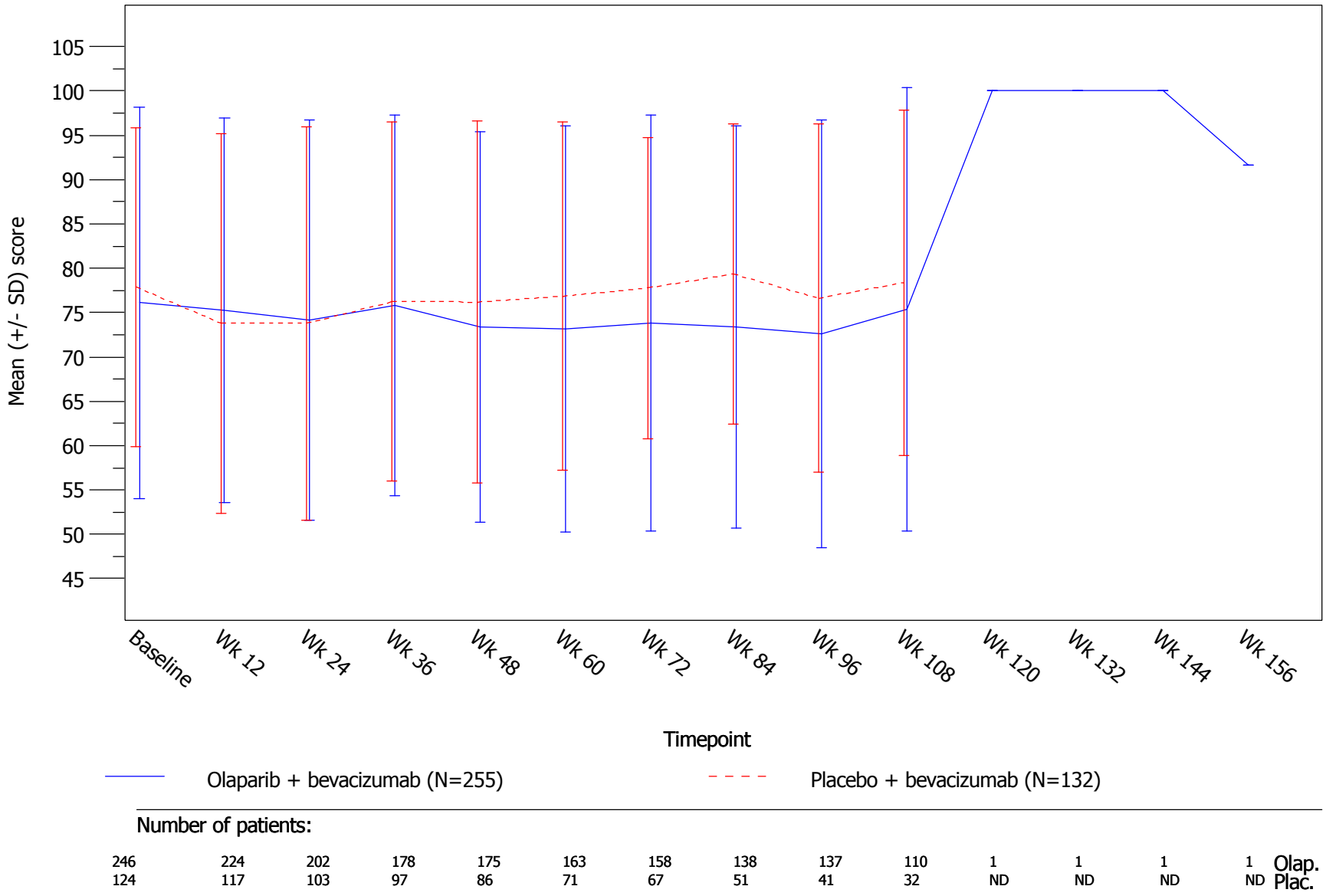


Figure 2.5.3.5 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Functional scale: Emotional across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients:

246	224	202	178	175	163	158	138	137	110	1	1	1	1 Olap.
124	117	103	97	86	71	67	51	41	32	ND	ND	ND	ND Plac.

Figure 2.5.3.6 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Functional scale: Social across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

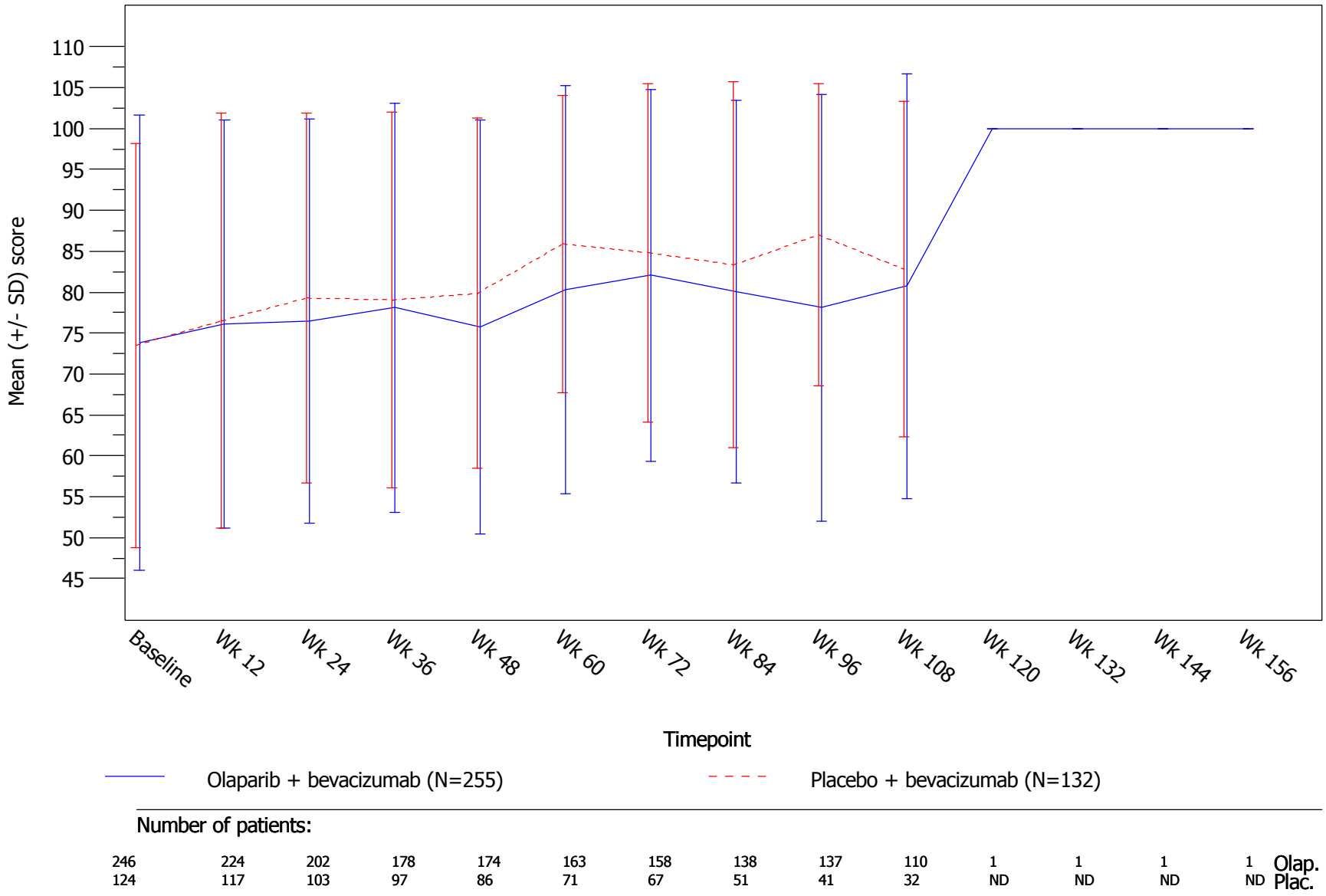


Figure 2.5.3.7 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Single item symptom scale: Loss of appetite across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

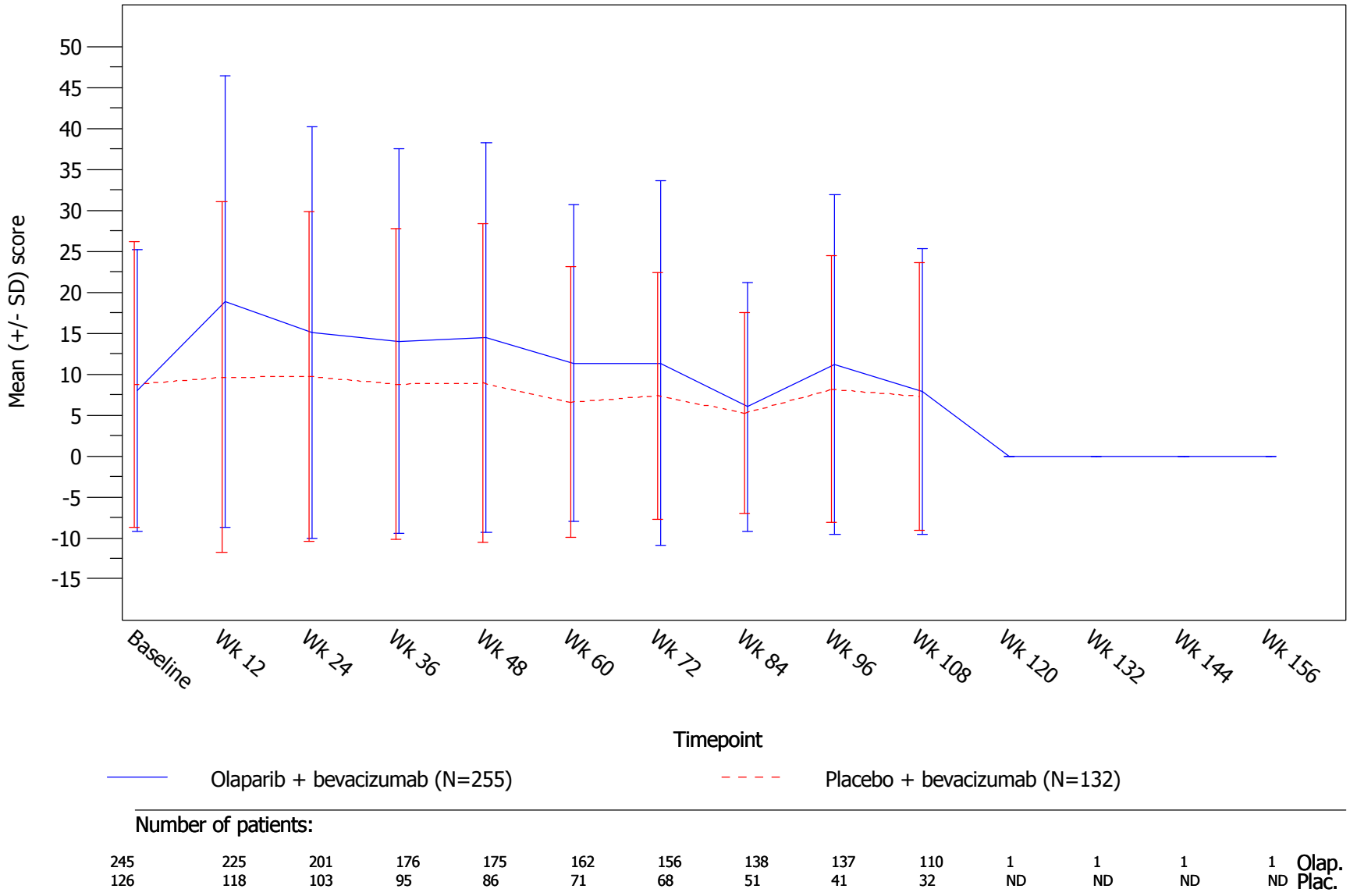


Figure 2.5.3.8 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Single item symptom scale: Constipation across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

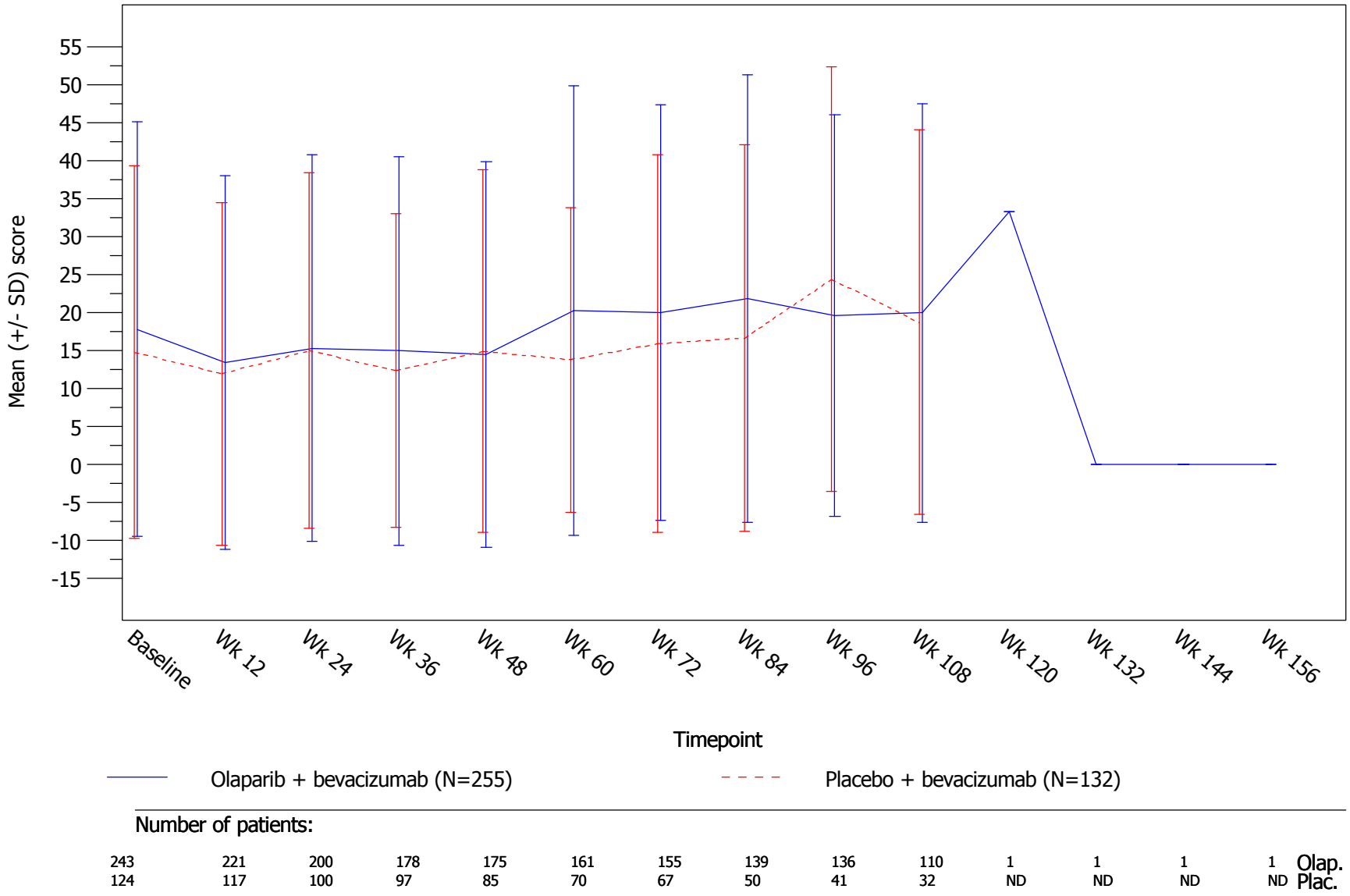


Figure 2.5.3.9 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Single item symptom scale: Diarrhoea across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

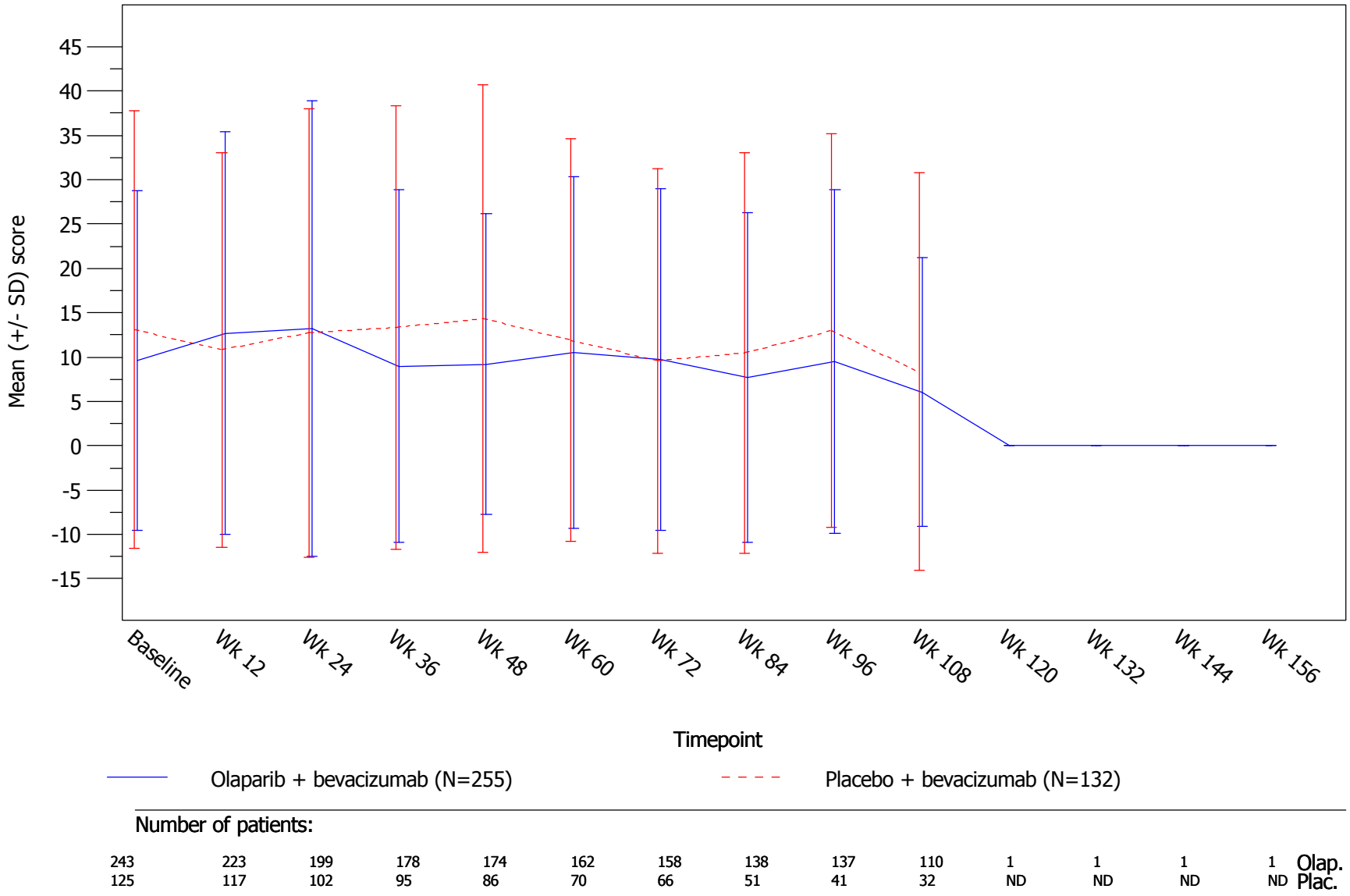


Figure 2.5.3.10 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Single item symptom scale: Dyspnoea across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

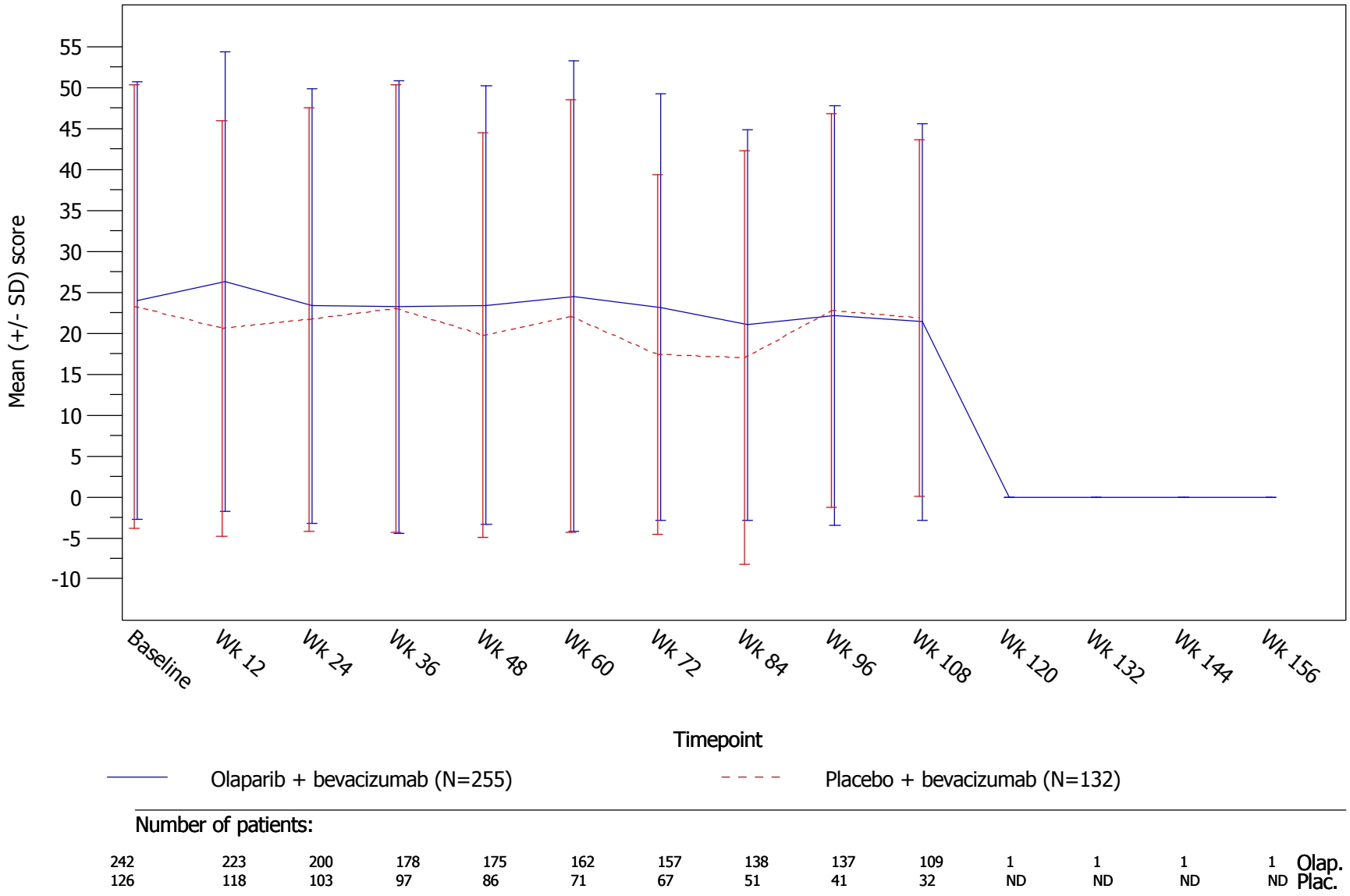


Figure 2.5.3.11 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Symptom scale: Fatigue across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

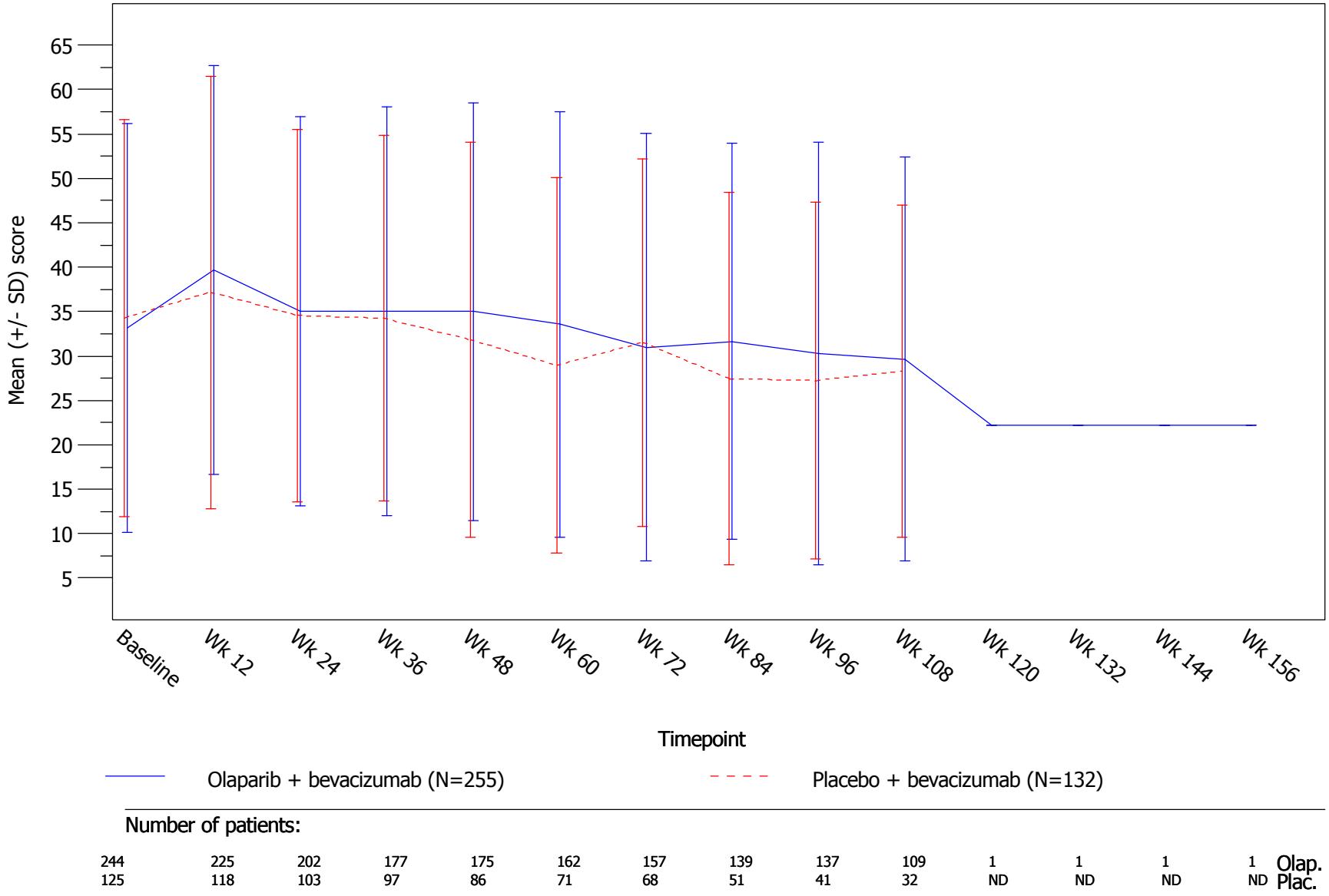


Figure 2.5.3.12 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Single item symptom scale: Financial difficulties across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

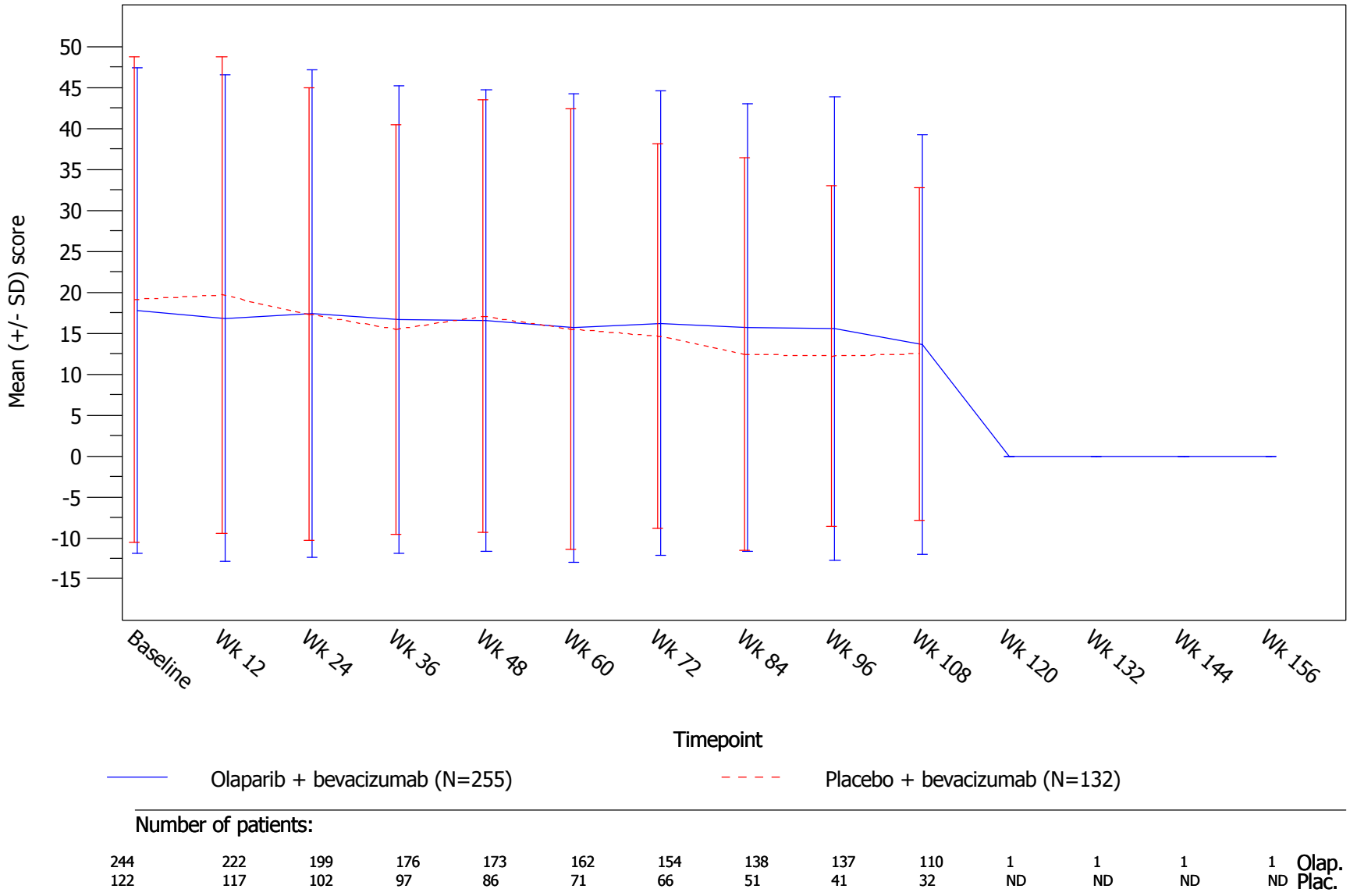


Figure 2.5.3.13 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Symptom scale: Nausea and vomiting across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

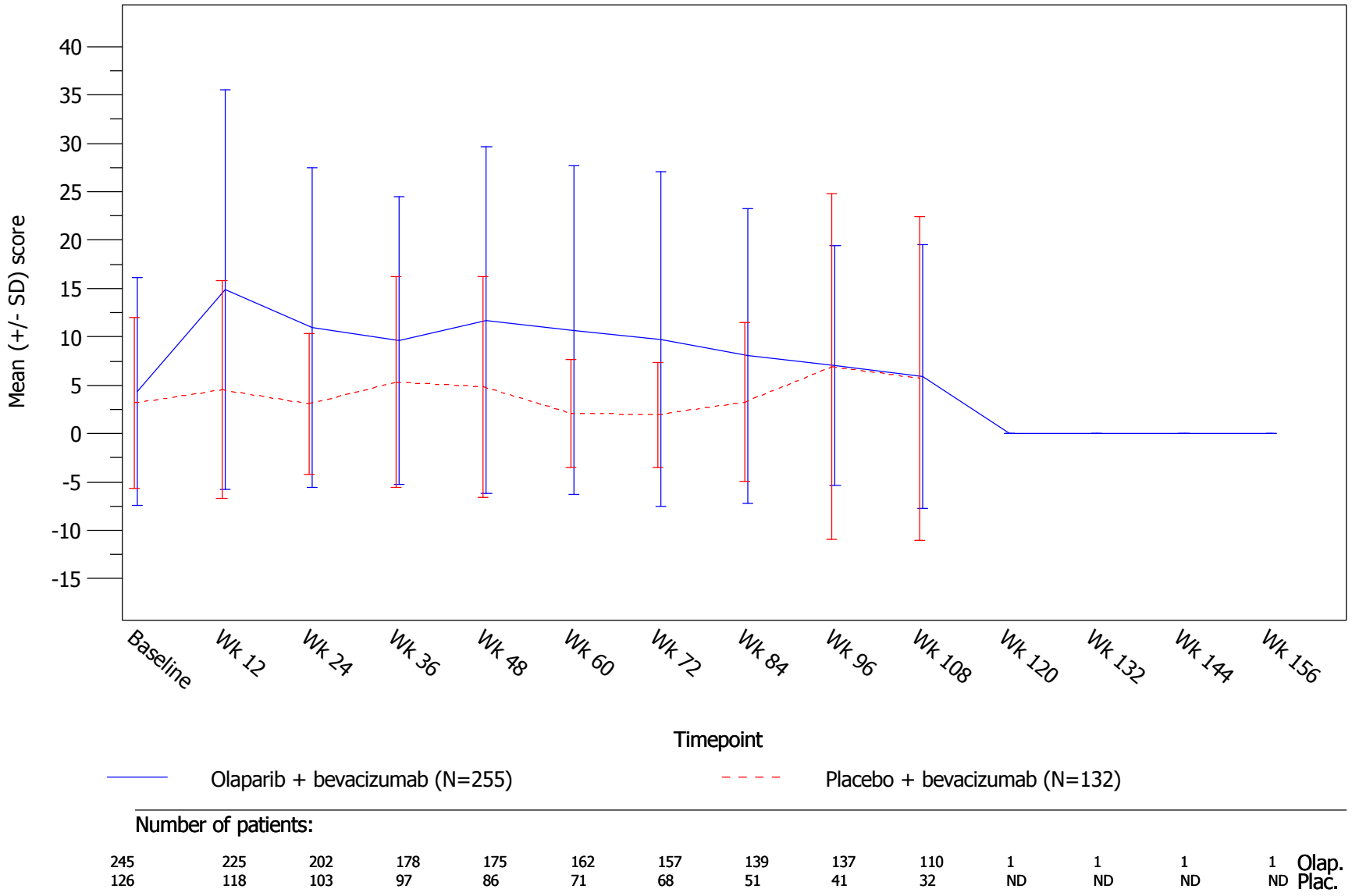


Figure 2.5.3.14 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Symptom scale: Pain across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

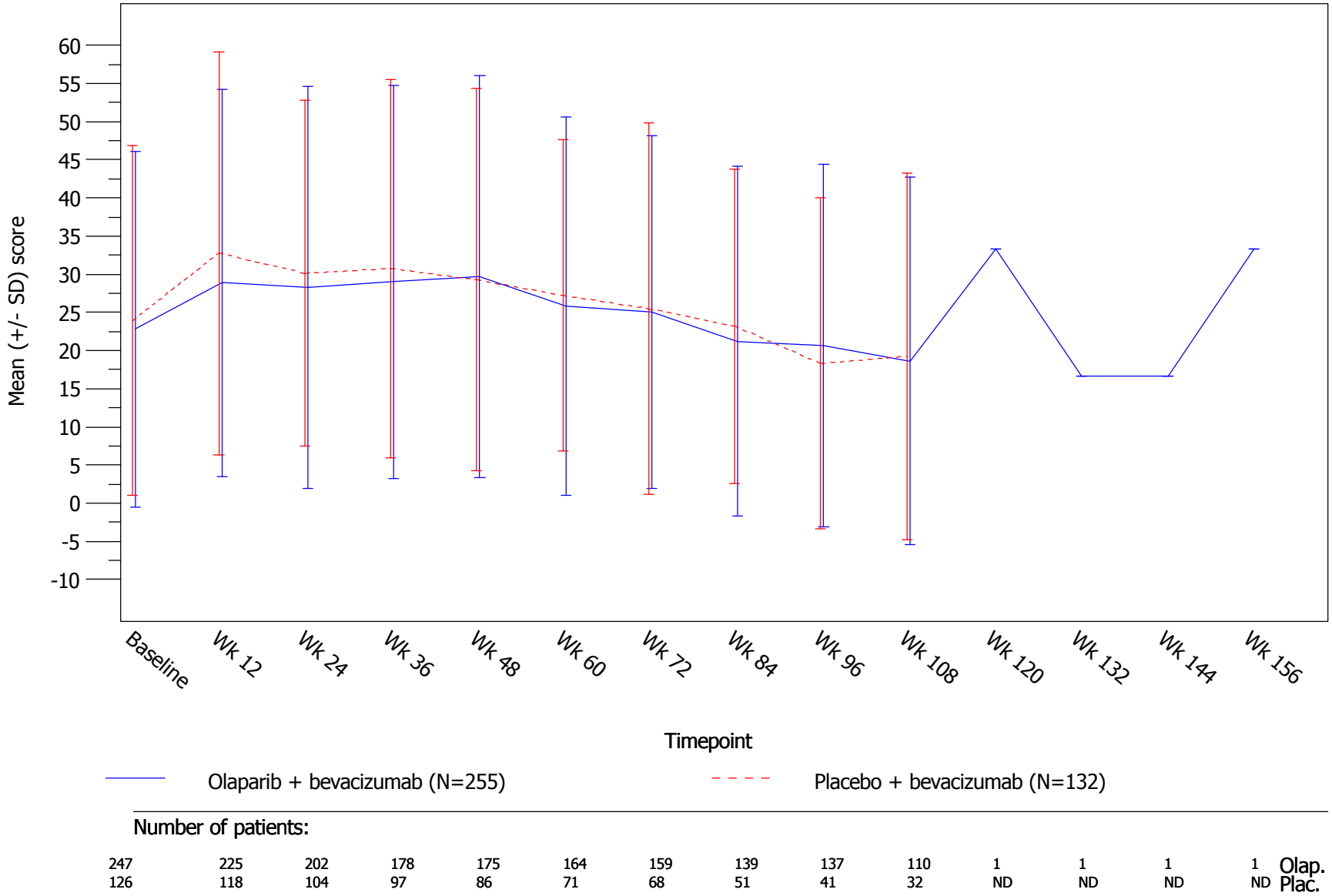


Figure 2.5.3.15 PAOLA1: Mean (+/- SD) score for EORTC QLQ-C30 Single item symptom scale: Insomnia across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

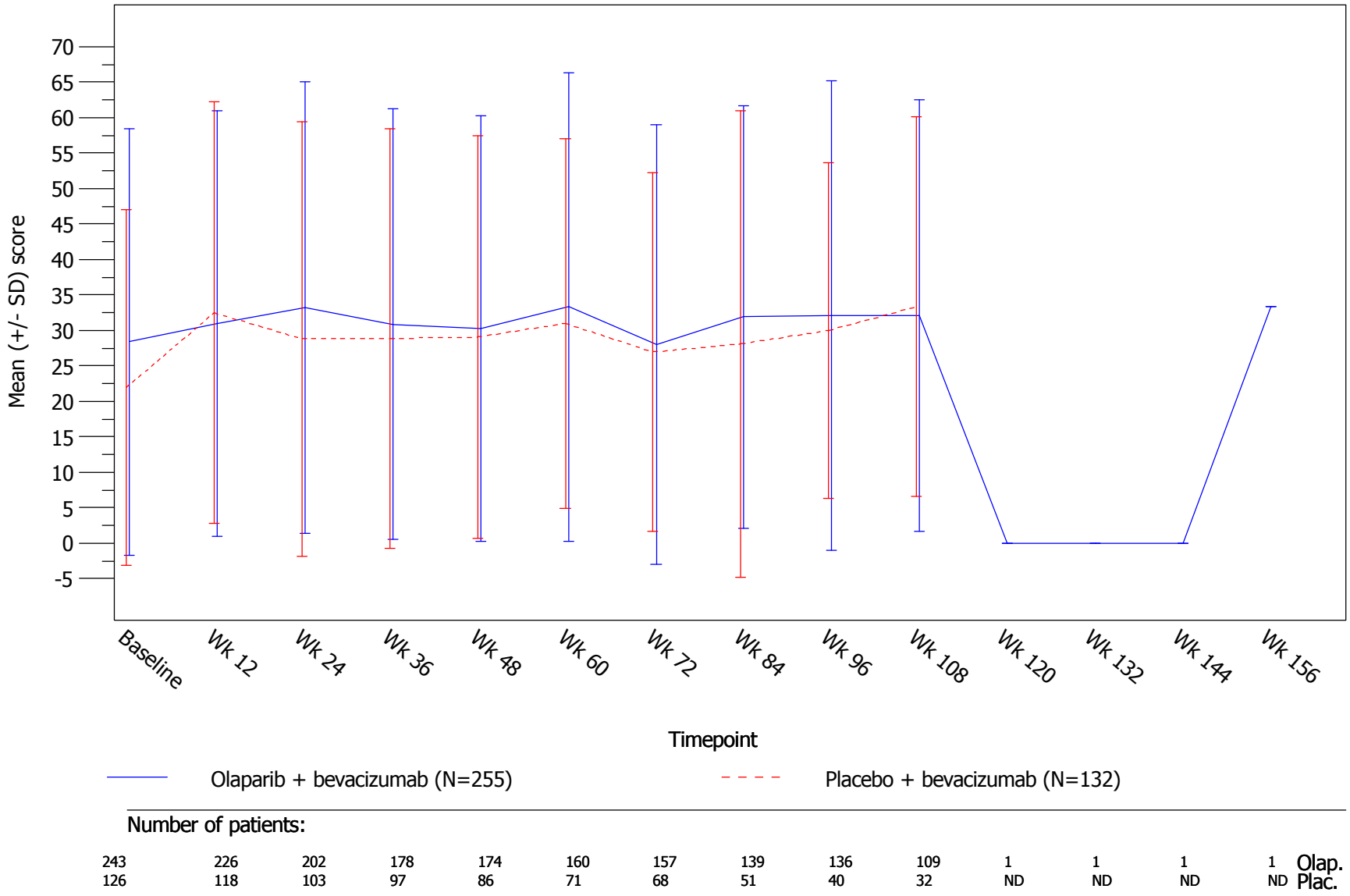


Table 2.5.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Global QoL/health status (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	70.16 (17.523)	2.58 (1.201)	43	66.47 (16.008)	1.05 (1.732)	1.52 (-2.658, 5.706)	0.4717
Hedges' g SMD							0.14 (-0.233, 0.508)	0.4660
NED/CR [IDS]	61	69.95 (17.165)	-1.26 (1.412)	33	70.20 (17.057)	2.76 (2.089)	-4.02 (-9.043, 0.995)	0.1146
Hedges' g SMD							-0.35 (-0.777, 0.076)	0.1071
NED/CR [Chemo]	37	66.22 (16.776)	1.08 (2.265)	20	69.58 (12.174)	-2.89 (3.235)	3.97 (-4.024, 11.965)	0.3214
Hedges' g SMD							0.28 (-0.267, 0.826)	0.3165
PR	40	73.33 (16.473)	-3.40 (2.243)	22	68.94 (17.851)	-6.99 (3.290)	3.59 (-4.391, 11.572)	0.3713
Hedges' g SMD							0.24 (-0.280, 0.764)	0.3631
Int. p-value								0.0723
Screening laboratory tBRCA status (IVRS)								
tBRCAm	129	67.05 (17.112)	2.26 (1.046)	59	68.50 (15.246)	0.38 (1.639)	1.89 (-1.957, 5.728)	0.3341
Hedges' g SMD							0.16 (-0.153, 0.464)	0.3244
non-tBRCAm	90	74.26 (16.319)	-2.15 (1.194)	59	68.50 (16.815)	-1.37 (1.600)	-0.78 (-4.752, 3.185)	0.6965
Hedges' g SMD							-0.07 (-0.395, 0.262)	0.6912
Int. p-value								0.5770
First line treatment outcome (eCRF)								
NED [PDS]	79	69.62 (18.004)	2.48 (1.218)	42	66.87 (15.991)	0.83 (1.728)	1.66 (-2.539, 5.849)	0.4357
Hedges' g SMD							0.15 (-0.225, 0.525)	0.4325
NED/CR [IDS]	60	71.11 (17.390)	-0.58 (1.347)	28	70.83 (18.356)	2.69 (2.209)	-3.27 (-8.422, 1.877)	0.2095
Hedges' g SMD							-0.30 (-0.750, 0.152)	0.1934
NED/CR [Chemo]	34	65.93 (17.087)	1.73 (2.505)	17	72.06 (12.127)	-5.35 (4.048)	7.08 (-2.654, 16.819)	0.1482
Hedges' g SMD							0.46 (-0.134, 1.045)	0.1301
PR	43	72.48 (15.594)	-3.76 (2.129)	30	67.22 (15.618)	-3.60 (2.723)	-0.16 (-7.083, 6.761)	0.9631
Hedges' g SMD							-0.01 (-0.477, 0.455)	0.9628
Int. p-value								0.0327*

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis.
Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Global QoL/health status (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	126	66.87 (17.239)	2.23 (1.064)	60	67.92 (15.783)	0.56 (1.632)	1.67 (-2.184, 5.514)	0.3943
Hedges' g SMD							0.14 (-0.171, 0.444)	0.3855
non-tBRCAm	93	74.28 (16.098)	-2.07 (1.170)	58	69.11 (16.298)	-1.51 (1.606)	-0.57 (-4.516, 3.378)	0.7760
Hedges' g SMD							-0.05 (-0.377, 0.279)	0.7717
Int. p-value								0.7156
Age group								
<65 years	160	69.69 (17.296)	0.16 (0.961)	89	67.98 (15.686)	0.00 (1.368)	0.16 (-3.133, 3.460)	0.9224
Hedges' g SMD							0.01 (-0.246, 0.272)	0.9211
>=65 years	59	70.90 (16.765)	0.56 (1.330)	29	70.11 (17.037)	-2.23 (2.072)	2.79 (-2.116, 7.695)	0.2612
Hedges' g SMD							0.26 (-0.184, 0.709)	0.2489
Int. p-value								0.3867
FIGO Stage (Disease state)								
III	157	69.80 (17.838)	0.09 (0.856)	81	70.06 (16.914)	1.55 (1.254)	-1.46 (-4.457, 1.531)	0.3366
Hedges' g SMD							-0.13 (-0.402, 0.135)	0.3294
IV	62	70.56 (15.293)	1.00 (1.718)	37	65.09 (13.298)	-5.41 (2.561)	6.41 (0.254, 12.559)	0.0414*
Hedges' g SMD							0.44 (0.032, 0.856)	0.0348*
Int. p-value								0.1424
Region								
Europe	210	69.88 (17.136)	0.41 (0.800)	112	68.38 (16.177)	-0.12 (1.177)	0.53 (-2.274, 3.331)	0.7106
Hedges' g SMD							0.04 (-0.185, 0.274)	0.7049
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Global QoL/health status (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	162	71.04 (17.106)	-0.56 (0.920)	90	70.93 (14.741)	-1.70 (1.287)	1.15 (-1.974, 4.265)	0.4699
Hedges' g SMD							0.10 (-0.162, 0.354)	0.4653
(1) Restricted activity	54	66.51 (17.169)	4.12 (1.519)	28	60.71 (17.547)	3.80 (2.391)	0.33 (-5.331, 5.990)	0.9080
Hedges' g SMD							0.03 (-0.429, 0.484)	0.9046
Int. p-value								0.5934
Baseline CA-125 value								
<=ULN	194	69.76 (17.624)	0.98 (0.813)	105	68.49 (16.137)	-0.43 (1.181)	1.41 (-1.417, 4.230)	0.3275
Hedges' g SMD							0.12 (-0.117, 0.359)	0.3184
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	219	70.02 (17.125)	0.36 (0.783)	118	68.50 (15.981)	-0.31 (1.136)	0.67 (-2.042, 3.391)	0.6256
Hedges' g SMD							0.06 (-0.167, 0.281)	0.6194
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	70.25 (17.514)	1.16 (0.878)	71	68.19 (16.980)	1.39 (1.314)	-0.23 (-3.346, 2.892)	0.8858
Hedges' g SMD							-0.02 (-0.306, 0.264)	0.8839
Residue	70	68.57 (16.125)	-0.90 (1.607)	39	70.51 (14.287)	-2.70 (2.277)	1.80 (-3.752, 7.349)	0.5214
Hedges' g SMD							0.13 (-0.262, 0.522)	0.5155
Int. p-value								0.5274

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Global QoL/health status (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	130	69.68 (17.207)	1.66 (0.955)	70	67.86 (15.689)	-0.36 (1.356)	2.02 (-1.253, 5.297)	0.2246
Hedges' g SMD							0.18 (-0.109, 0.473)	0.2196
Interval	82	69.72 (16.897)	-1.17 (1.325)	40	71.04 (16.665)	1.50 (2.084)	-2.68 (-7.574, 2.216)	0.2806
Hedges' g SMD							-0.21 (-0.594, 0.164)	0.2667
Int. p-value								0.0265*
Myriad tumour BRCA mutation status								
tBRCAm	135	67.28 (17.116)	1.80 (1.065)	68	67.89 (15.458)	0.70 (1.590)	1.10 (-2.674, 4.881)	0.5650
Hedges' g SMD							0.09 (-0.204, 0.379)	0.5583
Non-tBRCAm	84	74.40 (16.300)	-1.96 (1.165)	50	69.33 (16.789)	-1.96 (1.626)	0.00 (-3.976, 3.970)	0.9988
Hedges' g SMD							0.00 (-0.350, 0.350)	0.9988
Int. p-value								0.9527
Status somatic BRCA mutations								
sBRCAm	18	68.06 (18.358)	0.64 (2.309)	6	69.44 (18.758)	4.30 (3.976)	-3.65 (-13.239, 5.934)	0.4358
Hedges' g SMD							-0.36 (-1.291, 0.570)	0.4477
gBRCAm	55	68.48 (16.873)	-0.24 (1.543)	28	67.56 (15.272)	2.12 (2.342)	-2.36 (-7.942, 3.224)	0.4028
Hedges' g SMD							-0.20 (-0.655, 0.257)	0.3934
Non-BRCAm	37	72.97 (14.083)	-1.99 (1.816)	21	69.44 (15.884)	-3.52 (2.675)	1.54 (-4.959, 8.035)	0.6364
Hedges' g SMD							0.13 (-0.404, 0.668)	0.6294
Int. p-value								0.5435

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.2 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Physical (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	78.81 (17.299)	2.25 (1.360)	43	76.71 (17.700)	0.99 (1.943)	1.26 (-3.441, 5.956)	0.5972
Hedges' g SMD							0.10 (-0.269, 0.471)	0.5939
NED/CR [IDS]	61	81.80 (14.673)	1.69 (1.474)	34	78.63 (19.816)	3.52 (2.061)	-1.82 (-6.869, 3.224)	0.4748
Hedges' g SMD							-0.15 (-0.575, 0.266)	0.4708
NED/CR [Chemo]	36	77.96 (18.573)	1.52 (2.111)	20	75.17 (19.749)	5.44 (3.002)	-3.92 (-11.331, 3.495)	0.2923
Hedges' g SMD							-0.30 (-0.848, 0.251)	0.2870
PR	41	78.88 (17.920)	2.35 (2.050)	23	74.13 (19.455)	0.99 (2.881)	1.37 (-5.706, 8.444)	0.7003
Hedges' g SMD							0.10 (-0.410, 0.612)	0.6982
Int. p-value								0.5920
Screening laboratory tBRCA status (IVRS)								
tBRCAm	130	78.27 (16.483)	2.32 (1.111)	59	75.62 (19.512)	1.98 (1.715)	0.34 (-3.691, 4.378)	0.8667
Hedges' g SMD							0.03 (-0.281, 0.334)	0.8650
non-tBRCAm	89	81.34 (17.417)	1.27 (1.272)	61	77.35 (18.258)	2.91 (1.596)	-1.64 (-5.683, 2.410)	0.4252
Hedges' g SMD							-0.13 (-0.460, 0.193)	0.4223
Int. p-value								0.9008
First line treatment outcome (eCRF)								
NED [PDS]	79	77.09 (17.414)	2.13 (1.401)	42	78.25 (17.611)	0.93 (1.973)	1.20 (-3.594, 5.994)	0.6210
Hedges' g SMD							0.09 (-0.280, 0.469)	0.6195
NED/CR [IDS]	60	83.28 (14.304)	1.36 (1.451)	29	79.54 (21.077)	2.65 (2.194)	-1.29 (-6.536, 3.954)	0.6258
Hedges' g SMD							-0.11 (-0.556, 0.332)	0.6208
NED/CR [Chemo]	33	79.39 (18.361)	0.28 (2.344)	17	76.08 (20.284)	4.80 (3.555)	-4.52 (-13.158, 4.117)	0.2958
Hedges' g SMD							-0.32 (-0.910, 0.268)	0.2857
PR	44	78.65 (17.911)	2.97 (1.924)	31	72.10 (17.422)	3.51 (2.434)	-0.54 (-6.746, 5.665)	0.8626
Hedges' g SMD							-0.04 (-0.501, 0.419)	0.8616
Int. p-value								0.7329

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.2 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Physical (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	127	78.12 (16.622)	2.25 (1.129)	60	75.92 (19.481)	2.02 (1.708)	0.23 (-3.813, 4.269)	0.9114
Hedges' g SMD							0.02 (-0.289, 0.325)	0.9104
non-tBRCAm	92	81.44 (17.175)	1.44 (1.243)	60	77.08 (18.293)	2.90 (1.601)	-1.46 (-5.484, 2.556)	0.4725
Hedges' g SMD							-0.12 (-0.446, 0.205)	0.4689
Int. p-value								0.9720
Age group								
<65 years	161	79.02 (17.756)	1.96 (0.955)	90	76.61 (18.107)	3.07 (1.326)	-1.11 (-4.330, 2.112)	0.4982
Hedges' g SMD							-0.09 (-0.348, 0.168)	0.4942
>=65 years	58	80.89 (14.294)	1.51 (1.754)	30	76.17 (21.164)	1.07 (2.573)	0.44 (-5.769, 6.654)	0.8876
Hedges' g SMD							0.03 (-0.409, 0.473)	0.8860
Int. p-value								0.7919
FIGO Stage (Disease state)								
III	156	78.72 (17.033)	1.59 (1.024)	83	77.15 (20.089)	2.93 (1.452)	-1.35 (-4.847, 2.156)	0.4499
Hedges' g SMD							-0.10 (-0.370, 0.163)	0.4460
IV	63	81.48 (16.524)	2.98 (1.319)	37	75.05 (15.784)	1.13 (1.906)	1.85 (-2.762, 6.464)	0.4275
Hedges' g SMD							0.17 (-0.238, 0.575)	0.4164
Int. p-value								0.7442
Region								
Europe	210	79.59 (16.904)	1.71 (0.857)	114	76.73 (18.725)	1.80 (1.220)	-0.10 (-3.032, 2.840)	0.9486
Hedges' g SMD							-0.01 (-0.236, 0.220)	0.9479
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.2 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Physical (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	162	81.93 (15.225)	0.73 (0.926)	92	78.80 (17.575)	1.09 (1.264)	-0.36 (-3.453, 2.730)	0.8181
Hedges' g SMD							-0.03 (-0.286, 0.226)	0.8168
(1) Restricted activity	53	72.71 (19.653)	6.74 (1.873)	28	68.93 (21.058)	6.63 (2.808)	0.11 (-6.618, 6.842)	0.9737
Hedges' g SMD							0.01 (-0.450, 0.466)	0.9731
Int. p-value								0.9938
Baseline CA-125 value								
<=ULN	194	79.80 (16.894)	2.18 (0.859)	107	77.21 (18.742)	1.95 (1.208)	0.24 (-2.684, 3.156)	0.8737
Hedges' g SMD							0.02 (-0.217, 0.255)	0.8723
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	219	79.52 (16.897)	1.93 (0.833)	120	76.50 (18.826)	2.39 (1.174)	-0.46 (-3.295, 2.375)	0.7499
Hedges' g SMD							-0.04 (-0.259, 0.186)	0.7470
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	79.81 (16.332)	1.97 (0.995)	72	78.50 (18.987)	1.56 (1.447)	0.41 (-3.052, 3.872)	0.8156
Hedges' g SMD							0.03 (-0.250, 0.318)	0.8139
Residue	70	78.39 (18.443)	1.89 (1.603)	40	73.96 (18.036)	4.75 (2.237)	-2.87 (-8.336, 2.599)	0.3003
Hedges' g SMD							-0.21 (-0.598, 0.181)	0.2947
Int. p-value								0.2580

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.2 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Physical (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	129	77.55 (18.124)	2.80 (1.113)	71	76.20 (18.008)	2.03 (1.545)	0.77 (-2.989, 4.526)	0.6870
Hedges' g SMD							0.06 (-0.230, 0.350)	0.6852
Interval	83	82.13 (14.846)	0.56 (1.295)	41	78.05 (20.014)	4.24 (1.946)	-3.68 (-8.317, 0.955)	0.1186
Hedges' g SMD							-0.30 (-0.681, 0.072)	0.1127
Int. p-value								0.0328*
Myriad tumour BRCA mutation status								
tBRCAm	136	78.54 (16.318)	2.36 (1.071)	68	76.40 (18.934)	2.62 (1.577)	-0.26 (-4.017, 3.504)	0.8932
Hedges' g SMD							-0.02 (-0.311, 0.271)	0.8919
Non-tBRCAm	83	81.11 (17.790)	1.15 (1.351)	52	76.63 (18.866)	2.18 (1.772)	-1.03 (-5.459, 3.392)	0.6447
Hedges' g SMD							-0.08 (-0.429, 0.265)	0.6420
Int. p-value								0.8627
Status somatic BRCA mutations								
sBRCAm	18	80.00 (14.642)	5.49 (2.490)	6	80.00 (20.221)	5.17 (4.404)	0.32 (-10.341, 10.972)	0.9510
Hedges' g SMD							0.03 (-0.895, 0.953)	0.9515
gBRCAm	57	78.45 (16.832)	-0.32 (1.644)	28	75.95 (20.314)	4.01 (2.460)	-4.33 (-10.213, 1.559)	0.1475
Hedges' g SMD							-0.34 (-0.795, 0.115)	0.1433
Non-BRCAm	36	82.79 (17.525)	2.83 (1.759)	22	79.32 (16.893)	5.44 (2.350)	-2.61 (-8.520, 3.307)	0.3799
Hedges' g SMD							-0.24 (-0.772, 0.293)	0.3776
Int. p-value								0.5303

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.3 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Role (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	70.37 (27.639)	4.17 (1.868)	43	73.26 (24.704)	1.51 (2.663)	2.65 (-3.791, 9.100)	0.4165
Hedges' g SMD							0.15 (-0.216, 0.525)	0.4126
NED/CR [IDS]	61	75.14 (23.692)	1.64 (2.064)	34	74.51 (28.790)	6.27 (2.941)	-4.64 (-11.785, 2.513)	0.2008
Hedges' g SMD							-0.28 (-0.700, 0.143)	0.1947
NED/CR [Chemo]	36	71.76 (29.498)	3.18 (3.008)	20	66.67 (33.333)	-0.03 (4.549)	3.21 (-7.770, 14.194)	0.5591
Hedges' g SMD							0.17 (-0.380, 0.715)	0.5483
PR	41	NC	NC	23	NC	NC	NC	NC
Int. p-value								0.2178
Screening laboratory tBRCA status (IVRS)								
tBRCAm	130	67.44 (28.139)	5.72 (1.583)	59	71.19 (29.333)	2.93 (2.466)	2.79 (-2.994, 8.575)	0.3424
Hedges' g SMD							0.15 (-0.156, 0.460)	0.3346
non-tBRCAm	89	79.96 (22.916)	-1.34 (1.551)	61	73.77 (26.433)	0.48 (2.010)	-1.81 (-6.857, 3.227)	0.4777
Hedges' g SMD							-0.12 (-0.446, 0.206)	0.4714
Int. p-value								0.6045
First line treatment outcome (eCRF)								
NED [PDS]	79	68.78 (28.665)	3.91 (1.909)	42	75.79 (22.452)	1.33 (2.685)	2.58 (-3.963, 9.125)	0.4363
Hedges' g SMD							0.15 (-0.225, 0.525)	0.4332
NED/CR [IDS]	60	76.67 (24.006)	0.70 (2.068)	29	77.01 (29.009)	4.71 (3.194)	-4.02 (-11.592, 3.556)	0.2944
Hedges' g SMD							-0.24 (-0.688, 0.202)	0.2848
NED/CR [Chemo]	33	73.23 (29.149)	2.98 (3.041)	17	72.55 (30.585)	0.06 (5.188)	2.92 (-9.228, 15.071)	0.6295
Hedges' g SMD							0.15 (-0.434, 0.738)	0.6102
PR	44	74.24 (25.021)	2.81 (2.598)	31	65.05 (30.839)	-0.94 (3.359)	3.75 (-4.758, 12.263)	0.3815
Hedges' g SMD							0.21 (-0.253, 0.669)	0.3763
Int. p-value								0.4672

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Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.3 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Role (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	127	66.93 (28.249)	5.71 (1.604)	60	71.67 (29.321)	3.21 (2.451)	2.50 (-3.288, 8.284)	0.3954
Hedges' g SMD							0.14 (-0.172, 0.443)	0.3879
non-tBRCAm	92	80.25 (22.636)	-1.26 (1.518)	60	73.33 (26.433)	0.45 (2.019)	-1.71 (-6.730, 3.311)	0.5018
Hedges' g SMD							-0.11 (-0.439, 0.212)	0.4945
Int. p-value								0.6724
Age group								
<65 years	161	70.39 (27.762)	3.33 (1.319)	90	71.30 (28.270)	2.63 (1.858)	0.70 (-3.792, 5.186)	0.7599
Hedges' g SMD							0.04 (-0.217, 0.299)	0.7569
>=65 years	58	78.45 (23.155)	1.66 (2.135)	30	76.11 (26.509)	-0.85 (3.161)	2.52 (-5.069, 10.102)	0.5110
Hedges' g SMD							0.15 (-0.291, 0.591)	0.5051
Int. p-value								0.8915
FIGO Stage (Disease state)								
III	156	71.26 (27.276)	2.02 (1.363)	83	74.90 (28.200)	3.44 (1.952)	-1.42 (-6.111, 3.275)	0.5522
Hedges' g SMD							-0.08 (-0.348, 0.185)	0.5475
IV	63	75.66 (25.545)	5.08 (1.879)	37	67.12 (26.494)	-3.31 (2.824)	8.39 (1.615, 15.166)	0.0158*
Hedges' g SMD							0.53 (0.115, 0.940)	0.0123*
Int. p-value								0.0551
Region								
Europe	210	72.46 (26.929)	2.79 (1.158)	114	72.08 (28.265)	1.37 (1.669)	1.42 (-2.578, 5.416)	0.4854
Hedges' g SMD							0.08 (-0.146, 0.311)	0.4782
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.3 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Role (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	162	74.59 (25.143)	1.31 (1.269)	92	74.46 (26.778)	0.00 (1.745)	1.32 (-2.934, 5.567)	0.5423
Hedges' g SMD							0.08 (-0.176, 0.336)	0.5390
(1) Restricted activity	53	66.98 (30.573)	8.11 (2.530)	28	66.07 (30.592)	6.39 (3.854)	1.72 (-7.455, 10.899)	0.7098
Hedges' g SMD							0.09 (-0.369, 0.547)	0.7026
Int. p-value								0.7172
Baseline CA-125 value								
<=ULN	194	73.02 (26.927)	2.66 (1.163)	107	74.30 (26.430)	0.96 (1.657)	1.70 (-2.282, 5.689)	0.4009
Hedges' g SMD							0.10 (-0.133, 0.339)	0.3939
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	219	72.53 (26.806)	2.86 (1.121)	120	72.50 (27.809)	1.62 (1.598)	1.24 (-2.602, 5.077)	0.5264
Hedges' g SMD							0.07 (-0.150, 0.296)	0.5205
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	71.83 (26.939)	2.81 (1.372)	72	75.69 (25.475)	2.66 (2.001)	0.15 (-4.635, 4.935)	0.9509
Hedges' g SMD							0.01 (-0.275, 0.293)	0.9503
Residue	70	72.86 (26.945)	3.09 (2.044)	40	66.25 (31.687)	1.23 (2.930)	1.85 (-5.249, 8.953)	0.6056
Hedges' g SMD							0.10 (-0.284, 0.493)	0.5988
Int. p-value								0.9361

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.3 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Role (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	129	70.54 (28.376)	4.34 (1.464)	71	70.66 (27.526)	0.48 (2.048)	3.87 (-1.100, 8.832)	0.1263
Hedges' g SMD							0.23 (-0.062, 0.519)	0.1231
Interval	83	74.70 (24.329)	0.42 (1.770)	41	75.20 (29.136)	5.38 (2.711)	-4.96 (-11.371, 1.453)	0.1283
Hedges' g SMD							-0.30 (-0.674, 0.078)	0.1204
Int. p-value								0.0094*
Myriad tumour BRCA mutation status								
tBRCAm	136	68.75 (27.699)	4.57 (1.516)	68	72.30 (28.595)	2.55 (2.257)	2.02 (-3.343, 7.386)	0.4583
Hedges' g SMD							0.11 (-0.179, 0.403)	0.4513
Non-tBRCAm	83	78.71 (24.182)	-0.05 (1.640)	52	72.76 (27.022)	0.79 (2.203)	-0.84 (-6.297, 4.610)	0.7600
Hedges' g SMD							-0.05 (-0.401, 0.292)	0.7567
Int. p-value								0.7174
Status somatic BRCA mutations								
sBRCAm	18	72.22 (23.570)	7.67 (3.977)	6	72.22 (32.773)	2.93 (7.435)	4.74 (-13.189, 22.670)	0.5821
Hedges' g SMD							0.27 (-0.661, 1.194)	0.5736
gBRCAm	57	70.47 (27.280)	-0.38 (2.482)	28	67.86 (30.065)	5.86 (3.773)	-6.24 (-15.227, 2.745)	0.1708
Hedges' g SMD							-0.32 (-0.778, 0.132)	0.1641
Non-BRCAm	36	82.41 (21.434)	1.20 (2.223)	22	78.03 (18.819)	-1.13 (3.122)	2.33 (-5.413, 10.069)	0.5475
Hedges' g SMD							0.17 (-0.365, 0.697)	0.5405
Int. p-value								0.2241

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.4 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Cognitive (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	83.33 (18.066)	-2.20 (1.519)	43	82.56 (18.882)	-3.34 (2.179)	1.14 (-4.121, 6.394)	0.6694
Hedges' g SMD							0.08 (-0.289, 0.451)	0.6664
NED/CR [IDS]	61	77.05 (19.992)	-0.85 (2.003)	33	83.84 (17.423)	-0.72 (2.904)	-0.13 (-7.187, 6.922)	0.9702
Hedges' g SMD							-0.01 (-0.432, 0.415)	0.9696
NED/CR [Chemo]	37	78.38 (25.112)	-0.76 (1.838)	20	80.00 (21.357)	-4.42 (2.798)	3.66 (-3.125, 10.446)	0.2821
Hedges' g SMD							0.31 (-0.237, 0.857)	0.2673
PR	41	87.40 (19.643)	-3.08 (2.134)	22	79.55 (20.530)	-1.01 (3.125)	-2.07 (-9.681, 5.547)	0.5888
Hedges' g SMD							-0.15 (-0.664, 0.373)	0.5820
Int. p-value								0.6725
Screening laboratory tBRCA status (IVRS)								
tBRCAm	130	78.59 (21.789)	-1.31 (1.300)	59	85.03 (15.688)	-4.59 (2.043)	3.28 (-1.522, 8.087)	0.1793
Hedges' g SMD							0.22 (-0.092, 0.525)	0.1688
non-tBRCAm	90	85.74 (17.589)	-2.94 (1.277)	59	78.81 (21.627)	0.52 (1.698)	-3.46 (-7.674, 0.764)	0.1076
Hedges' g SMD							-0.28 (-0.605, 0.055)	0.1019
Int. p-value								0.1058
First line treatment outcome (eCRF)								
NED [PDS]	79	80.80 (22.343)	-2.12 (1.579)	42	83.33 (18.405)	-2.89 (2.232)	0.77 (-4.653, 6.189)	0.7795
Hedges' g SMD							0.05 (-0.321, 0.428)	0.7780
NED/CR [IDS]	60	80.00 (18.866)	-0.35 (1.916)	28	84.52 (18.104)	-2.32 (3.044)	1.97 (-5.206, 9.155)	0.5854
Hedges' g SMD							0.13 (-0.321, 0.577)	0.5754
NED/CR [Chemo]	34	80.88 (20.569)	-1.10 (1.838)	17	81.37 (21.955)	-4.74 (3.076)	3.63 (-3.662, 10.927)	0.3191
Hedges' g SMD							0.31 (-0.272, 0.900)	0.2935
PR	44	85.61 (19.553)	-3.82 (2.031)	30	78.89 (19.045)	-1.23 (2.595)	-2.59 (-9.188, 4.016)	0.4371
Hedges' g SMD							-0.19 (-0.651, 0.279)	0.4337
Int. p-value								0.6482

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis.
Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.4 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Cognitive (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	127	78.35 (21.954)	-1.23 (1.314)	60	85.28 (15.674)	-4.61 (2.024)	3.38 (-1.410, 8.176)	0.1654
Hedges' g SMD							0.22 (-0.085, 0.531)	0.1551
non-tBRCAm	93	85.84 (17.367)	-2.99 (1.264)	58	78.45 (21.631)	0.62 (1.725)	-3.61 (-7.858, 0.639)	0.0953
Hedges' g SMD							-0.29 (-0.616, 0.044)	0.0890
Int. p-value								0.0862
Age group								
<65 years	161	79.61 (21.407)	-1.79 (1.147)	89	82.40 (18.181)	-3.24 (1.635)	1.45 (-2.490, 5.391)	0.4692
Hedges' g SMD							0.10 (-0.162, 0.356)	0.4620
>=65 years	59	86.72 (16.603)	-2.25 (1.424)	29	80.46 (21.853)	0.74 (2.185)	-2.99 (-8.205, 2.222)	0.2562
Hedges' g SMD							-0.26 (-0.711, 0.182)	0.2455
Int. p-value								0.3850
FIGO Stage (Disease state)								
III	157	80.36 (21.558)	-2.33 (1.121)	81	81.28 (20.135)	-0.33 (1.630)	-1.99 (-5.893, 1.905)	0.3146
Hedges' g SMD							-0.14 (-0.408, 0.129)	0.3087
IV	63	84.39 (17.163)	-1.08 (1.546)	37	83.33 (16.667)	-7.80 (2.339)	6.72 (1.149, 12.297)	0.0186*
Hedges' g SMD							0.51 (0.100, 0.925)	0.0149*
Int. p-value								0.0575
Region								
Europe	211	81.44 (20.743)	-2.00 (0.964)	112	81.70 (19.240)	-2.47 (1.416)	0.48 (-2.896, 3.847)	0.7816
Hedges' g SMD							0.03 (-0.196, 0.262)	0.7774
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.4 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Cognitive (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	163	82.62 (19.097)	-1.65 (1.099)	90	82.78 (19.101)	-3.53 (1.535)	1.88 (-1.838, 5.601)	0.3201
Hedges' g SMD							0.13 (-0.126, 0.390)	0.3157
(1) Restricted activity	54	78.09 (24.190)	-1.93 (1.719)	28	79.17 (19.043)	1.59 (2.787)	-3.52 (-10.054, 3.020)	0.2867
Hedges' g SMD							-0.26 (-0.719, 0.198)	0.2655
Int. p-value								0.0452*
Baseline CA-125 value								
<=ULN	195	81.71 (20.696)	-1.31 (0.962)	105	81.59 (19.464)	-2.52 (1.395)	1.21 (-2.130, 4.543)	0.4771
Hedges' g SMD							0.09 (-0.150, 0.325)	0.4694
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	220	81.52 (20.440)	-1.87 (0.930)	118	81.92 (19.069)	-2.31 (1.348)	0.44 (-2.787, 3.660)	0.7903
Hedges' g SMD							0.03 (-0.193, 0.255)	0.7868
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	80.40 (20.657)	-1.51 (1.199)	71	83.33 (18.473)	-2.43 (1.769)	0.92 (-3.299, 5.139)	0.6676
Hedges' g SMD							0.06 (-0.222, 0.348)	0.6635
Residue	71	82.39 (20.488)	-2.63 (1.380)	39	80.34 (17.882)	-2.75 (2.009)	0.12 (-4.718, 4.955)	0.9613
Hedges' g SMD							0.01 (-0.381, 0.401)	0.9605
Int. p-value								0.5964

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[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.4 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Cognitive (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	130	81.67 (21.250)	-1.32 (1.145)	70	81.19 (19.018)	-3.19 (1.635)	1.87 (-2.065, 5.812)	0.3493
Hedges' g SMD							0.14 (-0.150, 0.431)	0.3435
Interval	83	80.12 (19.558)	-2.25 (1.654)	40	84.17 (16.858)	-2.12 (2.572)	-0.13 (-6.198, 5.942)	0.9667
Hedges' g SMD							-0.01 (-0.385, 0.369)	0.9659
Int. p-value								0.4849
Myriad tumour BRCA mutation status								
tBRCAm	136	79.04 (21.372)	-1.89 (1.227)	68	85.05 (16.577)	-4.29 (1.846)	2.39 (-2.006, 6.795)	0.2845
Hedges' g SMD							0.16 (-0.128, 0.455)	0.2725
Non-tBRCAm	84	85.52 (18.254)	-1.86 (1.403)	50	77.67 (21.458)	0.66 (1.945)	-2.52 (-7.297, 2.254)	0.2983
Hedges' g SMD							-0.19 (-0.541, 0.161)	0.2886
Int. p-value								0.2114
Status somatic BRCA mutations								
sBRCAm	18	NC	NC	6	NC	NC	NC	NC
gBRCAm	56	74.11 (21.770)	-1.50 (2.046)	28	82.74 (16.026)	-2.67 (3.093)	1.17 (-6.266, 8.609)	0.7544
Hedges' g SMD							0.07 (-0.380, 0.528)	0.7489
Non-BRCAm	37	83.33 (18.002)	1.60 (1.670)	21	76.19 (21.455)	-0.71 (2.528)	2.31 (-3.800, 8.412)	0.4526
Hedges' g SMD							0.21 (-0.324, 0.750)	0.4374
Int. p-value								0.9429

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.5 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Emotional (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	76.85 (22.973)	-0.82 (1.411)	43	70.54 (20.521)	-1.29 (2.033)	0.47 (-4.450, 5.382)	0.8514
Hedges' g SMD							0.04 (-0.334, 0.406)	0.8493
NED/CR [IDS]	61	75.09 (21.636)	-4.67 (2.181)	33	85.94 (13.992)	-4.34 (3.194)	-0.33 (-8.171, 7.504)	0.9328
Hedges' g SMD							-0.02 (-0.442, 0.405)	0.9303
NED/CR [Chemo]	37	69.67 (26.895)	1.60 (2.360)	20	80.83 (14.833)	1.42 (3.529)	0.18 (-8.519, 8.878)	0.9669
Hedges' g SMD							0.01 (-0.532, 0.556)	0.9658
PR	41	79.95 (17.163)	-3.51 (2.138)	22	79.29 (14.516)	-5.39 (3.216)	1.88 (-5.869, 9.622)	0.6294
Hedges' g SMD							0.13 (-0.388, 0.649)	0.6215
Int. p-value								0.2656
Screening laboratory tBRCA status (IVRS)								
tBRCAm	130	72.78 (24.509)	-1.44 (1.328)	59	79.10 (17.219)	-5.79 (2.088)	4.35 (-0.553, 9.247)	0.0817
Hedges' g SMD							0.28 (-0.028, 0.590)	0.0750
non-tBRCAm	90	80.00 (18.384)	-2.51 (1.313)	59	77.35 (18.540)	0.56 (1.736)	-3.08 (-7.381, 1.228)	0.1598
Hedges' g SMD							-0.24 (-0.568, 0.090)	0.1551
Int. p-value								0.1786
First line treatment outcome (eCRF)								
NED [PDS]	79	74.26 (23.952)	-0.60 (1.465)	42	71.03 (20.515)	-1.00 (2.079)	0.40 (-4.642, 5.443)	0.8752
Hedges' g SMD							0.03 (-0.344, 0.404)	0.8744
NED/CR [IDS]	60	77.73 (19.798)	-4.15 (2.124)	28	86.31 (14.910)	-4.53 (3.370)	0.39 (-7.642, 8.419)	0.9236
Hedges' g SMD							0.02 (-0.426, 0.471)	0.9207
NED/CR [Chemo]	34	72.63 (25.924)	1.56 (2.482)	17	82.84 (13.330)	-1.18 (4.143)	2.74 (-7.467, 12.945)	0.5811
Hedges' g SMD							0.18 (-0.408, 0.759)	0.5555
PR	44	77.34 (20.752)	-4.16 (2.059)	30	78.52 (15.108)	-2.27 (2.747)	-1.89 (-8.758, 4.980)	0.5851
Hedges' g SMD							-0.13 (-0.596, 0.333)	0.5795
Int. p-value								0.2062

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis.
Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.5 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Emotional (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	127	72.59 (24.762)	-1.71 (1.343)	60	79.44 (17.285)	-5.77 (2.071)	4.06 (-0.833, 8.951)	0.1034
Hedges' g SMD							0.26 (-0.046, 0.570)	0.0957
non-tBRCAm	93	80.02 (18.096)	-2.15 (1.292)	58	76.96 (18.455)	0.74 (1.751)	-2.89 (-7.195, 1.415)	0.1866
Hedges' g SMD							-0.22 (-0.554, 0.104)	0.1808
Int. p-value								0.2417
Age group								
<65 years	161	74.86 (23.302)	-3.16 (1.171)	89	77.15 (17.316)	-3.06 (1.673)	-0.09 (-4.120, 3.930)	0.9631
Hedges' g SMD							-0.01 (-0.265, 0.253)	0.9625
>=65 years	59	78.11 (19.918)	1.23 (1.509)	29	81.51 (19.292)	-1.64 (2.321)	2.87 (-2.675, 8.412)	0.3064
Hedges' g SMD							0.24 (-0.207, 0.685)	0.2934
Int. p-value								0.8160
FIGO Stage (Disease state)								
III	157	75.05 (23.969)	-2.29 (1.138)	81	77.50 (19.482)	-1.43 (1.662)	-0.86 (-4.831, 3.117)	0.6711
Hedges' g SMD							-0.06 (-0.327, 0.209)	0.6667
IV	63	77.43 (18.171)	-1.07 (1.853)	37	79.80 (13.666)	-6.91 (2.681)	5.84 (-0.649, 12.336)	0.0771
Hedges' g SMD							0.38 (-0.031, 0.788)	0.0700
Int. p-value								0.2033
Region								
Europe	211	75.21 (22.644)	-2.07 (0.990)	112	77.88 (18.129)	-3.07 (1.458)	1.01 (-2.464, 4.478)	0.5685
Hedges' g SMD							0.07 (-0.161, 0.297)	0.5602
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.5 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Emotional (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	163	77.45 (20.719)	-2.44 (1.119)	90	77.90 (17.759)	-3.09 (1.562)	0.65 (-3.134, 4.438)	0.7347
Hedges' g SMD							0.04 (-0.213, 0.302)	0.7324
(1) Restricted activity	54	69.50 (26.465)	0.47 (1.956)	28	79.27 (18.371)	-1.05 (3.212)	1.53 (-6.031, 9.090)	0.6886
Hedges' g SMD							0.10 (-0.358, 0.556)	0.6711
Int. p-value								0.7726
Baseline CA-125 value								
<=ULN	195	74.93 (23.293)	-1.65 (0.993)	105	78.62 (18.048)	-2.52 (1.445)	0.87 (-2.583, 4.333)	0.6190
Hedges' g SMD							0.06 (-0.176, 0.299)	0.6119
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	220	75.73 (22.447)	-1.98 (0.961)	118	78.23 (17.836)	-2.60 (1.396)	0.62 (-2.717, 3.961)	0.7141
Hedges' g SMD							0.04 (-0.181, 0.266)	0.7091
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	75.98 (22.154)	-2.23 (1.208)	71	77.00 (19.744)	-2.13 (1.788)	-0.10 (-4.359, 4.151)	0.9617
Hedges' g SMD							-0.01 (-0.292, 0.278)	0.9612
Residue	71	73.94 (23.567)	-0.66 (1.755)	39	79.49 (13.422)	-3.51 (2.564)	2.85 (-3.358, 9.065)	0.3640
Hedges' g SMD							0.19 (-0.205, 0.578)	0.3515
Int. p-value								0.3775

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.5 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Emotional (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	130	74.62 (23.726)	0.19 (1.167)	70	73.53 (18.241)	-1.71 (1.657)	1.91 (-2.092, 5.906)	0.3481
Hedges' g SMD							0.14 (-0.150, 0.432)	0.3433
Interval	83	76.37 (20.807)	-4.59 (1.787)	40	85.49 (14.045)	-4.38 (2.824)	-0.21 (-6.929, 6.507)	0.9506
Hedges' g SMD							-0.01 (-0.390, 0.365)	0.9484
Int. p-value								0.0717
Myriad tumour BRCA mutation status								
tBRCAm	136	73.92 (23.437)	-1.87 (1.290)	68	79.53 (17.089)	-4.34 (1.938)	2.48 (-2.132, 7.088)	0.2904
Hedges' g SMD							0.16 (-0.131, 0.452)	0.2798
Non-tBRCAm	84	78.67 (20.540)	-1.91 (1.384)	50	76.44 (18.833)	-0.41 (1.919)	-1.50 (-6.185, 3.187)	0.5277
Hedges' g SMD							-0.11 (-0.465, 0.236)	0.5219
Int. p-value								0.7033
Status somatic BRCA mutations								
sBRCAm	18	77.78 (21.390)	-6.15 (3.585)	6	87.50 (10.206)	-13.06 (6.359)	6.91 (-8.460, 22.281)	0.3598
Hedges' g SMD							0.44 (-0.497, 1.370)	0.3598
gBRCAm	56	72.52 (25.529)	-4.97 (2.016)	28	77.68 (19.311)	-3.61 (3.098)	-1.36 (-8.736, 6.020)	0.7151
Hedges' g SMD							-0.09 (-0.540, 0.367)	0.7083
Non-BRCAm	37	77.03 (23.357)	-0.60 (2.259)	21	78.57 (21.176)	-0.05 (3.243)	-0.56 (-8.523, 7.412)	0.8888
Hedges' g SMD							-0.04 (-0.574, 0.497)	0.8872
Int. p-value								0.5545

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.6 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Social (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	75.31 (25.428)	6.89 (1.618)	43	70.54 (24.623)	7.14 (2.350)	-0.24 (-5.897, 5.413)	0.9326
Hedges' g SMD							-0.02 (-0.386, 0.354)	0.9316
NED/CR [IDS]	61	74.04 (28.791)	1.49 (2.250)	33	78.79 (23.670)	7.04 (3.231)	-5.55 (-13.394, 2.300)	0.1632
Hedges' g SMD							-0.31 (-0.733, 0.119)	0.1578
NED/CR [Chemo]	37	65.32 (30.525)	6.77 (2.639)	20	70.83 (28.549)	10.06 (3.974)	-3.29 (-12.870, 6.287)	0.4938
Hedges' g SMD							-0.19 (-0.740, 0.350)	0.4839
PR	41	76.42 (29.809)	4.40 (2.479)	22	74.24 (25.054)	4.60 (3.700)	-0.20 (-9.127, 8.737)	0.9652
Hedges' g SMD							-0.01 (-0.530, 0.506)	0.9645
Int. p-value								0.3273
Screening laboratory tBRCA status (IVRS)								
tBRCAm	130	69.23 (29.162)	5.81 (1.418)	59	72.88 (26.785)	8.62 (2.227)	-2.81 (-8.024, 2.402)	0.2887
Hedges' g SMD							-0.17 (-0.478, 0.138)	0.2793
non-tBRCAm	90	79.63 (25.574)	3.44 (1.565)	59	74.29 (23.432)	6.28 (2.055)	-2.85 (-7.969, 2.273)	0.2732
Hedges' g SMD							-0.19 (-0.515, 0.143)	0.2675
Int. p-value								0.4299
First line treatment outcome (eCRF)								
NED [PDS]	79	74.26 (27.965)	6.15 (1.640)	42	73.02 (23.557)	7.56 (2.340)	-1.42 (-7.078, 4.242)	0.6206
Hedges' g SMD							-0.10 (-0.470, 0.279)	0.6178
NED/CR [IDS]	60	75.83 (29.976)	1.80 (2.124)	28	80.36 (24.867)	8.30 (3.378)	-6.51 (-14.455, 1.443)	0.1072
Hedges' g SMD							-0.38 (-0.834, 0.071)	0.0984
NED/CR [Chemo]	34	65.20 (28.239)	10.08 (2.860)	17	71.57 (28.726)	10.75 (4.733)	-0.67 (-11.798, 10.466)	0.9047
Hedges' g SMD							-0.04 (-0.619, 0.545)	0.9005
PR	44	76.52 (25.749)	3.38 (2.498)	30	70.00 (25.295)	4.40 (3.256)	-1.01 (-9.224, 7.195)	0.8057
Hedges' g SMD							-0.06 (-0.523, 0.405)	0.8040
Int. p-value								0.5350

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis.
Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.6 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Social (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	127	68.50 (29.113)	5.89 (1.442)	60	73.33 (26.786)	8.94 (2.221)	-3.05 (-8.288, 2.178)	0.2509
Hedges' g SMD							-0.18 (-0.491, 0.124)	0.2418
non-tBRCAm	93	80.29 (25.413)	3.37 (1.527)	58	73.85 (23.386)	6.08 (2.063)	-2.71 (-7.801, 2.383)	0.2946
Hedges' g SMD							-0.18 (-0.507, 0.150)	0.2874
Int. p-value								0.4036
Age group								
<65 years	161	71.84 (29.002)	5.18 (1.274)	89	71.35 (25.375)	9.29 (1.815)	-4.11 (-8.478, 0.257)	0.0649
Hedges' g SMD							-0.25 (-0.508, 0.012)	0.0611
>=65 years	59	77.97 (25.416)	3.07 (1.768)	29	80.46 (23.175)	2.86 (2.723)	0.21 (-6.261, 6.688)	0.9478
Hedges' g SMD							0.02 (-0.429, 0.460)	0.9467
Int. p-value								0.3810
FIGO Stage (Disease state)								
III	157	74.10 (28.143)	3.35 (1.243)	81	73.46 (26.716)	8.97 (1.818)	-5.62 (-9.957, -1.279)	0.0114*
Hedges' g SMD							-0.35 (-0.623, -0.083)	0.0103*
IV	63	71.96 (28.371)	9.26 (1.864)	37	73.87 (21.351)	3.96 (2.796)	5.30 (-1.388, 11.988)	0.1189
Hedges' g SMD							0.34 (-0.073, 0.745)	0.1070
Int. p-value								0.0265*
Region								
Europe	211	72.99 (28.491)	4.94 (1.075)	112	73.66 (25.275)	6.98 (1.582)	-2.04 (-5.809, 1.720)	0.2861
Hedges' g SMD							-0.13 (-0.357, 0.102)	0.2765
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.6 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Social (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	163	73.72 (27.273)	4.79 (1.172)	90	75.37 (24.381)	6.56 (1.643)	-1.78 (-5.754, 2.200)	0.3795
Hedges' g SMD							-0.12 (-0.374, 0.141)	0.3747
(1) Restricted activity	54	73.77 (31.323)	4.56 (2.367)	28	67.86 (26.808)	9.95 (3.694)	-5.39 (-14.134, 3.352)	0.2234
Hedges' g SMD							-0.29 (-0.753, 0.165)	0.2088
Int. p-value								0.1783
Baseline CA-125 value								
<=ULN	195	74.02 (28.670)	5.35 (1.078)	105	74.13 (25.422)	8.18 (1.565)	-2.83 (-6.573, 0.911)	0.1375
Hedges' g SMD							-0.18 (-0.421, 0.054)	0.1307
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	220	73.48 (28.160)	4.82 (1.055)	118	73.59 (25.067)	7.60 (1.529)	-2.78 (-6.433, 0.877)	0.1358
Hedges' g SMD							-0.17 (-0.397, 0.051)	0.1293
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	74.53 (28.675)	4.39 (1.293)	71	75.59 (24.207)	7.85 (1.921)	-3.46 (-8.029, 1.103)	0.1363
Hedges' g SMD							-0.22 (-0.506, 0.065)	0.1307
Residue	71	69.72 (27.647)	6.37 (1.977)	39	68.80 (27.620)	7.00 (2.868)	-0.63 (-7.553, 6.285)	0.8561
Hedges' g SMD							-0.04 (-0.427, 0.354)	0.8535
Int. p-value								0.6062

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.6 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Functional scale: Social (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	130	72.05 (28.621)	7.33 (1.298)	70	70.48 (25.248)	8.08 (1.857)	-0.75 (-5.215, 3.722)	0.7421
Hedges' g SMD							-0.05 (-0.340, 0.241)	0.7391
Interval	83	74.30 (28.070)	1.23 (1.931)	40	77.92 (25.706)	5.75 (2.977)	-4.52 (-11.562, 2.521)	0.2059
Hedges' g SMD							-0.25 (-0.628, 0.129)	0.1963
Int. p-value								0.2143
Myriad tumour BRCA mutation status								
tBRCAm	136	68.87 (29.593)	6.32 (1.395)	68	73.53 (26.113)	9.76 (2.092)	-3.44 (-8.405, 1.525)	0.1734
Hedges' g SMD							-0.21 (-0.498, 0.085)	0.1656
Non-tBRCAm	84	80.95 (24.012)	2.17 (1.598)	50	73.67 (23.831)	4.88 (2.216)	-2.71 (-8.144, 2.719)	0.3247
Hedges' g SMD							-0.18 (-0.530, 0.171)	0.3161
Int. p-value								0.4667
Status somatic BRCA mutations								
sBRCAm	18	65.74 (21.747)	14.05 (2.879)	6	72.22 (25.092)	15.82 (5.246)	-1.77 (-14.288, 10.749)	0.7716
Hedges' g SMD							-0.14 (-1.063, 0.787)	0.7696
gBRCAm	56	75.00 (27.707)	-0.90 (2.315)	28	71.43 (23.941)	11.10 (3.519)	-12.00 (-20.401, -3.607)	0.0057*
Hedges' g SMD							-0.67 (-1.135, -0.204)	0.0048*
Non-BRCAm	37	85.14 (19.557)	0.89 (1.894)	21	80.95 (21.269)	1.91 (2.823)	-1.01 (-7.863, 5.838)	0.7677
Hedges' g SMD							-0.08 (-0.619, 0.453)	0.7616
Int. p-value								0.1285

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.7 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Loss of appetite (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	10.29 (19.466)	3.24 (1.553)	43	8.53 (19.372)	-0.36 (2.225)	3.59 (-1.785, 8.971)	0.1884
Hedges' g SMD							0.25 (-0.120, 0.623)	0.1840
NED/CR [IDS]	61	6.01 (12.922)	6.09 (2.011)	34	7.84 (14.352)	1.62 (2.795)	4.46 (-2.388, 11.317)	0.1986
Hedges' g SMD							0.28 (-0.143, 0.700)	0.1957
NED/CR [Chemo]	36	9.26 (20.488)	2.95 (2.278)	20	5.00 (12.212)	-2.89 (3.354)	5.84 (-2.316, 13.998)	0.1563
Hedges' g SMD							0.41 (-0.145, 0.959)	0.1486
PR	41	5.69 (14.724)	5.00 (2.658)	23	14.49 (22.079)	7.19 (4.108)	-2.19 (-12.181, 7.801)	0.6587
Hedges' g SMD							-0.12 (-0.631, 0.391)	0.6451
Int. p-value								0.2388
Screening laboratory tBRCA status (IVRS)								
tBRCAm	130	8.46 (17.269)	4.23 (1.351)	59	6.21 (13.093)	2.36 (2.111)	1.88 (-3.074, 6.826)	0.4554
Hedges' g SMD							0.12 (-0.189, 0.427)	0.4475
non-tBRCAm	89	7.49 (17.228)	4.04 (1.284)	61	11.48 (20.981)	-0.87 (1.646)	4.91 (0.785, 9.042)	0.0200*
Hedges' g SMD							0.39 (0.065, 0.723)	0.0190*
Int. p-value								0.6099
First line treatment outcome (eCRF)								
NED [PDS]	79	9.70 (19.357)	3.41 (1.573)	42	7.94 (19.211)	0.33 (2.226)	3.09 (-2.319, 8.494)	0.2602
Hedges' g SMD							0.22 (-0.158, 0.592)	0.2571
NED/CR [IDS]	60	5.56 (12.527)	6.84 (1.870)	29	5.75 (12.814)	1.12 (2.782)	5.72 (-0.951, 12.391)	0.0918
Hedges' g SMD							0.39 (-0.060, 0.834)	0.0896
NED/CR [Chemo]	33	9.09 (19.135)	1.58 (2.331)	17	7.84 (14.575)	-4.73 (3.764)	6.31 (-2.674, 15.293)	0.1628
Hedges' g SMD							0.44 (-0.153, 1.031)	0.1458
PR	44	8.33 (17.791)	5.09 (2.519)	31	12.90 (20.507)	5.81 (3.203)	-0.72 (-8.903, 7.458)	0.8606
Hedges' g SMD							-0.04 (-0.501, 0.418)	0.8591
Int. p-value								0.2541

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.7 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Loss of appetite (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	127	8.66 (17.423)	4.31 (1.371)	60	6.11 (13.007)	2.16 (2.103)	2.15 (-2.810, 7.109)	0.3935
Hedges' g SMD							0.14 (-0.171, 0.444)	0.3853
non-tBRCAm	92	7.25 (16.994)	3.92 (1.254)	60	11.67 (21.104)	-0.74 (1.650)	4.66 (0.558, 8.757)	0.0263*
Hedges' g SMD							0.38 (0.048, 0.704)	0.0247*
Int. p-value								0.7130
Age group								
<65 years	161	6.83 (14.962)	5.51 (1.109)	90	5.93 (13.755)	1.91 (1.565)	3.60 (-0.179, 7.381)	0.0617
Hedges' g SMD							0.25 (-0.009, 0.509)	0.0583
>=65 years	58	11.49 (22.121)	0.18 (2.058)	30	17.78 (24.343)	-2.05 (3.039)	2.22 (-5.103, 9.548)	0.5473
Hedges' g SMD							0.14 (-0.304, 0.579)	0.5411
Int. p-value								0.8547
FIGO Stage (Disease state)								
III	156	9.40 (18.854)	4.70 (1.192)	83	8.43 (18.656)	-0.26 (1.700)	4.95 (0.861, 9.047)	0.0179*
Hedges' g SMD							0.33 (0.059, 0.595)	0.0168*
IV	63	4.76 (11.758)	2.86 (1.445)	37	9.91 (15.446)	3.68 (2.125)	-0.82 (-5.943, 4.308)	0.7519
Hedges' g SMD							-0.07 (-0.474, 0.339)	0.7447
Int. p-value								0.0416*
Region								
Europe	210	7.94 (17.269)	4.23 (0.987)	114	9.36 (18.018)	0.81 (1.428)	3.42 (0.004, 6.839)	0.0497*
Hedges' g SMD							0.23 (0.004, 0.462)	0.0458*
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.7 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Loss of appetite (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	162	5.97 (14.816)	4.49 (1.005)	92	7.61 (17.888)	1.58 (1.392)	2.91 (-0.471, 6.297)	0.0913
Hedges' g SMD							0.22 (-0.033, 0.480)	0.0879
(1) Restricted activity	53	14.47 (22.178)	1.82 (2.270)	28	13.10 (16.578)	-1.48 (3.425)	3.30 (-4.878, 11.484)	0.4241
Hedges' g SMD							0.19 (-0.267, 0.650)	0.4136
Int. p-value								0.9856
Baseline CA-125 value								
<=ULN	194	8.08 (17.238)	3.87 (0.999)	107	8.72 (17.337)	1.59 (1.422)	2.28 (-1.142, 5.698)	0.1910
Hedges' g SMD							0.16 (-0.076, 0.396)	0.1846
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	219	8.07 (17.219)	4.15 (0.958)	120	8.89 (17.677)	0.83 (1.370)	3.31 (0.026, 6.603)	0.0483*
Hedges' g SMD							0.23 (0.005, 0.452)	0.0450*
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	7.75 (16.686)	4.64 (1.168)	72	7.41 (16.990)	0.52 (1.699)	4.12 (0.057, 8.190)	0.0469*
Hedges' g SMD							0.29 (0.007, 0.577)	0.0448*
Residue	70	8.57 (18.551)	2.61 (1.627)	40	10.00 (17.213)	-1.82 (2.314)	4.43 (-1.183, 10.042)	0.1206
Hedges' g SMD							0.31 (-0.076, 0.705)	0.1148
Int. p-value								0.8556

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.7 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Loss of appetite (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	129	9.56 (19.182)	2.00 (1.139)	71	8.92 (18.651)	-0.90 (1.607)	2.90 (-0.981, 6.790)	0.1420
Hedges' g SMD							0.22 (-0.070, 0.510)	0.1376
Interval	83	5.62 (13.594)	7.07 (1.667)	41	7.32 (13.969)	0.62 (2.512)	6.45 (0.477, 12.429)	0.0346*
Hedges' g SMD							0.41 (0.036, 0.792)	0.0317*
Int. p-value								0.2435
Myriad tumour BRCA mutation status								
tBRCAm	136	8.33 (17.093)	4.45 (1.307)	68	6.86 (14.749)	1.49 (1.949)	2.96 (-1.674, 7.591)	0.2093
Hedges' g SMD							0.19 (-0.102, 0.482)	0.2020
Non-tBRCAm	83	7.63 (17.519)	3.89 (1.357)	52	11.54 (20.753)	-0.34 (1.821)	4.23 (-0.275, 8.726)	0.0655
Hedges' g SMD							0.33 (-0.017, 0.681)	0.0624
Int. p-value								0.9501
Status somatic BRCA mutations								
sBRCAm	18	12.96 (23.260)	1.00 (3.286)	6	5.56 (13.608)	-4.03 (5.985)	5.03 (-9.343, 19.398)	0.4724
Hedges' g SMD							0.34 (-0.586, 1.274)	0.4684
gBRCAm	57	8.77 (16.093)	8.53 (2.335)	28	7.14 (13.929)	1.09 (3.534)	7.43 (-1.009, 15.875)	0.0835
Hedges' g SMD							0.41 (-0.047, 0.866)	0.0788
Non-BRCAm	36	4.63 (11.691)	5.90 (1.637)	22	9.09 (18.349)	3.02 (2.191)	2.88 (-2.590, 8.348)	0.2956
Hedges' g SMD							0.28 (-0.249, 0.817)	0.2961
Int. p-value								0.6887

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.8 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Constipation (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	80	21.25 (32.367)	0.07 (1.843)	43	17.05 (30.318)	0.83 (2.656)	-0.76 (-7.171, 5.654)	0.8152
Hedges' g SMD							-0.04 (-0.415, 0.326)	0.8127
NED/CR [IDS]	61	18.03 (24.776)	0.03 (1.732)	34	10.78 (17.829)	0.52 (2.538)	-0.49 (-6.653, 5.672)	0.8743
Hedges' g SMD							-0.03 (-0.454, 0.385)	0.8710
NED/CR [Chemo]	36	14.81 (25.751)	5.28 (3.409)	20	10.00 (19.041)	6.15 (5.398)	-0.87 (-13.855, 12.112)	0.8929
Hedges' g SMD							-0.04 (-0.586, 0.507)	0.8877
PR	39	NC	NC	21	NC	NC	NC	NC
Int. p-value								0.9412
Screening laboratory tBRCA status (IVRS)								
tBRCAm	128	17.97 (28.648)	0.78 (1.497)	57	14.62 (23.585)	1.59 (2.383)	-0.81 (-6.371, 4.748)	0.7735
Hedges' g SMD							-0.05 (-0.359, 0.265)	0.7687
non-tBRCAm	88	16.67 (26.743)	2.18 (1.613)	61	13.66 (25.369)	1.15 (2.158)	1.03 (-4.313, 6.383)	0.7025
Hedges' g SMD							0.06 (-0.262, 0.392)	0.6969
Int. p-value								0.9630
First line treatment outcome (eCRF)								
NED [PDS]	78	23.08 (33.681)	-0.37 (1.900)	42	17.46 (30.567)	0.39 (2.695)	-0.76 (-7.308, 5.791)	0.8189
Hedges' g SMD							-0.04 (-0.419, 0.331)	0.8171
NED/CR [IDS]	60	16.11 (24.156)	0.80 (1.683)	29	10.34 (18.046)	3.02 (2.702)	-2.22 (-8.589, 4.158)	0.4903
Hedges' g SMD							-0.16 (-0.606, 0.282)	0.4740
NED/CR [Chemo]	33	11.11 (19.837)	6.12 (3.623)	17	9.80 (19.596)	10.71 (6.238)	-4.59 (-19.191, 10.016)	0.5289
Hedges' g SMD							-0.20 (-0.787, 0.386)	0.5037
PR	42	15.08 (25.717)	3.77 (2.508)	29	16.09 (22.923)	-3.55 (3.389)	7.32 (-1.150, 15.788)	0.0887
Hedges' g SMD							0.42 (-0.055, 0.902)	0.0828
Int. p-value								0.3119

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.8 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Constipation (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	125	18.13 (28.869)	0.81 (1.522)	58	14.94 (23.506)	1.57 (2.374)	-0.76 (-6.327, 4.815)	0.7890
Hedges' g SMD							-0.04 (-0.355, 0.268)	0.7848
non-tBRCAm	91	16.48 (26.469)	2.13 (1.575)	60	13.33 (25.453)	1.21 (2.160)	0.93 (-4.378, 6.235)	0.7297
Hedges' g SMD							0.06 (-0.267, 0.385)	0.7238
Int. p-value								0.8861
Age group								
<65 years	159	16.35 (28.032)	2.42 (1.345)	90	14.81 (23.497)	2.12 (1.935)	0.30 (-4.343, 4.951)	0.8975
Hedges' g SMD							0.02 (-0.241, 0.276)	0.8954
>=65 years	57	20.47 (27.280)	-1.68 (1.794)	28	11.90 (27.539)	0.87 (2.805)	-2.55 (-9.224, 4.126)	0.4493
Hedges' g SMD							-0.18 (-0.634, 0.272)	0.4345
Int. p-value								0.2744
FIGO Stage (Disease state)								
III	154	18.40 (28.275)	2.68 (1.313)	81	14.81 (26.874)	3.22 (1.921)	-0.55 (-5.144, 4.047)	0.8141
Hedges' g SMD							-0.03 (-0.302, 0.236)	0.8108
IV	62	15.05 (26.774)	-1.96 (1.868)	37	12.61 (18.175)	-3.22 (2.830)	1.26 (-5.463, 7.985)	0.7106
Hedges' g SMD							0.08 (-0.328, 0.487)	0.7011
Int. p-value								0.2629
Region								
Europe	207	18.20 (28.188)	1.25 (1.139)	112	14.29 (24.797)	0.75 (1.689)	0.50 (-3.518, 4.511)	0.8080
Hedges' g SMD							0.03 (-0.201, 0.259)	0.8030
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.8 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Constipation (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	161	15.32 (27.637)	2.08 (1.230)	91	15.38 (25.967)	1.53 (1.731)	0.55 (-3.638, 4.733)	0.7968
Hedges' g SMD							0.03 (-0.223, 0.291)	0.7940
(1) Restricted activity	52	24.36 (28.095)	-1.18 (2.668)	27	9.88 (18.057)	1.99 (4.320)	-3.17 (-13.464, 7.121)	0.5409
Hedges' g SMD							-0.15 (-0.620, 0.311)	0.5165
Int. p-value								0.8726
Baseline CA-125 value								
<=ULN	191	18.85 (28.708)	0.79 (1.175)	105	14.60 (25.286)	1.54 (1.716)	-0.75 (-4.854, 3.351)	0.7187
Hedges' g SMD							-0.04 (-0.283, 0.193)	0.7124
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	216	17.44 (27.832)	1.41 (1.100)	118	14.12 (24.424)	1.49 (1.611)	-0.09 (-3.931, 3.757)	0.9643
Hedges' g SMD							-0.01 (-0.230, 0.219)	0.9635
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	141	19.62 (29.833)	0.15 (1.312)	72	14.35 (26.137)	1.33 (1.940)	-1.18 (-5.811, 3.450)	0.6157
Hedges' g SMD							-0.07 (-0.358, 0.210)	0.6093
Residue	68	13.73 (23.909)	3.99 (2.113)	40	10.83 (17.521)	3.48 (3.113)	0.51 (-6.967, 7.982)	0.8930
Hedges' g SMD							0.03 (-0.363, 0.418)	0.8900
Int. p-value								0.3505

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.8 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Constipation (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	126	18.78 (30.839)	2.22 (1.479)	71	13.62 (26.172)	1.88 (2.105)	0.33 (-4.751, 5.420)	0.8969
Hedges' g SMD							0.02 (-0.271, 0.310)	0.8951
Interval	83	16.06 (23.490)	-0.04 (1.584)	41	12.20 (17.882)	1.95 (2.507)	-1.99 (-7.881, 3.909)	0.5055
Hedges' g SMD							-0.13 (-0.506, 0.243)	0.4905
Int. p-value								0.9776
Myriad tumour BRCA mutation status								
tBRCAm	134	18.41 (28.192)	0.85 (1.455)	66	13.64 (22.628)	0.36 (2.221)	0.48 (-4.765, 5.728)	0.8565
Hedges' g SMD							0.03 (-0.267, 0.323)	0.8532
Non-tBRCAm	82	15.85 (27.330)	2.25 (1.668)	52	14.74 (26.743)	2.77 (2.328)	-0.53 (-6.214, 5.159)	0.8545
Hedges' g SMD							-0.03 (-0.381, 0.314)	0.8512
Int. p-value								0.5504
Status somatic BRCA mutations								
sBRCAm	17	17.65 (20.809)	-2.19 (3.769)	6	16.67 (18.257)	6.03 (6.792)	-8.22 (-24.582, 8.144)	0.3048
Hedges' g SMD							-0.50 (-1.445, 0.443)	0.2982
gBRCAm	56	19.64 (27.544)	3.25 (2.683)	28	16.67 (23.130)	2.23 (4.025)	1.01 (-8.633, 10.658)	0.8348
Hedges' g SMD							0.05 (-0.405, 0.503)	0.8324
Non-BRCAm	36	16.67 (25.820)	0.08 (2.497)	22	16.67 (30.429)	5.43 (3.496)	-5.35 (-13.961, 3.258)	0.2181
Hedges' g SMD							-0.34 (-0.874, 0.194)	0.2123
Int. p-value								0.4902

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.9 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Diarrhoea (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	79	7.17 (15.717)	1.32 (1.416)	43	12.40 (20.604)	2.90 (2.009)	-1.58 (-6.462, 3.308)	0.5237
Hedges' g SMD							-0.12 (-0.494, 0.249)	0.5184
NED/CR [IDS]	61	12.57 (21.225)	-0.46 (1.966)	34	8.82 (23.654)	0.84 (2.830)	-1.30 (-8.194, 5.592)	0.7075
Hedges' g SMD							-0.08 (-0.501, 0.338)	0.7023
NED/CR [Chemo]	37	17.12 (25.606)	-3.66 (1.585)	20	23.33 (37.619)	-3.88 (2.526)	0.22 (-5.824, 6.257)	0.9428
Hedges' g SMD							0.02 (-0.523, 0.565)	0.9402
PR	40	NC	NC	22	NC	NC	NC	NC
Int. p-value								0.9160
Screening laboratory tBRCA status (IVRS)								
tBRCAm	129	9.56 (20.067)	-0.05 (1.104)	59	11.30 (23.660)	1.45 (1.729)	-1.50 (-5.553, 2.548)	0.4649
Hedges' g SMD							-0.12 (-0.425, 0.191)	0.4563
non-tBRCAm	88	9.09 (17.307)	2.38 (1.609)	60	15.00 (26.343)	0.79 (2.095)	1.59 (-3.665, 6.846)	0.5498
Hedges' g SMD							0.10 (-0.227, 0.430)	0.5439
Int. p-value								0.3174
First line treatment outcome (eCRF)								
NED [PDS]	77	7.36 (15.879)	1.23 (1.454)	42	11.90 (20.589)	2.13 (2.040)	-0.90 (-5.881, 4.085)	0.7213
Hedges' g SMD							-0.07 (-0.445, 0.307)	0.7188
NED/CR [IDS]	60	9.44 (19.496)	2.49 (1.908)	29	6.90 (18.643)	3.48 (2.995)	-0.99 (-8.072, 6.094)	0.7816
Hedges' g SMD							-0.06 (-0.508, 0.379)	0.7760
NED/CR [Chemo]	34	18.63 (26.197)	-2.87 (1.870)	17	17.65 (33.578)	-3.81 (3.361)	0.94 (-6.922, 8.801)	0.8084
Hedges' g SMD							0.08 (-0.505, 0.660)	0.7944
PR	43	5.43 (14.420)	0.20 (2.112)	30	18.89 (29.921)	0.25 (2.833)	-0.05 (-7.316, 7.215)	0.9889
Hedges' g SMD							0.00 (-0.470, 0.463)	0.9886
Int. p-value								0.9166

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.9 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Diarrhoea (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	126	9.52 (20.158)	-0.09 (1.117)	60	11.11 (23.504)	1.46 (1.712)	-1.55 (-5.584, 2.490)	0.4505
Hedges' g SMD							-0.12 (-0.428, 0.187)	0.4424
non-tBRCAm	91	9.16 (17.260)	2.28 (1.563)	59	15.25 (26.495)	0.79 (2.094)	1.49 (-3.707, 6.690)	0.5706
Hedges' g SMD							0.10 (-0.231, 0.424)	0.5640
Int. p-value								0.3367
Age group								
<65 years	160	7.92 (16.503)	-0.22 (1.012)	90	15.56 (26.061)	0.70 (1.444)	-0.93 (-4.425, 2.568)	0.6014
Hedges' g SMD							-0.07 (-0.329, 0.188)	0.5928
>=65 years	57	13.45 (24.283)	3.58 (2.026)	29	5.75 (20.057)	3.32 (3.162)	0.26 (-7.319, 7.836)	0.9457
Hedges' g SMD							0.02 (-0.431, 0.463)	0.9437
Int. p-value								0.6227
FIGO Stage (Disease state)								
III	155	10.32 (19.580)	2.06 (1.121)	82	8.94 (19.632)	1.44 (1.629)	0.62 (-3.285, 4.521)	0.7552
Hedges' g SMD							0.04 (-0.224, 0.311)	0.7514
IV	62	6.99 (17.217)	-1.57 (1.659)	37	22.52 (32.446)	2.50 (2.424)	-4.06 (-10.084, 1.955)	0.1829
Hedges' g SMD							-0.29 (-0.703, 0.115)	0.1589
Int. p-value								0.1430
Region								
Europe	208	9.46 (19.142)	0.90 (0.954)	113	13.27 (25.409)	1.41 (1.397)	-0.50 (-3.839, 2.834)	0.7671
Hedges' g SMD							-0.04 (-0.264, 0.194)	0.7619
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.9 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Diarrhoea (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	161	9.32 (19.441)	0.75 (1.099)	91	13.19 (25.278)	1.84 (1.520)	-1.10 (-4.802, 2.611)	0.5607
Hedges' g SMD							-0.08 (-0.334, 0.180)	0.5563
(1) Restricted activity	53	10.06 (18.004)	2.71 (1.901)	28	13.10 (24.578)	0.36 (3.181)	2.36 (-5.046, 9.760)	0.5270
Hedges' g SMD							0.16 (-0.302, 0.615)	0.5039
Int. p-value								0.2251
Baseline CA-125 value								
<=ULN	192	9.72 (19.545)	0.82 (0.977)	106	11.95 (22.626)	1.41 (1.410)	-0.59 (-3.972, 2.788)	0.7303
Hedges' g SMD							-0.04 (-0.280, 0.195)	0.7253
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	217	9.37 (18.956)	1.00 (0.927)	119	13.17 (25.012)	1.50 (1.341)	-0.50 (-3.715, 2.714)	0.7593
Hedges' g SMD							-0.04 (-0.259, 0.188)	0.7546
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	140	8.33 (17.486)	1.64 (1.160)	72	9.72 (19.730)	3.03 (1.702)	-1.39 (-5.456, 2.675)	0.5006
Hedges' g SMD							-0.10 (-0.384, 0.185)	0.4944
Residue	70	12.38 (22.105)	-1.30 (1.484)	39	20.51 (32.994)	-3.22 (2.168)	1.92 (-3.347, 7.177)	0.4703
Hedges' g SMD							0.15 (-0.244, 0.540)	0.4587
Int. p-value								0.3065

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis.
Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.9 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Diarrhoea (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	127	9.45 (19.198)	0.63 (1.124)	70	15.71 (26.449)	0.31 (1.586)	0.31 (-3.540, 4.169)	0.8721
Hedges' g SMD							0.02 (-0.267, 0.316)	0.8702
Interval	83	10.04 (19.293)	1.10 (1.549)	41	9.76 (23.856)	1.97 (2.435)	-0.88 (-6.608, 4.854)	0.7620
Hedges' g SMD							-0.06 (-0.434, 0.315)	0.7547
Int. p-value								0.8974
Myriad tumour BRCA mutation status								
tBRCAm	135	9.63 (20.307)	-0.82 (1.100)	68	13.73 (27.157)	2.06 (1.648)	-2.88 (-6.804, 1.037)	0.1484
Hedges' g SMD							-0.22 (-0.512, 0.072)	0.1400
Non-tBRCAm	82	8.94 (16.604)	3.84 (1.631)	51	12.42 (22.071)	0.29 (2.238)	3.55 (-1.956, 9.056)	0.2034
Hedges' g SMD							0.23 (-0.119, 0.582)	0.1955
Int. p-value								0.0281*
Status somatic BRCA mutations								
sBRCAm	17	9.80 (22.866)	-4.92 (2.953)	6	22.22 (34.427)	-1.76 (5.106)	-3.16 (-15.563, 9.242)	0.6008
Hedges' g SMD							-0.25 (-1.183, 0.685)	0.6019
gBRCAm	56	9.52 (22.665)	2.60 (1.791)	28	7.14 (16.623)	1.14 (2.782)	1.46 (-5.141, 8.054)	0.6614
Hedges' g SMD							0.10 (-0.350, 0.558)	0.6529
Non-BRCAm	36	9.26 (15.142)	5.80 (2.491)	22	9.09 (23.417)	3.73 (3.655)	2.07 (-6.896, 11.042)	0.6430
Hedges' g SMD							0.13 (-0.402, 0.660)	0.6328
Int. p-value								0.6544

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[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.10 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Dyspnoea (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	80	26.67 (28.758)	-2.40 (1.899)	43	20.16 (24.277)	-4.28 (2.716)	1.88 (-4.703, 8.454)	0.5735
Hedges' g SMD							0.11 (-0.263, 0.479)	0.5686
NED/CR [IDS]	61	24.59 (25.749)	-3.49 (2.051)	34	28.43 (32.960)	-6.98 (2.928)	3.49 (-3.632, 10.612)	0.3327
Hedges' g SMD							0.21 (-0.210, 0.632)	0.3253
NED/CR [Chemo]	36	24.07 (27.152)	-1.62 (2.962)	20	28.33 (24.839)	-10.32 (4.300)	8.70 (-1.798, 19.191)	0.1023
Hedges' g SMD							0.47 (-0.085, 1.023)	0.0973
PR	39	18.80 (26.263)	3.87 (3.490)	23	14.49 (19.659)	9.97 (4.893)	-6.10 (-18.223, 6.027)	0.3167
Hedges' g SMD							-0.27 (-0.786, 0.249)	0.3092
Int. p-value								0.2560
Screening laboratory tBRCA status (IVRS)								
tBRCAm	129	27.65 (28.603)	-3.26 (1.584)	59	16.95 (24.269)	-3.19 (2.473)	-0.07 (-5.901, 5.762)	0.9813
Hedges' g SMD							0.00 (-0.312, 0.304)	0.9809
non-tBRCAm	87	19.16 (24.183)	1.10 (1.837)	61	28.42 (27.780)	-4.12 (2.371)	5.22 (-0.770, 11.209)	0.0871
Hedges' g SMD							0.29 (-0.036, 0.622)	0.0809
Int. p-value								0.2079
First line treatment outcome (eCRF)								
NED [PDS]	78	27.78 (30.111)	-2.12 (1.945)	42	20.63 (24.364)	-4.22 (2.733)	2.10 (-4.565, 8.765)	0.5338
Hedges' g SMD							0.12 (-0.255, 0.496)	0.5304
NED/CR [IDS]	59	21.47 (24.575)	-2.93 (2.089)	29	29.89 (33.741)	-5.95 (3.246)	3.02 (-4.716, 10.759)	0.4394
Hedges' g SMD							0.18 (-0.264, 0.627)	0.4251
NED/CR [Chemo]	33	23.23 (25.665)	-1.06 (3.097)	17	27.45 (26.965)	-8.85 (4.851)	7.79 (-3.820, 19.397)	0.1834
Hedges' g SMD							0.41 (-0.178, 1.004)	0.1708
PR	43	20.93 (25.222)	2.20 (3.096)	31	17.20 (20.854)	2.55 (3.846)	-0.35 (-10.236, 9.540)	0.9442
Hedges' g SMD							-0.02 (-0.478, 0.445)	0.9439
Int. p-value								0.7092

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Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.10 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Dyspnoea (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	126	28.04 (28.725)	-3.74 (1.605)	60	16.67 (24.162)	-3.03 (2.460)	-0.71 (-6.548, 5.129)	0.8109
Hedges' g SMD							-0.04 (-0.346, 0.269)	0.8063
non-tBRCAm	90	18.89 (23.990)	1.58 (1.803)	60	28.89 (27.765)	-4.17 (2.389)	5.75 (-0.229, 11.732)	0.0593
Hedges' g SMD							0.32 (-0.005, 0.653)	0.0536
Int. p-value								0.1256
Age group								
<65 years	159	24.32 (27.221)	-0.59 (1.383)	90	23.70 (26.082)	-3.74 (1.946)	3.15 (-1.549, 7.856)	0.1877
Hedges' g SMD							0.18 (-0.083, 0.436)	0.1817
>=65 years	57	23.98 (27.280)	-3.47 (2.320)	30	20.00 (28.500)	-2.98 (3.380)	-0.49 (-8.653, 7.670)	0.9049
Hedges' g SMD							-0.03 (-0.469, 0.415)	0.9037
Int. p-value								0.4536
FIGO Stage (Disease state)								
III	154	25.97 (27.810)	-1.11 (1.398)	83	24.50 (27.588)	-4.31 (1.989)	3.20 (-1.589, 7.995)	0.1891
Hedges' g SMD							0.18 (-0.086, 0.449)	0.1843
IV	62	19.89 (25.220)	-2.17 (2.318)	37	18.92 (24.268)	-0.37 (3.492)	-1.80 (-10.116, 6.526)	0.6695
Hedges' g SMD							-0.09 (-0.499, 0.316)	0.6589
Int. p-value								0.3058
Region								
Europe	207	24.80 (27.424)	-1.72 (1.237)	114	23.68 (26.874)	-3.60 (1.778)	1.89 (-2.377, 6.149)	0.3848
Hedges' g SMD							0.10 (-0.126, 0.332)	0.3766
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.10 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Dyspnoea (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	159	21.17 (23.844)	0.01 (1.317)	92	21.74 (25.407)	-1.48 (1.800)	1.49 (-2.910, 5.880)	0.5062
Hedges' g SMD							0.09 (-0.169, 0.345)	0.5026
(1) Restricted activity	53	33.33 (33.968)	-6.20 (2.834)	28	26.19 (30.574)	-8.82 (4.429)	2.62 (-7.851, 13.091)	0.6200
Hedges' g SMD							0.12 (-0.338, 0.578)	0.6079
Int. p-value								0.4166
Baseline CA-125 value								
<=ULN	193	23.32 (27.064)	-1.74 (1.233)	107	23.99 (27.008)	-3.21 (1.752)	1.47 (-2.751, 5.681)	0.4945
Hedges' g SMD							0.08 (-0.153, 0.320)	0.4882
>ULN	23	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	216	24.23 (27.174)	-1.48 (1.194)	120	22.78 (26.633)	-3.40 (1.697)	1.92 (-2.167, 5.997)	0.3567
Hedges' g SMD							0.11 (-0.117, 0.330)	0.3495
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	140	25.48 (28.163)	-2.36 (1.408)	72	24.07 (28.648)	-4.84 (2.053)	2.48 (-2.432, 7.384)	0.3211
Hedges' g SMD							0.15 (-0.139, 0.430)	0.3154
Residue	69	21.74 (24.136)	0.03 (2.259)	40	25.00 (23.570)	-2.58 (3.200)	2.61 (-5.165, 10.378)	0.5073
Hedges' g SMD							0.13 (-0.256, 0.524)	0.5005
Int. p-value								0.7691

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.10 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Dyspnoea (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	127	24.41 (28.312)	-0.93 (1.542)	71	22.07 (23.867)	-3.40 (2.143)	2.48 (-2.734, 7.688)	0.3496
Hedges' g SMD							0.14 (-0.151, 0.431)	0.3453
Interval	82	23.98 (24.720)	-2.91 (1.889)	41	28.46 (31.235)	-6.24 (2.911)	3.33 (-3.565, 10.215)	0.3411
Hedges' g SMD							0.19 (-0.188, 0.563)	0.3280
Int. p-value								0.6551
Myriad tumour BRCA mutation status								
tBRCAm	135	26.67 (28.448)	-2.26 (1.552)	68	17.65 (24.751)	-3.32 (2.310)	1.05 (-4.462, 6.564)	0.7074
Hedges' g SMD							0.06 (-0.235, 0.348)	0.7017
Non-tBRCAm	81	20.16 (24.540)	0.13 (1.897)	52	29.49 (27.735)	-4.50 (2.554)	4.63 (-1.719, 10.984)	0.1514
Hedges' g SMD							0.26 (-0.088, 0.611)	0.1427
Int. p-value								0.5037
Status somatic BRCA mutations								
sBRCAm	18	24.07 (25.063)	-1.12 (0.000)	6	27.78 (32.773)	-11.87 (181.80)	10.76 (-396.81,418.319)	0.9567
Hedges' g SMD							0.05 (-0.875, 0.973)	0.9174
gBRCAm	56	31.55 (28.723)	-2.39 (2.560)	28	17.86 (26.422)	1.71 (3.894)	-4.11 (-13.493, 5.282)	0.3866
Hedges' g SMD							-0.21 (-0.662, 0.248)	0.3722
Non-BRCAm	35	17.14 (18.737)	-2.12 (2.569)	22	25.76 (27.084)	-4.43 (3.524)	2.31 (-6.604, 11.222)	0.6049
Hedges' g SMD							0.14 (-0.389, 0.679)	0.5948
Int. p-value								0.2598

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.11 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Fatigue (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	32.44 (22.762)	0.59 (1.677)	43	35.92 (21.254)	-1.87 (2.412)	2.46 (-3.365, 8.277)	0.4052
Hedges' g SMD							0.16 (-0.211, 0.529)	0.4000
NED/CR [IDS]	61	32.88 (22.551)	1.46 (2.009)	34	33.82 (23.064)	-4.34 (2.866)	5.80 (-1.166, 12.759)	0.1015
Hedges' g SMD							0.36 (-0.065, 0.781)	0.0969
NED/CR [Chemo]	36	36.73 (26.537)	-1.89 (2.377)	20	32.22 (21.898)	-3.25 (3.526)	1.36 (-7.179, 9.896)	0.7506
Hedges' g SMD							0.09 (-0.456, 0.637)	0.7459
PR	40	29.72 (20.346)	1.08 (2.278)	22	34.85 (25.898)	6.82 (3.237)	-5.74 (-13.678, 2.204)	0.1533
Hedges' g SMD							-0.39 (-0.911, 0.139)	0.1497
Int. p-value								0.1486
Screening laboratory tBRCA status (IVRS)								
tBRCAm	130	34.83 (23.578)	-0.05 (1.370)	58	31.42 (22.526)	1.39 (2.155)	-1.44 (-6.489, 3.600)	0.5727
Hedges' g SMD							-0.09 (-0.400, 0.219)	0.5660
non-tBRCAm	88	29.73 (21.608)	1.09 (1.489)	61	37.43 (22.335)	-4.07 (1.891)	5.17 (0.379, 9.952)	0.0346*
Hedges' g SMD							0.36 (0.030, 0.689)	0.0324*
Int. p-value								0.1028
First line treatment outcome (eCRF)								
NED [PDS]	79	34.11 (24.520)	0.55 (1.691)	42	34.13 (20.443)	-1.57 (2.396)	2.12 (-3.686, 7.928)	0.4709
Hedges' g SMD							0.14 (-0.236, 0.513)	0.4684
NED/CR [IDS]	59	30.41 (20.435)	1.87 (2.083)	29	34.29 (24.581)	-3.69 (3.220)	5.56 (-2.092, 13.208)	0.1521
Hedges' g SMD							0.33 (-0.112, 0.782)	0.1423
NED/CR [Chemo]	33	34.34 (25.210)	-0.53 (2.424)	17	31.37 (21.601)	-3.85 (3.973)	3.32 (-6.028, 12.669)	0.4777
Hedges' g SMD							0.22 (-0.366, 0.808)	0.4605
PR	44	32.32 (21.939)	0.27 (2.277)	30	35.93 (24.314)	2.96 (2.892)	-2.69 (-10.037, 4.665)	0.4685
Hedges' g SMD							-0.17 (-0.637, 0.292)	0.4670
Int. p-value								0.4257

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.11 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Fatigue (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	127	35.21 (23.707)	-0.14 (1.395)	59	31.26 (22.363)	1.14 (2.149)	-1.28 (-6.346, 3.781)	0.6179
Hedges' g SMD							-0.08 (-0.389, 0.229)	0.6119
non-tBRCAm	91	29.37 (21.361)	1.18 (1.448)	60	37.69 (22.435)	-4.07 (1.895)	5.24 (0.494, 9.991)	0.0307*
Hedges' g SMD							0.37 (0.040, 0.697)	0.0281*
Int. p-value								0.1113
Age group								
<65 years	161	34.51 (23.492)	0.36 (1.203)	90	34.44 (23.083)	-1.32 (1.697)	1.68 (-2.421, 5.776)	0.4209
Hedges' g SMD							0.11 (-0.151, 0.366)	0.4147
>=65 years	57	27.88 (20.506)	1.28 (1.916)	29	34.67 (21.137)	-1.22 (2.851)	2.50 (-4.352, 9.352)	0.4699
Hedges' g SMD							0.17 (-0.280, 0.616)	0.4628
Int. p-value								0.5973
FIGO Stage (Disease state)								
III	155	34.70 (24.144)	1.04 (1.239)	82	34.21 (23.432)	-2.53 (1.773)	3.57 (-0.692, 7.831)	0.1002
Hedges' g SMD							0.23 (-0.041, 0.496)	0.0967
IV	63	28.04 (18.811)	-0.12 (1.854)	37	35.14 (20.707)	-0.70 (2.822)	0.58 (-6.155, 7.310)	0.8651
Hedges' g SMD							0.04 (-0.369, 0.443)	0.8598
Int. p-value								0.1870
Region								
Europe	209	32.80 (23.241)	0.88 (1.053)	113	34.76 (22.686)	-1.13 (1.520)	2.01 (-1.631, 5.645)	0.2786
Hedges' g SMD							0.13 (-0.100, 0.358)	0.2707
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.11 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Fatigue (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	161	29.81 (20.541)	2.95 (1.137)	92	32.49 (22.313)	0.73 (1.566)	2.22 (-1.592, 6.038)	0.2522
Hedges' g SMD							0.15 (-0.105, 0.408)	0.2475
(1) Restricted activity	53	41.82 (26.967)	-8.17 (2.307)	27	41.36 (22.347)	-7.91 (3.586)	-0.26 (-8.749, 8.237)	0.9522
Hedges' g SMD							-0.01 (-0.478, 0.449)	0.9509
Int. p-value								0.4966
Baseline CA-125 value								
<=ULN	194	33.05 (23.302)	0.42 (1.077)	106	34.64 (22.150)	-1.35 (1.539)	1.78 (-1.923, 5.473)	0.3455
Hedges' g SMD							0.12 (-0.121, 0.353)	0.3385
>ULN	24	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	218	32.77 (22.890)	0.59 (1.022)	119	34.50 (22.536)	-1.36 (1.459)	1.95 (-1.554, 5.457)	0.2743
Hedges' g SMD							0.13 (-0.097, 0.350)	0.2675
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	141	32.55 (22.767)	0.87 (1.287)	72	34.65 (22.232)	-2.62 (1.885)	3.49 (-1.017, 7.988)	0.1285
Hedges' g SMD							0.22 (-0.061, 0.508)	0.1236
Residue	70	33.97 (23.694)	-0.25 (1.711)	40	34.03 (24.531)	0.06 (2.431)	-0.32 (-6.216, 5.579)	0.9148
Hedges' g SMD							-0.02 (-0.410, 0.367)	0.9135
Int. p-value								0.7677

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.11 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Fatigue (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	129	33.20 (24.121)	-0.13 (1.285)	71	34.35 (22.209)	-1.08 (1.803)	0.95 (-3.417, 5.318)	0.6682
Hedges' g SMD							0.06 (-0.226, 0.354)	0.6653
Interval	82	32.72 (21.348)	1.44 (1.750)	41	34.55 (24.517)	-3.66 (2.679)	5.11 (-1.236, 11.447)	0.1135
Hedges' g SMD							0.31 (-0.066, 0.688)	0.1054
Int. p-value								0.1226
Myriad tumour BRCA mutation status								
tBRCAm	136	34.84 (23.419)	-0.32 (1.359)	67	32.84 (23.165)	-0.90 (2.034)	0.58 (-4.247, 5.405)	0.8133
Hedges' g SMD							0.04 (-0.257, 0.328)	0.8106
Non-tBRCAm	82	29.34 (21.689)	1.71 (1.501)	52	36.65 (21.734)	-2.07 (1.999)	3.78 (-1.196, 8.754)	0.1352
Hedges' g SMD							0.27 (-0.079, 0.619)	0.1294
Int. p-value								0.4241
Status somatic BRCA mutations								
sBRCAm	18	33.95 (22.698)	-3.20 (3.938)	6	33.33 (32.961)	-7.14 (7.080)	3.95 (-12.932, 20.827)	0.6313
Hedges' g SMD							0.23 (-0.700, 1.153)	0.6324
gBRCAm	57	38.69 (22.809)	3.29 (2.265)	28	30.16 (21.566)	0.99 (3.477)	2.31 (-6.020, 10.633)	0.5831
Hedges' g SMD							0.13 (-0.322, 0.583)	0.5726
Non-BRCAm	35	28.25 (19.866)	1.58 (2.236)	22	32.07 (18.139)	0.54 (3.029)	1.04 (-6.550, 8.623)	0.7847
Hedges' g SMD							0.08 (-0.458, 0.609)	0.7826
Int. p-value								0.9312

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.12 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Financial difficulties (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	17.70 (28.425)	-3.35 (1.824)	43	24.81 (34.190)	-1.19 (2.624)	-2.16 (-8.499, 4.176)	0.5009
Hedges' g SMD							-0.13 (-0.499, 0.241)	0.4957
NED/CR [IDS]	60	17.78 (30.971)	-1.39 (2.365)	32	15.63 (29.310)	-10.72 (3.456)	9.33 (1.015, 17.649)	0.0283*
Hedges' g SMD							0.49 (0.058, 0.929)	0.0263*
NED/CR [Chemo]	36	19.44 (32.244)	1.01 (2.778)	20	18.33 (27.519)	-0.11 (3.823)	1.12 (-8.382, 10.624)	0.8133
Hedges' g SMD							0.07 (-0.481, 0.612)	0.8138
PR	41	NC	NC	22	NC	NC	NC	NC
Int. p-value								0.0240*
Screening laboratory tBRCA status (IVRS)								
tBRCAm	128	21.09 (29.540)	-3.03 (1.659)	59	24.29 (31.459)	-3.91 (2.565)	0.87 (-5.157, 6.905)	0.7752
Hedges' g SMD							0.05 (-0.263, 0.354)	0.7717
non-tBRCAm	90	14.81 (30.440)	-0.87 (1.763)	58	13.22 (27.173)	0.03 (2.310)	-0.89 (-6.639, 4.856)	0.7595
Hedges' g SMD							-0.05 (-0.382, 0.278)	0.7577
Int. p-value								0.4721
First line treatment outcome (eCRF)								
NED [PDS]	79	17.72 (28.662)	-2.55 (1.943)	42	23.81 (33.966)	-1.15 (2.740)	-1.40 (-8.060, 5.262)	0.6781
Hedges' g SMD							-0.08 (-0.454, 0.295)	0.6765
NED/CR [IDS]	59	18.64 (31.117)	0.24 (2.351)	27	13.58 (29.612)	-11.74 (3.713)	11.98 (3.249, 20.720)	0.0077*
Hedges' g SMD							0.64 (0.178, 1.110)	0.0068*
NED/CR [Chemo]	33	NC	NC	17	NC	NC	NC	NC
PR	44	NC	NC	30	NC	NC	NC	NC
Int. p-value								0.0136*
Screening laboratory tBRCA status (eCRF)								

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.12 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Financial difficulties (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
tBRCAm	125	21.33 (29.754)	-2.81 (1.679)	60	23.89 (31.349)	-4.08 (2.543)	1.27 (-4.744, 7.287)	0.6771
Hedges' g SMD							0.07 (-0.242, 0.374)	0.6726
non-tBRCAm	93	14.70 (30.081)	-1.19 (1.735)	57	13.45 (27.357)	0.16 (2.331)	-1.36 (-7.104, 4.391)	0.6413
Hedges' g SMD							-0.08 (-0.409, 0.251)	0.6383
Int. p-value								0.3512
Age group								
<65 years	160	23.13 (31.941)	-1.89 (1.489)	88	22.35 (32.251)	-4.43 (2.118)	2.54 (-2.562, 7.636)	0.3280
Hedges' g SMD							0.13 (-0.129, 0.392)	0.3215
>=65 years	58	5.75 (18.875)	-2.20 (1.711)	29	8.05 (17.032)	5.02 (2.498)	-7.22 (-13.274, -1.158)	0.0203*
Hedges' g SMD							-0.54 (-0.996, -0.090)	0.0189*
Int. p-value								0.0430*
FIGO Stage (Disease state)								
III	155	18.28 (29.716)	-1.47 (1.456)	81	19.34 (31.120)	-3.17 (2.100)	1.70 (-3.338, 6.731)	0.5074
Hedges' g SMD							0.09 (-0.177, 0.361)	0.5027
IV	63	19.05 (30.944)	-2.95 (2.393)	36	17.59 (27.005)	1.31 (3.541)	-4.26 (-12.758, 4.242)	0.3217
Hedges' g SMD							-0.21 (-0.624, 0.198)	0.3093
Int. p-value								0.6252
Region								
Europe	209	18.66 (30.268)	-2.19 (1.242)	111	18.62 (30.045)	-1.83 (1.804)	-0.36 (-4.665, 3.953)	0.8709
Hedges' g SMD							-0.02 (-0.250, 0.211)	0.8689
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC
ECOG performance status at Baseline								

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.12 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Financial difficulties (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
(0) Normal activity	161	18.63 (30.010)	-2.38 (1.414)	89	17.60 (28.020)	-2.47 (1.964)	0.09 (-4.674, 4.861)	0.9693
Hedges' g SMD							0.01 (-0.254, 0.264)	0.9691
(1) Restricted activity	54	18.52 (30.828)	-0.44 (2.303)	28	22.62 (35.199)	-4.97 (3.542)	4.53 (-3.887, 12.942)	0.2875
Hedges' g SMD							0.26 (-0.203, 0.714)	0.2745
Int. p-value								0.6449
Baseline CA-125 value								
<=ULN	193	19.00 (30.172)	-2.52 (1.290)	104	18.91 (30.375)	-2.76 (1.848)	0.24 (-4.197, 4.675)	0.9156
Hedges' g SMD							0.01 (-0.225, 0.251)	0.9145
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	218	18.50 (30.006)	-2.08 (1.206)	117	18.80 (29.809)	-2.47 (1.730)	0.40 (-3.752, 4.544)	0.8510
Hedges' g SMD							0.02 (-0.203, 0.246)	0.8490
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	141	17.73 (29.427)	-1.40 (1.497)	70	20.48 (32.745)	-5.09 (2.210)	3.69 (-1.571, 8.955)	0.1682
Hedges' g SMD							0.20 (-0.083, 0.491)	0.1634
Residue	70	20.48 (30.715)	-3.62 (2.109)	39	15.38 (25.185)	1.49 (3.040)	-5.11 (-12.454, 2.240)	0.1709
Hedges' g SMD							-0.28 (-0.673, 0.114)	0.1635
Int. p-value								0.2071
Timing of cytoreductive surgery								
Upfront	130	18.72 (29.931)	-4.06 (1.495)	70	21.90 (31.539)	0.22 (2.104)	-4.28 (-9.372, 0.815)	0.0991

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.12 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Financial difficulties (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Hedges' g SMD							-0.25 (-0.539, 0.044)	0.0965
Interval	81	18.52 (29.814)	0.56 (2.049)	39	12.82 (27.161)	-9.23 (3.205)	9.79 (2.264, 17.316)	0.0112*
Hedges' g SMD							0.51 (0.125, 0.901)	0.0095*
Int. p-value								0.0013*
Myriad tumour BRCA mutation status								
tBRCAm	134	21.14 (29.629)	-2.84 (1.641)	68	21.57 (29.233)	-3.47 (2.416)	0.63 (-5.134, 6.384)	0.8307
Hedges' g SMD							0.03 (-0.260, 0.324)	0.8285
Non-tBRCAm	84	14.29 (30.298)	-1.15 (1.707)	49	14.97 (30.476)	-0.88 (2.349)	-0.28 (-6.032, 5.481)	0.9247
Hedges' g SMD							-0.02 (-0.369, 0.335)	0.9239
Int. p-value								0.6095
Status somatic BRCA mutations								
sBRCAm	18	NC	NC	6	NC	NC	NC	NC
gBRCAm	55	24.85 (33.468)	-2.05 (2.478)	28	23.81 (29.893)	-10.83 (3.751)	8.78 (-0.173, 17.738)	0.0545
Hedges' g SMD							0.46 (0.000, 0.922)	0.0499*
Non-BRCAm	37	NC	NC	21	NC	NC	NC	NC
Int. p-value								NC

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.13 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Nausea and vomiting (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	4.53 (10.210)	7.18 (1.159)	43	3.10 (6.562)	1.20 (1.667)	5.97 (1.947, 9.995)	0.0040*
Hedges' g SMD							0.56 (0.183, 0.936)	0.0036*
NED/CR [IDS]	61	6.01 (16.951)	6.64 (1.610)	34	0.98 (3.981)	0.02 (2.285)	6.62 (1.029, 12.208)	0.0209*
Hedges' g SMD							0.51 (0.085, 0.937)	0.0187*
NED/CR [Chemo]	36	3.24 (8.746)	3.44 (1.030)	20	4.17 (13.107)	-0.55 (1.575)	3.99 (0.189, 7.797)	0.0401*
Hedges' g SMD							0.61 (0.047, 1.165)	0.0336*
PR	41	NC	NC	23	NC	NC	NC	NC
Int. p-value								0.6571
Screening laboratory tBRCA status (IVRS)								
tBRCAm	130	5.00 (13.553)	6.01 (1.026)	59	4.24 (10.538)	0.81 (1.592)	5.20 (1.464, 8.940)	0.0066*
Hedges' g SMD							0.44 (0.126, 0.748)	0.0059*
non-tBRCAm	89	3.56 (8.873)	6.47 (0.910)	61	2.46 (7.351)	0.50 (1.172)	5.97 (3.033, 8.907)	<0.0001*
Hedges' g SMD							0.67 (0.339, 1.008)	<0.0001*
Int. p-value								0.9133
First line treatment outcome (eCRF)								
NED [PDS]	79	4.43 (10.235)	7.06 (1.184)	42	3.17 (6.624)	1.20 (1.686)	5.86 (1.775, 9.944)	0.0053*
Hedges' g SMD							0.55 (0.165, 0.927)	0.0049*
NED/CR [IDS]	60	3.06 (9.939)	7.01 (1.098)	29	1.15 (4.298)	1.27 (1.700)	5.74 (1.696, 9.780)	0.0060*
Hedges' g SMD							0.65 (0.198, 1.106)	0.0049*
NED/CR [Chemo]	33	3.54 (9.088)	3.29 (1.083)	17	5.88 (14.363)	-2.66 (1.889)	5.95 (1.536, 10.363)	0.0095*
Hedges' g SMD							0.86 (0.252, 1.474)	0.0056*
PR	44	NC	NC	31	NC	NC	NC	NC
Int. p-value								0.9174

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.13 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Nausea and vomiting (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	127	5.12 (13.691)	6.00 (1.042)	60	4.17 (10.462)	0.69 (1.585)	5.31 (1.562, 9.053)	0.0057*
Hedges' g SMD							0.44 (0.133, 0.754)	0.0051*
non-tBRCAm	92	3.44 (8.749)	6.50 (0.892)	60	2.50 (7.406)	0.61 (1.178)	5.89 (2.963, 8.812)	0.0001*
Hedges' g SMD							0.67 (0.333, 1.001)	<0.0001*
Int. p-value								0.9597
Age group								
<65 years	161	4.45 (12.466)	6.76 (0.880)	90	3.52 (9.512)	0.56 (1.233)	6.20 (3.213, 9.184)	<0.0001*
Hedges' g SMD							0.54 (0.282, 0.806)	<0.0001*
>=65 years	58	4.31 (10.145)	4.87 (1.111)	30	2.78 (7.686)	2.12 (1.718)	2.75 (-1.344, 6.845)	0.1847
Hedges' g SMD							0.31 (-0.133, 0.753)	0.1704
Int. p-value								0.4620
FIGO Stage (Disease state)								
III	156	4.17 (10.129)	6.75 (0.829)	83	3.41 (8.926)	0.48 (1.187)	6.27 (3.418, 9.128)	<0.0001*
Hedges' g SMD							0.59 (0.323, 0.866)	<0.0001*
IV	63	5.03 (15.449)	4.82 (1.309)	37	3.15 (9.492)	1.24 (1.940)	3.58 (-1.076, 8.238)	0.1302
Hedges' g SMD							0.33 (-0.083, 0.734)	0.1188
Int. p-value								0.2738
Region								
Europe	210	4.60 (12.090)	6.33 (0.736)	114	3.36 (9.190)	0.62 (1.063)	5.71 (3.161, 8.252)	<0.0001*
Hedges' g SMD							0.52 (0.290, 0.754)	<0.0001*
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.13 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Nausea and vomiting (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	162	2.67 (8.079)	7.40 (0.761)	92	3.08 (9.222)	2.03 (1.058)	5.37 (2.802, 7.942)	<0.0001*
Hedges' g SMD							0.54 (0.283, 0.804)	<0.0001*
(1) Restricted activity	53	10.06 (18.588)	2.80 (1.739)	28	4.17 (8.636)	-3.97 (2.625)	6.77 (0.496, 13.047)	0.0348*
Hedges' g SMD							0.51 (0.047, 0.977)	0.0308*
Int. p-value								0.5611
Baseline CA-125 value								
<=ULN	194	4.47 (12.355)	5.95 (0.727)	107	3.74 (9.524)	0.90 (1.038)	5.06 (2.562, 7.552)	<0.0001*
Hedges' g SMD							0.49 (0.248, 0.727)	<0.0001*
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	219	4.41 (11.873)	6.22 (0.709)	120	3.33 (9.065)	0.79 (1.013)	5.43 (2.995, 7.863)	<0.0001*
Hedges' g SMD							0.51 (0.280, 0.732)	<0.0001*
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	3.99 (10.108)	6.98 (0.822)	72	2.31 (5.804)	1.02 (1.210)	5.96 (3.071, 8.850)	<0.0001*
Hedges' g SMD							0.60 (0.308, 0.886)	<0.0001*
Residue	70	4.76 (14.783)	4.72 (1.414)	40	4.17 (12.375)	0.60 (1.960)	4.12 (-0.672, 8.908)	0.0913
Hedges' g SMD							0.34 (-0.051, 0.731)	0.0887
Int. p-value								0.5296

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.13 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Nausea and vomiting (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	129	3.88 (9.435)	6.26 (0.850)	71	2.82 (7.961)	1.35 (1.206)	4.91 (1.995, 7.824)	0.0011*
Hedges' g SMD							0.50 (0.203, 0.791)	0.0009*
Interval	83	4.82 (14.846)	6.45 (1.360)	41	3.25 (10.014)	0.23 (2.052)	6.22 (1.340, 11.097)	0.0129*
Hedges' g SMD							0.49 (0.110, 0.868)	0.0115*
Int. p-value								0.4423
Myriad tumour BRCA mutation status								
tBRCAm	136	4.90 (13.321)	6.32 (0.994)	68	3.68 (9.911)	0.86 (1.476)	5.46 (1.948, 8.978)	0.0025*
Hedges' g SMD							0.46 (0.167, 0.756)	0.0021*
Non-tBRCAm	83	3.61 (9.035)	6.06 (0.937)	52	2.88 (7.894)	0.42 (1.260)	5.64 (2.532, 8.749)	0.0005*
Hedges' g SMD							0.64 (0.286, 0.996)	0.0004*
Int. p-value								0.9362
Status somatic BRCA mutations								
sBRCAm	18	NC	NC	6	NC	NC	NC	NC
gBRCAm	57	7.02 (17.522)	6.37 (1.693)	28	4.76 (10.978)	-1.08 (2.536)	7.45 (1.371, 13.522)	0.0169*
Hedges' g SMD							0.57 (0.107, 1.029)	0.0157*
Non-BRCAm	36	1.85 (5.312)	7.35 (1.530)	22	4.55 (10.518)	1.92 (2.102)	5.42 (0.178, 10.671)	0.0430*
Hedges' g SMD							0.57 (0.026, 1.108)	0.0400*
Int. p-value								0.4422

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.14 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Pain (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	82	23.37 (22.810)	0.28 (1.707)	43	30.62 (26.460)	-0.11 (2.470)	0.39 (-5.577, 6.354)	0.8976
Hedges' g SMD							0.02 (-0.344, 0.394)	0.8962
NED/CR [IDS]	61	19.95 (21.042)	8.57 (2.203)	34	16.67 (19.678)	6.27 (3.136)	2.30 (-5.322, 9.923)	0.5500
Hedges' g SMD							0.13 (-0.290, 0.550)	0.5450
NED/CR [Chemo]	37	23.42 (26.194)	3.69 (3.437)	20	23.33 (19.041)	7.94 (5.120)	-4.25 (-16.667, 8.167)	0.4944
Hedges' g SMD							-0.19 (-0.739, 0.351)	0.4857
PR	41	25.20 (24.473)	0.61 (2.569)	23	20.29 (20.693)	9.78 (3.600)	-9.17 (-18.048, -0.302)	0.0429*
Hedges' g SMD							-0.54 (-1.061, -0.022)	0.0412*
Int. p-value								0.5973
Screening laboratory tBRCA status (IVRS)								
tBRCAm	131	25.32 (24.227)	3.69 (1.651)	59	23.45 (25.166)	4.65 (2.576)	-0.96 (-7.003, 5.080)	0.7538
Hedges' g SMD							-0.05 (-0.357, 0.257)	0.7501
non-tBRCAm	90	19.07 (21.135)	3.53 (1.617)	61	23.50 (20.722)	4.36 (2.087)	-0.83 (-6.063, 4.401)	0.7539
Hedges' g SMD							-0.05 (-0.378, 0.273)	0.7513
Int. p-value								0.7251
First line treatment outcome (eCRF)								
NED [PDS]	80	23.54 (23.375)	0.96 (1.759)	42	28.17 (24.827)	1.20 (2.504)	-0.24 (-6.312, 5.832)	0.9378
Hedges' g SMD							-0.01 (-0.388, 0.358)	0.9373
NED/CR [IDS]	60	17.50 (19.750)	8.75 (2.251)	29	17.82 (20.379)	6.35 (3.503)	2.41 (-5.894, 10.704)	0.5658
Hedges' g SMD							0.13 (-0.311, 0.577)	0.5565
NED/CR [Chemo]	34	23.04 (25.955)	2.42 (3.763)	17	23.53 (17.735)	7.70 (5.946)	-5.29 (-19.516, 8.941)	0.4570
Hedges' g SMD							-0.23 (-0.812, 0.356)	0.4438
PR	44	27.27 (24.136)	2.42 (2.774)	31	22.04 (24.865)	8.34 (3.503)	-5.92 (-14.904, 3.059)	0.1925
Hedges' g SMD							-0.31 (-0.773, 0.152)	0.1878
Int. p-value								0.7951

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Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.14 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Pain (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	128	25.91 (24.194)	3.55 (1.684)	60	23.33 (24.967)	4.72 (2.576)	-1.16 (-7.245, 4.916)	0.7060
Hedges' g SMD							-0.06 (-0.367, 0.247)	0.7017
non-tBRCAm	93	18.46 (21.062)	3.77 (1.567)	60	23.61 (20.878)	4.19 (2.078)	-0.42 (-5.581, 4.743)	0.8727
Hedges' g SMD							-0.03 (-0.351, 0.298)	0.8709
Int. p-value								0.8341
Age group								
<65 years	162	23.87 (23.561)	4.04 (1.416)	90	24.63 (23.468)	4.24 (1.999)	-0.20 (-5.029, 4.624)	0.9341
Hedges' g SMD							-0.01 (-0.269, 0.247)	0.9333
>=65 years	59	19.77 (21.988)	2.71 (1.977)	30	20.00 (21.173)	6.28 (2.967)	-3.56 (-10.654, 3.527)	0.3203
Hedges' g SMD							-0.23 (-0.668, 0.214)	0.3123
Int. p-value								0.7317
FIGO Stage (Disease state)								
III	158	24.05 (23.306)	3.11 (1.348)	83	23.49 (23.431)	3.55 (1.940)	-0.44 (-5.095, 4.217)	0.8527
Hedges' g SMD							-0.03 (-0.291, 0.240)	0.8510
IV	63	19.58 (22.707)	5.03 (2.329)	37	23.42 (22.034)	9.02 (3.365)	-3.99 (-12.127, 4.151)	0.3329
Hedges' g SMD							-0.21 (-0.613, 0.201)	0.3219
Int. p-value								0.8785
Region								
Europe	212	22.88 (23.333)	3.76 (1.195)	114	23.83 (23.252)	5.47 (1.732)	-1.72 (-5.857, 2.424)	0.4153
Hedges' g SMD							-0.10 (-0.324, 0.131)	0.4074
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.14 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Pain (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	163	20.86 (22.016)	4.97 (1.296)	92	20.47 (22.114)	5.14 (1.789)	-0.16 (-4.517, 4.190)	0.9411
Hedges' g SMD							-0.01 (-0.265, 0.246)	0.9406
(1) Restricted activity	54	27.47 (25.730)	-1.27 (2.727)	28	33.33 (23.130)	3.72 (4.212)	-4.98 (-14.978, 5.011)	0.3242
Hedges' g SMD							-0.24 (-0.695, 0.221)	0.3103
Int. p-value								0.4342
Baseline CA-125 value								
<=ULN	196	22.45 (23.340)	3.04 (1.206)	107	23.36 (22.297)	5.41 (1.724)	-2.37 (-6.512, 1.768)	0.2604
Hedges' g SMD							-0.14 (-0.373, 0.098)	0.2535
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	221	22.78 (23.173)	3.60 (1.166)	120	23.47 (22.917)	4.70 (1.669)	-1.10 (-5.103, 2.908)	0.5901
Hedges' g SMD							-0.06 (-0.284, 0.160)	0.5847
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	143	21.33 (22.150)	3.89 (1.356)	72	24.07 (23.385)	3.47 (2.000)	0.41 (-4.355, 5.181)	0.8646
Hedges' g SMD							0.02 (-0.258, 0.308)	0.8628
Residue	71	26.76 (25.585)	2.79 (2.406)	40	21.67 (23.020)	6.85 (3.466)	-4.05 (-12.479, 4.370)	0.3418
Hedges' g SMD							-0.19 (-0.581, 0.195)	0.3302
Int. p-value								0.5893

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.14 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Symptom scale: Pain (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	131	24.30 (24.131)	1.33 (1.499)	71	27.46 (24.250)	2.05 (2.113)	-0.72 (-5.834, 4.390)	0.7808
Hedges' g SMD							-0.04 (-0.330, 0.247)	0.7789
Interval	83	21.29 (22.287)	7.28 (1.916)	41	15.85 (19.347)	6.96 (2.929)	0.32 (-6.624, 7.270)	0.9268
Hedges' g SMD							0.02 (-0.356, 0.392)	0.9251
Int. p-value								0.8805
Myriad tumour BRCA mutation status								
tBRCAm	137	24.70 (24.178)	3.68 (1.584)	68	23.28 (24.458)	3.16 (2.363)	0.53 (-5.085, 6.140)	0.8531
Hedges' g SMD							0.03 (-0.263, 0.319)	0.8510
Non-tBRCAm	84	19.64 (21.202)	3.76 (1.716)	52	23.72 (20.964)	6.00 (2.311)	-2.24 (-7.951, 3.464)	0.4381
Hedges' g SMD							-0.14 (-0.485, 0.208)	0.4325
Int. p-value								0.2513
Status somatic BRCA mutations								
sBRCAm	18	24.07 (22.304)	-2.55 (3.514)	6	11.11 (17.213)	1.80 (6.664)	-4.35 (-20.181, 11.482)	0.5749
Hedges' g SMD							-0.28 (-1.203, 0.652)	0.5606
gBRCAm	57	24.56 (23.168)	9.32 (2.326)	28	25.60 (26.637)	-0.29 (3.522)	9.60 (1.206, 17.999)	0.0255*
Hedges' g SMD							0.53 (0.071, 0.991)	0.0235*
Non-BRCAm	37	21.17 (21.748)	3.17 (2.130)	22	18.18 (20.515)	7.24 (3.054)	-4.08 (-11.543, 3.393)	0.2791
Hedges' g SMD							-0.30 (-0.829, 0.232)	0.2704
Int. p-value								0.0130*

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.15 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Insomnia (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	80	29.17 (32.424)	4.94 (2.451)	43	23.26 (26.761)	6.56 (3.497)	-1.61 (-10.089, 6.867)	0.7073
Hedges' g SMD							-0.07 (-0.443, 0.299)	0.7041
NED/CR [IDS]	60	27.78 (28.235)	4.26 (2.715)	34	16.67 (20.515)	4.94 (3.889)	-0.67 (-10.163, 8.816)	0.8880
Hedges' g SMD							-0.03 (-0.452, 0.390)	0.8856
NED/CR [Chemo]	36	30.56 (32.244)	6.85 (3.765)	20	26.67 (29.814)	10.35 (5.677)	-3.50 (-17.213, 10.208)	0.6099
Hedges' g SMD							-0.15 (-0.694, 0.401)	0.6004
PR	41	25.20 (27.669)	3.49 (3.063)	23	26.09 (24.529)	7.03 (4.455)	-3.54 (-14.395, 7.311)	0.5155
Hedges' g SMD							-0.17 (-0.684, 0.339)	0.5081
Int. p-value								0.9411
Screening laboratory tBRCA status (IVRS)								
tBRCAm	128	31.25 (31.233)	3.90 (1.868)	59	22.03 (24.456)	6.61 (2.911)	-2.71 (-9.565, 4.144)	0.4362
Hedges' g SMD							-0.13 (-0.434, 0.183)	0.4260
non-tBRCAm	89	23.97 (28.422)	6.24 (2.247)	61	22.95 (26.205)	5.76 (2.899)	0.48 (-6.773, 7.743)	0.8951
Hedges' g SMD							0.02 (-0.304, 0.348)	0.8941
Int. p-value								0.9013
First line treatment outcome (eCRF)								
NED [PDS]	78	32.05 (34.584)	4.52 (2.524)	42	23.02 (27.038)	7.48 (3.544)	-2.95 (-11.613, 5.712)	0.5010
Hedges' g SMD							-0.13 (-0.506, 0.245)	0.4969
NED/CR [IDS]	59	26.55 (27.529)	3.61 (2.707)	29	16.09 (21.121)	6.17 (4.231)	-2.56 (-12.593, 7.471)	0.6128
Hedges' g SMD							-0.12 (-0.563, 0.327)	0.6023
NED/CR [Chemo]	33	27.27 (30.567)	7.02 (4.030)	17	23.53 (30.652)	9.52 (6.678)	-2.50 (-18.219, 13.216)	0.7497
Hedges' g SMD							-0.10 (-0.685, 0.486)	0.7386
PR	44	25.76 (25.783)	4.85 (2.897)	31	26.88 (23.443)	2.77 (3.818)	2.08 (-7.500, 11.652)	0.6662
Hedges' g SMD							0.10 (-0.358, 0.562)	0.6628
Int. p-value								0.7512

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis.
Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.15 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Insomnia (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	125	32.00 (31.224)	3.72 (1.897)	60	21.67 (24.414)	6.42 (2.901)	-2.70 (-9.577, 4.176)	0.4393
Hedges' g SMD							-0.12 (-0.432, 0.184)	0.4289
non-tBRCAm	92	23.19 (28.275)	6.45 (2.191)	60	23.33 (26.254)	5.67 (2.897)	0.78 (-6.402, 7.966)	0.8299
Hedges' g SMD							0.04 (-0.289, 0.361)	0.8281
Int. p-value								0.9120
Age group								
<65 years	159	29.77 (30.141)	5.75 (1.685)	90	23.70 (25.106)	6.85 (2.387)	-1.10 (-6.872, 4.664)	0.7064
Hedges' g SMD							-0.05 (-0.309, 0.208)	0.7014
>=65 years	58	24.14 (30.457)	2.84 (2.479)	30	18.89 (25.795)	1.54 (3.671)	1.29 (-7.562, 10.149)	0.7717
Hedges' g SMD							0.07 (-0.374, 0.507)	0.7677
Int. p-value								0.4887
FIGO Stage (Disease state)								
III	155	29.03 (30.320)	4.83 (1.741)	83	23.29 (27.906)	3.98 (2.494)	0.85 (-5.155, 6.861)	0.7799
Hedges' g SMD							0.04 (-0.228, 0.305)	0.7767
IV	62	26.34 (30.261)	4.59 (2.463)	37	20.72 (18.175)	9.19 (3.596)	-4.61 (-13.284, 4.072)	0.2944
Hedges' g SMD							-0.22 (-0.633, 0.184)	0.2811
Int. p-value								0.1953
Region								
Europe	208	28.85 (30.581)	5.10 (1.458)	114	22.81 (25.596)	5.84 (2.114)	-0.74 (-5.804, 4.324)	0.7739
Hedges' g SMD							-0.03 (-0.263, 0.194)	0.7691
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

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SMD = standardised mean difference. * p<0.05.

Table 2.5.4.15 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Insomnia (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	160	24.79 (26.763)	6.04 (1.591)	92	19.93 (24.239)	7.82 (2.183)	-1.77 (-7.105, 3.559)	0.5129
Hedges' g SMD							-0.09 (-0.343, 0.170)	0.5084
(1) Restricted activity	53	40.88 (36.772)	0.40 (3.271)	28	30.95 (27.108)	-1.39 (5.097)	1.78 (-10.329, 13.895)	0.7701
Hedges' g SMD							0.07 (-0.387, 0.529)	0.7619
Int. p-value								0.7896
Baseline CA-125 value								
<=ULN	193	28.50 (30.613)	4.88 (1.463)	107	23.36 (25.988)	5.80 (2.095)	-0.92 (-5.962, 4.114)	0.7183
Hedges' g SMD							-0.04 (-0.281, 0.192)	0.7133
>ULN	24	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	217	28.26 (30.258)	4.81 (1.421)	120	22.50 (25.258)	5.74 (2.031)	-0.93 (-5.818, 3.957)	0.7083
Hedges' g SMD							-0.04 (-0.266, 0.180)	0.7031
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	140	29.29 (31.602)	3.96 (1.808)	72	20.37 (24.740)	6.58 (2.644)	-2.62 (-8.960, 3.719)	0.4159
Hedges' g SMD							-0.12 (-0.405, 0.164)	0.4082
Residue	70	25.71 (27.318)	6.34 (2.518)	40	25.00 (26.954)	6.43 (3.646)	-0.09 (-8.886, 8.704)	0.9837
Hedges' g SMD							0.00 (-0.393, 0.384)	0.9833
Int. p-value								0.3963

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.5.4.15 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-C30 Single item symptom scale: Insomnia (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	128	29.69 (32.733)	4.13 (1.876)	71	23.47 (24.813)	8.22 (2.625)	-4.09 (-10.472, 2.292)	0.2077
Hedges' g SMD							-0.19 (-0.480, 0.102)	0.2022
Interval	82	25.61 (25.819)	6.01 (2.310)	41	19.51 (26.849)	2.99 (3.556)	3.02 (-5.394, 11.437)	0.4783
Hedges' g SMD							0.14 (-0.236, 0.515)	0.4667
Int. p-value								0.1306
Myriad tumour BRCA mutation status								
tBRCAm	134	30.35 (30.715)	4.20 (1.807)	68	21.08 (23.679)	5.71 (2.696)	-1.52 (-7.944, 4.910)	0.6421
Hedges' g SMD							-0.07 (-0.363, 0.221)	0.6348
Non-tBRCAm	83	24.90 (29.376)	6.16 (2.347)	52	24.36 (27.309)	5.92 (3.148)	0.23 (-7.547, 8.013)	0.9527
Hedges' g SMD							0.01 (-0.336, 0.357)	0.9522
Int. p-value								0.8349
Status somatic BRCA mutations								
sBRCAm	18	25.93 (33.442)	5.28 (4.239)	6	11.11 (17.213)	18.59 (7.583)	-13.31 (-31.785, 5.163)	0.1467
Hedges' g SMD							-0.71 (-1.659, 0.240)	0.1432
gBRCAm	55	30.91 (29.989)	10.67 (2.874)	28	22.62 (20.394)	4.56 (4.363)	6.10 (-4.329, 16.534)	0.2476
Hedges' g SMD							0.28 (-0.181, 0.733)	0.2369
Non-BRCAm	36	25.00 (26.874)	0.60 (3.336)	22	21.21 (24.224)	3.99 (4.500)	-3.39 (-14.665, 7.889)	0.5483
Hedges' g SMD							-0.16 (-0.695, 0.368)	0.5462
Int. p-value								0.0431*

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.1 PAOLA1: Summary of EORTC QLQ-OV28 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI	Olaparib + bevacizumab (N=255)	Baseline [a]	247	20.61	18.074	0.0	16.67	77.8
		Wk 12 (Day 85)	226	22.44	17.765	0.0	22.22	77.8
		Wk 24 (Day 169)	201	22.29	18.533	0.0	16.67	77.8
		Wk 36 (Day 253)	174	22.12	17.566	0.0	18.33	83.3
		Wk 48 (Day 337)	175	22.05	18.992	0.0	16.67	94.4
		Wk 60 (Day 421)	164	22.80	19.423	0.0	16.67	86.7
		Wk 72 (Day 505)	158	21.30	17.913	0.0	16.67	77.8
		Wk 84 (Day 589)	139	22.07	17.795	0.0	16.67	77.8
		Wk 96 (Day 673)	136	23.95	19.575	0.0	22.22	77.8
		Wk 108 (Day 757)	108	21.12	20.290	0.0	16.67	88.9
		Wk 120 (Day 841)	1	11.11	NC	11.1	11.11	11.1
		Wk 132 (Day 925)	1	11.11	NC	11.1	11.11	11.1
		Wk 144 (Day 1009)	1	11.11	NC	11.1	11.11	11.1
		Wk 156 (Day 1093)	1	11.11	NC	11.1	11.11	11.1
		End of Treatment	129	25.10	20.922	0.0	22.22	94.4
		30 day Follow-up	61	26.94	23.029	0.0	22.22	88.9
	Placebo + bevacizumab (N=132)	Baseline [a]	125	20.04	16.776	0.0	16.67	77.8
		Wk 12 (Day 85)	116	21.75	18.549	0.0	16.67	83.3
		Wk 24 (Day 169)	104	24.05	19.420	0.0	16.67	72.2
		Wk 36 (Day 253)	97	23.03	17.553	0.0	22.22	66.7
		Wk 48 (Day 337)	86	23.71	18.746	0.0	22.22	88.9
		Wk 60 (Day 421)	71	22.86	17.634	0.0	22.22	66.7
		Wk 72 (Day 505)	68	21.26	17.253	0.0	16.67	61.1
		Wk 84 (Day 589)	51	22.05	15.973	0.0	22.22	55.6
		Wk 96 (Day 673)	41	25.20	18.092	0.0	22.22	72.2
		Wk 108 (Day 757)	31	28.32	21.534	0.0	22.22	88.9
		End of Treatment	69	26.80	20.441	0.0	22.22	72.2
		30 day Follow-up	24	31.02	22.338	0.0	25.00	88.9

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
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Table 2.6.1 PAOLA1: Summary of EORTC QLQ-OV28 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

				Result				
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-OV28 Symptom scale/items: Body image	Olaparib + bevacizumab (N=255)	Baseline [a]	245	38.23	31.667	0.0	33.33	100.0
		Wk 12 (Day 85)	224	32.66	30.127	0.0	33.33	100.0
		Wk 24 (Day 169)	198	30.81	26.802	0.0	33.33	100.0
		Wk 36 (Day 253)	175	29.90	29.594	0.0	33.33	100.0
		Wk 48 (Day 337)	174	29.02	26.681	0.0	33.33	100.0
		Wk 60 (Day 421)	162	27.06	26.206	0.0	16.67	100.0
		Wk 72 (Day 505)	156	28.10	27.747	0.0	33.33	100.0
		Wk 84 (Day 589)	136	27.21	27.801	0.0	16.67	100.0
		Wk 96 (Day 673)	134	28.61	28.658	0.0	33.33	100.0
		Wk 108 (Day 757)	108	23.61	26.877	0.0	16.67	100.0
		Wk 120 (Day 841)	1	0.00	NC	0.0	0.00	0.0
		Wk 132 (Day 925)	1	16.67	NC	16.7	16.67	16.7
		Wk 144 (Day 1009)	1	0.00	NC	0.0	0.00	0.0
		Wk 156 (Day 1093)	1	0.00	NC	0.0	0.00	0.0
		End of Treatment	129	27.26	27.238	0.0	33.33	100.0
		30 day Follow-up	61	30.33	26.962	0.0	33.33	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	124	39.52	33.635	0.0	33.33	100.0
		Wk 12 (Day 85)	116	31.90	30.659	0.0	33.33	100.0
		Wk 24 (Day 169)	103	33.66	27.710	0.0	33.33	100.0
		Wk 36 (Day 253)	95	32.98	27.395	0.0	33.33	100.0
		Wk 48 (Day 337)	86	30.81	29.319	0.0	33.33	100.0
		Wk 60 (Day 421)	71	27.70	29.269	0.0	16.67	100.0
		Wk 72 (Day 505)	67	27.61	26.992	0.0	33.33	100.0
		Wk 84 (Day 589)	51	27.45	27.853	0.0	16.67	100.0
		Wk 96 (Day 673)	40	31.67	28.445	0.0	33.33	100.0
		Wk 108 (Day 757)	31	31.72	28.660	0.0	33.33	83.3
		End of Treatment	69	34.06	28.787	0.0	33.33	100.0
		30 day Follow-up	23	31.16	29.432	0.0	33.33	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
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Table 2.6.1 PAOLA1: Summary of EORTC QLQ-OV28 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

				Result				
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects	Olaparib + bevacizumab (N=255)	Baseline [a]	247	25.75	18.713	0.0	26.67	88.9
		Wk 12 (Day 85)	226	25.16	18.157	0.0	20.00	93.3
		Wk 24 (Day 169)	200	24.84	17.435	0.0	20.00	86.7
		Wk 36 (Day 253)	173	23.54	15.963	0.0	20.00	100.0
		Wk 48 (Day 337)	172	22.61	15.850	0.0	20.00	80.0
		Wk 60 (Day 421)	164	21.67	17.780	0.0	20.00	86.7
		Wk 72 (Day 505)	158	21.07	18.845	0.0	13.33	80.0
		Wk 84 (Day 589)	138	20.23	16.633	0.0	13.33	93.3
		Wk 96 (Day 673)	135	21.63	18.349	0.0	20.00	93.3
		Wk 108 (Day 757)	108	19.65	18.593	0.0	13.33	93.3
		Wk 120 (Day 841)	1	20.00	NC	20.0	20.00	20.0
		Wk 132 (Day 925)	1	26.67	NC	26.7	26.67	26.7
		Wk 144 (Day 1009)	1	20.00	NC	20.0	20.00	20.0
		Wk 156 (Day 1093)	1	26.67	NC	26.7	26.67	26.7
		End of Treatment	129	20.96	17.050	0.0	20.00	93.3
		30 day Follow-up	61	20.33	16.619	0.0	20.00	66.7
	Placebo + bevacizumab (N=132)	Baseline [a]	124	24.38	16.810	0.0	20.00	93.3
		Wk 12 (Day 85)	116	26.03	17.598	0.0	26.67	100.0
		Wk 24 (Day 169)	104	26.33	15.675	0.0	26.67	60.0
		Wk 36 (Day 253)	96	24.53	16.073	0.0	23.33	66.7
		Wk 48 (Day 337)	84	24.15	17.368	0.0	20.00	66.7
		Wk 60 (Day 421)	71	21.22	16.169	0.0	20.00	100.0
		Wk 72 (Day 505)	68	18.70	16.207	0.0	20.00	66.7
		Wk 84 (Day 589)	51	17.88	16.971	0.0	13.33	66.7
		Wk 96 (Day 673)	41	20.61	16.439	0.0	20.00	60.0
		Wk 108 (Day 757)	31	24.73	22.522	0.0	13.33	100.0
		End of Treatment	69	23.21	16.973	0.0	20.00	66.7
		30 day Follow-up	23	24.93	22.761	0.0	20.00	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanprb 06OCT2020:14:59 kvbv306

Table 2.6.1 PAOLA1: Summary of EORTC QLQ-OV28 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment	Olaparib + bevacizumab (N=255)	Baseline [a]	243	56.88	27.626	0.0	55.56	100.0
		Wk 12 (Day 85)	223	51.57	26.168	0.0	55.56	100.0
		Wk 24 (Day 169)	197	48.67	24.111	0.0	44.44	100.0
		Wk 36 (Day 253)	175	45.21	25.793	0.0	44.44	100.0
		Wk 48 (Day 337)	173	43.93	25.468	0.0	44.44	100.0
		Wk 60 (Day 421)	164	40.14	25.083	0.0	33.33	100.0
		Wk 72 (Day 505)	155	38.85	24.336	0.0	33.33	100.0
		Wk 84 (Day 589)	136	40.11	24.611	0.0	33.33	100.0
		Wk 96 (Day 673)	136	38.11	25.945	0.0	33.33	100.0
		Wk 108 (Day 757)	106	35.01	22.670	0.0	33.33	100.0
		Wk 120 (Day 841)	1	11.11	NC	11.1	11.11	11.1
		Wk 132 (Day 925)	1	11.11	NC	11.1	11.11	11.1
		Wk 144 (Day 1009)	1	11.11	NC	11.1	11.11	11.1
		Wk 156 (Day 1093)	1	22.22	NC	22.2	22.22	22.2
		End of Treatment	128	43.79	25.355	0.0	33.33	100.0
		30 day Follow-up	59	40.87	24.711	0.0	33.33	88.9
	Placebo + bevacizumab (N=132)	Baseline [a]	124	56.94	26.926	0.0	55.56	100.0
		Wk 12 (Day 85)	114	48.20	28.188	0.0	44.44	100.0
		Wk 24 (Day 169)	103	47.57	26.503	0.0	44.44	100.0
		Wk 36 (Day 253)	94	45.33	26.516	0.0	44.44	100.0
		Wk 48 (Day 337)	84	39.81	25.884	0.0	33.33	100.0
		Wk 60 (Day 421)	69	40.66	25.786	0.0	33.33	100.0
		Wk 72 (Day 505)	67	36.98	28.795	0.0	33.33	100.0
		Wk 84 (Day 589)	51	37.69	28.465	0.0	33.33	100.0
		Wk 96 (Day 673)	40	42.50	29.115	0.0	38.89	100.0
		Wk 108 (Day 757)	31	43.73	29.805	0.0	44.44	100.0
		End of Treatment	67	47.35	23.676	0.0	44.44	88.9
		30 day Follow-up	23	49.28	29.555	0.0	55.56	100.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanprb 06OCT2020:14:59 kvbv306

Table 2.6.1 PAOLA1: Summary of EORTC QLQ-OV28 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

				Result				
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-OV28 Symptom scale/items: Hormonal	Olaparib + bevacizumab (N=255)	Baseline [a]	246	26.36	29.812	0.0	16.67	100.0
		Wk 12 (Day 85)	225	20.52	26.586	0.0	16.67	100.0
		Wk 24 (Day 169)	198	20.12	26.192	0.0	16.67	100.0
		Wk 36 (Day 253)	175	22.67	27.806	0.0	16.67	100.0
		Wk 48 (Day 337)	173	21.19	26.237	0.0	16.67	100.0
		Wk 60 (Day 421)	164	22.76	27.878	0.0	16.67	100.0
		Wk 72 (Day 505)	158	25.00	30.200	0.0	16.67	100.0
		Wk 84 (Day 589)	137	27.49	30.154	0.0	16.67	100.0
		Wk 96 (Day 673)	136	25.49	28.899	0.0	16.67	100.0
		Wk 108 (Day 757)	108	25.15	27.953	0.0	16.67	100.0
		Wk 120 (Day 841)	1	16.67	NC	16.7	16.67	16.7
		Wk 132 (Day 925)	1	16.67	NC	16.7	16.67	16.7
		Wk 144 (Day 1009)	1	33.33	NC	33.3	33.33	33.3
		Wk 156 (Day 1093)	1	16.67	NC	16.7	16.67	16.7
		End of Treatment	129	23.26	26.551	0.0	16.67	100.0
		30 day Follow-up	61	21.04	25.802	0.0	16.67	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	123	26.42	31.502	0.0	16.67	100.0
		Wk 12 (Day 85)	115	28.99	30.033	0.0	16.67	100.0
		Wk 24 (Day 169)	103	24.76	27.600	0.0	16.67	100.0
		Wk 36 (Day 253)	97	22.34	27.731	0.0	16.67	100.0
		Wk 48 (Day 337)	84	25.00	26.447	0.0	16.67	100.0
		Wk 60 (Day 421)	71	23.94	26.537	0.0	16.67	100.0
		Wk 72 (Day 505)	68	25.49	28.863	0.0	16.67	100.0
		Wk 84 (Day 589)	51	22.88	26.449	0.0	16.67	100.0
		Wk 96 (Day 673)	41	24.39	26.899	0.0	16.67	100.0
		Wk 108 (Day 757)	31	28.49	26.941	0.0	33.33	100.0
		End of Treatment	69	26.09	27.338	0.0	16.67	100.0
		30 day Follow-up	23	19.57	21.113	0.0	16.67	66.7

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanprb 06OCT2020:14:59 kvbv306

Table 2.6.1 PAOLA1: Summary of EORTC QLQ-OV28 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

				Result				
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy	Olaparib + bevacizumab (N=255)	Baseline [a]	247	42.58	34.808	0.0	33.33	100.0
		Wk 12 (Day 85)	227	34.51	31.217	0.0	33.33	100.0
		Wk 24 (Day 169)	200	28.08	28.920	0.0	16.67	100.0
		Wk 36 (Day 253)	173	28.90	30.599	0.0	33.33	100.0
		Wk 48 (Day 337)	173	26.69	28.001	0.0	16.67	100.0
		Wk 60 (Day 421)	164	27.74	27.954	0.0	33.33	100.0
		Wk 72 (Day 505)	158	25.32	27.629	0.0	16.67	100.0
		Wk 84 (Day 589)	139	24.82	29.717	0.0	16.67	100.0
		Wk 96 (Day 673)	135	26.05	29.829	0.0	16.67	100.0
		Wk 108 (Day 757)	108	25.31	28.229	0.0	16.67	100.0
		Wk 120 (Day 841)	1	33.33	NC	33.3	33.33	33.3
		Wk 132 (Day 925)	1	33.33	NC	33.3	33.33	33.3
		Wk 144 (Day 1009)	1	33.33	NC	33.3	33.33	33.3
		Wk 156 (Day 1093)	1	50.00	NC	50.0	50.00	50.0
		End of Treatment	129	29.59	29.773	0.0	16.67	100.0
		30 day Follow-up	61	29.78	30.141	0.0	33.33	100.0
	Placebo + bevacizumab (N=132)	Baseline [a]	124	45.43	35.201	0.0	33.33	100.0
		Wk 12 (Day 85)	116	35.06	34.219	0.0	33.33	100.0
		Wk 24 (Day 169)	104	31.41	30.130	0.0	33.33	100.0
		Wk 36 (Day 253)	96	26.04	28.899	0.0	16.67	100.0
		Wk 48 (Day 337)	84	25.99	28.146	0.0	16.67	100.0
		Wk 60 (Day 421)	71	25.82	28.283	0.0	16.67	100.0
		Wk 72 (Day 505)	68	23.77	28.260	0.0	16.67	100.0
		Wk 84 (Day 589)	51	25.82	28.346	0.0	16.67	100.0
		Wk 96 (Day 673)	41	26.42	30.726	0.0	16.67	100.0
		Wk 108 (Day 757)	31	25.27	28.826	0.0	16.67	100.0
		End of Treatment	69	24.40	25.176	0.0	16.67	100.0
		30 day Follow-up	23	19.57	22.837	0.0	16.67	66.7

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanprb 06OCT2020:14:59 kvbv306

Table 2.6.1 PAOLA1: Summary of EORTC QLQ-OV28 results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EORTC QLQ-OV28 Symptom scale/items: Other single items	Olaparib + bevacizumab (N=255)	Baseline [a]	246	24.33	23.007	0.0	22.22	100.0
		Wk 12 (Day 85)	226	17.15	18.534	0.0	11.11	100.0
		Wk 24 (Day 169)	200	14.36	15.377	0.0	11.11	66.7
		Wk 36 (Day 253)	174	14.94	16.385	0.0	11.11	83.3
		Wk 48 (Day 337)	175	13.90	14.002	0.0	11.11	58.3
		Wk 60 (Day 421)	164	15.55	16.269	0.0	11.11	88.9
		Wk 72 (Day 505)	158	15.72	16.148	0.0	11.11	66.7
		Wk 84 (Day 589)	138	14.88	15.645	0.0	11.11	58.3
		Wk 96 (Day 673)	136	15.48	14.894	0.0	11.11	66.7
		Wk 108 (Day 757)	108	13.45	14.822	0.0	11.11	66.7
		Wk 120 (Day 841)	1	0.00	NC	0.0	0.00	0.0
		Wk 132 (Day 925)	1	0.00	NC	0.0	0.00	0.0
		Wk 144 (Day 1009)	1	0.00	NC	0.0	0.00	0.0
		Wk 156 (Day 1093)	1	0.00	NC	0.0	0.00	0.0
		End of Treatment	129	16.04	16.530	0.0	11.11	83.3
		30 day Follow-up	61	17.30	19.625	0.0	11.11	66.7
	Placebo + bevacizumab (N=132)	Baseline [a]	125	28.07	25.375	0.0	25.00	75.0
		Wk 12 (Day 85)	116	11.35	17.090	0.0	0.00	91.7
		Wk 24 (Day 169)	104	10.31	16.163	0.0	4.17	83.3
		Wk 36 (Day 253)	97	8.33	10.261	0.0	0.00	33.3
		Wk 48 (Day 337)	86	8.33	11.770	0.0	0.00	50.0
		Wk 60 (Day 421)	71	10.52	14.077	0.0	11.11	66.7
		Wk 72 (Day 505)	68	12.17	15.305	0.0	11.11	55.6
		Wk 84 (Day 589)	51	12.58	15.834	0.0	8.33	58.3
		Wk 96 (Day 673)	41	11.38	16.135	0.0	0.00	58.3
		Wk 108 (Day 757)	31	12.90	15.901	0.0	8.33	50.0
		End of Treatment	69	15.30	19.196	0.0	11.11	83.3
		30 day Follow-up	24	13.54	18.558	0.0	11.11	75.0

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/smeanpr.sas esmeanprb 06OCT2020:14:59 kvbv306

Table 2.6.2.1 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	206	19.79 (17.735)	2.97 (0.995)	111	20.41 (16.944)	1.34 (1.354)	1.63 (-1.676, 4.931)	0.3332
Wk 24 (Day 169)	187	19.66 (17.793)	2.28 (1.053)	100	19.50 (16.047)	4.71 (1.446)	-2.42 (-5.944, 1.096)	0.1763
Wk 36 (Day 253)	162	18.50 (16.559)	3.23 (1.082)	92	20.23 (16.329)	4.10 (1.462)	-0.87 (-4.454, 2.707)	0.6315
Wk 48 (Day 337)	165	19.07 (17.642)	2.96 (1.200)	77	20.13 (16.235)	4.74 (1.727)	-1.78 (-5.919, 2.358)	0.3979
Wk 60 (Day 421)	155	19.54 (17.879)	3.01 (1.168)	67	20.15 (17.200)	6.26 (1.730)	-3.25 (-7.356, 0.865)	0.1212
Wk 72 (Day 505)	149	18.81 (17.292)	1.95 (1.226)	61	19.03 (15.514)	2.72 (1.840)	-0.76 (-5.118, 3.588)	0.7297
Wk 84 (Day 589)	133	18.92 (17.241)	2.48 (1.152)	47	19.05 (16.476)	3.30 (1.824)	-0.82 (-5.073, 3.425)	0.7027
Wk 96 (Day 673)	129	19.12 (17.888)	4.96 (1.363)	36	21.02 (17.243)	4.97 (2.303)	-0.01 (-5.282, 5.264)	0.9973
Average over all visits	221	20.32 (17.983)	2.98 (0.856)	119	19.88 (16.791)	4.02 (1.228)	-1.04 (-3.981, 1.907)	0.4889
Hedges' g SMD							-0.08 (-0.303, 0.143)	0.4828

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.2.2 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Body image (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	202	37.95 (31.686)	-5.58 (1.551)	110	38.64 (33.708)	-7.39 (2.100)	1.82 (-3.317, 6.952)	0.4867
Wk 24 (Day 169)	183	38.98 (32.097)	-7.53 (1.606)	98	40.48 (33.675)	-5.49 (2.196)	-2.04 (-7.392, 3.316)	0.4544
Wk 36 (Day 253)	161	37.89 (31.677)	-8.26 (1.852)	89	41.76 (34.645)	-6.37 (2.528)	-1.89 (-8.065, 4.278)	0.5464
Wk 48 (Day 337)	163	38.65 (32.326)	-8.65 (1.798)	76	41.67 (34.801)	-8.37 (2.600)	-0.28 (-6.505, 5.945)	0.9295
Wk 60 (Day 421)	151	39.18 (32.444)	-11.64 (1.785)	66	41.92 (35.233)	-10.17 (2.635)	-1.47 (-7.738, 4.798)	0.6447
Wk 72 (Day 505)	145	39.43 (32.620)	-10.31 (1.865)	60	44.17 (35.498)	-9.64 (2.830)	-0.66 (-7.338, 6.015)	0.8454
Wk 84 (Day 589)	129	38.11 (32.422)	-12.23 (1.961)	46	39.86 (34.868)	-12.05 (3.062)	-0.18 (-7.345, 6.981)	0.9602
Wk 96 (Day 673)	126	39.81 (32.453)	-8.76 (2.145)	35	44.29 (35.226)	-7.51 (3.635)	-1.25 (-9.563, 7.070)	0.7680
Average over all visits	219	38.96 (31.546)	-9.12 (1.363)	118	38.98 (33.633)	-8.38 (1.953)	-0.74 (-5.430, 3.941)	0.7549
Hedges' g SMD							-0.04 (-0.260, 0.188)	0.7516

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.2.3 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	206	24.82 (18.058)	0.57 (1.041)	110	23.97 (17.213)	1.72 (1.423)	-1.15 (-4.614, 2.324)	0.5164
Wk 24 (Day 169)	186	25.09 (18.589)	-0.13 (1.009)	99	23.86 (17.215)	1.72 (1.385)	-1.85 (-5.222, 1.522)	0.2812
Wk 36 (Day 253)	161	24.68 (17.579)	-1.28 (1.063)	91	23.68 (17.346)	0.66 (1.435)	-1.94 (-5.455, 1.575)	0.2783
Wk 48 (Day 337)	162	25.63 (18.900)	-2.38 (1.070)	75	23.78 (16.944)	-1.08 (1.549)	-1.30 (-5.004, 2.411)	0.4918
Wk 60 (Day 421)	155	25.30 (18.437)	-3.76 (1.086)	66	23.16 (17.052)	-1.82 (1.631)	-1.94 (-5.806, 1.917)	0.3223
Wk 72 (Day 505)	149	25.63 (18.868)	-4.25 (1.205)	60	24.14 (17.975)	-5.93 (1.833)	1.68 (-2.644, 5.998)	0.4455
Wk 84 (Day 589)	132	24.96 (18.853)	-4.70 (1.137)	46	24.38 (18.676)	-6.38 (1.835)	1.68 (-2.569, 5.937)	0.4362
Wk 96 (Day 673)	128	25.08 (18.329)	-3.64 (1.225)	36	26.53 (18.569)	-4.59 (2.085)	0.95 (-3.812, 5.714)	0.6943
Average over all visits	221	25.55 (18.833)	-2.44 (0.794)	118	24.15 (16.945)	-1.96 (1.147)	-0.48 (-3.229, 2.263)	0.7295
Hedges' g SMD							-0.04 (-0.264, 0.183)	0.7255

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.2.4 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	199	56.03 (27.443)	-5.30 (1.520)	108	56.22 (26.979)	-9.12 (2.059)	3.82 (-1.218, 8.851)	0.1368
Wk 24 (Day 169)	182	55.74 (27.608)	-7.98 (1.491)	98	56.52 (27.264)	-9.22 (2.029)	1.24 (-3.713, 6.198)	0.6220
Wk 36 (Day 253)	160	55.35 (26.864)	-10.21 (1.702)	88	56.31 (26.006)	-10.55 (2.311)	0.34 (-5.312, 5.987)	0.9065
Wk 48 (Day 337)	160	57.19 (27.638)	-12.04 (1.588)	74	55.03 (25.800)	-16.04 (2.295)	4.00 (-1.491, 9.497)	0.1526
Wk 60 (Day 421)	153	55.63 (28.003)	-15.19 (1.693)	64	54.60 (26.349)	-13.61 (2.512)	-1.58 (-7.547, 4.379)	0.6015
Wk 72 (Day 505)	143	56.02 (28.378)	-17.46 (1.730)	60	55.37 (27.522)	-17.36 (2.627)	-0.10 (-6.296, 6.093)	0.9743
Wk 84 (Day 589)	128	57.20 (27.654)	-15.99 (1.784)	46	53.38 (27.999)	-17.61 (2.874)	1.63 (-5.044, 8.296)	0.6314
Wk 96 (Day 673)	128	57.38 (27.146)	-17.11 (2.029)	35	57.62 (29.058)	-12.96 (3.523)	-4.15 (-12.161, 3.859)	0.3082
Average over all visits	217	56.37 (27.356)	-12.66 (1.203)	118	56.64 (26.927)	-13.31 (1.736)	0.65 (-3.506, 4.803)	0.7589
Hedges' g SMD							0.04 (-0.188, 0.260)	0.7549

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.2.5 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Hormonal (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	204	24.92 (29.150)	-4.41 (1.387)	108	26.39 (30.240)	3.81 (1.904)	-8.21 (-12.849, -3.581)	0.0006*
Wk 24 (Day 169)	184	26.00 (30.462)	-5.32 (1.348)	97	24.74 (30.153)	-0.48 (1.866)	-4.84 (-9.374, -0.315)	0.0361*
Wk 36 (Day 253)	162	26.13 (30.118)	-3.39 (1.745)	91	24.54 (29.953)	-2.05 (2.380)	-1.35 (-7.153, 4.461)	0.6486
Wk 48 (Day 337)	163	26.69 (29.834)	-4.15 (1.562)	75	26.22 (30.777)	-1.16 (2.257)	-2.99 (-8.392, 2.413)	0.2770
Wk 60 (Day 421)	154	27.16 (30.247)	-3.10 (1.701)	66	25.00 (32.324)	-1.06 (2.521)	-2.04 (-8.030, 3.947)	0.5027
Wk 72 (Day 505)	148	26.80 (29.587)	-1.17 (1.892)	60	23.33 (31.173)	1.23 (2.858)	-2.40 (-9.152, 4.348)	0.4842
Wk 84 (Day 589)	131	27.99 (30.119)	0.70 (1.843)	46	25.72 (33.093)	-2.01 (2.929)	2.71 (-4.109, 9.524)	0.4348
Wk 96 (Day 673)	128	27.21 (29.937)	-1.42 (1.872)	35	30.00 (34.490)	-1.49 (3.213)	0.08 (-7.246, 7.397)	0.9838
Average over all visits	220	25.68 (29.768)	-2.78 (1.234)	117	26.50 (31.115)	-0.40 (1.777)	-2.38 (-6.637, 1.873)	0.2716
Hedges' g SMD							-0.13 (-0.352, 0.097)	0.2652

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.2.6 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	207	42.19 (34.282)	-7.34 (1.733)	110	43.03 (34.341)	-6.60 (2.373)	-0.74 (-6.521, 5.039)	0.8010
Wk 24 (Day 169)	186	40.77 (34.658)	-13.12 (1.699)	99	42.93 (34.511)	-10.48 (2.336)	-2.64 (-8.321, 3.048)	0.3621
Wk 36 (Day 253)	161	39.03 (34.666)	-12.50 (1.801)	91	44.14 (34.728)	-16.19 (2.447)	3.69 (-2.296, 9.670)	0.2262
Wk 48 (Day 337)	163	40.49 (34.988)	-14.26 (1.672)	75	46.44 (35.227)	-17.74 (2.399)	3.48 (-2.277, 9.238)	0.2352
Wk 60 (Day 421)	155	41.08 (35.446)	-14.18 (1.782)	66	45.96 (35.211)	-15.84 (2.664)	1.66 (-4.653, 7.973)	0.6051
Wk 72 (Day 505)	149	41.05 (34.141)	-16.23 (1.794)	60	43.33 (34.608)	-18.94 (2.733)	2.71 (-3.730, 9.149)	0.4081
Wk 84 (Day 589)	133	39.60 (33.685)	-15.88 (1.978)	46	43.12 (33.440)	-15.96 (3.170)	0.08 (-7.280, 7.444)	0.9825
Wk 96 (Day 673)	128	38.93 (34.001)	-13.55 (1.990)	36	46.76 (35.146)	-15.92 (3.382)	2.37 (-5.369, 10.108)	0.5469
Average over all visits	221	41.78 (34.474)	-13.38 (1.345)	118	44.63 (35.263)	-14.71 (1.933)	1.33 (-3.308, 5.961)	0.5738
Hedges' g SMD							0.07 (-0.158, 0.289)	0.5686

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.2.7 PAOLA1: Summary of analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Other single items (mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	205	23.50 (22.428)	-6.88 (1.148)	111	27.15 (25.702)	-13.56 (1.562)	6.68 (2.866, 10.500)	0.0006*
Wk 24 (Day 169)	185	23.06 (22.219)	-10.18 (1.048)	100	26.94 (25.518)	-14.61 (1.428)	4.43 (0.938, 7.917)	0.0131*
Wk 36 (Day 253)	161	23.24 (22.189)	-10.11 (0.991)	92	26.12 (24.297)	-15.61 (1.327)	5.50 (2.239, 8.766)	0.0010*
Wk 48 (Day 337)	164	23.51 (22.465)	-10.27 (0.968)	77	25.94 (24.560)	-15.56 (1.390)	5.29 (1.955, 8.626)	0.0020*
Wk 60 (Day 421)	154	22.40 (22.108)	-8.65 (1.141)	67	25.70 (24.558)	-12.72 (1.697)	4.07 (0.038, 8.100)	0.0479*
Wk 72 (Day 505)	148	24.27 (22.621)	-9.07 (1.192)	61	26.41 (25.868)	-11.49 (1.835)	2.42 (-1.891, 6.732)	0.2699
Wk 84 (Day 589)	131	23.09 (22.664)	-9.84 (1.273)	47	25.18 (25.983)	-10.20 (2.063)	0.37 (-4.416, 5.147)	0.8804
Wk 96 (Day 673)	128	21.40 (20.881)	-8.87 (1.194)	36	30.40 (27.021)	-13.14 (2.147)	4.27 (-0.602, 9.133)	0.0855
Average over all visits	220	24.04 (22.468)	-9.23 (0.745)	119	28.01 (25.527)	-13.36 (1.084)	4.13 (1.538, 6.718)	0.0019*
Hedges' g SMD							0.36 (0.139, 0.588)	0.0015*

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Figure 2.6.3.1 PAOLA1: Mean (+/- SD) score for EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

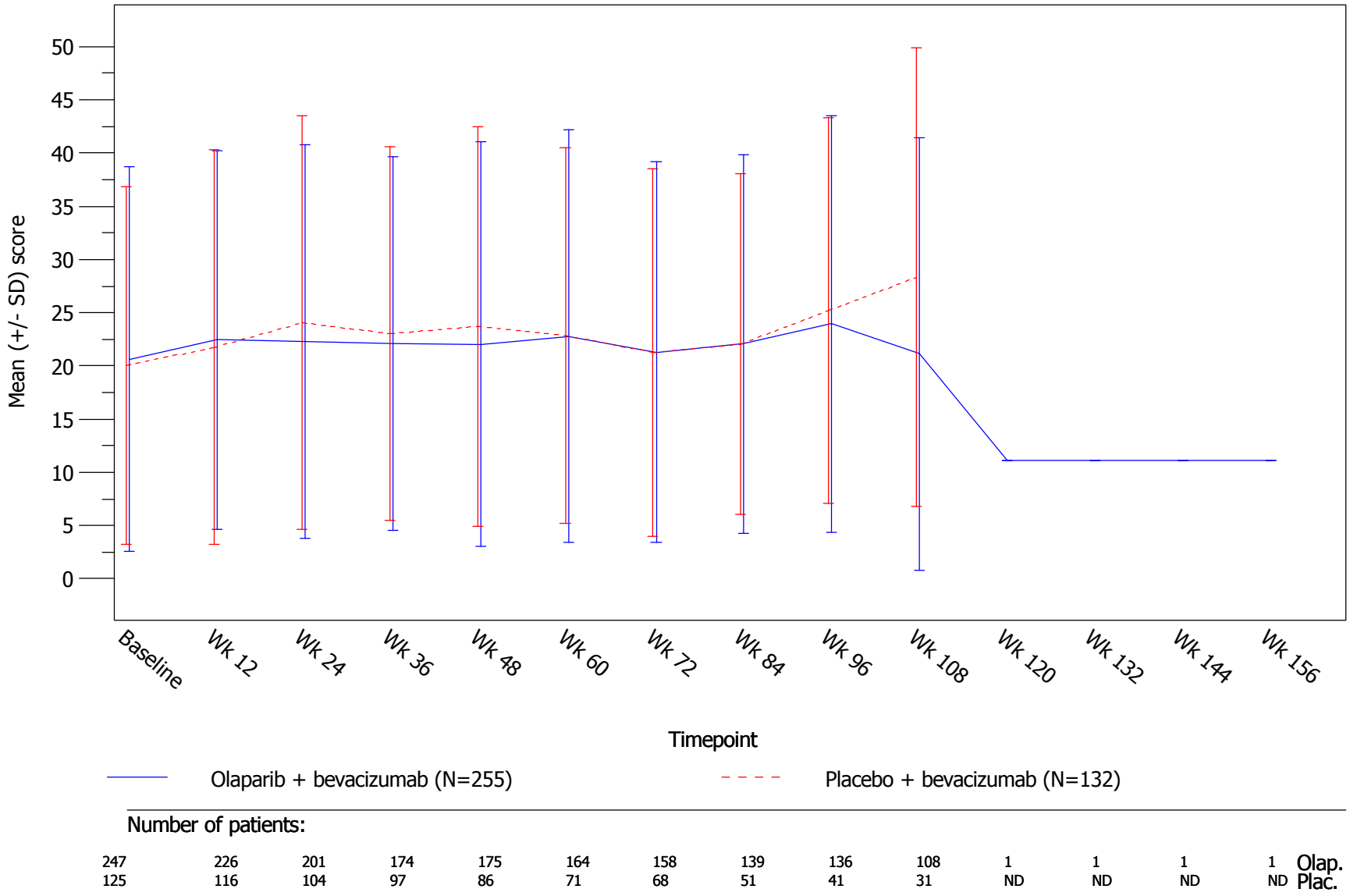


Figure 2.6.3.2 PAOLA1: Mean (+/- SD) score for EORTC QLQ-OV28 Symptom scale/items: Body image across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

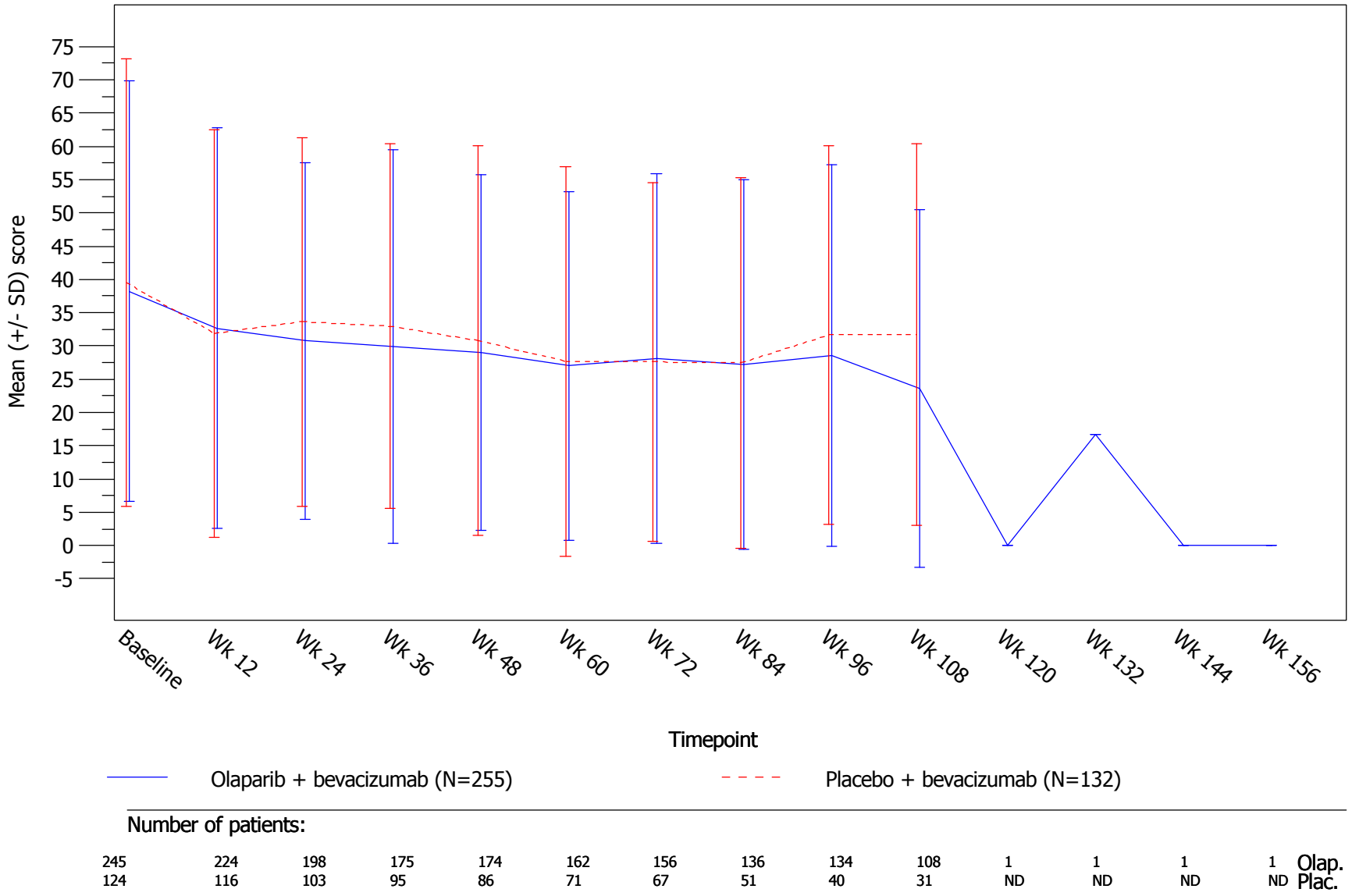


Figure 2.6.3.3 PAOLA1: Mean (+/- SD) score for EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

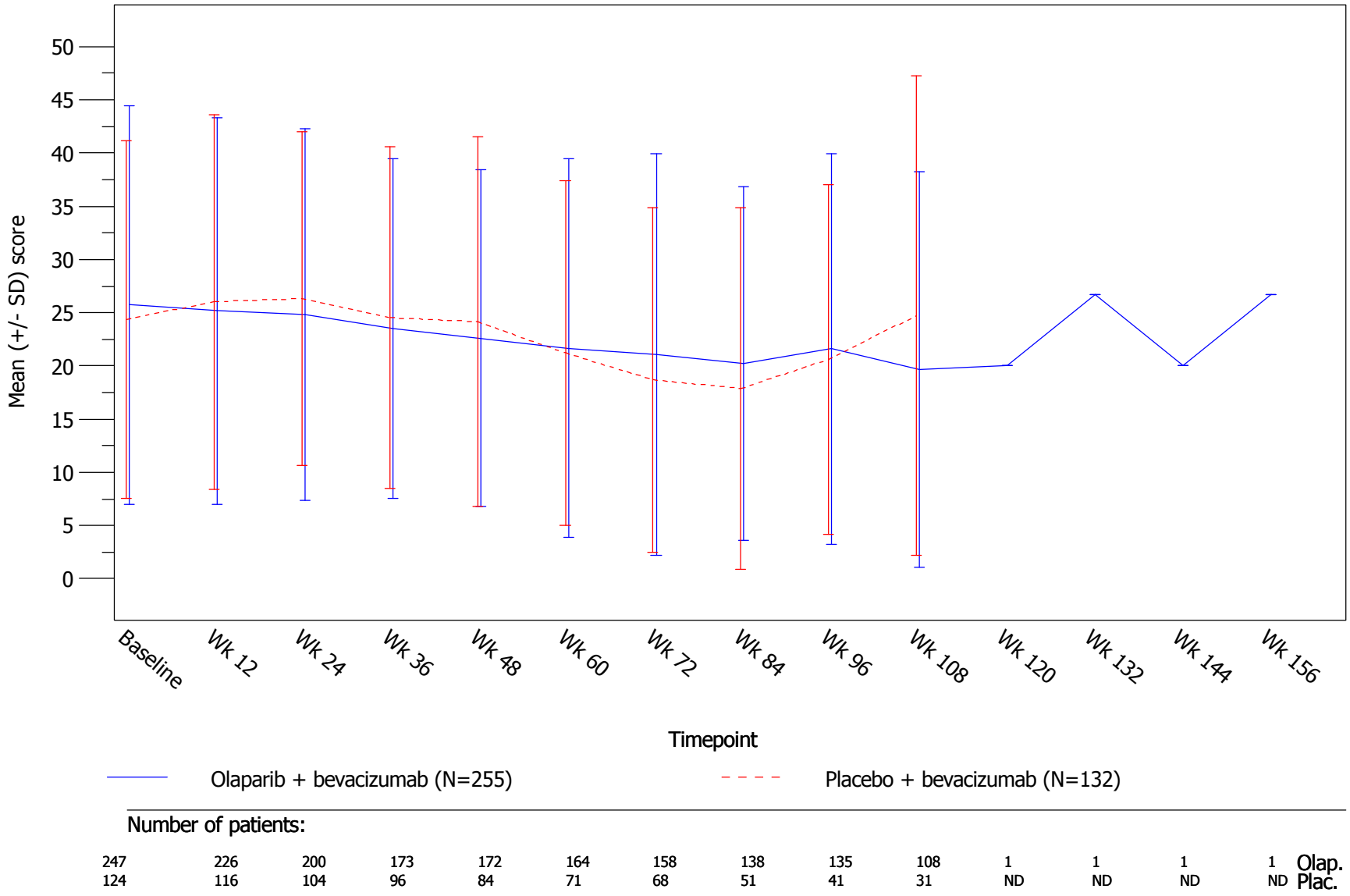


Figure 2.6.3.4 PAOLA1: Mean (+/- SD) score for EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

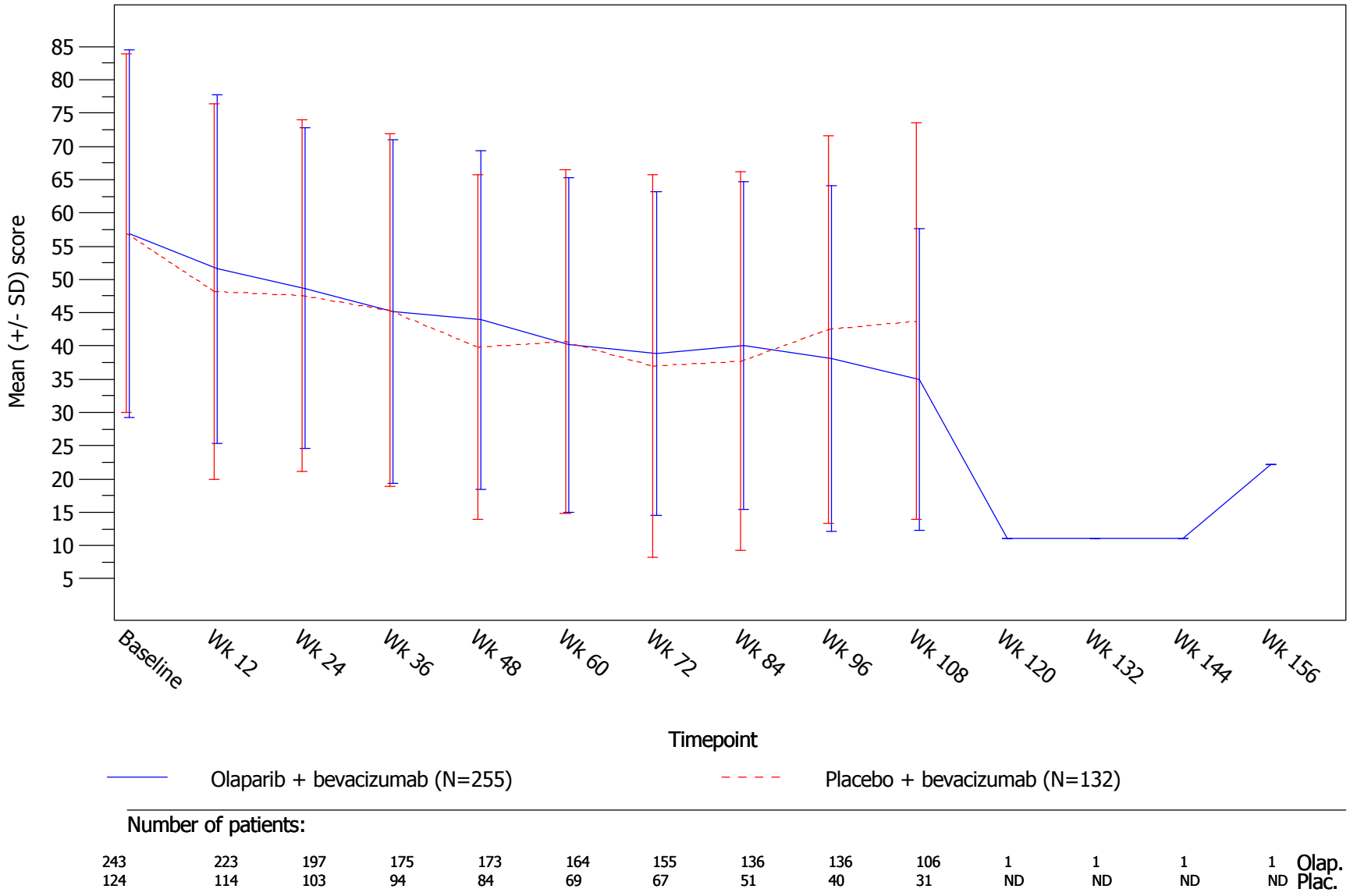


Figure 2.6.3.5 PAOLA1: Mean (+/- SD) score for EORTC QLQ-OV28 Symptom scale/items: Hormonal across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

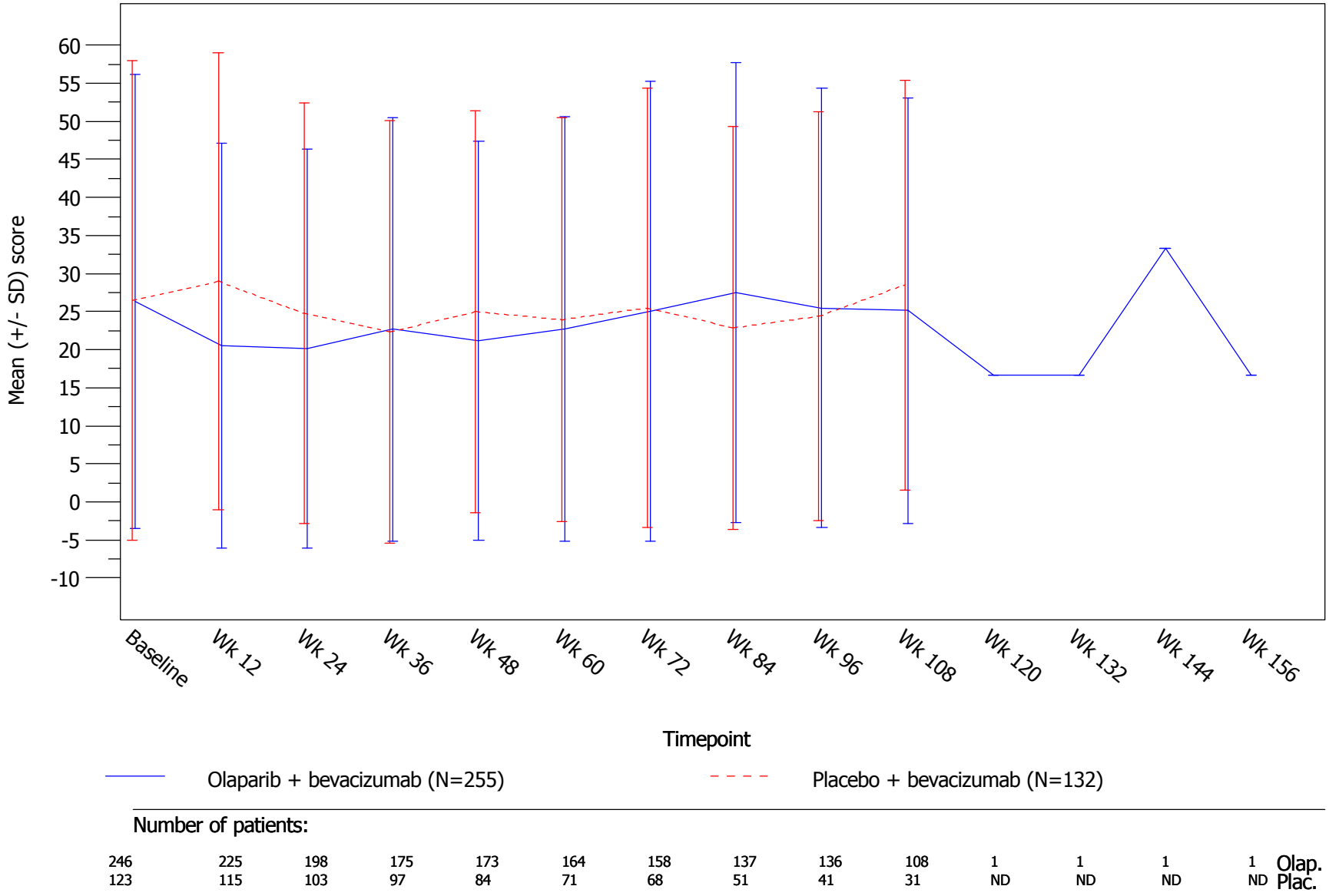
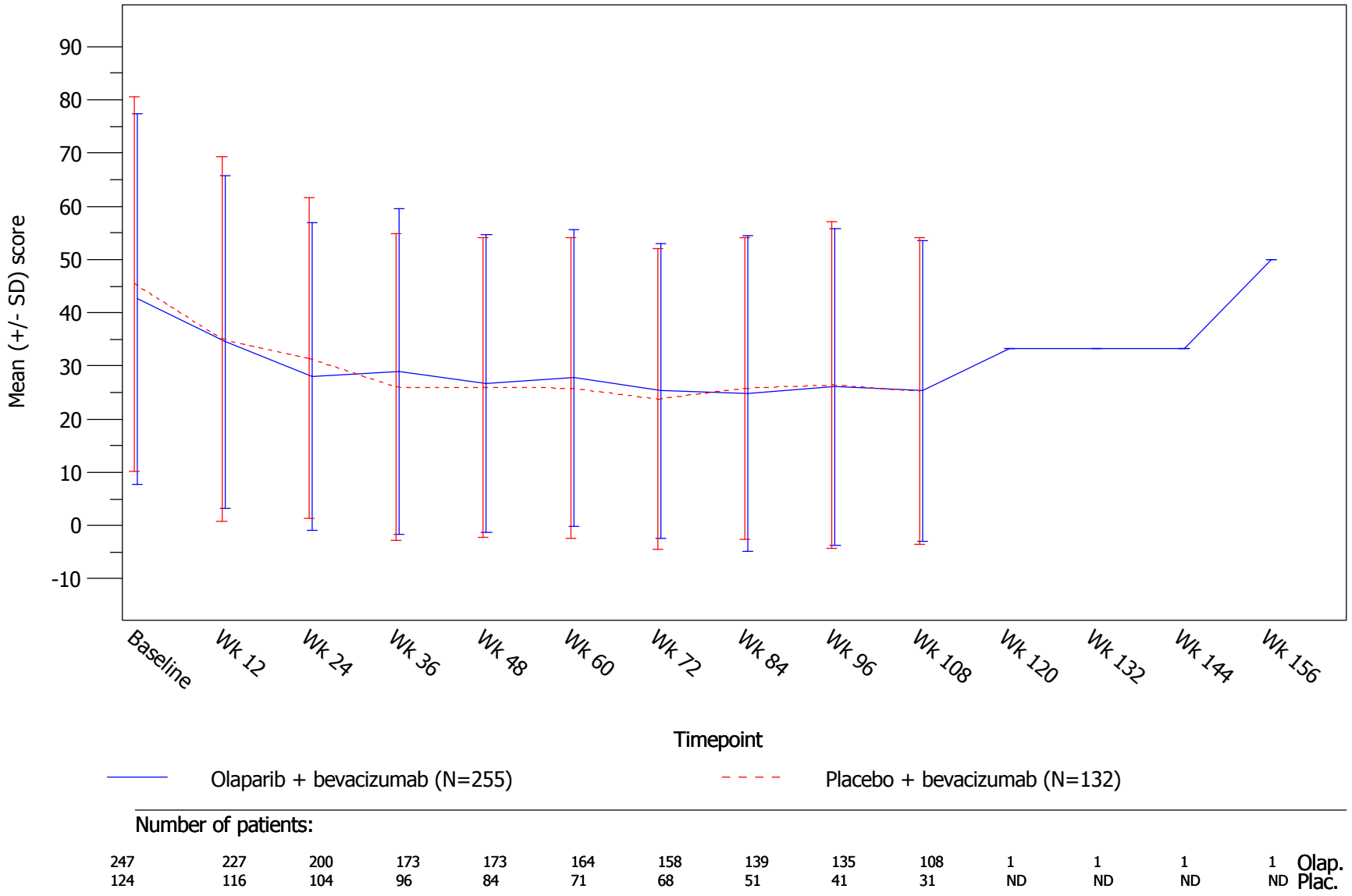


Figure 2.6.3.6 PAOLA1: Mean (+/- SD) score for EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients:

247	227	200	173	173	164	158	139	135	108	1	1	1	1 Olap.
124	116	104	96	84	71	68	51	41	31	ND	ND	ND	ND Plac.

Figure 2.6.3.7 PAOLA1: Mean (+/- SD) score for EORTC QLQ-OV28 Symptom scale/items: Other single items across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

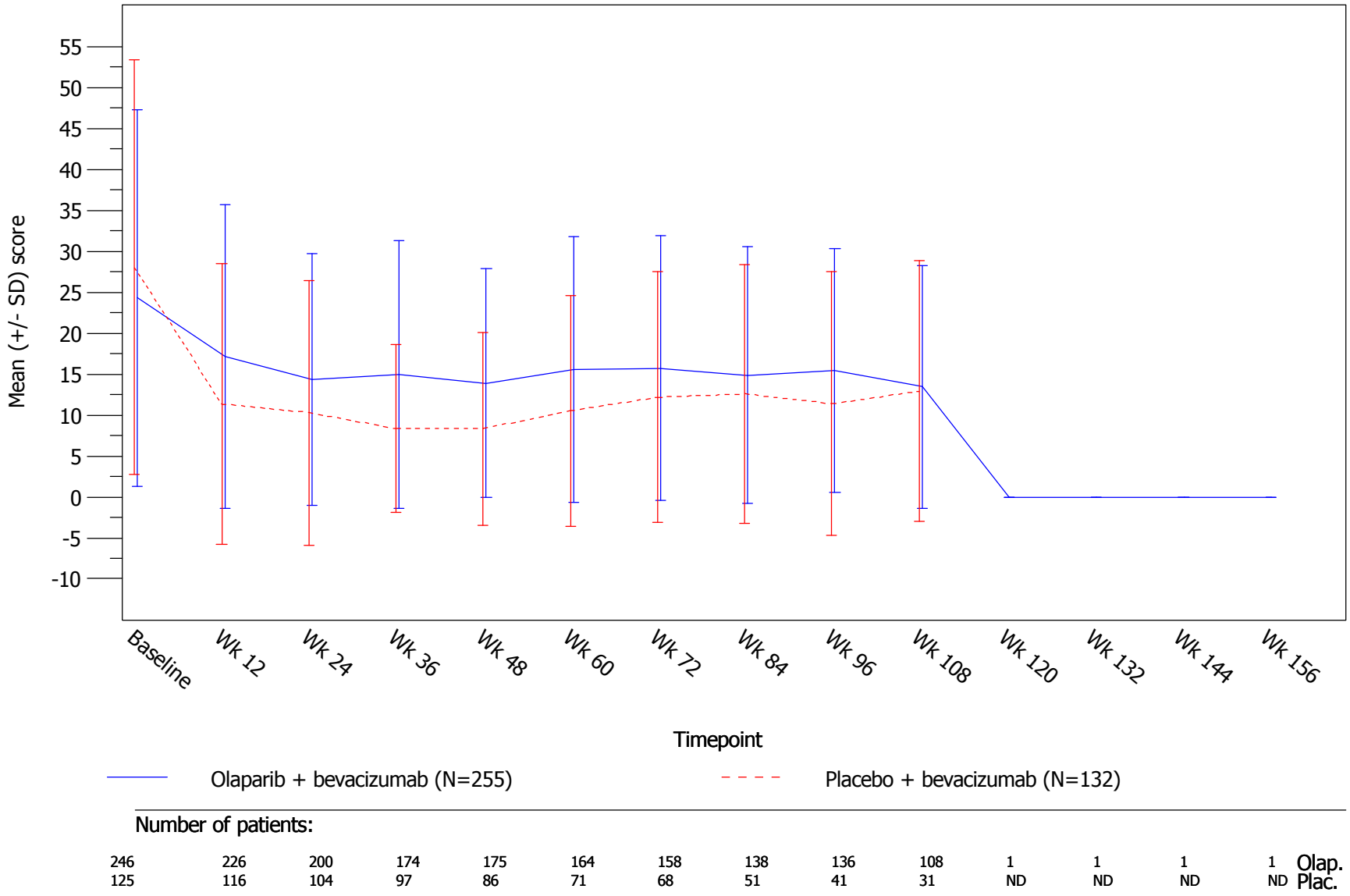


Table 2.6.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI
(mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	82	19.00 (17.543)	3.54 (1.303)	42	22.30 (15.047)	6.19 (1.909)	-2.65 (-7.233, 1.932)	0.2545
Hedges' g SMD							-0.22 (-0.593, 0.153)	0.2483
NED/CR [IDS]	61	22.19 (18.596)	1.08 (1.718)	34	16.34 (16.193)	1.50 (2.438)	-0.41 (-6.376, 5.547)	0.8903
Hedges' g SMD							-0.03 (-0.449, 0.389)	0.8885
NED/CR [Chemo]	37	25.78 (21.435)	0.65 (2.351)	20	21.94 (16.664)	3.56 (3.503)	-2.92 (-11.436, 5.600)	0.4932
Hedges' g SMD							-0.19 (-0.740, 0.351)	0.4841
PR	41	15.28 (12.678)	6.82 (1.960)	23	18.89 (20.534)	1.89 (2.789)	4.93 (-1.914, 11.769)	0.1543
Hedges' g SMD							0.38 (-0.136, 0.894)	0.1494
Int. p-value								0.2893
Screening laboratory tBRCA status (IVRS)								
tBRCAm	131	22.21 (18.743)	2.61 (1.130)	58	17.95 (15.334)	2.42 (1.777)	0.19 (-3.973, 4.354)	0.9282
Hedges' g SMD							0.01 (-0.295, 0.324)	0.9270
non-tBRCAm	90	17.57 (16.532)	3.54 (1.331)	61	21.71 (18.003)	5.39 (1.710)	-1.85 (-6.149, 2.447)	0.3957
Hedges' g SMD							-0.14 (-0.468, 0.183)	0.3908
Int. p-value								0.8051
First line treatment outcome (eCRF)								
NED [PDS]	80	20.83 (19.242)	2.83 (1.376)	41	22.38 (15.040)	4.88 (1.979)	-2.05 (-6.827, 2.724)	0.3966
Hedges' g SMD							-0.16 (-0.541, 0.213)	0.3939
NED/CR [IDS]	60	18.76 (15.845)	2.89 (1.643)	29	15.86 (16.354)	1.66 (2.524)	1.22 (-4.778, 7.225)	0.6860
Hedges' g SMD							0.09 (-0.350, 0.537)	0.6803
NED/CR [Chemo]	34	23.97 (19.742)	1.83 (2.486)	17	23.20 (22.069)	4.07 (4.060)	-2.24 (-11.911, 7.425)	0.6413
Hedges' g SMD							-0.14 (-0.728, 0.438)	0.6267
PR	44	18.66 (17.551)	3.74 (1.773)	31	17.89 (15.855)	3.90 (2.271)	-0.17 (-5.924, 5.591)	0.9541
Hedges' g SMD							-0.01 (-0.473, 0.446)	0.9539
Int. p-value								0.5023

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis.
Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI
(mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	128	22.01 (18.878)	2.79 (1.140)	59	17.93 (15.202)	2.45 (1.757)	0.34 (-3.797, 4.486)	0.8698
Hedges' g SMD							0.03 (-0.282, 0.335)	0.8677
non-tBRCAm	93	18.00 (16.490)	3.20 (1.309)	60	21.80 (18.143)	5.39 (1.723)	-2.19 (-6.474, 2.103)	0.3154
Hedges' g SMD							-0.17 (-0.494, 0.157)	0.3099
Int. p-value								0.6610
Age group								
<65 years	162	20.65 (18.012)	3.00 (1.020)	89	21.70 (15.707)	3.89 (1.449)	-0.89 (-4.380, 2.605)	0.6172
Hedges' g SMD							-0.07 (-0.326, 0.192)	0.6124
>=65 years	59	NC	NC	30	NC	NC	NC	NC
Int. p-value								NC
FIGO Stage (Disease state)								
III	158	21.50 (18.996)	2.41 (1.051)	83	21.61 (18.123)	3.32 (1.512)	-0.92 (-4.543, 2.713)	0.6197
Hedges' g SMD							-0.07 (-0.334, 0.198)	0.6158
IV	63	17.38 (14.881)	4.51 (1.477)	36	15.90 (12.556)	6.16 (2.219)	-1.65 (-6.946, 3.647)	0.5377
Hedges' g SMD							-0.13 (-0.543, 0.277)	0.5253
Int. p-value								0.9716
Region								
Europe	212	20.69 (18.108)	2.90 (0.885)	113	20.34 (17.028)	4.24 (1.284)	-1.33 (-4.402, 1.734)	0.3928
Hedges' g SMD							-0.10 (-0.330, 0.127)	0.3851
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI
(mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	163	19.53 (17.461)	4.28 (1.007)	91	19.39 (17.005)	4.62 (1.388)	-0.34 (-3.716, 3.037)	0.8432
Hedges' g SMD							-0.03 (-0.283, 0.230)	0.8422
(1) Restricted activity	54	23.10 (19.692)	-1.17 (1.654)	28	21.47 (16.274)	1.87 (2.608)	-3.04 (-9.184, 3.113)	0.3286
Hedges' g SMD							-0.24 (-0.694, 0.222)	0.3122
Int. p-value								0.9793
Baseline CA-125 value								
<=ULN	196	20.01 (18.202)	2.72 (0.897)	106	19.99 (17.054)	4.01 (1.288)	-1.29 (-4.381, 1.798)	0.4113
Hedges' g SMD							-0.10 (-0.337, 0.136)	0.4045
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	221	20.32 (17.983)	2.98 (0.856)	119	19.88 (16.791)	4.02 (1.228)	-1.04 (-3.981, 1.907)	0.4889
Hedges' g SMD							-0.08 (-0.303, 0.143)	0.4828
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	143	19.97 (17.691)	2.83 (1.057)	71	19.95 (15.867)	4.20 (1.565)	-1.37 (-5.097, 2.351)	0.4680
Hedges' g SMD							-0.11 (-0.391, 0.178)	0.4627
Residue	71	21.44 (19.298)	2.85 (1.570)	40	19.94 (17.918)	3.24 (2.230)	-0.38 (-5.799, 5.037)	0.8892
Hedges' g SMD							-0.03 (-0.415, 0.360)	0.8876
Int. p-value								0.4787

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI
(mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	131	20.54 (18.855)	3.63 (1.082)	70	21.16 (14.958)	4.86 (1.531)	-1.23 (-4.932, 2.467)	0.5120
Hedges' g SMD							-0.10 (-0.388, 0.192)	0.5085
Interval	83	20.32 (17.250)	1.80 (1.480)	41	17.89 (18.993)	1.89 (2.257)	-0.09 (-5.441, 5.267)	0.9743
Hedges' g SMD							-0.01 (-0.380, 0.368)	0.9738
Int. p-value								0.2218
Myriad tumour BRCA mutation status								
tBRCAm	137	22.03 (18.847)	1.89 (1.080)	67	19.10 (16.246)	2.05 (1.621)	-0.16 (-4.006, 3.686)	0.9346
Hedges' g SMD							-0.01 (-0.305, 0.280)	0.9336
Non-tBRCAm	84	17.55 (16.204)	4.88 (1.403)	52	20.88 (17.577)	6.28 (1.873)	-1.40 (-6.041, 3.239)	0.5511
Hedges' g SMD							-0.11 (-0.452, 0.240)	0.5473
Int. p-value								0.7304
Status somatic BRCA mutations								
sBRCAm	18	17.10 (18.290)	-3.13 (2.384)	6	25.74 (13.433)	3.08 (4.181)	-6.20 (-16.338, 3.931)	0.2161
Hedges' g SMD							-0.59 (-1.532, 0.351)	0.2191
gBRCAm	57	21.07 (16.314)	4.73 (1.542)	27	18.44 (16.447)	1.74 (2.455)	3.00 (-2.778, 8.771)	0.3048
Hedges' g SMD							0.25 (-0.212, 0.707)	0.2917
Non-BRCAm	37	15.98 (13.350)	6.08 (1.783)	22	17.93 (17.563)	10.63 (2.485)	-4.55 (-10.695, 1.586)	0.1429
Hedges' g SMD							-0.40 (-0.936, 0.130)	0.1384
Int. p-value								0.1879

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.2 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Body image
(mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	40.33 (30.942)	-12.32 (2.181)	42	42.46 (32.552)	-5.14 (3.140)	-7.18 (-14.757, 0.400)	0.0632
Hedges' g SMD							-0.36 (-0.734, 0.017)	0.0610
NED/CR [IDS]	61	41.53 (29.443)	-8.13 (2.784)	34	37.75 (37.674)	-11.64 (3.987)	3.51 (-6.163, 13.184)	0.4724
Hedges' g SMD							0.16 (-0.264, 0.576)	0.4661
NED/CR [Chemo]	36	42.59 (35.061)	-9.29 (3.170)	20	28.33 (30.156)	-7.31 (4.627)	-1.98 (-13.387, 9.430)	0.7281
Hedges' g SMD							-0.10 (-0.646, 0.448)	0.7216
PR	41	29.27 (31.794)	-4.40 (3.646)	22	43.94 (31.933)	-4.92 (5.637)	0.51 (-13.223, 14.248)	0.9404
Hedges' g SMD							0.02 (-0.497, 0.539)	0.9376
Int. p-value								0.0834
Screening laboratory tBRCA status (IVRS)								
tBRCAm	131	41.35 (31.170)	-8.93 (1.763)	57	35.67 (31.409)	-7.72 (2.825)	-1.21 (-7.782, 5.368)	0.7176
Hedges' g SMD							-0.06 (-0.370, 0.253)	0.7122
non-tBRCAm	88	35.42 (31.945)	-9.82 (2.093)	61	42.08 (35.565)	-8.75 (2.616)	-1.06 (-7.714, 5.590)	0.7527
Hedges' g SMD							-0.05 (-0.380, 0.274)	0.7508
Int. p-value								0.9023
First line treatment outcome (eCRF)								
NED [PDS]	79	41.98 (32.671)	-11.82 (2.195)	41	42.28 (32.935)	-6.62 (3.123)	-5.20 (-12.769, 2.364)	0.1758
Hedges' g SMD							-0.26 (-0.641, 0.116)	0.1741
NED/CR [IDS]	60	39.72 (29.287)	-9.06 (2.710)	29	31.61 (35.731)	-10.77 (4.225)	1.71 (-8.293, 11.713)	0.7345
Hedges' g SMD							0.08 (-0.365, 0.522)	0.7284
NED/CR [Chemo]	33	36.87 (34.550)	-7.58 (3.316)	17	31.37 (35.786)	-4.44 (5.118)	-3.14 (-15.592, 9.308)	0.6113
Hedges' g SMD							-0.16 (-0.743, 0.429)	0.6006
PR	44	32.58 (30.701)	-5.55 (3.335)	30	45.56 (31.237)	-8.64 (4.393)	3.10 (-8.106, 14.298)	0.5824
Hedges' g SMD							0.13 (-0.331, 0.598)	0.5728
Int. p-value								0.3305

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Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.2 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Body image
(mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	128	41.93 (31.232)	-9.01 (1.796)	58	35.06 (31.482)	-7.42 (2.822)	-1.59 (-8.199, 5.019)	0.6356
Hedges' g SMD							-0.08 (-0.387, 0.234)	0.6289
non-tBRCAm	91	34.80 (31.686)	-9.67 (2.041)	60	42.78 (35.437)	-8.86 (2.621)	-0.81 (-7.414, 5.791)	0.8083
Hedges' g SMD							-0.04 (-0.367, 0.285)	0.8064
Int. p-value								0.9983
Age group								
<65 years	161	40.79 (31.397)	-8.49 (1.637)	89	39.51 (32.893)	-7.90 (2.317)	-0.59 (-6.183, 4.996)	0.8345
Hedges' g SMD							-0.03 (-0.287, 0.231)	0.8324
>=65 years	58	33.91 (31.679)	-10.47 (2.194)	29	37.36 (36.367)	-9.92 (3.337)	-0.54 (-8.493, 7.405)	0.8920
Hedges' g SMD							-0.03 (-0.477, 0.414)	0.8900
Int. p-value								0.5069
FIGO Stage (Disease state)								
III	156	41.56 (31.820)	-9.50 (1.586)	82	38.01 (34.174)	-9.40 (2.276)	-0.10 (-5.572, 5.364)	0.9700
Hedges' g SMD							-0.01 (-0.273, 0.262)	0.9697
IV	63	32.54 (30.147)	-7.08 (2.804)	36	41.20 (32.729)	-6.34 (4.146)	-0.74 (-10.726, 9.247)	0.8833
Hedges' g SMD							-0.03 (-0.441, 0.378)	0.8799
Int. p-value								0.9241
Region								
Europe	211	39.89 (31.630)	-9.71 (1.389)	112	39.29 (33.992)	-9.11 (2.023)	-0.60 (-5.427, 4.230)	0.8074
Hedges' g SMD							-0.03 (-0.258, 0.200)	0.8042
Japan	8	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.2 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Body image
(mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	162	37.55 (30.086)	-7.83 (1.607)	90	37.22 (33.244)	-6.62 (2.229)	-1.21 (-6.625, 4.205)	0.6600
Hedges' g SMD							-0.06 (-0.316, 0.199)	0.6576
(1) Restricted activity	53	43.40 (35.707)	-11.23 (2.636)	28	44.64 (34.858)	-15.13 (3.981)	3.89 (-5.608, 13.398)	0.4172
Hedges' g SMD							0.19 (-0.265, 0.653)	0.4066
Int. p-value								0.5597
Baseline CA-125 value								
<=ULN	194	39.78 (31.605)	-9.65 (1.407)	105	39.84 (34.398)	-8.07 (2.015)	-1.59 (-6.422, 3.251)	0.5192
Hedges' g SMD							-0.08 (-0.317, 0.158)	0.5133
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	219	38.96 (31.546)	-9.12 (1.363)	118	38.98 (33.633)	-8.38 (1.953)	-0.74 (-5.430, 3.941)	0.7549
Hedges' g SMD							-0.04 (-0.260, 0.188)	0.7516
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	41.43 (30.989)	-10.61 (1.712)	71	38.03 (34.061)	-7.57 (2.520)	-3.04 (-9.053, 2.963)	0.3188
Hedges' g SMD							-0.15 (-0.432, 0.139)	0.3134
Residue	70	36.19 (32.473)	-7.12 (2.375)	40	40.83 (33.536)	-8.24 (3.330)	1.11 (-7.016, 9.244)	0.7862
Hedges' g SMD							0.05 (-0.334, 0.443)	0.7835
Int. p-value								0.5050

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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.2 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Body image
(mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	130	39.62 (32.633)	-10.79 (1.724)	70	40.24 (32.039)	-6.40 (2.416)	-4.38 (-10.238, 1.475)	0.1417
Hedges' g SMD							-0.22 (-0.511, 0.072)	0.1392
Interval	82	39.84 (29.832)	-7.49 (2.340)	41	36.99 (36.801)	-10.58 (3.587)	3.09 (-5.404, 11.581)	0.4726
Hedges' g SMD							0.14 (-0.234, 0.516)	0.4621
Int. p-value								0.0746
Myriad tumour BRCA mutation status								
tBRCAm	137	40.88 (31.634)	-9.39 (1.755)	66	36.87 (32.491)	-8.40 (2.675)	-0.99 (-7.298, 5.323)	0.7579
Hedges' g SMD							-0.05 (-0.341, 0.247)	0.7538
Non-tBRCAm	82	35.77 (31.331)	-8.88 (2.124)	52	41.67 (35.162)	-8.04 (2.779)	-0.84 (-7.787, 6.112)	0.8118
Hedges' g SMD							-0.04 (-0.390, 0.305)	0.8101
Int. p-value								0.8718
Status somatic BRCA mutations								
sBRCAm	18	NC	NC	6	NC	NC	NC	NC
gBRCAm	57	37.72 (31.580)	-1.59 (2.742)	27	38.89 (31.009)	-9.26 (4.314)	7.66 (-2.505, 17.829)	0.1376
Hedges' g SMD							0.36 (-0.104, 0.818)	0.1291
Non-BRCAm	35	41.43 (31.408)	-10.72 (3.334)	22	40.15 (35.134)	-9.59 (4.449)	-1.13 (-12.298, 10.041)	0.8400
Hedges' g SMD							-0.06 (-0.589, 0.478)	0.8393
Int. p-value								0.6300

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Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.3 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	82	26.42 (16.176)	-4.56 (1.167)	42	26.55 (21.224)	-3.02 (1.717)	-1.55 (-5.657, 2.563)	0.4576
Hedges' g SMD							-0.14 (-0.515, 0.229)	0.4520
NED/CR [IDS]	61	25.25 (20.408)	-1.00 (1.561)	34	23.14 (14.609)	-2.17 (2.202)	1.16 (-4.204, 6.529)	0.6679
Hedges' g SMD							0.09 (-0.327, 0.512)	0.6647
NED/CR [Chemo]	37	26.82 (21.783)	-1.80 (2.431)	20	20.67 (13.663)	-2.46 (3.500)	0.66 (-7.940, 9.257)	0.8785
Hedges' g SMD							0.04 (-0.501, 0.587)	0.8768
PR	41	23.10 (18.968)	-0.02 (1.610)	22	24.32 (13.827)	1.42 (2.402)	-1.44 (-7.254, 4.370)	0.6202
Hedges' g SMD							-0.13 (-0.652, 0.385)	0.6131
Int. p-value								0.8218
Screening laboratory tBRCA status (IVRS)								
tBRCAm	131	27.11 (18.425)	-3.02 (1.105)	57	21.61 (14.198)	-1.77 (1.764)	-1.25 (-5.376, 2.877)	0.5509
Hedges' g SMD							-0.10 (-0.408, 0.214)	0.5418
non-tBRCAm	90	23.28 (19.289)	-1.83 (1.116)	61	26.53 (18.970)	-2.04 (1.439)	0.21 (-3.394, 3.821)	0.9070
Hedges' g SMD							0.02 (-0.305, 0.345)	0.9060
Int. p-value								0.2883
First line treatment outcome (eCRF)								
NED [PDS]	80	28.61 (18.254)	-5.45 (1.217)	41	26.22 (21.689)	-3.49 (1.759)	-1.95 (-6.194, 2.287)	0.3636
Hedges' g SMD							-0.18 (-0.553, 0.201)	0.3597
NED/CR [IDS]	60	23.22 (19.810)	-1.68 (1.522)	29	22.53 (14.520)	-1.34 (2.353)	-0.33 (-5.906, 5.241)	0.9059
Hedges' g SMD							-0.03 (-0.471, 0.416)	0.9040
NED/CR [Chemo]	34	25.00 (19.249)	-2.21 (2.508)	17	25.10 (13.023)	-3.45 (3.852)	1.24 (-8.021, 10.503)	0.7884
Hedges' g SMD							0.08 (-0.501, 0.664)	0.7847
PR	44	24.10 (18.580)	2.51 (1.573)	30	22.28 (14.118)	1.02 (2.081)	1.49 (-3.725, 6.706)	0.5700
Hedges' g SMD							0.14 (-0.328, 0.601)	0.5657
Int. p-value								0.5529

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.3 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	128	27.27 (18.533)	-2.97 (1.119)	58	21.81 (14.157)	-1.70 (1.749)	-1.27 (-5.385, 2.850)	0.5444
Hedges' g SMD							-0.10 (-0.408, 0.212)	0.5358
non-tBRCAm	93	23.17 (19.082)	-1.97 (1.096)	60	26.42 (19.109)	-2.03 (1.450)	0.06 (-3.543, 3.659)	0.9747
Hedges' g SMD							0.01 (-0.319, 0.330)	0.9744
Int. p-value								0.2910
Age group								
<65 years	162	26.47 (18.922)	-3.09 (0.975)	88	24.89 (17.461)	-3.05 (1.392)	-0.04 (-3.388, 3.310)	0.9816
Hedges' g SMD							0.00 (-0.263, 0.256)	0.9814
>=65 years	59	23.00 (18.506)	-0.64 (1.296)	30	22.00 (15.403)	0.70 (1.960)	-1.35 (-6.028, 3.336)	0.5686
Hedges' g SMD							-0.13 (-0.570, 0.309)	0.5609
Int. p-value								0.8819
FIGO Stage (Disease state)								
III	158	27.27 (19.953)	-2.58 (0.967)	83	25.34 (17.842)	-3.09 (1.391)	0.51 (-2.835, 3.848)	0.7657
Hedges' g SMD							0.04 (-0.225, 0.307)	0.7630
IV	63	21.22 (14.959)	-1.79 (1.428)	35	21.33 (14.444)	0.27 (2.159)	-2.05 (-7.193, 3.090)	0.4301
Hedges' g SMD							-0.17 (-0.585, 0.242)	0.4166
Int. p-value								0.1306
Region								
Europe	212	26.10 (18.908)	-2.66 (0.819)	112	24.73 (17.017)	-1.80 (1.198)	-0.86 (-3.718, 1.994)	0.5532
Hedges' g SMD							-0.07 (-0.300, 0.158)	0.5461
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.3 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	163	23.92 (16.657)	-1.62 (0.840)	90	22.96 (17.275)	-1.41 (1.172)	-0.21 (-3.045, 2.635)	0.8868
Hedges' g SMD							-0.02 (-0.276, 0.239)	0.8859
(1) Restricted activity	54	30.27 (24.020)	-5.55 (2.008)	28	27.98 (15.512)	-3.51 (3.061)	-2.04 (-9.325, 5.250)	0.5797
Hedges' g SMD							-0.13 (-0.589, 0.325)	0.5704
Int. p-value								0.8108
Baseline CA-125 value								
<=ULN	196	25.55 (18.846)	-3.03 (0.839)	105	25.11 (17.381)	-1.96 (1.212)	-1.08 (-3.977, 1.825)	0.4660
Hedges' g SMD							-0.09 (-0.327, 0.148)	0.4592
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	221	25.55 (18.833)	-2.44 (0.794)	118	24.15 (16.945)	-1.96 (1.147)	-0.48 (-3.229, 2.263)	0.7295
Hedges' g SMD							-0.04 (-0.264, 0.183)	0.7255
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	143	26.12 (18.916)	-3.92 (0.934)	71	24.72 (18.881)	-2.71 (1.386)	-1.21 (-4.509, 2.084)	0.4693
Hedges' g SMD							-0.11 (-0.391, 0.178)	0.4635
Residue	71	25.45 (19.233)	0.35 (1.514)	40	22.38 (13.418)	-0.77 (2.149)	1.11 (-4.105, 6.334)	0.6729
Hedges' g SMD							0.08 (-0.303, 0.472)	0.6684
Int. p-value								0.2232

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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.3 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	131	26.48 (18.379)	-3.87 (1.005)	70	24.90 (18.706)	-2.35 (1.426)	-1.52 (-4.967, 1.919)	0.3837
Hedges' g SMD							-0.13 (-0.421, 0.160)	0.3792
Interval	83	24.98 (19.969)	-0.29 (1.371)	41	22.11 (13.939)	-1.60 (2.094)	1.31 (-3.649, 6.270)	0.6019
Hedges' g SMD							0.10 (-0.273, 0.476)	0.5941
Int. p-value								0.3886
Myriad tumour BRCA mutation status								
tBRCAm	137	26.60 (18.200)	-3.21 (1.059)	66	23.41 (15.690)	-2.22 (1.602)	-0.99 (-4.782, 2.806)	0.6081
Hedges' g SMD							-0.08 (-0.372, 0.216)	0.6021
Non-tBRCAm	84	23.83 (19.813)	-1.43 (1.181)	52	25.10 (18.528)	-1.50 (1.592)	0.06 (-3.863, 3.986)	0.9752
Hedges' g SMD							0.01 (-0.340, 0.351)	0.9750
Int. p-value								0.4032
Status somatic BRCA mutations								
sBRCAm	18	20.74 (16.151)	0.52 (2.352)	6	12.22 (7.794)	-1.93 (4.229)	2.45 (-7.777, 12.681)	0.6224
Hedges' g SMD							0.24 (-0.692, 1.162)	0.6190
gBRCAm	57	27.37 (18.969)	0.32 (1.907)	26	21.03 (12.464)	-1.70 (3.001)	2.01 (-5.095, 9.121)	0.5747
Hedges' g SMD							0.14 (-0.328, 0.600)	0.5664
Non-BRCAm	37	25.00 (22.845)	-2.16 (1.614)	22	24.09 (21.527)	-0.06 (2.332)	-2.10 (-7.792, 3.599)	0.4635
Hedges' g SMD							-0.20 (-0.731, 0.327)	0.4543
Int. p-value								0.8042

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.4 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	59.60 (26.102)	-16.58 (1.796)	42	59.26 (26.307)	-12.70 (2.616)	-3.88 (-10.163, 2.400)	0.2236
Hedges' g SMD							-0.23 (-0.609, 0.139)	0.2186
NED/CR [IDS]	60	51.76 (29.795)	-8.45 (2.510)	34	52.78 (29.659)	-14.46 (3.510)	6.01 (-2.560, 14.588)	0.1668
Hedges' g SMD							0.30 (-0.122, 0.724)	0.1631
NED/CR [Chemo]	36	58.02 (28.497)	-9.22 (3.182)	20	50.00 (24.845)	-13.63 (4.690)	4.41 (-7.073, 15.893)	0.4434
Hedges' g SMD							0.22 (-0.328, 0.768)	0.4318
PR	40	55.28 (24.844)	-14.10 (3.094)	22	63.64 (24.829)	-6.25 (4.720)	-7.84 (-19.274, 3.584)	0.1735
Hedges' g SMD							-0.38 (-0.903, 0.147)	0.1582
Int. p-value								0.0489*
Screening laboratory tBRCA status (IVRS)								
tBRCAm	131	58.52 (26.939)	-12.57 (1.590)	57	55.26 (26.858)	-14.54 (2.550)	1.97 (-3.960, 7.904)	0.5127
Hedges' g SMD							0.11 (-0.205, 0.417)	0.5042
non-tBRCAm	86	53.10 (27.818)	-13.10 (1.850)	61	57.92 (27.150)	-11.19 (2.358)	-1.91 (-7.844, 4.022)	0.5251
Hedges' g SMD							-0.11 (-0.436, 0.221)	0.5210
Int. p-value								0.6449
First line treatment outcome (eCRF)								
NED [PDS]	79	61.11 (26.998)	-15.63 (1.890)	41	57.99 (26.030)	-11.94 (2.706)	-3.69 (-10.235, 2.847)	0.2657
Hedges' g SMD							-0.22 (-0.594, 0.162)	0.2628
NED/CR [IDS]	59	52.07 (29.450)	-9.57 (2.557)	29	49.81 (29.639)	-13.38 (3.882)	3.81 (-5.430, 13.053)	0.4144
Hedges' g SMD							0.19 (-0.257, 0.634)	0.4072
NED/CR [Chemo]	33	54.55 (27.828)	-10.25 (3.349)	17	51.63 (24.514)	-9.11 (5.241)	-1.14 (-13.786, 11.504)	0.8560
Hedges' g SMD							-0.06 (-0.641, 0.529)	0.8513
PR	43	55.56 (24.488)	-11.09 (2.816)	30	62.78 (25.360)	-13.93 (3.747)	2.83 (-6.588, 12.253)	0.5498
Hedges' g SMD							0.14 (-0.322, 0.612)	0.5428
Int. p-value								0.3316

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis.
Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.4 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	128	58.51 (27.100)	-12.09 (1.604)	58	54.89 (26.777)	-14.90 (2.523)	2.81 (-3.093, 8.715)	0.3488
Hedges' g SMD							0.15 (-0.159, 0.462)	0.3394
non-tBRCAm	89	53.31 (27.584)	-13.80 (1.811)	60	58.33 (27.188)	-10.83 (2.373)	-2.97 (-8.883, 2.935)	0.3214
Hedges' g SMD							-0.17 (-0.496, 0.160)	0.3155
Int. p-value								0.3589
Age group								
<65 years	160	57.99 (25.869)	-12.30 (1.417)	89	58.05 (26.232)	-14.16 (2.019)	1.85 (-3.008, 6.712)	0.4536
Hedges' g SMD							0.10 (-0.159, 0.360)	0.4466
>=65 years	57	51.85 (30.956)	-13.26 (2.270)	29	52.30 (29.002)	-11.40 (3.452)	-1.86 (-10.087, 6.375)	0.6548
Hedges' g SMD							-0.10 (-0.552, 0.343)	0.6476
Int. p-value								0.7172
FIGO Stage (Disease state)								
III	154	56.85 (28.355)	-13.15 (1.469)	82	56.23 (28.306)	-14.04 (2.102)	0.89 (-4.166, 5.941)	0.7296
Hedges' g SMD							0.05 (-0.220, 0.316)	0.7267
IV	63	55.20 (24.923)	-11.83 (1.913)	36	57.56 (23.836)	-13.26 (3.109)	1.43 (-5.830, 8.680)	0.6971
Hedges' g SMD							0.09 (-0.324, 0.495)	0.6822
Int. p-value								0.7150
Region								
Europe	209	57.10 (27.406)	-12.89 (1.239)	112	57.39 (26.974)	-13.14 (1.815)	0.25 (-4.077, 4.570)	0.9107
Hedges' g SMD							0.01 (-0.216, 0.243)	0.9089
Japan	8	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.4 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	161	54.76 (26.534)	-11.64 (1.420)	90	56.05 (27.979)	-11.29 (1.975)	-0.35 (-5.136, 4.446)	0.8872
Hedges' g SMD							-0.02 (-0.277, 0.239)	0.8862
(1) Restricted activity	52	61.86 (28.626)	-16.06 (2.351)	28	58.53 (23.594)	-21.30 (3.745)	5.25 (-3.547, 14.040)	0.2388
Hedges' g SMD							0.29 (-0.173, 0.750)	0.2204
Int. p-value								0.2736
Baseline CA-125 value								
<=ULN	192	56.48 (27.537)	-12.77 (1.270)	105	55.93 (26.468)	-12.39 (1.828)	-0.38 (-4.760, 4.001)	0.8648
Hedges' g SMD							-0.02 (-0.259, 0.217)	0.8626
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	217	56.37 (27.356)	-12.66 (1.203)	118	56.64 (26.927)	-13.31 (1.736)	0.65 (-3.506, 4.803)	0.7589
Hedges' g SMD							0.04 (-0.188, 0.260)	0.7549
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	141	57.05 (28.218)	-13.49 (1.492)	71	55.24 (27.997)	-13.01 (2.205)	-0.48 (-5.731, 4.769)	0.8569
Hedges' g SMD							-0.03 (-0.312, 0.259)	0.8550
Residue	69	57.33 (25.892)	-11.76 (2.269)	40	59.44 (25.387)	-13.28 (3.229)	1.52 (-6.324, 9.359)	0.7016
Hedges' g SMD							0.08 (-0.312, 0.467)	0.6965
Int. p-value								0.4759

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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.4 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	129	59.04 (26.869)	-15.18 (1.531)	70	58.65 (24.712)	-12.68 (2.162)	-2.50 (-7.721, 2.729)	0.3473
Hedges' g SMD							-0.14 (-0.432, 0.150)	0.3428
Interval	81	54.12 (28.161)	-9.44 (2.090)	41	53.52 (30.675)	-13.91 (3.153)	4.47 (-3.023, 11.961)	0.2399
Hedges' g SMD							0.23 (-0.146, 0.607)	0.2309
Int. p-value								0.1525
Myriad tumour BRCA mutation status								
tBRCAm	137	57.50 (26.683)	-12.11 (1.539)	66	54.63 (27.034)	-14.58 (2.353)	2.47 (-3.077, 8.016)	0.3810
Hedges' g SMD							0.13 (-0.160, 0.428)	0.3720
Non-tBRCAm	80	54.44 (28.539)	-13.90 (1.946)	52	59.19 (26.833)	-11.26 (2.584)	-2.63 (-9.041, 3.773)	0.4173
Hedges' g SMD							-0.15 (-0.496, 0.203)	0.4119
Int. p-value								0.3788
Status somatic BRCA mutations								
sBRCAm	18	55.56 (24.403)	-12.35 (3.061)	6	53.70 (30.157)	-18.77 (5.576)	6.43 (-6.871, 19.724)	0.3268
Hedges' g SMD							0.47 (-0.463, 1.408)	0.3225
gBRCAm	57	56.14 (27.752)	-8.94 (2.342)	27	59.47 (27.598)	-15.71 (3.702)	6.77 (-1.967, 15.502)	0.1270
Hedges' g SMD							0.37 (-0.093, 0.830)	0.1174
Non-BRCAm	33	55.89 (31.240)	-16.58 (2.611)	22	52.53 (30.895)	-10.64 (3.570)	-5.94 (-14.845, 2.964)	0.1861
Hedges' g SMD							-0.37 (-0.917, 0.172)	0.1797
Int. p-value								0.1321

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.5 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Hormonal (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	31.89 (32.829)	-6.22 (2.087)	42	33.33 (31.666)	-0.66 (3.037)	-5.55 (-12.849, 1.741)	0.1344
Hedges' g SMD							-0.29 (-0.664, 0.085)	0.1303
NED/CR [IDS]	61	25.41 (30.823)	1.52 (2.374)	33	17.68 (30.029)	-1.84 (3.400)	3.35 (-4.923, 11.630)	0.4230
Hedges' g SMD							0.18 (-0.248, 0.600)	0.4161
NED/CR [Chemo]	37	17.57 (25.137)	-2.78 (3.015)	20	25.83 (26.752)	1.54 (4.231)	-4.32 (-14.778, 6.130)	0.4108
Hedges' g SMD							-0.23 (-0.776, 0.316)	0.4088
PR	41	NC	NC	22	NC	NC	NC	NC
Int. p-value								0.5161
Screening laboratory tBRCA status (IVRS)								
tBRCAm	131	26.46 (29.226)	-2.21 (1.637)	56	29.17 (31.342)	-0.52 (2.624)	-1.68 (-7.787, 4.418)	0.5867
Hedges' g SMD							-0.09 (-0.401, 0.225)	0.5806
non-tBRCAm	89	24.53 (30.679)	-3.53 (1.903)	61	24.04 (30.961)	0.27 (2.405)	-3.80 (-9.857, 2.263)	0.2176
Hedges' g SMD							-0.21 (-0.533, 0.120)	0.2153
Int. p-value								0.9983
First line treatment outcome (eCRF)								
NED [PDS]	79	32.28 (32.395)	-6.86 (2.144)	41	33.33 (32.059)	-0.20 (3.064)	-6.66 (-14.066, 0.749)	0.0776
Hedges' g SMD							-0.34 (-0.724, 0.036)	0.0761
NED/CR [IDS]	60	23.33 (30.097)	2.35 (2.322)	28	12.50 (25.909)	-0.04 (3.631)	2.39 (-6.258, 11.040)	0.5839
Hedges' g SMD							0.13 (-0.320, 0.578)	0.5735
NED/CR [Chemo]	34	NC	NC	17	NC	NC	NC	NC
PR	44	NC	NC	30	NC	NC	NC	NC
Int. p-value								0.3251
Screening laboratory tBRCA status (eCRF)								

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Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.5 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Hormonal (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
tBRCAm	128	26.95 (29.365)	-2.25 (1.670)	57	30.12 (31.879)	-0.34 (2.622)	-1.91 (-8.046, 4.225)	0.5398
Hedges' g SMD							-0.10 (-0.411, 0.213)	0.5335
non-tBRCAm	92	23.91 (30.393)	-3.43 (1.844)	60	23.06 (30.236)	0.09 (2.393)	-3.53 (-9.495, 2.445)	0.2451
Hedges' g SMD							-0.19 (-0.521, 0.131)	0.2421
Int. p-value								0.8439
Age group								
<65 years	162	29.84 (31.218)	-2.59 (1.543)	88	31.82 (31.928)	-0.78 (2.208)	-1.81 (-7.110, 3.500)	0.5034
Hedges' g SMD							-0.09 (-0.350, 0.170)	0.4975
>=65 years	58	14.08 (21.585)	-2.84 (1.511)	29	10.34 (22.009)	-0.28 (2.252)	-2.56 (-7.972, 2.860)	0.3506
Hedges' g SMD							-0.22 (-0.663, 0.231)	0.3430
Int. p-value								0.9803
FIGO Stage (Disease state)								
III	157	25.69 (28.836)	-2.99 (1.504)	81	27.16 (32.323)	0.49 (2.181)	-3.48 (-8.701, 1.743)	0.1907
Hedges' g SMD							-0.18 (-0.450, 0.087)	0.1857
IV	63	25.66 (32.216)	-2.75 (2.065)	36	25.00 (28.591)	-3.71 (2.986)	0.96 (-6.245, 8.168)	0.7918
Hedges' g SMD							0.06 (-0.353, 0.466)	0.7878
Int. p-value								0.5197
Region								
Europe	211	26.30 (30.155)	-2.88 (1.281)	111	27.78 (31.409)	-0.41 (1.866)	-2.46 (-6.915, 1.993)	0.2778
Hedges' g SMD							-0.13 (-0.359, 0.101)	0.2704
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC
ECOG performance status at Baseline								

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.5 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Hormonal (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
(0) Normal activity	163	28.22 (31.824)	-4.63 (1.468)	90	25.74 (30.309)	-1.49 (2.034)	-3.15 (-8.091, 1.798)	0.2113
Hedges' g SMD							-0.17 (-0.423, 0.092)	0.2081
(1) Restricted activity	53	18.55 (21.844)	2.89 (2.284)	27	29.01 (34.154)	1.46 (3.587)	1.43 (-7.050, 9.917)	0.7377
Hedges' g SMD							0.08 (-0.382, 0.546)	0.7290
Int. p-value								0.4544
Baseline CA-125 value								
<=ULN	195	25.38 (29.666)	-2.74 (1.312)	104	27.40 (31.410)	-0.54 (1.891)	-2.20 (-6.731, 2.328)	0.3396
Hedges' g SMD							-0.12 (-0.356, 0.121)	0.3329
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	220	25.68 (29.768)	-2.78 (1.234)	117	26.50 (31.115)	-0.40 (1.777)	-2.38 (-6.637, 1.873)	0.2716
Hedges' g SMD							-0.13 (-0.352, 0.097)	0.2652
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	27.82 (31.556)	-3.01 (1.549)	70	24.52 (31.177)	-0.12 (2.307)	-2.89 (-8.372, 2.596)	0.3004
Hedges' g SMD							-0.15 (-0.440, 0.133)	0.2937
Residue	71	22.30 (27.013)	-2.41 (2.183)	40	28.33 (29.284)	-0.72 (3.054)	-1.69 (-9.145, 5.765)	0.6541
Hedges' g SMD							-0.09 (-0.477, 0.298)	0.6505
Int. p-value								0.7386
Timing of cytoreductive surgery								
Upfront	130	26.54 (30.689)	-5.05 (1.647)	70	30.48 (30.026)	0.53 (2.306)	-5.59 (-11.177, 0.003)	0.0501

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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.5 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Hormonal (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Hedges' g SMD							-0.29 (-0.586, -0.002)	0.0488*
Interval	83	25.10 (29.491)	0.68 (1.965)	40	17.92 (29.811)	-0.61 (3.022)	1.30 (-5.871, 8.462)	0.7211
Hedges' g SMD							0.07 (-0.307, 0.448)	0.7149
Int. p-value								0.3429
Myriad tumour BRCA mutation status								
tBRCAm	137	26.16 (29.275)	-2.91 (1.588)	65	29.74 (32.741)	-1.08 (2.419)	-1.84 (-7.547, 3.870)	0.5262
Hedges' g SMD							-0.10 (-0.392, 0.198)	0.5199
Non-tBRCAm	83	24.90 (30.729)	-2.40 (1.977)	52	22.44 (28.751)	0.88 (2.608)	-3.28 (-9.753, 3.195)	0.3183
Hedges' g SMD							-0.18 (-0.525, 0.169)	0.3152
Int. p-value								0.9017
Status somatic BRCA mutations								
sBRCAm	18	NC	NC	5	NC	NC	NC	NC
gBRCAm	57	27.78 (27.877)	5.23 (2.655)	27	24.69 (30.791)	2.74 (4.196)	2.49 (-7.431, 12.410)	0.6188
Hedges' g SMD							0.12 (-0.339, 0.578)	0.6089
Non-BRCAm	36	25.00 (28.031)	-1.65 (2.614)	22	18.94 (24.825)	-0.25 (3.660)	-1.41 (-10.454, 7.639)	0.7565
Hedges' g SMD							-0.09 (-0.616, 0.445)	0.7524
Int. p-value								0.8212

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.6 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	82	50.00 (35.331)	-20.55 (2.544)	42	50.79 (31.441)	-21.63 (3.694)	1.08 (-7.800, 9.955)	0.8105
Hedges' g SMD							0.05 (-0.326, 0.418)	0.8089
NED/CR [IDS]	61	36.61 (35.332)	-12.50 (2.170)	34	39.22 (37.128)	-12.62 (3.038)	0.11 (-7.345, 7.570)	0.9761
Hedges' g SMD							0.01 (-0.413, 0.426)	0.9758
NED/CR [Chemo]	37	38.74 (31.440)	-3.02 (3.066)	20	41.67 (38.805)	-11.63 (4.531)	8.61 (-2.320, 19.530)	0.1200
Hedges' g SMD							0.44 (-0.109, 0.992)	0.1159
PR	41	35.77 (31.964)	-7.53 (2.697)	22	43.94 (36.567)	-7.21 (4.358)	-0.32 (-10.658, 10.021)	0.9509
Hedges' g SMD							-0.02 (-0.535, 0.501)	0.9485
Int. p-value								0.9243
Screening laboratory tBRCA status (IVRS)								
tBRCAm	131	40.59 (34.536)	-11.13 (1.671)	57	36.26 (30.719)	-9.58 (2.668)	-1.55 (-7.764, 4.667)	0.6235
Hedges' g SMD							-0.08 (-0.390, 0.232)	0.6171
non-tBRCAm	90	43.52 (34.501)	-17.01 (2.222)	61	52.46 (37.618)	-20.48 (2.852)	3.47 (-3.696, 10.635)	0.3402
Hedges' g SMD							0.16 (-0.166, 0.486)	0.3353
Int. p-value								0.2407
First line treatment outcome (eCRF)								
NED [PDS]	80	52.50 (34.890)	-20.40 (2.630)	41	47.97 (31.666)	-22.76 (3.763)	2.36 (-6.736, 11.459)	0.6083
Hedges' g SMD							0.10 (-0.278, 0.476)	0.6066
NED/CR [IDS]	60	35.00 (35.482)	-12.40 (2.214)	29	40.23 (37.932)	-10.73 (3.404)	-1.68 (-9.807, 6.456)	0.6826
Hedges' g SMD							-0.09 (-0.538, 0.349)	0.6755
NED/CR [Chemo]	34	37.25 (30.168)	-4.07 (3.094)	17	52.94 (38.295)	-13.88 (5.067)	9.81 (-2.170, 21.795)	0.1060
Hedges' g SMD							0.51 (-0.083, 1.099)	0.0921
PR	44	35.98 (31.936)	-6.74 (2.587)	30	37.78 (34.722)	-9.14 (3.543)	2.40 (-6.370, 11.162)	0.5867
Hedges' g SMD							0.13 (-0.334, 0.596)	0.5804
Int. p-value								0.9337

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Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.6 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	128	40.89 (34.801)	-10.87 (1.682)	58	36.21 (30.451)	-9.67 (2.631)	-1.20 (-7.368, 4.966)	0.7011
Hedges' g SMD							-0.06 (-0.372, 0.248)	0.6961
non-tBRCAm	93	43.01 (34.167)	-17.25 (2.191)	60	52.78 (37.853)	-20.43 (2.882)	3.18 (-3.999, 10.356)	0.3830
Hedges' g SMD							0.15 (-0.179, 0.471)	0.3773
Int. p-value								0.3086
Age group								
<65 years	162	38.48 (34.417)	-13.62 (1.509)	88	40.53 (34.072)	-14.21 (2.160)	0.60 (-4.596, 5.789)	0.8212
Hedges' g SMD							0.03 (-0.229, 0.290)	0.8187
>=65 years	59	50.85 (33.250)	-12.54 (2.739)	30	56.67 (36.515)	-15.89 (4.020)	3.35 (-6.319, 13.020)	0.4930
Hedges' g SMD							0.16 (-0.285, 0.596)	0.4888
Int. p-value								0.5458
FIGO Stage (Disease state)								
III	158	44.62 (35.556)	-13.93 (1.683)	83	47.99 (34.472)	-17.06 (2.407)	3.13 (-2.662, 8.915)	0.2884
Hedges' g SMD							0.15 (-0.121, 0.411)	0.2838
IV	63	34.66 (30.717)	-11.64 (2.132)	35	36.67 (36.335)	-9.52 (3.339)	-2.12 (-9.988, 5.745)	0.5935
Hedges' g SMD							-0.12 (-0.531, 0.296)	0.5790
Int. p-value								0.1740
Region								
Europe	212	42.30 (34.815)	-13.55 (1.384)	112	44.64 (36.019)	-14.18 (2.010)	0.63 (-4.173, 5.433)	0.7965
Hedges' g SMD							0.03 (-0.198, 0.260)	0.7934
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.6 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	163	41.31 (33.709)	-12.72 (1.579)	90	39.81 (34.682)	-14.07 (2.182)	1.36 (-3.949, 6.661)	0.6150
Hedges' g SMD							0.07 (-0.191, 0.324)	0.6130
(1) Restricted activity	54	42.59 (36.725)	-16.10 (2.673)	28	60.12 (33.129)	-15.71 (4.353)	-0.38 (-10.669, 9.905)	0.9414
Hedges' g SMD							-0.02 (-0.475, 0.438)	0.9380
Int. p-value								0.9244
Baseline CA-125 value								
<=ULN	196	41.50 (34.653)	-13.96 (1.428)	105	46.03 (34.863)	-14.53 (2.049)	0.58 (-4.342, 5.493)	0.8181
Hedges' g SMD							0.03 (-0.209, 0.265)	0.8156
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	221	41.78 (34.474)	-13.38 (1.345)	118	44.63 (35.263)	-14.71 (1.933)	1.33 (-3.308, 5.961)	0.5738
Hedges' g SMD							0.07 (-0.158, 0.289)	0.5686
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	143	44.64 (36.019)	-17.49 (1.758)	71	45.54 (34.728)	-18.06 (2.589)	0.57 (-5.602, 6.740)	0.8559
Hedges' g SMD							0.03 (-0.258, 0.311)	0.8544
Residue	71	38.50 (31.319)	-5.32 (2.096)	40	42.50 (37.544)	-10.48 (2.978)	5.16 (-2.052, 12.381)	0.1588
Hedges' g SMD							0.28 (-0.106, 0.673)	0.1535
Int. p-value								0.8333

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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.6 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	131	48.85 (33.791)	-15.91 (1.928)	70	48.10 (35.160)	-17.02 (2.705)	1.11 (-5.437, 7.663)	0.7380
Hedges' g SMD							0.05 (-0.240, 0.340)	0.7367
Interval	83	32.73 (33.682)	-9.14 (1.874)	41	38.21 (35.987)	-10.44 (2.858)	1.30 (-5.503, 8.099)	0.7059
Hedges' g SMD							0.07 (-0.301, 0.448)	0.6993
Int. p-value								0.7796
Myriad tumour BRCA mutation status								
tBRCAm	137	39.17 (35.274)	-11.04 (1.624)	66	41.41 (33.492)	-11.17 (2.457)	0.13 (-5.673, 5.942)	0.9637
Hedges' g SMD							0.01 (-0.287, 0.301)	0.9631
Non-tBRCAm	84	46.03 (32.891)	-17.76 (2.356)	52	48.72 (37.318)	-20.63 (3.168)	2.87 (-4.943, 10.673)	0.4693
Hedges' g SMD							0.13 (-0.217, 0.475)	0.4650
Int. p-value								0.7921
Status somatic BRCA mutations								
sBRCAm	18	25.93 (30.903)	-10.22 (3.393)	6	30.56 (37.143)	-0.72 (6.089)	-9.49 (-24.008, 5.022)	0.1881
Hedges' g SMD							-0.63 (-1.576, 0.313)	0.1900
gBRCAm	57	36.26 (34.521)	-11.84 (2.270)	26	35.90 (25.251)	-13.38 (3.681)	1.54 (-7.095, 10.166)	0.7236
Hedges' g SMD							0.09 (-0.378, 0.550)	0.7159
Non-BRCAm	37	41.44 (32.778)	-18.30 (2.936)	22	43.18 (33.594)	-20.40 (4.183)	2.10 (-8.162, 12.362)	0.6831
Hedges' g SMD							0.11 (-0.416, 0.640)	0.6781
Int. p-value								0.6334

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.6.4.7 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Other single items (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	81	25.99 (25.985)	-10.97 (1.068)	42	28.57 (25.021)	-14.26 (1.593)	3.29 (-0.510, 7.088)	0.0891
Hedges' g SMD							0.33 (-0.043, 0.707)	0.0831
NED/CR [IDS]	61	19.40 (18.782)	-4.92 (1.516)	34	24.51 (25.093)	-12.74 (2.150)	7.82 (2.567, 13.075)	0.0040*
Hedges' g SMD							0.64 (0.212, 1.071)	0.0034*
NED/CR [Chemo]	37	27.33 (21.769)	-13.29 (1.742)	20	32.50 (24.830)	-18.35 (2.626)	5.06 (-1.284, 11.397)	0.1154
Hedges' g SMD							0.45 (-0.098, 1.004)	0.1069
PR	41	24.12 (20.179)	-7.58 (1.935)	23	28.26 (28.521)	-9.39 (2.874)	1.80 (-5.132, 8.740)	0.6033
Hedges' g SMD							0.14 (-0.373, 0.649)	0.5965
Int. p-value								0.2171
Screening laboratory tBRCA status (IVRS)								
tBRCAm	130	24.55 (22.582)	-8.32 (0.993)	58	26.39 (24.655)	-13.16 (1.585)	4.84 (1.150, 8.529)	0.0104*
Hedges' g SMD							0.42 (0.105, 0.730)	0.0089*
non-tBRCAm	90	23.30 (22.408)	-10.47 (1.154)	61	29.55 (26.440)	-13.83 (1.510)	3.36 (-0.414, 7.139)	0.0806
Hedges' g SMD							0.30 (-0.031, 0.623)	0.0757
Int. p-value								0.6830
First line treatment outcome (eCRF)								
NED [PDS]	79	27.92 (26.509)	-11.86 (1.076)	41	27.37 (25.020)	-15.07 (1.577)	3.21 (-0.574, 6.990)	0.0956
Hedges' g SMD							0.33 (-0.052, 0.707)	0.0912
NED/CR [IDS]	60	18.33 (18.184)	-4.47 (1.568)	29	22.70 (22.665)	-12.20 (2.396)	7.73 (2.024, 13.440)	0.0085*
Hedges' g SMD							0.62 (0.166, 1.072)	0.0074*
NED/CR [Chemo]	34	22.55 (17.986)	-9.89 (1.904)	17	35.78 (23.051)	-12.72 (3.216)	2.83 (-4.805, 10.460)	0.4579
Hedges' g SMD							0.23 (-0.349, 0.819)	0.4305
PR	44	25.88 (21.364)	-8.06 (1.969)	31	28.85 (29.777)	-14.25 (2.549)	6.19 (-0.258, 12.646)	0.0596
Hedges' g SMD							0.45 (-0.013, 0.918)	0.0566
Int. p-value								0.5887

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.7 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Other single items (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	127	24.61 (22.804)	-8.12 (1.006)	59	26.13 (24.522)	-13.18 (1.575)	5.06 (1.370, 8.746)	0.0075*
Hedges' g SMD							0.43 (0.123, 0.747)	0.0063*
non-tBRCAm	93	23.27 (22.101)	-10.70 (1.130)	60	29.86 (26.553)	-13.79 (1.514)	3.09 (-0.665, 6.844)	0.1060
Hedges' g SMD							0.27 (-0.052, 0.600)	0.0998
Int. p-value								0.5265
Age group								
<65 years	162	22.36 (21.052)	-8.02 (0.829)	89	25.91 (24.489)	-13.52 (1.204)	5.50 (2.617, 8.386)	0.0002*
Hedges' g SMD							0.51 (0.243, 0.768)	0.0002*
>=65 years	58	28.74 (25.637)	-12.96 (1.675)	30	34.26 (27.886)	-13.02 (2.482)	0.07 (-5.905, 6.041)	0.9820
Hedges' g SMD							0.01 (-0.436, 0.446)	0.9817
Int. p-value								0.0742
FIGO Stage (Disease state)								
III	157	25.65 (23.972)	-11.04 (0.875)	83	31.16 (24.583)	-14.64 (1.263)	3.59 (0.562, 6.627)	0.0204*
Hedges' g SMD							0.32 (0.054, 0.589)	0.0186*
IV	63	20.02 (17.724)	-4.35 (1.573)	36	20.76 (26.523)	-10.24 (2.388)	5.89 (0.199, 11.577)	0.0427*
Hedges' g SMD							0.44 (0.029, 0.858)	0.0360*
Int. p-value								0.6977
Region								
Europe	211	24.28 (22.715)	-9.53 (0.768)	113	28.49 (25.864)	-13.51 (1.131)	3.98 (1.290, 6.677)	0.0039*
Hedges' g SMD							0.35 (0.116, 0.577)	0.0032*
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.7 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Other single items (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	163	22.43 (21.480)	-8.10 (0.871)	91	26.62 (26.366)	-12.61 (1.216)	4.51 (1.560, 7.460)	0.0029*
Hedges' g SMD							0.40 (0.139, 0.657)	0.0026*
(1) Restricted activity	53	28.88 (24.859)	-12.60 (1.531)	28	32.54 (22.425)	-13.34 (2.492)	0.74 (-5.080, 6.556)	0.8014
Hedges' g SMD							0.06 (-0.396, 0.520)	0.7924
Int. p-value								0.7608
Baseline CA-125 value								
<=ULN	195	23.23 (22.221)	-9.12 (0.771)	106	28.51 (25.647)	-13.12 (1.117)	4.00 (1.328, 6.677)	0.0035*
Hedges' g SMD							0.36 (0.124, 0.600)	0.0029*
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	220	24.04 (22.468)	-9.23 (0.745)	119	28.01 (25.527)	-13.36 (1.084)	4.13 (1.538, 6.718)	0.0019*
Hedges' g SMD							0.36 (0.139, 0.588)	0.0015*
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	142	23.83 (23.823)	-9.35 (0.879)	71	25.78 (24.020)	-13.80 (1.314)	4.45 (1.330, 7.565)	0.0054*
Hedges' g SMD							0.42 (0.128, 0.703)	0.0047*
Residue	71	24.88 (20.138)	-9.10 (1.384)	40	30.76 (27.766)	-14.48 (2.029)	5.38 (0.493, 10.264)	0.0313*
Hedges' g SMD							0.44 (0.050, 0.834)	0.0272*
Int. p-value								0.8901

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SMD = standardised mean difference. * p<0.05.

Table 2.6.4.7 PAOLA1: Summary of subgroup analysis of change from baseline in EORTC QLQ-OV28 Symptom scale/items: Other single items (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	130	26.71 (24.274)	-11.70 (0.875)	70	29.01 (25.174)	-15.05 (1.265)	3.36 (0.323, 6.391)	0.0303*
Hedges' g SMD							0.33 (0.036, 0.620)	0.0278*
Interval	83	20.21 (19.227)	-4.94 (1.325)	41	25.14 (25.969)	-12.71 (2.026)	7.77 (2.964, 12.571)	0.0018*
Hedges' g SMD							0.62 (0.241, 1.006)	0.0014*
Int. p-value								0.1624
Myriad tumour BRCA mutation status								
tBRCAm	136	24.65 (22.502)	-9.41 (0.957)	67	28.73 (25.309)	-14.53 (1.458)	5.12 (1.678, 8.557)	0.0037*
Hedges' g SMD							0.45 (0.151, 0.742)	0.0031*
Non-tBRCAm	84	23.05 (22.512)	-8.92 (1.199)	52	27.08 (26.022)	-11.85 (1.636)	2.92 (-1.098, 6.948)	0.1527
Hedges' g SMD							0.26 (-0.090, 0.604)	0.1465
Int. p-value								0.8001
Status somatic BRCA mutations								
sBRCAm	17	14.71 (13.313)	-3.07 (1.967)	6	24.07 (22.884)	-7.72 (3.690)	4.66 (-4.046, 13.360)	0.2789
Hedges' g SMD							0.54 (-0.408, 1.484)	0.2650
gBRCAm	57	21.44 (22.529)	-5.12 (1.487)	27	27.98 (24.325)	-14.27 (2.361)	9.14 (3.575, 14.711)	0.0016*
Hedges' g SMD							0.78 (0.309, 1.257)	0.0012*
Non-BRCAm	37	21.85 (22.578)	-5.28 (1.413)	22	20.83 (24.782)	-6.37 (2.020)	1.10 (-3.872, 6.063)	0.6588
Hedges' g SMD							0.12 (-0.407, 0.649)	0.6533
Int. p-value								0.1525

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
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SMD = standardised mean difference. * p<0.05.

Table 2.7.1 PAOLA1: Summary of EQ-5D-5L results across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

			Result					
Parameter	Group	Time Point	n	Mean	SD	Min	Median	Max
EQ-5D-5L Visual analogue scale	Olaparib + bevacizumab (N=255)	Baseline [a]	244	72.3	16.40	10	75.0	100
		Wk 12 (Day 85)	225	71.3	15.75	20	70.0	100
		Wk 24 (Day 169)	202	72.4	15.74	1	75.0	100
		Wk 36 (Day 253)	179	73.1	15.77	25	75.0	100
		Wk 48 (Day 337)	174	73.7	15.76	20	75.0	100
		Wk 60 (Day 421)	164	75.5	15.29	30	80.0	100
		Wk 72 (Day 505)	160	75.0	16.17	7	80.0	100
		Wk 84 (Day 589)	137	75.7	15.09	40	80.0	100
		Wk 96 (Day 673)	135	76.7	15.26	30	80.0	100
		Wk 108 (Day 757)	109	78.7	15.36	40	80.0	100
		Wk 120 (Day 841)	1	70.0	NC	70	70.0	70
		Wk 132 (Day 925)	1	75.0	NC	75	75.0	75
		Wk 144 (Day 1009)	1	75.0	NC	75	75.0	75
		Wk 156 (Day 1093)	1	75.0	NC	75	75.0	75
		End of Treatment	130	73.3	18.88	1	75.0	100
		30 day Follow-up	60	75.8	16.68	20	80.0	100
	Placebo + bevacizumab (N=132)	Baseline [a]	127	72.1	14.76	35	70.0	100
		Wk 12 (Day 85)	117	71.6	15.92	25	75.0	100
		Wk 24 (Day 169)	104	71.6	15.53	30	72.5	98
		Wk 36 (Day 253)	97	73.3	13.80	40	75.0	100
		Wk 48 (Day 337)	84	73.4	16.09	30	75.0	100
		Wk 60 (Day 421)	68	77.9	13.27	35	80.0	100
		Wk 72 (Day 505)	67	77.8	14.88	40	80.0	100
		Wk 84 (Day 589)	51	79.0	13.30	50	80.0	100
		Wk 96 (Day 673)	41	79.7	13.30	40	80.0	100
		Wk 108 (Day 757)	31	78.9	16.32	30	80.0	100
		End of Treatment	69	71.2	16.07	35	73.0	100
		30 day Follow-up	21	75.4	21.45	30	80.0	100

[a] Baseline is defined as last evaluable assessment prior to dosing with olaparib or placebo.
SD = standard deviation; Min = minimum ; Max = maximum; NC = not calculated.

Table 2.7.2 PAOLA1: Summary of analysis of change from baseline in EQ-5D-5L VAS
(mixed model for repeated measures)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Timepoint	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Wk 12 (Day 85)	204	72.45 (16.434)	-2.14 (0.889)	114	72.83 (14.510)	-1.27 (1.189)	-0.87 (-3.787, 2.054)	0.5599
Wk 24 (Day 169)	188	72.60 (16.816)	-0.43 (0.943)	103	71.53 (14.766)	-0.68 (1.273)	0.25 (-2.868, 3.368)	0.8750
Wk 36 (Day 253)	168	72.40 (16.964)	0.03 (1.013)	94	72.00 (14.538)	-0.10 (1.362)	0.13 (-3.213, 3.468)	0.9402
Wk 48 (Day 337)	163	72.35 (17.091)	0.70 (1.066)	78	73.50 (14.371)	0.25 (1.501)	0.45 (-3.176, 4.071)	0.8080
Wk 60 (Day 421)	154	71.66 (17.141)	3.12 (0.994)	66	74.68 (13.373)	3.00 (1.448)	0.12 (-3.343, 3.577)	0.9470
Wk 72 (Day 505)	149	72.14 (17.471)	3.40 (1.091)	64	74.58 (13.520)	3.32 (1.614)	0.08 (-3.759, 3.914)	0.9684
Wk 84 (Day 589)	130	70.90 (17.617)	3.56 (1.014)	49	75.78 (12.435)	3.07 (1.532)	0.49 (-3.140, 4.111)	0.7923
Wk 96 (Day 673)	127	71.65 (17.883)	3.51 (1.128)	39	75.33 (12.848)	3.59 (1.808)	-0.08 (-4.284, 4.122)	0.9699
Average over all visits	217	72.62 (16.458)	1.47 (0.791)	121	72.34 (14.661)	1.40 (1.104)	0.07 (-2.604, 2.743)	0.9592
Hedges' g SMD							0.01 (-0.217, 0.228)	0.9587

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Figure 2.7.3.1 PAOLA1: Mean (+/- SD) score for EQ-5D-5L Visual analogue scale across timepoints, by treatment group
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

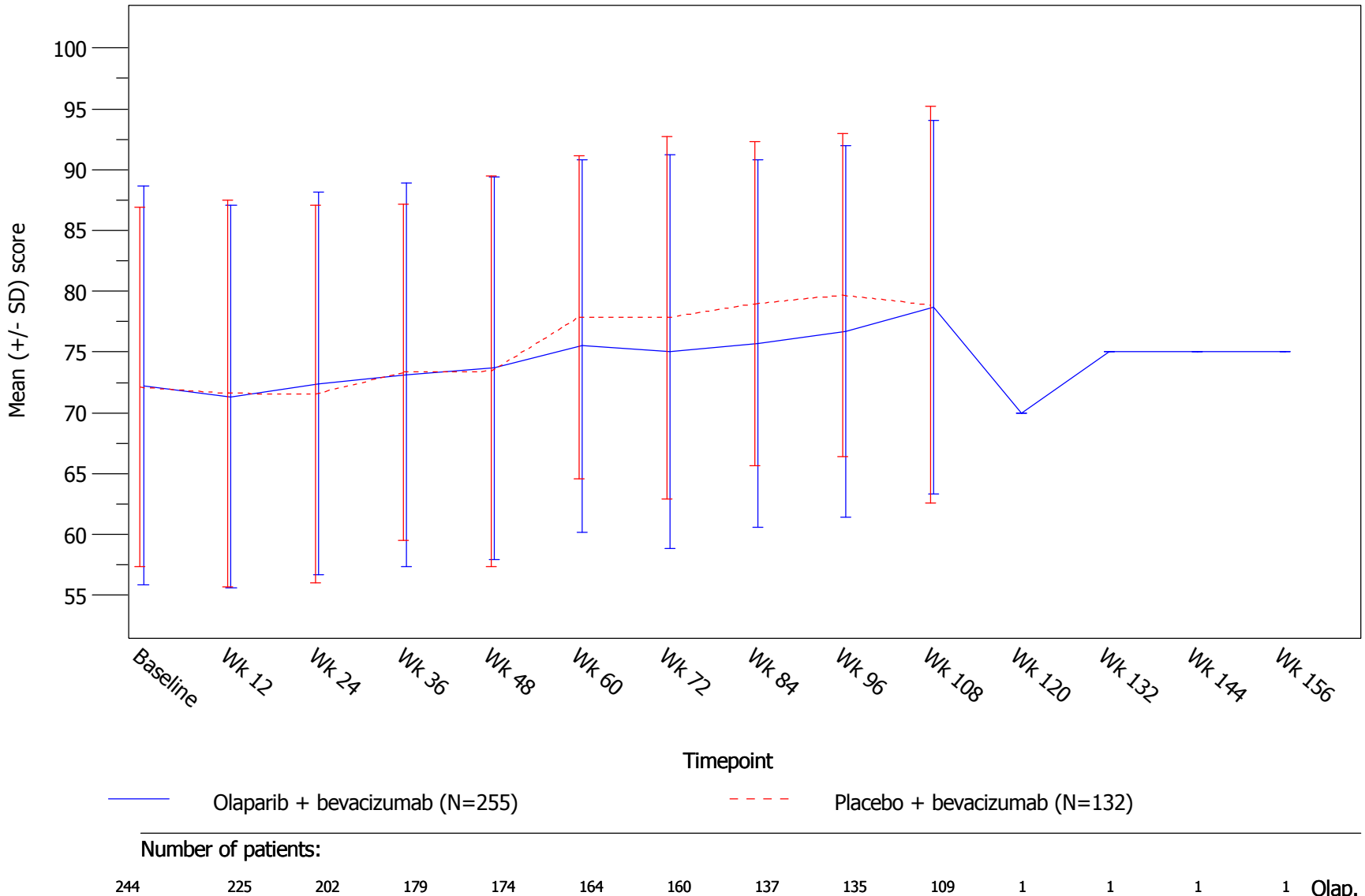

Table 2.7.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EQ-5D-5L Visual analogue scale (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
First line treatment outcome (IVRS)								
NED [PDS]	79	71.85 (18.295)	4.05 (1.151)	45	72.42 (13.814)	3.84 (1.586)	0.21 (-3.670, 4.092)	0.9144
Hedges' g SMD							0.02 (-0.346, 0.386)	0.9138
NED/CR [IDS]	62	72.87 (14.426)	-1.22 (1.597)	33	72.73 (15.314)	2.61 (2.245)	-3.83 (-9.311, 1.654)	0.1685
Hedges' g SMD							-0.30 (-0.724, 0.125)	0.1670
NED/CR [Chemo]	35	69.46 (15.942)	3.07 (1.965)	20	71.70 (12.749)	-0.09 (2.766)	3.16 (-3.664, 9.978)	0.3568
Hedges' g SMD							0.26 (-0.290, 0.813)	0.3527
PR	41	76.44 (15.864)	-1.37 (2.220)	23	72.17 (17.570)	-5.28 (3.238)	3.91 (-3.973, 11.788)	0.3242
Hedges' g SMD							0.26 (-0.250, 0.775)	0.3154
Int. p-value								0.2298
Screening laboratory tBRCA status (IVRS)								
tBRCAm	128	70.83 (16.684)	2.00 (0.978)	60	71.92 (14.960)	2.50 (1.503)	-0.50 (-4.042, 3.037)	0.7796
Hedges' g SMD							-0.04 (-0.351, 0.262)	0.7761
non-tBRCAm	89	75.20 (15.866)	0.93 (1.303)	61	72.75 (14.474)	-0.35 (1.624)	1.28 (-2.847, 5.404)	0.5408
Hedges' g SMD							0.10 (-0.224, 0.428)	0.5392
Int. p-value								0.6352
First line treatment outcome (eCRF)								
NED [PDS]	77	70.86 (18.645)	4.21 (1.218)	44	72.48 (13.589)	3.58 (1.646)	0.63 (-3.430, 4.688)	0.7595
Hedges' g SMD							0.06 (-0.312, 0.428)	0.7590
NED/CR [IDS]	61	74.48 (15.443)	-0.91 (1.598)	28	72.68 (16.414)	1.90 (2.439)	-2.82 (-8.627, 2.989)	0.3367
Hedges' g SMD							-0.22 (-0.670, 0.227)	0.3331
NED/CR [Chemo]	32	70.81 (16.119)	2.57 (2.115)	17	71.41 (13.491)	-1.79 (3.151)	4.36 (-3.296, 12.010)	0.2569
Hedges' g SMD							0.35 (-0.245, 0.940)	0.2500
PR	44	74.86 (14.245)	-1.38 (1.947)	31	72.90 (15.640)	-2.27 (2.495)	0.89 (-5.431, 7.212)	0.7794
Hedges' g SMD							0.07 (-0.394, 0.526)	0.7781
Int. p-value								0.4238

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.7.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EQ-5D-5L Visual analogue scale (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Screening laboratory tBRCA status (eCRF)								
tBRCAm	125	70.69 (16.783)	1.92 (0.994)	61	71.72 (14.913)	2.46 (1.497)	-0.54 (-4.088, 3.008)	0.7643
Hedges' g SMD							-0.05 (-0.354, 0.259)	0.7608
non-tBRCAm	92	75.25 (15.716)	1.01 (1.268)	60	72.97 (14.500)	-0.21 (1.622)	1.22 (-2.863, 5.293)	0.5565
Hedges' g SMD							0.10 (-0.227, 0.424)	0.5545
Int. p-value								0.5441
Age group								
<65 years	159	71.94 (17.201)	1.37 (0.923)	92	72.38 (14.446)	2.41 (1.269)	-1.04 (-4.134, 2.053)	0.5081
Hedges' g SMD							-0.09 (-0.345, 0.169)	0.5036
>=65 years	58	74.48 (14.194)	1.77 (1.561)	29	72.21 (15.589)	-1.69 (2.288)	3.46 (-2.055, 8.968)	0.2156
Hedges' g SMD							0.28 (-0.163, 0.733)	0.2127
Int. p-value								0.3047
FIGO Stage (Disease state)								
III	156	71.97 (16.804)	1.93 (0.920)	84	73.49 (14.576)	2.64 (1.295)	-0.71 (-3.837, 2.426)	0.6575
Hedges' g SMD							-0.06 (-0.326, 0.205)	0.6548
IV	61	74.28 (15.548)	0.40 (1.508)	37	69.73 (14.717)	-0.87 (2.117)	1.27 (-3.909, 6.446)	0.6275
Hedges' g SMD							0.10 (-0.306, 0.512)	0.6209
Int. p-value								0.4558
Region								
Europe	208	72.35 (16.609)	1.38 (0.820)	115	72.33 (14.602)	1.25 (1.155)	0.14 (-2.652, 2.924)	0.9236
Hedges' g SMD							0.01 (-0.216, 0.239)	0.9227
Japan	9	NC	NC	6	NC	NC	NC	NC
Int. p-value								NC

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.7.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EQ-5D-5L Visual analogue scale (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
ECOG performance status at Baseline								
(0) Normal activity	161	73.37 (16.688)	1.16 (0.909)	92	75.03 (13.996)	0.09 (1.234)	1.08 (-1.948, 4.099)	0.4841
Hedges' g SMD							0.09 (-0.164, 0.348)	0.4814
(1) Restricted activity	52	70.90 (15.576)	2.91 (1.626)	28	63.57 (13.801)	7.24 (2.551)	-4.33 (-10.415, 1.750)	0.1602
Hedges' g SMD							-0.35 (-0.810, 0.116)	0.1417
Int. p-value								0.1574
Baseline CA-125 value								
<=ULN	192	72.34 (16.405)	2.06 (0.816)	108	72.20 (14.791)	1.64 (1.134)	0.42 (-2.327, 3.174)	0.7622
Hedges' g SMD							0.04 (-0.199, 0.273)	0.7598
>ULN	25	NC	NC	13	NC	NC	NC	NC
Int. p-value								NC
Histological grade								
High grade	217	72.62 (16.458)	1.47 (0.791)	121	72.34 (14.661)	1.40 (1.104)	0.07 (-2.604, 2.743)	0.9592
Hedges' g SMD							0.01 (-0.217, 0.228)	0.9587
Int. p-value								ID
Cytoreductive surgery outcome								
No residue	141	72.33 (17.194)	2.12 (0.944)	73	72.32 (14.682)	3.06 (1.347)	-0.94 (-4.184, 2.304)	0.5683
Hedges' g SMD							-0.08 (-0.366, 0.200)	0.5659
Residue	68	72.65 (15.070)	0.48 (1.507)	40	73.10 (14.510)	0.64 (2.082)	-0.17 (-5.274, 4.940)	0.9483
Hedges' g SMD							-0.01 (-0.404, 0.377)	0.9477
Int. p-value								0.9815

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Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.7.4.1 PAOLA1: Summary of subgroup analysis of change from baseline in EQ-5D-5L Visual analogue scale (mixed model for repeated measures) - average over all visits
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)			Difference between groups	
Subgroup	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	n [a]	Mean (SD) at Baseline [b]	Mean (SE) Change from baseline	Estimated difference (95% CI)	p-value
Timing of cytoreductive surgery								
Upfront	126	71.40 (17.408)	3.85 (0.980)	73	72.11 (14.391)	2.73 (1.320)	1.12 (-2.122, 4.367)	0.4958
Hedges' g SMD							0.10 (-0.188, 0.389)	0.4937
Interval	83	74.00 (14.977)	-2.16 (1.365)	40	73.48 (15.011)	1.48 (2.064)	-3.65 (-8.549, 1.256)	0.1433
Hedges' g SMD							-0.29 (-0.666, 0.092)	0.1381
Int. p-value								0.1546
Myriad tumour BRCA mutation status								
tBRCAm	134	71.28 (16.508)	1.71 (0.964)	68	71.76 (14.397)	2.78 (1.418)	-1.07 (-4.449, 2.319)	0.5354
Hedges' g SMD							-0.09 (-0.386, 0.198)	0.5299
Non-tBRCAm	83	74.80 (16.240)	1.07 (1.355)	53	73.08 (15.099)	-0.91 (1.753)	1.98 (-2.410, 6.378)	0.3729
Hedges' g SMD							0.16 (-0.187, 0.503)	0.3705
Int. p-value								0.2959
Status somatic BRCA mutations								
sBRCAm	17	69.35 (16.871)	3.00 (2.521)	6	70.00 (24.290)	8.55 (4.315)	-5.54 (-15.957, 4.870)	0.2802
Hedges' g SMD							-0.51 (-1.457, 0.433)	0.2881
gBRCAm	56	72.36 (16.124)	-0.71 (1.401)	29	73.24 (11.544)	3.79 (2.070)	-4.50 (-9.483, 0.481)	0.0759
Hedges' g SMD							-0.42 (-0.869, 0.037)	0.0716
Non-BRCAm	37	72.65 (15.469)	1.06 (1.915)	22	72.45 (13.996)	0.06 (2.643)	1.00 (-5.618, 7.616)	0.7611
Hedges' g SMD							0.08 (-0.445, 0.611)	0.7590
Int. p-value								0.0973

[a] = number of patients with change from baseline at each timepoint in the MMRM analysis.
[b] = mean baseline for patients with change from baseline at each timepoint in the MMRM analysis.
Calculated from a mixed model for repeated measures (MMRM) analysis of the change from baseline score with treatment, visit and treatment by visit interaction included as explanatory variables and the baseline score included as a covariate along with the baseline score by visit interaction. The study discontinuation visit and the safety follow-up visit are excluded and only visits where change from baseline is available for at least 25% of patients in both treatment arms are included in the analysis. Treatment, visit and treatment by visit interaction are fixed effects in the model, an unstructured covariance matrix is used to model within-subject error.
SMD = standardised mean difference. * p<0.05.

Table 2.8.1 PAOLA1: Summary of compliance with EORTC QLQ-C30 questionnaire by planned visit
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

Group	Time Point [a]	Expected [b]	Received [c]	Evaluable [d]	Compliance rate (%) [e]	Evaluability rate (%) [f]
Olaparib + bevacizumab (N=255)	VISIT 1 (Day 1)	255	251	251	98.4	100.0
	VISIT 7 (Day 85)	232	210	210	90.5	100.0
	VISIT 11 (Day 169)	218	192	192	88.1	100.0
	VISIT 13 (Day 253)	203	174	174	85.7	100.0
	VISIT 15 (Day 337)	193	169	169	87.6	100.0
	VISIT 17 (Day 421)	179	155	155	86.6	100.0
	VISIT 19 (Day 505)	169	148	148	87.6	100.0
	VISIT 21 (Day 589)	156	131	131	84.0	100.0
	VISIT 23 (Day 673)	141	124	124	87.9	100.0
	VISIT 25 (Day 757)	3	1	1	33.3	100.0
	END OF TREATMENT [a]	250	198	198	79.2	100.0
	30 DAY FOLLOW-UP	224	48	48	21.4	100.0
Placebo + bevacizumab (N=132)	VISIT 1 (Day 1)	132	127	127	96.2	100.0
	VISIT 7 (Day 85)	127	110	110	86.6	100.0
	VISIT 11 (Day 169)	113	98	98	86.7	100.0
	VISIT 13 (Day 253)	102	86	86	84.3	100.0
	VISIT 15 (Day 337)	90	80	80	88.9	100.0
	VISIT 17 (Day 421)	74	65	65	87.8	100.0
	VISIT 19 (Day 505)	65	60	60	92.3	100.0
	VISIT 21 (Day 589)	52	44	44	84.6	100.0
	VISIT 23 (Day 673)	42	37	37	88.1	100.0
	VISIT 25 (Day 757)	2	2	2	100.0	100.0
	END OF TREATMENT [a]	127	98	98	77.2	100.0
	30 DAY FOLLOW-UP	118	19	19	16.1	100.0

[a] End of Treatment refers to discontinuation from treatment with olaparib or placebo. Date of study discontinuation is mapped to the nearest visit date to define the number of expected forms.
[b] Expected = number of patients still on study. Number of patients expected at baseline equals to full analysis set.
[c] Received = forms received back plus those recorded as: Subject too heavily affected by symptoms of disease under investigation.
[d] Evaluable = forms where at least one subscale that can be determined or where a reason for not completing the form is: Subject too heavily affected by symptoms of disease under investigation.
[e] Compliance Rate = Evaluable/Expected * 100.
[f] Evaluability Rate = Evaluable/Received * 100.

Table 2.8.2 PAOLA1: Summary of compliance with EORTC QLQ-OV28 questionnaire by planned visit
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

Group	Time Point [a]	Expected [b]	Received [c]	Evaluable [d]	Compliance rate (%) [e]	Evaluability rate (%) [f]
Olaparib + bevacizumab (N=255)	VISIT 1 (Day 1)	255	251	251	98.4	100.0
	VISIT 7 (Day 85)	232	211	211	90.9	100.0
	VISIT 11 (Day 169)	218	193	193	88.5	100.0
	VISIT 13 (Day 253)	203	173	173	85.2	100.0
	VISIT 15 (Day 337)	193	169	169	87.6	100.0
	VISIT 17 (Day 421)	179	155	155	86.6	100.0
	VISIT 19 (Day 505)	169	147	147	87.0	100.0
	VISIT 21 (Day 589)	156	131	131	84.0	100.0
	VISIT 23 (Day 673)	141	125	125	88.7	100.0
	VISIT 25 (Day 757)	3	1	1	33.3	100.0
	END OF TREATMENT [a]	250	197	197	78.8	100.0
	30 DAY FOLLOW-UP	224	48	48	21.4	100.0
Placebo + bevacizumab (N=132)	VISIT 1 (Day 1)	132	126	126	95.5	100.0
	VISIT 7 (Day 85)	127	109	109	85.8	100.0
	VISIT 11 (Day 169)	113	98	98	86.7	100.0
	VISIT 13 (Day 253)	102	86	86	84.3	100.0
	VISIT 15 (Day 337)	90	80	80	88.9	100.0
	VISIT 17 (Day 421)	74	65	65	87.8	100.0
	VISIT 19 (Day 505)	65	60	60	92.3	100.0
	VISIT 21 (Day 589)	52	44	44	84.6	100.0
	VISIT 23 (Day 673)	42	37	37	88.1	100.0
	VISIT 25 (Day 757)	2	2	2	100.0	100.0
	END OF TREATMENT [a]	127	98	98	77.2	100.0
	30 DAY FOLLOW-UP	118	19	19	16.1	100.0

[a] End of Treatment refers to discontinuation from treatment with olaparib or placebo. Date of study discontinuation is mapped to the nearest visit date to define the number of expected forms.
[b] Expected = number of patients still on study. Number of patients expected at baseline equals to full analysis set.
[c] Received = forms received back plus those recorded as: Subject too heavily affected by symptoms of disease under investigation.
[d] Evaluable = forms where at least one subscale that can be determined or where a reason for not completing the form is: Subject too heavily affected by symptoms of disease under investigation.
[e] Compliance Rate = Evaluable/Expected * 100.
[f] Evaluability Rate = Evaluable/Received * 100.

Table 2.8.3 PAOLA1: Summary of compliance with EQ-5D questionnaire by planned visit
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

Group	Time Point [a]	Expected [b]	Received [c]	Evaluable [d]	Compliance rate (%) [e]	Evaluability rate (%) [f]
Olaparib + bevacizumab (N=255)	VISIT 1 (Day 1)	255	247	247	96.9	100.0
	VISIT 7 (Day 85)	232	208	208	89.7	100.0
	VISIT 11 (Day 169)	218	192	192	88.1	100.0
	VISIT 13 (Day 253)	203	172	172	84.7	100.0
	VISIT 15 (Day 337)	193	167	167	86.5	100.0
	VISIT 17 (Day 421)	179	154	154	86.0	100.0
	VISIT 19 (Day 505)	169	148	148	87.6	100.0
	VISIT 21 (Day 589)	156	129	129	82.7	100.0
	VISIT 23 (Day 673)	141	123	123	87.2	100.0
	VISIT 25 (Day 757)	3	1	1	33.3	100.0
	END OF TREATMENT [a]	250	197	197	78.8	100.0
	30 DAY FOLLOW-UP	224	48	48	21.4	100.0
Placebo + bevacizumab (N=132)	VISIT 1 (Day 1)	132	127	127	96.2	100.0
	VISIT 7 (Day 85)	127	109	109	85.8	100.0
	VISIT 11 (Day 169)	113	97	97	85.8	100.0
	VISIT 13 (Day 253)	102	85	85	83.3	100.0
	VISIT 15 (Day 337)	90	80	80	88.9	100.0
	VISIT 17 (Day 421)	74	64	64	86.5	100.0
	VISIT 19 (Day 505)	65	59	59	90.8	100.0
	VISIT 21 (Day 589)	52	44	44	84.6	100.0
	VISIT 23 (Day 673)	42	37	37	88.1	100.0
	VISIT 25 (Day 757)	2	2	2	100.0	100.0
	END OF TREATMENT [a]	127	95	95	74.8	100.0
	30 DAY FOLLOW-UP	118	16	16	13.6	100.0

[a] End of Treatment refers to discontinuation from treatment with olaparib or placebo. Date of study discontinuation is mapped to the nearest visit date to define the number of expected forms.
[b] Expected = number of patients still on study. Number of patients expected at baseline equals to full analysis set.
[c] Received = forms received back plus those recorded as: Subject too heavily affected by symptoms of disease under investigation.
[d] Evaluable = forms where at least one subscale that can be determined or where a reason for not completing the form is: Subject too heavily affected by symptoms of disease under investigation.
[e] Compliance Rate = Evaluable/Expected * 100.
[f] Evaluability Rate = Evaluable/Received * 100.

Table 3.1 PAOLA1: Summary of observation period (months) for adverse events
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

		Olaparib + bevacizumab (N=255)	Placebo + bevacizumab (N=131)
All AE endpoints	n	255	131
	Median	24.80	17.77
	Min	1.2	1.1
	Max	36.8	26.3
All AESI endpoints	n	255	131
	Median	38.51	36.76
	Min	8.9	5.3
	Max	55.6	53.8

Observation period for AEs is defined as the time from first dose to the earliest of the DCO, study treatment discontinuation+30 days or death i.e. the safety follow-up period for the analysis.
Observation period for AESIs is defined as the time from first dose to the earliest of the DCO or death.

Table 3.2.1 PAOLA1: Summary of analysis of time to first occurrence of adverse events
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE	255	255 (100)	0.2 (0.2, 0.3)	131	127 (96.9)	0.3 (0.2, 0.7)	1.43	1.15, 1.80	0.0023*
AE SOC: General disorders and administration site conditions	255	156 (61.2)	5.6 (2.8,11.0)	131	57 (43.5)	NE (NE, NE)	1.70	1.26, 2.33	0.0006*
AE PT: Fatigue	255	141 (55.3)	8.5 (3.5,15.3)	131	44 (33.6)	NE (NE, NE)	2.01	1.44, 2.86	<0.0001*
AE PT: Pyrexia	255	16 (6.3)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	2.12	0.77, 7.46	0.1717
AE PT: Oedema	255	8 (3.1)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.89	0.28, 3.39	0.8579
AE PT: Oedema peripheral	255	15 (5.9)	NE (NE, NE)	131	7 (5.3)	NE (NE, NE)	1.01	0.42, 2.67	0.9846
AE PT: Mucosal inflammation	255	15 (5.9)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.95	0.70, 6.89	0.2285
AE PT: Pain	255	7 (2.7)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.79	0.24, 3.04	0.7052
AE SOC: Eye disorders	255	9 (3.5)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.89	0.28, 3.32	0.8478
AE SOC: Surgical and medical procedures	255	10 (3.9)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	1.69	0.51, 7.56	0.4248
AE SOC: Endocrine disorders	255	4 (1.6)	NE (NE, NE)	131	9 (6.9)	NE (NE, NE)	0.20	0.05, 0.62	0.0033*

At least 10% of pts. in either study arm with <=100 pts. OR events in at least 10 pts. in either study arm with >100 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.1 PAOLA1: Summary of analysis of time to first occurrence of adverse events
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE SOC: Respiratory, thoracic and mediastinal disorders	255	62 (24.3)	NE (NE, NE)	131	28 (21.4)	NE (NE, NE)	1.04	0.67, 1.65	0.8671
AE PT: Dyspnoea	255	22 (8.6)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	4.05	1.40, 17.15	0.0142*
AE PT: Epistaxis	255	18 (7.1)	NE (NE, NE)	131	7 (5.3)	NE (NE, NE)	1.28	0.56, 3.31	0.5776
AE PT: Cough	255	11 (4.3)	NE (NE, NE)	131	6 (4.6)	NE (NE, NE)	0.87	0.32, 2.58	0.7899
AE PT: Rhinorrhoea	255	5 (2.0)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	0.82	0.20, 4.00	0.7811
AE PT: Oropharyngeal pain	255	4 (1.6)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.47	0.11, 2.01	0.2793
AE SOC: Skin and subcutaneous tissue disorders	255	44 (17.3)	NE (NE, NE)	131	19 (14.5)	NE (NE, NE)	1.16	0.68, 2.04	0.5923
AE PT: Alopecia	255	8 (3.1)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	2.02	0.50, 13.47	0.3661
AE PT: Rash	255	10 (3.9)	NE (NE, NE)	131	7 (5.3)	NE (NE, NE)	0.76	0.29, 2.11	0.5832
AE PT: Erythema	255	8 (3.1)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.0569
AE PT: Pruritus	255	5 (2.0)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	0.81	0.20, 3.98	0.7736
AE SOC: Renal and urinary disorders	255	27 (10.6)	NE (NE, NE)	131	24 (18.3)	NE (NE, NE)	0.50	0.29, 0.88	0.0133*
AE PT: Proteinuria	255	19 (7.5)	NE (NE, NE)	131	19 (14.5)	NE (NE, NE)	0.46	0.24, 0.89	0.0163*

At least 10% of pts. in either study arm with <=100 pts. OR events in at least 10 pts. in either study arm with >100 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttemainae.sas ettemainaeaa 25NOV2020:16:20 kvbv306

Table 3.2.1 PAOLA1: Summary of analysis of time to first occurrence of adverse events
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE SOC: Blood and lymphatic system disorders	255	148 (58.0)	4.8 (2.8,12.3)	131	41 (31.3)	NE (NE, NE)	2.43	1.73, 3.49	<0.0001*
AE PT: Anaemia	255	102 (40.0)	NE (NE, NE)	131	12 (9.2)	NE (NE, NE)	5.43	3.10, 10.43	<0.0001*
AE PT: Leukopenia	255	46 (18.0)	NE (NE, NE)	131	11 (8.4)	NE (NE, NE)	2.34	1.26, 4.78	0.0097*
AE PT: Lymphopenia	255	60 (23.5)	NE (NE, NE)	131	10 (7.6)	NE (NE, NE)	3.36	1.79, 6.99	0.0002*
AE PT: Neutropenia	255	30 (11.8)	NE (NE, NE)	131	15 (11.5)	NE (NE, NE)	0.96	0.52, 1.84	0.8855
AE PT: Thrombocytopenia	255	12 (4.7)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	1.88	0.59, 8.31	0.3264
AE SOC: Gastrointestinal disorders	255	189 (74.1)	0.8 (0.5, 1.9)	131	83 (63.4)	6.9 (3.4,10.6)	1.56	1.20, 2.04	0.0012*
AE PT: Abdominal pain	255	56 (22.0)	NE (NE, NE)	131	32 (24.4)	NE (NE, NE)	0.84	0.55, 1.32	0.4401
AE PT: Intestinal obstruction	255	5 (2.0)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	1.83	0.29, 35.00	0.5771
AE PT: Diarrhoea	255	50 (19.6)	NE (NE, NE)	131	25 (19.1)	NE (NE, NE)	1.01	0.63, 1.67	0.9506
AE PT: Dyspepsia	255	12 (4.7)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	1.78	0.56, 7.87	0.3692
AE PT: Vomiting	255	54 (21.2)	NE (NE, NE)	131	16 (12.2)	NE (NE, NE)	1.77	1.03, 3.20	0.0438*
AE PT: Haemorrhoids	255	7 (2.7)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.84	0.25, 3.24	0.7851

At least 10% of pts. in either study arm with <=100 pts. OR events in at least 10 pts. in either study arm with >100 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.1 PAOLA1: Summary of analysis of time to first occurrence of adverse events
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE PT: Constipation	255	28 (11.0)	NE (NE, NE)	131	15 (11.5)	NE (NE, NE)	0.87	0.47, 1.69	0.6718
AE PT: Abdominal pain upper	255	10 (3.9)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.17	0.39, 4.26	0.7958
AE PT: Stomatitis	255	12 (4.7)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	3.35	0.91, 21.59	0.0951
AE PT: Subileus	255	2 (0.8)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	0.60	0.07, 5.12	0.6125
AE PT: Nausea	255	144 (56.5)	2.9 (0.8,14.5)	131	30 (22.9)	NE (NE, NE)	3.38	2.30, 5.13	<0.0001*
AE PT: Gingival bleeding	255	9 (3.5)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	2.38	0.60, 15.78	0.2596
AE PT: Toothache	255	6 (2.4)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	1.04	0.27, 5.02	0.9527
AE SOC: Immune system disorders	255	7 (2.7)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	3.67	0.64, 69.24	0.1965
AE SOC: Nervous system disorders	255	87 (34.1)	NE (NE, NE)	131	32 (24.4)	NE (NE, NE)	1.48	0.99, 2.25	0.0607
AE PT: Dysgeusia	255	23 (9.0)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	6.19	1.82, 38.62	0.0049*
AE PT: Headache	255	39 (15.3)	NE (NE, NE)	131	22 (16.8)	NE (NE, NE)	0.89	0.53, 1.53	0.6675
AE PT: Neuropathy peripheral	255	22 (8.6)	NE (NE, NE)	131	5 (3.8)	NE (NE, NE)	2.45	0.997, 7.33	0.0637
AE PT: Polyneuropathy	255	8 (3.1)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	2.10	0.52, 13.95	0.3386

At least 10% of pts. in either study arm with <=100 pts. OR events in at least 10 pts. in either study arm with >100 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.1 PAOLA1: Summary of analysis of time to first occurrence of adverse events
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE PT: Dizziness	255	8 (3.1)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	1.30	0.37, 5.97	0.7019
AE SOC: Ear and labyrinth disorders	255	10 (3.9)	NE (NE, NE)	131	8 (6.1)	NE (NE, NE)	0.59	0.23, 1.56	0.2663
AE PT: Vertigo	255	6 (2.4)	NE (NE, NE)	131	6 (4.6)	NE (NE, NE)	0.48	0.15, 1.56	0.2022
AE SOC: Vascular disorders	255	137 (53.7)	8.3 (5.8,14.9)	131	82 (62.6)	4.9 (3.4, 8.4)	0.81	0.61, 1.07	0.1305
AE PT: Hot flush	255	7 (2.7)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	1.08	0.30, 5.04	0.9058
AE PT: Hypertension	255	122 (47.8)	14.1 (8.3, NE)	131	78 (59.5)	5.4 (3.3,11.0)	0.72	0.54, 0.97	0.0301*
AE SOC: Cardiac disorders	255	7 (2.7)	NE (NE, NE)	131	7 (5.3)	NE (NE, NE)	0.43	0.14, 1.29	0.1140
AE SOC: Infections and infestations	255	128 (50.2)	15.0 (11.0,21.5)	131	63 (48.1)	16.4 (9.0, NE)	0.98	0.72, 1.34	0.8979
AE PT: Bronchitis	255	13 (5.1)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	2.27	0.73, 9.92	0.1915
AE PT: Gastroenteritis	255	13 (5.1)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.0119*
AE PT: Gingivitis	255	7 (2.7)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	1.87	0.44, 12.68	0.4343
AE PT: Influenza	255	8 (3.1)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	3.38	0.62, 62.93	0.2231
AE PT: Urinary tract infection	255	41 (16.1)	NE (NE, NE)	131	12 (9.2)	NE (NE, NE)	1.77	0.95, 3.55	0.0811

At least 10% of pts. in either study arm with <=100 pts. OR events in at least 10 pts. in either study arm with >100 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.1 PAOLA1: Summary of analysis of time to first occurrence of adverse events
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE PT: Infection	255	9 (3.5)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	4.68	0.87, 86.59	0.1085
AE PT: Nasopharyngitis	255	15 (5.9)	NE (NE, NE)	131	10 (7.6)	NE (NE, NE)	0.66	0.30, 1.53	0.3109
AE PT: Pharyngitis	255	8 (3.1)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.88	0.28, 3.35	0.8428
AE PT: Rhinitis	255	10 (3.9)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.17	0.38, 4.30	0.7973
AE PT: Tooth abscess	255	8 (3.1)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.08	0.34, 4.07	0.9033
AE PT: Tooth infection	255	7 (2.7)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	1.57	0.38, 10.55	0.5740
AE PT: Cystitis	255	11 (4.3)	NE (NE, NE)	131	9 (6.9)	NE (NE, NE)	0.62	0.25, 1.55	0.2851
AE SOC: Psychiatric disorders	255	21 (8.2)	NE (NE, NE)	131	13 (9.9)	NE (NE, NE)	0.77	0.39, 1.59	0.4585
AE PT: Anxiety	255	7 (2.7)	NE (NE, NE)	131	5 (3.8)	NE (NE, NE)	0.67	0.21, 2.29	0.4979
AE PT: Depression	255	6 (2.4)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	2.62	0.44, 49.87	0.3601
AE PT: Sleep disorder	255	7 (2.7)	NE (NE, NE)	131	7 (5.3)	NE (NE, NE)	0.50	0.17, 1.49	0.1968
AE SOC: Musculoskeletal and connective tissue disorders	255	106 (41.6)	NE (NE, NE)	131	57 (43.5)	NE (NE, NE)	0.88	0.64, 1.22	0.4318
AE PT: Arthralgia	255	64 (25.1)	NE (NE, NE)	131	30 (22.9)	NE (NE, NE)	1.08	0.70, 1.70	0.7283

At least 10% of pts. in either study arm with <=100 pts. OR events in at least 10 pts. in either study arm with >100 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.
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Table 3.2.1 PAOLA1: Summary of analysis of time to first occurrence of adverse events
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE PT: Muscle spasms	255	11 (4.3)	NE (NE, NE)	131	8 (6.1)	NE (NE, NE)	0.62	0.25, 1.62	0.3068
AE PT: Myalgia	255	21 (8.2)	NE (NE, NE)	131	7 (5.3)	NE (NE, NE)	1.60	0.71, 4.09	0.2795
AE PT: Neck pain	255	4 (1.6)	NE (NE, NE)	131	5 (3.8)	NE (NE, NE)	0.42	0.10, 1.60	0.1864
AE PT: Back pain	255	17 (6.7)	NE (NE, NE)	131	8 (6.1)	NE (NE, NE)	0.92	0.40, 2.28	0.8429
AE PT: Pain in extremity	255	17 (6.7)	NE (NE, NE)	131	8 (6.1)	NE (NE, NE)	1.16	0.51, 2.87	0.7297
AE PT: Musculoskeletal pain	255	9 (3.5)	NE (NE, NE)	131	9 (6.9)	NE (NE, NE)	0.53	0.21, 1.37	0.1739
AE SOC: Metabolism and nutrition disorders	255	30 (11.8)	NE (NE, NE)	131	9 (6.9)	NE (NE, NE)	1.51	0.74, 3.39	0.2790
AE PT: Decreased appetite	255	23 (9.0)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	2.74	1.05, 9.36	0.0543
AE SOC: Investigations	255	73 (28.6)	NE (NE, NE)	131	29 (22.1)	NE (NE, NE)	1.31	0.86, 2.06	0.2213
AE PT: Weight increased	255	11 (4.3)	NE (NE, NE)	131	10 (7.6)	NE (NE, NE)	0.53	0.22, 1.30	0.1504
AE PT: Blood creatinine increased	255	13 (5.1)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	6.54	1.28,119.35	0.0386*
AE PT: White blood cell count decreased	255	8 (3.1)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	1.64	0.41, 10.93	0.5261

At least 10% of pts. in either study arm with <=100 pts. OR events in at least 10 pts. in either study arm with >100 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.1 PAOLA1: Summary of analysis of time to first occurrence of adverse events
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE PT: Lymphocyte count decreased	255	7 (2.7)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	3.50	0.62, 65.62	0.2131
AE PT: Neutrophil count decreased	255	20 (7.8)	NE (NE, NE)	131	6 (4.6)	NE (NE, NE)	1.72	0.73, 4.75	0.2477
AE PT: Platelet count decreased	255	5 (2.0)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	3.06	0.49, 58.98	0.2847
AE SOC: Injury, poisoning and procedural complications	255	15 (5.9)	NE (NE, NE)	131	9 (6.9)	NE (NE, NE)	0.72	0.31, 1.73	0.4350

At least 10% of pts. in either study arm with <=100 pts. OR events in at least 10 pts. in either study arm with >100 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.
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Table 3.2.2 PAOLA1: Summary of analysis of time to first occurrence of serious adverse events
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
SAE	255	73 (28.6)	NE (NE, NE)	131	45 (34.4)	NE (NE, NE)	0.75	0.52, 1.10	0.1332
SAE SOC: Respiratory, thoracic and mediastinal disorders	255	7 (2.7)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	4.27	0.75, 80.04	0.1411
SAE SOC: Blood and lymphatic system disorders	255	17 (6.7)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	8.49	1.74,153.16	0.0127*
SAE PT: Anaemia	255	13 (5.1)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	6.96	1.38,126.51	0.0300*
SAE SOC: Gastrointestinal disorders	255	11 (4.3)	NE (NE, NE)	131	10 (7.6)	NE (NE, NE)	0.48	0.20, 1.17	0.0936
SAE SOC: Vascular disorders	255	24 (9.4)	NE (NE, NE)	131	16 (12.2)	NE (NE, NE)	0.72	0.38, 1.38	0.3039
SAE PT: Hypertension	255	20 (7.8)	NE (NE, NE)	131	16 (12.2)	NE (NE, NE)	0.59	0.30, 1.16	0.1151
SAE SOC: Infections and infestations	255	12 (4.7)	NE (NE, NE)	131	9 (6.9)	NE (NE, NE)	0.64	0.27, 1.58	0.3126

At least 5% of pts. in either study arm with <=200 pts. OR events in at least 10 pts. in either study arm with >200 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.3 PAOLA1: Summary of analysis of time to first occurrence of adverse event leading to treatment discontinuation
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE leading to discontinuation of treatment	255	50 (19.6)	NE (NE, NE)	131	8 (6.1)	NE (NE, NE)	3.14	1.57, 7.18	0.0017*

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.
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Table 3.2.4 PAOLA1: Summary of analysis of time to first occurrence of severe adverse events with max. CTCAE grade >=3 including grade 5
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
		Number (%) of patients n with events	Median time (95% CI) (months) [a]		Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE max CTCAE grade>=3	255	147 (57.6)	8.6 (5.6,15.3)	131	65 (49.6)	16.7 (6.6, NE)	1.20	0.90, 1.63	0.2205
AE G>=3 SOC: General disorders and administration site conditions	255	15 (5.9)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	7.83	1.58,141.83	0.0185*
AE G>=3 PT: Fatigue	255	14 (5.5)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.0065*
AE G>=3 SOC: Respiratory, thoracic and mediastinal disorders	255	6 (2.4)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	1.78	0.41, 12.18	0.4769
AE G>=3 SOC: Renal and urinary disorders	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.2780
AE G>=3 SOC: Blood and lymphatic system disorders	255	71 (27.8)	NE (NE, NE)	131	5 (3.8)	NE (NE, NE)	8.16	3.64, 23.32	<0.0001*
AE G>=3 PT: Anaemia	255	47 (18.4)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	27.85	6.08,493.74	<0.0001*
AE G>=3 PT: Leukopenia	255	6 (2.4)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.0945
AE G>=3 PT: Lymphopenia	255	19 (7.5)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	2.97	1.01, 12.69	0.0670
AE G>=3 PT: Neutropenia	255	12 (4.7)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	5.91	1.15,107.89	0.0537

At least 5% of pts. in either study arm with <=200 pts. OR events in at least 10 pts. in either study arm with >200 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttemainae.sas ettemainaeae 25NOV2020:16:20 kvbv306

Table 3.2.4 PAOLA1: Summary of analysis of time to first occurrence of severe adverse events with max. CTCAE grade >=3 including grade 5
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE G>=3 SOC: Gastrointestinal disorders	255	30 (11.8)	NE (NE, NE)	131	12 (9.2)	NE (NE, NE)	1.20	0.63, 2.45	0.5931
AE G>=3 PT: Diarrhoea	255	7 (2.7)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	1.18	0.33, 5.54	0.8073
AE G>=3 PT: Nausea	255	8 (3.1)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.0590
AE G>=3 SOC: Nervous system disorders	255	7 (2.7)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.74	0.22, 2.91	0.6454
AE G>=3 SOC: Vascular disorders	255	48 (18.8)	NE (NE, NE)	131	42 (32.1)	NE (NE, NE)	0.51	0.33, 0.78	0.0013*
AE G>=3 PT: Hypertension	255	45 (17.6)	NE (NE, NE)	131	42 (32.1)	NE (NE, NE)	0.47	0.30, 0.72	0.0004*
AE G>=3 SOC: Infections and infestations	255	14 (5.5)	NE (NE, NE)	131	10 (7.6)	NE (NE, NE)	0.62	0.28, 1.46	0.2559
AE G>=3 SOC: Investigations	255	16 (6.3)	NE (NE, NE)	131	5 (3.8)	NE (NE, NE)	1.72	0.67, 5.30	0.2888
AE G>=3 PT: Neutrophil count decreased	255	6 (2.4)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	3.12	0.53, 59.15	0.2692

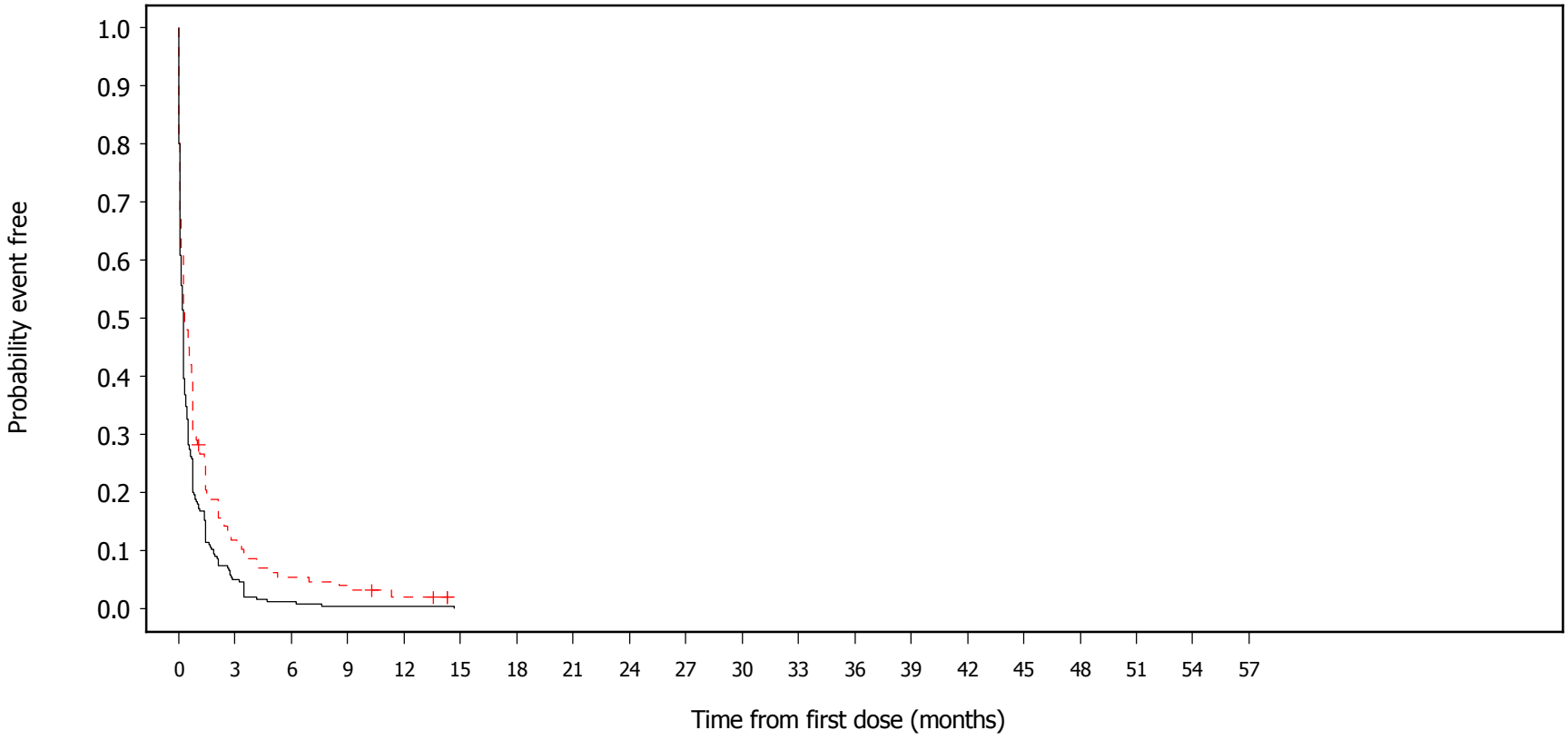
At least 5% of pts. in either study arm with <=200 pts. OR events in at least 10 pts. in either study arm with >200 pts.
The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.5 PAOLA1: Summary of analysis of time to first occurrence of non-severe adverse events with max. CTCAE grade 1 or 2
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AE max CTCAE grade=1 or 2	255	108 (42.4)	NE (NE, NE)	131	62 (47.3)	NE (NE, NE)	0.93	0.68, 1.28	0.6317

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

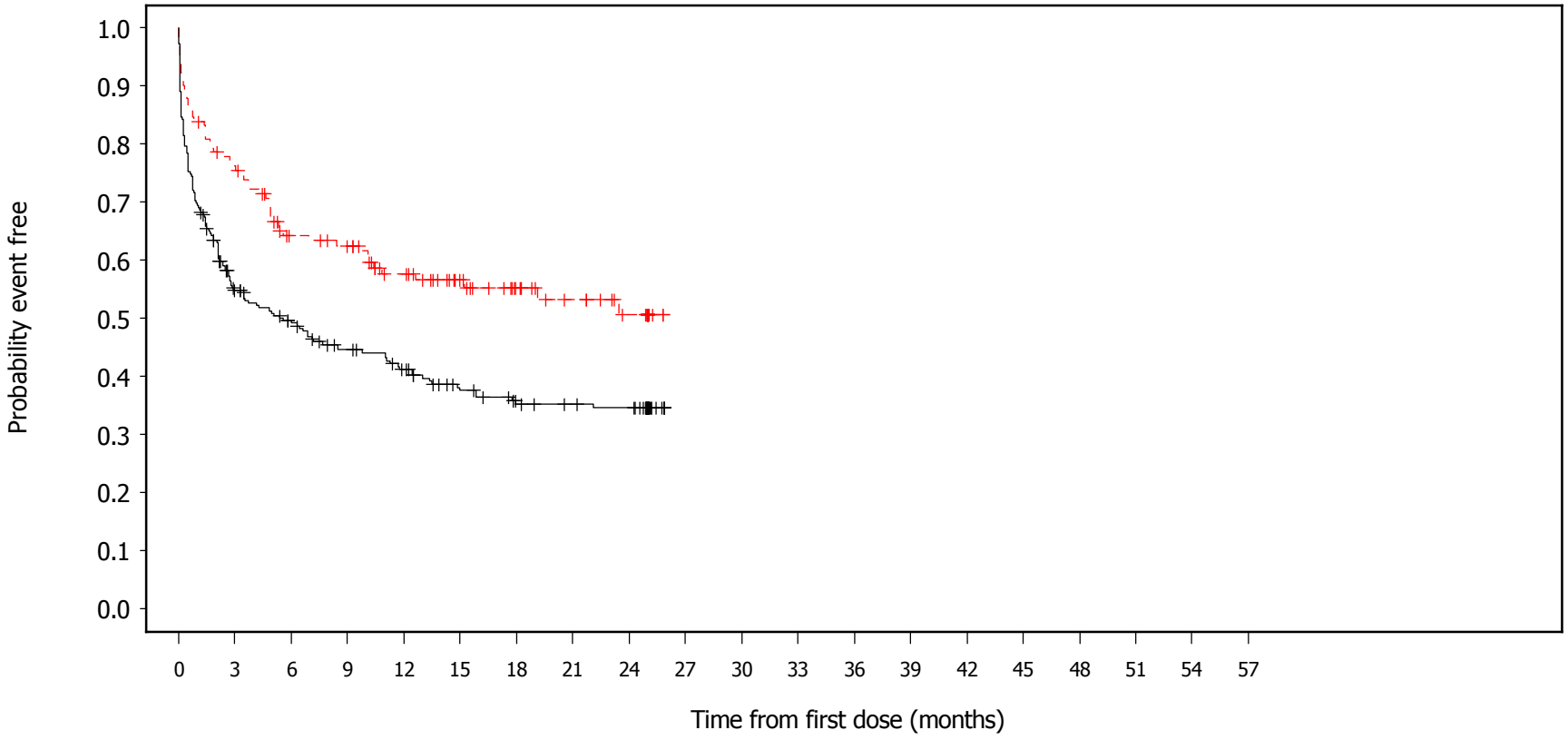
Figure 3.3.1 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	13	3	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	15	7	4	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

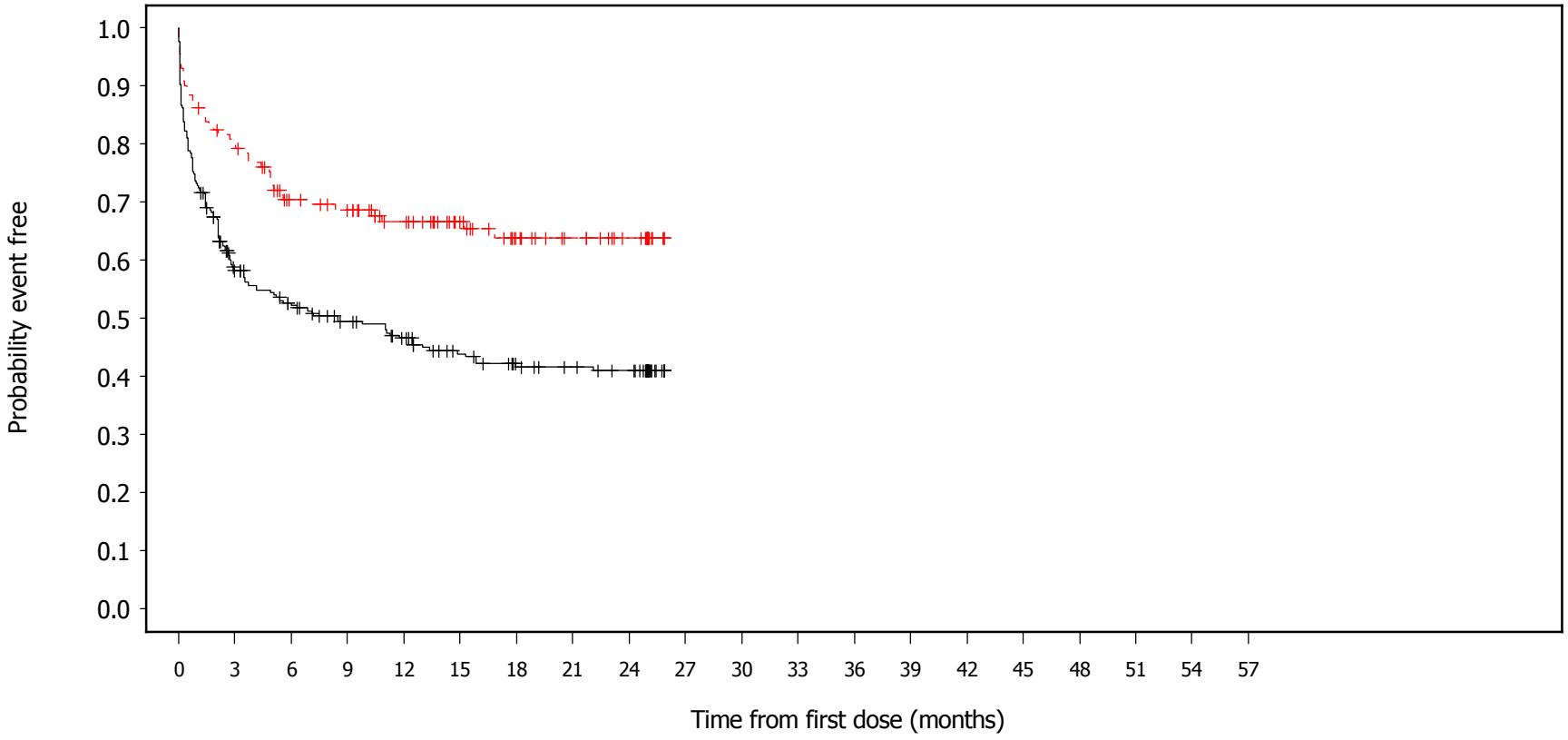
Figure 3.3.2 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: General disorders and administration site conditions
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	129	111	95	84	70	60	57	55	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	98	75	70	56	43	32	25	18	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

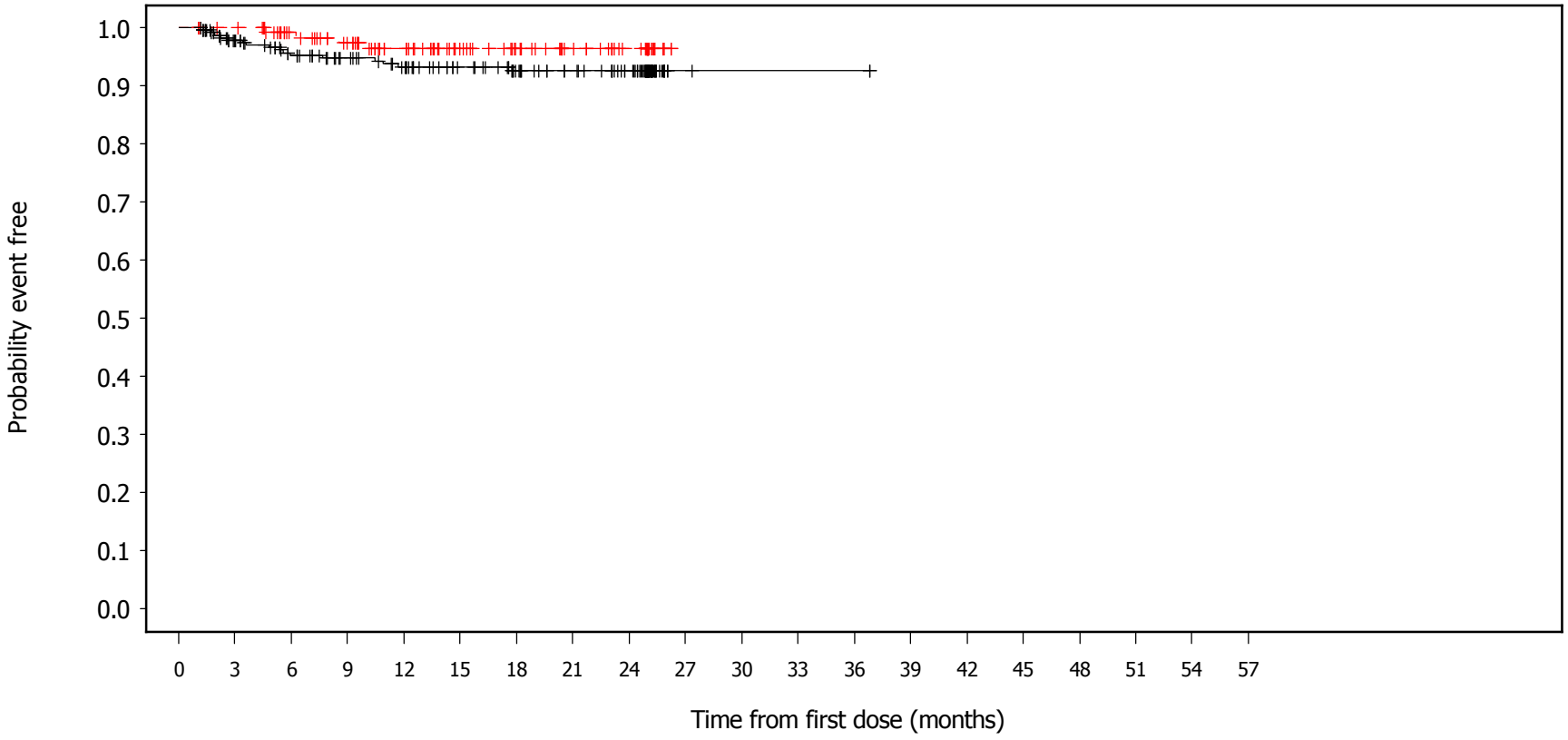
Figure 3.3.3 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Fatigue
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	137	118	104	93	79	69	65	61	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	103	82	76	64	51	38	31	24	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

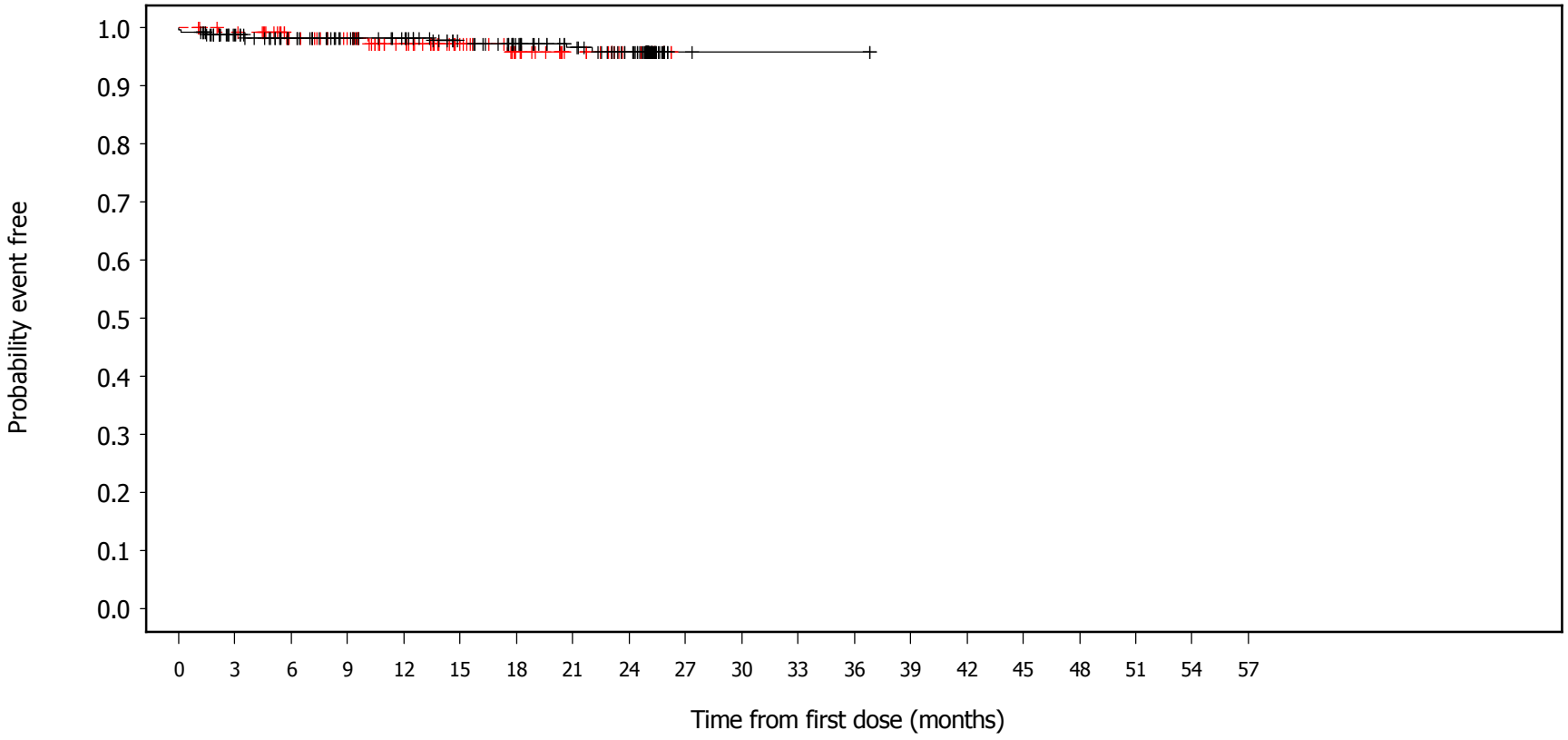
Figure 3.3.4 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Pyrexia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	229	210	196	185	169	155	144	130	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	114	103	88	71	60	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

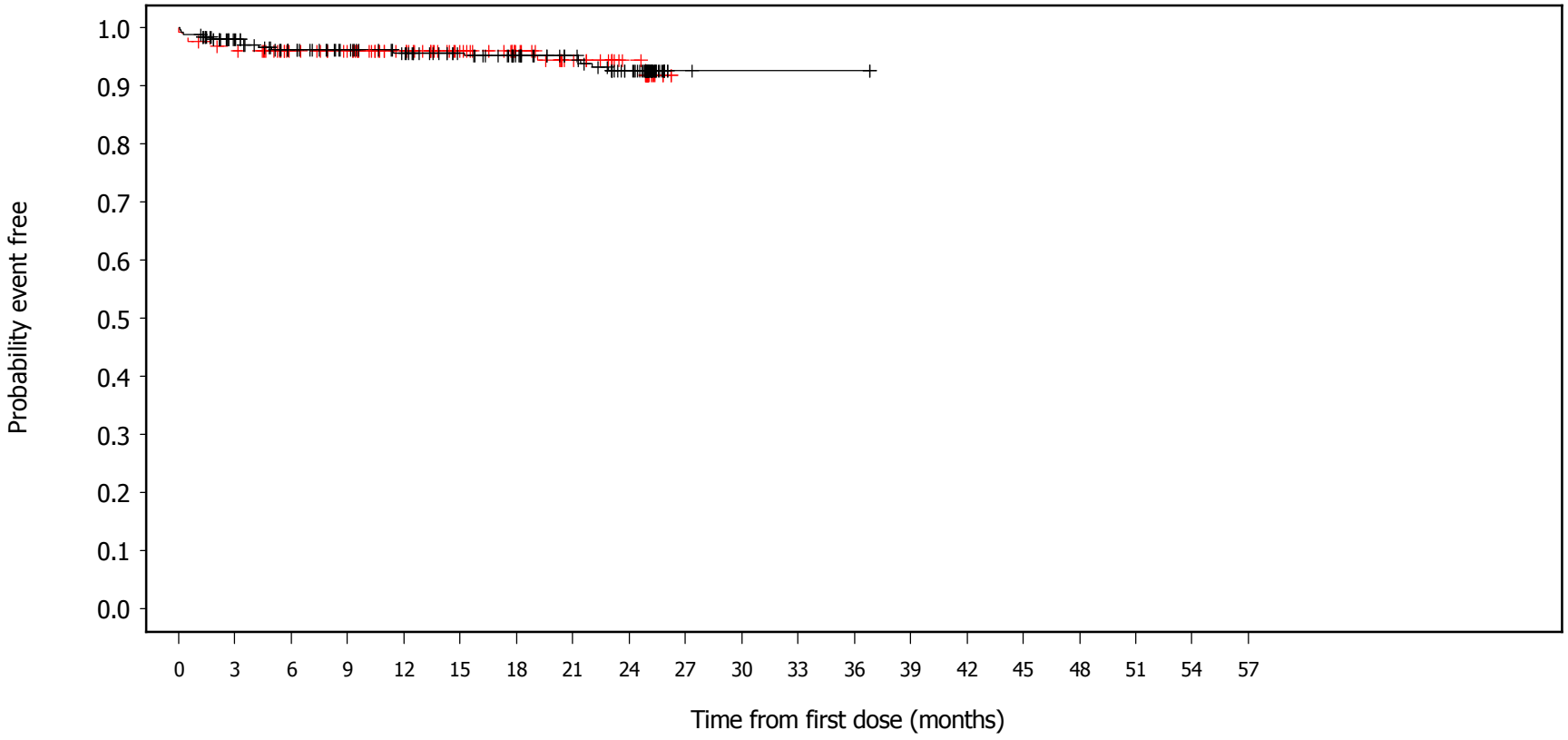
Figure 3.3.5 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Oedema
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	214	200	191	176	162	148	134	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	113	104	88	71	58	46	35	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

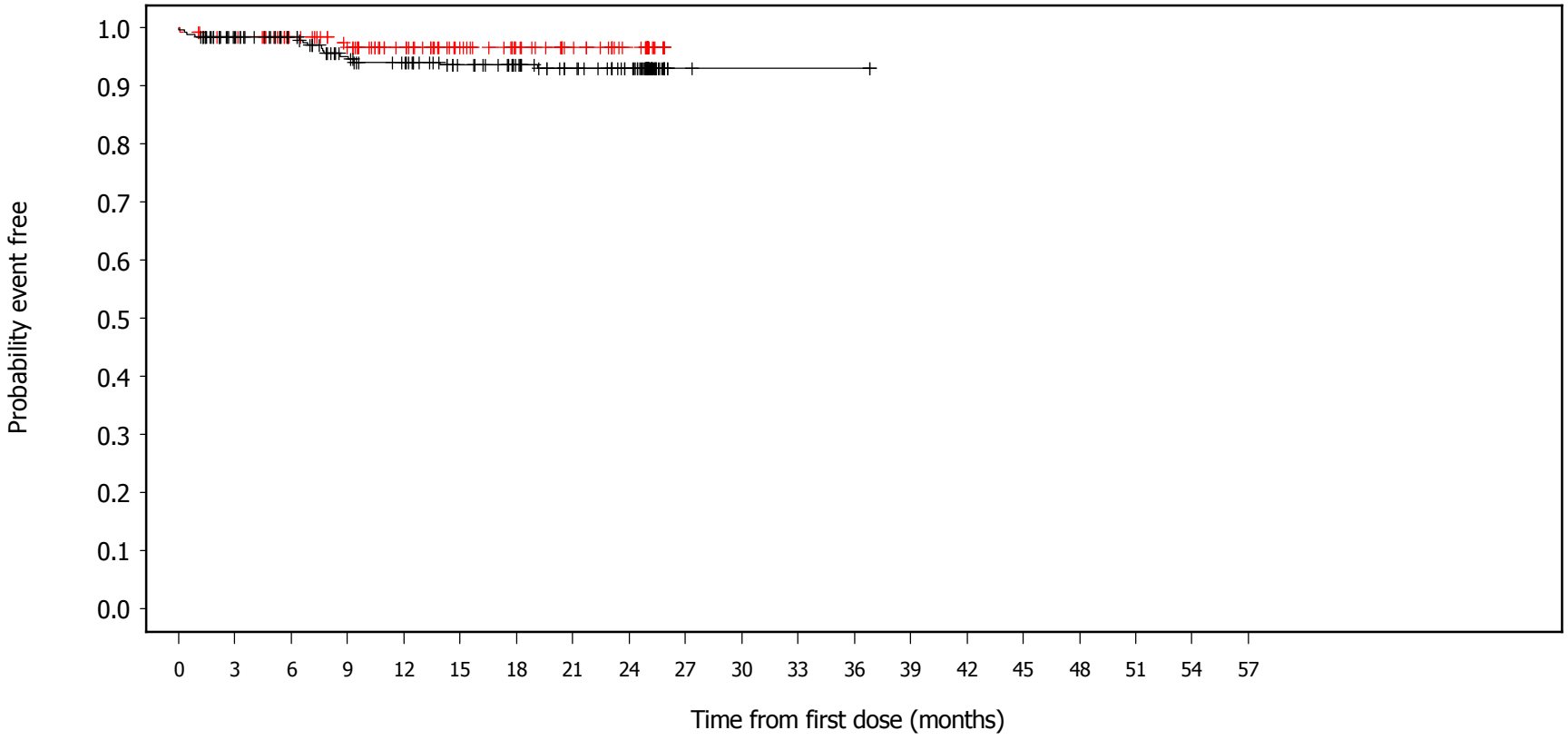
Figure 3.3.6 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Oedema peripheral
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	229	210	198	188	173	160	148	129	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	124	111	104	89	73	61	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

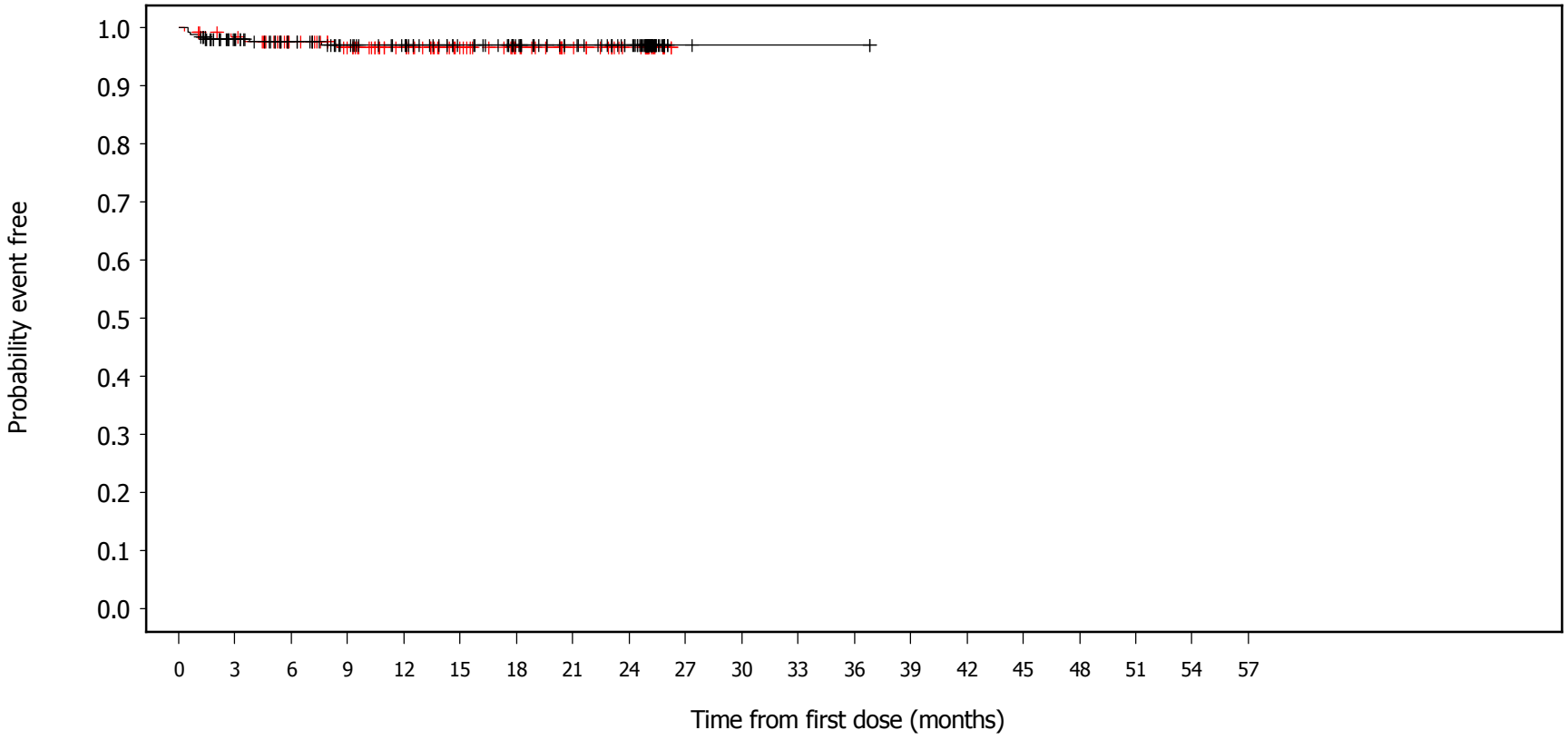
Figure 3.3.7 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Mucosal inflammation
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	215	195	186	170	158	145	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	102	87	70	58	47	35	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

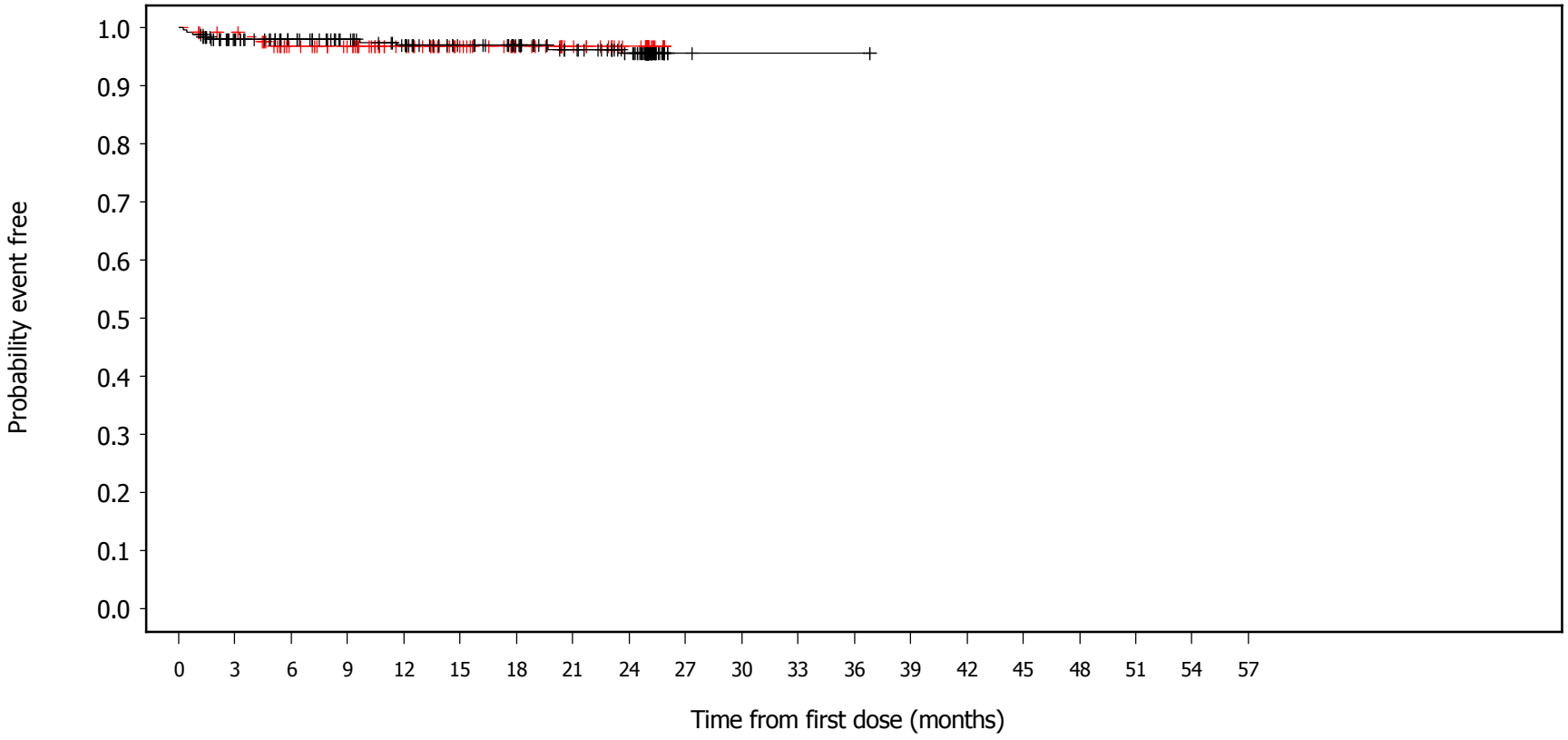
Figure 3.3.8 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Pain
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	229	212	199	190	175	162	149	134	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	103	89	72	60	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

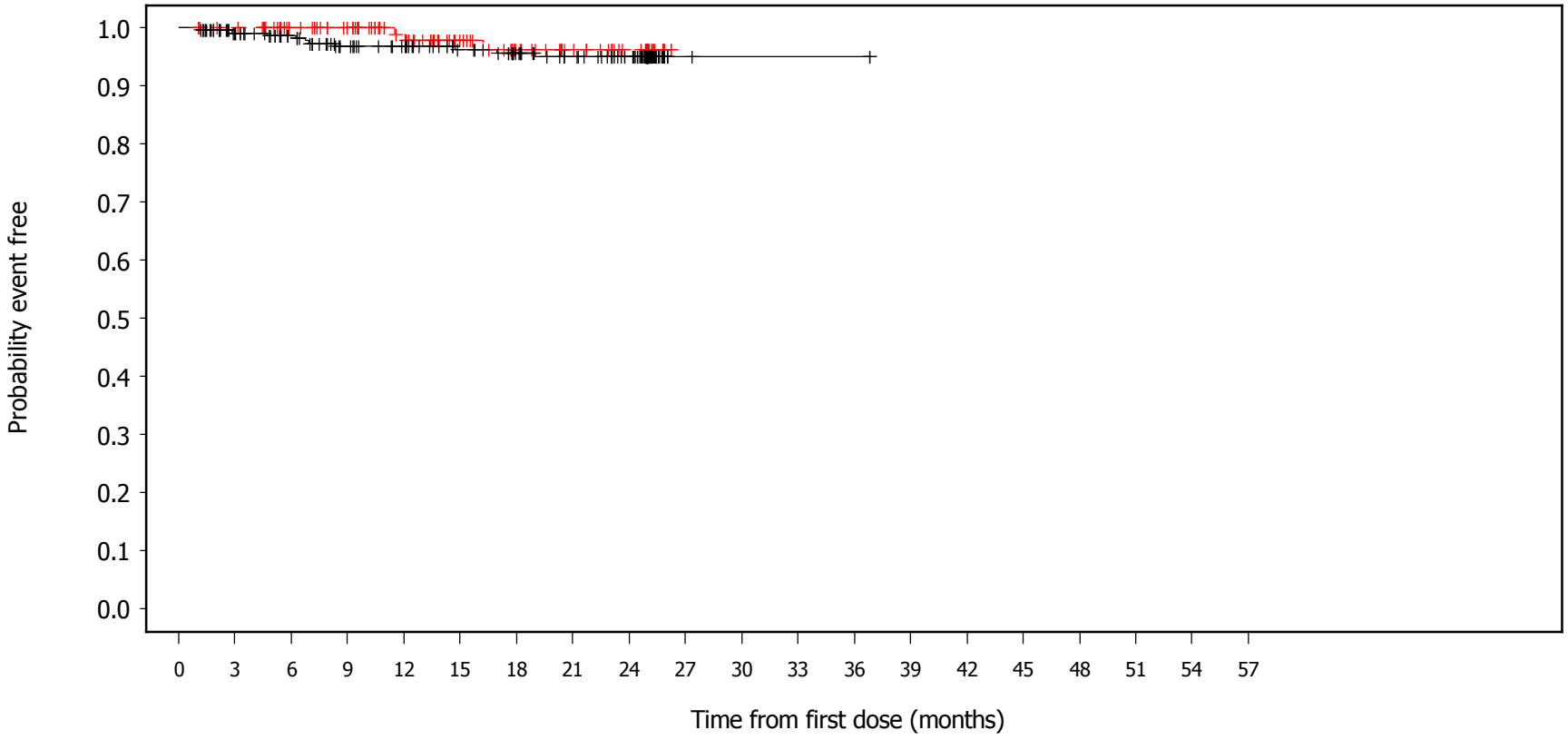
Figure 3.3.9 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Eye disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	229	213	199	189	173	161	147	130	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	111	103	88	71	59	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

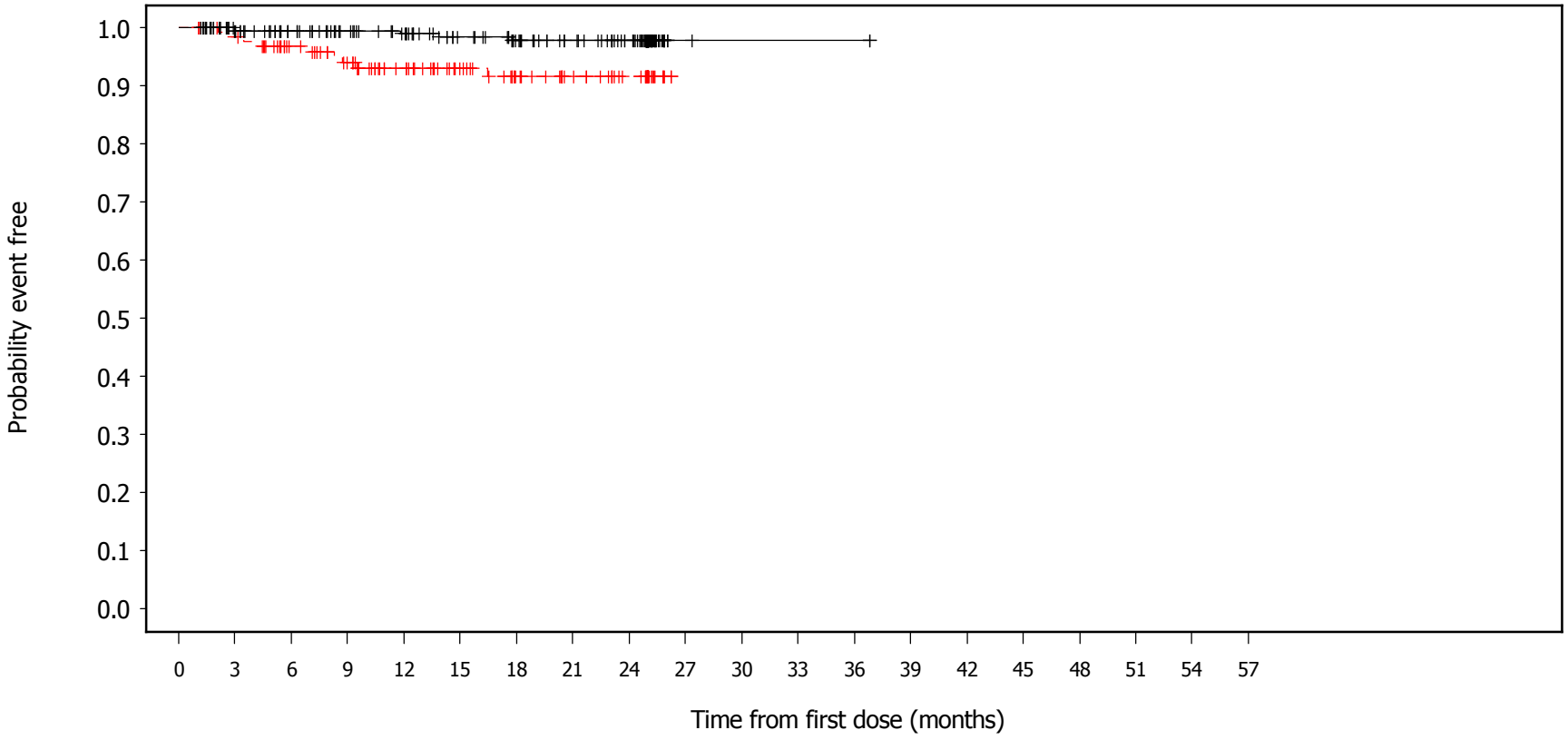
Figure 3.3.10 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Surgical and medical procedures
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	215	197	188	172	160	148	132	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	90	72	59	47	35	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

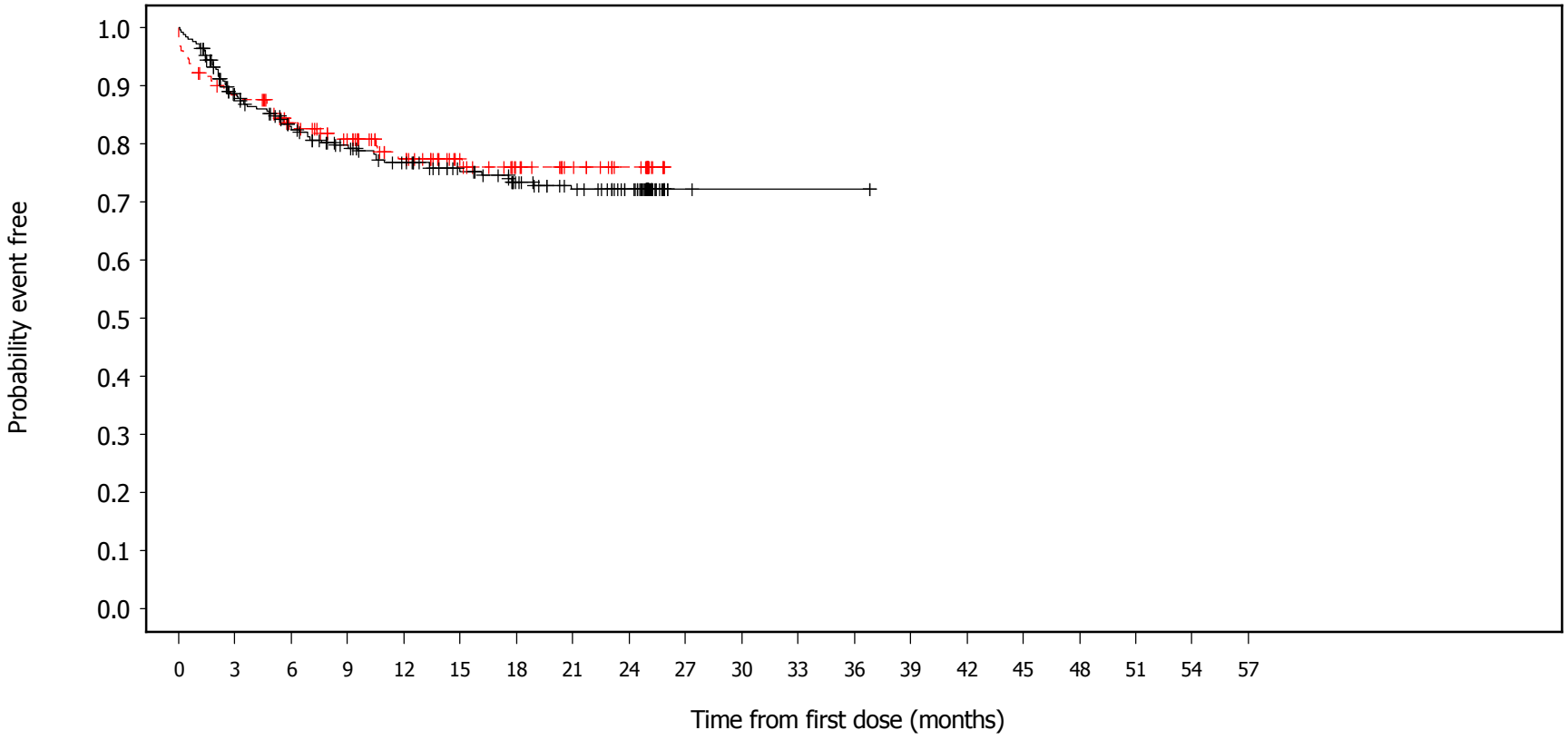
Figure 3.3.11 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Endocrine disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	233	217	203	193	176	163	150	134	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	111	99	83	68	55	45	34	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

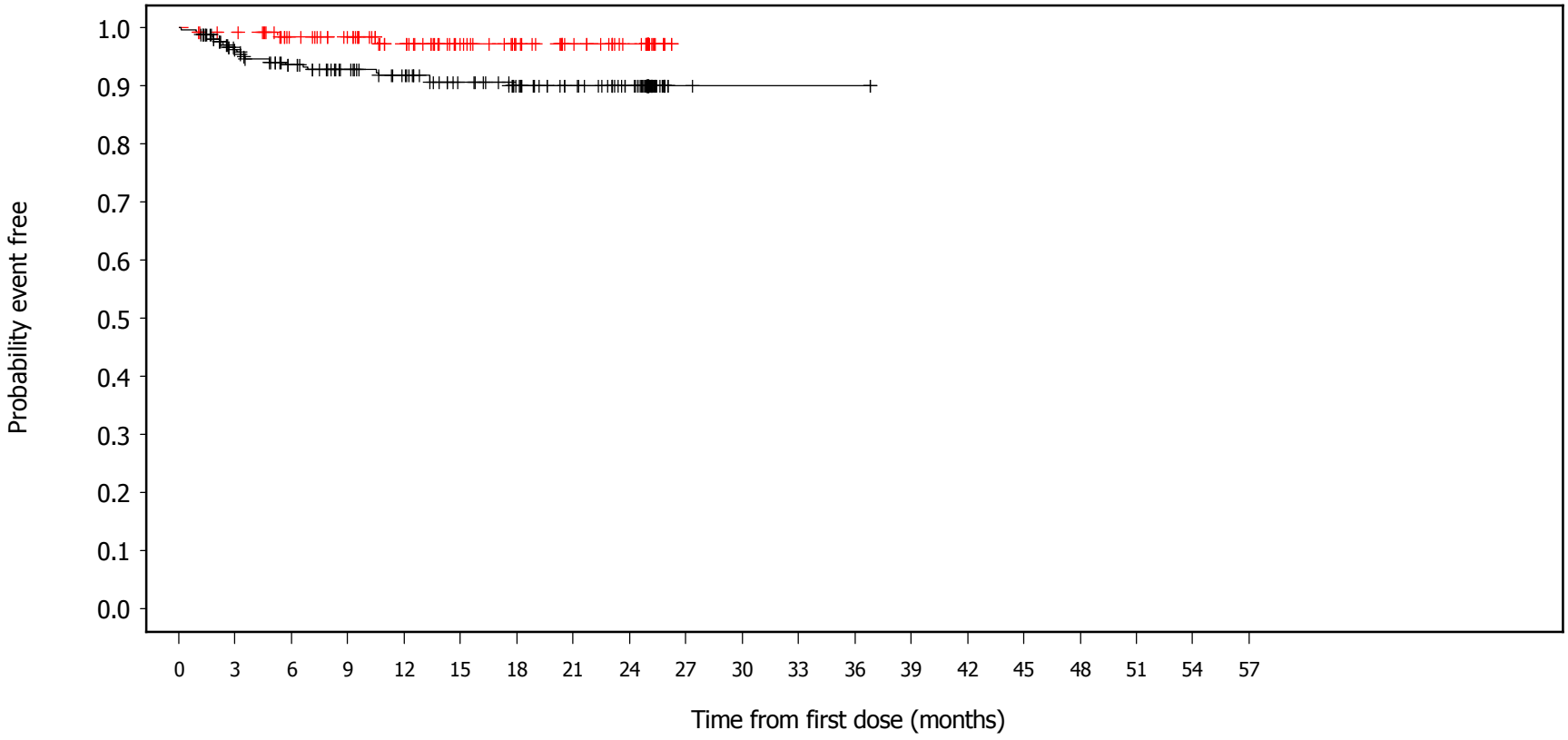
Figure 3.3.12 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Respiratory, thoracic and mediastinal disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	207	183	166	153	138	124	113	100	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	113	96	84	68	53	42	34	25	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

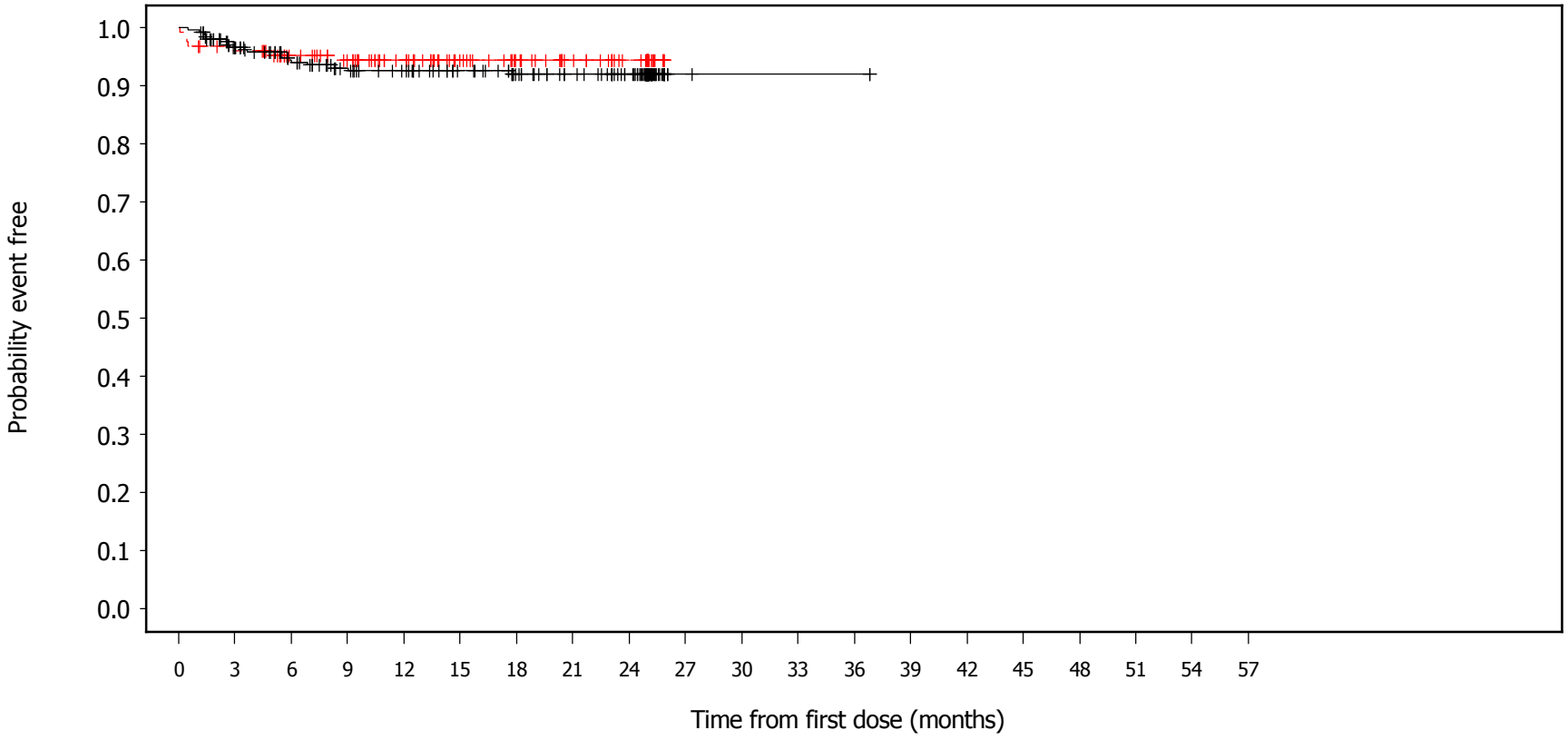
Figure 3.3.13 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Dyspnoea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	225	206	191	180	164	151	138	122	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	114	105	90	73	61	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

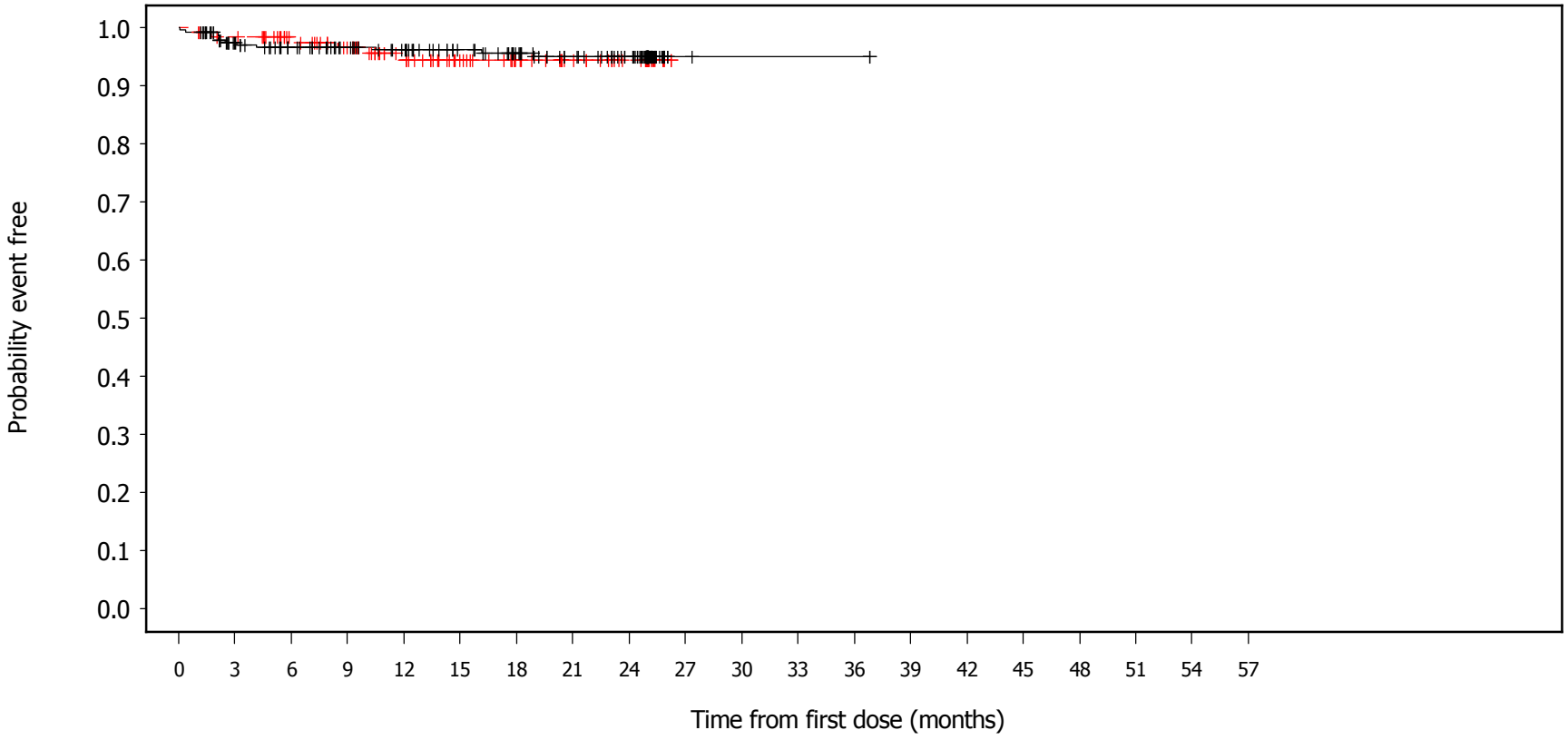
Figure 3.3.14 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Epistaxis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	227	206	190	181	167	154	143	128	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	123	110	100	85	68	56	44	32	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

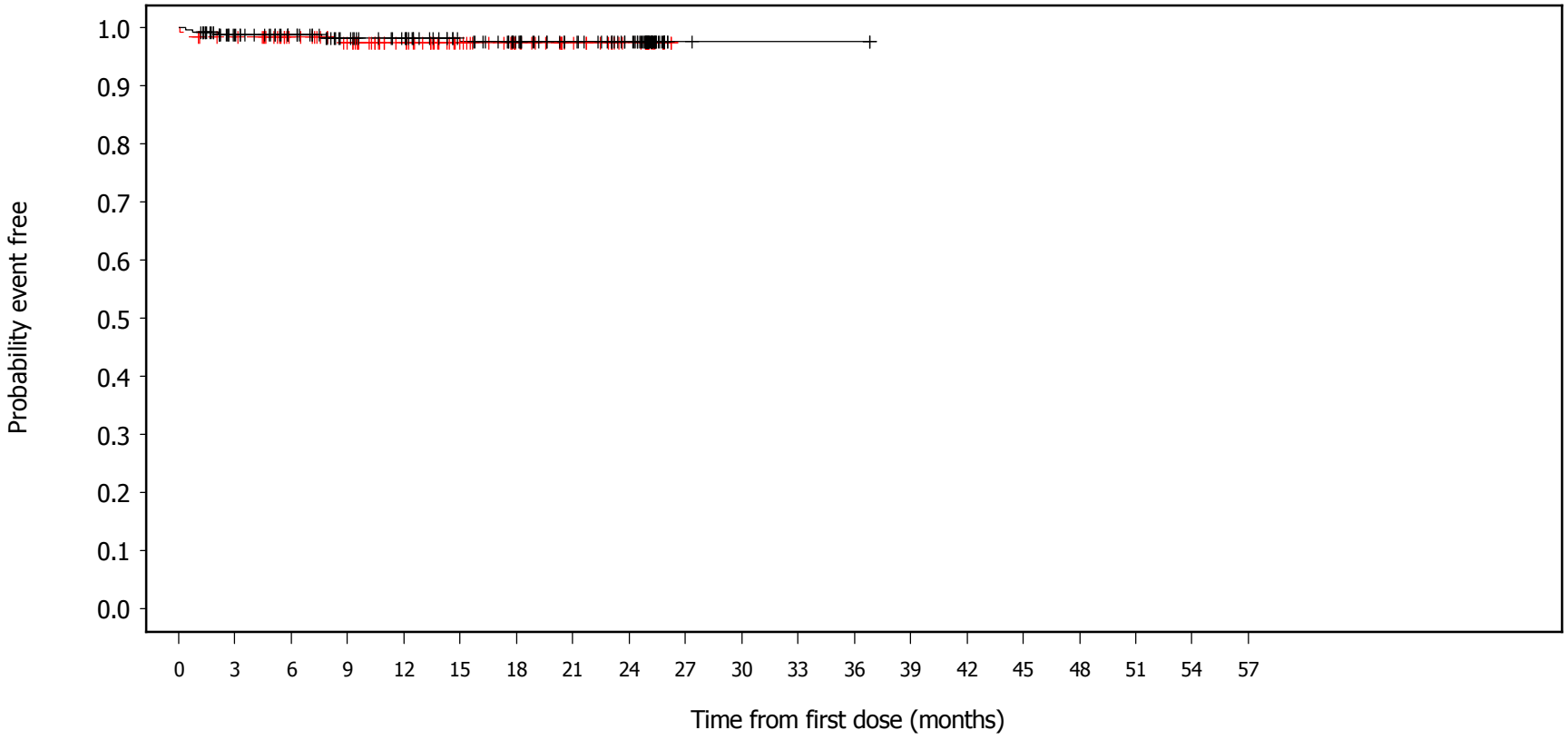
Figure 3.3.15 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Cough
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	228	213	200	190	174	160	146	130	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	102	85	70	58	47	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

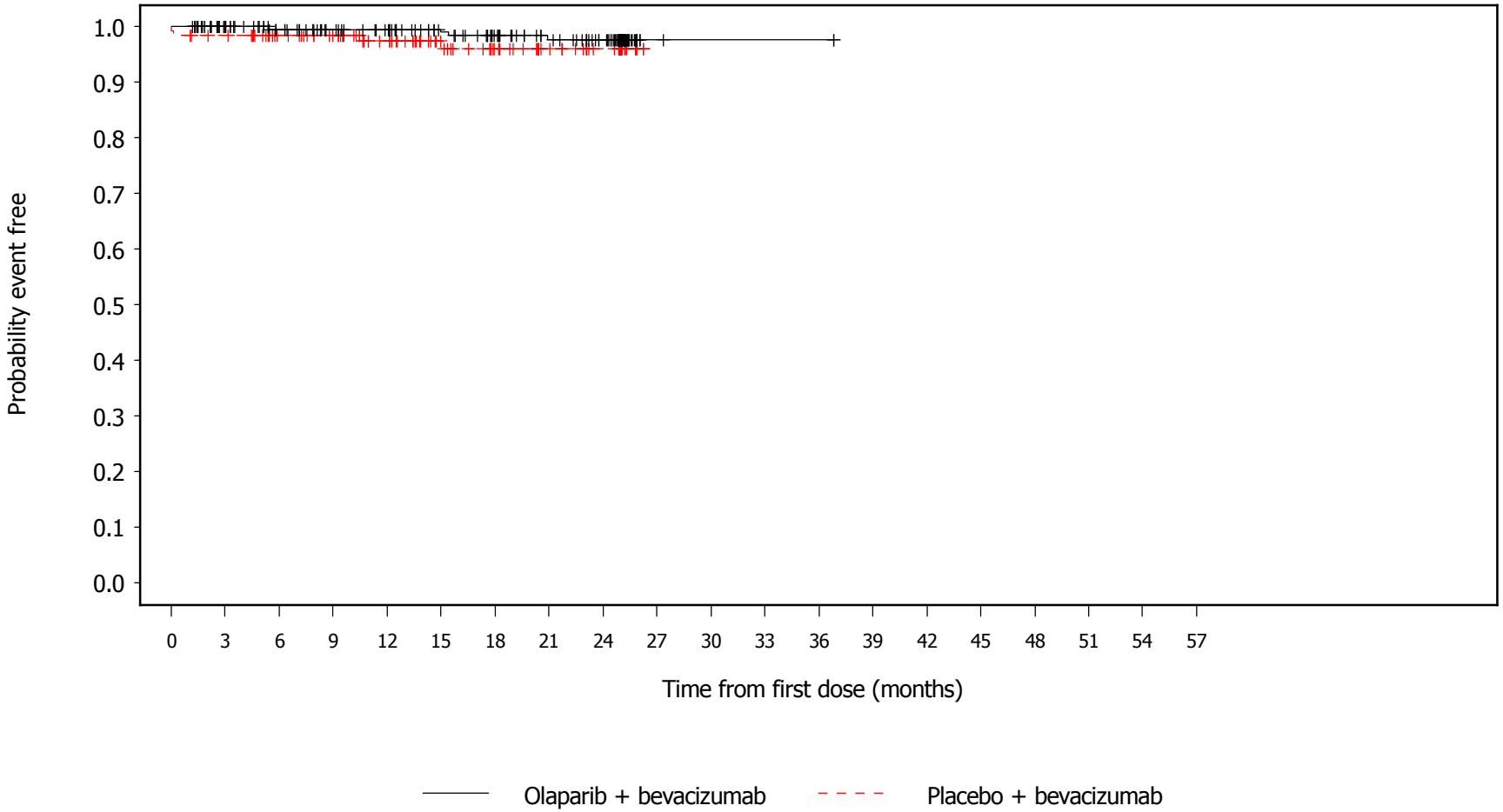
Figure 3.3.16 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Rhinorrhoea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	216	201	192	176	162	149	134	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	103	88	71	59	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

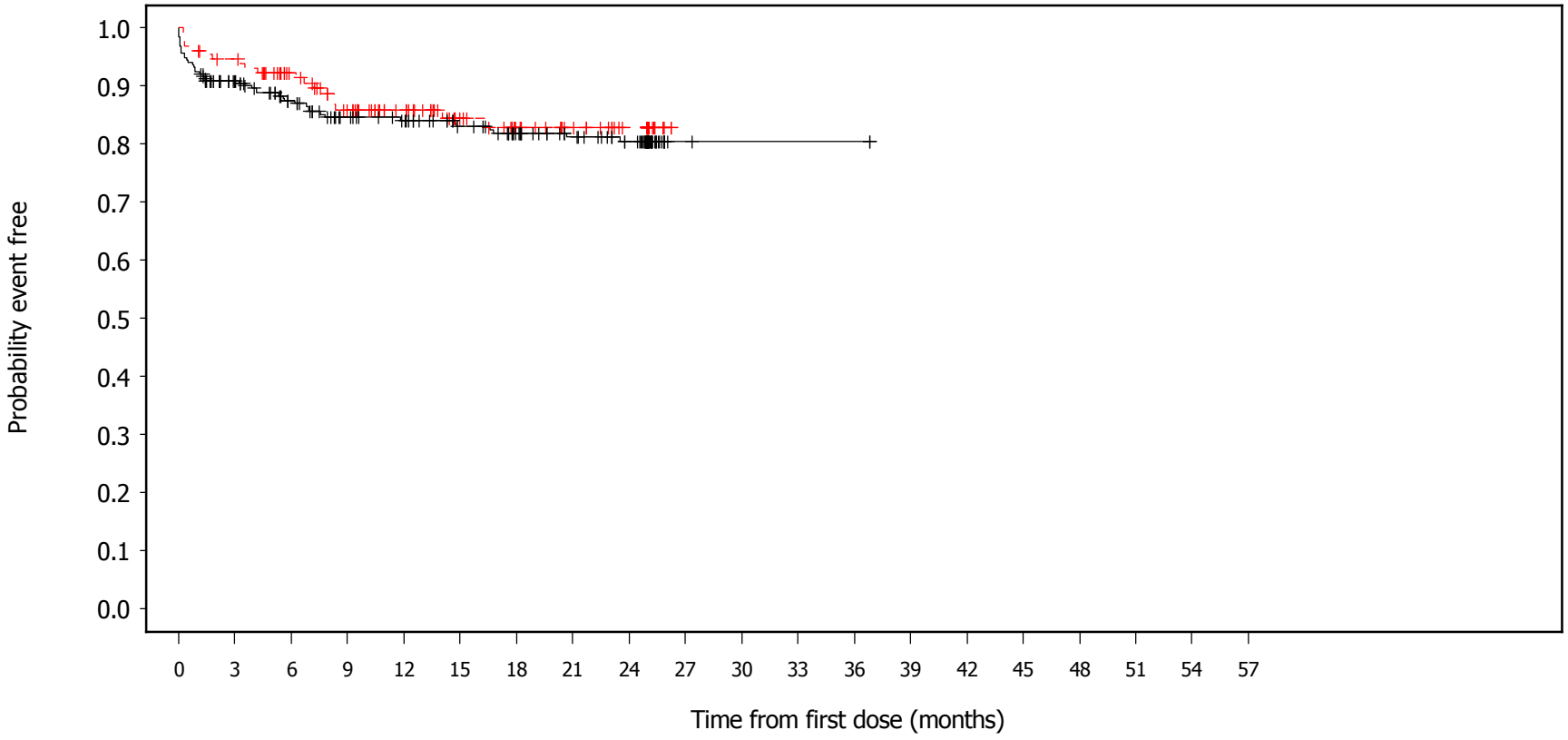
Figure 3.3.17 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Oropharyngeal pain
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	234	217	203	195	178	164	150	136	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	104	88	71	59	47	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

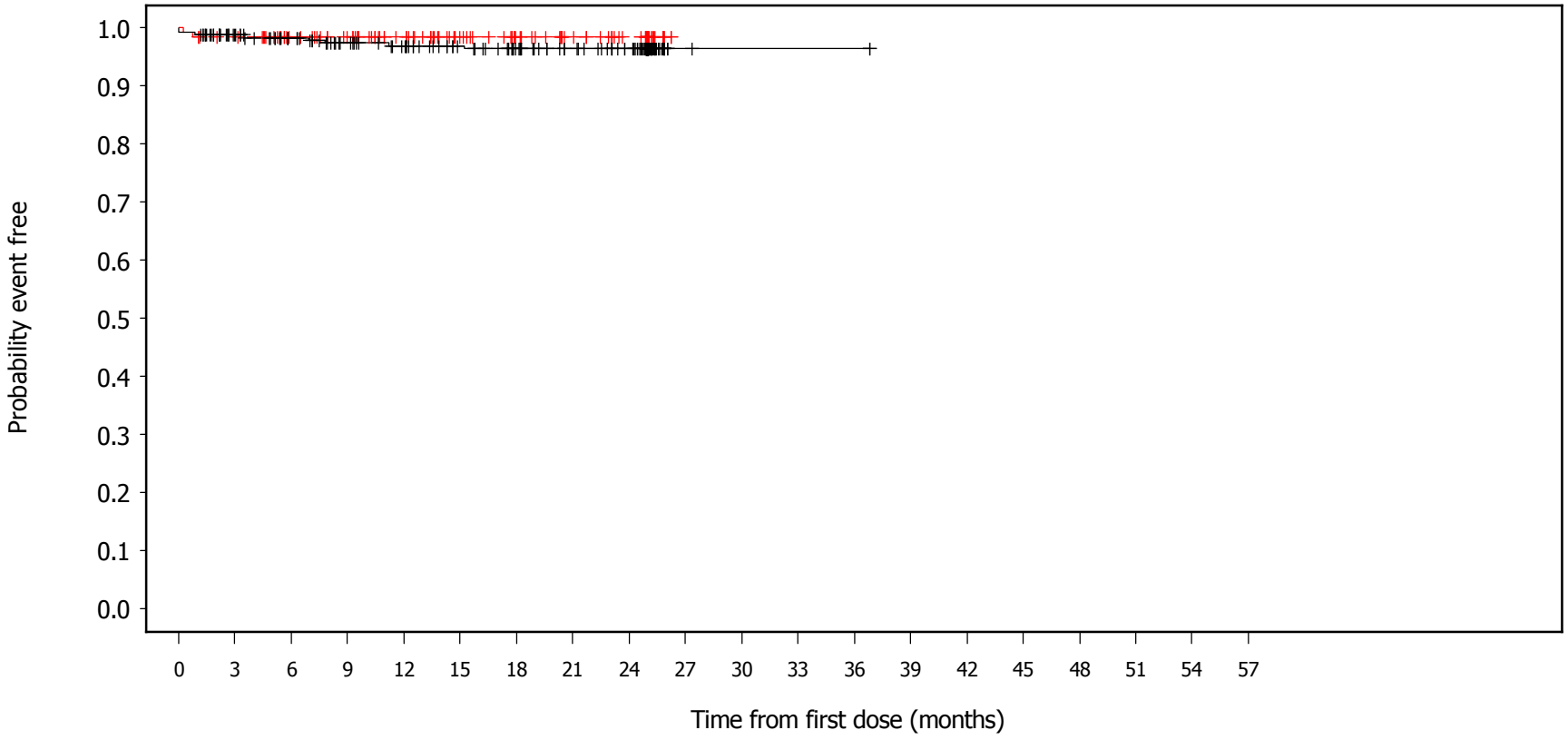
Figure 3.3.18 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Skin and subcutaneous tissue disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	214	191	172	164	149	136	123	111	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	121	105	89	74	57	46	38	28	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

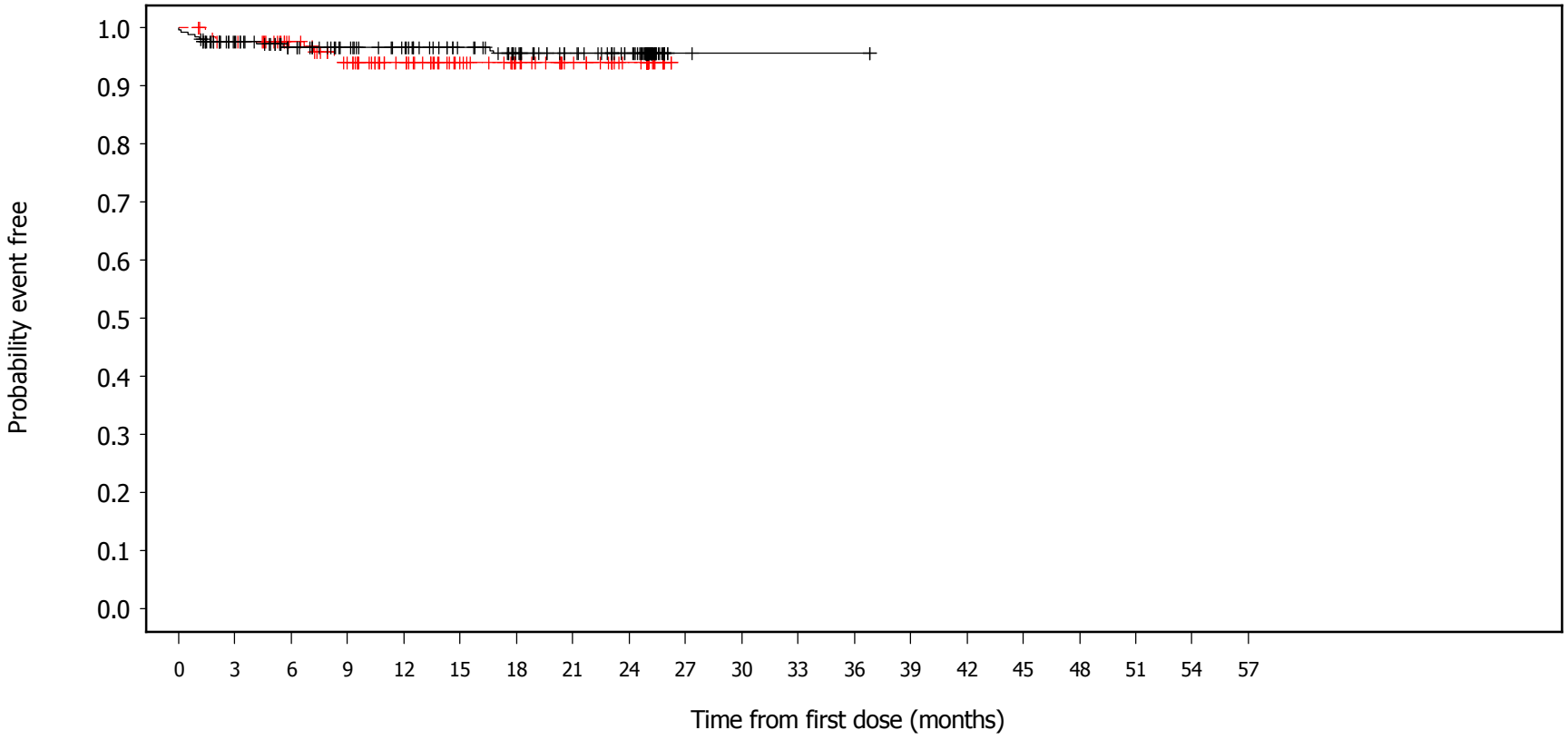
Figure 3.3.19 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Alopecia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	216	200	190	175	161	148	135	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	104	89	72	60	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

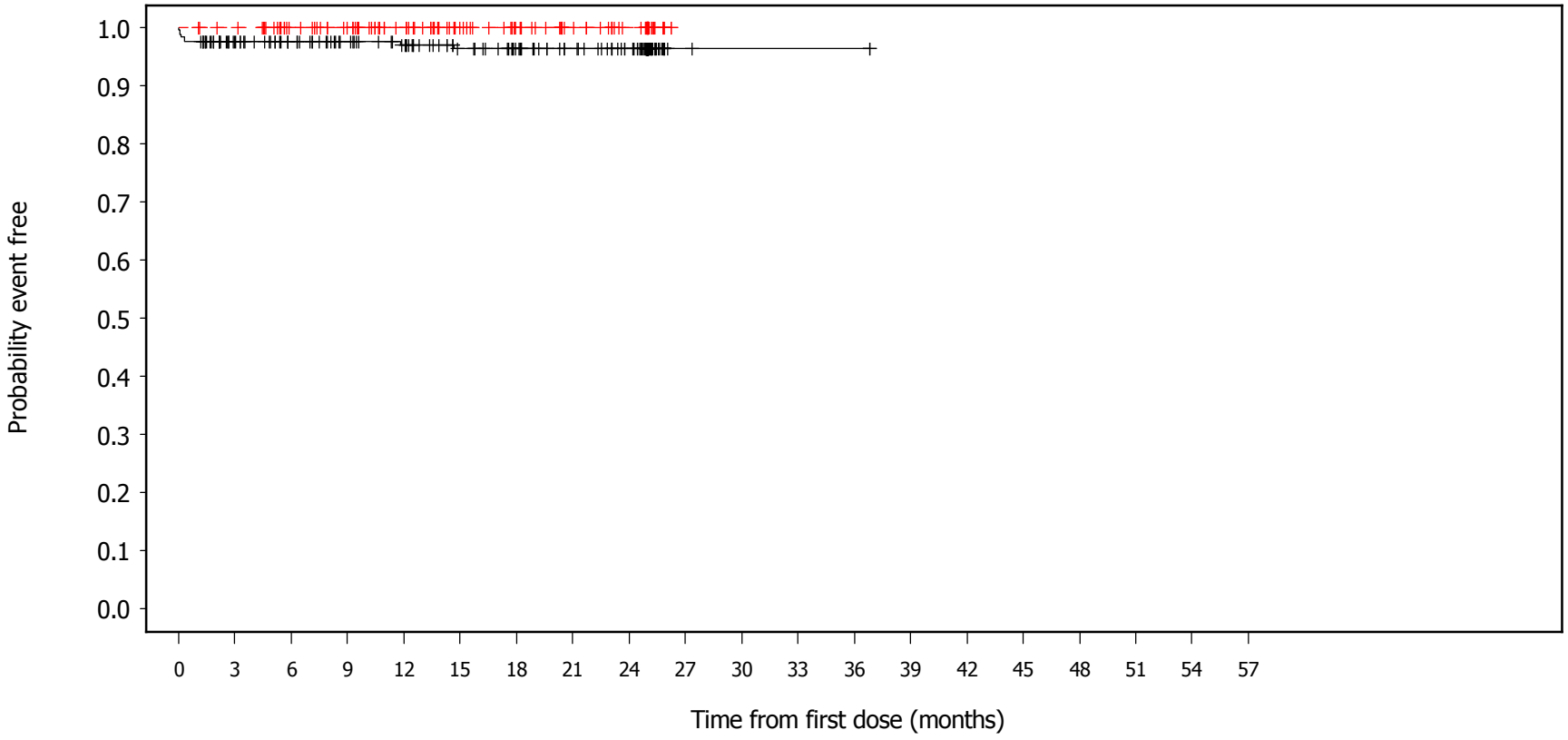
Figure 3.3.20 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Rash
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	229	211	198	189	174	159	146	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	125	112	99	84	67	56	46	34	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

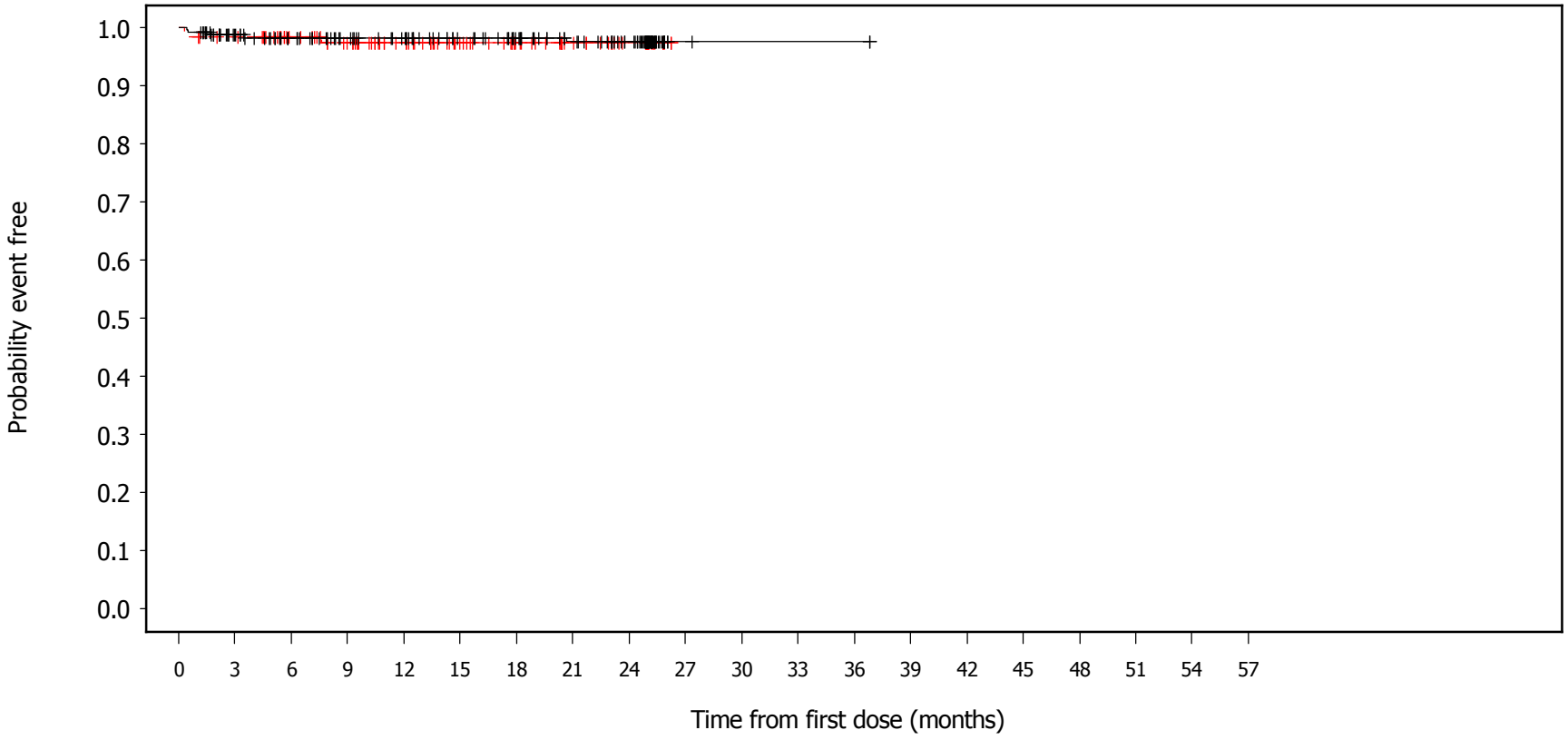
Figure 3.3.21 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Erythema
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	228	212	198	188	171	158	145	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

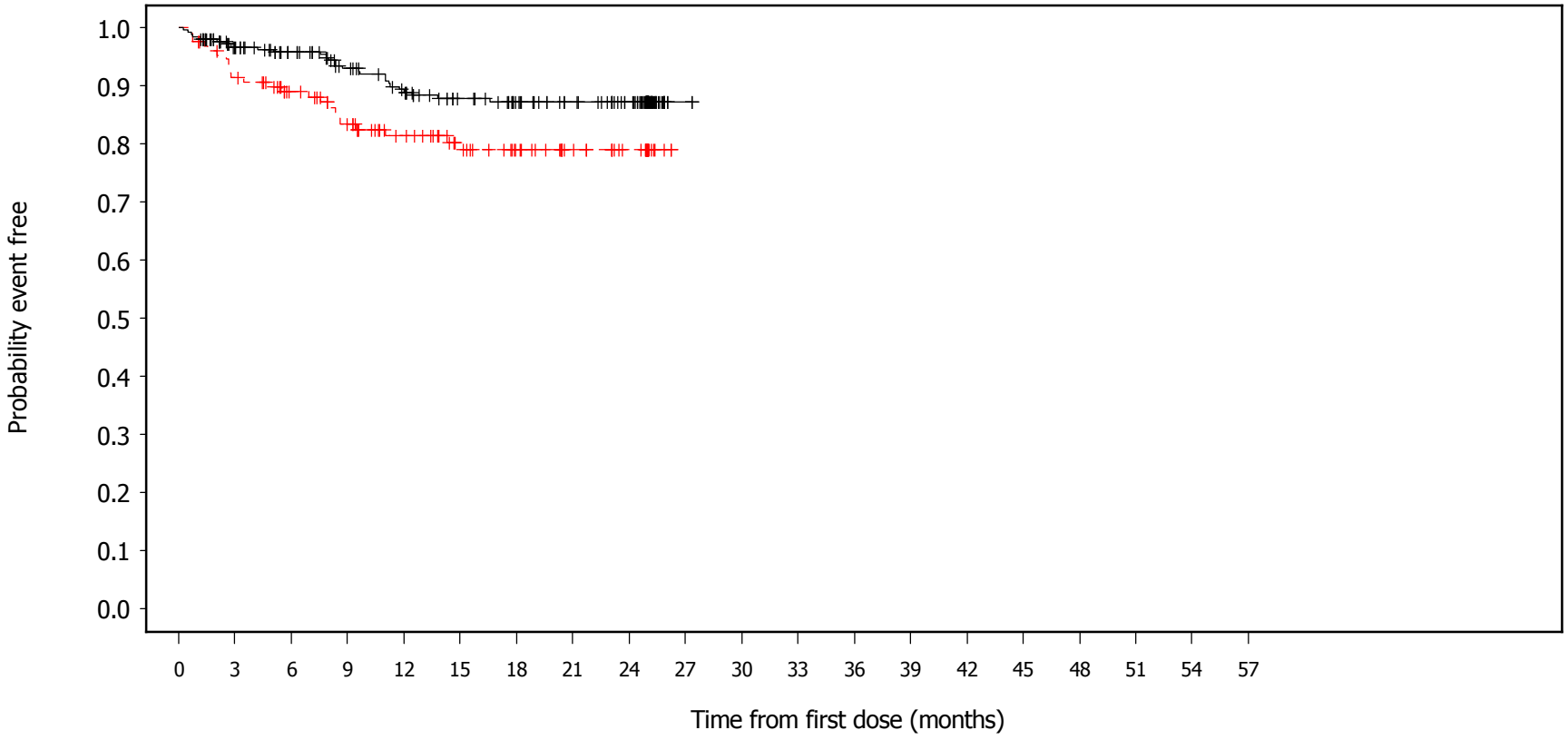
Figure 3.3.22 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Pruritus
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	214	200	191	175	163	149	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	103	88	72	60	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

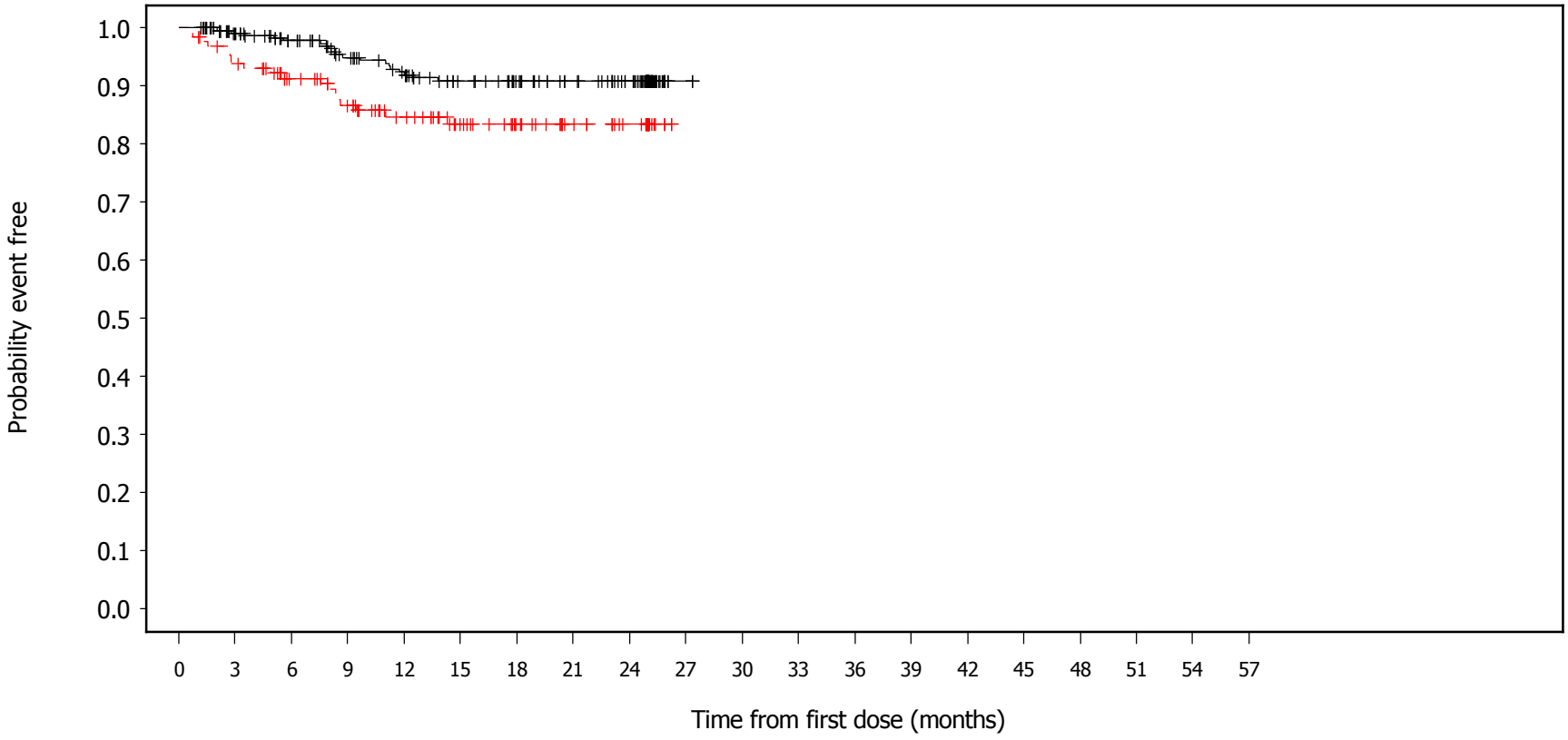
Figure 3.3.23 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Renal and urinary disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	226	208	189	174	158	145	134	119	1	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	117	102	89	75	63	52	40	30	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

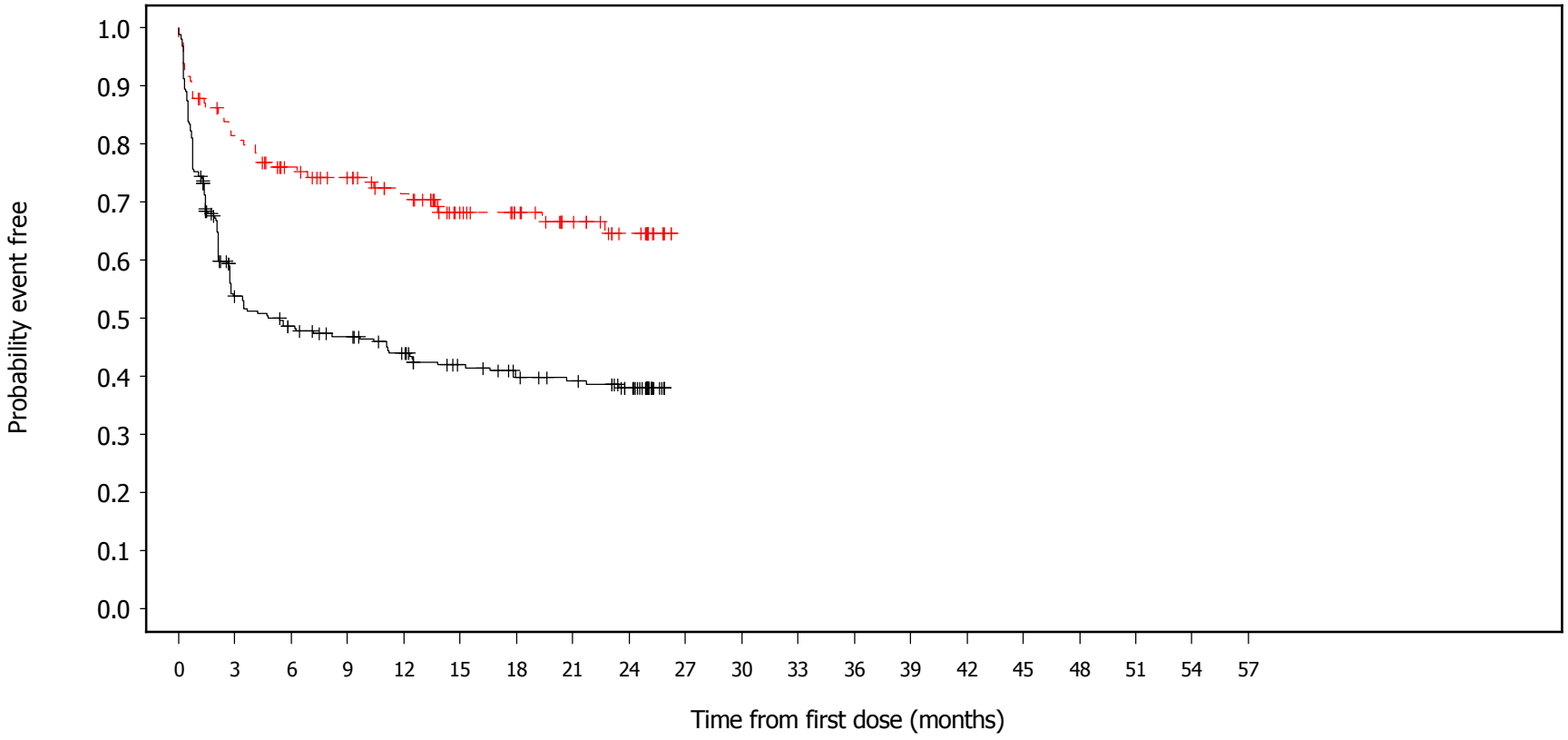
Figure 3.3.24 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	213	194	180	163	151	140	125	1	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	120	105	93	79	65	53	41	31	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

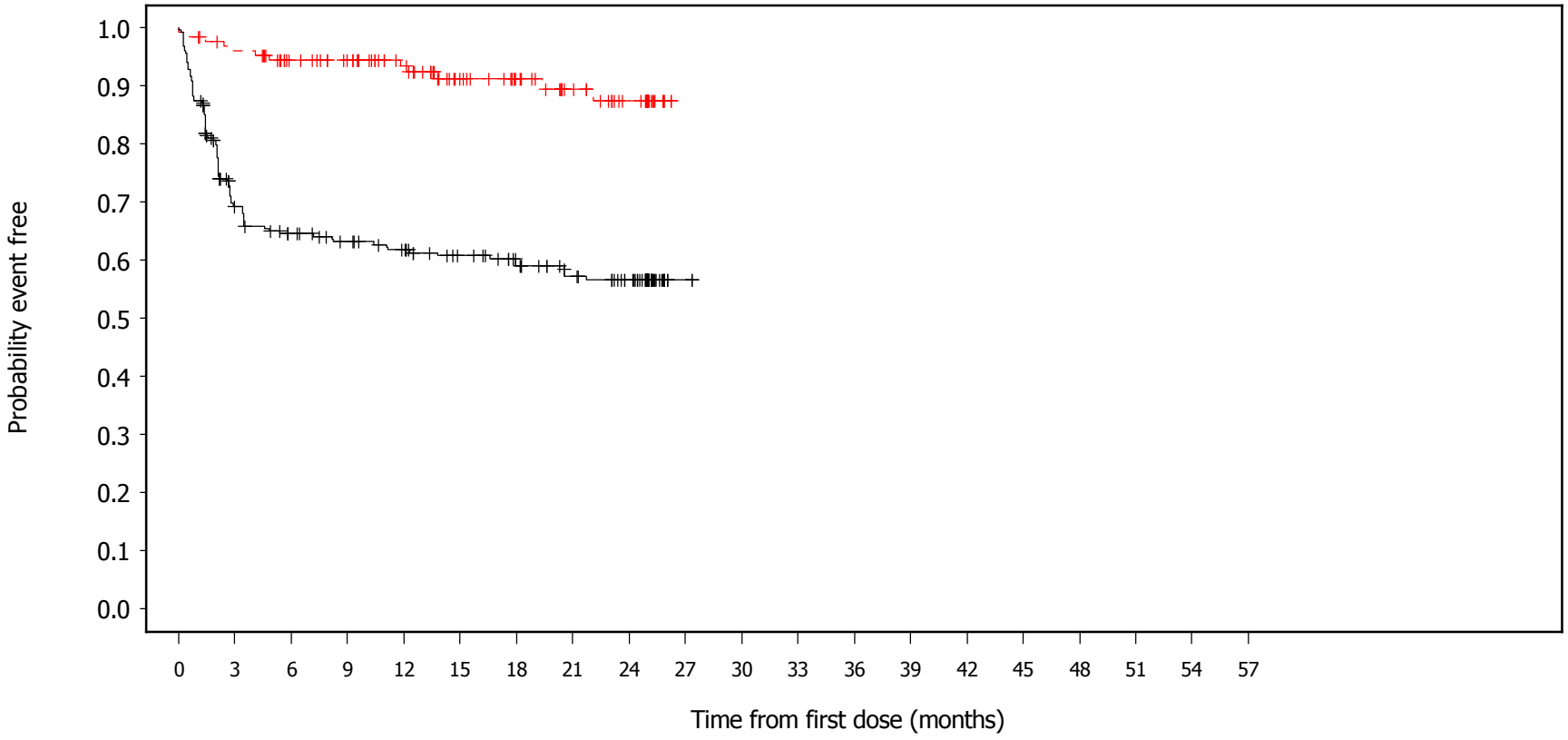
Figure 3.3.25 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	125	110	102	91	79	71	67	57	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	104	90	82	72	55	48	37	27	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

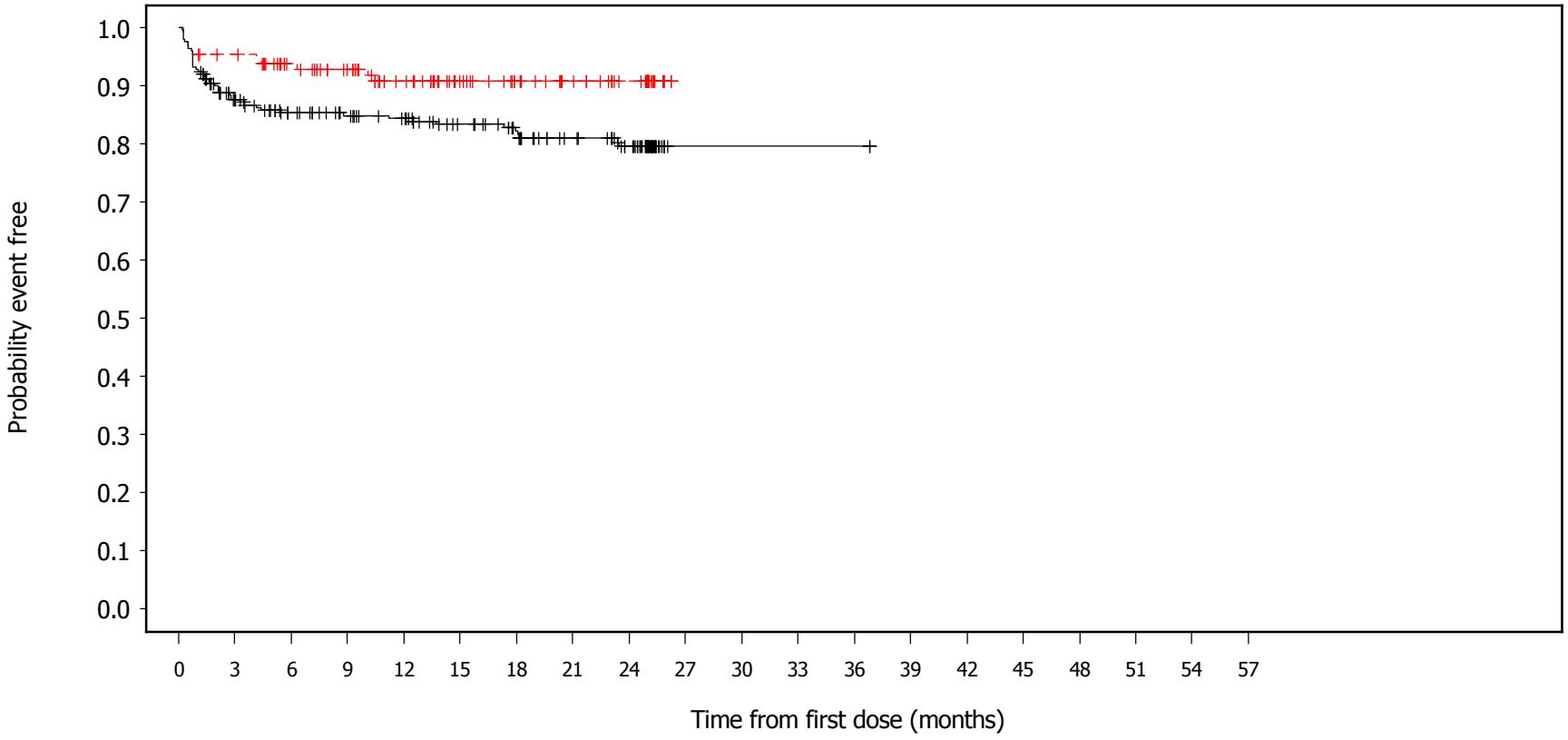
Figure 3.3.26 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	161	144	135	127	116	105	94	83	1	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	123	110	102	88	70	59	46	34	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

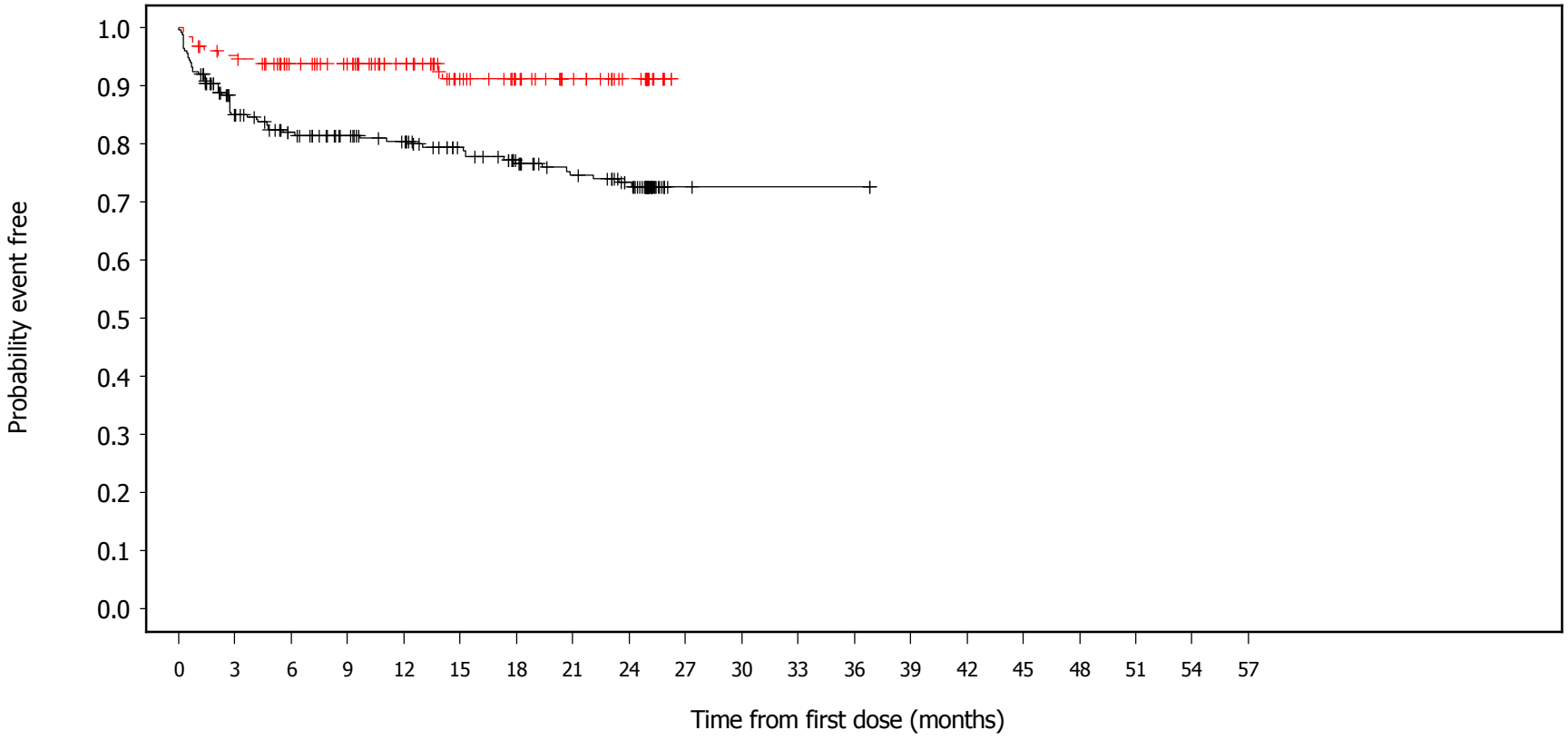
Figure 3.3.27 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Leukopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	205	185	174	166	151	140	126	111	1	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	122	108	98	83	68	58	48	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

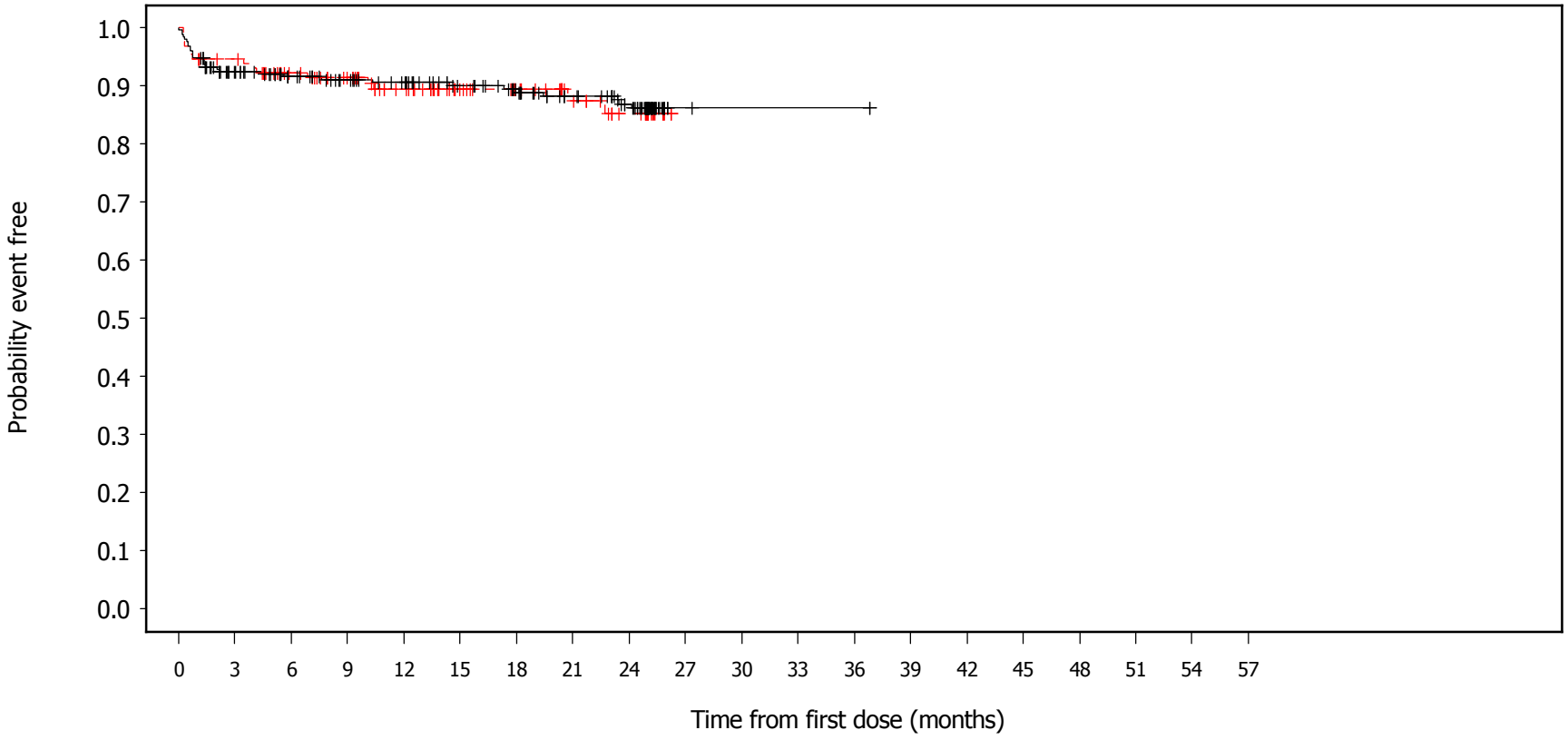
Figure 3.3.28 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Lymphopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	199	181	168	159	142	127	116	104	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	122	108	100	86	68	57	46	34	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

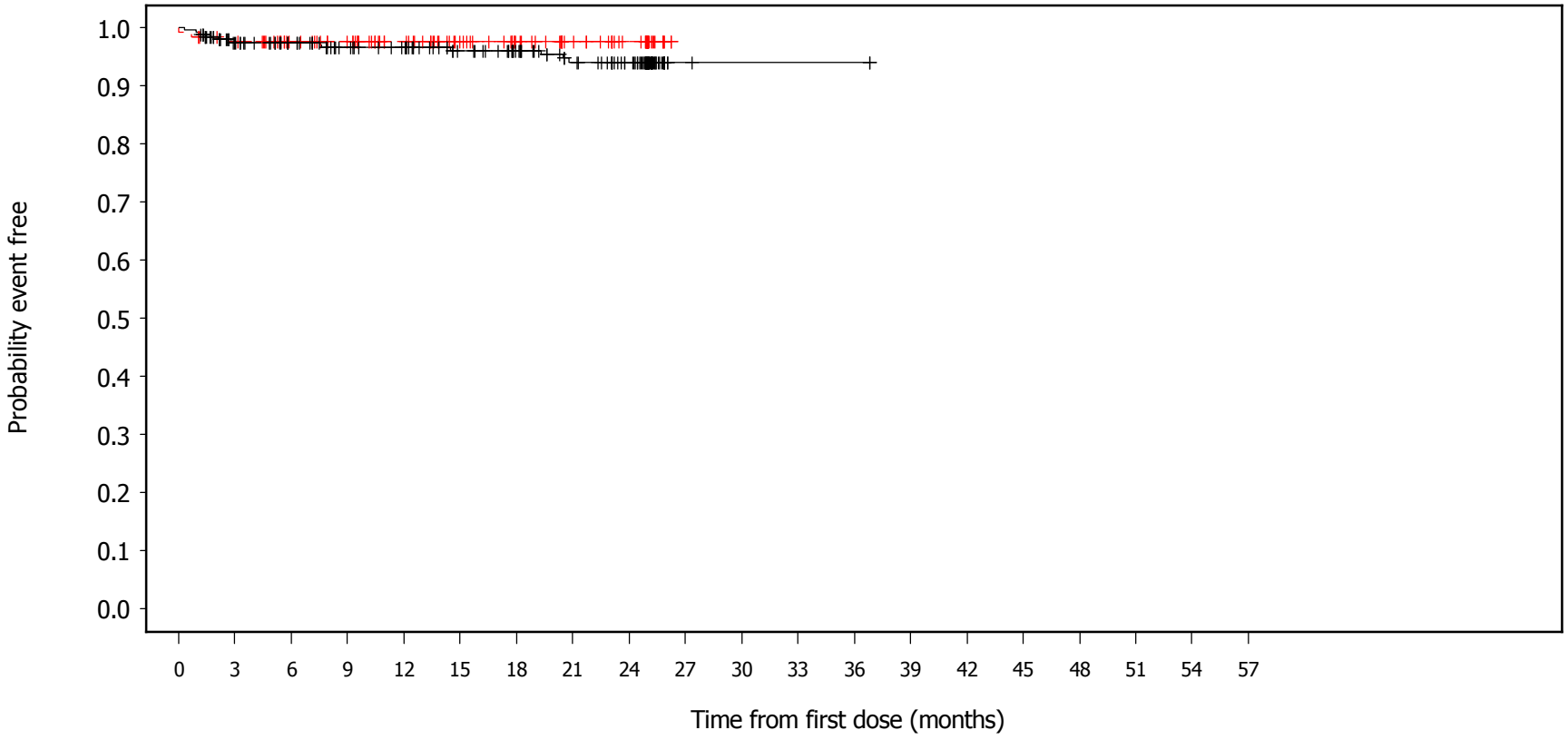
Figure 3.3.29 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	218	200	188	179	163	152	138	122	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	121	107	97	82	66	57	45	35	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

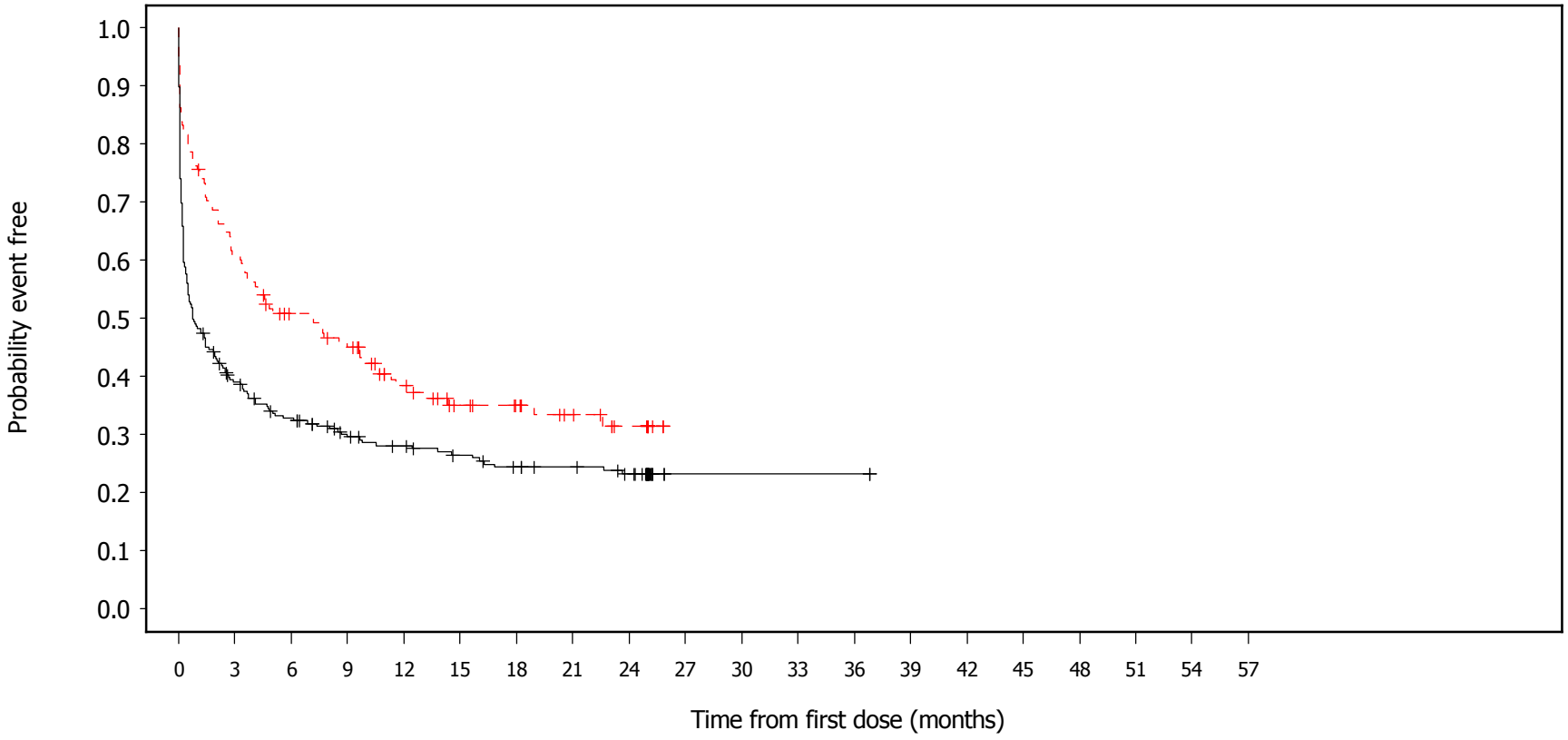
Figure 3.3.30 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	228	213	198	191	174	161	145	130	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	125	112	104	90	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

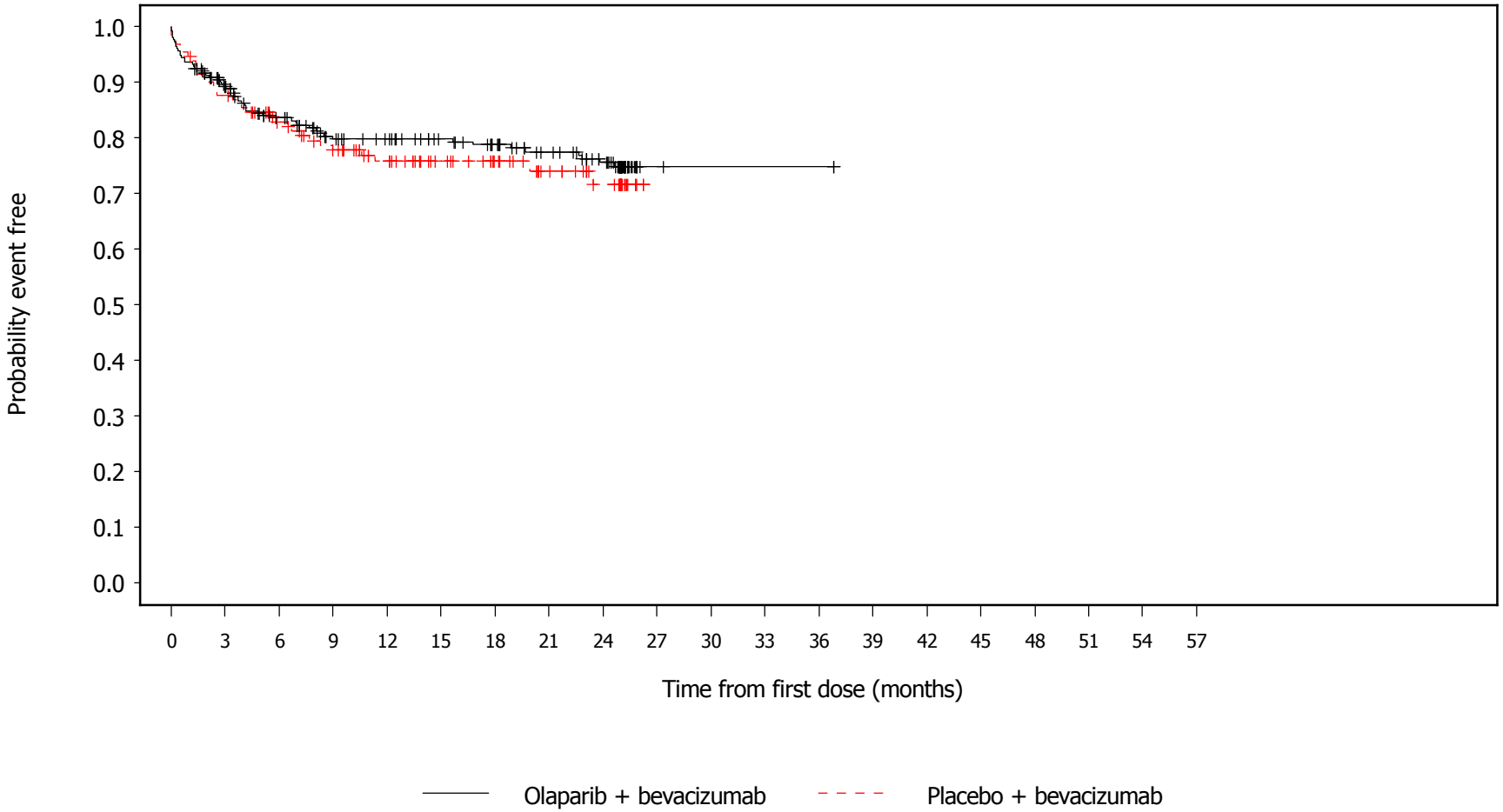
Figure 3.3.31 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Gastrointestinal disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	95	77	62	56	50	44	41	36	1	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	79	61	53	38	28	24	19	13	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

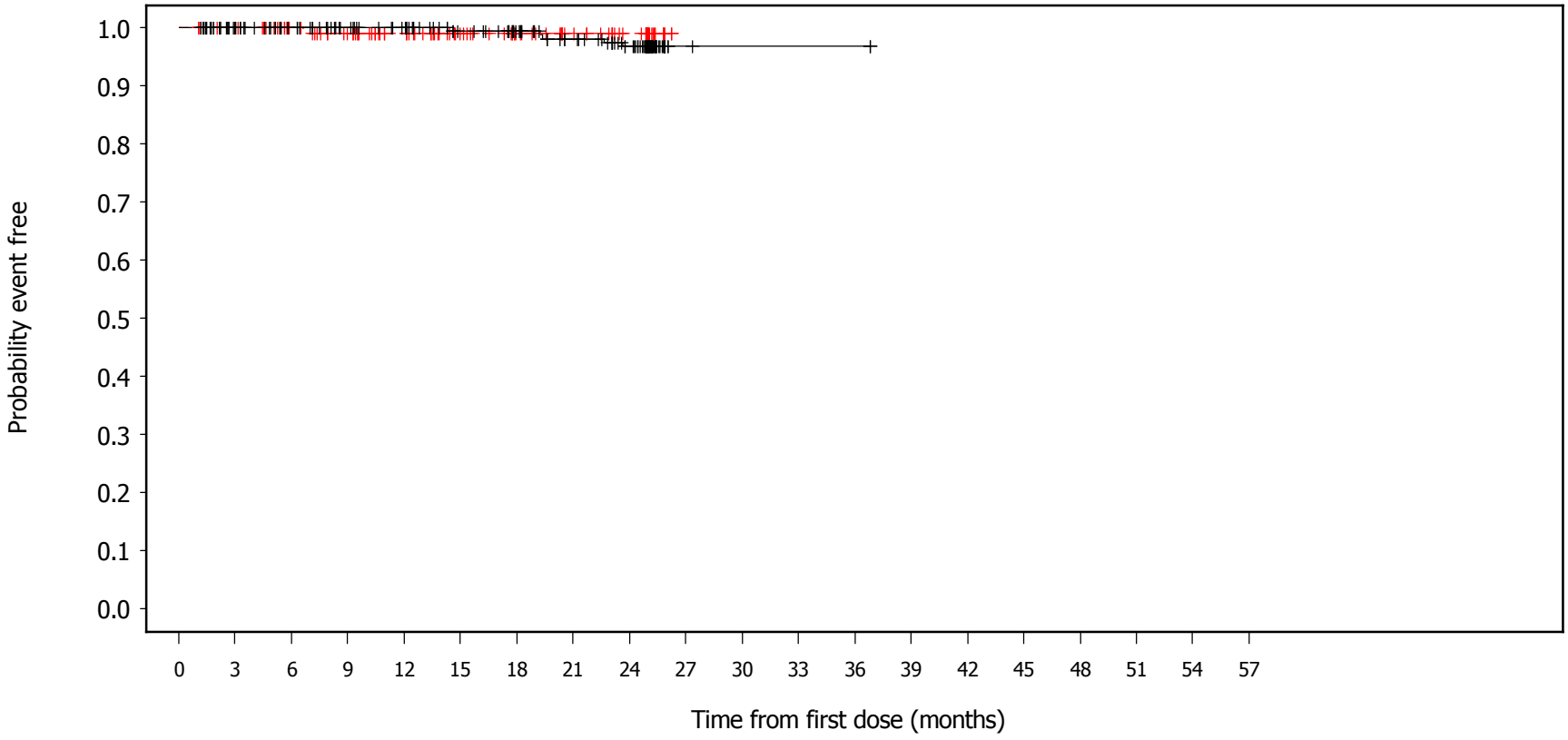
Figure 3.3.32 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Abdominal pain
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	211	186	166	158	147	137	124	110	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	114	99	87	74	61	51	40	29	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

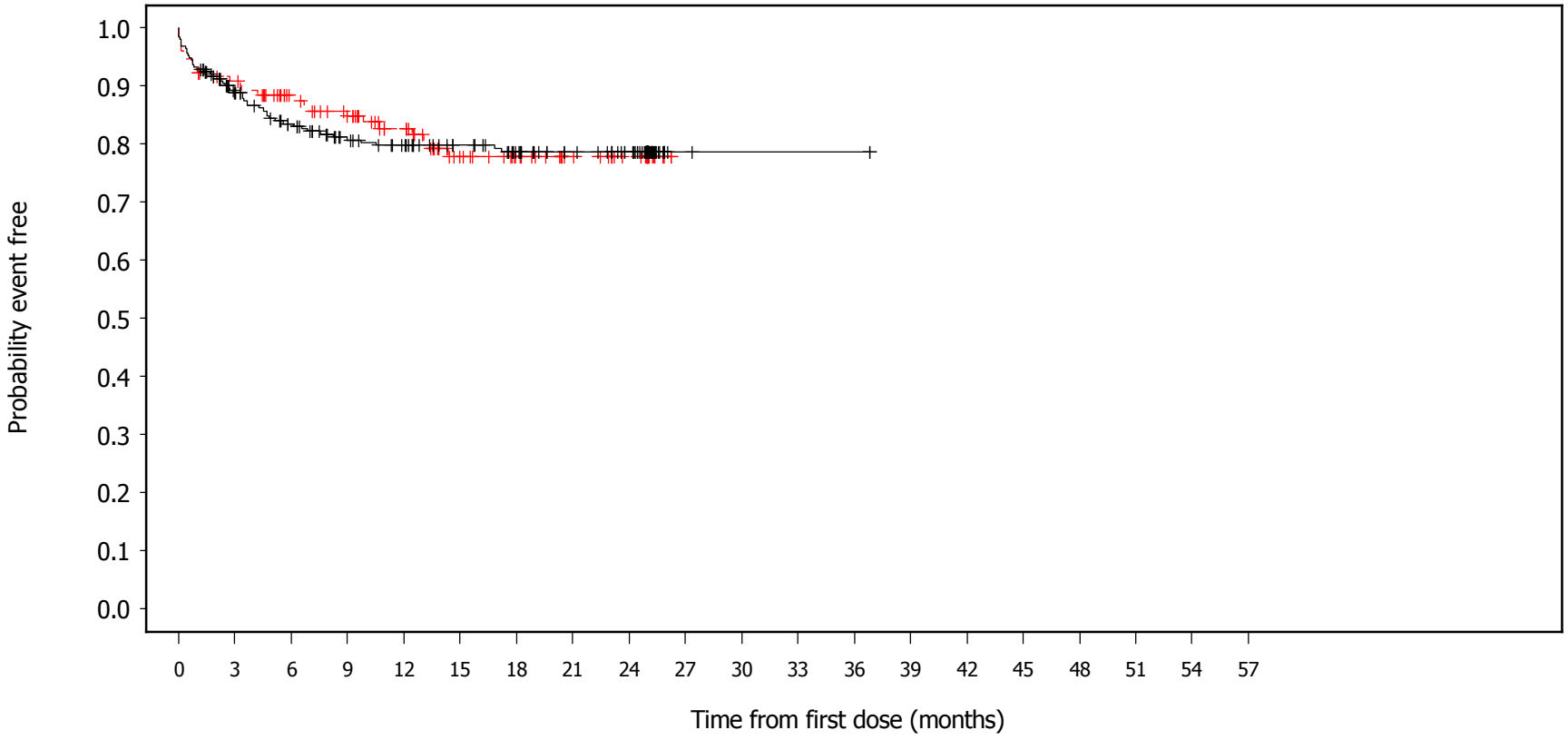
Figure 3.3.33 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Intestinal obstruction
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	234	218	204	195	178	166	151	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	105	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

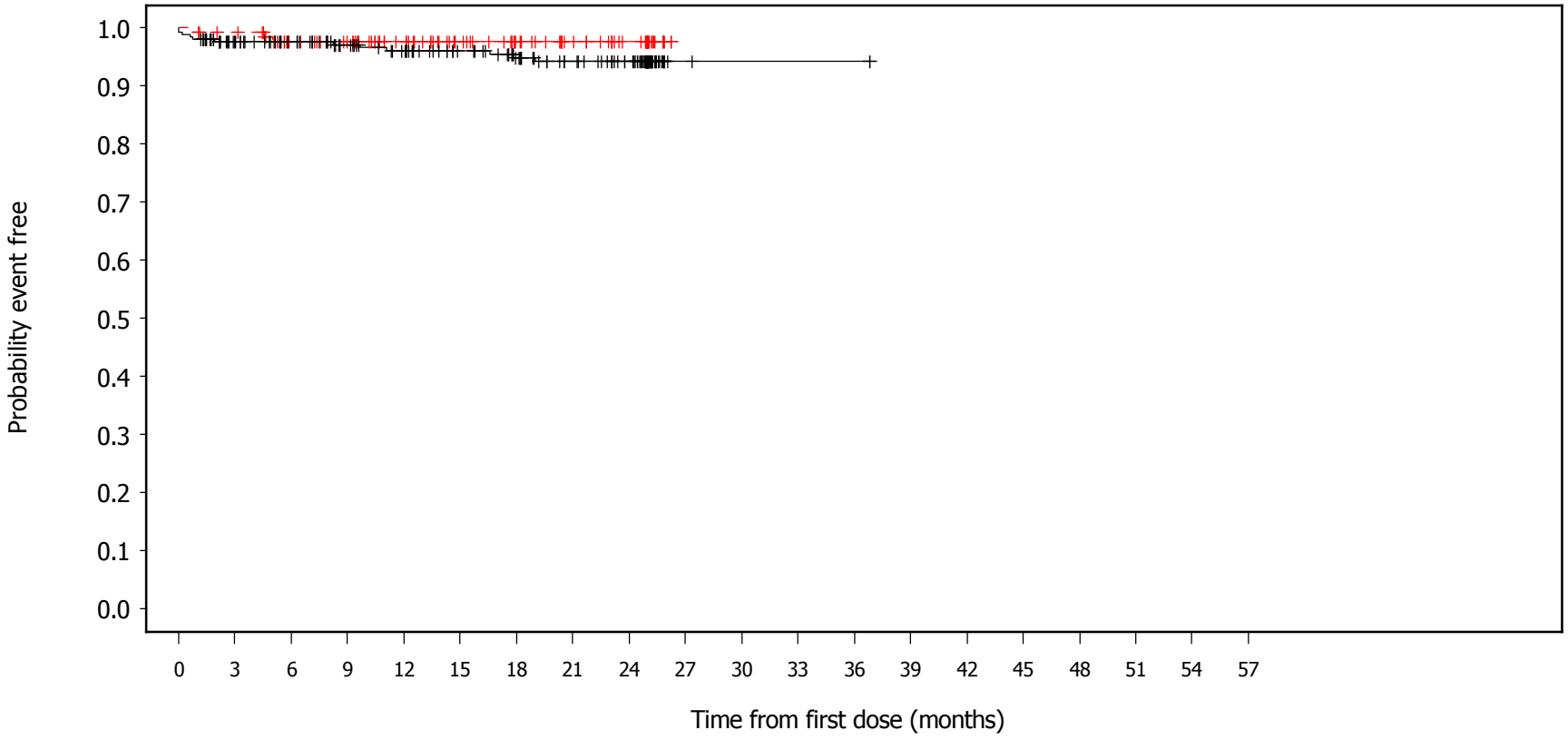
Figure 3.3.34 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Diarrhoea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	207	186	167	158	145	132	120	109	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	116	100	89	75	56	47	36	27	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

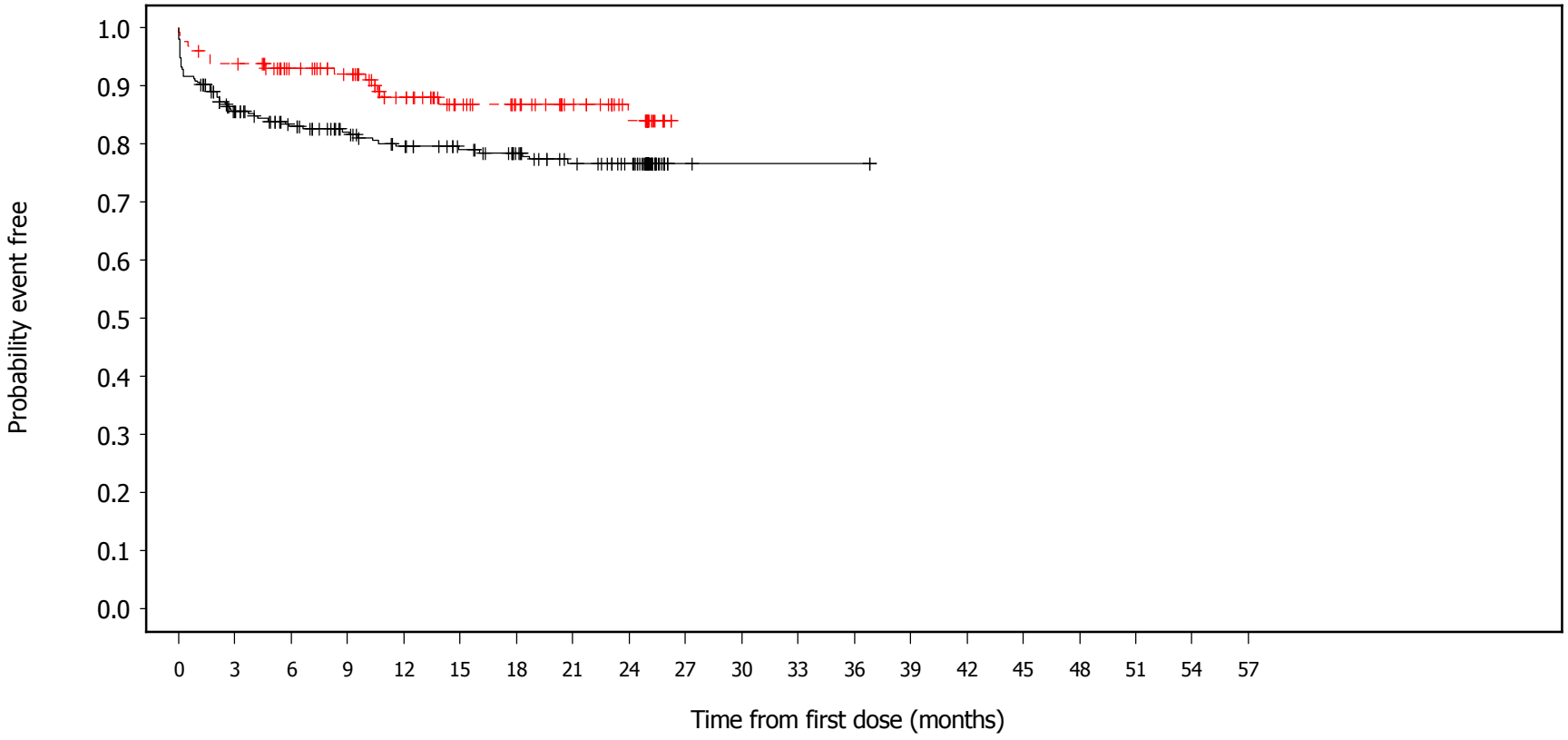
Figure 3.3.35 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Dyspepsia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	228	213	198	187	171	156	142	128	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	112	103	88	73	61	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

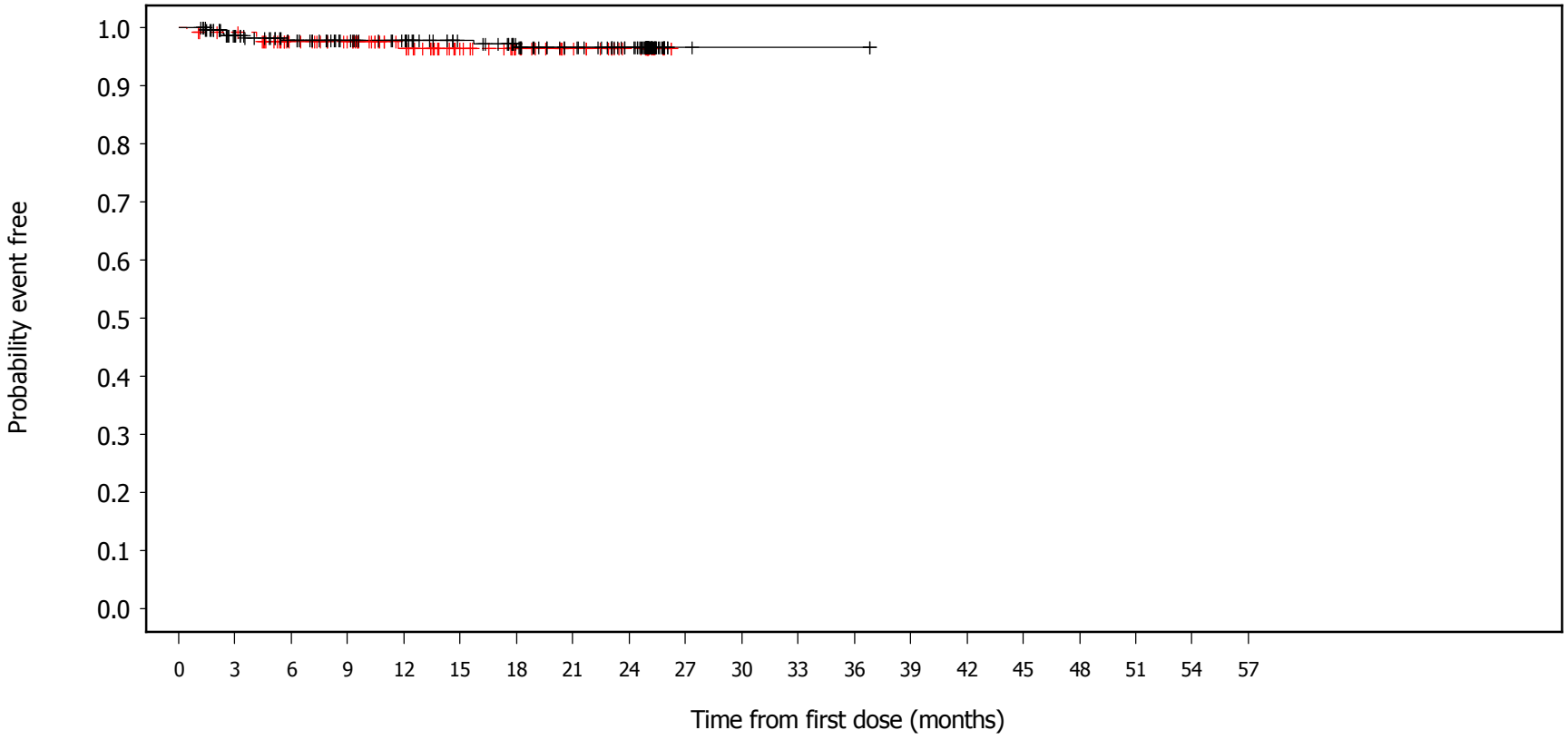
Figure 3.3.36 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	203	184	169	158	148	137	124	114	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	122	108	99	80	65	56	45	32	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

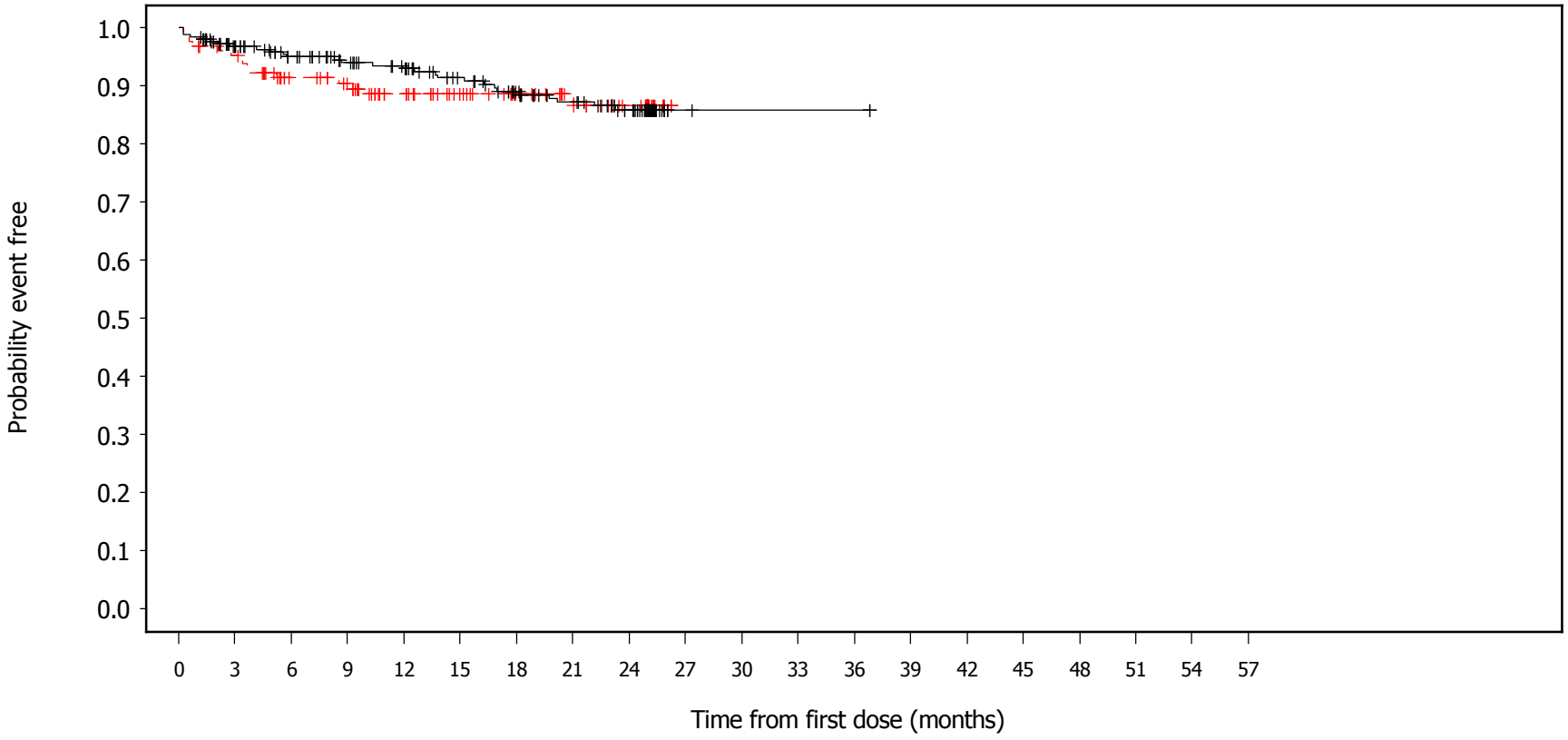
Figure 3.3.37 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Haemorrhoids
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	213	199	190	175	163	149	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	112	103	87	70	59	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

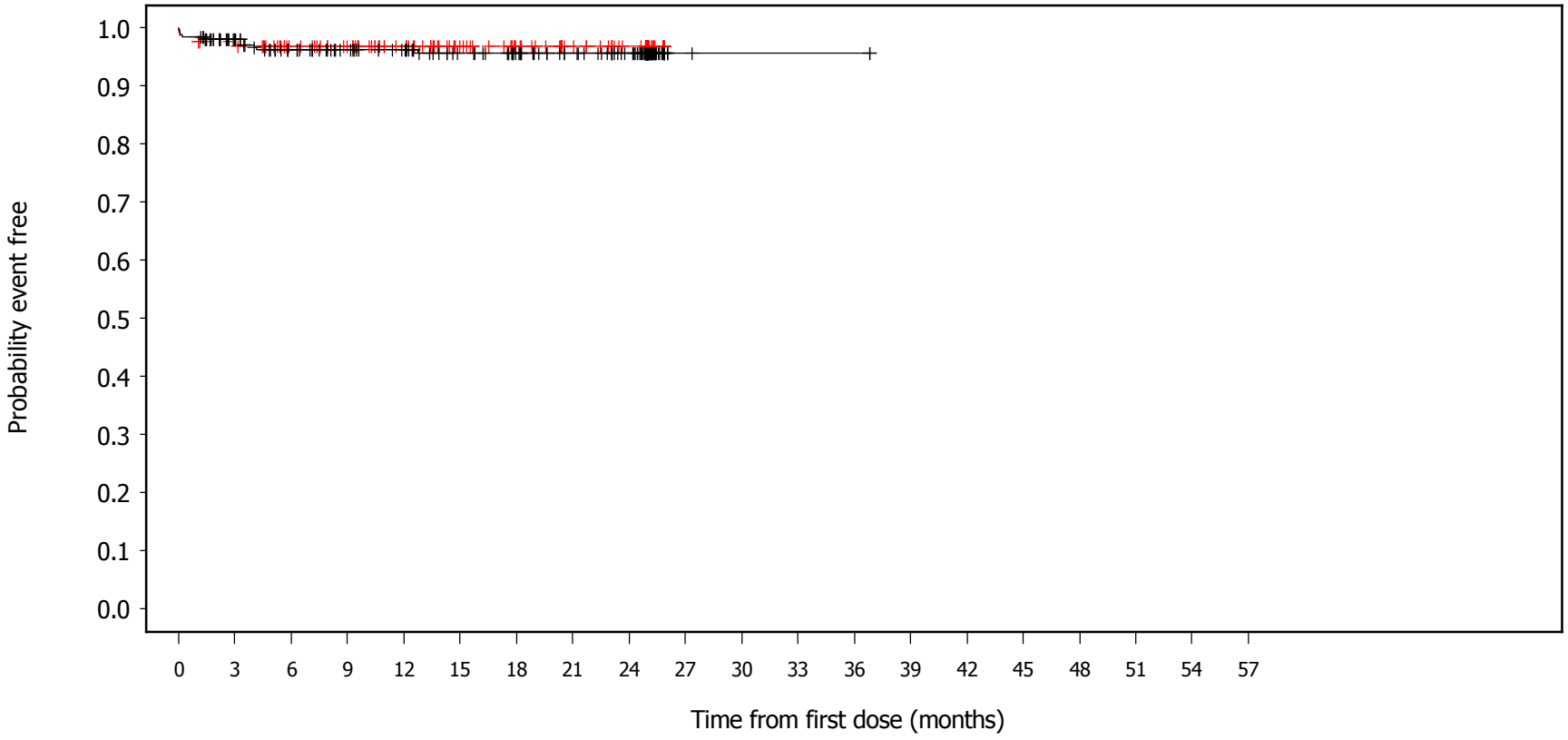
Figure 3.3.38 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Constipation
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	226	207	192	182	165	150	137	120	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	122	105	98	82	69	57	46	33	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

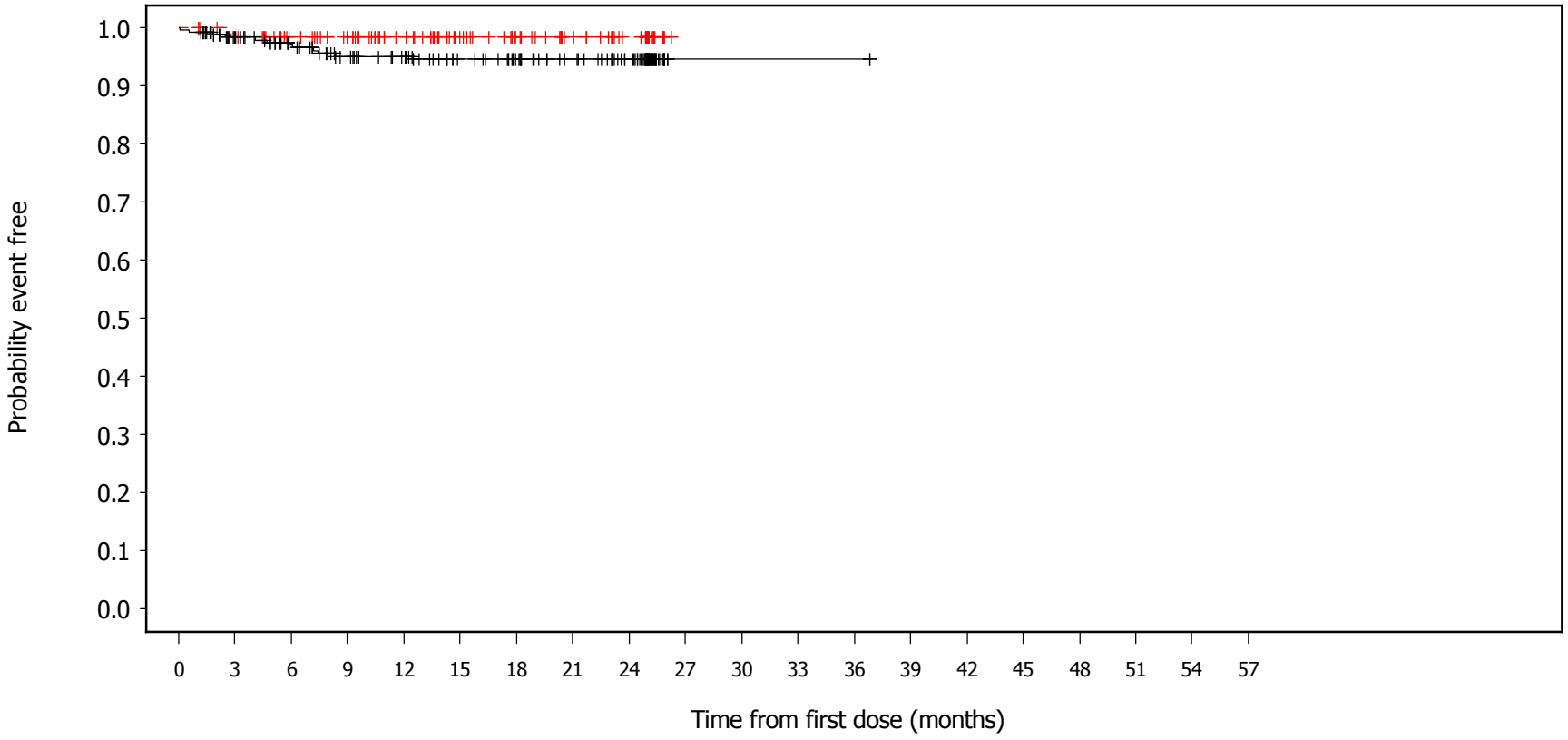
Figure 3.3.39 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Abdominal pain upper
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	229	210	197	189	173	161	148	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	125	112	103	89	72	60	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

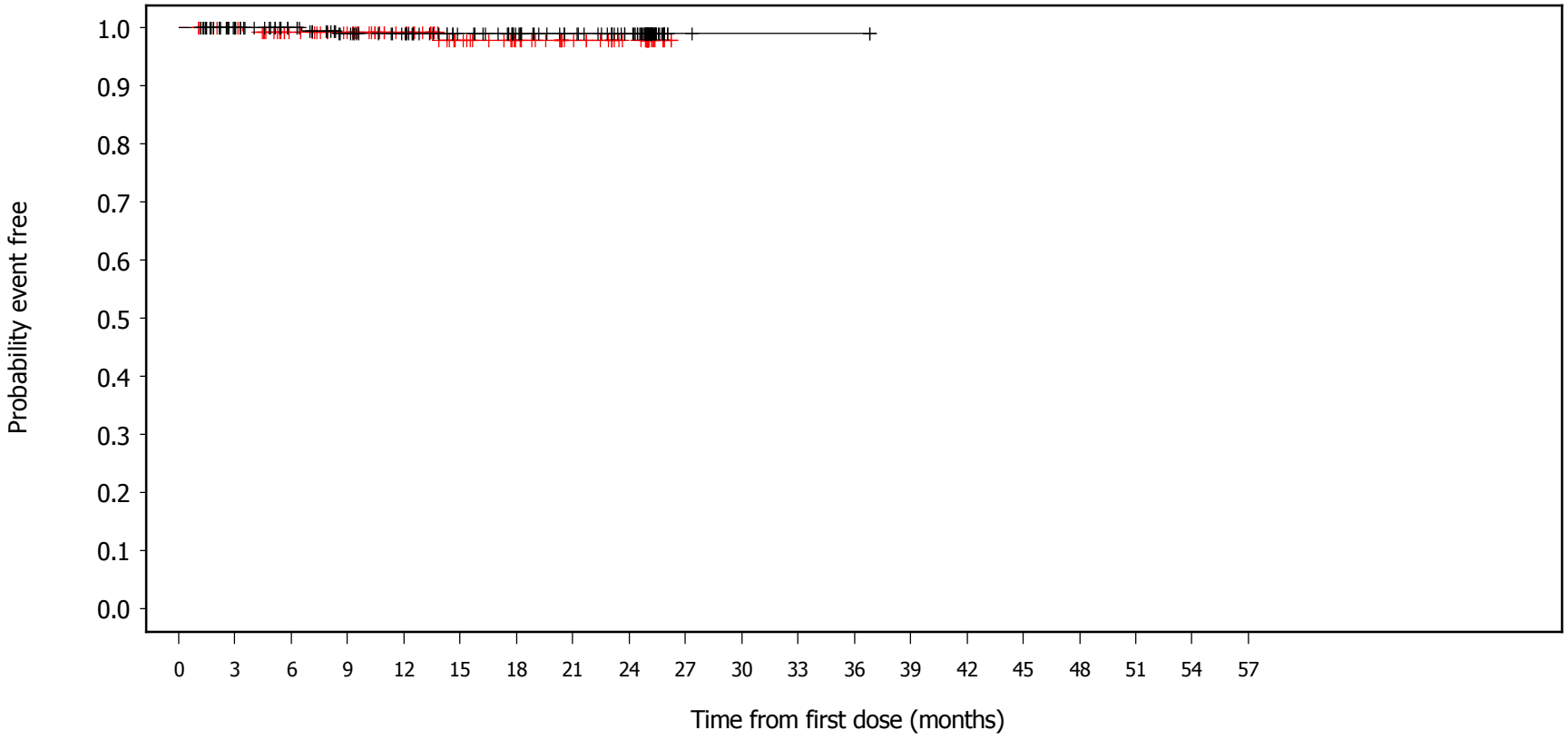
Figure 3.3.40 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Stomatitis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	212	195	186	169	158	145	130	1	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	114	105	90	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

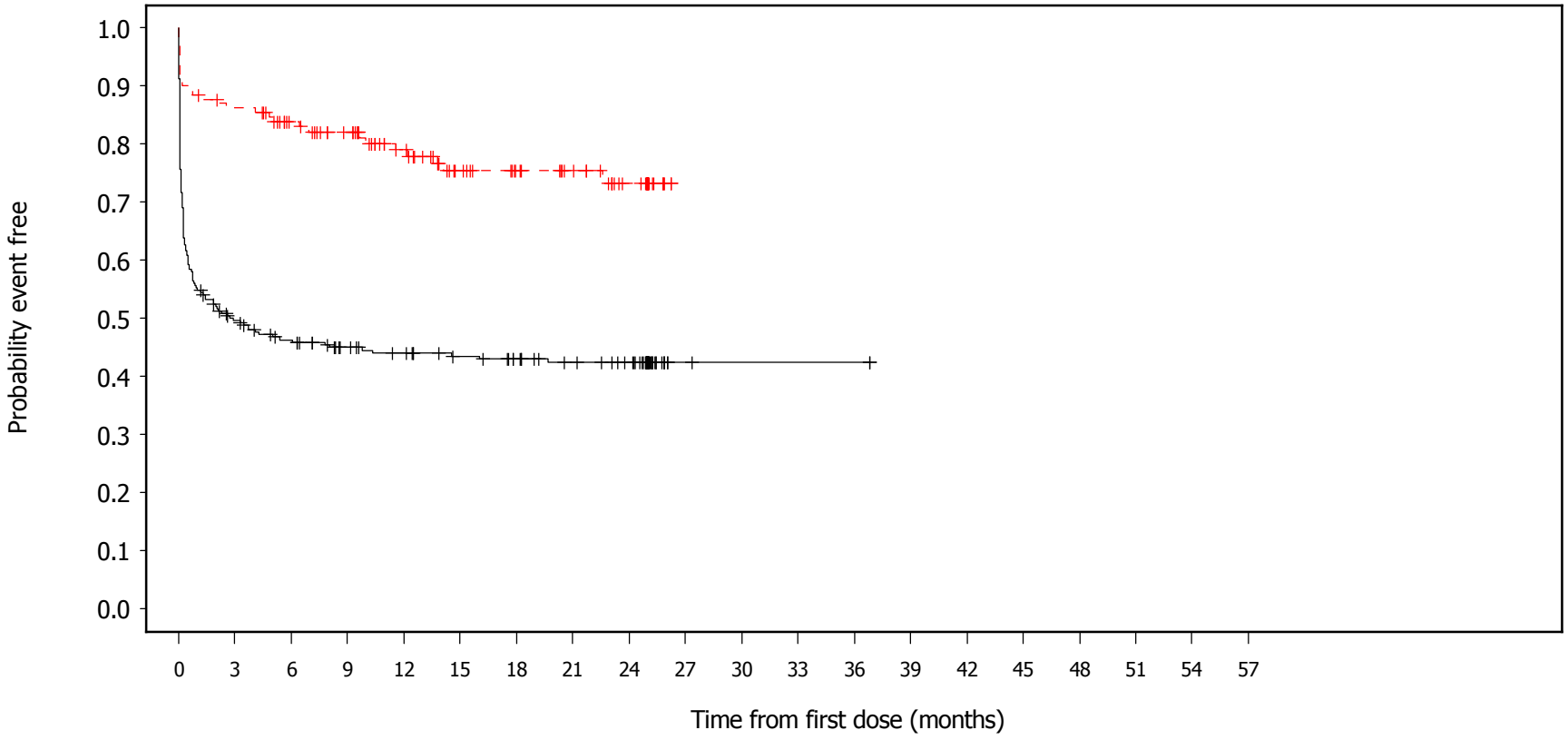
Figure 3.3.41 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Subileus
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	234	218	203	194	178	165	153	137	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

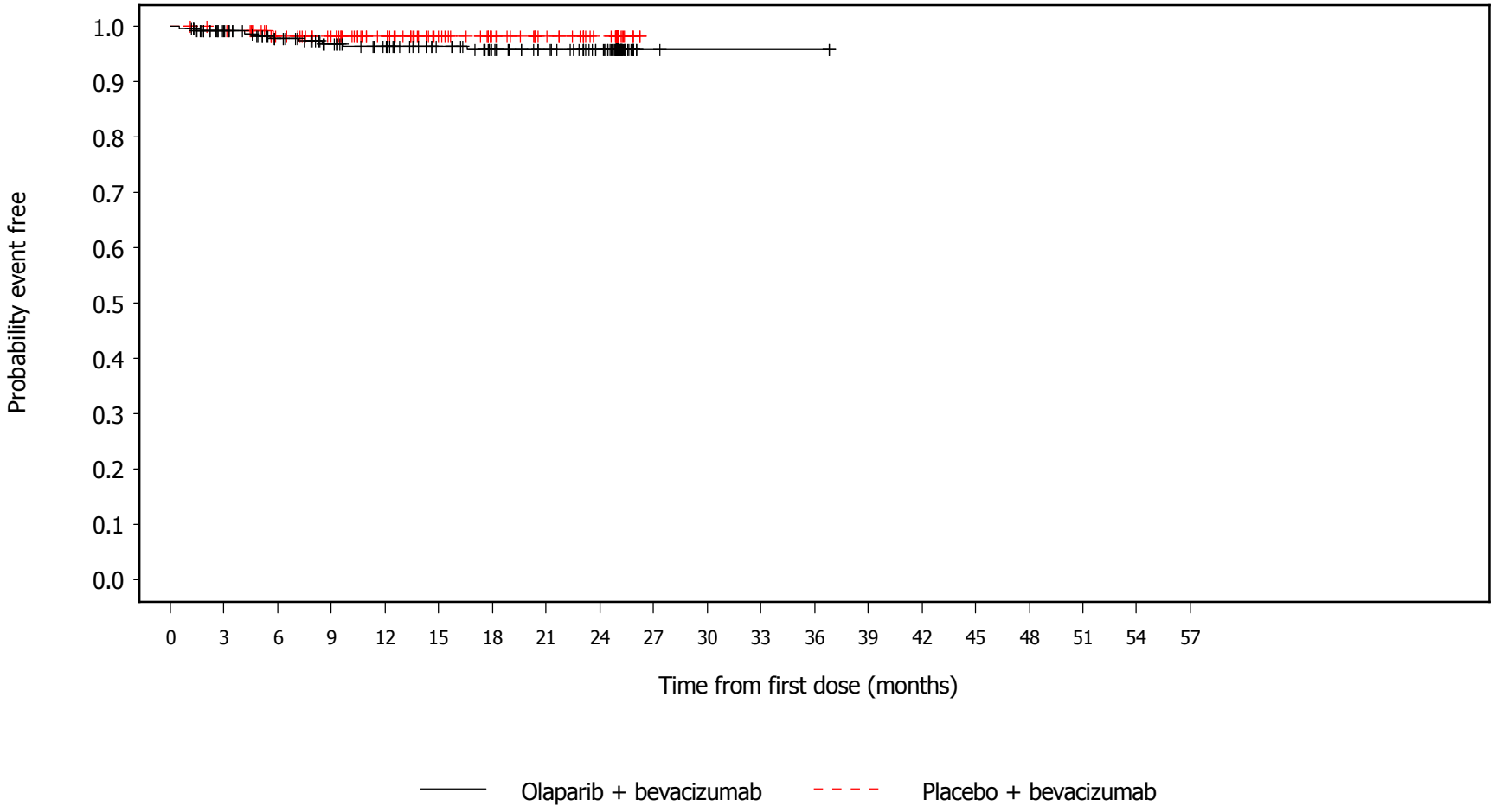
Figure 3.3.42 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	121	108	95	89	82	76	69	64	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	111	98	88	71	55	47	41	29	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

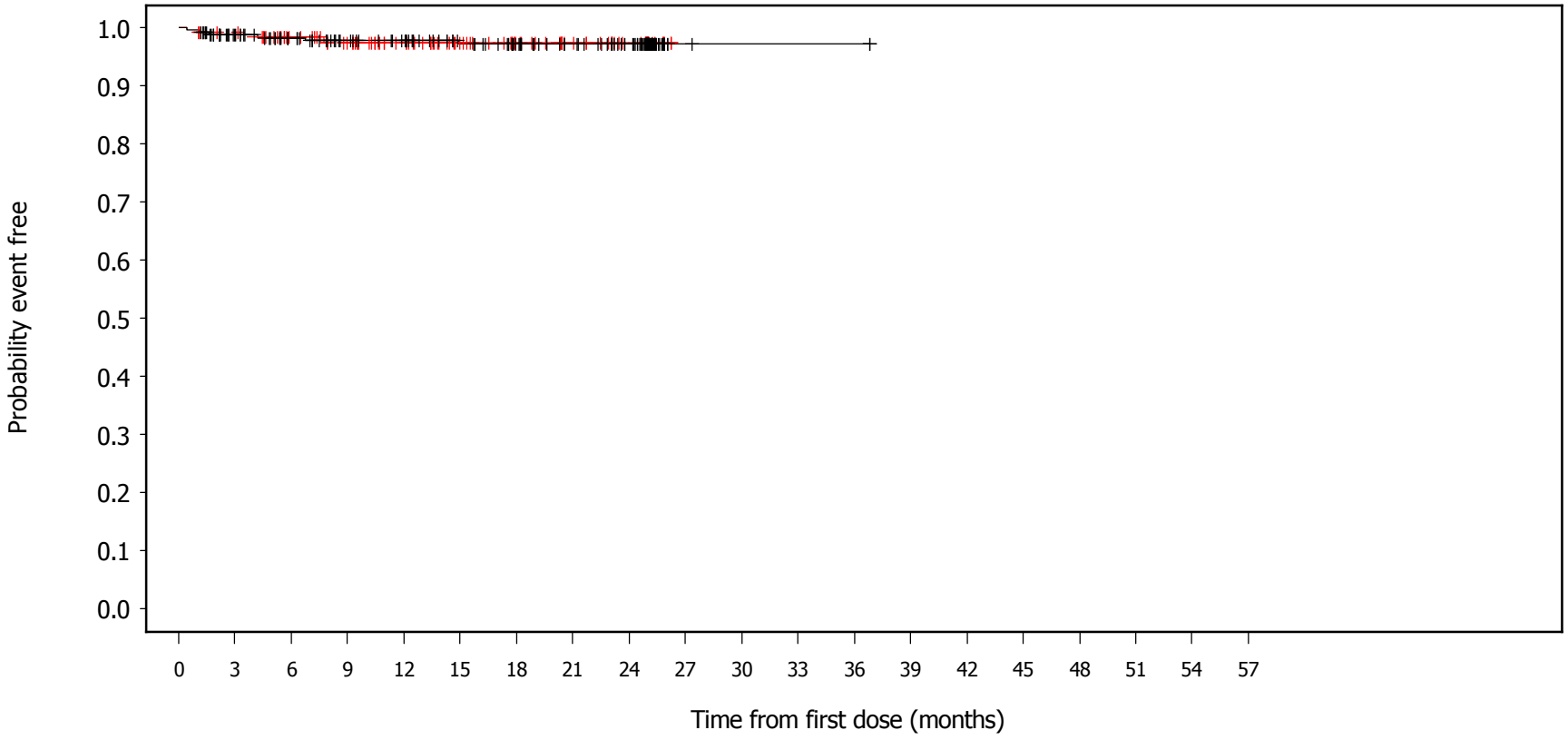
Figure 3.3.43 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Gingival bleeding
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	213	197	187	172	159	148	132	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	114	105	90	73	61	49	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

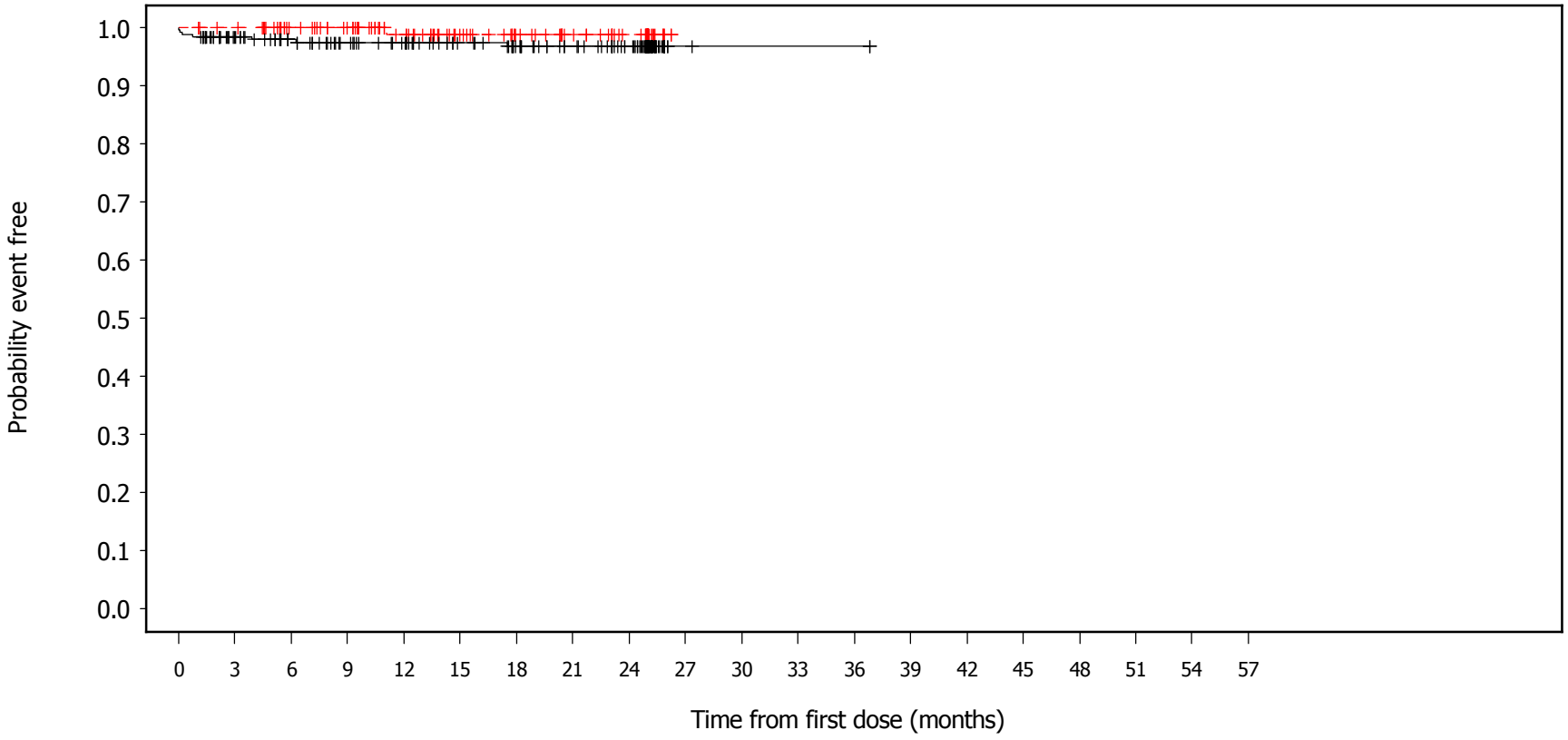
Figure 3.3.44 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Toothache
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	214	199	191	174	161	149	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	113	103	88	71	59	47	35	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

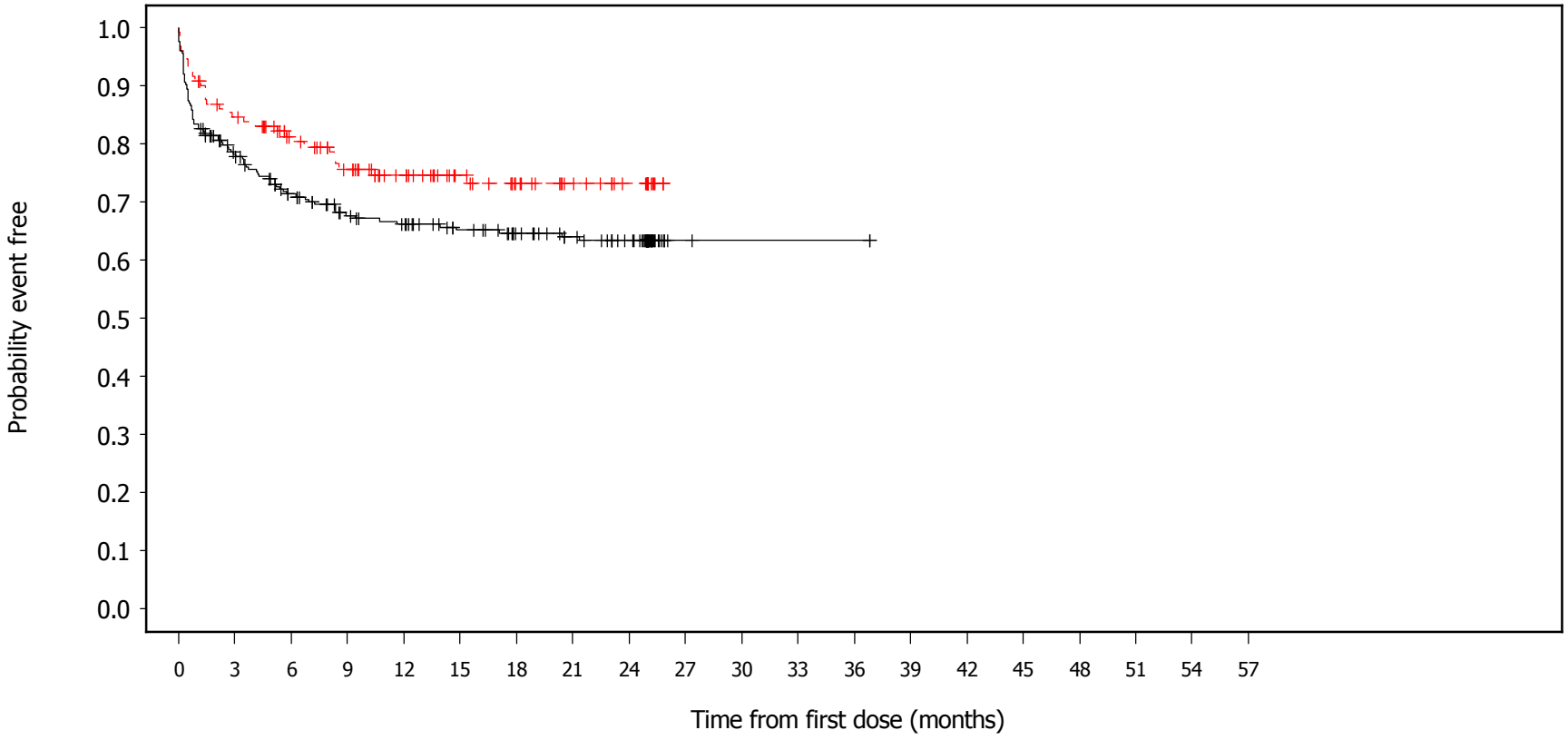
Figure 3.3.45 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Immune system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	214	200	191	175	164	152	136	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	90	73	61	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

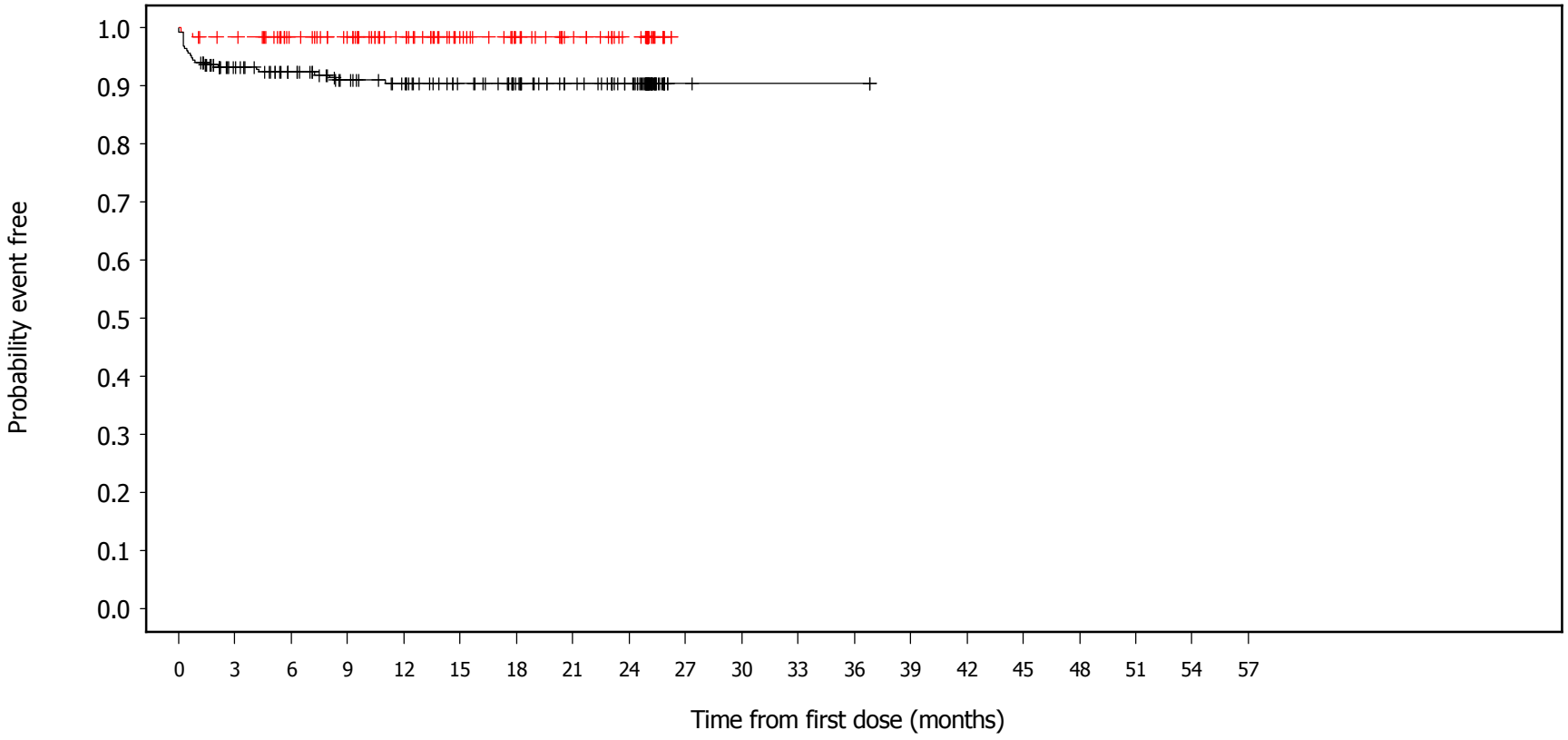
Figure 3.3.46 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Nervous system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	187	161	143	136	123	112	103	92	2	1	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
131	108	92	79	65	52	42	34	26	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

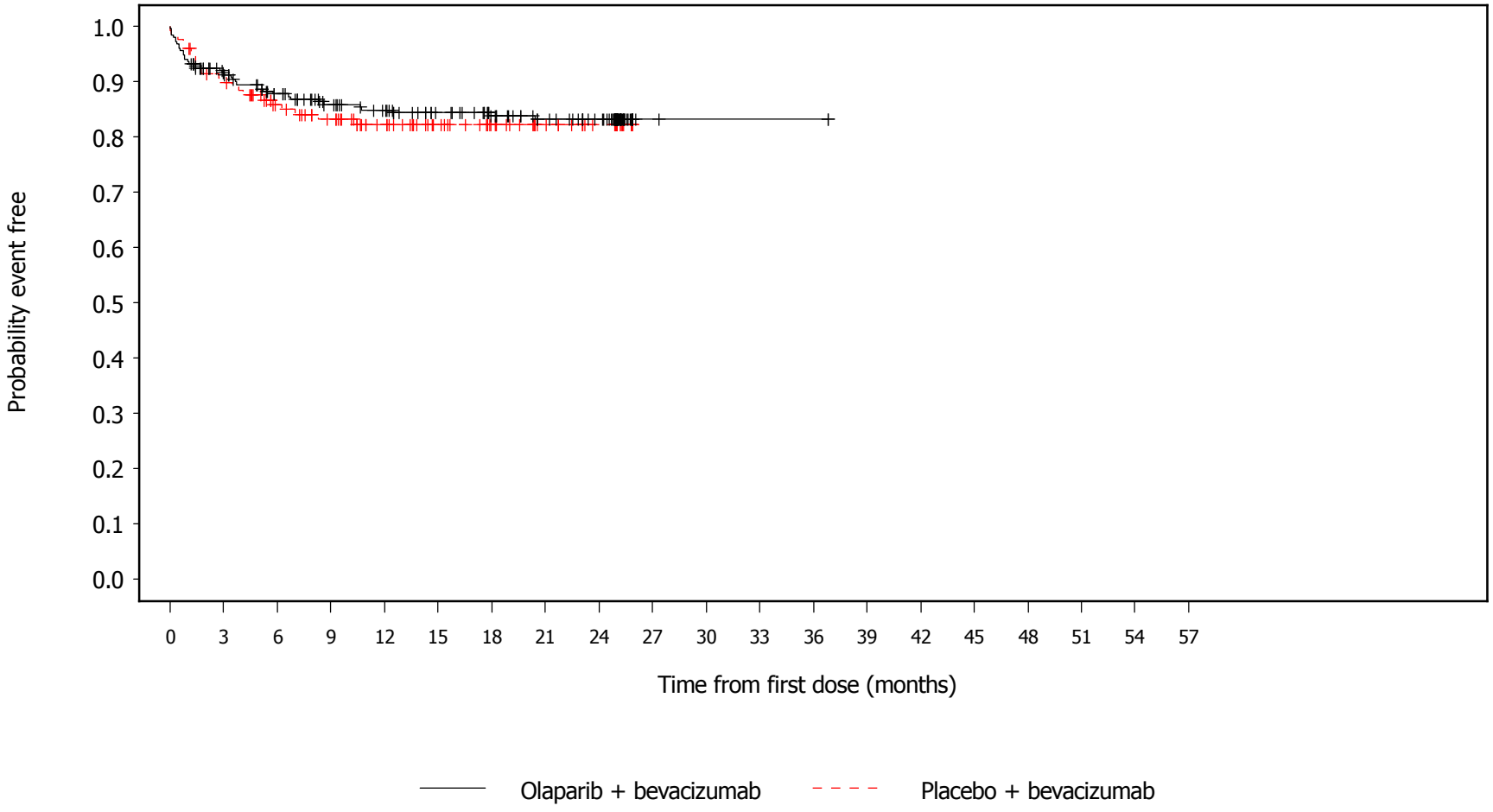
Figure 3.3.47 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Dysgeusia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	219	202	186	177	163	150	137	123	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	104	89	72	60	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

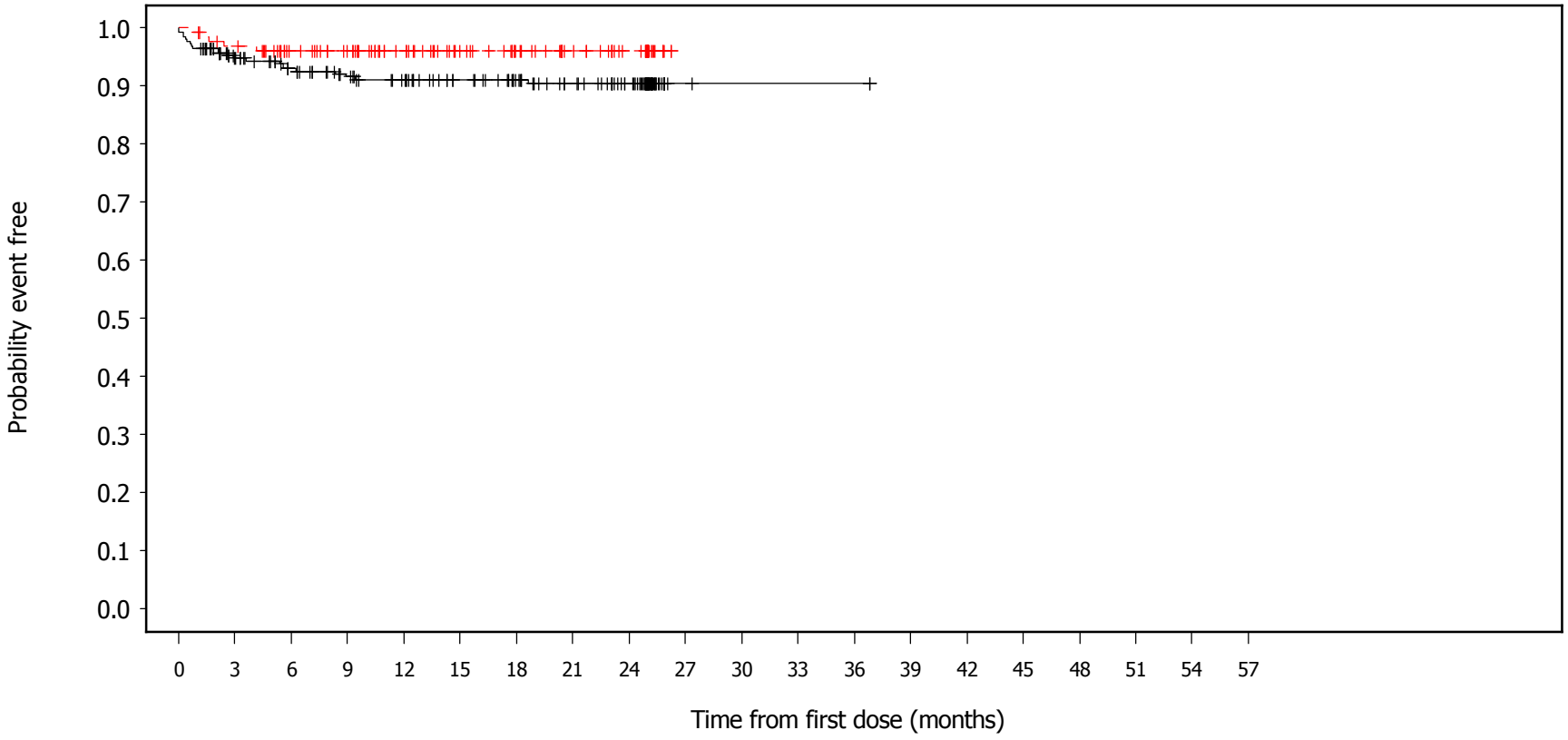
Figure 3.3.48 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Headache
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	218	197	179	169	154	140	128	117	2	1	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
131	115	98	88	73	60	49	39	29	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

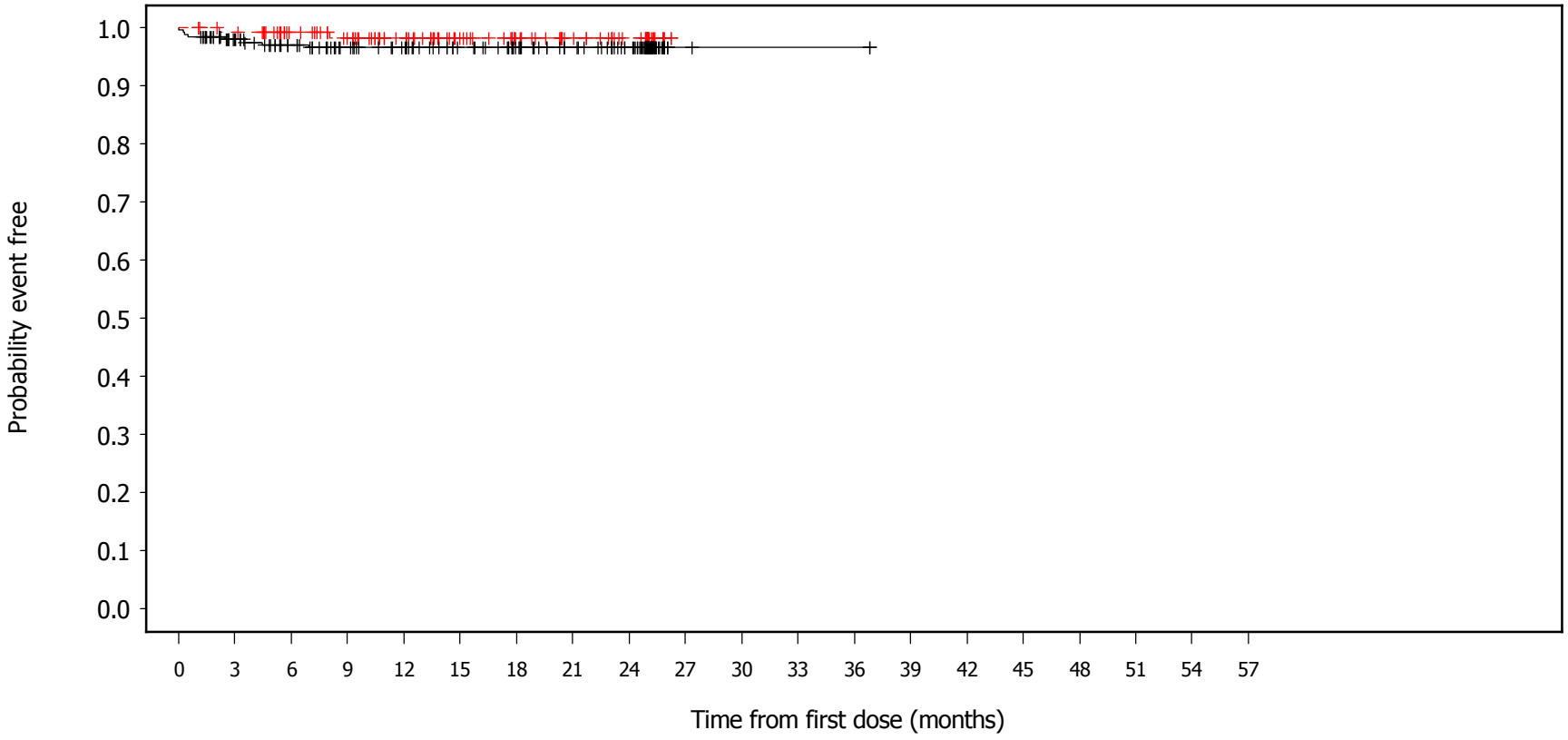
Figure 3.3.49 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Neuropathy peripheral
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	222	204	190	181	166	154	142	126	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	124	110	101	86	71	60	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

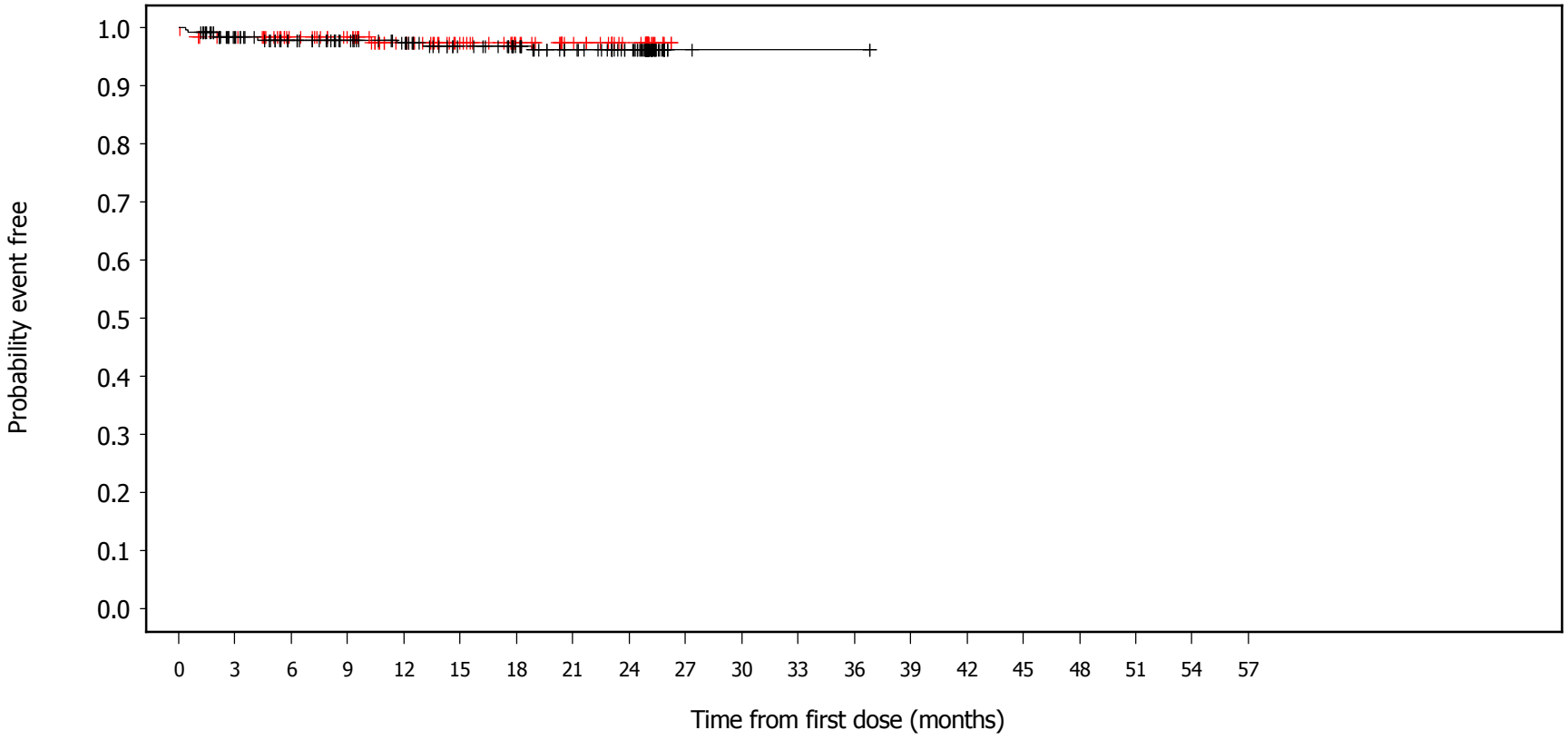
Figure 3.3.50 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Polyneuropathy
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	212	197	188	173	160	148	132	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	114	104	90	73	61	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

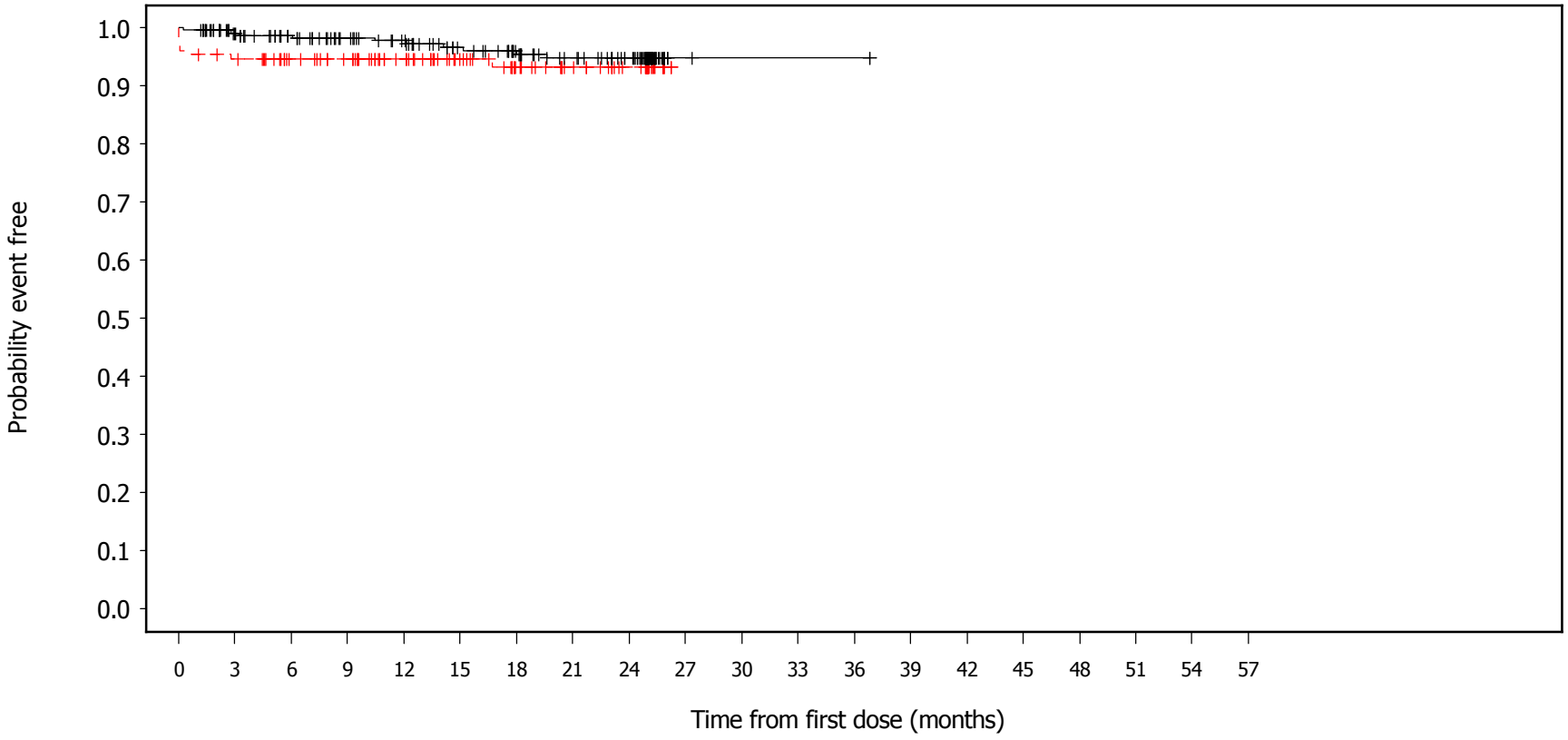
Figure 3.3.51 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Dizziness
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	213	200	190	173	161	148	132	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	104	88	72	60	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

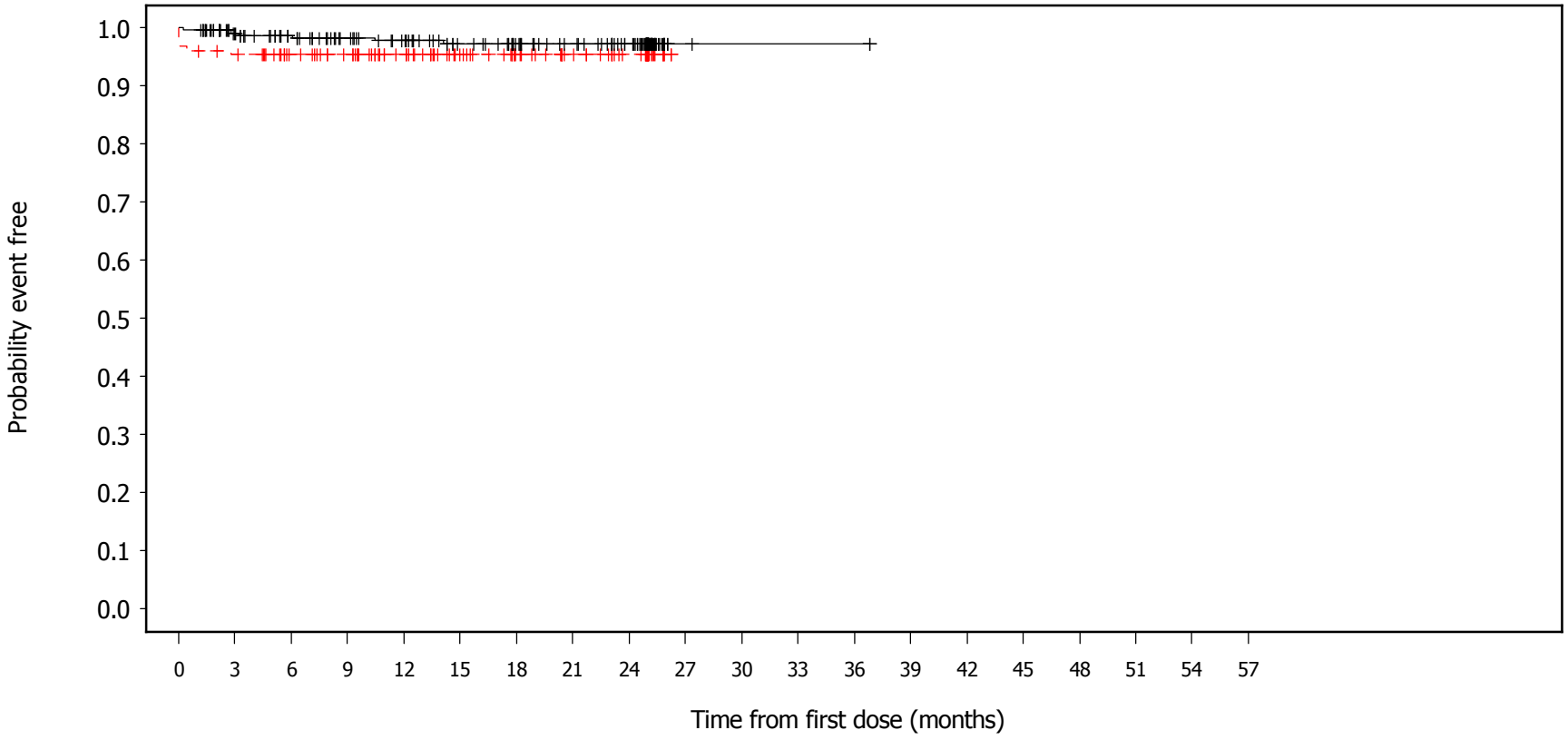
Figure 3.3.52 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Ear and labyrinth disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	216	201	191	174	161	148	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	122	110	103	88	72	59	49	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

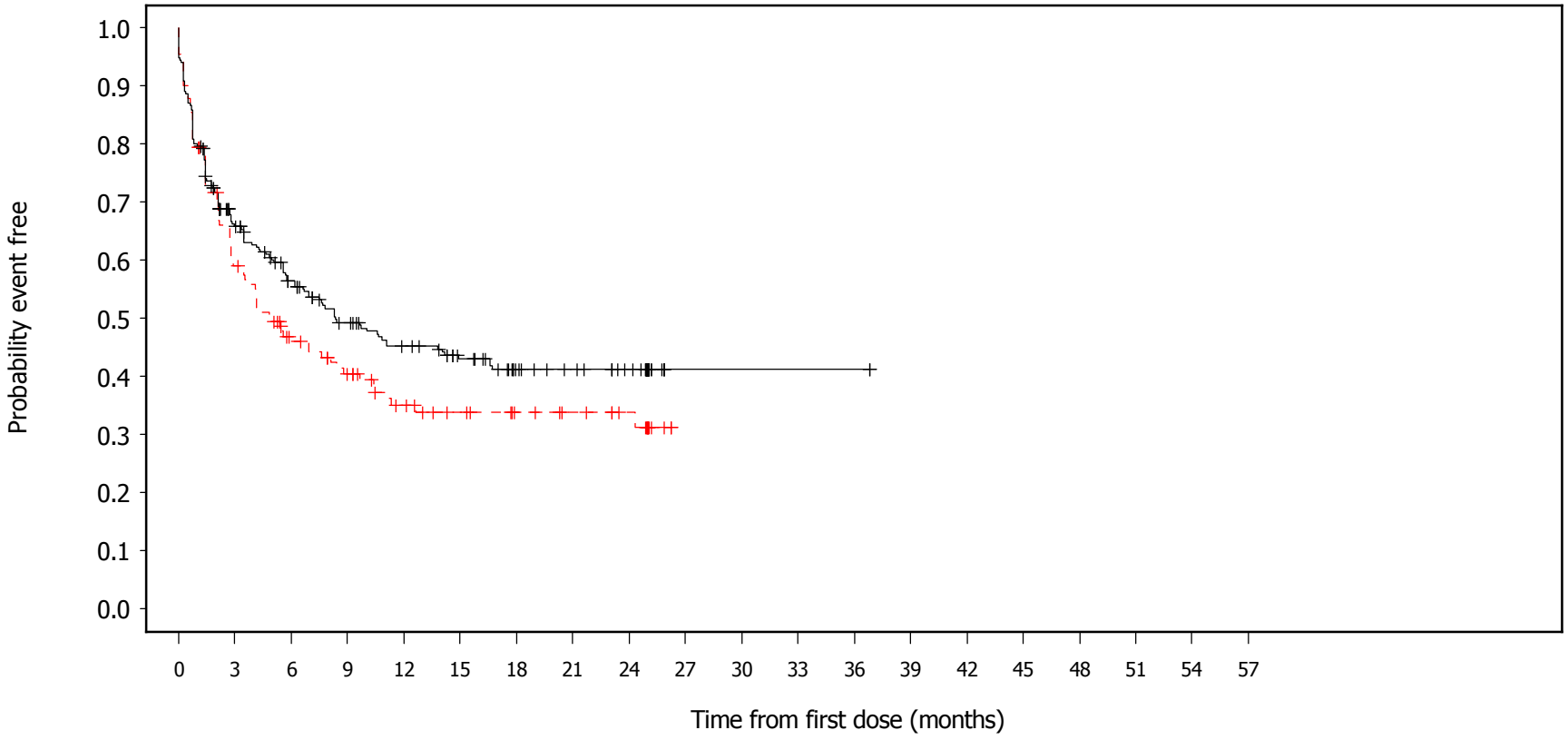
Figure 3.3.53 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Vertigo
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	216	201	191	175	163	152	136	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	123	111	103	88	72	60	49	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

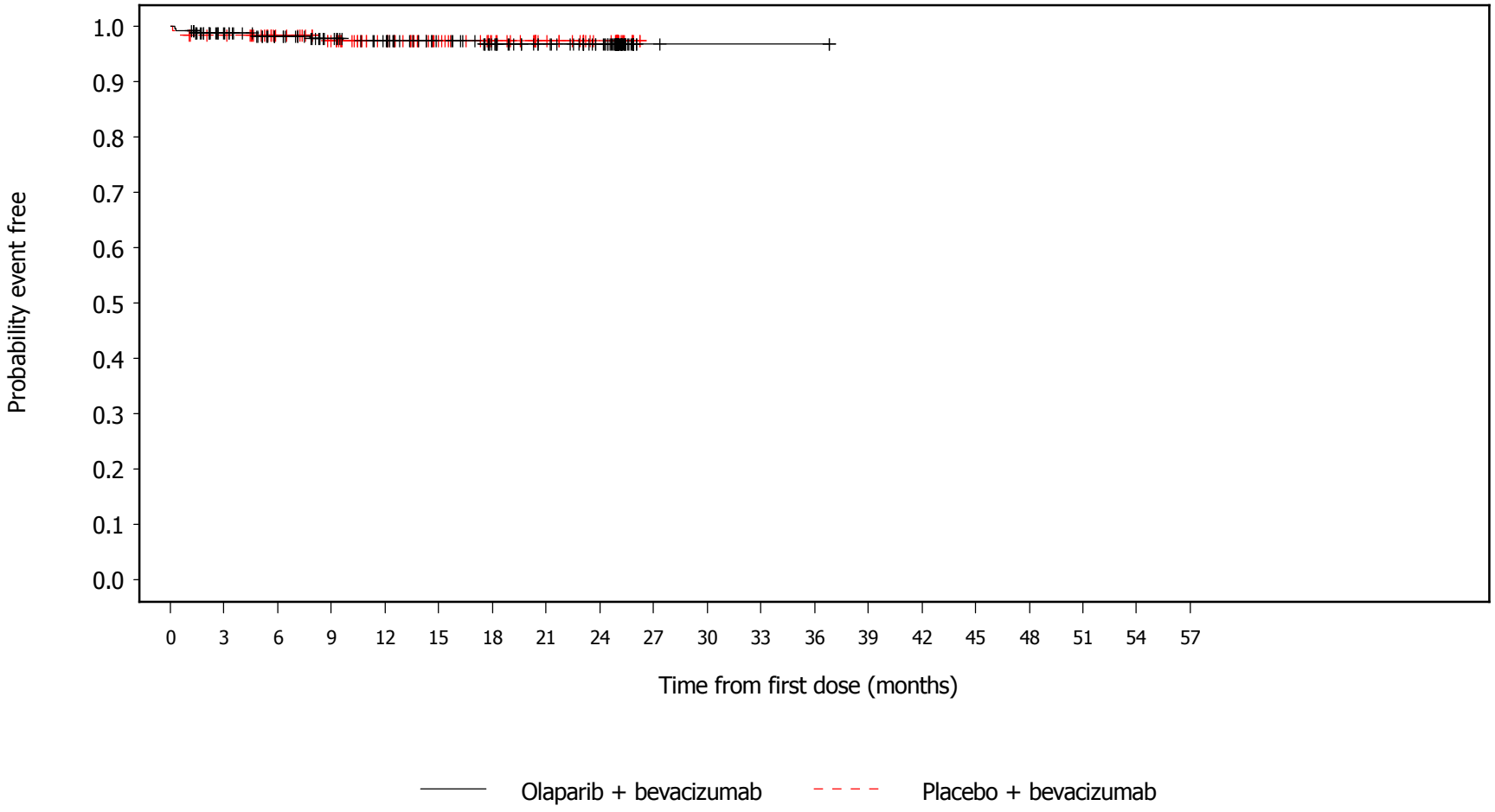
Figure 3.3.54 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Vascular disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	154	123	101	88	76	62	57	50	1	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	75	52	42	31	25	20	17	13	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

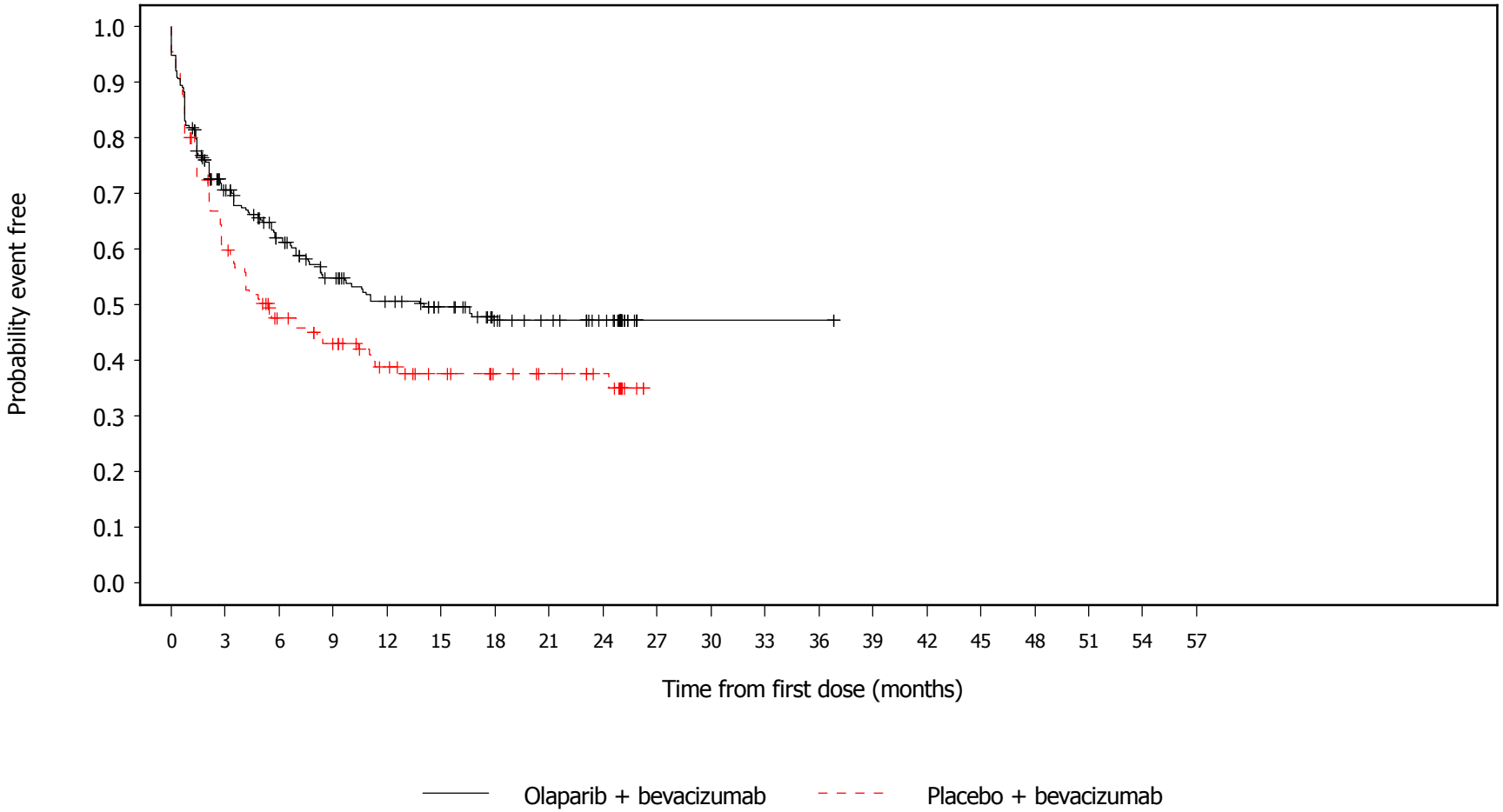
Figure 3.3.55 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Hot flush
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	215	200	190	174	161	148	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	103	88	71	60	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

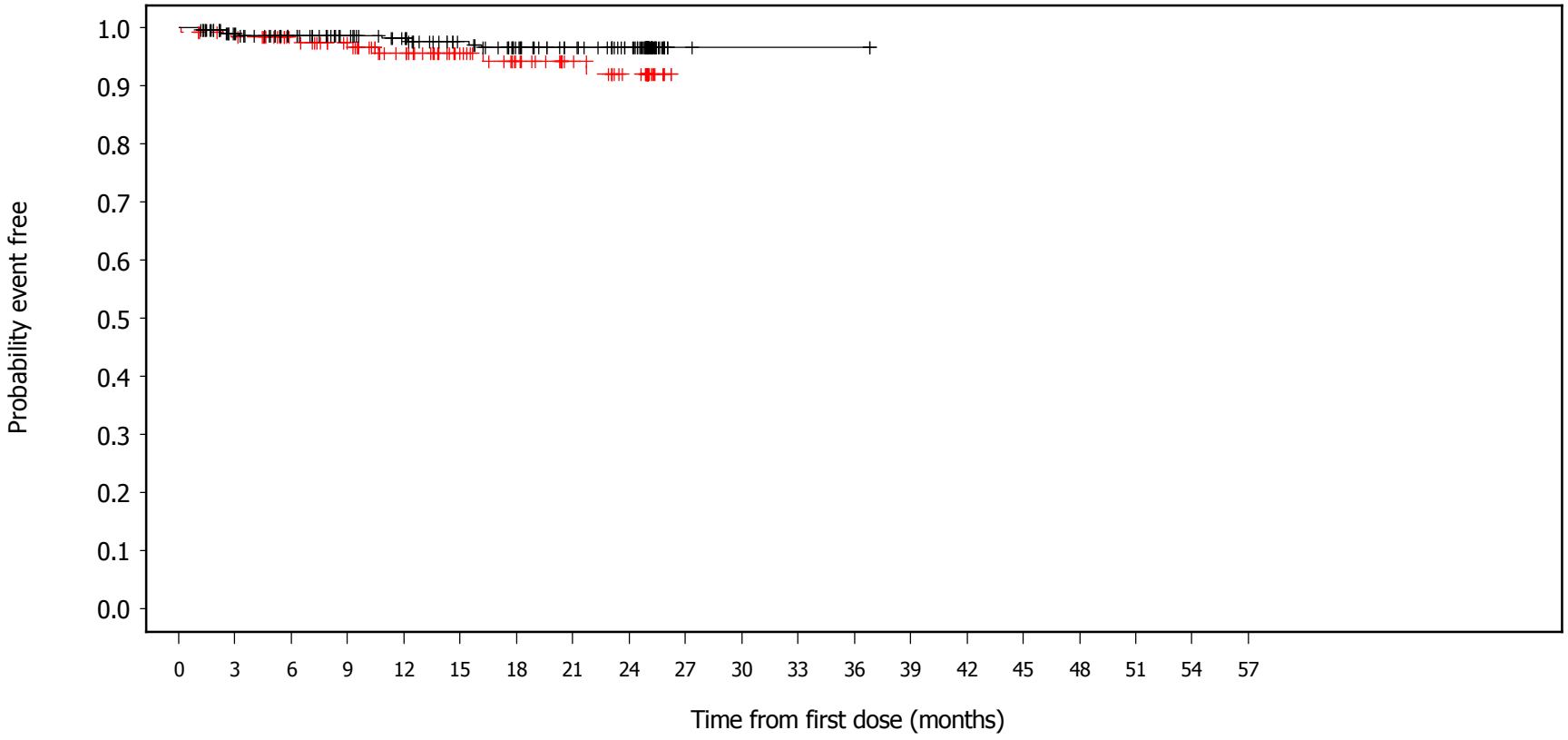
Figure 3.3.56 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	164	134	111	97	87	72	67	59	1	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	76	54	45	35	28	22	19	15	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

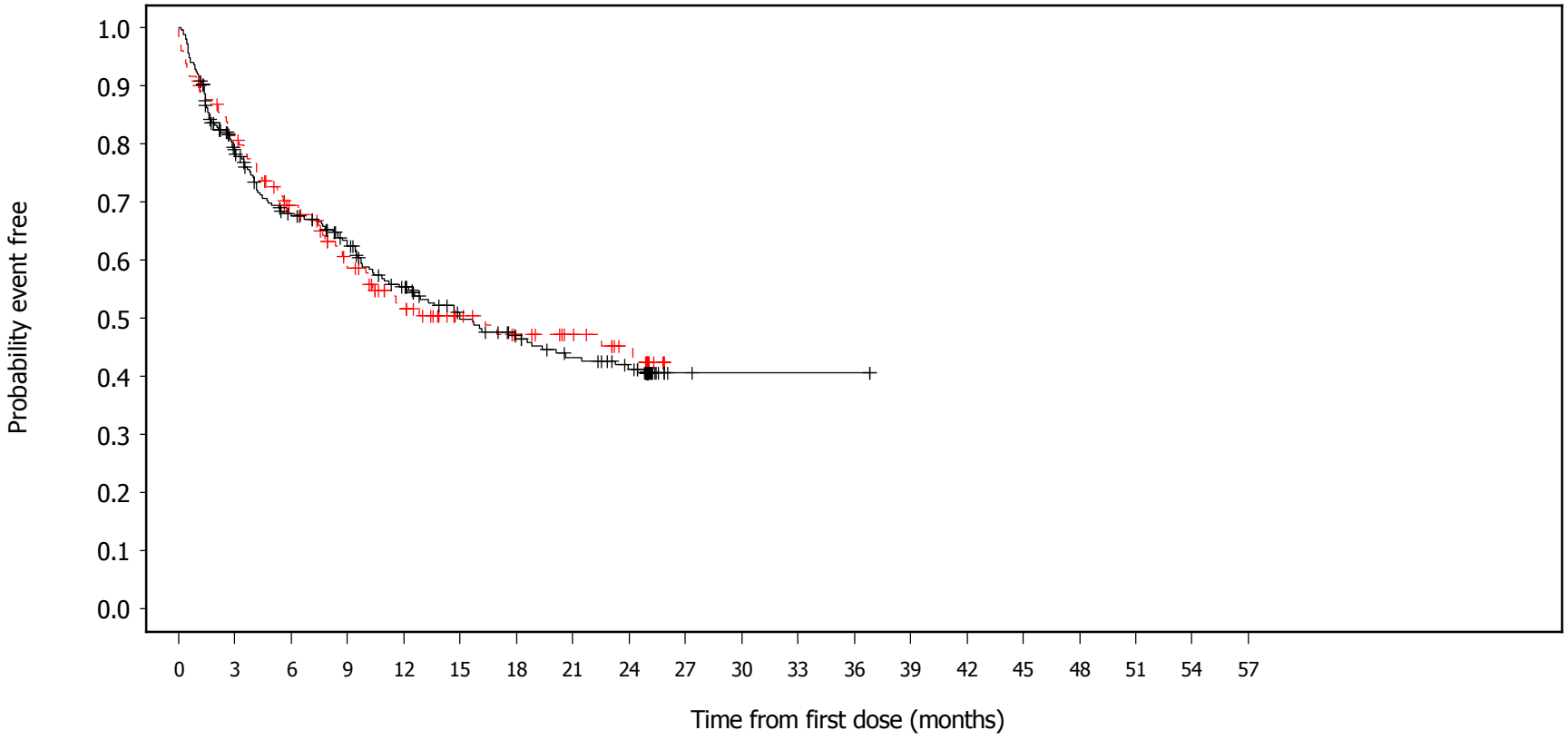
Figure 3.3.57 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Cardiac disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	216	202	192	175	160	147	132	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	103	88	72	60	48	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

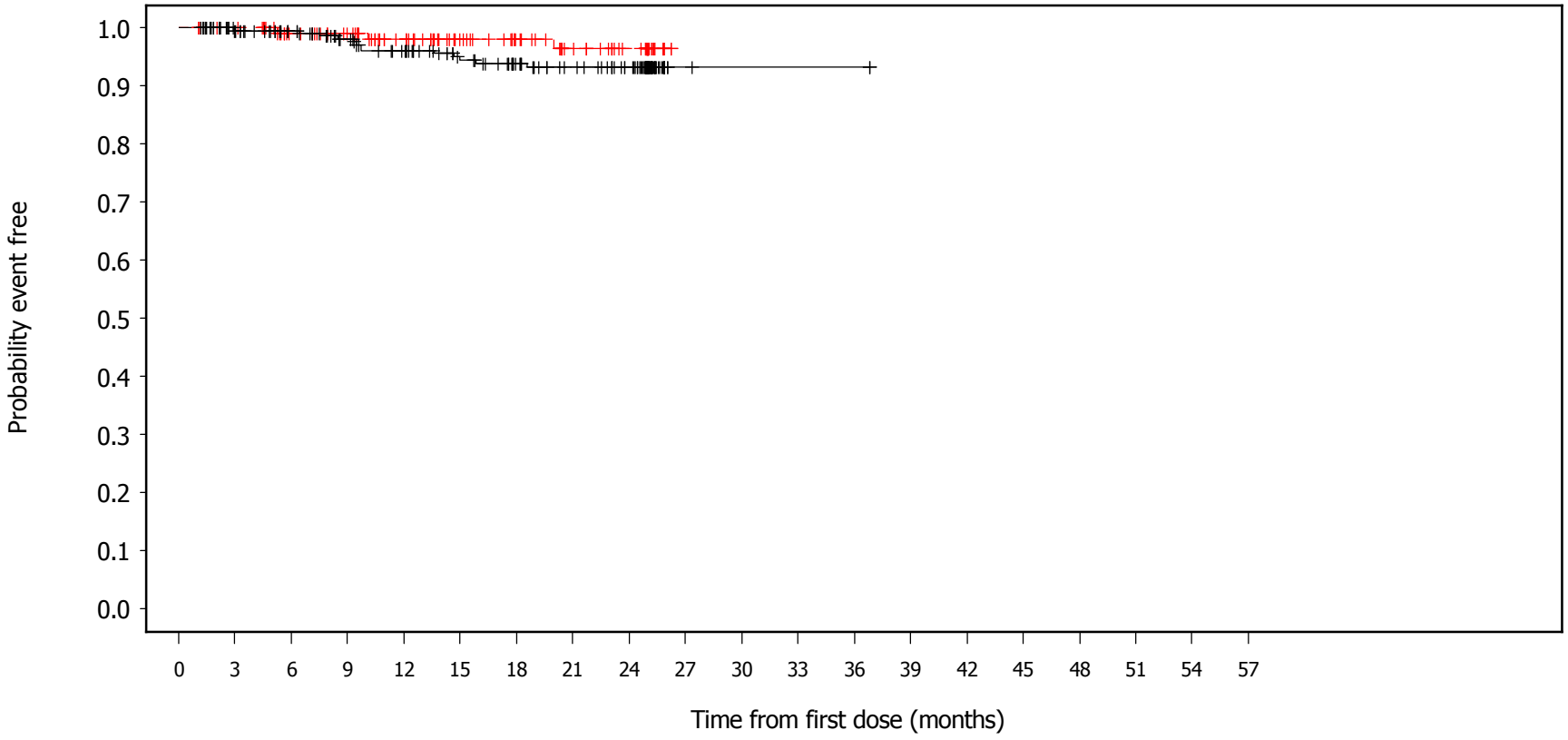
Figure 3.3.58 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Infections and infestations
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	183	150	130	108	89	77	68	60	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	104	81	63	47	35	29	24	17	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

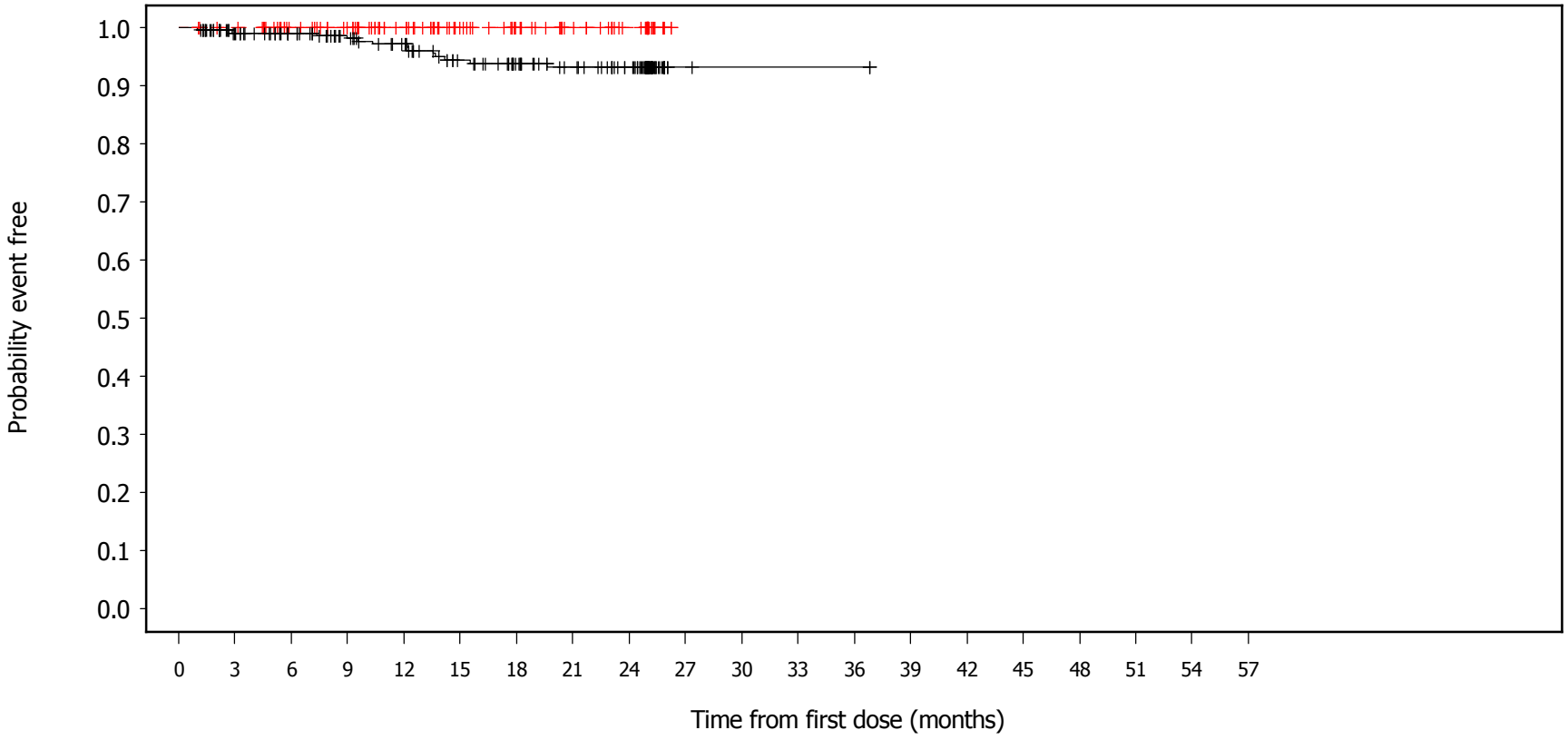
Figure 3.3.59 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Bronchitis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	233	217	200	187	168	154	142	130	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	114	105	90	73	61	48	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

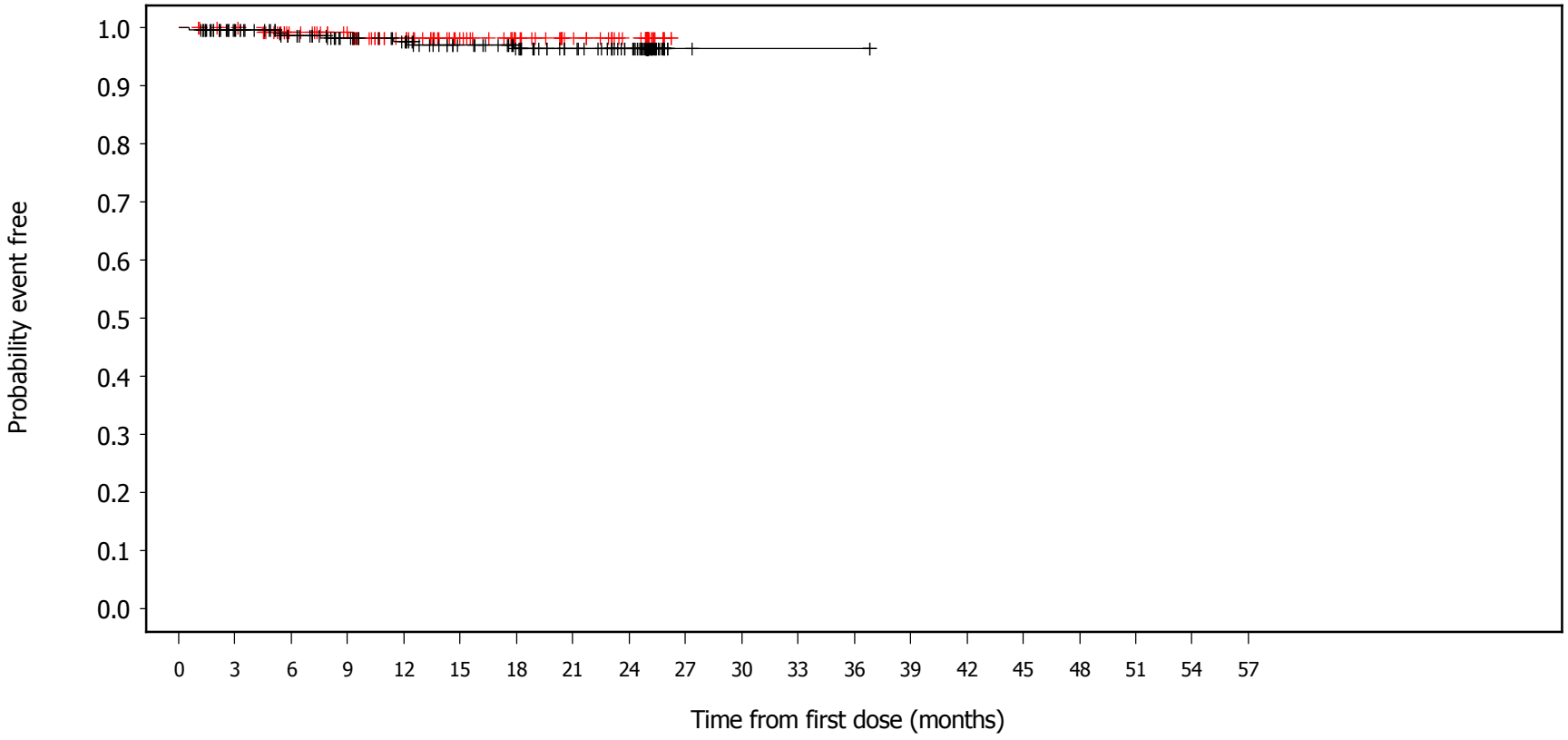
Figure 3.3.60 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Gastroenteritis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	216	201	189	169	155	142	128	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

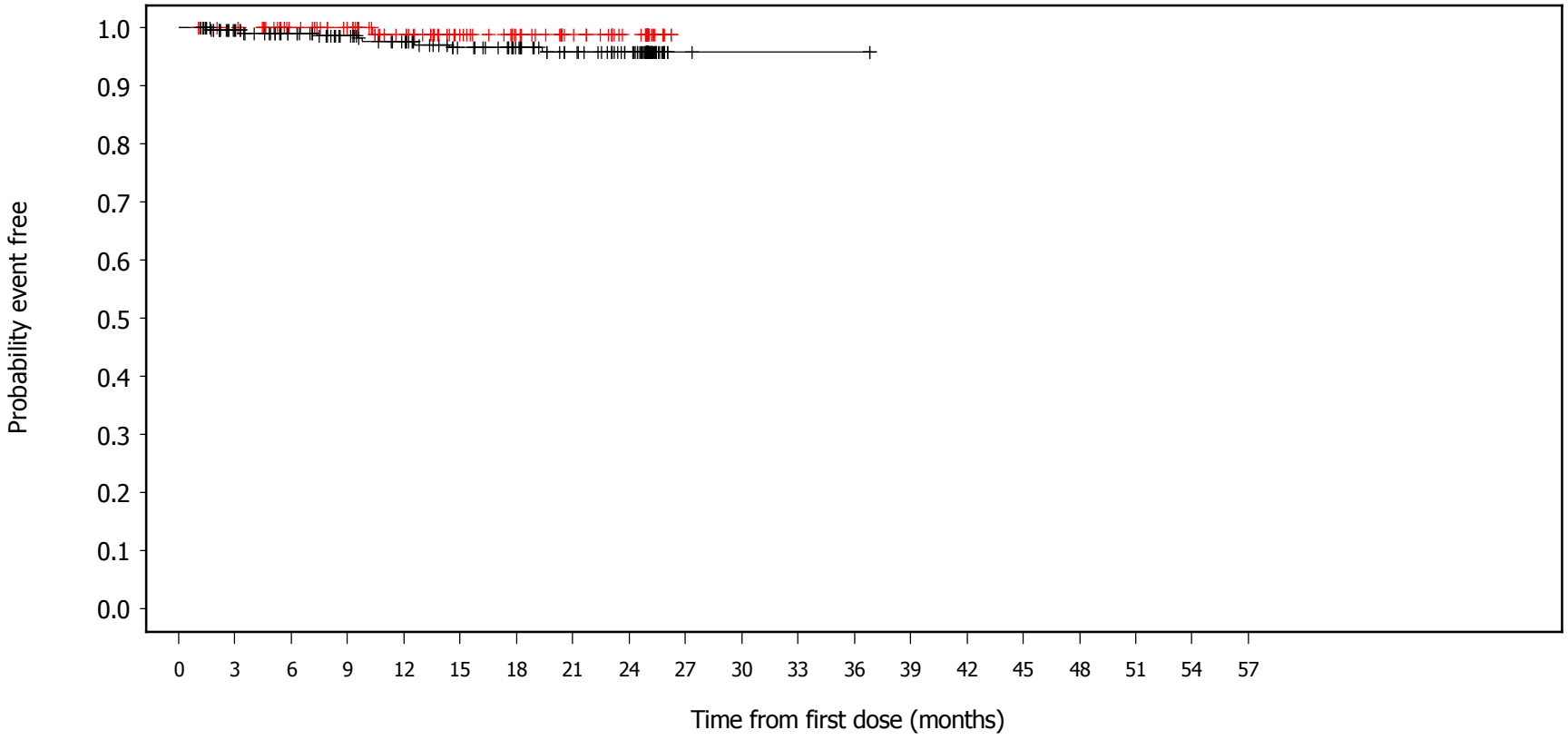
Figure 3.3.61 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Gingivitis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	233	215	200	190	173	160	147	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	90	73	61	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

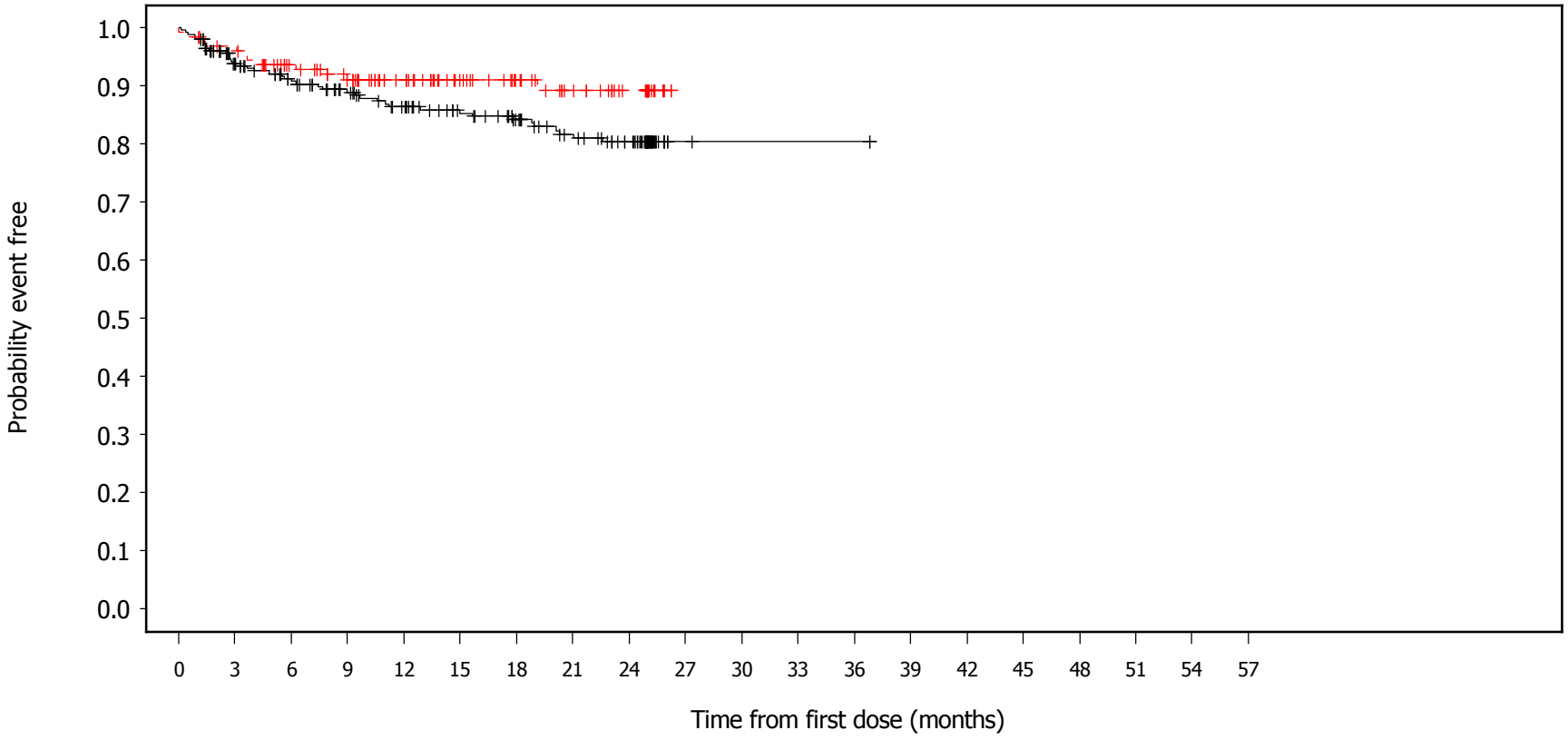
Figure 3.3.62 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Influenza
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	233	217	202	191	173	161	147	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	90	73	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

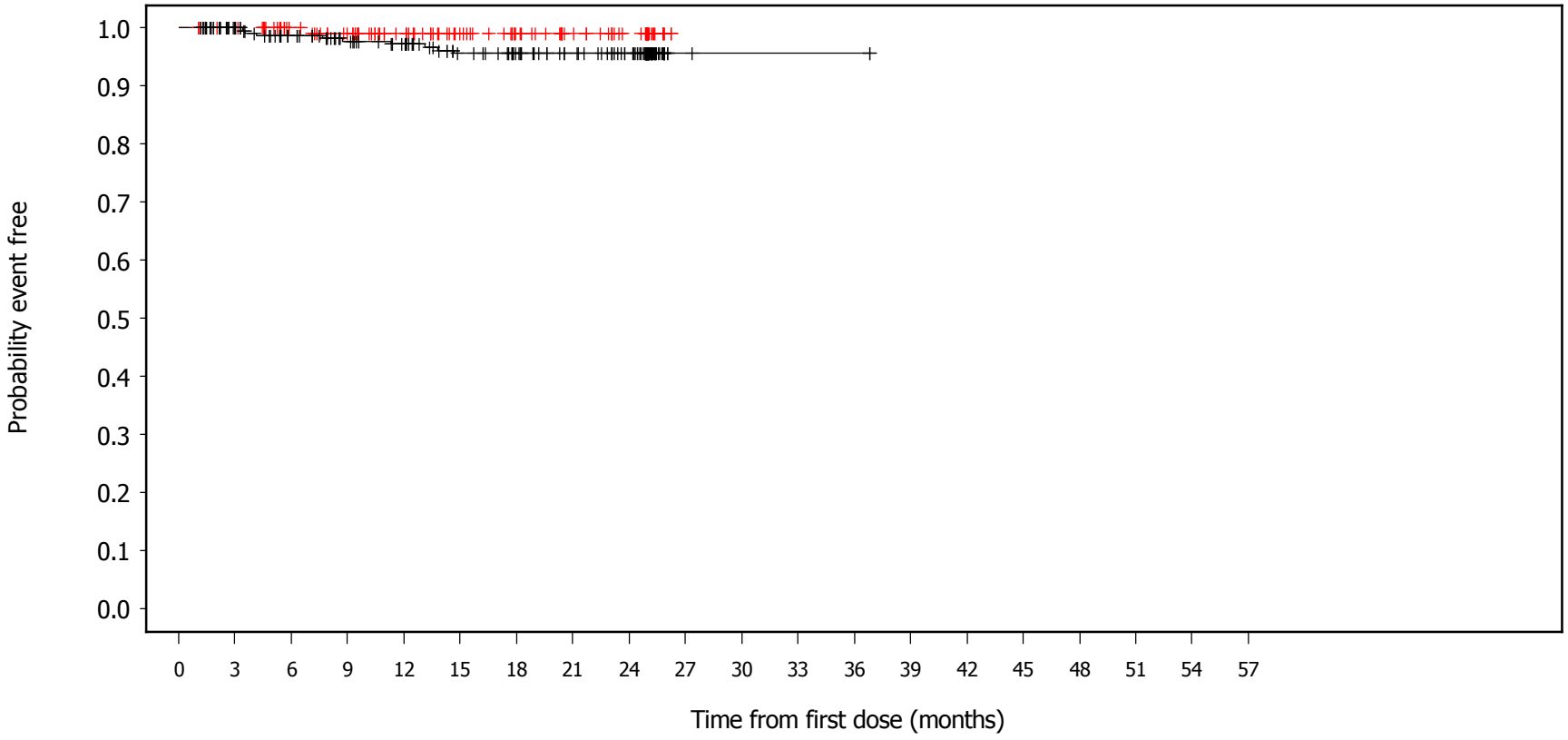
Figure 3.3.63 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Urinary tract infection
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	219	201	184	170	155	140	126	113	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	124	108	97	82	66	54	43	32	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

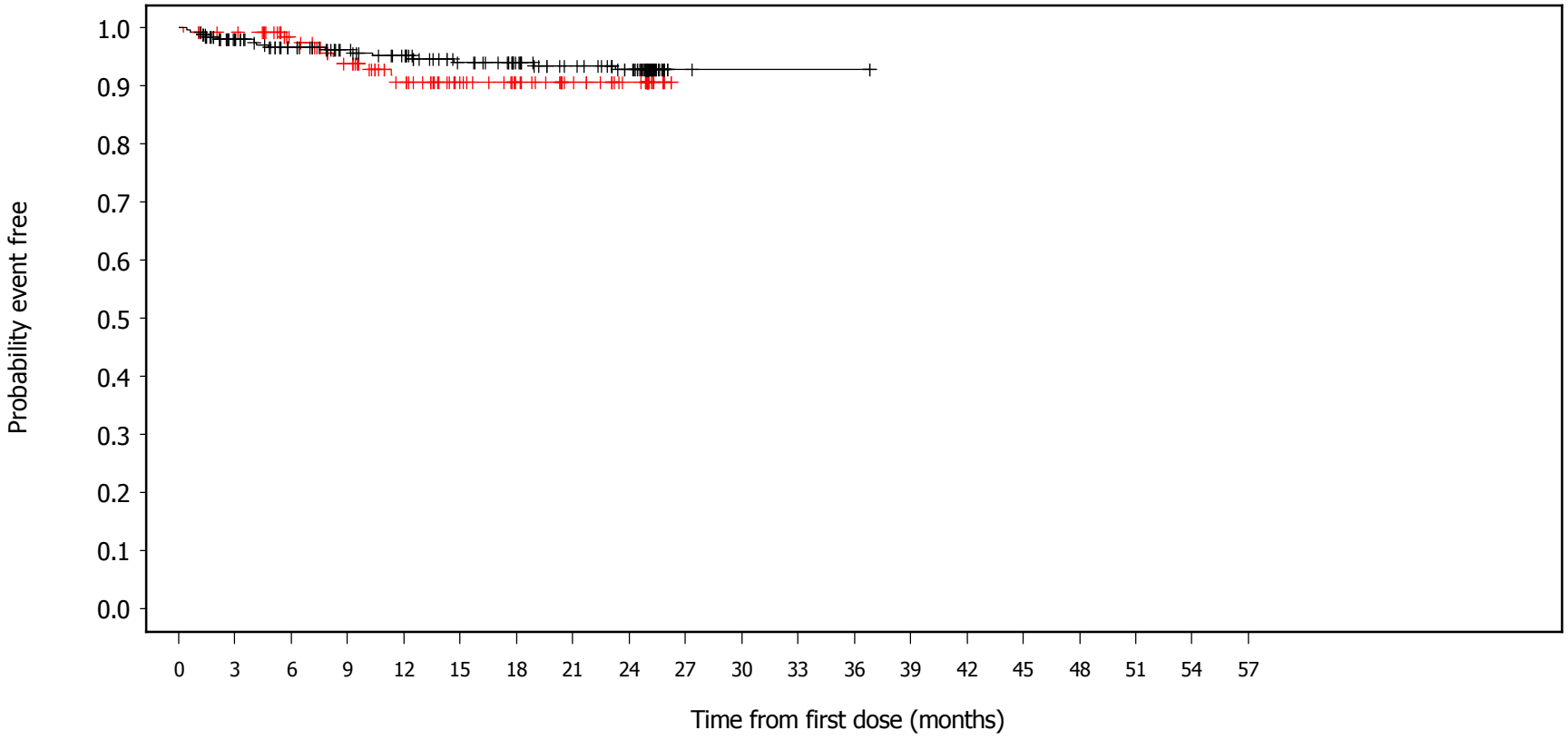
Figure 3.3.64 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Infection
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	234	216	201	191	172	160	148	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	105	90	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

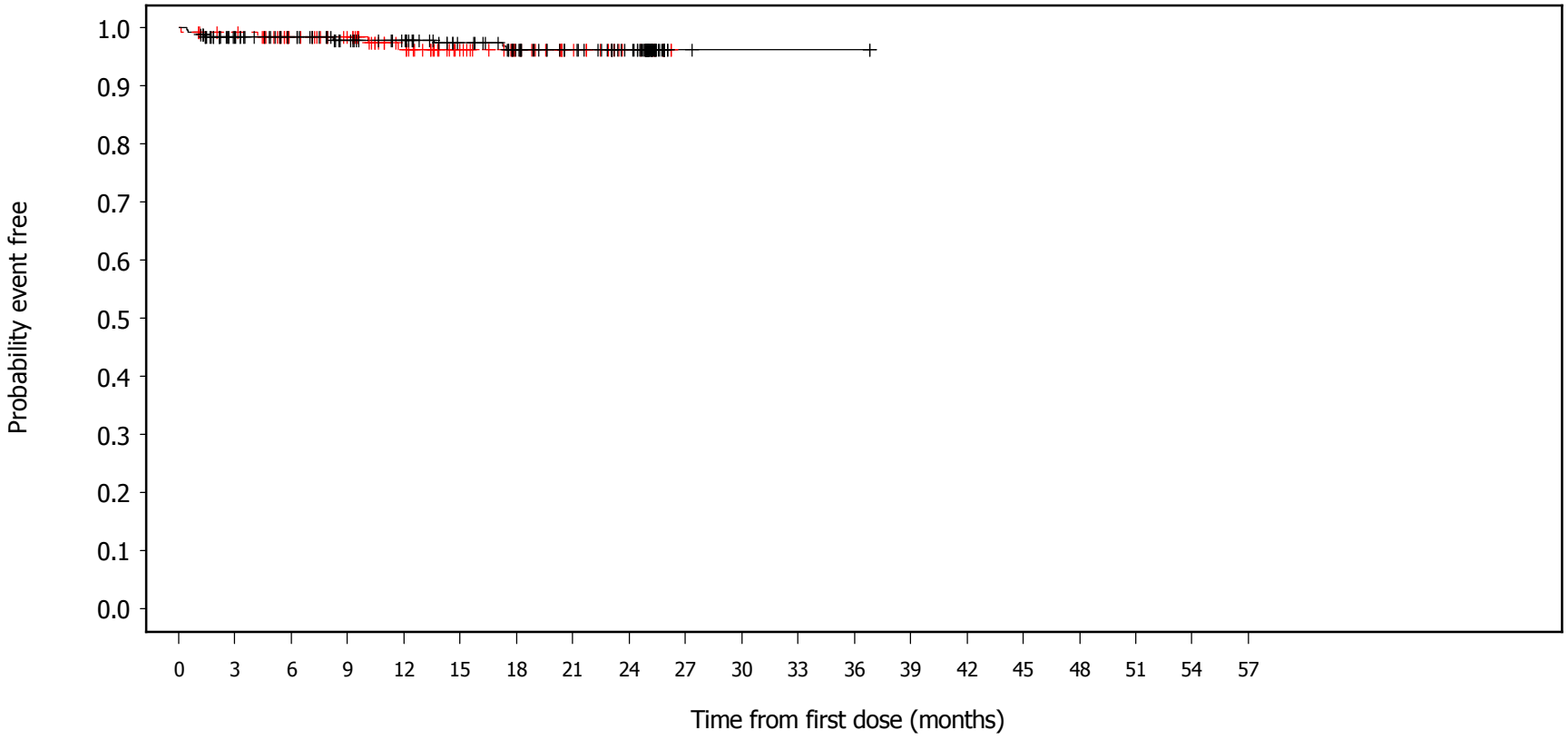
Figure 3.3.65 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Nasopharyngitis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	229	210	195	185	168	155	142	128	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	113	100	83	67	56	44	33	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

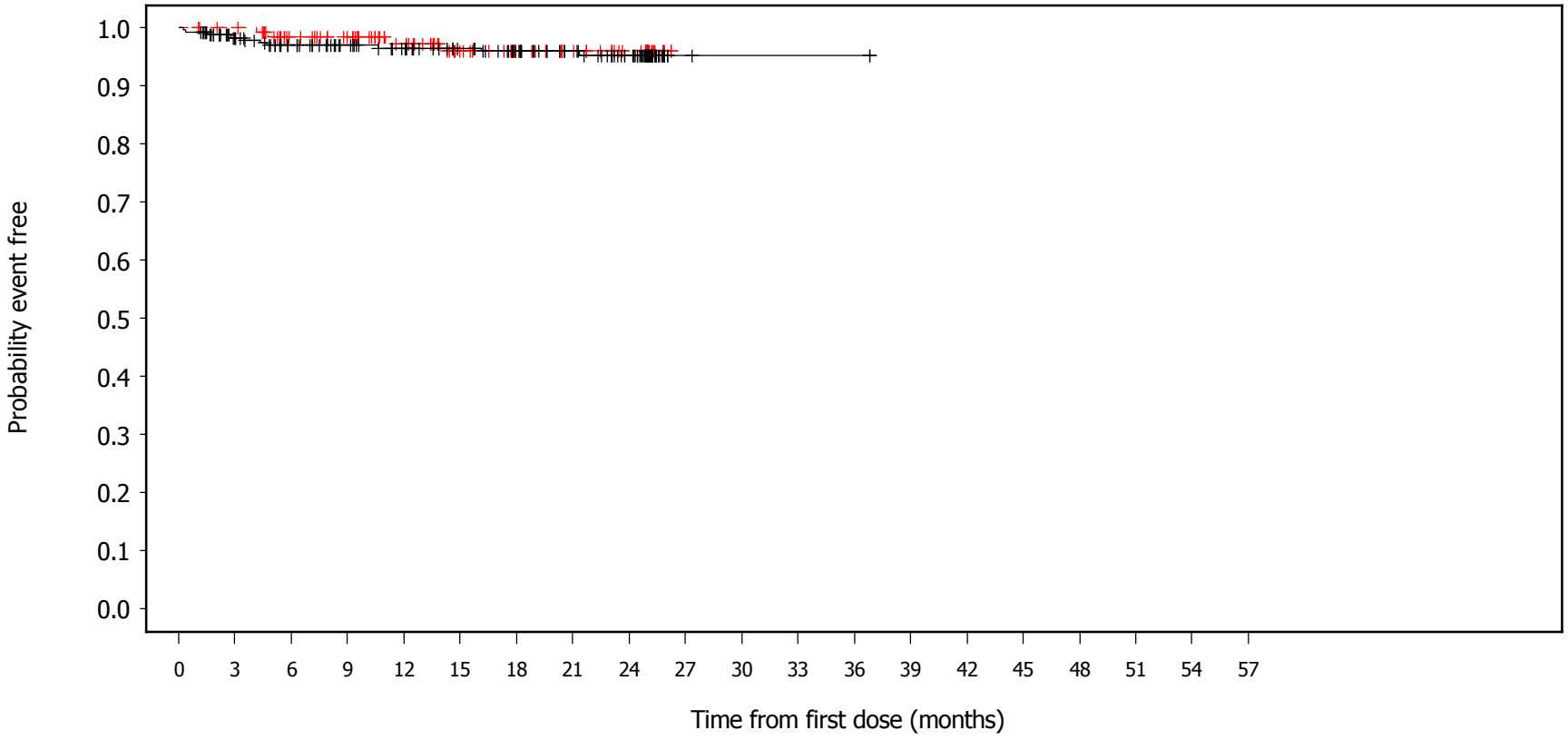
Figure 3.3.66 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Pharyngitis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	215	200	191	174	159	146	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	113	104	88	71	59	47	35	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

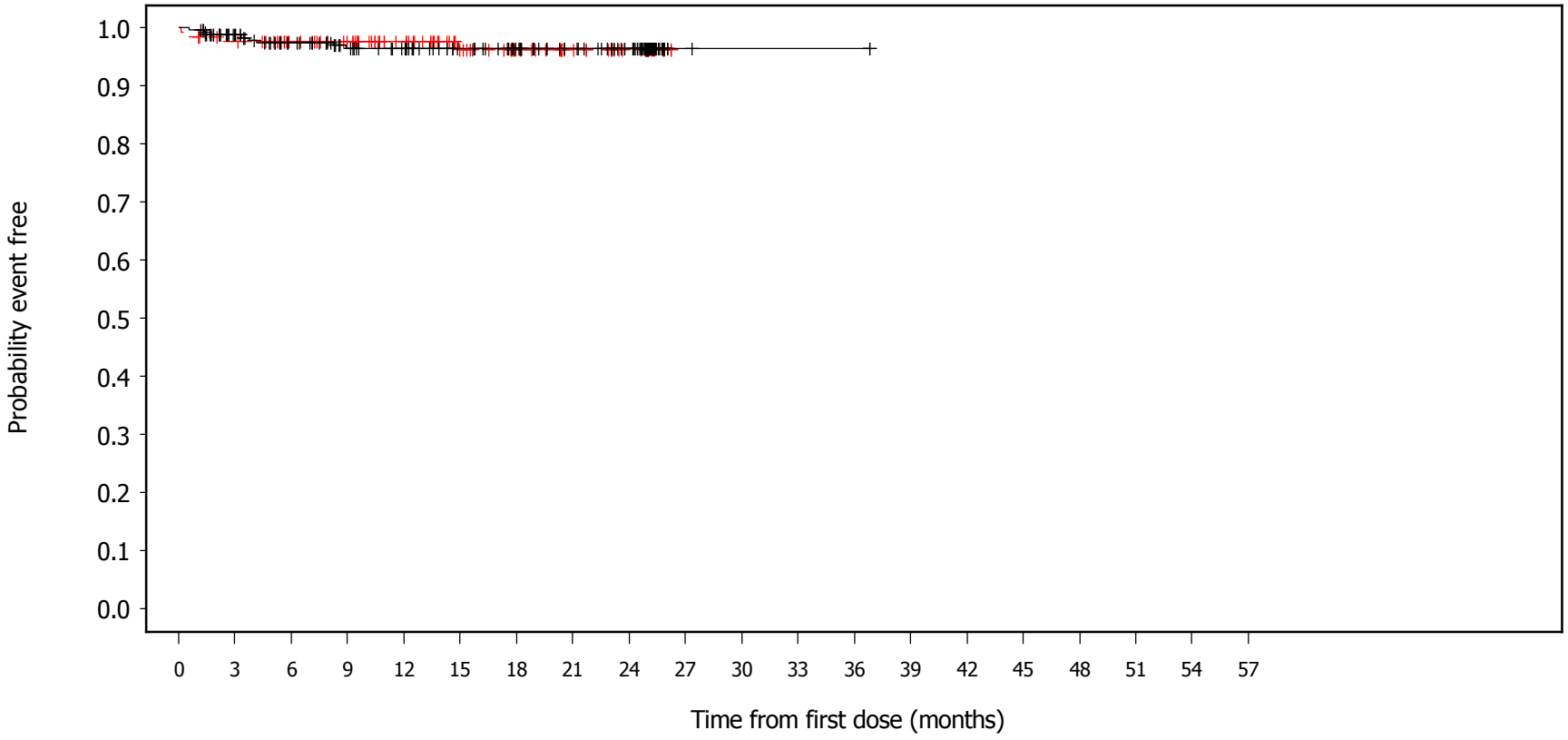
Figure 3.3.67 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Rhinitis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	212	198	188	174	161	148	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	113	104	88	70	59	48	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

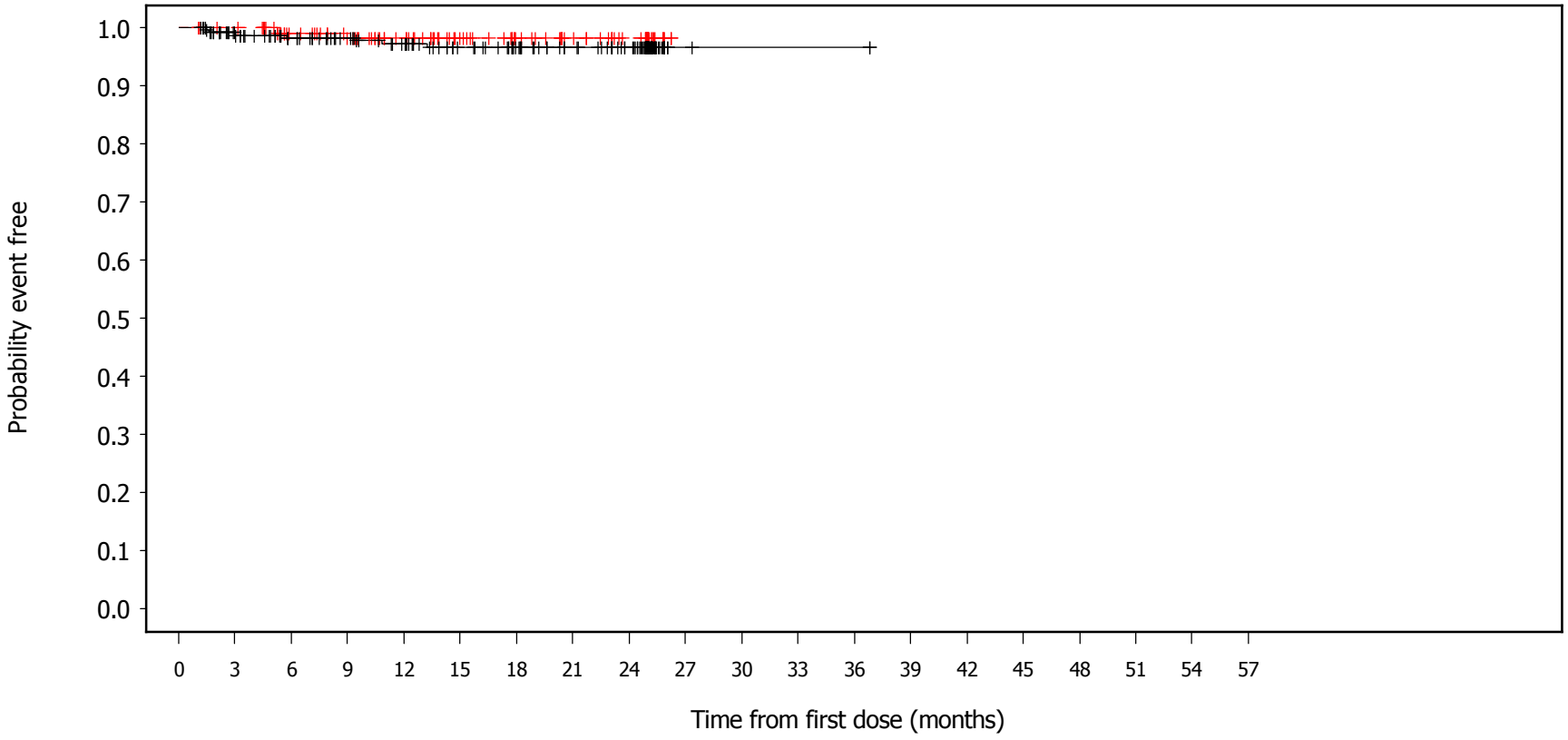
Figure 3.3.68 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Tooth abscess
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	212	197	188	172	159	146	130	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	125	113	104	89	71	59	47	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

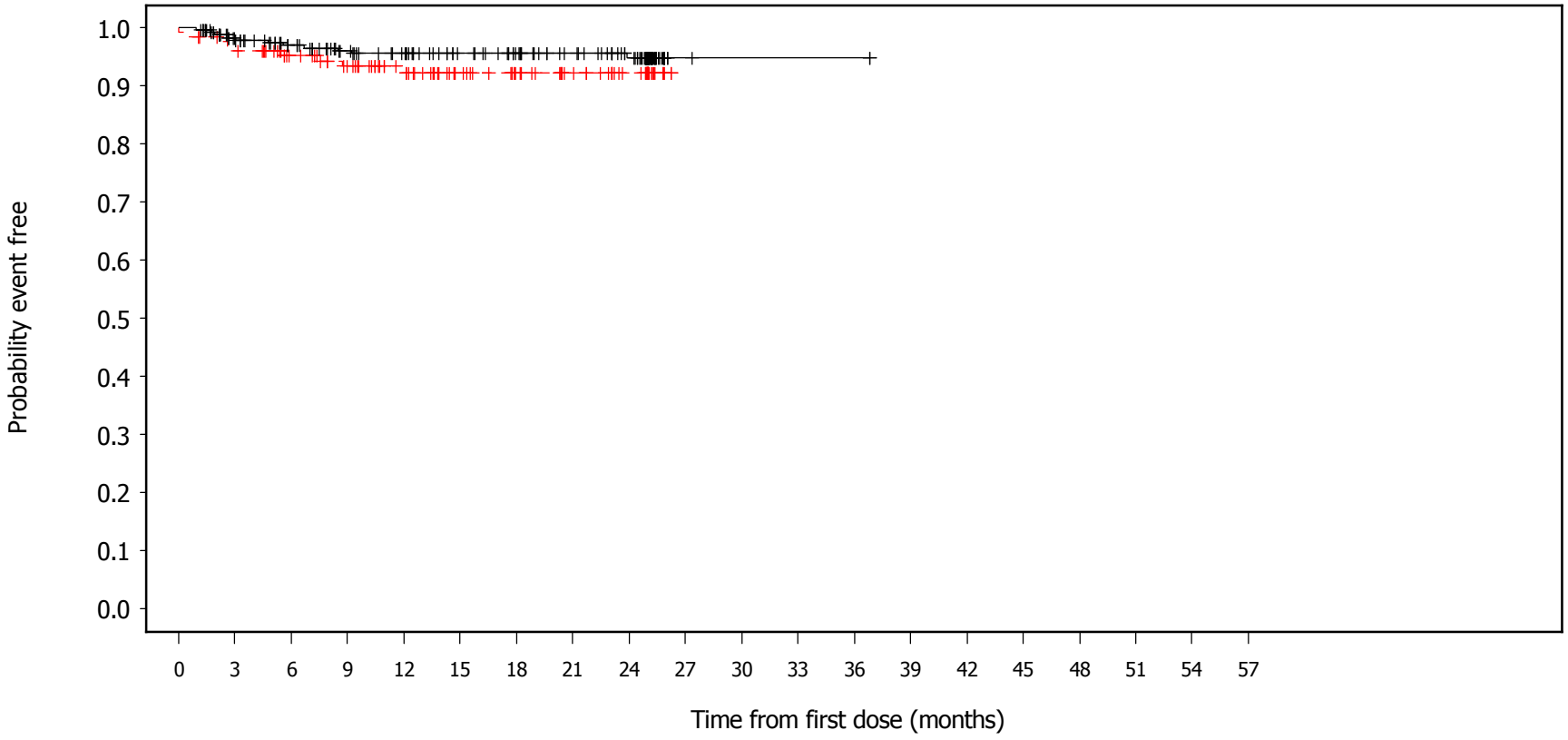
Figure 3.3.69 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Tooth infection
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	214	201	190	173	160	147	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	114	104	90	73	61	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

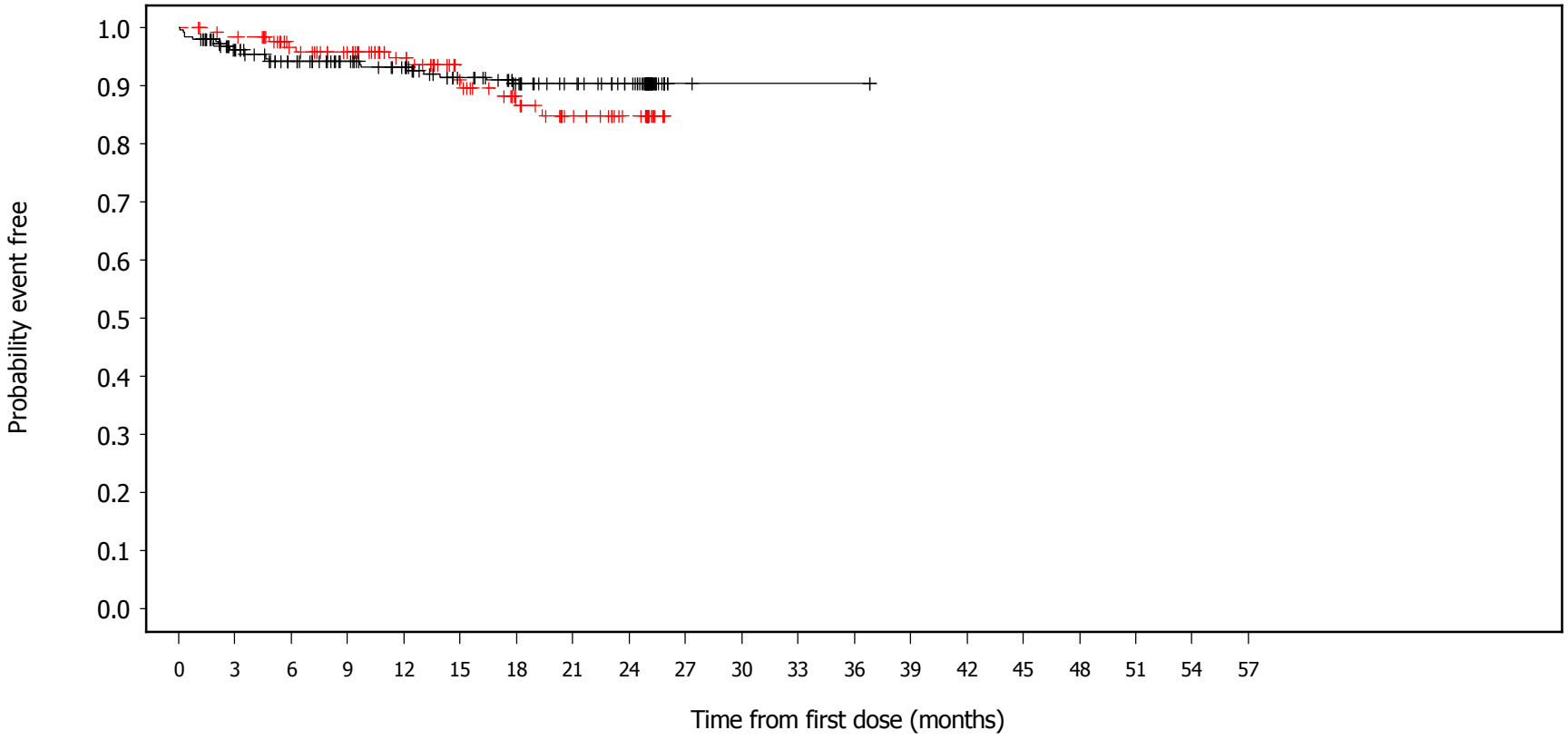
Figure 3.3.70 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Cystitis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	211	195	185	169	158	146	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	123	109	98	85	69	58	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

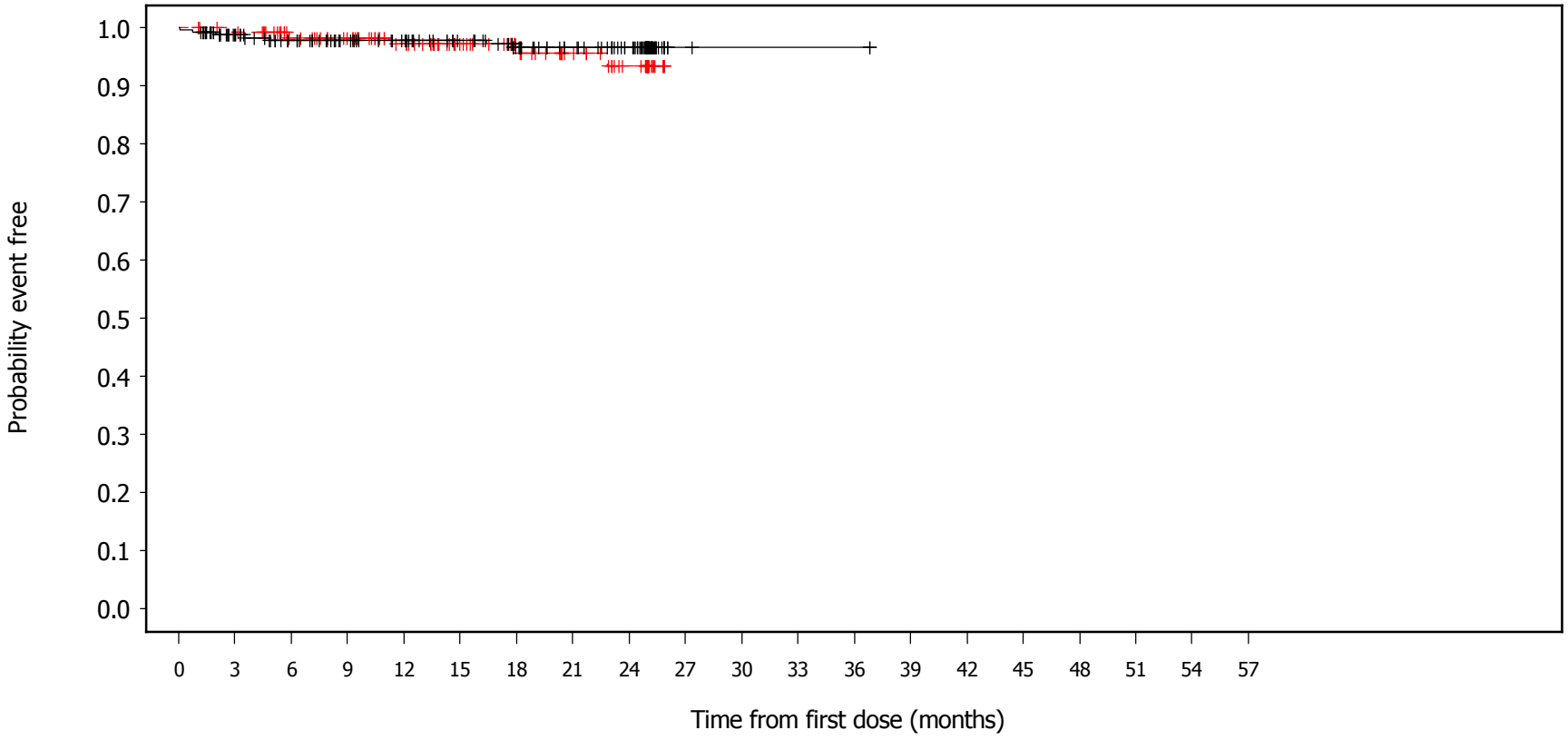
Figure 3.3.71 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Psychiatric disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	226	206	192	181	163	148	137	125	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	111	101	85	68	54	42	31	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

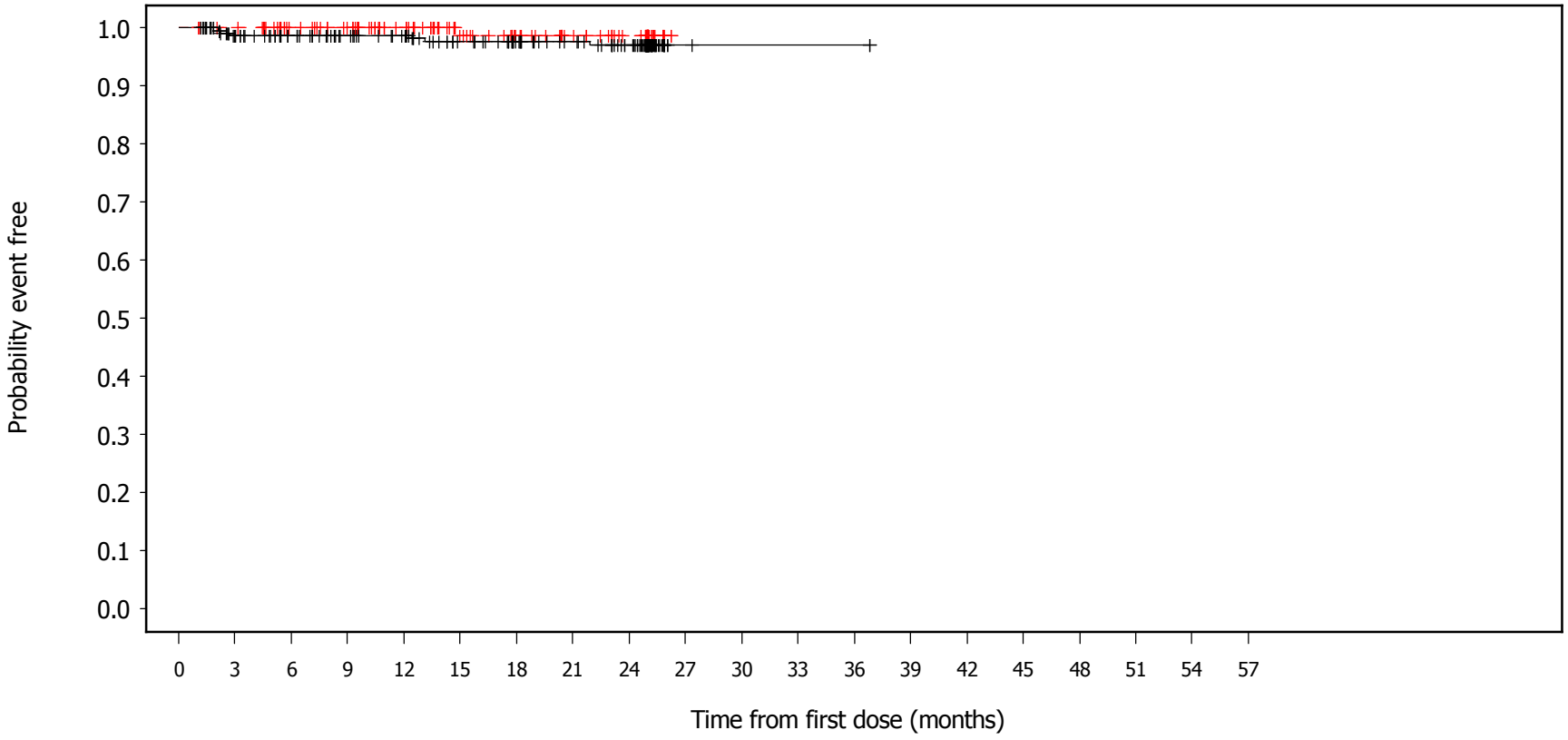
Figure 3.3.72 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Anxiety
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	214	200	191	176	161	148	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	113	104	88	72	59	47	35	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

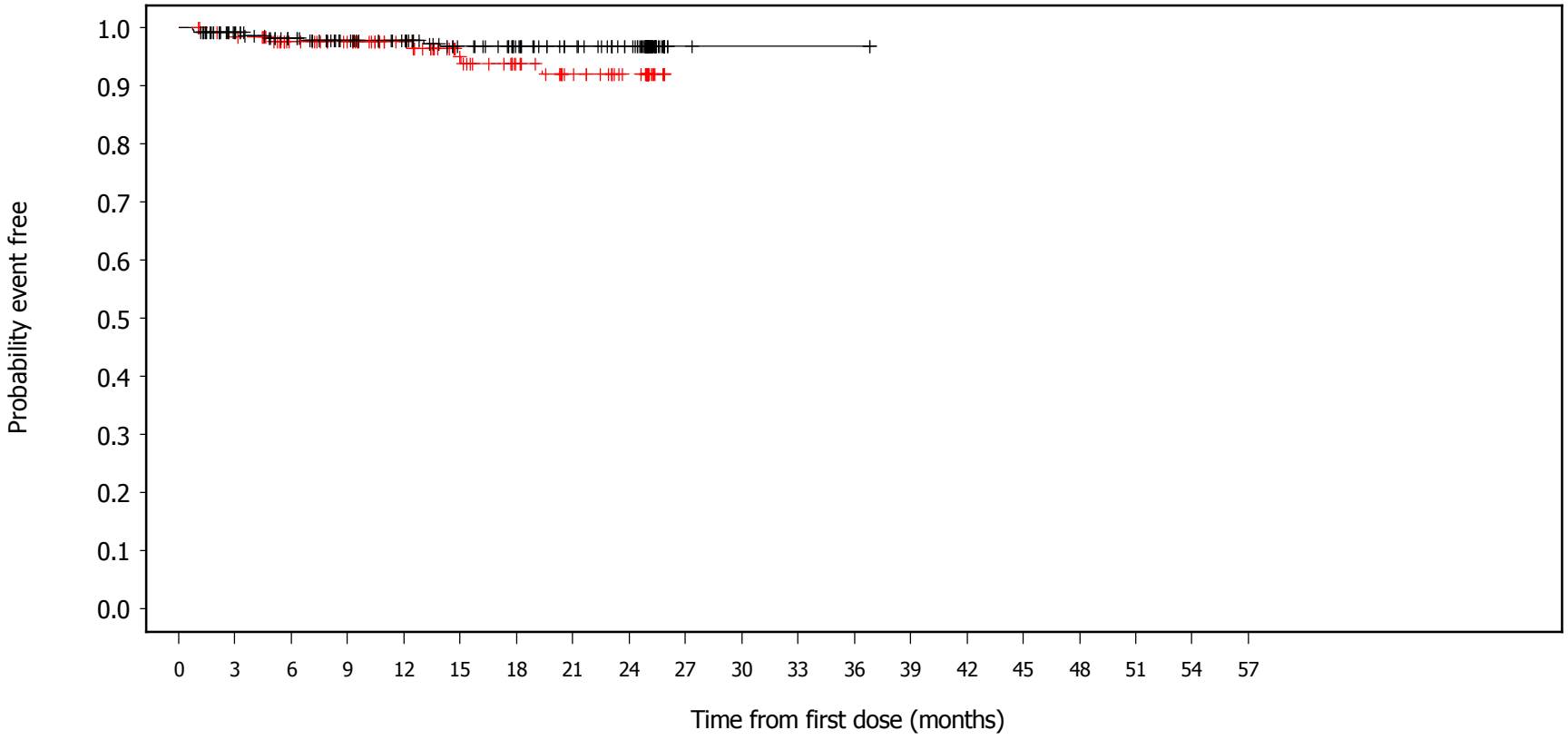
Figure 3.3.73 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Depression
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	215	201	192	174	161	150	134	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	73	61	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

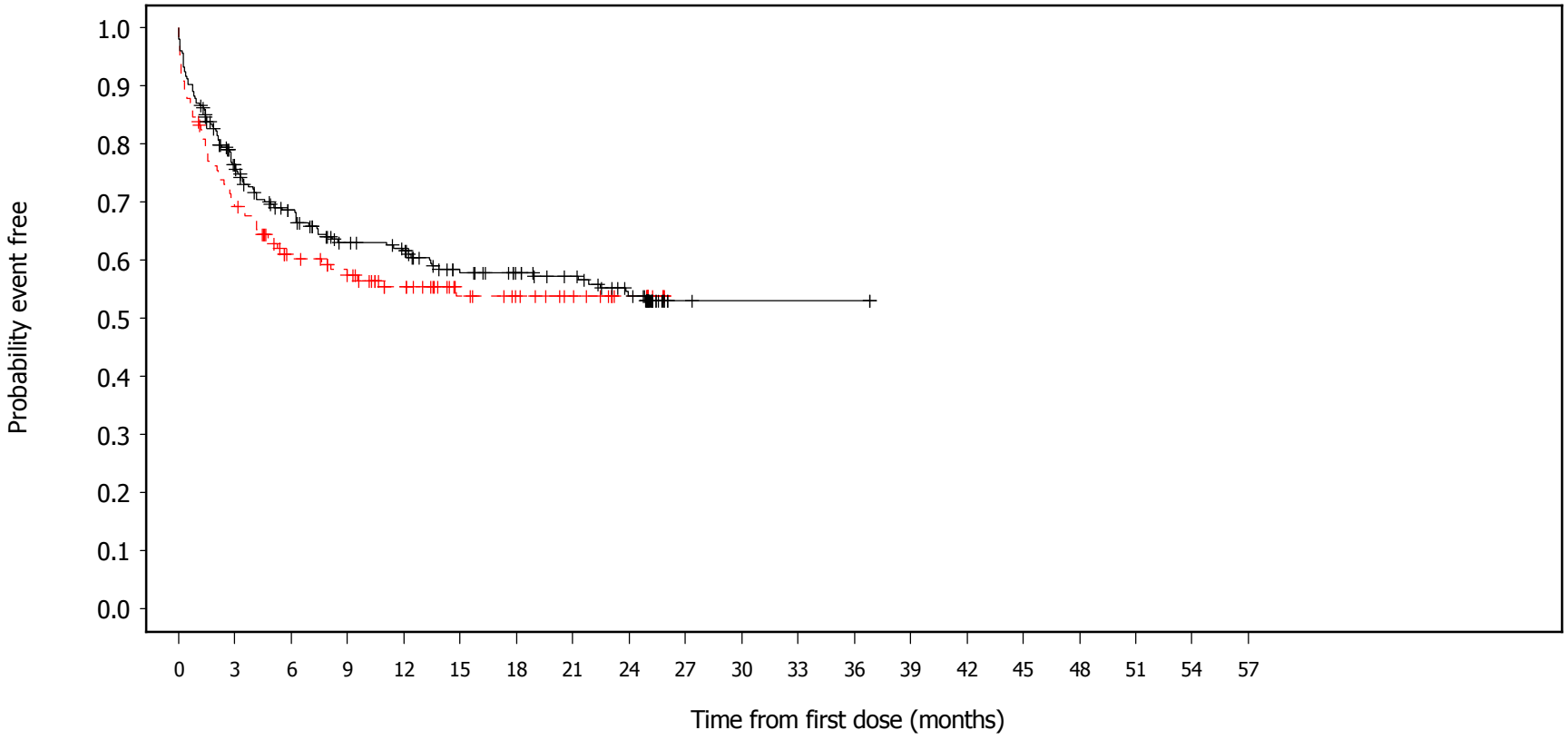
Figure 3.3.74 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Sleep disorder
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	215	200	191	173	160	147	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	112	103	88	71	59	47	35	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

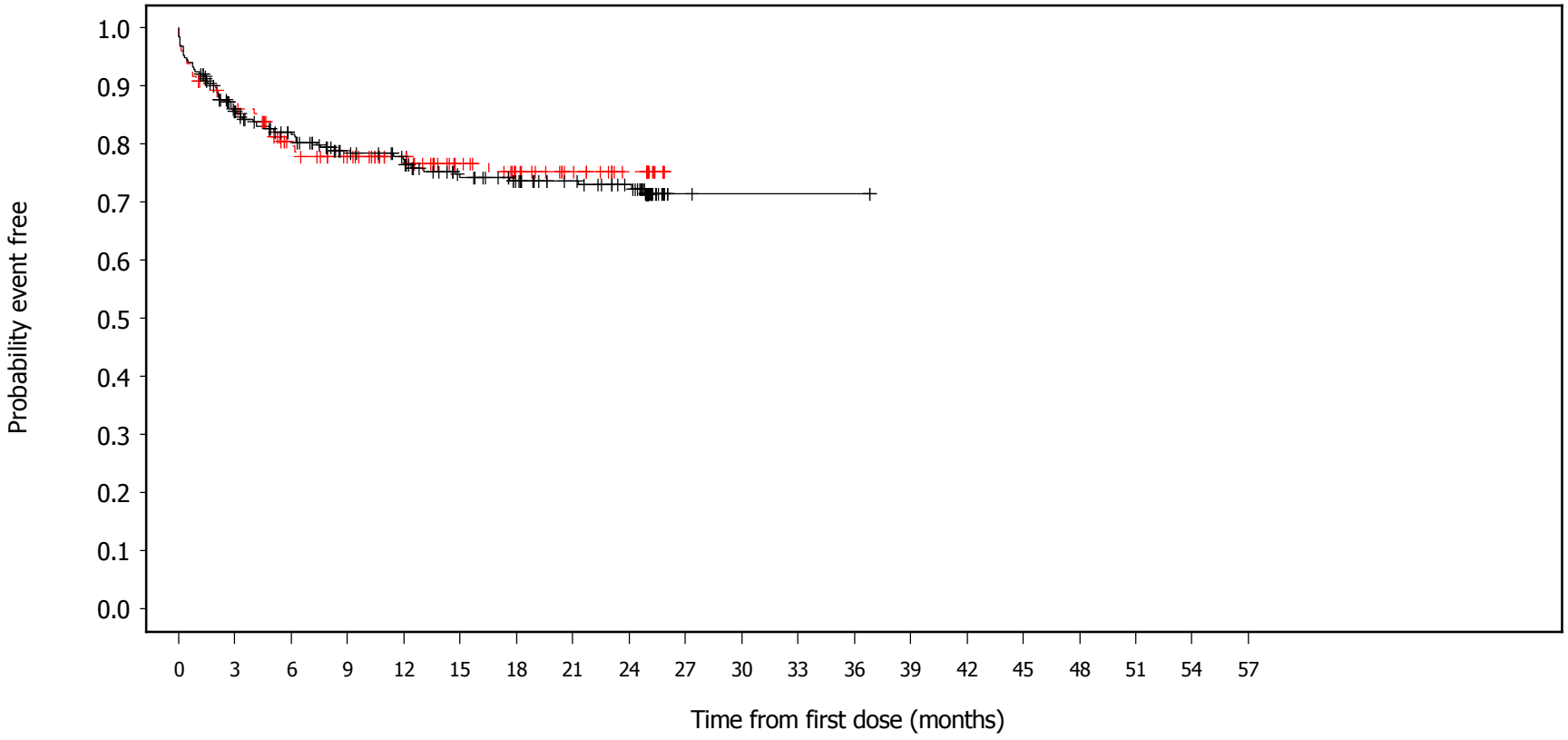
Figure 3.3.75 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Musculoskeletal and connective tissue disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	180	151	129	122	104	96	89	77	2	1	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
131	89	69	60	48	35	30	25	16	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

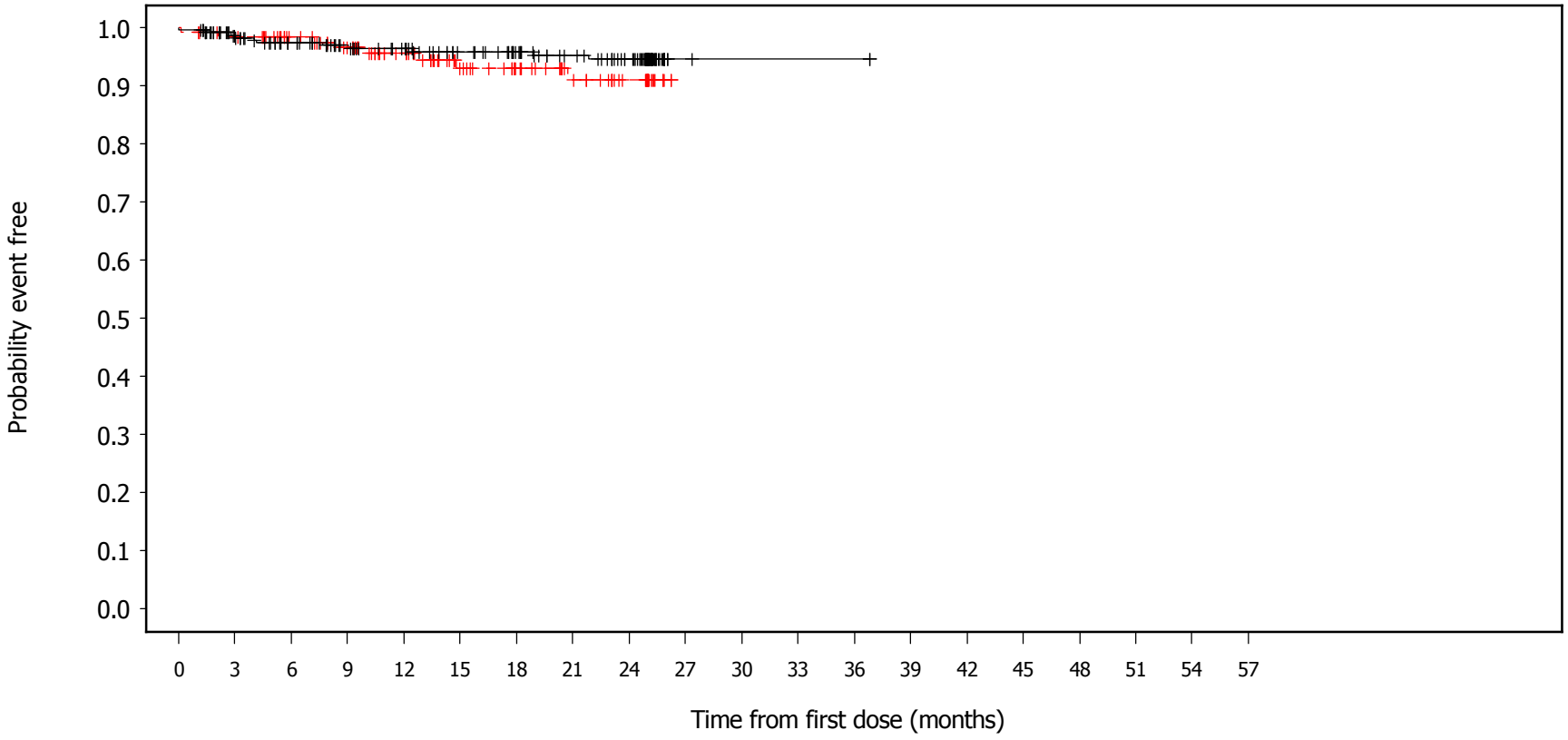
Figure 3.3.76 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Arthralgia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	202	181	161	151	134	123	113	103	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	110	90	81	70	55	44	34	23	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

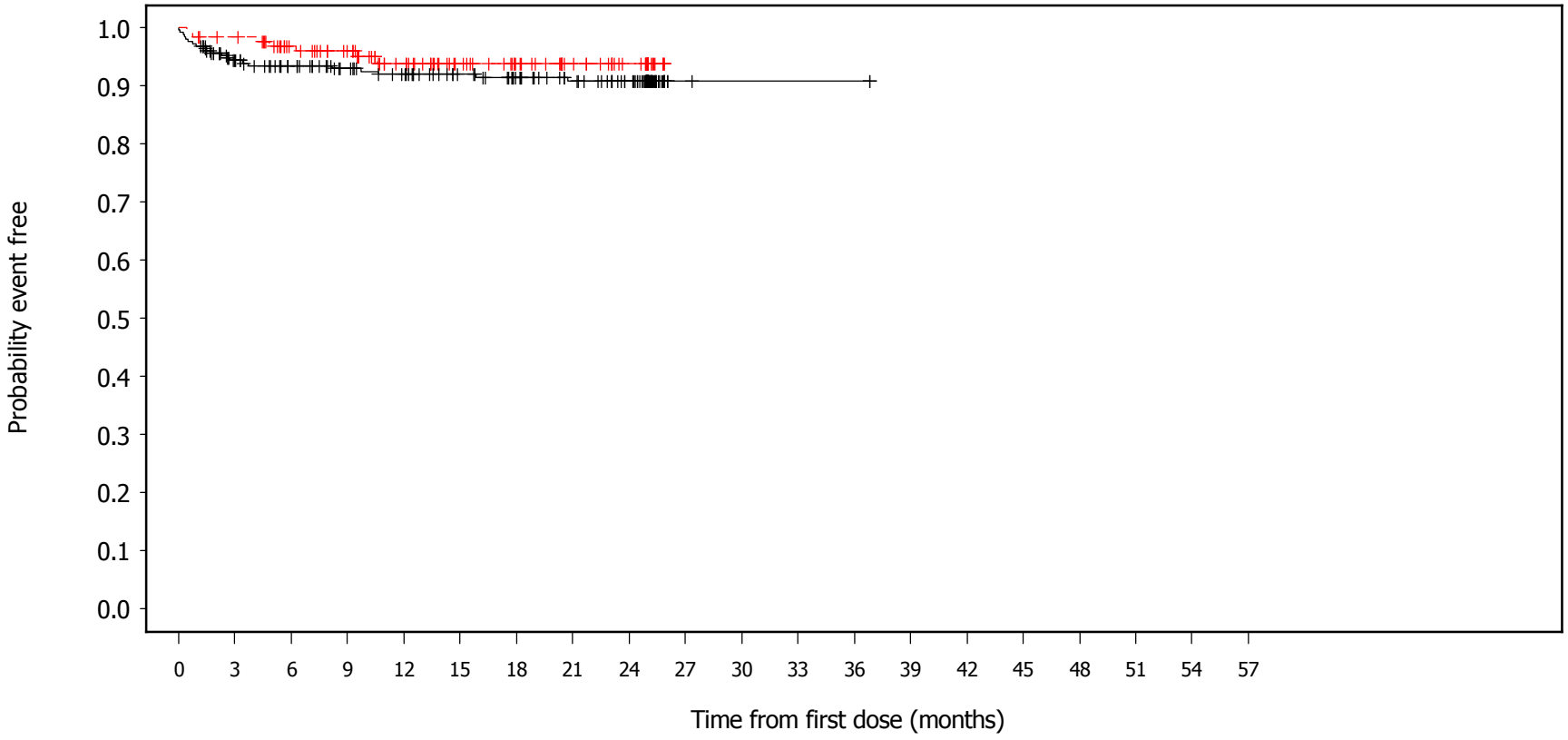
Figure 3.3.77 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Muscle spasms
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	212	197	187	171	158	145	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	102	86	67	56	44	32	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

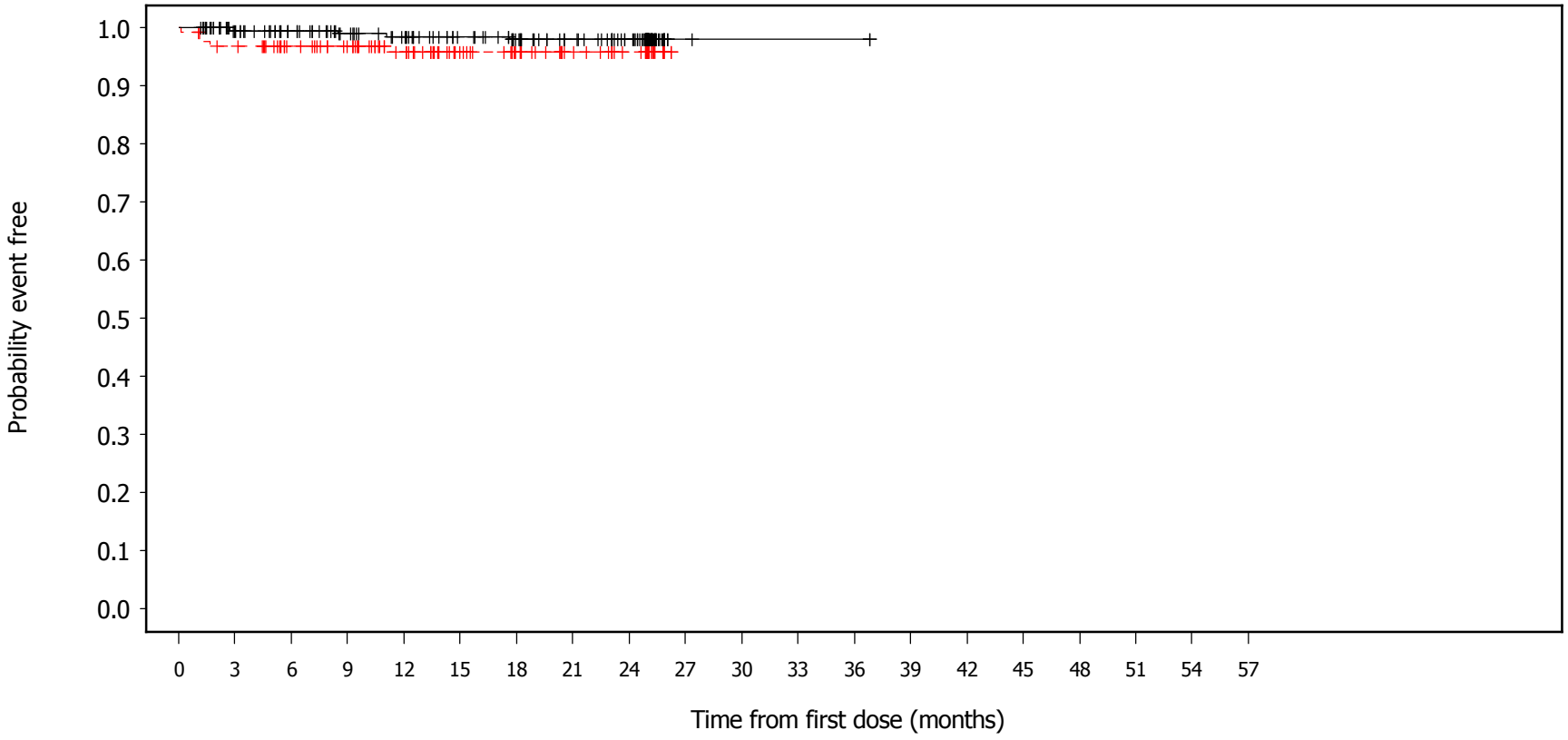
Figure 3.3.78 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Myalgia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	220	204	190	181	167	154	142	127	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	111	101	84	68	57	45	33	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

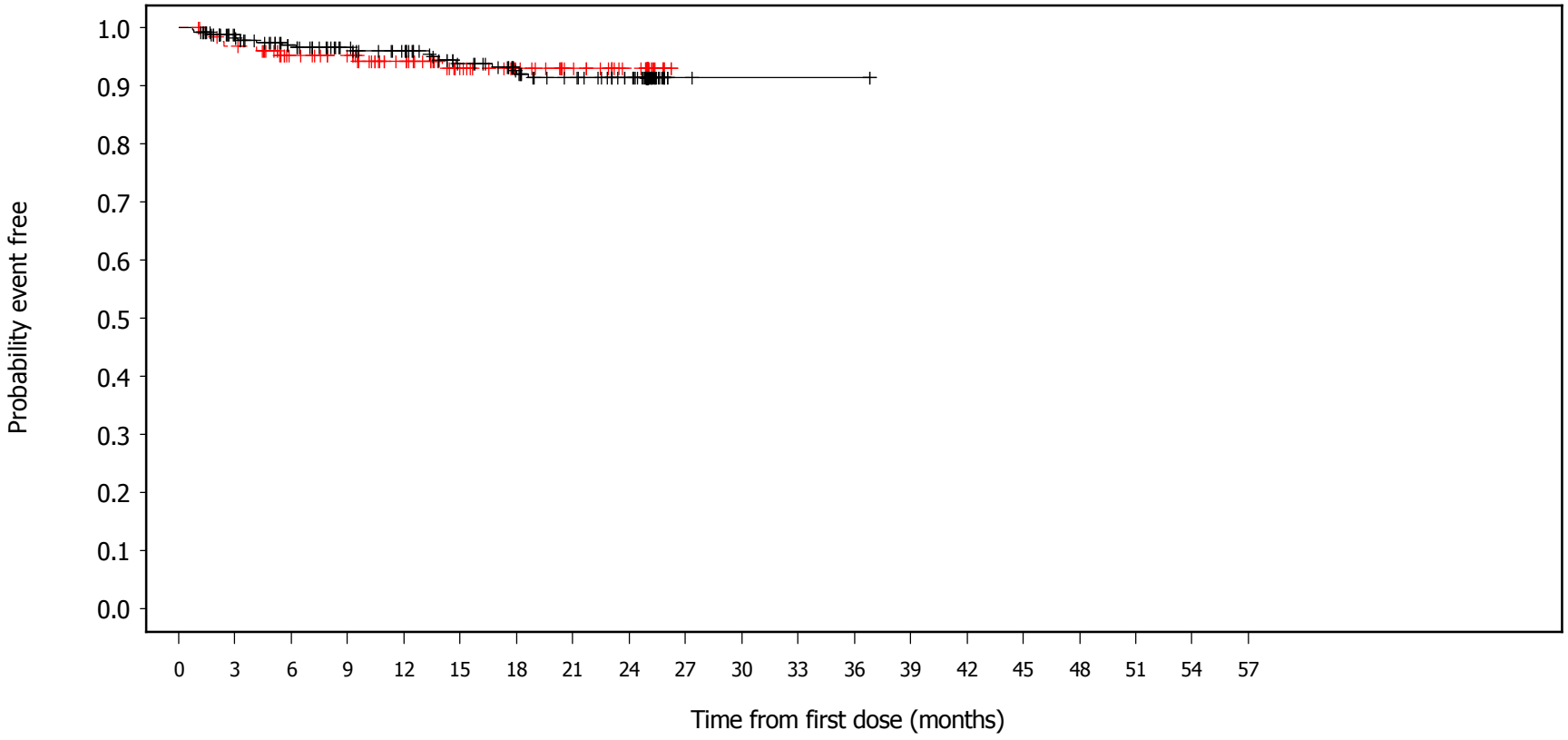
Figure 3.3.79 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Neck pain
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	233	217	202	192	176	163	150	134	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	124	112	103	87	70	59	47	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

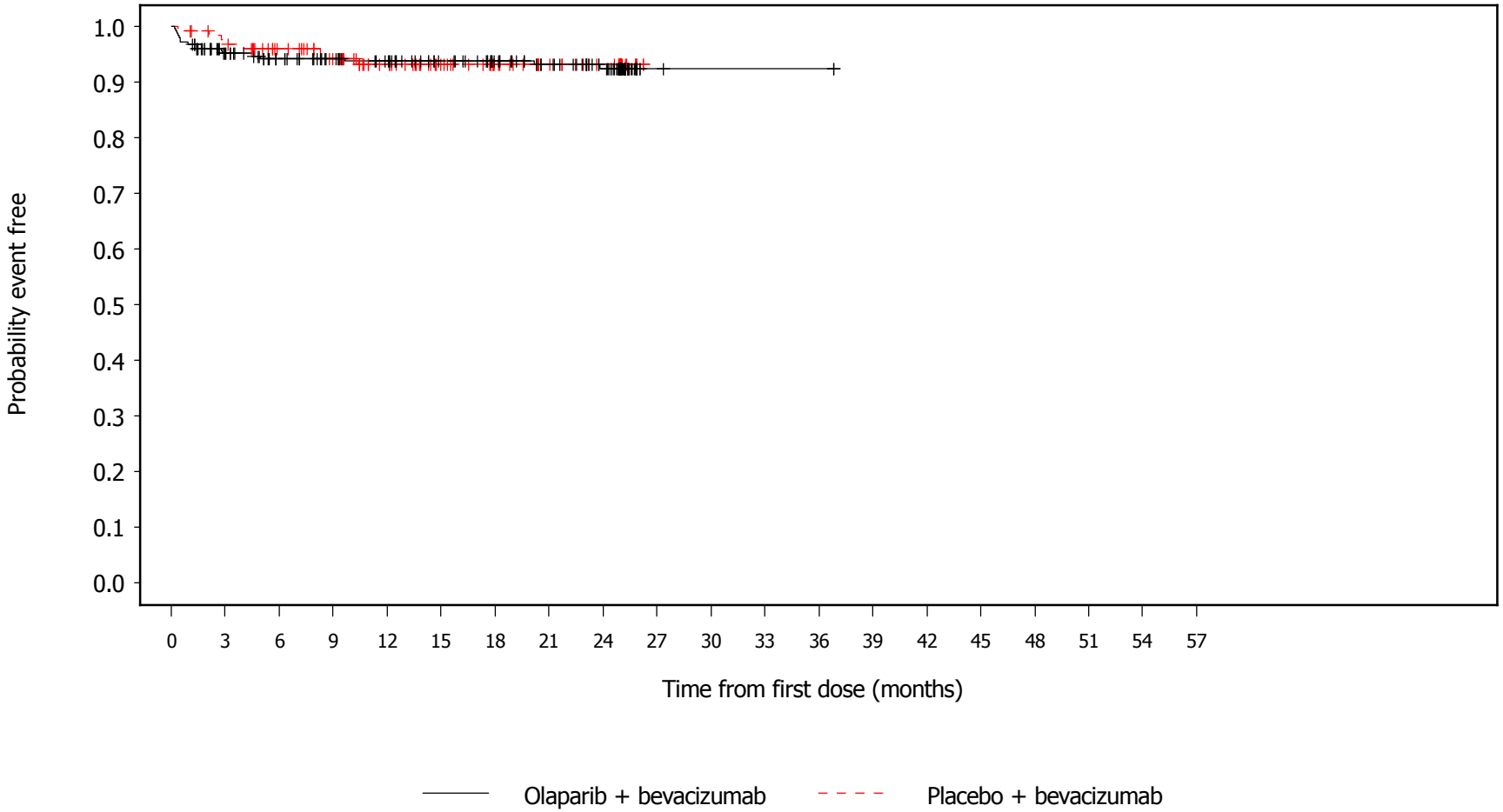
Figure 3.3.80 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Back pain
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	211	196	187	167	152	141	128	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	124	109	102	86	68	57	47	35	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

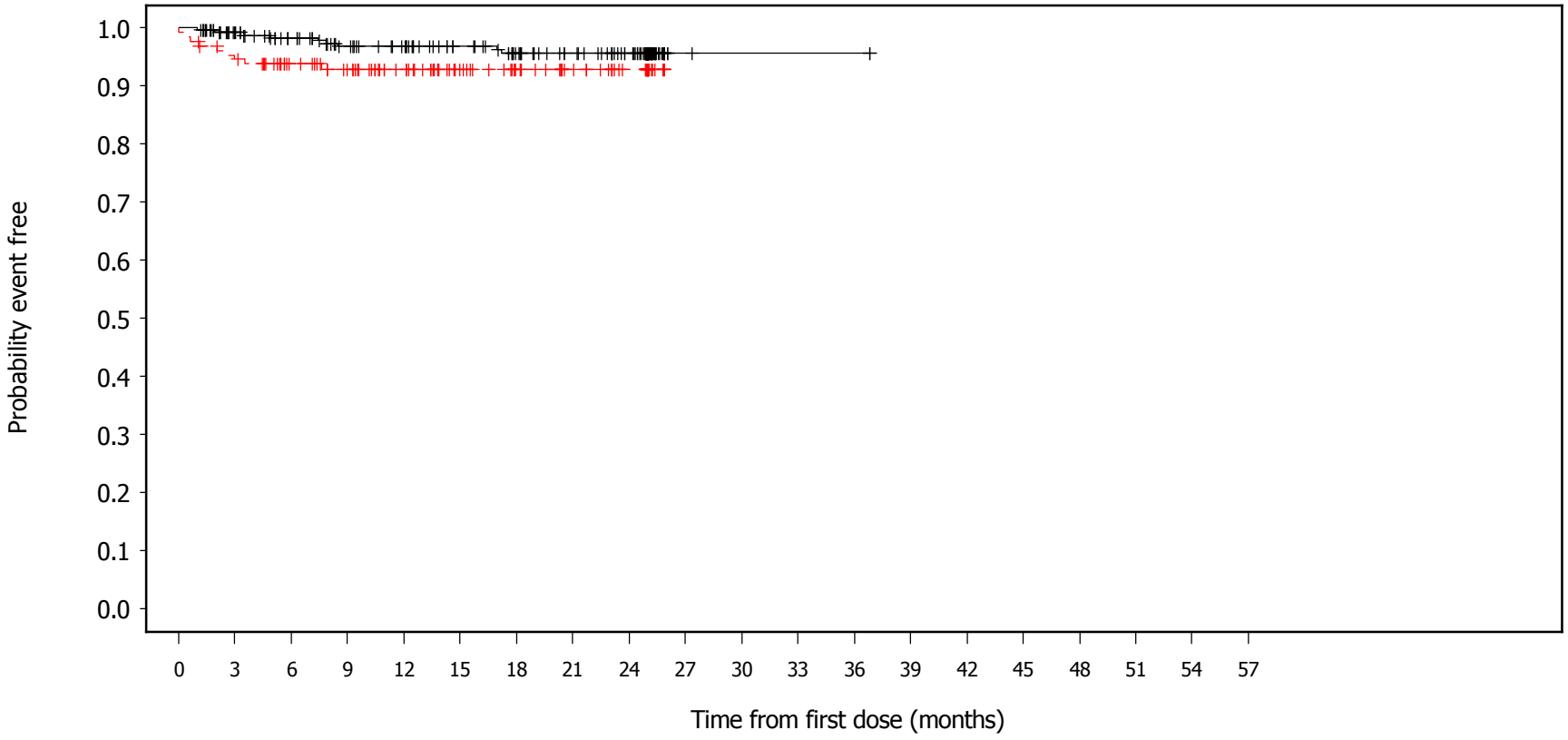
Figure 3.3.81 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Pain in extremity
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	223	205	192	184	168	155	143	127	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	124	112	101	85	70	58	46	35	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

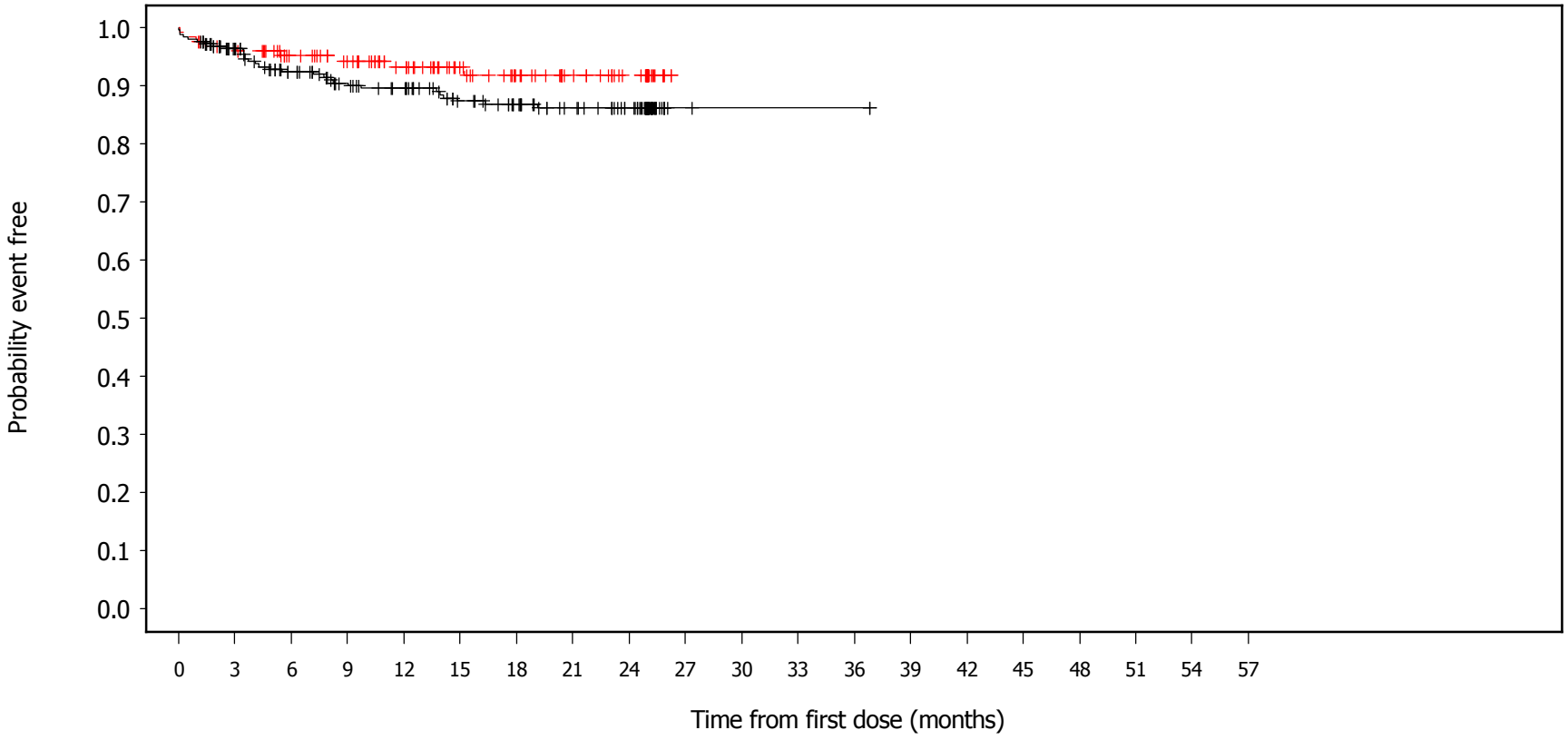
Figure 3.3.82 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Musculoskeletal pain
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	215	199	190	175	161	149	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	121	107	97	83	66	54	43	31	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

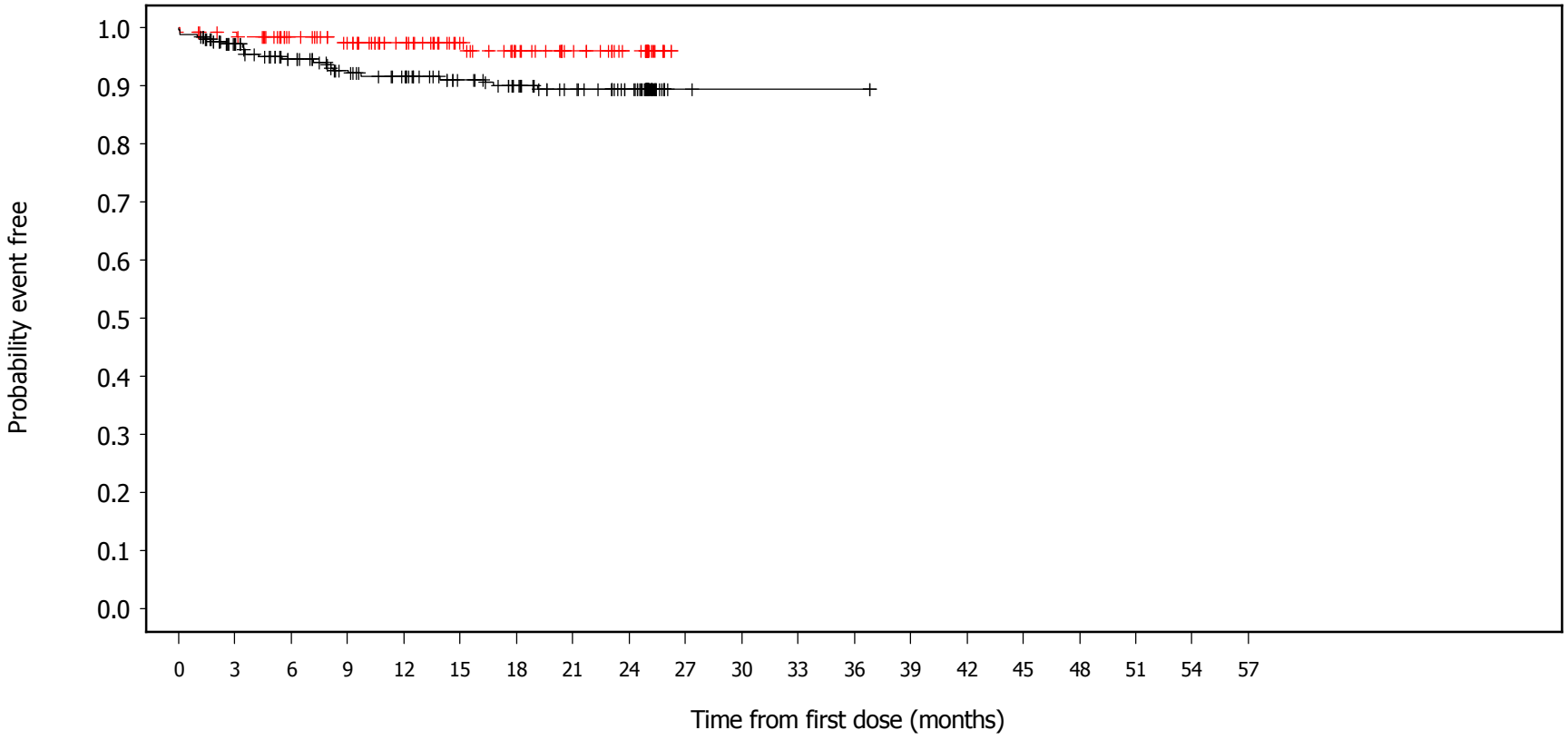
Figure 3.3.83 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Metabolism and nutrition disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	226	202	185	176	156	145	132	119	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	124	109	99	85	69	57	45	34	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

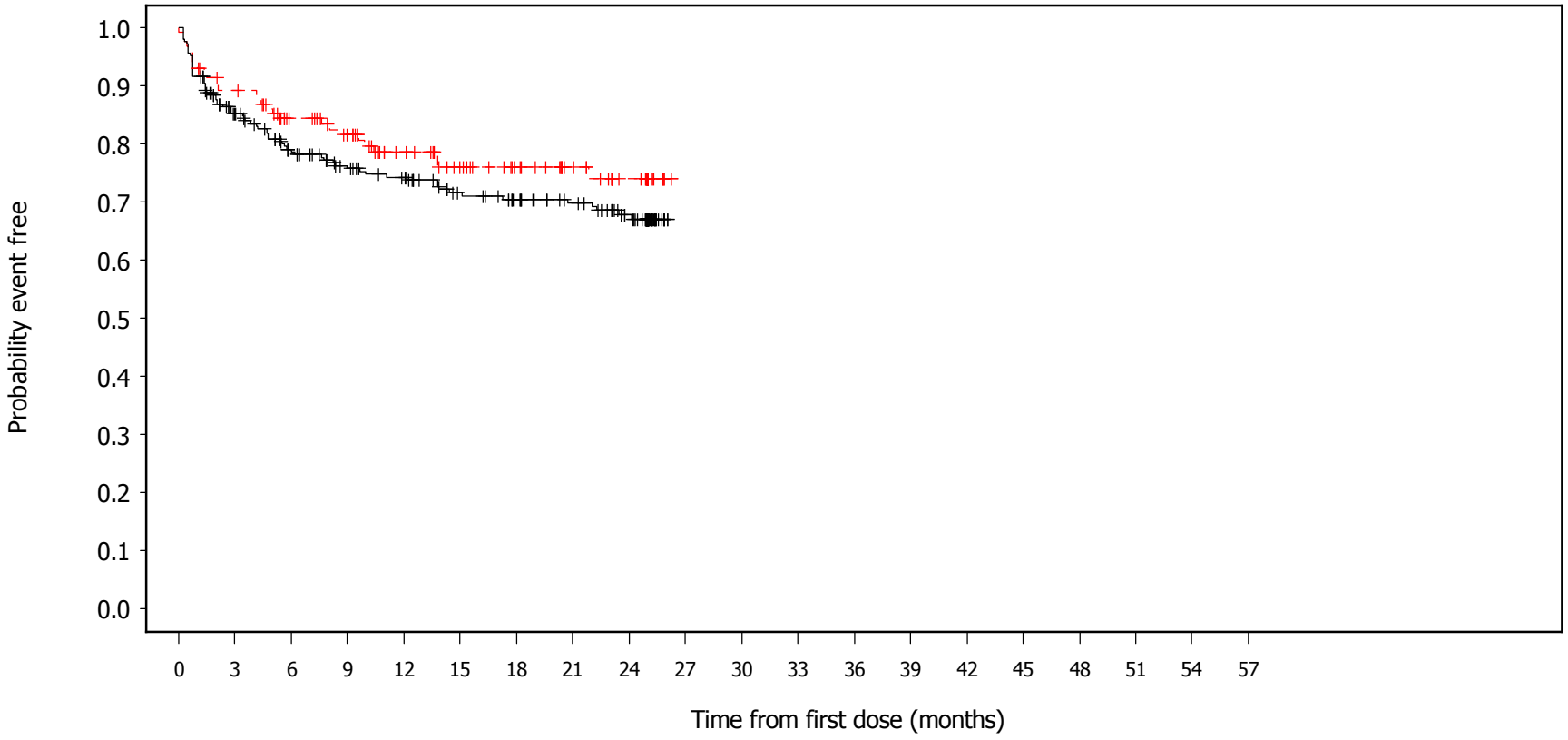
Figure 3.3.84 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Decreased appetite
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	228	207	190	180	163	151	138	124	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	113	103	89	73	60	48	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

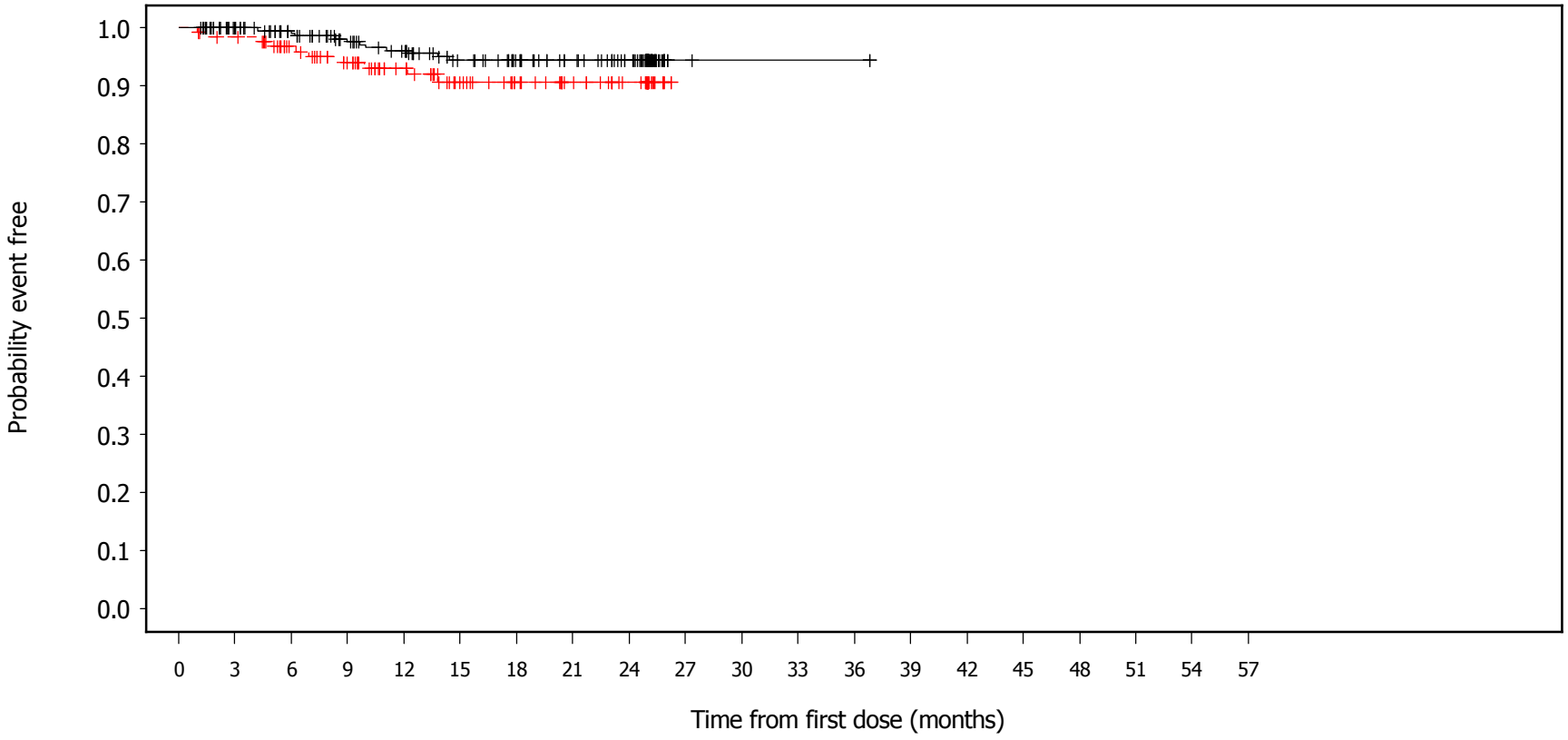
Figure 3.3.85 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Investigations
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	201	174	157	147	129	119	108	92	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	114	96	86	70	58	49	39	28	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

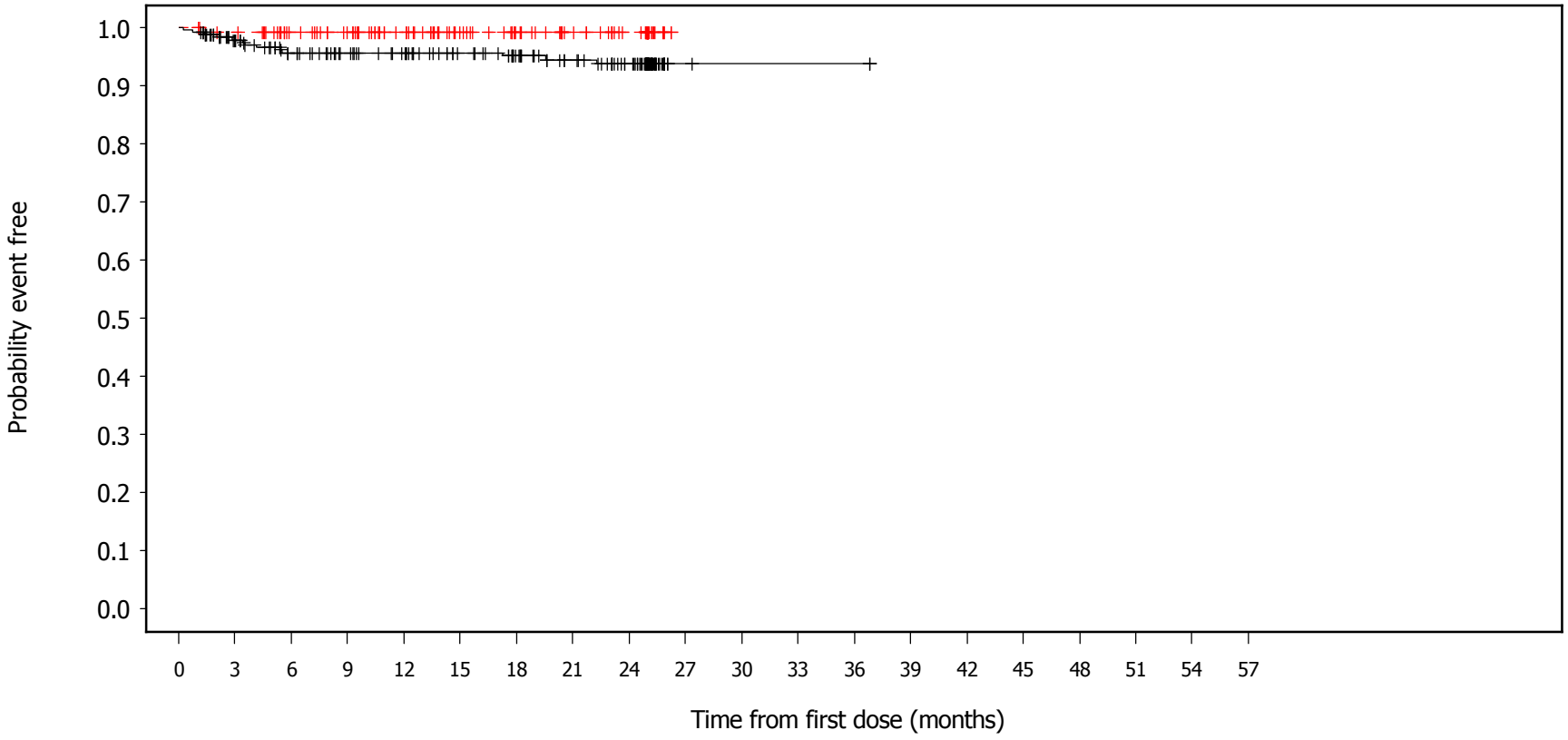
Figure 3.3.86 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Weight increased
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	234	217	200	188	170	157	145	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	111	99	83	67	56	45	34	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

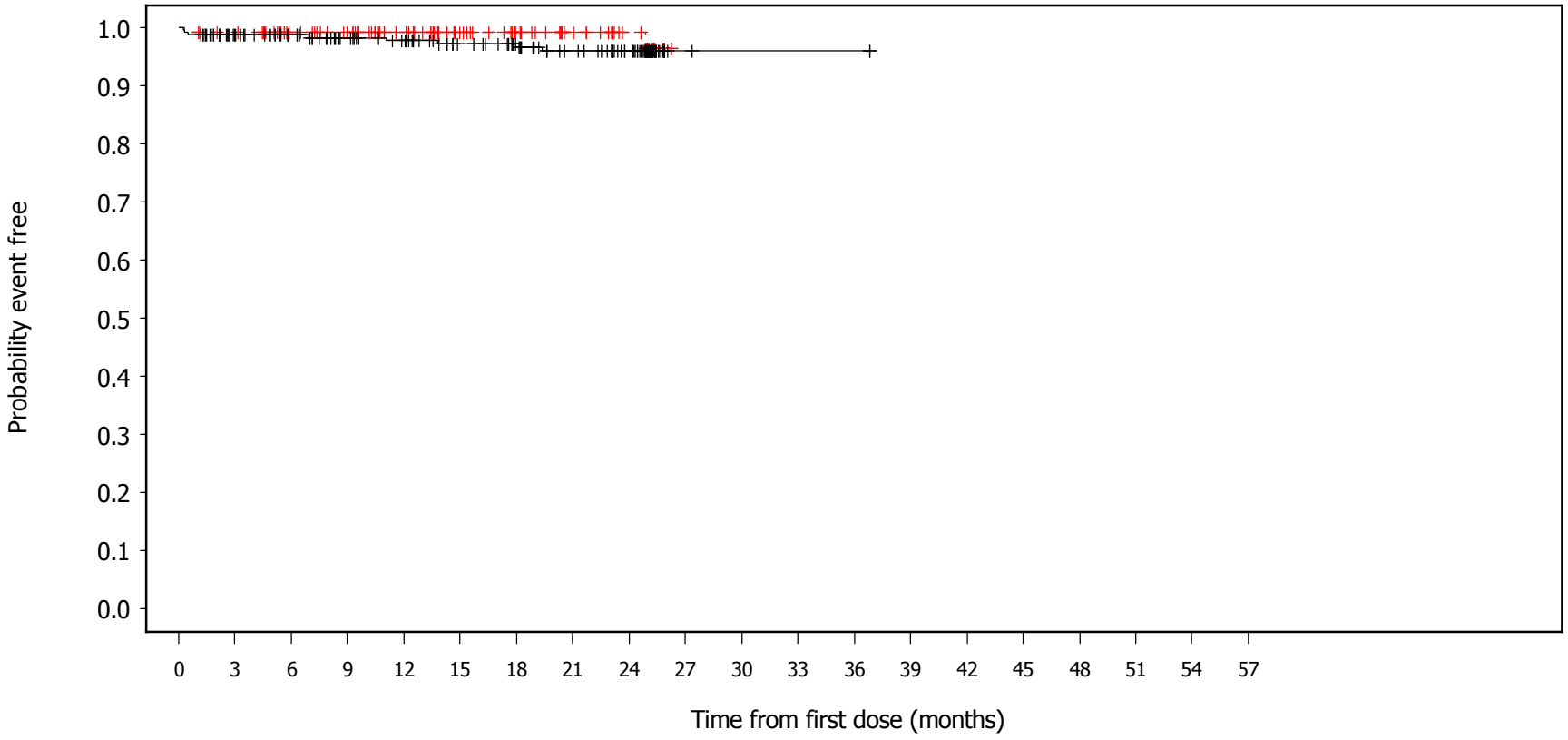
Figure 3.3.87 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Blood creatinine increased
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	209	196	187	171	158	144	127	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	114	105	90	73	61	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

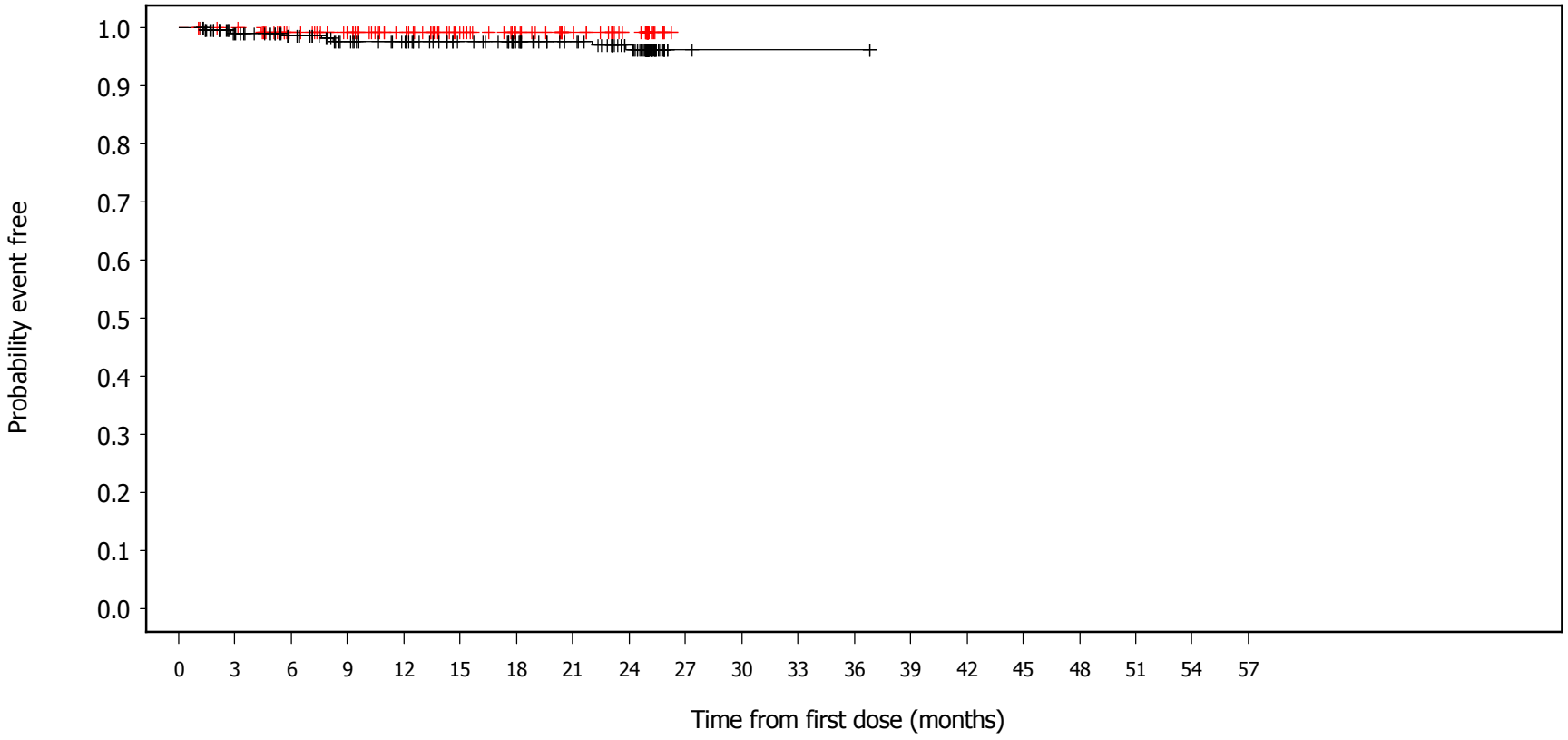
Figure 3.3.88 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: White blood cell count decreased
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	216	201	192	175	161	147	132	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	114	105	90	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

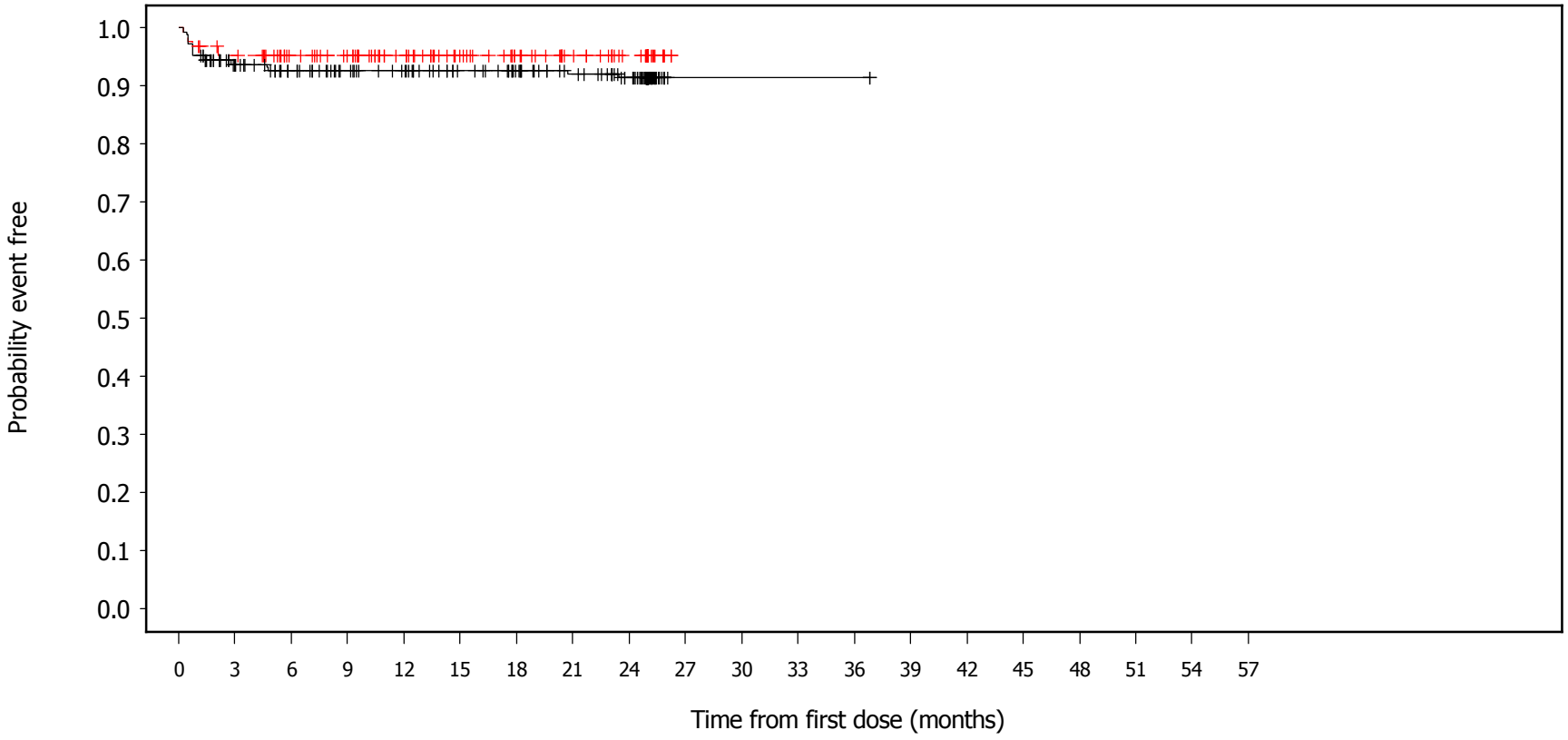
Figure 3.3.89 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Lymphocyte count decreased
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	215	199	190	174	161	148	130	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	114	105	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

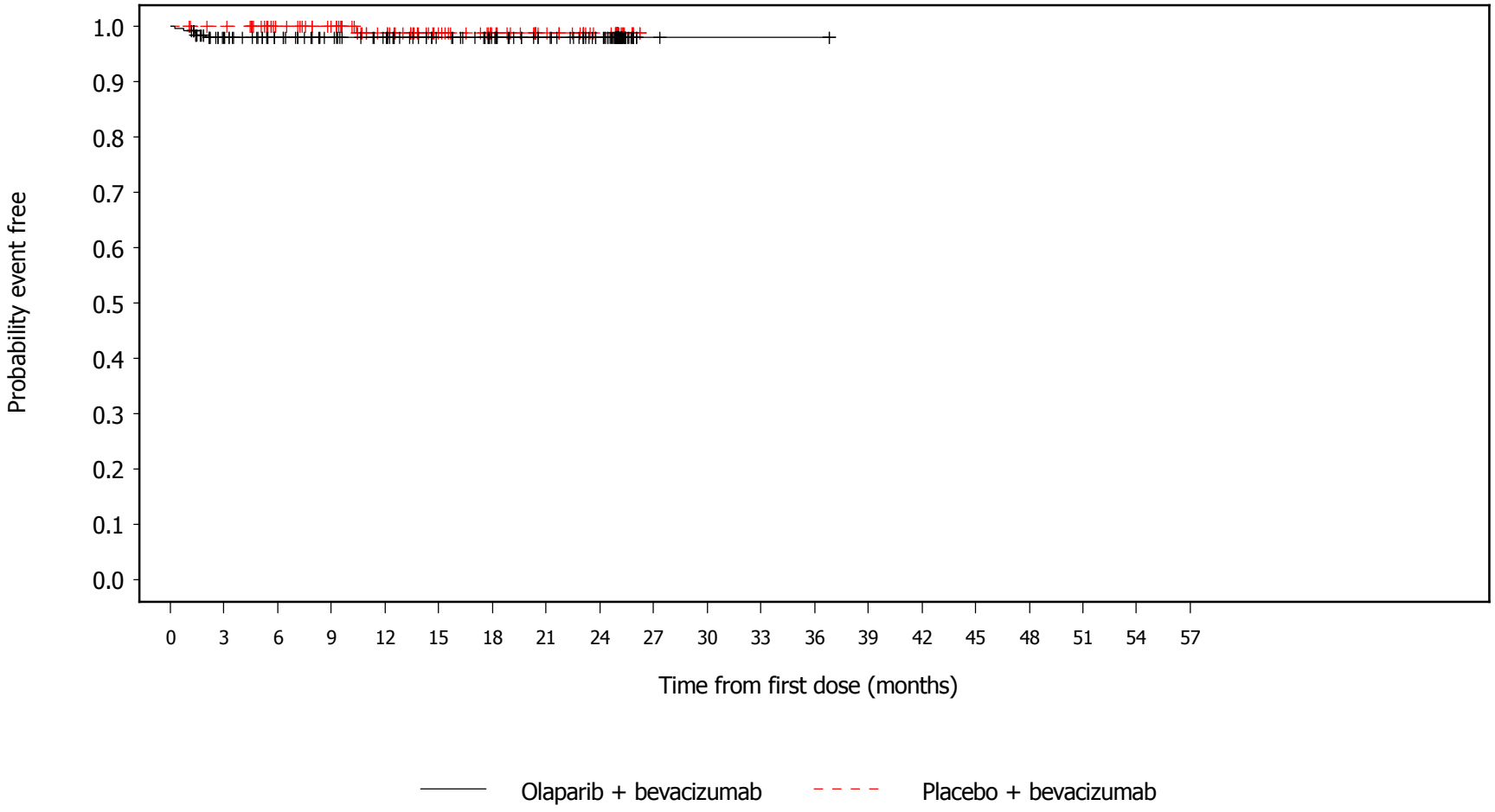
Figure 3.3.90 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Neutrophil count decreased
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	220	204	190	182	167	156	143	127	1	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	122	109	101	86	71	60	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

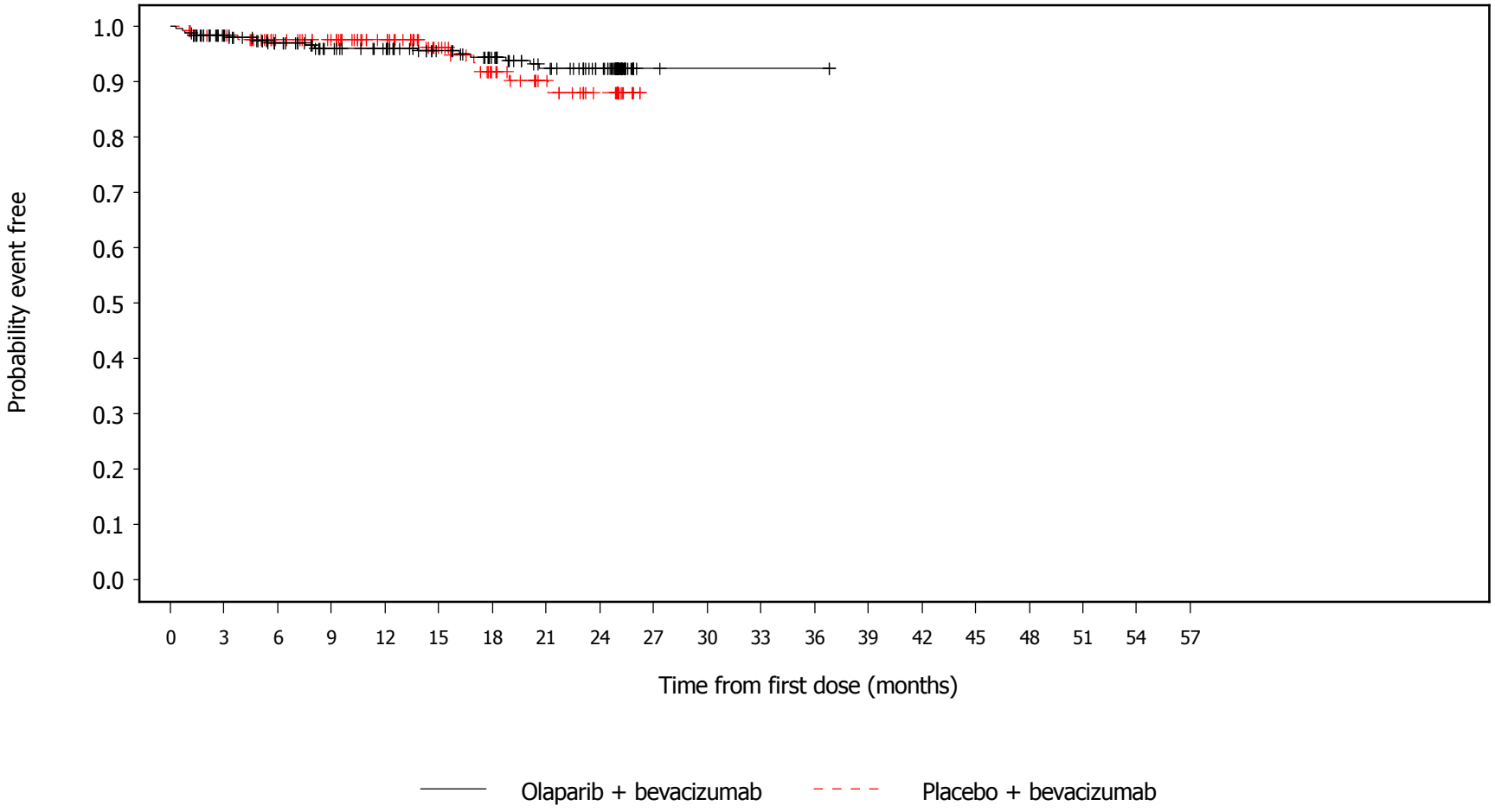
Figure 3.3.91 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE PT: Platelet count decreased
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	214	202	193	177	164	151	135	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	90	73	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

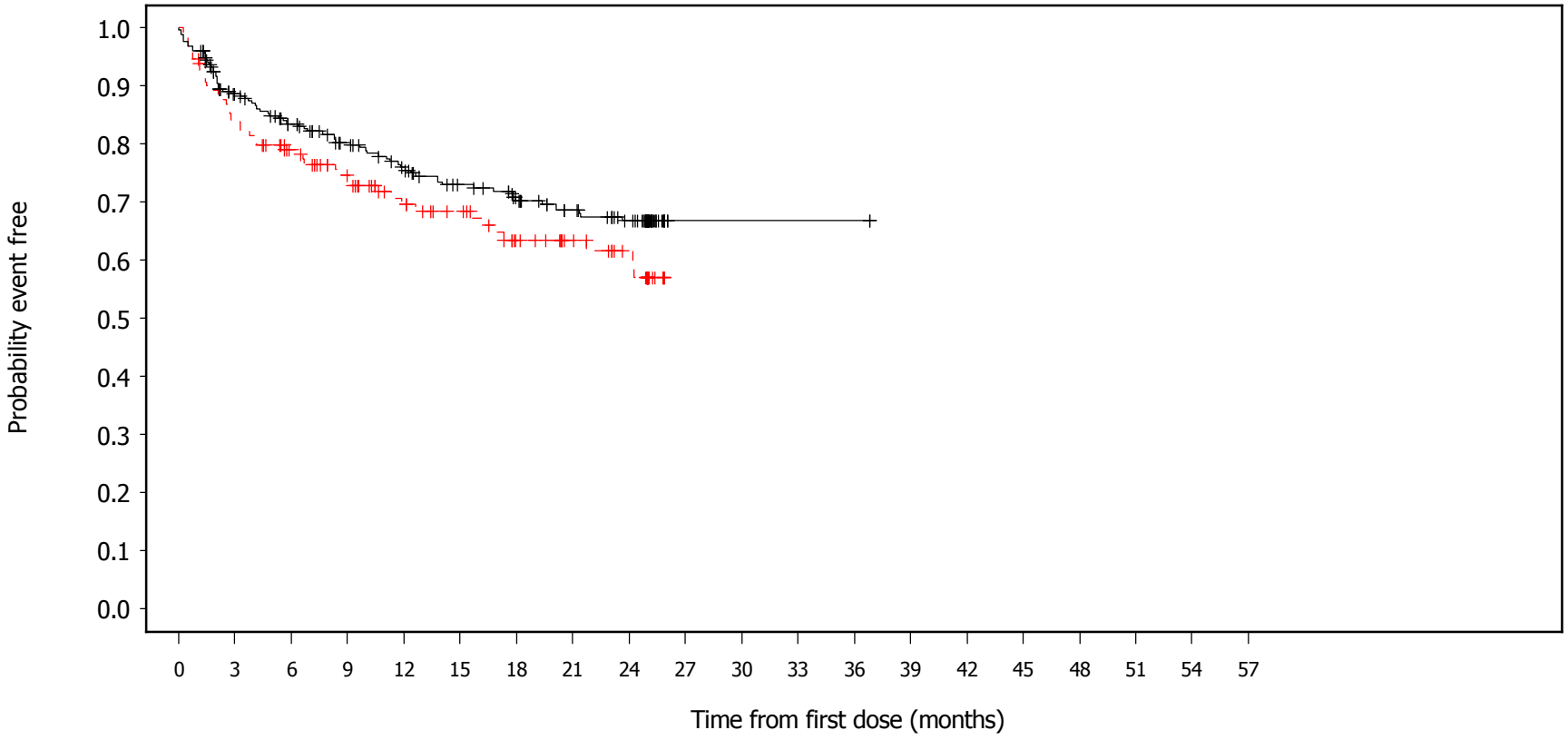
Figure 3.3.92 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE SOC: Injury, poisoning and procedural complications
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	211	195	187	170	157	142	127	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	112	103	88	70	55	43	31	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

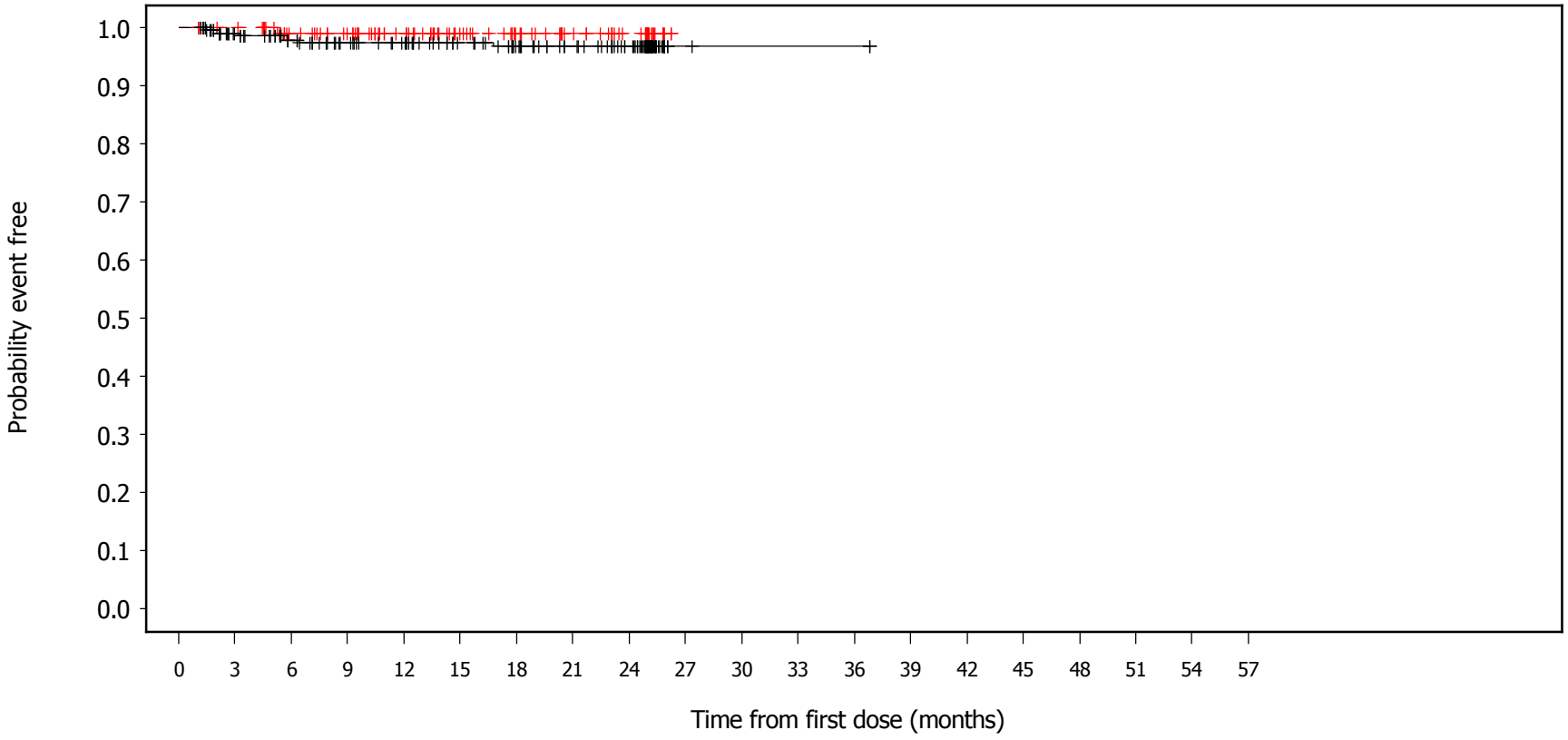
Figure 3.3.93 PAOLA1: Kaplan-Meier plot of time to first occurrence of SAE
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	208	188	170	155	141	129	117	104	1	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	108	93	80	65	58	45	36	27	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

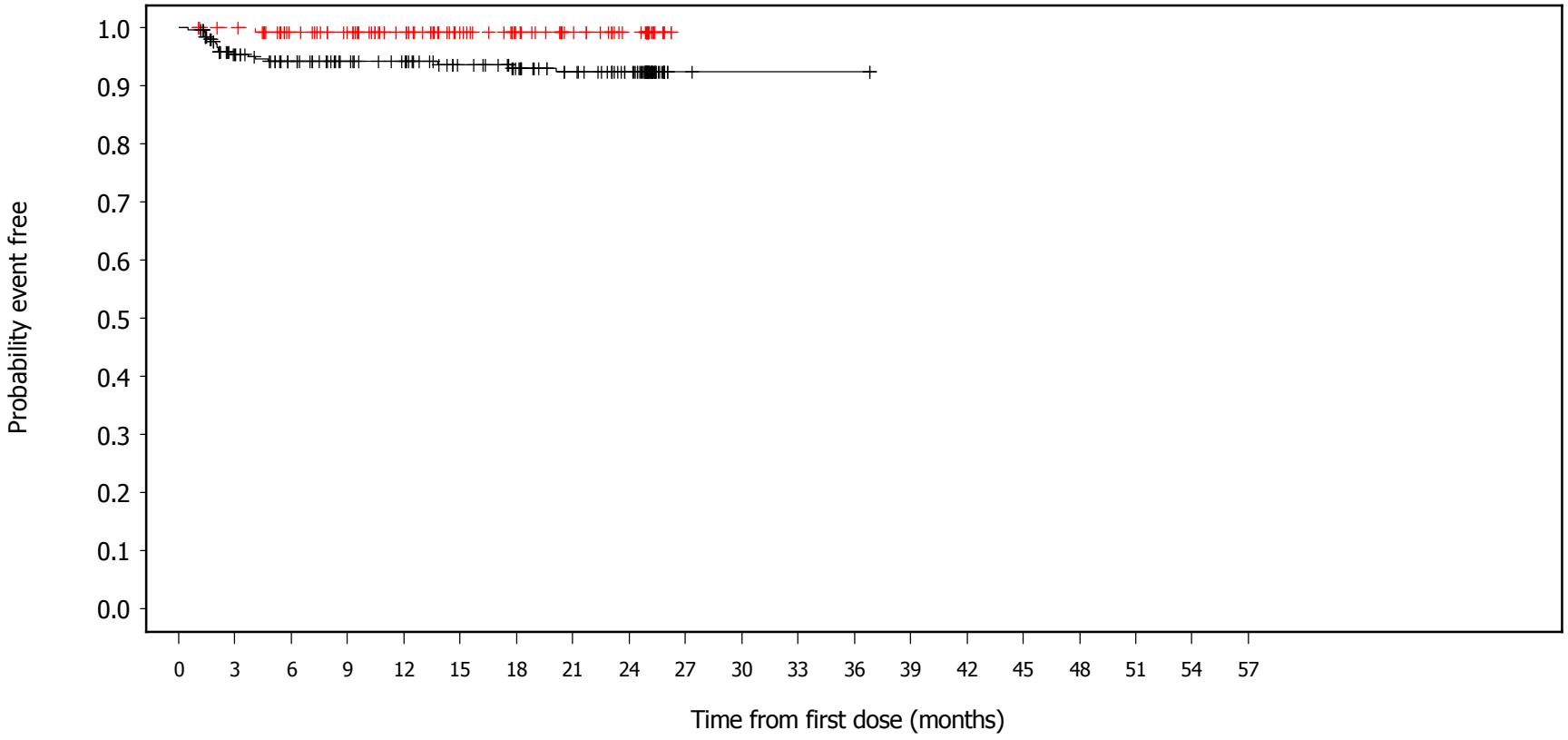
Figure 3.3.94 PAOLA1: Kaplan-Meier plot of time to first occurrence of SAE SOC: Respiratory, thoracic and mediastinal disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	215	201	192	176	163	151	135	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

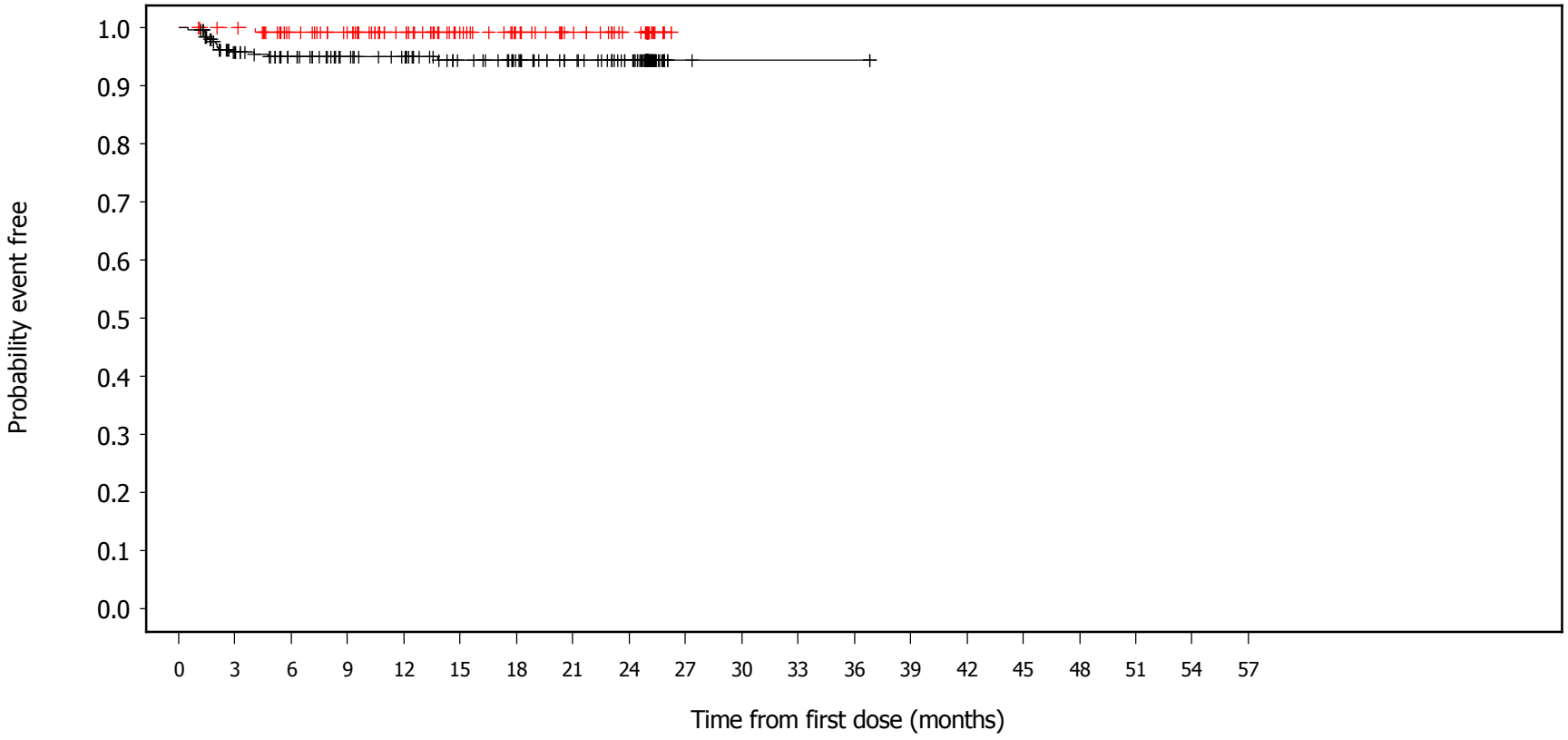
Figure 3.3.95 PAOLA1: Kaplan-Meier plot of time to first occurrence of SAE SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	223	206	192	185	169	158	145	130	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

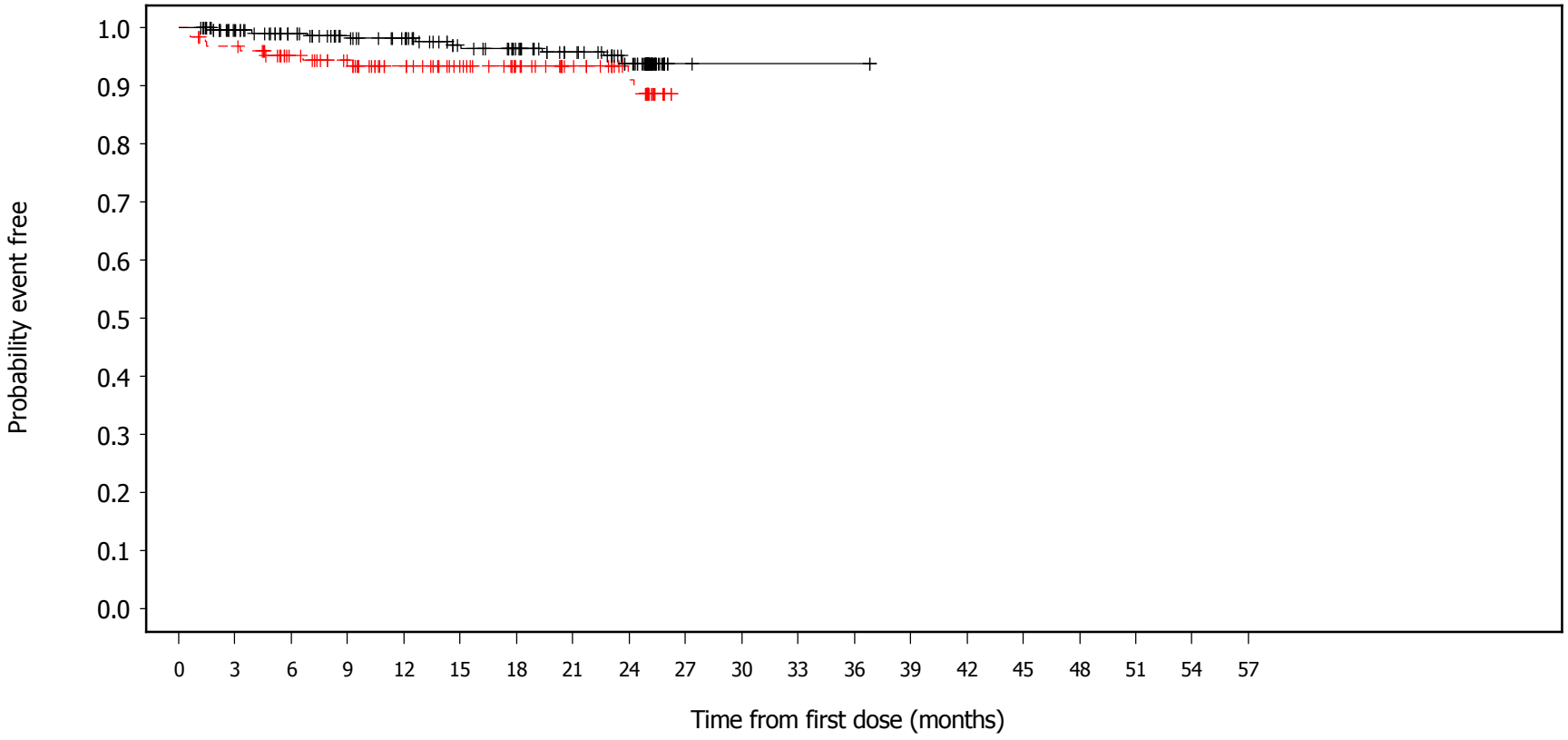
Figure 3.3.96 PAOLA1: Kaplan-Meier plot of time to first occurrence of SAE PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	224	208	194	187	171	160	147	132	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

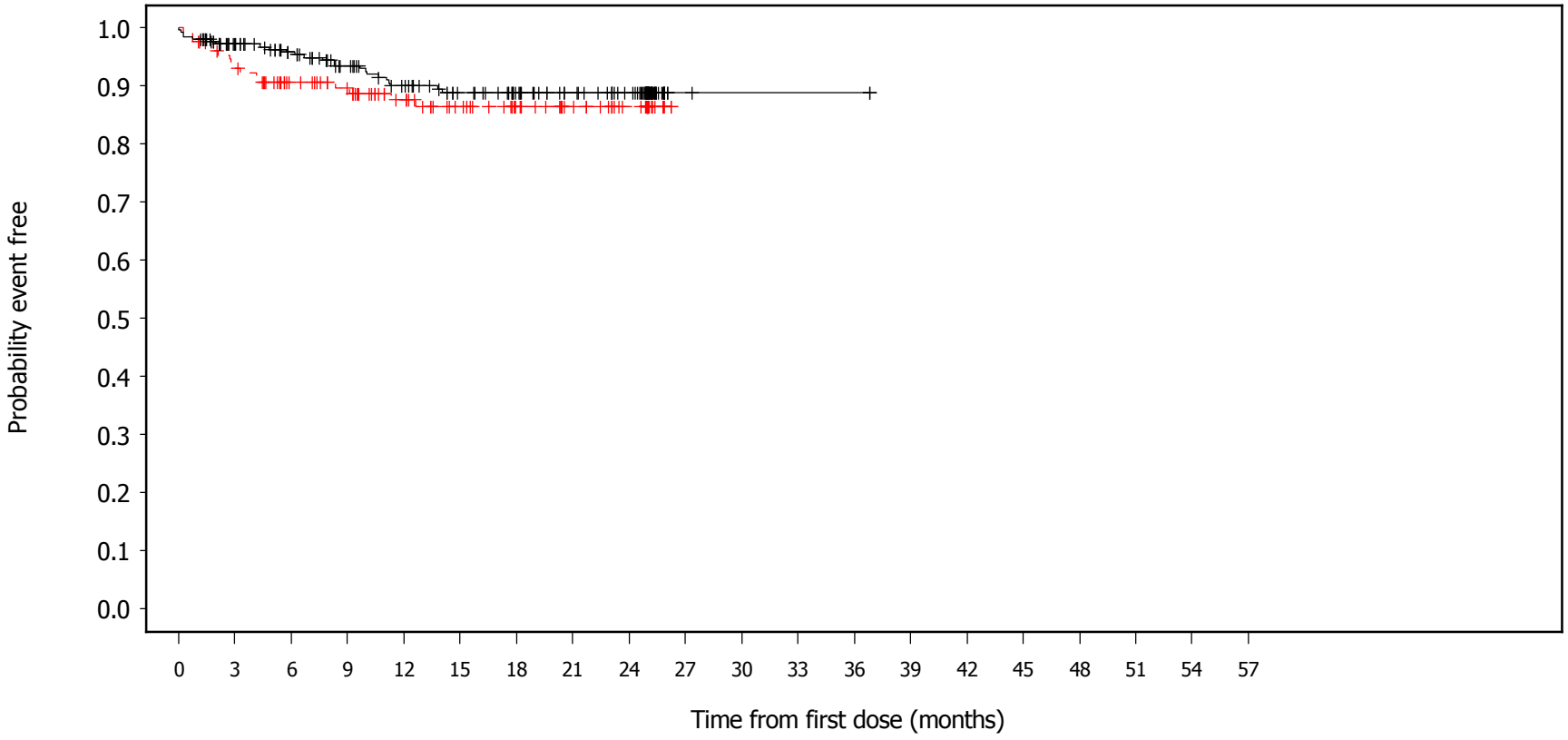
Figure 3.3.97 PAOLA1: Kaplan-Meier plot of time to first occurrence of SAE SOC: Gastrointestinal disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	233	216	202	193	175	163	149	130	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	125	111	101	86	74	62	50	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

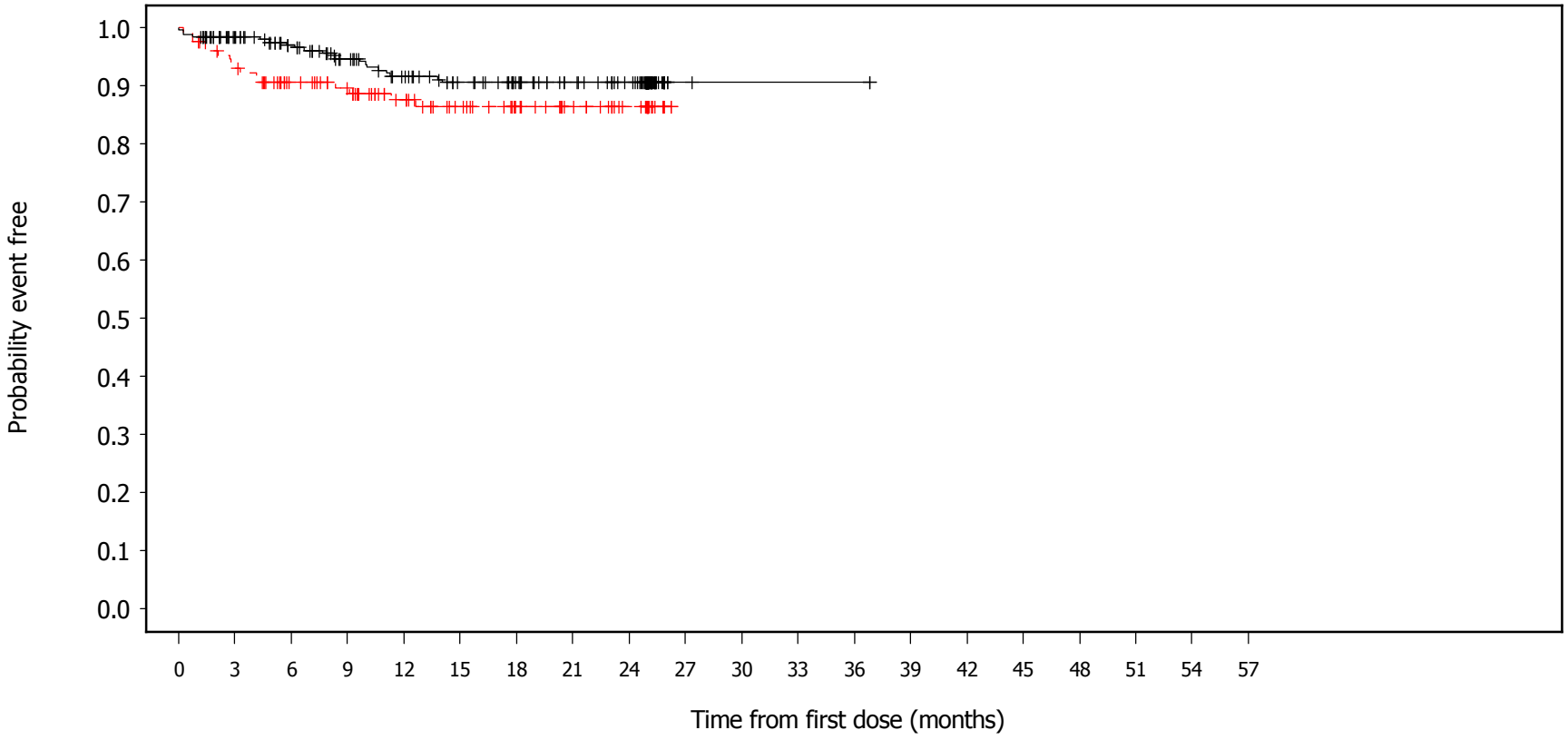
Figure 3.3.98 PAOLA1: Kaplan-Meier plot of time to first occurrence of SAE SOC: Vascular disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	227	209	191	176	162	149	137	125	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	119	103	94	78	66	54	44	33	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

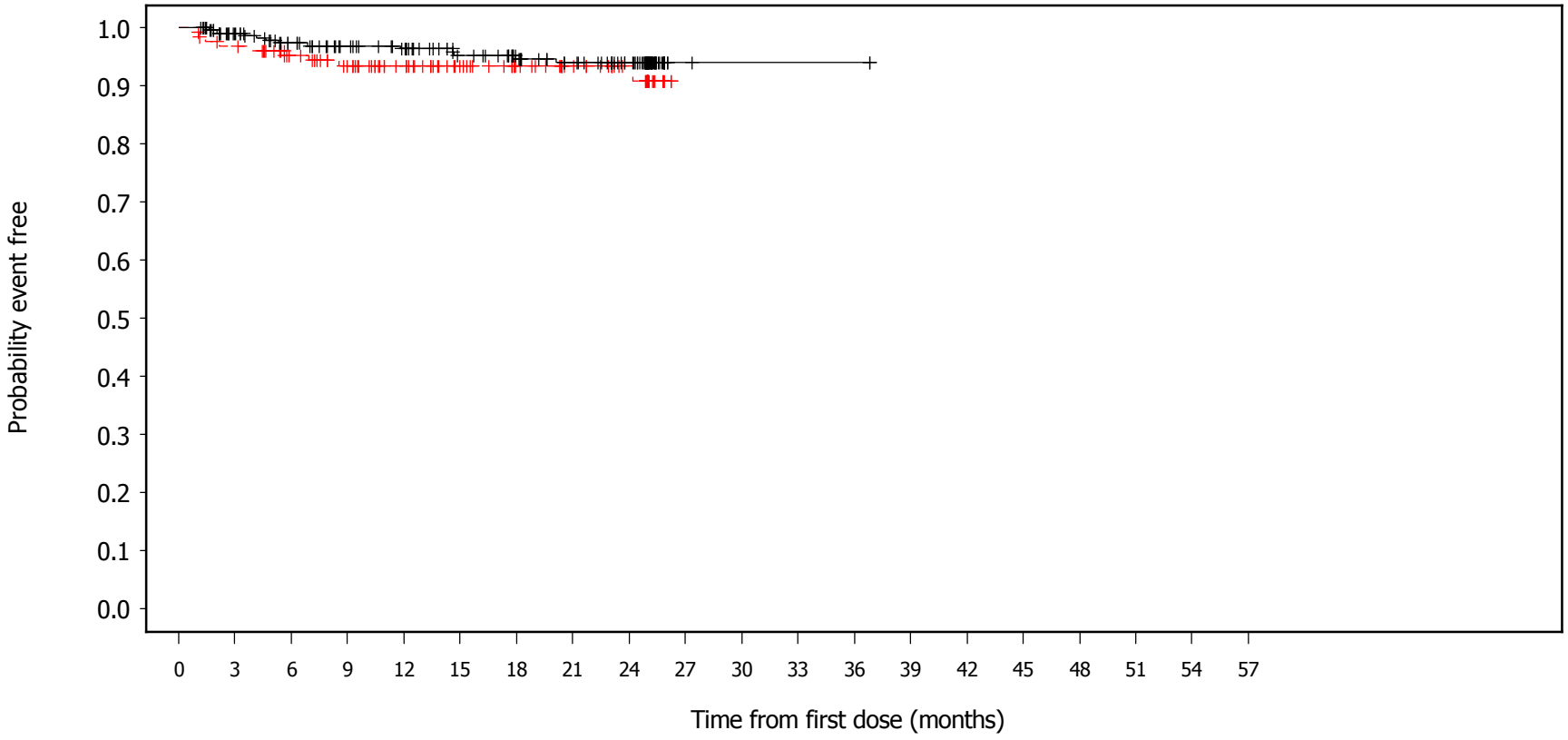
Figure 3.3.99 PAOLA1: Kaplan-Meier plot of time to first occurrence of SAE PT: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	211	192	177	163	150	138	126	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	119	103	94	78	66	54	44	33	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

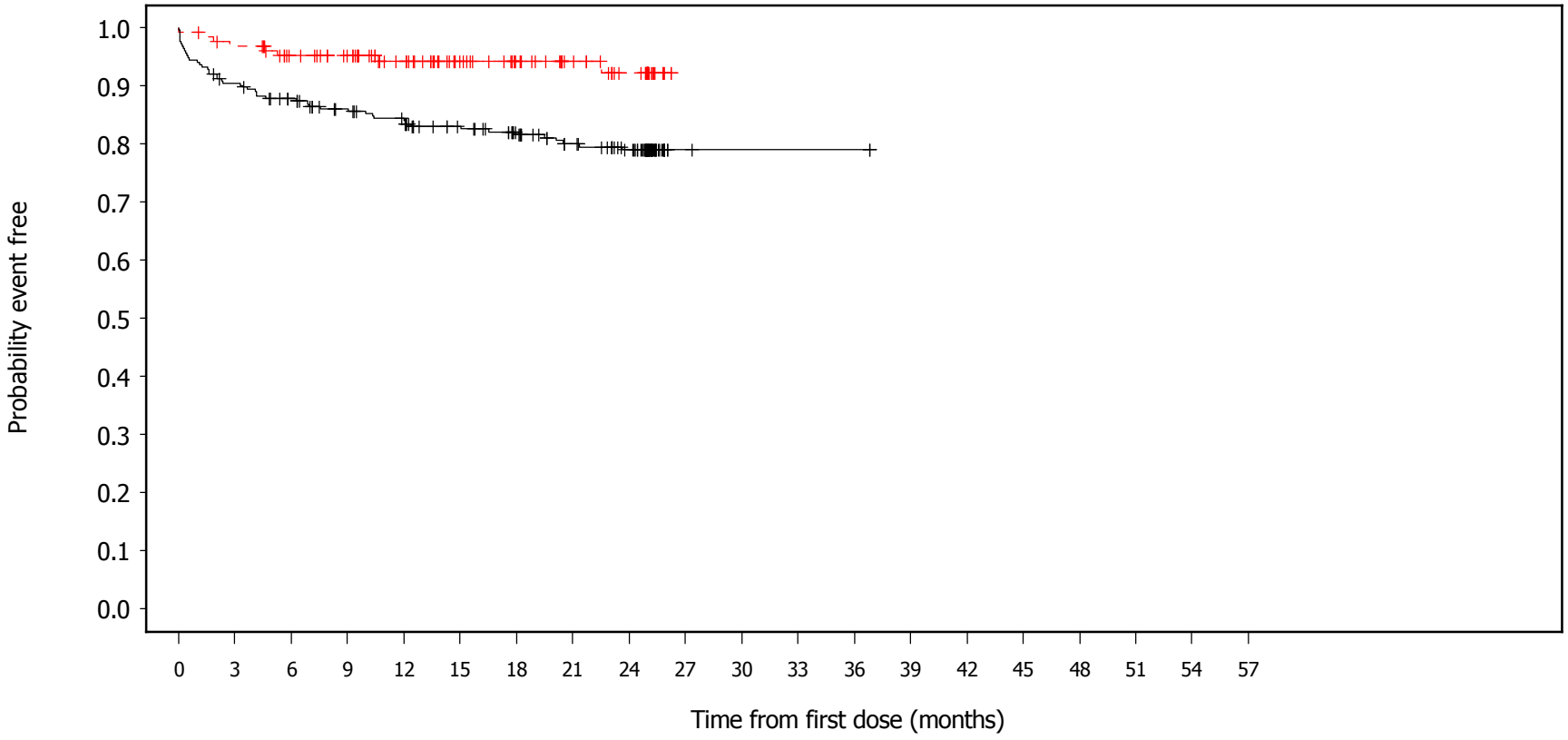
Figure 3.3.100 PAOLA1: Kaplan-Meier plot of time to first occurrence of SAE SOC: Infections and infestations
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	214	200	191	173	160	149	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	124	110	99	85	70	59	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

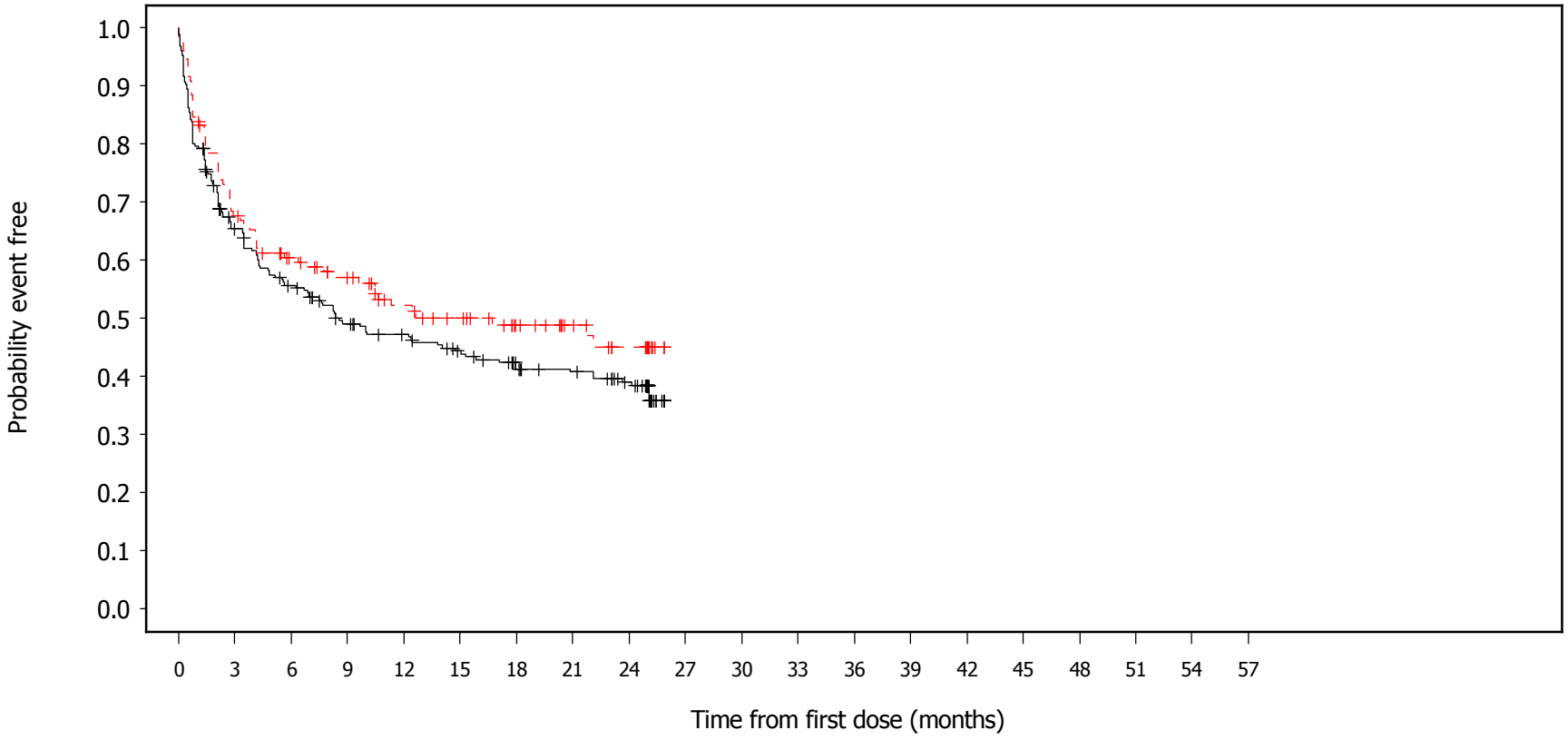
Figure 3.3.101 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE leading to discontinuation of treatment
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	229	215	202	193	179	165	151	136	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	125	114	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

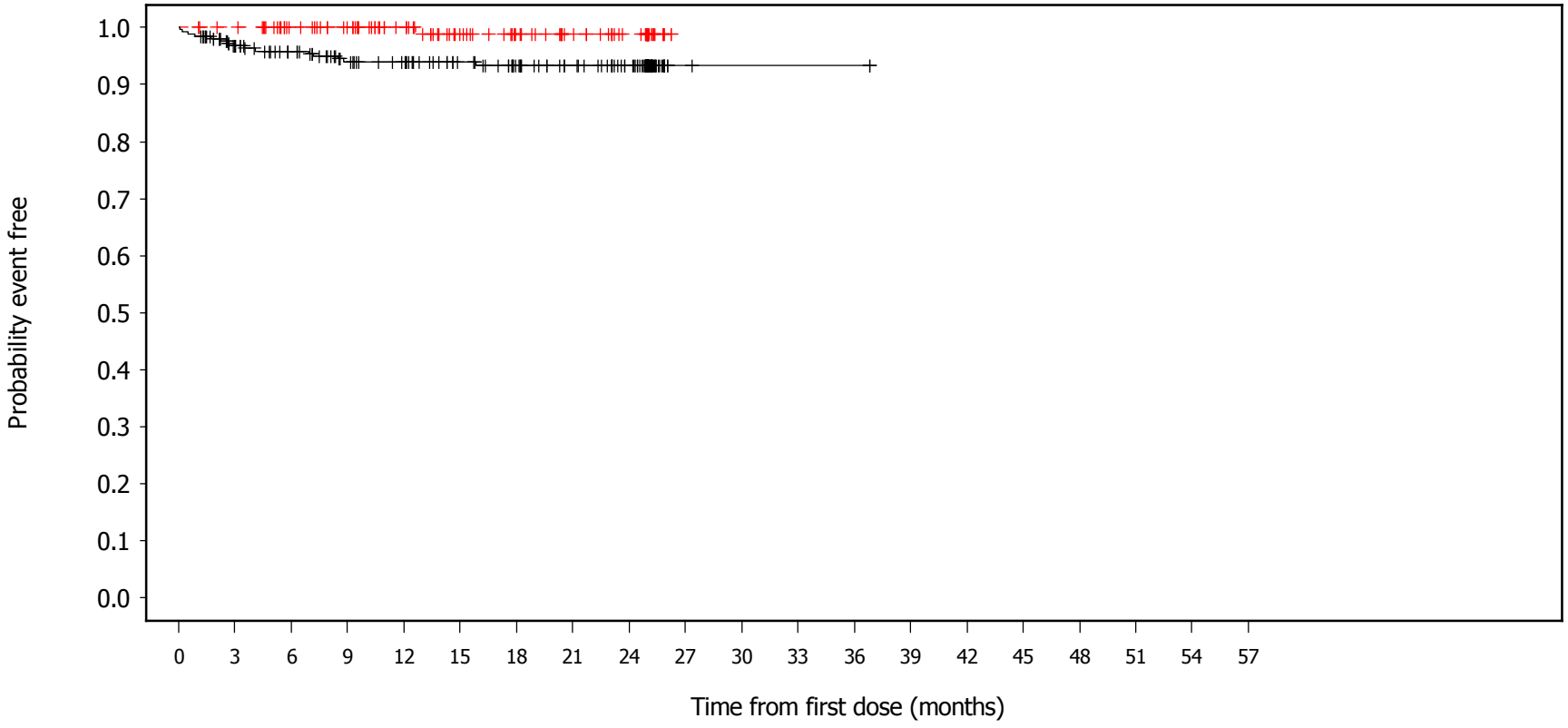
Figure 3.3.102 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE max CTCAE grade>=3
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	156	130	109	100	90	78	73	62	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	87	72	62	51	45	35	28	20	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

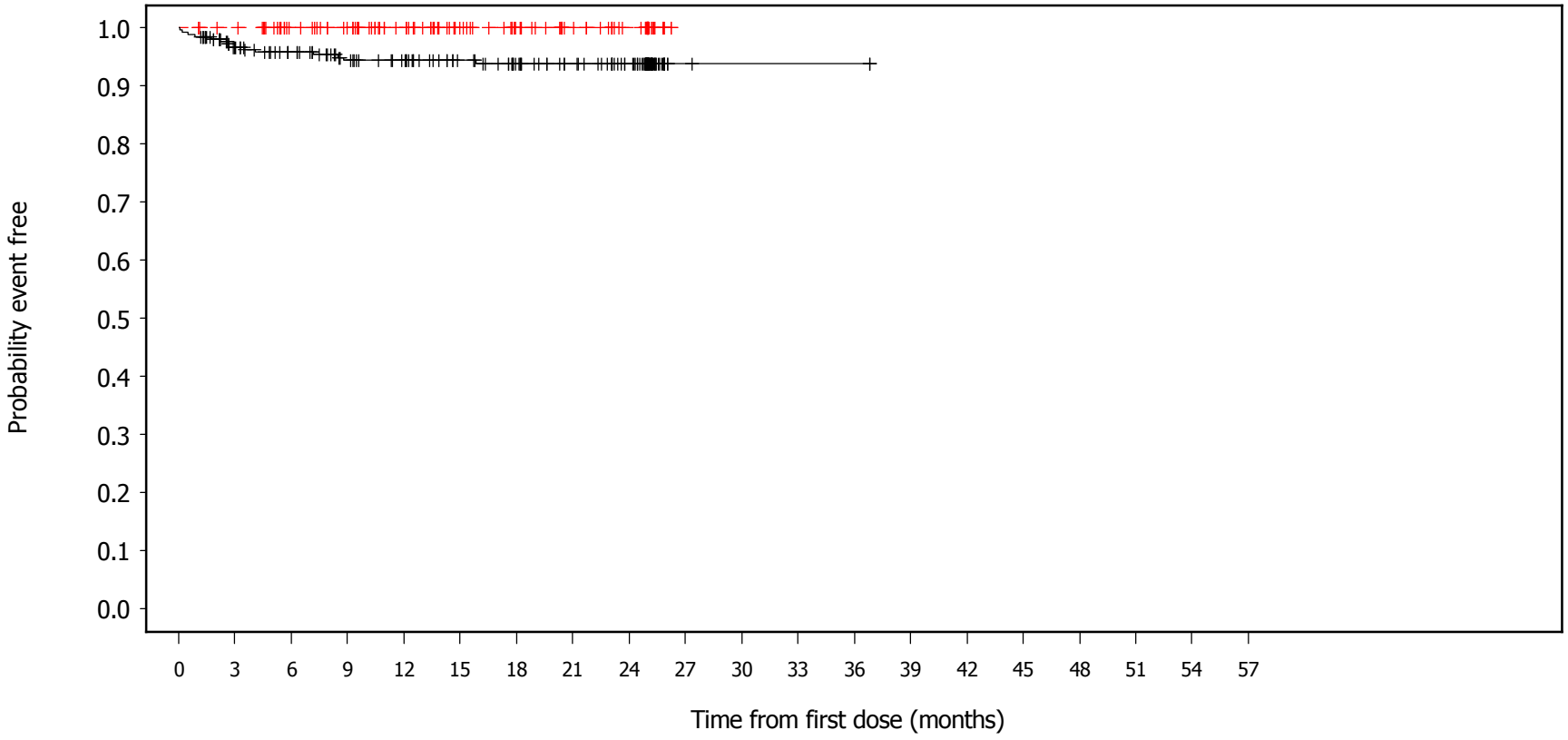
Figure 3.3.103 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 SOC: General disorders and administration site conditions
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	227	211	193	185	169	156	144	128	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

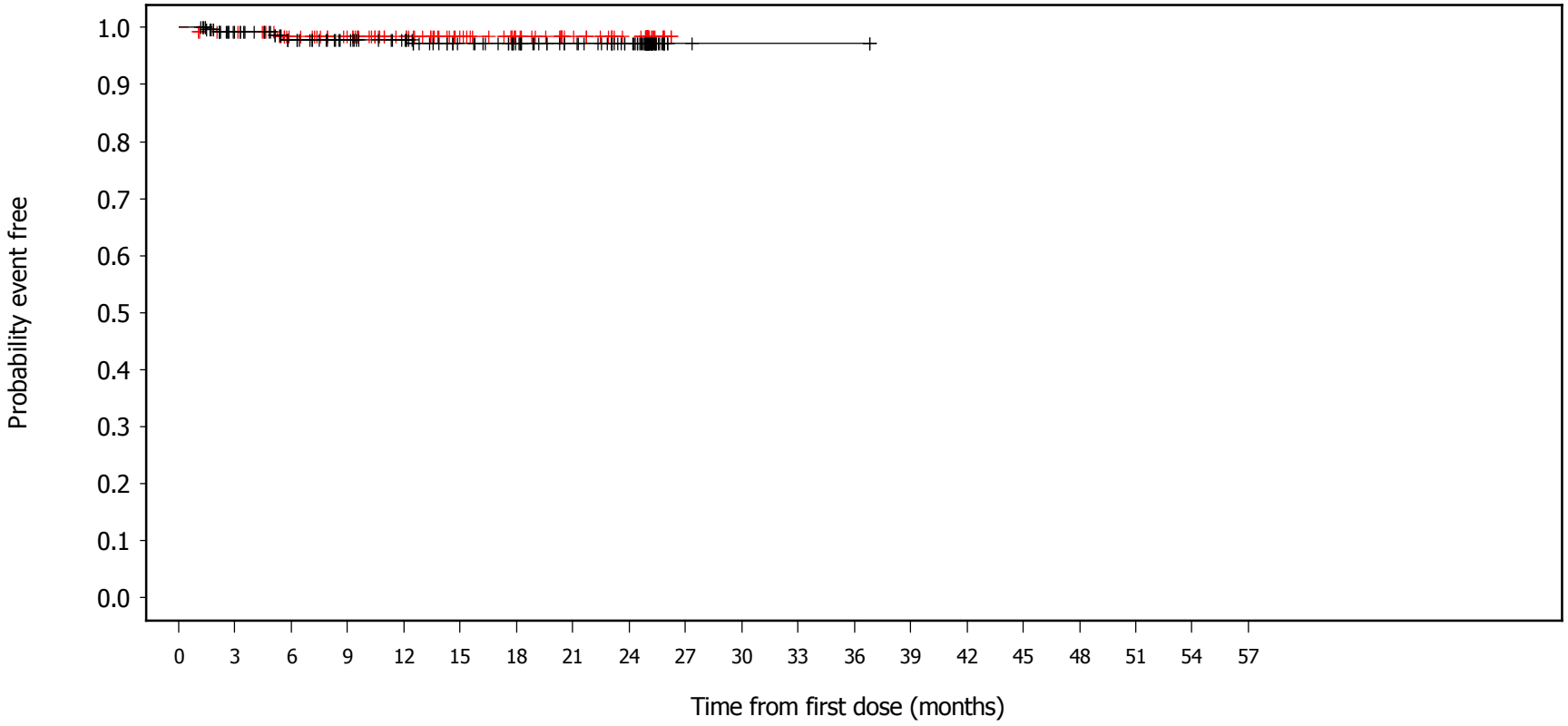
Figure 3.3.104 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 PT: Fatigue
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	227	211	194	185	169	156	144	128	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

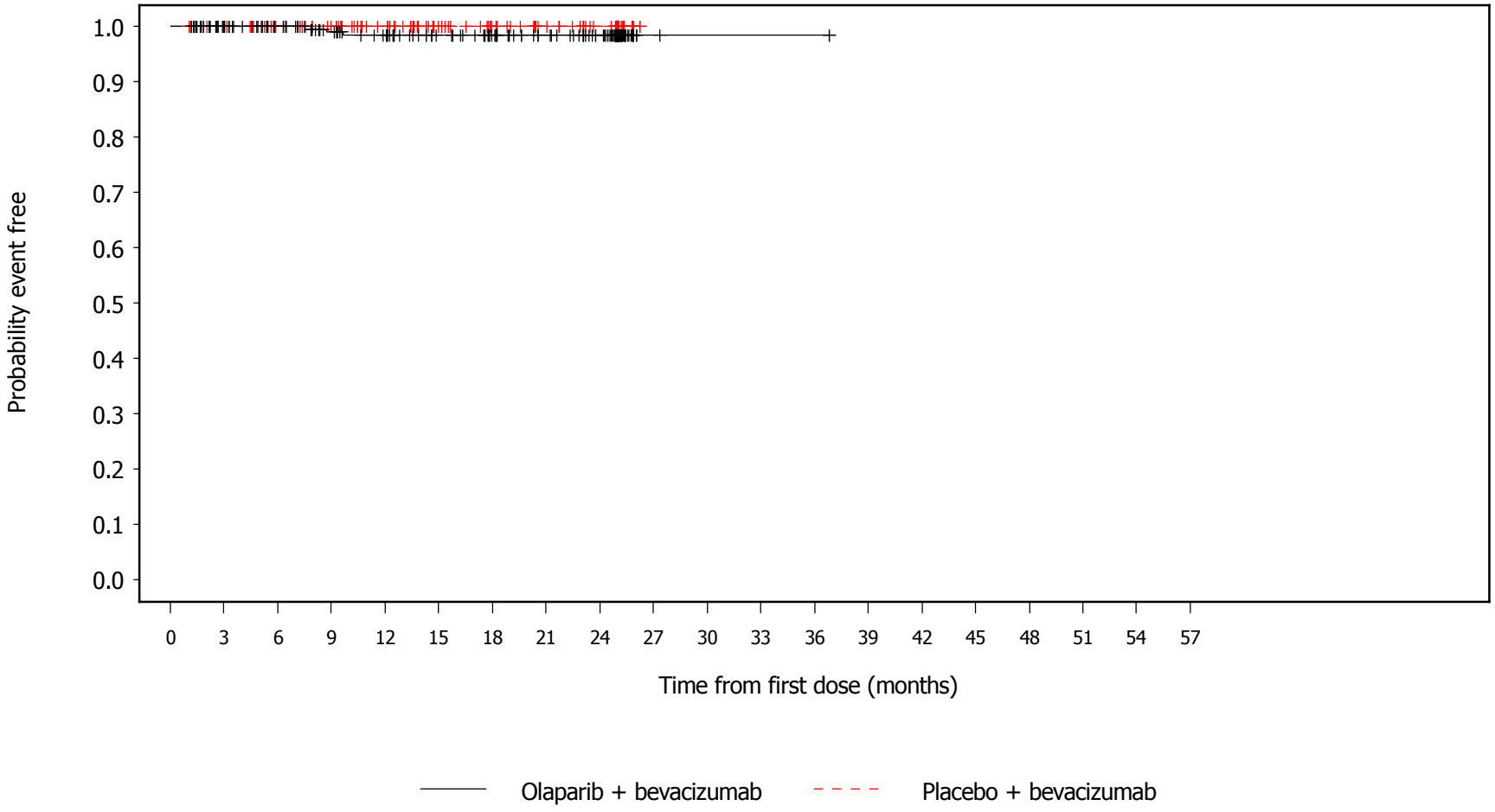
Figure 3.3.105 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 SOC: Respiratory, thoracic and mediastinal disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	214	201	192	175	163	150	134	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	114	105	90	73	61	49	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

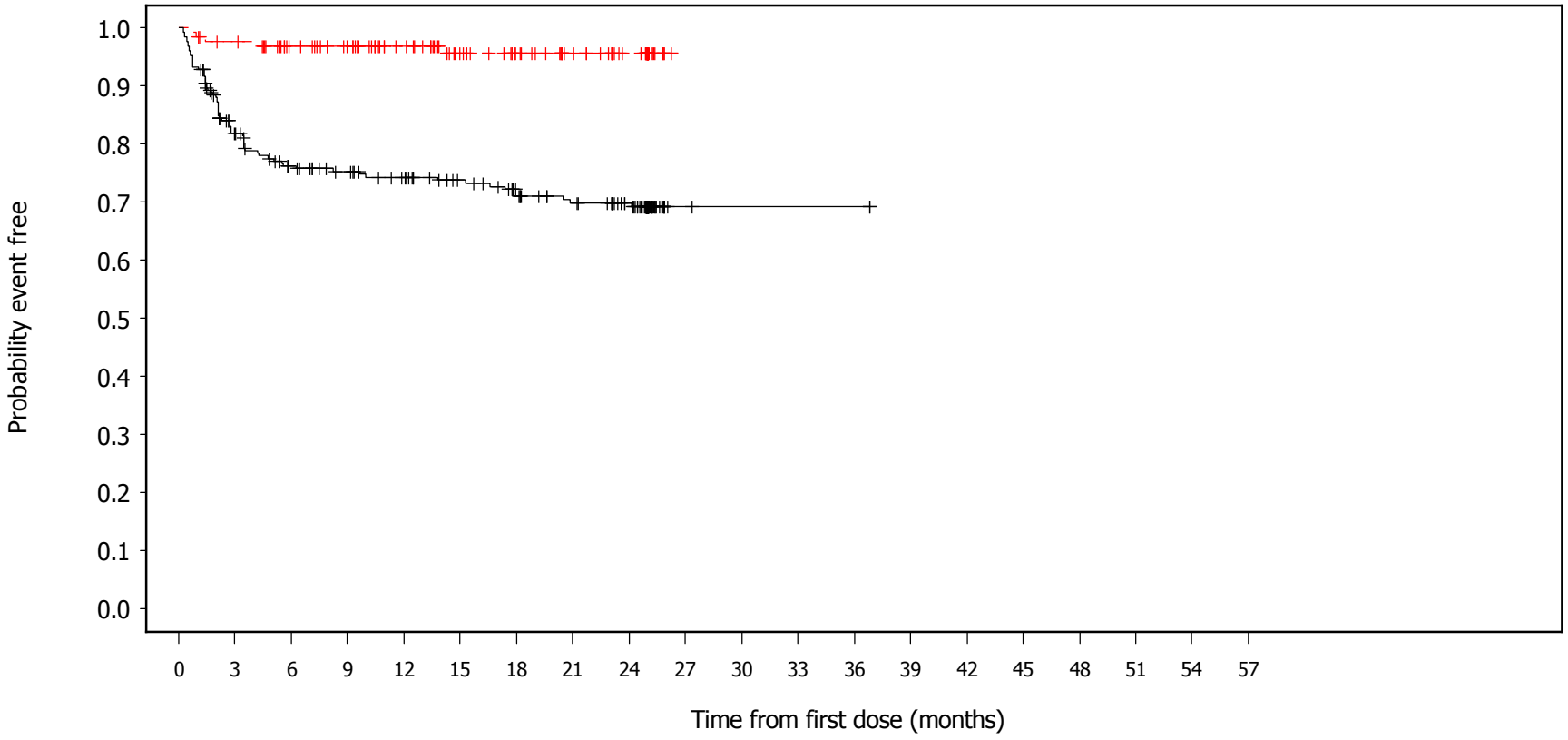
Figure 3.3.106 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 SOC: Renal and urinary disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	234	218	203	194	178	165	152	136	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

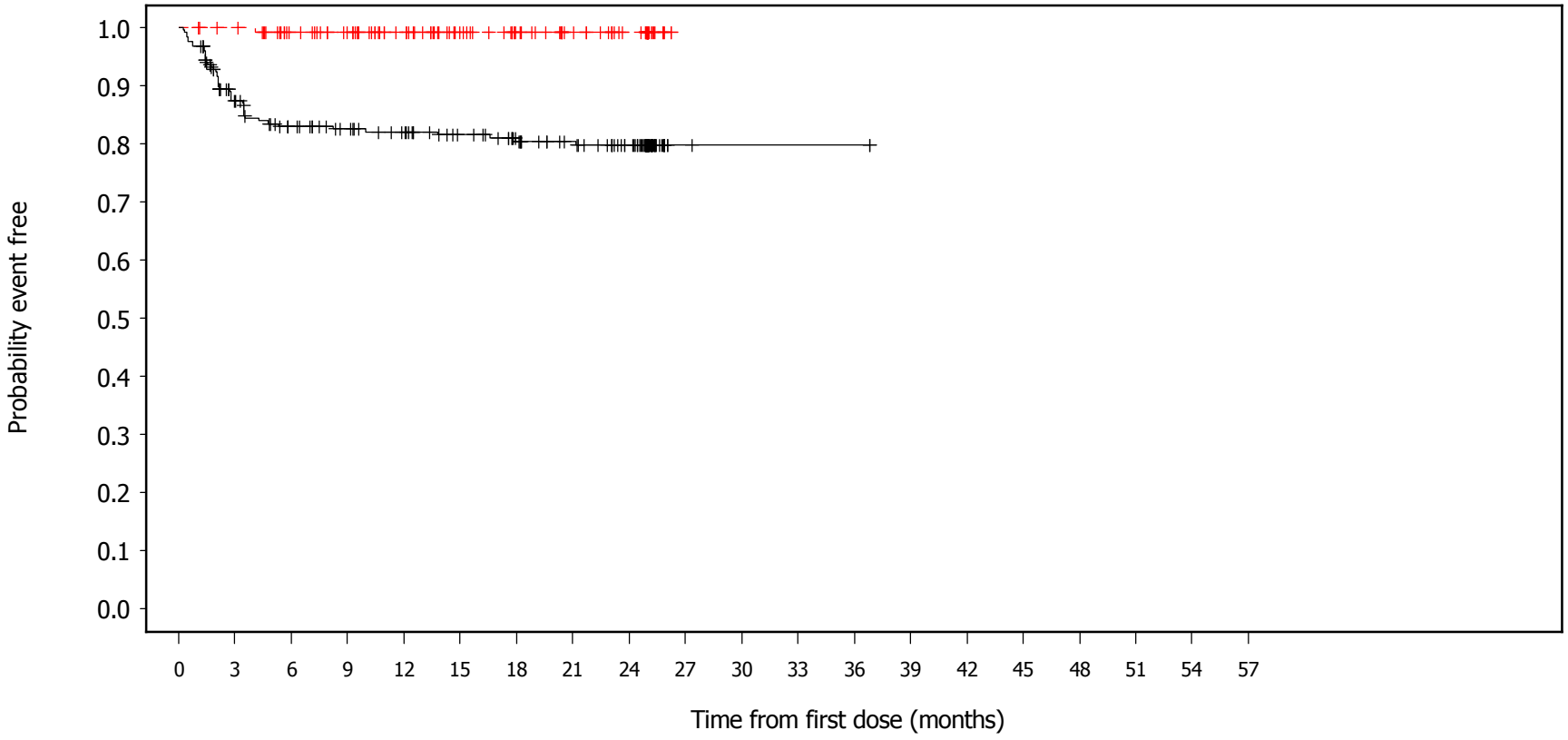
Figure 3.3.107 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	192	169	159	150	138	126	117	105	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	125	112	103	88	72	61	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

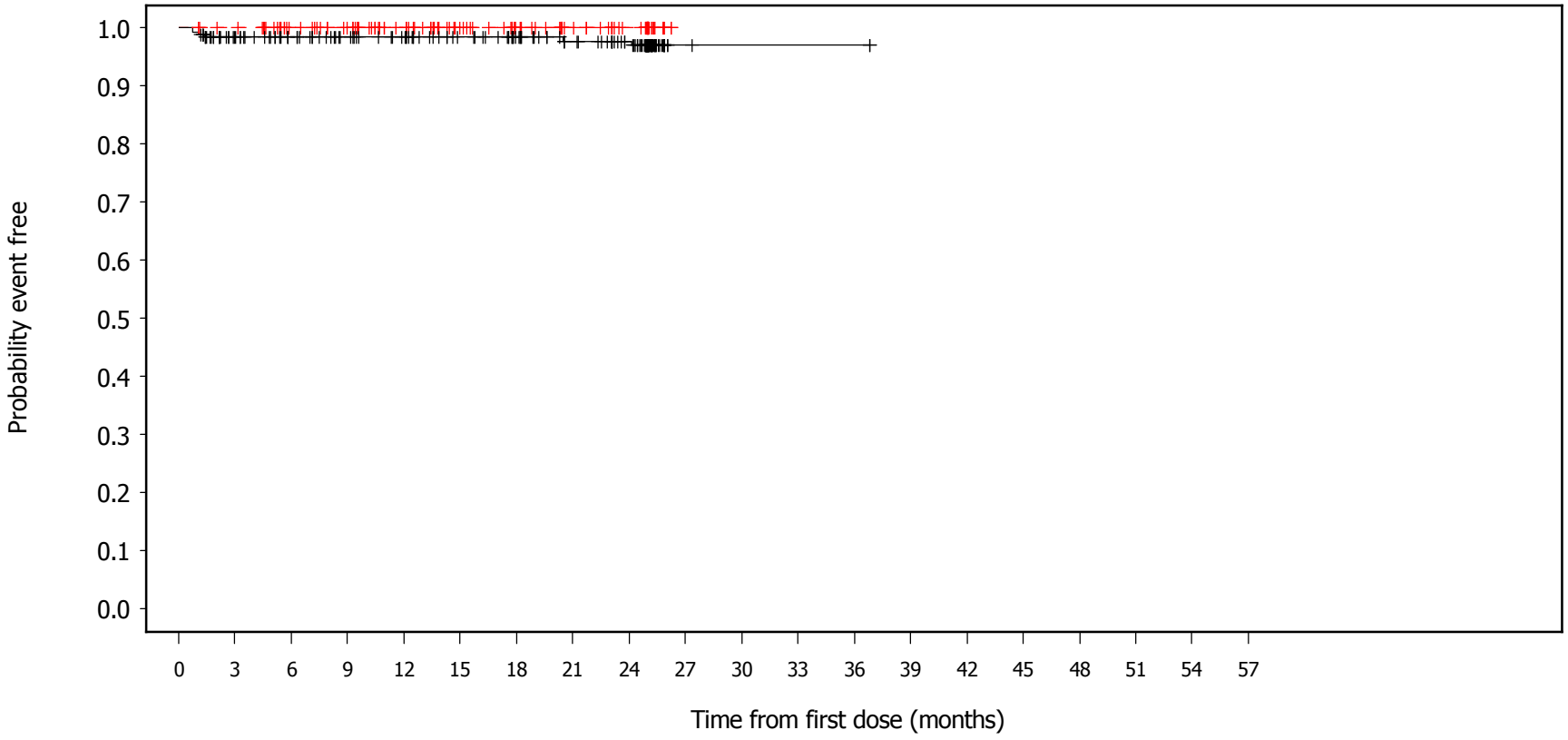
Figure 3.3.108 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	205	184	174	166	154	142	132	117	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

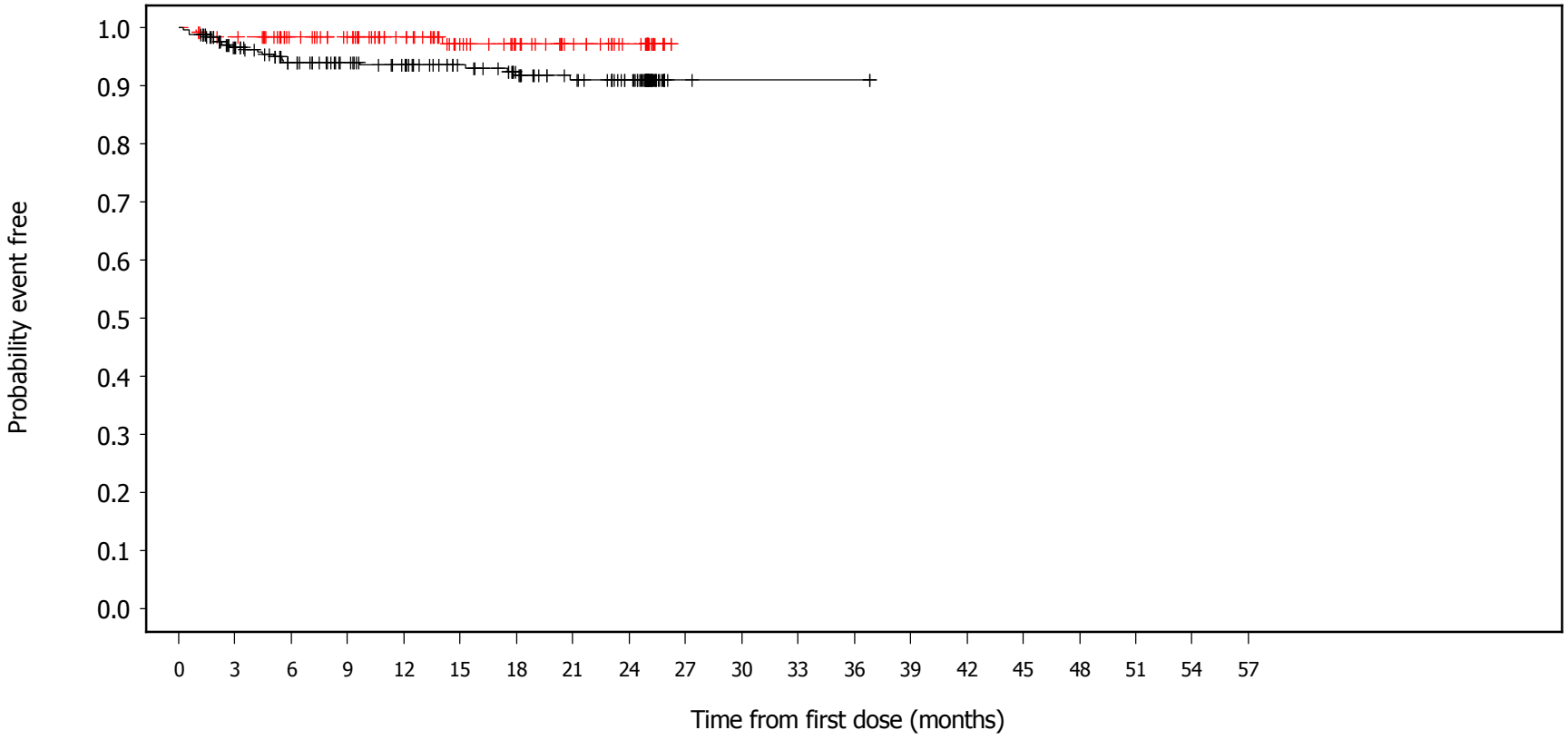
Figure 3.3.109 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 PT: Leukopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	231	215	202	193	178	165	151	136	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

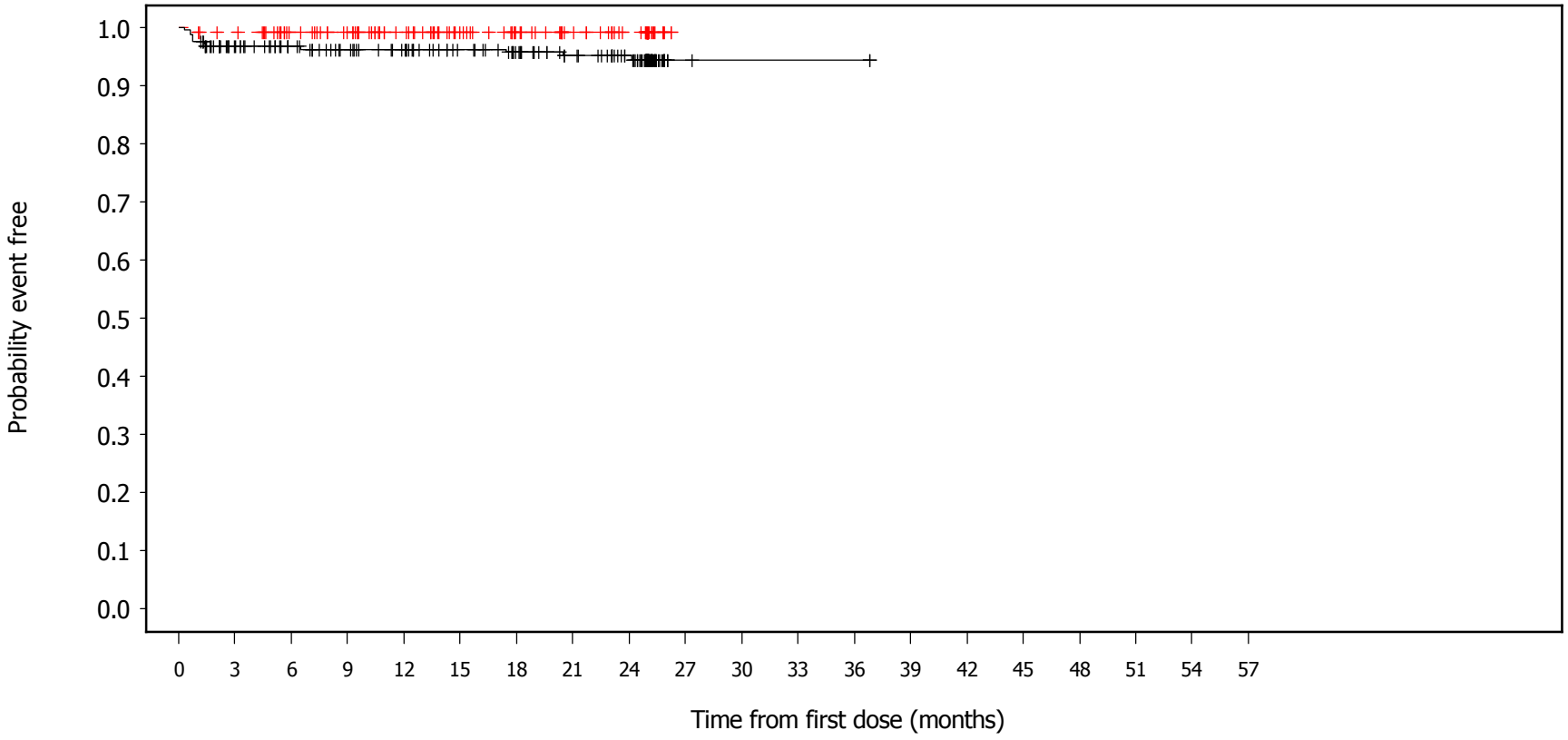
Figure 3.3.110 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 PT: Lymphopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	226	205	191	181	165	151	140	126	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	104	89	72	61	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

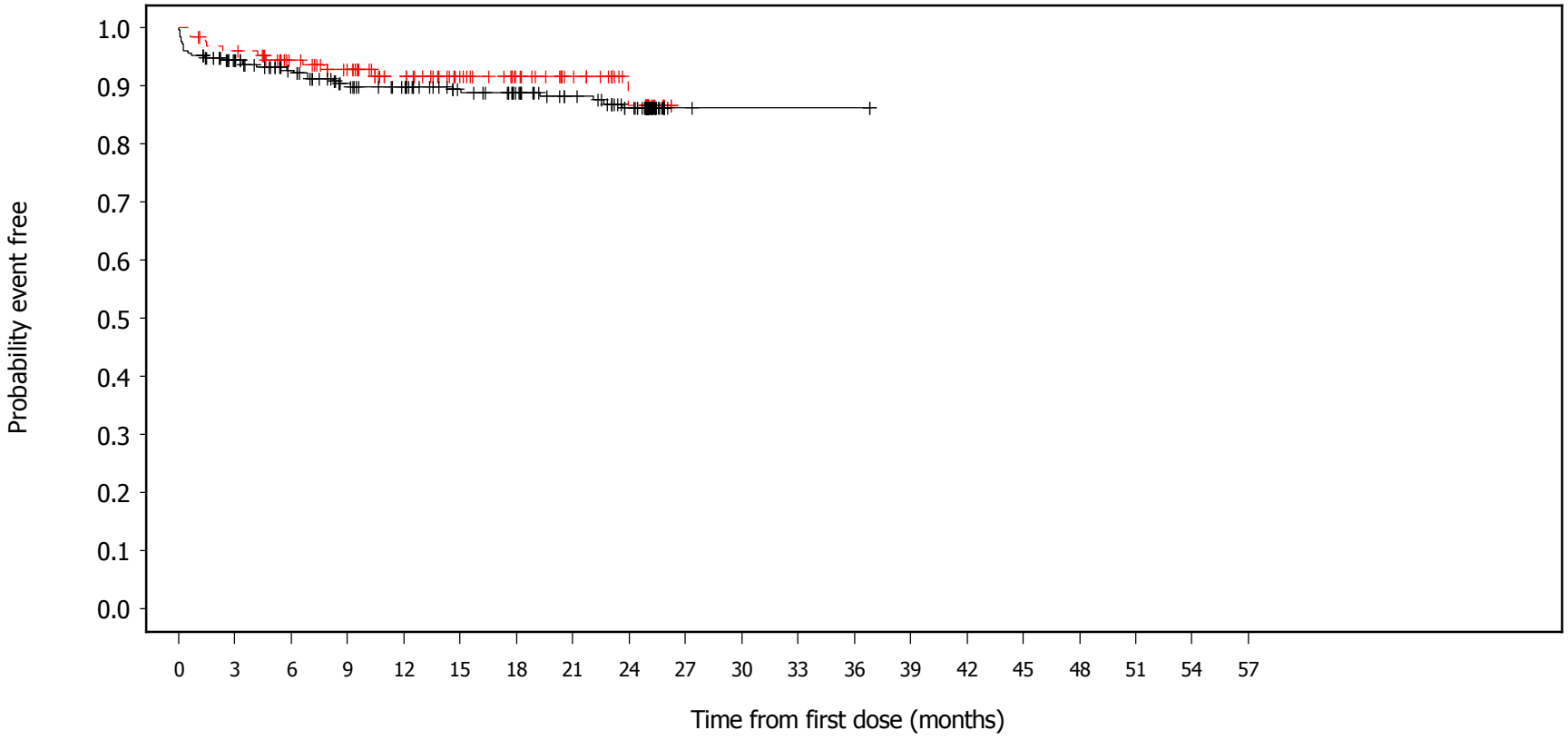
Figure 3.3.111 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 PT: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	228	212	200	191	176	164	150	135	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	114	105	90	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

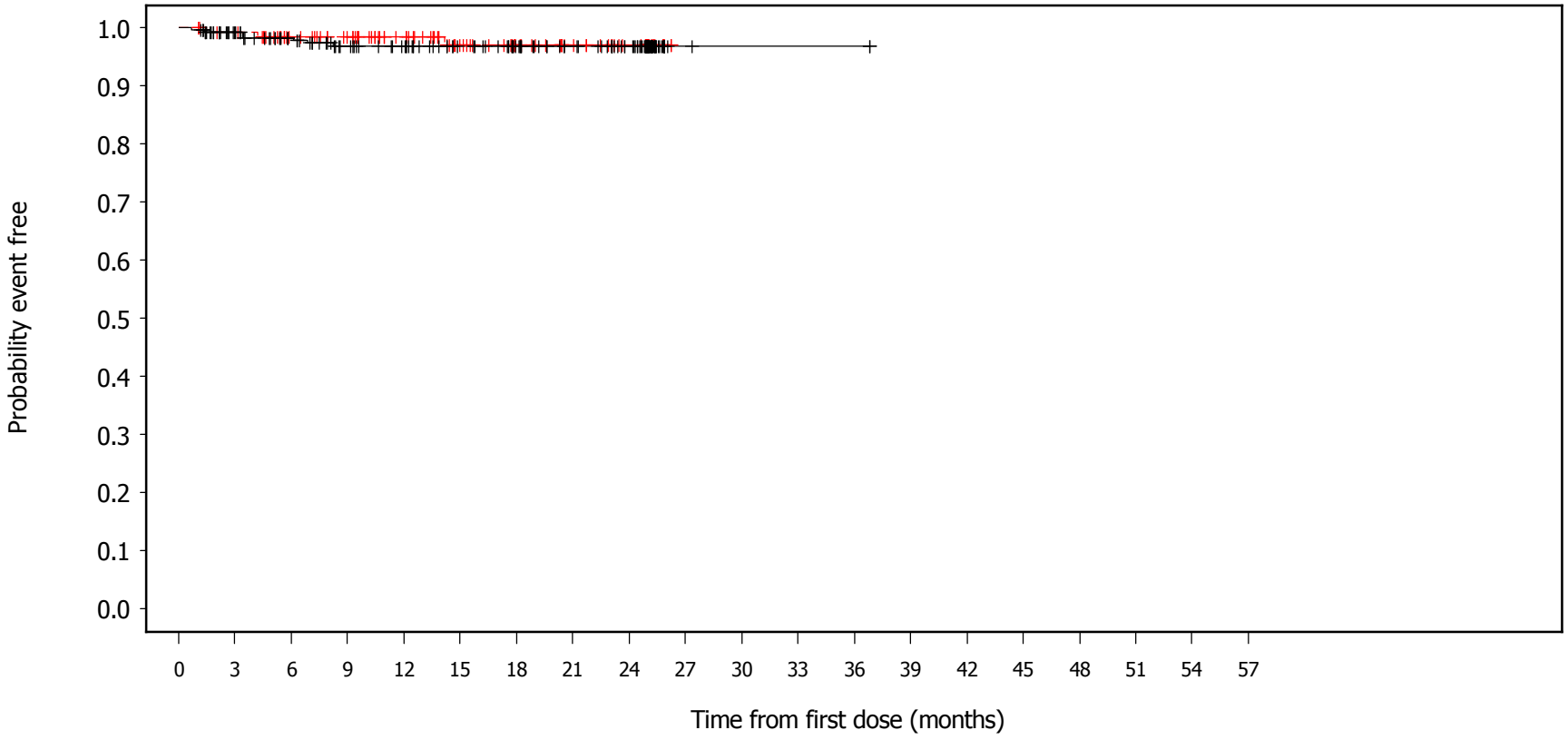
Figure 3.3.112 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 SOC: Gastrointestinal disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	224	206	188	178	162	150	137	121	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	124	110	99	84	70	59	48	34	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

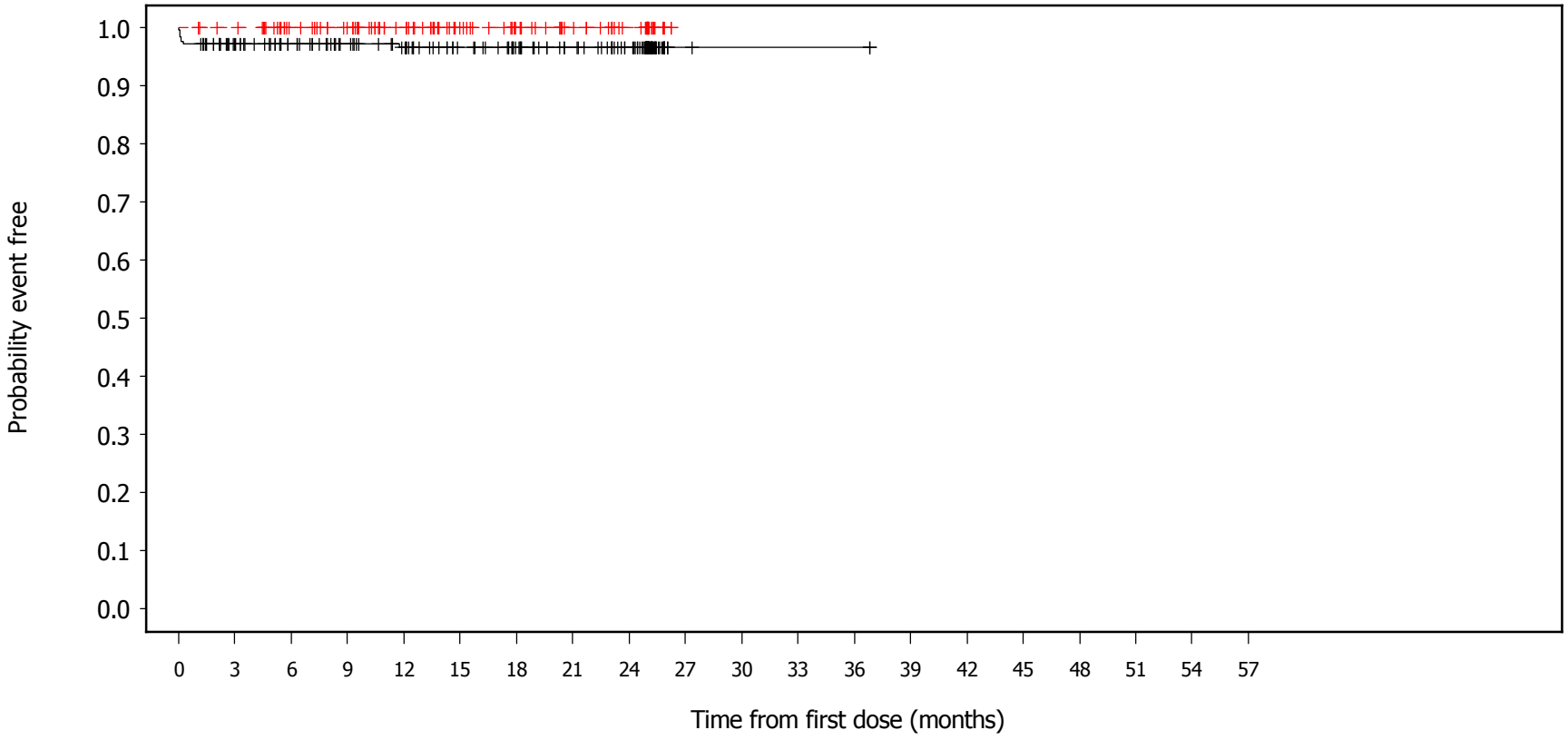
Figure 3.3.113 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 PT: Diarrhoea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	214	197	188	172	159	146	131	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	113	104	89	72	60	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

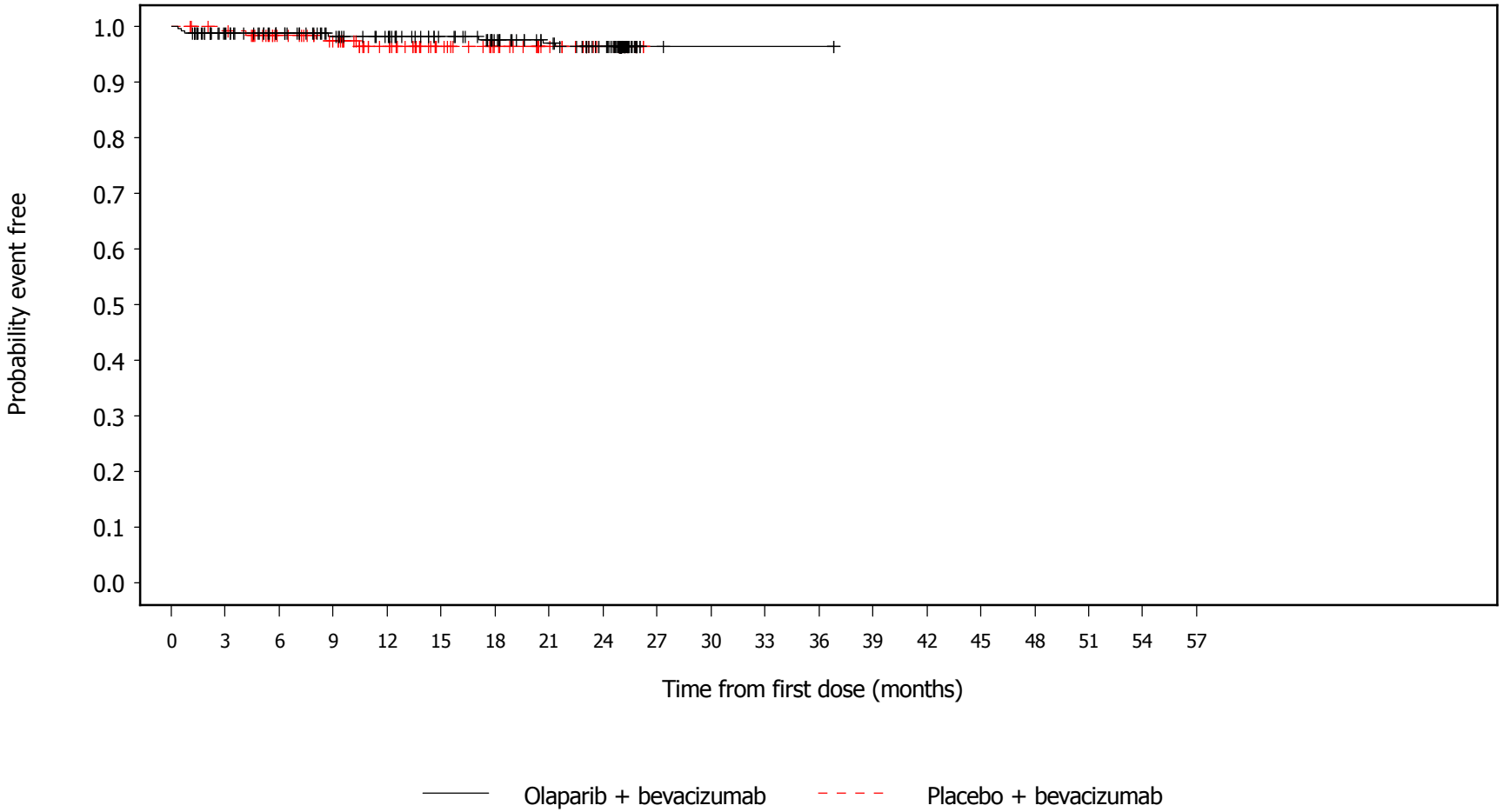
Figure 3.3.114 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 PT: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	230	215	201	191	175	162	149	133	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	128	115	106	91	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

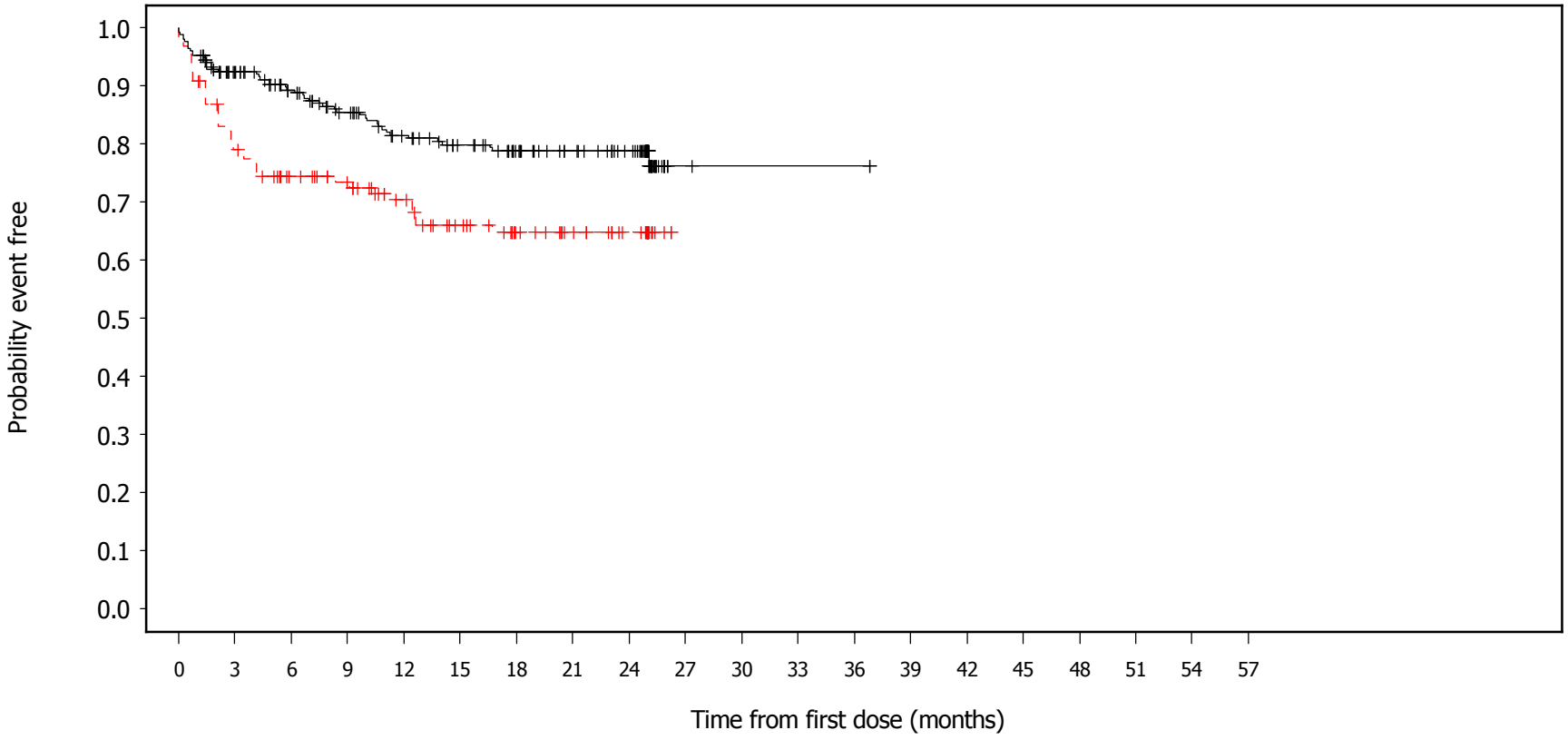
Figure 3.3.115 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 SOC: Nervous system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	233	217	202	193	177	163	150	134	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	113	103	87	71	60	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

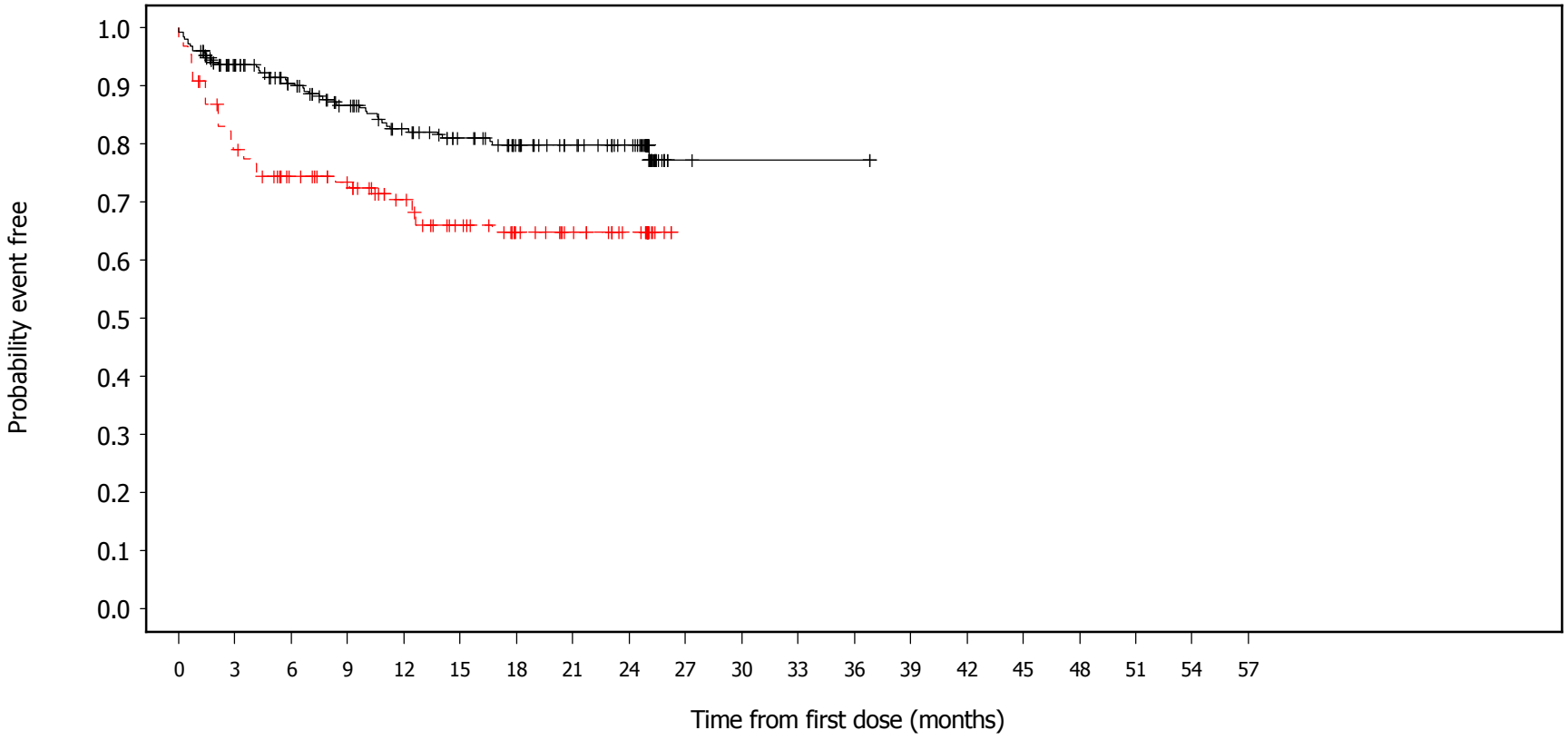
Figure 3.3.116 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 SOC: Vascular disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	216	194	175	158	145	131	120	108	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	101	87	79	66	54	42	35	26	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

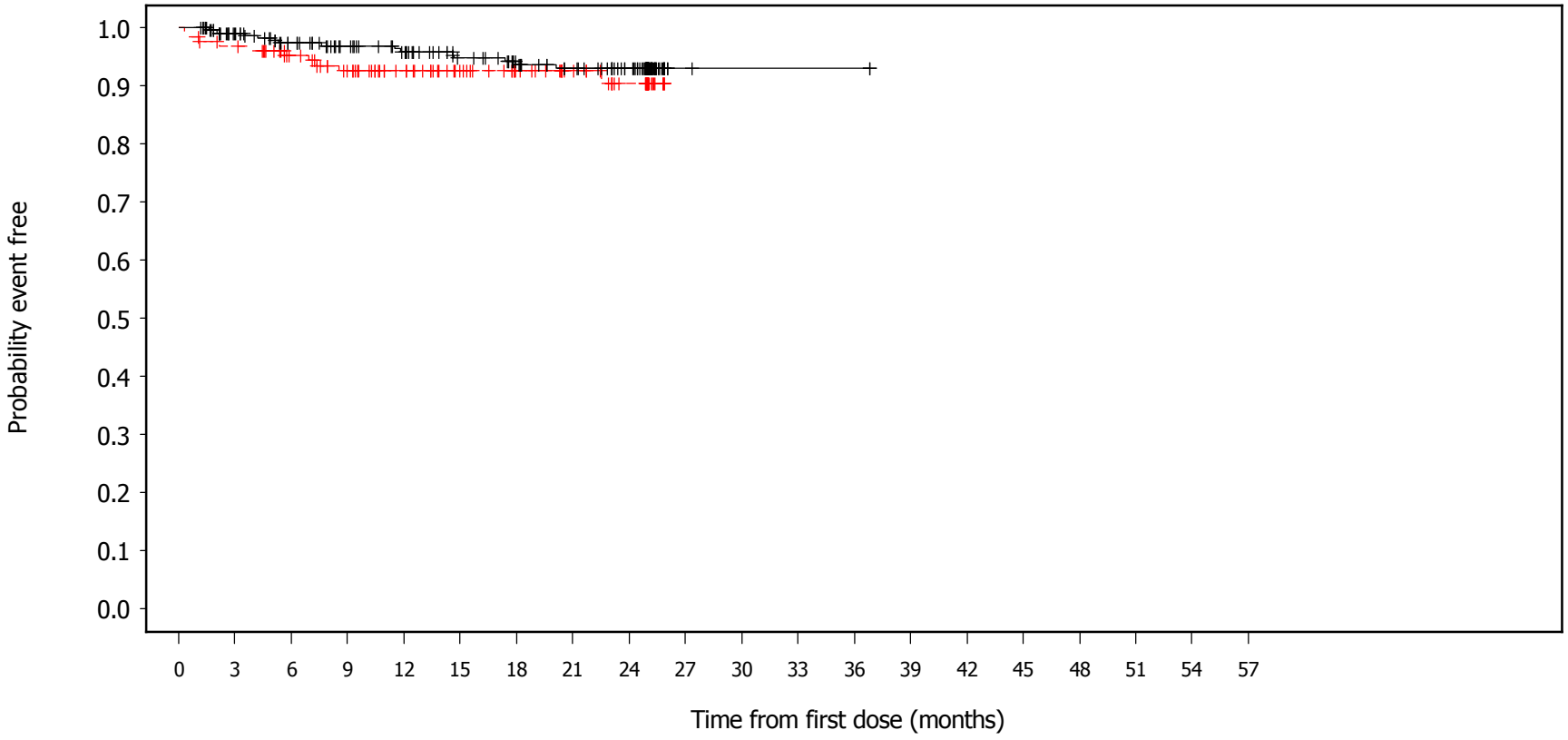
Figure 3.3.117 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 PT: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	218	196	176	159	146	132	121	109	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	101	87	79	66	54	42	35	26	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

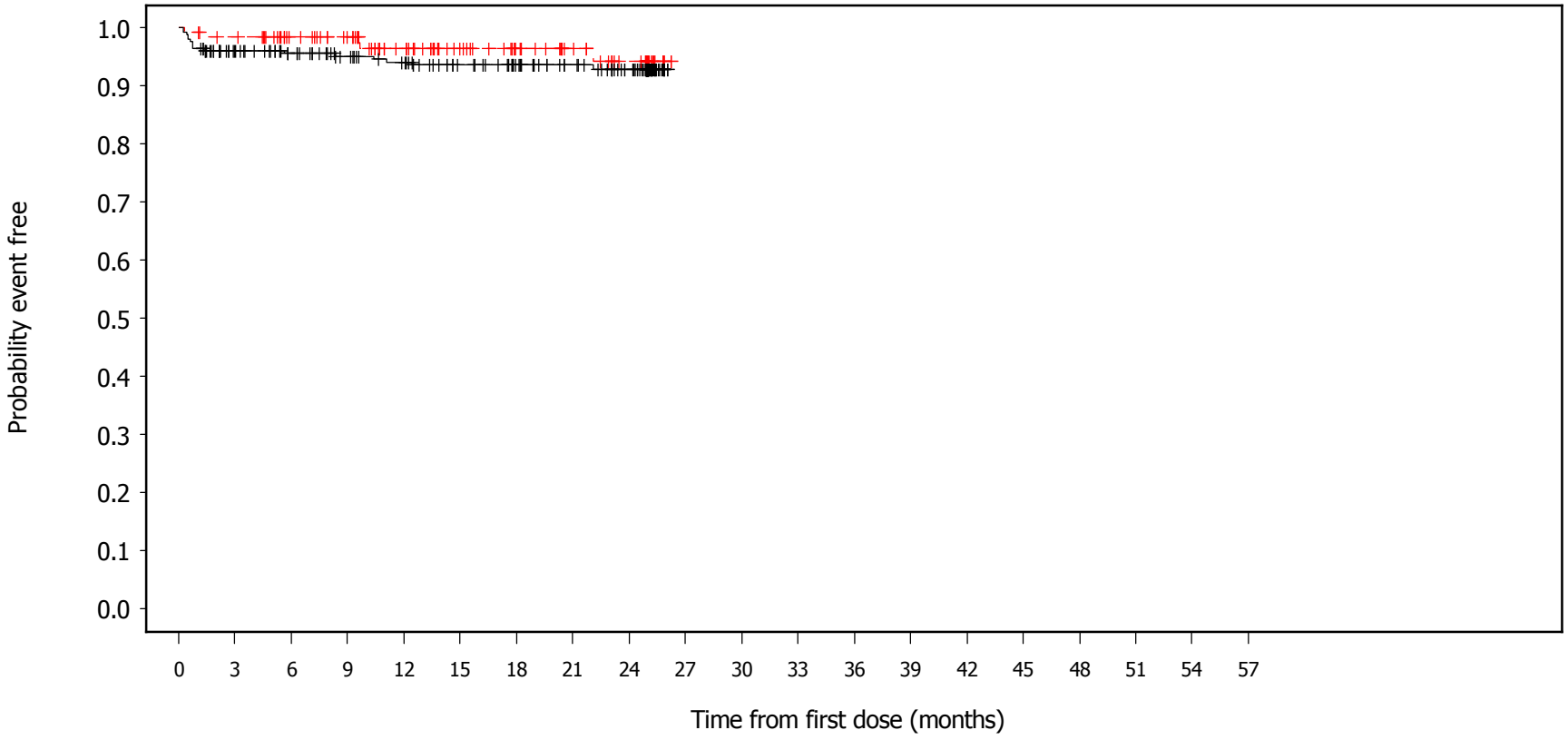
Figure 3.3.118 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 SOC: Infections and infestations
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	232	213	198	187	169	156	145	129	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	124	110	98	84	70	59	48	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

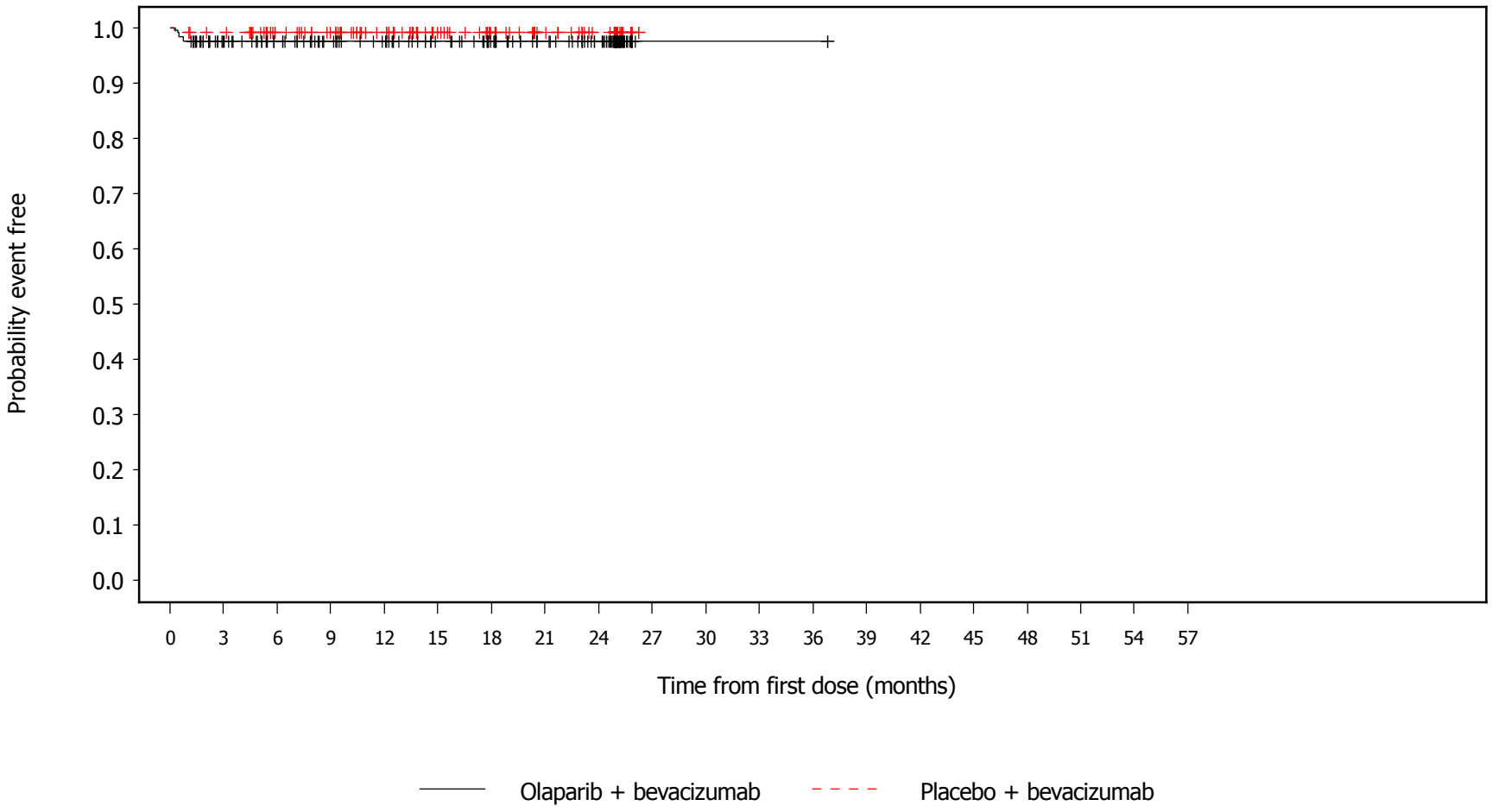
Figure 3.3.119 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 SOC: Investigations
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	225	209	195	186	170	157	144	127	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	126	113	104	87	72	60	49	37	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

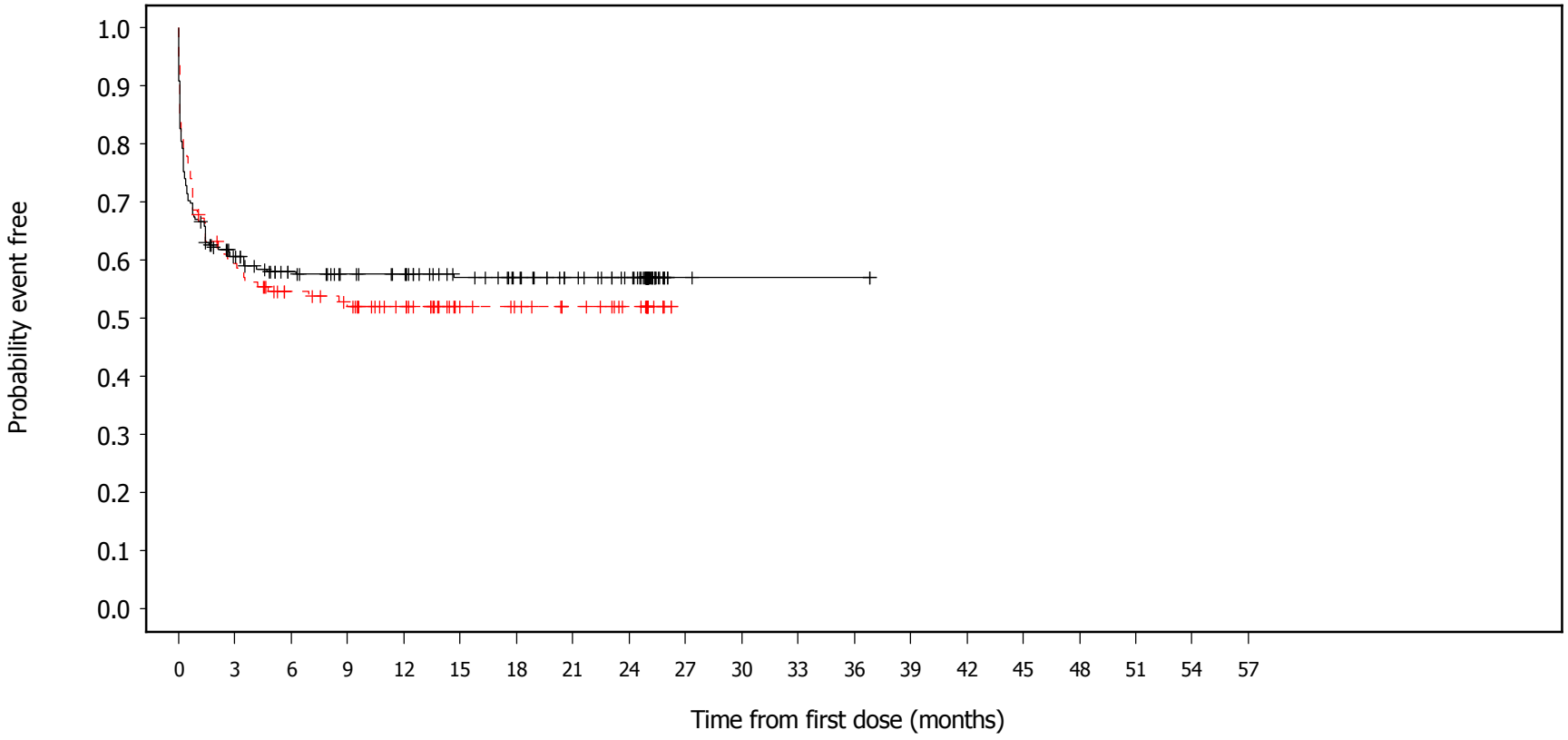
Figure 3.3.120 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE G>=3 PT: Neutrophil count decreased
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	229	214	200	192	177	164	151	135	1	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
131	127	114	105	90	74	62	50	38	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Figure 3.3.121 PAOLA1: Kaplan-Meier plot of time to first occurrence of AE max CTCAE grade=1 or 2
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	146	127	118	114	101	94	85	77	2	1	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
131	76	63	57	47	32	29	24	18	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Table 3.4.1 PAOLA1: Summary of subgroup analysis of AE
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	92 (100)	0.2 (0.1, 0.3)	48	47 (97.9)	0.6 (0.3, 0.9)	1.51	1.07, 2.16	0.0196*
NED/CR [IDS]	74	74 (100)	0.2 (0.1, 0.3)	38	37 (97.4)	0.2 (0.1, 0.7)	1.42	0.96, 2.14	0.0769
NED/CR [Chemo]	40	40 (100)	0.2 (0.1, 0.3)	20	19 (95.0)	0.6 (0.0, 0.7)	1.34	0.79, 2.38	0.2843
PR	49	49 (100)	0.3 (0.2, 0.5)	25	24 (96.0)	0.3 (0.1, 0.7)	1.30	0.80, 2.16	0.2906
Interaction p-value									0.9636
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	150 (100)	0.2 (0.2, 0.3)	65	63 (96.9)	0.3 (0.2, 0.7)	1.29	0.97, 1.75	0.0848
non-tBRCAm	105	105 (100)	0.2 (0.1, 0.3)	66	64 (97.0)	0.3 (0.1, 0.7)	1.60	1.17, 2.21	0.0030*
Interaction p-value									0.3256
First line treatment outcome (eCRF)									
NED [PDS]	89	89 (100)	0.2 (0.1, 0.3)	47	46 (97.9)	0.6 (0.3, 0.9)	1.49	1.05, 2.15	0.0248*
NED/CR [IDS]	74	74 (100)	0.2 (0.1, 0.3)	32	31 (96.9)	0.3 (0.1, 1.0)	1.60	1.06, 2.48	0.0255*
NED/CR [Chemo]	39	39 (100)	0.2 (0.1, 0.5)	17	16 (94.1)	0.2 (0.0, 0.7)	1.12	0.64, 2.07	0.6972
PR	50	50 (100)	0.2 (0.2, 0.4)	34	33 (97.1)	0.3 (0.1, 0.7)	1.22	0.79, 1.91	0.3777
Interaction p-value									0.6987
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	147 (100)	0.2 (0.2, 0.3)	67	65 (97.0)	0.3 (0.2, 0.7)	1.29	0.97, 1.74	0.0851
non-tBRCAm	108	108 (100)	0.2 (0.1, 0.3)	64	62 (96.9)	0.3 (0.1, 0.7)	1.61	1.18, 2.22	0.0029*
Interaction p-value									0.3115
Age group									
<65 years	185	185 (100)	0.2 (0.1, 0.3)	98	94 (95.9)	0.6 (0.2, 0.7)	1.60	1.25, 2.07	0.0002*
>=65 years	70	70 (100)	0.3 (0.2, 0.4)	33	33 (100)	0.3 (0.1, 0.5)	0.95	0.63, 1.46	0.8099
Interaction p-value									0.0380*

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.1 PAOLA1: Summary of subgroup analysis of AE
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	182 (100)	0.2 (0.2, 0.3)	89	87 (97.8)	0.3 (0.2, 0.7)	1.38	1.07, 1.79	0.0131*
IV	73	73 (100)	0.2 (0.1, 0.3)	42	40 (95.2)	0.4 (0.1, 0.7)	1.49	1.01, 2.21	0.0416*
Interaction p-value									0.7507
Region									
Europe	245	245 (100)	0.2 (0.2, 0.3)	125	121 (96.8)	0.3 (0.2, 0.7)	1.43	1.15, 1.79	0.0012*
Japan	10	10 (100)	0.5 (0.2, 0.7)	6	6 (100)	0.7 (0.3, 1.4)	1.05	0.39, 3.09	0.9237
Interaction p-value									0.5636
ECOG performance status at Baseline									
(0) Normal activity	190	190 (100)	0.2 (0.2, 0.3)	100	96 (96.0)	0.3 (0.2, 0.7)	1.42	1.11, 1.83	0.0050*
(1) Restricted activity	61	61 (100)	0.2 (0.1, 0.3)	30	30 (100)	0.6 (0.1, 0.7)	1.32	0.86, 2.08	0.2042
Interaction p-value									0.7846
Baseline CA-125 value									
<=ULN	228	228 (100)	0.2 (0.2, 0.3)	117	113 (96.6)	0.3 (0.2, 0.6)	1.38	1.10, 1.74	0.0057*
>ULN	27	27 (100)	0.2 (0.0, 0.4)	14	14 (100)	0.7 (0.0, 2.4)	1.71	0.91, 3.36	0.0959
Interaction p-value									0.5302
Histological grade									
High grade	255	255 (100)	0.2 (0.2, 0.3)	131	127 (96.9)	0.3 (0.2, 0.7)	1.41	1.14, 1.76	0.0015*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	166 (100)	0.2 (0.1, 0.3)	80	78 (97.5)	0.5 (0.2, 0.7)	1.53	1.17, 2.02	0.0017*
Residue	79	79 (100)	0.2 (0.2, 0.3)	43	41 (95.3)	0.2 (0.1, 0.5)	1.22	0.84, 1.80	0.3032
Interaction p-value									0.3412

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.1 PAOLA1: Summary of subgroup analysis of AE
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	146 (100)	0.2 (0.1, 0.3)	78	76 (97.4)	0.5 (0.2, 0.7)	1.44	1.09, 1.91	0.0096*
Interval	99	99 (100)	0.2 (0.2, 0.3)	45	43 (95.6)	0.2 (0.1, 0.3)	1.39	0.97, 2.02	0.0698
Interaction p-value									0.8800
Myriad tumour BRCA mutation status									
tBRCAm	158	158 (100)	0.2 (0.1, 0.3)	77	75 (97.4)	0.3 (0.1, 0.6)	1.28	0.98, 1.70	0.0732
Non-tBRCAm	97	97 (100)	0.2 (0.2, 0.3)	54	52 (96.3)	0.6 (0.2, 0.7)	1.65	1.18, 2.33	0.0035*
Interaction p-value									0.2614
Status somatic BRCA mutations									
sBRCAm	22	22 (100)	0.2 (0.1, 0.7)	7	7 (100)	0.3 (0.1, 2.8)	1.32	0.59, 3.37	0.5142
gBRCAm	66	66 (100)	0.2 (0.1, 0.3)	31	31 (100)	0.5 (0.1, 0.7)	1.39	0.91, 2.17	0.1301
Non-BRCAm	41	41 (100)	0.2 (0.1, 0.5)	22	22 (100)	0.3 (0.1, 0.7)	1.28	0.77, 2.19	0.3535
Interaction p-value									0.9701

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.2 PAOLA1: Summary of subgroup analysis of AE SOC: General disorders and administration site conditions
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	55 (59.8)	6.3 (2.8,15.0)	48	21 (43.8)	23.5 (9.8, NE)	1.61	0.99, 2.73	0.0540
NED/CR [IDS]	74	53 (71.6)	2.4 (0.9, 6.9)	38	18 (47.4)	19.1 (4.4, NE)	1.98	1.18, 3.47	0.0087*
NED/CR [Chemo]	40	23 (57.5)	2.8 (0.9, NE)	20	10 (50.0)	NE (NE, NE)	1.30	0.63, 2.86	0.4855
PR	49	25 (51.0)	11.3 (2.9, NE)	25	8 (32.0)	NE (NE, NE)	1.88	0.89, 4.45	0.1030
Interaction p-value									0.8238
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	92 (61.3)	5.4 (2.5,11.7)	65	28 (43.1)	23.5 (10.1, NE)	1.71	1.14, 2.66	0.0093*
non-tBRCAm	105	64 (61.0)	6.0 (2.2,13.0)	66	29 (43.9)	NE (NE, NE)	1.66	1.08, 2.62	0.0193*
Interaction p-value									0.9275
First line treatment outcome (eCRF)									
NED [PDS]	89	53 (59.6)	6.5 (2.8,15.9)	47	21 (44.7)	23.5 (6.9, NE)	1.56	0.96, 2.65	0.0750
NED/CR [IDS]	74	53 (71.6)	2.2 (0.9, 6.6)	32	12 (37.5)	NE (NE, NE)	2.89	1.60, 5.67	0.0003*
NED/CR [Chemo]	39	21 (53.8)	11.7 (0.5, NE)	17	8 (47.1)	NE (NE, NE)	1.25	0.58, 3.01	0.5825
PR	50	27 (54.0)	11.1 (2.7, NE)	34	15 (44.1)	NE (NE, NE)	1.22	0.66, 2.36	0.5259
Interaction p-value									0.1983
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	90 (61.2)	5.4 (2.5,11.7)	67	29 (43.3)	23.5 (10.1, NE)	1.70	1.14, 2.64	0.0093*
non-tBRCAm	108	66 (61.1)	6.0 (2.2,13.0)	64	28 (43.8)	NE (NE, NE)	1.68	1.09, 2.65	0.0182*
Interaction p-value									0.9567
Age group									
<65 years	185	114 (61.6)	5.4 (2.4,11.0)	98	39 (39.8)	NE (NE, NE)	1.91	1.34, 2.79	0.0002*
>=65 years	70	42 (60.0)	6.9 (2.8,17.8)	33	18 (54.5)	19.1 (4.6, NE)	1.23	0.72, 2.20	0.4504
Interaction p-value									0.1982

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.2 PAOLA1: Summary of subgroup analysis of AE SOC: General disorders and administration site conditions
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	110 (60.4)	6.0 (2.8,11.7)	89	41 (46.1)	23.5 (9.8, NE)	1.55	1.09, 2.24	0.0142*
IV	73	46 (63.0)	4.2 (1.4,13.4)	42	16 (38.1)	NE (NE, NE)	2.10	1.22, 3.83	0.0071*
Interaction p-value									0.3651
Region									
Europe	245	155 (63.3)	4.8 (2.7, 7.7)	125	56 (44.8)	23.5 (10.1, NE)	1.71	1.27, 2.34	0.0004*
Japan	10	1 (10.0)	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	0.67	0.03, 16.77	0.7728
Interaction p-value									0.5140
ECOG performance status at Baseline									
(0) Normal activity	190	117 (61.6)	5.4 (2.5, 9.8)	100	43 (43.0)	NE (NE, NE)	1.76	1.25, 2.53	0.0010*
(1) Restricted activity	61	35 (57.4)	11.7 (2.5, NE)	30	13 (43.3)	NE (NE, NE)	1.48	0.80, 2.90	0.2166
Interaction p-value									0.6372
Baseline CA-125 value									
<=ULN	228	136 (59.6)	6.6 (3.4,11.7)	117	51 (43.6)	NE (NE, NE)	1.62	1.18, 2.26	0.0023*
>ULN	27	20 (74.1)	1.4 (0.5, 6.9)	14	6 (42.9)	12.6 (0.8, NE)	2.45	1.04, 6.71	0.0392*
Interaction p-value									0.3910
Histological grade									
High grade	255	156 (61.2)	5.6 (2.8,11.0)	131	57 (43.5)	NE (NE, NE)	1.69	1.26, 2.31	0.0004*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	108 (65.1)	4.3 (2.2, 7.1)	80	34 (42.5)	NE (NE, NE)	2.00	1.38, 2.99	0.0002*
Residue	79	42 (53.2)	11.7 (2.7, NE)	43	19 (44.2)	NE (NE, NE)	1.22	0.72, 2.14	0.4743
Interaction p-value									0.1469

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[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.2 PAOLA1: Summary of subgroup analysis of AE SOC: General disorders and administration site conditions
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	83 (56.8)	7.7 (2.9,15.9)	78	32 (41.0)	NE (NE, NE)	1.62	1.09, 2.46	0.0175*
Interval	99	67 (67.7)	2.7 (1.2, 6.6)	45	21 (46.7)	19.1 (4.6, NE)	1.82	1.13, 3.04	0.0125*
Interaction p-value									0.7187
Myriad tumour BRCA mutation status									
tBRCAm	158	98 (62.0)	5.4 (2.5, 9.8)	77	32 (41.6)	NE (NE, NE)	1.80	1.22, 2.73	0.0025*
Non-tBRCAm	97	58 (59.8)	6.0 (2.2,15.0)	54	25 (46.3)	NE (NE, NE)	1.55	0.98, 2.52	0.0614
Interaction p-value									0.6282
Status somatic BRCA mutations									
sBRCAm	22	12 (54.5)	12.5 (2.5, NE)	7	1 (14.3)	NE (NE, NE)	4.78	0.94, 87.10	0.0610
gBRCAm	66	49 (74.2)	1.8 (0.7, 4.8)	31	14 (45.2)	NE (NE, NE)	2.52	1.43, 4.75	0.0011*
Non-BRCAm	41	24 (58.5)	3.5 (1.4, NE)	22	14 (63.6)	4.9 (1.4, NE)	0.94	0.49, 1.87	0.8552
Interaction p-value									0.0522

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.3 PAOLA1: Summary of subgroup analysis of AE PT: Fatigue
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	49 (53.3)	7.2 (2.8, NE)	48	17 (35.4)	NE (NE, NE)	1.82	1.07, 3.26	0.0260*
NED/CR [IDS]	74	49 (66.2)	3.5 (1.8,11.0)	38	15 (39.5)	NE (NE, NE)	2.09	1.20, 3.87	0.0080*
NED/CR [Chemo]	40	19 (47.5)	NE (NE, NE)	20	5 (25.0)	NE (NE, NE)	2.27	0.91, 6.86	0.0796
PR	49	24 (49.0)	11.3 (3.5, NE)	25	7 (28.0)	NE (NE, NE)	2.00	0.91, 5.03	0.0873
Interaction p-value									0.9781
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	82 (54.7)	7.2 (3.5,18.0)	65	23 (35.4)	NE (NE, NE)	1.80	1.15, 2.92	0.0088*
non-tBRCAm	105	59 (56.2)	11.0 (2.7,22.1)	66	21 (31.8)	NE (NE, NE)	2.19	1.36, 3.69	0.0011*
Interaction p-value									0.5679
First line treatment outcome (eCRF)									
NED [PDS]	89	48 (53.9)	7.2 (2.8, NE)	47	18 (38.3)	NE (NE, NE)	1.70	1.01, 3.01	0.0458*
NED/CR [IDS]	74	48 (64.9)	3.5 (1.4, 9.8)	32	9 (28.1)	NE (NE, NE)	3.36	1.73, 7.33	0.0002*
NED/CR [Chemo]	39	18 (46.2)	NE (NE, NE)	17	4 (23.5)	NE (NE, NE)	2.29	0.85, 7.93	0.1045
PR	50	26 (52.0)	14.9 (3.5, NE)	34	13 (38.2)	NE (NE, NE)	1.34	0.70, 2.69	0.3833
Interaction p-value									0.2620
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	80 (54.4)	7.2 (3.5, NE)	67	23 (34.3)	NE (NE, NE)	1.86	1.19, 3.03	0.0057*
non-tBRCAm	108	61 (56.5)	8.5 (2.7,22.1)	64	21 (32.8)	NE (NE, NE)	2.13	1.32, 3.57	0.0017*
Interaction p-value									0.7009
Age group									
<65 years	185	104 (56.2)	7.2 (2.8,15.3)	98	30 (30.6)	NE (NE, NE)	2.26	1.53, 3.46	<0.0001*
>=65 years	70	37 (52.9)	11.3 (2.9, NE)	33	14 (42.4)	NE (NE, NE)	1.40	0.78, 2.69	0.2688
Interaction p-value									0.2108

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.3 PAOLA1: Summary of subgroup analysis of AE PT: Fatigue
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	99 (54.4)	8.5 (3.5,18.0)	89	31 (34.8)	NE (NE, NE)	1.86	1.26, 2.83	0.0015*
IV	73	42 (57.5)	11.0 (2.1, NE)	42	13 (31.0)	NE (NE, NE)	2.29	1.27, 4.45	0.0053*
Interaction p-value									0.5794
Region									
Europe	245	141 (57.6)	6.3 (3.5,12.5)	125	44 (35.2)	NE (NE, NE)	1.98	1.42, 2.81	<0.0001*
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	105 (55.3)	7.2 (3.5,13.4)	100	32 (32.0)	NE (NE, NE)	2.11	1.43, 3.18	<0.0001*
(1) Restricted activity	61	32 (52.5)	15.3 (2.7, NE)	30	11 (36.7)	NE (NE, NE)	1.63	0.85, 3.39	0.1471
Interaction p-value									0.5309
Baseline CA-125 value									
<=ULN	228	125 (54.8)	11.0 (4.1,15.8)	117	39 (33.3)	NE (NE, NE)	1.97	1.39, 2.86	<0.0001*
>ULN	27	16 (59.3)	2.1 (0.5, NE)	14	5 (35.7)	NE (NE, NE)	2.07	0.81, 6.32	0.1338
Interaction p-value									0.9320
Histological grade									
High grade	255	141 (55.3)	8.5 (3.5,15.3)	131	44 (33.6)	NE (NE, NE)	1.98	1.43, 2.81	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	97 (58.4)	5.6 (2.5,12.5)	80	27 (33.8)	NE (NE, NE)	2.25	1.49, 3.52	<0.0001*
Residue	79	39 (49.4)	15.8 (3.5, NE)	43	13 (30.2)	NE (NE, NE)	1.69	0.92, 3.28	0.0902
Interaction p-value									0.4570

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.3 PAOLA1: Summary of subgroup analysis of AE PT: Fatigue
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	75 (51.4)	13.0 (4.9, NE)	78	23 (29.5)	NE (NE, NE)	2.07	1.32, 3.38	0.0012*
Interval	99	61 (61.6)	3.7 (2.1,11.8)	45	17 (37.8)	NE (NE, NE)	1.98	1.19, 3.50	0.0082*
Interaction p-value									0.9015
Myriad tumour BRCA mutation status									
tBRCAm	158	87 (55.1)	7.2 (3.5,18.0)	77	26 (33.8)	NE (NE, NE)	1.90	1.24, 3.00	0.0025*
Non-tBRCAm	97	54 (55.7)	11.0 (2.7, NE)	54	18 (33.3)	NE (NE, NE)	2.10	1.26, 3.69	0.0040*
Interaction p-value									0.7720
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	45 (68.2)	2.4 (1.1, 6.9)	31	13 (41.9)	NE (NE, NE)	2.29	1.27, 4.43	0.0050*
Non-BRCAm	41	24 (58.5)	4.1 (1.4, NE)	22	12 (54.5)	8.3 (2.8, NE)	1.24	0.63, 2.56	0.5439
Interaction p-value									0.1942

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.4 PAOLA1: Summary of subgroup analysis of AE SOC: Endocrine disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	1 (1.1)	NE (NE, NE)	48	5 (10.4)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	38	3 (7.9)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	4 (2.7)	NE (NE, NE)	65	5 (7.7)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	4 (6.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	1 (1.1)	NE (NE, NE)	47	5 (10.6)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	32	3 (9.4)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	NC	NC	NC
PR	50	1 (2.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	3 (2.0)	NE (NE, NE)	67	5 (7.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	4 (6.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	3 (1.6)	NE (NE, NE)	98	9 (9.2)	NE (NE, NE)	0.17	0.04, 0.55	0.0031*
>=65 years	70	1 (1.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.4 PAOLA1: Summary of subgroup analysis of AE SOC: Endocrine disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	4 (2.2)	NE (NE, NE)	89	9 (10.1)	NE (NE, NE)	0.20	0.06, 0.63	0.0053*
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	4 (1.6)	NE (NE, NE)	125	9 (7.2)	NE (NE, NE)	0.20	0.06, 0.63	0.0055*
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	4 (2.1)	NE (NE, NE)	100	8 (8.0)	NE (NE, NE)	0.25	0.07, 0.80	0.0190*
(1) Restricted activity	61	0	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	3 (1.3)	NE (NE, NE)	117	9 (7.7)	NE (NE, NE)	0.16	0.03, 0.53	0.0023*
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	4 (1.6)	NE (NE, NE)	131	9 (6.9)	NE (NE, NE)	0.21	0.06, 0.65	0.0063*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	8 (10.0)	NE (NE, NE)	0.17	0.04, 0.59	0.0047*
Residue	79	1 (1.3)	NE (NE, NE)	43	1 (2.3)	NE (NE, NE)	0.48	0.02, 12.22	0.6108
Interaction p-value									0.5092

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.4 PAOLA1: Summary of subgroup analysis of AE SOC: Endocrine disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	6 (7.7)	NE (NE, NE)	NC	NC	NC
Interval	99	3 (3.0)	NE (NE, NE)	45	3 (6.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	4 (2.5)	NE (NE, NE)	77	6 (7.8)	NE (NE, NE)	0.28	0.07, 0.998	0.0496*
Non-tBRCAm	97	0	NE (NE, NE)	54	3 (5.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	22	0	NE (NE, NE)	7	2 (28.6)	NE (NE, NE)	NC	NC	NC
gBRCAm	66	2 (3.0)	NE (NE, NE)	31	3 (9.7)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	0	NE (NE, NE)	22	1 (4.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubae_v3.sas ettesubae_v3aad 25NOV2020:11:06 kvbv306

Table 3.4.5 PAOLA1: Summary of subgroup analysis of AE PT: Dyspnoea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	15 (16.3)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	8.42	1.71,152.21	0.0049*
NED/CR [IDS]	74	4 (5.4)	NE (NE, NE)	38	1 (2.6)	NE (NE, NE)	2.13	0.31, 41.60	0.4692
NED/CR [Chemo]	40	1 (2.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	2 (4.1)	NE (NE, NE)	25	1 (4.0)	NE (NE, NE)	0.98	0.09, 20.97	0.9836
Interaction p-value									0.3674
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	11 (7.3)	NE (NE, NE)	65	2 (3.1)	NE (NE, NE)	2.41	0.65, 15.55	0.2087
non-tBRCAm	105	11 (10.5)	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	7.43	1.45,135.83	0.0122*
Interaction p-value									0.3692
First line treatment outcome (eCRF)									
NED [PDS]	89	13 (14.6)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	7.33	1.46,133.04	0.0111*
NED/CR [IDS]	74	5 (6.8)	NE (NE, NE)	32	1 (3.1)	NE (NE, NE)	2.35	0.38, 44.94	0.3950
NED/CR [Chemo]	39	2 (5.1)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	1 (2.0)	NE (NE, NE)	34	1 (2.9)	NE (NE, NE)	0.63	0.02, 15.90	0.7445
Interaction p-value									0.3554
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	10 (6.8)	NE (NE, NE)	67	2 (3.0)	NE (NE, NE)	2.30	0.61, 14.97	0.2407
non-tBRCAm	108	12 (11.1)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	7.62	1.50,138.72	0.0100*
Interaction p-value									0.3402
Age group									
<65 years	185	15 (8.1)	NE (NE, NE)	98	2 (2.0)	NE (NE, NE)	4.11	1.16, 26.06	0.0262*
>=65 years	70	7 (10.0)	NE (NE, NE)	33	1 (3.0)	NE (NE, NE)	3.40	0.60, 63.50	0.1863
Interaction p-value									0.8855

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.5 PAOLA1: Summary of subgroup analysis of AE PT: Dyspnoea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	15 (8.2)	NE (NE, NE)	89	2 (2.2)	NE (NE, NE)	3.83	1.08, 24.30	0.0359*
IV	73	7 (9.6)	NE (NE, NE)	42	1 (2.4)	NE (NE, NE)	4.08	0.73, 76.27	0.1217
Interaction p-value									0.9617
Region									
Europe	245	22 (9.0)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	3.85	1.33, 16.26	0.0101*
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	15 (7.9)	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	4.14	1.17, 26.30	0.0251*
(1) Restricted activity	61	6 (9.8)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	2.86	0.49, 54.11	0.2734
Interaction p-value									0.7826
Baseline CA-125 value									
<=ULN	228	18 (7.9)	NE (NE, NE)	117	3 (2.6)	NE (NE, NE)	3.15	1.07, 13.47	0.0365*
>ULN	27	4 (14.8)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	22 (8.6)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	3.89	1.35, 16.46	0.0094*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	19 (11.4)	NE (NE, NE)	80	2 (2.5)	NE (NE, NE)	4.95	1.44, 31.08	0.0081*
Residue	79	2 (2.5)	NE (NE, NE)	43	1 (2.3)	NE (NE, NE)	1.02	0.10, 21.90	0.9880
Interaction p-value									0.2972

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.5 PAOLA1: Summary of subgroup analysis of AE PT: Dyspnoea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	15 (10.3)	NE (NE, NE)	78	2 (2.6)	NE (NE, NE)	4.15	1.17, 26.32	0.0250*
Interval	99	6 (6.1)	NE (NE, NE)	45	1 (2.2)	NE (NE, NE)	2.78	0.47, 52.52	0.2884
Interaction p-value									0.7654
Myriad tumour BRCA mutation status									
tBRCAm	158	11 (7.0)	NE (NE, NE)	77	2 (2.6)	NE (NE, NE)	2.70	0.72, 17.42	0.1512
Non-tBRCAm	97	11 (11.3)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	6.63	1.29,121.23	0.0195*
Interaction p-value									0.4749
Status somatic BRCA mutations									
sBRCAm	22	1 (4.5)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	4 (6.1)	NE (NE, NE)	31	1 (3.2)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	3 (7.3)	NE (NE, NE)	22	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.6 PAOLA1: Summary of subgroup analysis of AE SOC: Renal and urinary disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	10 (10.9)	NE (NE, NE)	48	11 (22.9)	NE (NE, NE)	0.43	0.18, 1.01	0.0525
NED/CR [IDS]	74	8 (10.8)	NE (NE, NE)	38	4 (10.5)	NE (NE, NE)	1.04	0.33, 3.90	0.9486
NED/CR [Chemo]	40	4 (10.0)	NE (NE, NE)	20	3 (15.0)	NE (NE, NE)	0.62	0.14, 3.13	0.5322
PR	49	5 (10.2)	NE (NE, NE)	25	6 (24.0)	NE (NE, NE)	0.38	0.11, 1.26	0.1102
Interaction p-value									0.5961
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	21 (14.0)	NE (NE, NE)	65	11 (16.9)	NE (NE, NE)	0.78	0.39, 1.69	0.5197
non-tBRCAm	105	6 (5.7)	NE (NE, NE)	66	13 (19.7)	NE (NE, NE)	0.27	0.09, 0.68	0.0050*
Interaction p-value									0.0730
First line treatment outcome (eCRF)									
NED [PDS]	89	7 (7.9)	NE (NE, NE)	47	10 (21.3)	NE (NE, NE)	0.34	0.12, 0.87	0.0255*
NED/CR [IDS]	74	10 (13.5)	NE (NE, NE)	32	3 (9.4)	NE (NE, NE)	1.53	0.47, 6.82	0.5041
NED/CR [Chemo]	39	3 (7.7)	NE (NE, NE)	17	3 (17.6)	NE (NE, NE)	0.39	0.07, 2.12	0.2590
PR	50	6 (12.0)	NE (NE, NE)	34	7 (20.6)	NE (NE, NE)	0.51	0.16, 1.53	0.2224
Interaction p-value									0.2583
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	20 (13.6)	NE (NE, NE)	67	11 (16.4)	NE (NE, NE)	0.78	0.38, 1.69	0.5149
non-tBRCAm	108	7 (6.5)	NE (NE, NE)	64	13 (20.3)	NE (NE, NE)	0.30	0.11, 0.72	0.0073*
Interaction p-value									0.0987
Age group									
<65 years	185	20 (10.8)	NE (NE, NE)	98	20 (20.4)	NE (NE, NE)	0.50	0.27, 0.93	0.0282*
>=65 years	70	7 (10.0)	NE (NE, NE)	33	4 (12.1)	NE (NE, NE)	0.76	0.23, 2.89	0.6618
Interaction p-value									0.5424

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.6 PAOLA1: Summary of subgroup analysis of AE SOC: Renal and urinary disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	19 (10.4)	NE (NE, NE)	89	15 (16.9)	NE (NE, NE)	0.58	0.30, 1.17	0.1264
IV	73	8 (11.0)	NE (NE, NE)	42	9 (21.4)	NE (NE, NE)	0.47	0.17, 1.22	0.1184
Interaction p-value									0.7042
Region									
Europe	245	27 (11.0)	NE (NE, NE)	125	21 (16.8)	NE (NE, NE)	0.61	0.35, 1.10	0.0977
Japan	10	0	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	21 (11.1)	NE (NE, NE)	100	17 (17.0)	NE (NE, NE)	0.63	0.33, 1.21	0.1633
(1) Restricted activity	61	6 (9.8)	NE (NE, NE)	30	7 (23.3)	NE (NE, NE)	0.35	0.11, 1.04	0.0594
Interaction p-value									0.3520
Baseline CA-125 value									
<=ULN	228	23 (10.1)	NE (NE, NE)	117	22 (18.8)	NE (NE, NE)	0.50	0.28, 0.91	0.0229*
>ULN	27	4 (14.8)	NE (NE, NE)	14	2 (14.3)	NE (NE, NE)	0.91	0.18, 6.57	0.9149
Interaction p-value									0.5078
Histological grade									
High grade	255	27 (10.6)	NE (NE, NE)	131	24 (18.3)	NE (NE, NE)	0.54	0.31, 0.94	0.0299*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	18 (10.8)	NE (NE, NE)	80	14 (17.5)	NE (NE, NE)	0.60	0.30, 1.23	0.1565
Residue	79	8 (10.1)	NE (NE, NE)	43	9 (20.9)	NE (NE, NE)	0.42	0.16, 1.09	0.0730
Interaction p-value									0.5440

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.6 PAOLA1: Summary of subgroup analysis of AE SOC: Renal and urinary disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	12 (8.2)	NE (NE, NE)	78	17 (21.8)	NE (NE, NE)	0.34	0.16, 0.70	0.0038*
Interval	99	14 (14.1)	NE (NE, NE)	45	6 (13.3)	NE (NE, NE)	1.04	0.42, 2.94	0.9350
Interaction p-value									0.0611
Myriad tumour BRCA mutation status									
tBRCAm	158	21 (13.3)	NE (NE, NE)	77	12 (15.6)	NE (NE, NE)	0.81	0.40, 1.69	0.5574
Non-tBRCAm	97	6 (6.2)	NE (NE, NE)	54	12 (22.2)	NE (NE, NE)	0.25	0.09, 0.66	0.0044*
Interaction p-value									0.0550
Status somatic BRCA mutations									
sBRCAm	22	2 (9.1)	NE (NE, NE)	7	1 (14.3)	NE (NE, NE)	0.52	0.05, 11.27	0.6130
gBRCAm	66	9 (13.6)	NE (NE, NE)	31	5 (16.1)	NE (NE, NE)	0.89	0.31, 2.89	0.8311
Non-BRCAm	41	3 (7.3)	NE (NE, NE)	22	3 (13.6)	NE (NE, NE)	0.49	0.09, 2.66	0.3900
Interaction p-value									0.8095

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.7 PAOLA1: Summary of subgroup analysis of AE PT: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 6 (6.5)	NE (NE, NE)	48 9 (18.8)	NE (NE, NE)	0.31	0.10, 0.85	0.0239*
NED/CR [IDS]	74 7 (9.5)	NE (NE, NE)	38 3 (7.9)	NE (NE, NE)	1.22	0.34, 5.68	0.7674
NED/CR [Chemo]	40 3 (7.5)	NE (NE, NE)	20 3 (15.0)	NE (NE, NE)	0.47	0.09, 2.51	0.3543
PR	49 3 (6.1)	NE (NE, NE)	25 4 (16.0)	NE (NE, NE)	0.36	0.07, 1.64	0.1818
Interaction p-value							0.4102
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 15 (10.0)	NE (NE, NE)	65 9 (13.8)	NE (NE, NE)	0.67	0.30, 1.60	0.3569
non-tBRCAm	105 4 (3.8)	NE (NE, NE)	66 10 (15.2)	NE (NE, NE)	0.24	0.07, 0.72	0.0103*
Interaction p-value							0.1452
First line treatment outcome (eCRF)							
NED [PDS]	89 5 (5.6)	NE (NE, NE)	47 8 (17.0)	NE (NE, NE)	0.30	0.09, 0.90	0.0320*
NED/CR [IDS]	74 9 (12.2)	NE (NE, NE)	32 2 (6.3)	NE (NE, NE)	2.12	0.55, 13.93	0.2993
NED/CR [Chemo]	39 1 (2.6)	NE (NE, NE)	17 2 (11.8)	NE (NE, NE)	0.20	0.01, 2.09	0.1724
PR	50 3 (6.0)	NE (NE, NE)	34 6 (17.6)	NE (NE, NE)	0.29	0.06, 1.10	0.0695
Interaction p-value							0.0915
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 14 (9.5)	NE (NE, NE)	67 9 (13.4)	NE (NE, NE)	0.66	0.29, 1.58	0.3349
non-tBRCAm	108 5 (4.6)	NE (NE, NE)	64 10 (15.6)	NE (NE, NE)	0.29	0.09, 0.80	0.0173*
Interaction p-value							0.2213
Age group							
<65 years	185 14 (7.6)	NE (NE, NE)	98 17 (17.3)	NE (NE, NE)	0.41	0.20, 0.83	0.0135*
>=65 years	70 5 (7.1)	NE (NE, NE)	33 2 (6.1)	NE (NE, NE)	1.12	0.24, 7.80	0.8939
Interaction p-value							0.2508

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.7 PAOLA1: Summary of subgroup analysis of AE PT: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	14 (7.7)	NE (NE, NE)	89	12 (13.5)	NE (NE, NE)	0.54	0.25, 1.18	0.1187
IV	73	5 (6.8)	NE (NE, NE)	42	7 (16.7)	NE (NE, NE)	0.39	0.12, 1.22	0.1053
Interaction p-value									0.6513
Region									
Europe	245	19 (7.8)	NE (NE, NE)	125	16 (12.8)	NE (NE, NE)	0.57	0.29, 1.13	0.1043
Japan	10	0	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	15 (7.9)	NE (NE, NE)	100	13 (13.0)	NE (NE, NE)	0.61	0.29, 1.29	0.1900
(1) Restricted activity	61	4 (6.6)	NE (NE, NE)	30	6 (20.0)	NE (NE, NE)	0.26	0.07, 0.90	0.0335*
Interaction p-value									0.2452
Baseline CA-125 value									
<=ULN	228	17 (7.5)	NE (NE, NE)	117	17 (14.5)	NE (NE, NE)	0.49	0.25, 0.96	0.0388*
>ULN	27	2 (7.4)	NE (NE, NE)	14	2 (14.3)	NE (NE, NE)	0.43	0.05, 3.61	0.4093
Interaction p-value									0.9090
Histological grade									
High grade	255	19 (7.5)	NE (NE, NE)	131	19 (14.5)	NE (NE, NE)	0.48	0.25, 0.92	0.0267*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	15 (9.0)	NE (NE, NE)	80	11 (13.8)	NE (NE, NE)	0.65	0.30, 1.44	0.2772
Residue	79	4 (5.1)	NE (NE, NE)	43	7 (16.3)	NE (NE, NE)	0.27	0.07, 0.90	0.0328*
Interaction p-value									0.2349

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.7 PAOLA1: Summary of subgroup analysis of AE PT: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	8 (5.5)	NE (NE, NE)	78	14 (17.9)	NE (NE, NE)	0.28	0.11, 0.65	0.0030*
Interval	99	11 (11.1)	NE (NE, NE)	45	4 (8.9)	NE (NE, NE)	1.25	0.43, 4.53	0.6931
Interaction p-value									0.0313*
Myriad tumour BRCA mutation status									
tBRCAm	158	16 (10.1)	NE (NE, NE)	77	10 (13.0)	NE (NE, NE)	0.72	0.33, 1.65	0.4312
Non-tBRCAm	97	3 (3.1)	NE (NE, NE)	54	9 (16.7)	NE (NE, NE)	0.18	0.04, 0.60	0.0046*
Interaction p-value									0.0581
Status somatic BRCA mutations									
sBRCAm	22	2 (9.1)	NE (NE, NE)	7	1 (14.3)	NE (NE, NE)	0.51	0.05, 10.99	0.5998
gBRCAm	66	7 (10.6)	NE (NE, NE)	31	5 (16.1)	NE (NE, NE)	0.66	0.21, 2.24	0.4909
Non-BRCAm	41	2 (4.9)	NE (NE, NE)	22	2 (9.1)	NE (NE, NE)	0.51	0.06, 4.24	0.5034
Interaction p-value									0.9636

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.8 PAOLA1: Summary of subgroup analysis of AE SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	53 (57.6)	4.8 (2.8,23.5)	48	15 (31.3)	NE (NE, NE)	2.35	1.36, 4.32	0.0017*
NED/CR [IDS]	74	49 (66.2)	2.1 (1.4, 6.2)	38	13 (34.2)	NE (NE, NE)	2.56	1.43, 4.92	0.0011*
NED/CR [Chemo]	40	20 (50.0)	12.5 (2.8, NE)	20	7 (35.0)	NE (NE, NE)	1.64	0.72, 4.17	0.2451
PR	49	26 (53.1)	11.1 (2.1, NE)	25	6 (24.0)	NE (NE, NE)	2.87	1.26, 7.72	0.0102*
Interaction p-value									0.8208
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	84 (56.0)	7.2 (2.8,18.0)	65	22 (33.8)	NE (NE, NE)	2.01	1.28, 3.30	0.0019*
non-tBRCAm	105	64 (61.0)	2.8 (2.1,12.5)	66	19 (28.8)	NE (NE, NE)	2.85	1.74, 4.90	<0.0001*
Interaction p-value									0.3244
First line treatment outcome (eCRF)									
NED [PDS]	89	52 (58.4)	4.8 (2.8,23.5)	47	14 (29.8)	NE (NE, NE)	2.56	1.46, 4.80	0.0007*
NED/CR [IDS]	74	48 (64.9)	3.4 (1.9, 8.2)	32	10 (31.3)	NE (NE, NE)	2.80	1.48, 5.88	0.0010*
NED/CR [Chemo]	39	17 (43.6)	NE (NE, NE)	17	7 (41.2)	NE (NE, NE)	1.07	0.46, 2.76	0.8827
PR	50	29 (58.0)	2.8 (2.0, NE)	34	10 (29.4)	NE (NE, NE)	2.56	1.29, 5.54	0.0063*
Interaction p-value									0.3726
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	83 (56.5)	7.2 (2.8,18.0)	67	23 (34.3)	NE (NE, NE)	2.00	1.28, 3.25	0.0018*
non-tBRCAm	108	65 (60.2)	2.8 (2.1,13.8)	64	18 (28.1)	NE (NE, NE)	2.87	1.74, 4.99	<0.0001*
Interaction p-value									0.3089
Age group									
<65 years	185	103 (55.7)	7.2 (2.8,18.0)	98	31 (31.6)	NE (NE, NE)	2.18	1.48, 3.32	<0.0001*
>=65 years	70	45 (64.3)	2.7 (1.4,12.3)	33	10 (30.3)	NE (NE, NE)	2.87	1.51, 6.03	0.0009*
Interaction p-value									0.4966

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.8 PAOLA1: Summary of subgroup analysis of AE SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	107 (58.8)	3.7 (2.6,15.3)	89	26 (29.2)	NE (NE, NE)	2.69	1.78, 4.21	<0.0001*
IV	73	41 (56.2)	11.1 (2.8, NE)	42	15 (35.7)	NE (NE, NE)	1.78	1.01, 3.31	0.0478*
Interaction p-value									0.2718
Region									
Europe	245	139 (56.7)	5.6 (2.8,13.8)	125	37 (29.6)	NE (NE, NE)	2.46	1.73, 3.58	<0.0001*
Japan	10	9 (90.0)	2.1 (0.3, 2.8)	6	4 (66.7)	0.7 (0.3, NE)	1.40	0.45, 5.16	0.5717
Interaction p-value									0.3857
ECOG performance status at Baseline									
(0) Normal activity	190	109 (57.4)	4.7 (2.8,12.5)	100	29 (29.0)	NE (NE, NE)	2.59	1.74, 3.97	<0.0001*
(1) Restricted activity	61	37 (60.7)	5.4 (2.0,21.7)	30	12 (40.0)	NE (NE, NE)	1.71	0.92, 3.42	0.0934
Interaction p-value									0.2979
Baseline CA-125 value									
<=ULN	228	131 (57.5)	6.2 (2.8,12.5)	117	35 (29.9)	NE (NE, NE)	2.45	1.70, 3.61	<0.0001*
>ULN	27	17 (63.0)	2.7 (1.1, NE)	14	6 (42.9)	NE (NE, NE)	1.82	0.76, 5.04	0.1889
Interaction p-value									0.5701
Histological grade									
High grade	255	148 (58.0)	4.8 (2.8,12.3)	131	41 (31.3)	NE (NE, NE)	2.35	1.68, 3.37	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	102 (61.4)	3.5 (2.7,10.4)	80	24 (30.0)	NE (NE, NE)	2.74	1.78, 4.37	<0.0001*
Residue	79	41 (51.9)	11.2 (2.7, NE)	43	14 (32.6)	NE (NE, NE)	1.82	1.02, 3.47	0.0425*
Interaction p-value									0.2967

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.8 PAOLA1: Summary of subgroup analysis of AE SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	77 (52.7)	12.5 (3.4, NE)	78	21 (26.9)	NE (NE, NE)	2.45	1.54, 4.07	<0.0001*
Interval	99	66 (66.7)	2.7 (2.0, 5.6)	45	17 (37.8)	NE (NE, NE)	2.26	1.36, 3.98	0.0013*
Interaction p-value									0.8264
Myriad tumour BRCA mutation status									
tBRCAm	158	93 (58.9)	4.7 (2.7,12.3)	77	23 (29.9)	NE (NE, NE)	2.53	1.63, 4.10	<0.0001*
Non-tBRCAm	97	55 (56.7)	5.4 (2.1,23.5)	54	18 (33.3)	NE (NE, NE)	2.12	1.27, 3.71	0.0036*
Interaction p-value									0.6168
Status somatic BRCA mutations									
sBRCAm	22	14 (63.6)	2.8 (0.5, NE)	7	2 (28.6)	NE (NE, NE)	2.95	0.82, 18.82	0.1031
gBRCAm	66	41 (62.1)	2.8 (2.1, 9.7)	31	14 (45.2)	NE (NE, NE)	1.82	1.02, 3.47	0.0431*
Non-BRCAm	41	27 (65.9)	2.8 (1.1,18.0)	22	7 (31.8)	NE (NE, NE)	2.55	1.17, 6.35	0.0169*
Interaction p-value									0.7298

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.9 PAOLA1: Summary of subgroup analysis of AE PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	37 (40.2)	NE (NE, NE)	48	8 (16.7)	NE (NE, NE)	2.98	1.46, 6.90	0.0019*
NED/CR [IDS]	74	34 (45.9)	21.7 (4.6, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	13 (32.5)	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	7.15	1.42,129.87	0.0123*
PR	49	18 (36.7)	NE (NE, NE)	25	3 (12.0)	NE (NE, NE)	3.78	1.28, 16.12	0.0139*
Interaction p-value									0.6834
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	55 (36.7)	NE (NE, NE)	65	7 (10.8)	NE (NE, NE)	4.00	1.95, 9.64	<0.0001*
non-tBRCAm	105	47 (44.8)	NE (NE, NE)	66	5 (7.6)	NE (NE, NE)	7.66	3.35, 22.08	<0.0001*
Interaction p-value									0.2896
First line treatment outcome (eCRF)									
NED [PDS]	89	35 (39.3)	NE (NE, NE)	47	8 (17.0)	NE (NE, NE)	2.82	1.38, 6.54	0.0037*
NED/CR [IDS]	74	32 (43.2)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	11 (28.2)	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	5.06	0.98, 92.48	0.0528
PR	50	22 (44.0)	NE (NE, NE)	34	3 (8.8)	NE (NE, NE)	6.03	2.09, 25.49	0.0003*
Interaction p-value									0.5317
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	55 (37.4)	NE (NE, NE)	67	7 (10.4)	NE (NE, NE)	4.23	2.06, 10.20	<0.0001*
non-tBRCAm	108	47 (43.5)	NE (NE, NE)	64	5 (7.8)	NE (NE, NE)	7.15	3.13, 20.62	<0.0001*
Interaction p-value									0.3921
Age group									
<65 years	185	70 (37.8)	NE (NE, NE)	98	9 (9.2)	NE (NE, NE)	4.88	2.57, 10.49	<0.0001*
>=65 years	70	32 (45.7)	NE (NE, NE)	33	3 (9.1)	NE (NE, NE)	6.80	2.43, 28.30	<0.0001*
Interaction p-value									0.6278

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.9 PAOLA1: Summary of subgroup analysis of AE PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	73 (40.1)	NE (NE, NE)	89	9 (10.1)	NE (NE, NE)	4.94	2.61, 10.61	<0.0001*
IV	73	29 (39.7)	NE (NE, NE)	42	3 (7.1)	NE (NE, NE)	6.57	2.33, 27.44	<0.0001*
Interaction p-value									0.6793
Region									
Europe	245	96 (39.2)	NE (NE, NE)	125	12 (9.6)	NE (NE, NE)	4.93	2.82, 9.48	<0.0001*
Japan	10	6 (60.0)	2.8 (0.3, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	74 (38.9)	NE (NE, NE)	100	8 (8.0)	NE (NE, NE)	6.14	3.15, 13.84	<0.0001*
(1) Restricted activity	61	28 (45.9)	NE (NE, NE)	30	4 (13.3)	NE (NE, NE)	3.89	1.53, 13.16	0.0029*
Interaction p-value									0.4936
Baseline CA-125 value									
<=ULN	228	89 (39.0)	NE (NE, NE)	117	11 (9.4)	NE (NE, NE)	5.06	2.83, 10.04	<0.0001*
>ULN	27	13 (48.1)	NE (NE, NE)	14	1 (7.1)	NE (NE, NE)	8.66	1.73,157.31	0.0049*
Interaction p-value									0.5983
Histological grade									
High grade	255	102 (40.0)	NE (NE, NE)	131	12 (9.2)	NE (NE, NE)	5.35	3.07, 10.26	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	69 (41.6)	NE (NE, NE)	80	8 (10.0)	NE (NE, NE)	5.32	2.72, 12.01	<0.0001*
Residue	79	28 (35.4)	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	8.56	2.58, 53.08	<0.0001*
Interaction p-value									0.5468

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.9 PAOLA1: Summary of subgroup analysis of AE PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	52 (35.6)	NE (NE, NE)	78	10 (12.8)	NE (NE, NE)	3.27	1.74, 6.83	0.0001*
Interval	99	45 (45.5)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	63 (39.9)	NE (NE, NE)	77	6 (7.8)	NE (NE, NE)	6.25	2.94, 16.17	<0.0001*
Non-tBRCAm	97	39 (40.2)	NE (NE, NE)	54	6 (11.1)	NE (NE, NE)	4.46	2.04, 11.73	<0.0001*
Interaction p-value									0.5823
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	27 (40.9)	NE (NE, NE)	31	4 (12.9)	NE (NE, NE)	4.11	1.61, 13.93	0.0020*
Non-BRCAm	41	20 (48.8)	21.7 (2.8, NE)	22	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.10 PAOLA1: Summary of subgroup analysis of AE PT: Leukopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	16 (17.4)	NE (NE, NE)	48	3 (6.3)	NE (NE, NE)	2.78	0.93, 11.96	0.0701
NED/CR [IDS]	74	17 (23.0)	NE (NE, NE)	38	5 (13.2)	NE (NE, NE)	1.79	0.71, 5.44	0.2303
NED/CR [Chemo]	40	7 (17.5)	NE (NE, NE)	20	2 (10.0)	NE (NE, NE)	1.86	0.45, 12.50	0.4140
PR	49	6 (12.2)	NE (NE, NE)	25	1 (4.0)	NE (NE, NE)	3.07	0.52, 58.04	0.2390
Interaction p-value									0.9294
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	26 (17.3)	NE (NE, NE)	65	4 (6.2)	NE (NE, NE)	2.89	1.13, 9.80	0.0254*
non-tBRCAm	105	20 (19.0)	NE (NE, NE)	66	7 (10.6)	NE (NE, NE)	1.82	0.81, 4.65	0.1534
Interaction p-value									0.5012
First line treatment outcome (eCRF)									
NED [PDS]	89	18 (20.2)	NE (NE, NE)	47	3 (6.4)	NE (NE, NE)	3.23	1.09, 13.81	0.0322*
NED/CR [IDS]	74	16 (21.6)	NE (NE, NE)	32	5 (15.6)	NE (NE, NE)	1.41	0.55, 4.31	0.4921
NED/CR [Chemo]	39	3 (7.7)	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	1.32	0.17, 26.64	0.8071
PR	50	9 (18.0)	NE (NE, NE)	34	2 (5.9)	NE (NE, NE)	3.11	0.80, 20.41	0.1063
Interaction p-value									0.6807
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	26 (17.7)	NE (NE, NE)	67	5 (7.5)	NE (NE, NE)	2.43	1.02, 7.19	0.0458*
non-tBRCAm	108	20 (18.5)	NE (NE, NE)	64	6 (9.4)	NE (NE, NE)	2.00	0.85, 5.47	0.1153
Interaction p-value									0.7722
Age group									
<65 years	185	29 (15.7)	NE (NE, NE)	98	8 (8.2)	NE (NE, NE)	1.96	0.94, 4.60	0.0747
>=65 years	70	17 (24.3)	NE (NE, NE)	33	3 (9.1)	NE (NE, NE)	2.69	0.90, 11.53	0.0784
Interaction p-value									0.6642

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.10 PAOLA1: Summary of subgroup analysis of AE PT: Leukopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	38 (20.9)	NE (NE, NE)	89	7 (7.9)	NE (NE, NE)	2.79	1.33, 6.83	0.0054*
IV	73	8 (11.0)	NE (NE, NE)	42	4 (9.5)	NE (NE, NE)	1.09	0.34, 4.08	0.8907
Interaction p-value									0.2117
Region									
Europe	245	39 (15.9)	NE (NE, NE)	125	7 (5.6)	NE (NE, NE)	2.89	1.38, 7.07	0.0038*
Japan	10	7 (70.0)	2.4 (0.7,18.0)	6	4 (66.7)	2.6 (0.5, NE)	1.11	0.33, 4.26	0.8664
Interaction p-value									0.2123
ECOG performance status at Baseline									
(0) Normal activity	190	34 (17.9)	NE (NE, NE)	100	8 (8.0)	NE (NE, NE)	2.33	1.14, 5.42	0.0196*
(1) Restricted activity	61	11 (18.0)	NE (NE, NE)	30	3 (10.0)	NE (NE, NE)	1.67	0.52, 7.38	0.4113
Interaction p-value									0.6646
Baseline CA-125 value									
<=ULN	228	41 (18.0)	NE (NE, NE)	117	11 (9.4)	NE (NE, NE)	1.97	1.05, 4.04	0.0337*
>ULN	27	5 (18.5)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	46 (18.0)	NE (NE, NE)	131	11 (8.4)	NE (NE, NE)	2.19	1.18, 4.45	0.0123*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	34 (20.5)	NE (NE, NE)	80	8 (10.0)	NE (NE, NE)	2.09	1.02, 4.86	0.0440*
Residue	79	9 (11.4)	NE (NE, NE)	43	3 (7.0)	NE (NE, NE)	1.61	0.48, 7.26	0.4590
Interaction p-value									0.7374

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubae_v3.sas ettesubae_v3aaj 25NOV2020:11:06 kvbv306

Table 3.4.10 PAOLA1: Summary of subgroup analysis of AE PT: Leukopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	22 (15.1)	NE (NE, NE)	78	5 (6.4)	NE (NE, NE)	2.38	0.97, 7.11	0.0574
Interval	99	21 (21.2)	NE (NE, NE)	45	6 (13.3)	NE (NE, NE)	1.58	0.68, 4.31	0.3043
Interaction p-value									0.5450
Myriad tumour BRCA mutation status									
tBRCAm	158	28 (17.7)	NE (NE, NE)	77	6 (7.8)	NE (NE, NE)	2.31	1.02, 6.18	0.0431*
Non-tBRCAm	97	18 (18.6)	NE (NE, NE)	54	5 (9.3)	NE (NE, NE)	2.05	0.82, 6.21	0.1318
Interaction p-value									0.8588
Status somatic BRCA mutations									
sBRCAm	22	7 (31.8)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	13 (19.7)	NE (NE, NE)	31	3 (9.7)	NE (NE, NE)	2.18	0.70, 9.50	0.1905
Non-BRCAm	41	10 (24.4)	NE (NE, NE)	22	3 (13.6)	NE (NE, NE)	1.87	0.57, 8.35	0.3171
Interaction p-value									0.8685

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.11 PAOLA1: Summary of subgroup analysis of AE PT: Lymphopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	23 (25.0)	NE (NE, NE)	48	2 (4.2)	NE (NE, NE)	5.95	1.76, 37.07	0.0020*
NED/CR [IDS]	74	22 (29.7)	NE (NE, NE)	38	3 (7.9)	NE (NE, NE)	4.41	1.53, 18.65	0.0041*
NED/CR [Chemo]	40	7 (17.5)	NE (NE, NE)	20	3 (15.0)	NE (NE, NE)	1.11	0.31, 5.14	0.8832
PR	49	8 (16.3)	NE (NE, NE)	25	2 (8.0)	NE (NE, NE)	2.12	0.53, 14.05	0.3086
Interaction p-value									0.3356
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	36 (24.0)	NE (NE, NE)	65	4 (6.2)	NE (NE, NE)	4.13	1.65, 13.82	0.0012*
non-tBRCAm	105	24 (22.9)	NE (NE, NE)	66	6 (9.1)	NE (NE, NE)	2.58	1.13, 6.97	0.0239*
Interaction p-value									0.4957
First line treatment outcome (eCRF)									
NED [PDS]	89	23 (25.8)	NE (NE, NE)	47	2 (4.3)	NE (NE, NE)	6.14	1.82, 38.23	0.0016*
NED/CR [IDS]	74	18 (24.3)	NE (NE, NE)	32	1 (3.1)	NE (NE, NE)	8.90	1.84,160.16	0.0030*
NED/CR [Chemo]	39	7 (17.9)	NE (NE, NE)	17	4 (23.5)	NE (NE, NE)	0.67	0.20, 2.56	0.5319
PR	50	11 (22.0)	NE (NE, NE)	34	3 (8.8)	NE (NE, NE)	2.65	0.83, 11.71	0.1053
Interaction p-value									0.0596
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	35 (23.8)	NE (NE, NE)	67	4 (6.0)	NE (NE, NE)	4.20	1.68, 14.05	0.0011*
non-tBRCAm	108	25 (23.1)	NE (NE, NE)	64	6 (9.4)	NE (NE, NE)	2.55	1.12, 6.87	0.0248*
Interaction p-value									0.4708
Age group									
<65 years	185	34 (18.4)	NE (NE, NE)	98	7 (7.1)	NE (NE, NE)	2.61	1.23, 6.44	0.0108*
>=65 years	70	26 (37.1)	NE (NE, NE)	33	3 (9.1)	NE (NE, NE)	4.55	1.60, 19.10	0.0026*
Interaction p-value									0.4413

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.11 PAOLA1: Summary of subgroup analysis of AE PT: Lymphopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	46 (25.3)	NE (NE, NE)	89	4 (4.5)	NE (NE, NE)	6.10	2.48, 20.22	<0.0001*
IV	73	14 (19.2)	NE (NE, NE)	42	6 (14.3)	NE (NE, NE)	1.27	0.51, 3.60	0.6153
Interaction p-value									0.0266*
Region									
Europe	245	56 (22.9)	NE (NE, NE)	125	7 (5.6)	NE (NE, NE)	4.29	2.09, 10.34	<0.0001*
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	0.67	0.15, 3.42	0.6072
Interaction p-value									0.0418*
ECOG performance status at Baseline									
(0) Normal activity	190	39 (20.5)	NE (NE, NE)	100	6 (6.0)	NE (NE, NE)	3.61	1.65, 9.49	0.0007*
(1) Restricted activity	61	20 (32.8)	NE (NE, NE)	30	4 (13.3)	NE (NE, NE)	2.43	0.92, 8.35	0.0766
Interaction p-value									0.5764
Baseline CA-125 value									
<=ULN	228	52 (22.8)	NE (NE, NE)	117	8 (6.8)	NE (NE, NE)	3.49	1.76, 7.96	0.0002*
>ULN	27	8 (29.6)	NE (NE, NE)	14	2 (14.3)	NE (NE, NE)	2.04	0.51, 13.49	0.3370
Interaction p-value									0.5531
Histological grade									
High grade	255	60 (23.5)	NE (NE, NE)	131	10 (7.6)	NE (NE, NE)	3.21	1.72, 6.67	0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	42 (25.3)	NE (NE, NE)	80	3 (3.8)	NE (NE, NE)	7.23	2.63, 29.84	<0.0001*
Residue	79	16 (20.3)	NE (NE, NE)	43	6 (14.0)	NE (NE, NE)	1.40	0.58, 3.92	0.4676
Interaction p-value									0.0266*

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubae_v3.sas ettesubae_v3aak 25NOV2020:11:06 kvbv306

Table 3.4.11 PAOLA1: Summary of subgroup analysis of AE PT: Lymphopenia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	30 (20.5)	NE (NE, NE)	78	3 (3.8)	NE (NE, NE)	5.35	1.91, 22.32	0.0006*
Interval	99	28 (28.3)	NE (NE, NE)	45	6 (13.3)	NE (NE, NE)	2.30	1.02, 6.15	0.0446*
Interaction p-value									0.2499
Myriad tumour BRCA mutation status									
tBRCAm	158	38 (24.1)	NE (NE, NE)	77	4 (5.2)	NE (NE, NE)	4.91	1.97, 16.39	0.0002*
Non-tBRCAm	97	22 (22.7)	NE (NE, NE)	54	6 (11.1)	NE (NE, NE)	2.07	0.89, 5.62	0.0932
Interaction p-value									0.2101
Status somatic BRCA mutations									
sBRCAm	22	8 (36.4)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	20 (30.3)	NE (NE, NE)	31	3 (9.7)	NE (NE, NE)	3.73	1.28, 15.82	0.0135*
Non-BRCAm	41	14 (34.1)	NE (NE, NE)	22	5 (22.7)	NE (NE, NE)	1.43	0.55, 4.43	0.4798
Interaction p-value									0.2291

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubae_v3.sas ettesubae_v3aak 25NOV2020:11:06 kvbv306

Table 3.4.12 PAOLA1: Summary of subgroup analysis of AE SOC: Gastrointestinal disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	64 (69.6)	0.9 (0.3, 2.5)	48	32 (66.7)	4.2 (1.8,12.5)	1.38	0.91, 2.13	0.1338
NED/CR [IDS]	74	64 (86.5)	0.5 (0.2, 1.4)	38	28 (73.7)	4.2 (1.4,10.0)	1.65	1.07, 2.61	0.0237*
NED/CR [Chemo]	40	29 (72.5)	0.6 (0.2, 8.7)	20	13 (65.0)	7.2 (0.9, NE)	1.39	0.74, 2.77	0.3150
PR	49	32 (65.3)	4.1 (0.3,15.7)	25	10 (40.0)	NE (NE, NE)	2.13	1.08, 4.56	0.0274*
Interaction p-value									0.7353
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	115 (76.7)	0.7 (0.4, 1.9)	65	39 (60.0)	7.7 (3.4,22.6)	1.75	1.23, 2.56	0.0016*
non-tBRCAm	105	74 (70.5)	1.0 (0.3, 3.3)	66	44 (66.7)	4.6 (2.1,10.6)	1.34	0.93, 1.96	0.1221
Interaction p-value									0.3071
First line treatment outcome (eCRF)									
NED [PDS]	89	62 (69.7)	0.9 (0.3, 2.7)	47	30 (63.8)	6.9 (2.1,13.0)	1.48	0.96, 2.31	0.0739
NED/CR [IDS]	74	61 (82.4)	0.6 (0.2, 1.6)	32	25 (78.1)	4.2 (1.4, 9.7)	1.50	0.95, 2.44	0.0797
NED/CR [Chemo]	39	28 (71.8)	0.6 (0.2, 9.7)	17	10 (58.8)	7.8 (0.5,19.0)	1.37	0.69, 2.97	0.3790
PR	50	36 (72.0)	2.0 (0.3, 9.0)	34	17 (50.0)	9.7 (3.4, NE)	1.84	1.05, 3.36	0.0325*
Interaction p-value									0.9145
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	113 (76.9)	0.8 (0.5, 1.9)	67	41 (61.2)	7.7 (2.9,14.4)	1.70	1.20, 2.46	0.0026*
non-tBRCAm	108	76 (70.4)	1.0 (0.3, 3.3)	64	42 (65.6)	4.8 (2.1,10.7)	1.38	0.95, 2.03	0.0899
Interaction p-value									0.4332
Age group									
<65 years	185	136 (73.5)	0.7 (0.3, 1.6)	98	59 (60.2)	7.8 (3.6,13.0)	1.69	1.25, 2.31	0.0006*
>=65 years	70	53 (75.7)	1.5 (0.4, 4.7)	33	24 (72.7)	3.5 (0.8,10.6)	1.21	0.76, 2.00	0.4297
Interaction p-value									0.2613

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.12 PAOLA1: Summary of subgroup analysis of AE SOC: Gastrointestinal disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	136 (74.7)	0.8 (0.4, 1.9)	89	61 (68.5)	4.6 (2.1, 9.7)	1.41	1.05, 1.92	0.0234*
IV	73	53 (72.6)	0.8 (0.3, 2.6)	42	22 (52.4)	10.7 (3.7, NE)	1.91	1.17, 3.20	0.0085*
Interaction p-value									0.3053
Region									
Europe	245	185 (75.5)	0.8 (0.4, 1.6)	125	79 (63.2)	6.9 (3.3,10.6)	1.59	1.22, 2.08	0.0004*
Japan	10	4 (40.0)	NE (NE, NE)	6	4 (66.7)	14.3 (1.4, NE)	0.69	0.16, 2.93	0.6036
Interaction p-value									0.2541
ECOG performance status at Baseline									
(0) Normal activity	190	139 (73.2)	0.8 (0.4, 2.0)	100	60 (60.0)	9.0 (3.3,14.4)	1.64	1.22, 2.24	0.0010*
(1) Restricted activity	61	47 (77.0)	1.4 (0.2, 4.7)	30	22 (73.3)	4.5 (2.7, 7.8)	1.30	0.79, 2.20	0.2988
Interaction p-value									0.4466
Baseline CA-125 value									
<=ULN	228	168 (73.7)	0.8 (0.4, 2.0)	117	74 (63.2)	6.9 (3.3,10.7)	1.52	1.16, 2.01	0.0023*
>ULN	27	21 (77.8)	0.7 (0.1, 4.8)	14	9 (64.3)	8.3 (0.6, NE)	1.81	0.85, 4.15	0.1256
Interaction p-value									0.6786
Histological grade									
High grade	255	189 (74.1)	0.8 (0.5, 1.9)	131	83 (63.4)	6.9 (3.4,10.6)	1.55	1.20, 2.01	0.0007*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	125 (75.3)	0.8 (0.3, 1.4)	80	56 (70.0)	4.2 (2.6,10.0)	1.47	1.08, 2.04	0.0140*
Residue	79	56 (70.9)	1.2 (0.3, 6.1)	43	24 (55.8)	9.0 (2.9, NE)	1.51	0.95, 2.48	0.0851
Interaction p-value									0.9384

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.12 PAOLA1: Summary of subgroup analysis of AE SOC: Gastrointestinal disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	99 (67.8)	1.1 (0.4, 3.7)	78	48 (61.5)	7.2 (2.8,13.0)	1.41	1.01, 2.01	0.0457*
Interval	99	82 (82.8)	0.6 (0.3, 1.4)	45	32 (71.1)	4.6 (1.4, 9.7)	1.55	1.04, 2.36	0.0321*
Interaction p-value									0.7413
Myriad tumour BRCA mutation status									
tBRCAm	158	119 (75.3)	0.7 (0.4, 1.9)	77	48 (62.3)	5.0 (2.8,13.0)	1.60	1.15, 2.26	0.0049*
Non-tBRCAm	97	70 (72.2)	1.3 (0.3, 3.4)	54	35 (64.8)	7.7 (2.6,11.3)	1.46	0.98, 2.22	0.0611
Interaction p-value									0.7445
Status somatic BRCA mutations									
sBRCAm	22	16 (72.7)	0.6 (0.1, 9.0)	7	3 (42.9)	NE (NE, NE)	2.10	0.70, 9.03	0.2016
gBRCAm	66	56 (84.8)	0.6 (0.2, 1.6)	31	21 (67.7)	4.6 (2.8,22.6)	1.92	1.18, 3.26	0.0081*
Non-BRCAm	41	30 (73.2)	1.4 (0.2, 3.4)	22	15 (68.2)	4.6 (0.9,10.7)	1.39	0.76, 2.65	0.2943
Interaction p-value									0.6885

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.13 PAOLA1: Summary of subgroup analysis of AE PT: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	23 (25.0)	NE (NE, NE)	48	7 (14.6)	NE (NE, NE)	1.80	0.81, 4.54	0.1539
NED/CR [IDS]	74	18 (24.3)	NE (NE, NE)	38	6 (15.8)	NE (NE, NE)	1.58	0.66, 4.37	0.3133
NED/CR [Chemo]	40	4 (10.0)	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	2.00	0.30, 39.05	0.5097
PR	49	9 (18.4)	NE (NE, NE)	25	2 (8.0)	NE (NE, NE)	2.50	0.64, 16.40	0.2001
Interaction p-value									0.9655
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	34 (22.7)	NE (NE, NE)	65	7 (10.8)	NE (NE, NE)	2.21	1.04, 5.43	0.0389*
non-tBRCAm	105	20 (19.0)	NE (NE, NE)	66	9 (13.6)	NE (NE, NE)	1.45	0.68, 3.36	0.3420
Interaction p-value									0.4680
First line treatment outcome (eCRF)									
NED [PDS]	89	21 (23.6)	NE (NE, NE)	47	7 (14.9)	NE (NE, NE)	1.68	0.75, 4.25	0.2189
NED/CR [IDS]	74	17 (23.0)	NE (NE, NE)	32	4 (12.5)	NE (NE, NE)	1.94	0.72, 6.75	0.2033
NED/CR [Chemo]	39	5 (12.8)	NE (NE, NE)	17	2 (11.8)	NE (NE, NE)	1.08	0.23, 7.56	0.9235
PR	50	9 (18.0)	NE (NE, NE)	34	3 (8.8)	NE (NE, NE)	2.07	0.62, 9.34	0.2495
Interaction p-value									0.9370
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	33 (22.4)	NE (NE, NE)	67	7 (10.4)	NE (NE, NE)	2.25	1.06, 5.54	0.0348*
non-tBRCAm	108	21 (19.4)	NE (NE, NE)	64	9 (14.1)	NE (NE, NE)	1.44	0.68, 3.31	0.3516
Interaction p-value									0.4360
Age group									
<65 years	185	43 (23.2)	NE (NE, NE)	98	10 (10.2)	NE (NE, NE)	2.44	1.28, 5.13	0.0059*
>=65 years	70	11 (15.7)	NE (NE, NE)	33	6 (18.2)	NE (NE, NE)	0.84	0.32, 2.43	0.7286
Interaction p-value									0.0909

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.13 PAOLA1: Summary of subgroup analysis of AE PT: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	41 (22.5)	NE (NE, NE)	89	12 (13.5)	NE (NE, NE)	1.79	0.97, 3.57	0.0621
IV	73	13 (17.8)	NE (NE, NE)	42	4 (9.5)	NE (NE, NE)	1.83	0.65, 6.49	0.2693
Interaction p-value									0.9770
Region									
Europe	245	54 (22.0)	NE (NE, NE)	125	14 (11.2)	NE (NE, NE)	2.07	1.18, 3.87	0.0099*
Japan	10	0	NE (NE, NE)	6	2 (33.3)	24.0 (1.4, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	41 (21.6)	NE (NE, NE)	100	11 (11.0)	NE (NE, NE)	2.07	1.10, 4.23	0.0225*
(1) Restricted activity	61	13 (21.3)	NE (NE, NE)	30	5 (16.7)	NE (NE, NE)	1.29	0.48, 4.02	0.6254
Interaction p-value									0.4559
Baseline CA-125 value									
<=ULN	228	43 (18.9)	NE (NE, NE)	117	15 (12.8)	NE (NE, NE)	1.51	0.86, 2.81	0.1553
>ULN	27	11 (40.7)	NE (NE, NE)	14	1 (7.1)	NE (NE, NE)	6.64	1.29,121.39	0.0195*
Interaction p-value									0.1091
Histological grade									
High grade	255	54 (21.2)	NE (NE, NE)	131	16 (12.2)	NE (NE, NE)	1.81	1.06, 3.26	0.0293*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	40 (24.1)	NE (NE, NE)	80	11 (13.8)	NE (NE, NE)	1.87	0.99, 3.82	0.0533
Residue	79	12 (15.2)	NE (NE, NE)	43	5 (11.6)	NE (NE, NE)	1.30	0.48, 4.09	0.6166
Interaction p-value									0.5715

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.13 PAOLA1: Summary of subgroup analysis of AE PT: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	29 (19.9)	NE (NE, NE)	78	9 (11.5)	NE (NE, NE)	1.82	0.89, 4.07	0.1014
Interval	99	23 (23.2)	NE (NE, NE)	45	7 (15.6)	NE (NE, NE)	1.51	0.68, 3.81	0.3230
Interaction p-value									0.7498
Myriad tumour BRCA mutation status									
tBRCAm	158	36 (22.8)	NE (NE, NE)	77	8 (10.4)	NE (NE, NE)	2.31	1.13, 5.36	0.0199*
Non-tBRCAm	97	18 (18.6)	NE (NE, NE)	54	8 (14.8)	NE (NE, NE)	1.28	0.58, 3.12	0.5544
Interaction p-value									0.3061
Status somatic BRCA mutations									
sBRCAm	22	4 (18.2)	NE (NE, NE)	7	1 (14.3)	NE (NE, NE)	1.13	0.17, 22.09	0.9129
gBRCAm	66	15 (22.7)	NE (NE, NE)	31	4 (12.9)	NE (NE, NE)	1.93	0.70, 6.78	0.2154
Non-BRCAm	41	5 (12.2)	NE (NE, NE)	22	4 (18.2)	NE (NE, NE)	0.61	0.16, 2.47	0.4698
Interaction p-value									0.4193

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.14 PAOLA1: Summary of subgroup analysis of AE PT: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	52 (56.5)	3.7 (0.6, NE)	48	11 (22.9)	NE (NE, NE)	3.34	1.81, 6.76	<0.0001*
NED/CR [IDS]	74	48 (64.9)	1.4 (0.3, 4.3)	38	13 (34.2)	NE (NE, NE)	2.44	1.36, 4.69	0.0022*
NED/CR [Chemo]	40	21 (52.5)	0.6 (0.2, NE)	20	2 (10.0)	NE (NE, NE)	7.71	2.26, 48.22	0.0003*
PR	49	23 (46.9)	NE (NE, NE)	25	4 (16.0)	NE (NE, NE)	3.63	1.39, 12.37	0.0064*
Interaction p-value									0.4609
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	87 (58.0)	2.6 (0.7,16.0)	65	12 (18.5)	NE (NE, NE)	4.23	2.41, 8.15	<0.0001*
non-tBRCAm	105	57 (54.3)	3.3 (0.3, NE)	66	18 (27.3)	NE (NE, NE)	2.60	1.56, 4.55	0.0002*
Interaction p-value									0.2328
First line treatment outcome (eCRF)									
NED [PDS]	89	51 (57.3)	2.7 (0.5, NE)	47	10 (21.3)	NE (NE, NE)	3.69	1.95, 7.71	<0.0001*
NED/CR [IDS]	74	49 (66.2)	1.0 (0.3, 3.4)	32	10 (31.3)	NE (NE, NE)	2.89	1.53, 6.05	0.0007*
NED/CR [Chemo]	39	19 (48.7)	NE (NE, NE)	17	2 (11.8)	NE (NE, NE)	5.91	1.71, 37.10	0.0027*
PR	50	24 (48.0)	14.5 (2.1, NE)	34	7 (20.6)	NE (NE, NE)	2.71	1.23, 6.82	0.0121*
Interaction p-value									0.7610
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	85 (57.8)	2.9 (0.8,16.0)	67	13 (19.4)	NE (NE, NE)	3.97	2.30, 7.47	<0.0001*
non-tBRCAm	108	59 (54.6)	2.7 (0.3, NE)	64	17 (26.6)	NE (NE, NE)	2.72	1.62, 4.81	<0.0001*
Interaction p-value									0.3475
Age group									
<65 years	185	109 (58.9)	2.1 (0.6, 8.0)	98	21 (21.4)	NE (NE, NE)	3.74	2.39, 6.13	<0.0001*
>=65 years	70	35 (50.0)	19.7 (0.8, NE)	33	9 (27.3)	NE (NE, NE)	2.28	1.15, 5.06	0.0175*
Interaction p-value									0.2774

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.14 PAOLA1: Summary of subgroup analysis of AE PT: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	100 (54.9)	3.7 (0.8, NE)	89	25 (28.1)	NE (NE, NE)	2.54	1.67, 4.03	<0.0001*
IV	73	44 (60.3)	2.1 (0.3, NE)	42	5 (11.9)	NE (NE, NE)	6.98	3.04, 20.18	<0.0001*
Interaction p-value									0.0370*
Region									
Europe	245	141 (57.6)	2.6 (0.8, 9.8)	125	30 (24.0)	NE (NE, NE)	3.19	2.18, 4.82	<0.0001*
Japan	10	3 (30.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	113 (59.5)	2.0 (0.5, 5.4)	100	19 (19.0)	NE (NE, NE)	4.31	2.72, 7.24	<0.0001*
(1) Restricted activity	61	30 (49.2)	19.7 (0.8, NE)	30	11 (36.7)	14.1 (10.0, NE)	1.61	0.83, 3.35	0.1650
Interaction p-value									0.0266*
Baseline CA-125 value									
<=ULN	228	129 (56.6)	2.7 (0.8,14.5)	117	28 (23.9)	NE (NE, NE)	3.13	2.11, 4.81	<0.0001*
>ULN	27	15 (55.6)	4.1 (0.1, NE)	14	2 (14.3)	NE (NE, NE)	5.24	1.48, 33.26	0.0076*
Interaction p-value									0.4854
Histological grade									
High grade	255	144 (56.5)	2.9 (0.8,14.5)	131	30 (22.9)	NE (NE, NE)	3.27	2.24, 4.94	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	101 (60.8)	1.4 (0.4, 5.0)	80	21 (26.3)	NE (NE, NE)	3.17	2.02, 5.22	<0.0001*
Residue	79	39 (49.4)	14.5 (0.6, NE)	43	9 (20.9)	NE (NE, NE)	2.95	1.50, 6.50	0.0012*
Interaction p-value									0.8703

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.14 PAOLA1: Summary of subgroup analysis of AE PT: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	77 (52.7)	5.4 (0.6, NE)	78	14 (17.9)	NE (NE, NE)	4.00	2.34, 7.37	<0.0001*
Interval	99	63 (63.6)	1.9 (0.4, 5.0)	45	16 (35.6)	NE (NE, NE)	2.26	1.34, 4.05	0.0018*
Interaction p-value									0.1570
Myriad tumour BRCA mutation status									
tBRCAm	158	92 (58.2)	2.3 (0.7,14.5)	77	15 (19.5)	NE (NE, NE)	4.00	2.39, 7.20	<0.0001*
Non-tBRCAm	97	52 (53.6)	3.4 (0.4, NE)	54	15 (27.8)	NE (NE, NE)	2.52	1.45, 4.64	0.0007*
Interaction p-value									0.2519
Status somatic BRCA mutations									
sBRCAm	22	13 (59.1)	2.2 (0.1, NE)	7	2 (28.6)	NE (NE, NE)	2.45	0.68, 15.66	0.1906
gBRCAm	66	42 (63.6)	2.1 (0.3, 6.1)	31	6 (19.4)	NE (NE, NE)	4.61	2.11, 12.11	<0.0001*
Non-BRCAm	41	22 (53.7)	2.7 (0.2, NE)	22	6 (27.3)	NE (NE, NE)	2.56	1.10, 6.96	0.0275*
Interaction p-value									0.5900

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.15 PAOLA1: Summary of subgroup analysis of AE PT: Dysgeusia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	11 (12.0)	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	6 (8.1)	NE (NE, NE)	38	1 (2.6)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	4 (10.0)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	2 (4.1)	NE (NE, NE)	25	1 (4.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	15 (10.0)	NE (NE, NE)	65	1 (1.5)	NE (NE, NE)	6.73	1.36,121.65	0.0144*
non-tBRCAm	105	8 (7.6)	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	5.26	0.96, 97.53	0.0560
Interaction p-value									0.8676
First line treatment outcome (eCRF)									
NED [PDS]	89	9 (10.1)	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	8 (10.8)	NE (NE, NE)	32	1 (3.1)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	3 (7.7)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	2 (4.0)	NE (NE, NE)	34	1 (2.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	15 (10.2)	NE (NE, NE)	67	1 (1.5)	NE (NE, NE)	7.08	1.44,128.03	0.0114*
non-tBRCAm	108	8 (7.4)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	4.95	0.91, 91.82	0.0672
Interaction p-value									0.8091
Age group									
<65 years	185	15 (8.1)	NE (NE, NE)	98	2 (2.0)	NE (NE, NE)	4.11	1.16, 26.06	0.0262*
>=65 years	70	8 (11.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.15 PAOLA1: Summary of subgroup analysis of AE PT: Dysgeusia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	18 (9.9)	NE (NE, NE)	89	2 (2.2)	NE (NE, NE)	4.58	1.32, 28.83	0.0131*
IV	73	5 (6.8)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	22 (9.0)	NE (NE, NE)	125	2 (1.6)	NE (NE, NE)	5.82	1.72, 36.33	0.0025*
Japan	10	1 (10.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	19 (10.0)	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	5.27	1.53, 33.04	0.0056*
(1) Restricted activity	61	4 (6.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	21 (9.2)	NE (NE, NE)	117	2 (1.7)	NE (NE, NE)	5.64	1.66, 35.27	0.0032*
>ULN	27	2 (7.4)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	23 (9.0)	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	6.14	1.82, 38.28	0.0016*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	18 (10.8)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	9.23	1.91,165.96	0.0024*
Residue	79	4 (5.1)	NE (NE, NE)	43	1 (2.3)	NE (NE, NE)	2.17	0.32, 42.39	0.4576
Interaction p-value									0.3524

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.15 PAOLA1: Summary of subgroup analysis of AE PT: Dysgeusia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	13 (8.9)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	7.23	1.44,131.32	0.0117*
Interval	99	9 (9.1)	NE (NE, NE)	45	1 (2.2)	NE (NE, NE)	4.24	0.80, 78.18	0.0988
Interaction p-value									0.7194
Myriad tumour BRCA mutation status									
tBRCAm	158	14 (8.9)	NE (NE, NE)	77	1 (1.3)	NE (NE, NE)	7.05	1.42,127.64	0.0124*
Non-tBRCAm	97	9 (9.3)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	5.27	0.99, 97.09	0.0518
Interaction p-value									0.8439
Status somatic BRCA mutations									
sBRCAm	22	2 (9.1)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	7 (10.6)	NE (NE, NE)	31	1 (3.2)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	5 (12.2)	NE (NE, NE)	22	1 (4.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.16 PAOLA1: Summary of subgroup analysis of AE PT: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	45 (48.9)	13.8 (6.7, NE)	48	26 (54.2)	10.4 (4.2, NE)	0.93	0.58, 1.53	0.7847
NED/CR [IDS]	74	34 (45.9)	16.6 (6.9, NE)	38	22 (57.9)	4.9 (2.1, NE)	0.67	0.39, 1.15	0.1447
NED/CR [Chemo]	40	20 (50.0)	10.1 (3.4, NE)	20	13 (65.0)	4.1 (0.8, NE)	0.75	0.38, 1.54	0.4238
PR	49	23 (46.9)	16.6 (4.4, NE)	25	17 (68.0)	2.8 (0.7,11.3)	0.49	0.26, 0.94	0.0310*
Interaction p-value									0.4534
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	68 (45.3)	NE (NE, NE)	65	40 (61.5)	5.6 (2.9,11.1)	0.65	0.44, 0.97	0.0344*
non-tBRCAm	105	54 (51.4)	8.3 (5.7, NE)	66	38 (57.6)	4.3 (2.2, NE)	0.84	0.56, 1.29	0.4278
Interaction p-value									0.3673
First line treatment outcome (eCRF)									
NED [PDS]	89	43 (48.3)	11.1 (6.7, NE)	47	25 (53.2)	11.0 (4.2, NE)	0.95	0.59, 1.58	0.8485
NED/CR [IDS]	74	31 (41.9)	NE (NE, NE)	32	17 (53.1)	6.9 (2.8, NE)	0.71	0.40, 1.31	0.2679
NED/CR [Chemo]	39	22 (56.4)	3.9 (0.7, NE)	17	12 (70.6)	4.1 (0.8, NE)	0.89	0.45, 1.86	0.7482
PR	50	25 (50.0)	16.6 (5.6, NE)	34	23 (67.6)	2.1 (0.7, 5.6)	0.46	0.26, 0.82	0.0087*
Interaction p-value									0.2677
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	66 (44.9)	NE (NE, NE)	67	40 (59.7)	6.9 (3.3,11.3)	0.67	0.45, 1.002	0.0509
non-tBRCAm	108	56 (51.9)	8.3 (6.2, NE)	64	38 (59.4)	4.2 (2.1, NE)	0.81	0.54, 1.24	0.3299
Interaction p-value									0.5067
Age group									
<65 years	185	80 (43.2)	NE (NE, NE)	98	54 (55.1)	8.1 (4.1, NE)	0.72	0.51, 1.02	0.0679
>=65 years	70	42 (60.0)	5.7 (2.8,14.1)	33	24 (72.7)	2.8 (1.4, 5.4)	0.69	0.42, 1.16	0.1567
Interaction p-value									0.8877

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.16 PAOLA1: Summary of subgroup analysis of AE PT: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	85 (46.7)	16.6 (8.3, NE)	89	53 (59.6)	6.9 (4.1,12.6)	0.74	0.53, 1.05	0.0879
IV	73	37 (50.7)	9.7 (5.6, NE)	42	25 (59.5)	3.4 (2.1, NE)	0.70	0.43, 1.19	0.1841
Interaction p-value									0.8823
Region									
Europe	245	119 (48.6)	13.8 (8.3, NE)	125	72 (57.6)	5.5 (3.5,11.1)	0.78	0.58, 1.04	0.0938
Japan	10	3 (30.0)	NE (NE, NE)	6	6 (100)	2.1 (0.3,24.3)	0.19	0.04, 0.70	0.0135*
Interaction p-value									0.0399*
ECOG performance status at Baseline									
(0) Normal activity	190	86 (45.3)	NE (NE, NE)	100	59 (59.0)	4.2 (2.8, 7.6)	0.67	0.48, 0.94	0.0210*
(1) Restricted activity	61	33 (54.1)	8.3 (5.1, NE)	30	19 (63.3)	10.4 (2.8,12.6)	0.87	0.50, 1.55	0.6215
Interaction p-value									0.4451
Baseline CA-125 value									
<=ULN	228	108 (47.4)	16.6 (8.3, NE)	117	70 (59.8)	5.4 (3.3,11.1)	0.73	0.54, 0.99	0.0414*
>ULN	27	14 (51.9)	6.9 (2.8, NE)	14	8 (57.1)	4.3 (0.7, NE)	0.72	0.31, 1.79	0.4585
Interaction p-value									0.9714
Histological grade									
High grade	255	122 (47.8)	14.1 (8.3, NE)	131	78 (59.5)	5.4 (3.3,11.0)	0.73	0.55, 0.97	0.0308*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	75 (45.2)	NE (NE, NE)	80	43 (53.8)	10.4 (4.2, NE)	0.82	0.57, 1.21	0.3190
Residue	79	40 (50.6)	11.1 (3.5, NE)	43	27 (62.8)	4.1 (2.1,11.3)	0.69	0.42, 1.13	0.1399
Interaction p-value									0.5643

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.16 PAOLA1: Summary of subgroup analysis of AE PT: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	69 (47.3)	13.8 (7.6, NE)	78	45 (57.7)	7.6 (4.2,24.3)	0.81	0.56, 1.19	0.2794
Interval	99	46 (46.5)	16.6 (7.5, NE)	45	25 (55.6)	5.6 (2.8, NE)	0.72	0.45, 1.19	0.1998
Interaction p-value									0.7137
Myriad tumour BRCA mutation status									
tBRCAm	158	75 (47.5)	16.6 (8.4, NE)	77	45 (58.4)	6.9 (3.5,11.3)	0.73	0.51, 1.07	0.1017
Non-tBRCAm	97	47 (48.5)	8.3 (6.6, NE)	54	33 (61.1)	4.3 (2.1, NE)	0.73	0.47, 1.14	0.1664
Interaction p-value									0.9887
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	NE (NE, NE)	7	3 (42.9)	NE (NE, NE)	0.88	0.27, 3.94	0.8526
gBRCAm	66	29 (43.9)	NE (NE, NE)	31	19 (61.3)	6.9 (3.3, NE)	0.66	0.37, 1.19	0.1607
Non-BRCAm	41	20 (48.8)	10.6 (6.2, NE)	22	14 (63.6)	3.1 (0.8, NE)	0.60	0.31, 1.22	0.1552
Interaction p-value									0.8725

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.17 PAOLA1: Summary of subgroup analysis of AE PT: Gastroenteritis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	3 (3.3)	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	5 (6.8)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	4 (10.0)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	8 (5.3)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	5 (4.8)	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	3 (3.4)	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	6 (8.1)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	3 (7.7)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	1 (2.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	7 (4.8)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	6 (5.6)	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	7 (3.8)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	6 (8.6)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.17 PAOLA1: Summary of subgroup analysis of AE PT: Gastroenteritis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	10 (5.5)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	3 (4.1)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	13 (5.3)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	9 (4.7)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	4 (6.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	13 (5.7)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	13 (5.1)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	9 (5.4)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	3 (3.8)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.17 PAOLA1: Summary of subgroup analysis of AE PT: Gastroenteritis
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	5 (3.4)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	7 (7.1)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	8 (5.1)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	5 (5.2)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	22	0	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	6 (9.1)	NE (NE, NE)	31	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	2 (4.9)	NE (NE, NE)	22	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubae_v3.sas ettesubae_v3aaq 25NOV2020:11:06 kvbv306

Table 3.4.18 PAOLA1: Summary of subgroup analysis of AE PT: Blood creatinine increased
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 6 (6.5)	NE (NE, NE)	48 0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 3 (4.1)	NE (NE, NE)	38 1 (2.6)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 4 (10.0)	NE (NE, NE)	20 0	NE (NE, NE)	NC	NC	NC
PR	49 0	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 7 (4.7)	NE (NE, NE)	65 1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 6 (5.7)	NE (NE, NE)	66 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 6 (6.7)	NE (NE, NE)	47 0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 3 (4.1)	NE (NE, NE)	32 1 (3.1)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 3 (7.7)	NE (NE, NE)	17 0	NE (NE, NE)	NC	NC	NC
PR	50 1 (2.0)	NE (NE, NE)	34 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 7 (4.8)	NE (NE, NE)	67 1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 6 (5.6)	NE (NE, NE)	64 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 6 (3.2)	NE (NE, NE)	98 1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70 7 (10.0)	NE (NE, NE)	33 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.18 PAOLA1: Summary of subgroup analysis of AE PT: Blood creatinine increased
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	11 (6.0)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	5.38	1.05, 98.34	0.0430*
IV	73	2 (2.7)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	13 (5.3)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	10 (5.3)	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	5.37	1.03, 98.48	0.0458*
(1) Restricted activity	61	3 (4.9)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	12 (5.3)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	6.01	1.18,109.57	0.0274*
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	13 (5.1)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	6.53	1.30,118.62	0.0185*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	9 (5.4)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	4.48	0.84, 82.51	0.0850
Residue	79	4 (5.1)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.18 PAOLA1: Summary of subgroup analysis of AE PT: Blood creatinine increased
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	9 (6.2)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	4 (4.0)	NE (NE, NE)	45	1 (2.2)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	7 (4.4)	NE (NE, NE)	77	1 (1.3)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	6 (6.2)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	22	1 (4.5)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	2 (3.0)	NE (NE, NE)	31	1 (3.2)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	1 (2.4)	NE (NE, NE)	22	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.19 PAOLA1: Summary of subgroup analysis of SAE
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	23 (25.0)	NE (NE, NE)	48	15 (31.3)	NE (NE, NE)	0.69	0.36, 1.35	0.2723
NED/CR [IDS]	74	20 (27.0)	NE (NE, NE)	38	9 (23.7)	NE (NE, NE)	1.06	0.50, 2.46	0.8792
NED/CR [Chemo]	40	16 (40.0)	NE (NE, NE)	20	10 (50.0)	15.6 (4.2, NE)	0.71	0.33, 1.63	0.4065
PR	49	14 (28.6)	NE (NE, NE)	25	11 (44.0)	17.3 (6.7, NE)	0.61	0.28, 1.38	0.2283
Interaction p-value									0.7722
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	45 (30.0)	NE (NE, NE)	65	24 (36.9)	NE (NE, NE)	0.71	0.43, 1.18	0.1777
non-tBRCAm	105	28 (26.7)	NE (NE, NE)	66	21 (31.8)	NE (NE, NE)	0.80	0.45, 1.42	0.4346
Interaction p-value									0.7532
First line treatment outcome (eCRF)									
NED [PDS]	89	23 (25.8)	NE (NE, NE)	47	14 (29.8)	NE (NE, NE)	0.78	0.41, 1.56	0.4716
NED/CR [IDS]	74	21 (28.4)	NE (NE, NE)	32	8 (25.0)	NE (NE, NE)	1.12	0.52, 2.70	0.7790
NED/CR [Chemo]	39	13 (33.3)	NE (NE, NE)	17	9 (52.9)	10.6 (4.2, NE)	0.56	0.24, 1.36	0.1954
PR	50	16 (32.0)	NE (NE, NE)	34	13 (38.2)	17.3 (8.5, NE)	0.71	0.34, 1.51	0.3662
Interaction p-value									0.6997
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	43 (29.3)	NE (NE, NE)	67	24 (35.8)	NE (NE, NE)	0.71	0.43, 1.18	0.1809
non-tBRCAm	108	30 (27.8)	NE (NE, NE)	64	21 (32.8)	NE (NE, NE)	0.81	0.47, 1.43	0.4630
Interaction p-value									0.7191
Age group									
<65 years	185	49 (26.5)	NE (NE, NE)	98	35 (35.7)	NE (NE, NE)	0.65	0.42, 1.02	0.0590
>=65 years	70	24 (34.3)	NE (NE, NE)	33	10 (30.3)	NE (NE, NE)	1.10	0.54, 2.41	0.8017
Interaction p-value									0.2270

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.19 PAOLA1: Summary of subgroup analysis of SAE
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	55 (30.2)	NE (NE, NE)	89	28 (31.5)	NE (NE, NE)	0.93	0.60, 1.49	0.7721
IV	73	18 (24.7)	NE (NE, NE)	42	17 (40.5)	16.2 (8.3, NE)	0.46	0.23, 0.90	0.0233*
Interaction p-value									0.0822
Region									
Europe	245	70 (28.6)	NE (NE, NE)	125	44 (35.2)	NE (NE, NE)	0.72	0.50, 1.06	0.0959
Japan	10	3 (30.0)	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	2.25	0.29, 45.51	0.4566
Interaction p-value									0.2973
ECOG performance status at Baseline									
(0) Normal activity	190	46 (24.2)	NE (NE, NE)	100	35 (35.0)	NE (NE, NE)	0.63	0.41, 0.99	0.0457*
(1) Restricted activity	61	26 (42.6)	NE (NE, NE)	30	10 (33.3)	NE (NE, NE)	1.10	0.55, 2.39	0.8010
Interaction p-value									0.1985
Baseline CA-125 value									
<=ULN	228	64 (28.1)	NE (NE, NE)	117	42 (35.9)	NE (NE, NE)	0.71	0.48, 1.06	0.0914
>ULN	27	9 (33.3)	NE (NE, NE)	14	3 (21.4)	NE (NE, NE)	1.33	0.40, 5.98	0.6647
Interaction p-value									0.3516
Histological grade									
High grade	255	73 (28.6)	NE (NE, NE)	131	45 (34.4)	NE (NE, NE)	0.75	0.52, 1.10	0.1416
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	44 (26.5)	NE (NE, NE)	80	23 (28.8)	NE (NE, NE)	0.86	0.52, 1.44	0.5516
Residue	79	22 (27.8)	NE (NE, NE)	43	19 (44.2)	15.6 (9.1, NE)	0.52	0.28, 0.97	0.0406*
Interaction p-value									0.2183

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.19 PAOLA1: Summary of subgroup analysis of SAE
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	39 (26.7)	NE (NE, NE)	78	30 (38.5)	NE (NE, NE)	0.61	0.38, 0.996	0.0482*
Interval	99	27 (27.3)	NE (NE, NE)	45	12 (26.7)	NE (NE, NE)	0.93	0.48, 1.91	0.8425
Interaction p-value									0.3182
Myriad tumour BRCA mutation status									
tBRCAm	158	49 (31.0)	NE (NE, NE)	77	29 (37.7)	NE (NE, NE)	0.72	0.46, 1.16	0.1769
Non-tBRCAm	97	24 (24.7)	NE (NE, NE)	54	16 (29.6)	NE (NE, NE)	0.79	0.42, 1.51	0.4639
Interaction p-value									0.8343
Status somatic BRCA mutations									
sBRCAm	22	7 (31.8)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	20 (30.3)	NE (NE, NE)	31	12 (38.7)	NE (NE, NE)	0.75	0.37, 1.58	0.4343
Non-BRCAm	41	9 (22.0)	NE (NE, NE)	22	5 (22.7)	NE (NE, NE)	0.90	0.31, 2.95	0.8579
Interaction p-value									0.7760

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.20 PAOLA1: Summary of subgroup analysis of SAE SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 5 (5.4)	NE (NE, NE)	48 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 4 (5.4)	NE (NE, NE)	38 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 3 (7.5)	NE (NE, NE)	20 0	NE (NE, NE)	NC	NC	NC
PR	49 5 (10.2)	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 9 (6.0)	NE (NE, NE)	65 0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 8 (7.6)	NE (NE, NE)	66 1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 5 (5.6)	NE (NE, NE)	47 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 6 (8.1)	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 2 (5.1)	NE (NE, NE)	17 0	NE (NE, NE)	NC	NC	NC
PR	50 4 (8.0)	NE (NE, NE)	34 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 9 (6.1)	NE (NE, NE)	67 0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 8 (7.4)	NE (NE, NE)	64 1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 11 (5.9)	NE (NE, NE)	98 1 (1.0)	NE (NE, NE)	5.91	1.15,108.03	0.0307*
>=65 years	70 6 (8.6)	NE (NE, NE)	33 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.20 PAOLA1: Summary of subgroup analysis of SAE SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	9 (4.9)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	4.68	0.88, 86.36	0.0744
IV	73	8 (11.0)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	15 (6.1)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	7.70	1.56,139.17	0.0078*
Japan	10	2 (20.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	12 (6.3)	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	6.46	1.27,117.59	0.0204*
(1) Restricted activity	61	5 (8.2)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	15 (6.6)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	8.04	1.63,145.46	0.0062*
>ULN	27	2 (7.4)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	17 (6.7)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	8.91	1.83,160.63	0.0031*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	11 (6.6)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	5.60	1.09,102.30	0.0374*
Residue	79	3 (3.8)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.20 PAOLA1: Summary of subgroup analysis of SAE SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	8 (5.5)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	6 (6.1)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	12 (7.6)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	5 (5.2)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	22	3 (13.6)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	6 (9.1)	NE (NE, NE)	31	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	2 (4.9)	NE (NE, NE)	22	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.21 PAOLA1: Summary of subgroup analysis of SAE PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 5 (5.4)	NE (NE, NE)	48 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 2 (2.7)	NE (NE, NE)	38 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 2 (5.0)	NE (NE, NE)	20 0	NE (NE, NE)	NC	NC	NC
PR	49 4 (8.2)	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 6 (4.0)	NE (NE, NE)	65 0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 7 (6.7)	NE (NE, NE)	66 1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 5 (5.6)	NE (NE, NE)	47 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 3 (4.1)	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 2 (5.1)	NE (NE, NE)	17 0	NE (NE, NE)	NC	NC	NC
PR	50 3 (6.0)	NE (NE, NE)	34 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 6 (4.1)	NE (NE, NE)	67 0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 7 (6.5)	NE (NE, NE)	64 1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 9 (4.9)	NE (NE, NE)	98 1 (1.0)	NE (NE, NE)	4.92	0.92, 90.72	0.0642
>=65 years	70 4 (5.7)	NE (NE, NE)	33 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.21 PAOLA1: Summary of subgroup analysis of SAE PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	8 (4.4)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	5 (6.8)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	11 (4.5)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	5.79	1.13,105.87	0.0329*
Japan	10	2 (20.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	9 (4.7)	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	4.98	0.93, 91.79	0.0619
(1) Restricted activity	61	4 (6.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	12 (5.3)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	6.49	1.28,118.23	0.0199*
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	13 (5.1)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	6.96	1.39,126.39	0.0139*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	8 (4.8)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	3 (3.8)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.21 PAOLA1: Summary of subgroup analysis of SAE PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	8 (5.5)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	3 (3.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	8 (5.1)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	5 (5.2)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	22	2 (9.1)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	3 (4.5)	NE (NE, NE)	31	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	2 (4.9)	NE (NE, NE)	22	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubae_v3.sas ettesubae_v3aau 25NOV2020:11:06 kvbv306

Table 3.4.22 PAOLA1: Summary of subgroup analysis of AE leading to discontinuation of treatment
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	16 (17.4)	NE (NE, NE)	48	3 (6.3)	NE (NE, NE)	2.64	0.88, 11.36	0.0873
NED/CR [IDS]	74	21 (28.4)	NE (NE, NE)	38	4 (10.5)	NE (NE, NE)	2.65	1.01, 9.09	0.0479*
NED/CR [Chemo]	40	7 (17.5)	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	3.36	0.60, 62.84	0.1909
PR	49	6 (12.2)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									0.9775
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	31 (20.7)	NE (NE, NE)	65	3 (4.6)	NE (NE, NE)	4.36	1.56, 18.16	0.0030*
non-tBRCAm	105	19 (18.1)	NE (NE, NE)	66	5 (7.6)	NE (NE, NE)	2.35	0.94, 7.08	0.0678
Interaction p-value									0.4244
First line treatment outcome (eCRF)									
NED [PDS]	89	17 (19.1)	NE (NE, NE)	47	3 (6.4)	NE (NE, NE)	2.91	0.98, 12.47	0.0556
NED/CR [IDS]	74	21 (28.4)	NE (NE, NE)	32	3 (9.4)	NE (NE, NE)	3.06	1.05, 12.97	0.0384*
NED/CR [Chemo]	39	6 (15.4)	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	2.49	0.42, 46.99	0.3500
PR	50	6 (12.0)	NE (NE, NE)	34	1 (2.9)	NE (NE, NE)	3.88	0.66, 73.29	0.1461
Interaction p-value									0.9928
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	31 (21.1)	NE (NE, NE)	67	3 (4.5)	NE (NE, NE)	4.57	1.63, 19.06	0.0021*
non-tBRCAm	108	19 (17.6)	NE (NE, NE)	64	5 (7.8)	NE (NE, NE)	2.21	0.89, 6.68	0.0905
Interaction p-value									0.3481
Age group									
<65 years	185	34 (18.4)	NE (NE, NE)	98	4 (4.1)	NE (NE, NE)	4.43	1.76, 14.83	0.0007*
>=65 years	70	16 (22.9)	NE (NE, NE)	33	4 (12.1)	NE (NE, NE)	1.78	0.65, 6.23	0.2750
Interaction p-value									0.2418

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.22 PAOLA1: Summary of subgroup analysis of AE leading to discontinuation of treatment
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	39 (21.4)	NE (NE, NE)	89	6 (6.7)	NE (NE, NE)	3.16	1.44, 8.32	0.0027*
IV	73	11 (15.1)	NE (NE, NE)	42	2 (4.8)	NE (NE, NE)	2.95	0.79, 19.06	0.1149
Interaction p-value									0.9367
Region									
Europe	245	47 (19.2)	NE (NE, NE)	125	8 (6.4)	NE (NE, NE)	2.89	1.44, 6.61	0.0019*
Japan	10	3 (30.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	35 (18.4)	NE (NE, NE)	100	5 (5.0)	NE (NE, NE)	3.69	1.58, 10.76	0.0015*
(1) Restricted activity	61	15 (24.6)	NE (NE, NE)	30	3 (10.0)	NE (NE, NE)	2.18	0.72, 9.42	0.1822
Interaction p-value									0.5140
Baseline CA-125 value									
<=ULN	228	44 (19.3)	NE (NE, NE)	117	8 (6.8)	NE (NE, NE)	2.79	1.39, 6.40	0.0030*
>ULN	27	6 (22.2)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	50 (19.6)	NE (NE, NE)	131	8 (6.1)	NE (NE, NE)	3.13	1.57, 7.14	0.0007*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	38 (22.9)	NE (NE, NE)	80	6 (7.5)	NE (NE, NE)	3.03	1.38, 7.97	0.0043*
Residue	79	11 (13.9)	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	2.82	0.76, 18.26	0.1313
Interaction p-value									0.9385

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.22 PAOLA1: Summary of subgroup analysis of AE leading to discontinuation of treatment
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	26 (17.8)	NE (NE, NE)	78	4 (5.1)	NE (NE, NE)	3.39	1.32, 11.49	0.0091*
Interval	99	23 (23.2)	NE (NE, NE)	45	4 (8.9)	NE (NE, NE)	2.52	0.97, 8.58	0.0594
Interaction p-value									0.6969
Myriad tumour BRCA mutation status									
tBRCAm	158	33 (20.9)	NE (NE, NE)	77	5 (6.5)	NE (NE, NE)	3.10	1.32, 9.06	0.0072*
Non-tBRCAm	97	17 (17.5)	NE (NE, NE)	54	3 (5.6)	NE (NE, NE)	3.13	1.05, 13.40	0.0396*
Interaction p-value									0.9909
Status somatic BRCA mutations									
sBRCAm	22	3 (13.6)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	14 (21.2)	NE (NE, NE)	31	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	6 (14.6)	NE (NE, NE)	22	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.23 PAOLA1: Summary of subgroup analysis of AE max CTCAE grade>=3
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)								
NED [PDS]	92	47 (51.1)	18.0 (8.2, NE)	48	22 (45.8)	21.7 (4.2, NE)	1.07	0.65, 1.81	0.7896
NED/CR [IDS]	74	49 (66.2)	4.2 (2.1,12.3)	38	17 (44.7)	22.1 (3.3, NE)	1.79	1.05, 3.20	0.0307*
NED/CR [Chemo]	40	23 (57.5)	10.1 (2.3, NE)	20	12 (60.0)	9.6 (1.4, NE)	1.02	0.52, 2.13	0.9470
PR	49	28 (57.1)	7.0 (4.2, NE)	25	14 (56.0)	11.3 (2.1, NE)	1.00	0.53, 1.95	0.9917
Interaction p-value									0.4179
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	90 (60.0)	8.7 (5.5,17.1)	65	32 (49.2)	11.3 (3.5, NE)	1.23	0.83, 1.88	0.2977
non-tBRCAm	105	57 (54.3)	8.3 (3.4, NE)	66	33 (50.0)	16.7 (6.4, NE)	1.17	0.77, 1.82	0.4603
Interaction p-value									0.8667
First line treatment outcome (eCRF)									
NED [PDS]	89	47 (52.8)	15.3 (7.7, NE)	47	21 (44.7)	NE (NE, NE)	1.19	0.72, 2.02	0.5119
NED/CR [IDS]	74	49 (66.2)	4.2 (2.8, 8.6)	32	13 (40.6)	NE (NE, NE)	2.11	1.18, 4.06	0.0105*
NED/CR [Chemo]	39	19 (48.7)	18.0 (2.3, NE)	17	12 (70.6)	5.7 (1.4, NE)	0.68	0.34, 1.45	0.3092
PR	50	31 (62.0)	7.0 (2.3,22.1)	34	18 (52.9)	11.3 (2.1, NE)	1.09	0.62, 1.99	0.7651
Interaction p-value									0.1172
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	88 (59.9)	9.7 (5.2,18.0)	67	32 (47.8)	21.7 (4.2, NE)	1.28	0.86, 1.95	0.2245
non-tBRCAm	108	59 (54.6)	8.3 (3.5, NE)	64	33 (51.6)	12.6 (4.2, NE)	1.14	0.75, 1.76	0.5505
Interaction p-value									0.6960
Age group									
<65 years	185	101 (54.6)	10.1 (6.9,24.1)	98	46 (46.9)	21.7 (6.6, NE)	1.18	0.84, 1.68	0.3543
>=65 years	70	46 (65.7)	3.5 (2.1,14.1)	33	19 (57.6)	8.3 (2.9, NE)	1.30	0.77, 2.27	0.3259
Interaction p-value									0.7573

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.23 PAOLA1: Summary of subgroup analysis of AE max CTCAE grade>=3
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	110 (60.4)	8.6 (4.9,14.8)	89	40 (44.9)	NE (NE, NE)	1.52	1.07, 2.20	0.0202*
IV	73	37 (50.7)	8.3 (4.2, NE)	42	25 (59.5)	6.6 (2.1, NE)	0.74	0.45, 1.24	0.2514
Interaction p-value									0.0255*
Region									
Europe	245	141 (57.6)	8.6 (5.6,15.3)	125	63 (50.4)	12.6 (6.6, NE)	1.19	0.89, 1.61	0.2450
Japan	10	6 (60.0)	4.9 (0.7, NE)	6	2 (33.3)	NE (NE, NE)	1.93	0.45, 13.19	0.3970
Interaction p-value									0.5461
ECOG performance status at Baseline									
(0) Normal activity	190	99 (52.1)	15.0 (6.9, NE)	100	50 (50.0)	16.7 (5.7, NE)	1.06	0.76, 1.50	0.7381
(1) Restricted activity	61	44 (72.1)	4.3 (1.9, 8.4)	30	15 (50.0)	10.5 (1.4, NE)	1.60	0.91, 2.98	0.1017
Interaction p-value									0.2232
Baseline CA-125 value									
<=ULN	228	130 (57.0)	8.7 (5.6,17.1)	117	57 (48.7)	16.7 (8.3, NE)	1.25	0.92, 1.72	0.1544
>ULN	27	17 (63.0)	6.2 (2.7,20.9)	14	8 (57.1)	2.4 (0.7, NE)	0.92	0.41, 2.26	0.8518
Interaction p-value									0.5129
Histological grade									
High grade	255	147 (57.6)	8.6 (5.6,15.3)	131	65 (49.6)	16.7 (6.6, NE)	1.21	0.91, 1.64	0.1886
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	97 (58.4)	8.4 (4.8,15.3)	80	35 (43.8)	NE (NE, NE)	1.47	1.01, 2.20	0.0437*
Residue	79	42 (53.2)	15.8 (4.2, NE)	43	24 (55.8)	10.5 (2.8, NE)	0.94	0.57, 1.58	0.8130
Interaction p-value									0.1681

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.23 PAOLA1: Summary of subgroup analysis of AE max CTCAE grade>=3
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	78 (53.4)	15.0 (7.7, NE)	78	39 (50.0)	12.6 (6.4, NE)	1.08	0.74, 1.60	0.6990
Interval	99	61 (61.6)	4.8 (3.5,14.1)	45	20 (44.4)	22.1 (4.2, NE)	1.60	0.98, 2.71	0.0604
Interaction p-value									0.2230
Myriad tumour BRCA mutation status									
tBRCAm	158	96 (60.8)	8.4 (4.8,15.3)	77	38 (49.4)	11.3 (4.2, NE)	1.27	0.88, 1.87	0.2088
Non-tBRCAm	97	51 (52.6)	8.6 (3.9, NE)	54	27 (50.0)	16.7 (4.2, NE)	1.12	0.71, 1.81	0.6312
Interaction p-value									0.6864
Status somatic BRCA mutations									
sBRCAm	22	12 (54.5)	18.0 (5.2, NE)	7	2 (28.6)	NE (NE, NE)	1.71	0.47, 11.02	0.4522
gBRCAm	66	45 (68.2)	5.5 (2.3, 8.7)	31	15 (48.4)	NE (NE, NE)	1.69	0.97, 3.14	0.0667
Non-BRCAm	41	24 (58.5)	7.7 (2.8, NE)	22	11 (50.0)	16.7 (2.4, NE)	1.27	0.64, 2.70	0.5041
Interaction p-value									0.8227

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.24 PAOLA1: Summary of subgroup analysis of AE G>=3 SOC: General disorders and administration site conditions
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	4 (4.3)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	6 (8.1)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	3 (7.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	2 (4.1)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	9 (6.0)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	6 (5.7)	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	4 (4.5)	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	5 (6.8)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	3 (7.7)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	3 (6.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	9 (6.1)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	6 (5.6)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	9 (4.9)	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	4.83	0.91, 89.00	0.0682
>=65 years	70	6 (8.6)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubae_v3.sas ettesubae_v3aax 25NOV2020:11:06 kvbv306

Table 3.4.24 PAOLA1: Summary of subgroup analysis of AE G>=3 SOC: General disorders and administration site conditions
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	12 (6.6)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	6.13	1.21,111.65	0.0250*
IV	73	3 (4.1)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	15 (6.1)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	7.87	1.59,142.24	0.0069*
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	8 (4.2)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	7 (11.5)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	14 (6.1)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	1 (3.7)	NE (NE, NE)	14	1 (7.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	15 (5.9)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	7.96	1.61,143.95	0.0065*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	9 (5.4)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	4.45	0.84, 82.09	0.0863
Residue	79	5 (6.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.24 PAOLA1: Summary of subgroup analysis of AE G>=3 SOC: General disorders and administration site conditions
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	7 (4.8)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	7 (7.1)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	9 (5.7)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	6 (6.2)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	22	1 (4.5)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	7 (10.6)	NE (NE, NE)	31	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	2 (4.9)	NE (NE, NE)	22	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.25 PAOLA1: Summary of subgroup analysis of AE G>=3 PT: Fatigue
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 4 (4.3)	NE (NE, NE)	48 0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 5 (6.8)	NE (NE, NE)	38 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 3 (7.5)	NE (NE, NE)	20 0	NE (NE, NE)	NC	NC	NC
PR	49 2 (4.1)	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 8 (5.3)	NE (NE, NE)	65 0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 6 (5.7)	NE (NE, NE)	66 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 4 (4.5)	NE (NE, NE)	47 0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 4 (5.4)	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 3 (7.7)	NE (NE, NE)	17 0	NE (NE, NE)	NC	NC	NC
PR	50 3 (6.0)	NE (NE, NE)	34 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 8 (5.4)	NE (NE, NE)	67 0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 6 (5.6)	NE (NE, NE)	64 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 8 (4.3)	NE (NE, NE)	98 0	NE (NE, NE)	NC	NC	NC
>=65 years	70 6 (8.6)	NE (NE, NE)	33 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.25 PAOLA1: Summary of subgroup analysis of AE G>=3 PT: Fatigue
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	12 (6.6)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	2 (2.7)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	14 (5.7)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	7 (3.7)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	7 (11.5)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	13 (5.7)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	14 (5.5)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	8 (4.8)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	5 (6.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.25 PAOLA1: Summary of subgroup analysis of AE G>=3 PT: Fatigue
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	7 (4.8)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	6 (6.1)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	8 (5.1)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	6 (6.2)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	22	1 (4.5)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	6 (9.1)	NE (NE, NE)	31	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	2 (4.9)	NE (NE, NE)	22	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubae_v3.sas ettesubae_v3aay 25NOV2020:11:06 kvbv306

Table 3.4.26 PAOLA1: Summary of subgroup analysis of AE G>=3 SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	27 (29.3)	NE (NE, NE)	48	4 (8.3)	NE (NE, NE)	3.77	1.47, 12.75	0.0040*
NED/CR [IDS]	74	22 (29.7)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	10 (25.0)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	12 (24.5)	NE (NE, NE)	25	1 (4.0)	NE (NE, NE)	6.74	1.33,122.77	0.0171*
Interaction p-value									0.6032
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	40 (26.7)	NE (NE, NE)	65	2 (3.1)	NE (NE, NE)	9.47	2.91, 58.20	<0.0001*
non-tBRCAm	105	31 (29.5)	NE (NE, NE)	66	3 (4.5)	NE (NE, NE)	7.57	2.70, 31.55	<0.0001*
Interaction p-value									0.8107
First line treatment outcome (eCRF)									
NED [PDS]	89	28 (31.5)	NE (NE, NE)	47	4 (8.5)	NE (NE, NE)	4.00	1.57, 13.50	0.0023*
NED/CR [IDS]	74	24 (32.4)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	6 (15.4)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	12 (24.0)	NE (NE, NE)	34	1 (2.9)	NE (NE, NE)	8.79	1.73,160.30	0.0050*
Interaction p-value									0.4742
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	40 (27.2)	NE (NE, NE)	67	2 (3.0)	NE (NE, NE)	9.99	3.07, 61.38	<0.0001*
non-tBRCAm	108	31 (28.7)	NE (NE, NE)	64	3 (4.7)	NE (NE, NE)	7.09	2.53, 29.53	<0.0001*
Interaction p-value									0.7133
Age group									
<65 years	185	47 (25.4)	NE (NE, NE)	98	4 (4.1)	NE (NE, NE)	6.77	2.75, 22.44	<0.0001*
>=65 years	70	24 (34.3)	NE (NE, NE)	33	1 (3.0)	NE (NE, NE)	13.80	2.92,246.76	<0.0001*
Interaction p-value									0.5092

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.26 PAOLA1: Summary of subgroup analysis of AE G>=3 SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	55 (30.2)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	10.37	3.83, 42.56	<0.0001*
IV	73	16 (21.9)	NE (NE, NE)	42	2 (4.8)	NE (NE, NE)	4.80	1.36, 30.33	0.0115*
Interaction p-value									0.4333
Region									
Europe	245	67 (27.3)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	12.82	4.77, 52.42	<0.0001*
Japan	10	4 (40.0)	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	1.25	0.24, 9.03	0.7938
Interaction p-value									0.0406*
ECOG performance status at Baseline									
(0) Normal activity	190	49 (25.8)	NE (NE, NE)	100	3 (3.0)	NE (NE, NE)	9.64	3.54, 39.70	<0.0001*
(1) Restricted activity	61	22 (36.1)	NE (NE, NE)	30	2 (6.7)	NE (NE, NE)	6.09	1.79, 38.03	0.0018*
Interaction p-value									0.6331
Baseline CA-125 value									
<=ULN	228	64 (28.1)	NE (NE, NE)	117	5 (4.3)	NE (NE, NE)	7.44	3.31, 21.27	<0.0001*
>ULN	27	7 (25.9)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	71 (27.8)	NE (NE, NE)	131	5 (3.8)	NE (NE, NE)	8.17	3.65, 23.31	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	53 (31.9)	NE (NE, NE)	80	4 (5.0)	NE (NE, NE)	7.39	3.03, 24.44	<0.0001*
Residue	79	13 (16.5)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.26 PAOLA1: Summary of subgroup analysis of AE G>=3 SOC: Blood and lymphatic system disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	39 (26.7)	NE (NE, NE)	78	4 (5.1)	NE (NE, NE)	5.58	2.25, 18.62	<0.0001*
Interval	99	27 (27.3)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	46 (29.1)	NE (NE, NE)	77	3 (3.9)	NE (NE, NE)	8.20	3.00, 33.78	<0.0001*
Non-tBRCAm	97	25 (25.8)	NE (NE, NE)	54	2 (3.7)	NE (NE, NE)	8.05	2.40, 50.05	0.0002*
Interaction p-value									0.9848
Status somatic BRCA mutations									
sBRCAm	22	8 (36.4)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	17 (25.8)	NE (NE, NE)	31	2 (6.5)	NE (NE, NE)	4.73	1.35, 29.82	0.0117*
Non-BRCAm	41	14 (34.1)	NE (NE, NE)	22	1 (4.5)	NE (NE, NE)	8.92	1.79,161.67	0.0039*
Interaction p-value									0.6103

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.27 PAOLA1: Summary of subgroup analysis of AE G>=3 PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	18 (19.6)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	10.44	2.16,187.81	0.0011*
NED/CR [IDS]	74	14 (18.9)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	7 (17.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	8 (16.3)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	23 (15.3)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	24 (22.9)	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	17.46	3.69,312.15	<0.0001*
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	19 (21.3)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	11.35	2.36,203.99	0.0006*
NED/CR [IDS]	74	16 (21.6)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	5 (12.8)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	7 (14.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	23 (15.6)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	24 (22.2)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	16.37	3.46,292.62	<0.0001*
Interaction p-value									NC
Age group									
<65 years	185	32 (17.3)	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	18.83	4.05,334.95	<0.0001*
>=65 years	70	15 (21.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.27 PAOLA1: Summary of subgroup analysis of AE G>=3 PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	35 (19.2)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	19.08	4.13,339.02	<0.0001*
IV	73	12 (16.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	43 (17.6)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	23.96	5.23,424.77	<0.0001*
Japan	10	4 (40.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	33 (17.4)	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	19.14	4.13,340.29	<0.0001*
(1) Restricted activity	61	14 (23.0)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	44 (19.3)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	25.57	5.59,453.20	<0.0001*
>ULN	27	3 (11.1)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	47 (18.4)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	26.71	5.85,473.03	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	35 (21.1)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	19.54	4.23,347.11	<0.0001*
Residue	79	8 (10.1)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.27 PAOLA1: Summary of subgroup analysis of AE G>=3 PT: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	26 (17.8)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	15.29	3.25,272.91	<0.0001*
Interval	99	17 (17.2)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	27 (17.1)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	20 (20.6)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	12.75	2.66,228.74	0.0002*
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	22	3 (13.6)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	10 (15.2)	NE (NE, NE)	31	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	41	10 (24.4)	NE (NE, NE)	22	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.28 PAOLA1: Summary of subgroup analysis of AE G>=3 SOC: Vascular disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	15 (16.3)	NE (NE, NE)	48	11 (22.9)	NE (NE, NE)	0.64	0.30, 1.44	0.2744
NED/CR [IDS]	74	13 (17.6)	NE (NE, NE)	38	13 (34.2)	NE (NE, NE)	0.45	0.21, 0.98	0.0447*
NED/CR [Chemo]	40	8 (20.0)	NE (NE, NE)	20	7 (35.0)	NE (NE, NE)	0.54	0.19, 1.53	0.2365
PR	49	12 (24.5)	NE (NE, NE)	25	11 (44.0)	12.6 (2.1, NE)	0.47	0.21, 1.09	0.0776
Interaction p-value									0.9229
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	28 (18.7)	NE (NE, NE)	65	23 (35.4)	NE (NE, NE)	0.44	0.25, 0.77	0.0043*
non-tBRCAm	105	20 (19.0)	NE (NE, NE)	66	19 (28.8)	NE (NE, NE)	0.64	0.34, 1.21	0.1642
Interaction p-value									0.3782
First line treatment outcome (eCRF)									
NED [PDS]	89	13 (14.6)	NE (NE, NE)	47	10 (21.3)	NE (NE, NE)	0.63	0.28, 1.47	0.2770
NED/CR [IDS]	74	12 (16.2)	NE (NE, NE)	32	9 (28.1)	NE (NE, NE)	0.55	0.23, 1.35	0.1833
NED/CR [Chemo]	39	8 (20.5)	NE (NE, NE)	17	7 (41.2)	NE (NE, NE)	0.49	0.18, 1.41	0.1789
PR	50	15 (30.0)	NE (NE, NE)	34	15 (44.1)	12.6 (2.1, NE)	0.52	0.25, 1.08	0.0805
Interaction p-value									0.9831
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	26 (17.7)	NE (NE, NE)	67	23 (34.3)	NE (NE, NE)	0.43	0.24, 0.76	0.0038*
non-tBRCAm	108	22 (20.4)	NE (NE, NE)	64	19 (29.7)	NE (NE, NE)	0.67	0.36, 1.24	0.1979
Interaction p-value									0.2973
Age group									
<65 years	185	27 (14.6)	NE (NE, NE)	98	29 (29.6)	NE (NE, NE)	0.44	0.26, 0.74	0.0022*
>=65 years	70	21 (30.0)	NE (NE, NE)	33	13 (39.4)	NE (NE, NE)	0.68	0.35, 1.40	0.2899
Interaction p-value									0.3115

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.28 PAOLA1: Summary of subgroup analysis of AE G>=3 SOC: Vascular disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	36 (19.8)	NE (NE, NE)	89	25 (28.1)	NE (NE, NE)	0.67	0.41, 1.13	0.1338
IV	73	12 (16.4)	NE (NE, NE)	42	17 (40.5)	NE (NE, NE)	0.31	0.14, 0.64	0.0017*
Interaction p-value									0.0861
Region									
Europe	245	48 (19.6)	NE (NE, NE)	125	41 (32.8)	NE (NE, NE)	0.53	0.35, 0.81	0.0033*
Japan	10	0	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	29 (15.3)	NE (NE, NE)	100	32 (32.0)	NE (NE, NE)	0.43	0.26, 0.72	0.0012*
(1) Restricted activity	61	17 (27.9)	NE (NE, NE)	30	10 (33.3)	NE (NE, NE)	0.72	0.34, 1.64	0.4272
Interaction p-value									0.2705
Baseline CA-125 value									
<=ULN	228	43 (18.9)	NE (NE, NE)	117	35 (29.9)	NE (NE, NE)	0.58	0.37, 0.91	0.0183*
>ULN	27	5 (18.5)	NE (NE, NE)	14	7 (50.0)	4.3 (0.7, NE)	0.25	0.07, 0.78	0.0175*
Interaction p-value									0.1738
Histological grade									
High grade	255	48 (18.8)	NE (NE, NE)	131	42 (32.1)	NE (NE, NE)	0.52	0.35, 0.80	0.0027*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	25 (15.1)	NE (NE, NE)	80	20 (25.0)	NE (NE, NE)	0.56	0.31, 1.01	0.0557
Residue	79	16 (20.3)	NE (NE, NE)	43	16 (37.2)	NE (NE, NE)	0.48	0.24, 0.96	0.0391*
Interaction p-value									0.7391

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.28 PAOLA1: Summary of subgroup analysis of AE G>=3 SOC: Vascular disorders
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	23 (15.8)	NE (NE, NE)	78	21 (26.9)	NE (NE, NE)	0.54	0.30, 0.98	0.0432*
Interval	99	18 (18.2)	NE (NE, NE)	45	15 (33.3)	NE (NE, NE)	0.48	0.24, 0.96	0.0395*
Interaction p-value									0.8002
Myriad tumour BRCA mutation status									
tBRCAm	158	30 (19.0)	NE (NE, NE)	77	25 (32.5)	NE (NE, NE)	0.49	0.29, 0.84	0.0105*
Non-tBRCAm	97	18 (18.6)	NE (NE, NE)	54	17 (31.5)	NE (NE, NE)	0.57	0.29, 1.12	0.1037
Interaction p-value									0.7244
Status somatic BRCA mutations									
sBRCAm	22	4 (18.2)	NE (NE, NE)	7	2 (28.6)	NE (NE, NE)	0.49	0.10, 3.57	0.4383
gBRCAm	66	13 (19.7)	NE (NE, NE)	31	11 (35.5)	NE (NE, NE)	0.50	0.22, 1.13	0.0930
Non-BRCAm	41	11 (26.8)	NE (NE, NE)	22	8 (36.4)	NE (NE, NE)	0.72	0.29, 1.85	0.4761
Interaction p-value									0.8257

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.29 PAOLA1: Summary of subgroup analysis of AE G>=3 PT: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	14 (15.2)	NE (NE, NE)	48	11 (22.9)	NE (NE, NE)	0.59	0.27, 1.33	0.2006
NED/CR [IDS]	74	12 (16.2)	NE (NE, NE)	38	13 (34.2)	NE (NE, NE)	0.41	0.19, 0.91	0.0288*
NED/CR [Chemo]	40	8 (20.0)	NE (NE, NE)	20	7 (35.0)	NE (NE, NE)	0.53	0.19, 1.53	0.2335
PR	49	11 (22.4)	NE (NE, NE)	25	11 (44.0)	12.6 (2.1, NE)	0.43	0.18, 0.996	0.0490*
Interaction p-value									0.9116
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	27 (18.0)	NE (NE, NE)	65	23 (35.4)	NE (NE, NE)	0.42	0.24, 0.73	0.0027*
non-tBRCAm	105	18 (17.1)	NE (NE, NE)	66	19 (28.8)	NE (NE, NE)	0.57	0.30, 1.09	0.0887
Interaction p-value									0.4743
First line treatment outcome (eCRF)									
NED [PDS]	89	13 (14.6)	NE (NE, NE)	47	10 (21.3)	NE (NE, NE)	0.63	0.28, 1.47	0.2759
NED/CR [IDS]	74	11 (14.9)	NE (NE, NE)	32	9 (28.1)	NE (NE, NE)	0.50	0.21, 1.24	0.1322
NED/CR [Chemo]	39	8 (20.5)	NE (NE, NE)	17	7 (41.2)	NE (NE, NE)	0.49	0.18, 1.40	0.1774
PR	50	13 (26.0)	NE (NE, NE)	34	15 (44.1)	12.6 (2.1, NE)	0.44	0.20, 0.92	0.0291*
Interaction p-value									0.9344
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	25 (17.0)	NE (NE, NE)	67	23 (34.3)	NE (NE, NE)	0.41	0.23, 0.72	0.0023*
non-tBRCAm	108	20 (18.5)	NE (NE, NE)	64	19 (29.7)	NE (NE, NE)	0.60	0.32, 1.13	0.1141
Interaction p-value									0.3654
Age group									
<65 years	185	25 (13.5)	NE (NE, NE)	98	29 (29.6)	NE (NE, NE)	0.40	0.23, 0.68	0.0009*
>=65 years	70	20 (28.6)	NE (NE, NE)	33	13 (39.4)	NE (NE, NE)	0.64	0.32, 1.33	0.2265
Interaction p-value									0.2876

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.29 PAOLA1: Summary of subgroup analysis of AE G>=3 PT: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	33 (18.1)	NE (NE, NE)	89	25 (28.1)	NE (NE, NE)	0.61	0.36, 1.03	0.0662
IV	73	12 (16.4)	NE (NE, NE)	42	17 (40.5)	NE (NE, NE)	0.31	0.14, 0.64	0.0016*
Interaction p-value									0.1317
Region									
Europe	245	45 (18.4)	NE (NE, NE)	125	41 (32.8)	NE (NE, NE)	0.49	0.32, 0.75	0.0012*
Japan	10	0	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	27 (14.2)	NE (NE, NE)	100	32 (32.0)	NE (NE, NE)	0.40	0.24, 0.66	0.0005*
(1) Restricted activity	61	16 (26.2)	NE (NE, NE)	30	10 (33.3)	NE (NE, NE)	0.67	0.31, 1.54	0.3363
Interaction p-value									0.2696
Baseline CA-125 value									
<=ULN	228	40 (17.5)	NE (NE, NE)	117	35 (29.9)	NE (NE, NE)	0.53	0.34, 0.84	0.0075*
>ULN	27	5 (18.5)	NE (NE, NE)	14	7 (50.0)	4.3 (0.7, NE)	0.24	0.07, 0.77	0.0166*
Interaction p-value									0.2140
Histological grade									
High grade	255	45 (17.6)	NE (NE, NE)	131	42 (32.1)	NE (NE, NE)	0.49	0.32, 0.74	0.0010*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	24 (14.5)	NE (NE, NE)	80	20 (25.0)	NE (NE, NE)	0.53	0.29, 0.98	0.0415*
Residue	79	15 (19.0)	NE (NE, NE)	43	16 (37.2)	NE (NE, NE)	0.44	0.21, 0.89	0.0233*
Interaction p-value									0.6755

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.29 PAOLA1: Summary of subgroup analysis of AE G>=3 PT: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	23 (15.8)	NE (NE, NE)	78	21 (26.9)	NE (NE, NE)	0.54	0.30, 0.98	0.0425*
Interval	99	16 (16.2)	NE (NE, NE)	45	15 (33.3)	NE (NE, NE)	0.42	0.21, 0.85	0.0174*
Interaction p-value									0.5926
Myriad tumour BRCA mutation status									
tBRCAm	158	29 (18.4)	NE (NE, NE)	77	25 (32.5)	NE (NE, NE)	0.47	0.28, 0.81	0.0069*
Non-tBRCAm	97	16 (16.5)	NE (NE, NE)	54	17 (31.5)	NE (NE, NE)	0.51	0.25, 1.01	0.0517
Interaction p-value									0.8708
Status somatic BRCA mutations									
sBRCAm	22	4 (18.2)	NE (NE, NE)	7	2 (28.6)	NE (NE, NE)	0.49	0.10, 3.55	0.4339
gBRCAm	66	12 (18.2)	NE (NE, NE)	31	11 (35.5)	NE (NE, NE)	0.45	0.20, 1.03	0.0590
Non-BRCAm	41	10 (24.4)	NE (NE, NE)	22	8 (36.4)	NE (NE, NE)	0.65	0.25, 1.69	0.3613
Interaction p-value									0.8440

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.30 PAOLA1: Summary of subgroup analysis of AE max CTCAE grade=1 or 2
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

Subgroup	Olaparib + bevacizumab (N=255) n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Placebo + bevacizumab (N=131) n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	45 (48.9)	NE (NE, NE)	48	25 (52.1)	7.0 (0.7, NE)	0.97	0.60, 1.61	0.9150
NED/CR [IDS]	74	25 (33.8)	NE (NE, NE)	38	20 (52.6)	4.8 (1.4, NE)	0.63	0.35, 1.14	0.1219
NED/CR [Chemo]	40	17 (42.5)	NE (NE, NE)	20	7 (35.0)	NE (NE, NE)	1.40	0.61, 3.63	0.4398
PR	49	21 (42.9)	NE (NE, NE)	25	10 (40.0)	NE (NE, NE)	1.03	0.50, 2.29	0.9314
Interaction p-value									0.4389
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	60 (40.0)	NE (NE, NE)	65	31 (47.7)	NE (NE, NE)	0.81	0.53, 1.27	0.3598
non-tBRCAm	105	48 (45.7)	NE (NE, NE)	66	31 (47.0)	NE (NE, NE)	1.06	0.68, 1.67	0.8118
Interaction p-value									0.4168
First line treatment outcome (eCRF)									
NED [PDS]	89	42 (47.2)	NE (NE, NE)	47	25 (53.2)	7.0 (1.1, NE)	0.91	0.56, 1.52	0.7222
NED/CR [IDS]	74	25 (33.8)	NE (NE, NE)	32	18 (56.3)	4.1 (1.0, NE)	0.59	0.33, 1.11	0.0989
NED/CR [Chemo]	39	20 (51.3)	14.7 (0.5, NE)	17	4 (23.5)	NE (NE, NE)	2.75	1.04, 9.46	0.0406*
PR	50	19 (38.0)	NE (NE, NE)	34	15 (44.1)	NE (NE, NE)	0.78	0.40, 1.56	0.4771
Interaction p-value									0.0680
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	59 (40.1)	NE (NE, NE)	67	33 (49.3)	NE (NE, NE)	0.79	0.52, 1.22	0.2729
non-tBRCAm	108	49 (45.4)	NE (NE, NE)	64	29 (45.3)	NE (NE, NE)	1.10	0.70, 1.75	0.6957
Interaction p-value									0.2980
Age group									
<65 years	185	84 (45.4)	NE (NE, NE)	98	48 (49.0)	NE (NE, NE)	0.98	0.69, 1.41	0.9112
>=65 years	70	24 (34.3)	NE (NE, NE)	33	14 (42.4)	NE (NE, NE)	0.76	0.40, 1.50	0.4176
Interaction p-value									0.5054

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[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.30 PAOLA1: Summary of subgroup analysis of AE max CTCAE grade=1 or 2
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	72 (39.6)	NE (NE, NE)	89	47 (52.8)	7.0 (1.4, NE)	0.71	0.50, 1.04	0.0776
IV	73	36 (49.3)	NE (NE, NE)	42	15 (35.7)	NE (NE, NE)	1.63	0.91, 3.06	0.1024
Interaction p-value									0.0195*
Region									
Europe	245	104 (42.4)	NE (NE, NE)	125	58 (46.4)	NE (NE, NE)	0.94	0.68, 1.30	0.7030
Japan	10	4 (40.0)	NE (NE, NE)	6	4 (66.7)	1.1 (0.3, NE)	0.54	0.13, 2.30	0.3929
Interaction p-value									0.4542
ECOG performance status at Baseline									
(0) Normal activity	190	91 (47.9)	NE (NE, NE)	100	46 (46.0)	NE (NE, NE)	1.14	0.80, 1.63	0.4739
(1) Restricted activity	61	17 (27.9)	NE (NE, NE)	30	15 (50.0)	NE (NE, NE)	0.47	0.24, 0.96	0.0384*
Interaction p-value									0.0295*
Baseline CA-125 value									
<=ULN	228	98 (43.0)	NE (NE, NE)	117	56 (47.9)	NE (NE, NE)	0.91	0.66, 1.27	0.5835
>ULN	27	10 (37.0)	NE (NE, NE)	14	6 (42.9)	NE (NE, NE)	0.92	0.34, 2.71	0.8759
Interaction p-value									0.9834
Histological grade									
High grade	255	108 (42.4)	NE (NE, NE)	131	62 (47.3)	NE (NE, NE)	0.91	0.67, 1.26	0.5739
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	69 (41.6)	NE (NE, NE)	80	43 (53.8)	4.8 (1.4, NE)	0.79	0.54, 1.16	0.2201
Residue	79	37 (46.8)	NE (NE, NE)	43	17 (39.5)	NE (NE, NE)	1.24	0.71, 2.25	0.4658
Interaction p-value									0.1942

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[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.30 PAOLA1: Summary of subgroup analysis of AE max CTCAE grade=1 or 2
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	68 (46.6)	NE (NE, NE)	78	37 (47.4)	NE (NE, NE)	1.02	0.69, 1.54	0.9129
Interval	99	38 (38.4)	NE (NE, NE)	45	23 (51.1)	8.6 (1.4, NE)	0.75	0.45, 1.28	0.2861
Interaction p-value									0.3582
Myriad tumour BRCA mutation status									
tBRCAm	158	62 (39.2)	NE (NE, NE)	77	37 (48.1)	NE (NE, NE)	0.80	0.54, 1.22	0.2955
Non-tBRCAm	97	46 (47.4)	NE (NE, NE)	54	25 (46.3)	NE (NE, NE)	1.11	0.69, 1.84	0.6672
Interaction p-value									0.3132
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	NE (NE, NE)	7	5 (71.4)	2.4 (0.1, NE)	0.53	0.19, 1.72	0.2731
gBRCAm	66	21 (31.8)	NE (NE, NE)	31	16 (51.6)	8.6 (0.6, NE)	0.56	0.29, 1.09	0.0879
Non-BRCAm	41	17 (41.5)	NE (NE, NE)	22	11 (50.0)	4.8 (0.7, NE)	0.84	0.40, 1.85	0.6514
Interaction p-value									0.6852

The time to event endpoint is the time to first AE or the time to censoring if the AE has not occurred by 30 days following the date of last dose of olaparib/placebo. Includes AEs with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 22.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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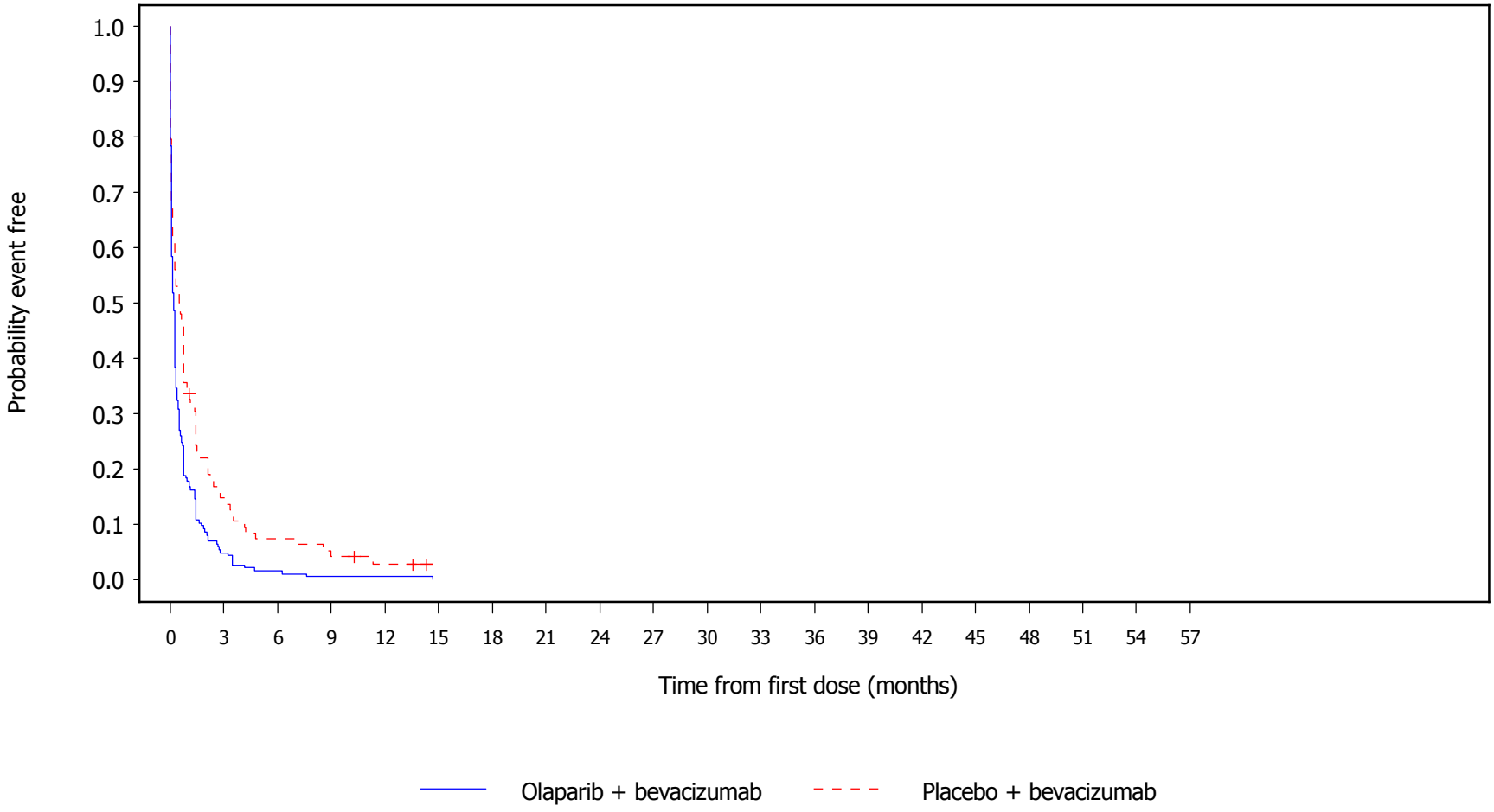
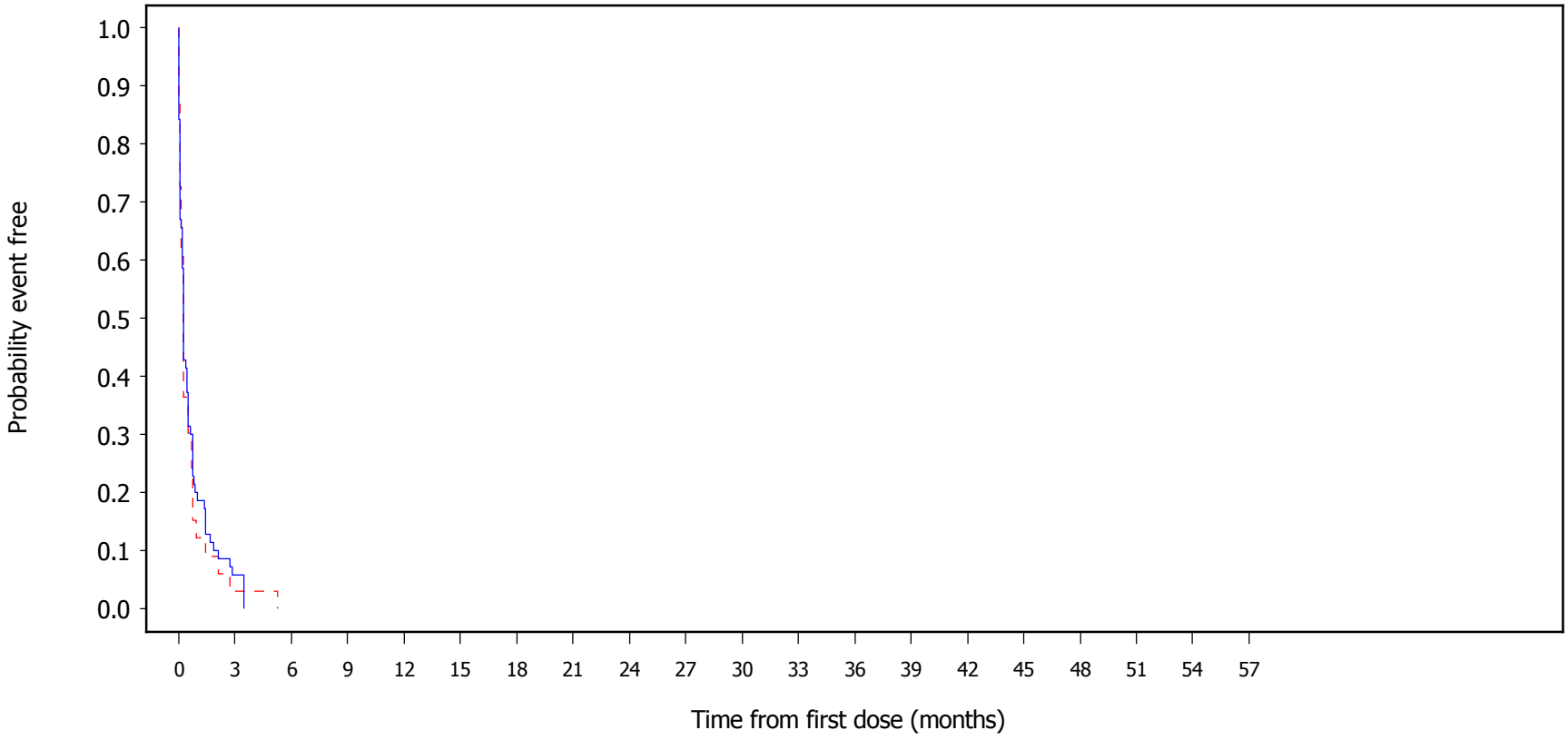
Figure 3.5.1 PAOLA1: Kaplan-Meier plot of AE for Age group=<65 years
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

185	9	3	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
98	14	7	4	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

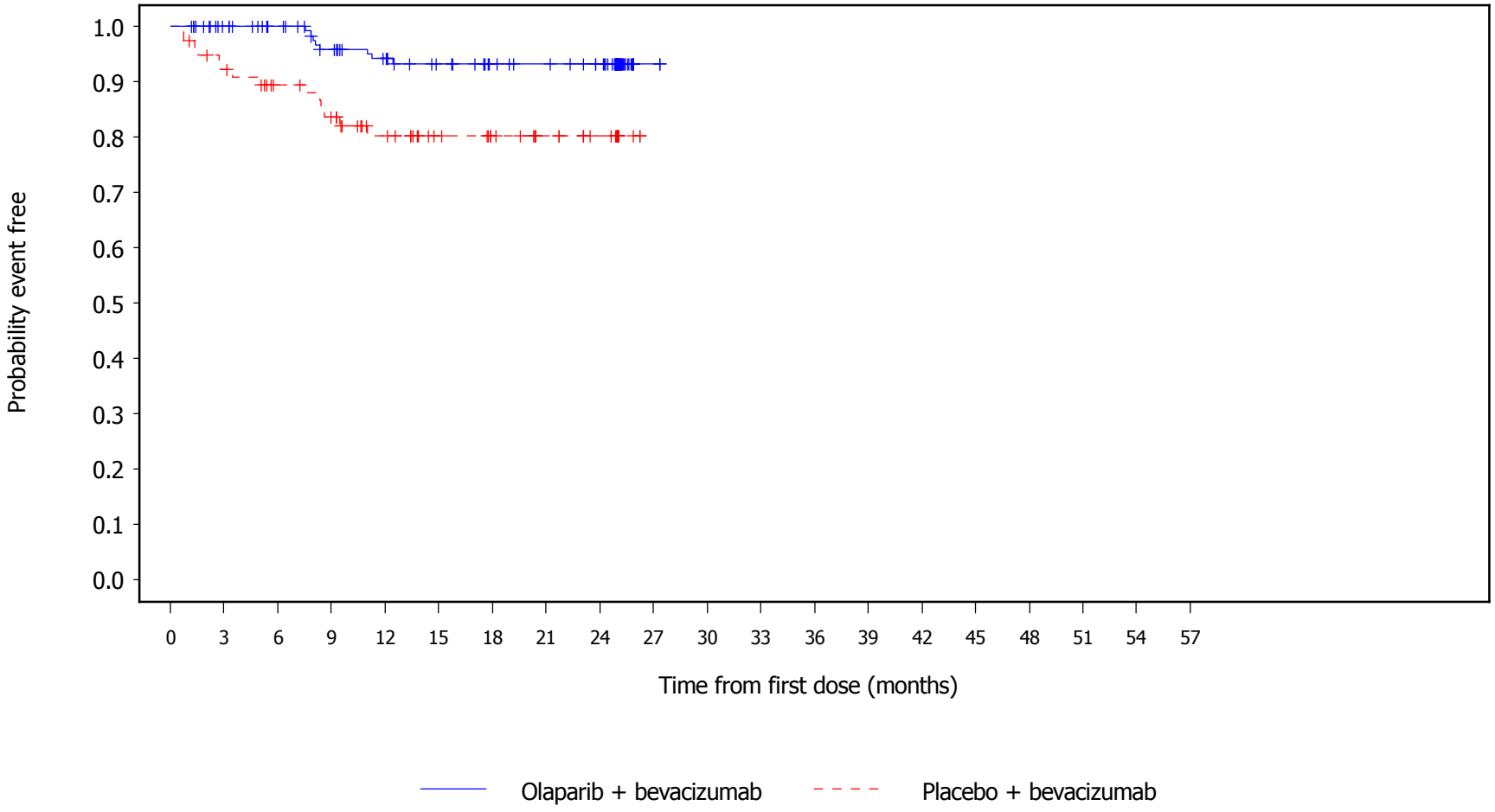
Figure 3.5.2 PAOLA1: Kaplan-Meier plot of AE for Age group=>=65 years
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

70	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
33	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

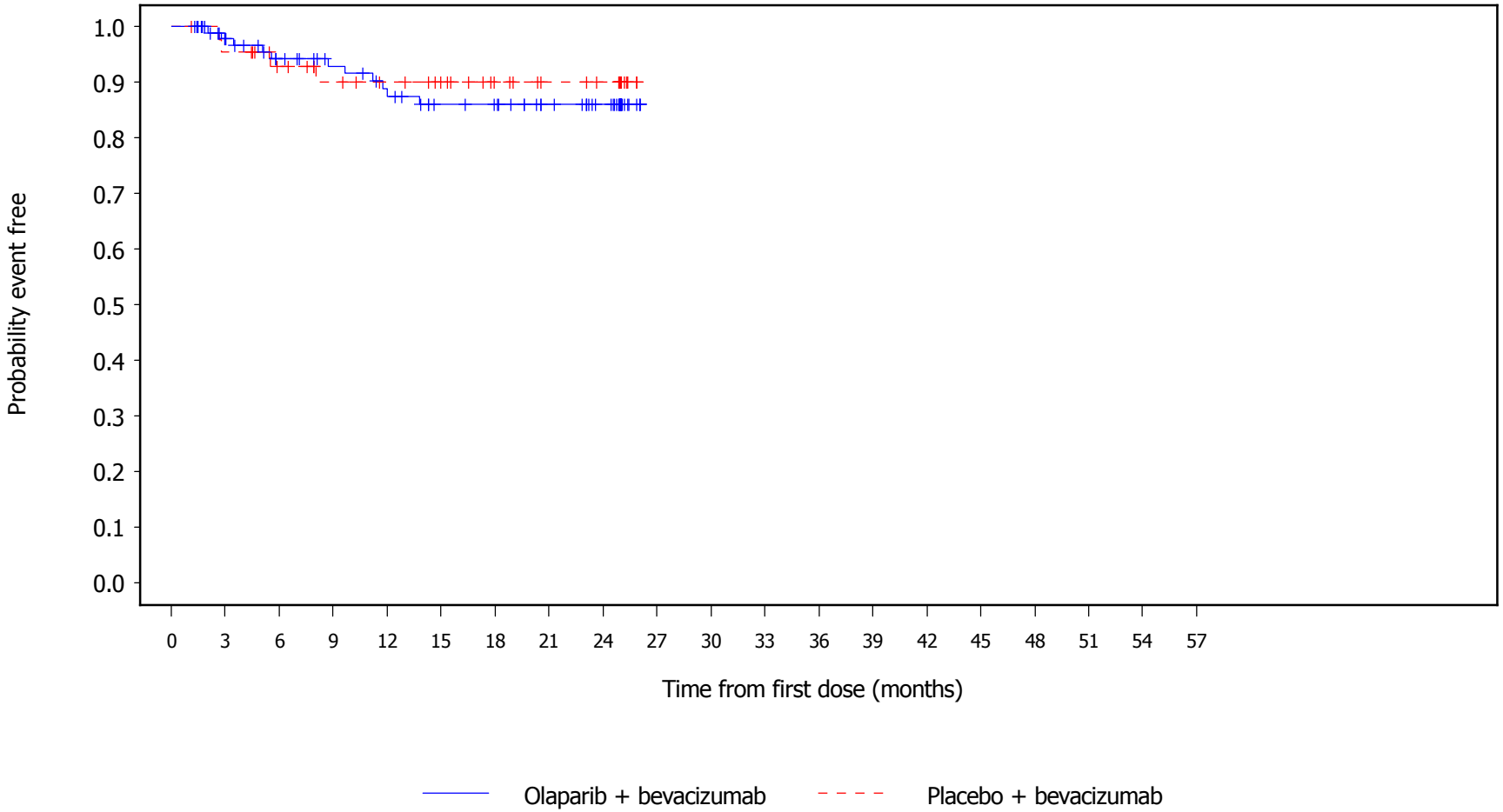
Figure 3.5.3 PAOLA1: Kaplan-Meier plot of AE PT: Proteinuria for Timing of cytoreductive surgery=Upfront
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

146	136	128	117	109	101	93	90	85	1	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
78	70	62	56	46	37	32	25	19	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

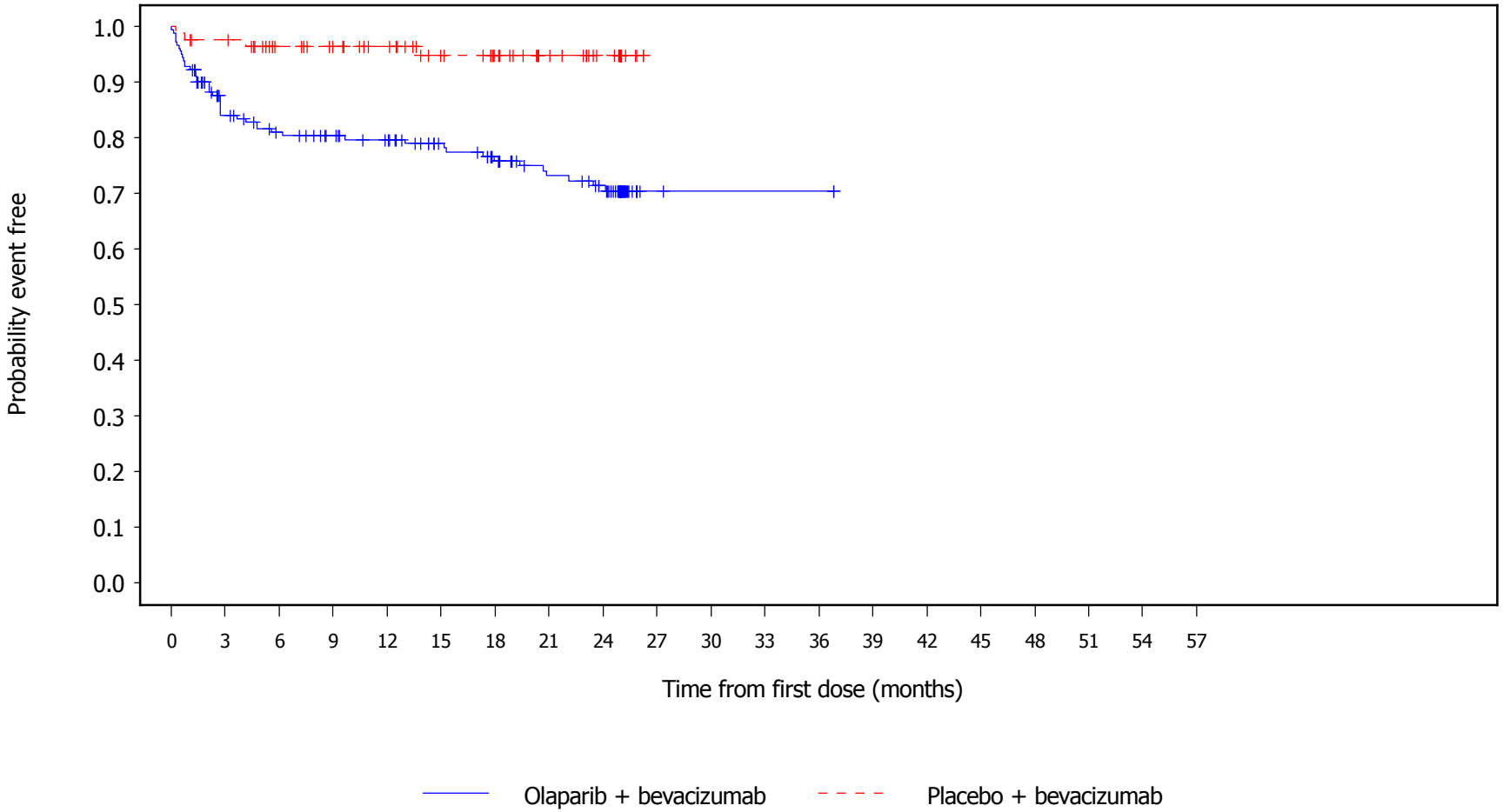
Figure 3.5.4 PAOLA1: Kaplan-Meier plot of AE PT: Proteinuria for Timing of cytoreductive surgery=Interval
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

99	87	76	69	63	56	54	46	38	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
45	42	36	31	28	24	18	14	12	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

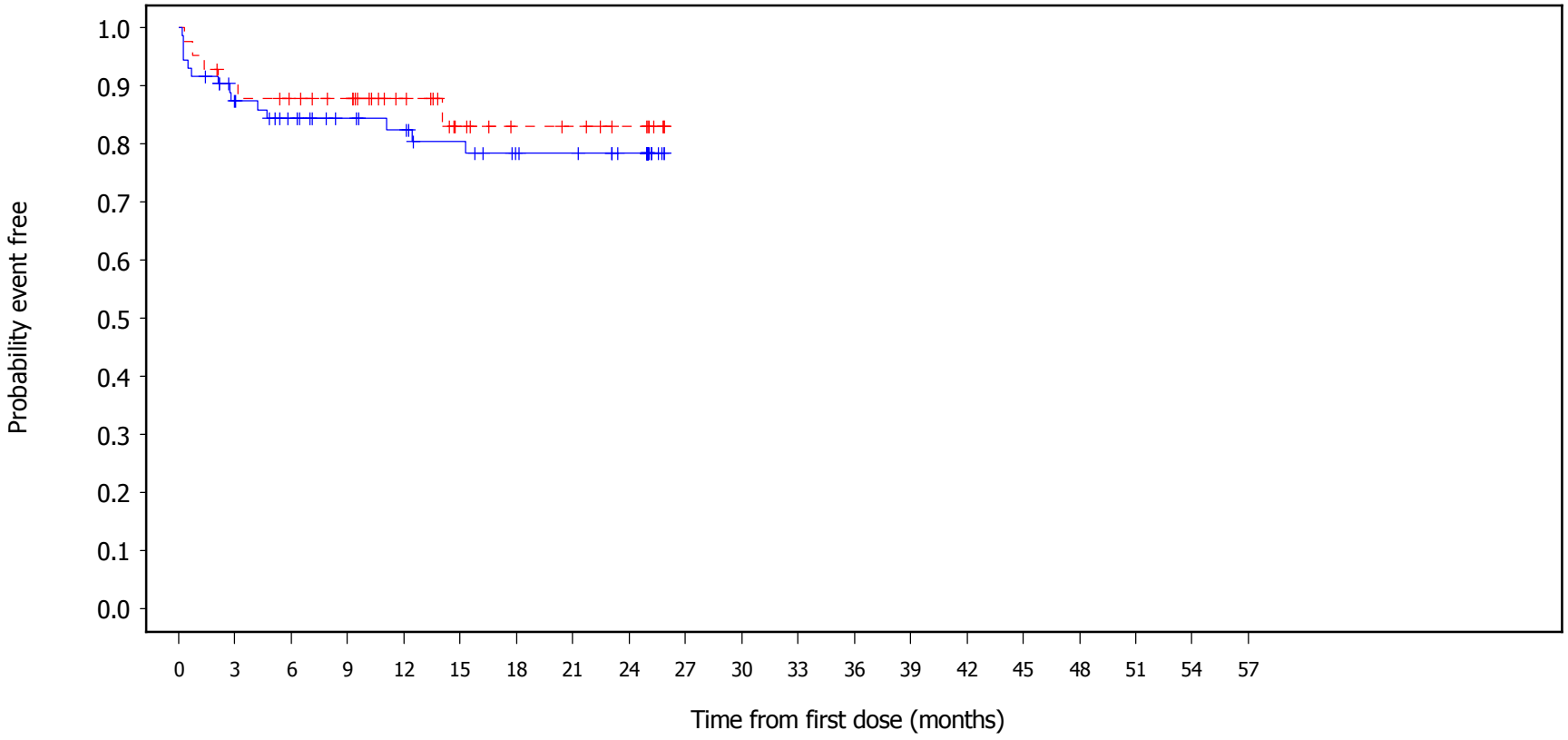
Figure 3.5.5 PAOLA1: Kaplan-Meier plot of AE PT: Lymphopenia for FIGO Stage (Disease state)=III
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

182	140	129	122	116	103	93	83	76	2	1	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
89	85	74	69	64	54	47	37	28	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

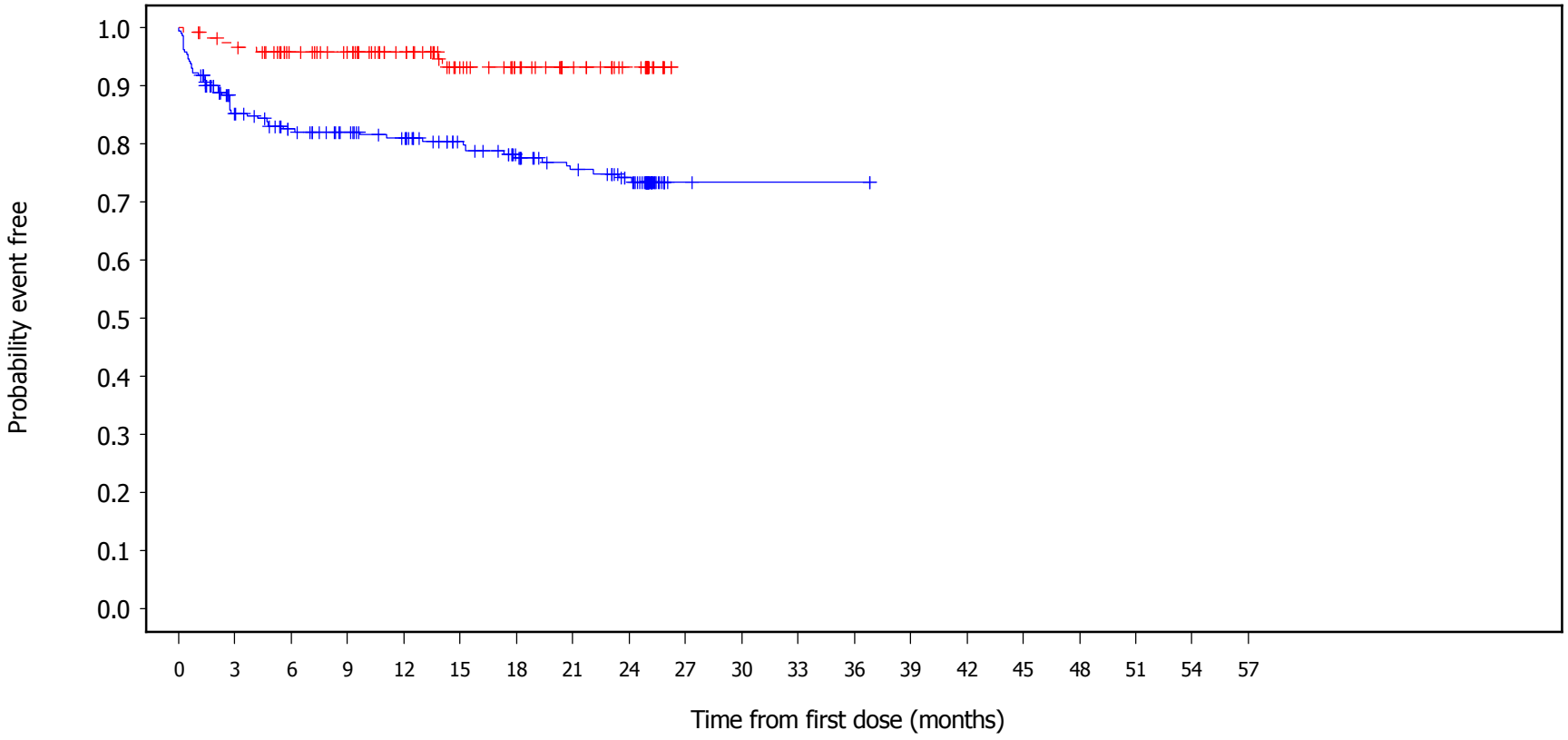
Figure 3.5.6 PAOLA1: Kaplan-Meier plot of AE PT: Lymphopenia for FIGO Stage (Disease state)=IV
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

73	59	52	46	43	39	34	33	28	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
42	37	34	31	22	14	10	9	6	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

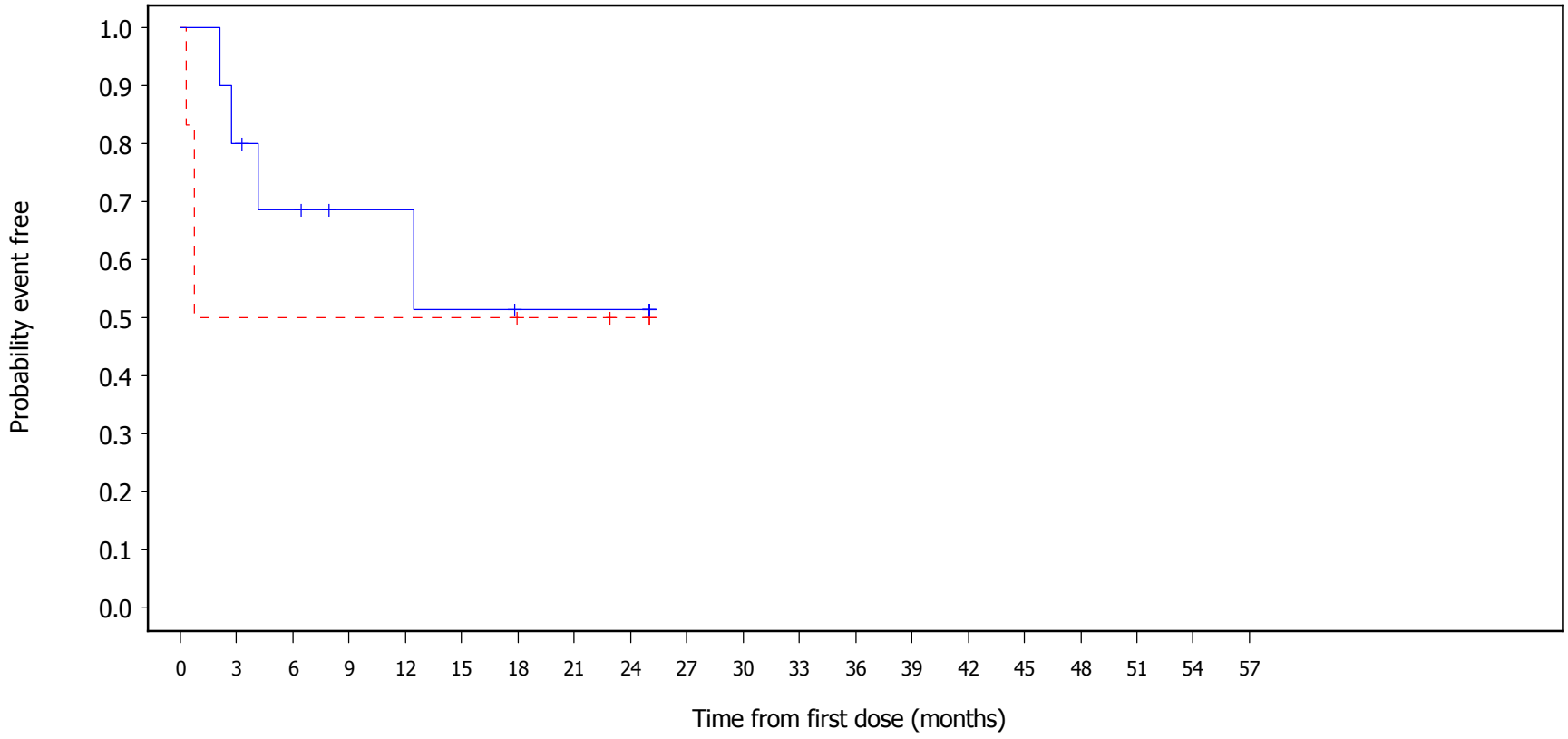
Figure 3.5.7 PAOLA1: Kaplan-Meier plot of AE PT: Lymphopenia for Region=Europe
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

245	191	175	164	155	139	125	114	102	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
125	119	105	97	83	65	55	44	33	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

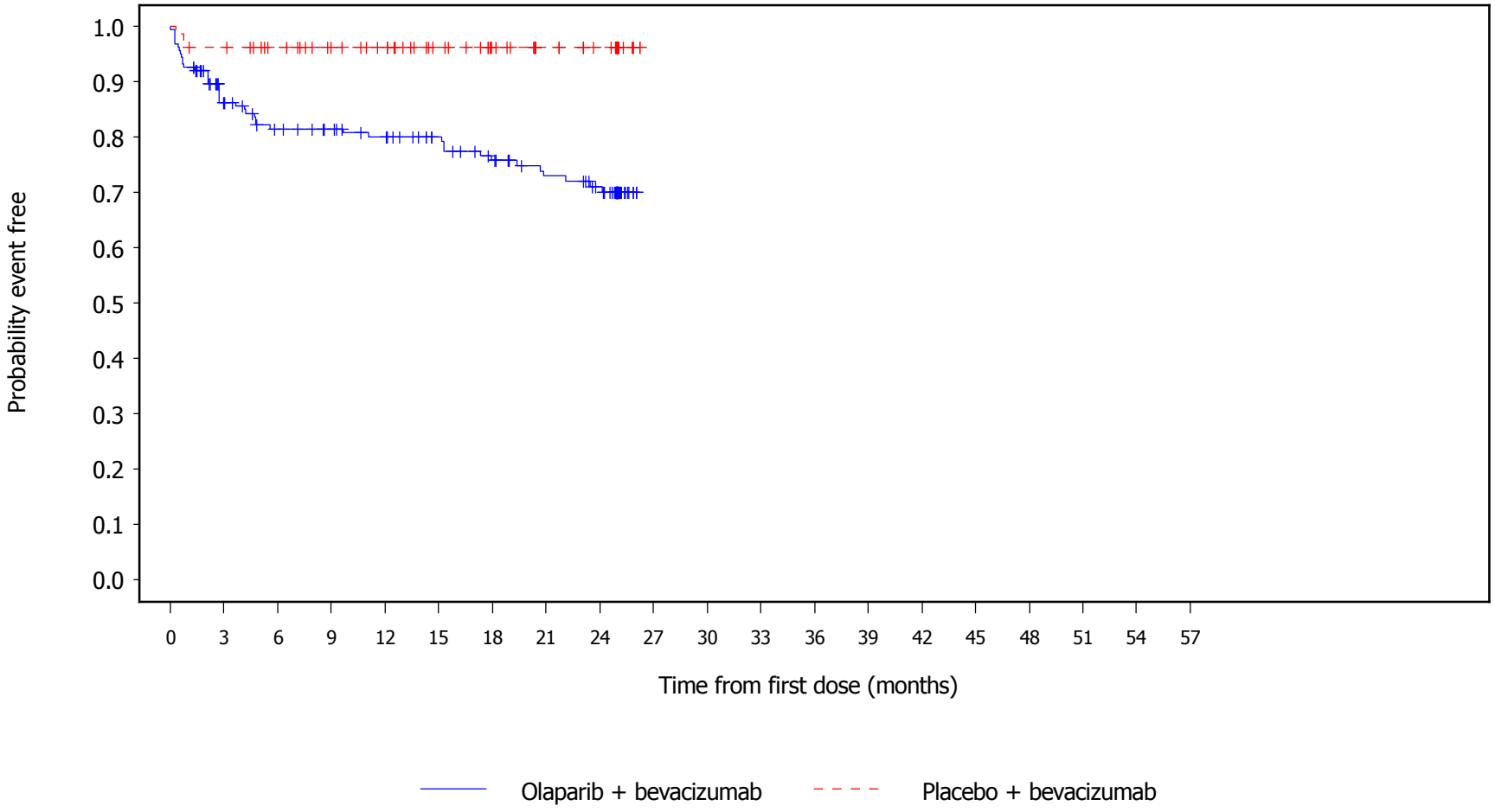
Figure 3.5.8 PAOLA1: Kaplan-Meier plot of AE PT: Lymphopenia for Region=Japan
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

10	8	6	4	4	3	2	2	2	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
6	3	3	3	3	3	2	2	1	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

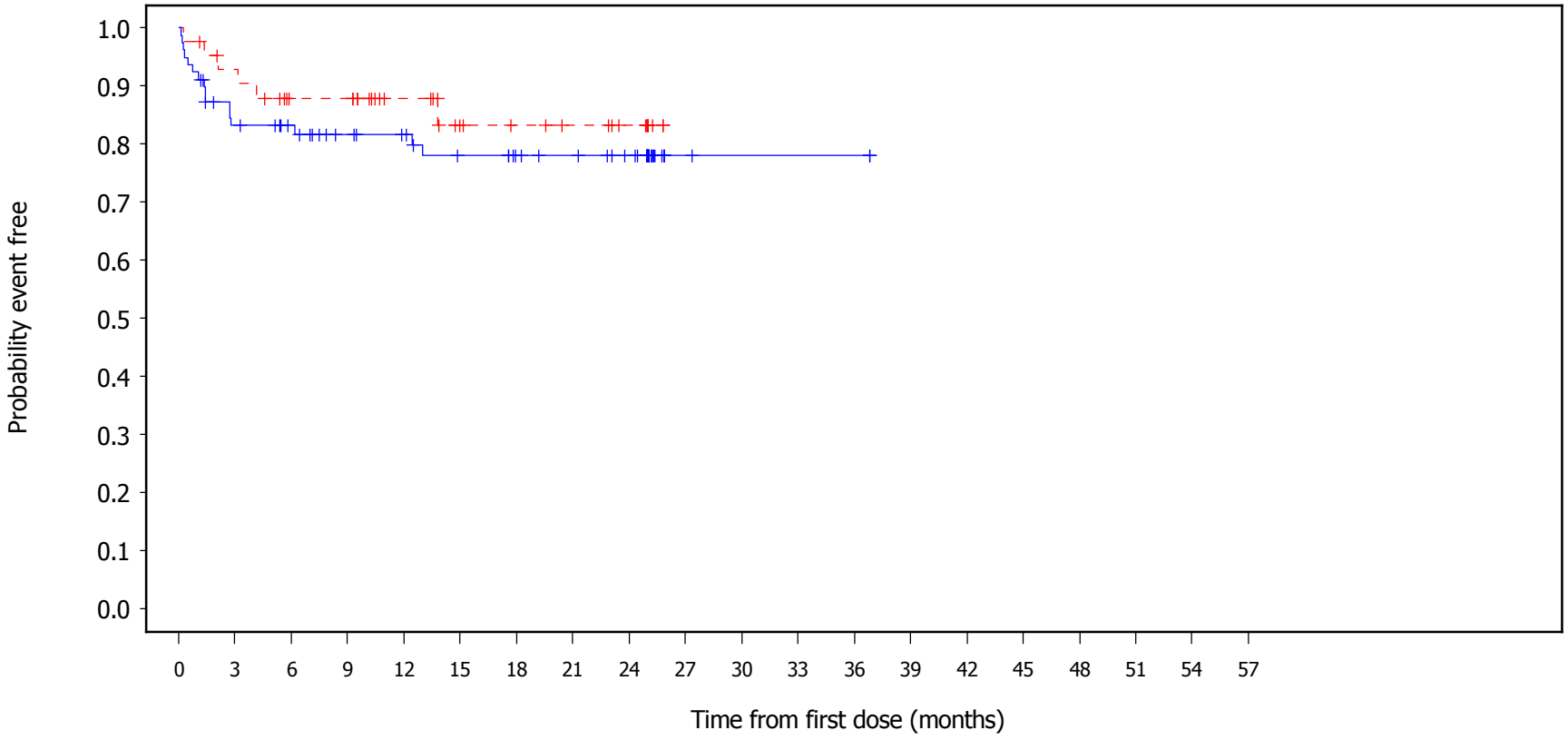
Figure 3.5.9 PAOLA1: Kaplan-Meier plot of AE PT: Lymphopenia for Cytoreductive surgery outcome=No residue
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

166	130	117	112	106	96	87	78	71	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
80	76	70	63	59	49	40	32	26	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

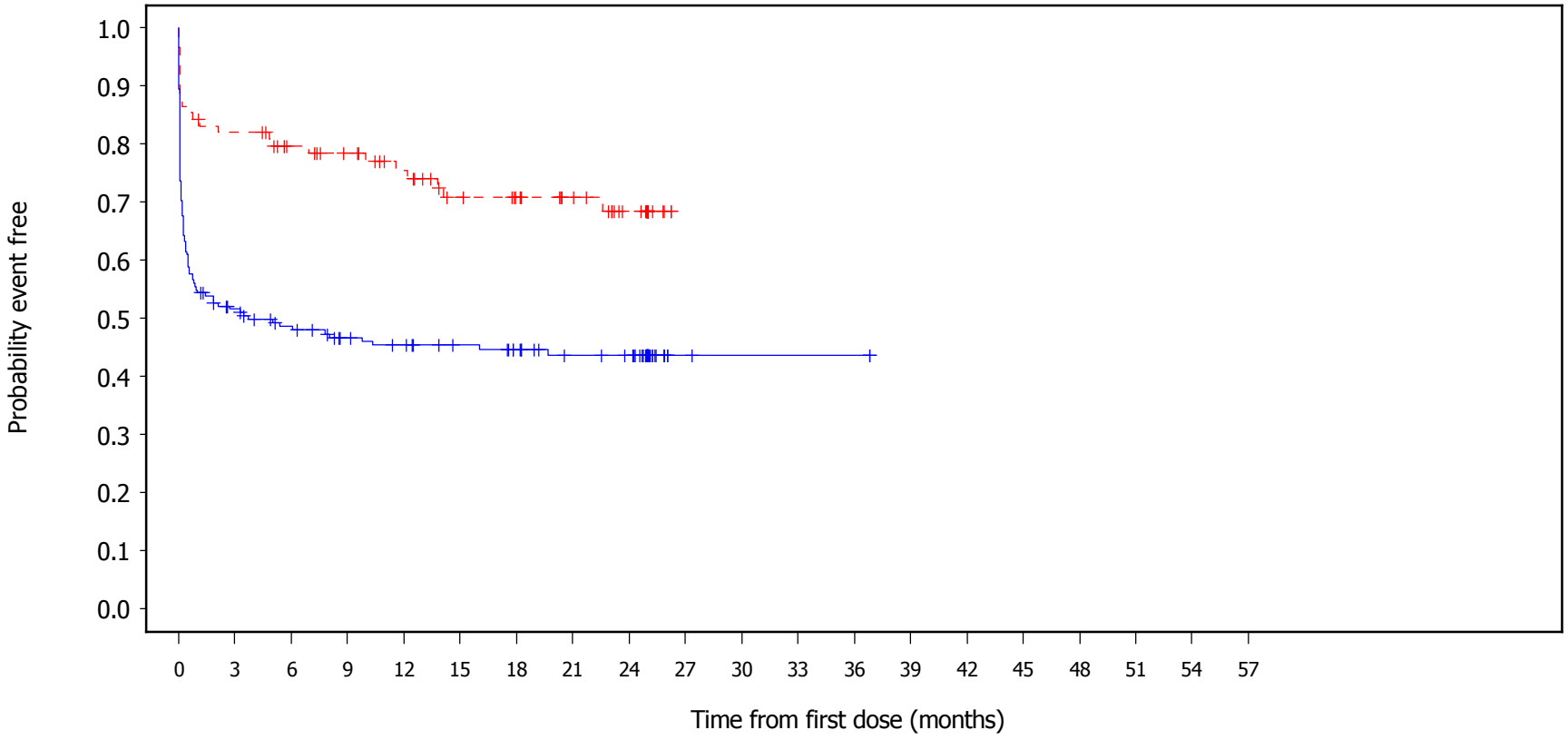
Figure 3.5.10 PAOLA1: Kaplan-Meier plot of AE PT: Lymphopenia for Cytoreductive surgery outcome=Residue
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

79	62	57	50	47	42	38	36	32	2	1	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
43	38	31	31	22	15	13	11	8	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

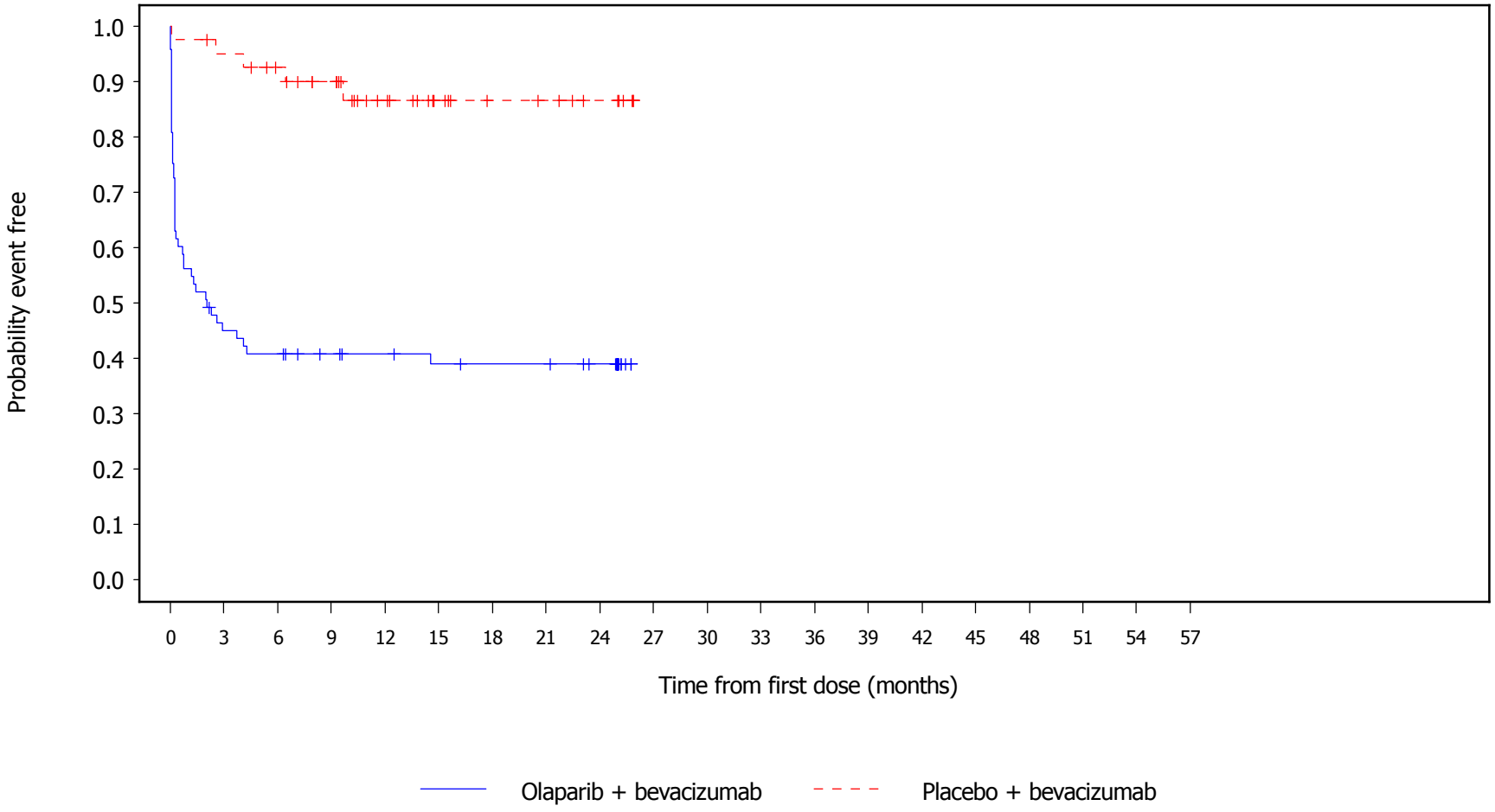
Figure 3.5.11 PAOLA1: Kaplan-Meier plot of AE PT: Nausea for FIGO Stage (Disease state)=III
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

182	89	79	70	66	61	56	49	47	2	1	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
89	72	63	58	51	42	38	33	24	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

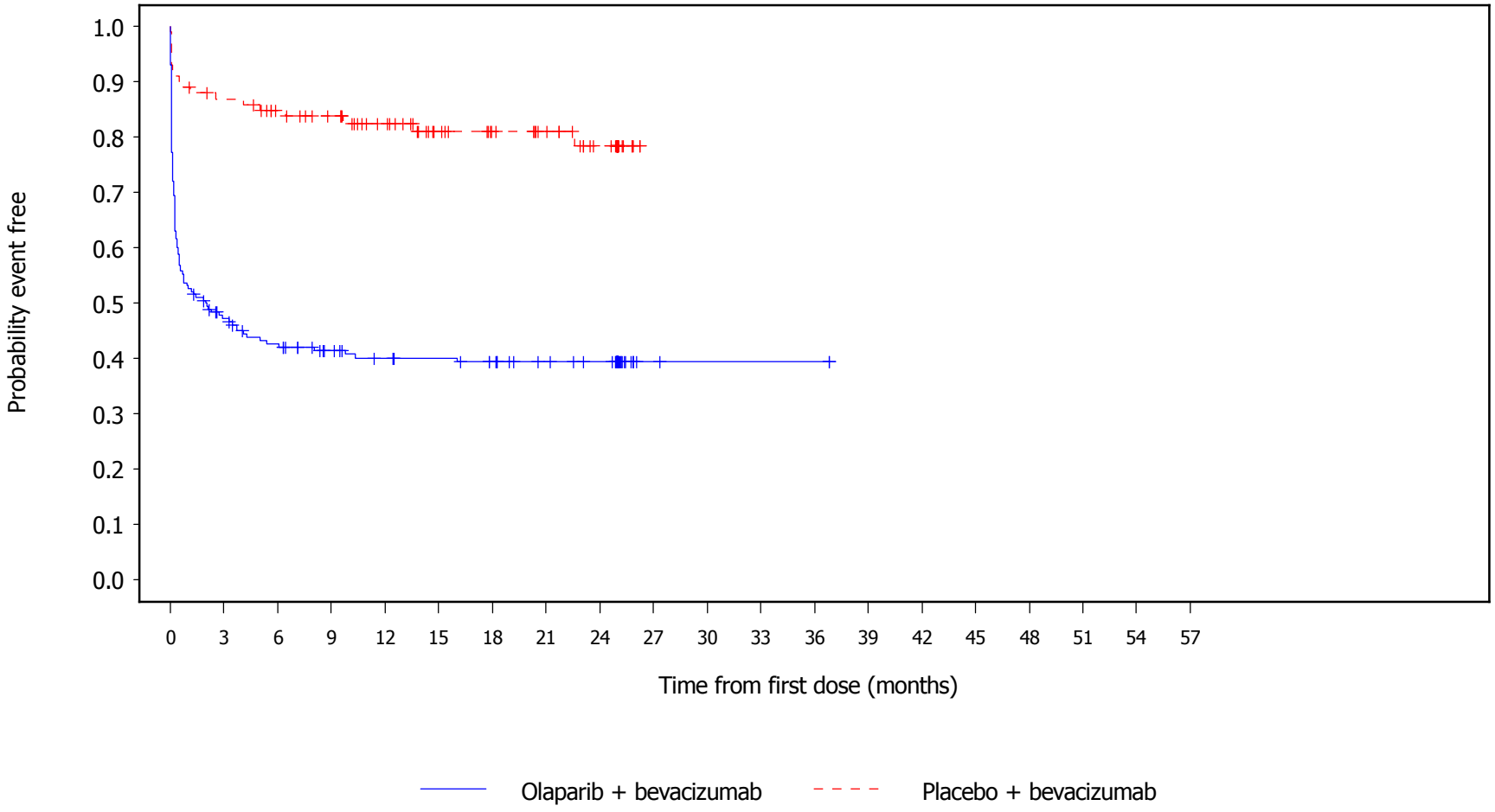
Figure 3.5.12 PAOLA1: Kaplan-Meier plot of AE PT: Nausea for FIGO Stage (Disease state)=IV
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

73	32	29	25	23	21	20	20	17	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
42	39	35	30	20	13	9	8	5	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

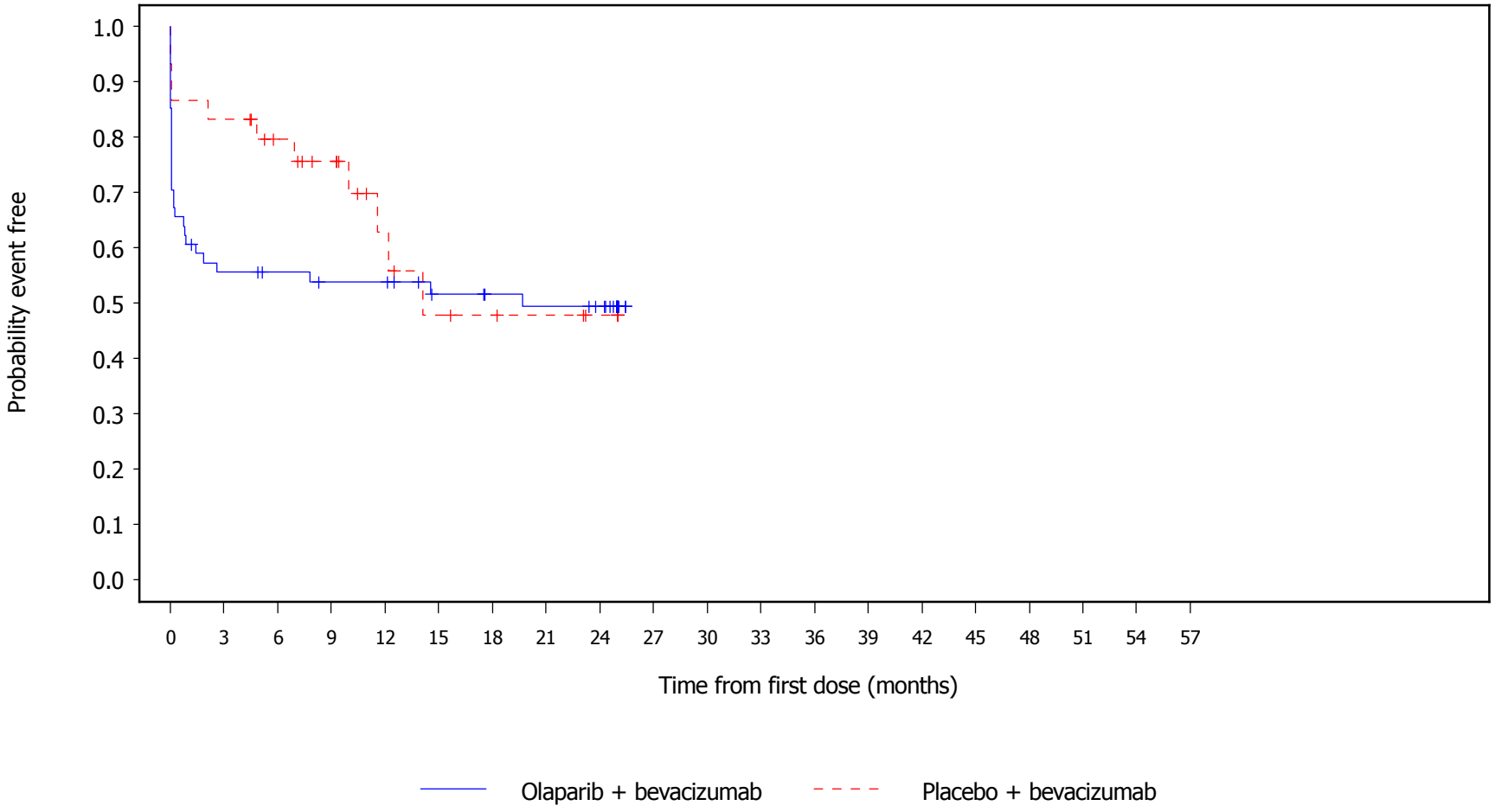
Figure 3.5.13 PAOLA1: Kaplan-Meier plot of AE PT: Nausea for ECOG performance status at Baseline=(0) Normal activity
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

190	85	74	63	57	55	51	45	42	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
100	85	77	71	61	48	41	36	26	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

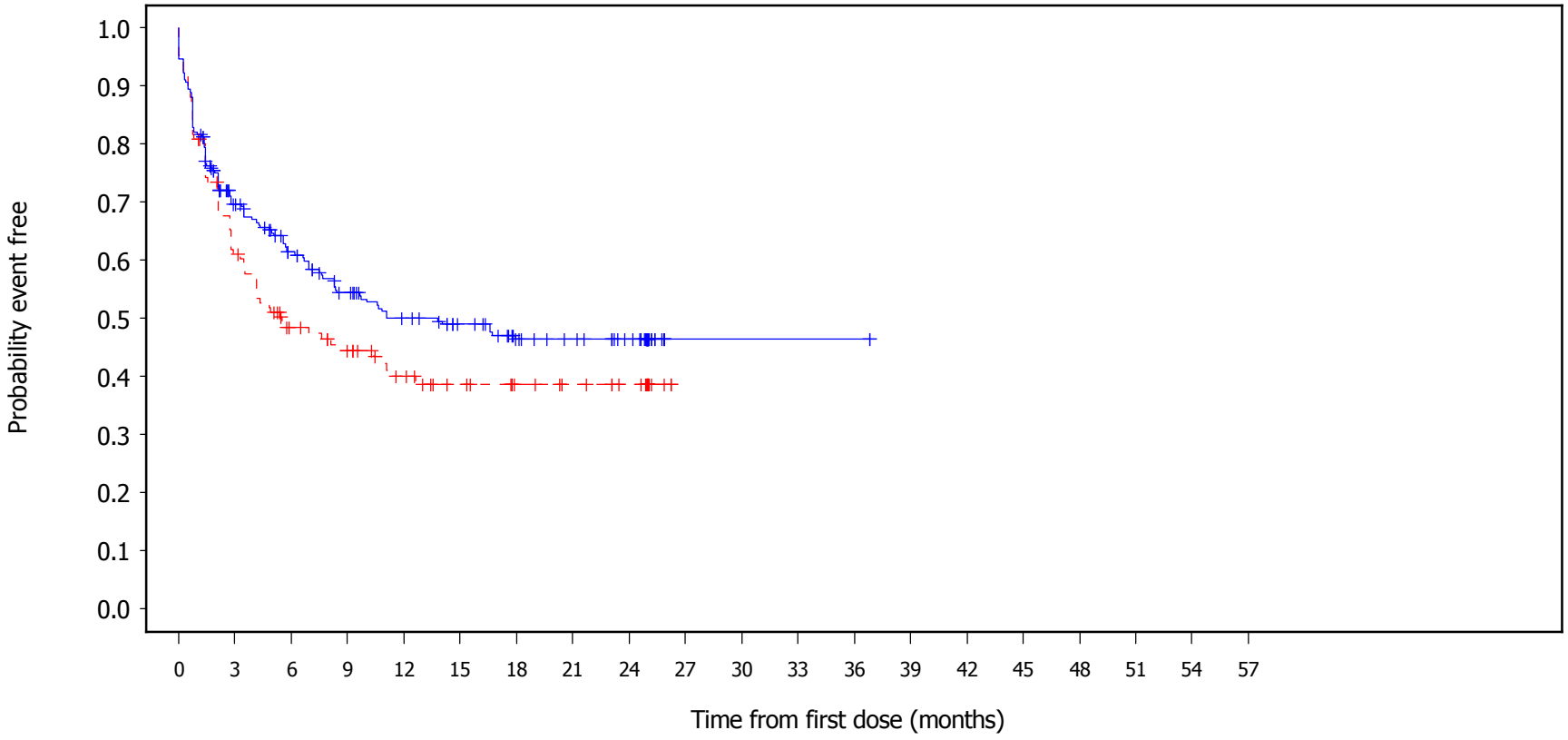
Figure 3.5.14 PAOLA1: Kaplan-Meier plot of AE PT: Nausea for ECOG performance status at Baseline=(1) Restricted activity
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

61	33	31	29	29	24	22	21	19	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
30	25	20	16	9	6	5	4	2	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

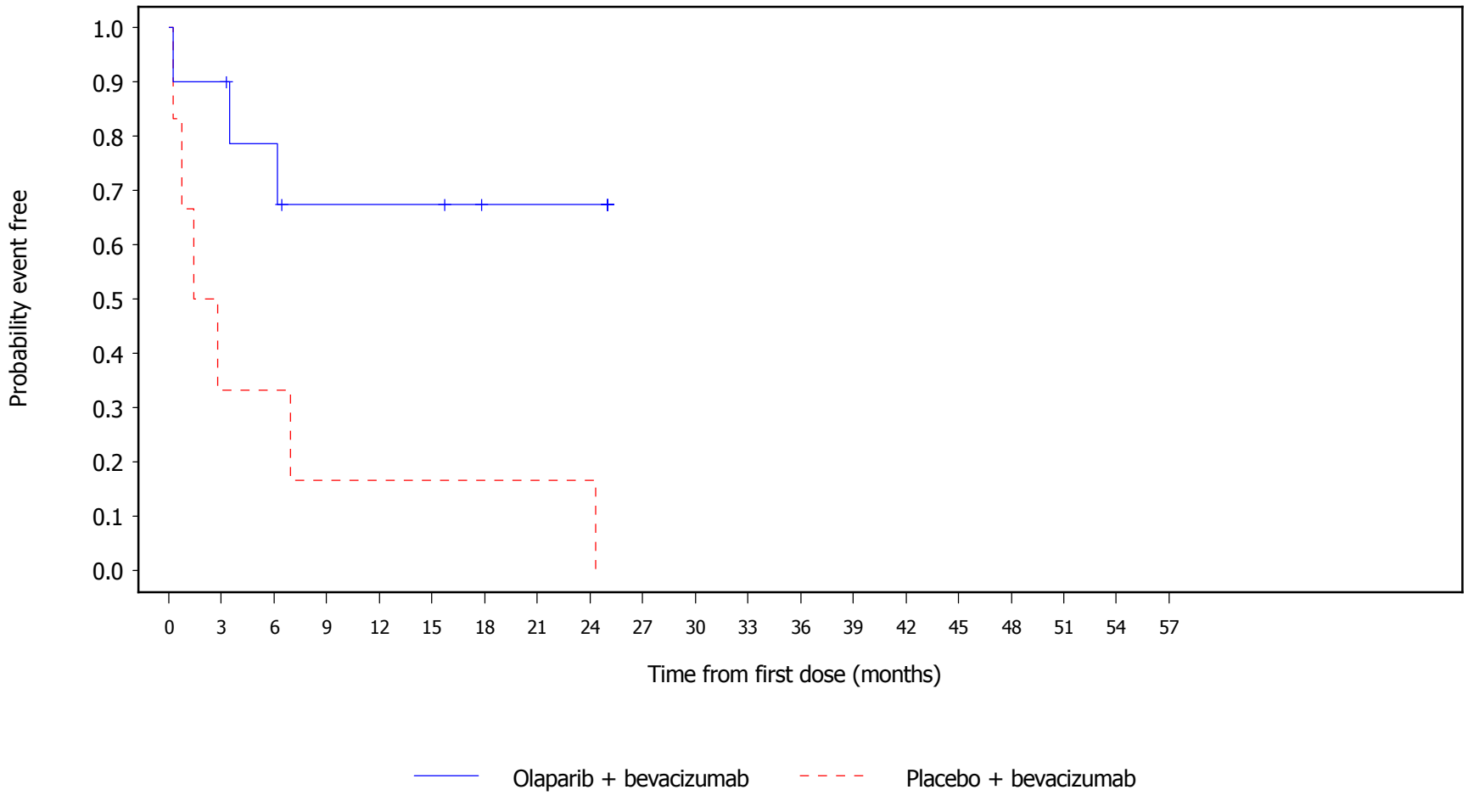
Figure 3.5.15 PAOLA1: Kaplan-Meier plot of AE PT: Hypertension for Region=Europe
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

245	155	127	106	92	82	69	64	56	1	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
125	74	52	44	34	27	21	18	14	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

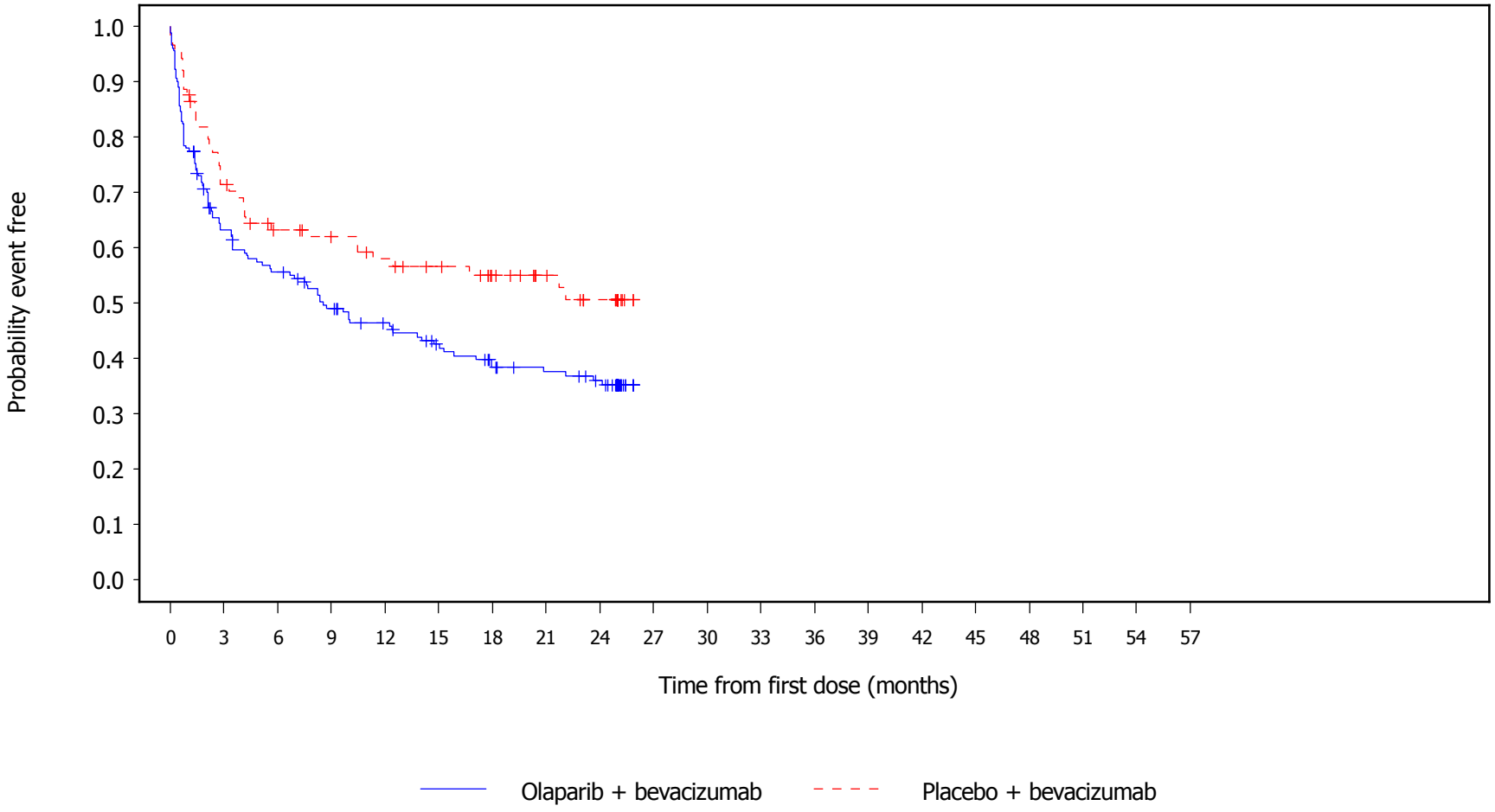
Figure 3.5.16 PAOLA1: Kaplan-Meier plot of AE PT: Hypertension for Region=Japan
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

10	9	7	5	5	5	3	3	3	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
6	2	2	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

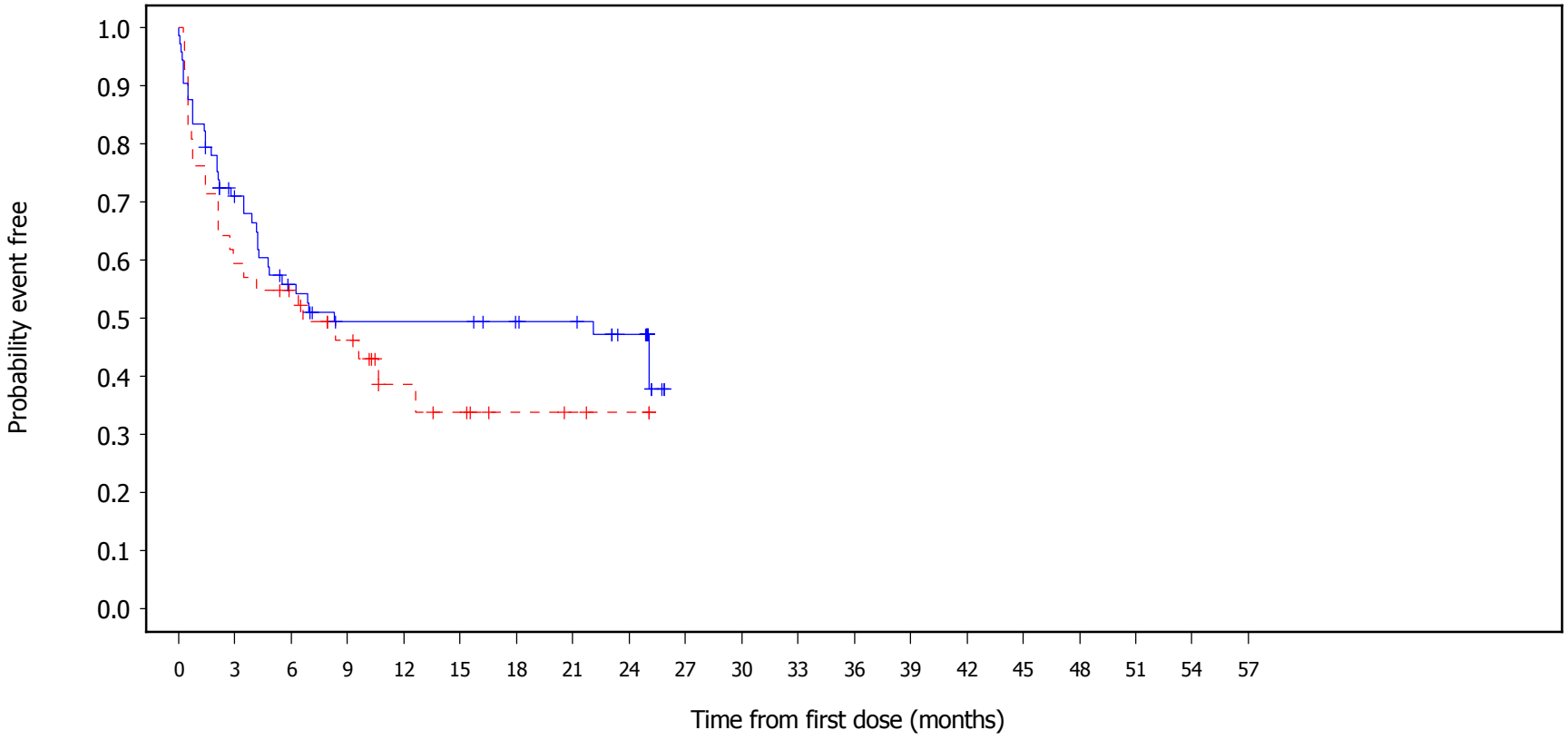
Figure 3.5.17 PAOLA1: Kaplan-Meier plot of AE max CTCAE grade>=3 for FIGO Stage (Disease state)=III
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

182	109	95	81	72	62	53	49	44	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
89	62	51	47	43	39	32	26	19	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

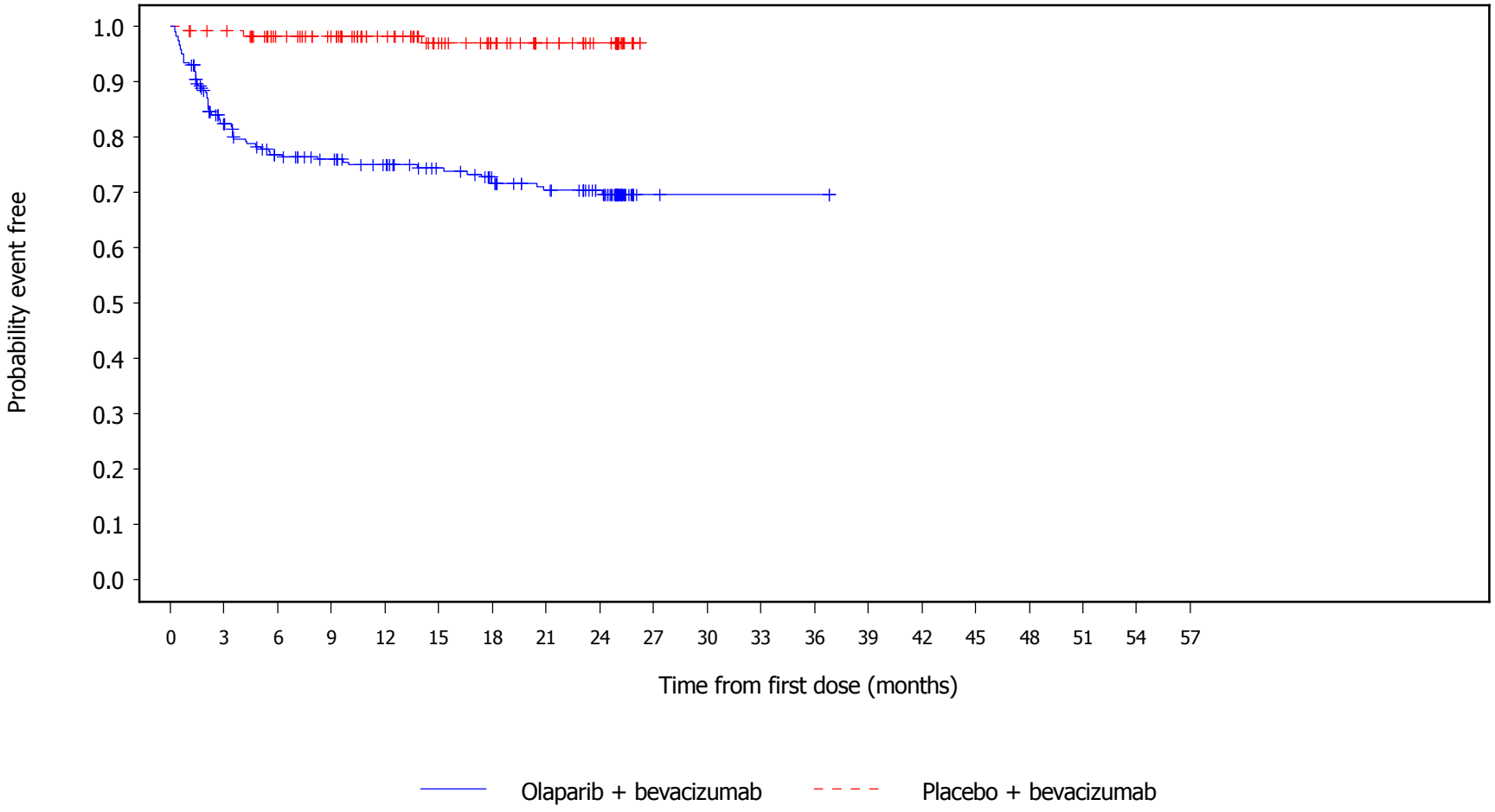
Figure 3.5.18 PAOLA1: Kaplan-Meier plot of AE max CTCAE grade>=3 for FIGO Stage (Disease state)=IV
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

73	47	35	28	28	28	25	24	18	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
42	25	21	15	8	6	3	2	1	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

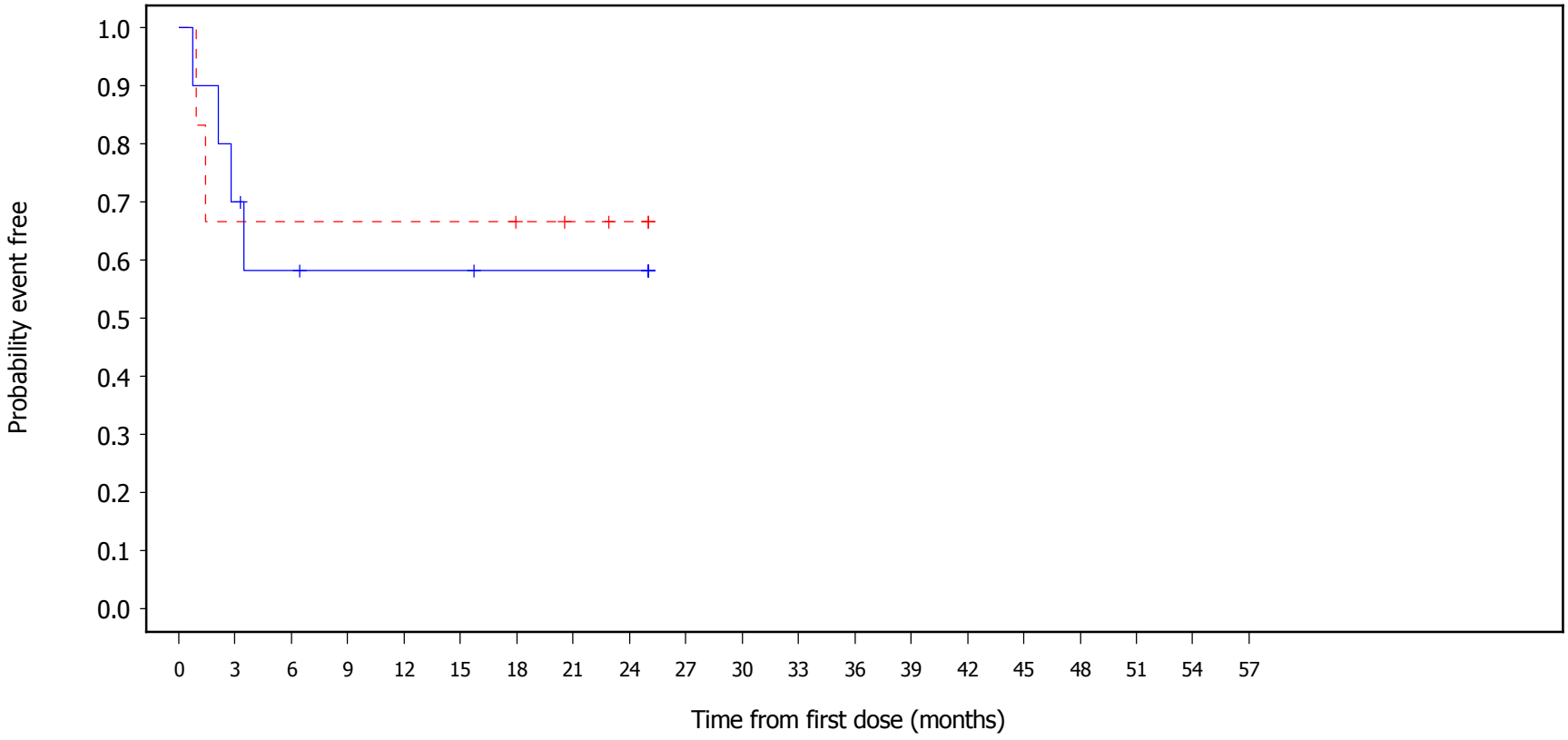
Figure 3.5.19 PAOLA1: Kaplan-Meier plot of AE G>=3 SOC: Blood and lymphatic system disorders for Region=Europe
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

245	185	164	155	146	134	123	114	102	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
125	121	108	99	84	68	58	47	36	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

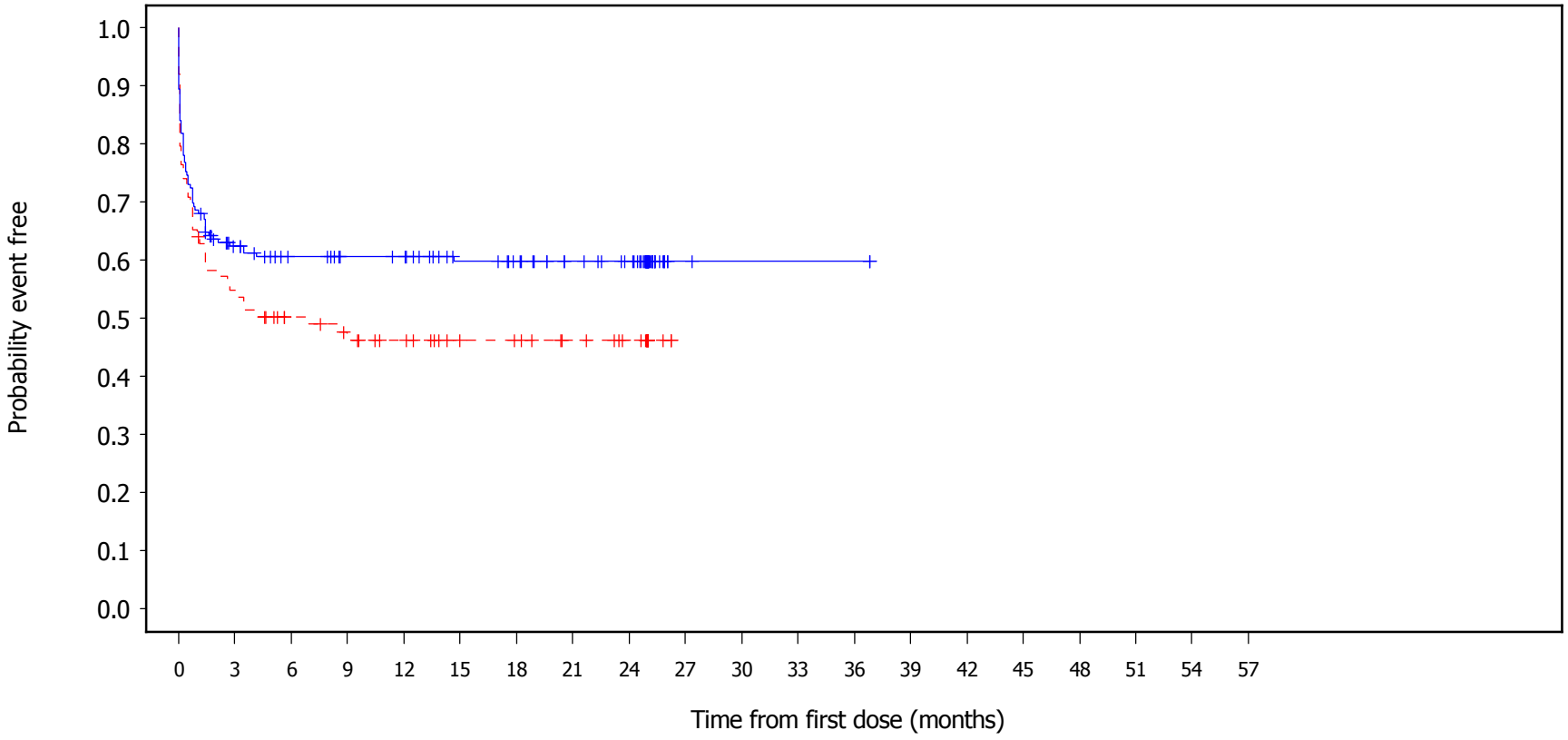
Figure 3.5.20 PAOLA1: Kaplan-Meier plot of AE G>=3 SOC: Blood and lymphatic system disorders for Region=Japan
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

10	7	5	4	4	4	3	3	3	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
6	4	4	4	4	4	3	2	1	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

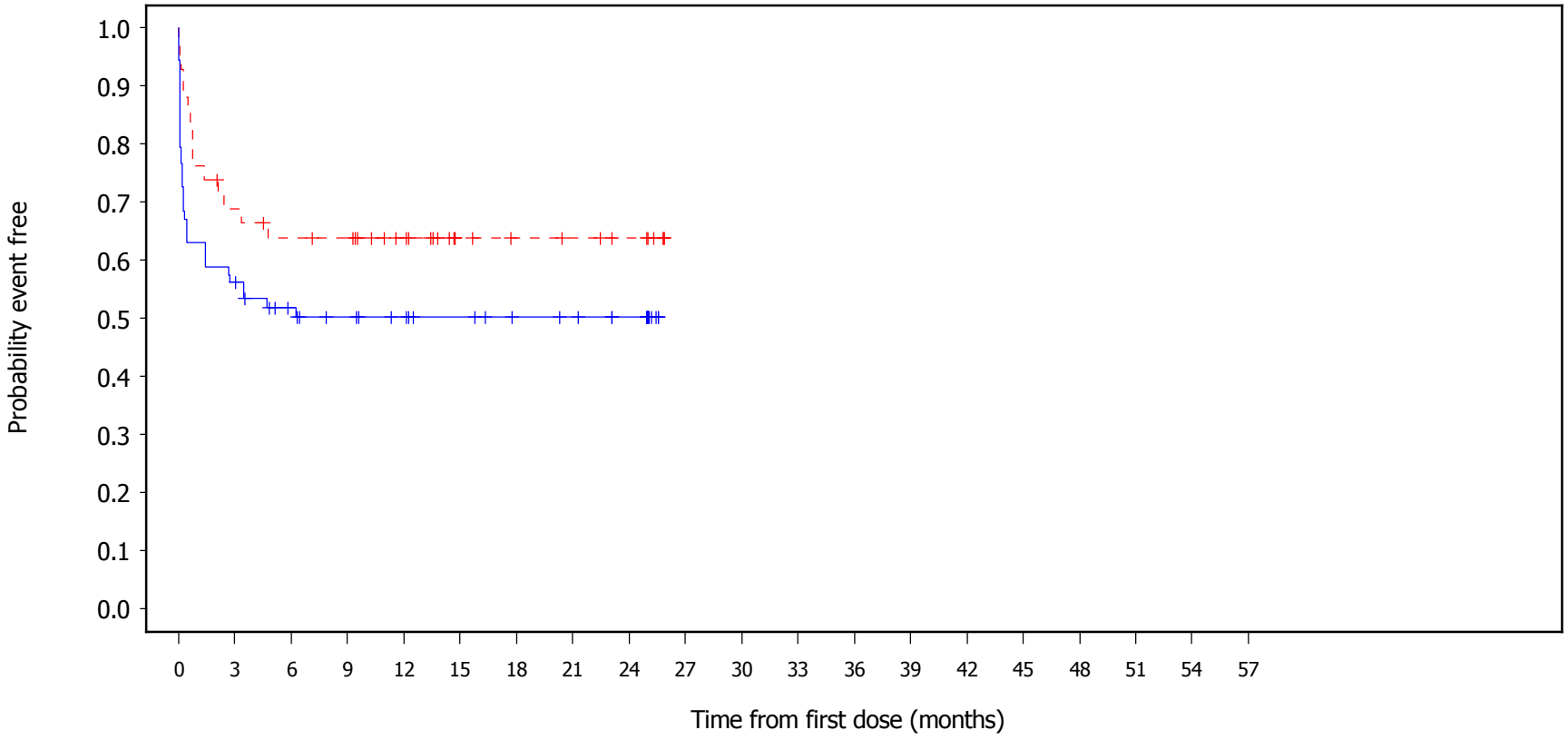
Figure 3.5.21 PAOLA1: Kaplan-Meier plot of AE max CTCAE grade=1 or 2 for FIGO Stage (Disease state)=III
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

182	105	94	89	88	78	74	66	61	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
89	48	38	33	29	22	21	17	13	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

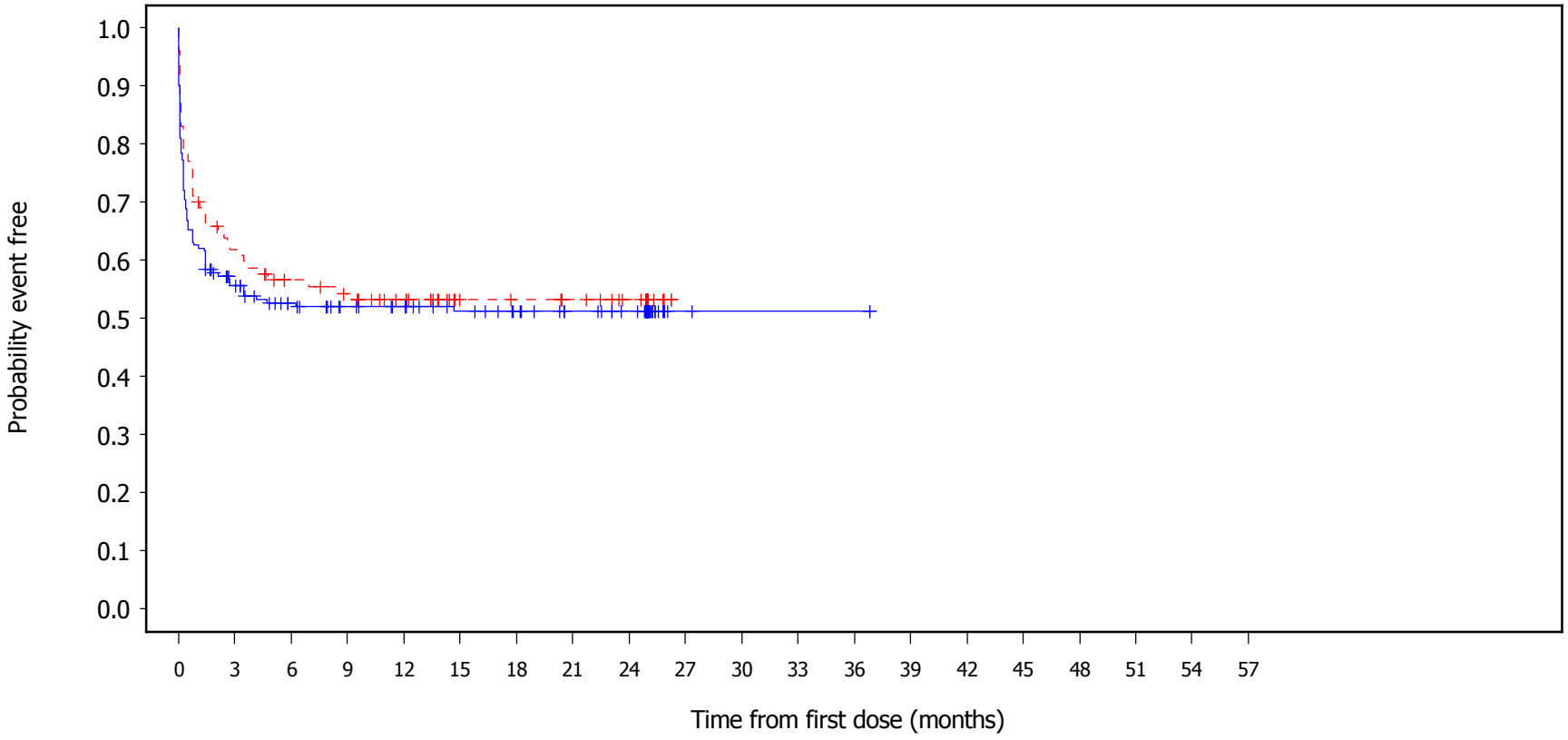
Figure 3.5.22 PAOLA1: Kaplan-Meier plot of AE max CTCAE grade=1 or 2 for FIGO Stage (Disease state)=IV
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

73	41	33	29	26	23	20	19	16	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
42	28	25	24	18	10	8	7	5	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

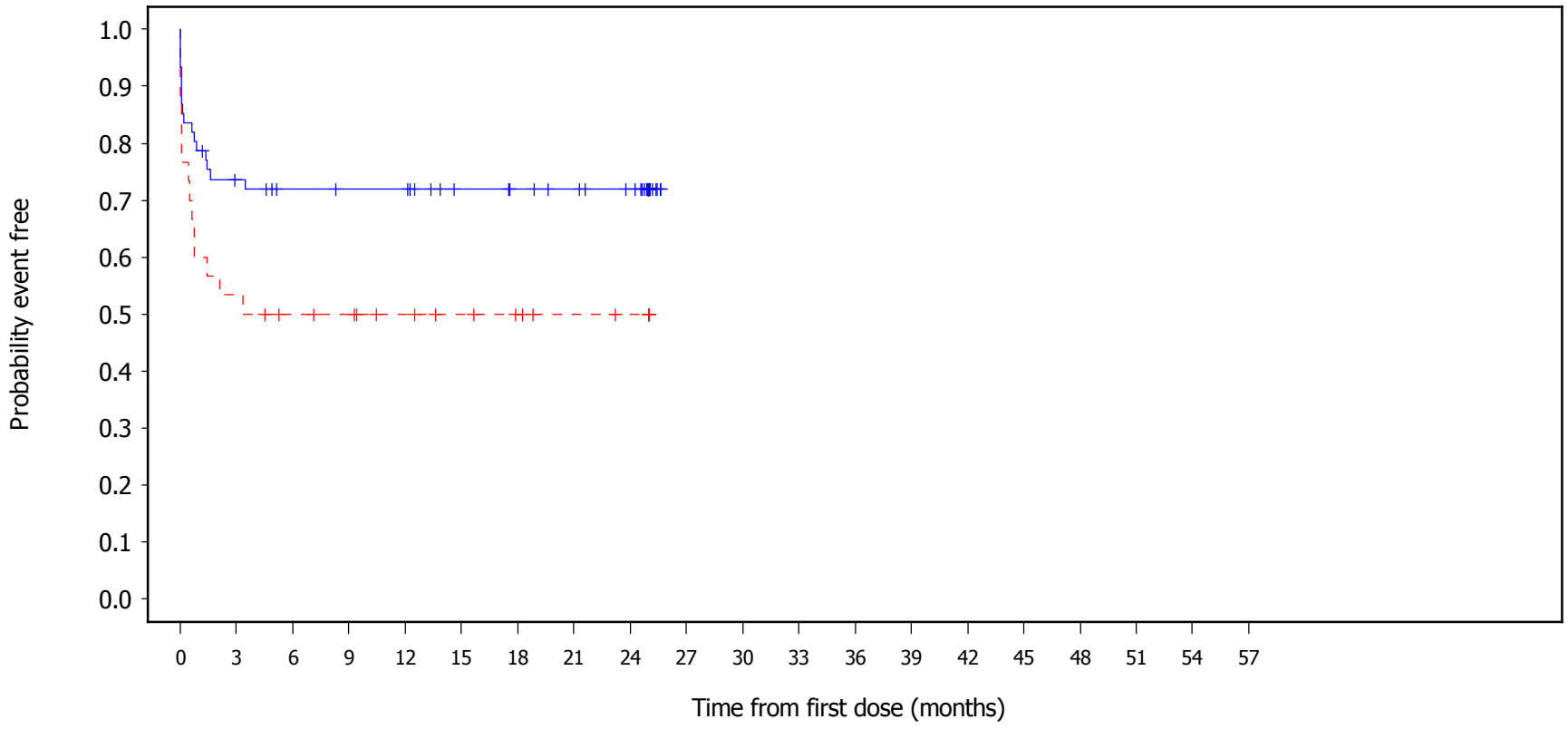
Figure 3.5.23 PAOLA1: Kaplan-Meier plot of AE max CTCAE grade=1 or 2 for ECOG performance status at Baseline=(0) Normal activity
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

190	99	84	76	72	65	60	54	49	2	1	1	1	0	0	0	0	0	0	0	Olaparib + bevacizumab
100	60	50	45	38	25	24	21	16	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Figure 3.5.24 PAOLA1: Kaplan-Meier plot of AE max CTCAE grade=1 or 2 for ECOG performance status at Baseline=(1) Restricted activity
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

61	43	39	38	38	32	30	28	25	0	0	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
30	16	13	12	9	7	5	3	2	0	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect								
					Odds Ratio			Relative Risk			Risk Difference		
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value
AE [c][f][i]	255	255(100)	131	127(96.9)	18.04(1.90,	2396.90)	0.0083 *	1.03(1.001,	1.06)	0.0438 *	NC		
AE SOC: General disorders and administration site conditions [b][e][h]	255	156(61.2)	131	57(43.5)	2.05(1.34,	3.15)	0.0010 *	1.41(1.14,	1.77)	0.0010 *	0.18(0.07,	0.28)	0.0010 *
AE PT: Fatigue [b][e][h]	255	141(55.3)	131	44(33.6)	2.45(1.58,	3.81)	<0.0001 *	1.65(1.28,	2.18)	<0.0001 *	0.22(0.11,	0.32)	<0.0001 *
AE PT: Pyrexia [b][e][h]	255	16(6.3)	131	4(3.1)	2.13(0.76,	7.54)	0.1584	2.05(0.77,	7.06)	0.1584	0.03(-0.01,	0.07)	0.1584
AE PT: Oedema [b][e][h]	255	8(3.1)	131	4(3.1)	1.03(0.32,	3.91)	0.9641	1.03(0.33,	3.79)	0.9641	0.00(-0.04,	0.04)	0.9641
AE PT: Oedema peripheral [b][e][h]	255	15(5.9)	131	7(5.3)	1.11(0.45,	2.96)	0.8280	1.10(0.48,	2.82)	0.8280	0.01(-0.05,	0.05)	0.8280
AE PT: Mucosal inflammation [b][e][h]	255	15(5.9)	131	4(3.1)	1.98(0.70,	7.07)	0.2062	1.93(0.72,	6.65)	0.2062	0.03(-0.02,	0.07)	0.2062
AE PT: Pain [b][e][h]	255	7(2.7)	131	4(3.1)	0.90(0.27,	3.47)	0.8639	0.90(0.28,	3.38)	0.8639	-0.00(-0.05,	0.03)	0.8639

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/orrrardae.sas eorrrardaeaa 28SEP2020:15:55 kvbv306

Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect								
					Odds Ratio			Relative Risk			Risk Difference		
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value
AE SOC: Eye disorders [b][e][h]	255	9(3.5)	131	4(3.1)	1.16(0.37,	4.35)	0.8046	1.16(0.38,	4.20)	0.8046	0.00(-0.04,	0.04)	0.8046
AE SOC: Surgical and medical procedures [b][e][h]	255	10(3.9)	131	3(2.3)	1.74(0.52,	7.87)	0.3853	1.71(0.53,	7.54)	0.3853	0.02(-0.02,	0.05)	0.3853
AE SOC: Endocrine disorders [b][e][h]	255	4(1.6)	131	9(6.9)	0.22(0.06,	0.68)	0.0083 *	0.23(0.06,	0.69)	0.0083 *	-0.05(-0.11,	-0.01)	0.0083 *
AE SOC: Respiratory, thoracic and mediastinal disorders [b][e][h]	255	62(24.3)	131	28(21.4)	1.18(0.72,	1.98)	0.5157	1.14(0.78,	1.72)	0.5157	0.03(-0.06,	0.11)	0.5157
AE PT: Dyspnoea [b][e][h]	255	22(8.6)	131	3(2.3)	4.03(1.36,	17.24)	0.0094 *	3.77(1.34,	15.71)	0.0094 *	0.06(0.02,	0.11)	0.0094 *
AE PT: Epistaxis [b][e][h]	255	18(7.1)	131	7(5.3)	1.35(0.57,	3.54)	0.5105	1.32(0.59,	3.32)	0.5105	0.02(-0.04,	0.07)	0.5105
AE PT: Cough [b][e][h]	255	11(4.3)	131	6(4.6)	0.94(0.35,	2.78)	0.9041	0.94(0.37,	2.68)	0.9041	-0.00(-0.05,	0.04)	0.9041

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.

Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect								
					Odds Ratio			Relative Risk			Risk Difference		
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value
AE PT: Rhinorrhoea [b][e][h]	255	5(2.0)	131	3(2.3)	0.85(0.21,	4.21)	0.8310	0.86(0.21,	4.12)	0.8310	-0.00(-0.04,	0.03)	0.8310
AE PT: Oropharyngeal pain [b][e][h]	255	4(1.6)	131	4(3.1)	0.51(0.12,	2.17)	0.3452	0.51(0.12,	2.14)	0.3452	-0.01(-0.06,	0.02)	0.3452
AE SOC: Skin and subcutaneous tissue disorders [b][e][h]	255	44(17.3)	131	19(14.5)	1.23(0.69,	2.25)	0.4852	1.19(0.74,	2.00)	0.4852	0.03(-0.05,	0.10)	0.4852
AE PT: Alopecia [b][e][h]	255	8(3.1)	131	2(1.5)	2.09(0.51,	13.97)	0.3245	2.05(0.52,	13.49)	0.3245	0.02(-0.02,	0.05)	0.3245
AE PT: Rash [b][e][h]	255	10(3.9)	131	7(5.3)	0.72(0.27,	2.03)	0.5251	0.73(0.29,	1.98)	0.5251	-0.01(-0.07,	0.03)	0.5251
AE PT: Erythema [c][g][i]	255	8(3.1)	131	0	9.03(1.11,	1171.24)	0.0367 *	NC			NC		
AE PT: Pruritus [b][e][h]	255	5(2.0)	131	3(2.3)	0.85(0.21,	4.21)	0.8310	0.86(0.21,	4.12)	0.8310	-0.00(-0.04,	0.03)	0.8310
AE SOC: Renal and urinary disorders [b][e][h]	255	27(10.6)	131	24(18.3)	0.53(0.29,	0.96)	0.0373 *	0.58(0.35,	0.97)	0.0373 *	-0.08(-0.16,	-0.00)	0.0373 *

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect								
					Odds Ratio			Relative Risk			Risk Difference		
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value		Estimate (95% CI)	2-sided p-value		Estimate (95% CI)	2-sided p-value	
AE PT: Proteinuria [b][e][h]	255	19(7.5)	131	19(14.5)	0.47(0.24, 0.94)	0.0316	*	0.51(0.28, 0.94)	0.0316	*	-0.07(-0.14, -0.01)	0.0316	*
AE SOC: Blood and lymphatic system disorders [b][e][h]	255	148(58.0)	131	41(31.3)	3.04(1.96, 4.77)	<0.0001	*	1.85(1.43, 2.48)	<0.0001	*	0.27(0.17, 0.36)	<0.0001	*
AE PT: Anaemia [b][e][h]	255	102(40.0)	131	12(9.2)	6.61(3.60, 13.19)	<0.0001	*	4.37(2.62, 8.11)	<0.0001	*	0.31(0.23, 0.38)	<0.0001	*
AE PT: Leukopenia [b][e][h]	255	46(18.0)	131	11(8.4)	2.40(1.24, 5.04)	0.0085	*	2.15(1.20, 4.24)	0.0085	*	0.10(0.03, 0.16)	0.0085	*
AE PT: Lymphopenia [b][e][h]	255	60(23.5)	131	10(7.6)	3.72(1.91, 7.98)	<0.0001	*	3.08(1.72, 6.22)	<0.0001	*	0.16(0.09, 0.23)	<0.0001	*
AE PT: Neutropenia [b][e][h]	255	30(11.8)	131	15(11.5)	1.03(0.54, 2.04)	0.9273		1.03(0.58, 1.90)	0.9273		0.00(-0.07, 0.07)	0.9273	
AE PT: Thrombocytopenia [b][e][h]	255	12(4.7)	131	3(2.3)	2.11(0.66, 9.37)	0.2247		2.05(0.67, 8.90)	0.2247		0.02(-0.02, 0.06)	0.2247	

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect								
					Odds Ratio			Relative Risk			Risk Difference		
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value
AE SOC: Gastrointestinal disorders [b][e][h]	255	189(74.1)	131	83(63.4)	1.66(1.05,	2.60)	0.0297 *	1.17(1.01,	1.37)	0.0297 *	0.11(0.01,	0.21)	0.0297 *
AE PT: Abdominal pain [b][e][h]	255	56(22.0)	131	32(24.4)	0.87(0.53,	1.44)	0.5858	0.90(0.62,	1.33)	0.5858	-0.02(-0.12,	0.06)	0.5858
AE PT: Intestinal obstruction [b][e][h]	255	5(2.0)	131	1(0.8)	2.60(0.41,	50.06)	0.3394	2.57(0.42,	48.92)	0.3394	0.01(-0.02,	0.04)	0.3394
AE PT: Diarrhoea [b][e][h]	255	50(19.6)	131	25(19.1)	1.03(0.61,	1.79)	0.9019	1.03(0.68,	1.61)	0.9019	0.01(-0.08,	0.09)	0.9019
AE PT: Dyspepsia [b][e][h]	255	12(4.7)	131	3(2.3)	2.11(0.66,	9.37)	0.2247	2.05(0.67,	8.90)	0.2247	0.02(-0.02,	0.06)	0.2247
AE PT: Vomiting [b][e][h]	255	54(21.2)	131	16(12.2)	1.93(1.08,	3.63)	0.0263 *	1.73(1.06,	3.02)	0.0263 *	0.09(0.01,	0.16)	0.0263 *
AE PT: Haemorrhoids [b][e][h]	255	7(2.7)	131	4(3.1)	0.90(0.27,	3.47)	0.8639	0.90(0.28,	3.38)	0.8639	-0.00(-0.05,	0.03)	0.8639
AE PT: Constipation [b][e][h]	255	28(11.0)	131	15(11.5)	0.95(0.50,	1.90)	0.8897	0.96(0.54,	1.78)	0.8897	-0.00(-0.08,	0.06)	0.8897

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AE PT: Abdominal pain upper [b][e][h]	255	10(3.9)	131	4(3.1)	1.30(0.42, 4.80)	0.6614	1.28(0.44, 4.61)	0.6614	0.01(-0.04, 0.05)	0.6614
AE PT: Stomatitis [b][e][h]	255	12(4.7)	131	2(1.5)	3.19(0.85, 20.66)	0.0897	3.08(0.86, 19.62)	0.0897	0.03(-0.01, 0.07)	0.0897
AE PT: Subileus [c][e][h]	255	2(0.8)	131	2(1.5)	0.51(0.08, 3.34)	0.4599	0.51(0.06, 4.24)	0.5069	-0.01(-0.04, 0.01)	0.5069
AE PT: Nausea [b][e][h]	255	144(56.5)	131	30(22.9)	4.37(2.74, 7.12)	<0.0001 *	2.47(1.81, 3.52)	<0.0001 *	0.34(0.24, 0.43)	<0.0001 *
AE PT: Gingival bleeding [b][e][h]	255	9(3.5)	131	2(1.5)	2.36(0.60, 15.63)	0.2385	2.31(0.61, 15.02)	0.2385	0.02(-0.02, 0.05)	0.2385
AE PT: Toothache [b][e][h]	255	6(2.4)	131	3(2.3)	1.03(0.27, 4.93)	0.9690	1.03(0.28, 4.81)	0.9690	0.00(-0.04, 0.03)	0.9690
AE SOC: Immune system disorders [b][e][h]	255	7(2.7)	131	1(0.8)	3.67(0.64, 68.96)	0.1603	3.60(0.65, 66.85)	0.1603	0.02(-0.01, 0.05)	0.1603
AE SOC: Nervous system disorders [b][e][h]	255	87(34.1)	131	32(24.4)	1.60(1.003, 2.60)	0.0483 *	1.40(1.002, 2.01)	0.0483 *	0.10(0.001, 0.19)	0.0483 *

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
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[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AE PT: Dysgeusia [b][e][h]	255	23(9.0)	131	2(1.5)	6.39(1.85, 40.24)	0.0016 *	5.91(1.79, 36.45)	0.0016 *	0.07(0.03, 0.12)	0.0016 *
AE PT: Headache [b][e][h]	255	39(15.3)	131	22(16.8)	0.89(0.51, 1.60)	0.7032	0.91(0.57, 1.50)	0.7032	-0.01(-0.10, 0.06)	0.7032
AE PT: Neuropathy peripheral [b][e][h]	255	22(8.6)	131	5(3.8)	2.38(0.95, 7.24)	0.0657	2.26(0.95, 6.63)	0.0657	0.05(-0.00, 0.10)	0.0657
AE PT: Polyneuropathy [b][e][h]	255	8(3.1)	131	2(1.5)	2.09(0.51, 13.97)	0.3245	2.05(0.52, 13.49)	0.3245	0.02(-0.02, 0.05)	0.3245
AE PT: Dizziness [b][e][h]	255	8(3.1)	131	3(2.3)	1.38(0.39, 6.39)	0.6297	1.37(0.40, 6.18)	0.6297	0.01(-0.03, 0.04)	0.6297
AE SOC: Ear and labyrinth disorders [b][e][h]	255	10(3.9)	131	8(6.1)	0.63(0.24, 1.68)	0.3442	0.64(0.26, 1.65)	0.3442	-0.02(-0.08, 0.02)	0.3442
AE PT: Vertigo [b][e][h]	255	6(2.4)	131	6(4.6)	0.50(0.15, 1.63)	0.2450	0.51(0.16, 1.61)	0.2450	-0.02(-0.07, 0.01)	0.2450

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect								
					Odds Ratio			Relative Risk			Risk Difference		
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value
AE SOC: Vascular disorders [b][e][h]	255	137(53.7)	131	82(62.6)	0.69(0.45,	1.06)	0.0946	0.86(0.72,	1.03)	0.0946	-0.09(-0.19,	0.02)	0.0946
AE PT: Hot flush [b][e][h]	255	7(2.7)	131	3(2.3)	1.20(0.33,	5.66)	0.7878	1.20(0.34,	5.49)	0.7878	0.00(-0.03,	0.04)	0.7878
AE PT: Hypertension [b][e][h]	255	122(47.8)	131	78(59.5)	0.62(0.41,	0.95)	0.0290 *	0.80(0.67,	0.98)	0.0290 *	-0.12(-0.22,	-0.01)	0.0290 *
AE SOC: Cardiac disorders [b][e][h]	255	7(2.7)	131	7(5.3)	0.50(0.17,	1.49)	0.2079	0.51(0.18,	1.47)	0.2079	-0.03(-0.08,	0.01)	0.2079
AE SOC: Infections and infestations [b][e][h]	255	128(50.2)	131	63(48.1)	1.09(0.71,	1.66)	0.6953	1.04(0.85,	1.31)	0.6953	0.02(-0.08,	0.13)	0.6953
AE PT: Bronchitis [b][e][h]	255	13(5.1)	131	3(2.3)	2.29(0.72,	10.13)	0.1691	2.23(0.73,	9.58)	0.1691	0.03(-0.01,	0.07)	0.1691
AE PT: Gastroenteritis [c][g][i]	255	13(5.1)	131	0	14.64(1.92,	1878.82)	0.0042 *	NC			NC		
AE PT: Gingivitis [b][e][h]	255	7(2.7)	131	2(1.5)	1.82(0.43,	12.33)	0.4367	1.80(0.44,	11.95)	0.4367	0.01(-0.02,	0.04)	0.4367

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
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[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AE PT: Influenza [b][e][h]	255	8(3.1)	131	1(0.8)	4.21(0.76, 78.53)	0.1092	4.11(0.77, 75.81)	0.1092	0.02(-0.01, 0.05)	0.1092
AE PT: Urinary tract infection [b][e][h]	255	41(16.1)	131	12(9.2)	1.90(0.99, 3.91)	0.0542	1.76(0.99, 3.38)	0.0542	0.07(-0.00, 0.13)	0.0542
AE PT: Infection [b][e][h]	255	9(3.5)	131	1(0.8)	4.76(0.88, 88.16)	0.0741	4.62(0.88, 84.77)	0.0741	0.03(-0.00, 0.06)	0.0741
AE PT: Nasopharyngitis [b][e][h]	255	15(5.9)	131	10(7.6)	0.76(0.33, 1.79)	0.5130	0.77(0.36, 1.73)	0.5130	-0.02(-0.08, 0.03)	0.5130
AE PT: Pharyngitis [b][e][h]	255	8(3.1)	131	4(3.1)	1.03(0.32, 3.91)	0.9641	1.03(0.33, 3.79)	0.9641	0.00(-0.04, 0.04)	0.9641
AE PT: Rhinitis [b][e][h]	255	10(3.9)	131	4(3.1)	1.30(0.42, 4.80)	0.6614	1.28(0.44, 4.61)	0.6614	0.01(-0.04, 0.05)	0.6614
AE PT: Tooth abscess [b][e][h]	255	8(3.1)	131	4(3.1)	1.03(0.32, 3.91)	0.9641	1.03(0.33, 3.79)	0.9641	0.00(-0.04, 0.04)	0.9641
AE PT: Tooth infection [b][e][h]	255	7(2.7)	131	2(1.5)	1.82(0.43, 12.33)	0.4367	1.80(0.44, 11.95)	0.4367	0.01(-0.02, 0.04)	0.4367

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect								
					Odds Ratio			Relative Risk			Risk Difference		
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value
AE PT: Cystitis [b][e][h]	255	11(4.3)	131	9(6.9)	0.61(0.25,	1.55)	0.2929	0.63(0.27,	1.52)	0.2929	-0.03(-0.08,	0.02)	0.2929
AE SOC: Psychiatric disorders [b][e][h]	255	21(8.2)	131	13(9.9)	0.81(0.40,	1.72)	0.5827	0.83(0.43,	1.65)	0.5827	-0.02(-0.08,	0.04)	0.5827
AE PT: Anxiety [b][e][h]	255	7(2.7)	131	5(3.8)	0.71(0.22,	2.44)	0.5716	0.72(0.23,	2.39)	0.5716	-0.01(-0.06,	0.03)	0.5716
AE PT: Depression [b][e][h]	255	6(2.4)	131	1(0.8)	3.13(0.53,	59.48)	0.2339	3.08(0.53,	57.89)	0.2339	0.02(-0.01,	0.04)	0.2339
AE PT: Sleep disorder [b][e][h]	255	7(2.7)	131	7(5.3)	0.50(0.17,	1.49)	0.2079	0.51(0.18,	1.47)	0.2079	-0.03(-0.08,	0.01)	0.2079
AE SOC: Musculoskeletal and connective tissue disorders [b][e][h]	255	106(41.6)	131	57(43.5)	0.92(0.60,	1.42)	0.7146	0.96(0.75,	1.23)	0.7146	-0.02(-0.12,	0.08)	0.7146
AE PT: Arthralgia [b][e][h]	255	64(25.1)	131	30(22.9)	1.13(0.69,	1.87)	0.6327	1.10(0.76,	1.63)	0.6327	0.02(-0.07,	0.11)	0.6327

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect								
					Odds Ratio			Relative Risk			Risk Difference		
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value	Estimate (95% CI)		2-sided p-value
AE PT: Muscle spasms [b][e][h]	255	11(4.3)	131	8(6.1)	0.69(0.27,	1.83)	0.4478	0.71(0.29,	1.78)	0.4478	-0.02(-0.07,	0.03)	0.4478
AE PT: Myalgia [b][e][h]	255	21(8.2)	131	7(5.3)	1.59(0.69,	4.13)	0.2882	1.54(0.71,	3.83)	0.2882	0.03(-0.03,	0.08)	0.2882
AE PT: Neck pain [b][e][h]	255	4(1.6)	131	5(3.8)	0.40(0.10,	1.54)	0.1794	0.41(0.10,	1.53)	0.1794	-0.02(-0.07,	0.01)	0.1794
AE PT: Back pain [b][e][h]	255	17(6.7)	131	8(6.1)	1.10(0.47,	2.76)	0.8317	1.09(0.50,	2.61)	0.8317	0.01(-0.05,	0.05)	0.8317
AE PT: Pain in extremity [b][e][h]	255	17(6.7)	131	8(6.1)	1.10(0.47,	2.76)	0.8317	1.09(0.50,	2.61)	0.8317	0.01(-0.05,	0.05)	0.8317
AE PT: Musculoskeletal pain [b][e][h]	255	9(3.5)	131	9(6.9)	0.50(0.19,	1.30)	0.1510	0.51(0.21,	1.29)	0.1510	-0.03(-0.09,	0.01)	0.1510
AE SOC: Metabolism and nutrition disorders [b][e][h]	255	30(11.8)	131	9(6.9)	1.81(0.86,	4.15)	0.1198	1.71(0.88,	3.73)	0.1198	0.05(-0.01,	0.11)	0.1198
AE PT: Decreased appetite [b][e][h]	255	23(9.0)	131	4(3.1)	3.15(1.18,	10.91)	0.0202 *	2.95(1.17,	9.92)	0.0202 *	0.06(0.01,	0.11)	0.0202 *

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AE SOC: Investigations [b][e][h]	255	73(28.6)	131	29(22.1)	1.41(0.87, 2.34)	0.1668	1.29(0.90, 1.92)	0.1668	0.06(-0.03, 0.15)	0.1668
AE PT: Weight increased [b][e][h]	255	11(4.3)	131	10(7.6)	0.55(0.22, 1.34)	0.1834	0.57(0.24, 1.32)	0.1834	-0.03(-0.09, 0.01)	0.1834
AE PT: Blood creatinine increased [b][e][h]	255	13(5.1)	131	1(0.8)	6.98(1.37,127.51)	0.0151 *	6.68(1.35,120.60)	0.0151 *	0.04(0.01, 0.08)	0.0151 *
AE PT: White blood cell count decreased [b][e][h]	255	8(3.1)	131	2(1.5)	2.09(0.51, 13.97)	0.3245	2.05(0.52, 13.49)	0.3245	0.02(-0.02, 0.05)	0.3245
AE PT: Lymphocyte count decreased [b][e][h]	255	7(2.7)	131	1(0.8)	3.67(0.64, 68.96)	0.1603	3.60(0.65, 66.85)	0.1603	0.02(-0.01, 0.05)	0.1603
AE PT: Neutrophil count decreased [b][e][h]	255	20(7.8)	131	6(4.6)	1.77(0.73, 4.95)	0.2119	1.71(0.75, 4.59)	0.2119	0.03(-0.02, 0.08)	0.2119
AE PT: Platelet count decreased [b][e][h]	255	5(2.0)	131	1(0.8)	2.60(0.41, 50.06)	0.3394	2.57(0.42, 48.92)	0.3394	0.01(-0.02, 0.04)	0.3394

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AE SOC: Injury, poisoning and procedural complications [b][e][h]	255	15(5.9)	131	9(6.9)	0.85(0.37, 2.07)	0.7056	0.86(0.39, 1.99)	0.7056	-0.01(-0.07, 0.04)	0.7056

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.

Table 3.6.2 PAOLA1: Summary of analysis of serious adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
SAE [b][e][h]	255	73(28.6)	131	45(34.4)	0.77(0.49, 1.21)	0.2501	0.83(0.62, 1.14)	0.2501	-0.06(-0.16, 0.04)	0.2501
SAE SOC: Respiratory, thoracic and mediastinal disorders [b][e][h]	255	7(2.7)	131	1(0.8)	3.67(0.64, 68.96)	0.1603	3.60(0.65, 66.85)	0.1603	0.02(-0.01, 0.05)	0.1603
SAE SOC: Blood and lymphatic system disorders [b][e][h]	255	17(6.7)	131	1(0.8)	9.29(1.87,168.17)	0.0029 *	8.73(1.83,156.43)	0.0029 *	0.06(0.02, 0.10)	0.0029 *
SAE PT: Anaemia [b][e][h]	255	13(5.1)	131	1(0.8)	6.98(1.37,127.51)	0.0151 *	6.68(1.35,120.60)	0.0151 *	0.04(0.01, 0.08)	0.0151 *
SAE SOC: Gastrointestinal disorders [b][e][h]	255	11(4.3)	131	10(7.6)	0.55(0.22, 1.34)	0.1834	0.57(0.24, 1.32)	0.1834	-0.03(-0.09, 0.01)	0.1834
SAE SOC: Vascular disorders [b][e][h]	255	24(9.4)	131	16(12.2)	0.75(0.38, 1.48)	0.3977	0.77(0.43, 1.43)	0.3977	-0.03(-0.10, 0.04)	0.3977
SAE PT: Hypertension [b][e][h]	255	20(7.8)	131	16(12.2)	0.61(0.31, 1.24)	0.1697	0.64(0.35, 1.22)	0.1697	-0.04(-0.11, 0.02)	0.1697

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.2 PAOLA1: Summary of analysis of serious adverse events
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
SAE SOC: Infections and infestations [b][e][h]	255	12(4.7)	131	9(6.9)	0.67(0.28, 1.68)	0.3827	0.68(0.30, 1.64)	0.3827	-0.02(-0.08, 0.03)	0.3827

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.

Table 3.6.3 PAOLA1: Summary of analysis of adverse events leading to discontinuation of study treatment (odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AE leading to discontinuation of treatment [b][e][h]	255	50(19.6)	131	8(6.1)	3.75(1.81, 8.79)	0.0002 *	3.21(1.67, 7.15)	0.0002 *	0.14(0.07, 0.20)	0.0002 *

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.

Table 3.6.4 PAOLA1: Summary of analysis of severe adverse events with max. CTCAE grade >=3
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AE max CTCAE grade>=3 [b][e][h]	255	147(57.6)	131	65(49.6)	1.38(0.91, 2.11)	0.1337	1.16(0.96, 1.44)	0.1337	0.08(-0.02, 0.18)	0.1337
AE G>=3 SOC: General disorders and administration site conditions [b][e][h]	255	15(5.9)	131	1(0.8)	8.12(1.62,147.67)	0.0067 *	7.71(1.59,138.51)	0.0067 *	0.05(0.02, 0.09)	0.0067 *
AE G>=3 PT: Fatigue [c][g][i]	255	14(5.5)	131	0	15.79(2.08,2023.85)	0.0027 *	NC		NC	
AE G>=3 SOC: Respiratory, thoracic and mediastinal disorders [b][e][h]	255	6(2.4)	131	2(1.5)	1.55(0.35, 10.71)	0.5801	1.54(0.36, 10.42)	0.5801	0.01(-0.03, 0.04)	0.5801
AE G>=3 SOC: Renal and urinary disorders [c][g][i]	255	3(1.2)	131	0	3.65(0.35,491.54)	0.3214	NC		NC	

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.4 PAOLA1: Summary of analysis of severe adverse events with max. CTCAE grade >=3
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AE G>=3 SOC: Blood and lymphatic system disorders [b][e][h]	255	71(27.8)	131	5(3.8)	9.72(4.20, 28.31)	<0.0001 *	7.29(3.37, 20.42)	<0.0001 *	0.24(0.17, 0.30)	<0.0001 *
AE G>=3 PT: Anaemia [b][e][h]	255	47(18.4)	131	1(0.8)	29.37(6.31,523.04)	<0.0001 *	24.15(5.39,425.07)	<0.0001 *	0.18(0.13, 0.23)	<0.0001 *
AE G>=3 PT: Leukopenia [c][g][i]	255	6(2.4)	131	0	6.85(0.80,896.13)	0.0873	NC		NC	
AE G>=3 PT: Lymphopenia [b][e][h]	255	19(7.5)	131	3(2.3)	3.44(1.14, 14.81)	0.0260 *	3.25(1.13, 13.67)	0.0260 *	0.05(0.01, 0.09)	0.0260 *
AE G>=3 PT: Neutropenia [b][e][h]	255	12(4.7)	131	1(0.8)	6.42(1.24,117.55)	0.0226 *	6.16(1.23,111.64)	0.0226 *	0.04(0.01, 0.07)	0.0226 *
AE G>=3 SOC: Gastrointestinal disorders [b][e][h]	255	30(11.8)	131	12(9.2)	1.32(0.67, 2.77)	0.4307	1.28(0.70, 2.53)	0.4307	0.03(-0.04, 0.09)	0.4307
AE G>=3 PT: Diarrhoea [b][e][h]	255	7(2.7)	131	3(2.3)	1.20(0.33, 5.66)	0.7878	1.20(0.34, 5.49)	0.7878	0.00(-0.03, 0.04)	0.7878

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/orrrardae.sas eorrrardaeae 28SEP2020:15:55 kvbv306

Table 3.6.4 PAOLA1: Summary of analysis of severe adverse events with max. CTCAE grade >=3
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AE G>=3 PT: Nausea [c][g][i]	255	8(3.1)	131	0	9.03(1.11,1171.24)	0.0367 *	NC		NC	
AE G>=3 SOC: Nervous system disorders [b][e][h]	255	7(2.7)	131	4(3.1)	0.90(0.27, 3.47)	0.8639	0.90(0.28, 3.38)	0.8639	-0.00(-0.05, 0.03)	0.8639
AE G>=3 SOC: Vascular disorders [b][e][h]	255	48(18.8)	131	42(32.1)	0.49(0.30, 0.80)	0.0041 *	0.59(0.41, 0.84)	0.0041 *	-0.13(-0.23, -0.04)	0.0041 *
AE G>=3 PT: Hypertension [b][e][h]	255	45(17.6)	131	42(32.1)	0.45(0.28, 0.74)	0.0016 *	0.55(0.38, 0.79)	0.0016 *	-0.14(-0.24, -0.05)	0.0016 *
AE G>=3 SOC: Infections and infestations [b][e][h]	255	14(5.5)	131	10(7.6)	0.70(0.31, 1.67)	0.4158	0.72(0.33, 1.63)	0.4158	-0.02(-0.08, 0.03)	0.4158
AE G>=3 SOC: Investigations [b][e][h]	255	16(6.3)	131	5(3.8)	1.69(0.64, 5.25)	0.2998	1.64(0.66, 4.94)	0.2998	0.02(-0.02, 0.07)	0.2998
AE G>=3 PT: Neutrophil count decreased [b][e][h]	255	6(2.4)	131	1(0.8)	3.13(0.53, 59.48)	0.2339	3.08(0.53, 57.89)	0.2339	0.02(-0.01, 0.04)	0.2339

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.

Table 3.6.5 PAOLA1: Summary of analysis of non-severe adverse events with max. CTCAE grade 1 or 2
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AE max CTCAE grade=1 or 2 [b][e][h]	255	108(42.4)	131	62(47.3)	0.82(0.54, 1.25)	0.3517	0.89(0.71, 1.14)	0.3517	-0.05(-0.15, 0.05)	0.3517

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA version 23.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.

Table 3.8 PAOLA1: Duration of olaparib or placebo exposure (Safety analysis set)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

		Olaparib + bevacizumab (N=255)	Placebo + bevacizumab (N=131)
Total treatment duration [a]	n	255	131
	Mean	17.9	15.7
	SD	8.46	7.50
	Median	23.8	16.8
	Min	0	0
	Max	36	25
Actual treatment duration [b]	n	255	131
	Mean	17.3	15.5
	SD	8.45	7.46
	Median	22.1	16.8
	Min	0	0
	Max	36	25

[a] Total treatment duration (months) = (last dose date - first dose date + 1) / 30.4375.
[b] Actual treatment duration (months) = (total treatment duration - total duration of dose interruptions) / 30.4375.
Dose interruptions include those where the patient forgot to take all doses on a given day.
If patient is ongoing, data-cut-off has been used to calculate duration.
SD = standard deviation.

Table 3.9 PAOLA1: Summary of analysis of adverse events leading to discontinuation of study treatment
(total, and by SOC and PT)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

System organ class / MedDRA Preferred term	Number (%) of patients Olaparib+ bevacizumab (N=255)	 Placebo + bevacizumab (N=131)
Patients with any AE leading to discontinuation	50 (19.6)	8 (6.1)
Infections and infestations	2 (0.8)	1 (0.8)
Cellulitis	0 (0.0)	1 (0.8)
Cytomegalovirus infection	1 (0.4)	0 (0.0)
Infection	1 (0.4)	0 (0.0)
Neoplasms benign, malignant and unspecified (incl cysts and polyps)	3 (1.2)	1 (0.8)
Breast cancer	0 (0.0)	1 (0.8)
Bronchial carcinoma	1 (0.4)	0 (0.0)
Metastases to liver	1 (0.4)	0 (0.0)
Myelodysplastic syndrome	1 (0.4)	0 (0.0)
Pancreatic carcinoma	1 (0.4)	0 (0.0)
Blood and lymphatic system disorders	11 (4.3)	0 (0.0)
Anaemia	8 (3.1)	0 (0.0)
Aplastic anaemia	1 (0.4)	0 (0.0)
Haemolytic uraemic syndrome	1 (0.4)	0 (0.0)
Neutropenia	1 (0.4)	0 (0.0)
Psychiatric disorders	1 (0.4)	0 (0.0)
Mood altered	1 (0.4)	0 (0.0)
Nervous system disorders	2 (0.8)	1 (0.8)
Encephalitis autoimmune	1 (0.4)	0 (0.0)
Headache	1 (0.4)	1 (0.8)
Cardiac disorders	1 (0.4)	1 (0.8)

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA versio 23.0.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.

Table 3.9 PAOLA1: Summary of analysis of adverse events leading to discontinuation of study treatment
(total, and by SOC and PT)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

System organ class / MedDRA Preferred term	Number (%) of patients Olaparib+ bevacizumab (N=255)	 Placebo + bevacizumab (N=131)
Myocardial infarction	0 (0.0)	1 (0.8)
Prinzmetal angina	1 (0.4)	0 (0.0)
Respiratory, thoracic and mediastinal disorders	2 (0.8)	1 (0.8)
Dyspnoea	1 (0.4)	1 (0.8)
Pneumonitis	1 (0.4)	0 (0.0)
Gastrointestinal disorders	16 (6.3)	2 (1.5)
Abdominal pain	1 (0.4)	0 (0.0)
Gastric haemorrhage	0 (0.0)	1 (0.8)
Gastric perforation	1 (0.4)	0 (0.0)
Mechanical ileus	1 (0.4)	0 (0.0)
Nausea	10 (3.9)	1 (0.8)
Pancreatitis acute	1 (0.4)	0 (0.0)
Stomatitis	1 (0.4)	0 (0.0)
Vomiting	1 (0.4)	0 (0.0)
Skin and subcutaneous tissue disorders	1 (0.4)	0 (0.0)
Erythema nodosum	1 (0.4)	0 (0.0)
Musculoskeletal and connective tissue disorders	3 (1.2)	1 (0.8)
Arthralgia	2 (0.8)	1 (0.8)
Myalgia	1 (0.4)	0 (0.0)
General disorders and administration site conditions	6 (2.4)	0 (0.0)
Fatigue	4 (1.6)	0 (0.0)
Mucosal inflammation	2 (0.8)	0 (0.0)
Investigations	2 (0.8)	0 (0.0)

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA versio 23.0.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.

Table 3.9 PAOLA1: Summary of analysis of adverse events leading to discontinuation of study treatment
(total, and by SOC and PT)
Safety Analysis Set, HRD[42] positive, DCO 22MAR2020

System organ class / MedDRA Preferred term	Number (%) of patients Olaparib+ bevacizumab (N=255)	 Placebo + bevacizumab (N=131)
Neutrophil count decreased	1 (0.4)	0 (0.0)
Weight increased	1 (0.4)	0 (0.0)

Includes adverse events with an onset date on or after the date of first dose and up to and including 30 days following the date of last dose of olaparib/placebo. MedDRA versio 23.0.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.

Table 3.1 PAOLA1 Appendix: Summary of analysis of time to worsening in EORTC QLQ-C30 global QoL/health status, functional, symptom and single item scales (MID=15)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EORTC QLQ-C30 Global QoL/health status (MID = 15)	255	146 (57.3)	16.6 (11.5,21.8)	132	81 (61.4)	13.8 (9.3,17.2)	0.85	0.65, 1.12	0.2343
EORTC QLQ-C30 Functional scale: Physical (MID = 15)	255	93 (36.5)	52.5 (26.3,52.5)	132	56 (42.4)	25.4 (19.9,30.7)	0.80	0.58, 1.13	0.1960
EORTC QLQ-C30 Functional scale: Role (MID = 15)	255	167 (65.5)	8.4 (5.8,11.2)	132	82 (62.1)	9.3 (6.1,16.2)	1.11	0.85, 1.46	0.4501
EORTC QLQ-C30 Functional scale: Cognitive (MID = 15)	255	174 (68.2)	11.1 (8.5,14.0)	132	85 (64.4)	8.5 (5.9,13.6)	0.91	0.70, 1.19	0.4835
EORTC QLQ-C30 Functional scale: Emotional (MID = 15)	255	157 (61.6)	13.8 (11.0,19.6)	132	85 (64.4)	11.2 (8.3,13.9)	0.93	0.71, 1.22	0.5616
EORTC QLQ-C30 Functional scale: Social (MID = 15)	255	148 (58.0)	13.5 (8.6,19.6)	132	81 (61.4)	11.3 (8.5,16.4)	0.91	0.69, 1.20	0.4710
EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 15)	255	146 (57.3)	13.6 (11.1,22.1)	132	65 (49.2)	22.3 (16.6,28.7)	1.42	1.06, 1.92	0.0227*
EORTC QLQ-C30 Single item symptom scale: Constipation (MID = 15)	255	133 (52.2)	19.9 (16.6,23.4)	132	69 (52.3)	19.7 (14.0,22.3)	1.03	0.77, 1.39	0.8313

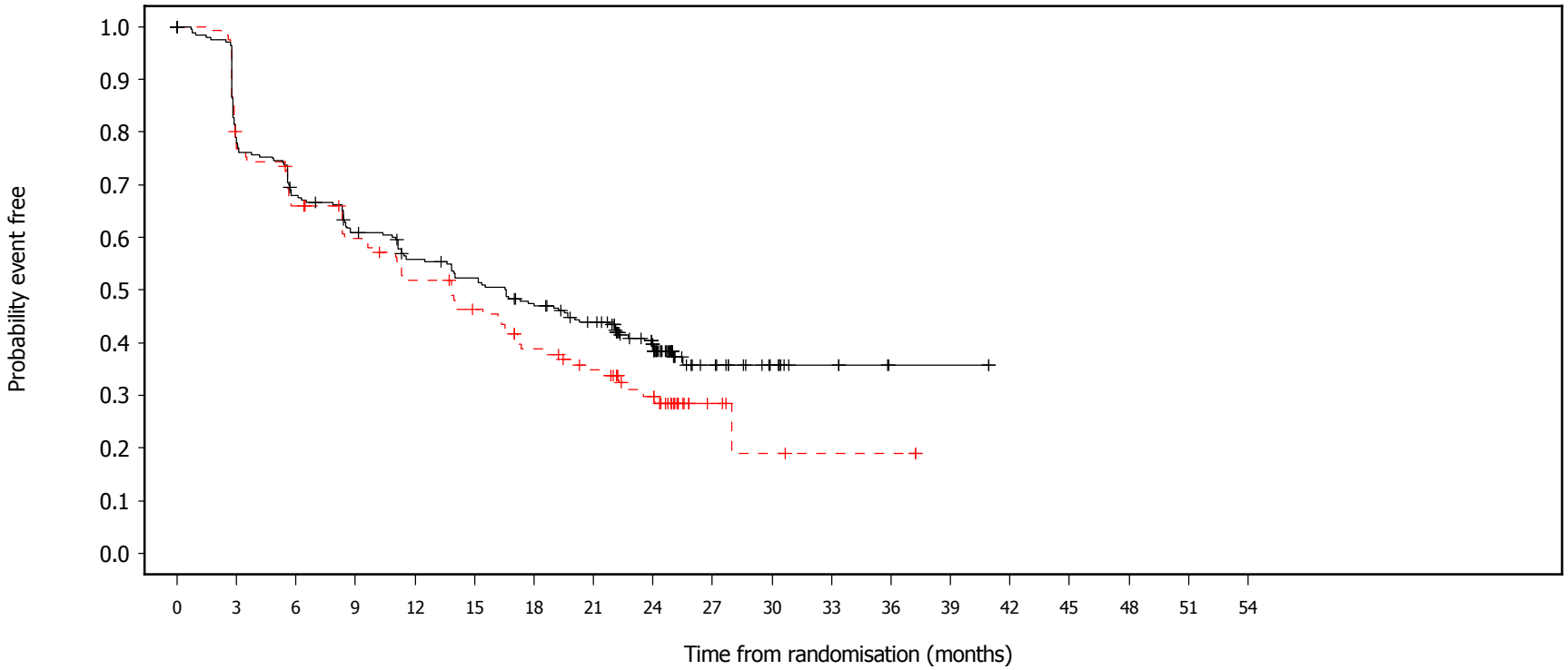
Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.

Table 3.1 PAOLA1 Appendix: Summary of analysis of time to worsening in EORTC QLQ-C30 global QoL/health status, functional, symptom and single item scales (MID=15)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)						
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]		2-sided p-value [c]
EORTC QLQ-C30 Single item symptom scale: Diarrhoea (MID = 15)	255	124 (48.6)	24.0 (16.6,25.9)	132	58 (43.9)	23.5 (19.9,35.0)	1.15	0.84,	1.58	0.4093
EORTC QLQ-C30 Single item symptom scale: Dyspnoea (MID = 15)	255	125 (49.0)	20.7 (16.0,52.5)	132	67 (50.8)	18.7 (12.3,24.9)	0.92	0.68,	1.25	0.5796
EORTC QLQ-C30 Symptom scale: Fatigue (MID = 15)	255	144 (56.5)	17.0 (12.5,22.0)	132	84 (63.6)	13.9 (9.6,17.5)	0.84	0.64,	1.11	0.2089
EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 15)	255	77 (30.2)	38.4 (38.4, NE)	132	48 (36.4)	NE (NE, NE)	0.72	0.50,	1.04	0.0709
EORTC QLQ-C30 Symptom scale: Nausea and vomiting (MID = 15)	255	178 (69.8)	5.8 (5.6, 8.7)	132	70 (53.0)	19.2 (12.7,23.5)	1.81	1.37,	2.42	<0.0001*
EORTC QLQ-C30 Symptom scale: Pain (MID = 15)	255	183 (71.8)	5.8 (5.6, 8.3)	132	95 (72.0)	5.6 (3.0, 8.1)	0.92	0.72,	1.19	0.5505
EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 15)	255	159 (62.4)	11.3 (8.4,14.0)	132	91 (68.9)	8.3 (5.6,11.1)	0.73	0.56,	0.95	0.0185*

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.

Figure 3.1.1 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

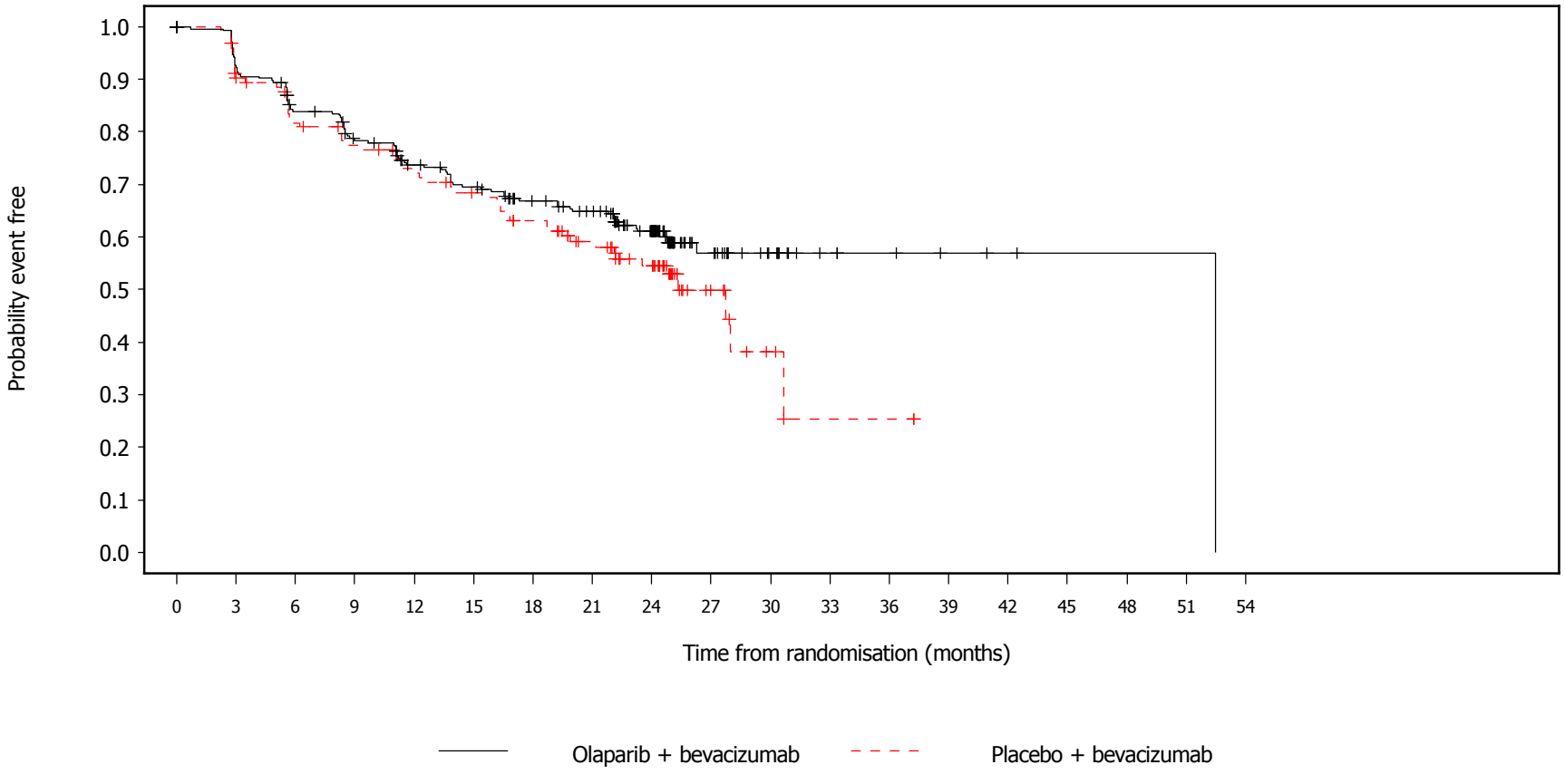


Number of patients at risk:

255	191	164	145	130	121	108	95	65	20	10	5	1	1	0	0	0	0	0	Olaparib + bevacizumab
132	95	78	68	58	50	40	33	23	5	2	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.2 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Physical (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

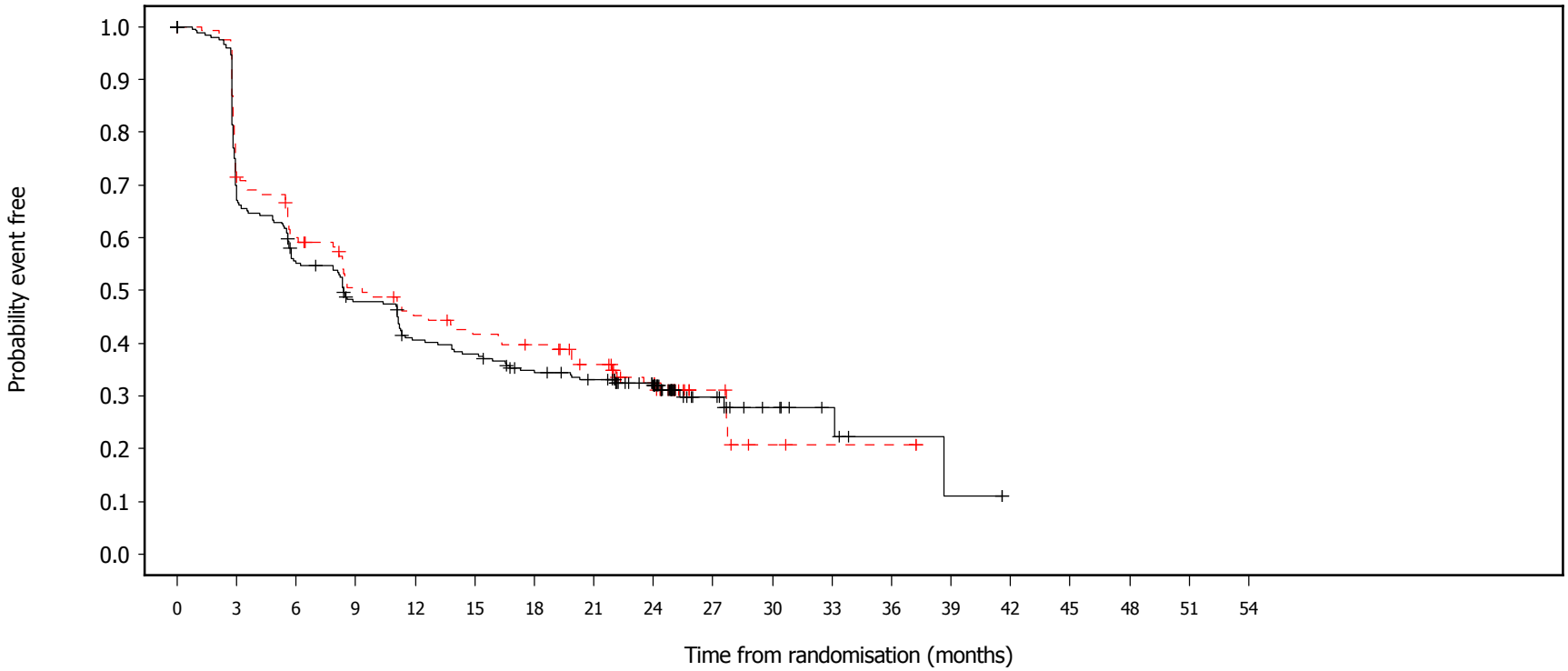


Number of patients at risk:

255	224	200	184	165	154	139	130	96	28	15	7	5	3	2	1	1	1	0	Olaparib + bevacizumab
132	110	96	89	81	75	67	56	44	11	4	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.3 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Role (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

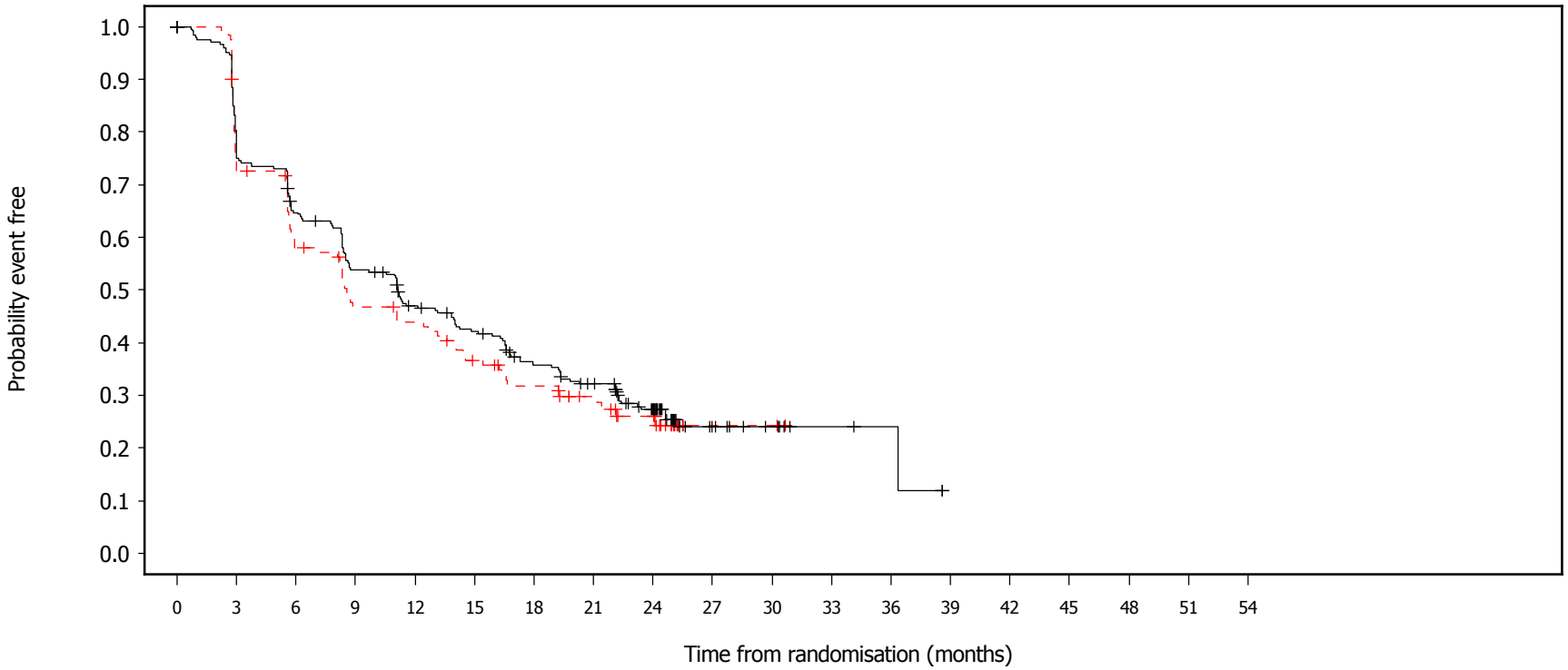


Number of patients at risk:

255	165	132	112	93	87	76	69	53	17	9	5	2	1	0	0	0	0	0	Olaparib + bevacizumab
132	89	72	58	51	46	43	35	26	7	2	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.4 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Cognitive (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

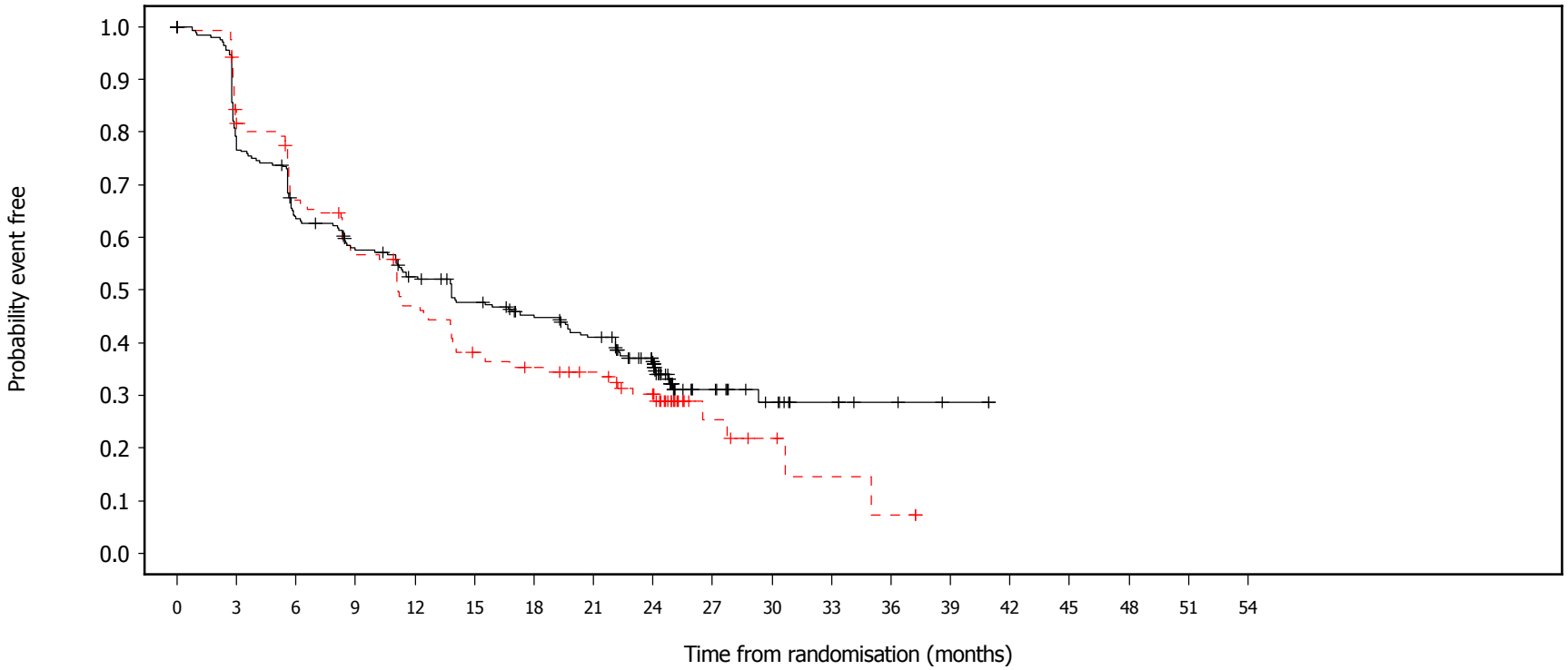


Number of patients at risk:

255	187	156	129	108	95	77	66	44	12	7	3	2	0	0	0	0	0	0	Olaparib + bevacizumab
132	89	68	53	49	39	32	25	18	2	2	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.5 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Emotional (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

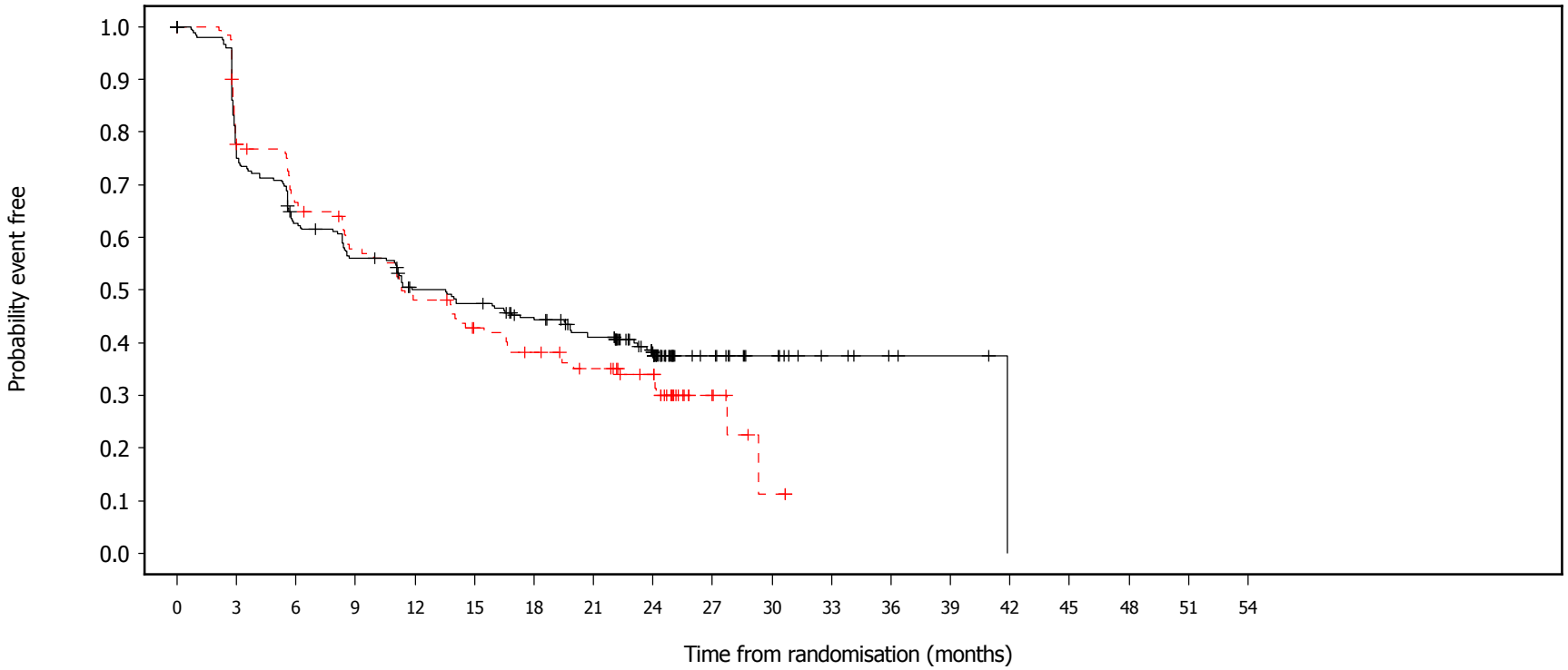


Number of patients at risk:

255	188	153	137	121	107	97	86	62	19	11	6	3	1	0	0	0	0	0	Olaparib + bevacizumab
132	99	78	66	53	42	38	34	26	7	4	2	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.6 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Social (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

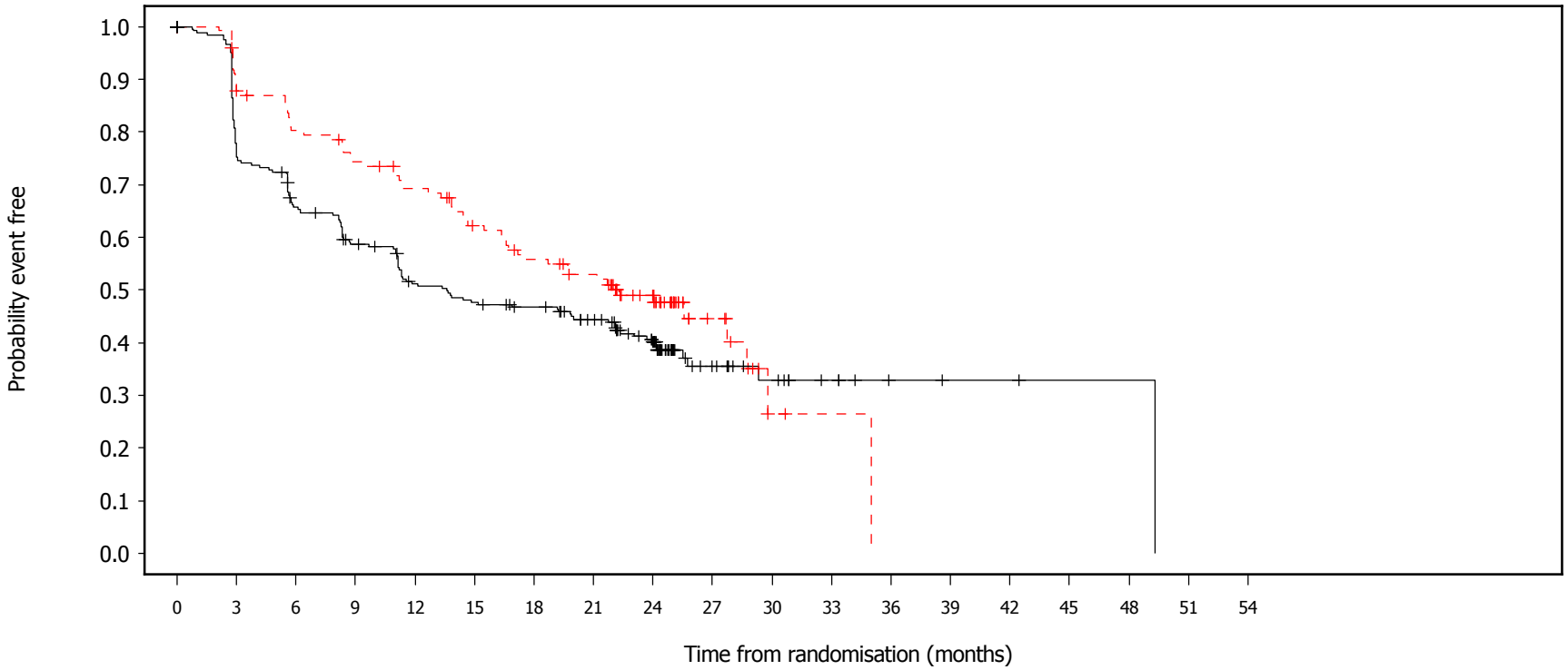


Number of patients at risk:

255	186	151	134	115	109	98	85	58	20	12	6	3	2	0	0	0	0	0	Olaparib + bevacizumab
132	94	78	66	55	46	40	34	27	6	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.7 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

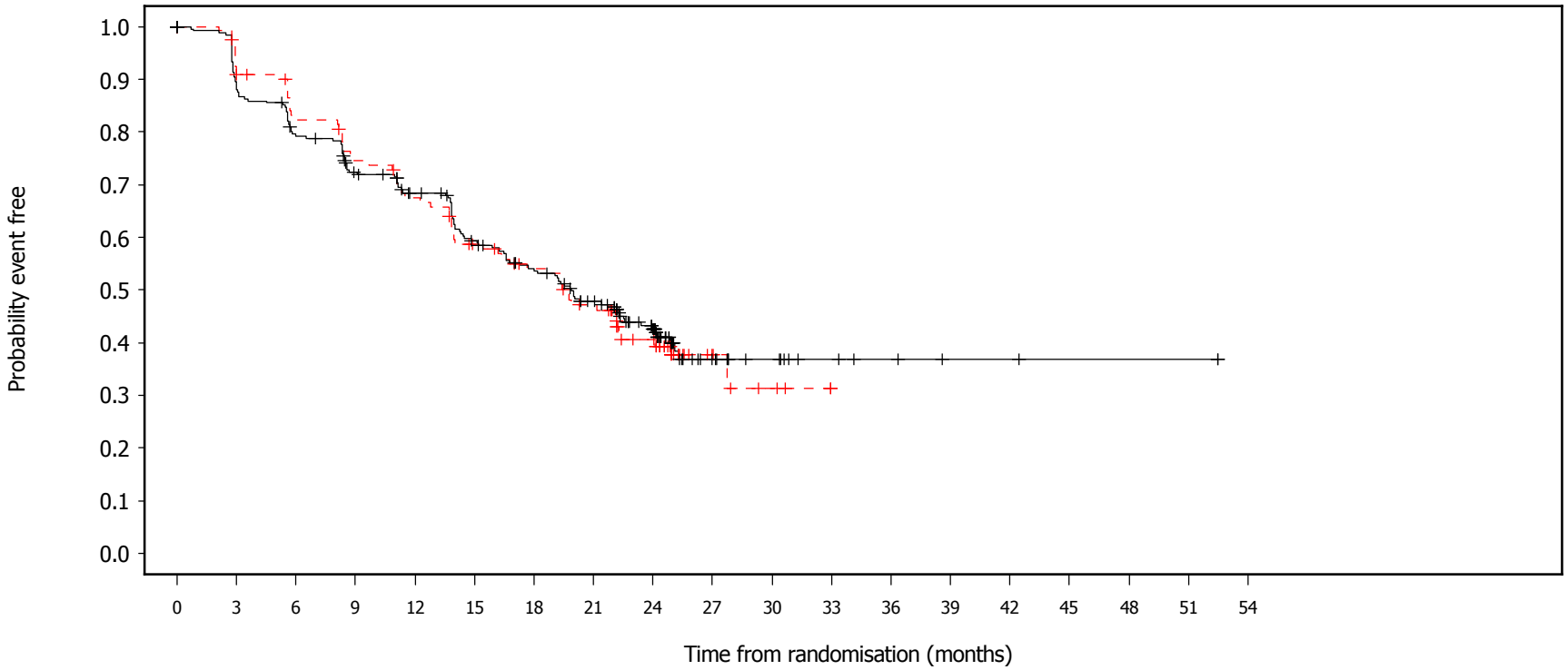


Number of patients at risk:

255	185	157	137	116	108	102	90	67	19	12	7	3	2	2	1	1	0	0	Olaparib + bevacizumab
132	110	96	88	80	69	61	55	39	12	2	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.8 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Constipation (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

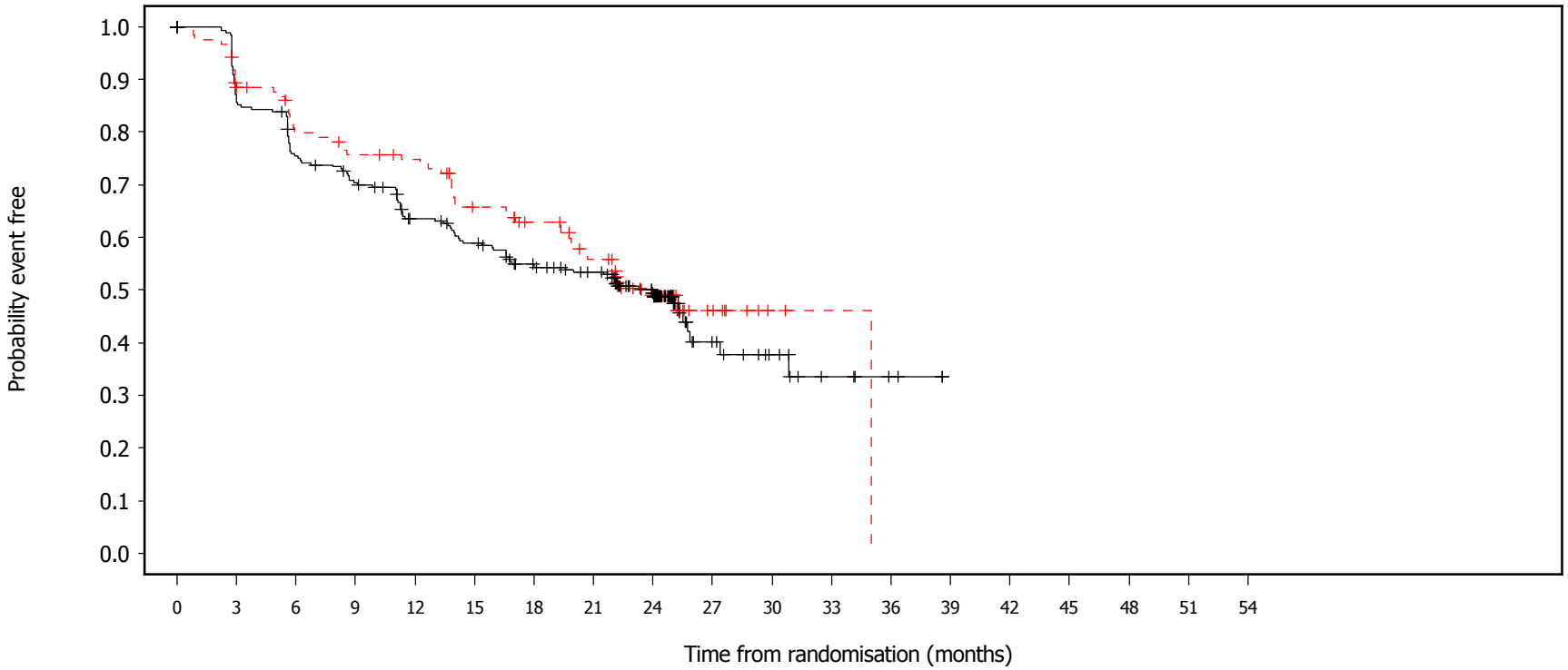


Number of patients at risk:

255	213	189	168	152	128	113	94	65	17	11	6	4	2	2	1	1	1	0	Olaparib + bevacizumab
132	110	97	86	77	64	56	47	33	7	3	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.9 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Diarrhoea (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

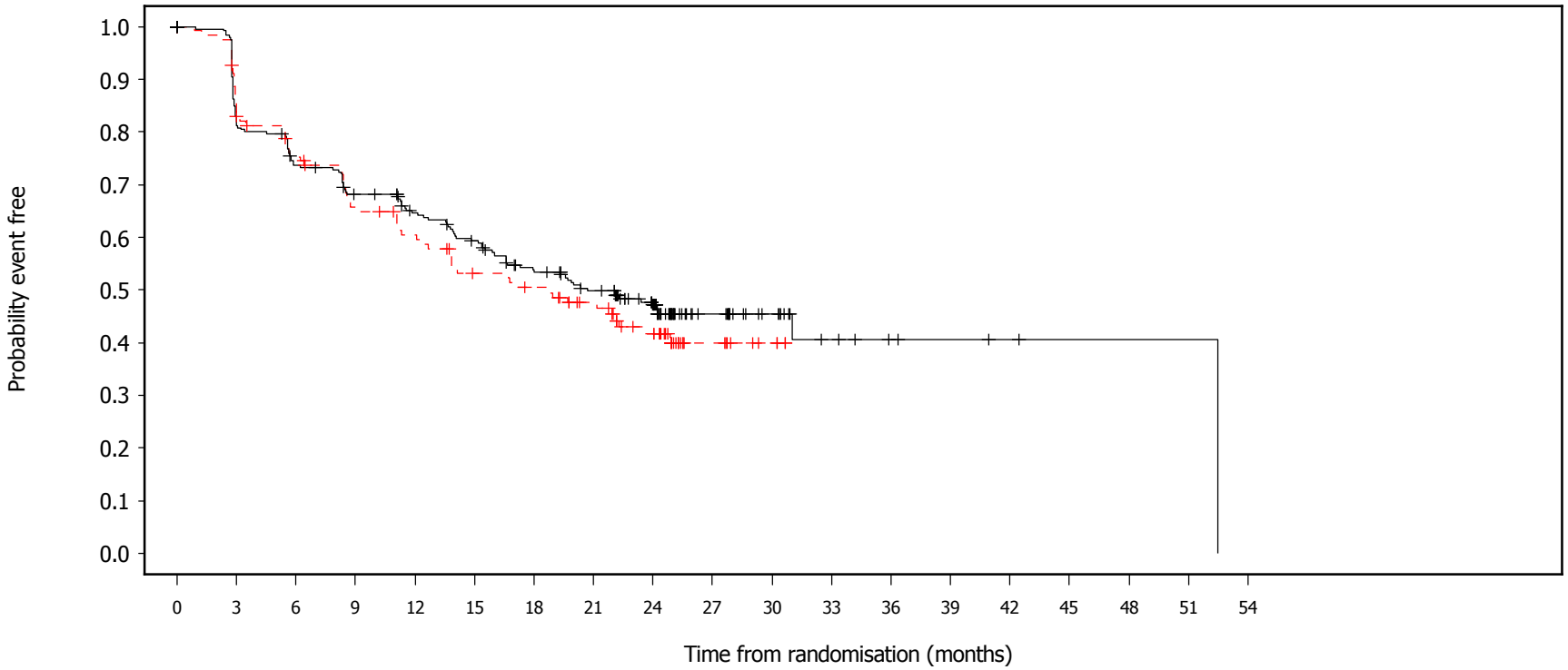


Number of patients at risk:

255	207	180	166	143	131	115	105	76	18	11	5	2	0	0	0	0	0	0	Olaparib + bevacizumab
132	107	93	87	84	71	64	54	39	9	2	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.10 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Dyspnoea (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

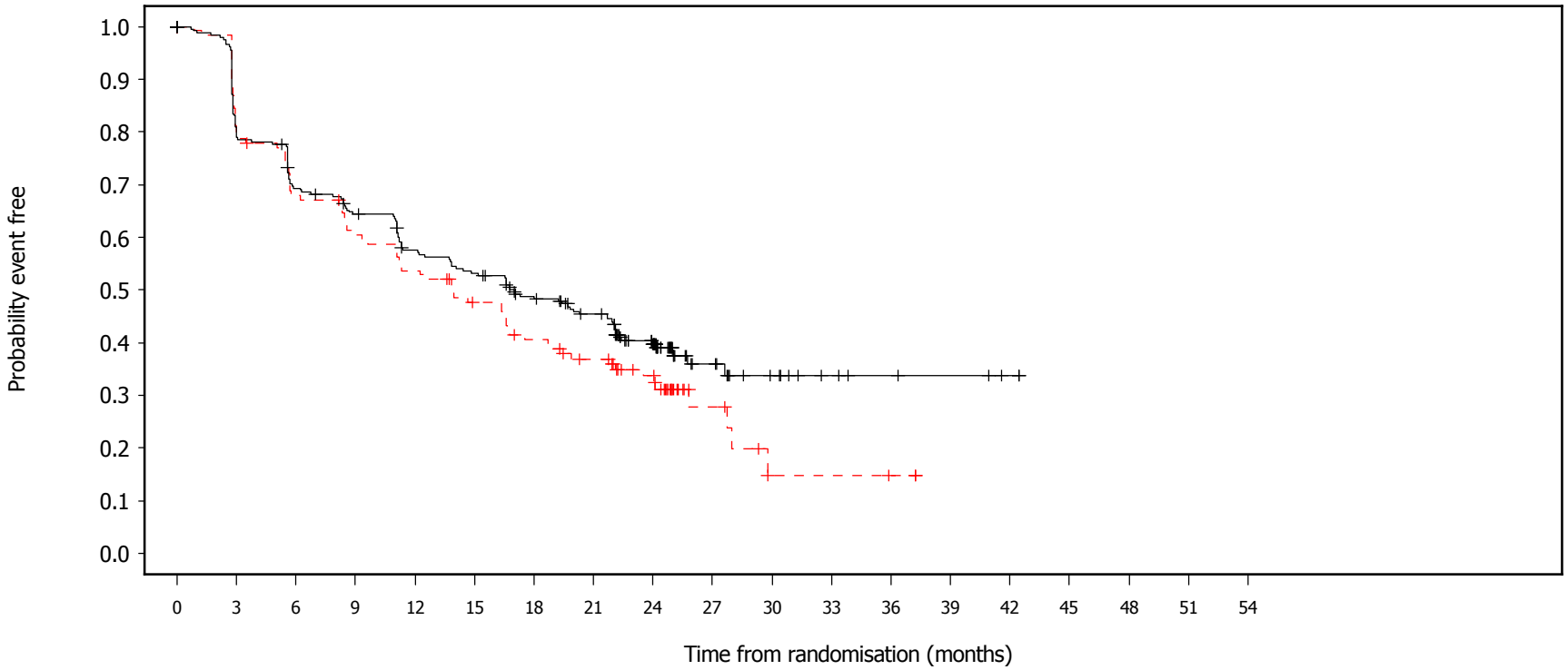


Number of patients at risk:

255	197	175	159	145	131	114	101	75	27	15	7	4	3	2	1	1	1	0	Olaparib + bevacizumab
132	104	89	76	68	57	53	44	32	9	3	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.11 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Fatigue (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

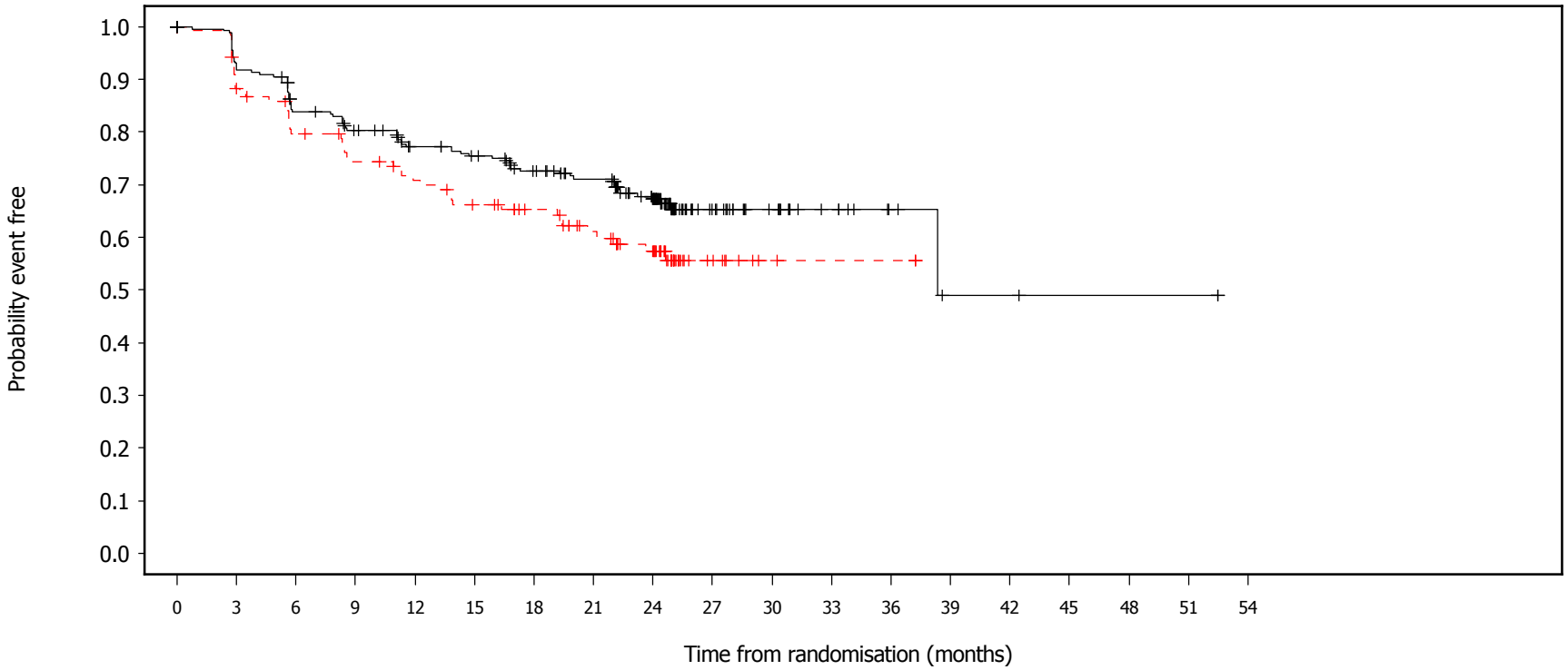


Number of patients at risk:

255	192	166	152	133	123	107	94	62	19	11	6	4	3	1	0	0	0	0	Olaparib + bevacizumab
132	99	82	72	64	54	45	38	28	8	2	2	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.12 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 15)
time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

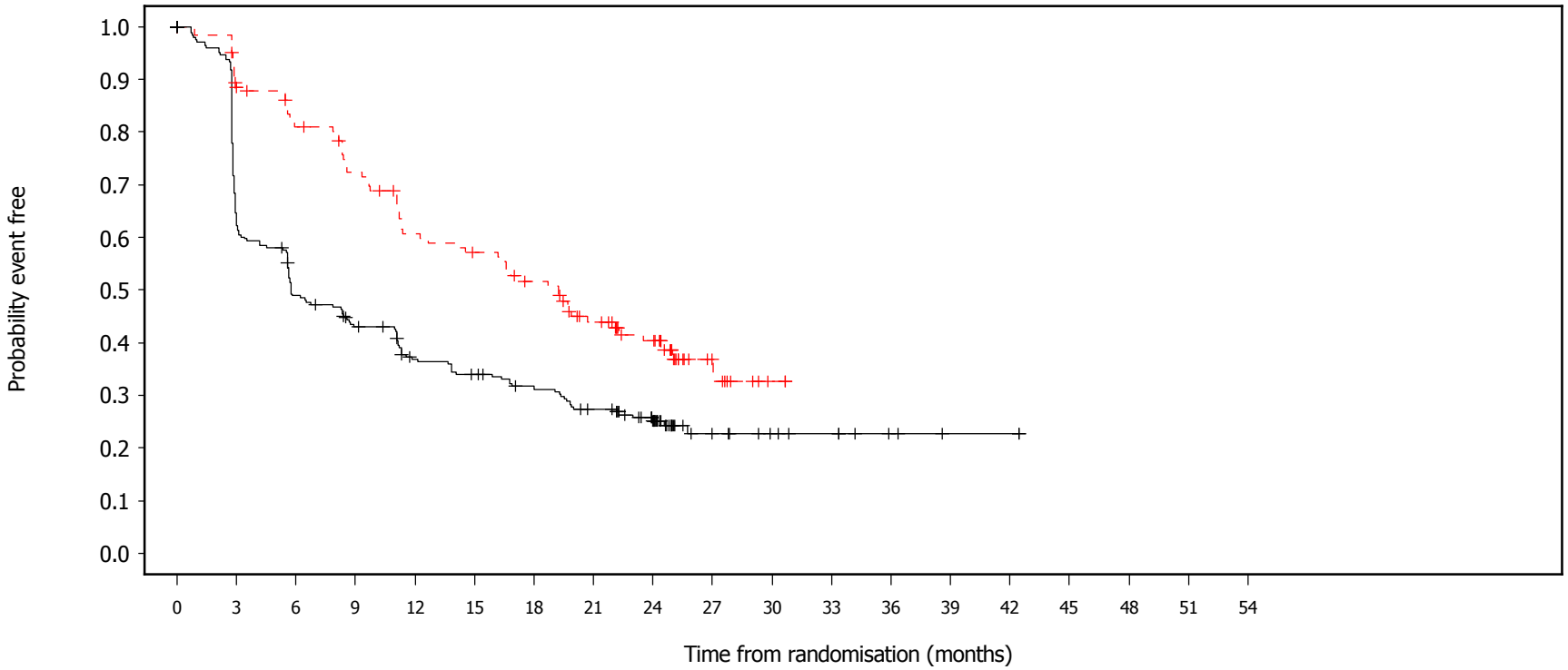


Number of patients at risk:

255	223	198	186	171	164	151	140	106	32	20	11	5	2	2	1	1	1	0	Olaparib + bevacizumab
132	105	92	84	78	71	64	54	43	9	2	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.13 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Nausea and vomiting (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

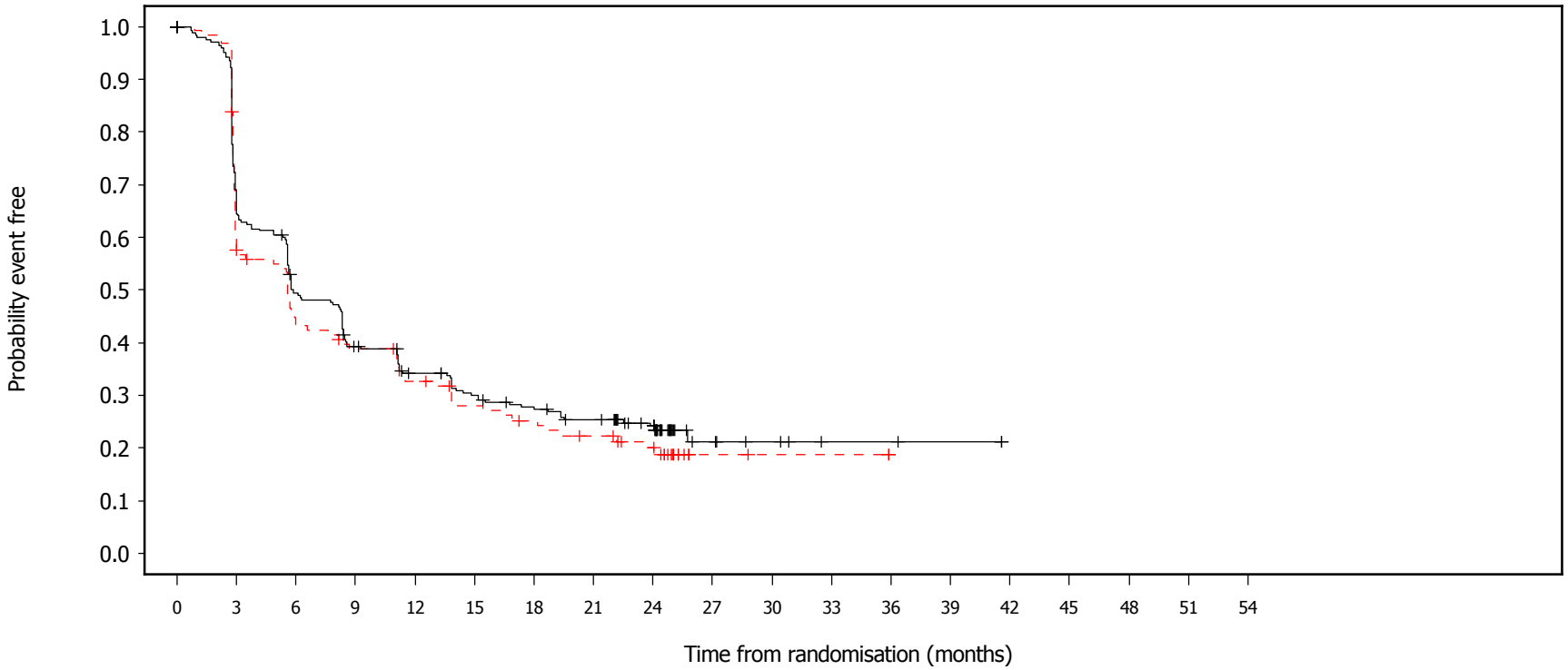


Number of patients at risk:

255	152	117	100	81	74	66	55	39	13	9	7	3	1	1	0	0	0	0	Olaparib + bevacizumab
132	108	95	83	68	63	55	42	31	9	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.14 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Pain (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

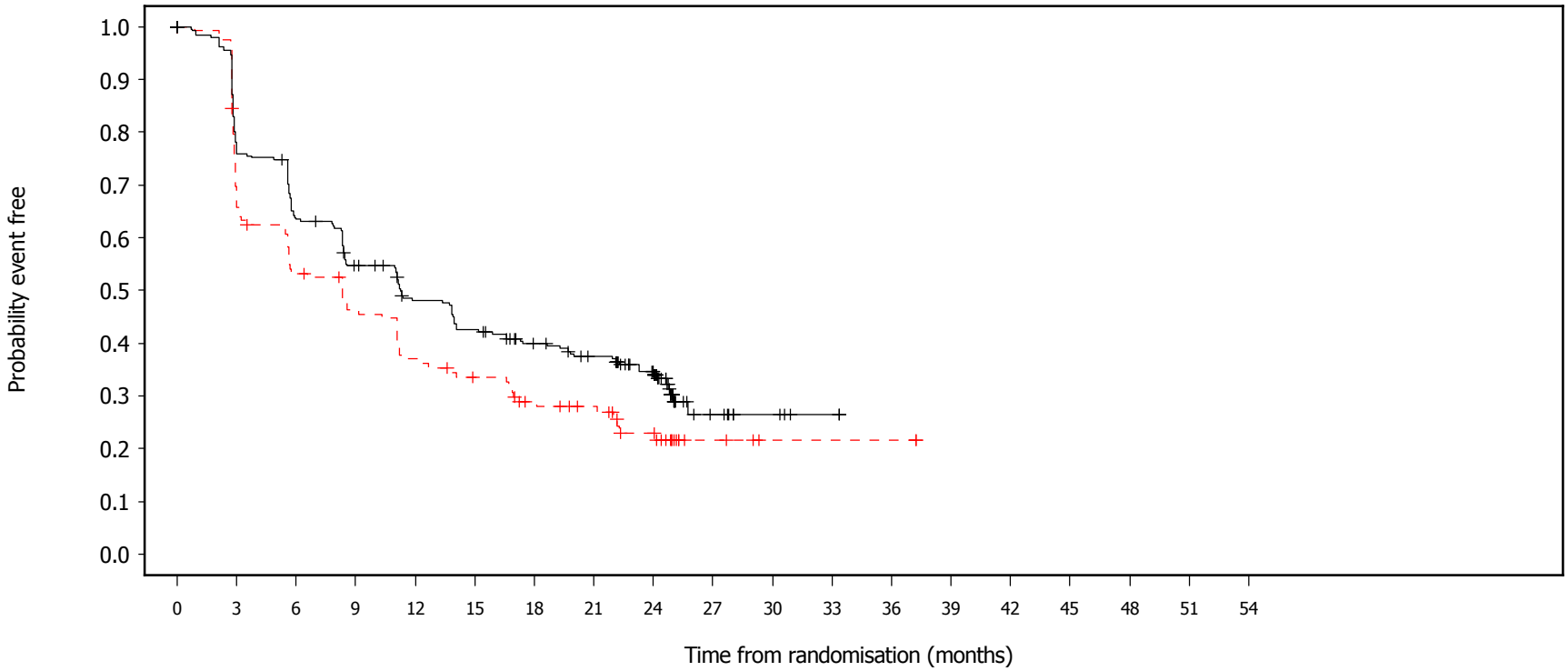


Number of patients at risk:

255	160	119	93	77	66	59	52	39	8	5	2	2	1	0	0	0	0	0	Olaparib + bevacizumab
132	71	52	45	37	30	26	22	17	2	1	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.1.15 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	185	152	128	108	96	83	74	54	9	4	1	0	0	0	0	0	0	Olaparib + bevacizumab
132	84	64	54	43	37	29	25	17	4	1	1	1	0	0	0	0	0	Placebo + bevacizumab

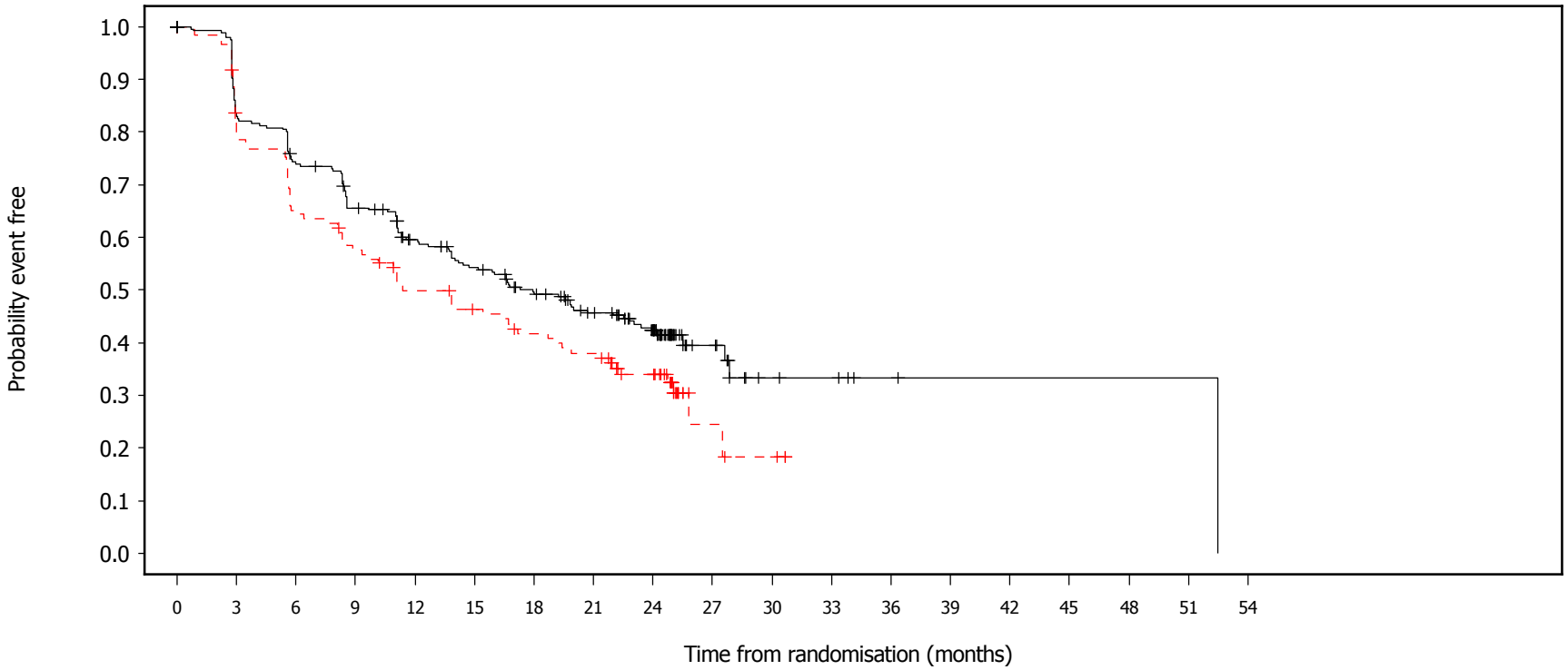
Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Table 3.2 PAOLA1 Appendix: Summary of analysis of time to worsening in EORTC QLQ-OV28 symptom and single item scales (MID=15)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 15)	255	139 (54.5)	17.9 (13.8,23.1)	132	81 (61.4)	11.4 (8.3,18.7)	0.76	0.58, 1.01	0.0549
EORTC QLQ-OV28 Symptom scale/items: Body image (MID = 15)	255	126 (49.4)	21.9 (12.7, NE)	132	71 (53.8)	18.7 (11.5,25.1)	0.93	0.70, 1.26	0.6383
EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (MID = 15)	255	95 (37.3)	NE (NE, NE)	132	59 (44.7)	24.1 (17.0, NE)	0.76	0.55, 1.07	0.1095
EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 15)	255	95 (37.3)	52.5 (NE, NE)	132	45 (34.1)	NE (NE, NE)	1.12	0.79, 1.62	0.5166
EORTC QLQ-OV28 Symptom scale/items: Hormonal (MID = 15)	255	135 (52.9)	19.1 (14.3,24.2)	132	76 (57.6)	11.3 (5.6,19.1)	0.75	0.56, 0.996	0.0462*
EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (MID = 15)	255	114 (44.7)	25.3 (18.6, NE)	132	58 (43.9)	23.0 (12.7, NE)	0.93	0.68, 1.29	0.6541
EORTC QLQ-OV28 Symptom scale/items: Other single items (MID = 15)	255	96 (37.6)	30.4 (25.3, NE)	132	45 (34.1)	28.0 (25.4, NE)	1.07	0.76, 1.55	0.7102

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.

Figure 3.2.1 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

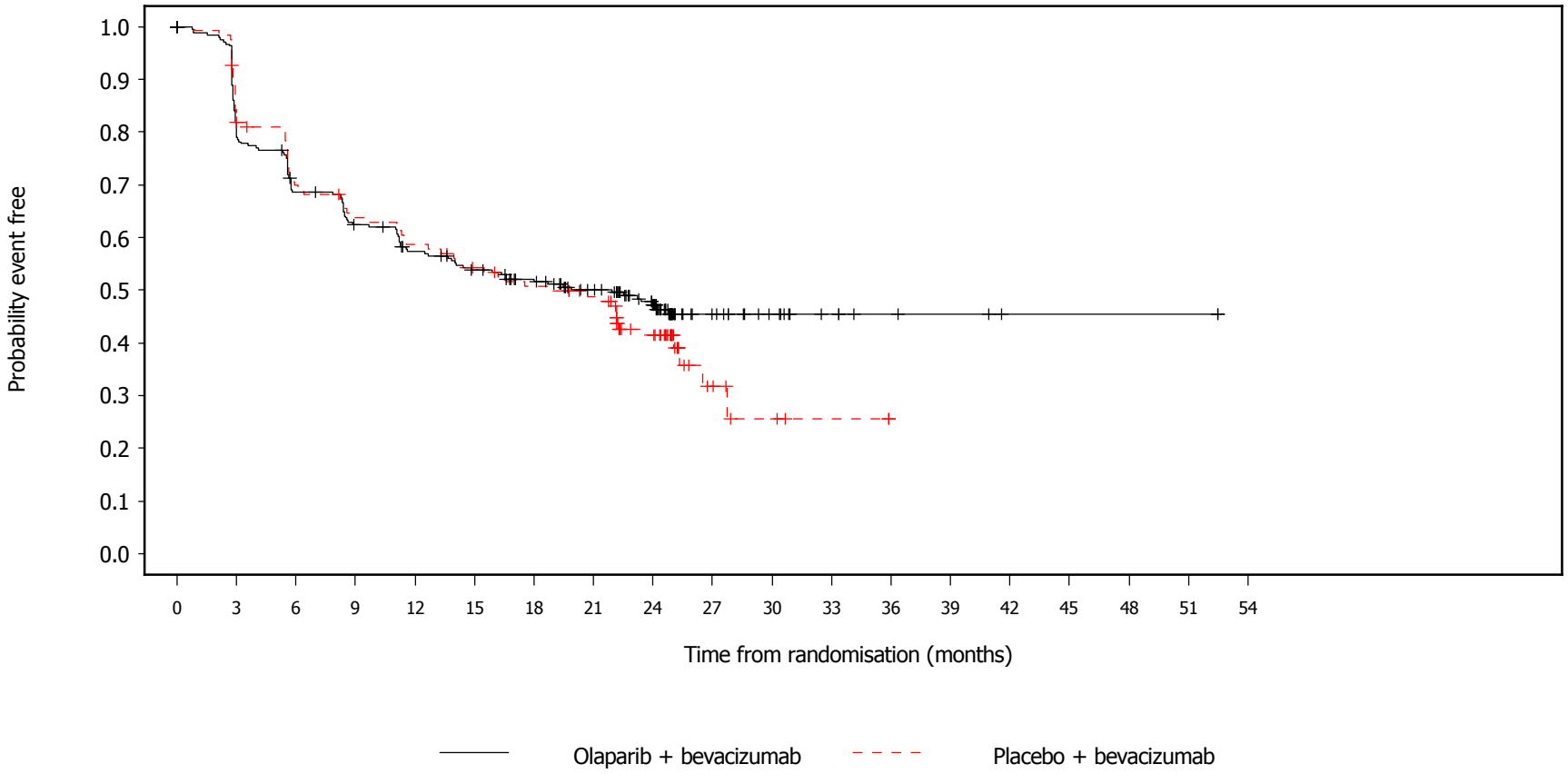


Number of patients at risk:

255	204	180	158	135	120	105	89	68	16	6	5	2	1	1	1	1	1	0	Olaparib + bevacizumab
132	97	78	68	57	51	45	41	30	4	2	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.2.2 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Body image (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

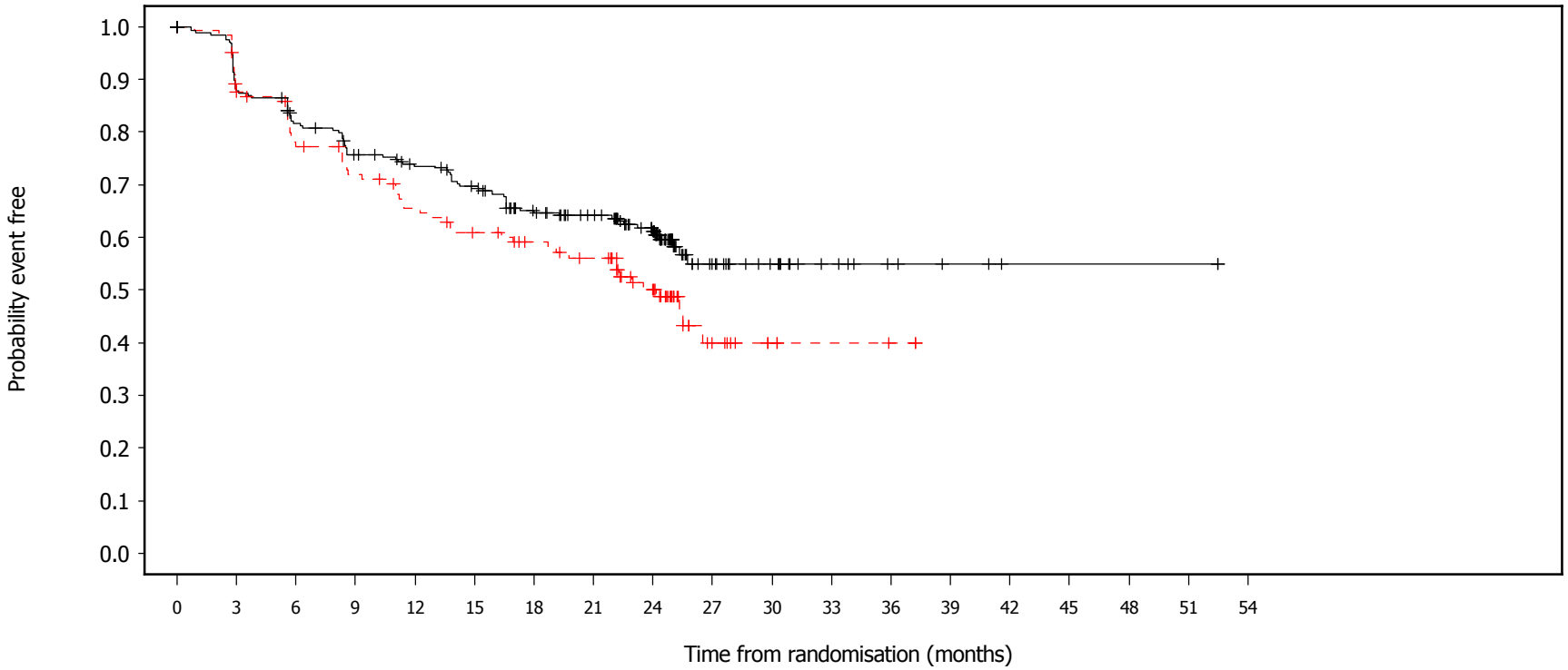


Number of patients at risk:

255	194	165	148	133	122	111	97	73	21	13	7	4	3	1	1	1	1	0	Olaparib + bevacizumab
132	101	82	74	68	61	56	51	33	7	3	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.2.3 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

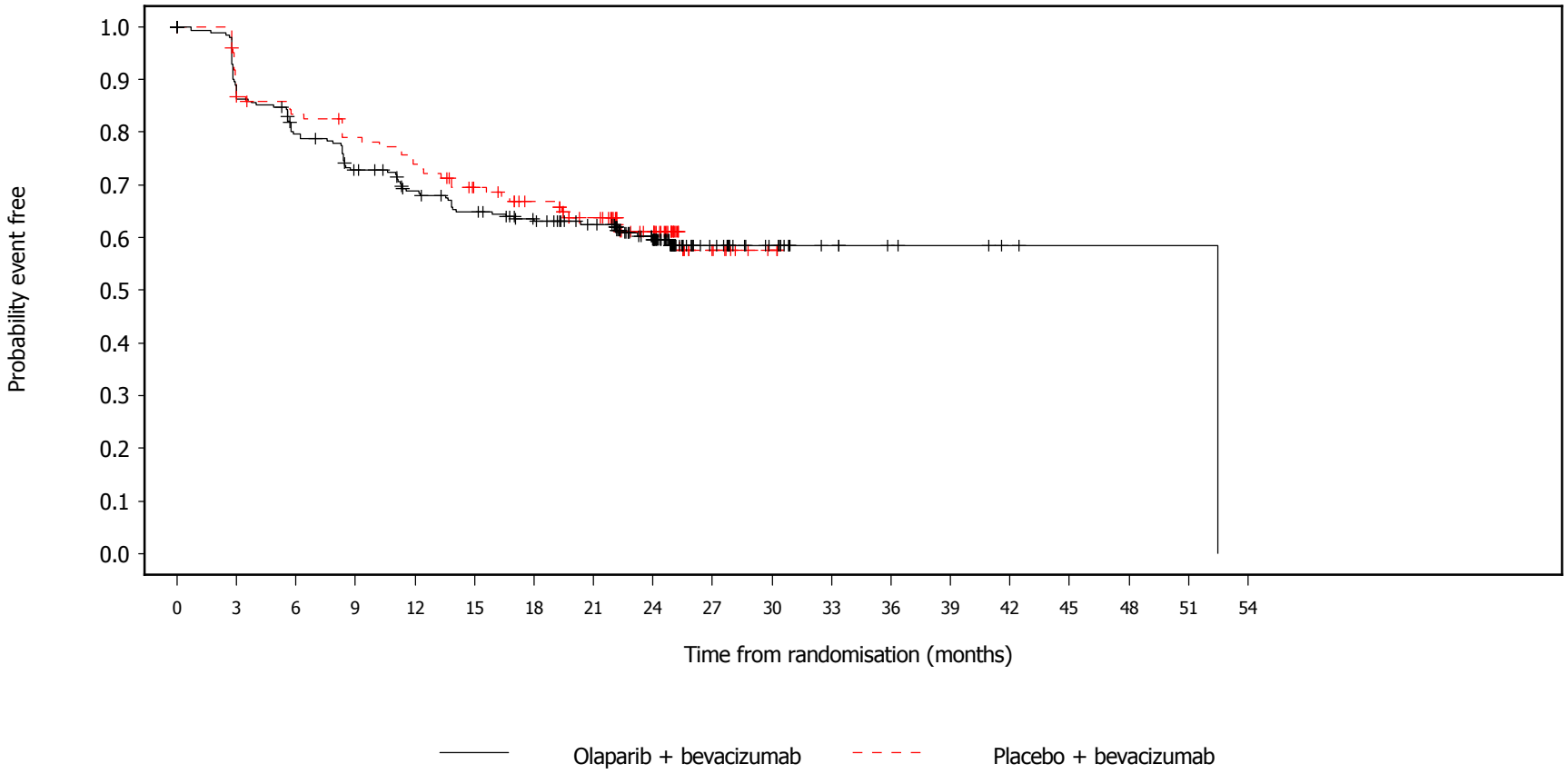


Number of patients at risk:

255	215	196	179	169	157	137	125	94	26	17	9	5	3	1	1	1	1	0	Olaparib + bevacizumab
132	105	89	81	72	65	59	54	38	10	4	2	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.2.4 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 15)
time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

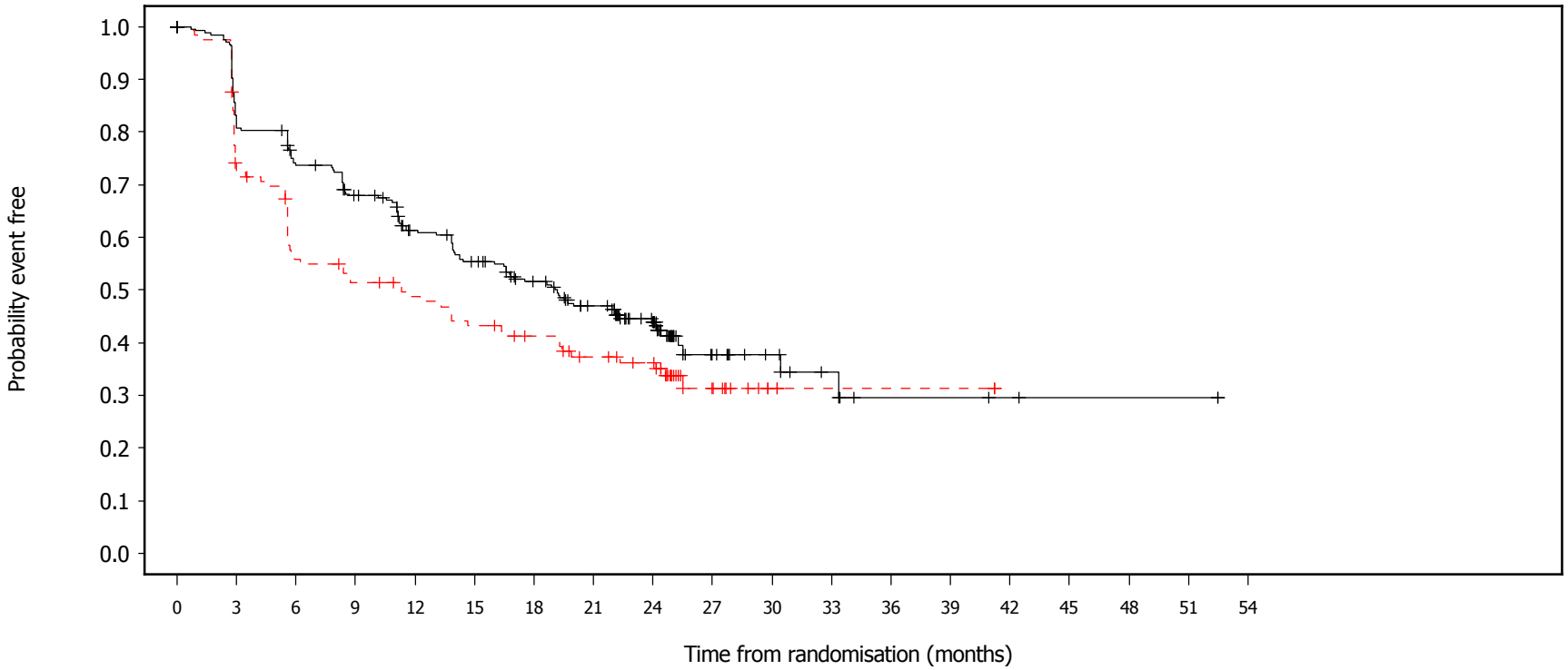


Number of patients at risk:

255	211	189	170	155	144	134	123	91	28	16	8	5	4	2	1	1	1	0	Olaparib + bevacizumab
132	108	98	92	86	76	68	58	41	9	2	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.2.5 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Hormonal (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

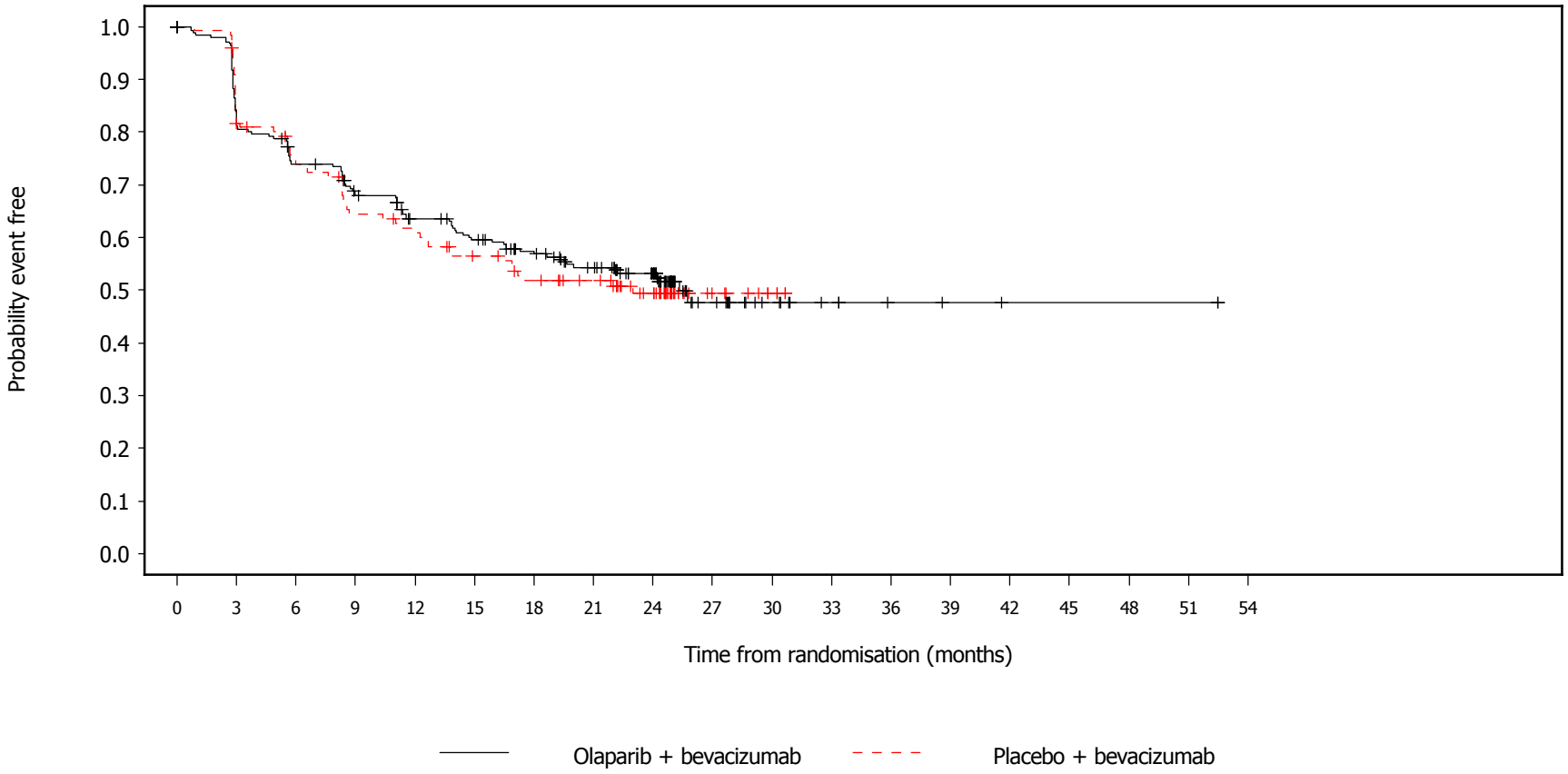


Number of patients at risk:

255	200	177	159	135	120	104	87	62	18	12	7	3	3	2	1	1	1	0	Olaparib + bevacizumab
132	87	64	58	53	47	42	35	31	12	3	1	1	1	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.2.6 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

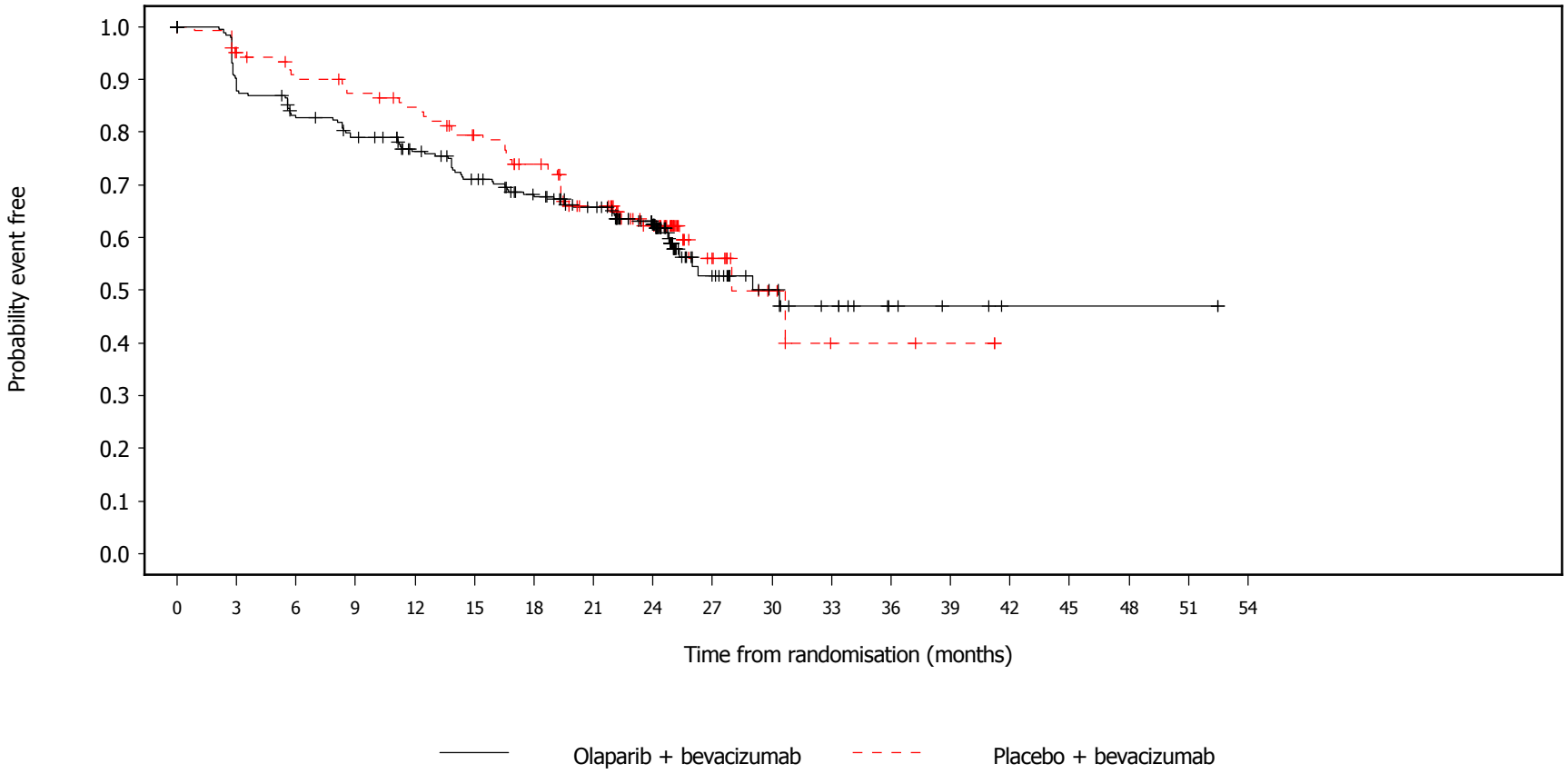


Number of patients at risk:

255	202	178	161	144	133	120	105	81	21	11	6	3	2	1	1	1	1	0	Olaparib + bevacizumab
132	99	87	74	69	61	54	49	36	9	3	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Figure 3.2.7 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Other single items (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	216	199	188	172	156	142	128	98	29	17	11	5	3	1	1	1	1	0	Olaparib + bevacizumab
132	114	106	101	96	86	77	62	46	14	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Table 3.3 PAOLA1 Appendix: Summary of analysis of time to worsening in EQ-5D VAS (MID = 15)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EQ-5D-5L Visual analogue scale (MID = 15)	255	116 (45.5)	25.3 (17.5, NE)	132	58 (43.9)	26.7 (19.9, NE)	1.05	0.77, 1.46	0.7493

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.
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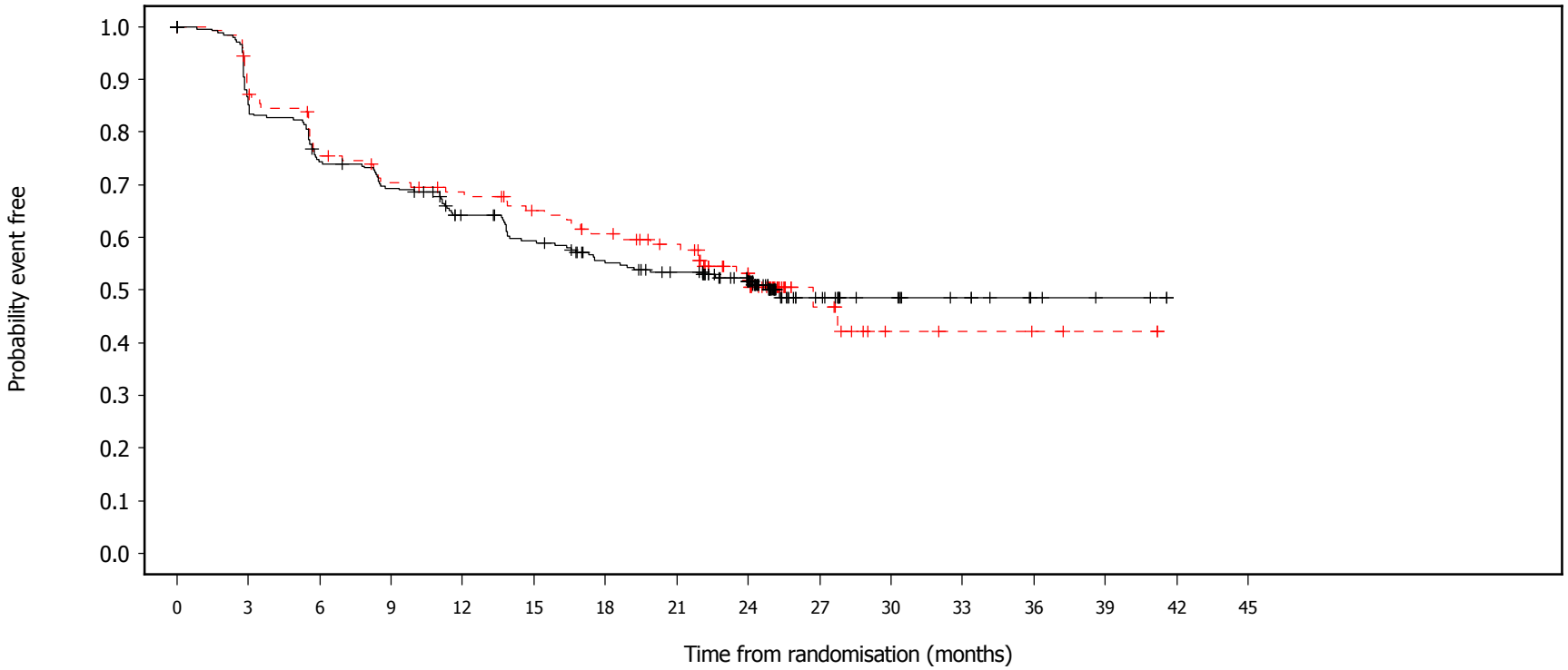
Figure 3.3.1 PAOLA1 Appendix: Kaplan-Meier plot of EQ-5D-5L Visual analogue scale (MID = 15) time to clinically meaningful worsening (first occurrence)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

255	206	179	166	146	133	119	109	86	23	14	9	4	2	0	0	Olaparib + bevacizumab
132	108	91	83	79	72	65	58	42	12	4	3	2	1	0	0	Placebo + bevacizumab

Time to worsening is defined as time from date of randomisation until earliest date of a clinically meaningful worsening in the respective score. Patients whose score has not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at date of their last PRO assessment. Patients who died within 168 days of last PRO assessment, irrespective of baseline score, will be censored on their death date. Patients with no evaluable data at baseline will be censored at date of randomisation.

Table 2.2.3.1 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Global QoL/health status (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	49 (53.3)	20.0 (13.6, NE)	48	28 (58.3)	14.0 (5.6,22.7)	0.72	0.46, 1.16	0.1747
NED/CR [IDS]	74	46 (62.2)	11.1 (6.5,16.6)	38	20 (52.6)	13.8 (5.5, NE)	1.17	0.70, 2.02	0.5567
NED/CR [Chemo]	40	23 (57.5)	19.7 (8.3, NE)	20	15 (75.0)	9.8 (3.5,22.3)	0.68	0.36, 1.34	0.2578
PR	49	28 (57.1)	15.3 (5.6,24.0)	26	18 (69.2)	14.0 (5.6,19.9)	0.75	0.42, 1.38	0.3464
Interaction p-value									0.4751
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	78 (52.0)	19.7 (14.0,25.5)	65	40 (61.5)	11.3 (8.3,21.4)	0.75	0.51, 1.11	0.1446
non-tBRCAm	105	68 (64.8)	11.4 (8.4,17.7)	67	41 (61.2)	13.9 (8.3,17.4)	0.94	0.64, 1.40	0.7568
Interaction p-value									0.4128
First line treatment outcome (eCRF)									
NED [PDS]	89	50 (56.2)	18.0 (11.0, NE)	47	28 (59.6)	13.8 (5.6,22.7)	0.77	0.49, 1.24	0.2767
NED/CR [IDS]	74	44 (59.5)	11.5 (6.5,22.1)	32	17 (53.1)	13.8 (5.6, NE)	1.04	0.61, 1.88	0.8796
NED/CR [Chemo]	39	19 (48.7)	22.1 (15.2, NE)	18	14 (77.8)	8.3 (3.0,17.2)	0.44	0.22, 0.90	0.0255*
PR	50	32 (64.0)	10.9 (4.9,23.6)	34	22 (64.7)	14.0 (8.3,23.5)	1.03	0.60, 1.80	0.9087
Interaction p-value									0.2199
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	76 (51.7)	20.3 (13.8,25.5)	67	40 (59.7)	11.3 (8.3,22.3)	0.77	0.52, 1.13	0.1773
non-tBRCAm	108	70 (64.8)	13.6 (8.4,16.7)	65	41 (63.1)	13.9 (8.3,17.2)	0.91	0.62, 1.35	0.6255
Interaction p-value									0.5368
Age group									
<65 years	185	109 (58.9)	15.2 (11.0,19.7)	98	56 (57.1)	16.2 (9.3,20.8)	0.97	0.70, 1.34	0.8427
>=65 years	70	37 (52.9)	22.1 (11.3, NE)	34	25 (73.5)	9.9 (5.5,15.4)	0.51	0.31, 0.86	0.0126*
Interaction p-value									0.0411*

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.1 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Global QoL/health status (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	105 (57.7)	16.6 (11.5,21.8)	90	54 (60.0)	11.5 (8.3,17.4)	0.80	0.58, 1.12	0.1990
IV	73	41 (56.2)	15.6 (8.4,25.0)	42	27 (64.3)	14.0 (8.3,21.4)	0.85	0.53, 1.40	0.5261
Interaction p-value									0.8411
Region									
Europe	245	141 (57.6)	16.6 (11.4,20.3)	126	77 (61.1)	13.8 (9.3,17.2)	0.83	0.63, 1.10	0.1954
Japan	10	5 (50.0)	24.0 (2.8, NE)	6	4 (66.7)	10.1 (2.8, NE)	0.60	0.16, 2.42	0.4524
Interaction p-value									0.6370
ECOG performance status at Baseline									
(0) Normal activity	190	110 (57.9)	15.2 (11.1,19.7)	100	66 (66.0)	11.2 (5.8,16.4)	0.77	0.57, 1.05	0.1012
(1) Restricted activity	61	33 (54.1)	22.1 (11.4, NE)	31	15 (48.4)	18.6 (11.3, NE)	0.99	0.55, 1.88	0.9734
Interaction p-value									0.4725
Baseline CA-125 value									
<=ULN	228	125 (54.8)	19.0 (13.8,22.8)	118	73 (61.9)	13.9 (8.3,17.2)	0.74	0.56, 0.99	0.0440*
>ULN	27	21 (77.8)	5.9 (2.9,11.2)	14	8 (57.1)	11.3 (5.5, NE)	1.90	0.88, 4.58	0.1065
Interaction p-value									0.0253*
Histological grade									
High grade	255	146 (57.3)	16.6 (11.5,21.8)	132	81 (61.4)	13.8 (9.3,17.2)	0.82	0.63, 1.08	0.1557
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	95 (57.2)	15.2 (11.1,20.3)	80	45 (56.3)	14.0 (8.3,19.3)	0.88	0.62, 1.27	0.5001
Residue	79	45 (57.0)	21.8 (11.3,25.0)	44	29 (65.9)	12.6 (8.3,17.2)	0.76	0.48, 1.23	0.2577
Interaction p-value									0.6172

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.1 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Global QoL/health status (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	81 (55.5)	20.3 (15.3,25.0)	79	47 (59.5)	13.8 (8.3,19.3)	0.73	0.51, 1.06	0.0957
Interval	99	59 (59.6)	11.1 (6.1,16.6)	45	27 (60.0)	14.0 (5.6,23.5)	1.04	0.67, 1.67	0.8544
Interaction p-value									0.2306
Myriad tumour BRCA mutation status									
tBRCAm	158	81 (51.3)	21.8 (13.8, NE)	77	45 (58.4)	11.3 (8.3,21.4)	0.76	0.53, 1.10	0.1390
Non-tBRCAm	97	65 (67.0)	11.4 (8.4,17.7)	55	36 (65.5)	13.9 (8.3,17.2)	0.93	0.62, 1.41	0.7284
Interaction p-value									0.4575
Status somatic BRCA mutations									
sBRCAm	22	9 (40.9)	25.5 (3.0, NE)	7	3 (42.9)	NE (NE, NE)	0.81	0.24, 3.64	0.7526
gBRCAm	66	37 (56.1)	13.8 (5.7, NE)	31	17 (54.8)	19.3 (8.3, NE)	1.10	0.63, 2.01	0.7389
Non-BRCAm	41	26 (63.4)	16.6 (8.3,22.1)	22	16 (72.7)	11.5 (3.5,16.6)	0.72	0.39, 1.38	0.3146
Interaction p-value									0.6127

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.2 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Physical (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	29 (31.5)	52.5 (NE, NE)	48	22 (45.8)	24.9 (14.0, NE)	0.54	0.31, 0.96	0.0348*
NED/CR [IDS]	74	27 (36.5)	26.3 (22.1, NE)	38	13 (34.2)	NE (NE, NE)	1.05	0.55, 2.09	0.8933
NED/CR [Chemo]	40	18 (45.0)	22.1 (11.3, NE)	20	8 (40.0)	NE (NE, NE)	1.36	0.61, 3.32	0.4616
PR	49	19 (38.8)	NE (NE, NE)	26	13 (50.0)	23.5 (12.7, NE)	0.68	0.34, 1.42	0.2992
Interaction p-value									0.2288
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	57 (38.0)	NE (NE, NE)	65	27 (41.5)	NE (NE, NE)	0.84	0.53, 1.34	0.4515
non-tBRCAm	105	36 (34.3)	52.5 (24.8, NE)	67	29 (43.3)	25.4 (18.7, NE)	0.73	0.45, 1.20	0.2125
Interaction p-value									0.6884
First line treatment outcome (eCRF)									
NED [PDS]	89	29 (32.6)	52.5 (NE, NE)	47	21 (44.7)	27.8 (14.0, NE)	0.59	0.34, 1.05	0.0729
NED/CR [IDS]	74	25 (33.8)	26.3 (23.2, NE)	32	13 (40.6)	NE (NE, NE)	0.76	0.40, 1.54	0.4348
NED/CR [Chemo]	39	19 (48.7)	21.8 (8.5, NE)	18	8 (44.4)	19.9 (5.7, NE)	1.16	0.52, 2.80	0.7296
PR	50	18 (36.0)	NE (NE, NE)	34	14 (41.2)	25.4 (19.7, NE)	0.87	0.43, 1.78	0.6921
Interaction p-value									0.5898
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	56 (38.1)	NE (NE, NE)	67	27 (40.3)	NE (NE, NE)	0.86	0.55, 1.38	0.5249
non-tBRCAm	108	37 (34.3)	52.5 (24.8, NE)	65	29 (44.6)	25.4 (18.7, NE)	0.71	0.43, 1.16	0.1706
Interaction p-value									0.5691
Age group									
<65 years	185	67 (36.2)	NE (NE, NE)	98	39 (39.8)	27.8 (23.5, NE)	0.88	0.59, 1.31	0.5123
>=65 years	70	26 (37.1)	52.5 (22.1, NE)	34	17 (50.0)	18.9 (11.1, NE)	0.58	0.32, 1.10	0.0934
Interaction p-value									0.2787

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.2 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Physical (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	66 (36.3)	52.5 (24.8, NE)	90	36 (40.0)	27.8 (18.7, NE)	0.80	0.54, 1.22	0.2957
IV	73	27 (37.0)	NE (NE, NE)	42	20 (47.6)	25.4 (16.2, NE)	0.77	0.43, 1.39	0.3801
Interaction p-value									0.9090
Region									
Europe	245	92 (37.6)	52.5 (26.3, NE)	126	54 (42.9)	25.4 (19.7,30.7)	0.79	0.57, 1.11	0.1765
Japan	10	1 (10.0)	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	0.36	0.02, 3.75	0.3864
Interaction p-value									0.5112
ECOG performance status at Baseline									
(0) Normal activity	190	73 (38.4)	52.5 (24.6, NE)	100	44 (44.0)	27.8 (19.9,30.7)	0.85	0.59, 1.25	0.4149
(1) Restricted activity	61	18 (29.5)	NE (NE, NE)	31	12 (38.7)	21.2 (12.3, NE)	0.58	0.28, 1.24	0.1565
Interaction p-value									0.3641
Baseline CA-125 value									
<=ULN	228	80 (35.1)	52.5 (NE, NE)	118	49 (41.5)	27.8 (19.9, NE)	0.76	0.53, 1.09	0.1276
>ULN	27	13 (48.1)	19.9 (5.6, NE)	14	7 (50.0)	21.2 (9.3, NE)	1.13	0.46, 3.02	0.7889
Interaction p-value									0.4150
Histological grade									
High grade	255	93 (36.5)	52.5 (26.3, NE)	132	56 (42.4)	25.4 (19.9,30.7)	0.79	0.57, 1.10	0.1646
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	56 (33.7)	52.5 (26.3, NE)	80	34 (42.5)	27.8 (16.6, NE)	0.68	0.44, 1.05	0.0806
Residue	79	33 (41.8)	NE (NE, NE)	44	18 (40.9)	28.0 (19.9, NE)	1.07	0.61, 1.94	0.8244
Interaction p-value									0.2130

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.2 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Physical (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	50 (34.2)	52.5 (NE, NE)	79	34 (43.0)	27.8 (16.6, NE)	0.67	0.43, 1.04	0.0755
Interval	99	39 (39.4)	26.3 (20.0, NE)	45	18 (40.0)	25.4 (19.9, NE)	1.04	0.60, 1.86	0.8971
Interaction p-value									0.2211
Myriad tumour BRCA mutation status									
tBRCAm	158	58 (36.7)	NE (NE, NE)	77	30 (39.0)	27.8 (19.7, NE)	0.87	0.56, 1.36	0.5246
Non-tBRCAm	97	35 (36.1)	52.5 (23.3, NE)	55	26 (47.3)	22.2 (16.4, NE)	0.70	0.42, 1.17	0.1704
Interaction p-value									0.5284
Status somatic BRCA mutations									
sBRCAm	22	4 (18.2)	NE (NE, NE)	7	1 (14.3)	NE (NE, NE)	1.22	0.18, 23.86	0.8559
gBRCAm	66	28 (42.4)	26.3 (13.9, NE)	31	12 (38.7)	24.9 (16.2, NE)	1.09	0.57, 2.22	0.8054
Non-BRCAm	41	13 (31.7)	52.5 (23.3, NE)	22	8 (36.4)	NE (NE, NE)	0.82	0.34, 2.08	0.6597
Interaction p-value									0.8662

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.3 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Role (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	58 (63.0)	11.1 (5.8,18.0)	48	29 (60.4)	11.3 (3.2,24.1)	0.95	0.61, 1.50	0.8191
NED/CR [IDS]	74	51 (68.9)	5.6 (3.0,11.1)	38	20 (52.6)	9.6 (8.3, NE)	1.70	1.03, 2.92	0.0374*
NED/CR [Chemo]	40	23 (57.5)	8.5 (3.3, NE)	20	14 (70.0)	4.6 (2.9,13.8)	0.76	0.39, 1.51	0.4181
PR	49	35 (71.4)	8.5 (4.9,13.8)	26	19 (73.1)	11.1 (2.9,19.9)	0.88	0.51, 1.57	0.6567
Interaction p-value									0.1710
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	92 (61.3)	8.9 (5.8,16.8)	65	37 (56.9)	11.9 (5.7,27.7)	1.12	0.77, 1.66	0.5529
non-tBRCAm	105	75 (71.4)	8.3 (4.8,11.1)	67	45 (67.2)	8.3 (5.6,14.9)	1.06	0.74, 1.55	0.7386
Interaction p-value									0.8488
First line treatment outcome (eCRF)									
NED [PDS]	89	54 (60.7)	11.1 (8.1,24.4)	47	28 (59.6)	8.5 (3.0,24.1)	0.88	0.56, 1.41	0.5802
NED/CR [IDS]	74	52 (70.3)	5.5 (2.9,11.1)	32	17 (53.1)	9.6 (8.3, NE)	1.79	1.06, 3.19	0.0297*
NED/CR [Chemo]	39	25 (64.1)	8.2 (3.0,15.2)	18	13 (72.2)	5.7 (2.9,13.8)	0.86	0.45, 1.74	0.6711
PR	50	35 (70.0)	8.9 (5.7,15.4)	34	23 (67.6)	11.1 (3.0,22.1)	0.97	0.58, 1.66	0.9064
Interaction p-value									0.1821
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	89 (60.5)	8.9 (5.8,17.3)	67	38 (56.7)	11.3 (5.7,27.7)	1.08	0.75, 1.60	0.6790
non-tBRCAm	108	78 (72.2)	8.3 (4.8,11.1)	65	44 (67.7)	8.3 (5.6,14.9)	1.09	0.76, 1.60	0.6343
Interaction p-value									0.9713
Age group									
<65 years	185	121 (65.4)	8.5 (6.2,11.3)	98	61 (62.2)	8.5 (5.6,14.9)	1.03	0.76, 1.41	0.8594
>=65 years	70	46 (65.7)	5.8 (3.3,11.9)	34	21 (61.8)	13.8 (5.6,20.2)	1.17	0.71, 2.00	0.5526
Interaction p-value									0.6768

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.3 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Role (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	117 (64.3)	8.4 (5.7,11.2)	90	56 (62.2)	11.1 (5.7,19.9)	1.08	0.79, 1.50	0.6282
IV	73	50 (68.5)	10.4 (5.4,14.4)	42	26 (61.9)	8.3 (5.5,22.1)	1.02	0.64, 1.67	0.9201
Interaction p-value									0.8527
Region									
Europe	245	163 (66.5)	8.3 (5.8,11.1)	126	79 (62.7)	9.3 (5.7,16.2)	1.07	0.82, 1.40	0.6370
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	0.84	0.18, 4.25	0.8163
Interaction p-value									0.7558
ECOG performance status at Baseline									
(0) Normal activity	190	129 (67.9)	8.4 (5.8,11.1)	100	64 (64.0)	8.5 (5.6,16.4)	1.09	0.81, 1.48	0.5740
(1) Restricted activity	61	36 (59.0)	7.2 (3.0,25.3)	31	18 (58.1)	9.6 (5.5, NE)	1.04	0.60, 1.88	0.8851
Interaction p-value									0.8931
Baseline CA-125 value									
<=ULN	228	149 (65.4)	8.4 (5.8,11.2)	118	73 (61.9)	8.5 (5.7,18.7)	1.07	0.81, 1.42	0.6454
>ULN	27	18 (66.7)	10.4 (3.5,19.9)	14	9 (64.3)	9.6 (2.8, NE)	1.03	0.47, 2.40	0.9481
Interaction p-value									0.9282
Histological grade									
High grade	255	167 (65.5)	8.4 (5.8,11.2)	132	82 (62.1)	9.3 (6.1,16.2)	1.06	0.82, 1.39	0.6480
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	107 (64.5)	8.3 (5.6,11.3)	80	46 (57.5)	9.3 (8.1,21.9)	1.17	0.83, 1.66	0.3804
Residue	79	53 (67.1)	8.5 (5.8,13.8)	44	30 (68.2)	7.9 (3.5,19.9)	0.92	0.59, 1.46	0.7197
Interaction p-value									0.4156

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.3 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Role (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	92 (63.0)	11.1 (8.2,14.0)	79	50 (63.3)	8.2 (3.5,16.4)	0.86	0.61, 1.22	0.4003
Interval	99	68 (68.7)	5.7 (3.1,11.1)	45	26 (57.8)	9.6 (8.3, NE)	1.52	0.98, 2.42	0.0636
Interaction p-value									0.0490*
Myriad tumour BRCA mutation status									
tBRCAm	158	100 (63.3)	8.5 (5.8,13.1)	77	45 (58.4)	11.1 (5.6,22.1)	1.06	0.75, 1.53	0.7257
Non-tBRCAm	97	67 (69.1)	8.3 (4.8,11.2)	55	37 (67.3)	8.3 (5.6,18.7)	1.08	0.73, 1.64	0.6910
Interaction p-value									0.9458
Status somatic BRCA mutations									
sBRCAm	22	11 (50.0)	11.1 (3.0, NE)	7	2 (28.6)	NE (NE, NE)	1.90	0.51, 12.26	0.3718
gBRCAm	66	46 (69.7)	5.6 (3.0,12.5)	31	16 (51.6)	23.5 (8.3, NE)	1.70	0.98, 3.10	0.0583
Non-BRCAm	41	27 (65.9)	9.7 (3.0,19.9)	22	16 (72.7)	8.2 (3.5,21.9)	0.94	0.51, 1.78	0.8444
Interaction p-value									0.3462

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.4 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Cognitive (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	63 (68.5)	11.1 (6.3,14.0)	48	31 (64.6)	8.5 (5.6,16.4)	0.91	0.60, 1.42	0.6812
NED/CR [IDS]	74	47 (63.5)	14.8 (8.3,19.4)	38	21 (55.3)	16.3 (5.6, NE)	1.07	0.65, 1.83	0.7821
NED/CR [Chemo]	40	28 (70.0)	15.2 (8.3,19.4)	20	17 (85.0)	5.6 (2.9, 8.5)	0.52	0.29, 0.97	0.0406*
PR	49	36 (73.5)	8.4 (3.7,11.3)	26	16 (61.5)	12.7 (5.5,15.4)	1.12	0.63, 2.08	0.6976
Interaction p-value									0.2601
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	104 (69.3)	11.3 (8.7,16.8)	65	44 (67.7)	8.3 (5.7,13.6)	0.84	0.59, 1.20	0.3237
non-tBRCAm	105	70 (66.7)	8.4 (5.8,14.8)	67	41 (61.2)	11.1 (5.7,14.6)	1.01	0.69, 1.50	0.9397
Interaction p-value									0.4651
First line treatment outcome (eCRF)									
NED [PDS]	89	59 (66.3)	11.1 (6.2,14.0)	47	30 (63.8)	8.7 (5.8,16.4)	0.92	0.60, 1.45	0.7268
NED/CR [IDS]	74	48 (64.9)	11.5 (8.3,17.3)	32	19 (59.4)	14.1 (5.6,22.2)	1.03	0.62, 1.80	0.9067
NED/CR [Chemo]	39	27 (69.2)	15.2 (8.3,22.1)	18	13 (72.2)	8.2 (5.5,13.1)	0.67	0.35, 1.34	0.2472
PR	50	37 (74.0)	8.5 (4.9,13.8)	34	22 (64.7)	8.6 (3.0,15.4)	1.03	0.61, 1.77	0.9151
Interaction p-value									0.7522
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	102 (69.4)	11.3 (8.7,16.8)	67	45 (67.2)	8.3 (5.7,13.6)	0.83	0.59, 1.20	0.3161
non-tBRCAm	108	72 (66.7)	8.4 (5.8,14.8)	65	40 (61.5)	11.1 (5.6,16.4)	1.02	0.70, 1.51	0.9299
Interaction p-value									0.4546
Age group									
<65 years	185	127 (68.6)	11.2 (8.5,14.8)	98	65 (66.3)	8.5 (5.7,13.1)	0.89	0.67, 1.21	0.4654
>=65 years	70	47 (67.1)	10.3 (5.8,16.6)	34	20 (58.8)	12.7 (5.7,21.4)	0.97	0.58, 1.67	0.9001
Interaction p-value									0.7981

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[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.4 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Cognitive (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	128 (70.3)	11.0 (8.3,13.8)	90	56 (62.2)	8.7 (5.7,14.4)	1.04	0.76, 1.43	0.8185
IV	73	46 (63.0)	14.8 (8.4,22.3)	42	29 (69.0)	8.3 (5.6,15.4)	0.67	0.42, 1.08	0.1014
Interaction p-value									0.1331
Region									
Europe	245	170 (69.4)	11.1 (8.4,13.8)	126	82 (65.1)	8.5 (5.8,12.7)	0.91	0.70, 1.18	0.4654
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	0.78	0.17, 3.94	0.7407
Interaction p-value									0.8416
ECOG performance status at Baseline									
(0) Normal activity	190	125 (65.8)	11.4 (8.5,16.3)	100	67 (67.0)	8.3 (5.7,12.5)	0.81	0.60, 1.09	0.1579
(1) Restricted activity	61	46 (75.4)	8.6 (5.6,14.0)	31	18 (58.1)	14.1 (5.6,21.4)	1.31	0.77, 2.31	0.3266
Interaction p-value									0.1194
Baseline CA-125 value									
<=ULN	228	155 (68.0)	11.2 (8.5,14.3)	118	77 (65.3)	8.5 (5.9,13.1)	0.88	0.67, 1.16	0.3674
>ULN	27	19 (70.4)	6.1 (3.0,16.6)	14	8 (57.1)	21.2 (2.8, NE)	1.23	0.56, 2.99	0.6143
Interaction p-value									0.4413
Histological grade									
High grade	255	174 (68.2)	11.1 (8.5,14.0)	132	85 (64.4)	8.5 (5.9,13.6)	0.91	0.71, 1.19	0.4856
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	110 (66.3)	11.1 (8.3,15.9)	80	50 (62.5)	8.7 (5.8,16.4)	0.96	0.69, 1.34	0.7879
Residue	79	56 (70.9)	12.1 (8.5,16.6)	44	29 (65.9)	8.3 (5.6,13.1)	0.85	0.55, 1.35	0.4796
Interaction p-value									0.6809

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.4 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Cognitive (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	100 (68.5)	11.1 (8.3,14.0)	79	52 (65.8)	8.5 (5.6,12.5)	0.86	0.62, 1.21	0.3738
Interval	99	66 (66.7)	13.0 (8.3,16.8)	45	27 (60.0)	11.1 (5.7,21.2)	1.03	0.67, 1.64	0.8939
Interaction p-value									0.5177
Myriad tumour BRCA mutation status									
tBRCAm	158	110 (69.6)	11.2 (8.7,16.3)	77	50 (64.9)	8.3 (5.8,14.1)	0.86	0.62, 1.21	0.3790
Non-tBRCAm	97	64 (66.0)	8.6 (5.8,15.2)	55	35 (63.6)	11.1 (5.6,14.6)	1.00	0.66, 1.52	0.9839
Interaction p-value									0.5854
Status somatic BRCA mutations									
sBRCAm	22	16 (72.7)	8.5 (2.9,19.4)	7	4 (57.1)	9.5 (2.8, NE)	1.10	0.40, 3.88	0.8596
gBRCAm	66	43 (65.2)	16.8 (8.7,20.3)	31	20 (64.5)	8.7 (5.6,19.2)	0.80	0.48, 1.40	0.4260
Non-BRCAm	41	31 (75.6)	8.3 (5.6,16.6)	22	14 (63.6)	14.0 (5.6,22.2)	1.21	0.66, 2.35	0.5436
Interaction p-value									0.6004

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.5 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Emotional (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	52 (56.5)	14.0 (8.7,24.2)	48	30 (62.5)	11.3 (5.7,27.8)	0.84	0.54, 1.33	0.4482
NED/CR [IDS]	74	50 (67.6)	8.3 (5.6,15.6)	38	27 (71.1)	11.0 (5.9,14.1)	0.93	0.59, 1.51	0.7698
NED/CR [Chemo]	40	23 (57.5)	19.7 (11.1,25.0)	20	11 (55.0)	22.0 (8.3, NE)	1.12	0.56, 2.40	0.7485
PR	49	32 (65.3)	13.8 (5.8,22.1)	26	17 (65.4)	11.1 (2.9,14.0)	0.72	0.41, 1.34	0.2946
Interaction p-value									0.8097
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	91 (60.7)	16.9 (11.1,22.1)	65	40 (61.5)	11.3 (8.3,22.2)	0.92	0.64, 1.34	0.6508
non-tBRCAm	105	66 (62.9)	11.1 (5.7,16.7)	67	45 (67.2)	11.1 (8.3,13.9)	0.89	0.61, 1.31	0.5622
Interaction p-value									0.9232
First line treatment outcome (eCRF)									
NED [PDS]	89	53 (59.6)	14.0 (8.7,22.8)	47	29 (61.7)	11.2 (5.7,27.8)	0.92	0.59, 1.46	0.7166
NED/CR [IDS]	74	48 (64.9)	10.6 (5.6,19.8)	32	23 (71.9)	11.0 (6.6,14.1)	0.86	0.53, 1.45	0.5682
NED/CR [Chemo]	39	22 (56.4)	19.6 (8.5,25.0)	18	10 (55.6)	22.0 (3.5, NE)	0.97	0.47, 2.15	0.9414
PR	50	33 (66.0)	12.1 (6.3,22.1)	34	22 (64.7)	11.3 (5.6,16.8)	0.87	0.51, 1.51	0.6059
Interaction p-value									0.9926
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	90 (61.2)	15.9 (11.1,22.1)	67	41 (61.2)	11.3 (8.3,21.4)	0.93	0.65, 1.36	0.7168
non-tBRCAm	108	67 (62.0)	11.2 (5.8,19.7)	65	44 (67.7)	10.2 (8.3,13.9)	0.86	0.59, 1.26	0.4349
Interaction p-value									0.7567
Age group									
<65 years	185	121 (65.4)	11.1 (6.0,15.9)	98	65 (66.3)	11.1 (8.3,13.8)	0.95	0.71, 1.29	0.7481
>=65 years	70	36 (51.4)	22.4 (12.1, NE)	34	20 (58.8)	14.0 (9.0,26.5)	0.74	0.43, 1.31	0.2953
Interaction p-value									0.4413

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.5 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Emotional (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	114 (62.6)	13.8 (11.0,19.7)	90	56 (62.2)	11.3 (8.3,14.1)	0.94	0.69, 1.31	0.7154
IV	73	43 (58.9)	12.1 (6.3,24.1)	42	29 (69.0)	11.1 (6.9,16.8)	0.77	0.49, 1.25	0.2932
Interaction p-value									0.5025
Region									
Europe	245	153 (62.4)	13.8 (10.0,19.4)	126	82 (65.1)	11.1 (8.3,13.8)	0.86	0.66, 1.14	0.2927
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	24.0 (13.8, NE)	1.09	0.24, 5.54	0.9083
Interaction p-value									0.7629
ECOG performance status at Baseline									
(0) Normal activity	190	117 (61.6)	13.8 (8.5,19.4)	100	63 (63.0)	11.2 (8.3,14.0)	0.94	0.70, 1.29	0.7097
(1) Restricted activity	61	37 (60.7)	13.8 (8.5,24.0)	31	22 (71.0)	9.0 (8.3,15.5)	0.71	0.42, 1.23	0.2179
Interaction p-value									0.3729
Baseline CA-125 value									
<=ULN	228	141 (61.8)	13.8 (11.0,19.6)	118	76 (64.4)	11.2 (8.7,13.9)	0.89	0.67, 1.18	0.4073
>ULN	27	16 (59.3)	9.0 (5.7, NE)	14	9 (64.3)	6.9 (5.6,21.4)	0.87	0.39, 2.05	0.7355
Interaction p-value									0.9585
Histological grade									
High grade	255	157 (61.6)	13.8 (11.0,19.6)	132	85 (64.4)	11.2 (8.3,13.9)	0.89	0.68, 1.16	0.3716
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	102 (61.4)	11.5 (7.9,20.4)	80	53 (66.3)	11.1 (6.9,13.9)	0.89	0.64, 1.24	0.4813
Residue	79	49 (62.0)	16.7 (8.5,22.1)	44	26 (59.1)	11.3 (5.7,23.0)	0.92	0.58, 1.50	0.7373
Interaction p-value									0.8968

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.5 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Emotional (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	86 (58.9)	17.3 (11.4,22.3)	79	47 (59.5)	11.3 (8.3,23.0)	0.88	0.62, 1.27	0.4937
Interval	99	65 (65.7)	8.4 (5.7,15.6)	45	32 (71.1)	11.0 (5.9,14.0)	0.91	0.60, 1.41	0.6703
Interaction p-value									0.9085
Myriad tumour BRCA mutation status									
tBRCAm	158	97 (61.4)	15.6 (11.1,20.7)	77	47 (61.0)	11.4 (8.4,21.4)	0.93	0.66, 1.33	0.6772
Non-tBRCAm	97	60 (61.9)	11.1 (5.7,20.4)	55	38 (69.1)	9.0 (6.2,13.8)	0.84	0.56, 1.28	0.4165
Interaction p-value									0.7268
Status somatic BRCA mutations									
sBRCAm	22	12 (54.5)	11.1 (5.6, NE)	7	5 (71.4)	5.6 (2.8, NE)	0.53	0.19, 1.67	0.2562
gBRCAm	66	42 (63.6)	14.0 (6.2,22.1)	31	18 (58.1)	13.9 (6.9,35.0)	1.09	0.63, 1.94	0.7657
Non-BRCAm	41	23 (56.1)	19.7 (5.7, NE)	22	15 (68.2)	11.1 (8.3,13.9)	0.76	0.40, 1.48	0.4083
Interaction p-value									0.4477

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.6 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Social (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	54 (58.7)	13.9 (8.3,23.1)	48	34 (70.8)	10.4 (6.2,14.2)	0.70	0.46, 1.08	0.1088
NED/CR [IDS]	74	47 (63.5)	11.1 (5.7,19.8)	38	21 (55.3)	13.9 (5.9,29.3)	1.27	0.77, 2.16	0.3596
NED/CR [Chemo]	40	19 (47.5)	24.0 (8.6, NE)	20	13 (65.0)	14.3 (3.5, NE)	0.72	0.36, 1.49	0.3631
PR	49	28 (57.1)	8.5 (5.3, NE)	26	13 (50.0)	13.9 (2.9, NE)	0.94	0.50, 1.88	0.8546
Interaction p-value									0.3281
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	86 (57.3)	15.9 (8.6,23.1)	65	37 (56.9)	14.0 (11.1,24.1)	1.01	0.69, 1.50	0.9627
non-tBRCAm	105	62 (59.0)	11.2 (5.8,19.8)	67	44 (65.7)	9.9 (5.7,14.6)	0.78	0.53, 1.16	0.2221
Interaction p-value									0.3641
First line treatment outcome (eCRF)									
NED [PDS]	89	53 (59.6)	13.5 (8.3,23.1)	47	33 (70.2)	10.4 (6.2,16.4)	0.73	0.47, 1.14	0.1589
NED/CR [IDS]	74	46 (62.2)	11.1 (5.6,19.9)	32	19 (59.4)	11.5 (5.8, NE)	1.10	0.66, 1.92	0.7216
NED/CR [Chemo]	39	19 (48.7)	23.7 (8.6, NE)	18	10 (55.6)	16.7 (8.3, NE)	0.86	0.41, 1.93	0.7066
PR	50	28 (56.0)	8.5 (5.5, NE)	34	18 (52.9)	13.9 (3.0, NE)	0.99	0.55, 1.82	0.9670
Interaction p-value									0.6684
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	83 (56.5)	15.9 (8.5,23.2)	67	38 (56.7)	14.0 (9.3,24.1)	0.98	0.67, 1.45	0.9046
non-tBRCAm	108	65 (60.2)	11.3 (5.8,19.6)	65	43 (66.2)	9.9 (5.7,15.5)	0.81	0.55, 1.19	0.2803
Interaction p-value									0.4913
Age group									
<65 years	185	105 (56.8)	13.6 (8.4,19.6)	98	60 (61.2)	13.9 (8.5,19.4)	0.92	0.67, 1.27	0.5964
>=65 years	70	43 (61.4)	11.3 (6.3,23.2)	34	21 (61.8)	9.9 (5.8,15.5)	0.77	0.46, 1.33	0.3483
Interaction p-value									0.5912

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.6 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Social (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	108 (59.3)	11.3 (8.4,18.0)	90	54 (60.0)	11.5 (8.5,20.0)	0.95	0.69, 1.32	0.7495
IV	73	40 (54.8)	16.0 (7.9, NE)	42	27 (64.3)	11.3 (5.8,19.4)	0.74	0.46, 1.22	0.2392
Interaction p-value									0.4186
Region									
Europe	245	145 (59.2)	11.4 (8.5,18.0)	126	79 (62.7)	11.2 (8.5,15.5)	0.87	0.66, 1.14	0.3071
Japan	10	3 (30.0)	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	1.02	0.17, 7.77	0.9800
Interaction p-value									0.8557
ECOG performance status at Baseline									
(0) Normal activity	190	105 (55.3)	16.0 (11.2,23.1)	100	67 (67.0)	11.2 (8.3,14.6)	0.72	0.53, 0.99	0.0421*
(1) Restricted activity	61	41 (67.2)	5.7 (3.0,11.9)	31	14 (45.2)	19.4 (6.1, NE)	1.74	0.97, 3.31	0.0628
Interaction p-value									0.0088*
Baseline CA-125 value									
<=ULN	228	129 (56.6)	14.1 (11.1,20.7)	118	72 (61.0)	13.8 (8.7,16.7)	0.86	0.65, 1.16	0.3268
>ULN	27	19 (70.4)	5.7 (3.5,16.6)	14	9 (64.3)	5.6 (2.8, NE)	1.00	0.46, 2.32	0.9984
Interaction p-value									0.7354
Histological grade									
High grade	255	148 (58.0)	13.5 (8.6,19.6)	132	81 (61.4)	11.3 (8.5,16.4)	0.88	0.67, 1.16	0.3632
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	101 (60.8)	13.5 (8.3,17.3)	80	53 (66.3)	10.4 (8.3,14.2)	0.85	0.61, 1.19	0.3403
Residue	79	41 (51.9)	19.6 (8.4, NE)	44	24 (54.5)	16.6 (11.1, NE)	0.92	0.56, 1.54	0.7403
Interaction p-value									0.7998

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.6 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Functional scale: Social (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	82 (56.2)	16.0 (10.6,24.0)	79	51 (64.6)	11.3 (8.5,16.6)	0.76	0.54, 1.08	0.1257
Interval	99	60 (60.6)	11.1 (5.8,19.9)	45	26 (57.8)	13.9 (6.1,29.3)	1.12	0.71, 1.80	0.6296
Interaction p-value									0.1835
Myriad tumour BRCA mutation status									
tBRCAm	158	89 (56.3)	15.9 (10.6,23.2)	77	44 (57.1)	14.0 (9.3,24.1)	0.93	0.65, 1.35	0.6942
Non-tBRCAm	97	59 (60.8)	11.1 (5.6,16.6)	55	37 (67.3)	9.9 (5.7,14.6)	0.83	0.56, 1.27	0.3941
Interaction p-value									0.6998
Status somatic BRCA mutations									
sBRCAm	22	8 (36.4)	NE (NE, NE)	7	1 (14.3)	NE (NE, NE)	2.94	0.54, 54.64	0.2436
gBRCAm	66	44 (66.7)	8.5 (4.2,14.1)	31	15 (48.4)	24.1 (11.3, NE)	1.79	1.02, 3.33	0.0425*
Non-BRCAm	41	26 (63.4)	11.9 (5.4, NE)	22	16 (72.7)	11.0 (5.6,15.5)	0.70	0.38, 1.35	0.2807
Interaction p-value									0.0693

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.7 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	44 (47.8)	25.5 (11.2, NE)	48	23 (47.9)	25.6 (16.4, NE)	1.01	0.62, 1.71	0.9650
NED/CR [IDS]	74	50 (67.6)	9.7 (6.2,19.3)	38	17 (44.7)	29.8 (13.9, NE)	2.08	1.23, 3.72	0.0059*
NED/CR [Chemo]	40	24 (60.0)	11.3 (8.1,24.2)	20	10 (50.0)	22.0 (8.7, NE)	1.51	0.74, 3.32	0.2585
PR	49	28 (57.1)	12.1 (5.8,25.7)	26	15 (57.7)	14.0 (6.4,21.7)	0.97	0.52, 1.87	0.9265
Interaction p-value									0.1822
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	86 (57.3)	13.6 (10.9,23.1)	65	30 (46.2)	25.6 (16.7, NE)	1.50	1.003, 2.31	0.0484*
non-tBRCAm	105	60 (57.1)	13.8 (8.3,24.2)	67	35 (52.2)	17.4 (14.4,28.7)	1.18	0.78, 1.80	0.4476
Interaction p-value									0.4151
First line treatment outcome (eCRF)									
NED [PDS]	89	43 (48.3)	24.2 (11.3, NE)	47	23 (48.9)	25.6 (16.4, NE)	0.99	0.60, 1.68	0.9836
NED/CR [IDS]	74	52 (70.3)	8.3 (5.6,13.6)	32	14 (43.8)	29.8 (11.3, NE)	2.39	1.36, 4.49	0.0019*
NED/CR [Chemo]	39	21 (53.8)	11.3 (8.2, NE)	18	7 (38.9)	NE (NE, NE)	1.67	0.74, 4.24	0.2214
PR	50	28 (56.0)	13.7 (5.8,25.7)	34	21 (61.8)	14.7 (8.3,21.7)	0.90	0.51, 1.60	0.7041
Interaction p-value									0.0571
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	84 (57.1)	13.6 (8.7,23.1)	67	30 (44.8)	25.6 (16.7, NE)	1.53	1.02, 2.36	0.0395*
non-tBRCAm	108	62 (57.4)	13.8 (8.3,24.2)	65	35 (53.8)	17.4 (14.4,28.7)	1.15	0.76, 1.76	0.5118
Interaction p-value									0.3402
Age group									
<65 years	185	104 (56.2)	13.8 (11.0,22.1)	98	47 (48.0)	24.0 (16.7,28.7)	1.34	0.95, 1.90	0.0941
>=65 years	70	42 (60.0)	11.5 (7.9,24.2)	34	18 (52.9)	16.6 (12.7, NE)	1.28	0.75, 2.29	0.3743
Interaction p-value									0.9004

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.7 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	100 (54.9)	19.2 (11.1,24.2)	90	43 (47.8)	25.6 (16.7, NE)	1.32	0.93, 1.90	0.1250
IV	73	46 (63.0)	11.2 (6.1,14.8)	42	22 (52.4)	19.7 (11.2, NE)	1.36	0.83, 2.31	0.2245
Interaction p-value									0.9137
Region									
Europe	245	140 (57.1)	13.4 (11.0,21.7)	126	61 (48.4)	22.3 (16.4,29.8)	1.33	0.99, 1.82	0.0560
Japan	10	6 (60.0)	22.1 (2.8, NE)	6	4 (66.7)	23.0 (2.8, NE)	1.15	0.33, 4.49	0.8293
Interaction p-value									0.8219
ECOG performance status at Baseline									
(0) Normal activity	190	106 (55.8)	13.6 (11.0,22.1)	100	48 (48.0)	25.6 (16.6,29.8)	1.38	0.99, 1.96	0.0591
(1) Restricted activity	61	36 (59.0)	12.8 (5.6,25.7)	31	17 (54.8)	16.7 (8.4, NE)	1.10	0.63, 2.01	0.7395
Interaction p-value									0.5129
Baseline CA-125 value									
<=ULN	228	129 (56.6)	13.7 (11.1,22.4)	118	59 (50.0)	22.3 (16.4,28.7)	1.26	0.93, 1.73	0.1390
>ULN	27	17 (63.0)	11.2 (5.6,22.1)	14	6 (42.9)	21.7 (9.3, NE)	2.03	0.84, 5.62	0.1185
Interaction p-value									0.3276
Histological grade									
High grade	255	146 (57.3)	13.6 (11.1,22.1)	132	65 (49.2)	22.3 (16.6,28.7)	1.32	0.99, 1.78	0.0571
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	97 (58.4)	13.6 (9.7,22.1)	80	37 (46.3)	25.6 (17.4,29.8)	1.49	1.03, 2.21	0.0333*
Residue	79	41 (51.9)	22.1 (10.9, NE)	44	21 (47.7)	21.7 (14.6, NE)	1.18	0.70, 2.03	0.5373
Interaction p-value									0.4773

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.7 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	70 (47.9)	24.2 (15.2, NE)	79	37 (46.8)	25.6 (17.4, NE)	1.02	0.69, 1.53	0.9306
Interval	99	68 (68.7)	8.3 (5.7,11.5)	45	21 (46.7)	21.7 (14.6, NE)	2.17	1.36, 3.63	0.0010*
Interaction p-value									0.0172*
Myriad tumour BRCA mutation status									
tBRCAm	158	92 (58.2)	11.5 (8.7,22.4)	77	34 (44.2)	27.8 (19.7, NE)	1.60	1.09, 2.40	0.0160*
Non-tBRCAm	97	54 (55.7)	15.2 (8.4,25.7)	55	31 (56.4)	16.4 (12.7,22.0)	1.02	0.66, 1.61	0.9283
Interaction p-value									0.1393
Status somatic BRCA mutations									
sBRCAm	22	12 (54.5)	11.0 (2.9, NE)	7	1 (14.3)	NE (NE, NE)	5.15	1.01, 93.99	0.0478*
gBRCAm	66	49 (74.2)	8.3 (4.6,11.3)	31	15 (48.4)	24.0 (11.3, NE)	2.16	1.24, 3.99	0.0059*
Non-BRCAm	41	24 (58.5)	11.9 (4.8, NE)	22	14 (63.6)	14.7 (8.7, NE)	1.03	0.54, 2.06	0.9239
Interaction p-value									0.1189

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.8 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Constipation (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	42 (45.7)	NE (NE, NE)	48	27 (56.3)	19.4 (11.3,27.8)	0.72	0.44, 1.18	0.1839
NED/CR [IDS]	74	46 (62.2)	19.8 (14.8,22.5)	38	19 (50.0)	19.7 (13.7, NE)	1.21	0.72, 2.11	0.4885
NED/CR [Chemo]	40	22 (55.0)	13.8 (8.3, NE)	20	9 (45.0)	NE (NE, NE)	1.61	0.76, 3.68	0.2177
PR	49	23 (46.9)	19.5 (14.0, NE)	26	14 (53.8)	19.9 (14.0,24.9)	0.84	0.44, 1.67	0.6017
Interaction p-value									0.2597
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	76 (50.7)	20.0 (16.3,25.3)	65	33 (50.8)	19.7 (13.7, NE)	0.99	0.67, 1.52	0.9781
non-tBRCAm	105	57 (54.3)	19.9 (13.9,24.2)	67	36 (53.7)	19.4 (13.9,24.9)	0.98	0.65, 1.50	0.9325
Interaction p-value									0.9670
First line treatment outcome (eCRF)									
NED [PDS]	89	41 (46.1)	NE (NE, NE)	47	26 (55.3)	19.4 (11.3,27.8)	0.78	0.48, 1.29	0.3285
NED/CR [IDS]	74	43 (58.1)	19.8 (15.9,24.0)	32	17 (53.1)	17.7 (10.8, NE)	0.97	0.57, 1.75	0.9223
NED/CR [Chemo]	39	20 (51.3)	19.2 (8.6, NE)	18	8 (44.4)	14.0 (6.0, NE)	1.22	0.56, 2.95	0.6276
PR	50	27 (54.0)	15.2 (13.8, NE)	34	18 (52.9)	22.2 (14.0, NE)	1.13	0.63, 2.08	0.6917
Interaction p-value									0.7305
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	74 (50.3)	20.0 (16.3,25.3)	67	33 (49.3)	19.7 (13.7, NE)	1.01	0.68, 1.54	0.9603
non-tBRCAm	108	59 (54.6)	19.8 (14.0,24.2)	65	36 (55.4)	19.4 (13.9,24.9)	0.96	0.64, 1.47	0.8536
Interaction p-value									0.8679
Age group									
<65 years	185	99 (53.5)	19.1 (14.8,22.5)	98	52 (53.1)	19.7 (13.8,24.9)	1.04	0.75, 1.47	0.8048
>=65 years	70	34 (48.6)	22.6 (16.6, NE)	34	17 (50.0)	18.7 (12.3, NE)	0.81	0.46, 1.49	0.4959
Interaction p-value									0.4748

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.8 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Constipation (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	103 (56.6)	17.3 (14.0,22.1)	90	47 (52.2)	19.4 (13.7,24.1)	1.06	0.75, 1.50	0.7580
IV	73	30 (41.1)	24.9 (19.4, NE)	42	22 (52.4)	19.7 (13.8, NE)	0.77	0.45, 1.35	0.3561
Interaction p-value									0.3431
Region									
Europe	245	128 (52.2)	19.8 (16.5,23.4)	126	65 (51.6)	19.7 (15.4,24.1)	1.01	0.75, 1.36	0.9692
Japan	10	5 (50.0)	25.1 (5.6, NE)	6	4 (66.7)	8.3 (2.8, NE)	0.53	0.14, 2.15	0.3557
Interaction p-value									0.3624
ECOG performance status at Baseline									
(0) Normal activity	190	100 (52.6)	19.8 (16.3,22.5)	100	51 (51.0)	22.1 (14.0,27.8)	1.09	0.78, 1.54	0.6077
(1) Restricted activity	61	30 (49.2)	23.4 (13.8, NE)	31	18 (58.1)	15.4 (11.1,21.2)	0.63	0.35, 1.15	0.1261
Interaction p-value									0.1123
Baseline CA-125 value									
<=ULN	228	118 (51.8)	20.0 (16.5,24.2)	118	63 (53.4)	19.4 (13.9,22.3)	0.92	0.68, 1.25	0.5822
>ULN	27	15 (55.6)	19.9 (11.1,24.2)	14	6 (42.9)	22.1 (8.3, NE)	1.70	0.69, 4.78	0.2543
Interaction p-value									0.2087
Histological grade									
High grade	255	133 (52.2)	19.9 (16.6,23.4)	132	69 (52.3)	19.7 (14.0,22.3)	0.98	0.73, 1.31	0.8786
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	86 (51.8)	20.0 (16.8,25.1)	80	43 (53.8)	19.4 (13.7,22.3)	0.88	0.61, 1.28	0.5011
Residue	79	43 (54.4)	15.2 (13.8,24.2)	44	23 (52.3)	22.2 (13.9, NE)	1.19	0.72, 2.00	0.5005
Interaction p-value									0.3464

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.8 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Constipation (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	72 (49.3)	20.0 (14.5, NE)	79	41 (51.9)	19.7 (13.9,27.8)	0.96	0.66, 1.42	0.8331
Interval	99	57 (57.6)	19.8 (16.3,22.6)	45	25 (55.6)	19.4 (11.1, NE)	0.99	0.63, 1.61	0.9674
Interaction p-value									0.9190
Myriad tumour BRCA mutation status									
tBRCAm	158	80 (50.6)	19.5 (15.2,25.3)	77	37 (48.1)	21.2 (13.7, NE)	1.02	0.70, 1.53	0.9119
Non-tBRCAm	97	53 (54.6)	19.9 (14.5,24.2)	55	32 (58.2)	18.7 (13.8,24.1)	0.93	0.61, 1.46	0.7645
Interaction p-value									0.7658
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	15.2 (7.9, NE)	7	4 (57.1)	9.6 (2.8, NE)	0.73	0.24, 2.67	0.6046
gBRCAm	66	38 (57.6)	21.4 (14.5,25.1)	31	18 (58.1)	16.2 (11.3, NE)	0.91	0.53, 1.64	0.7568
Non-BRCAm	41	22 (53.7)	20.0 (13.8, NE)	22	14 (63.6)	13.8 (8.3, NE)	0.74	0.38, 1.48	0.3863
Interaction p-value									0.8729

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.9 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Diarrhoea (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	41 (44.6)	25.5 (16.8, NE)	48	22 (45.8)	22.3 (14.0, NE)	0.94	0.57, 1.61	0.8216
NED/CR [IDS]	74	32 (43.2)	NE (NE, NE)	38	17 (44.7)	22.1 (13.8, NE)	0.93	0.52, 1.71	0.8080
NED/CR [Chemo]	40	21 (52.5)	22.1 (8.3, NE)	20	8 (40.0)	25.2 (17.1, NE)	1.72	0.79, 4.14	0.1744
PR	49	30 (61.2)	14.2 (11.3,21.6)	26	11 (42.3)	23.5 (8.3, NE)	1.36	0.70, 2.84	0.3765
Interaction p-value									0.5236
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	74 (49.3)	24.0 (16.8,27.4)	65	29 (44.6)	25.2 (20.0, NE)	1.13	0.75, 1.77	0.5671
non-tBRCAm	105	50 (47.6)	21.6 (11.5, NE)	67	29 (43.3)	22.1 (14.0, NE)	1.11	0.71, 1.78	0.6406
Interaction p-value									0.9611
First line treatment outcome (eCRF)									
NED [PDS]	89	39 (43.8)	25.9 (16.6, NE)	47	20 (42.6)	35.0 (19.4, NE)	1.02	0.60, 1.78	0.9448
NED/CR [IDS]	74	34 (45.9)	24.0 (13.0, NE)	32	15 (46.9)	22.1 (13.8, NE)	1.00	0.55, 1.89	0.9961
NED/CR [Chemo]	39	19 (48.7)	24.0 (8.7, NE)	18	7 (38.9)	25.2 (14.0, NE)	1.44	0.63, 3.69	0.3984
PR	50	30 (60.0)	15.3 (11.3,25.5)	34	15 (44.1)	23.5 (11.3, NE)	1.32	0.72, 2.53	0.3727
Interaction p-value									0.8377
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	72 (49.0)	24.0 (16.9,27.4)	67	29 (43.3)	25.2 (20.0, NE)	1.14	0.75, 1.78	0.5531
non-tBRCAm	108	52 (48.1)	21.6 (11.4, NE)	65	29 (44.6)	22.1 (14.0, NE)	1.11	0.71, 1.77	0.6480
Interaction p-value									0.9406
Age group									
<65 years	185	86 (46.5)	25.3 (16.9,27.4)	98	40 (40.8)	35.0 (20.7, NE)	1.15	0.80, 1.69	0.4605
>=65 years	70	38 (54.3)	16.6 (11.3,30.9)	34	18 (52.9)	19.9 (12.7,22.2)	1.03	0.59, 1.84	0.9316
Interaction p-value									0.7381

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.9 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Diarrhoea (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	91 (50.0)	23.3 (15.9,25.9)	90	40 (44.4)	22.2 (19.8, NE)	1.16	0.81, 1.70	0.4296
IV	73	33 (45.2)	25.0 (11.4, NE)	42	18 (42.9)	25.2 (13.9, NE)	1.02	0.58, 1.85	0.9529
Interaction p-value									0.7081
Region									
Europe	245	119 (48.6)	24.0 (16.6,25.9)	126	54 (42.9)	25.2 (19.8, NE)	1.13	0.82, 1.57	0.4584
Japan	10	5 (50.0)	16.6 (2.8, NE)	6	4 (66.7)	22.1 (5.5, NE)	1.01	0.27, 4.08	0.9893
Interaction p-value									0.8716
ECOG performance status at Baseline									
(0) Normal activity	190	88 (46.3)	24.0 (16.8, NE)	100	44 (44.0)	25.2 (20.7, NE)	1.07	0.75, 1.55	0.7142
(1) Restricted activity	61	35 (57.4)	14.5 (8.7,25.7)	31	14 (45.2)	19.4 (12.3, NE)	1.32	0.72, 2.53	0.3741
Interaction p-value									0.5665
Baseline CA-125 value									
<=ULN	228	104 (45.6)	25.5 (21.6,30.9)	118	51 (43.2)	25.2 (19.8, NE)	1.04	0.75, 1.46	0.8282
>ULN	27	20 (74.1)	11.1 (5.7,16.6)	14	7 (50.0)	20.7 (5.7, NE)	1.96	0.87, 5.01	0.1079
Interaction p-value									0.1626
Histological grade									
High grade	255	124 (48.6)	24.0 (16.6,25.9)	132	58 (43.9)	23.5 (19.9, NE)	1.12	0.82, 1.54	0.4826
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	75 (45.2)	25.9 (16.8, NE)	80	36 (45.0)	22.2 (19.4, NE)	1.00	0.68, 1.51	0.9954
Residue	79	43 (54.4)	21.9 (11.3,25.7)	44	17 (38.6)	25.2 (17.1, NE)	1.46	0.85, 2.64	0.1759
Interaction p-value									0.2785

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.9 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Diarrhoea (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	71 (48.6)	24.0 (16.6,25.9)	79	32 (40.5)	25.2 (20.0, NE)	1.23	0.82, 1.89	0.3246
Interval	99	47 (47.5)	24.0 (13.4, NE)	45	21 (46.7)	22.2 (13.9, NE)	1.00	0.61, 1.71	NC
Interaction p-value									0.5412
Myriad tumour BRCA mutation status									
tBRCAm	158	74 (46.8)	25.3 (18.0,30.9)	77	32 (41.6)	25.2 (20.0, NE)	1.08	0.72, 1.66	0.7041
Non-tBRCAm	97	50 (51.5)	15.3 (11.1, NE)	55	26 (47.3)	22.1 (14.0, NE)	1.20	0.76, 1.96	0.4420
Interaction p-value									0.7450
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	21.0 (5.6, NE)	7	2 (28.6)	NE (NE, NE)	2.18	0.57, 14.22	0.2788
gBRCAm	66	31 (47.0)	25.3 (14.5, NE)	31	13 (41.9)	23.5 (19.4, NE)	1.29	0.69, 2.56	0.4346
Non-BRCAm	41	24 (58.5)	14.0 (5.7, NE)	22	13 (59.1)	19.4 (12.7, NE)	1.11	0.58, 2.25	0.7533
Interaction p-value									0.7106

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.10 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Dyspnoea (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	39 (42.4)	52.5 (17.9, NE)	48	26 (54.2)	16.7 (8.5, NE)	0.63	0.39, 1.06	0.0797
NED/CR [IDS]	74	41 (55.4)	17.3 (11.5,24.2)	38	19 (50.0)	18.9 (11.1, NE)	1.15	0.67, 2.02	0.6226
NED/CR [Chemo]	40	20 (50.0)	22.1 (8.2, NE)	20	8 (40.0)	NE (NE, NE)	1.59	0.73, 3.84	0.2522
PR	49	25 (51.0)	15.4 (11.3, NE)	26	14 (53.8)	11.1 (2.9, NE)	0.71	0.37, 1.40	0.3087
Interaction p-value									0.1644
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	67 (44.7)	31.0 (17.3, NE)	65	34 (52.3)	17.0 (11.1, NE)	0.76	0.51, 1.16	0.1967
non-tBRCAm	105	58 (55.2)	15.4 (11.3,23.4)	67	33 (49.3)	18.9 (11.1, NE)	1.12	0.73, 1.73	0.6156
Interaction p-value									0.2043
First line treatment outcome (eCRF)									
NED [PDS]	89	37 (41.6)	52.5 (18.0, NE)	47	24 (51.1)	17.0 (8.6, NE)	0.68	0.41, 1.15	0.1444
NED/CR [IDS]	74	41 (55.4)	14.8 (8.3,31.0)	32	17 (53.1)	18.9 (8.5, NE)	1.13	0.65, 2.04	0.6772
NED/CR [Chemo]	39	21 (53.8)	15.2 (4.5, NE)	18	8 (44.4)	11.1 (5.6, NE)	1.29	0.59, 3.09	0.5383
PR	50	24 (48.0)	22.3 (12.1, NE)	34	17 (50.0)	19.7 (9.0, NE)	0.82	0.45, 1.56	0.5463
Interaction p-value									0.4539
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	64 (43.5)	31.0 (18.0, NE)	67	35 (52.2)	17.0 (11.1, NE)	0.72	0.48, 1.10	0.1250
non-tBRCAm	108	61 (56.5)	15.3 (11.2,22.1)	65	32 (49.2)	18.9 (11.1, NE)	1.18	0.77, 1.83	0.4562
Interaction p-value									0.1061
Age group									
<65 years	185	89 (48.1)	22.1 (16.6, NE)	98	49 (50.0)	19.7 (11.3, NE)	0.90	0.64, 1.28	0.5527
>=65 years	70	36 (51.4)	19.7 (11.3, NE)	34	18 (52.9)	13.8 (8.4, NE)	0.87	0.50, 1.57	0.6407
Interaction p-value									0.9293

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.10 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Dyspnoea (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	85 (46.7)	24.0 (17.9, NE)	90	47 (52.2)	16.7 (11.1, NE)	0.81	0.57, 1.17	0.2532
IV	73	40 (54.8)	14.8 (8.3, NE)	42	20 (47.6)	21.2 (13.8, NE)	1.13	0.67, 1.98	0.6425
Interaction p-value									0.3026
Region									
Europe	245	121 (49.4)	20.7 (16.0, NE)	126	64 (50.8)	18.7 (12.3,24.9)	0.90	0.66, 1.22	0.4878
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	0.81	0.18, 4.10	0.7814
Interaction p-value									0.8931
ECOG performance status at Baseline									
(0) Normal activity	190	96 (50.5)	19.4 (15.2, NE)	100	53 (53.0)	18.7 (11.1, NE)	0.92	0.66, 1.30	0.6406
(1) Restricted activity	61	27 (44.3)	NE (NE, NE)	31	14 (45.2)	18.9 (8.5, NE)	0.82	0.44, 1.61	0.5549
Interaction p-value									0.7549
Baseline CA-125 value									
<=ULN	228	110 (48.2)	22.3 (16.0, NE)	118	58 (49.2)	19.7 (11.1, NE)	0.90	0.66, 1.25	0.5363
>ULN	27	15 (55.6)	19.7 (5.6, NE)	14	9 (64.3)	13.8 (8.4,21.2)	0.85	0.38, 2.01	0.6936
Interaction p-value									0.8839
Histological grade									
High grade	255	125 (49.0)	20.7 (16.0, NE)	132	67 (50.8)	18.7 (12.3,24.9)	0.89	0.67, 1.21	0.4678
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	80 (48.2)	20.7 (16.6, NE)	80	42 (52.5)	17.0 (12.1,24.9)	0.85	0.59, 1.24	0.3948
Residue	79	38 (48.1)	23.4 (12.1, NE)	44	21 (47.7)	19.7 (8.7, NE)	0.97	0.57, 1.68	0.8997
Interaction p-value									0.6959

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.10 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Dyspnoea (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	66 (45.2)	52.5 (16.7, NE)	79	40 (50.6)	18.7 (8.7, NE)	0.79	0.53, 1.17	0.2355
Interval	99	52 (52.5)	19.9 (12.5,31.0)	45	23 (51.1)	18.9 (11.1, NE)	1.06	0.66, 1.76	0.8160
Interaction p-value									0.3489
Myriad tumour BRCA mutation status									
tBRCAm	158	73 (46.2)	24.2 (16.6, NE)	77	38 (49.4)	19.7 (12.1, NE)	0.85	0.58, 1.27	0.4165
Non-tBRCAm	97	52 (53.6)	17.9 (12.5,24.2)	55	29 (52.7)	13.8 (8.5, NE)	0.98	0.62, 1.56	0.9207
Interaction p-value									0.6458
Status somatic BRCA mutations									
sBRCAm	22	7 (31.8)	NE (NE, NE)	7	4 (57.1)	19.5 (2.8, NE)	0.54	0.16, 2.05	0.3379
gBRCAm	66	33 (50.0)	17.3 (11.3, NE)	31	17 (54.8)	16.7 (3.0, NE)	0.80	0.45, 1.47	0.4661
Non-BRCAm	41	21 (51.2)	23.4 (14.8, NE)	22	10 (45.5)	NE (NE, NE)	1.09	0.52, 2.43	0.8225
Interaction p-value									0.6141

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.11 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Fatigue (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	52 (56.5)	16.6 (11.1, NE)	48	31 (64.6)	12.5 (8.3,24.0)	0.84	0.54, 1.33	0.4545
NED/CR [IDS]	74	43 (58.1)	16.6 (8.3,22.1)	38	21 (55.3)	16.8 (9.6, NE)	1.17	0.70, 2.01	0.5531
NED/CR [Chemo]	40	21 (52.5)	22.1 (11.2, NE)	20	12 (60.0)	11.2 (3.0, NE)	0.79	0.39, 1.66	0.5191
PR	49	28 (57.1)	16.8 (11.0,25.7)	26	20 (76.9)	8.4 (2.8,16.6)	0.46	0.26, 0.83	0.0110*
Interaction p-value									0.1392
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	82 (54.7)	19.8 (12.5,24.0)	65	41 (63.1)	11.2 (5.8,22.1)	0.76	0.52, 1.11	0.1569
non-tBRCAm	105	62 (59.0)	14.8 (11.2,22.1)	67	43 (64.2)	16.4 (8.5,18.9)	0.93	0.63, 1.38	0.7009
Interaction p-value									0.4719
First line treatment outcome (eCRF)									
NED [PDS]	89	51 (57.3)	14.5 (11.1,22.1)	47	31 (66.0)	12.5 (8.2,22.1)	0.83	0.54, 1.31	0.4234
NED/CR [IDS]	74	43 (58.1)	16.6 (7.9,22.1)	32	17 (53.1)	13.9 (9.3, NE)	1.27	0.74, 2.30	0.3901
NED/CR [Chemo]	39	21 (53.8)	16.8 (5.8, NE)	18	10 (55.6)	16.6 (3.5, NE)	0.89	0.43, 1.98	0.7731
PR	50	28 (56.0)	22.0 (11.1,27.6)	34	26 (76.5)	13.8 (2.9,16.8)	0.50	0.29, 0.86	0.0121*
Interaction p-value									0.1214
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	79 (53.7)	20.0 (13.8,24.2)	67	41 (61.2)	11.3 (5.8,23.5)	0.76	0.52, 1.11	0.1556
non-tBRCAm	108	65 (60.2)	13.8 (11.1,22.1)	65	43 (66.2)	16.4 (8.5,18.7)	0.93	0.63, 1.38	0.7119
Interaction p-value									0.4576
Age group									
<65 years	185	105 (56.8)	18.0 (13.8,22.1)	98	61 (62.2)	13.9 (8.5,22.1)	0.82	0.60, 1.13	0.2152
>=65 years	70	39 (55.7)	11.3 (8.4,27.6)	34	23 (67.6)	13.9 (8.5,18.9)	0.83	0.50, 1.42	0.4946
Interaction p-value									0.9473

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.11 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Fatigue (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	100 (54.9)	17.0 (11.3,22.1)	90	57 (63.3)	13.9 (11.1,19.9)	0.84	0.61, 1.17	0.2933
IV	73	44 (60.3)	19.3 (11.2,24.2)	42	27 (64.3)	13.9 (5.7,16.8)	0.78	0.49, 1.28	0.3272
Interaction p-value									0.8227
Region									
Europe	245	141 (57.6)	16.8 (12.1,21.7)	126	80 (63.5)	13.8 (8.8,17.5)	0.83	0.63, 1.10	0.1852
Japan	10	3 (30.0)	NE (NE, NE)	6	4 (66.7)	20.2 (8.5, NE)	0.49	0.10, 2.22	0.3450
Interaction p-value									0.4926
ECOG performance status at Baseline									
(0) Normal activity	190	113 (59.5)	15.2 (11.3,19.7)	100	65 (65.0)	13.9 (8.5,19.4)	0.91	0.68, 1.25	0.5650
(1) Restricted activity	61	28 (45.9)	25.7 (14.5, NE)	31	19 (61.3)	12.3 (8.5,24.0)	0.56	0.31, 1.02	0.0576
Interaction p-value									0.1497
Baseline CA-125 value									
<=ULN	228	129 (56.6)	17.0 (12.5,22.1)	118	74 (62.7)	14.0 (8.8,18.7)	0.84	0.63, 1.12	0.2328
>ULN	27	15 (55.6)	16.6 (5.6, NE)	14	10 (71.4)	11.1 (2.8,19.4)	0.69	0.31, 1.58	0.3637
Interaction p-value									0.6448
Histological grade									
High grade	255	144 (56.5)	17.0 (12.5,22.0)	132	84 (63.6)	13.9 (9.6,17.5)	0.82	0.63, 1.08	0.1557
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	95 (57.2)	16.6 (11.2,21.7)	80	48 (60.0)	13.9 (8.8,24.0)	0.99	0.70, 1.41	0.9432
Residue	79	43 (54.4)	21.9 (11.3,27.6)	44	29 (65.9)	16.6 (5.7,19.4)	0.67	0.42, 1.09	0.1057
Interaction p-value									0.2022

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.11 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Fatigue (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	82 (56.2)	17.0 (11.3,25.0)	79	50 (63.3)	11.3 (8.2,18.7)	0.76	0.54, 1.09	0.1362
Interval	99	56 (56.6)	16.8 (11.1,22.1)	45	27 (60.0)	16.8 (11.1,28.0)	1.06	0.68, 1.71	0.7954
Interaction p-value									0.2593
Myriad tumour BRCA mutation status									
tBRCAm	158	85 (53.8)	20.0 (13.8,25.0)	77	44 (57.1)	15.3 (8.5,25.8)	0.85	0.59, 1.23	0.3808
Non-tBRCAm	97	59 (60.8)	13.7 (8.5,19.7)	55	40 (72.7)	13.9 (8.5,16.6)	0.82	0.55, 1.23	0.3333
Interaction p-value									0.8976
Status somatic BRCA mutations									
sBRCAm	22	8 (36.4)	NE (NE, NE)	7	3 (42.9)	NE (NE, NE)	0.64	0.18, 2.93	0.5256
gBRCAm	66	39 (59.1)	14.1 (8.5,22.4)	31	22 (71.0)	11.3 (5.7,23.5)	0.78	0.47, 1.33	0.3545
Non-BRCAm	41	22 (53.7)	19.7 (5.6, NE)	22	19 (86.4)	11.1 (5.5,14.7)	0.52	0.28, 0.98	0.0434*
Interaction p-value									0.6290

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.12 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	24 (26.1)	NE (NE, NE)	48	17 (35.4)	NE (NE, NE)	0.59	0.32, 1.11	0.1007
NED/CR [IDS]	74	24 (32.4)	NE (NE, NE)	38	9 (23.7)	NE (NE, NE)	1.36	0.65, 3.09	0.4205
NED/CR [Chemo]	40	14 (35.0)	NE (NE, NE)	20	11 (55.0)	13.9 (5.7, NE)	0.63	0.28, 1.41	0.2517
PR	49	15 (30.6)	38.4 (22.3, NE)	26	11 (42.3)	19.2 (4.7, NE)	0.52	0.24, 1.15	0.1046
Interaction p-value									0.2519
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	50 (33.3)	38.4 (38.4, NE)	65	25 (38.5)	NE (NE, NE)	0.79	0.49, 1.30	0.3424
non-tBRCAm	105	27 (25.7)	NE (NE, NE)	67	23 (34.3)	NE (NE, NE)	0.61	0.35, 1.08	0.0872
Interaction p-value									0.4950
First line treatment outcome (eCRF)									
NED [PDS]	89	25 (28.1)	NE (NE, NE)	47	16 (34.0)	NE (NE, NE)	0.68	0.37, 1.30	0.2407
NED/CR [IDS]	74	24 (32.4)	NE (NE, NE)	32	7 (21.9)	NE (NE, NE)	1.49	0.68, 3.75	0.3352
NED/CR [Chemo]	39	10 (25.6)	NE (NE, NE)	18	10 (55.6)	13.3 (5.7, NE)	0.38	0.15, 0.92	0.0326*
PR	50	17 (34.0)	38.4 (22.3, NE)	34	15 (44.1)	19.4 (8.8, NE)	0.62	0.31, 1.27	0.1869
Interaction p-value									0.1401
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	50 (34.0)	38.4 (38.4, NE)	67	25 (37.3)	NE (NE, NE)	0.83	0.52, 1.36	0.4409
non-tBRCAm	108	27 (25.0)	NE (NE, NE)	65	23 (35.4)	NE (NE, NE)	0.58	0.33, 1.02	0.0563
Interaction p-value									0.3381
Age group									
<65 years	185	58 (31.4)	NE (NE, NE)	98	38 (38.8)	NE (NE, NE)	0.72	0.48, 1.10	0.1269
>=65 years	70	19 (27.1)	38.4 (38.4, NE)	34	10 (29.4)	NE (NE, NE)	0.72	0.34, 1.62	0.4114
Interaction p-value									0.9903

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.12 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	58 (31.9)	NE (NE, NE)	90	32 (35.6)	NE (NE, NE)	0.77	0.50, 1.20	0.2466
IV	73	19 (26.0)	38.4 (38.4, NE)	42	16 (38.1)	NE (NE, NE)	0.59	0.30, 1.16	0.1236
Interaction p-value									0.5027
Region									
Europe	245	74 (30.2)	38.4 (38.4, NE)	126	47 (37.3)	NE (NE, NE)	0.68	0.48, 0.99	0.0450*
Japan	10	3 (30.0)	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	2.31	0.30, 46.77	0.4406
Interaction p-value									0.2612
ECOG performance status at Baseline									
(0) Normal activity	190	58 (30.5)	38.4 (38.4, NE)	100	38 (38.0)	NE (NE, NE)	0.72	0.48, 1.09	0.1191
(1) Restricted activity	61	17 (27.9)	NE (NE, NE)	31	10 (32.3)	NE (NE, NE)	0.67	0.31, 1.51	0.3186
Interaction p-value									0.8661
Baseline CA-125 value									
<=ULN	228	69 (30.3)	38.4 (38.4, NE)	118	42 (35.6)	NE (NE, NE)	0.72	0.49, 1.07	0.1036
>ULN	27	8 (29.6)	NE (NE, NE)	14	6 (42.9)	21.2 (11.3, NE)	0.68	0.24, 2.07	0.4808
Interaction p-value									0.9153
Histological grade									
High grade	255	77 (30.2)	38.4 (38.4, NE)	132	48 (36.4)	NE (NE, NE)	0.72	0.50, 1.03	0.0746
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	50 (30.1)	NE (NE, NE)	80	23 (28.8)	NE (NE, NE)	0.94	0.58, 1.57	0.8038
Residue	79	24 (30.4)	38.4 (38.4, NE)	44	21 (47.7)	19.4 (11.3, NE)	0.53	0.30, 0.97	0.0399*
Interaction p-value									0.1497

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[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.12 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	40 (27.4)	NE (NE, NE)	79	32 (40.5)	NE (NE, NE)	0.54	0.34, 0.86	0.0107*
Interval	99	34 (34.3)	NE (NE, NE)	45	12 (26.7)	NE (NE, NE)	1.31	0.70, 2.64	0.4063
Interaction p-value									0.0264*
Myriad tumour BRCA mutation status									
tBRCAm	158	54 (34.2)	38.4 (38.4, NE)	77	31 (40.3)	NE (NE, NE)	0.72	0.47, 1.14	0.1617
Non-tBRCAm	97	23 (23.7)	NE (NE, NE)	55	17 (30.9)	NE (NE, NE)	0.67	0.36, 1.28	0.2187
Interaction p-value									0.8434
Status somatic BRCA mutations									
sBRCAm	22	7 (31.8)	38.4 (11.1, NE)	7	3 (42.9)	NE (NE, NE)	0.63	0.17, 2.95	0.5192
gBRCAm	66	22 (33.3)	NE (NE, NE)	31	9 (29.0)	NE (NE, NE)	1.11	0.53, 2.55	0.7828
Non-BRCAm	41	10 (24.4)	NE (NE, NE)	22	7 (31.8)	NE (NE, NE)	0.72	0.28, 1.98	0.5072
Interaction p-value									0.6861

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.13 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Nausea and vomiting (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	66 (71.7)	5.7 (3.0,11.1)	48	26 (54.2)	16.9 (9.7, NE)	1.75	1.12, 2.80	0.0125*
NED/CR [IDS]	74	54 (73.0)	5.6 (2.9, 8.7)	38	20 (52.6)	19.2 (11.1, NE)	2.05	1.25, 3.51	0.0042*
NED/CR [Chemo]	40	27 (67.5)	5.7 (3.1,13.8)	20	11 (55.0)	19.3 (8.3, NE)	1.87	0.95, 3.94	0.0694
PR	49	31 (63.3)	11.1 (3.1,16.9)	26	13 (50.0)	19.9 (9.7, NE)	1.53	0.82, 3.02	0.1899
Interaction p-value									0.9149
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	104 (69.3)	5.8 (3.5,11.0)	65	34 (52.3)	19.7 (11.4,27.0)	1.90	1.31, 2.84	0.0006*
non-tBRCAm	105	74 (70.5)	5.7 (5.4,11.1)	67	36 (53.7)	17.4 (9.7,25.0)	1.72	1.16, 2.59	0.0062*
Interaction p-value									0.7212
First line treatment outcome (eCRF)									
NED [PDS]	89	65 (73.0)	5.6 (2.9,11.0)	47	25 (53.2)	17.4 (9.7, NE)	1.90	1.21, 3.06	0.0047*
NED/CR [IDS]	74	53 (71.6)	5.6 (2.9, 8.7)	32	19 (59.4)	16.2 (9.6,24.4)	1.74	1.05, 3.01	0.0322*
NED/CR [Chemo]	39	25 (64.1)	7.1 (4.5,16.8)	18	9 (50.0)	19.3 (11.1, NE)	1.84	0.89, 4.16	0.1034
PR	50	32 (64.0)	11.0 (3.0,19.4)	34	17 (50.0)	19.9 (9.7, NE)	1.57	0.88, 2.89	0.1256
Interaction p-value									0.9678
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	102 (69.4)	5.8 (3.4,11.0)	67	34 (50.7)	20.7 (14.3, NE)	1.95	1.34, 2.91	0.0004*
non-tBRCAm	108	76 (70.4)	5.7 (5.5,11.1)	65	36 (55.4)	16.6 (9.7,24.4)	1.67	1.13, 2.51	0.0093*
Interaction p-value									0.5883
Age group									
<65 years	185	133 (71.9)	5.7 (3.2, 8.4)	98	54 (55.1)	19.2 (11.2,24.4)	1.81	1.32, 2.50	0.0002*
>=65 years	70	45 (64.3)	11.1 (5.6,14.1)	34	16 (47.1)	19.9 (11.3, NE)	1.83	1.06, 3.34	0.0303*
Interaction p-value									0.9661

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[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.13 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Nausea and vomiting (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	125 (68.7)	6.2 (5.6,11.1)	90	46 (51.1)	19.7 (12.7,25.0)	1.87	1.35, 2.65	0.0002*
IV	73	53 (72.6)	5.6 (3.0,11.1)	42	24 (57.1)	16.6 (8.3, NE)	1.69	1.05, 2.78	0.0294*
Interaction p-value									0.7267
Region									
Europe	245	171 (69.8)	5.8 (5.5, 8.7)	126	66 (52.4)	18.7 (11.4,23.5)	1.80	1.36, 2.41	<0.0001*
Japan	10	7 (70.0)	5.7 (2.8, NE)	6	4 (66.7)	23.6 (8.1, NE)	1.83	0.55, 7.00	0.3252
Interaction p-value									0.9780
ECOG performance status at Baseline									
(0) Normal activity	190	140 (73.7)	5.7 (4.2, 8.3)	100	55 (55.0)	18.7 (11.3,25.0)	2.02	1.49, 2.79	<0.0001*
(1) Restricted activity	61	36 (59.0)	10.1 (4.5,25.7)	31	15 (48.4)	19.7 (11.1, NE)	1.33	0.74, 2.51	0.3406
Interaction p-value									0.2385
Baseline CA-125 value									
<=ULN	228	161 (70.6)	5.7 (5.5, 8.6)	118	65 (55.1)	18.7 (12.3,22.3)	1.74	1.31, 2.34	<0.0001*
>ULN	27	17 (63.0)	11.1 (3.0,20.0)	14	5 (35.7)	NE (NE, NE)	2.55	1.01, 7.76	0.0482*
Interaction p-value									0.4614
Histological grade									
High grade	255	178 (69.8)	5.8 (5.6, 8.7)	132	70 (53.0)	19.2 (12.7,23.5)	1.80	1.37, 2.39	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	121 (72.9)	5.6 (3.1, 8.4)	80	44 (55.0)	17.4 (11.1,22.1)	1.85	1.32, 2.65	0.0003*
Residue	79	52 (65.8)	8.3 (5.6,12.1)	44	23 (52.3)	18.7 (11.1, NE)	1.62	1.005, 2.70	0.0478*
Interaction p-value									0.6613

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.13 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Nausea and vomiting (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	105 (71.9)	5.8 (4.5,11.1)	79	41 (51.9)	18.7 (11.2, NE)	1.82	1.28, 2.64	0.0008*
Interval	99	68 (68.7)	5.7 (3.1,11.1)	45	26 (57.8)	16.2 (11.1,24.4)	1.72	1.11, 2.75	0.0152*
Interaction p-value									0.8490
Myriad tumour BRCA mutation status									
tBRCAm	158	109 (69.0)	5.8 (3.5,11.0)	77	37 (48.1)	22.1 (16.6, NE)	2.05	1.43, 3.02	<0.0001*
Non-tBRCAm	97	69 (71.1)	5.7 (5.4,11.1)	55	33 (60.0)	12.7 (8.5,19.9)	1.52	1.01, 2.33	0.0424*
Interaction p-value									0.2939
Status somatic BRCA mutations									
sBRCAm	22	11 (50.0)	13.8 (2.8, NE)	7	4 (57.1)	22.6 (2.8, NE)	1.02	0.35, 3.69	0.9713
gBRCAm	66	48 (72.7)	3.8 (2.9, 6.2)	31	18 (58.1)	19.2 (11.3,27.0)	1.90	1.13, 3.36	0.0156*
Non-BRCAm	41	33 (80.5)	5.6 (2.8, 8.3)	22	14 (63.6)	12.3 (8.1, NE)	1.91	1.04, 3.70	0.0352*
Interaction p-value									0.6275

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.14 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Pain (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	66 (71.7)	8.3 (5.6,11.2)	48	33 (68.8)	3.1 (2.9,11.5)	0.86	0.57, 1.33	0.4991
NED/CR [IDS]	74	58 (78.4)	5.6 (2.9, 5.9)	38	28 (73.7)	5.6 (2.9, 7.6)	1.12	0.72, 1.78	0.6241
NED/CR [Chemo]	40	29 (72.5)	5.6 (3.0,11.2)	20	13 (65.0)	7.3 (3.0, NE)	1.34	0.71, 2.67	0.3711
PR	49	30 (61.2)	8.3 (5.5,19.5)	26	21 (80.8)	5.6 (2.8,12.9)	0.55	0.31, 0.97	0.0382*
Interaction p-value									0.1467
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	105 (70.0)	5.8 (4.2, 8.4)	65	45 (69.2)	6.0 (4.9,13.8)	1.07	0.76, 1.53	0.7137
non-tBRCAm	105	78 (74.3)	5.9 (5.6, 8.4)	67	50 (74.6)	3.0 (2.9, 6.0)	0.77	0.55, 1.11	0.1652
Interaction p-value									0.2083
First line treatment outcome (eCRF)									
NED [PDS]	89	66 (74.2)	8.1 (5.3,11.1)	47	33 (70.2)	3.0 (2.9,11.2)	0.90	0.60, 1.38	0.6175
NED/CR [IDS]	74	59 (79.7)	5.5 (2.8, 5.9)	32	24 (75.0)	5.7 (2.9, 8.1)	1.23	0.77, 2.01	0.3920
NED/CR [Chemo]	39	25 (64.1)	8.5 (3.0,15.2)	18	11 (61.1)	8.7 (3.5, NE)	1.05	0.53, 2.22	0.8981
PR	50	32 (64.0)	8.3 (5.5,18.7)	34	26 (76.5)	5.6 (2.9,12.9)	0.65	0.39, 1.10	0.1050
Interaction p-value									0.3445
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	102 (69.4)	5.8 (4.2, 8.4)	67	46 (68.7)	5.9 (4.9,13.8)	1.05	0.74, 1.50	0.7960
non-tBRCAm	108	81 (75.0)	5.9 (5.6, 8.4)	65	49 (75.4)	3.0 (2.9, 8.1)	0.79	0.55, 1.13	0.1890
Interaction p-value									0.2586
Age group									
<65 years	185	138 (74.6)	5.8 (4.9, 8.3)	98	70 (71.4)	5.6 (3.0, 8.7)	0.97	0.73, 1.31	0.8627
>=65 years	70	45 (64.3)	5.8 (5.6,11.1)	34	25 (73.5)	5.6 (2.9,11.1)	0.75	0.47, 1.25	0.2664
Interaction p-value									0.3795

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.14 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Pain (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	127 (69.8)	7.8 (5.6, 8.5)	90	67 (74.4)	5.6 (3.0, 7.6)	0.81	0.60, 1.09	0.1571
IV	73	56 (76.7)	5.6 (3.0, 8.3)	42	28 (66.7)	5.6 (3.0,13.9)	1.23	0.79, 1.97	0.3571
Interaction p-value									0.1194
Region									
Europe	245	179 (73.1)	5.8 (5.6, 8.3)	126	91 (72.2)	5.6 (3.0, 7.6)	0.93	0.72, 1.20	0.5599
Japan	10	4 (40.0)	NE (NE, NE)	6	4 (66.7)	13.5 (2.8, NE)	0.51	0.12, 2.16	0.3469
Interaction p-value									0.4102
ECOG performance status at Baseline									
(0) Normal activity	190	140 (73.7)	5.7 (5.6, 8.3)	100	73 (73.0)	5.6 (3.0, 7.6)	0.94	0.71, 1.26	0.6922
(1) Restricted activity	61	40 (65.6)	8.3 (3.0,14.5)	31	22 (71.0)	5.6 (3.0,16.9)	0.85	0.51, 1.45	0.5429
Interaction p-value									0.7276
Baseline CA-125 value									
<=ULN	228	166 (72.8)	6.2 (5.6, 8.4)	118	86 (72.9)	5.6 (3.0, 8.1)	0.92	0.71, 1.20	0.5313
>ULN	27	17 (63.0)	5.6 (3.0, NE)	14	9 (64.3)	6.6 (2.8, NE)	0.85	0.39, 2.00	0.6954
Interaction p-value									0.8553
Histological grade									
High grade	255	183 (71.8)	5.8 (5.6, 8.3)	132	95 (72.0)	5.6 (3.0, 8.1)	0.91	0.71, 1.17	0.4717
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	126 (75.9)	5.7 (4.2, 8.3)	80	58 (72.5)	5.5 (3.0, 7.6)	0.99	0.73, 1.36	0.9652
Residue	79	50 (63.3)	8.5 (5.7,15.2)	44	30 (68.2)	6.0 (3.0,11.2)	0.78	0.50, 1.23	0.2779
Interaction p-value									0.3806

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.14 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Symptom scale: Pain (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	102 (69.9)	8.4 (5.7,11.2)	79	53 (67.1)	5.7 (3.0,11.1)	0.90	0.65, 1.27	0.5516
Interval	99	74 (74.7)	5.6 (3.2, 6.3)	45	35 (77.8)	5.6 (2.9, 8.1)	0.94	0.63, 1.42	0.7522
Interaction p-value									0.8914
Myriad tumour BRCA mutation status									
tBRCAm	158	111 (70.3)	6.2 (4.9, 8.4)	77	50 (64.9)	6.0 (5.2,13.8)	1.11	0.80, 1.57	0.5234
Non-tBRCAm	97	72 (74.2)	5.8 (5.6, 8.3)	55	45 (81.8)	2.9 (2.9, 5.8)	0.68	0.47, 0.998	0.0488*
Interaction p-value									0.0557
Status somatic BRCA mutations									
sBRCAm	22	14 (63.6)	7.9 (2.9,19.4)	7	3 (42.9)	NE (NE, NE)	1.63	0.53, 7.09	0.4207
gBRCAm	66	48 (72.7)	4.9 (3.0,11.1)	31	21 (67.7)	11.5 (5.8,22.2)	1.26	0.76, 2.15	0.3716
Non-BRCAm	41	28 (68.3)	5.9 (4.9,14.8)	22	20 (90.9)	2.8 (2.8, 2.9)	0.39	0.22, 0.70	0.0021*
Interaction p-value									0.0062*

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.15 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	57 (62.0)	11.0 (5.8,16.6)	48	36 (75.0)	5.6 (3.0, 9.2)	0.60	0.40, 0.92	0.0199*
NED/CR [IDS]	74	41 (55.4)	14.0 (7.9, NE)	38	26 (68.4)	8.5 (3.1,21.2)	0.72	0.44, 1.18	0.1886
NED/CR [Chemo]	40	29 (72.5)	11.3 (5.7,21.9)	20	15 (75.0)	7.8 (2.9,22.0)	0.89	0.48, 1.70	0.7120
PR	49	32 (65.3)	11.3 (5.8,22.3)	26	14 (53.8)	11.1 (5.6, NE)	1.05	0.57, 2.04	0.8717
Interaction p-value									0.4678
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	91 (60.7)	11.3 (8.4,16.6)	65	43 (66.2)	10.3 (5.6,13.9)	0.85	0.60, 1.23	0.3873
non-tBRCAm	105	68 (64.8)	11.2 (8.3,16.6)	67	48 (71.6)	5.7 (3.0,11.1)	0.67	0.46, 0.97	0.0351*
Interaction p-value									0.3588
First line treatment outcome (eCRF)									
NED [PDS]	89	53 (59.6)	11.0 (5.8,23.3)	47	35 (74.5)	5.6 (3.0, 8.5)	0.57	0.37, 0.88	0.0113*
NED/CR [IDS]	74	41 (55.4)	13.9 (8.3, NE)	32	22 (68.8)	8.4 (3.1,21.2)	0.69	0.42, 1.19	0.1766
NED/CR [Chemo]	39	27 (69.2)	11.3 (5.6,21.9)	18	13 (72.2)	10.3 (3.0,11.2)	0.81	0.42, 1.62	0.5310
PR	50	35 (70.0)	11.0 (5.6,17.4)	34	20 (58.8)	11.3 (5.6,22.3)	1.19	0.70, 2.10	0.5280
Interaction p-value									0.2071
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	88 (59.9)	13.4 (8.4,19.8)	67	44 (65.7)	10.3 (5.6,14.1)	0.83	0.58, 1.21	0.3282
non-tBRCAm	108	71 (65.7)	11.2 (8.3,14.0)	65	47 (72.3)	5.6 (2.9,11.1)	0.68	0.47, 0.99	0.0430*
Interaction p-value									0.4370
Age group									
<65 years	185	117 (63.2)	11.3 (8.4,15.2)	98	69 (70.4)	5.6 (3.0,10.3)	0.71	0.53, 0.96	0.0285*
>=65 years	70	42 (60.0)	11.3 (5.8,19.3)	34	22 (64.7)	11.1 (8.3,17.0)	0.87	0.53, 1.49	0.6127
Interaction p-value									0.4997

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.2.3.15 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	117 (64.3)	11.3 (8.3,15.2)	90	61 (67.8)	8.5 (5.6,12.7)	0.85	0.62, 1.16	0.2989
IV	73	42 (57.5)	11.2 (8.3,22.3)	42	30 (71.4)	8.3 (2.8,11.2)	0.56	0.35, 0.91	0.0193*
Interaction p-value									0.1579
Region									
Europe	245	156 (63.7)	11.1 (8.4,13.9)	126	86 (68.3)	8.3 (5.6,11.1)	0.77	0.60, 1.01	0.0589
Japan	10	3 (30.0)	NE (NE, NE)	6	5 (83.3)	22.1 (2.8, NE)	0.30	0.06, 1.22	0.0928
Interaction p-value									0.1942
ECOG performance status at Baseline									
(0) Normal activity	190	119 (62.6)	11.4 (8.4,16.6)	100	70 (70.0)	7.4 (5.2,11.1)	0.74	0.55, 1.001	0.0509
(1) Restricted activity	61	36 (59.0)	11.1 (5.8,25.7)	31	21 (67.7)	11.1 (3.2,16.9)	0.73	0.43, 1.28	0.2691
Interaction p-value									0.9756
Baseline CA-125 value									
<=ULN	228	143 (62.7)	11.4 (8.4,14.1)	118	81 (68.6)	8.3 (5.6,11.2)	0.76	0.58, 1.00002	0.0500
>ULN	27	16 (59.3)	11.0 (5.7,20.0)	14	10 (71.4)	8.3 (2.9,21.2)	0.70	0.32, 1.61	0.3906
Interaction p-value									0.8612
Histological grade									
High grade	255	159 (62.4)	11.3 (8.4,14.0)	132	91 (68.9)	8.3 (5.6,11.1)	0.75	0.58, 0.98	0.0330*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	97 (58.4)	11.3 (8.4,17.3)	80	58 (72.5)	5.7 (3.0, 8.5)	0.62	0.45, 0.86	0.0045*
Residue	79	58 (73.4)	11.1 (5.7,14.0)	44	29 (65.9)	11.1 (3.5,17.0)	1.07	0.69, 1.69	0.7705
Interaction p-value									0.0490*

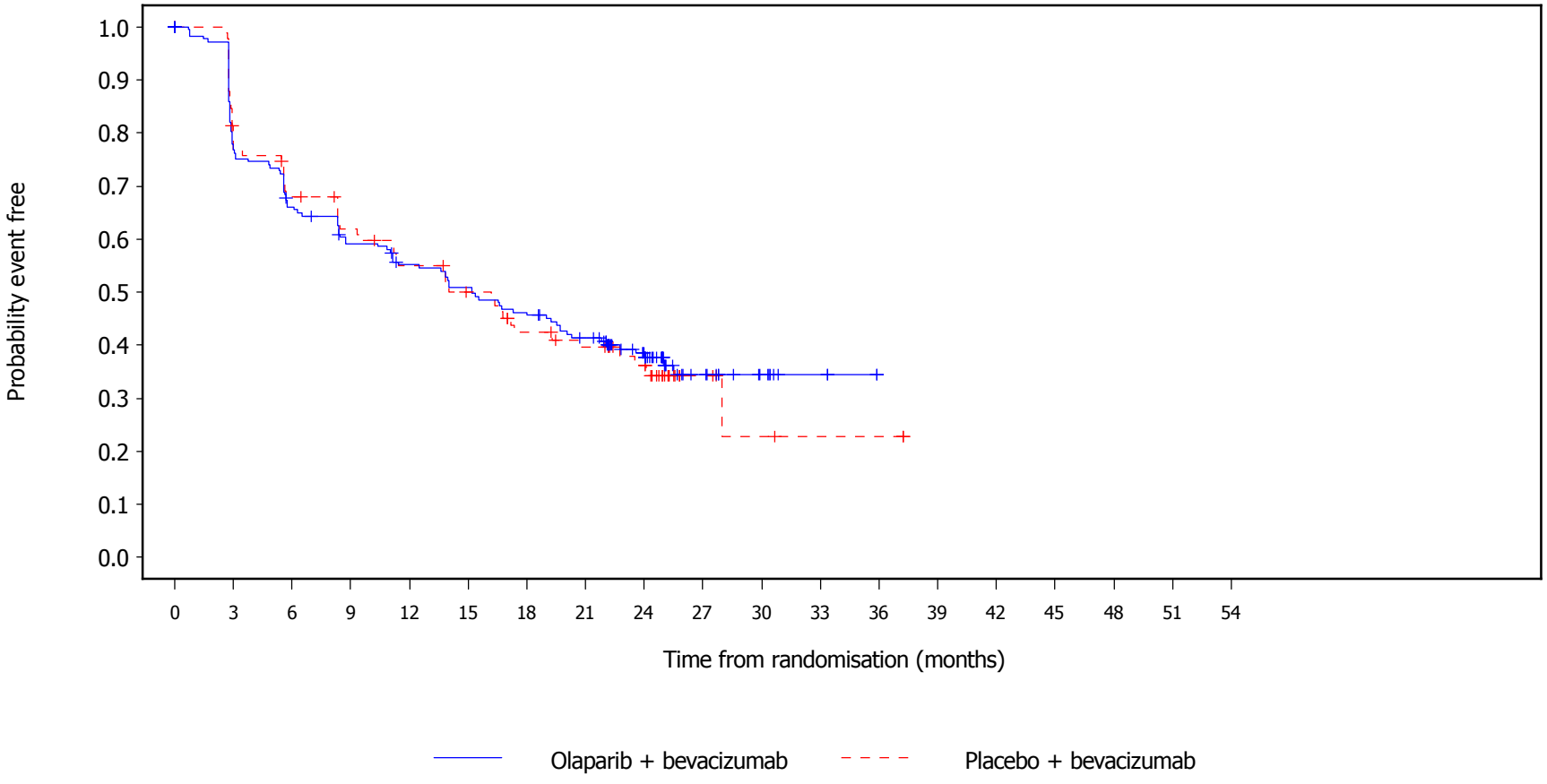
Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubpr3.sas ettesubpr3aao 24MAR2022:14:14 kvbv306

Table 2.2.3.15 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	96 (65.8)	11.0 (8.3,13.8)	79	56 (70.9)	5.7 (3.0,10.3)	0.74	0.53, 1.03	0.0748
Interval	99	59 (59.6)	13.8 (8.3,18.6)	45	31 (68.9)	11.1 (5.6,16.9)	0.77	0.50, 1.20	0.2473
Interaction p-value									0.8742
Myriad tumour BRCA mutation status									
tBRCAm	158	95 (60.1)	11.3 (8.4,15.9)	77	50 (64.9)	8.5 (5.2,11.3)	0.79	0.56, 1.12	0.1840
Non-tBRCAm	97	64 (66.0)	11.2 (5.8,17.4)	55	41 (74.5)	8.3 (3.2,11.1)	0.71	0.48, 1.06	0.0909
Interaction p-value									0.6831
Status somatic BRCA mutations									
sBRCAm	22	15 (68.2)	8.5 (3.0,14.1)	7	5 (71.4)	2.8 (2.8, NE)	0.46	0.18, 1.42	0.1613
gBRCAm	66	43 (65.2)	8.4 (5.8,14.1)	31	20 (64.5)	13.9 (5.6,22.3)	1.09	0.65, 1.89	0.7512
Non-BRCAm	41	26 (63.4)	13.8 (8.5,25.7)	22	17 (77.3)	8.3 (2.8,12.7)	0.61	0.33, 1.15	0.1225
Interaction p-value									0.2111

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubpr3.sas ettesubpr3aao 24MAR2022:14:14 kvbv306

Figure 2.2.4.1 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status (MID = 15) time to clinically meaningful deterioration for Age group=<65 years
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

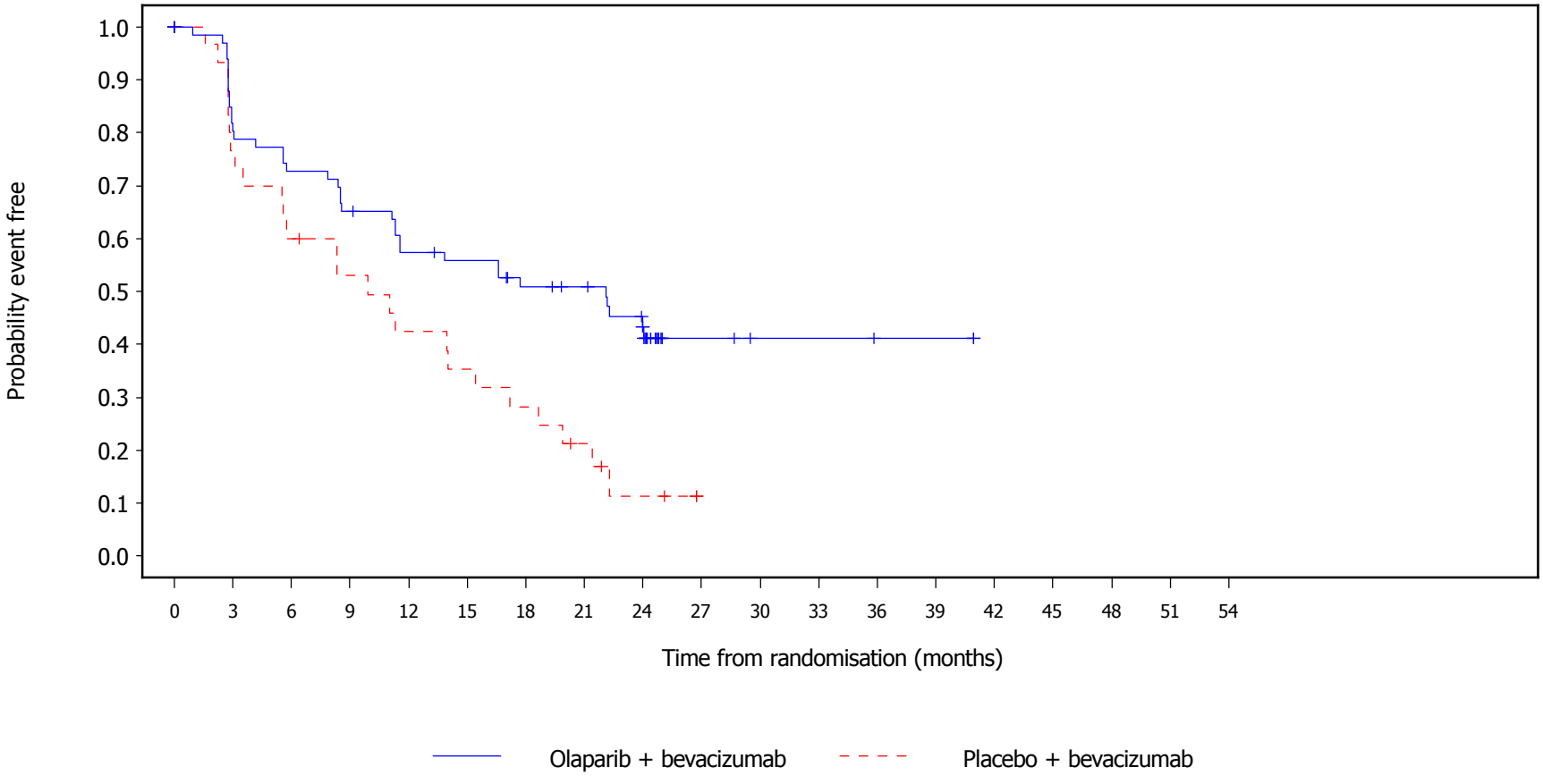


Number of patients at risk:

185	137	116	102	93	86	78	67	45	16	8	3	0	0	0	0	0	0	Olaparib + bevacizumab
98	72	60	53	46	40	32	28	21	5	2	1	1	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.2 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status (MID = 15) time to clinically meaningful deterioration for Age group=>=65 years
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

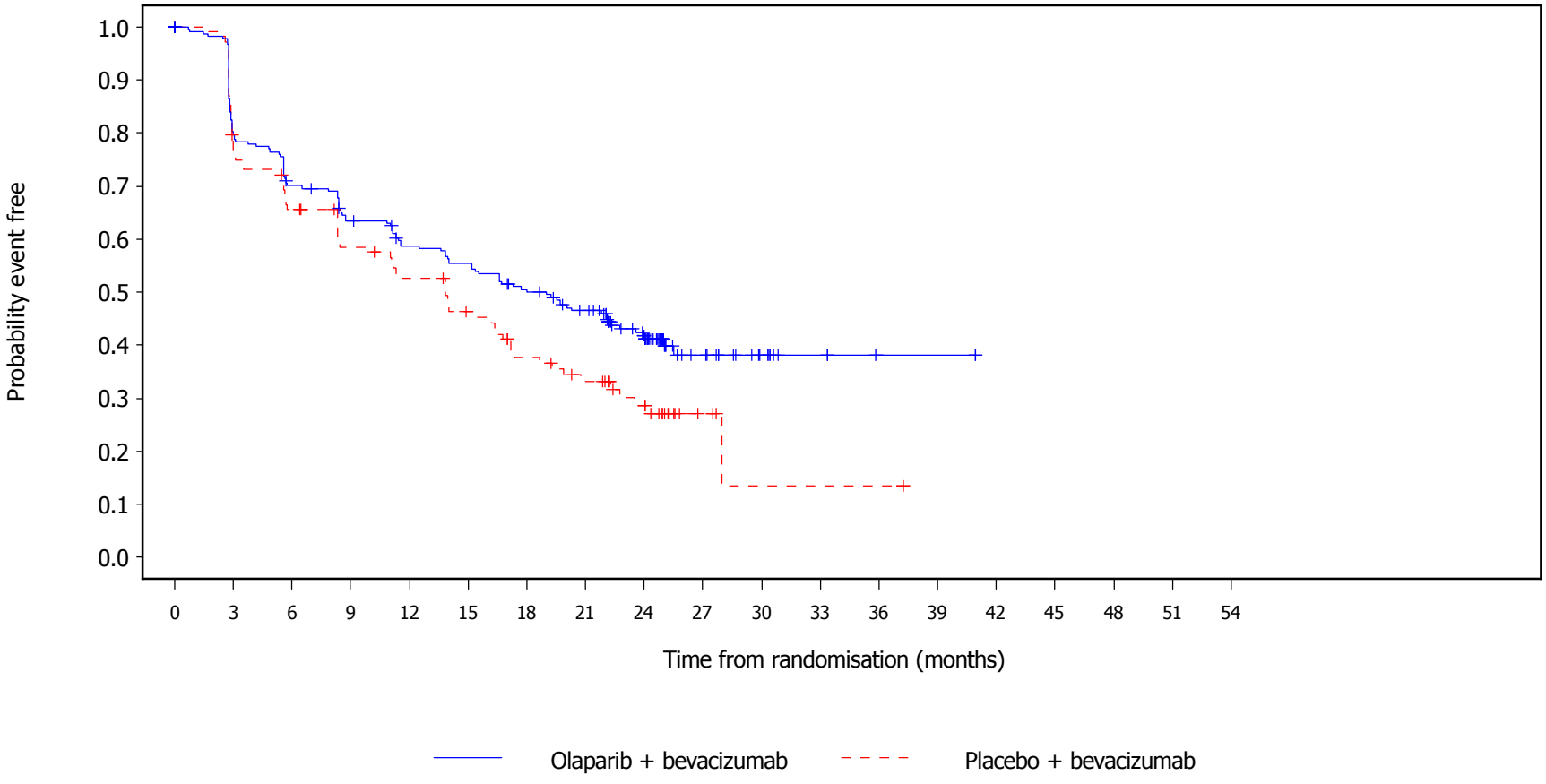


Number of patients at risk:

70	54	48	43	37	35	30	28	20	4	2	2	1	1	0	0	0	0	0	Olaparib + bevacizumab
34	23	18	15	12	10	8	5	2	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.3 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status (MID = 15) time to clinically meaningful deterioration for Baseline CA-125 value=<=ULN
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

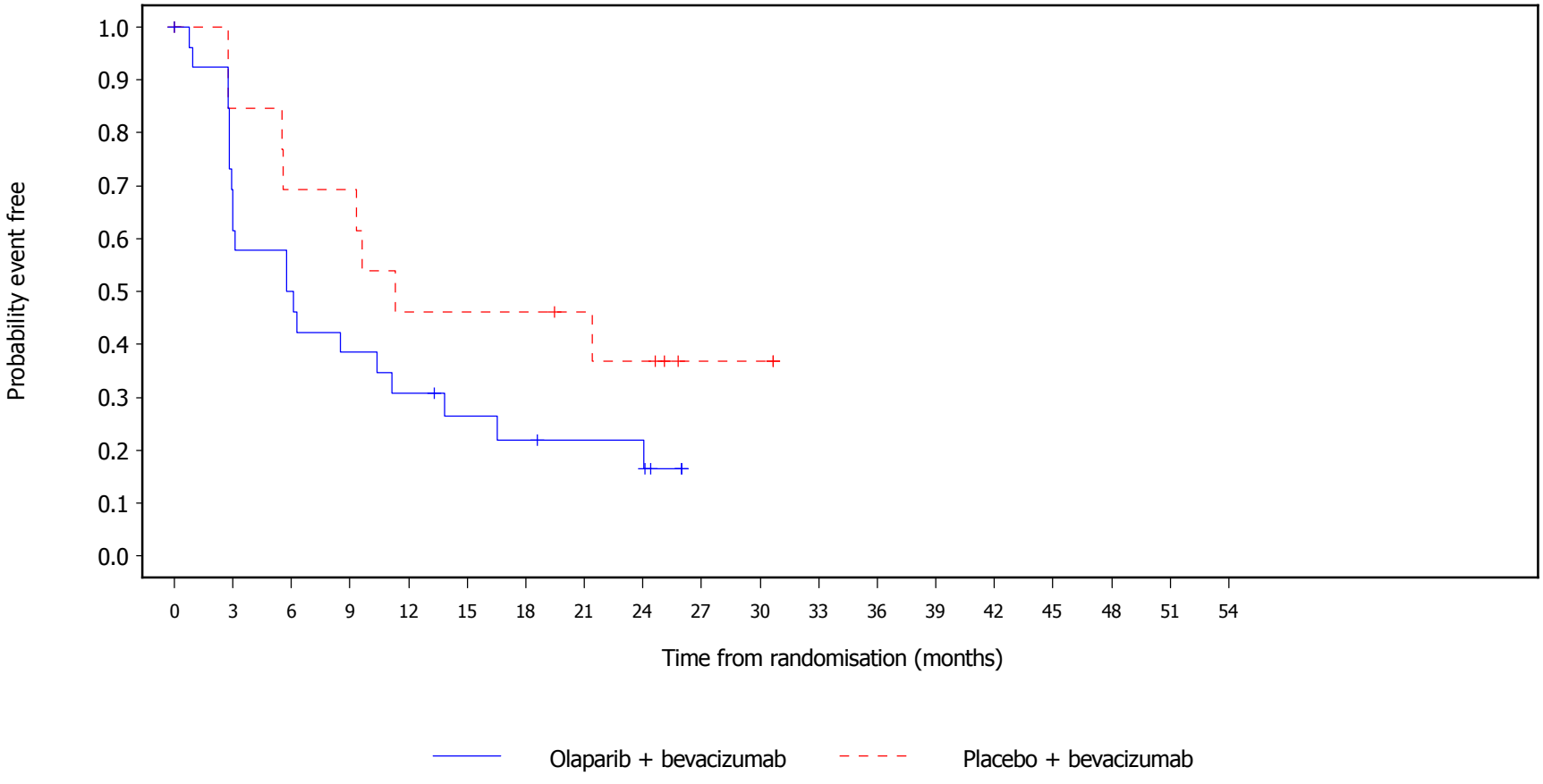


Number of patients at risk:

228	174	151	135	122	115	103	91	61	20	10	5	1	1	0	0	0	0	0	Olaparib + bevacizumab
118	84	69	59	52	44	34	28	19	4	1	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.4 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status (MID = 15) time to clinically meaningful deterioration for Baseline CA-125 value=>ULN
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

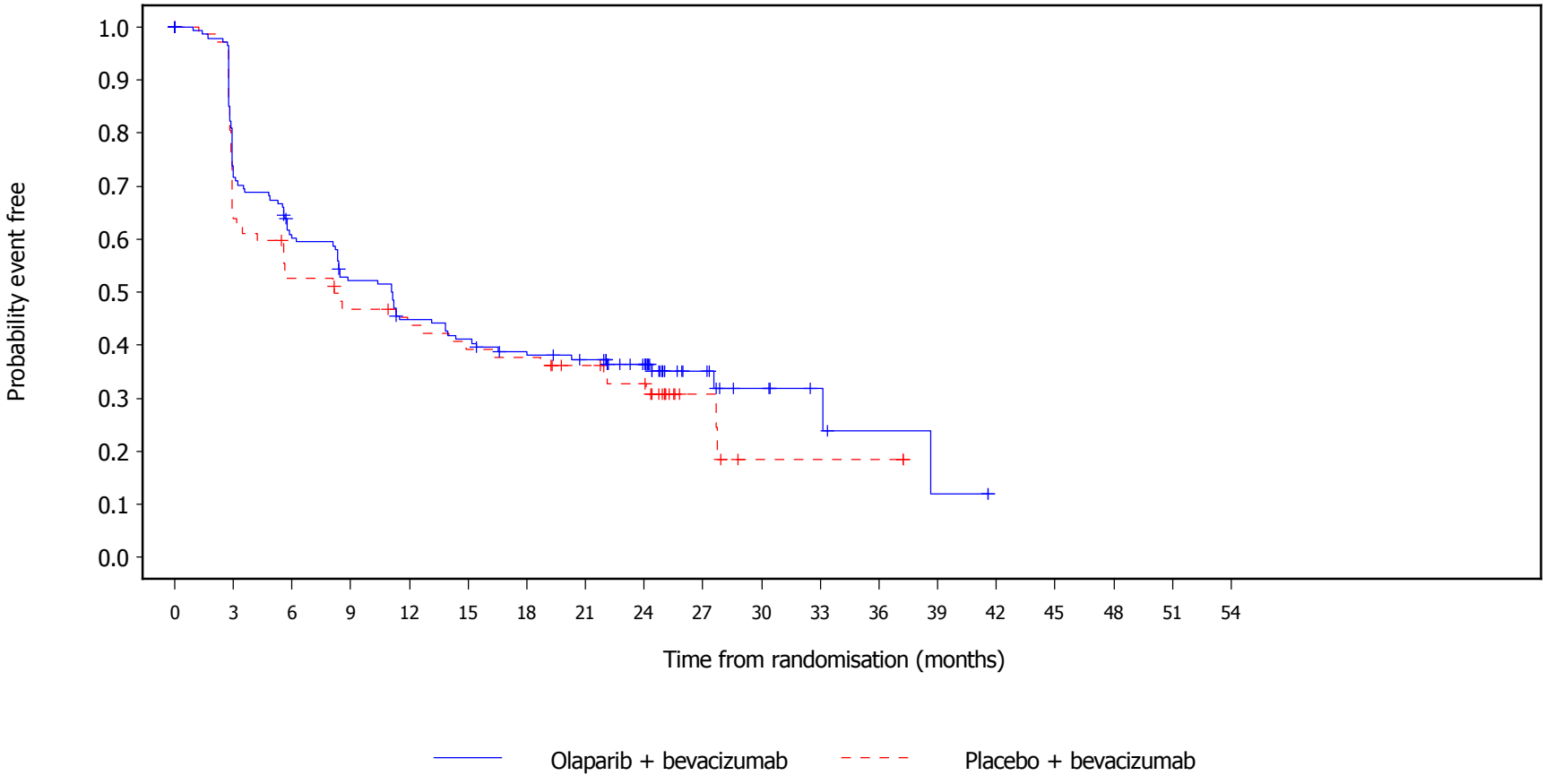


Number of patients at risk:

27	17	13	10	8	6	5	4	4	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
14	11	9	9	6	6	6	5	4	1	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.5 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Role (MID = 15) time to clinically meaningful deterioration for Timing of cytoreductive surgery=Upfront
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

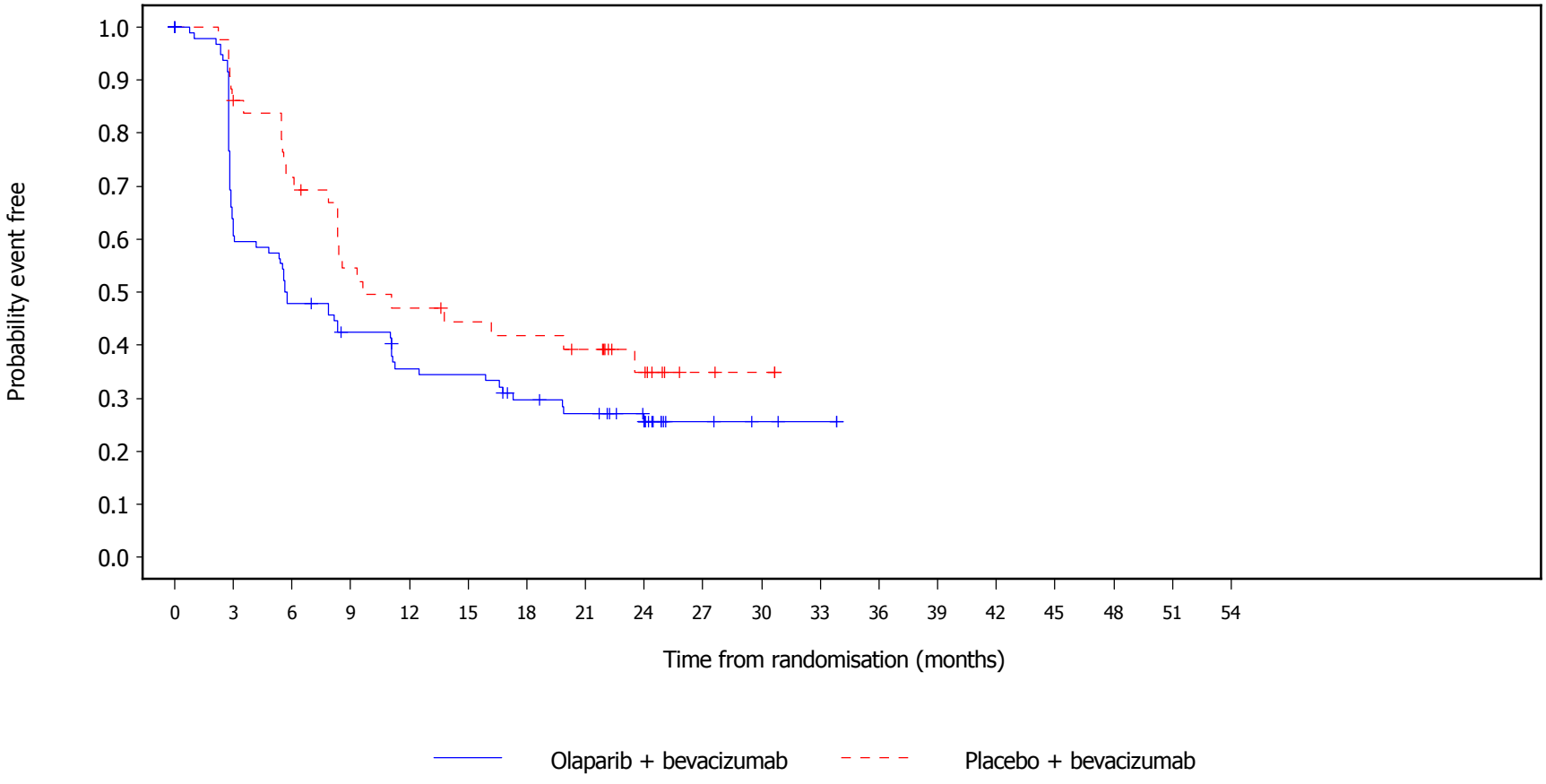


Number of patients at risk:

146	102	83	71	60	55	50	46	37	13	7	4	2	1	0	0	0	0	0	Olaparib + bevacizumab
79	47	37	32	29	26	25	21	18	5	1	1	1	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.6 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Role (MID = 15) time to clinically meaningful deterioration for Timing of cytoreductive surgery=Interval
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

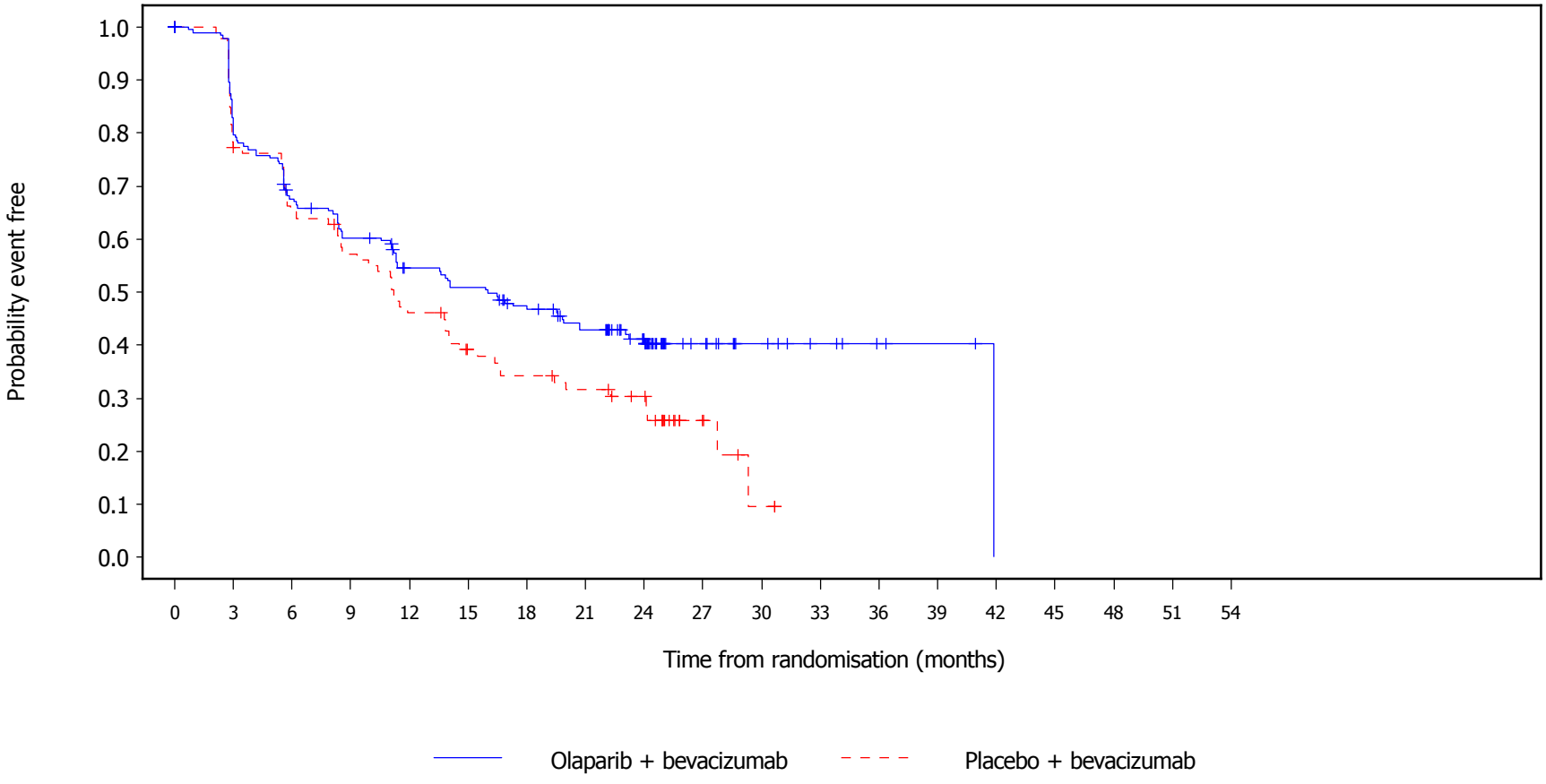


Number of patients at risk:

99	58	45	38	31	30	24	21	14	4	2	1	0	0	0	0	0	0	Olaparib + bevacizumab
45	37	30	22	19	17	16	14	8	2	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.7 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Social (MID = 15) time to clinically meaningful deterioration for ECOG performance status at Baseline=(0) Normal activity
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

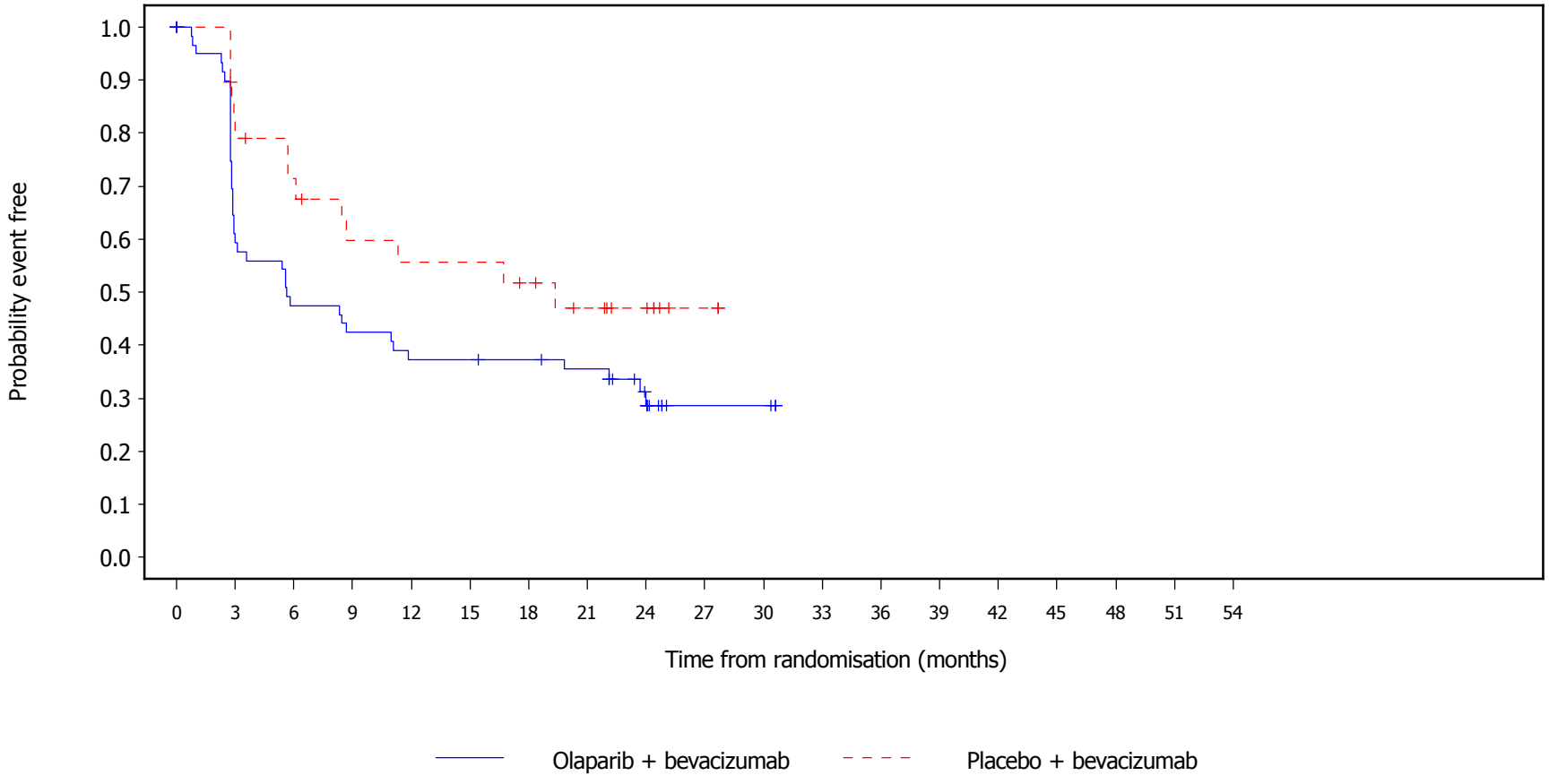


Number of patients at risk:

190	147	121	107	92	86	76	65	46	17	10	6	3	2	0	0	0	0	0	Olaparib + bevacizumab
100	71	59	51	41	32	28	25	21	5	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.8 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Social (MID = 15) time to clinically meaningful deterioration for ECOG performance status at Baseline=(1) Restricted activity
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

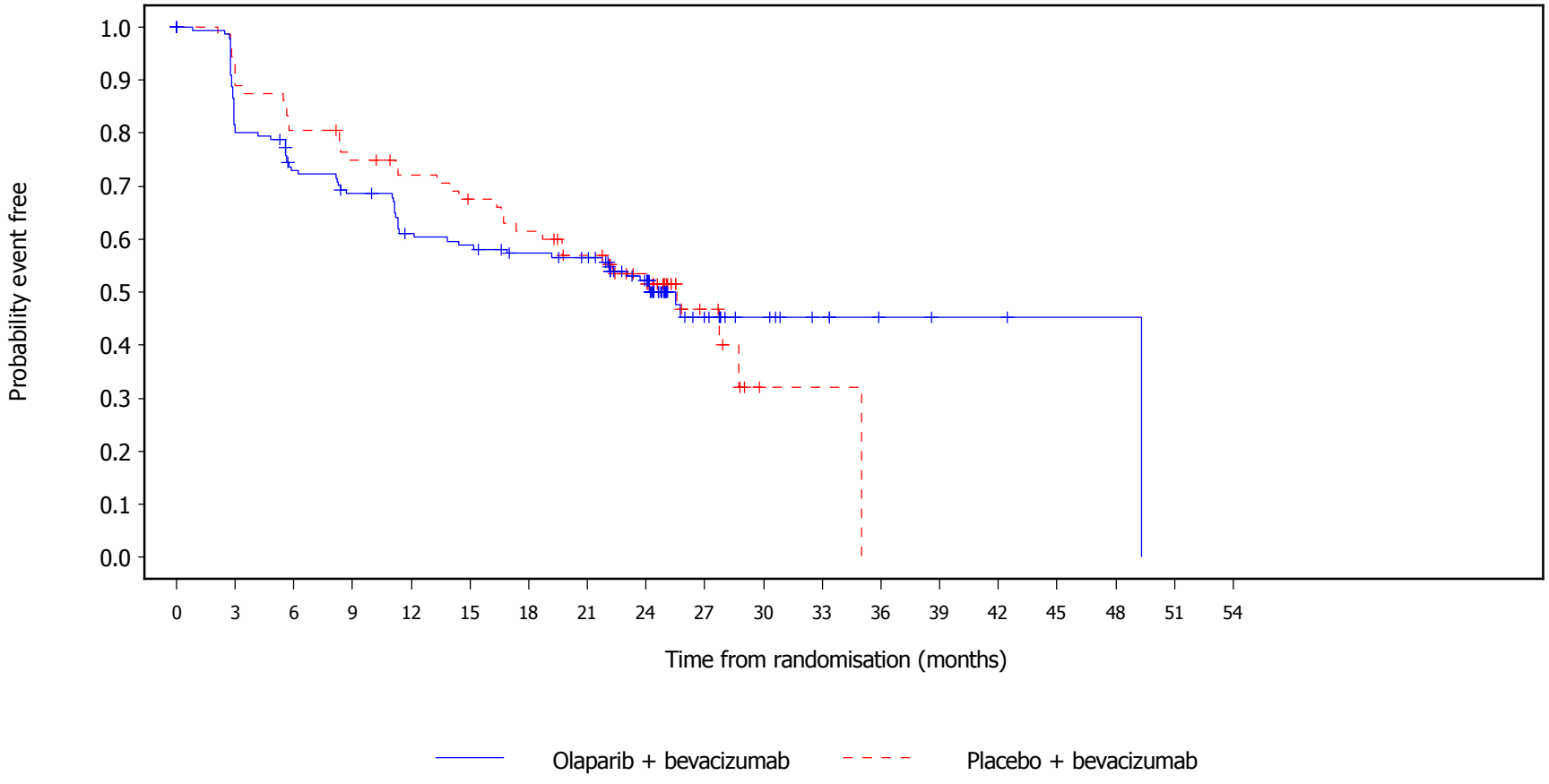


Number of patients at risk:

61	36	28	25	22	22	21	19	11	2	2	0	0	0	0	0	0	0	Olaparib + bevacizumab
31	23	19	15	14	14	12	9	6	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.9 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 15) time to clinically meaningful deterioration for Timing of cytoreductive surgery=Upfront
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

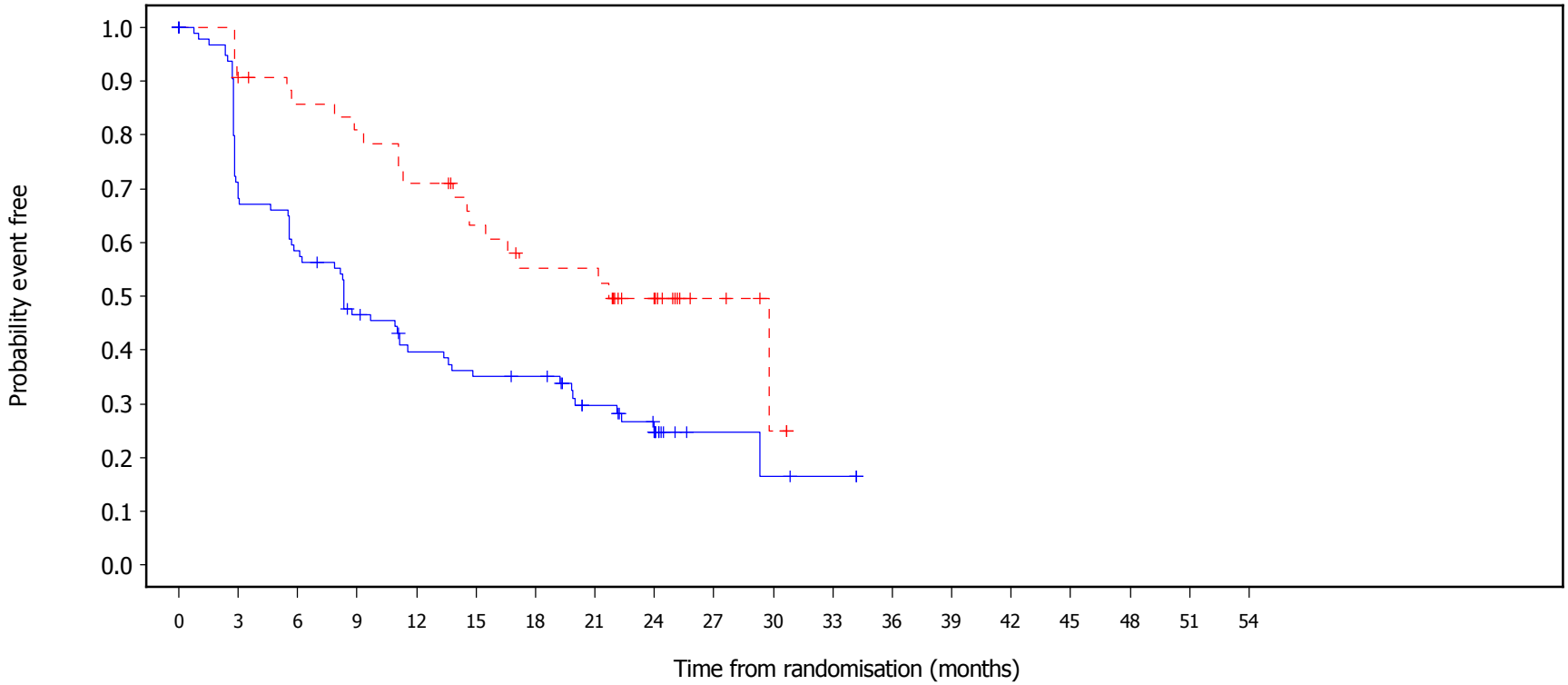


Number of patients at risk:

146	114	100	93	81	78	73	70	54	16	10	6	3	2	2	1	1	0	0	Olaparib + bevacizumab
79	67	58	53	49	45	41	35	27	8	1	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.10 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 15) time to clinically meaningful deterioration for Timing of cytoreductive surgery=Interval
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

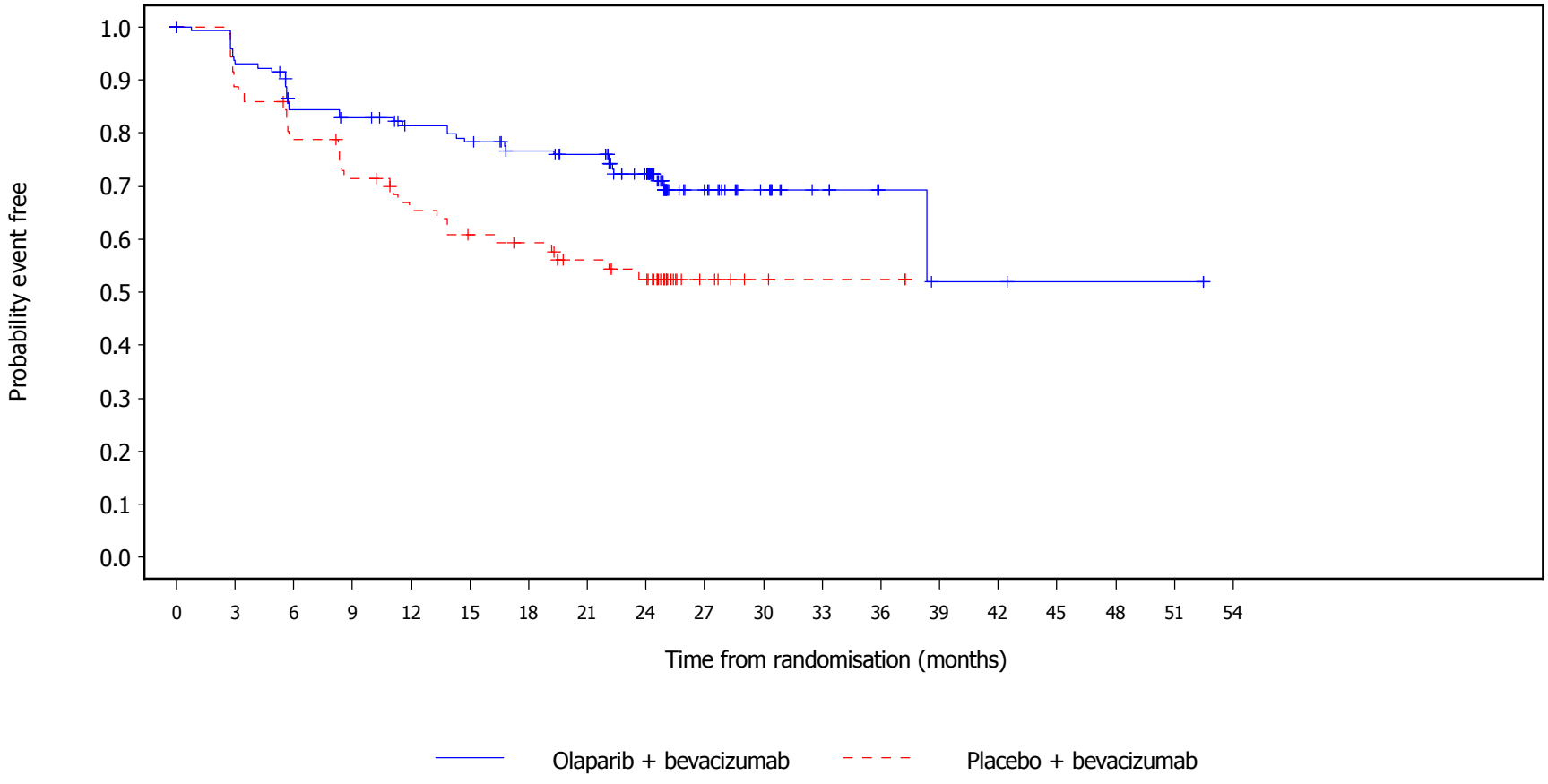


Number of patients at risk:

99	65	55	42	34	30	29	20	13	3	2	1	0	0	0	0	0	0	Olaparib + bevacizumab
45	39	35	33	29	24	20	20	12	4	1	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.11 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 15) time to clinically meaningful deterioration for Timing of cytoreductive surgery=Upfront
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

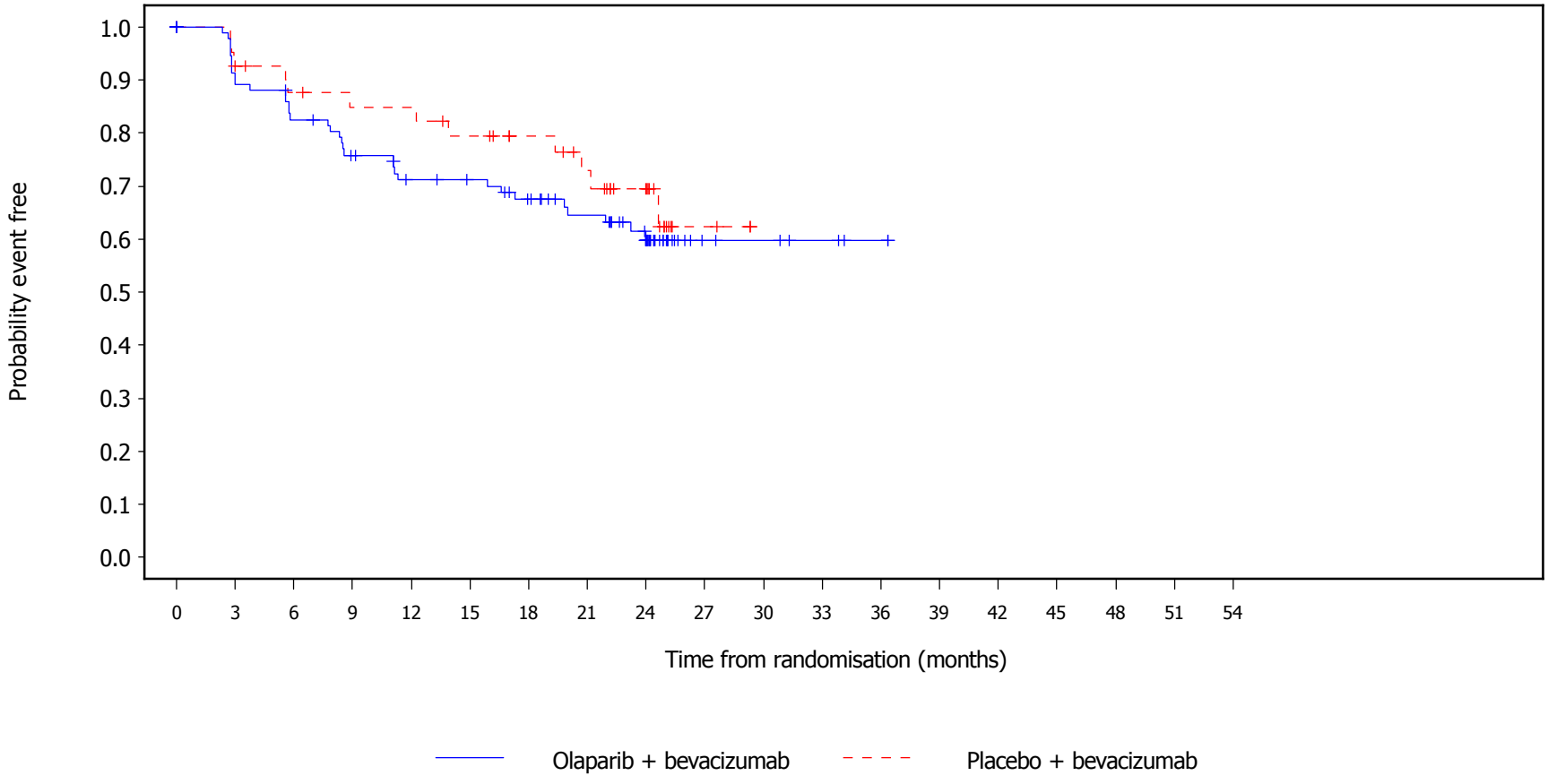


Number of patients at risk:

146	133	116	112	105	101	95	91	71	25	15	8	4	2	2	1	1	1	0 Olaparib + bevacizumab
79	63	55	49	43	39	37	32	28	6	2	1	1	0	0	0	0	0	0 Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.12 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 15) time to clinically meaningful deterioration for Timing of cytoreductive surgery=Interval
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

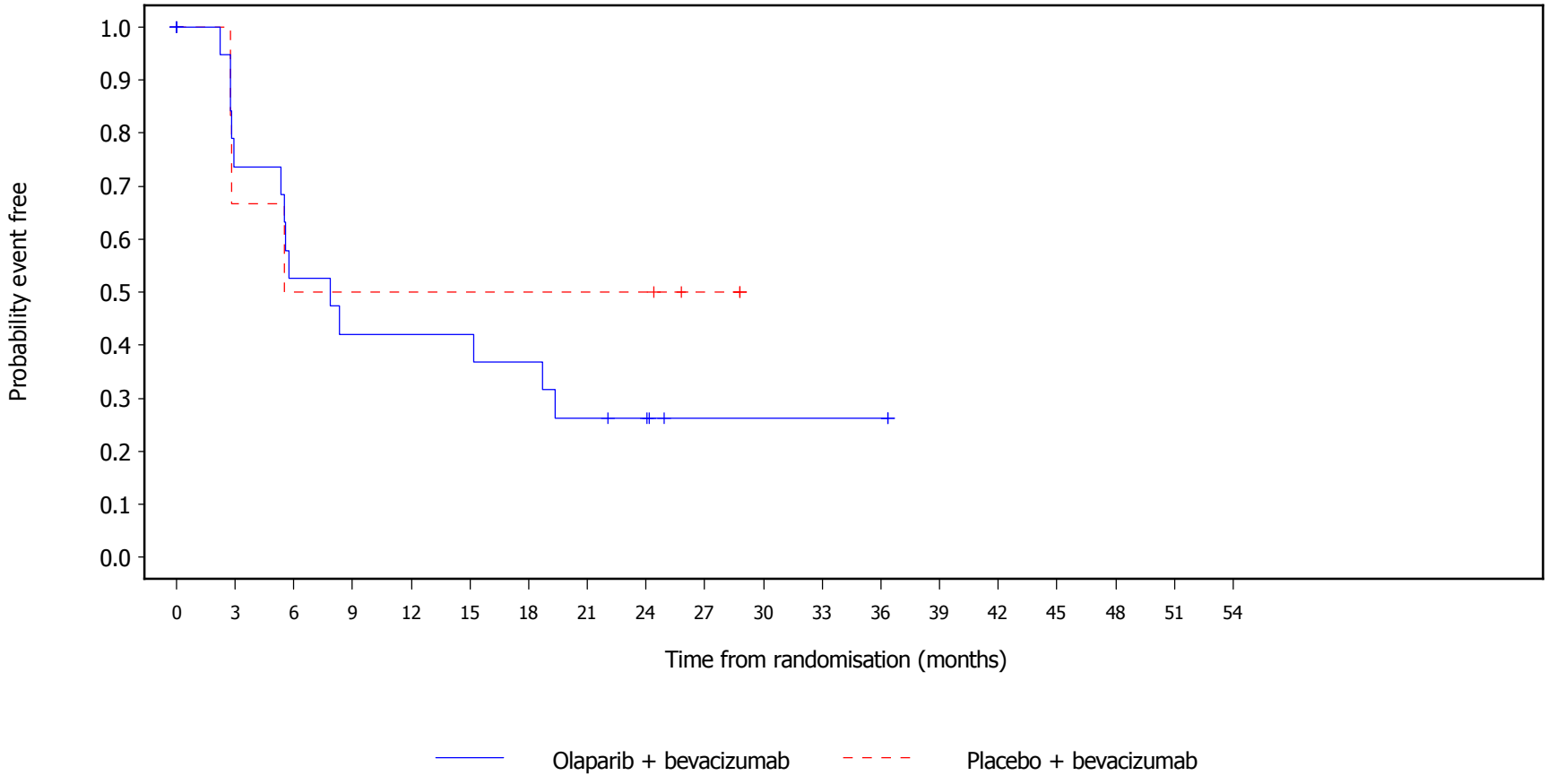


Number of patients at risk:

99	82	75	67	60	58	52	45	32	6	5	3	1	0	0	0	0	0	0	Olaparib + bevacizumab
45	38	34	32	32	29	25	21	14	2	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.13 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Pain (MID = 15) time to clinically meaningful deterioration for Status somatic BRCA mutations=sBRCAm
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

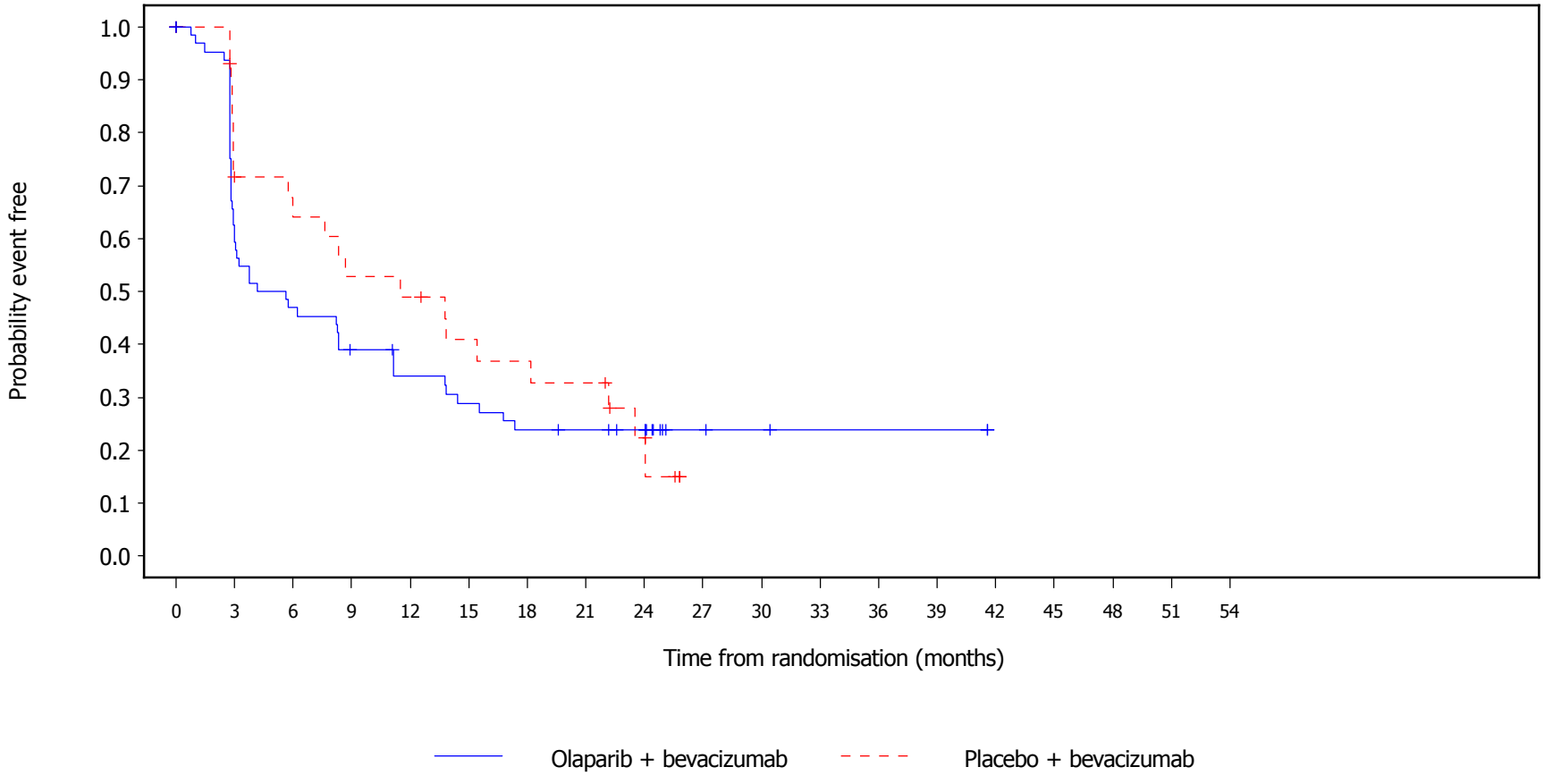


Number of patients at risk:

22	14	10	8	8	8	7	5	4	1	1	1	1	0	0	0	0	0	0 Olaparib + bevacizumab
7	4	3	3	3	3	3	3	3	1	0	0	0	0	0	0	0	0	0 Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.14 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Pain (MID = 15) time to clinically meaningful deterioration for Status somatic BRCA mutations=gBRCAm
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

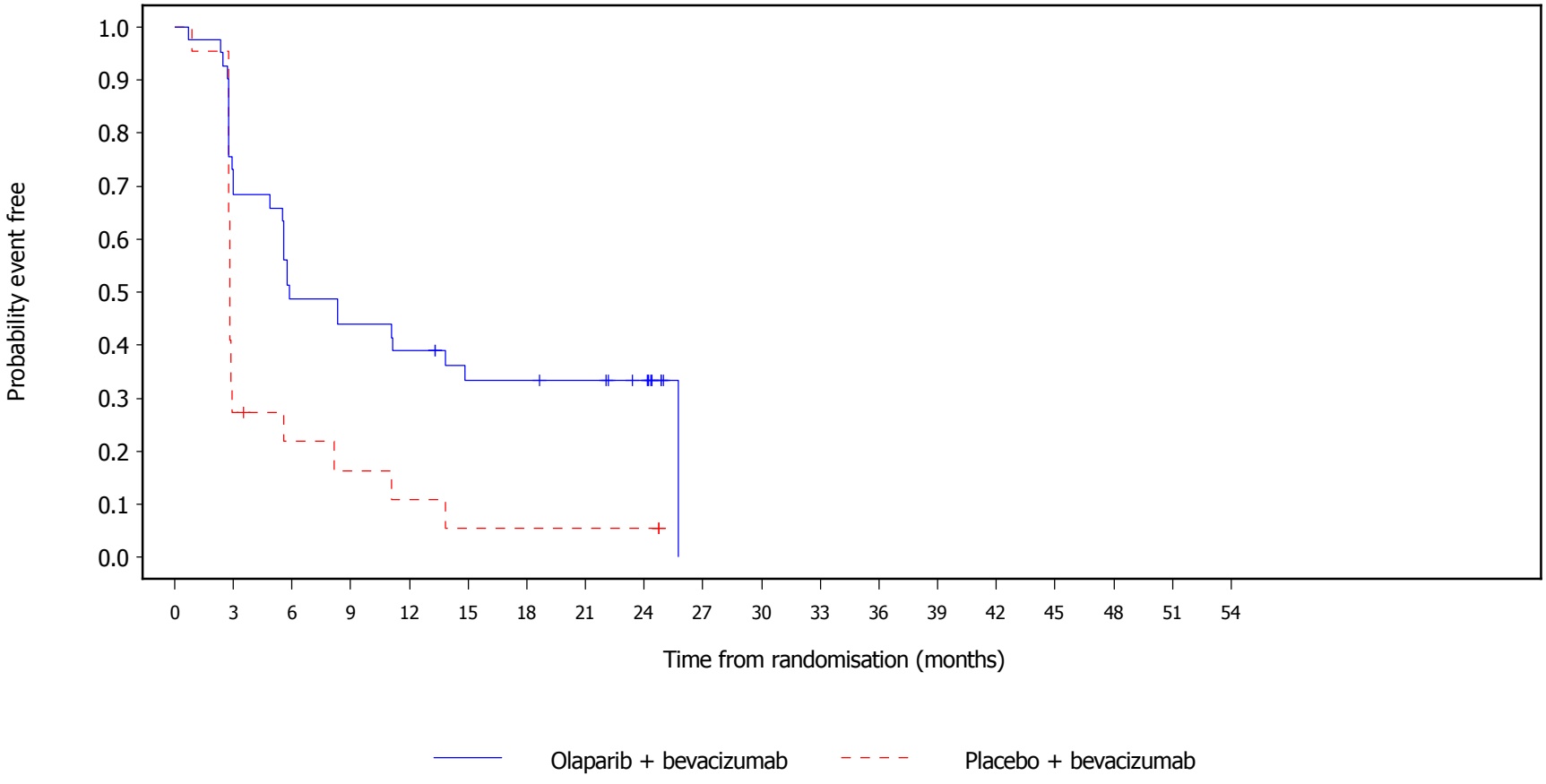


Number of patients at risk:

66	38	30	24	20	17	14	13	11	3	2	1	1	1	0	0	0	0	0	Olaparib + bevacizumab
31	20	17	14	13	10	9	8	4	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.15 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Pain (MID = 15) time to clinically meaningful deterioration for Status somatic BRCA mutations=Non-BRCAm
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

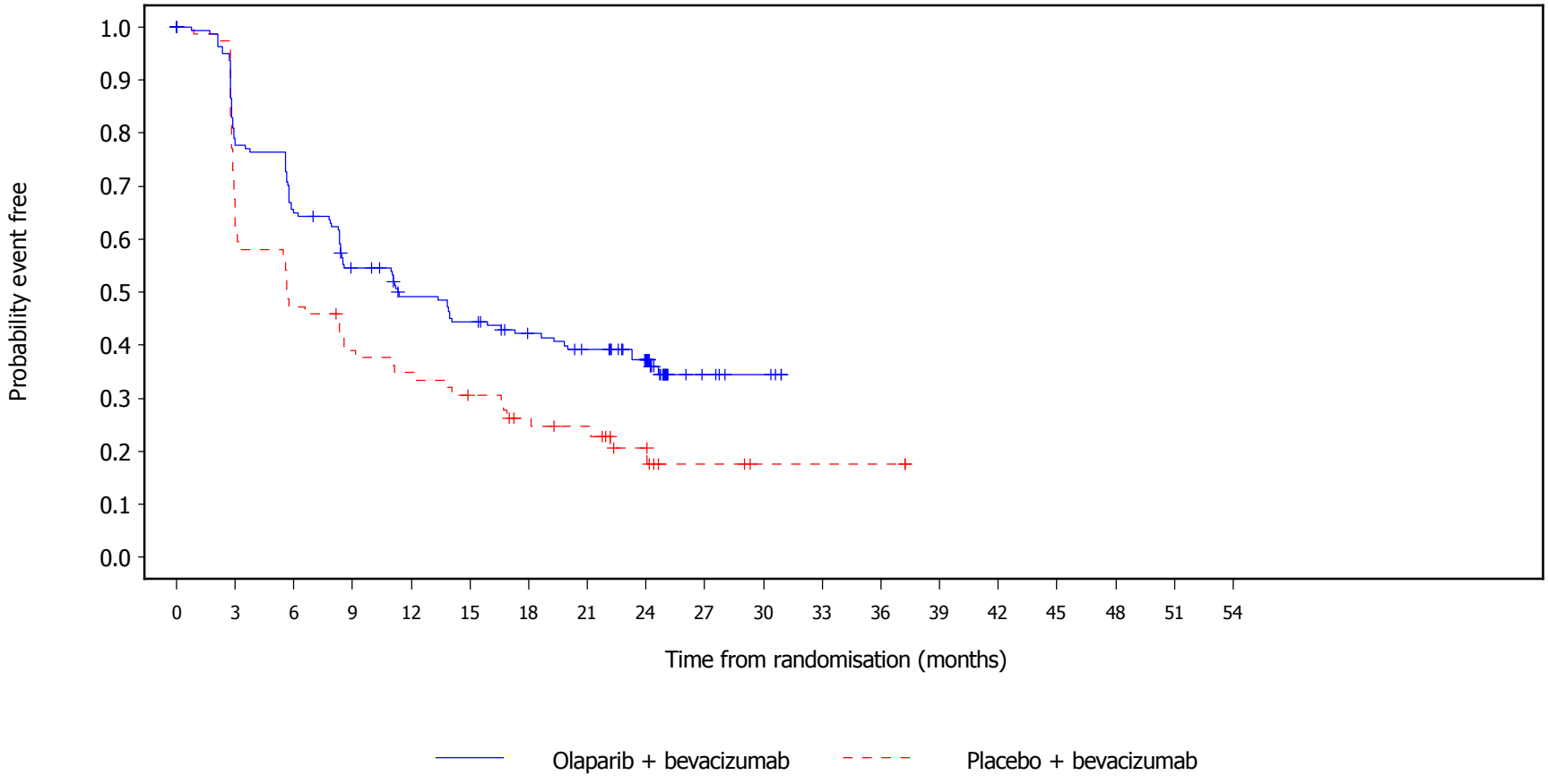


Number of patients at risk:

41	29	20	18	16	12	12	11	8	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
22	6	4	3	2	1	1	1	1	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.16 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 15) time to clinically meaningful deterioration for Cytoreductive surgery outcome=No residue
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

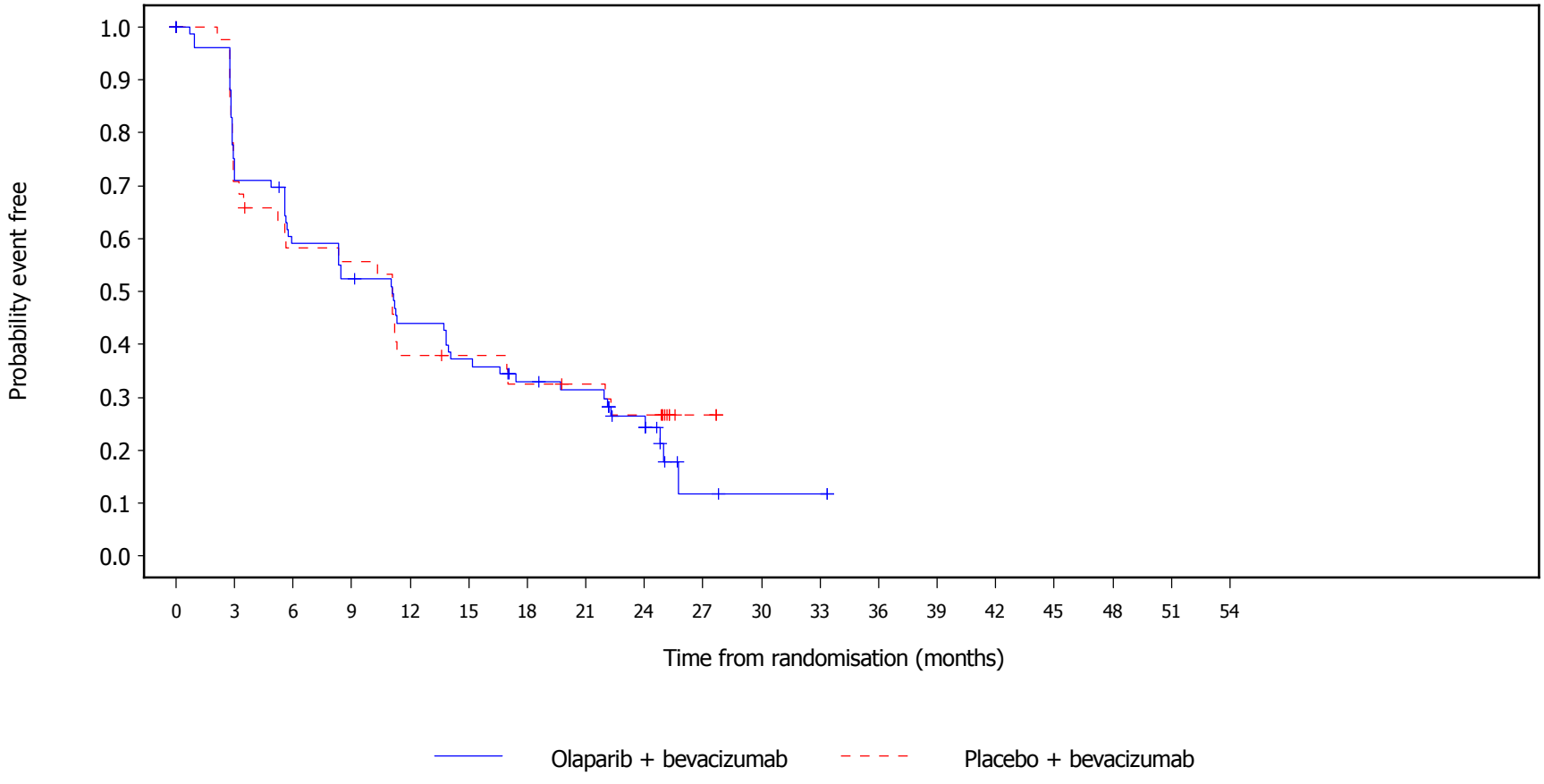


Number of patients at risk:

166	123	102	83	71	64	56	50	37	6	3	0	0	0	0	0	0	0	Olaparib + bevacizumab
80	49	35	28	25	21	16	14	8	3	1	1	1	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.2.4.17 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 15) time to clinically meaningful deterioration for Cytoreductive surgery outcome=Residue
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

79	55	44	39	32	27	22	20	13	2	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
44	29	23	22	15	14	12	11	9	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Table 2.3.3.1 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	51 (55.4)	16.8 (11.1, NE)	48	32 (66.7)	9.7 (5.6,19.4)	0.63	0.41, 0.99	0.0463*
NED/CR [IDS]	74	39 (52.7)	19.8 (9.7, NE)	38	20 (52.6)	13.9 (7.6, NE)	0.96	0.56, 1.67	0.8712
NED/CR [Chemo]	40	22 (55.0)	16.6 (11.1, NE)	20	12 (60.0)	16.7 (5.7, NE)	0.93	0.47, 1.95	0.8474
PR	49	27 (55.1)	16.7 (11.0,27.6)	26	17 (65.4)	14.0 (2.9,21.8)	0.65	0.36, 1.22	0.1751
Interaction p-value									0.5814
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	83 (55.3)	16.6 (11.1,25.5)	65	40 (61.5)	11.1 (7.6,19.3)	0.81	0.56, 1.19	0.2792
non-tBRCAm	105	56 (53.3)	19.9 (13.7,27.6)	67	41 (61.2)	13.8 (6.1,21.8)	0.71	0.47, 1.07	0.0969
Interaction p-value									0.6318
First line treatment outcome (eCRF)									
NED [PDS]	89	47 (52.8)	18.0 (11.1, NE)	47	30 (63.8)	9.7 (5.7,24.8)	0.65	0.41, 1.04	0.0713
NED/CR [IDS]	74	40 (54.1)	19.6 (8.6, NE)	32	15 (46.9)	21.2 (7.6, NE)	1.14	0.65, 2.14	0.6547
NED/CR [Chemo]	39	22 (56.4)	16.6 (11.1, NE)	18	9 (50.0)	19.3 (5.7, NE)	1.20	0.57, 2.75	0.6399
PR	50	28 (56.0)	17.9 (11.0,27.6)	34	26 (76.5)	10.2 (5.5,15.4)	0.54	0.32, 0.93	0.0264*
Interaction p-value									0.1516
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	83 (56.5)	15.9 (11.1,20.7)	67	40 (59.7)	11.3 (8.2,21.2)	0.86	0.59, 1.26	0.4282
non-tBRCAm	108	56 (51.9)	22.0 (14.8, NE)	65	41 (63.1)	13.8 (5.7,21.8)	0.66	0.44, 0.99	0.0453*
Interaction p-value									0.3475
Age group									
<65 years	185	108 (58.4)	15.2 (11.1,19.8)	98	59 (60.2)	13.9 (8.3,21.8)	0.92	0.67, 1.27	0.5913
>=65 years	70	31 (44.3)	27.6 (19.6, NE)	34	22 (64.7)	11.1 (5.5,18.7)	0.44	0.26, 0.78	0.0053*
Interaction p-value									0.0278*

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.1 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	97 (53.3)	17.3 (13.8,25.5)	90	54 (60.0)	11.3 (6.4,22.3)	0.76	0.55, 1.07	0.1174
IV	73	42 (57.5)	17.9 (8.6,24.0)	42	27 (64.3)	13.9 (8.3,19.4)	0.76	0.47, 1.25	0.2797
Interaction p-value									NC
Region									
Europe	245	133 (54.3)	18.0 (13.8,23.4)	126	80 (63.5)	11.1 (8.3,16.8)	0.71	0.54, 0.94	0.0180*
Japan	10	6 (60.0)	14.8 (3.1, NE)	6	1 (16.7)	NE (NE, NE)	4.84	0.83, 91.55	0.0848
Interaction p-value									0.0343*
ECOG performance status at Baseline									
(0) Normal activity	190	108 (56.8)	16.7 (12.2,20.7)	100	63 (63.0)	11.1 (8.2,19.3)	0.80	0.59, 1.09	0.1578
(1) Restricted activity	61	29 (47.5)	23.4 (11.1, NE)	31	18 (58.1)	14.0 (6.1, NE)	0.68	0.38, 1.25	0.2133
Interaction p-value									0.6525
Baseline CA-125 value									
<=ULN	228	126 (55.3)	16.8 (13.8,23.1)	118	72 (61.0)	13.8 (8.3,19.3)	0.78	0.58, 1.04	0.0930
>ULN	27	13 (48.1)	20.0 (5.8, NE)	14	9 (64.3)	10.3 (3.0, NE)	0.63	0.27, 1.53	0.2953
Interaction p-value									0.6484
Histological grade									
High grade	255	139 (54.5)	17.9 (13.8,23.1)	132	81 (61.4)	11.4 (8.3,18.7)	0.76	0.58, 1.005	0.0540
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	89 (53.6)	18.0 (11.5,24.2)	80	46 (57.5)	13.8 (8.2,24.8)	0.80	0.56, 1.15	0.2279
Residue	79	46 (58.2)	16.7 (12.1,25.5)	44	29 (65.9)	11.3 (5.7,19.3)	0.76	0.48, 1.22	0.2519
Interaction p-value									0.8597

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.1 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	84 (57.5)	16.0 (11.3,23.4)	79	50 (63.3)	11.4 (5.8,19.3)	0.74	0.53, 1.06	0.1043
Interval	99	51 (51.5)	19.9 (11.5, NE)	45	25 (55.6)	13.9 (7.6, NE)	0.86	0.54, 1.42	0.5560
Interaction p-value									0.6189
Myriad tumour BRCA mutation status									
tBRCAm	158	84 (53.2)	19.2 (13.7,27.6)	77	44 (57.1)	11.4 (8.3,21.2)	0.80	0.56, 1.16	0.2385
Non-tBRCAm	97	55 (56.7)	16.7 (11.3,23.4)	55	37 (67.3)	11.1 (5.7,19.9)	0.72	0.48, 1.10	0.1277
Interaction p-value									0.7061
Status somatic BRCA mutations									
sBRCAm	22	11 (50.0)	16.6 (2.8, NE)	7	3 (42.9)	NE (NE, NE)	1.16	0.36, 5.14	0.8150
gBRCAm	66	38 (57.6)	13.8 (8.3, NE)	31	20 (64.5)	13.9 (8.2,21.2)	0.81	0.48, 1.41	0.4431
Non-BRCAm	41	27 (65.9)	16.7 (11.1,24.0)	22	18 (81.8)	7.1 (2.9,14.0)	0.57	0.31, 1.05	0.0723
Interaction p-value									0.5115

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.2 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Body image (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	37 (40.2)	NE (NE, NE)	48	26 (54.2)	11.3 (3.0, NE)	0.55	0.33, 0.92	0.0224*
NED/CR [IDS]	74	41 (55.4)	14.8 (8.3, NE)	38	19 (50.0)	22.2 (8.8,26.5)	1.31	0.77, 2.31	0.3184
NED/CR [Chemo]	40	19 (47.5)	23.4 (11.6, NE)	20	12 (60.0)	12.4 (5.2, NE)	0.82	0.40, 1.74	0.6015
PR	49	29 (59.2)	11.2 (5.6,24.8)	26	14 (53.8)	17.5 (11.1,25.4)	1.24	0.67, 2.42	0.5046
Interaction p-value									0.0873
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	73 (48.7)	22.5 (11.6, NE)	65	33 (50.8)	21.2 (11.3, NE)	0.95	0.63, 1.45	0.8049
non-tBRCAm	105	53 (50.5)	19.5 (11.1, NE)	67	38 (56.7)	14.0 (8.5,25.4)	0.85	0.56, 1.30	0.4504
Interaction p-value									0.7143
First line treatment outcome (eCRF)									
NED [PDS]	89	36 (40.4)	NE (NE, NE)	47	25 (53.2)	11.5 (5.6, NE)	0.58	0.35, 0.98	0.0405*
NED/CR [IDS]	74	38 (51.4)	19.9 (8.3, NE)	32	17 (53.1)	22.0 (8.3, NE)	1.08	0.62, 1.96	0.7991
NED/CR [Chemo]	39	20 (51.3)	21.9 (5.6, NE)	18	10 (55.6)	13.3 (3.5, NE)	0.92	0.44, 2.05	0.8303
PR	50	30 (60.0)	11.2 (5.7,24.8)	34	18 (52.9)	18.7 (12.7, NE)	1.36	0.76, 2.48	0.2999
Interaction p-value									0.1661
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	71 (48.3)	23.2 (12.5, NE)	67	34 (50.7)	21.2 (11.2, NE)	0.92	0.62, 1.40	0.6935
non-tBRCAm	108	55 (50.9)	18.7 (11.1, NE)	65	37 (56.9)	16.6 (8.5,25.4)	0.88	0.58, 1.34	0.5332
Interaction p-value									0.8653
Age group									
<65 years	185	90 (48.6)	22.5 (11.6, NE)	98	53 (54.1)	20.7 (11.1,25.4)	0.86	0.61, 1.21	0.3724
>=65 years	70	36 (51.4)	16.6 (8.4, NE)	34	18 (52.9)	18.7 (6.4, NE)	0.99	0.57, 1.78	0.9717
Interaction p-value									0.6649

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.2 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Body image (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	87 (47.8)	23.4 (13.7, NE)	90	48 (53.3)	18.7 (8.8,27.8)	0.85	0.60, 1.22	0.3652
IV	73	39 (53.4)	14.8 (8.4, NE)	42	23 (54.8)	20.7 (9.7,25.4)	1.00	0.60, 1.70	0.9950
Interaction p-value									0.6090
Region									
Europe	245	122 (49.8)	19.9 (12.5, NE)	126	68 (54.0)	17.5 (11.5,25.1)	0.89	0.66, 1.20	0.4241
Japan	10	4 (40.0)	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	0.98	0.22, 4.96	0.9759
Interaction p-value									0.8990
ECOG performance status at Baseline									
(0) Normal activity	190	95 (50.0)	18.0 (11.3, NE)	100	55 (55.0)	20.7 (11.2,25.4)	0.92	0.66, 1.29	0.6149
(1) Restricted activity	61	30 (49.2)	23.4 (8.4, NE)	31	16 (51.6)	17.5 (6.1, NE)	0.87	0.48, 1.64	0.6597
Interaction p-value									0.8836
Baseline CA-125 value									
<=ULN	228	112 (49.1)	22.5 (13.7, NE)	118	64 (54.2)	16.6 (11.1,25.1)	0.85	0.63, 1.16	0.3098
>ULN	27	14 (51.9)	11.3 (3.1, NE)	14	7 (50.0)	21.2 (2.9, NE)	1.30	0.54, 3.44	0.5632
Interaction p-value									0.3776
Histological grade									
High grade	255	126 (49.4)	21.9 (12.7, NE)	132	71 (53.8)	18.7 (11.5,25.1)	0.89	0.67, 1.20	0.4356
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	76 (45.8)	NE (NE, NE)	80	43 (53.8)	20.7 (8.3,26.5)	0.76	0.52, 1.11	0.1522
Residue	79	44 (55.7)	16.4 (8.4,24.8)	44	24 (54.5)	18.7 (11.2,25.4)	1.12	0.69, 1.86	0.6618
Interaction p-value									0.2202

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.2 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Body image (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	67 (45.9)	NE (NE, NE)	79	42 (53.2)	14.0 (8.3, NE)	0.74	0.50, 1.09	0.1248
Interval	99	53 (53.5)	16.6 (9.7,24.0)	45	25 (55.6)	22.1 (8.8,25.4)	1.11	0.70, 1.81	0.6735
Interaction p-value									0.1894
Myriad tumour BRCA mutation status									
tBRCAm	158	78 (49.4)	21.9 (11.3, NE)	77	39 (50.6)	21.2 (11.2,27.8)	0.94	0.64, 1.39	0.7375
Non-tBRCAm	97	48 (49.5)	19.9 (9.7, NE)	55	32 (58.2)	16.6 (9.7,25.4)	0.84	0.54, 1.32	0.4354
Interaction p-value									0.7067
Status somatic BRCA mutations									
sBRCAm	22	5 (22.7)	NE (NE, NE)	7	3 (42.9)	NE (NE, NE)	0.43	0.11, 2.11	0.2737
gBRCAm	66	37 (56.1)	12.5 (8.3, NE)	31	16 (51.6)	22.3 (11.3, NE)	1.23	0.70, 2.28	0.4784
Non-BRCAm	41	21 (51.2)	19.9 (5.8, NE)	22	13 (59.1)	16.6 (9.7, NE)	0.93	0.47, 1.91	0.8398
Interaction p-value									0.4216

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.3 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	33 (35.9)	NE (NE, NE)	48	19 (39.6)	25.5 (13.8, NE)	0.74	0.42, 1.32	0.3006
NED/CR [IDS]	74	31 (41.9)	NE (NE, NE)	38	16 (42.1)	26.5 (11.2, NE)	1.00	0.56, 1.88	0.9973
NED/CR [Chemo]	40	14 (35.0)	NE (NE, NE)	20	12 (60.0)	19.1 (3.0, NE)	0.52	0.24, 1.15	0.1049
PR	49	17 (34.7)	NE (NE, NE)	26	12 (46.2)	22.2 (11.4, NE)	0.63	0.30, 1.36	0.2335
Interaction p-value									0.5868
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	52 (34.7)	NE (NE, NE)	65	29 (44.6)	22.9 (13.6, NE)	0.65	0.42, 1.04	0.0696
non-tBRCAm	105	43 (41.0)	25.7 (22.3, NE)	67	30 (44.8)	25.4 (12.7, NE)	0.86	0.54, 1.39	0.5391
Interaction p-value									0.3938
First line treatment outcome (eCRF)									
NED [PDS]	89	29 (32.6)	NE (NE, NE)	47	18 (38.3)	NE (NE, NE)	0.71	0.40, 1.30	0.2571
NED/CR [IDS]	74	31 (41.9)	NE (NE, NE)	32	14 (43.8)	26.5 (11.0, NE)	0.94	0.51, 1.82	0.8511
NED/CR [Chemo]	39	13 (33.3)	NE (NE, NE)	18	9 (50.0)	22.3 (5.7, NE)	0.62	0.27, 1.51	0.2833
PR	50	21 (42.0)	25.7 (15.4, NE)	34	17 (50.0)	22.2 (8.6, NE)	0.72	0.38, 1.37	0.3095
Interaction p-value									0.8616
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	51 (34.7)	NE (NE, NE)	67	30 (44.8)	22.9 (11.4, NE)	0.64	0.41, 1.01	0.0573
non-tBRCAm	108	44 (40.7)	25.7 (22.3, NE)	65	29 (44.6)	25.4 (12.7, NE)	0.87	0.55, 1.41	0.5719
Interaction p-value									0.3482
Age group									
<65 years	185	69 (37.3)	NE (NE, NE)	98	42 (42.9)	25.4 (13.8, NE)	0.78	0.53, 1.15	0.2059
>=65 years	70	26 (37.1)	NE (NE, NE)	34	17 (50.0)	22.2 (12.3, NE)	0.64	0.35, 1.20	0.1568
Interaction p-value									0.5881

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.3 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	72 (39.6)	NE (NE, NE)	90	41 (45.6)	24.1 (13.8, NE)	0.80	0.55, 1.19	0.2636
IV	73	23 (31.5)	NE (NE, NE)	42	18 (42.9)	23.5 (8.3, NE)	0.59	0.32, 1.10	0.0969
Interaction p-value									0.4045
Region									
Europe	245	94 (38.4)	NE (NE, NE)	126	56 (44.4)	24.1 (16.4, NE)	0.76	0.55, 1.06	0.1042
Japan	10	1 (10.0)	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	0.20	0.01, 1.55	0.1246
Interaction p-value									0.2131
ECOG performance status at Baseline									
(0) Normal activity	190	69 (36.3)	NE (NE, NE)	100	45 (45.0)	25.4 (17.0, NE)	0.75	0.52, 1.11	0.1472
(1) Restricted activity	61	24 (39.3)	25.7 (14.3, NE)	31	14 (45.2)	22.2 (5.9, NE)	0.67	0.35, 1.32	0.2388
Interaction p-value									0.7495
Baseline CA-125 value									
<=ULN	228	83 (36.4)	NE (NE, NE)	118	49 (41.5)	25.5 (18.7, NE)	0.77	0.54, 1.10	0.1452
>ULN	27	12 (44.4)	16.6 (5.7, NE)	14	10 (71.4)	17.0 (5.6,25.4)	0.61	0.26, 1.45	0.2564
Interaction p-value									0.6275
Histological grade									
High grade	255	95 (37.3)	NE (NE, NE)	132	59 (44.7)	24.1 (17.0, NE)	0.74	0.53, 1.02	0.0691
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	61 (36.7)	NE (NE, NE)	80	33 (41.3)	25.5 (13.8, NE)	0.79	0.52, 1.22	0.2847
Residue	79	31 (39.2)	25.7 (22.3, NE)	44	23 (52.3)	22.3 (11.1, NE)	0.68	0.40, 1.18	0.1682
Interaction p-value									0.6689

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.3 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	50 (34.2)	NE (NE, NE)	79	36 (45.6)	22.9 (13.8, NE)	0.62	0.40, 0.95	0.0293*
Interval	99	42 (42.4)	25.4 (16.6, NE)	45	20 (44.4)	25.4 (12.3, NE)	0.98	0.58, 1.71	0.9488
Interaction p-value									0.1772
Myriad tumour BRCA mutation status									
tBRCAm	158	57 (36.1)	NE (NE, NE)	77	29 (37.7)	25.5 (19.1, NE)	0.85	0.55, 1.34	0.4715
Non-tBRCAm	97	38 (39.2)	NE (NE, NE)	55	30 (54.5)	18.7 (10.4,26.5)	0.64	0.39, 1.03	0.0671
Interaction p-value									0.3891
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	16.6 (5.6, NE)	7	4 (57.1)	15.3 (2.8, NE)	0.83	0.28, 3.03	0.7577
gBRCAm	66	27 (40.9)	NE (NE, NE)	31	11 (35.5)	NE (NE, NE)	0.95	0.48, 1.99	0.8782
Non-BRCAm	41	16 (39.0)	NE (NE, NE)	22	13 (59.1)	13.8 (5.6, NE)	0.55	0.27, 1.17	0.1195
Interaction p-value									0.5712

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.

Table 2.3.3.4 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	28 (30.4)	52.5 (NE, NE)	48	19 (39.6)	NE (NE, NE)	0.65	0.36, 1.19	0.1603
NED/CR [IDS]	74	33 (44.6)	24.0 (11.3, NE)	38	9 (23.7)	NE (NE, NE)	2.23	1.11, 4.96	0.0225*
NED/CR [Chemo]	40	13 (32.5)	NE (NE, NE)	20	9 (45.0)	NE (NE, NE)	0.77	0.33, 1.87	0.5516
PR	49	21 (42.9)	24.9 (11.3, NE)	26	8 (30.8)	25.4 (8.3, NE)	1.27	0.59, 3.06	0.5551
Interaction p-value									0.0532
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	57 (38.0)	NE (NE, NE)	65	19 (29.2)	NE (NE, NE)	1.32	0.80, 2.27	0.2870
non-tBRCAm	105	38 (36.2)	52.5 (22.5, NE)	67	26 (38.8)	25.4 (13.9, NE)	0.91	0.55, 1.51	0.6998
Interaction p-value									0.3064
First line treatment outcome (eCRF)									
NED [PDS]	89	29 (32.6)	52.5 (NE, NE)	47	19 (40.4)	NE (NE, NE)	0.68	0.38, 1.24	0.2058
NED/CR [IDS]	74	31 (41.9)	NE (NE, NE)	32	8 (25.0)	NE (NE, NE)	1.89	0.91, 4.42	0.0882
NED/CR [Chemo]	39	12 (30.8)	NE (NE, NE)	18	7 (38.9)	NE (NE, NE)	0.79	0.32, 2.13	0.6266
PR	50	22 (44.0)	24.9 (11.3, NE)	34	11 (32.4)	NE (NE, NE)	1.40	0.69, 3.00	0.3514
Interaction p-value									0.1423
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	57 (38.8)	NE (NE, NE)	67	19 (28.4)	NE (NE, NE)	1.38	0.84, 2.38	0.2132
non-tBRCAm	108	38 (35.2)	52.5 (NE, NE)	65	26 (40.0)	25.4 (13.9, NE)	0.85	0.52, 1.42	0.5300
Interaction p-value									0.1870
Age group									
<65 years	185	69 (37.3)	NE (NE, NE)	98	34 (34.7)	NE (NE, NE)	1.09	0.73, 1.66	0.6736
>=65 years	70	26 (37.1)	52.5 (23.2, NE)	34	11 (32.4)	NE (NE, NE)	1.03	0.52, 2.19	0.9246
Interaction p-value									0.8981

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.4 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	69 (37.9)	52.5 (24.9, NE)	90	29 (32.2)	NE (NE, NE)	1.18	0.77, 1.84	0.4585
IV	73	26 (35.6)	NE (NE, NE)	42	16 (38.1)	25.4 (13.9, NE)	0.89	0.48, 1.70	0.7244
Interaction p-value									0.4790
Region									
Europe	245	93 (38.0)	52.5 (NE, NE)	126	43 (34.1)	NE (NE, NE)	1.08	0.75, 1.56	0.6942
Japan	10	2 (20.0)	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	0.85	0.10, 7.11	0.8742
Interaction p-value									0.8207
ECOG performance status at Baseline									
(0) Normal activity	190	75 (39.5)	52.5 (23.2, NE)	100	35 (35.0)	NE (NE, NE)	1.16	0.78, 1.75	0.4778
(1) Restricted activity	61	18 (29.5)	NE (NE, NE)	31	10 (32.3)	NE (NE, NE)	0.82	0.39, 1.86	0.6281
Interaction p-value									0.4526
Baseline CA-125 value									
<=ULN	228	85 (37.3)	52.5 (NE, NE)	118	40 (33.9)	NE (NE, NE)	1.07	0.74, 1.57	0.7395
>ULN	27	10 (37.0)	NE (NE, NE)	14	5 (35.7)	25.4 (9.3, NE)	1.18	0.42, 3.80	0.7556
Interaction p-value									0.8553
Histological grade									
High grade	255	95 (37.3)	52.5 (NE, NE)	132	45 (34.1)	NE (NE, NE)	1.08	0.76, 1.55	0.6816
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	61 (36.7)	52.5 (NE, NE)	80	27 (33.8)	NE (NE, NE)	1.05	0.67, 1.68	0.8337
Residue	79	28 (35.4)	NE (NE, NE)	44	16 (36.4)	NE (NE, NE)	1.01	0.55, 1.91	0.9723
Interaction p-value									0.9231

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.4 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	48 (32.9)	52.5 (NE, NE)	79	31 (39.2)	NE (NE, NE)	0.75	0.48, 1.19	0.2155
Interval	99	41 (41.4)	NE (NE, NE)	45	12 (26.7)	NE (NE, NE)	1.80	0.98, 3.59	0.0591
Interaction p-value									0.0246*
Myriad tumour BRCA mutation status									
tBRCAm	158	60 (38.0)	NE (NE, NE)	77	22 (28.6)	NE (NE, NE)	1.30	0.81, 2.17	0.2825
Non-tBRCAm	97	35 (36.1)	52.5 (22.5, NE)	55	23 (41.8)	25.4 (13.9, NE)	0.86	0.51, 1.48	0.5855
Interaction p-value									0.2628
Status somatic BRCA mutations									
sBRCAm	22	3 (13.6)	NE (NE, NE)	7	0	NE (NE, NE)	NC	NC	NC
gBRCAm	66	32 (48.5)	24.9 (11.0, NE)	31	6 (19.4)	NE (NE, NE)	2.71	1.22, 7.20	0.0129*
Non-BRCAm	41	13 (31.7)	52.5 (22.5, NE)	22	11 (50.0)	22.2 (8.3, NE)	0.62	0.27, 1.42	0.2524
Interaction p-value									0.0126*

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.5 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Hormonal (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	50 (54.3)	17.0 (13.8,33.4)	48	29 (60.4)	8.5 (5.5,19.3)	0.69	0.44, 1.10	0.1124
NED/CR [IDS]	74	39 (52.7)	19.3 (11.1, NE)	38	18 (47.4)	19.4 (5.6, NE)	1.07	0.62, 1.92	0.8006
NED/CR [Chemo]	40	20 (50.0)	21.9 (14.0, NE)	20	14 (70.0)	11.0 (2.9,24.6)	0.61	0.31, 1.23	0.1587
PR	49	26 (53.1)	19.5 (11.2,30.4)	26	15 (57.7)	5.6 (2.9,19.9)	0.62	0.33, 1.20	0.1480
Interaction p-value									0.4717
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	83 (55.3)	19.3 (13.9,24.2)	65	37 (56.9)	11.8 (5.6,24.1)	0.79	0.54, 1.18	0.2472
non-tBRCAm	105	52 (49.5)	18.6 (12.1, NE)	67	39 (58.2)	11.1 (5.6,19.3)	0.69	0.46, 1.06	0.0873
Interaction p-value									0.6425
First line treatment outcome (eCRF)									
NED [PDS]	89	46 (51.7)	18.9 (13.8, NE)	47	29 (61.7)	6.2 (5.5,19.3)	0.61	0.38, 0.97	0.0388*
NED/CR [IDS]	74	40 (54.1)	16.8 (8.7,25.3)	32	15 (46.9)	19.4 (5.6, NE)	1.09	0.62, 2.04	0.7742
NED/CR [Chemo]	39	19 (48.7)	21.9 (14.3, NE)	18	10 (55.6)	13.9 (3.0, NE)	0.74	0.35, 1.66	0.4521
PR	50	28 (56.0)	19.3 (10.9,30.4)	34	22 (64.7)	11.1 (4.7,19.9)	0.69	0.39, 1.21	0.1937
Interaction p-value									0.4754
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	81 (55.1)	19.2 (13.9,24.2)	67	38 (56.7)	11.3 (5.6,24.1)	0.78	0.54, 1.16	0.2201
non-tBRCAm	108	54 (50.0)	19.1 (12.1,33.4)	65	38 (58.5)	11.1 (5.6,19.4)	0.70	0.46, 1.07	0.1001
Interaction p-value									0.7082
Age group									
<65 years	185	101 (54.6)	17.5 (13.9,22.1)	98	60 (61.2)	8.4 (5.5,13.9)	0.68	0.50, 0.95	0.0227*
>=65 years	70	34 (48.6)	24.0 (11.5, NE)	34	16 (47.1)	19.9 (5.7, NE)	0.97	0.54, 1.80	0.9188
Interaction p-value									0.3066

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.5 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Hormonal (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	99 (54.4)	16.8 (13.9,24.0)	90	52 (57.8)	11.3 (5.7,19.4)	0.81	0.58, 1.14	0.2241
IV	73	36 (49.3)	22.3 (13.9, NE)	42	24 (57.1)	13.9 (3.0,24.6)	0.61	0.37, 1.04	0.0706
Interaction p-value									0.3820
Region									
Europe	245	130 (53.1)	19.1 (14.0,24.2)	126	72 (57.1)	11.3 (5.7,16.6)	0.75	0.57, 1.01	0.0579
Japan	10	5 (50.0)	22.1 (2.8, NE)	6	4 (66.7)	12.5 (2.9, NE)	0.62	0.16, 2.52	0.4866
Interaction p-value									0.7836
ECOG performance status at Baseline									
(0) Normal activity	190	94 (49.5)	20.0 (16.0,30.4)	100	60 (60.0)	11.1 (5.6,19.3)	0.68	0.49, 0.95	0.0226*
(1) Restricted activity	61	37 (60.7)	11.5 (8.4,24.0)	31	16 (51.6)	11.3 (5.6, NE)	0.94	0.53, 1.73	0.8269
Interaction p-value									0.3471
Baseline CA-125 value									
<=ULN	228	124 (54.4)	17.5 (13.9,24.0)	118	66 (55.9)	12.3 (5.7,19.4)	0.82	0.61, 1.11	0.1926
>ULN	27	11 (40.7)	25.3 (8.5, NE)	14	10 (71.4)	5.6 (2.8, NE)	0.33	0.14, 0.79	0.0142*
Interaction p-value									0.0543
Histological grade									
High grade	255	135 (52.9)	19.1 (14.3,24.2)	132	76 (57.6)	11.3 (5.6,19.1)	0.75	0.57, 0.99	0.0460*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	88 (53.0)	17.5 (13.8,25.3)	80	44 (55.0)	11.8 (5.6,22.3)	0.79	0.55, 1.14	0.1994
Residue	79	42 (53.2)	21.9 (14.3,25.5)	44	28 (63.6)	11.3 (5.6,19.1)	0.68	0.42, 1.11	0.1233
Interaction p-value									0.6431

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.5 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Hormonal (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	77 (52.7)	19.1 (14.0,30.4)	79	49 (62.0)	8.7 (5.6,16.4)	0.64	0.45, 0.92	0.0174*
Interval	99	53 (53.5)	19.3 (11.1,24.4)	45	23 (51.1)	14.7 (5.6, NE)	0.97	0.60, 1.62	0.9141
Interaction p-value									0.1740
Myriad tumour BRCA mutation status									
tBRCAm	158	87 (55.1)	19.3 (13.9,24.2)	77	42 (54.5)	11.3 (5.6,24.1)	0.81	0.56, 1.18	0.2711
Non-tBRCAm	97	48 (49.5)	18.6 (12.1, NE)	55	34 (61.8)	11.1 (5.6,19.3)	0.66	0.43, 1.03	0.0695
Interaction p-value									0.4860
Status somatic BRCA mutations									
sBRCAm	22	9 (40.9)	24.4 (8.3, NE)	7	2 (28.6)	NE (NE, NE)	1.05	0.27, 6.92	0.9455
gBRCAm	66	42 (63.6)	11.2 (5.8,19.5)	31	18 (58.1)	8.5 (4.2,24.1)	0.94	0.55, 1.68	0.8286
Non-BRCAm	41	22 (53.7)	16.6 (7.8, NE)	22	16 (72.7)	12.3 (4.7,19.3)	0.63	0.33, 1.23	0.1706
Interaction p-value									0.6185

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.6 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	33 (35.9)	NE (NE, NE)	48	22 (45.8)	16.4 (8.4, NE)	0.63	0.37, 1.10	0.1055
NED/CR [IDS]	74	37 (50.0)	18.6 (13.8, NE)	38	13 (34.2)	NE (NE, NE)	1.62	0.88, 3.16	0.1218
NED/CR [Chemo]	40	21 (52.5)	19.4 (3.0, NE)	20	11 (55.0)	17.2 (3.0, NE)	1.07	0.52, 2.30	0.8612
PR	49	23 (46.9)	25.3 (11.1, NE)	26	12 (46.2)	12.7 (3.0, NE)	0.80	0.41, 1.67	0.5401
Interaction p-value									0.1485
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	73 (48.7)	22.1 (14.5, NE)	65	33 (50.8)	13.9 (8.3, NE)	0.87	0.58, 1.33	0.5024
non-tBRCAm	105	41 (39.0)	NE (NE, NE)	67	25 (37.3)	NE (NE, NE)	1.00	0.62, 1.67	0.9865
Interaction p-value									0.6566
First line treatment outcome (eCRF)									
NED [PDS]	89	30 (33.7)	NE (NE, NE)	47	21 (44.7)	16.9 (8.3, NE)	0.61	0.35, 1.09	0.0931
NED/CR [IDS]	74	37 (50.0)	16.6 (11.5, NE)	32	11 (34.4)	NE (NE, NE)	1.62	0.86, 3.34	0.1422
NED/CR [Chemo]	39	24 (61.5)	13.7 (3.0,24.2)	18	10 (55.6)	17.2 (3.0, NE)	1.19	0.58, 2.61	0.6425
PR	50	21 (42.0)	25.7 (11.1, NE)	34	16 (47.1)	17.0 (8.3, NE)	0.77	0.41, 1.50	0.4416
Interaction p-value									0.1290
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	71 (48.3)	22.2 (14.5, NE)	67	33 (49.3)	16.9 (8.3, NE)	0.88	0.59, 1.34	0.5382
non-tBRCAm	108	43 (39.8)	NE (NE, NE)	65	25 (38.5)	NE (NE, NE)	1.01	0.62, 1.67	0.9767
Interaction p-value									0.6736
Age group									
<65 years	185	90 (48.6)	22.2 (15.9, NE)	98	46 (46.9)	17.2 (10.4, NE)	0.95	0.67, 1.36	0.7637
>=65 years	70	24 (34.3)	NE (NE, NE)	34	12 (35.3)	NE (NE, NE)	0.96	0.49, 1.99	0.9099
Interaction p-value									0.9708

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.6 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	79 (43.4)	25.7 (19.4, NE)	90	39 (43.3)	NE (NE, NE)	0.95	0.65, 1.41	0.7936
IV	73	35 (47.9)	19.6 (9.0, NE)	42	19 (45.2)	17.5 (8.7, NE)	0.96	0.56, 1.71	0.8834
Interaction p-value									0.9781
Region									
Europe	245	110 (44.9)	25.3 (18.0, NE)	126	56 (44.4)	21.9 (11.9, NE)	0.92	0.67, 1.28	0.6165
Japan	10	4 (40.0)	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	1.78	0.35, 12.82	0.4957
Interaction p-value									0.4436
ECOG performance status at Baseline									
(0) Normal activity	190	87 (45.8)	24.2 (15.9, NE)	100	46 (46.0)	21.9 (11.0, NE)	0.97	0.68, 1.40	0.8810
(1) Restricted activity	61	25 (41.0)	25.7 (16.6, NE)	31	12 (38.7)	NE (NE, NE)	0.89	0.46, 1.85	0.7529
Interaction p-value									0.8324
Baseline CA-125 value									
<=ULN	228	100 (43.9)	NE (NE, NE)	118	51 (43.2)	NE (NE, NE)	0.93	0.67, 1.31	0.6756
>ULN	27	14 (51.9)	19.6 (5.6, NE)	14	7 (50.0)	17.0 (6.6, NE)	1.14	0.47, 3.00	0.7781
Interaction p-value									0.6804
Histological grade									
High grade	255	114 (44.7)	25.3 (18.6, NE)	132	58 (43.9)	23.0 (12.7, NE)	0.95	0.70, 1.31	0.7478
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	69 (41.6)	NE (NE, NE)	80	32 (40.0)	NE (NE, NE)	0.97	0.64, 1.49	0.8808
Residue	79	40 (50.6)	22.1 (8.9, NE)	44	21 (47.7)	17.2 (6.0, NE)	1.04	0.62, 1.79	0.8981
Interaction p-value									0.8465

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.6 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	58 (39.7)	NE (NE, NE)	79	35 (44.3)	23.0 (8.6, NE)	0.77	0.51, 1.18	0.2307
Interval	99	51 (51.5)	16.6 (11.5, NE)	45	18 (40.0)	NE (NE, NE)	1.41	0.84, 2.47	0.2020
Interaction p-value									0.0806
Myriad tumour BRCA mutation status									
tBRCAm	158	77 (48.7)	22.1 (14.1, NE)	77	34 (44.2)	17.5 (8.7, NE)	1.02	0.69, 1.55	0.9132
Non-tBRCAm	97	37 (38.1)	NE (NE, NE)	55	24 (43.6)	NE (NE, NE)	0.82	0.49, 1.39	0.4545
Interaction p-value									0.5099
Status somatic BRCA mutations									
sBRCAm	22	10 (45.5)	8.5 (2.8, NE)	7	3 (42.9)	NE (NE, NE)	1.40	0.43, 6.24	0.5995
gBRCAm	66	32 (48.5)	24.2 (13.9, NE)	31	14 (45.2)	17.2 (8.7, NE)	0.89	0.49, 1.73	0.7254
Non-BRCAm	41	19 (46.3)	25.7 (13.7, NE)	22	9 (40.9)	NE (NE, NE)	1.11	0.52, 2.59	0.7881
Interaction p-value									0.7942

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.7 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Other single items (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=132)				
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	31 (33.7)	NE (NE, NE)	48	17 (35.4)	30.7 (19.4, NE)	0.93	0.52, 1.72	0.8112
NED/CR [IDS]	74	35 (47.3)	24.7 (16.0, NE)	38	9 (23.7)	NE (NE, NE)	2.23	1.12, 4.94	0.0211*
NED/CR [Chemo]	40	12 (30.0)	NE (NE, NE)	20	6 (30.0)	NE (NE, NE)	1.11	0.43, 3.18	0.8382
PR	49	18 (36.7)	NE (NE, NE)	26	13 (50.0)	23.5 (15.4, NE)	0.63	0.31, 1.31	0.2070
Interaction p-value									0.0836
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	62 (41.3)	26.3 (24.7, NE)	65	22 (33.8)	NE (NE, NE)	1.23	0.77, 2.04	0.4014
non-tBRCAm	105	34 (32.4)	NE (NE, NE)	67	23 (34.3)	28.0 (22.1, NE)	0.97	0.58, 1.67	0.9226
Interaction p-value									0.5278
First line treatment outcome (eCRF)									
NED [PDS]	89	28 (31.5)	NE (NE, NE)	47	16 (34.0)	30.7 (19.5, NE)	0.94	0.51, 1.78	0.8435
NED/CR [IDS]	74	33 (44.6)	26.3 (16.0, NE)	32	9 (28.1)	NE (NE, NE)	1.68	0.84, 3.72	0.1512
NED/CR [Chemo]	39	13 (33.3)	NE (NE, NE)	18	5 (27.8)	NE (NE, NE)	1.20	0.45, 3.75	0.7221
PR	50	20 (40.0)	25.3 (22.0, NE)	34	15 (44.1)	25.4 (19.4, NE)	0.85	0.44, 1.69	0.6375
Interaction p-value									0.5352
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	62 (42.2)	26.0 (24.7, NE)	67	22 (32.8)	NE (NE, NE)	1.29	0.80, 2.14	0.3024
non-tBRCAm	108	34 (31.5)	NE (NE, NE)	65	23 (35.4)	28.0 (22.1, NE)	0.91	0.54, 1.57	0.7397
Interaction p-value									0.3516
Age group									
<65 years	185	73 (39.5)	29.0 (25.0, NE)	98	32 (32.7)	30.7 (25.4, NE)	1.29	0.86, 1.97	0.2285
>=65 years	70	23 (32.9)	NE (NE, NE)	34	13 (38.2)	NE (NE, NE)	0.73	0.37, 1.48	0.3725
Interaction p-value									0.1703

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.7 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Other single items (MID = 15)
time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	67 (36.8)	NE (NE, NE)	90	27 (30.0)	NE (NE, NE)	1.29	0.83, 2.05	0.2570
IV	73	29 (39.7)	26.0 (22.0, NE)	42	18 (42.9)	25.4 (16.6, NE)	0.85	0.48, 1.56	0.5941
Interaction p-value									0.2726
Region									
Europe	245	92 (37.6)	30.4 (25.3, NE)	126	43 (34.1)	28.0 (25.4, NE)	1.10	0.77, 1.59	0.6104
Japan	10	4 (40.0)	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	1.57	0.31, 11.29	0.5974
Interaction p-value									0.6845
ECOG performance status at Baseline									
(0) Normal activity	190	73 (38.4)	29.0 (24.9, NE)	100	35 (35.0)	30.7 (25.4, NE)	1.21	0.81, 1.83	0.3525
(1) Restricted activity	61	23 (37.7)	26.3 (24.8, NE)	31	10 (32.3)	NE (NE, NE)	0.95	0.47, 2.10	0.9007
Interaction p-value									0.5867
Baseline CA-125 value									
<=ULN	228	87 (38.2)	30.4 (25.0, NE)	118	40 (33.9)	30.7 (25.8, NE)	1.13	0.78, 1.65	0.5348
>ULN	27	9 (33.3)	25.3 (20.0, NE)	14	5 (35.7)	25.4 (11.3, NE)	1.02	0.35, 3.33	0.9660
Interaction p-value									0.8738
Histological grade									
High grade	255	96 (37.6)	30.4 (25.3, NE)	132	45 (34.1)	28.0 (25.4, NE)	1.11	0.79, 1.60	0.5482
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	63 (38.0)	29.0 (26.0, NE)	80	25 (31.3)	30.7 (25.8, NE)	1.25	0.80, 2.03	0.3333
Residue	79	26 (32.9)	NE (NE, NE)	44	16 (36.4)	28.0 (22.1, NE)	0.90	0.49, 1.71	0.7344
Interaction p-value									0.4015

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[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.3.3.7 PAOLA1 Appendix: Summary of subgroup analysis of EORTC QLQ-OV28 Symptom scale/items: Other single items (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	48 (32.9)	NE (NE, NE)	79	27 (34.2)	30.7 (22.1, NE)	0.94	0.59, 1.53	0.7964
Interval	99	41 (41.4)	26.3 (21.9, NE)	45	14 (31.1)	28.0 (23.5, NE)	1.45	0.81, 2.76	0.2174
Interaction p-value									0.2644
Myriad tumour BRCA mutation status									
tBRCAm	158	61 (38.6)	26.3 (24.9, NE)	77	23 (29.9)	30.7 (25.8, NE)	1.29	0.81, 2.12	0.2934
Non-tBRCAm	97	35 (36.1)	NE (NE, NE)	55	22 (40.0)	25.4 (19.4, NE)	0.94	0.55, 1.62	0.8096
Interaction p-value									0.3845
Status somatic BRCA mutations									
sBRCAm	22	8 (36.4)	NE (NE, NE)	7	2 (28.6)	NE (NE, NE)	1.42	0.36, 9.43	0.6453
gBRCAm	66	28 (42.4)	26.3 (24.7, NE)	31	8 (25.8)	NE (NE, NE)	1.69	0.81, 3.98	0.1703
Non-BRCAm	41	16 (39.0)	NE (NE, NE)	22	9 (40.9)	NE (NE, NE)	0.92	0.41, 2.18	0.8429
Interaction p-value									0.5697

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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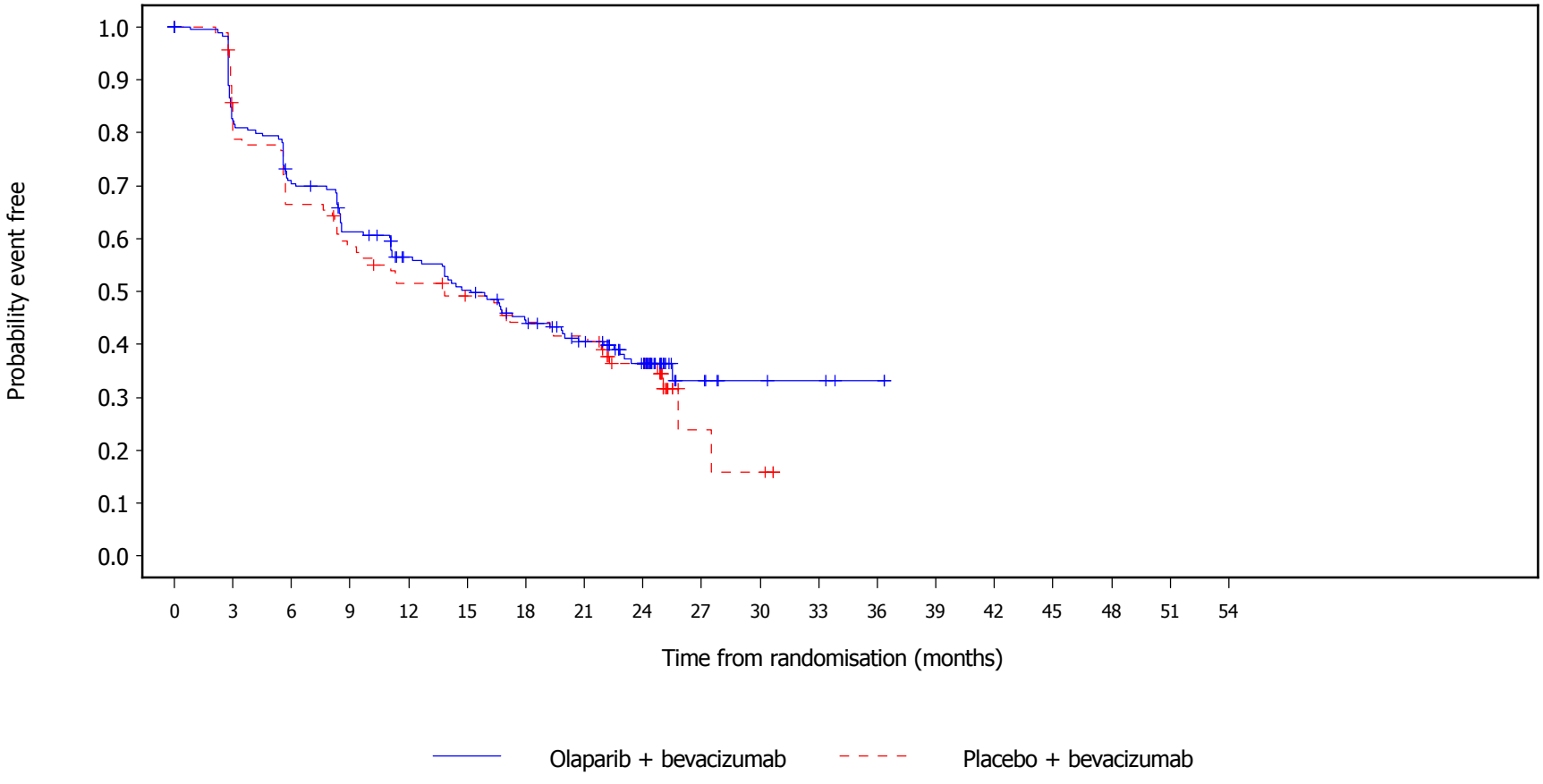
Figure 2.3.4.1 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 15) time to clinically meaningful deterioration for Age group=<65 years
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

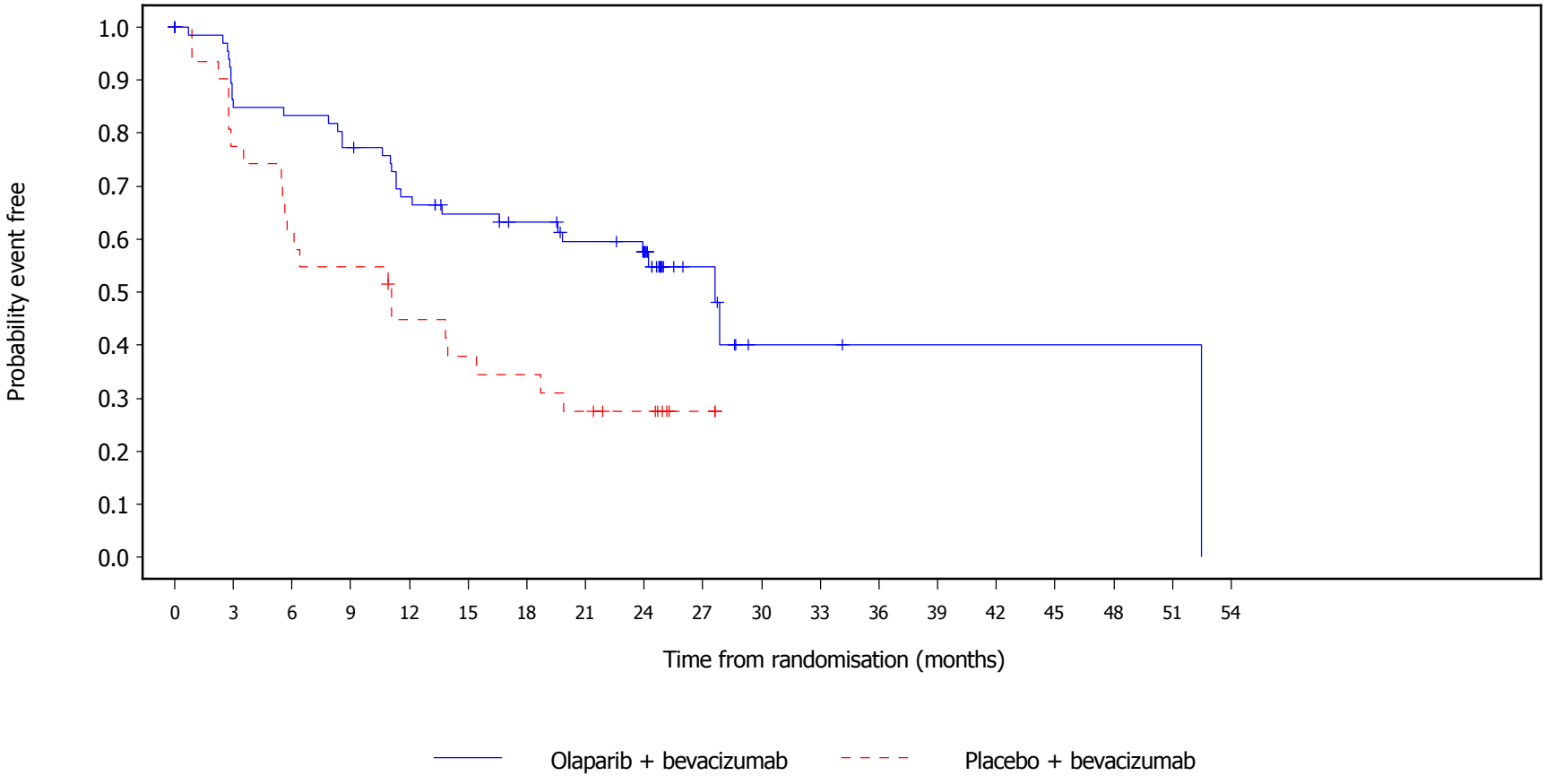


Number of patients at risk:

185	147	125	107	91	81	69	57	42	8	4	3	1	0	0	0	0	0	0	Olaparib + bevacizumab
98	73	59	51	44	40	35	33	24	3	2	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.2 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 15) time to clinically meaningful deterioration for Age group=>=65 years
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

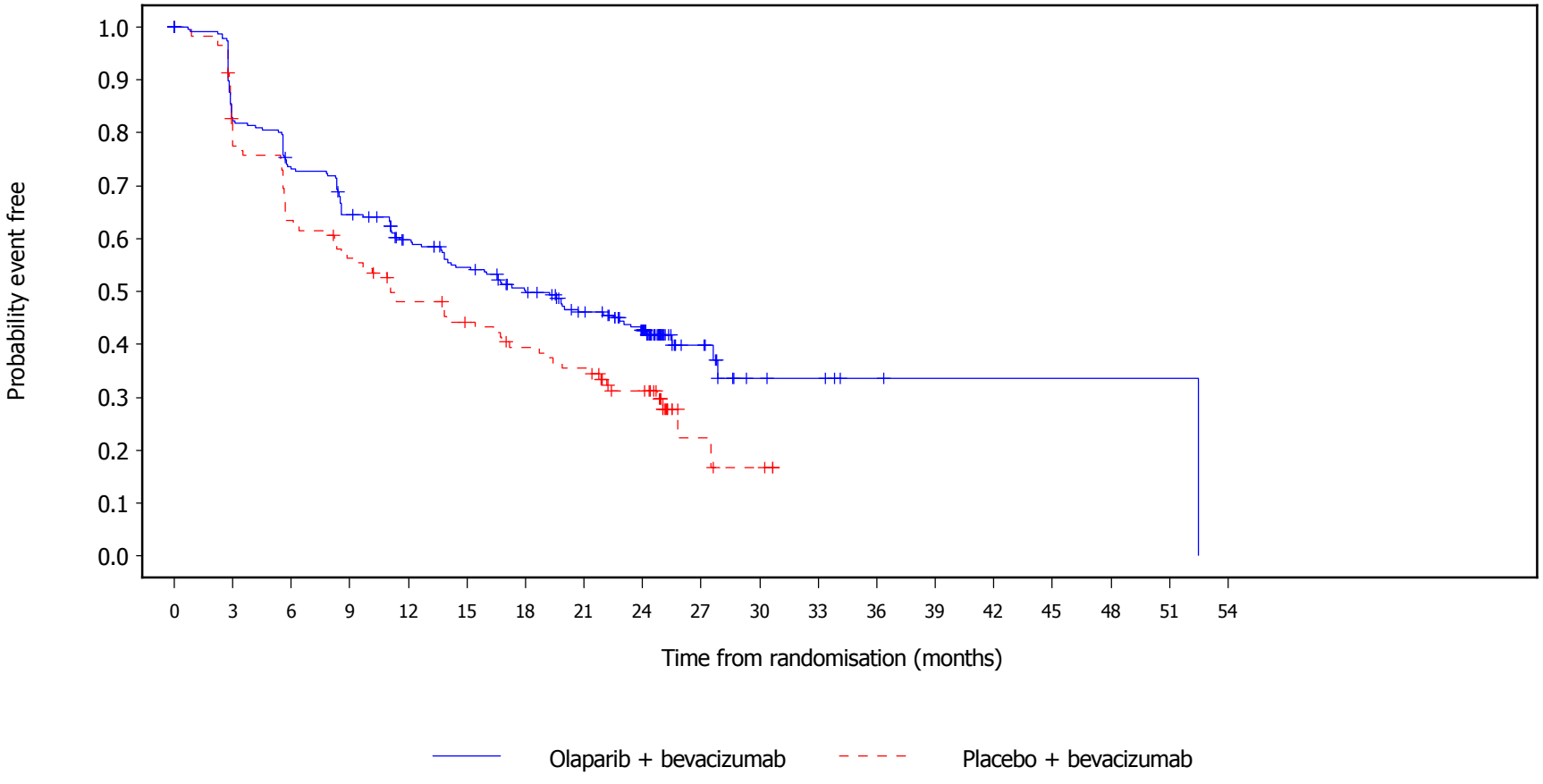


Number of patients at risk:

70	57	55	51	44	39	36	32	26	8	2	2	1	1	1	1	1	0	Olaparib + bevacizumab
34	24	19	17	13	11	10	8	6	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.3 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 15) time to clinically meaningful deterioration for Region=Europe
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

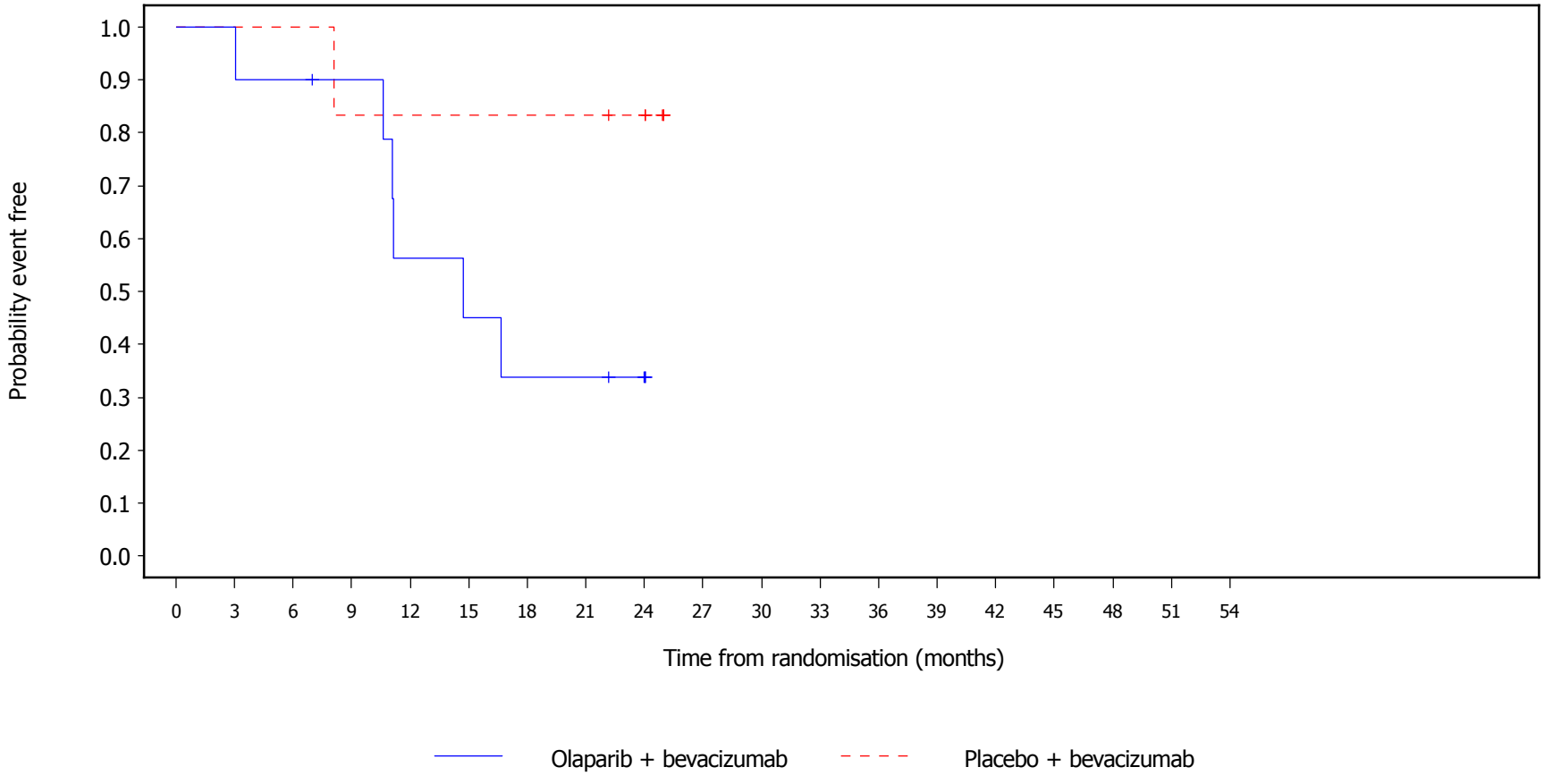


Number of patients at risk:

245	194	171	150	130	116	102	86	67	16	6	5	2	1	1	1	1	1	0	Olaparib + bevacizumab
126	91	72	63	52	46	40	36	26	4	2	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.4 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 15) time to clinically meaningful deterioration for Region=Japan
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

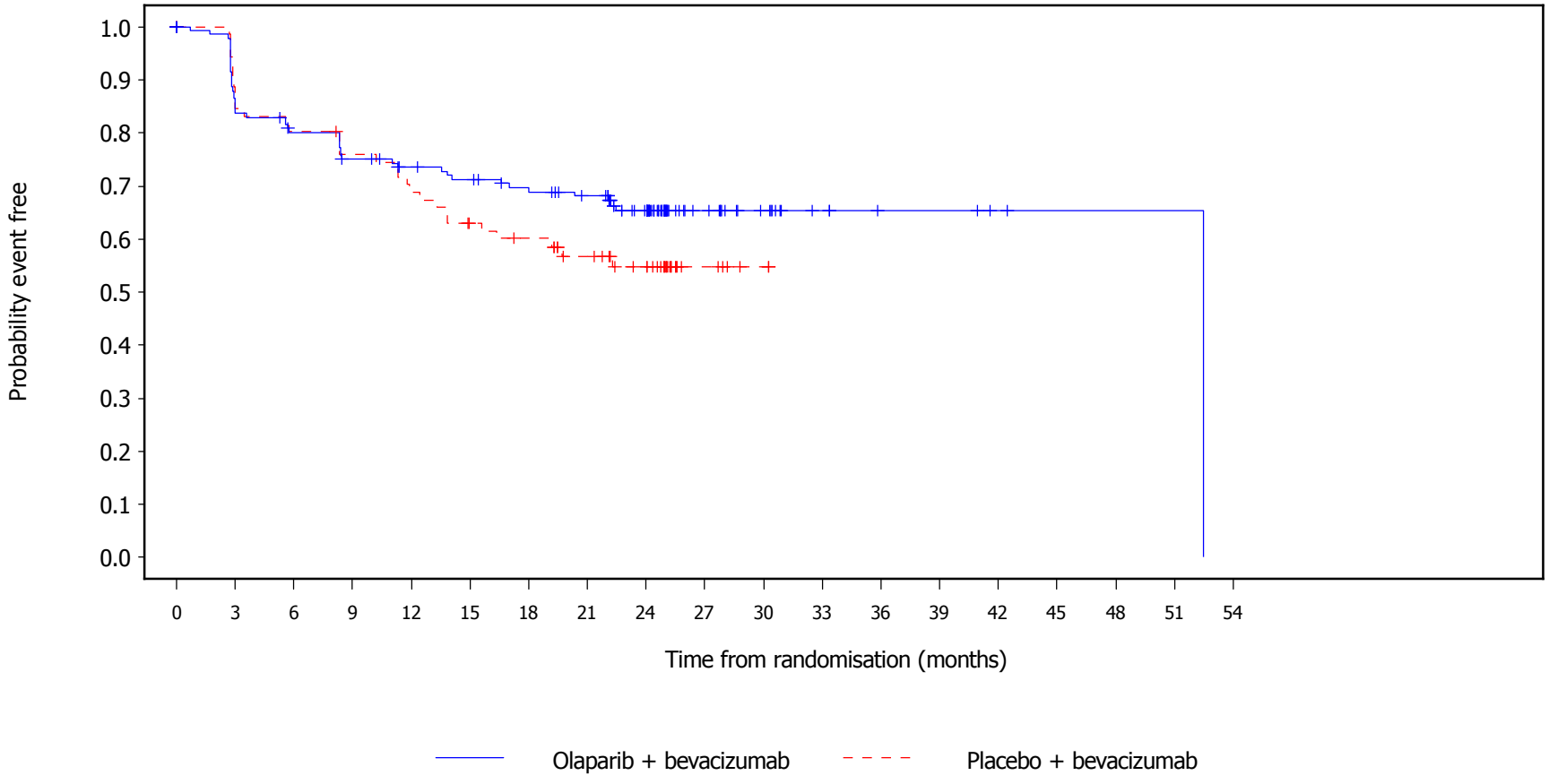


Number of patients at risk:

10	10	9	8	5	4	3	3	1	0	0	0	0	0	0	0	0	0	Olaparib + bevacizumab
6	6	6	5	5	5	5	5	4	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.5 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 15) time to clinically meaningful deterioration for Timing of cytoreductive surgery=Upfront
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

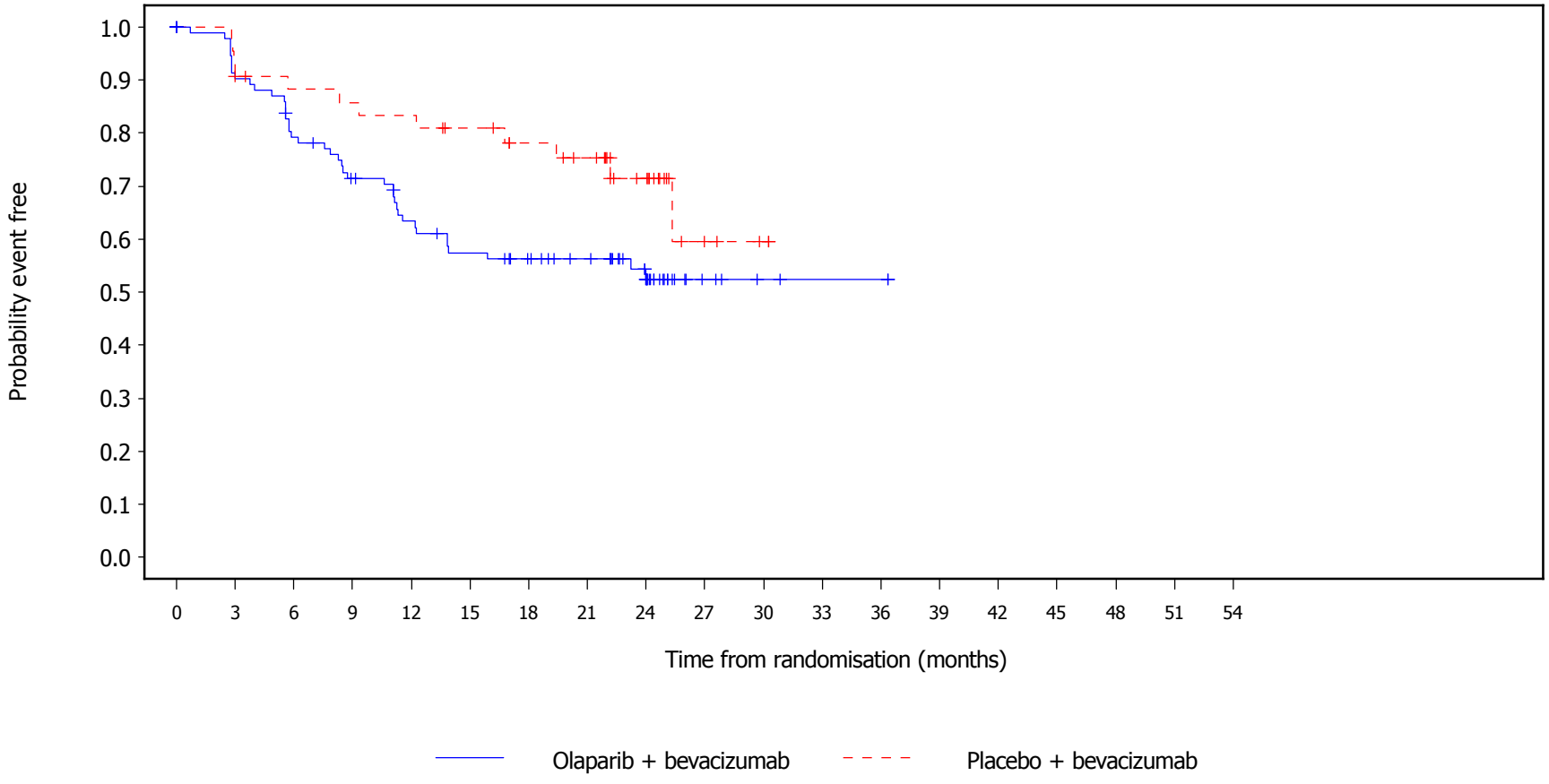


Number of patients at risk:

146	121	111	103	97	93	88	82	64	23	14	7	4	4	2	1	1	1	0 Olaparib + bevacizumab
79	63	57	53	48	42	39	32	25	5	1	0	0	0	0	0	0	0	0 Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.6 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 15) time to clinically meaningful deterioration for Timing of cytoreductive surgery=Interval
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

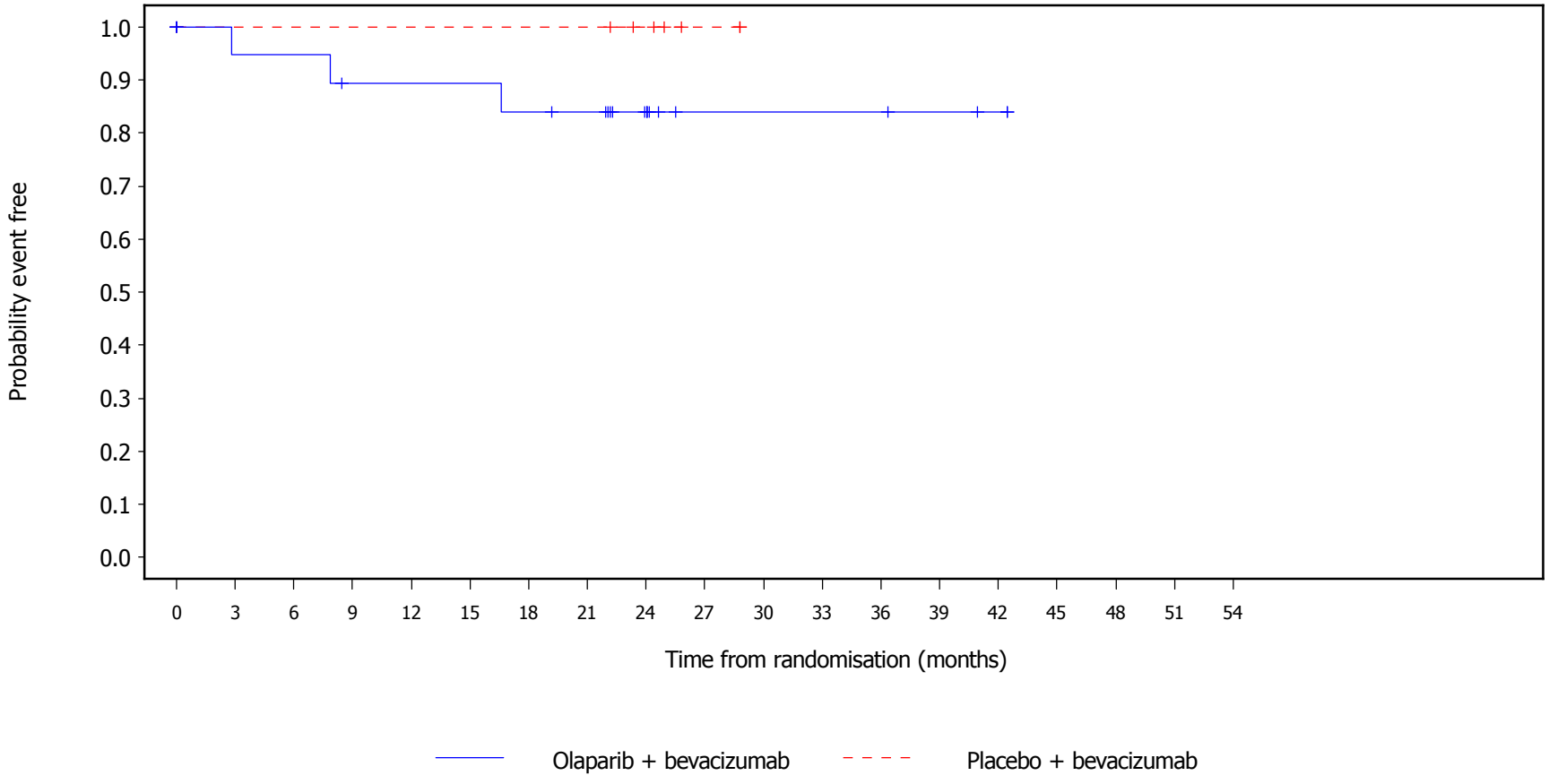


Number of patients at risk:

99	83	72	63	54	48	43	38	24	5	2	1	1	0	0	0	0	0	0	Olaparib + bevacizumab
45	40	36	35	34	31	27	24	15	3	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.7 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 15) time to clinically meaningful deterioration for Status somatic BRCA mutations=sBRCAm
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

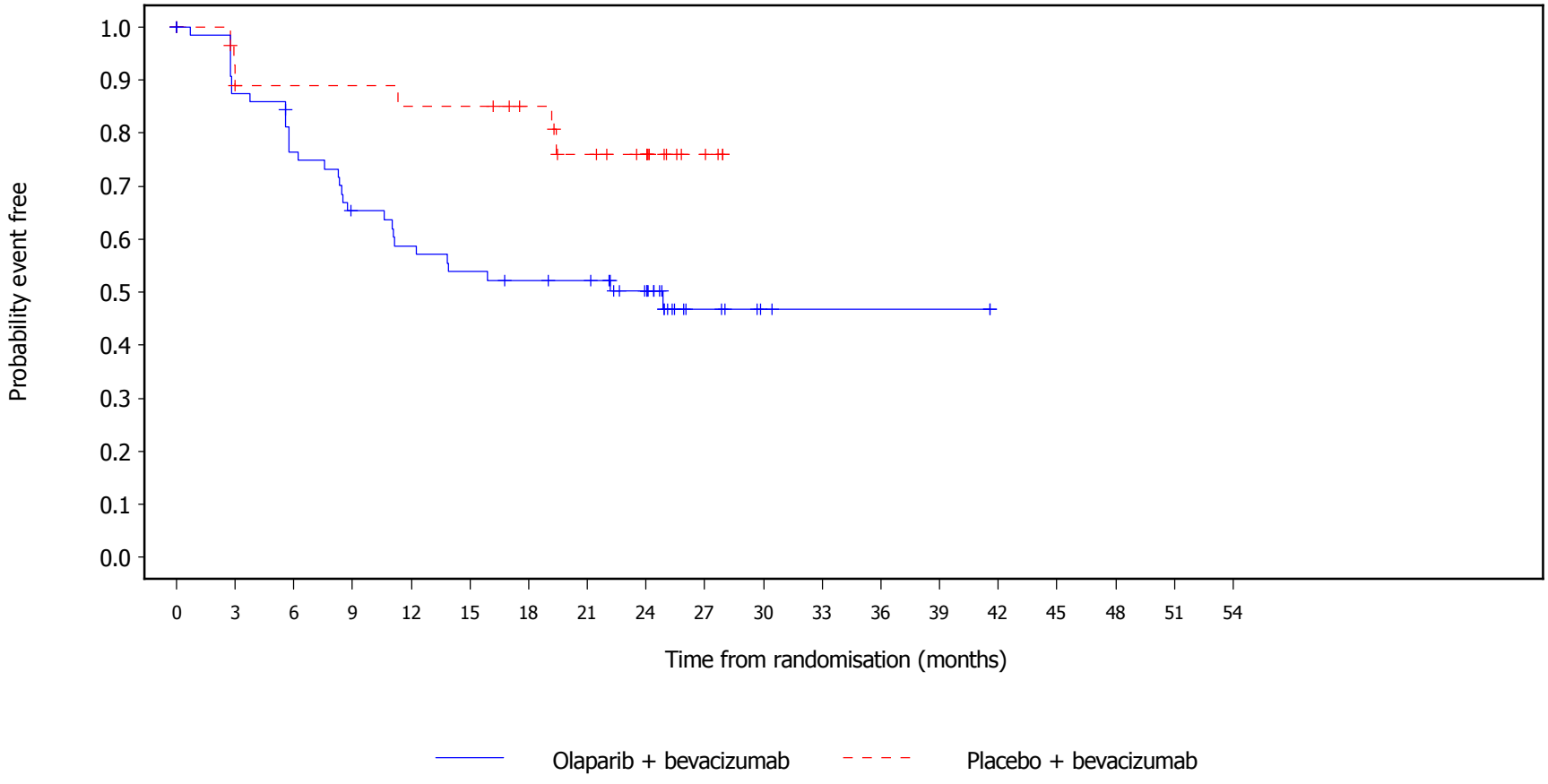


Number of patients at risk:

22	18	18	16	16	16	15	14	9	3	3	3	3	2	1	0	0	0	0 Olaparib + bevacizumab
7	6	6	6	6	6	6	6	4	1	0	0	0	0	0	0	0	0	0 Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.8 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 15) time to clinically meaningful deterioration for Status somatic BRCA mutations=gBRCAm
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

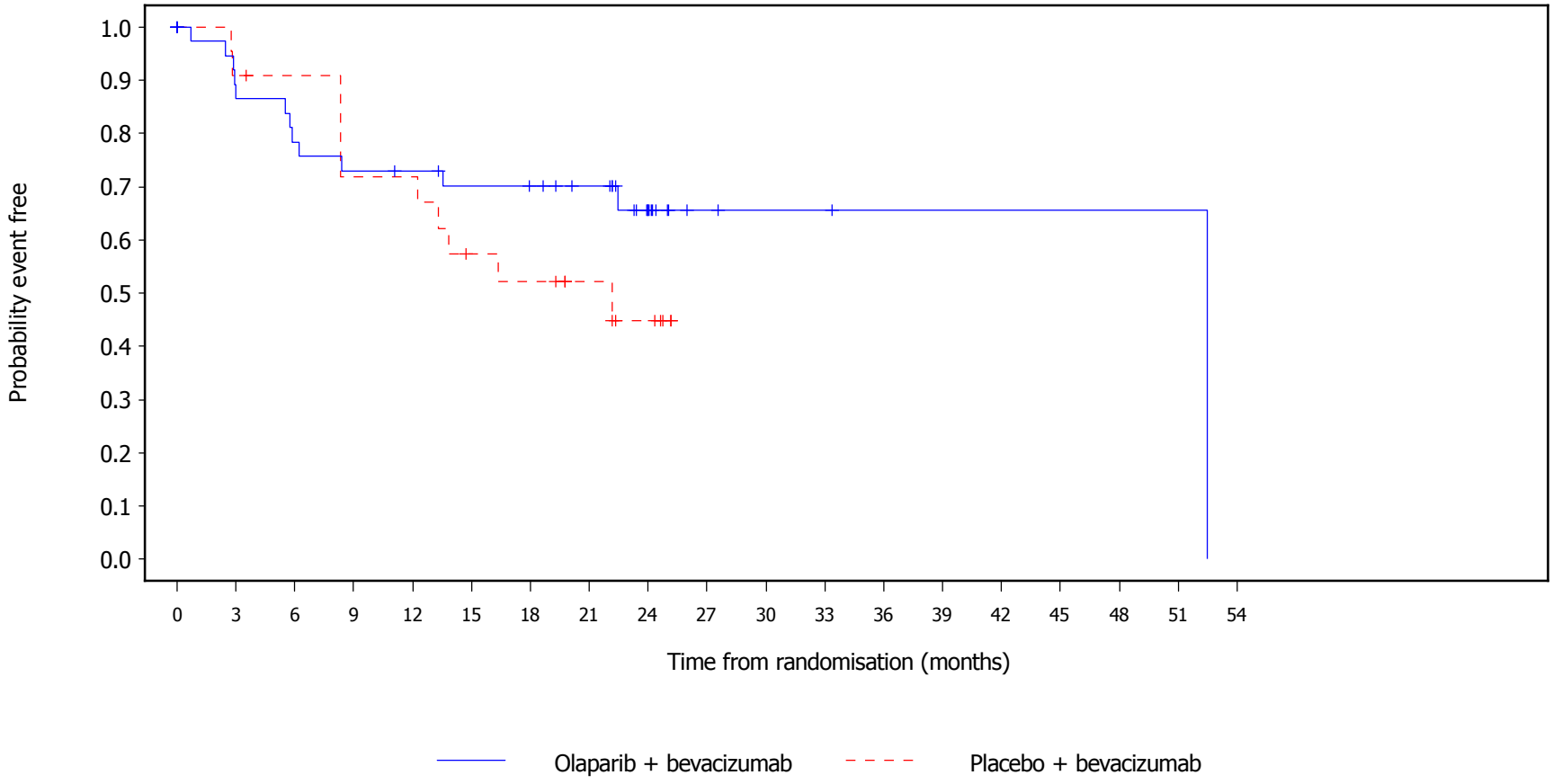


Number of patients at risk:

66	56	48	40	36	33	31	30	23	6	2	1	1	1	0	0	0	0	0	Olaparib + bevacizumab
31	25	23	23	22	22	19	15	12	3	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Figure 2.3.4.9 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 15) time to clinically meaningful deterioration for Status somatic BRCA mutations=Non-BRCAm
Full Analysis Set, HRD[42] positive, DCO 22MAR2020



Number of patients at risk:

41	32	29	27	26	24	23	20	10	3	2	2	1	1	1	1	1	0	Olaparib + bevacizumab
22	20	19	15	15	11	10	7	4	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.

Table 2.4.3.1 PAOLA1 Appendix: Summary of subgroup analysis of EQ-5D-5L Visual analogue scale (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	32 (34.8)	NE (NE, NE)	48	22 (45.8)	24.1 (16.4, NE)	0.73	0.43, 1.28	0.2659
NED/CR [IDS]	74	41 (55.4)	18.6 (11.4,24.9)	38	16 (42.1)	22.1 (12.1, NE)	1.34	0.77, 2.46	0.3098
NED/CR [Chemo]	40	17 (42.5)	NE (NE, NE)	20	8 (40.0)	26.7 (5.7, NE)	1.17	0.52, 2.86	0.7146
PR	49	26 (53.1)	14.5 (5.7, NE)	26	12 (46.2)	19.9 (7.9, NE)	1.14	0.59, 2.35	0.7028
Interaction p-value									0.4791
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	66 (44.0)	NE (NE, NE)	65	25 (38.5)	NE (NE, NE)	1.19	0.76, 1.91	0.4636
non-tBRCAm	105	50 (47.6)	19.9 (13.6, NE)	67	33 (49.3)	21.9 (13.9,27.8)	0.96	0.62, 1.51	0.8638
Interaction p-value									0.5198
First line treatment outcome (eCRF)									
NED [PDS]	89	32 (36.0)	NE (NE, NE)	47	22 (46.8)	24.1 (13.8, NE)	0.74	0.43, 1.29	0.2783
NED/CR [IDS]	74	42 (56.8)	17.5 (11.3,24.2)	32	13 (40.6)	22.1 (12.1, NE)	1.42	0.79, 2.76	0.2541
NED/CR [Chemo]	39	16 (41.0)	NE (NE, NE)	18	8 (44.4)	26.7 (3.5, NE)	0.95	0.42, 2.33	0.8989
PR	50	25 (50.0)	17.5 (6.0, NE)	34	15 (44.1)	23.5 (11.3, NE)	1.20	0.64, 2.32	0.5825
Interaction p-value									0.4329
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	64 (43.5)	NE (NE, NE)	67	25 (37.3)	NE (NE, NE)	1.20	0.76, 1.94	0.4373
non-tBRCAm	108	52 (48.1)	19.9 (13.7, NE)	65	33 (50.8)	21.9 (13.9,27.8)	0.94	0.61, 1.47	0.7966
Interaction p-value									0.4611
Age group									
<65 years	185	84 (45.4)	25.3 (16.8, NE)	98	40 (40.8)	27.8 (22.1, NE)	1.14	0.78, 1.67	0.5068
>=65 years	70	32 (45.7)	24.2 (11.4, NE)	34	18 (52.9)	18.7 (5.8, NE)	0.82	0.47, 1.49	0.5058
Interaction p-value									0.3594

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 2.4.3.1 PAOLA1 Appendix: Summary of subgroup analysis of EQ-5D-5L Visual analogue scale (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	85 (46.7)	24.0 (14.0, NE)	90	39 (43.3)	27.8 (18.7, NE)	1.12	0.77, 1.66	0.5478
IV	73	31 (42.5)	25.3 (16.8, NE)	42	19 (45.2)	23.5 (8.5, NE)	0.87	0.50, 1.57	0.6341
Interaction p-value									0.4678
Region									
Europe	245	112 (45.7)	24.9 (17.3, NE)	126	56 (44.4)	26.7 (17.4, NE)	1.02	0.74, 1.41	0.9269
Japan	10	4 (40.0)	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	1.63	0.32, 11.77	0.5629
Interaction p-value									0.5823
ECOG performance status at Baseline									
(0) Normal activity	190	89 (46.8)	24.2 (16.4, NE)	100	46 (46.0)	26.7 (17.0, NE)	1.04	0.73, 1.50	0.8180
(1) Restricted activity	61	26 (42.6)	25.3 (13.7, NE)	31	12 (38.7)	24.0 (11.3, NE)	1.04	0.54, 2.13	0.9137
Interaction p-value									0.9920
Baseline CA-125 value									
<=ULN	228	99 (43.4)	NE (NE, NE)	118	50 (42.4)	26.7 (21.9, NE)	1.01	0.72, 1.43	0.9602
>ULN	27	17 (63.0)	5.8 (3.0,25.3)	14	8 (57.1)	17.0 (5.6, NE)	1.38	0.61, 3.39	0.4440
Interaction p-value									0.4921
Histological grade									
High grade	255	116 (45.5)	25.3 (17.5, NE)	132	58 (43.9)	26.7 (19.9, NE)	1.04	0.76, 1.44	0.8041
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	75 (45.2)	24.9 (16.6, NE)	80	35 (43.8)	24.1 (17.4, NE)	1.02	0.69, 1.54	0.9323
Residue	79	35 (44.3)	NE (NE, NE)	44	18 (40.9)	26.7 (14.7, NE)	1.16	0.67, 2.10	0.5962
Interaction p-value									0.7030

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubpr3.sas ettesubpr3caa 24MAR2022:14:14 kvbv306

Table 2.4.3.1 PAOLA1 Appendix: Summary of subgroup analysis of EQ-5D-5L Visual analogue scale (MID = 15) time to clinically meaningful deterioration
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	56 (38.4)	NE (NE, NE)	79	33 (41.8)	27.8 (18.7, NE)	0.91	0.59, 1.41	0.6582
Interval	99	54 (54.5)	18.6 (11.5,24.9)	45	20 (44.4)	23.5 (13.9, NE)	1.30	0.79, 2.22	0.3097
Interaction p-value									0.2912
Myriad tumour BRCA mutation status									
tBRCAm	158	72 (45.6)	25.3 (16.8, NE)	77	29 (37.7)	27.8 (22.1, NE)	1.24	0.81, 1.93	0.3244
Non-tBRCAm	97	44 (45.4)	24.9 (13.6, NE)	55	29 (52.7)	19.9 (8.5, NE)	0.85	0.53, 1.37	0.4893
Interaction p-value									0.2419
Status somatic BRCA mutations									
sBRCAm	22	6 (27.3)	NE (NE, NE)	7	2 (28.6)	NE (NE, NE)	1.29	0.30, 8.80	0.7511
gBRCAm	66	33 (50.0)	22.6 (13.8, NE)	31	11 (35.5)	NE (NE, NE)	1.54	0.80, 3.19	0.2013
Non-BRCAm	41	18 (43.9)	NE (NE, NE)	22	11 (50.0)	21.9 (3.5, NE)	0.83	0.40, 1.81	0.6221
Interaction p-value									0.4843

Time to worsening is defined as time from randomisation until earliest clinically meaningful worsening. Patients who have not shown a clinically meaningful worsening or who cannot experience a worsening will be censored at last PRO assessment. Patients who died <168 days of last PRO assessment will be censored at death. Those with no evaluable baseline will be censored at randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, model includes treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s2/tlf/prod/program/ttesubpr3.sas ettesubpr3caa 24MAR2022:14:14 kvbv306

Table 3.1.1 PAOLA1 Appendix: Summary of analysis of time to sustained worsening in EORTC QLQ-C30 global QoL/health status, functional, symptom and single item scales (MID=10)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)						
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]		2-sided p-value [c]
EORTC QLQ-C30 Global QoL/health status (MID = 10)	255	66 (25.9)	38.7 (30.9, NE)	132	40 (30.3)	28.0 (25.6, NE)	0.78	0.52,	1.17	0.2194
EORTC QLQ-C30 Functional scale: Physical (MID = 10)	255	38 (14.9)	52.5 (NE, NE)	132	37 (28.0)	28.0 (26.5, NE)	0.48	0.30,	0.77	0.0016*
EORTC QLQ-C30 Functional scale: Role (MID = 10)	255	59 (23.1)	44.9 (38.6, NE)	132	46 (34.8)	27.7 (24.9, NE)	0.58	0.39,	0.87	0.0073*
EORTC QLQ-C30 Functional scale: Cognitive (MID = 10)	255	78 (30.6)	30.4 (27.8, NE)	132	46 (34.8)	27.8 (24.9, NE)	0.80	0.55,	1.18	0.2553
EORTC QLQ-C30 Functional scale: Emotional (MID = 10)	255	72 (28.2)	41.9 (31.0, NE)	132	48 (36.4)	26.5 (24.9,30.7)	0.63	0.43,	0.92	0.0156*
EORTC QLQ-C30 Functional scale: Social (MID = 10)	255	62 (24.3)	41.9 (41.9, NE)	132	38 (28.8)	29.3 (25.4, NE)	0.74	0.49,	1.13	0.1504
EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 10)	255	41 (16.1)	49.3 (NE, NE)	132	32 (24.2)	28.7 (27.8, NE)	0.60	0.37,	0.97	0.0322*
EORTC QLQ-C30 Single item symptom scale: Constipation (MID = 10)	255	66 (25.9)	NE (NE, NE)	132	34 (25.8)	28.7 (25.5, NE)	0.99	0.65,	1.52	0.9394

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.

[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.

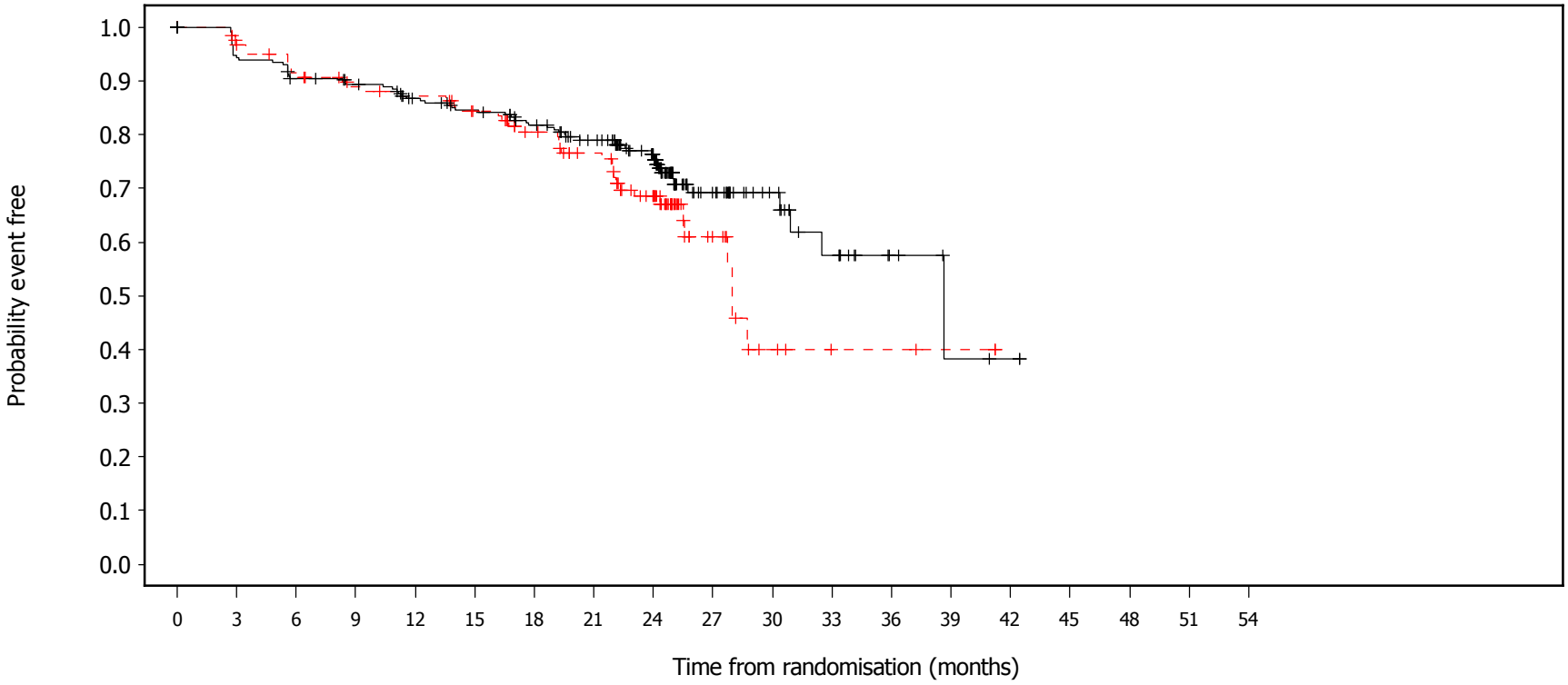
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Table 3.1.1 PAOLA1 Appendix: Summary of analysis of time to sustained worsening in EORTC QLQ-C30 global QoL/health status, functional, symptom and single item scales (MID=10)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EORTC QLQ-C30 Single item symptom scale: Diarrhoea (MID = 10)	255	34 (13.3)	NE (NE, NE)	132	14 (10.6)	NE (NE, NE)	1.06	0.58, 2.06	0.8573
EORTC QLQ-C30 Single item symptom scale: Dyspnoea (MID = 10)	255	52 (20.4)	52.5 (NE, NE)	132	36 (27.3)	NE (NE, NE)	0.70	0.45, 1.09	0.1030
EORTC QLQ-C30 Symptom scale: Fatigue (MID = 10)	255	88 (34.5)	38.7 (25.7, NE)	132	57 (43.2)	25.8 (24.2,28.2)	0.71	0.50, 1.003	0.0479*
EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 10)	255	31 (12.2)	NE (NE, NE)	132	23 (17.4)	NE (NE, NE)	0.60	0.34, 1.06	0.0706
EORTC QLQ-C30 Symptom scale: Nausea and vomiting (MID = 10)	255	52 (20.4)	52.5 (NE, NE)	132	29 (22.0)	NE (NE, NE)	0.90	0.57, 1.46	0.6658
EORTC QLQ-C30 Symptom scale: Pain (MID = 10)	255	78 (30.6)	35.9 (29.9, NE)	132	56 (42.4)	24.9 (23.5,30.7)	0.57	0.40, 0.81	0.0014*
EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 10)	255	77 (30.2)	33.4 (26.0, NE)	132	41 (31.1)	28.2 (25.5, NE)	0.86	0.59, 1.28	0.4502

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Figure 3.1.2.1 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

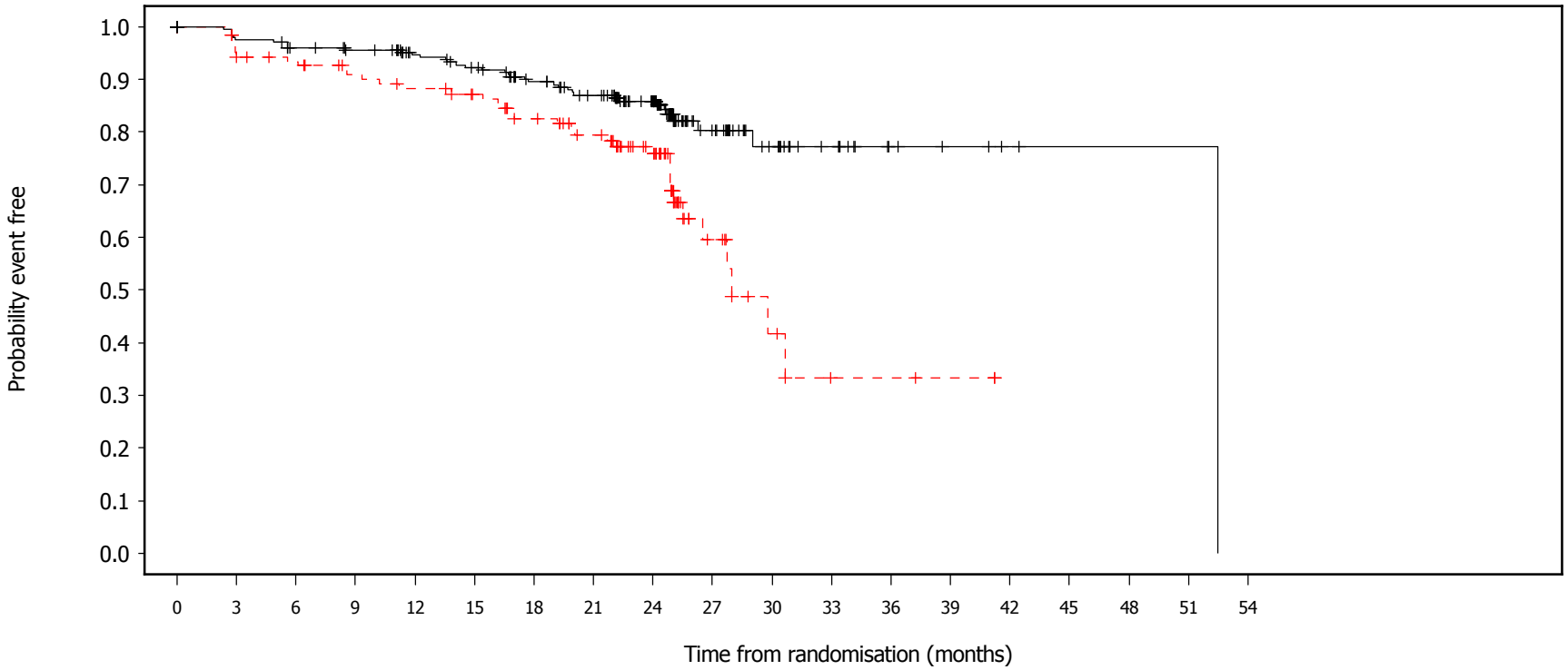


Number of patients at risk:

255	230	218	212	199	191	180	164	129	40	23	13	5	2	1	0	0	0	Olaparib + bevacizumab
132	116	107	100	97	90	80	70	51	15	5	2	2	1	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.2 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Physical (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

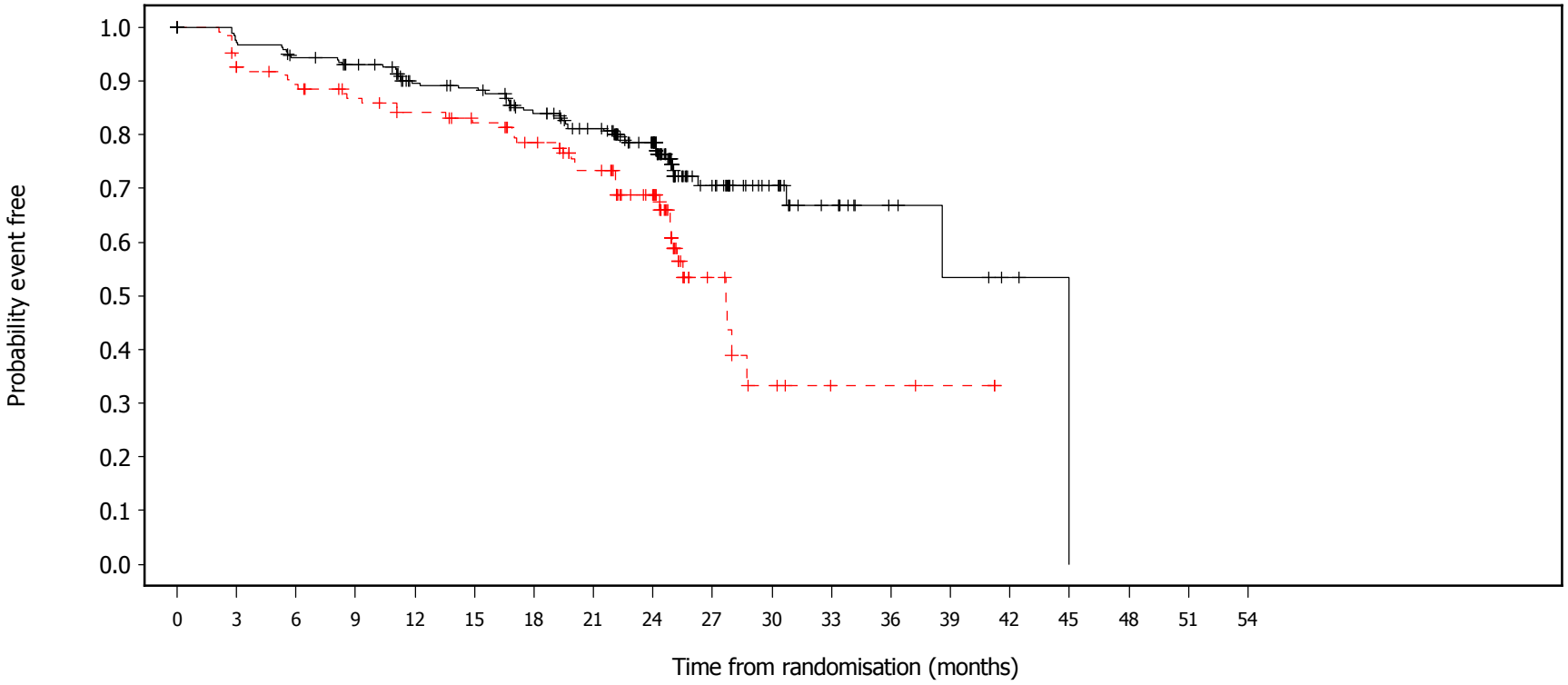


Number of patients at risk:

255	237	229	224	209	201	185	173	133	42	23	14	6	4	2	1	1	1	0 Olaparib + bevacizumab
132	115	110	103	99	94	85	75	56	14	6	2	2	1	0	0	0	0	0 Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.3 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Role (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

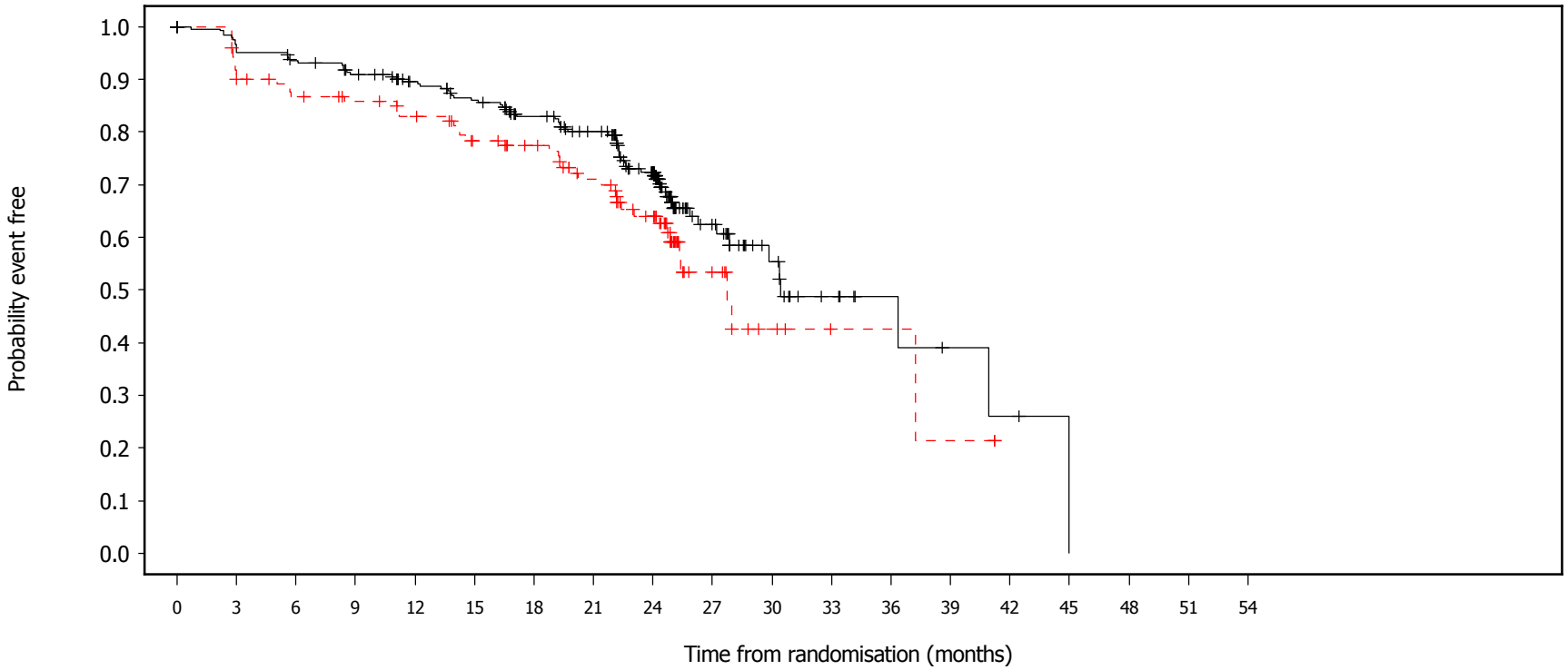


Number of patients at risk:

255	237	227	220	200	196	179	164	129	42	24	13	6	4	2	0	0	0	0	Olaparib + bevacizumab
132	113	106	99	94	89	81	70	53	12	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.4 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Cognitive (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

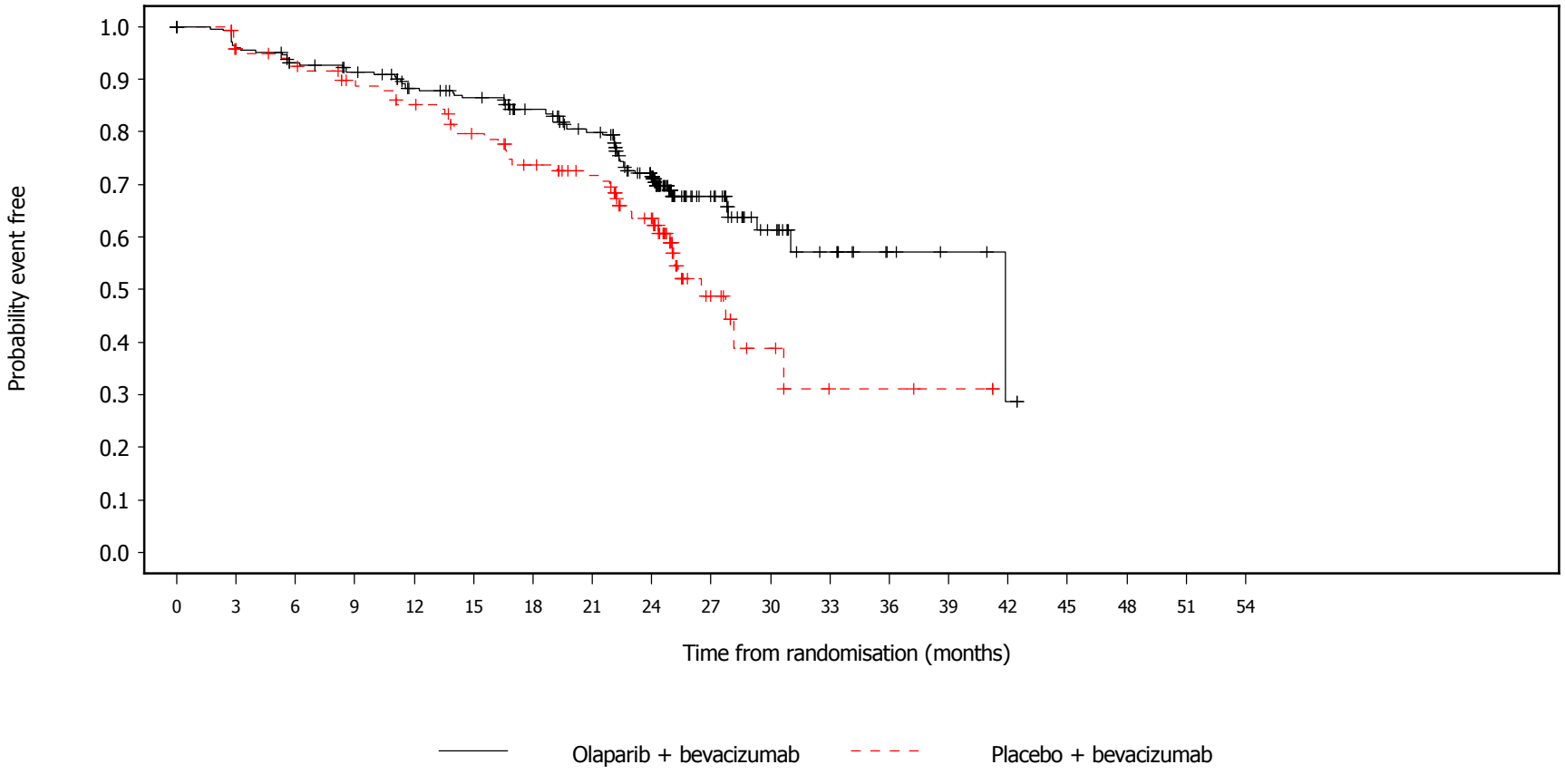


Number of patients at risk:

255	234	226	217	203	192	175	160	118	36	18	9	5	3	2	0	0	0	0	Olaparib + bevacizumab
132	110	101	97	92	82	76	64	50	13	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.5 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Emotional (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

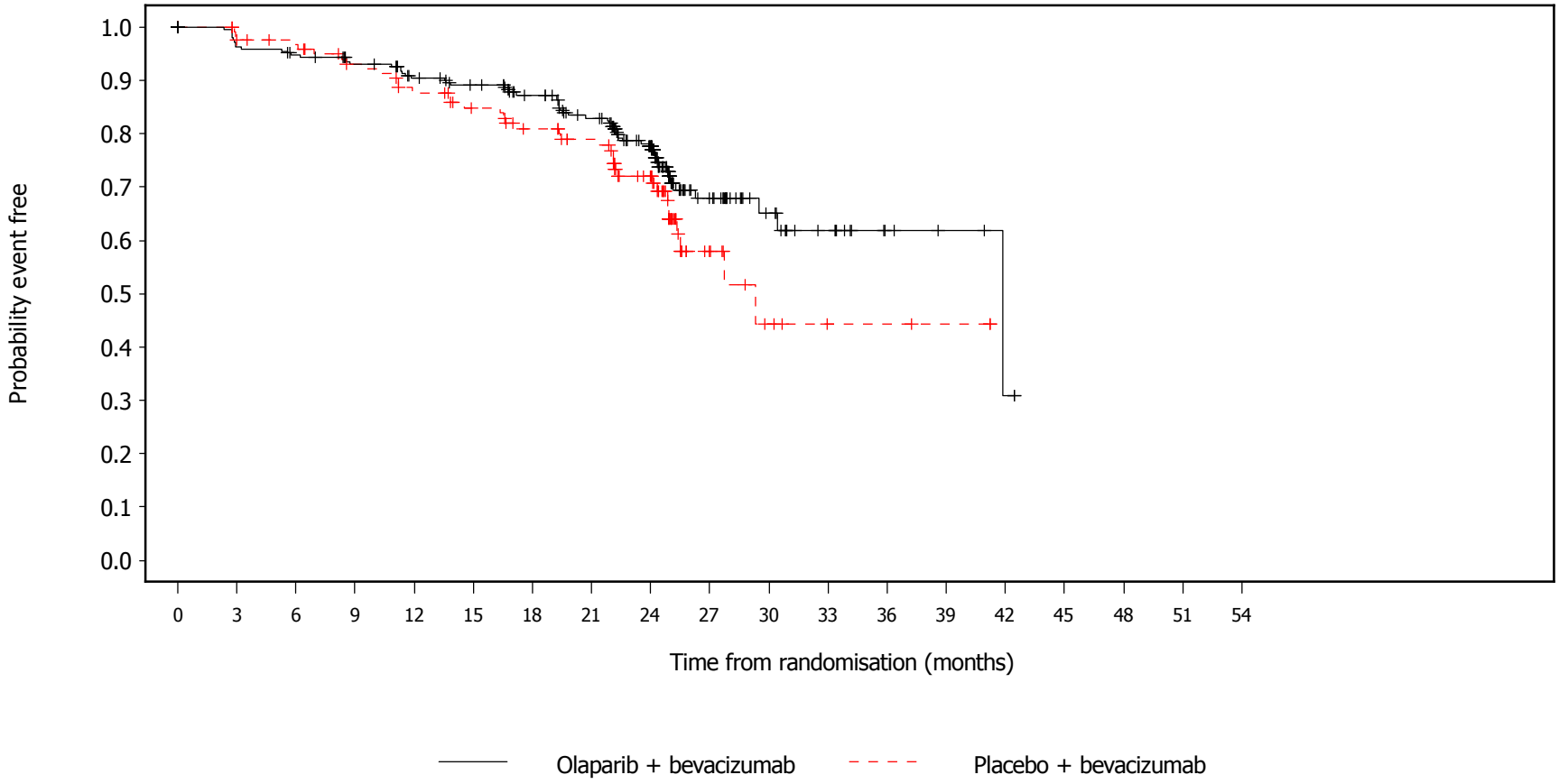


Number of patients at risk:

255	234	223	216	201	194	179	162	124	42	22	12	5	3	1	0	0	0	0	Olaparib + bevacizumab
132	113	106	99	93	83	74	66	49	13	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.6 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Social (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

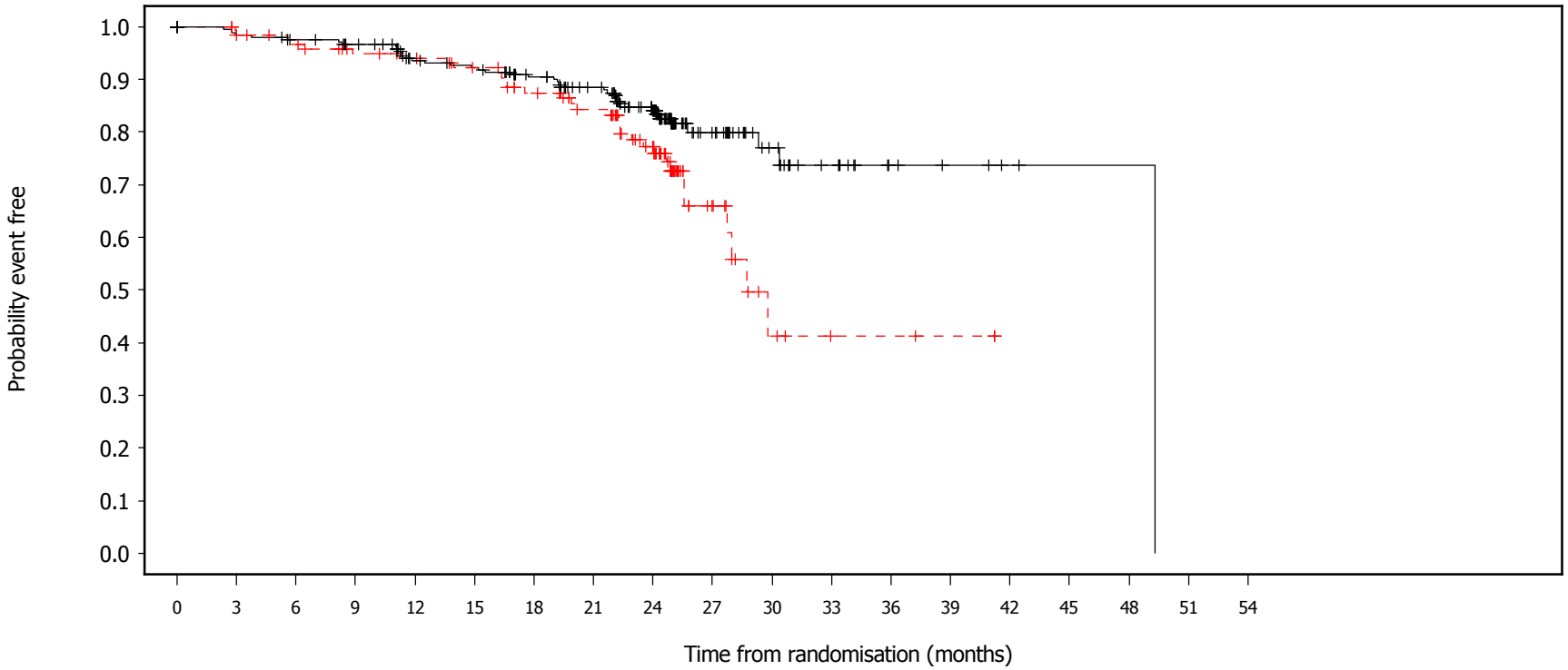


Number of patients at risk:

255	235	229	221	208	200	186	168	128	41	22	13	5	3	1	0	0	0	0	Olaparib + bevacizumab
132	117	112	104	96	88	80	73	55	12	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.7 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

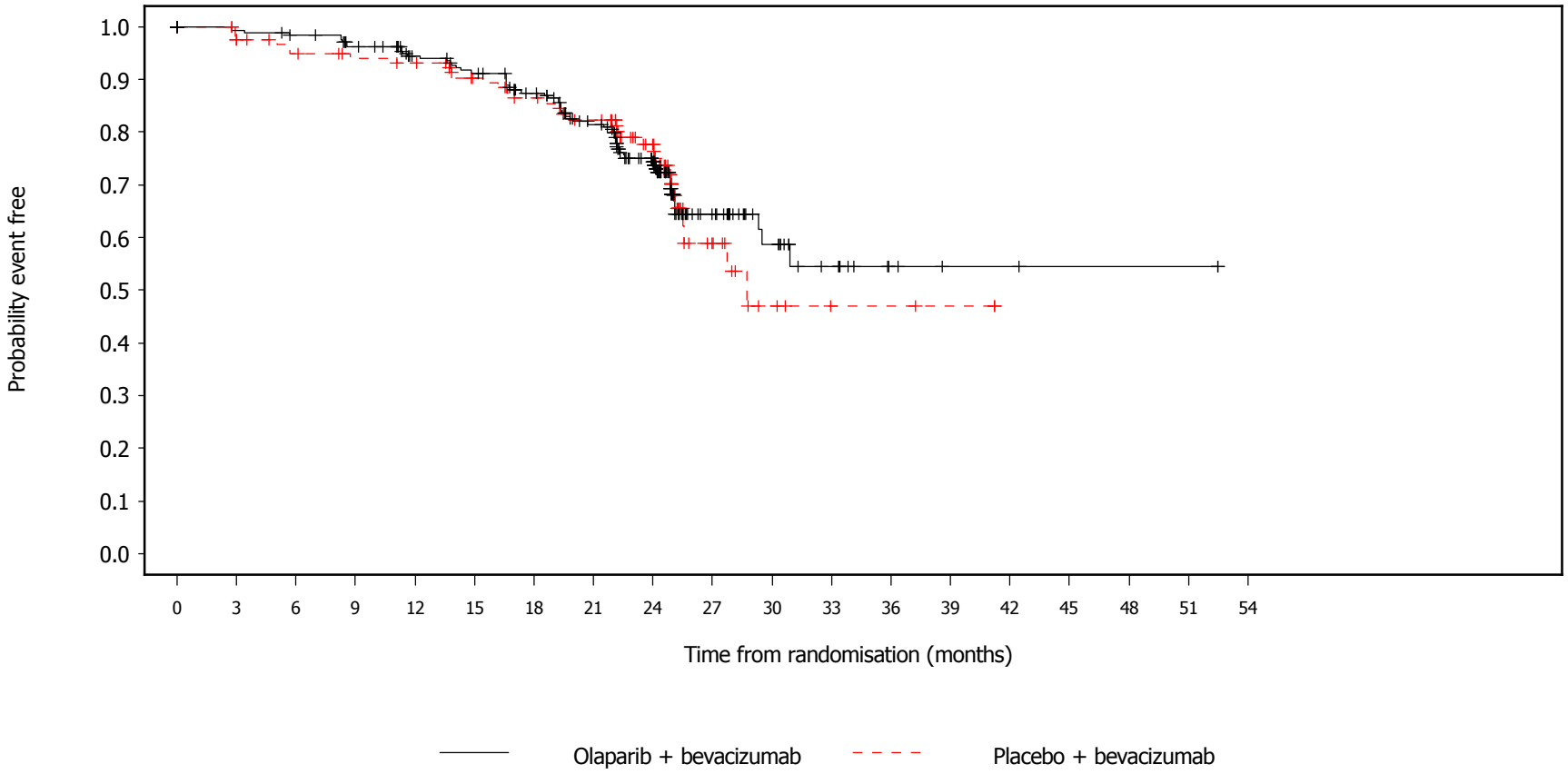


Number of patients at risk:

255	239	234	228	209	204	189	174	136	43	24	14	6	4	2	1	1	0	0	Olaparib + bevacizumab
132	120	114	107	104	98	89	79	59	16	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.8 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Constipation (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

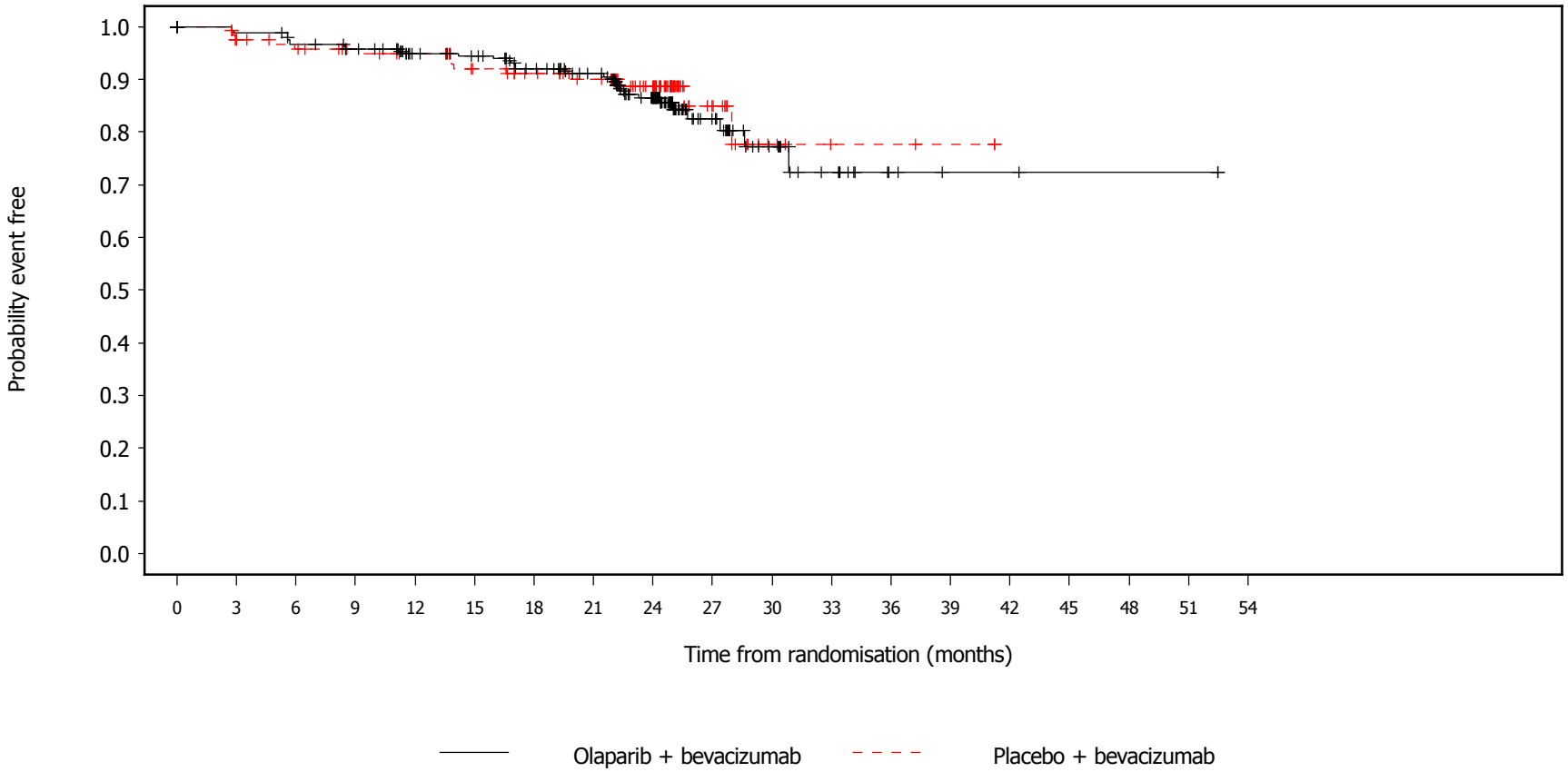


Number of patients at risk:

255	238	234	224	207	198	182	158	119	37	20	11	4	2	2	1	1	1	0	Olaparib + bevacizumab
132	116	109	105	103	94	87	79	59	14	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.9 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Diarrhoea (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

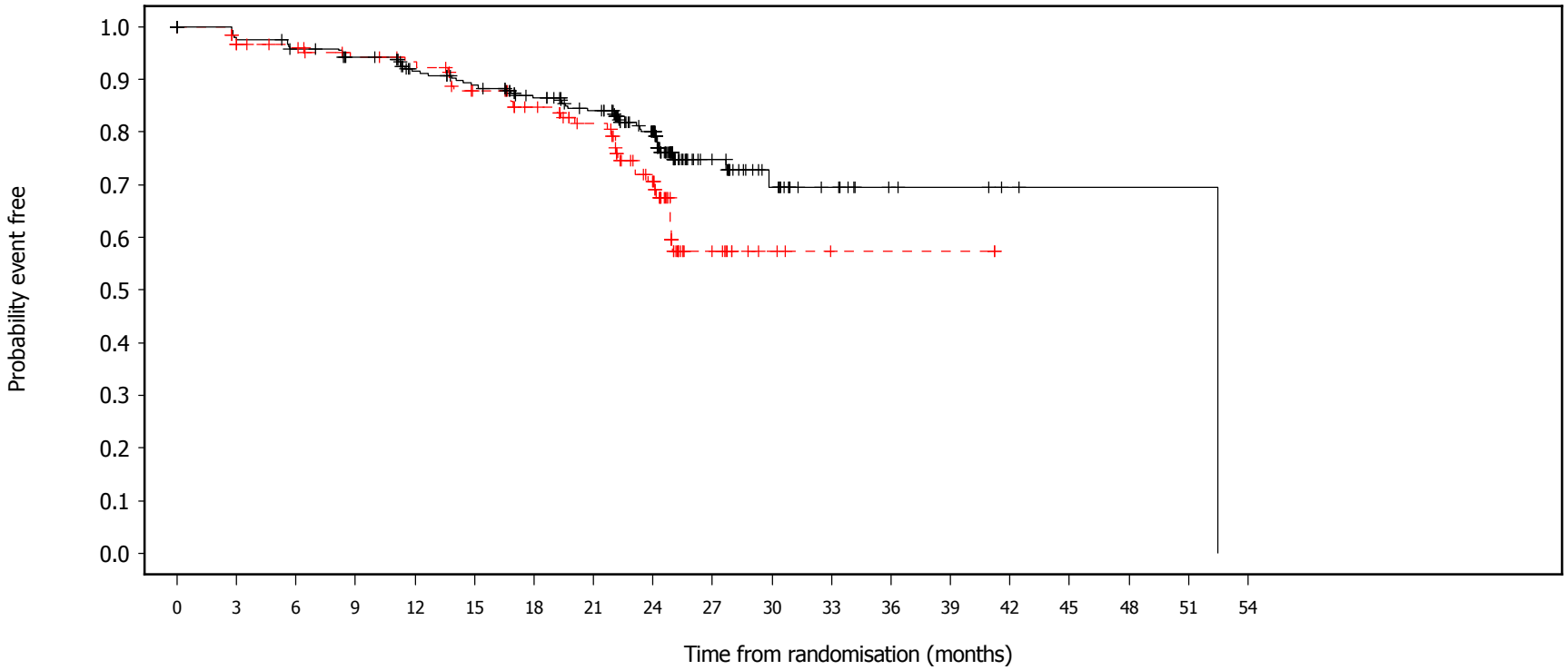


Number of patients at risk:

255	238	231	225	209	203	189	174	130	40	21	12	4	2	2	1	1	1	0	Olaparib + bevacizumab
132	116	110	105	101	94	88	81	63	17	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.10 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Dyspnoea (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

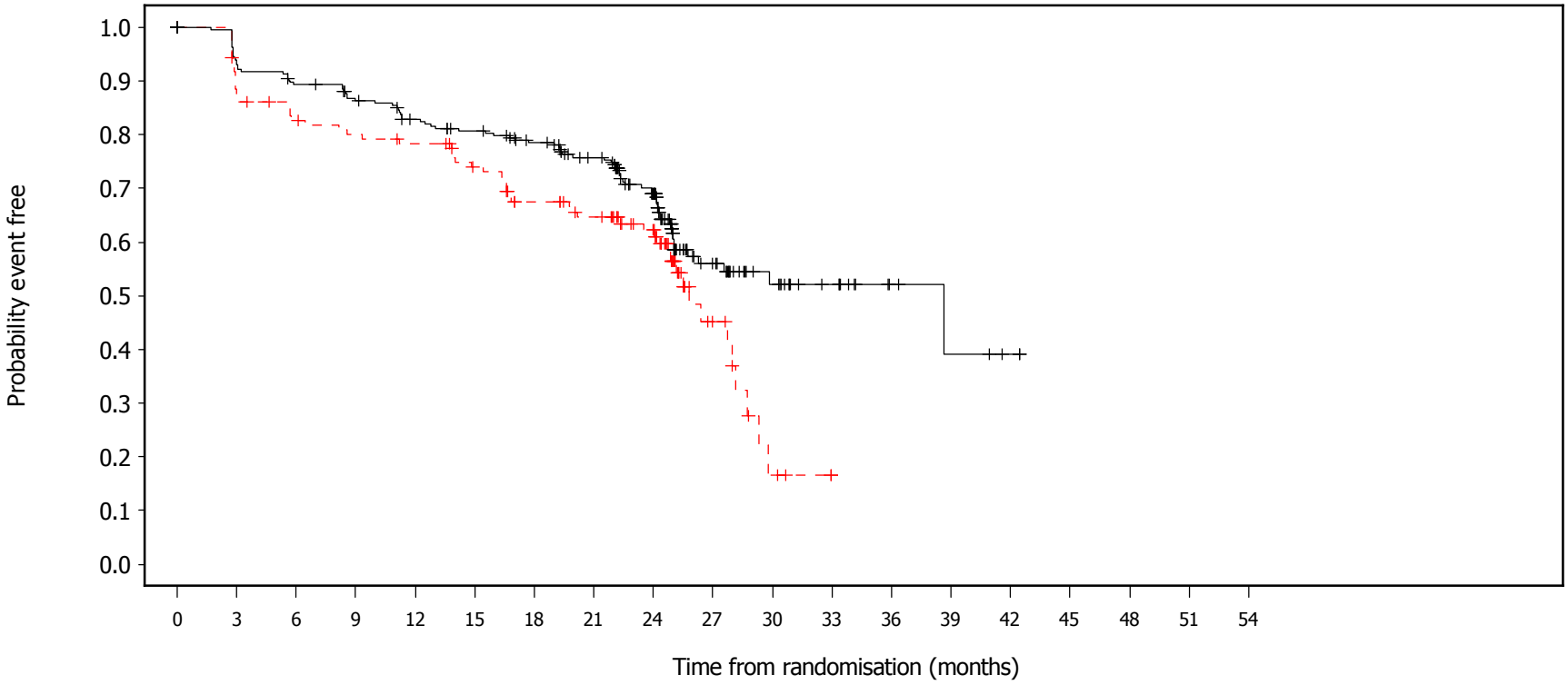


Number of patients at risk:

255	235	228	220	204	195	180	167	125	37	21	11	5	4	2	1	1	1	0	Olaparib + bevacizumab
132	117	112	106	103	92	83	73	50	12	4	1	1	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.11 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Fatigue (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

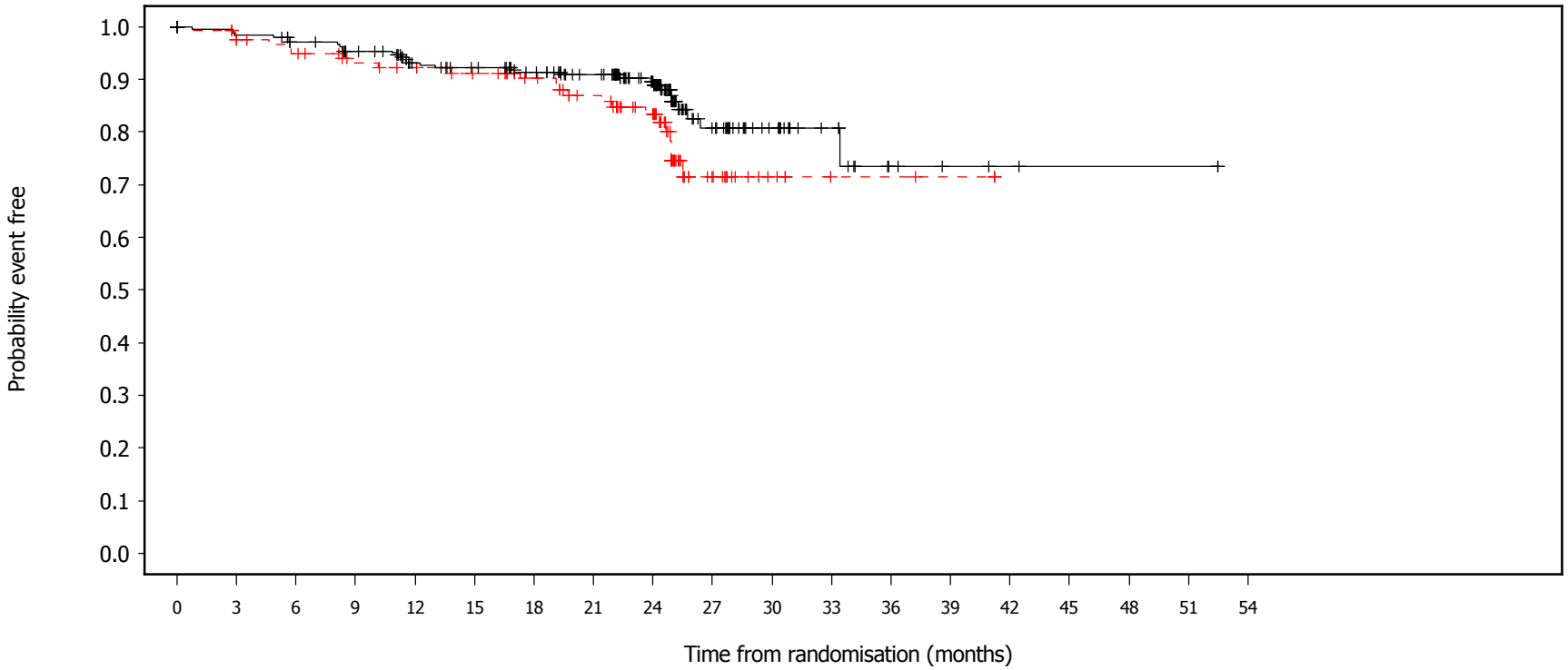


Number of patients at risk:

255	226	215	206	193	185	174	158	119	39	22	13	5	3	1	0	0	0	0	Olaparib + bevacizumab
132	107	98	94	91	82	71	64	50	12	3	0	0	0	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.12 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

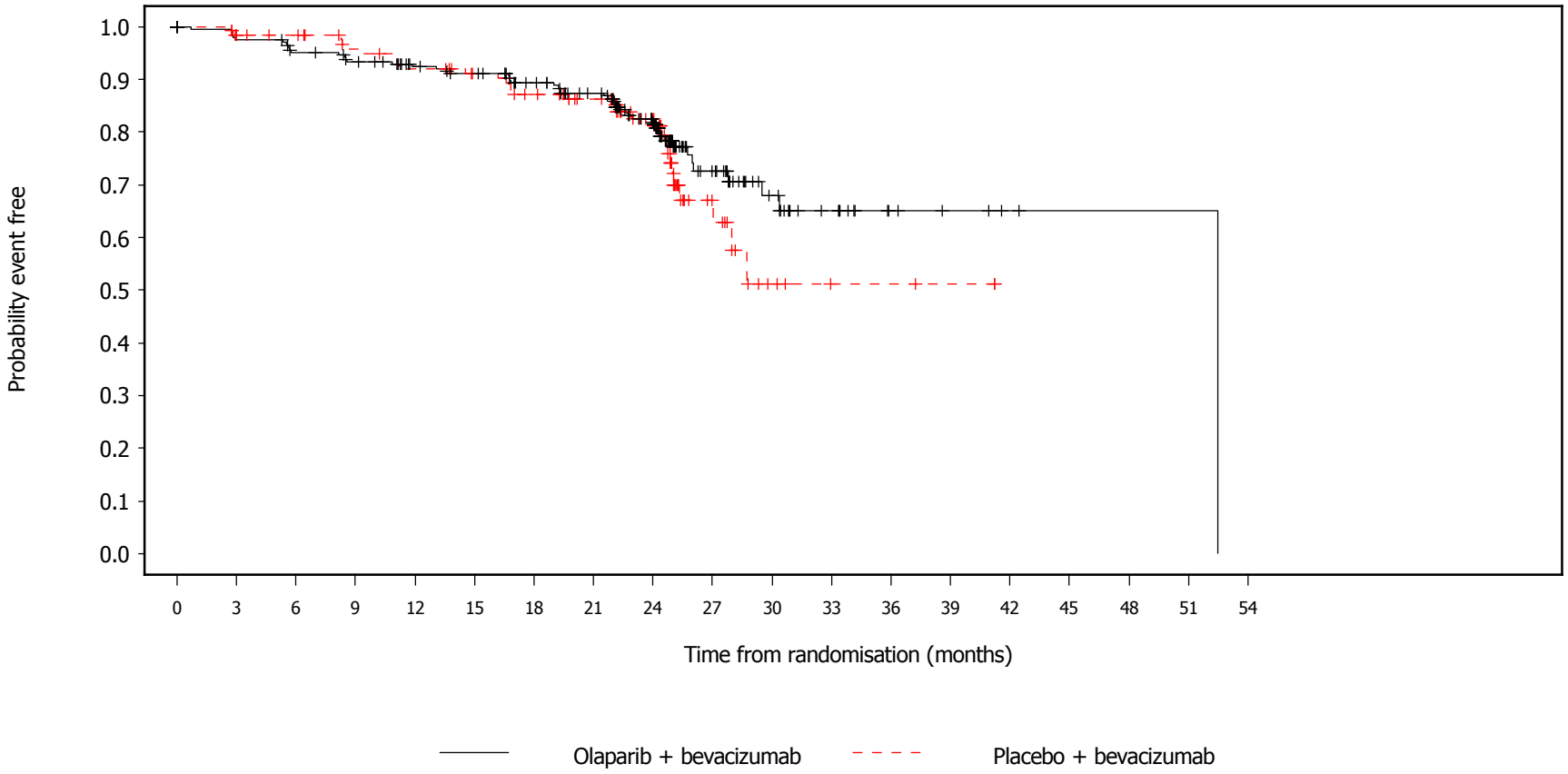


Number of patients at risk:

255	238	230	222	204	198	188	174	133	42	23	13	5	3	2	1	1	1	0	Olaparib + bevacizumab
132	115	109	102	99	94	86	76	61	16	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.13 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Nausea and vomiting (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

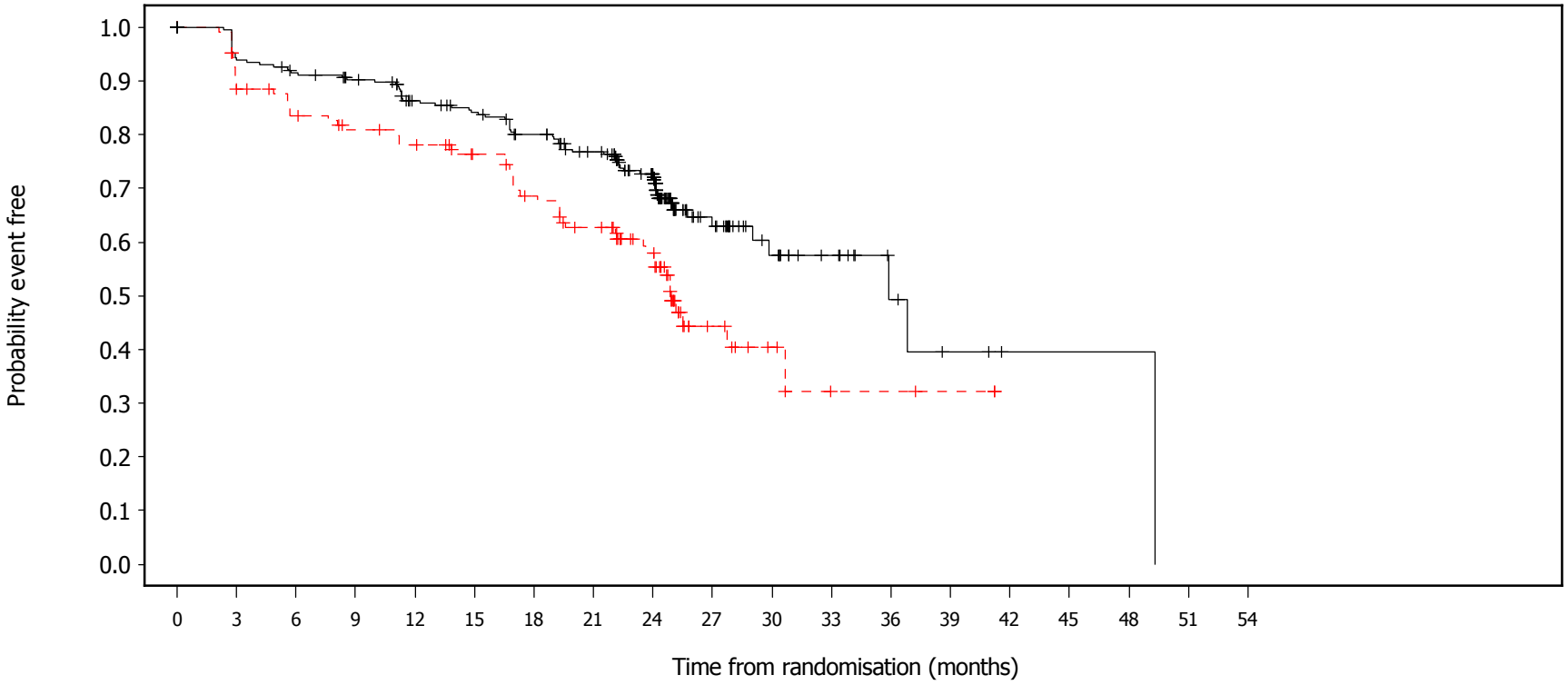


Number of patients at risk:

255	237	228	221	208	202	188	174	134	44	24	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	118	114	106	101	95	88	79	59	16	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.14 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Pain (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

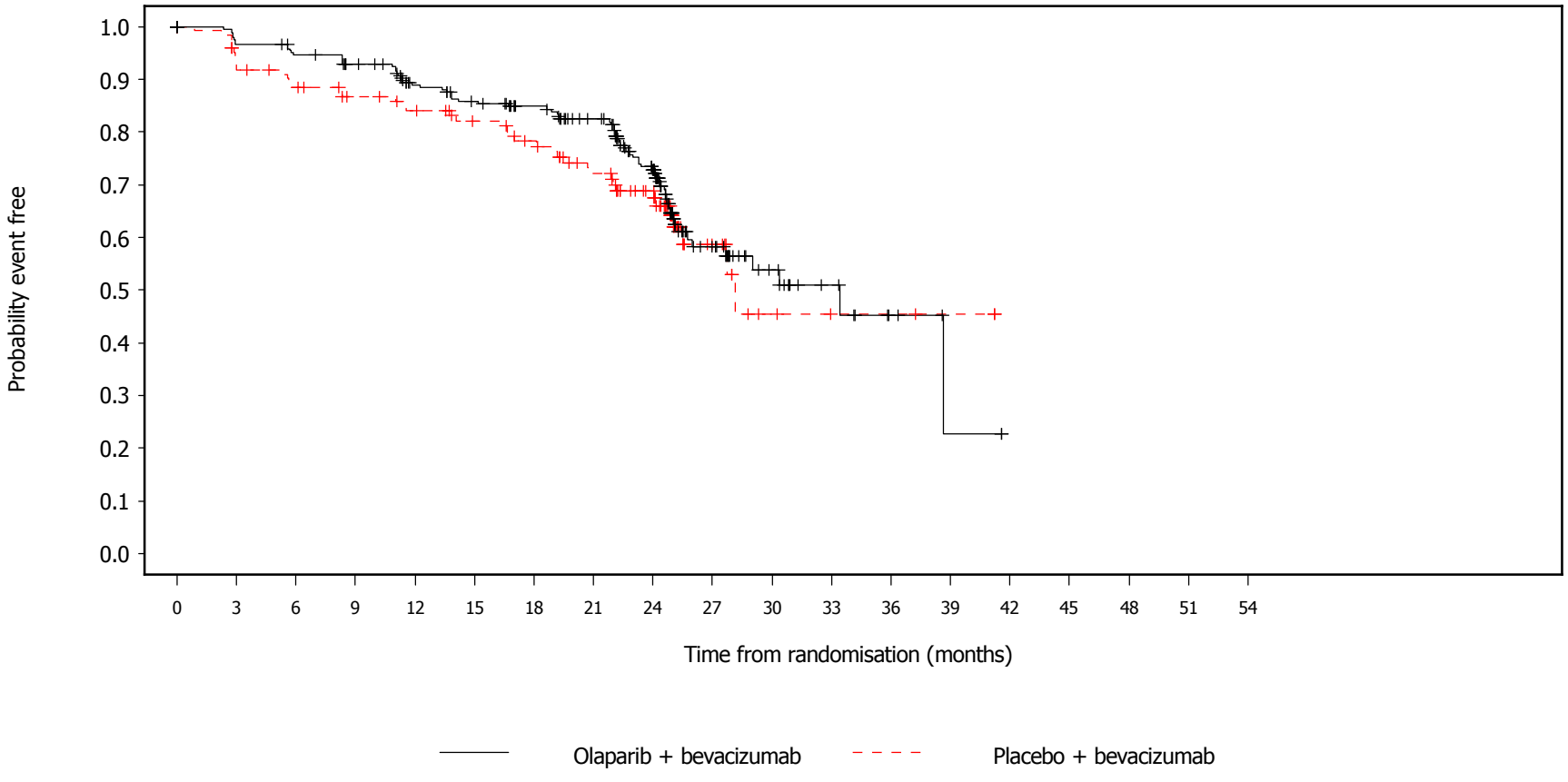


Number of patients at risk:

255	230	222	215	197	189	176	161	125	39	21	13	6	3	1	1	1	0	0	Olaparib + bevacizumab
132	108	98	92	88	80	70	61	46	12	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.1.2.15 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020



Number of patients at risk:

255	233	226	217	197	186	175	159	116	37	19	10	4	1	0	0	0	0	0	Olaparib + bevacizumab
132	113	105	98	93	86	79	67	52	13	4	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Table 3.1.3 PAOLA1 Appendix: Summary of analysis of time to sustained worsening in EORTC QLQ-C30 global QoL/health status, functional, symptom and single item scales (MID=10)
Sensitivity Analysis I (censoring patients with only one worsening post baseline and no subsequent observations)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EORTC QLQ-C30 Global QoL/health status (MID = 10)	255	35 (13.7)	NE (NE, NE)	132	20 (15.2)	NE (NE, NE)	0.83	0.48, 1.47	0.5046
EORTC QLQ-C30 Functional scale: Physical (MID = 10)	255	24 (9.4)	NE (NE, NE)	132	20 (15.2)	NE (NE, NE)	0.57	0.31, 1.05	0.0649
EORTC QLQ-C30 Functional scale: Role (MID = 10)	255	41 (16.1)	44.9 (NE, NE)	132	22 (16.7)	NE (NE, NE)	0.83	0.50, 1.43	0.4940
EORTC QLQ-C30 Functional scale: Cognitive (MID = 10)	255	48 (18.8)	44.9 (NE, NE)	132	32 (24.2)	NE (NE, NE)	0.69	0.44, 1.10	0.1066
EORTC QLQ-C30 Functional scale: Emotional (MID = 10)	255	44 (17.3)	41.9 (41.9, NE)	132	31 (23.5)	NE (NE, NE)	0.60	0.38, 0.97	0.0327*
EORTC QLQ-C30 Functional scale: Social (MID = 10)	255	36 (14.1)	41.9 (41.9, NE)	132	22 (16.7)	NE (NE, NE)	0.69	0.41, 1.20	0.1809
EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 10)	255	23 (9.0)	49.3 (NE, NE)	132	13 (9.8)	NE (NE, NE)	0.79	0.40, 1.61	0.4923

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.

[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.

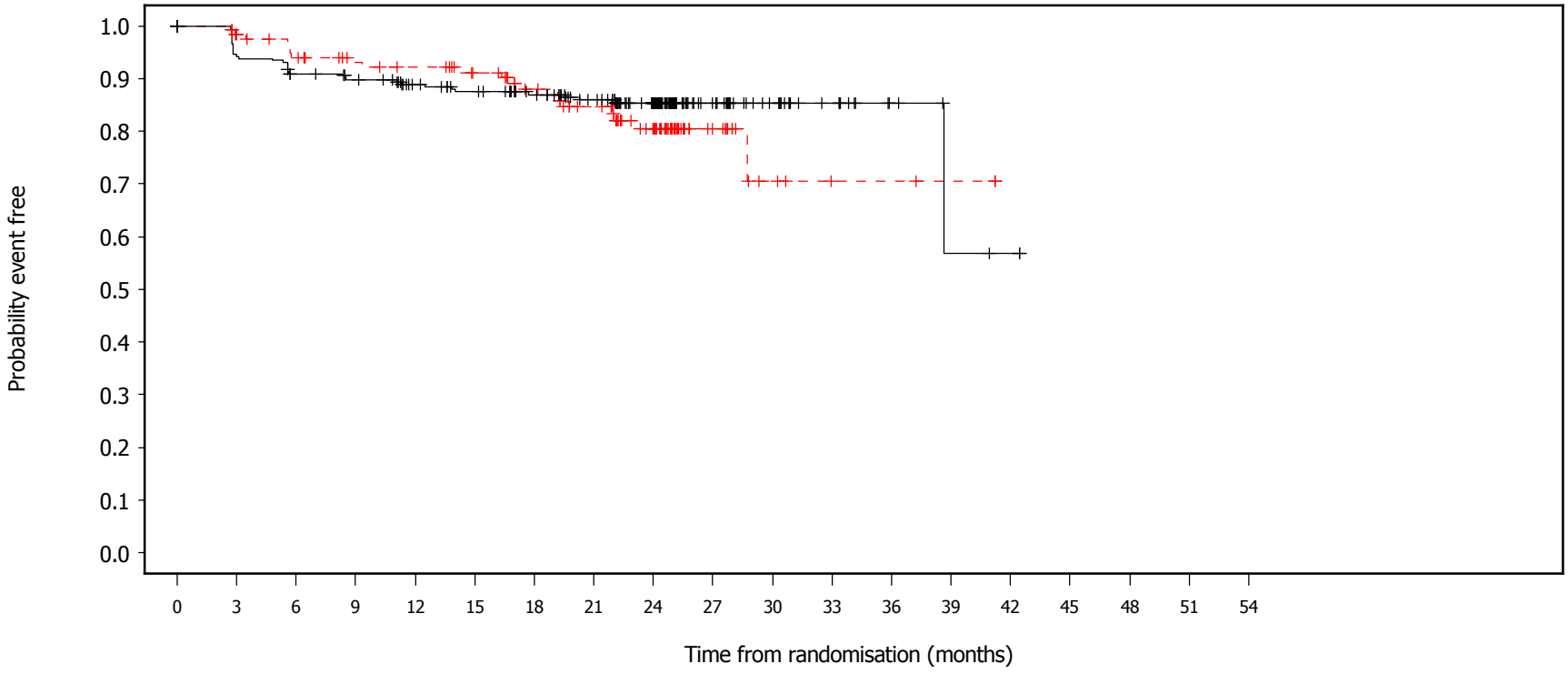
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Table 3.1.3 PAOLA1 Appendix: Summary of analysis of time to sustained worsening in EORTC QLQ-C30 global QoL/health status, functional, symptom and single item scales (MID=10)
Sensitivity Analysis I (censoring patients with only one worsening post baseline and no subsequent observations)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)				
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EORTC QLQ-C30 Single item symptom scale: Constipation (MID = 10)	255	34 (13.3)	NE (NE, NE)	132	19 (14.4)	NE (NE, NE)	0.92	0.53, 1.64	0.7606
EORTC QLQ-C30 Single item symptom scale: Diarrhoea (MID = 10)	255	16 (6.3)	NE (NE, NE)	132	8 (6.1)	NE (NE, NE)	0.88	0.39, 2.18	0.7734
EORTC QLQ-C30 Single item symptom scale: Dyspnoea (MID = 10)	255	32 (12.5)	NE (NE, NE)	132	24 (18.2)	NE (NE, NE)	0.62	0.36, 1.07	0.0763
EORTC QLQ-C30 Symptom scale: Fatigue (MID = 10)	255	57 (22.4)	NE (NE, NE)	132	33 (25.0)	NE (NE, NE)	0.77	0.50, 1.20	0.2332
EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 10)	255	17 (6.7)	NE (NE, NE)	132	12 (9.1)	NE (NE, NE)	0.64	0.31, 1.38	0.2393
EORTC QLQ-C30 Symptom scale: Nausea and vomiting (MID = 10)	255	23 (9.0)	NE (NE, NE)	132	13 (9.8)	NE (NE, NE)	0.92	0.47, 1.88	0.8210
EORTC QLQ-C30 Symptom scale: Pain (MID = 10)	255	48 (18.8)	49.3 (36.8, NE)	132	41 (31.1)	NE (NE, NE)	0.47	0.31, 0.72	0.0004*
EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 10)	255	46 (18.0)	38.7 (33.4, NE)	132	29 (22.0)	NE (NE, NE)	0.69	0.43, 1.12	0.1231

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.

Figure 3.1.4.1 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Global QoL/health status (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

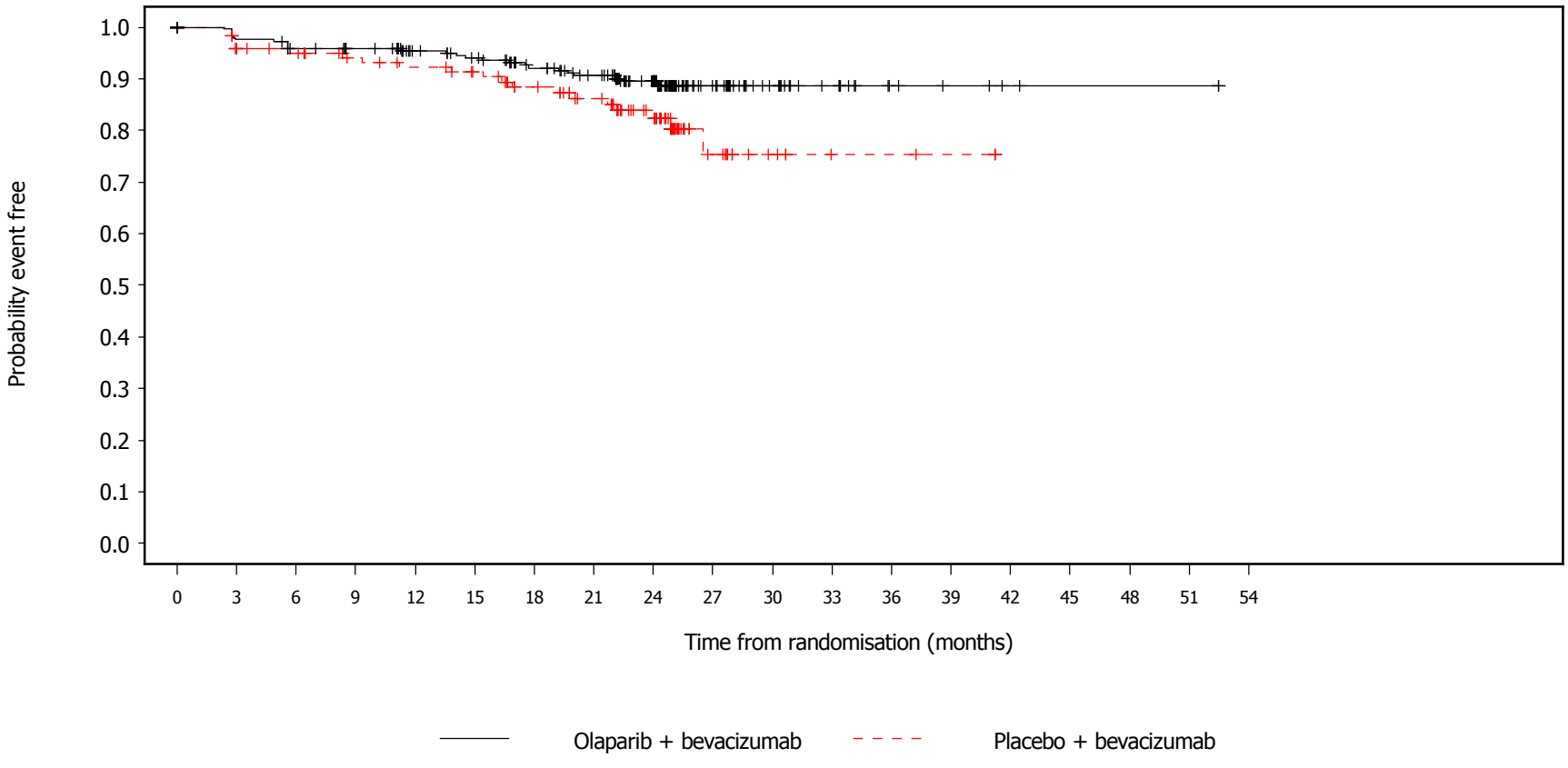


Number of patients at risk:

255	230	218	212	199	191	180	164	129	40	23	13	5	2	1	0	0	0	0	Olaparib + bevacizumab
132	116	107	100	97	90	80	70	51	15	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.2 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Physical (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

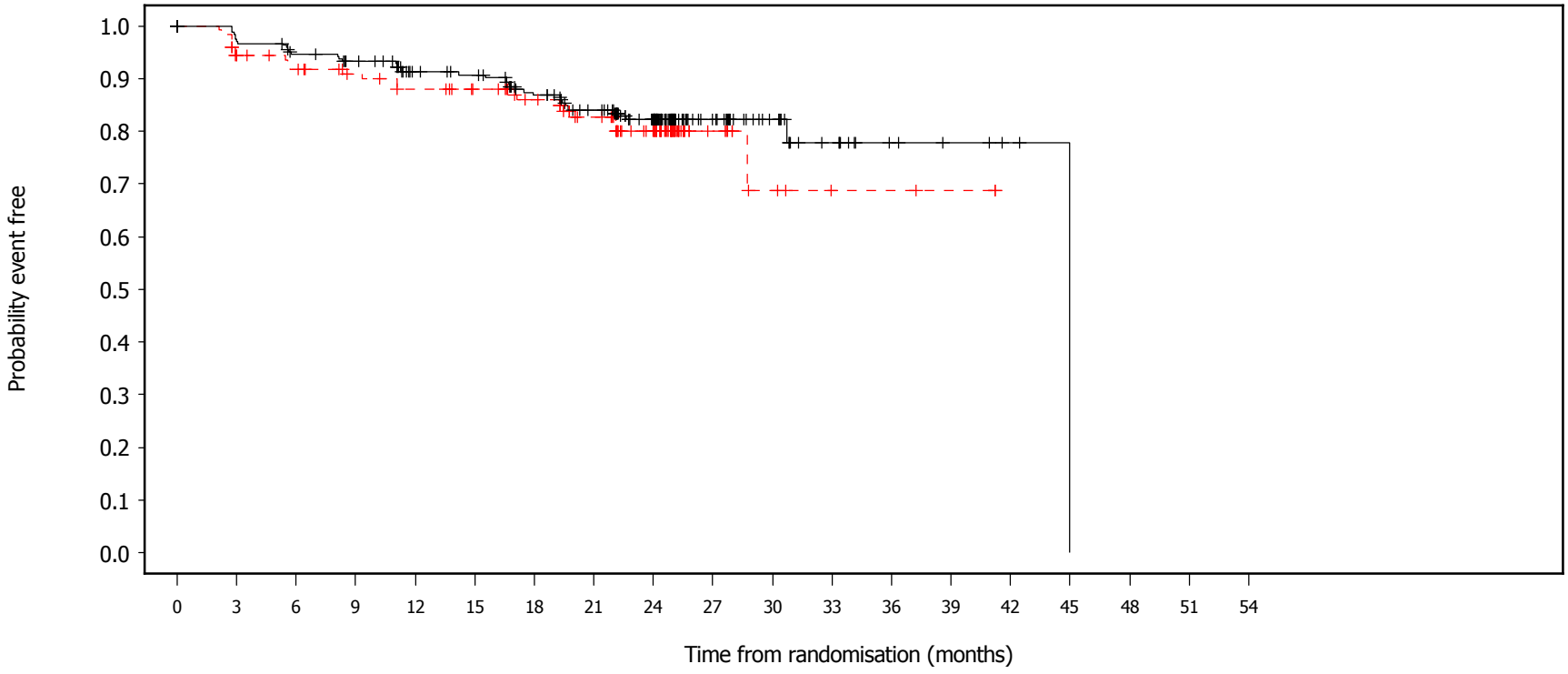


Number of patients at risk:

255	237	229	224	209	201	185	173	133	42	23	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	115	110	103	99	94	85	75	56	14	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.3 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Role (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

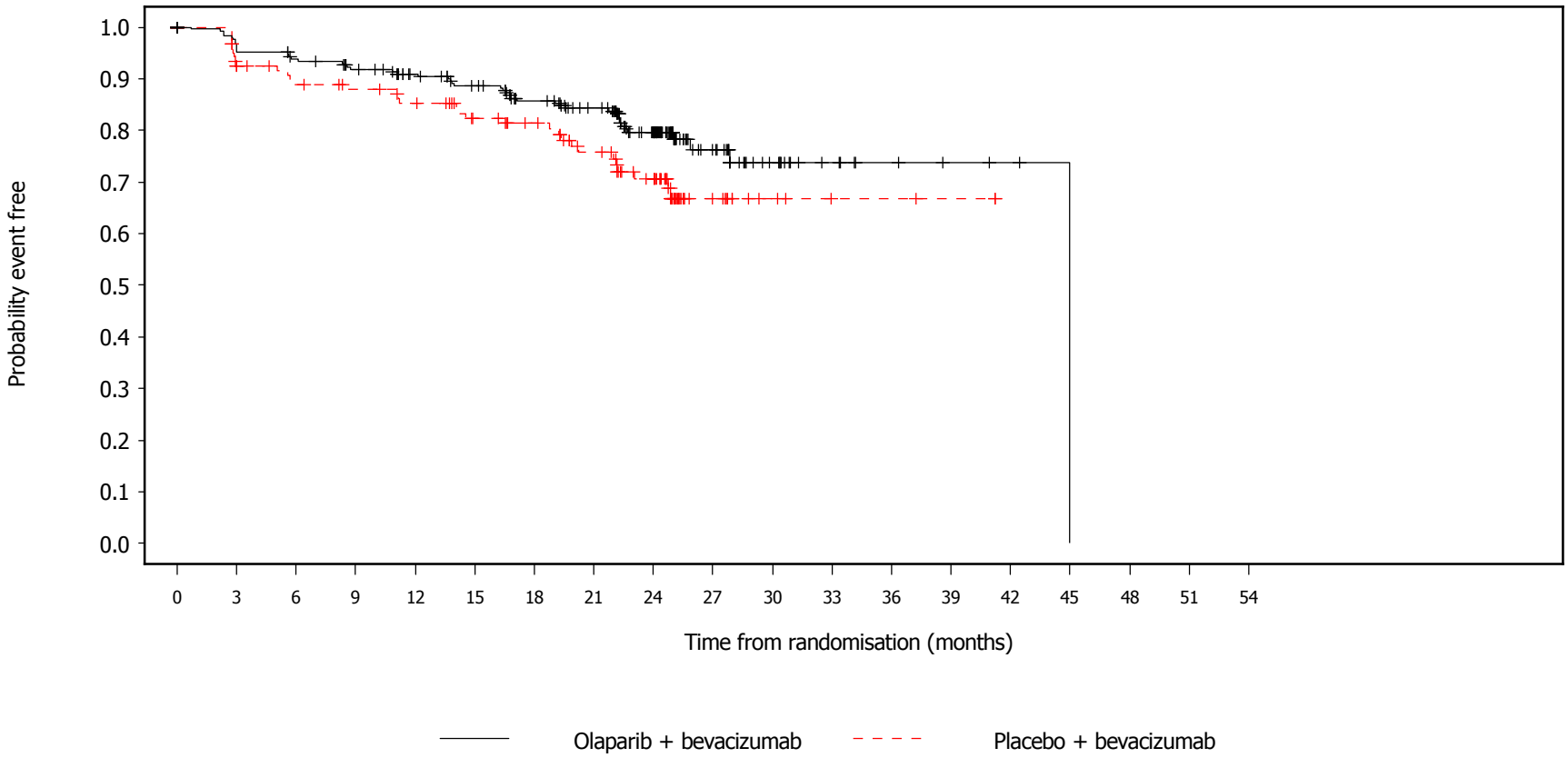


Number of patients at risk:

255	237	227	220	200	196	179	164	129	42	24	13	6	4	2	0	0	0	0	Olaparib + bevacizumab
132	113	106	99	94	89	81	70	53	12	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.4 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Cognitive (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

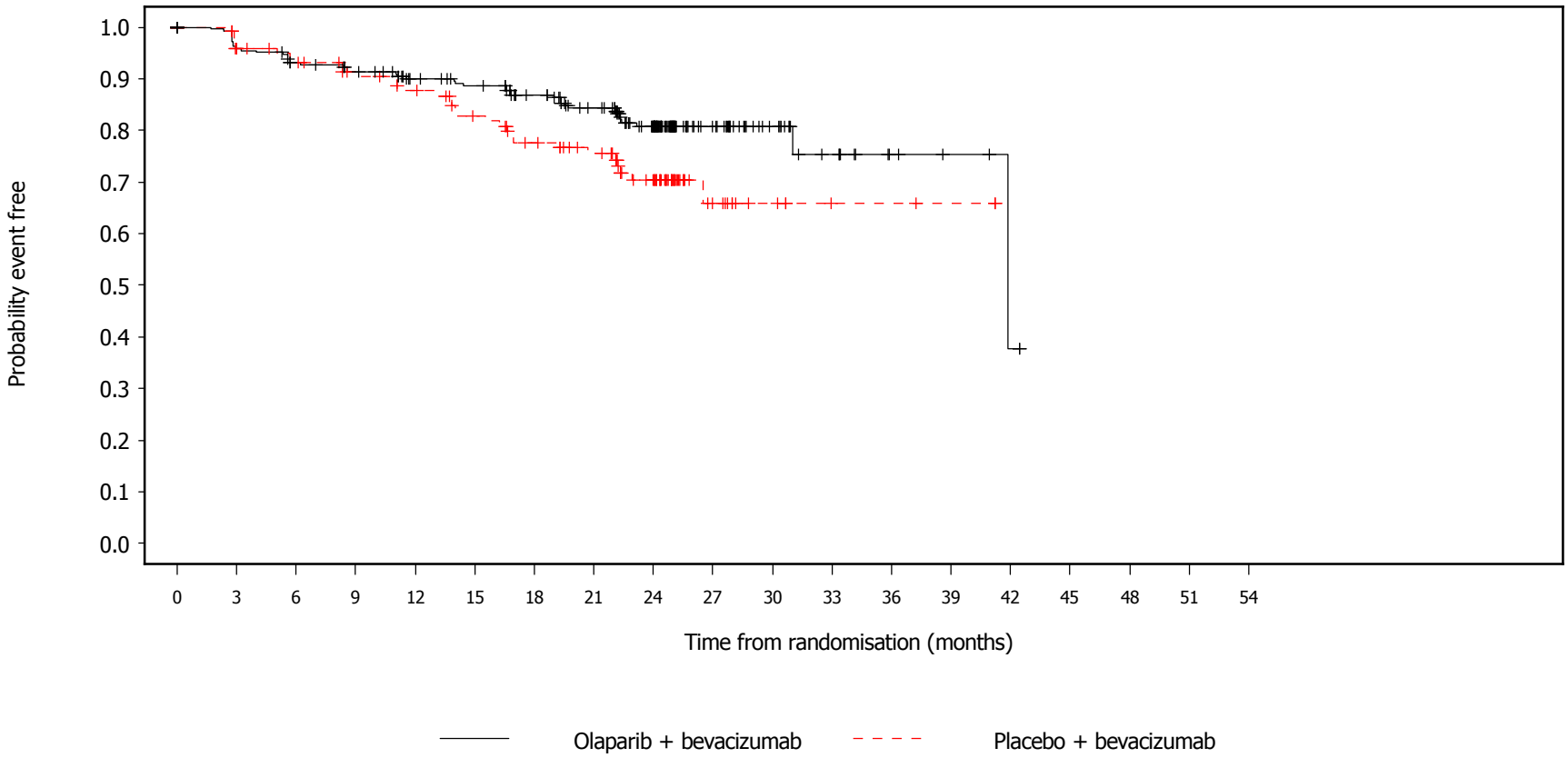


Number of patients at risk:

255	234	226	217	203	192	175	160	118	36	18	9	5	3	2	0	0	0	0	Olaparib + bevacizumab
132	110	101	97	92	82	76	64	50	13	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.5 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Emotional (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

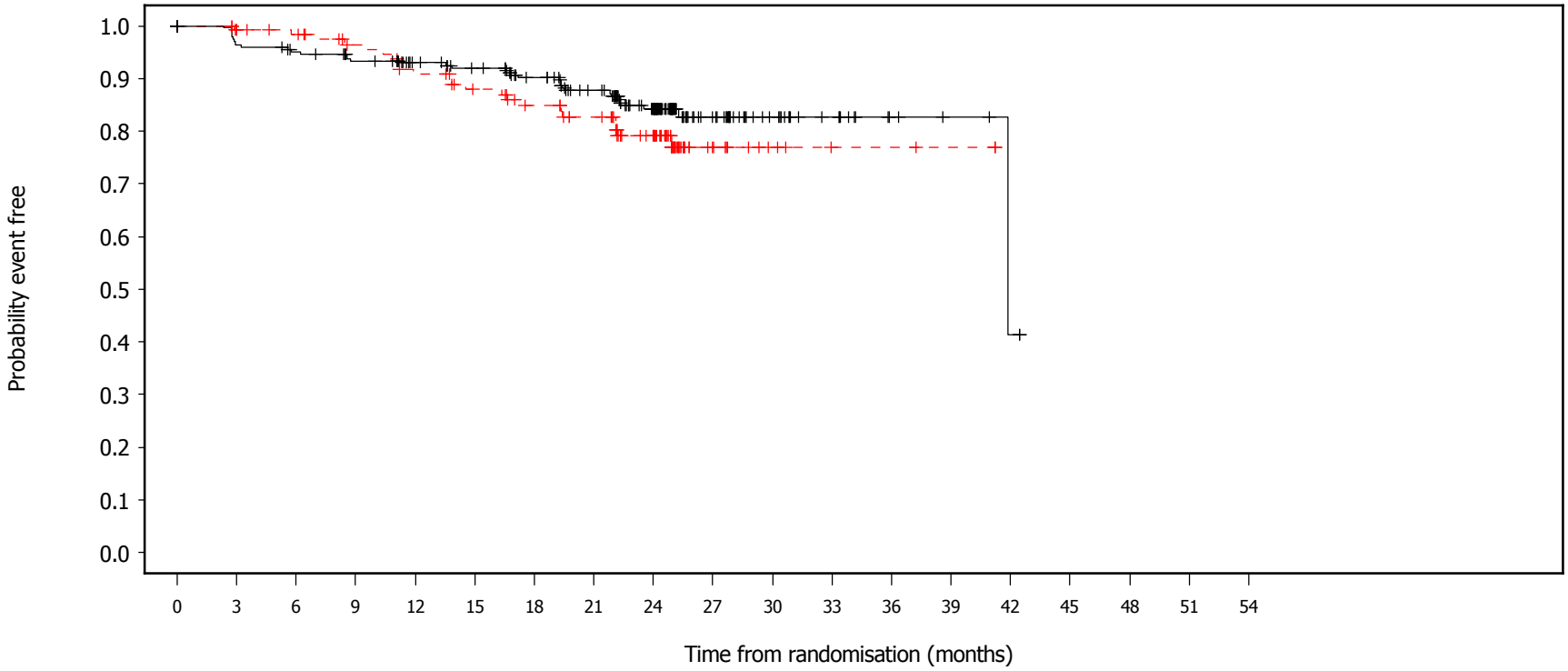


Number of patients at risk:

255	234	223	216	201	194	179	162	124	42	22	12	5	3	1	0	0	0	0	Olaparib + bevacizumab
132	113	106	99	93	83	74	66	49	13	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.6 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Functional scale: Social (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

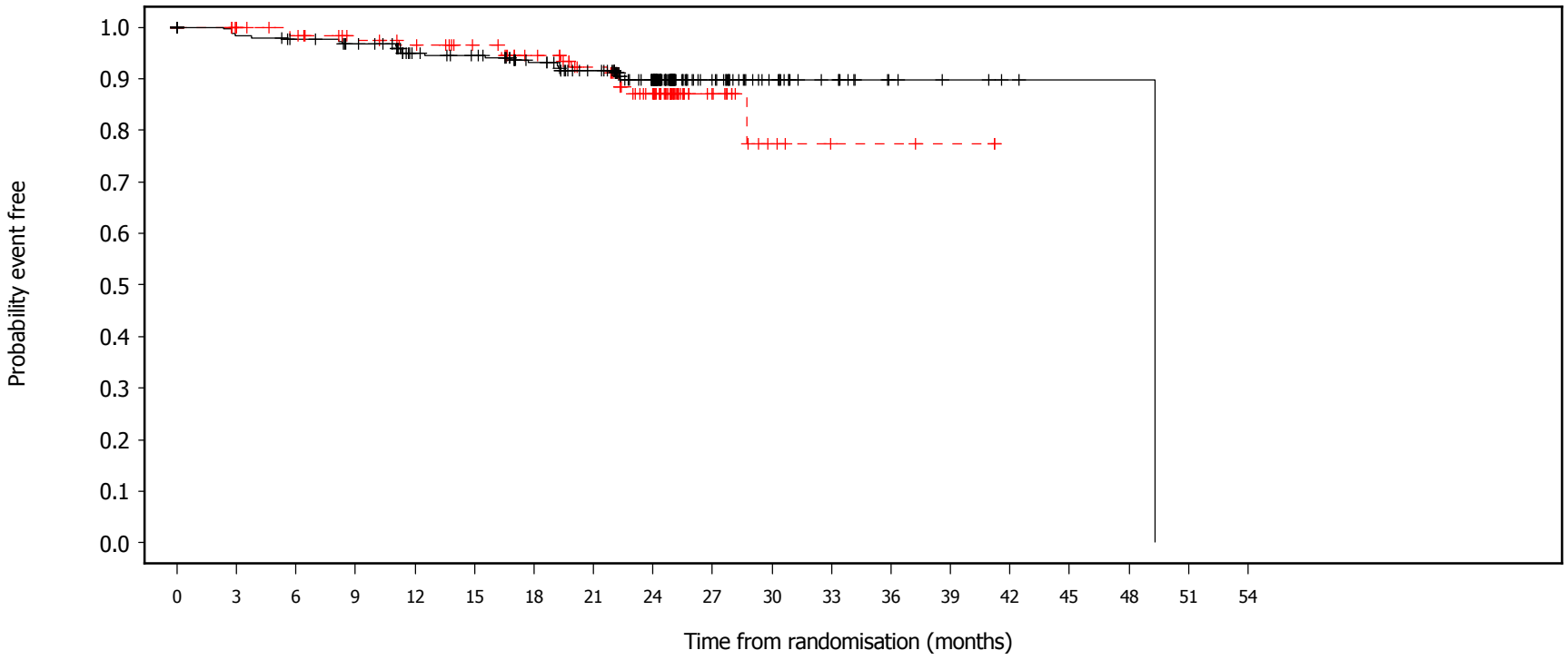


Number of patients at risk:

255	235	229	221	208	200	186	168	128	41	22	13	5	3	1	0	0	0	0	Olaparib + bevacizumab
132	117	112	104	96	88	80	73	55	12	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.7 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Loss of appetite (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

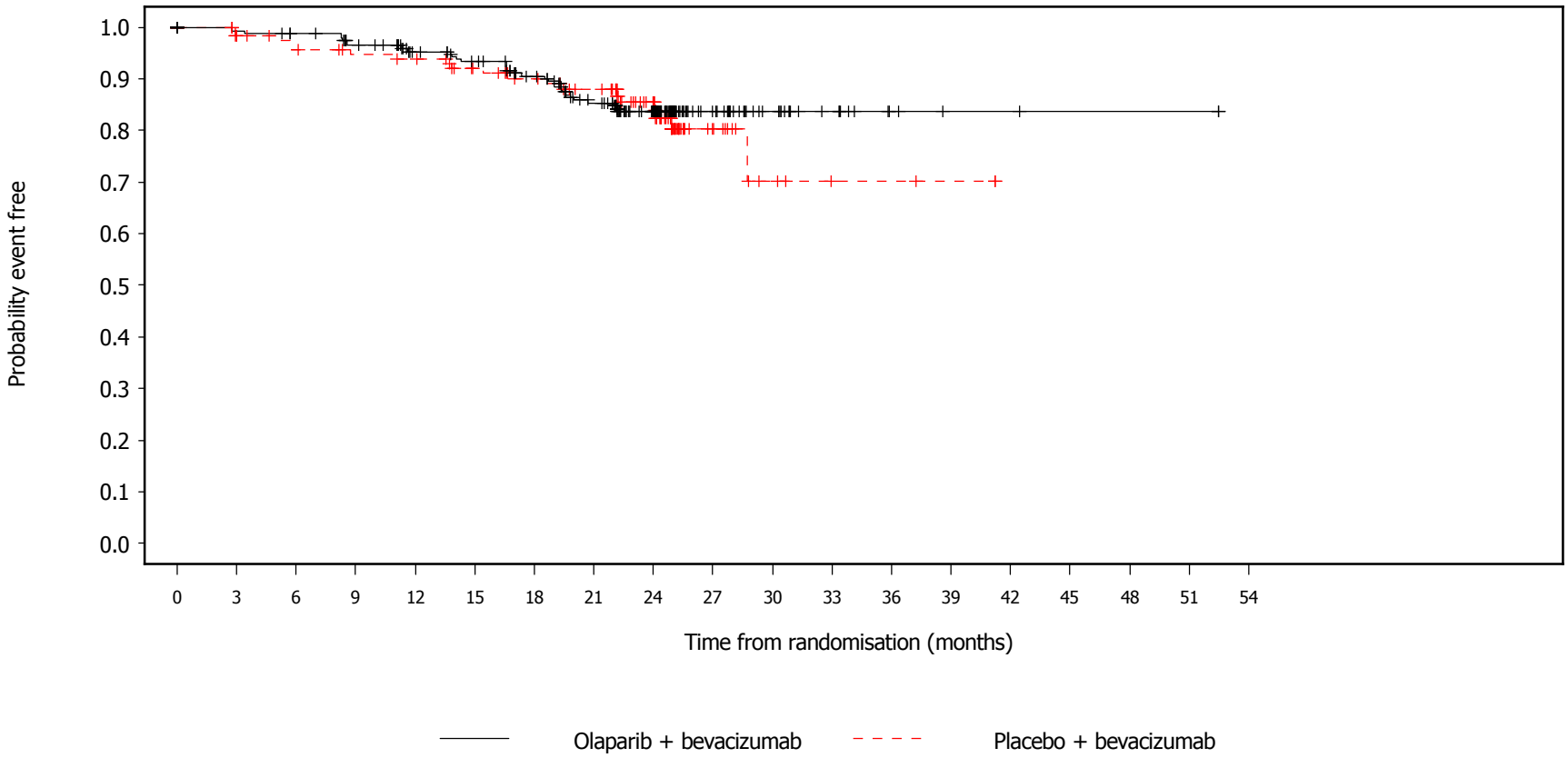


Number of patients at risk:

255	239	234	228	209	204	189	174	136	43	24	14	6	4	2	1	1	0	0	Olaparib + bevacizumab
132	120	114	107	104	98	89	79	59	16	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.8 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Constipation (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

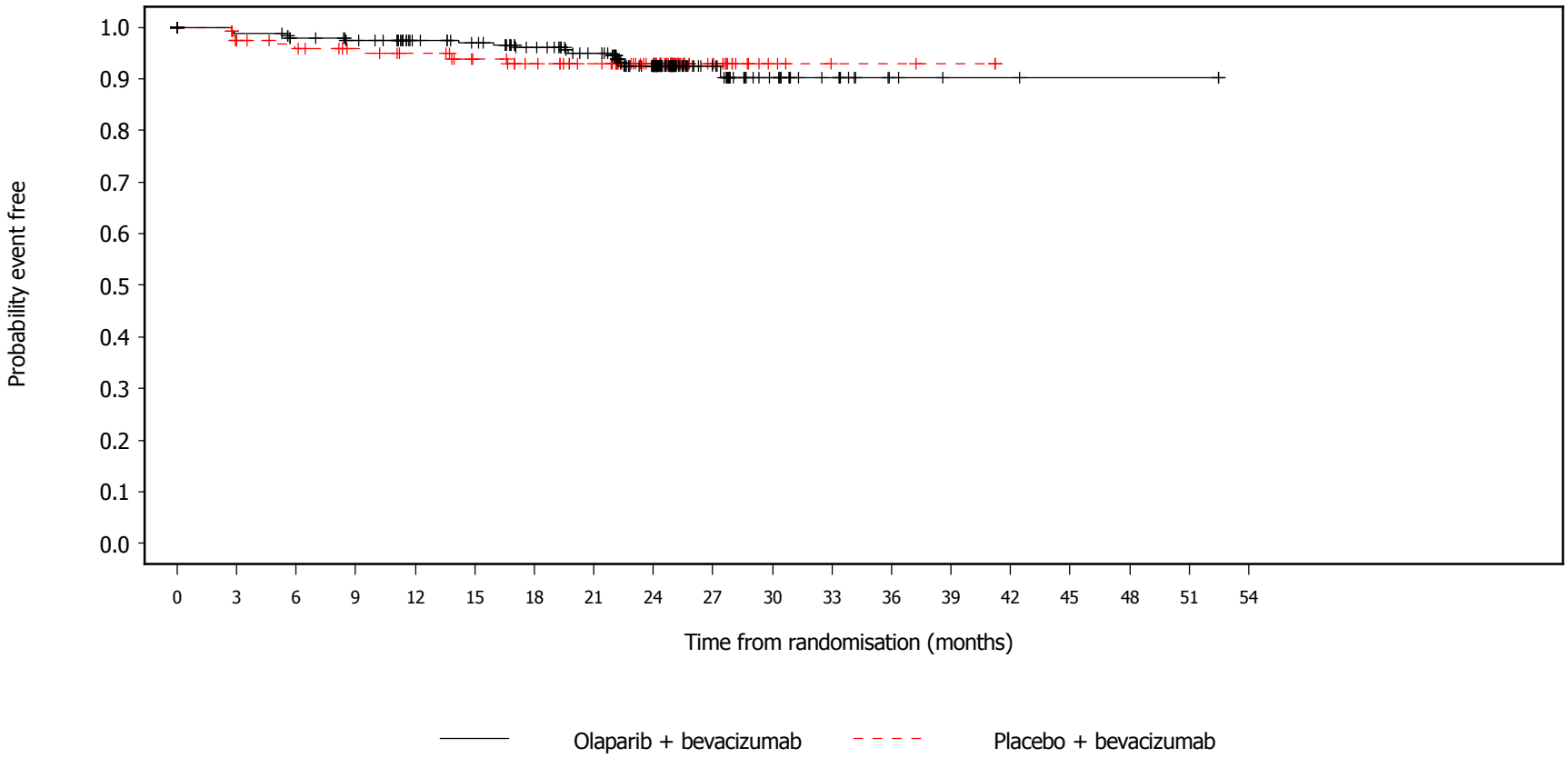


Number of patients at risk:

255	238	234	224	207	198	182	158	119	37	20	11	4	2	2	1	1	1	0	Olaparib + bevacizumab
132	116	109	105	103	94	87	79	59	14	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.9 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Diarrhoea (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

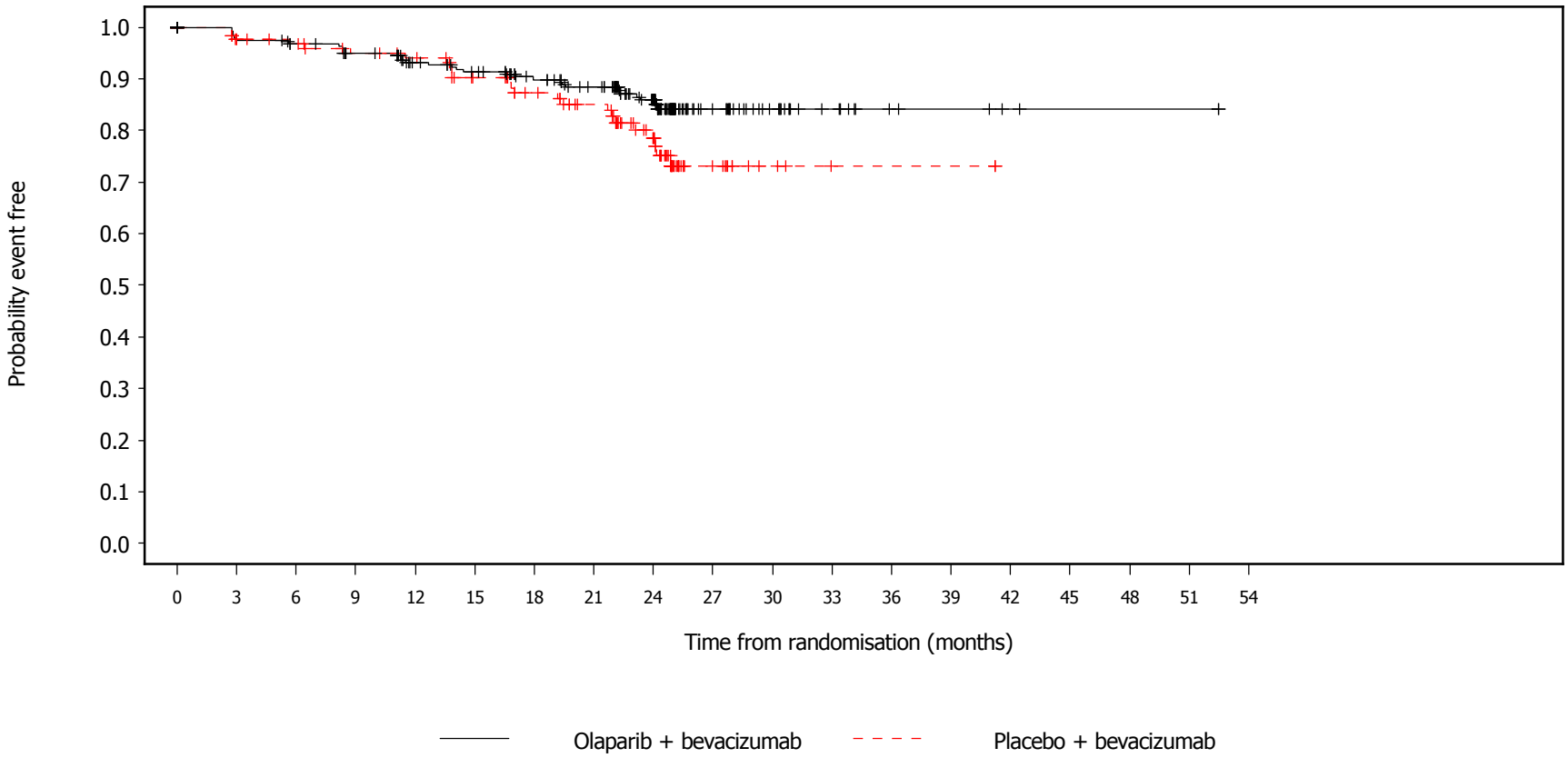


Number of patients at risk:

255	238	231	225	209	203	189	174	130	40	21	12	4	2	2	1	1	1	0	Olaparib + bevacizumab
132	116	110	105	101	94	88	81	63	17	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.10 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Dyspnoea (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

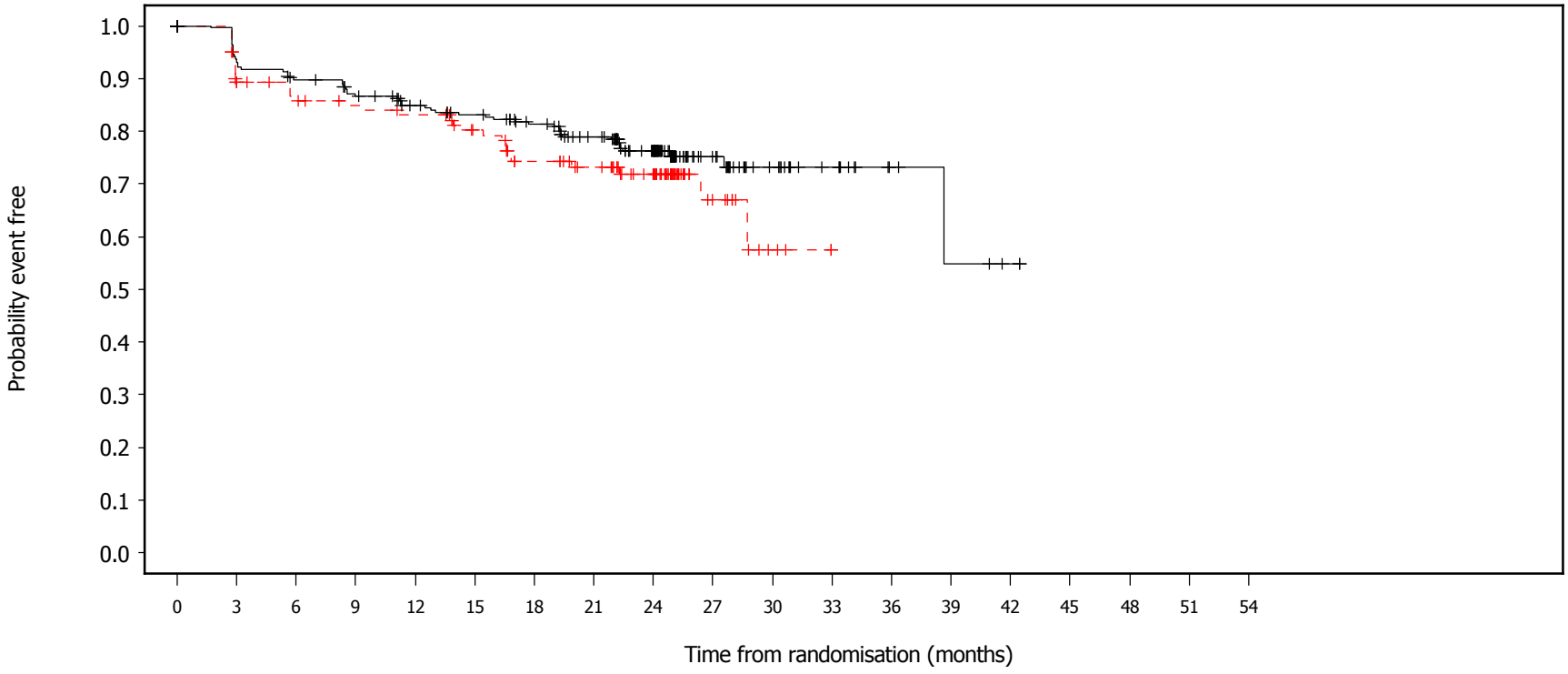


Number of patients at risk:

255	235	228	220	204	195	180	167	125	37	21	11	5	4	2	1	1	1	0	Olaparib + bevacizumab
132	117	112	106	103	92	83	73	50	12	4	1	1	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.11 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Fatigue (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

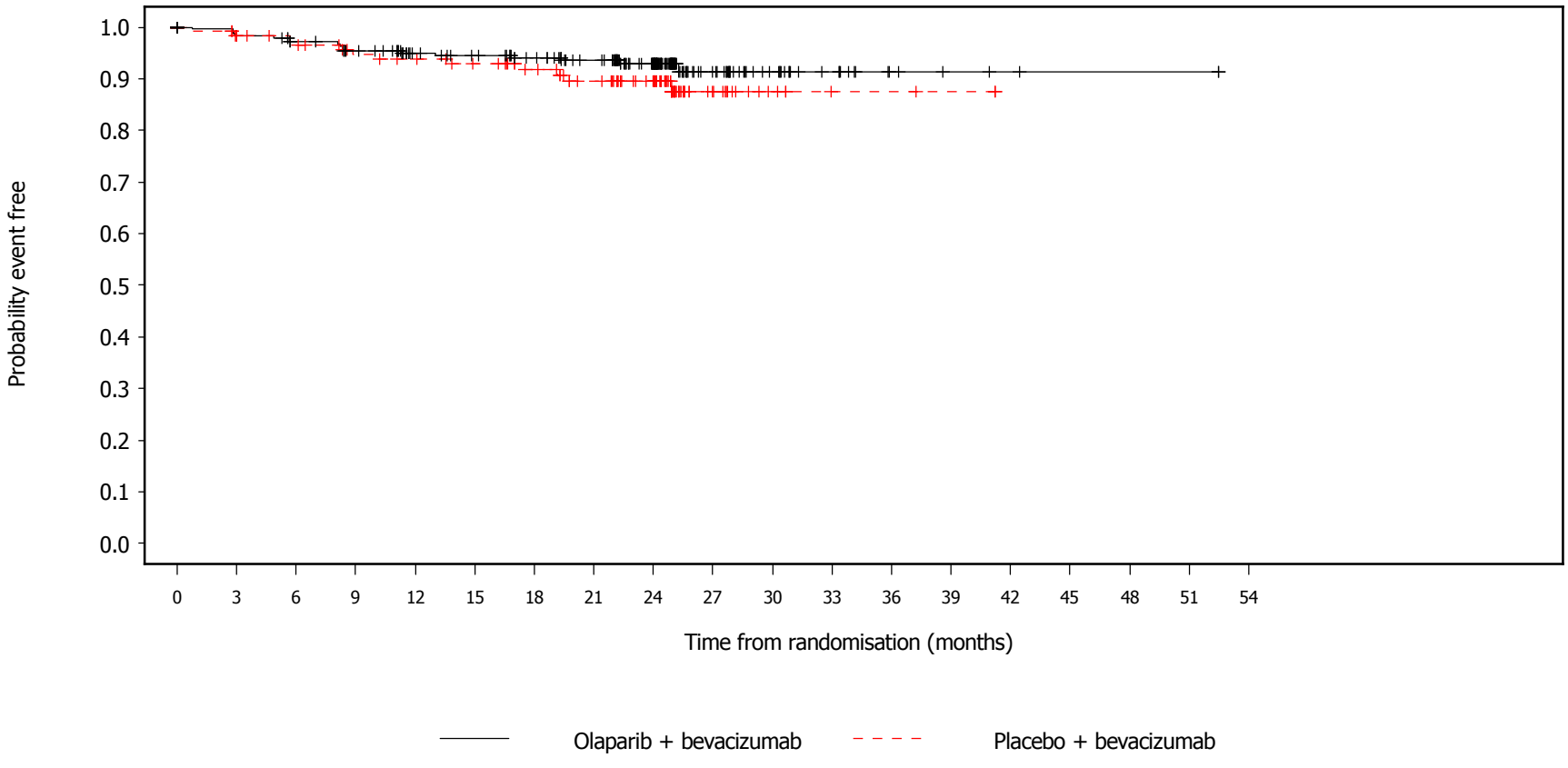


Number of patients at risk:

255	226	215	206	193	185	174	158	119	39	22	13	5	3	1	0	0	0	0	Olaparib + bevacizumab
132	107	98	94	91	82	71	64	50	12	3	0	0	0	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.12 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Financial difficulties (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

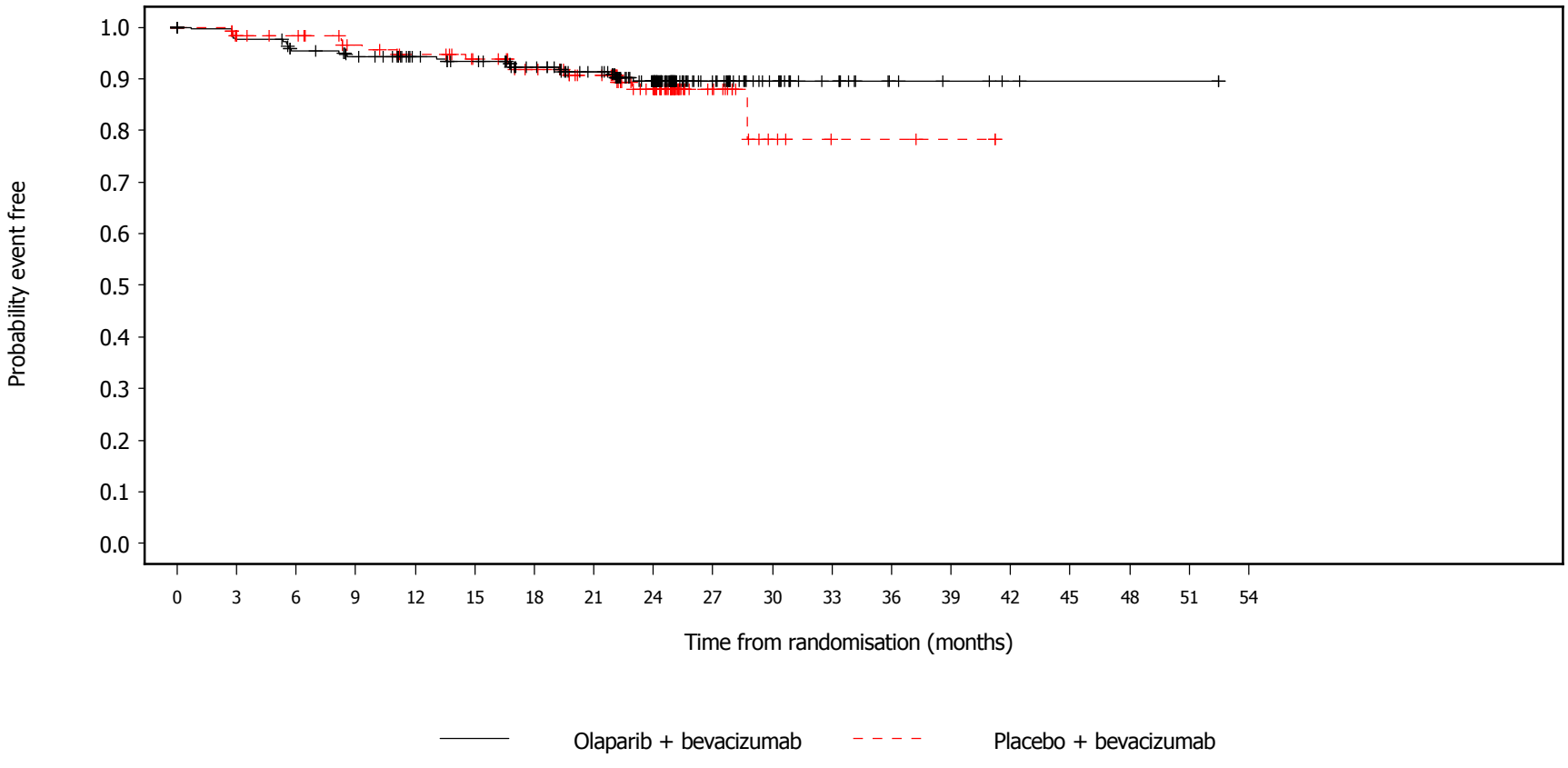


Number of patients at risk:

255	238	230	222	204	198	188	174	133	42	23	13	5	3	2	1	1	1	0	Olaparib + bevacizumab
132	115	109	102	99	94	86	76	61	16	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.13 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Nausea and vomiting (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

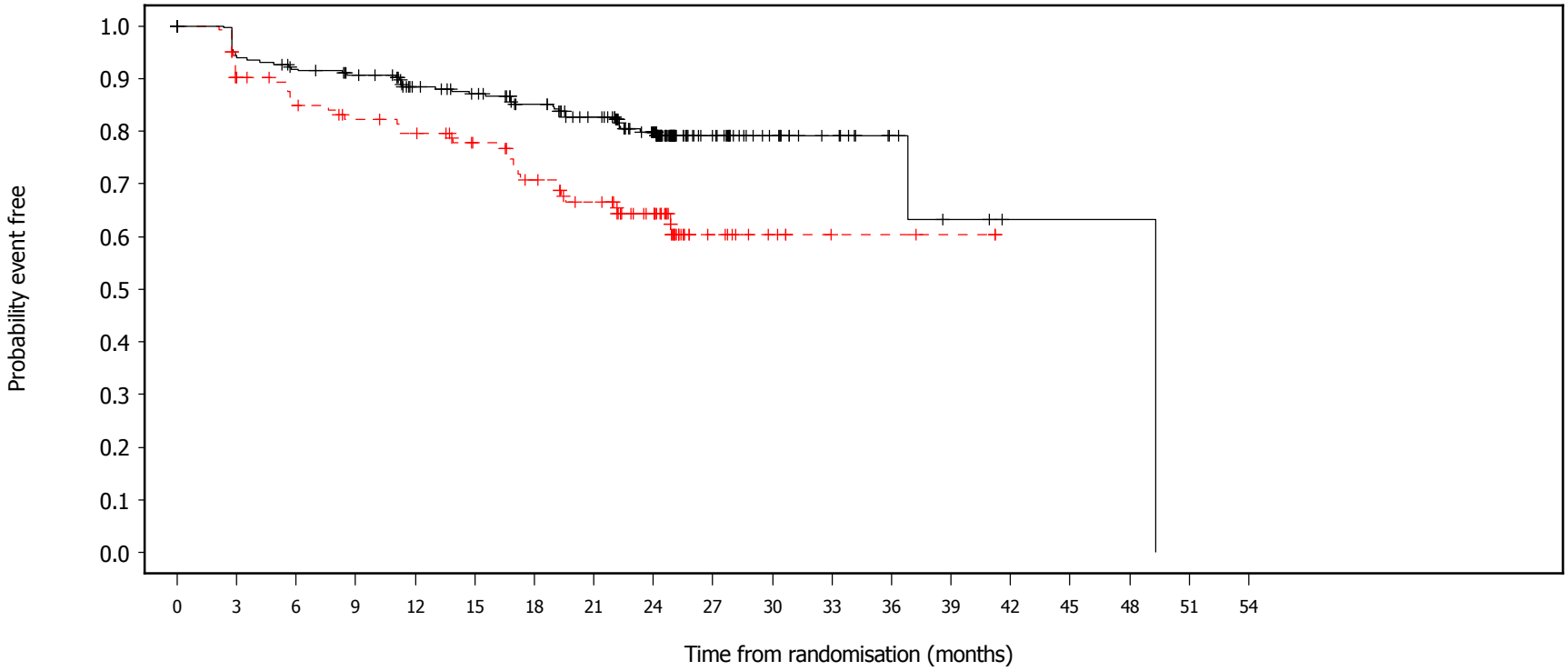


Number of patients at risk:

255	237	228	221	208	202	188	174	134	44	24	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	118	114	106	101	95	88	79	59	16	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.14 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Symptom scale: Pain (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

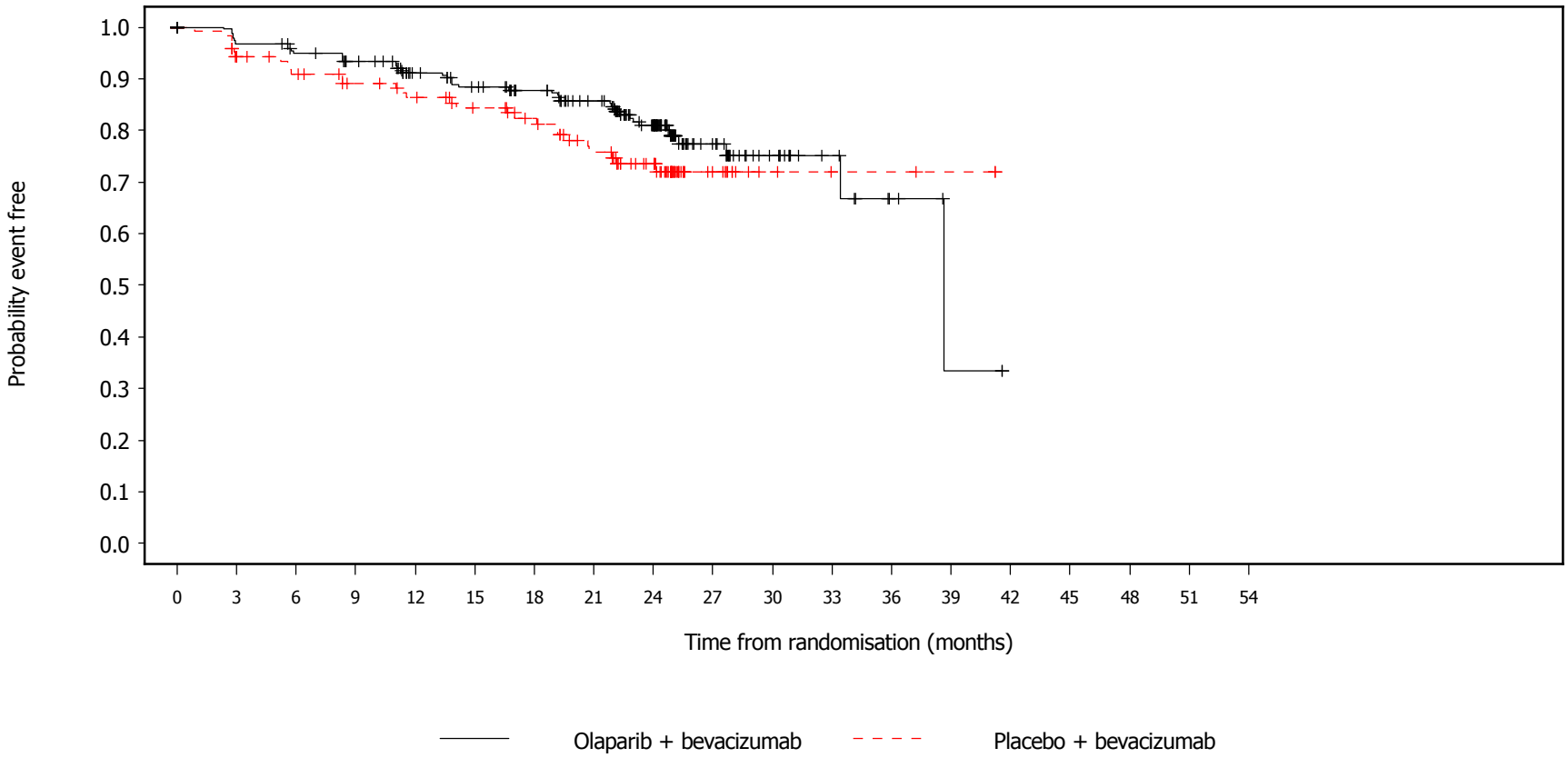


Number of patients at risk:

255	230	222	215	197	189	176	161	125	39	21	13	6	3	1	1	1	0	0	Olaparib + bevacizumab
132	108	98	92	88	80	70	61	46	12	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.1.4.15 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-C30 Single item symptom scale: Insomnia (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020



Number of patients at risk:

255	233	226	217	197	186	175	159	116	37	19	10	4	1	0	0	0	0	0	Olaparib + bevacizumab
132	113	105	98	93	86	79	67	52	13	4	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Table 3.2.1 PAOLA1 Appendix: Summary of analysis of time to sustained worsening in EORTC QLQ-OV28 symptom and single item scales (MID=10)

Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 10)	255	77 (30.2)	49.3 (27.8, NE)	132	57 (43.2)	25.1 (23.8,29.3)	0.56	0.39, 0.80	0.0011*
EORTC QLQ-OV28 Symptom scale/items: Body image (MID = 10)	255	50 (19.6)	NE (NE, NE)	132	43 (32.6)	27.8 (25.1, NE)	0.55	0.36, 0.84	0.0045*
EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (MID = 10)	255	39 (15.3)	42.5 (42.5, NE)	132	32 (24.2)	NE (NE, NE)	0.48	0.30, 0.79	0.0029*
EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 10)	255	57 (22.4)	52.5 (NE, NE)	132	38 (28.8)	NE (NE, NE)	0.72	0.47, 1.10	0.1174
EORTC QLQ-OV28 Symptom scale/items: Hormonal (MID = 10)	255	66 (25.9)	NE (NE, NE)	132	37 (28.0)	NE (NE, NE)	0.80	0.54, 1.22	0.2901
EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (MID = 10)	255	49 (19.2)	NE (NE, NE)	132	18 (13.6)	NE (NE, NE)	1.36	0.80, 2.42	0.2639
EORTC QLQ-OV28 Symptom scale/items: Other single items (MID = 10)	255	52 (20.4)	NE (NE, NE)	132	28 (21.2)	NE (NE, NE)	0.86	0.54, 1.40	0.5342

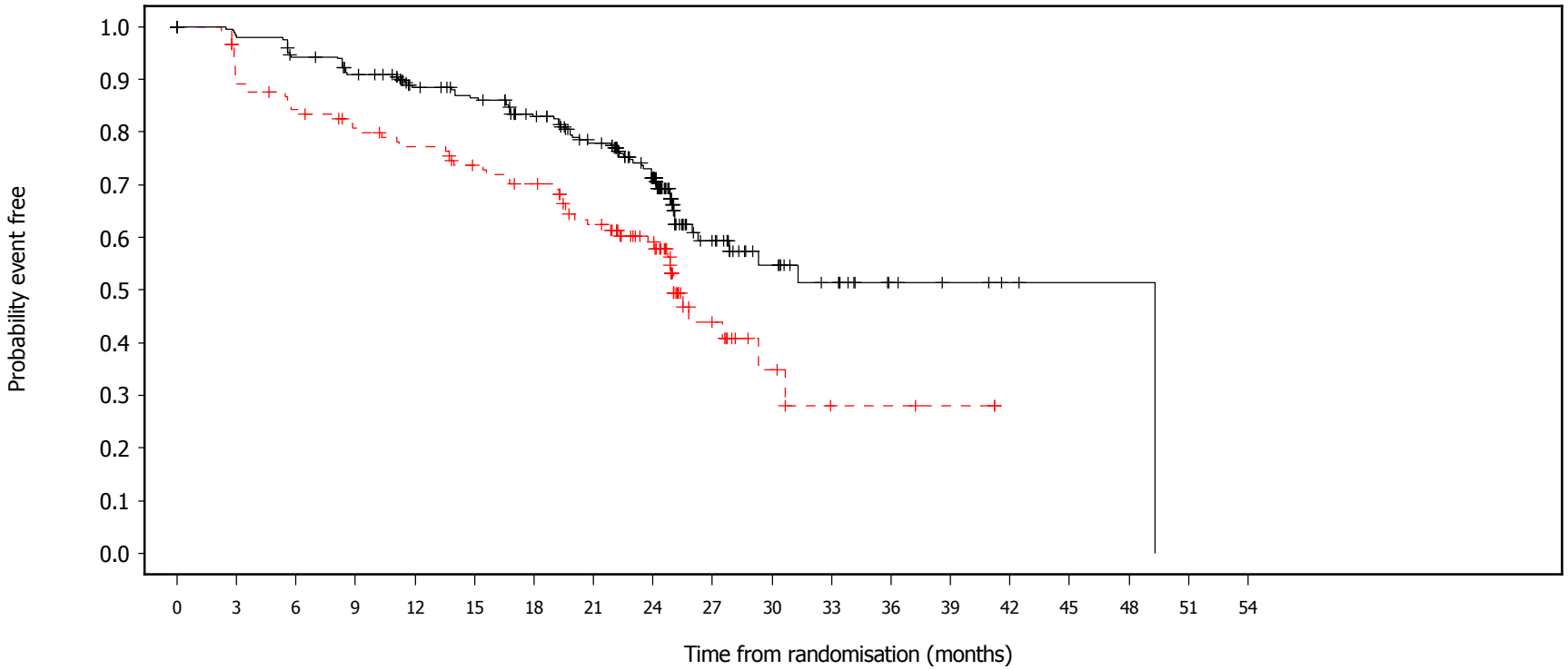
A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.

[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.

[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Figure 3.2.2.1 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

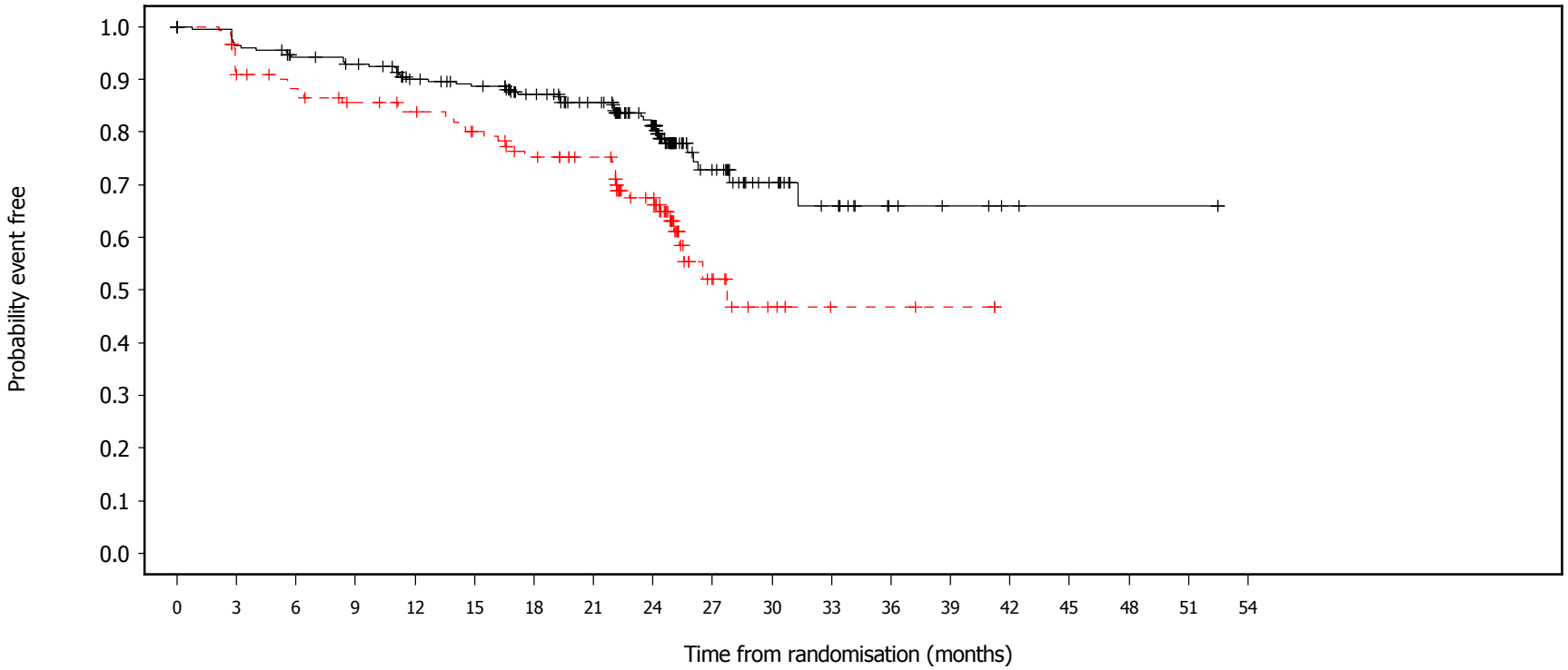


Number of patients at risk:

255	241	229	218	200	192	175	155	118	35	21	14	6	4	2	1	1	0	0	Olaparib + bevacizumab
132	109	100	93	88	81	76	63	48	14	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.2.2.2 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Body image (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

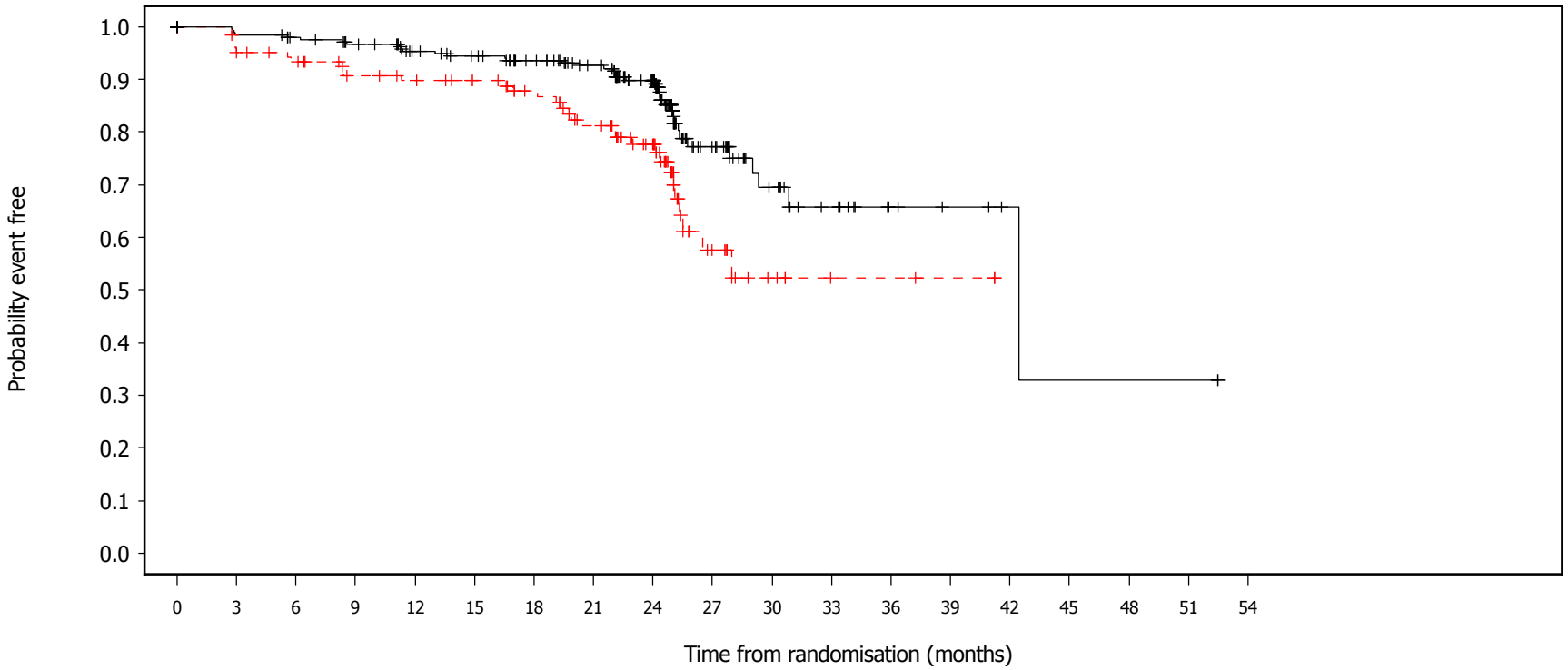


Number of patients at risk:

255	234	224	219	202	195	180	165	125	40	23	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	109	102	96	92	85	77	71	52	13	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.2.2.3 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

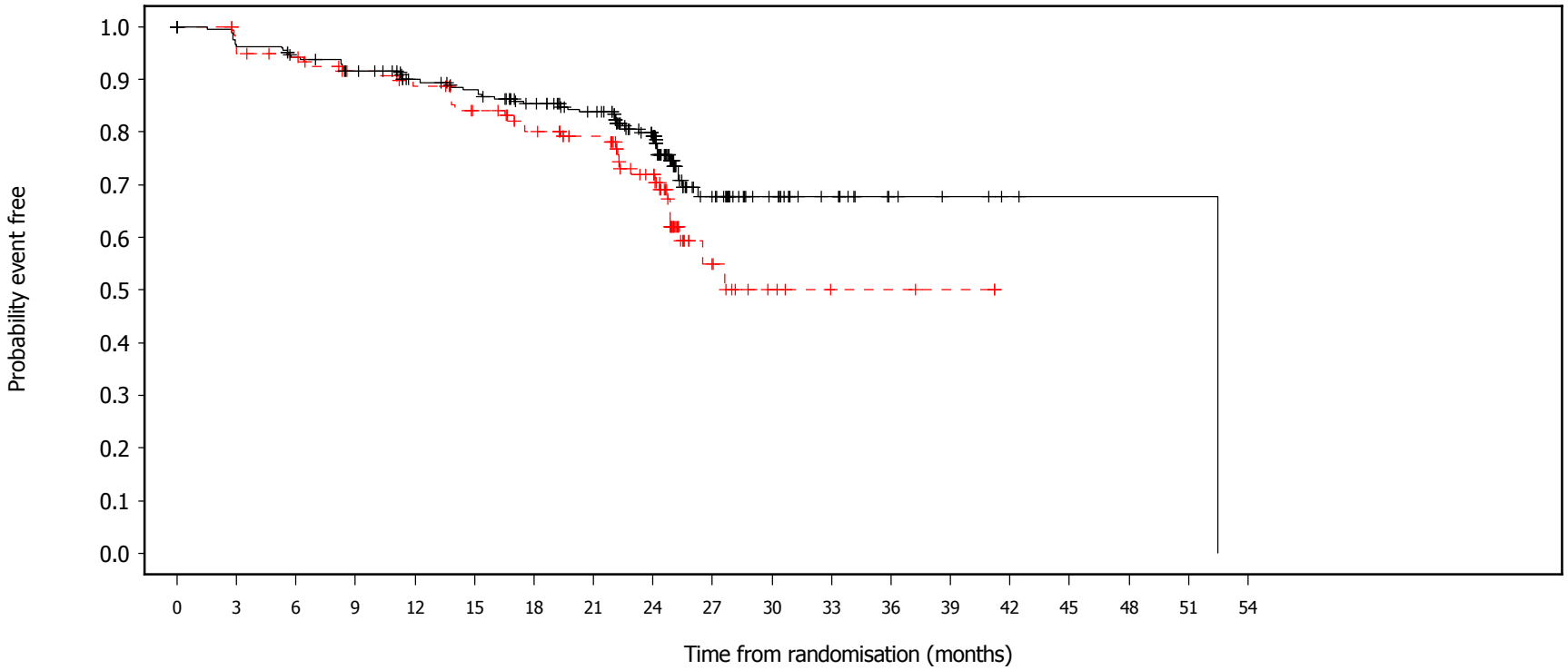


Number of patients at risk:

255	241	236	229	215	208	195	180	141	43	24	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	115	109	100	97	92	84	72	54	14	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.2.2.4 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

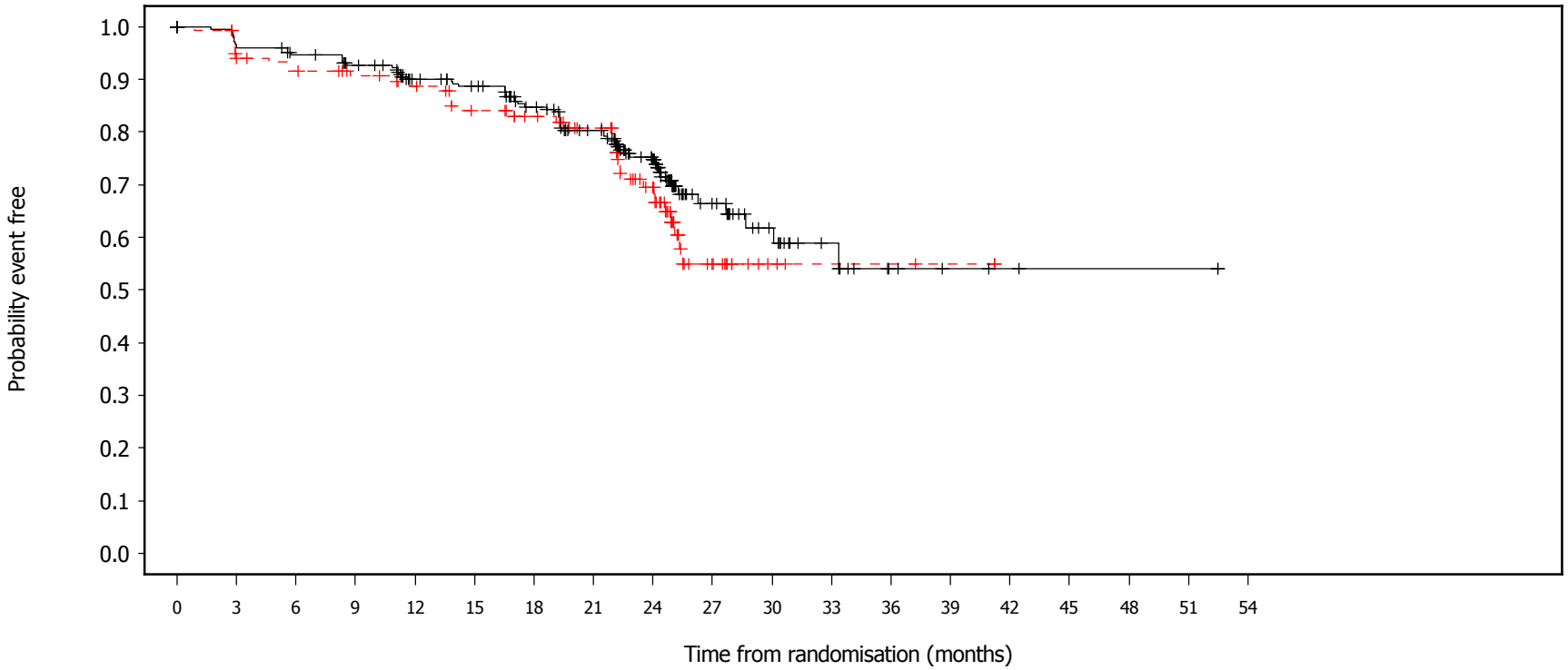


Number of patients at risk:

255	232	224	215	200	193	178	165	125	40	23	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	115	110	102	97	88	80	71	54	12	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.2.2.5 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Hormonal (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

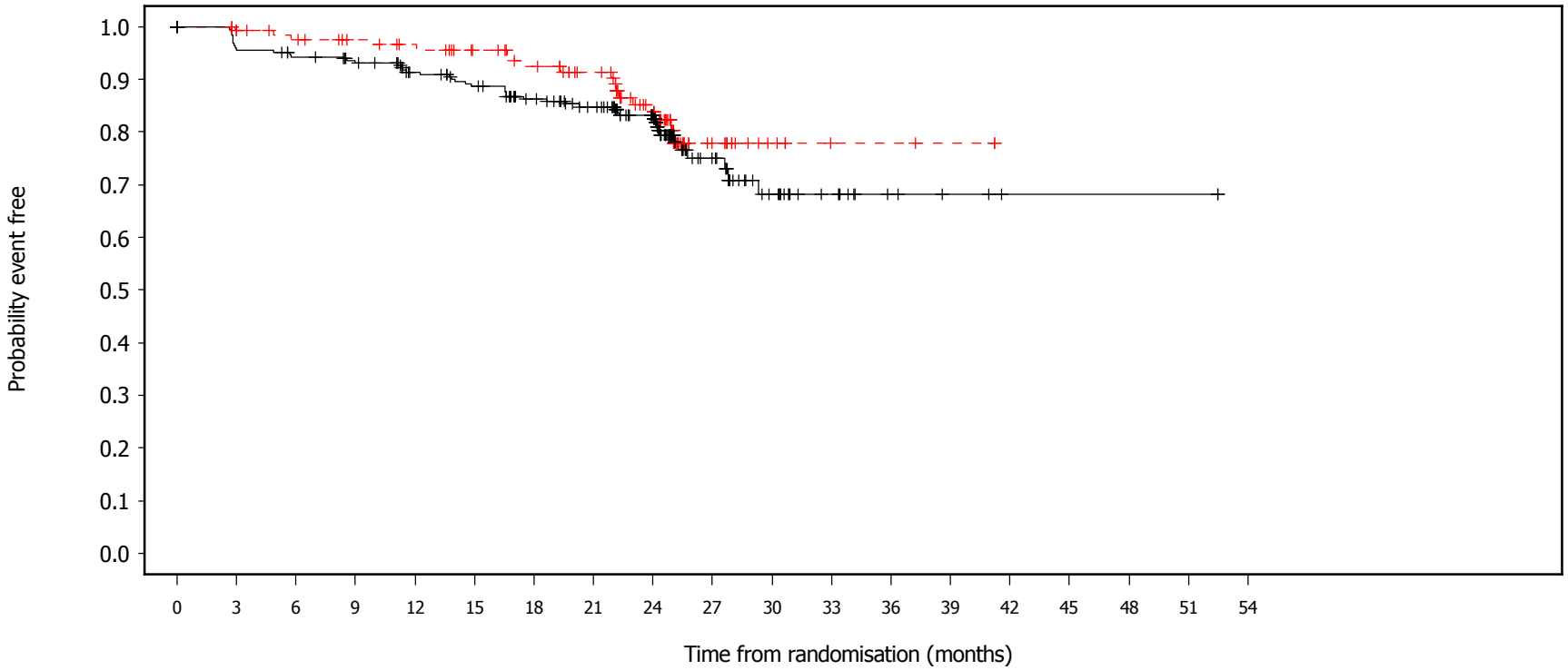


Number of patients at risk:

255	236	228	219	200	192	174	154	116	36	21	12	5	3	2	1	1	1	0	Olaparib + bevacizumab
132	111	105	100	96	86	80	70	48	14	4	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.2.2.6 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020

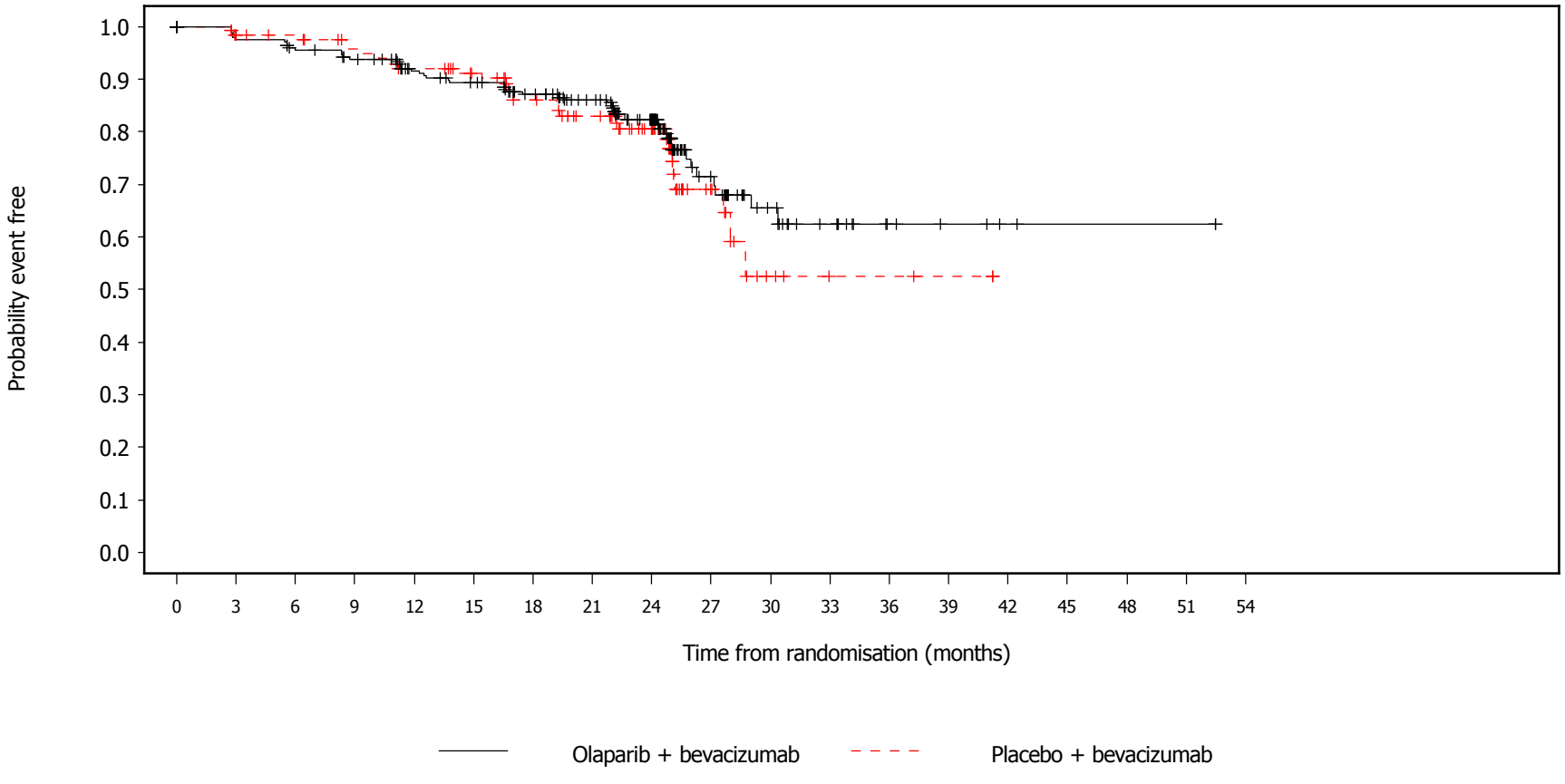


Number of patients at risk:

255	235	228	221	206	196	180	166	131	41	22	12	5	3	1	1	1	1	0	Olaparib + bevacizumab
132	118	112	107	103	96	89	80	58	15	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Figure 3.2.2.7 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Other single items (MID = 10) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020



Number of patients at risk:

255	239	230	223	204	196	180	165	128	41	23	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	117	113	106	100	93	83	73	57	16	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

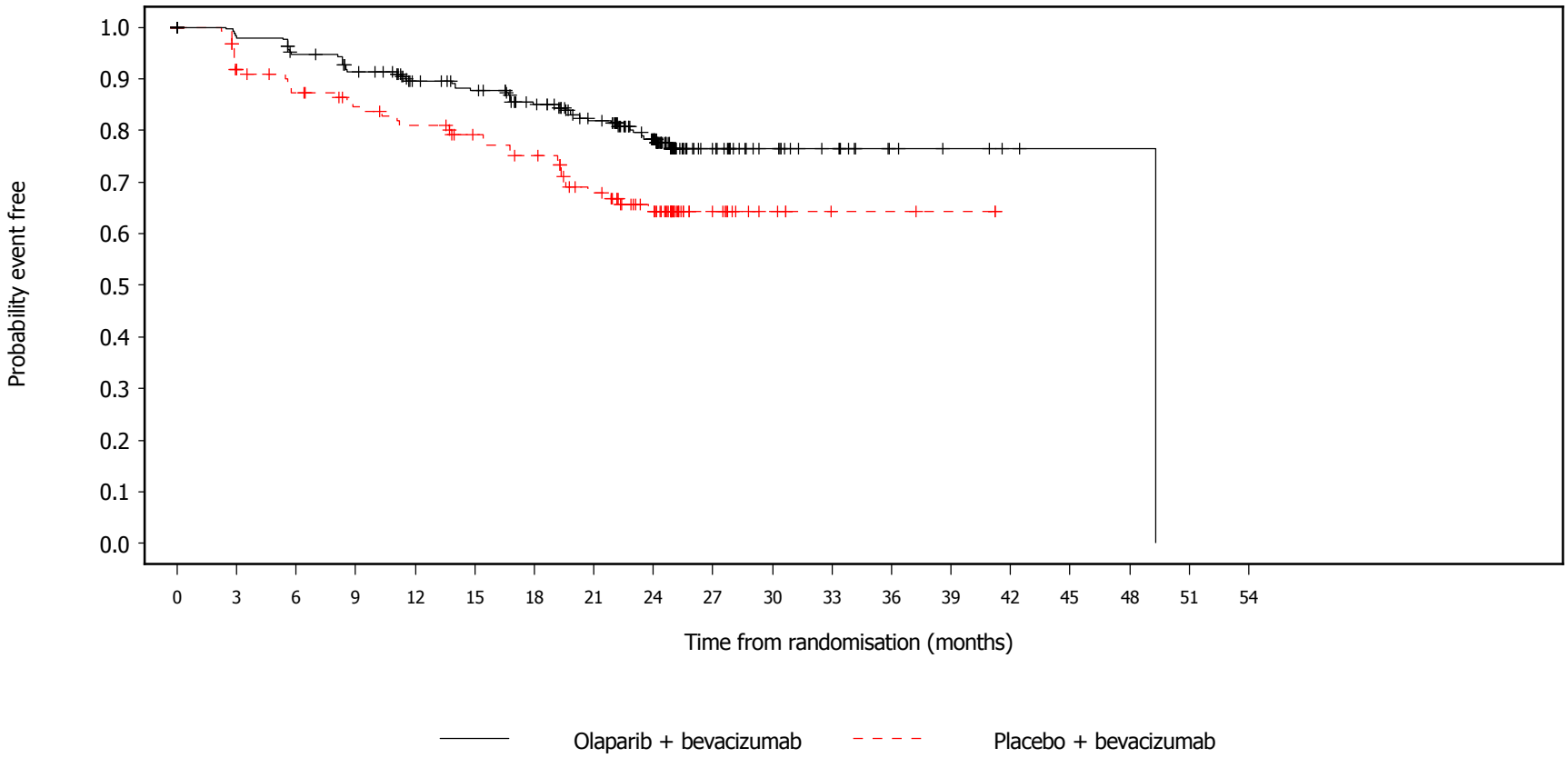
A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Table 3.2.3 PAOLA1 Appendix: Summary of analysis of time to sustained worsening in EORTC QLQ-OV28 symptom and single item scales (MID=10)
Sensitivity Analysis I (censoring patients with only one worsening post baseline and no subsequent observations)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 10)	255	50 (19.6)	49.3 (NE, NE)	132	38 (28.8)	NE (NE, NE)	0.54	0.35, 0.84	0.0046*
EORTC QLQ-OV28 Symptom scale/items: Body image (MID = 10)	255	29 (11.4)	NE (NE, NE)	132	26 (19.7)	NE (NE, NE)	0.57	0.33, 0.98	0.0379*
EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (MID = 10)	255	15 (5.9)	NE (NE, NE)	132	19 (14.4)	NE (NE, NE)	0.37	0.18, 0.72	0.0029*
EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 10)	255	35 (13.7)	NE (NE, NE)	132	21 (15.9)	NE (NE, NE)	0.83	0.48, 1.46	0.4988
EORTC QLQ-OV28 Symptom scale/items: Hormonal (MID = 10)	255	42 (16.5)	NE (NE, NE)	132	25 (18.9)	NE (NE, NE)	0.74	0.45, 1.23	0.2357
EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (MID = 10)	255	30 (11.8)	NE (NE, NE)	132	6 (4.5)	NE (NE, NE)	2.56	1.14, 6.84	0.0303*
EORTC QLQ-OV28 Symptom scale/items: Other single items (MID = 10)	255	30 (11.8)	NE (NE, NE)	132	15 (11.4)	NE (NE, NE)	0.96	0.52, 1.84	0.8954

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Figure 3.2.4.1 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Abdominal/GI (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

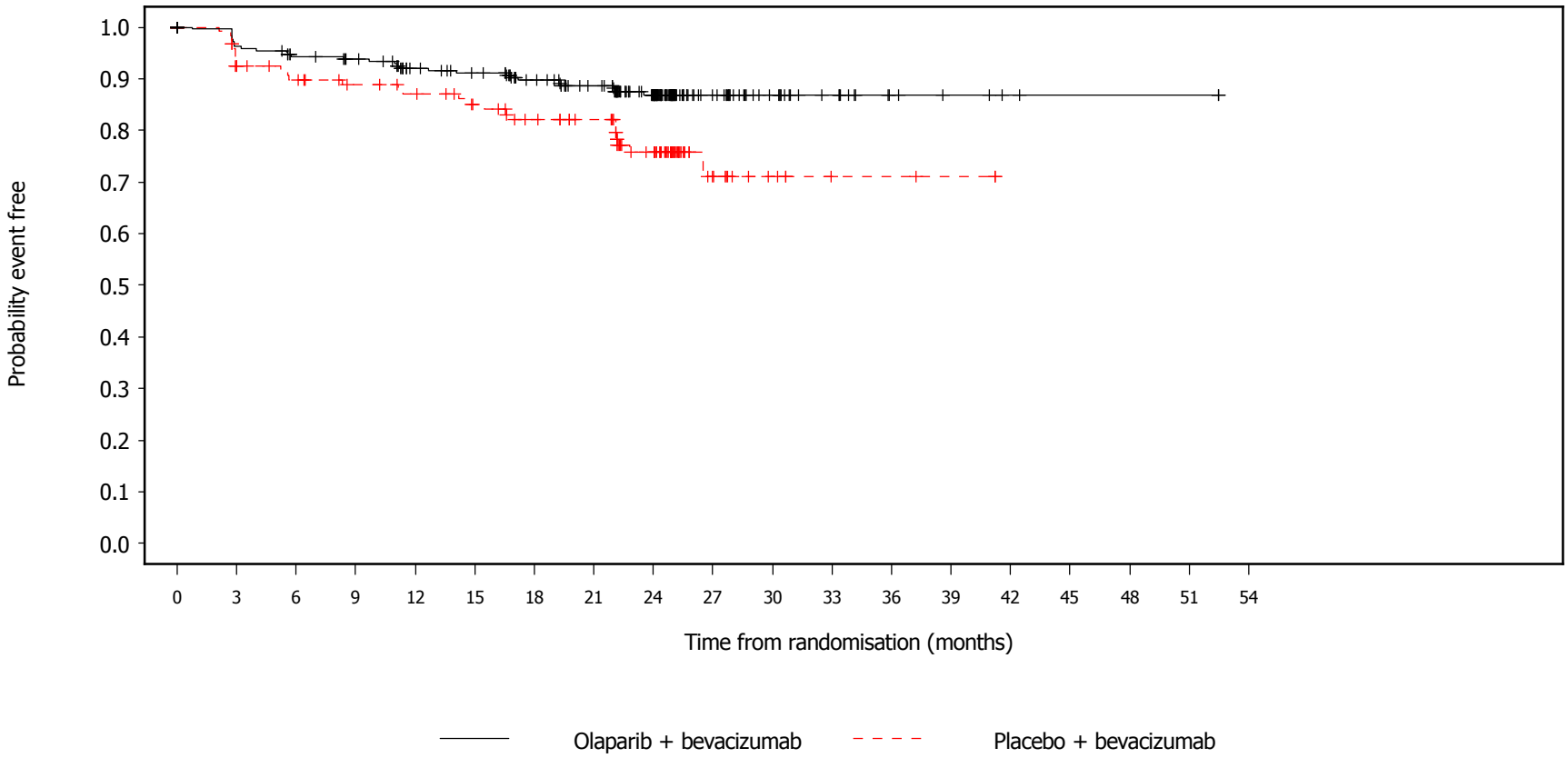


Number of patients at risk:

255	241	229	218	200	192	175	155	118	35	21	14	6	4	2	1	1	0	0	Olaparib + bevacizumab
132	109	100	93	88	81	76	63	48	14	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.2.4.2 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Body image (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

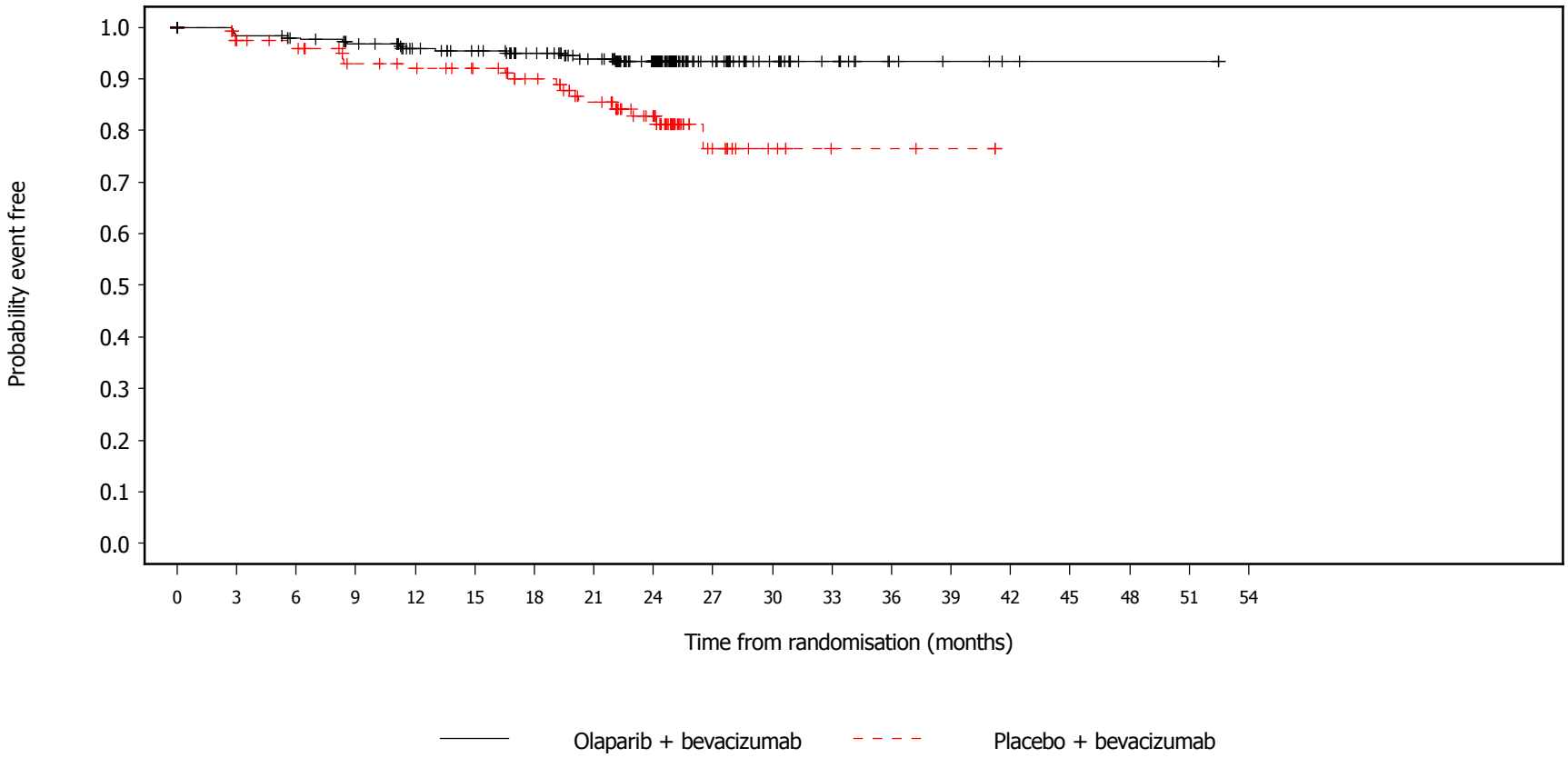


Number of patients at risk:

255	234	224	219	202	195	180	165	125	40	23	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	109	102	96	92	85	77	71	52	13	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.2.4.3 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Chemotherapy side effects (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

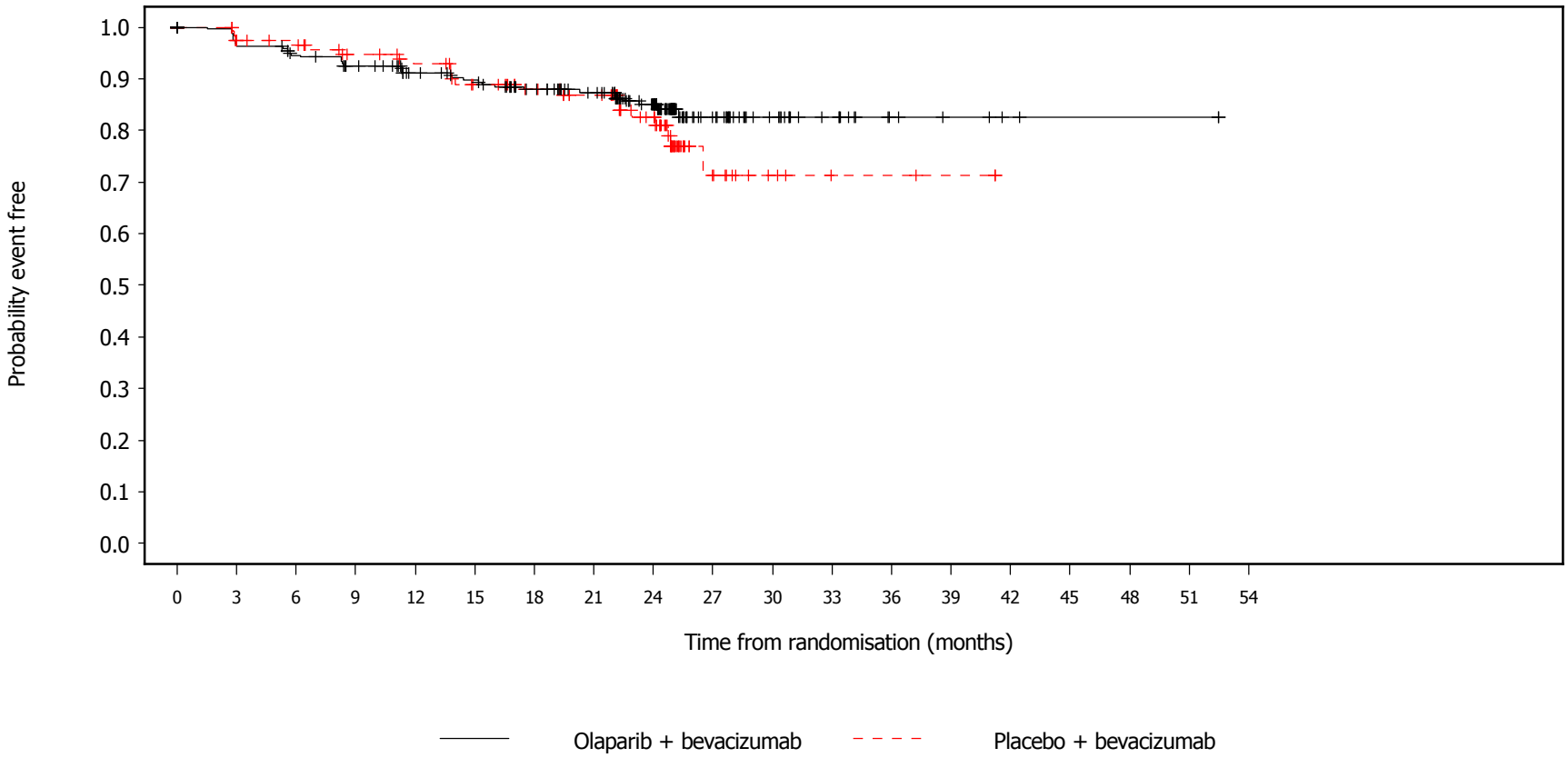


Number of patients at risk:

255	241	236	229	215	208	195	180	141	43	24	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	115	109	100	97	92	84	72	54	14	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.2.4.4 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Attitude to disease/treatment (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

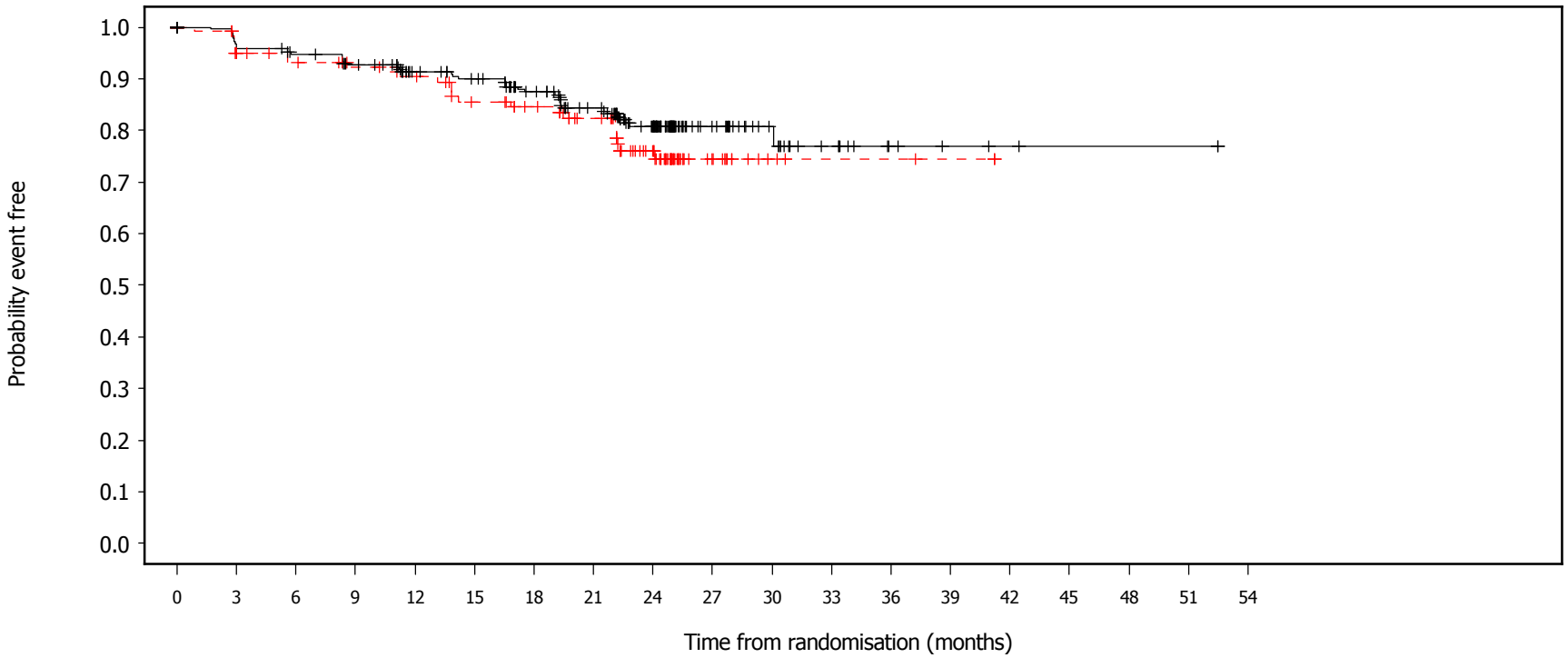


Number of patients at risk:

255	232	224	215	200	193	178	165	125	40	23	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	115	110	102	97	88	80	71	54	12	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.2.4.5 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Hormonal (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

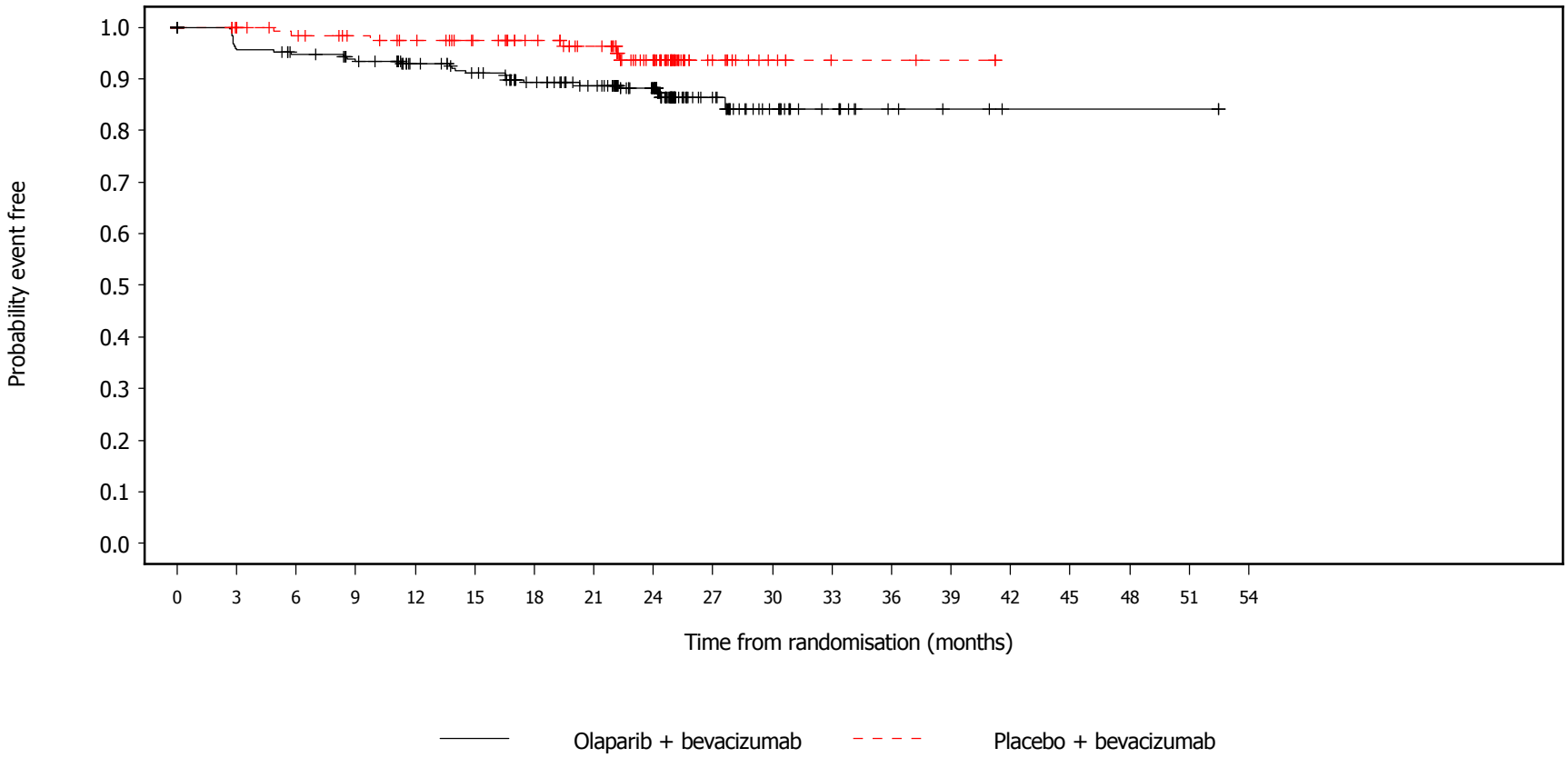


Number of patients at risk:

255	236	228	219	200	192	174	154	116	36	21	12	5	3	2	1	1	1	0	Olaparib + bevacizumab
132	111	105	100	96	86	80	70	48	14	4	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.2.4.6 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Peripheral neuropathy (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020

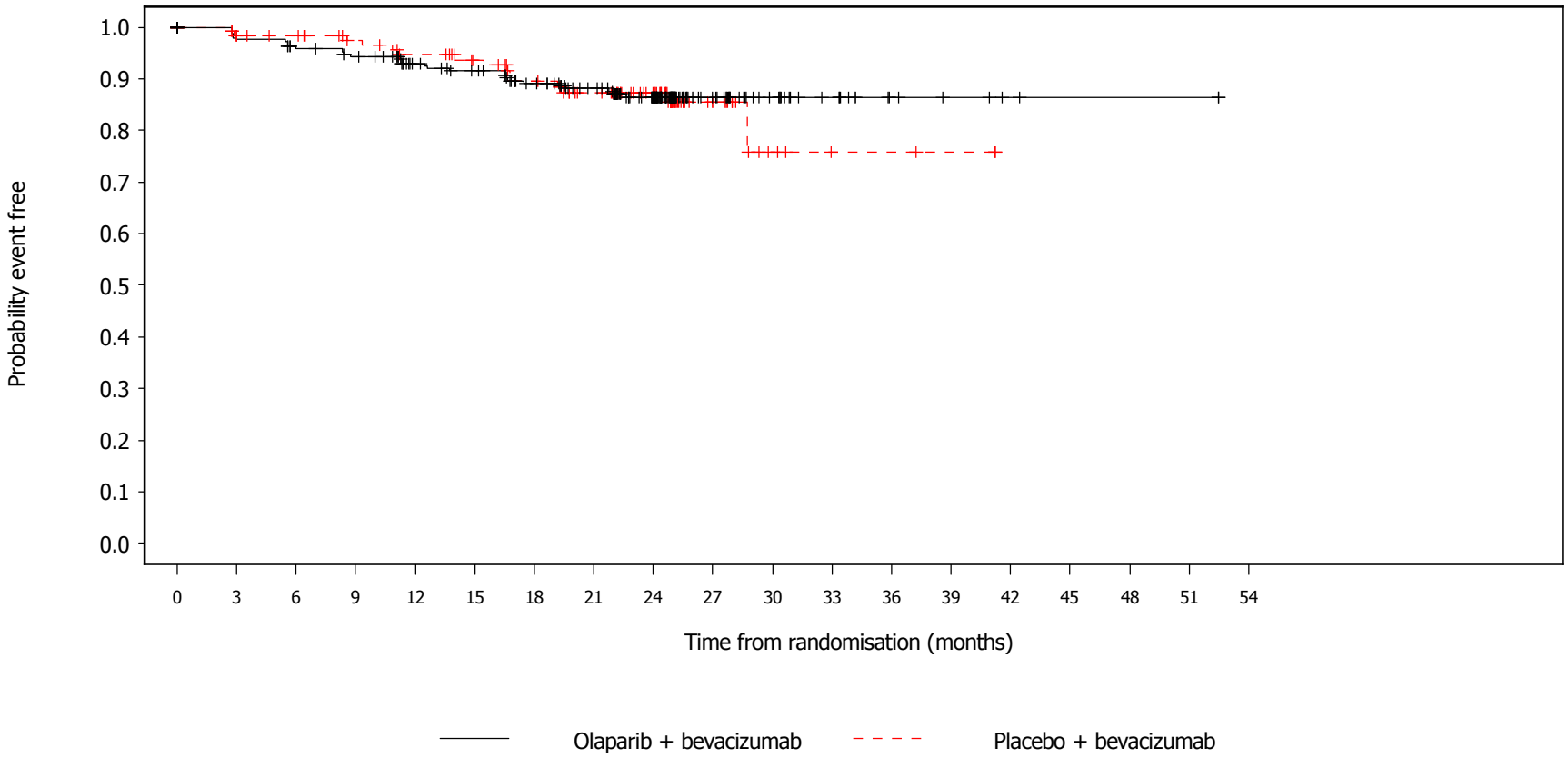


Number of patients at risk:

255	235	228	221	206	196	180	166	131	41	22	12	5	3	1	1	1	1	0	Olaparib + bevacizumab
132	118	112	107	103	96	89	80	58	15	6	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Figure 3.2.4.7 PAOLA1 Appendix: Kaplan-Meier plot of EORTC QLQ-OV28 Symptom scale/items: Other single items (MID = 10) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020



Number of patients at risk:

255	239	230	223	204	196	180	165	128	41	23	14	6	4	2	1	1	1	0	Olaparib + bevacizumab
132	117	113	106	100	93	83	73	57	16	5	2	2	1	0	0	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Table 3.3.1 PAOLA1 Appendix: Summary of analysis of time to sustained worsening in EQ-5D VAS (MID = 15)

Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EQ-5D-5L Visual analogue scale (MID = 15)	255	39 (15.3)	44.9 (NE, NE)	132	31 (23.5)	NE (NE, NE)	0.61	0.38, 0.995	0.0432*

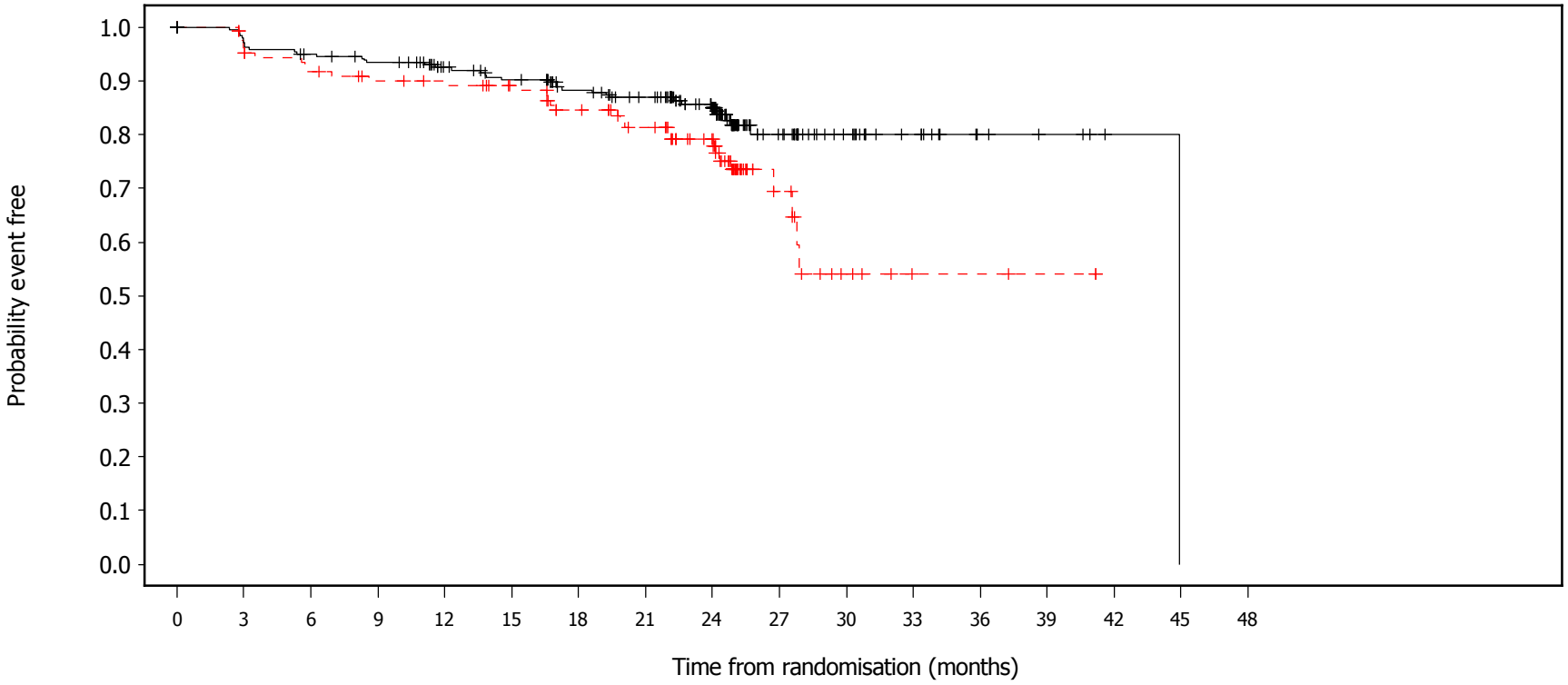
A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.

[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.

[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Figure 3.3.2.1 PAOLA1 Appendix: Kaplan-Meier plot of EQ-5D-5L Visual analogue scale (MID = 15) time to sustained worsening
Full Analysis Set, HRD[42] positive, DCO 22Mar2020



Number of patients at risk:

255	235	228	222	207	198	184	173	136	43	24	14	6	4	1	0	0	Olaparib + bevacizumab
132	116	110	105	103	97	87	78	62	16	6	2	2	1	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 15) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

Table 3.3.3 PAOLA1 Appendix: Summary of analysis of time to sustained worsening in EQ-5D VAS (MID = 15)
Sensitivity Analysis I (censoring patients with only one worsening post baseline and no subsequent observations)
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
EQ-5D-5L Visual analogue scale (MID = 15)	255	25 (9.8)	44.9 (NE, NE)	132	19 (14.4)	NE (NE, NE)	0.61	0.33, 1.13	0.1071

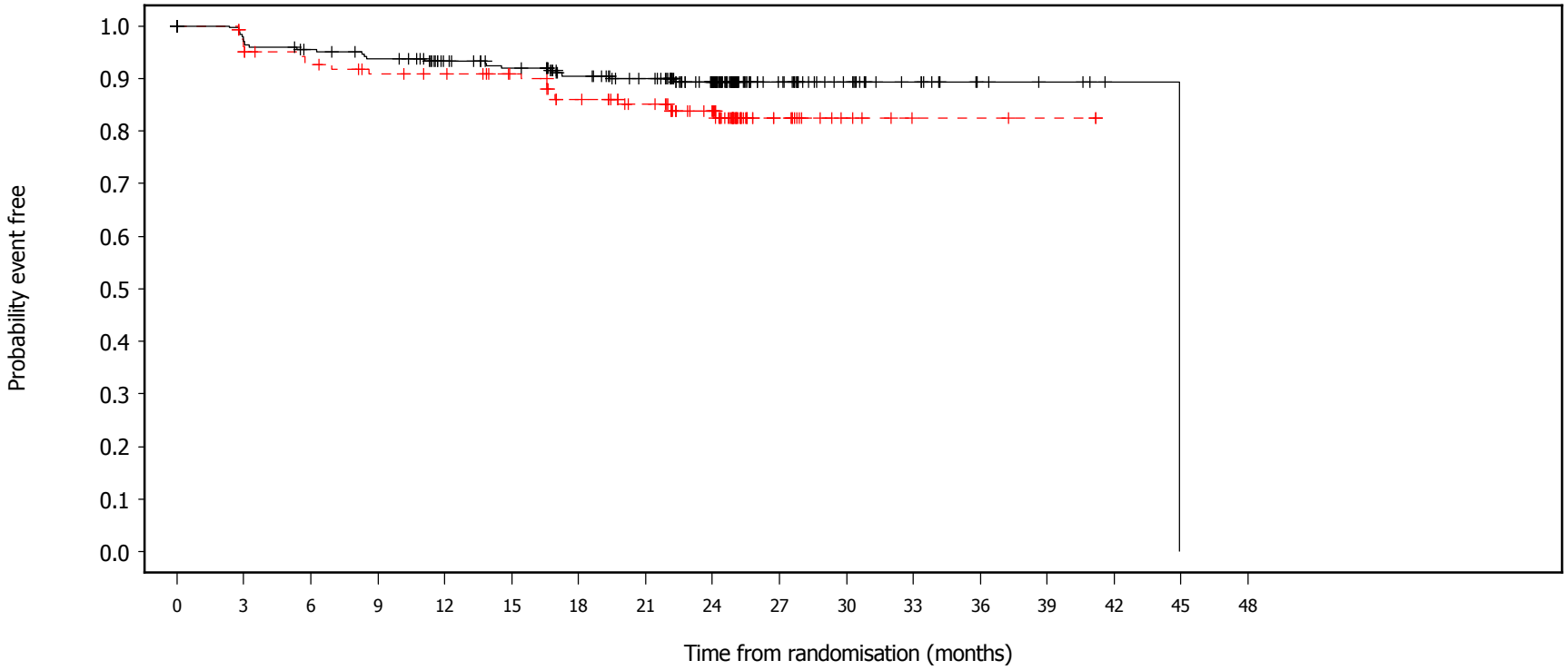
A sustained worsening is defined as a worsening of response (pts >= MID 10) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.

[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.

[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Figure 3.3.4.1 PAOLA1 Appendix: Kaplan-Meier plot of EQ-5D-5L Visual analogue scale (MID = 15) time to sustained worsening
Sensitivity analysis I, Full Analysis Set, HRD[42] positive, DCO 22Mar2020



Number of patients at risk:

255	235	228	222	207	198	184	173	136	43	24	14	6	4	1	0	0	Olaparib + bevacizumab
132	116	110	105	103	97	87	78	62	16	6	2	2	1	0	0	0	Placebo + bevacizumab

A sustained worsening is defined as a worsening of response (pts >= MID 15) without any recovery above response threshold compared to baseline value. Patients whose scores have not shown a sustained worsening will be censored at date of their last PRO assessment (also including those with too high/low baseline scores). Patients with no evaluable data at baseline or post baseline will be censored at date of randomisation.
Sensitivity Analysis - censoring patients with only one worsening post baseline and no subsequent observations.

Table 3.4 PAOLA1 Appendix: Patients unblinded prior to last PRO observation
Full Analysis Set, HRD[42] positive, DCO 22MAR2020

	Number (%) of patients		
	Olaparib + bevacizumab (N=255)	Placebo + bevacizumab (N=132)	Total (N=387)
Unblinded prior to last PRO observation	7 (2.7)	11 (8.3)	18 (4.7)

Table 1.0.1 PAOLA1: Summary of observation period (months) for efficacy endpoints
Full Analysis Set, HRD[42] positive, DCO 22MAR2022

		Olaparib + bevacizumab (N=255)	Placebo + bevacizumab (N=132)
Progression-free survival	n	255	132
	Median	38.87	16.80
	Min	0.0	0.0
	Max	76.5	71.1
Second Progression-free survival	n	255	132
	Median	53.59	35.30
	Min	0.0	0.0
	Max	76.5	72.0
Time to First Subsequent Cancer Therapy or Death	n	255	132
	Median	40.41	18.50
	Min	1.4	0.3
	Max	77.8	76.9
Time to Second Subsequent Cancer Therapy or Death	n	255	132
	Median	55.89	35.30
	Min	1.4	0.3
	Max	77.8	76.9
Overall Survival	n	255	132
	Median	58.74	55.38
	Min	1.4	0.3
	Max	77.8	76.9

Observation period for time-to-event efficacy endpoints is defined as the time from randomization to the date of the event or date of censoring used in the time to event (Kaplan Meier) analysis of the endpoint. No adjustment is made for the incomplete follow-up of those censored.

Table 1.0.2 PAOLA1: Summary of observation period (months) for recurrence free survival
Full Analysis Set, HRD[42] positive, DCO 22MAR2022

		Olaparib + bevacizumab (N=206)	Placebo + bevacizumab (N=106)
Time to recurrence or death	n	206	106
	Median	50.78	18.30
	Min	0.0	0.0
	Max	76.5	71.1

Observation period for time-to-event efficacy endpoints is defined as the time from randomization to the date of the event or date of censoring used in the time to event (Kaplan Meier) analysis of the endpoint. No adjustment is made for the incomplete follow-up of those censored.

Table 1.1.1.1 PAOLA1: Summary of Progression-free Survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
Progression-free survival	255	136 (53.3)	46.9 (36.4,65.7)	132	104 (78.8)	17.6 (15.8,20.3)	0.42	0.32, 0.55	<0.0001*

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Table 1.1.1.2 PAOLA1: Summary of Second Progression-free Survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
Second Progression-free survival	255	112 (43.9)	75.2 (57.1, NE)	132	90 (68.2)	37.7 (31.2,46.7)	0.56	0.42, 0.75	<0.0001*

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Table 1.1.1.3 PAOLA1: Summary of Time to First Subsequent Cancer Therapy or Death
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
Time to First Subsequent Cancer Therapy or Death	255	143 (56.1)	42.2 (35.7,60.3)	132	108 (81.8)	18.8 (16.1,20.5)	0.43	0.33, 0.56	<0.0001*

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Table 1.1.1.4 PAOLA1: Summary of Time to Second Subsequent Cancer Therapy or Death
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
Time to Second Subsequent Cancer Therapy or Death	255	115 (45.1)	75.2 (56.2, NE)	132	92 (69.7)	35.4 (29.2,45.2)	0.54	0.40, 0.71	<0.0001*

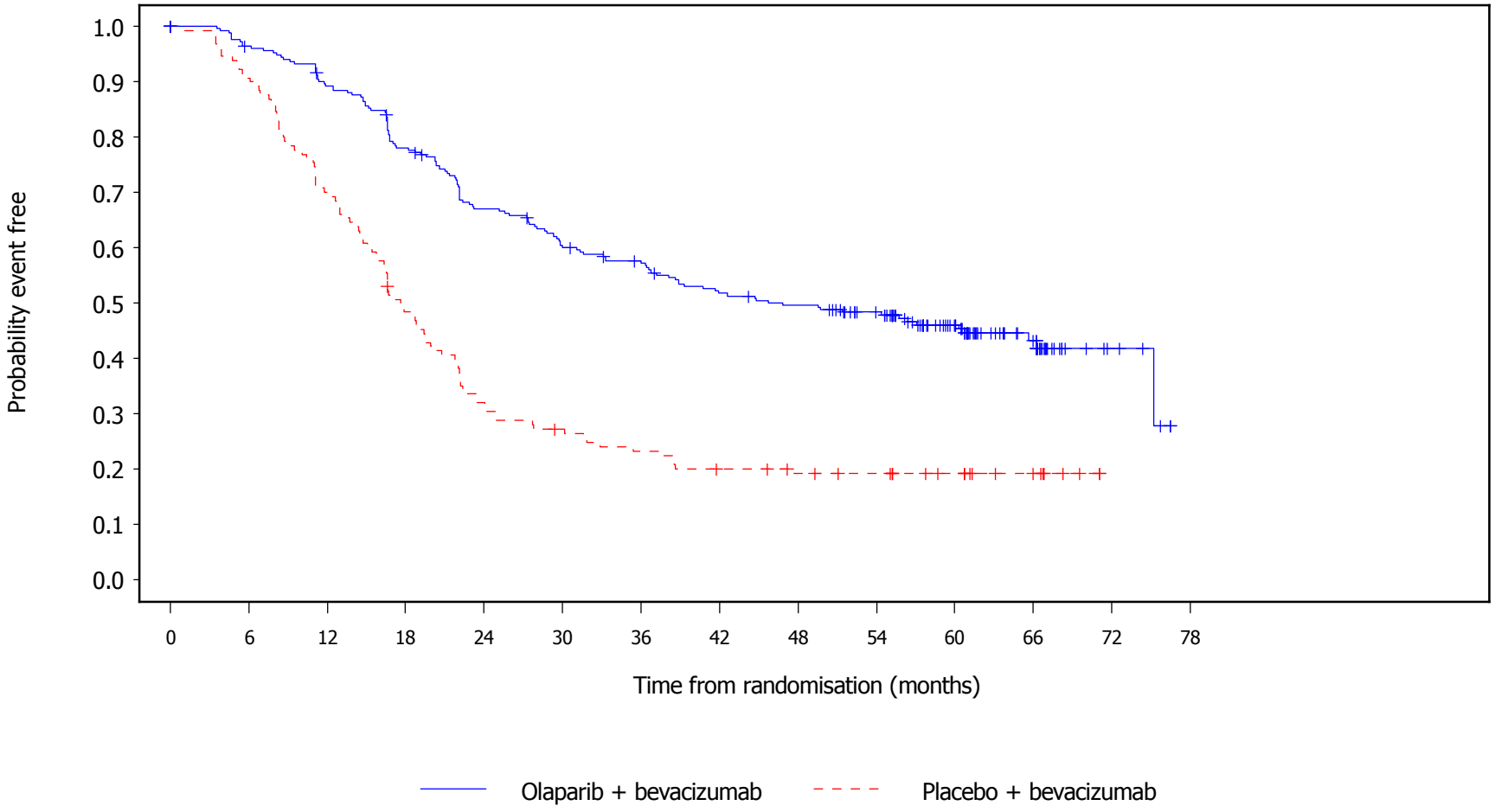
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

Table 1.1.1.5 PAOLA1: Summary of Overall Survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
Overall Survival	255	93 (36.5)	75.2 (73.3, NE)	132	69 (52.3)	57.3 (51.6, NE)	0.68	0.50, 0.94	0.0169*

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties. Hazard ratio <1 favours olaparib. * p<0.05.

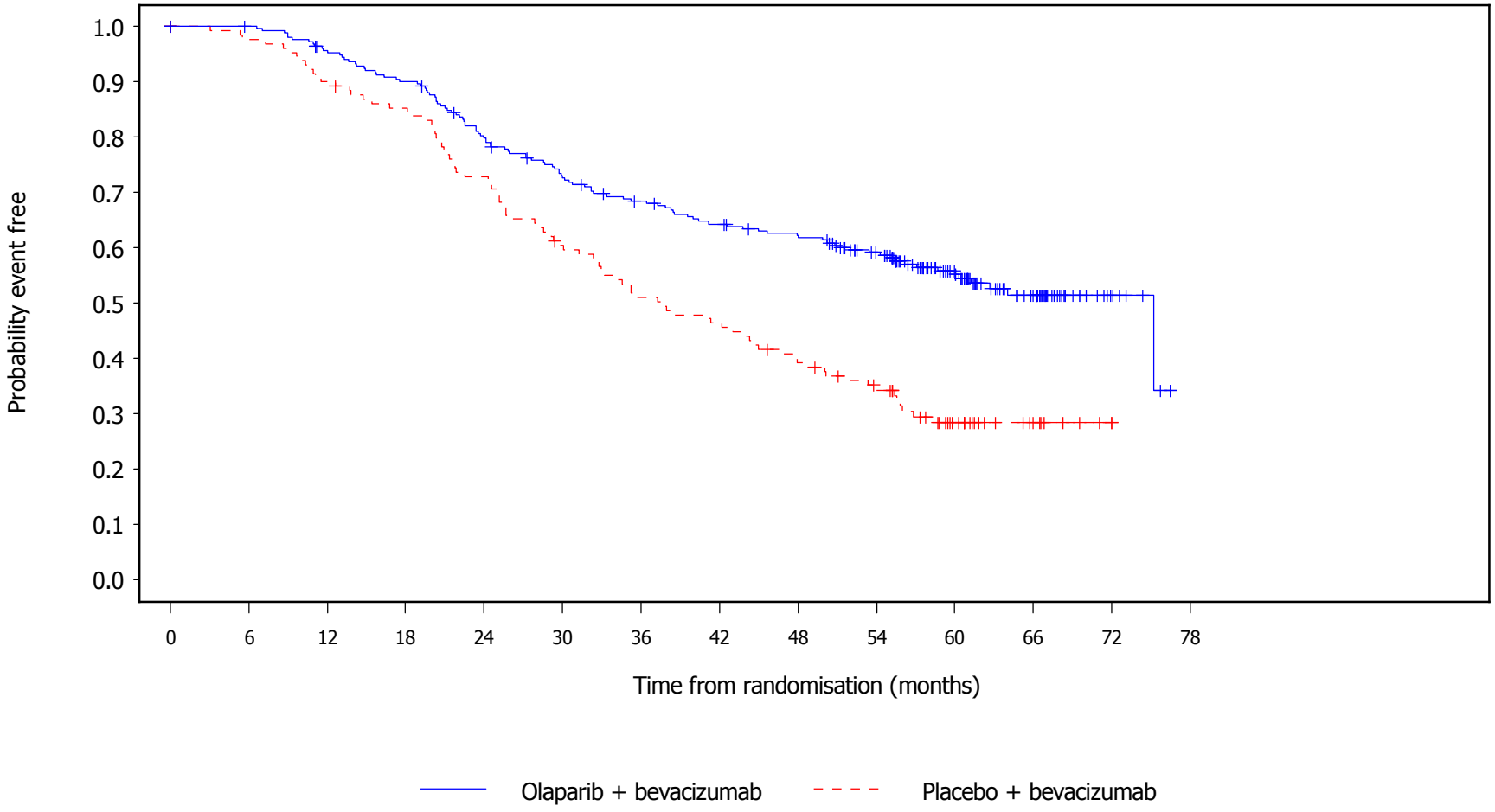
Figure 1.1.2.1 PAOLA1: Kaplan-Meier plot of Progression-free Survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	242	223	194	165	147	138	123	117	103	63	31	5	0	Olaparib + bevacizumab
132	118	91	62	41	34	29	24	21	19	13	7	0	0	Placebo + bevacizumab

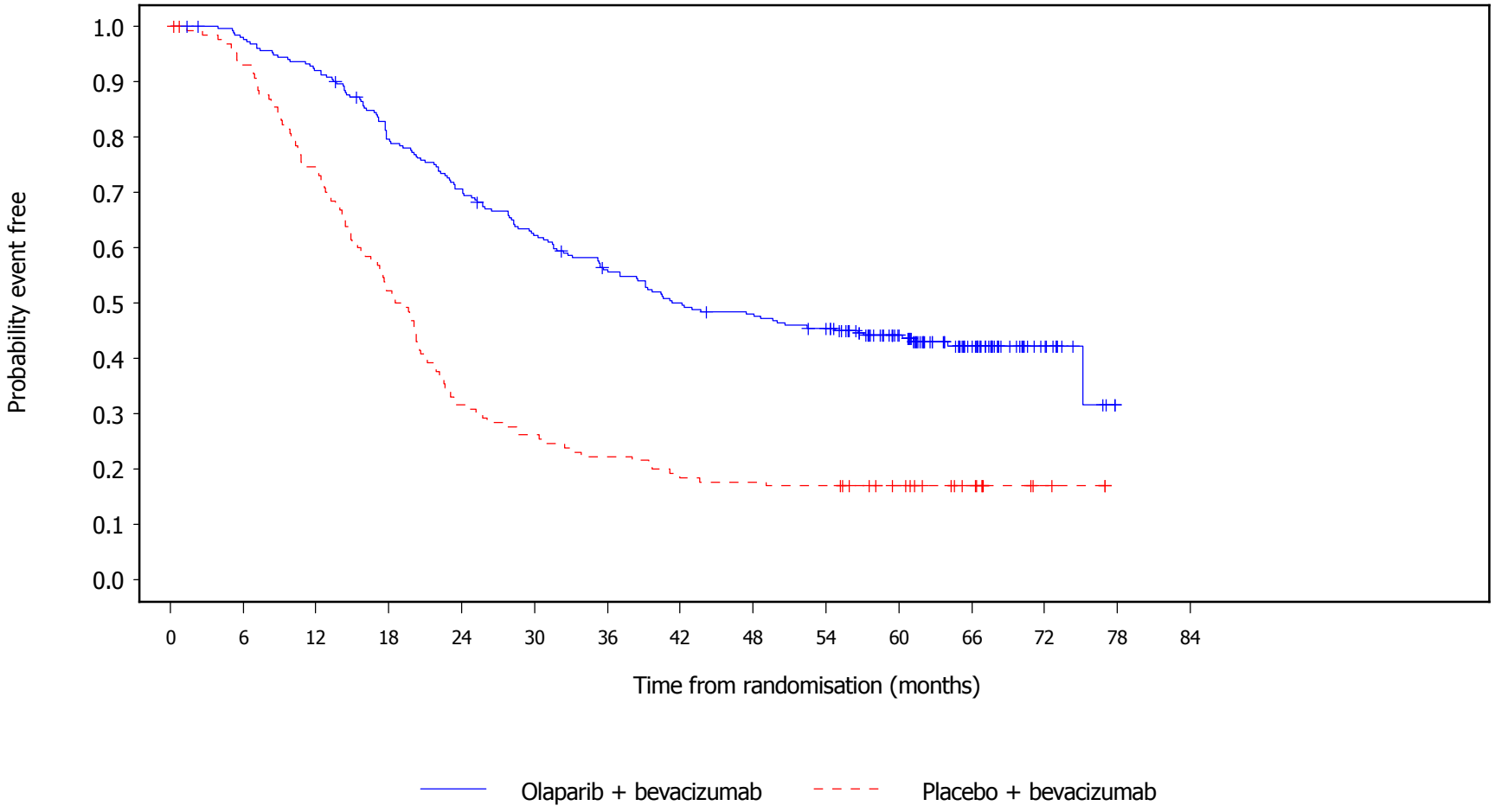
Figure 1.1.2.2 PAOLA1: Kaplan-Meier plot of Second Progression-free Survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	239	225	198	179	165	154	146	126	79	41	7	0	Olaparib + bevacizumab
132	127	117	110	94	77	65	59	49	40	22	9	0	0	Placebo + bevacizumab

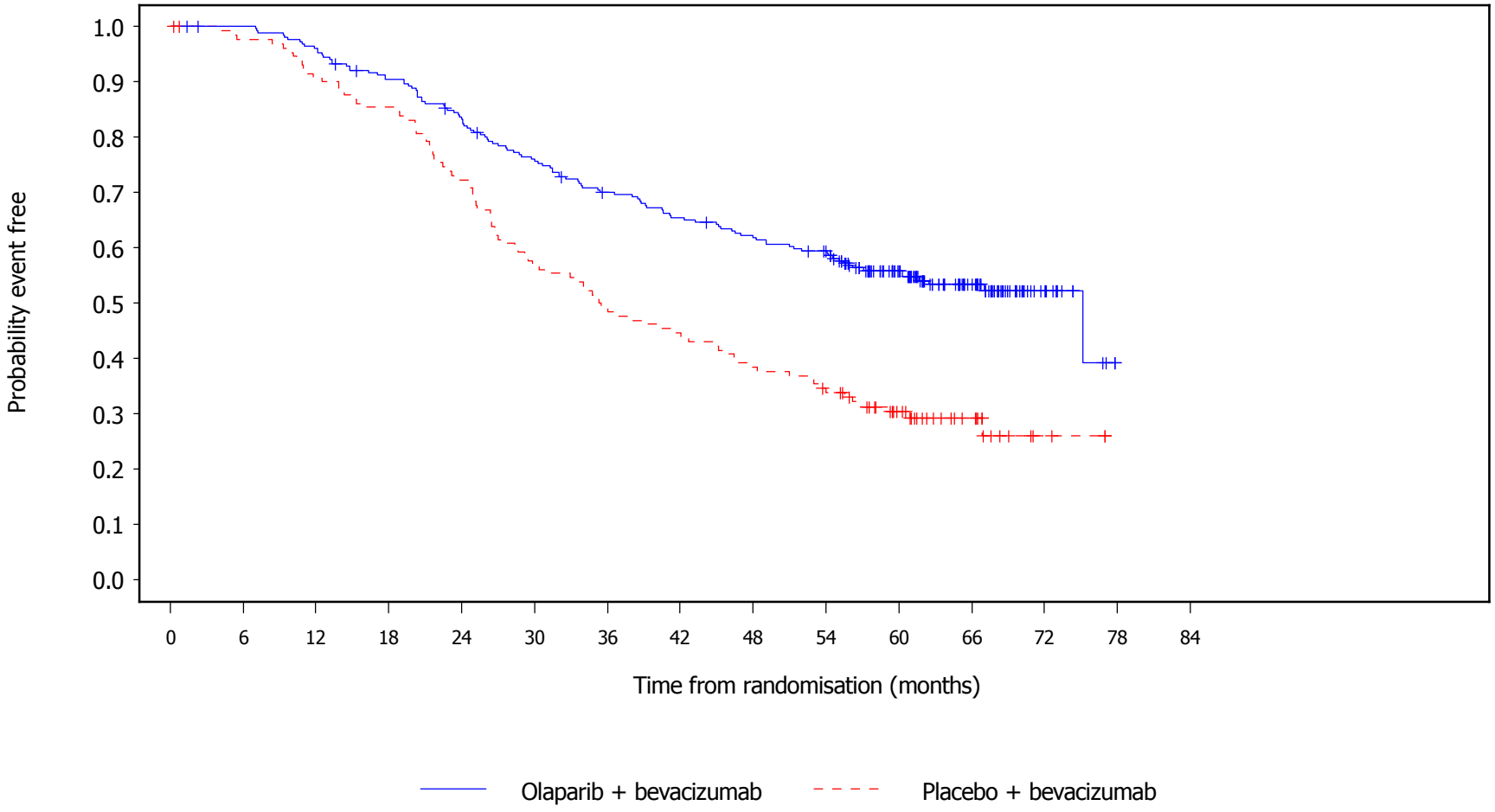
Figure 1.1.2.3 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	248	233	200	177	155	138	123	117	110	79	43	12	0	0	Olaparib + bevacizumab
132	121	96	68	41	34	29	24	23	22	16	9	2	0	0	Placebo + bevacizumab

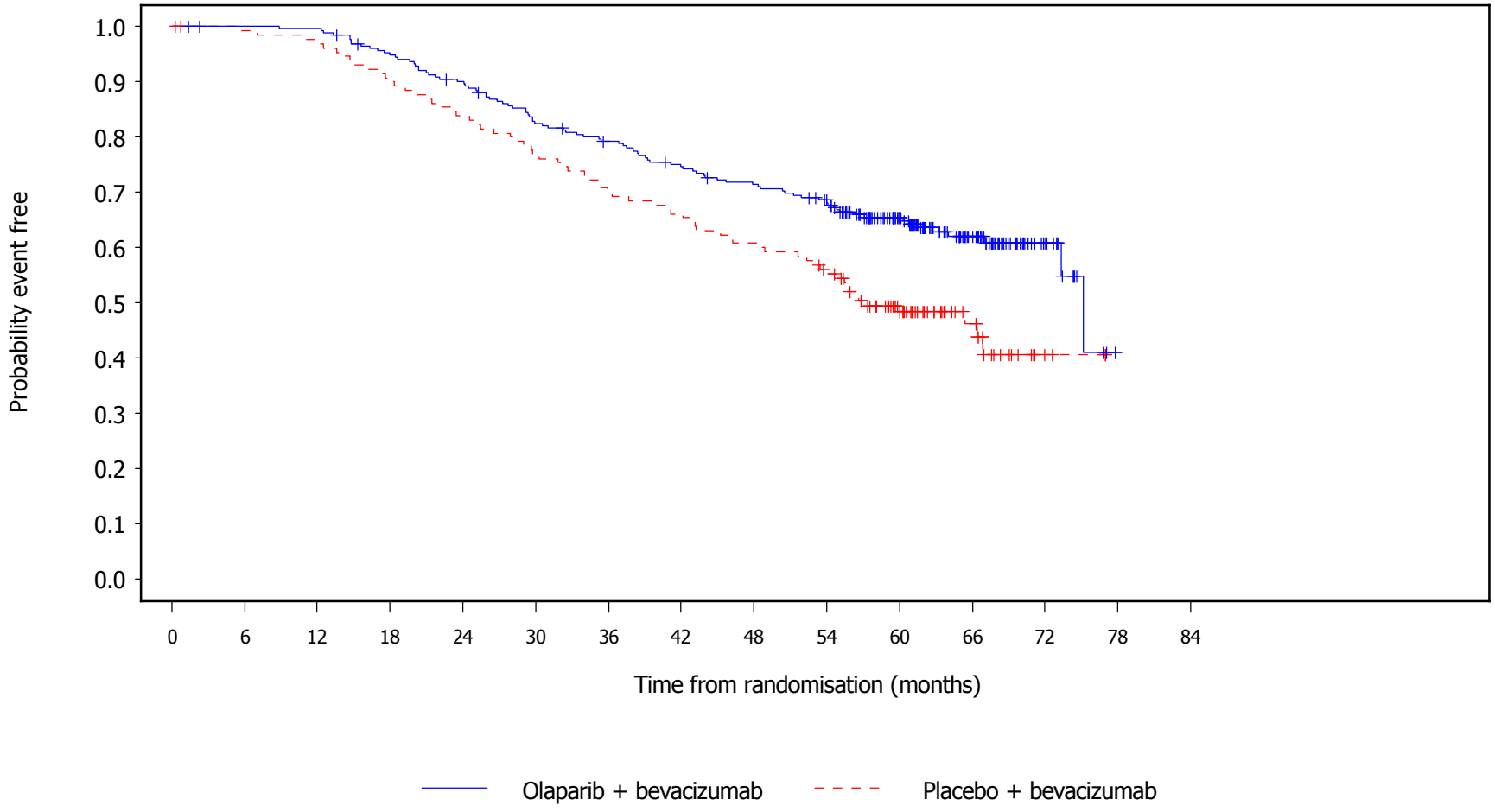
Figure 1.1.2.4 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	243	227	208	189	172	161	152	143	100	56	14	0	0	Olaparib + bevacizumab
132	127	118	111	94	74	64	58	50	43	28	14	2	0	0	Placebo + bevacizumab

Figure 1.1.2.5 PAOLA1: Kaplan-Meier plot of Overall Survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	238	225	205	195	183	174	164	116	62	17	0	0	Olaparib + bevacizumab
132	129	126	117	109	100	91	86	79	70	44	21	2	0	0	Placebo + bevacizumab

Table 1.1.3.1 PAOLA1: Summary of subgroup analysis of Progression-free survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	32 (34.8)	75.2 (65.7, NE)	48	34 (70.8)	21.7 (16.6,24.9)	0.27	0.17, 0.45	<0.0001*
NED/CR [IDS]	74	46 (62.2)	31.3 (22.1,44.8)	38	31 (81.6)	17.2 (13.7,22.1)	0.52	0.33, 0.82	0.0059*
NED/CR [Chemo]	40	19 (47.5)	57.1 (25.9, NE)	20	19 (95.0)	14.5 (10.9,22.3)	0.25	0.13, 0.48	<0.0001*
PR	49	39 (79.6)	22.0 (16.6,27.5)	26	20 (76.9)	16.0 (8.1,19.4)	0.68	0.40, 1.18	0.1675
Interaction p-value									0.0243*
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	75 (50.0)	56.4 (41.9, NE)	65	46 (70.8)	20.3 (15.4,24.0)	0.45	0.31, 0.65	<0.0001*
non-tBRCAm	105	61 (58.1)	30.0 (22.0,60.3)	67	58 (86.6)	16.5 (12.9,18.6)	0.40	0.28, 0.57	<0.0001*
Interaction p-value									0.6313
First line treatment outcome (eCRF)									
NED [PDS]	89	29 (32.6)	75.2 (66.3, NE)	47	33 (70.2)	21.9 (16.6,27.7)	0.26	0.16, 0.43	<0.0001*
NED/CR [IDS]	74	47 (63.5)	33.3 (22.1,44.8)	32	27 (84.4)	16.6 (12.9,22.1)	0.48	0.30, 0.78	0.0037*
NED/CR [Chemo]	39	21 (53.8)	38.9 (22.9, NE)	18	17 (94.4)	14.5 (10.9,21.9)	0.25	0.13, 0.49	<0.0001*
PR	50	37 (74.0)	22.1 (16.8,28.6)	34	26 (76.5)	16.7 (8.3,22.0)	0.67	0.41, 1.12	0.1282
Interaction p-value									0.0239*
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	74 (50.3)	56.4 (41.9, NE)	67	48 (71.6)	19.9 (15.4,23.5)	0.44	0.31, 0.63	<0.0001*
non-tBRCAm	108	62 (57.4)	33.3 (22.0,60.3)	65	56 (86.2)	16.5 (12.9,19.2)	0.40	0.28, 0.58	<0.0001*
Interaction p-value									0.7190
Age group									
<65 years	185	101 (54.6)	39.3 (31.1, NE)	98	77 (78.6)	18.7 (15.4,22.1)	0.45	0.33, 0.60	<0.0001*
>=65 years	70	35 (50.0)	60.3 (38.9, NE)	34	27 (79.4)	16.7 (10.9,19.5)	0.32	0.20, 0.54	<0.0001*
Interaction p-value									0.2873
FIGO Stage (Disease state)									
III	182	89 (48.9)	60.7 (39.3, NE)	90	67 (74.4)	21.0 (17.6,23.4)	0.43	0.31, 0.59	<0.0001*

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.1 PAOLA1: Summary of subgroup analysis of Progression-free survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)						
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]		2-sided p-value [b]
IV	73	47 (64.4)	28.1 (21.9,45.7)	42	37 (88.1)	12.8 (9.5,14.7)	0.35	0.22,	0.54	<0.0001*
Interaction p-value										0.4325
Region										
Europe	245	129 (52.7)	49.7 (37.2,66.3)	126	98 (77.8)	17.0 (15.1,20.3)	0.41	0.31,	0.53	<0.0001*
Japan	10	7 (70.0)	23.3 (5.6, NE)	6	6 (100)	20.7 (11.1, NE)	0.59	0.19,	1.83	0.3445
Interaction p-value										0.5175
ECOG performance status at Baseline										
(0) Normal activity	190	102 (53.7)	42.6 (31.3,66.3)	100	78 (78.0)	18.7 (15.4,21.9)	0.45	0.34,	0.61	<0.0001*
(1) Restricted activity	61	31 (50.8)	60.3 (36.0, NE)	31	26 (83.9)	16.8 (10.1,22.2)	0.28	0.17,	0.48	<0.0001*
Interaction p-value										0.1319
Baseline CA-125 value										
<=ULN	228	111 (48.7)	60.7 (41.9, NE)	118	93 (78.8)	17.7 (16.0,20.3)	0.36	0.27,	0.47	<0.0001*
>ULN	27	25 (92.6)	16.6 (11.9,23.1)	14	11 (78.6)	11.4 (5.1,37.7)	1.12	0.56,	2.37	0.7512
Interaction p-value										0.0023*
Histological grade										
High grade	255	136 (53.3)	46.9 (36.4,65.7)	132	104 (78.8)	17.6 (15.8,20.3)	0.41	0.32,	0.53	<0.0001*
Interaction p-value										NC
Cytoreductive surgery outcome										
No residue	166	78 (47.0)	65.7 (45.7, NE)	80	61 (76.3)	19.5 (16.6,22.3)	0.38	0.27,	0.54	<0.0001*
Residue	79	48 (60.8)	30.0 (22.1,41.9)	44	36 (81.8)	14.5 (10.9,20.3)	0.45	0.29,	0.70	0.0005*
Interaction p-value										0.5466
Timing of cytoreductive surgery										
Upfront	146	62 (42.5)	75.2 (60.3, NE)	79	59 (74.7)	18.8 (16.4,22.2)	0.33	0.23,	0.47	<0.0001*
Interval	99	64 (64.6)	31.3 (22.1,40.8)	45	38 (84.4)	16.6 (12.9,20.3)	0.50	0.34,	0.75	0.0011*
Interaction p-value										0.1263

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.1 PAOLA1: Summary of subgroup analysis of Progression-free survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Myriad tumour BRCA mutation status									
tBRCAm	158	78 (49.4)	56.4 (38.9, NE)	77	58 (75.3)	18.8 (14.7,22.1)	0.39	0.28, 0.55	<0.0001*
Non-tBRCAm	97	58 (59.8)	30.0 (21.9,60.3)	55	46 (83.6)	16.6 (12.9,19.5)	0.45	0.31, 0.67	0.0001*
Interaction p-value									0.5701
Status somatic BRCA mutations									
sBRCAm	25	10 (40.0)	NE (NE, NE)	9	8 (88.9)	17.9 (5.3,37.7)	0.23	0.09, 0.60	0.0037*
gBRCAm	69	36 (52.2)	46.9 (36.0, NE)	36	26 (72.2)	22.2 (16.6,31.9)	0.47	0.28, 0.79	0.0045*
Non-BRCAm	43	26 (60.5)	39.3 (21.2, NE)	23	21 (91.3)	15.8 (9.5,19.5)	0.30	0.17, 0.54	<0.0001*
Interaction p-value									0.3060

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.2 PAOLA1: Summary of subgroup analysis of Second Progression-free survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	21 (22.8)	NE (NE, NE)	48	26 (54.2)	44.3 (33.2, NE)	0.29	0.16, 0.52	<0.0001*
NED/CR [IDS]	74	38 (51.4)	60.0 (32.3, NE)	38	28 (73.7)	43.3 (24.5,55.6)	0.65	0.40, 1.07	0.0891
NED/CR [Chemo]	40	17 (42.5)	61.3 (37.8, NE)	20	18 (90.0)	31.2 (24.5,41.0)	0.36	0.18, 0.70	0.0030*
PR	49	36 (73.5)	30.6 (23.7,45.0)	26	18 (69.2)	29.3 (21.0,54.0)	0.97	0.56, 1.75	0.9280
Interaction p-value									0.0138*
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	56 (37.3)	75.2 (64.0, NE)	65	40 (61.5)	46.7 (33.0,55.4)	0.50	0.34, 0.76	0.0013*
non-tBRCAm	105	56 (53.3)	52.0 (35.3, NE)	67	50 (74.6)	32.3 (25.7,41.3)	0.59	0.40, 0.87	0.0075*
Interaction p-value									0.5802
First line treatment outcome (eCRF)									
NED [PDS]	89	19 (21.3)	NE (NE, NE)	47	24 (51.1)	51.9 (35.3, NE)	0.30	0.16, 0.55	0.0001*
NED/CR [IDS]	74	38 (51.4)	60.0 (37.3, NE)	32	25 (78.1)	43.3 (24.5,55.4)	0.61	0.37, 1.02	0.0568
NED/CR [Chemo]	39	19 (48.7)	57.1 (25.9, NE)	18	17 (94.4)	30.1 (16.8,38.3)	0.35	0.18, 0.68	0.0023*
PR	50	34 (68.0)	31.9 (28.6,50.8)	34	23 (67.6)	27.5 (21.0,54.0)	0.92	0.54, 1.58	0.7508
Interaction p-value									0.0240*
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	55 (37.4)	75.2 (64.0, NE)	67	42 (62.7)	46.7 (33.0,55.6)	0.49	0.33, 0.74	0.0008*
non-tBRCAm	108	57 (52.8)	53.5 (35.3, NE)	65	48 (73.8)	32.3 (25.7,38.3)	0.59	0.40, 0.87	0.0078*
Interaction p-value									0.5279
Age group									
<65 years	185	86 (46.5)	62.7 (52.0, NE)	98	63 (64.3)	37.7 (31.2,47.6)	0.63	0.45, 0.87	0.0054*
>=65 years	70	26 (37.1)	NE (NE, NE)	34	27 (79.4)	34.6 (21.0,53.4)	0.32	0.19, 0.55	<0.0001*
Interaction p-value									0.0381*
FIGO Stage (Disease state)									
III	182	69 (37.9)	75.2 (64.0, NE)	90	55 (61.1)	45.0 (35.4,55.6)	0.52	0.36, 0.74	0.0004*

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.2 PAOLA1: Summary of subgroup analysis of Second Progression-free survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
IV	73	43 (58.9)	37.8 (29.7,58.7)	42	35 (83.3)	25.6 (21.8,33.0)	0.54	0.34, 0.84	0.0073*
Interaction p-value									0.9172
Region									
Europe	245	106 (43.3)	75.2 (58.7, NE)	126	86 (68.3)	37.7 (31.2,45.0)	0.51	0.38, 0.68	<0.0001*
Japan	10	6 (60.0)	33.8 (9.3, NE)	6	4 (66.7)	41.1 (18.5, NE)	1.02	0.29, 3.97	0.9813
Interaction p-value									0.2916
ECOG performance status at Baseline									
(0) Normal activity	190	87 (45.8)	62.7 (50.8, NE)	100	67 (67.0)	37.9 (29.8,48.6)	0.59	0.43, 0.82	0.0015*
(1) Restricted activity	61	22 (36.1)	NE (NE, NE)	31	23 (74.2)	34.6 (25.1,54.0)	0.34	0.19, 0.62	0.0004*
Interaction p-value									0.1061
Baseline CA-125 value									
<=ULN	228	87 (38.2)	75.2 (75.2, NE)	118	79 (66.9)	41.0 (32.6,48.6)	0.45	0.33, 0.62	<0.0001*
>ULN	27	25 (92.6)	24.1 (16.3,33.4)	14	11 (78.6)	22.7 (9.7,45.0)	1.21	0.61, 2.57	0.5927
Interaction p-value									0.0099*
Histological grade									
High grade	255	112 (43.9)	75.2 (57.1, NE)	132	90 (68.2)	37.7 (31.2,46.7)	0.52	0.40, 0.70	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	59 (35.5)	75.2 (75.2, NE)	80	50 (62.5)	44.5 (34.6,55.8)	0.46	0.32, 0.68	<0.0001*
Residue	79	45 (57.0)	45.7 (29.7,58.7)	44	33 (75.0)	29.1 (21.8,37.3)	0.60	0.38, 0.94	0.0265*
Interaction p-value									0.4047
Timing of cytoreductive surgery									
Upfront	146	50 (34.2)	75.2 (75.2, NE)	79	48 (60.8)	37.7 (30.1,50.2)	0.42	0.28, 0.63	<0.0001*
Interval	99	54 (54.5)	53.5 (32.3,64.0)	45	35 (77.8)	34.6 (24.5,50.0)	0.62	0.41, 0.96	0.0325*
Interaction p-value									0.1929

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.2 PAOLA1: Summary of subgroup analysis of Second Progression-free survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Myriad tumour BRCA mutation status									
tBRCAm	158	60 (38.0)	75.2 (64.0, NE)	77	51 (66.2)	43.0 (33.0,51.9)	0.47	0.32, 0.68	0.0001*
Non-tBRCAm	97	52 (53.6)	52.0 (32.2, NE)	55	39 (70.9)	30.1 (25.1,43.8)	0.62	0.41, 0.95	0.0278*
Interaction p-value									0.3191
Status somatic BRCA mutations									
sBRCAm	25	7 (28.0)	NE (NE, NE)	9	8 (88.9)	37.7 (9.7,50.0)	0.19	0.07, 0.53	0.0020*
gBRCAm	69	28 (40.6)	75.2 (60.0, NE)	36	21 (58.3)	53.7 (44.5, NE)	0.64	0.37, 1.15	0.1336
Non-BRCAm	43	22 (51.2)	60.3 (29.7, NE)	23	18 (78.3)	30.1 (20.3,44.3)	0.41	0.22, 0.78	0.0073*
Interaction p-value									0.1114

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.3 PAOLA1: Summary of subgroup analysis of Time to First Subsequent Cancer Therapy or Death
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	32 (34.8)	75.2 (75.2, NE)	48	35 (72.9)	21.2 (17.1,25.2)	0.25	0.16, 0.41	<0.0001*
NED/CR [IDS]	74	52 (70.3)	29.7 (22.8,39.7)	38	33 (86.8)	18.4 (15.0,23.1)	0.55	0.36, 0.86	0.0094*
NED/CR [Chemo]	40	20 (50.0)	54.8 (26.4, NE)	20	19 (95.0)	14.9 (10.5,22.6)	0.24	0.13, 0.46	<0.0001*
PR	49	39 (79.6)	23.2 (17.7,27.9)	26	21 (80.8)	15.7 (8.8,22.1)	0.66	0.39, 1.15	0.1384
Interaction p-value									0.0095*
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	82 (54.7)	49.6 (38.4, NE)	65	49 (75.4)	20.4 (14.9,23.1)	0.44	0.31, 0.63	<0.0001*
non-tBRCAm	105	61 (58.1)	35.4 (24.8,60.3)	67	59 (88.1)	18.0 (14.8,20.1)	0.39	0.27, 0.55	<0.0001*
Interaction p-value									0.6121
First line treatment outcome (eCRF)									
NED [PDS]	89	30 (33.7)	75.2 (75.2, NE)	47	34 (72.3)	21.5 (17.1,27.8)	0.25	0.15, 0.41	<0.0001*
NED/CR [IDS]	74	53 (71.6)	35.3 (23.1,40.4)	32	27 (84.4)	17.7 (14.4,23.1)	0.55	0.35, 0.88	0.0142*
NED/CR [Chemo]	39	21 (53.8)	39.3 (26.4, NE)	18	17 (94.4)	14.9 (10.5,20.3)	0.22	0.11, 0.42	<0.0001*
PR	50	37 (74.0)	23.8 (17.8,30.8)	34	29 (85.3)	19.0 (9.5,22.1)	0.61	0.38, 1.004	0.0519
Interaction p-value									0.0099*
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	81 (55.1)	49.6 (38.4, NE)	67	51 (76.1)	20.0 (14.9,22.5)	0.43	0.30, 0.61	<0.0001*
non-tBRCAm	108	62 (57.4)	38.5 (24.8, NE)	65	57 (87.7)	18.4 (14.8,20.3)	0.39	0.27, 0.56	<0.0001*
Interaction p-value									0.6938
Age group									
<65 years	185	108 (58.4)	39.2 (31.9,50.7)	98	81 (82.7)	18.5 (14.9,21.7)	0.43	0.32, 0.58	<0.0001*
>=65 years	70	35 (50.0)	60.3 (39.1, NE)	34	27 (79.4)	19.1 (10.9,20.6)	0.33	0.20, 0.55	<0.0001*
Interaction p-value									0.3599
FIGO Stage (Disease state)									
III	182	95 (52.2)	52.5 (39.2, NE)	90	69 (76.7)	20.4 (18.5,23.1)	0.43	0.32, 0.59	<0.0001*

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.3 PAOLA1: Summary of subgroup analysis of Time to First Subsequent Cancer Therapy or Death
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)						
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]		2-sided p-value [b]
IV	73	48 (65.8)	29.2 (22.8,41.3)	42	39 (92.9)	13.9 (10.9,15.4)	0.34	0.22,	0.52	<0.0001*
Interaction p-value										0.3547
Region										
Europe	245	136 (55.5)	43.0 (37.0,61.2)	126	102 (81.0)	18.5 (15.4,20.5)	0.40	0.31,	0.52	<0.0001*
Japan	10	7 (70.0)	23.9 (6.3, NE)	6	6 (100)	21.5 (12.0, NE)	0.58	0.19,	1.79	0.3286
Interaction p-value										0.5178
ECOG performance status at Baseline										
(0) Normal activity	190	106 (55.8)	41.3 (32.4,64.0)	100	82 (82.0)	19.7 (15.7,21.2)	0.42	0.32,	0.57	<0.0001*
(1) Restricted activity	61	34 (55.7)	48.1 (28.6, NE)	31	26 (83.9)	17.5 (10.5,22.5)	0.31	0.19,	0.52	<0.0001*
Interaction p-value										0.3032
Baseline CA-125 value										
<=ULN	228	117 (51.3)	54.8 (40.5, NE)	118	96 (81.4)	19.7 (17.1,21.0)	0.36	0.27,	0.47	<0.0001*
>ULN	27	26 (96.3)	19.1 (12.4,24.1)	14	12 (85.7)	10.5 (7.3,25.2)	0.96	0.49,	1.97	0.9012
Interaction p-value										0.0069*
Histological grade										
High grade	255	143 (56.1)	42.2 (35.7,60.3)	132	108 (81.8)	18.8 (16.1,20.5)	0.40	0.31,	0.52	<0.0001*
Interaction p-value										NC
Cytoreductive surgery outcome										
No residue	166	85 (51.2)	56.6 (41.3, NE)	80	62 (77.5)	20.1 (17.3,23.1)	0.40	0.29,	0.55	<0.0001*
Residue	79	48 (60.8)	31.6 (25.3,43.7)	44	38 (86.4)	14.9 (10.8,20.3)	0.41	0.27,	0.64	<0.0001*
Interaction p-value										0.8754
Timing of cytoreductive surgery										
Upfront	146	64 (43.8)	75.2 (56.6, NE)	79	60 (75.9)	20.1 (14.9,22.2)	0.32	0.22,	0.46	<0.0001*
Interval	99	69 (69.7)	31.6 (23.5,39.2)	45	40 (88.9)	17.6 (14.4,20.3)	0.51	0.35,	0.76	0.0011*
Interaction p-value										0.0823

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.3 PAOLA1: Summary of subgroup analysis of Time to First Subsequent Cancer Therapy or Death
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Myriad tumour BRCA mutation status									
tBRCAm	158	85 (53.8)	49.6 (39.1, NE)	77	62 (80.5)	19.2 (14.9,22.1)	0.37	0.27, 0.52	<0.0001*
Non-tBRCAm	97	58 (59.8)	31.6 (23.5,60.3)	55	46 (83.6)	18.8 (14.8,20.3)	0.46	0.31, 0.68	0.0001*
Interaction p-value									0.4234
Status somatic BRCA mutations									
sBRCAm	25	13 (52.0)	61.2 (35.2, NE)	9	8 (88.9)	16.1 (6.9,33.3)	0.24	0.10, 0.61	0.0039*
gBRCAm	69	37 (53.6)	48.7 (35.7, NE)	36	29 (80.6)	22.4 (15.4,32.5)	0.43	0.26, 0.70	0.0009*
Non-BRCAm	43	25 (58.1)	41.3 (21.9, NE)	23	21 (91.3)	17.6 (10.8,20.3)	0.30	0.16, 0.54	0.0001*
Interaction p-value									0.4535

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.4 PAOLA1: Summary of subgroup analysis of Time to Second Subsequent Cancer Therapy or Death
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	22 (23.9)	NE (NE, NE)	48	28 (58.3)	46.5 (29.5, NE)	0.29	0.16, 0.50	<0.0001*
NED/CR [IDS]	74	40 (54.1)	47.0 (33.8, NE)	38	28 (73.7)	39.0 (24.9,55.6)	0.65	0.40, 1.07	0.0895
NED/CR [Chemo]	40	17 (42.5)	NE (NE, NE)	20	18 (90.0)	29.8 (24.6,40.1)	0.31	0.16, 0.61	0.0007*
PR	49	36 (73.5)	31.8 (25.6,45.2)	26	18 (69.2)	29.9 (21.4,54.0)	0.98	0.56, 1.76	0.9441
Interaction p-value									0.0058*
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	61 (40.7)	75.2 (62.5, NE)	65	43 (66.2)	45.0 (28.6,54.0)	0.49	0.33, 0.73	0.0006*
non-tBRCAm	105	54 (51.4)	54.5 (38.6, NE)	67	49 (73.1)	32.4 (25.2,40.1)	0.56	0.38, 0.82	0.0034*
Interaction p-value									0.6663
First line treatment outcome (eCRF)									
NED [PDS]	89	20 (22.5)	NE (NE, NE)	47	26 (55.3)	49.7 (29.5, NE)	0.29	0.16, 0.52	<0.0001*
NED/CR [IDS]	74	40 (54.1)	54.5 (38.0, NE)	32	24 (75.0)	39.0 (24.9,55.6)	0.63	0.38, 1.07	0.0842
NED/CR [Chemo]	39	19 (48.7)	57.1 (35.3, NE)	18	17 (94.4)	29.2 (18.9,36.8)	0.30	0.16, 0.59	0.0006*
PR	50	34 (68.0)	33.9 (28.8,52.0)	34	24 (70.6)	29.1 (21.4,54.0)	0.88	0.52, 1.49	0.6190
Interaction p-value									0.0128*
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	60 (40.8)	75.2 (62.5, NE)	67	44 (65.7)	45.0 (28.6,54.0)	0.49	0.34, 0.73	0.0006*
non-tBRCAm	108	55 (50.9)	55.5 (38.8, NE)	65	48 (73.8)	32.4 (25.2,40.1)	0.55	0.37, 0.81	0.0026*
Interaction p-value									0.7263
Age group									
<65 years	185	88 (47.6)	67.1 (54.2, NE)	98	65 (66.3)	35.3 (28.6,45.8)	0.58	0.42, 0.81	0.0012*
>=65 years	70	27 (38.6)	NE (NE, NE)	34	27 (79.4)	36.8 (25.1,51.0)	0.35	0.20, 0.59	0.0001*
Interaction p-value									0.0999
FIGO Stage (Disease state)									
III	182	72 (39.6)	75.2 (67.1, NE)	90	57 (63.3)	45.5 (35.3,55.6)	0.51	0.36, 0.72	0.0002*

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.4 PAOLA1: Summary of subgroup analysis of Time to Second Subsequent Cancer Therapy or Death
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
IV	73	43 (58.9)	40.0 (30.3, NE)	42	35 (83.3)	26.8 (22.0,33.6)	0.51	0.32, 0.80	0.0037*
Interaction p-value									0.9998
Region									
Europe	245	109 (44.5)	75.2 (57.1, NE)	126	87 (69.0)	36.4 (29.5,46.5)	0.51	0.38, 0.67	<0.0001*
Japan	10	6 (60.0)	35.6 (7.0, NE)	6	5 (83.3)	26.9 (20.2, NE)	0.58	0.17, 2.02	0.3772
Interaction p-value									0.8240
ECOG performance status at Baseline									
(0) Normal activity	190	88 (46.3)	NE (NE, NE)	100	68 (68.0)	36.8 (29.5,47.5)	0.57	0.41, 0.78	0.0005*
(1) Restricted activity	61	24 (39.3)	NE (NE, NE)	31	24 (77.4)	31.6 (23.2,46.5)	0.33	0.19, 0.59	0.0002*
Interaction p-value									0.1105
Baseline CA-125 value									
<=ULN	228	90 (39.5)	75.2 (75.2, NE)	118	80 (67.8)	37.4 (29.9,47.5)	0.44	0.33, 0.60	<0.0001*
>ULN	27	25 (92.6)	27.7 (17.1,33.8)	14	12 (85.7)	24.1 (11.8,45.8)	1.10	0.56, 2.27	0.7839
Interaction p-value									0.0154*
Histological grade									
High grade	255	115 (45.1)	75.2 (56.2, NE)	132	92 (69.7)	35.4 (29.2,45.2)	0.51	0.39, 0.67	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	62 (37.3)	75.2 (75.2, NE)	80	51 (63.8)	45.2 (32.9,56.2)	0.47	0.32, 0.68	<0.0001*
Residue	79	45 (57.0)	51.3 (33.8, NE)	44	34 (77.3)	26.5 (21.4,36.8)	0.54	0.35, 0.85	0.0078*
Interaction p-value									0.6202
Timing of cytoreductive surgery									
Upfront	146	51 (34.9)	75.2 (75.2, NE)	79	50 (63.3)	36.0 (29.2,46.5)	0.40	0.27, 0.60	<0.0001*
Interval	99	56 (56.6)	47.0 (34.0,67.1)	45	35 (77.8)	34.2 (24.9,51.0)	0.61	0.40, 0.94	0.0257*
Interaction p-value									0.1522

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.4 PAOLA1: Summary of subgroup analysis of Time to Second Subsequent Cancer Therapy or Death
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Myriad tumour BRCA mutation status									
tBRCAm	158	64 (40.5)	75.2 (67.1, NE)	77	53 (68.8)	40.0 (28.6,52.5)	0.45	0.32, 0.65	<0.0001*
Non-tBRCAm	97	51 (52.6)	54.2 (35.3, NE)	55	39 (70.9)	32.2 (25.2,41.4)	0.61	0.40, 0.93	0.0226*
Interaction p-value									0.2925
Status somatic BRCA mutations									
sBRCAm	25	9 (36.0)	NE (NE, NE)	9	8 (88.9)	32.9 (10.2,52.5)	0.23	0.09, 0.61	0.0042*
gBRCAm	69	27 (39.1)	75.2 (61.7, NE)	36	23 (63.9)	49.7 (26.8,66.9)	0.52	0.30, 0.92	0.0254*
Non-BRCAm	43	22 (51.2)	60.3 (32.0, NE)	23	18 (78.3)	30.4 (20.8,46.5)	0.44	0.24, 0.84	0.0129*
Interaction p-value									0.3444

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.
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Table 1.1.3.5 PAOLA1: Summary of subgroup analysis of Overall Survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	15 (16.3)	NE (NE, NE)	48	21 (43.8)	NE (NE, NE)	0.29	0.15, 0.57	0.0003*
NED/CR [IDS]	74	34 (45.9)	73.3 (45.0, NE)	38	20 (52.6)	57.3 (45.2, NE)	0.88	0.51, 1.55	0.6410
NED/CR [Chemo]	40	15 (37.5)	NE (NE, NE)	20	12 (60.0)	56.9 (31.8,66.4)	0.56	0.26, 1.23	0.1458
PR	49	29 (59.2)	50.4 (32.3, NE)	26	16 (61.5)	43.0 (25.2, NE)	0.88	0.48, 1.66	0.6789
Interaction p-value									0.0501
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	46 (30.7)	75.2 (73.3, NE)	65	30 (46.2)	66.9 (54.9, NE)	0.61	0.38, 0.97	0.0370*
non-tBRCAm	105	47 (44.8)	NE (NE, NE)	67	39 (58.2)	52.0 (41.0,66.4)	0.68	0.44, 1.04	0.0774
Interaction p-value									0.7229
First line treatment outcome (eCRF)									
NED [PDS]	89	14 (15.7)	NE (NE, NE)	47	19 (40.4)	NE (NE, NE)	0.31	0.15, 0.62	0.0009*
NED/CR [IDS]	74	32 (43.2)	73.3 (45.7, NE)	32	18 (56.3)	55.6 (43.1, NE)	0.75	0.42, 1.36	0.3364
NED/CR [Chemo]	39	17 (43.6)	NE (NE, NE)	18	11 (61.1)	48.4 (25.5, NE)	0.63	0.30, 1.38	0.2366
PR	50	28 (56.0)	54.0 (37.2, NE)	34	20 (58.8)	48.5 (30.3, NE)	0.89	0.51, 1.61	0.7003
Interaction p-value									0.1187
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	45 (30.6)	75.2 (73.3, NE)	67	31 (46.3)	66.9 (54.9, NE)	0.60	0.38, 0.95	0.0300*
non-tBRCAm	108	48 (44.4)	NE (NE, NE)	65	38 (58.5)	52.0 (41.0,66.4)	0.68	0.44, 1.04	0.0744
Interaction p-value									0.6961
Age group									
<65 years	185	69 (37.3)	75.2 (73.3, NE)	98	49 (50.0)	65.4 (48.9, NE)	0.69	0.48, 1.00001	0.0500
>=65 years	70	24 (34.3)	NE (NE, NE)	34	20 (58.8)	54.0 (34.0, NE)	0.46	0.25, 0.84	0.0117*
Interaction p-value									0.2496
FIGO Stage (Disease state)									
III	182	56 (30.8)	75.2 (75.2, NE)	90	41 (45.6)	66.4 (55.6, NE)	0.60	0.40, 0.90	0.0147*

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.5 PAOLA1: Summary of subgroup analysis of Overall Survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
IV	73	37 (50.7)	63.2 (38.5, NE)	42	28 (66.7)	45.7 (34.3,55.7)	0.69	0.42, 1.13	0.1368
Interaction p-value									0.6798
Region									
Europe	245	87 (35.5)	75.2 (73.3, NE)	126	66 (52.4)	57.3 (51.6, NE)	0.60	0.43, 0.83	0.0020*
Japan	10	6 (60.0)	57.1 (12.3, NE)	6	3 (50.0)	NE (NE, NE)	1.21	0.32, 5.73	0.7862
Interaction p-value									0.3194
ECOG performance status at Baseline									
(0) Normal activity	190	73 (38.4)	NE (NE, NE)	100	52 (52.0)	59.8 (48.9, NE)	0.69	0.48, 0.99	0.0428*
(1) Restricted activity	61	17 (27.9)	NE (NE, NE)	31	17 (54.8)	54.0 (35.2, NE)	0.39	0.20, 0.78	0.0079*
Interaction p-value									0.1525
Baseline CA-125 value									
<=ULN	228	72 (31.6)	75.2 (73.3, NE)	118	59 (50.0)	59.8 (52.4, NE)	0.55	0.39, 0.77	0.0007*
>ULN	27	21 (77.8)	38.0 (21.7,56.2)	14	10 (71.4)	42.0 (16.0, NE)	1.28	0.62, 2.83	0.5207
Interaction p-value									0.0395*
Histological grade									
High grade	255	93 (36.5)	75.2 (73.3, NE)	132	69 (52.3)	57.3 (51.6, NE)	0.62	0.45, 0.85	0.0031*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	48 (28.9)	75.2 (73.3, NE)	80	38 (47.5)	NE (NE, NE)	0.54	0.35, 0.83	0.0054*
Residue	79	37 (46.8)	60.8 (50.5, NE)	44	26 (59.1)	42.2 (30.3,66.4)	0.69	0.42, 1.15	0.1516
Interaction p-value									0.4650
Timing of cytoreductive surgery									
Upfront	146	41 (28.1)	NE (NE, NE)	79	38 (48.1)	65.4 (46.3, NE)	0.48	0.31, 0.75	0.0014*
Interval	99	44 (44.4)	73.3 (47.9, NE)	45	26 (57.8)	55.6 (41.0, NE)	0.75	0.46, 1.23	0.2450
Interaction p-value									0.1868

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.

Table 1.1.3.5 PAOLA1: Summary of subgroup analysis of Overall Survival
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=132)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Myriad tumour BRCA mutation status									
tBRCAm	158	49 (31.0)	75.2 (73.3, NE)	77	37 (48.1)	66.9 (54.0, NE)	0.57	0.37, 0.88	0.0117*
Non-tBRCAm	97	44 (45.4)	NE (NE, NE)	55	32 (58.2)	52.0 (41.0,66.4)	0.70	0.45, 1.12	0.1369
Interaction p-value									0.5114
Status somatic BRCA mutations									
sBRCAm	25	5 (20.0)	NE (NE, NE)	9	4 (44.4)	NE (NE, NE)	0.36	0.09, 1.45	0.1412
gBRCAm	69	19 (27.5)	75.2 (73.3, NE)	36	13 (36.1)	NE (NE, NE)	0.74	0.37, 1.54	0.4113
Non-BRCAm	43	17 (39.5)	NE (NE, NE)	23	15 (65.2)	52.4 (35.2, NE)	0.45	0.22, 0.91	0.0273*
Interaction p-value									0.4888

[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and, if appropriate, interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only.
* Interaction p-value <0.05. HR <1 favours olaparib. NC = not calculable.
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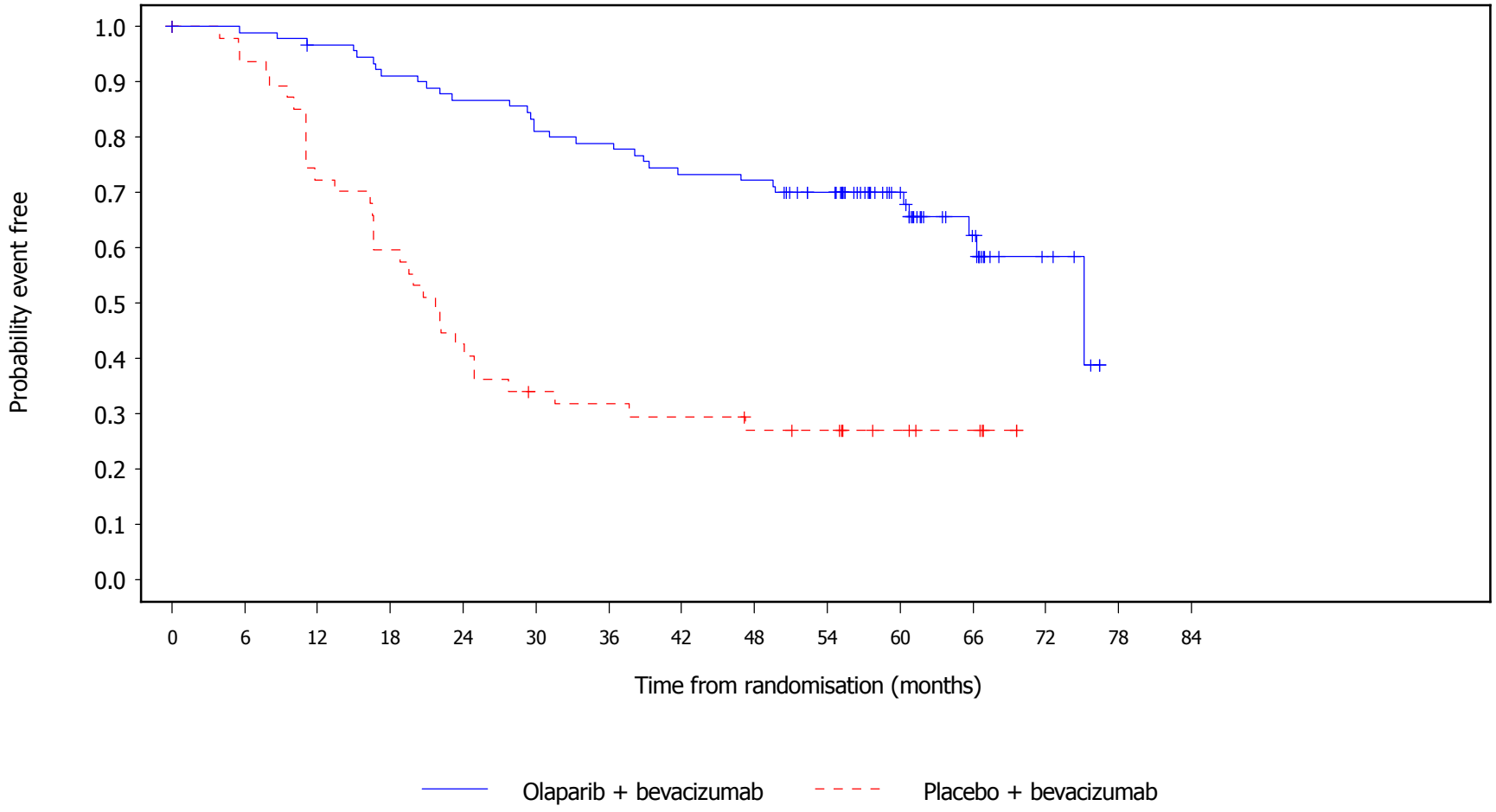
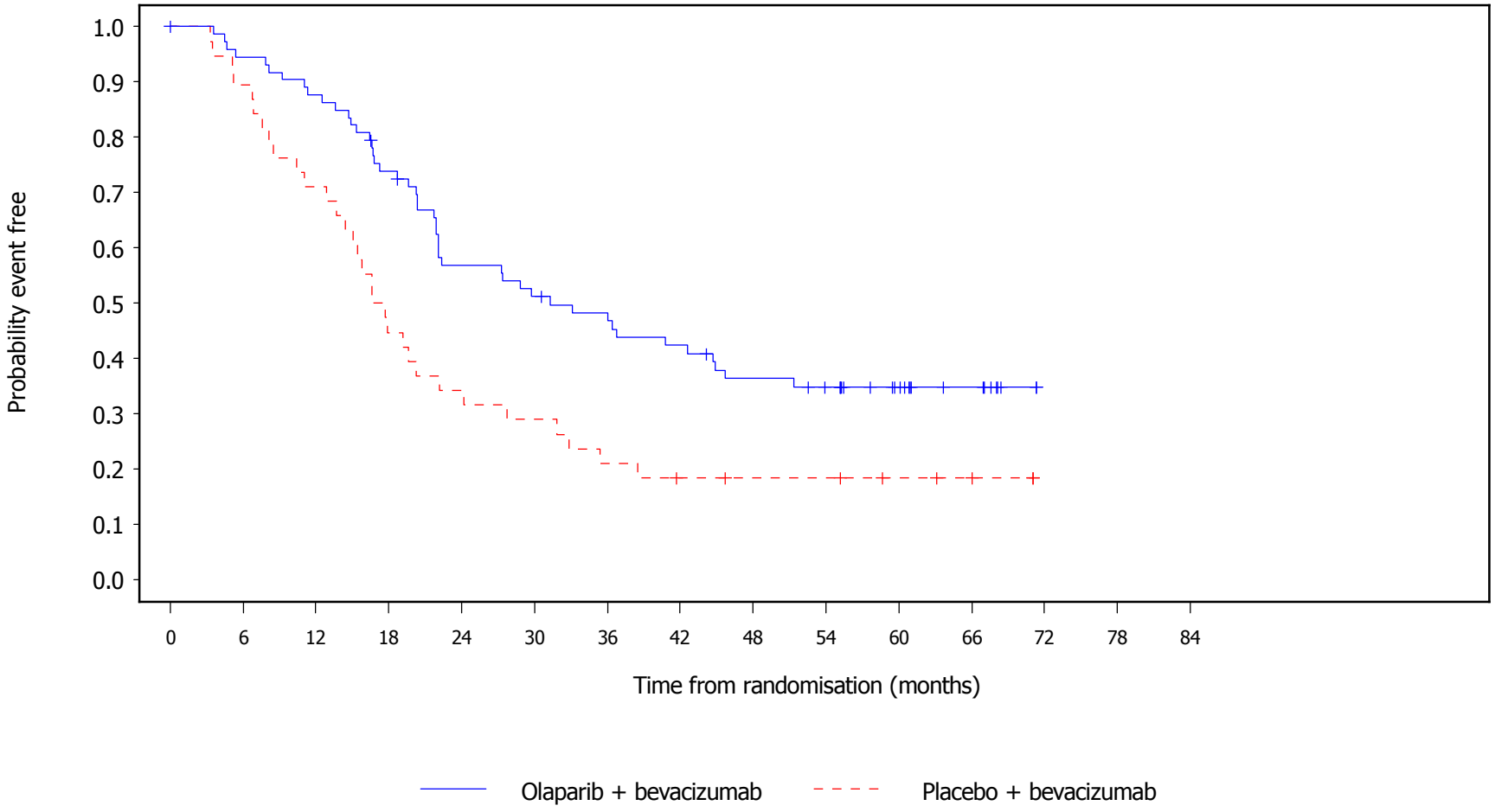
Figure 1.1.4.1 PAOLA1: Kaplan-Meier plot of Progression-free survival for First line treatment outcome (IVRS) = NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

92	90	87	82	78	73	71	66	65	57	34	17	5	0	0	Olaparib + bevacizumab
48	44	34	28	20	15	14	13	11	10	6	4	0	0	0	Placebo + bevacizumab

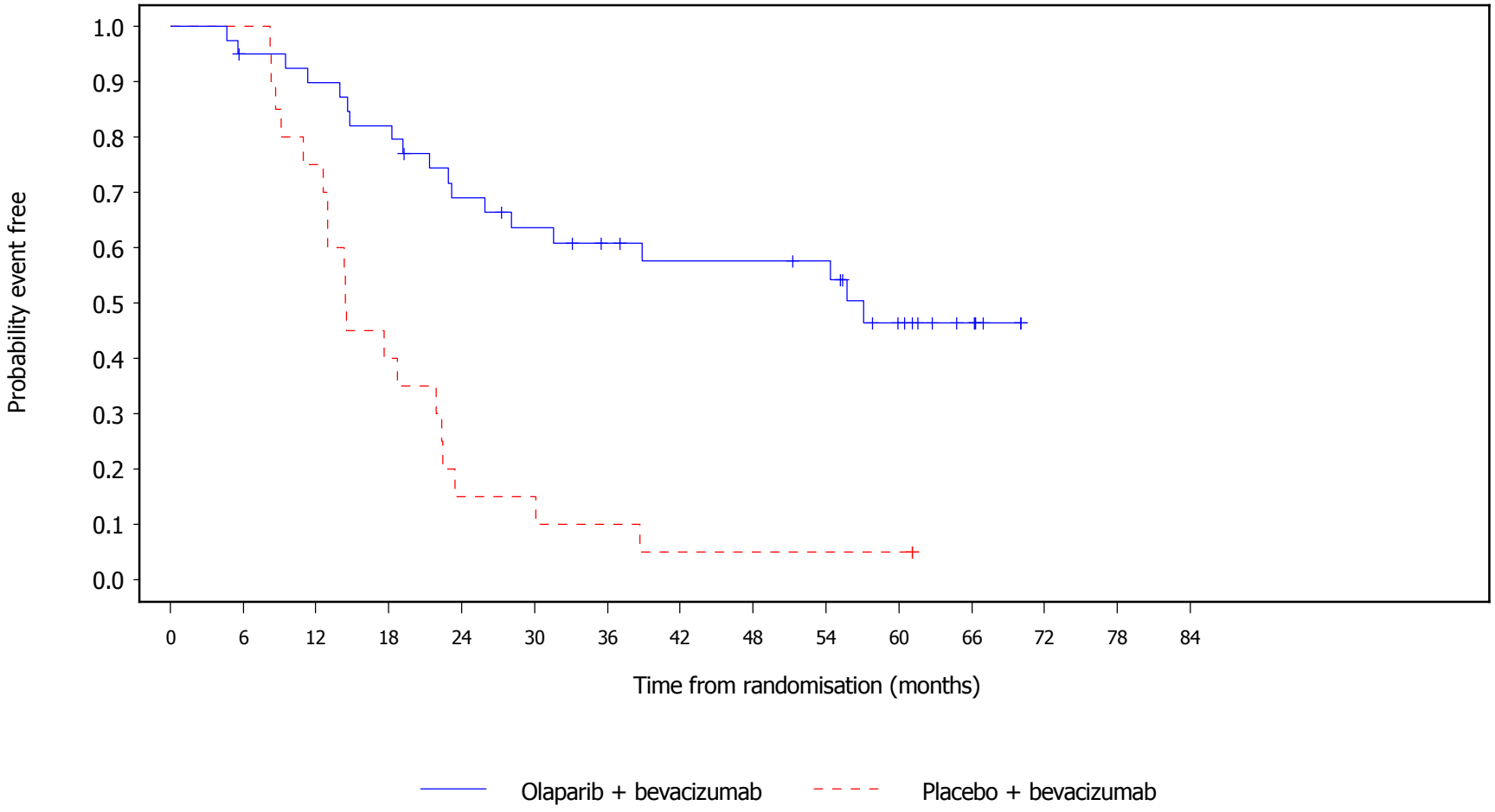
Figure 1.1.4.2 PAOLA1: Kaplan-Meier plot of Progression-free survival for First line treatment outcome (IVRS) = NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

74	69	64	53	40	36	33	29	24	21	13	7	0	0	0	Olaparib + bevacizumab
38	34	27	17	13	11	8	6	5	5	3	2	0	0	0	Placebo + bevacizumab

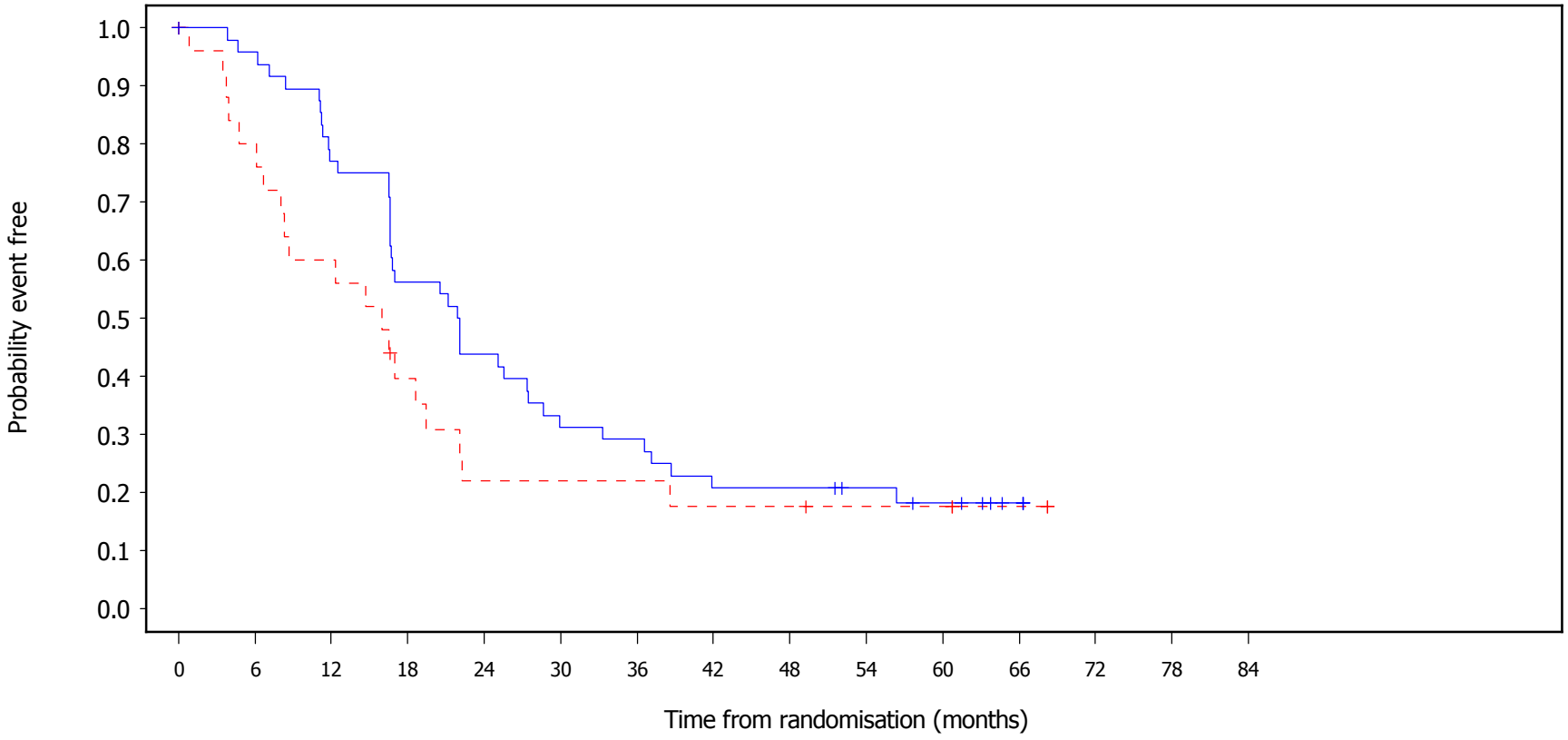
Figure 1.1.4.3 PAOLA1: Kaplan-Meier plot of Progression-free survival for First line treatment outcome (IVRS) = NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

40	37	35	32	26	23	20	18	18	17	10	5	0	0	0	Olaparib + bevacizumab
20	20	15	8	3	3	2	1	1	1	1	0	0	0	0	Placebo + bevacizumab

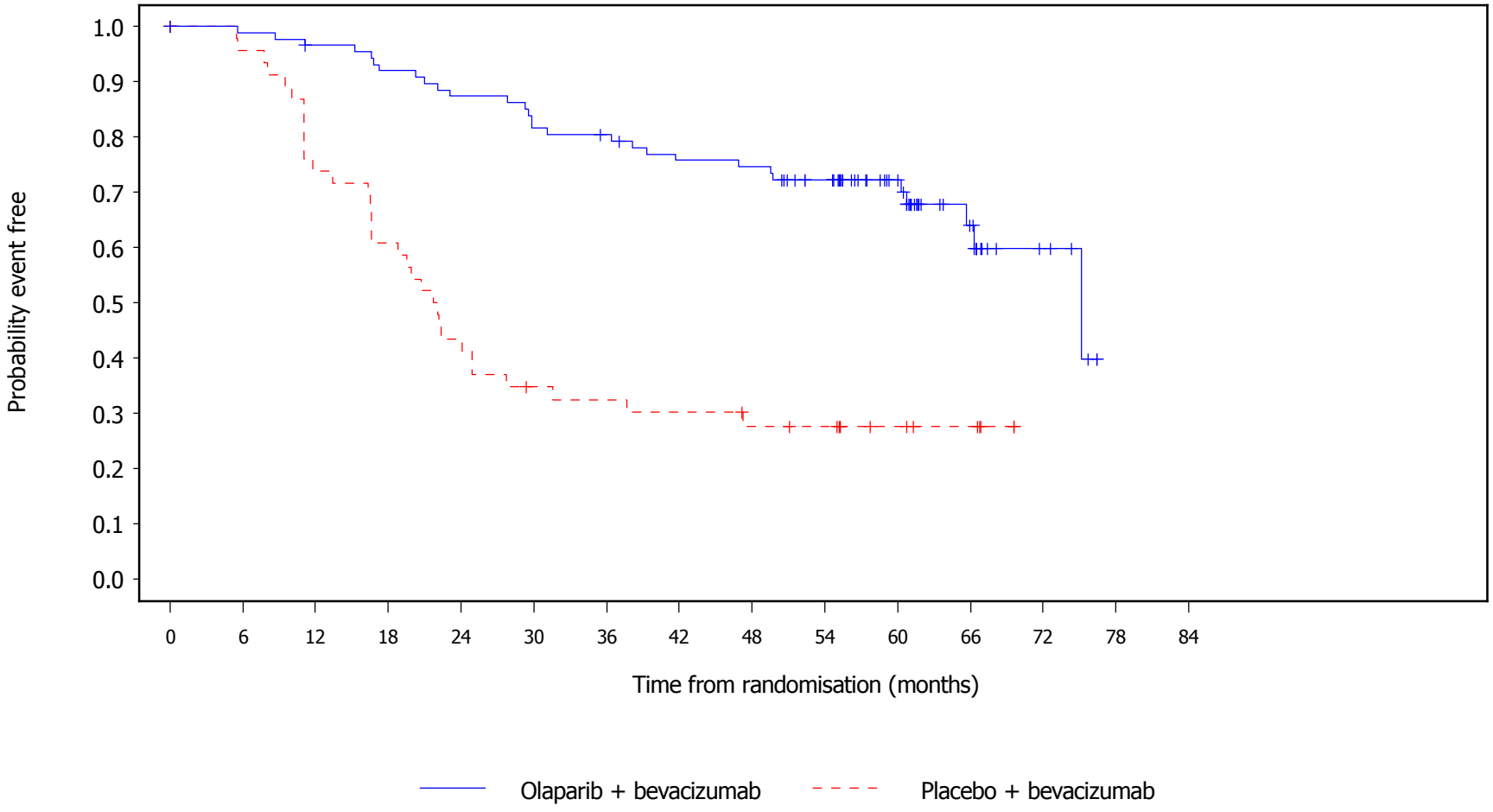
Figure 1.1.4.4 PAOLA1: Kaplan-Meier plot of Progression-free survival for First line treatment outcome (IVRS) = PR
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

49	46	37	27	21	15	14	10	10	8	6	2	0	0	0	Olaparib + bevacizumab
26	20	15	9	5	5	5	4	4	3	3	1	0	0	0	Placebo + bevacizumab

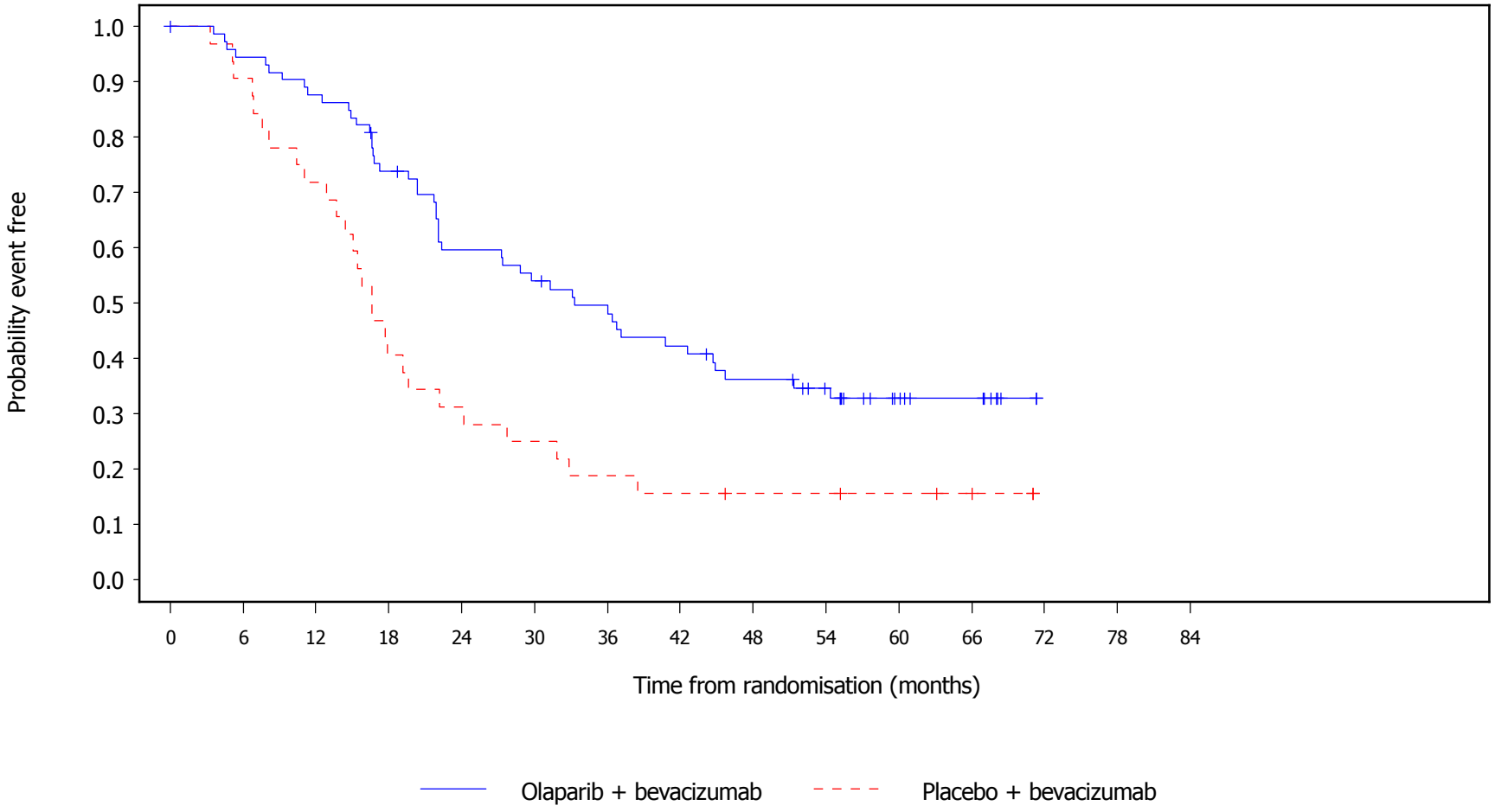
Figure 1.1.4.5 PAOLA1: Kaplan-Meier plot of Progression-free survival for First line treatment outcome (eCRF) = NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

89	87	84	80	76	71	69	64	63	55	35	16	5	0	0	Olaparib + bevacizumab
47	44	34	28	20	15	14	13	11	10	6	4	0	0	0	Placebo + bevacizumab

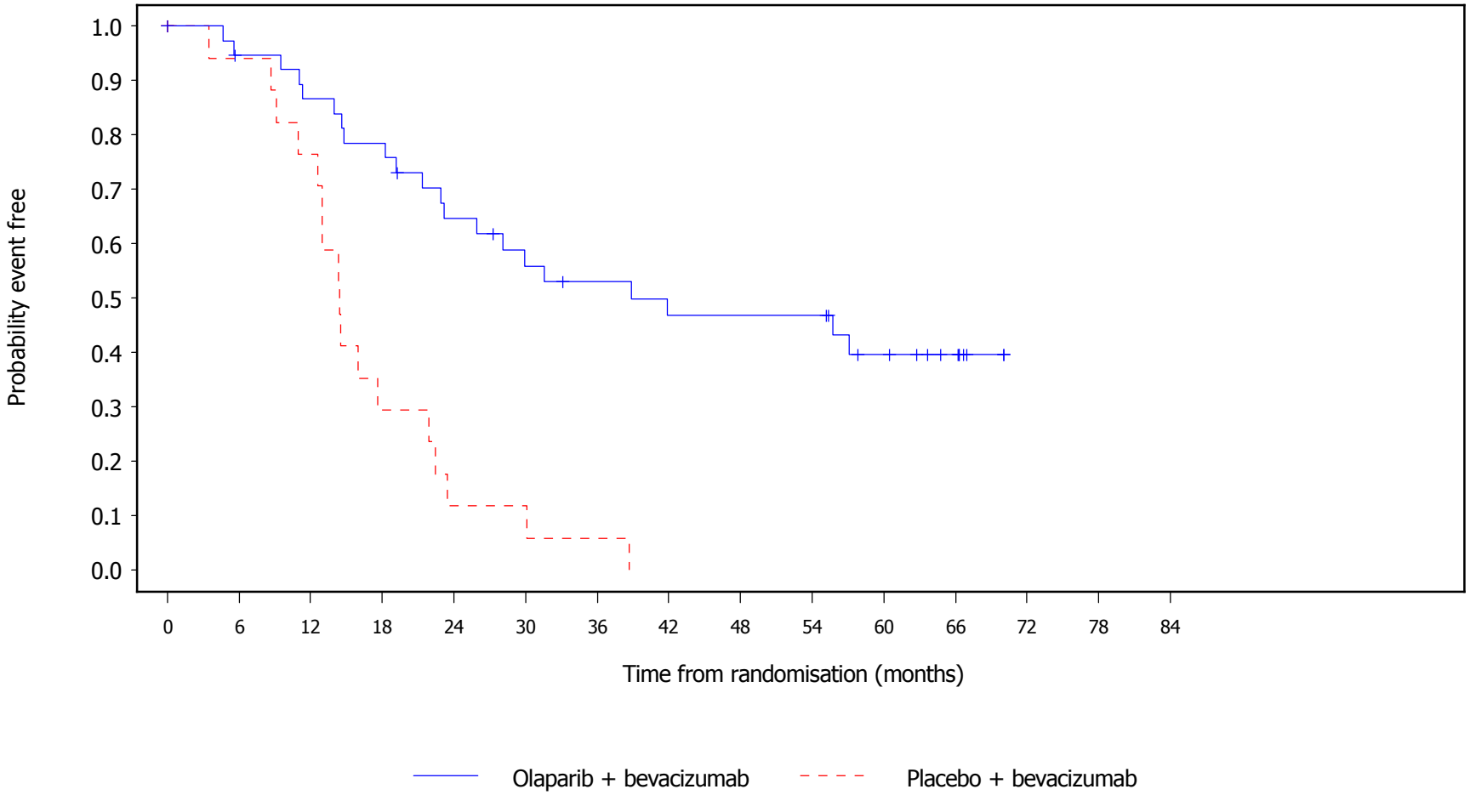
Figure 1.1.4.6 PAOLA1: Kaplan-Meier plot of Progression-free survival for First line treatment outcome (eCRF) = NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

74	69	64	53	42	38	34	29	24	19	10	7	0	0	0	Olaparib + bevacizumab
32	29	23	13	10	8	6	5	4	4	3	2	0	0	0	Placebo + bevacizumab

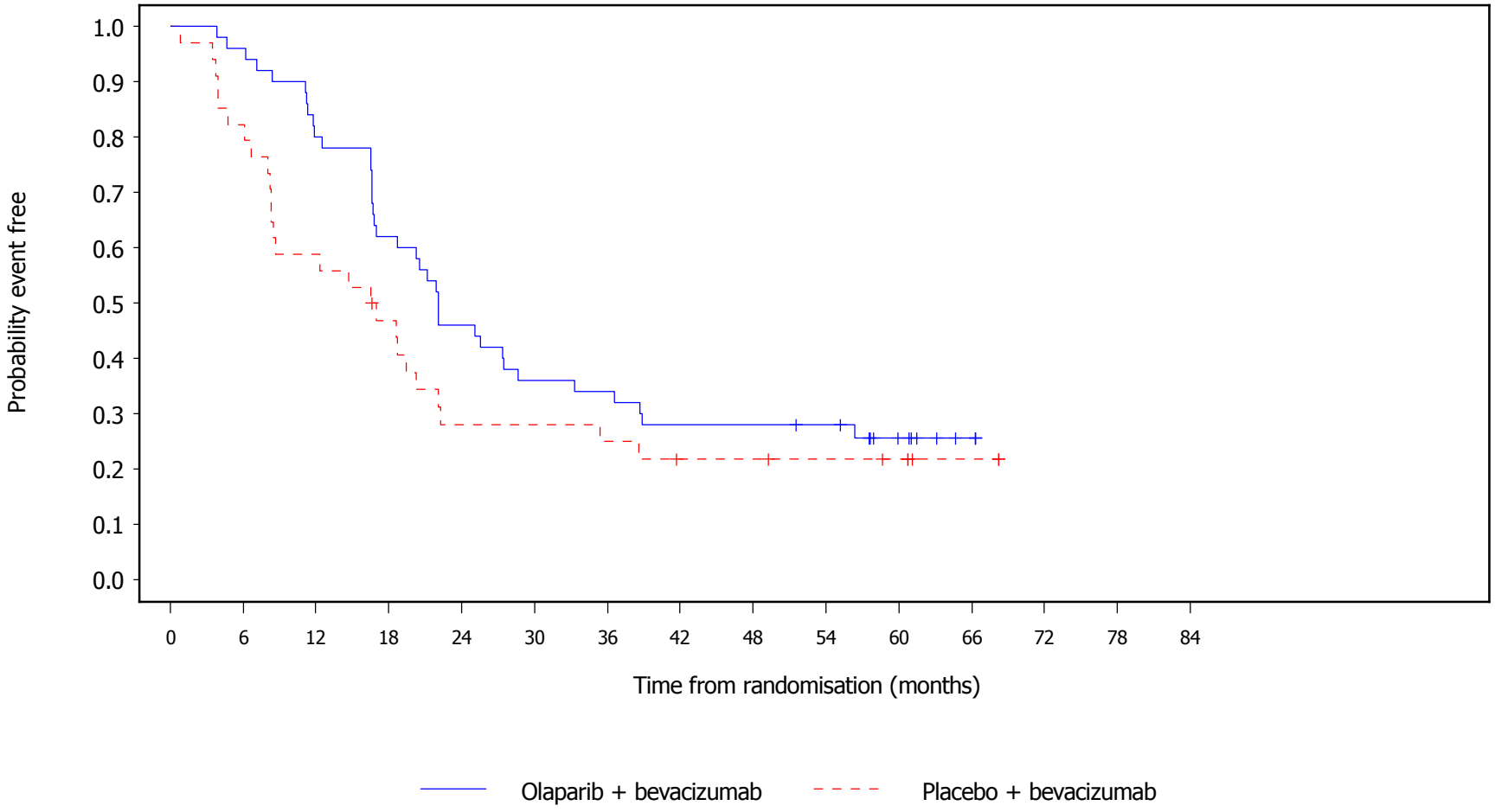
Figure 1.1.4.7 PAOLA1: Kaplan-Meier plot of Progression-free survival for First line treatment outcome (eCRF) = NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

39	35	32	29	23	19	17	15	15	15	10	6	0	0	0	Olaparib + bevacizumab
18	16	13	5	2	2	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

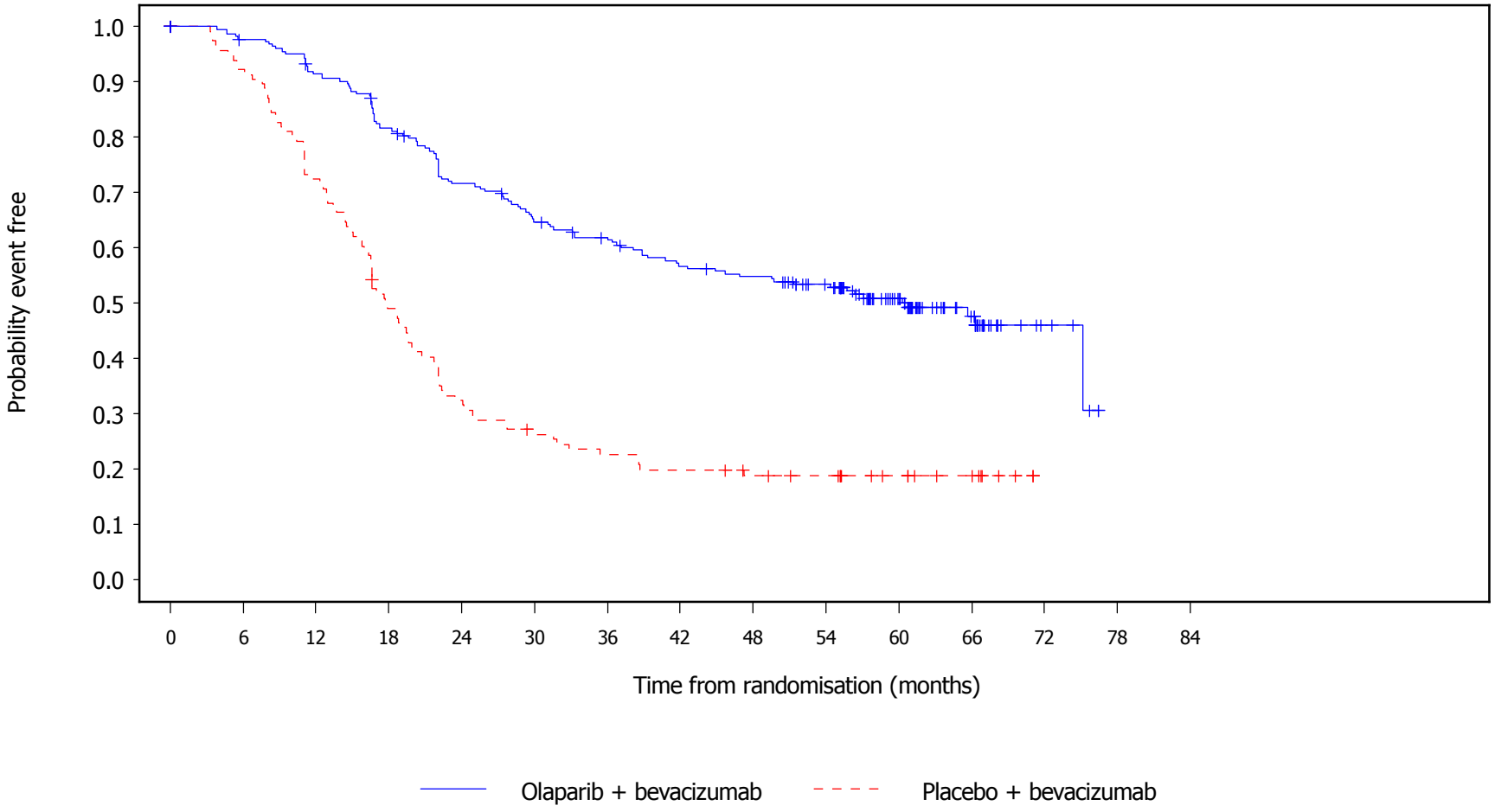
Figure 1.1.4.8 PAOLA1: Kaplan-Meier plot of Progression-free survival for First line treatment outcome (eCRF) = PR
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

50	48	40	31	23	18	17	14	14	13	7	2	0	0	0	Olaparib + bevacizumab
34	28	20	15	9	9	8	6	6	5	4	1	0	0	0	Placebo + bevacizumab

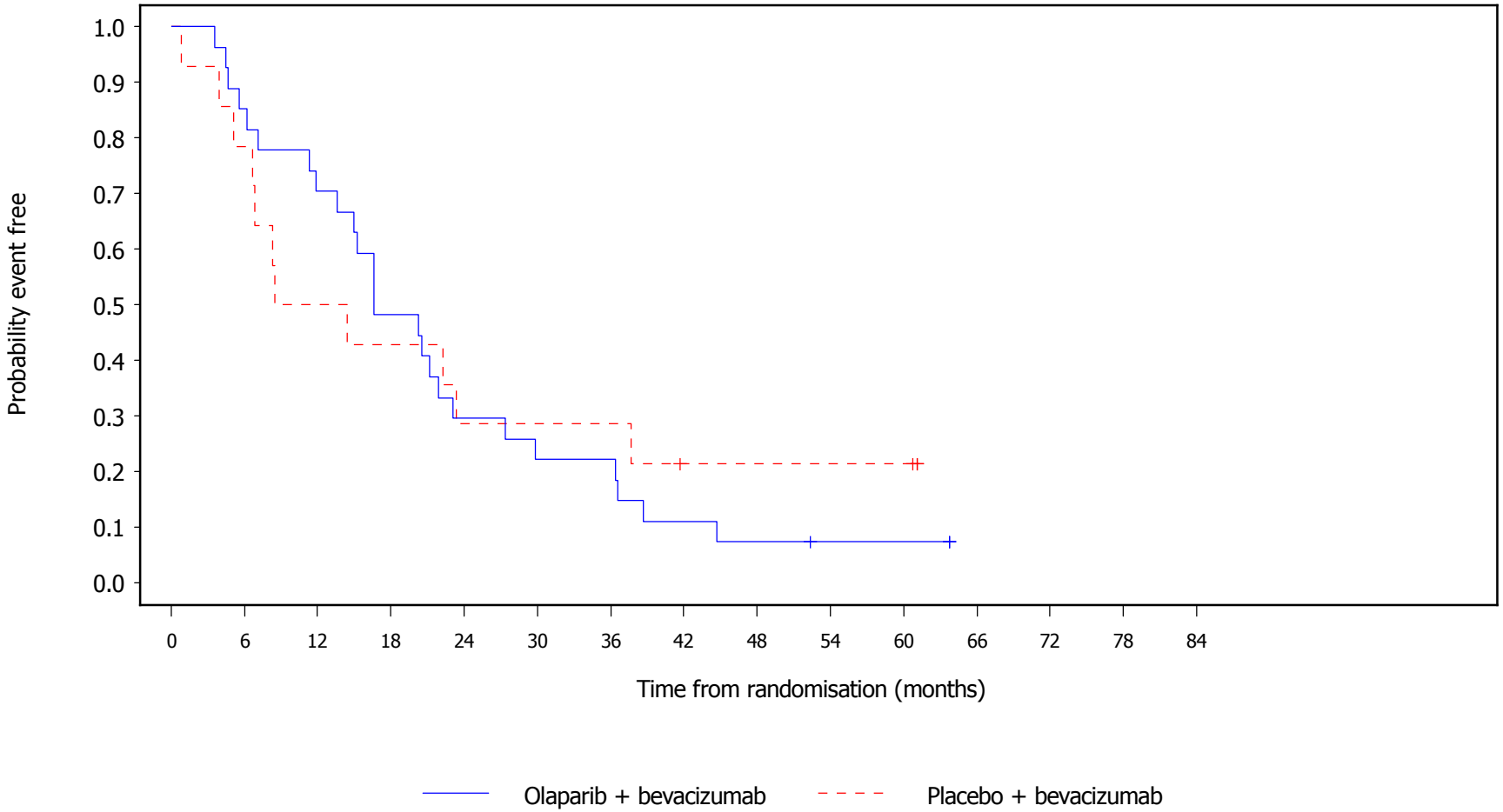
Figure 1.1.4.9 PAOLA1: Kaplan-Meier plot of Progression-free survival for Baseline CA-125 value = <=ULN
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

228	219	204	181	157	141	132	120	115	102	62	31	5	0	0	Olaparib + bevacizumab
118	107	84	56	37	30	25	22	19	17	11	7	0	0	0	Placebo + bevacizumab

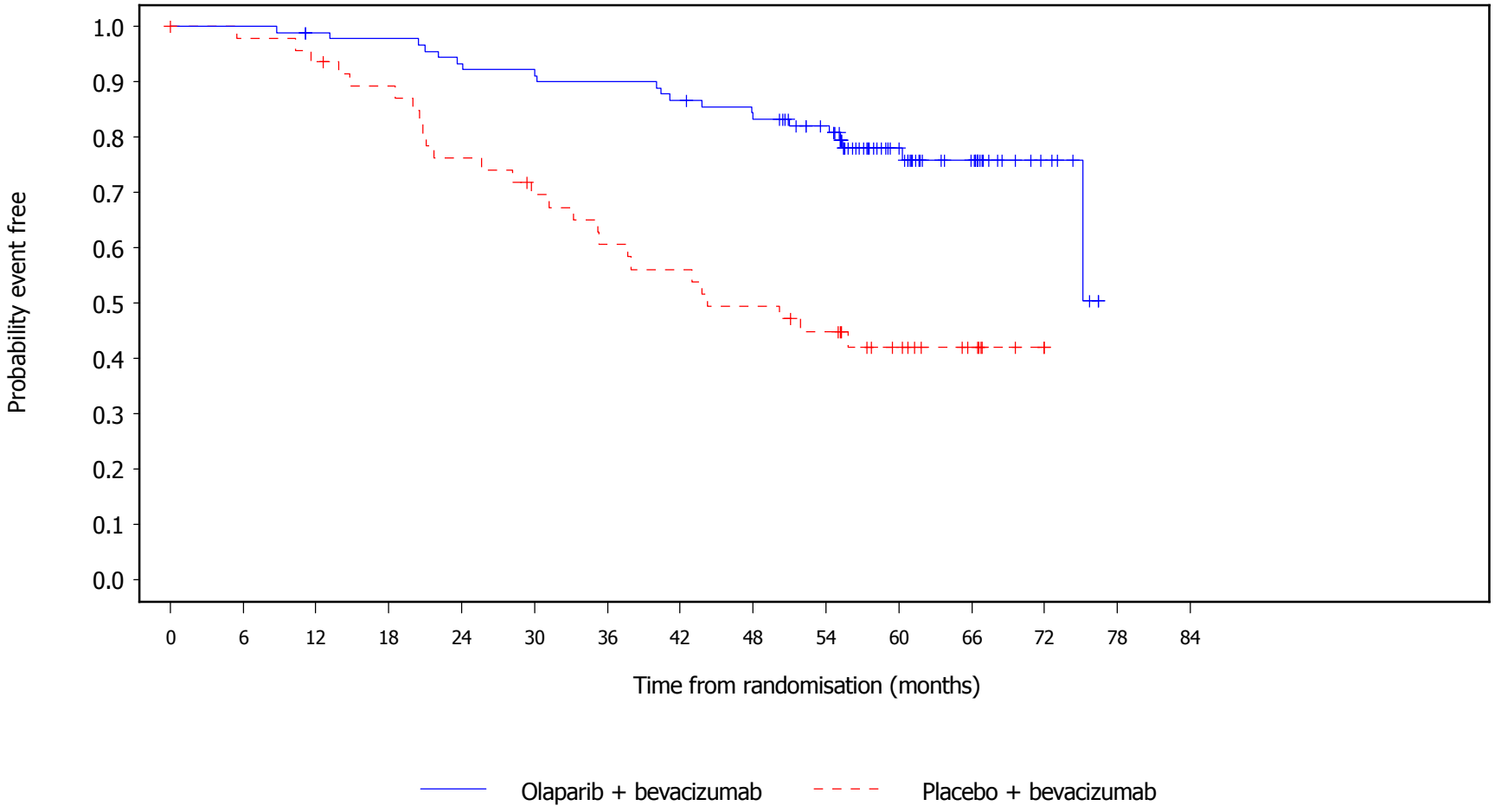
Figure 1.1.4.10 PAOLA1: Kaplan-Meier plot of Progression-free survival for Baseline CA-125 value = >ULN
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

27	23	19	13	8	6	6	3	2	1	1	0	0	0	0	Olaparib + bevacizumab
14	11	7	6	4	4	4	2	2	2	2	0	0	0	0	Placebo + bevacizumab

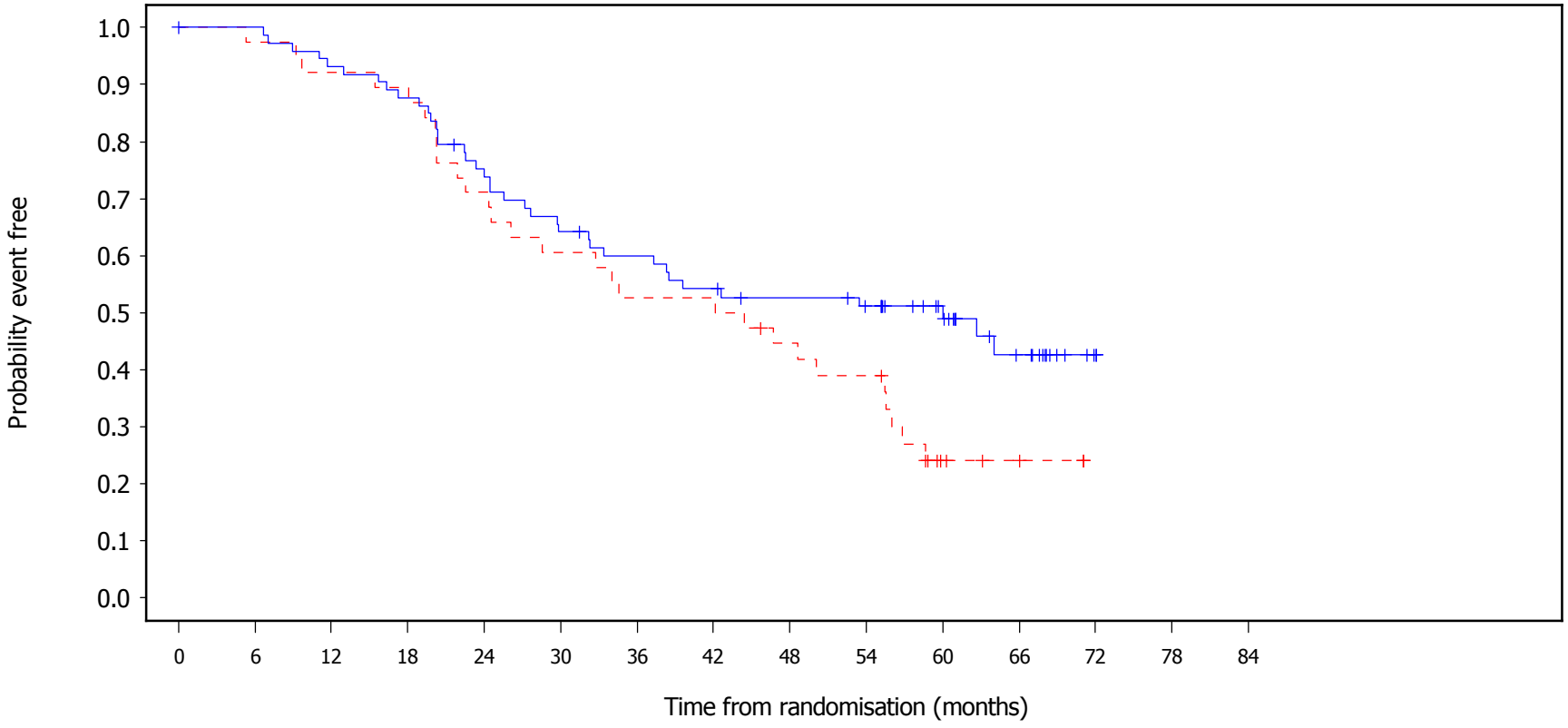
Figure 1.1.4.11 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for First line treatment outcome (IVRS) = NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

92	92	89	88	84	83	81	78	75	65	36	21	6	0	0	Olaparib + bevacizumab
48	46	44	41	35	31	27	25	22	19	12	6	0	0	0	Placebo + bevacizumab

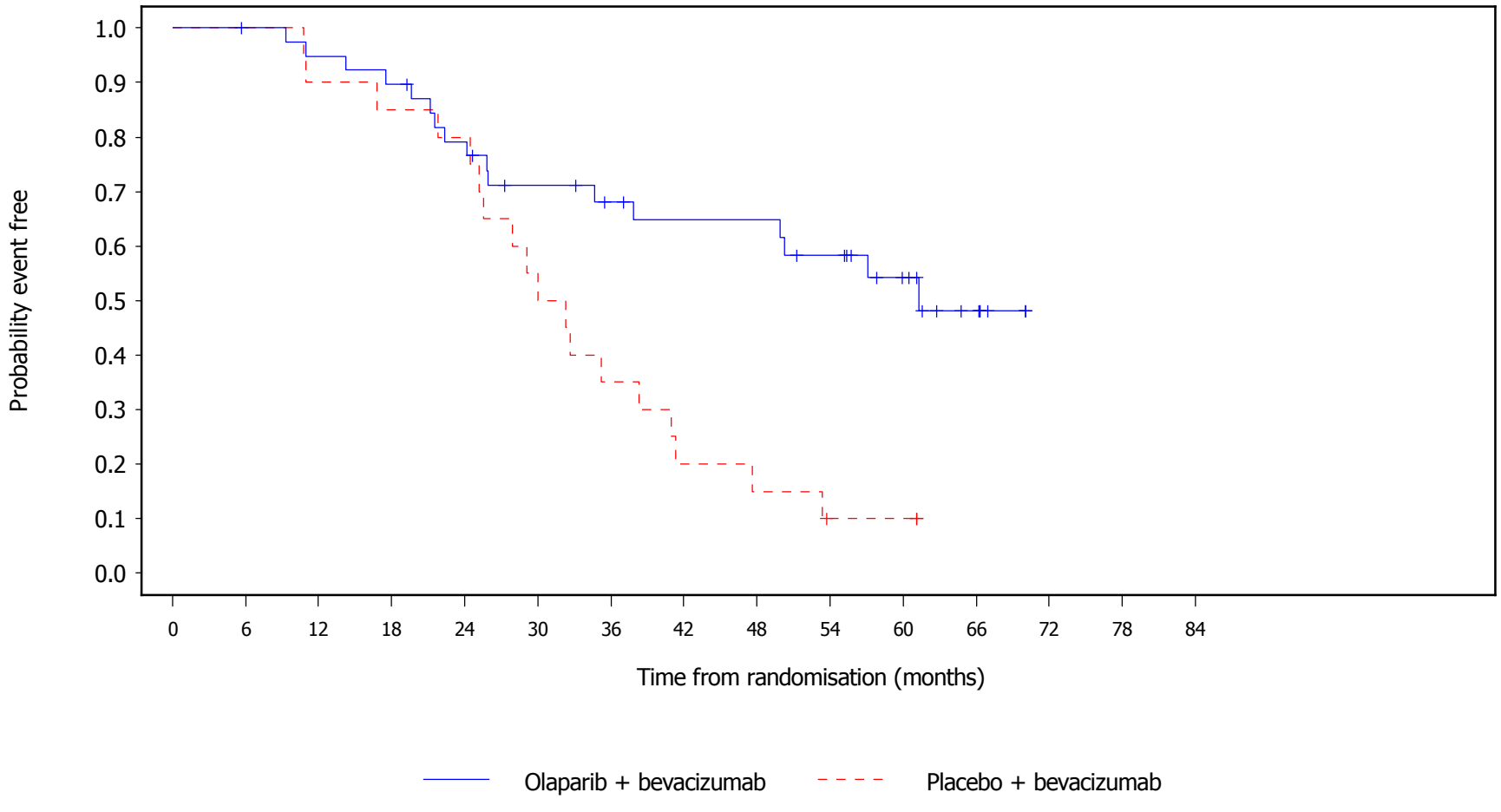
Figure 1.1.4.12 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for First line treatment outcome (IVRS) = NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

74	73	68	64	53	46	42	38	35	32	23	12	1	0	0	Olaparib + bevacizumab
38	37	35	34	27	23	20	20	16	14	4	2	0	0	0	Placebo + bevacizumab

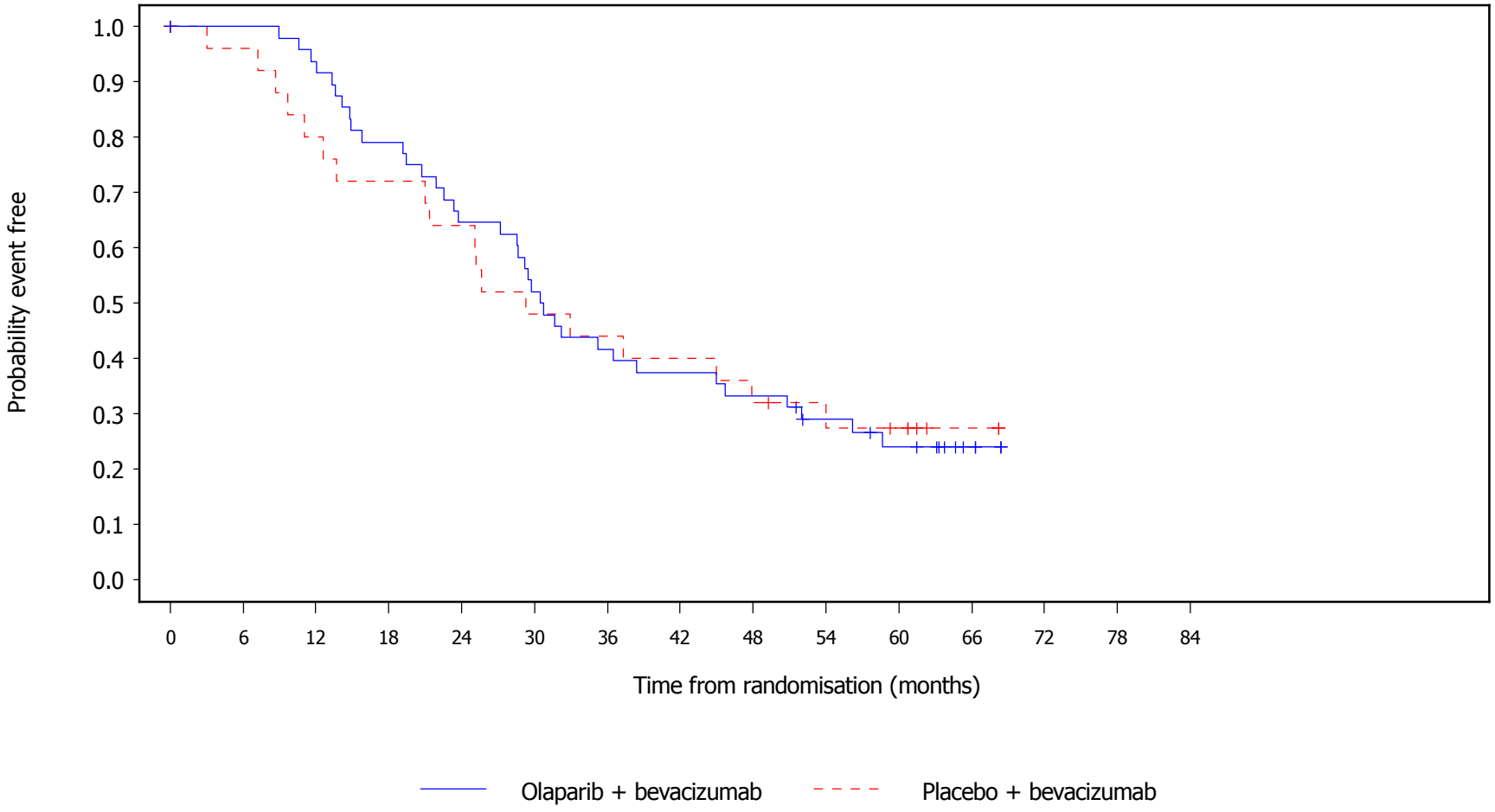
Figure 1.1.4.13 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for First line treatment outcome (IVRS) = NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

40	39	37	35	30	25	22	20	20	17	11	5	0	0	0	Olaparib + bevacizumab
20	20	18	17	16	11	7	4	3	1	1	0	0	0	0	Placebo + bevacizumab

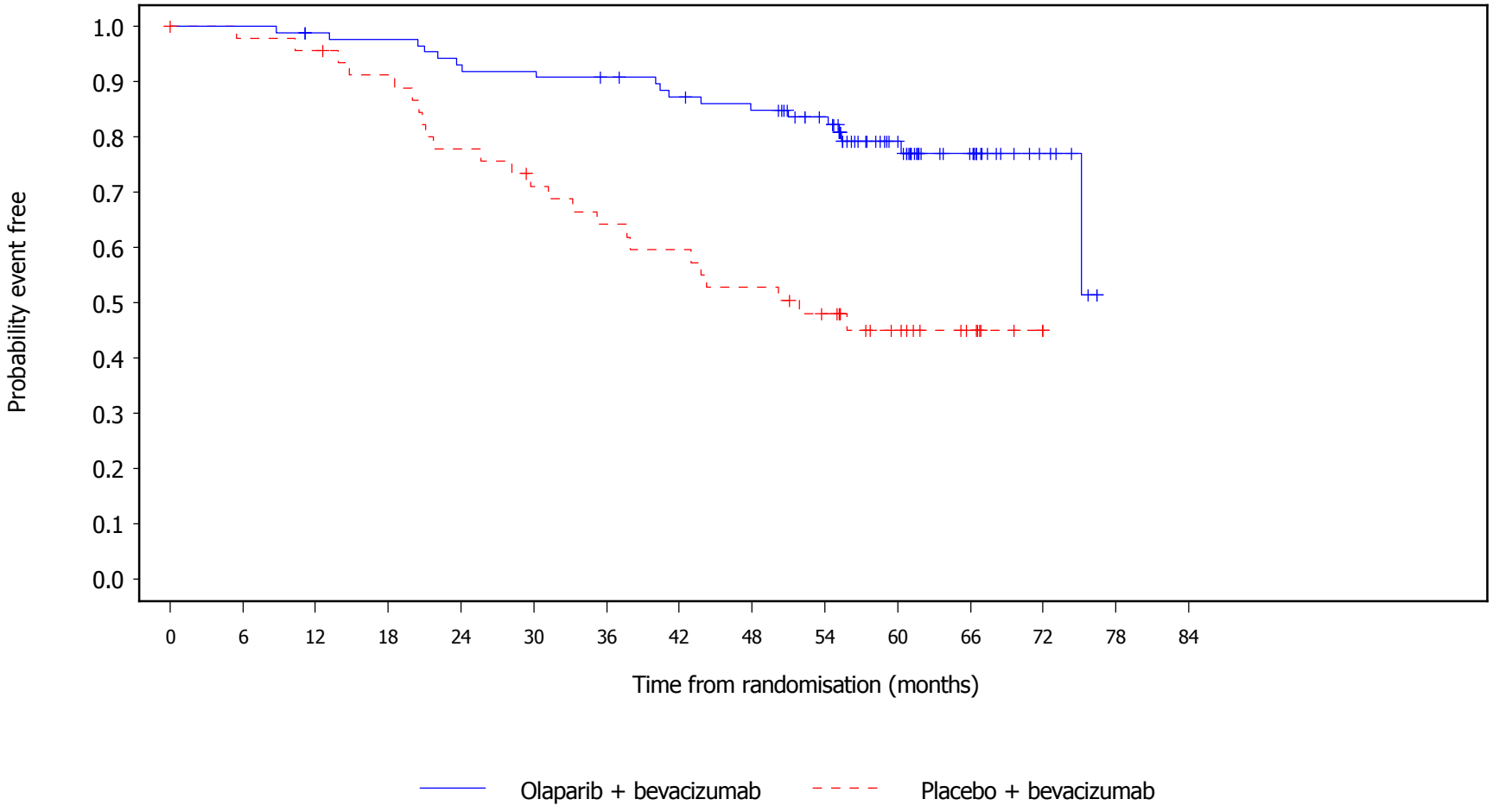
Figure 1.1.4.14 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for First line treatment outcome (IVRS) = PR
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

49	48	45	38	31	25	20	18	16	12	9	3	0	0	0	Olaparib + bevacizumab
26	24	20	18	16	12	11	10	8	6	5	1	0	0	0	Placebo + bevacizumab

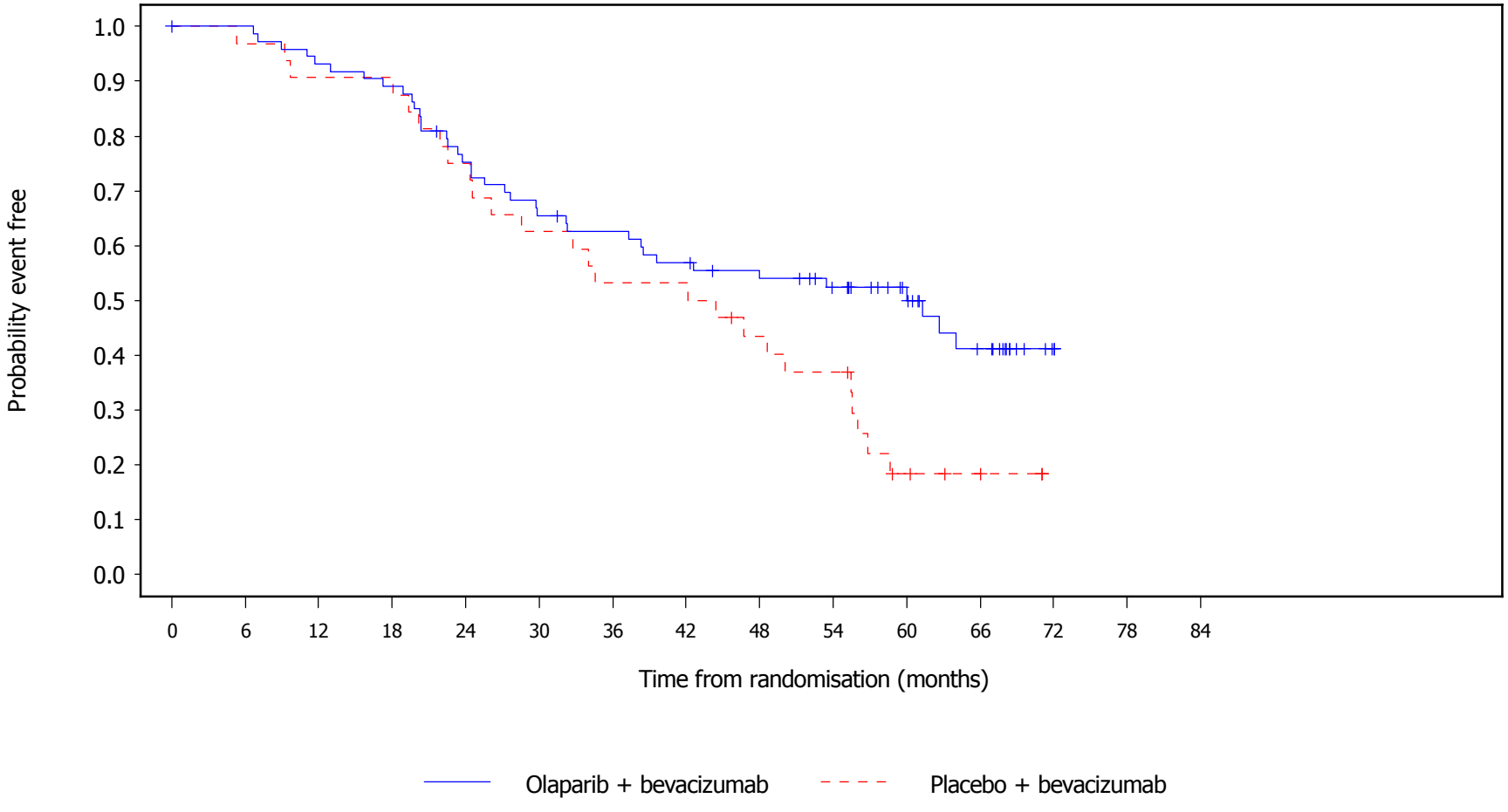
Figure 1.1.4.15 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for First line treatment outcome (eCRF) = NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

89	89	86	85	81	80	78	74	71	62	37	20	6	0	0	Olaparib + bevacizumab
47	45	44	41	35	31	28	26	23	19	12	6	0	0	0	Placebo + bevacizumab

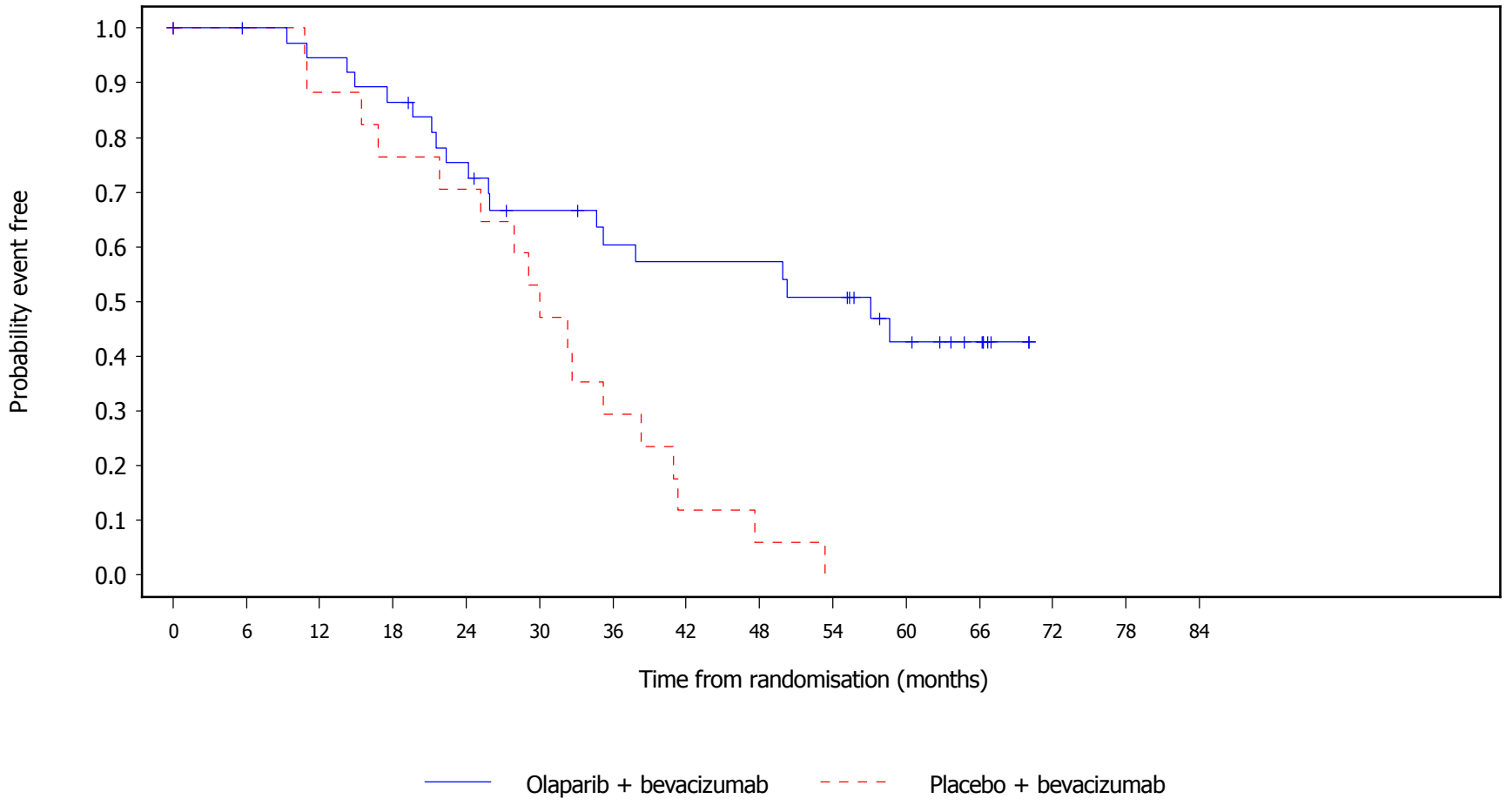
Figure 1.1.4.16 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for First line treatment outcome (eCRF) = NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

74	73	68	65	54	47	44	40	37	31	22	13	1	0	0	Olaparib + bevacizumab
32	31	29	29	24	20	17	17	13	11	4	2	0	0	0	Placebo + bevacizumab

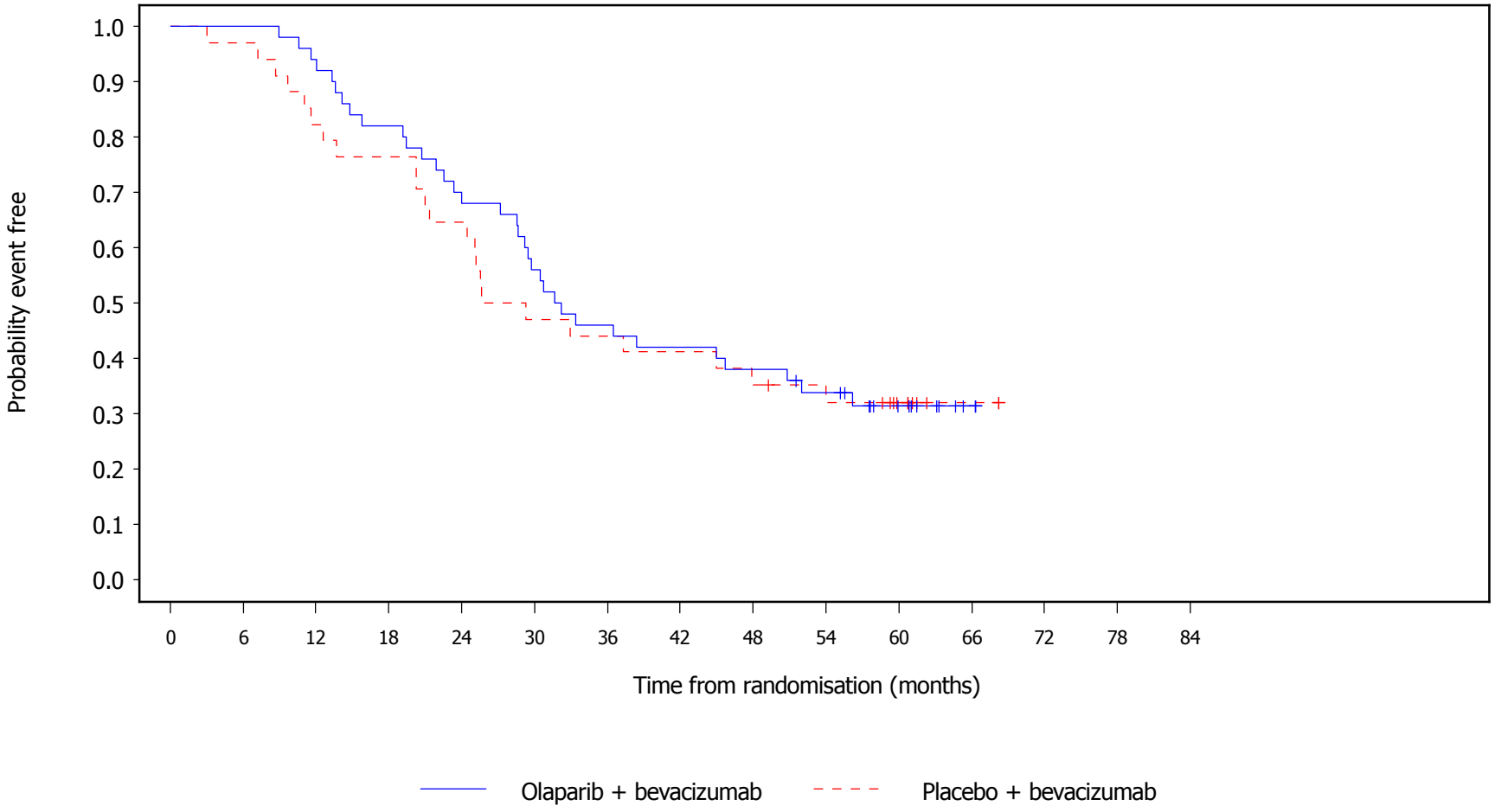
Figure 1.1.4.17 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for First line treatment outcome (eCRF) = NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

39	37	35	32	27	22	19	18	18	16	10	6	0	0	0	Olaparib + bevacizumab
18	17	15	13	12	9	5	2	1	0	0	0	0	0	0	Placebo + bevacizumab

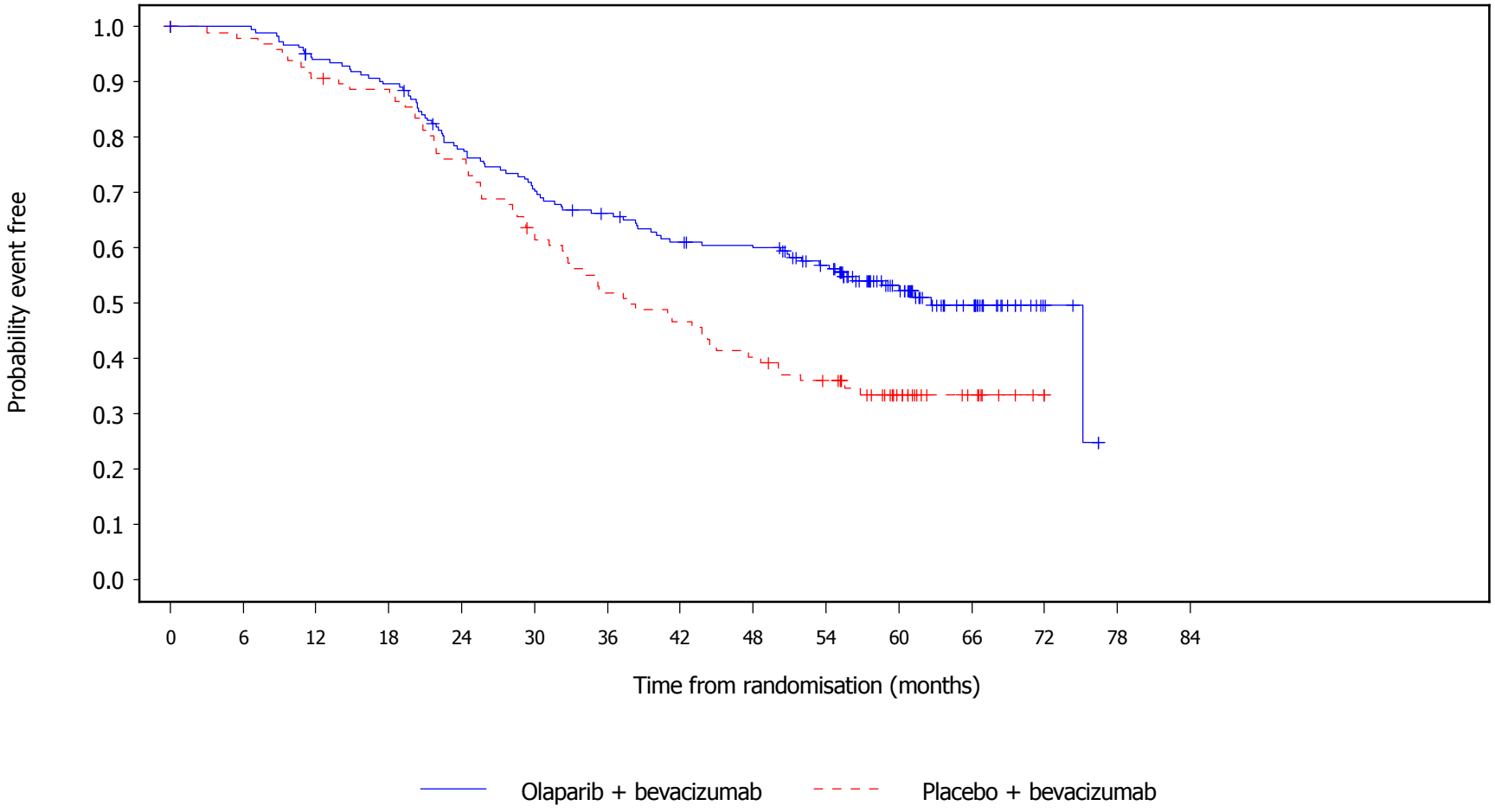
Figure 1.1.4.18 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for First line treatment outcome (eCRF) = PR
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

50	50	47	41	34	28	23	21	19	16	9	2	0	0	0	Olaparib + bevacizumab
34	33	28	26	22	16	15	14	12	10	6	1	0	0	0	Placebo + bevacizumab

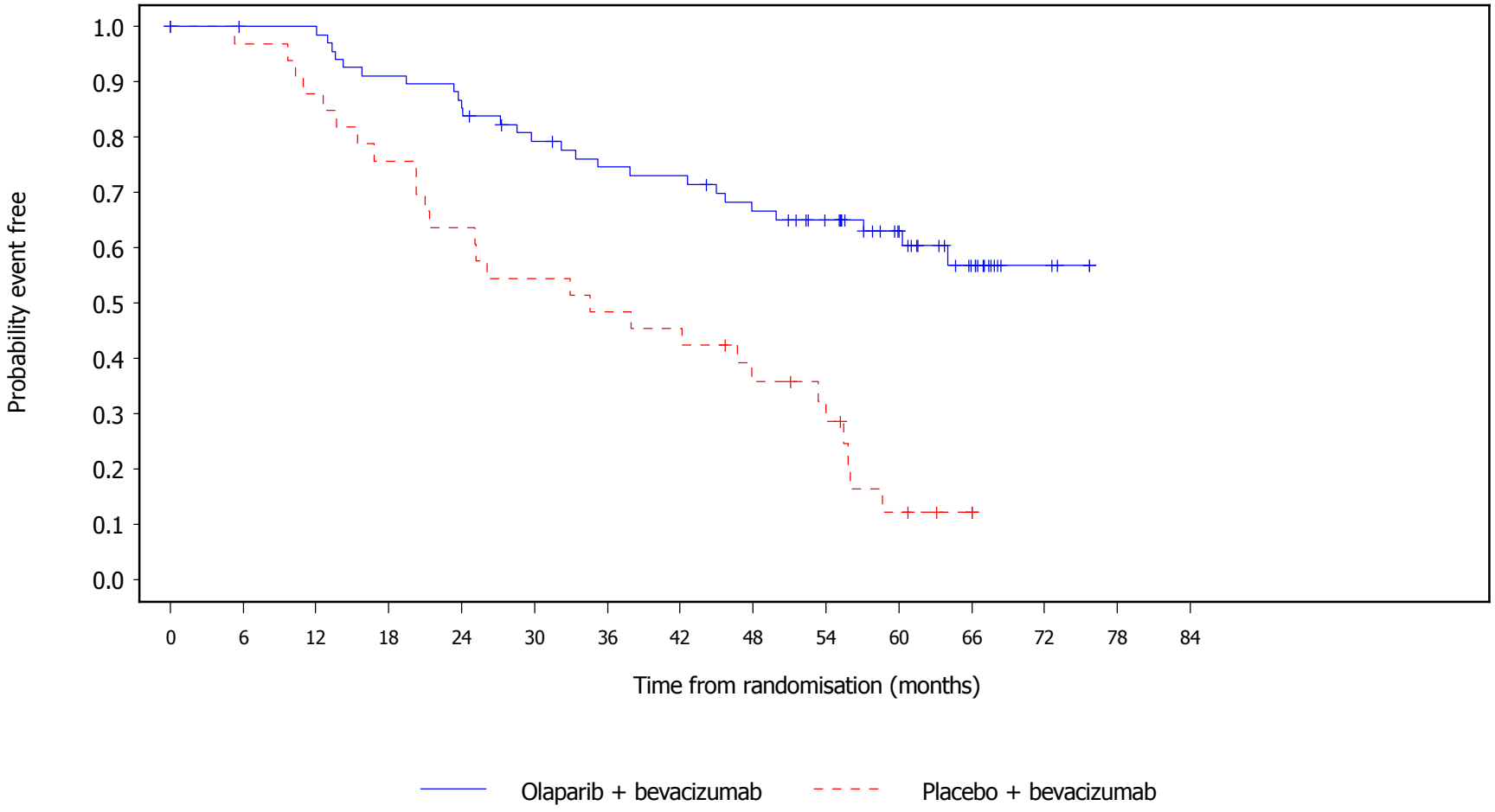
Figure 1.1.4.19 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for Age group = <65 years
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

185	184	171	163	140	127	117	107	104	90	54	28	4	0	0	Olaparib + bevacizumab
98	95	88	85	73	59	49	44	38	32	19	8	0	0	0	Placebo + bevacizumab

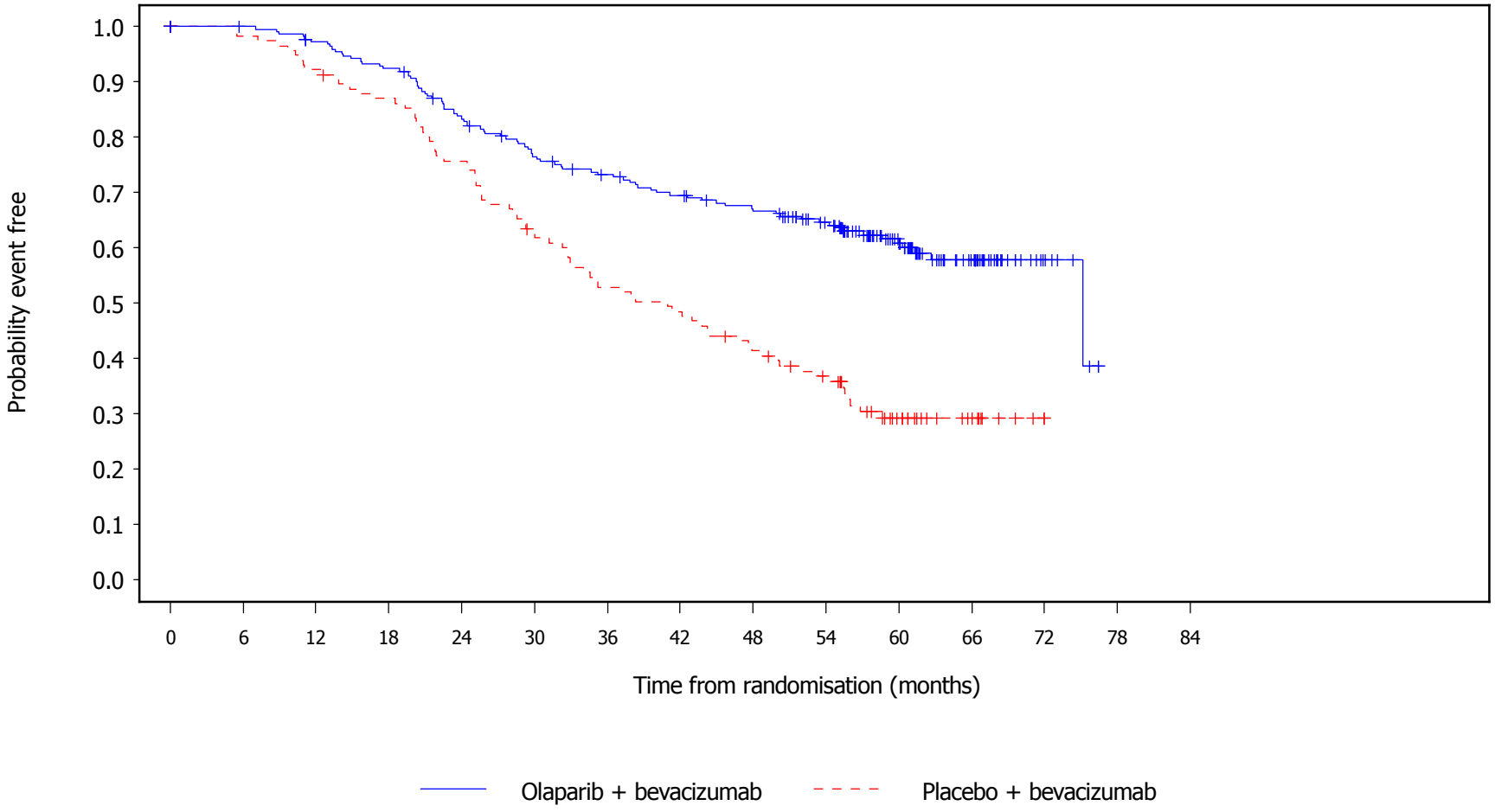
Figure 1.1.4.20 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for Age group = >=65 years
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

70	68	68	62	58	52	48	47	42	36	25	13	3	0	0	Olaparib + bevacizumab
34	32	29	25	21	18	16	15	11	8	3	1	0	0	0	Placebo + bevacizumab

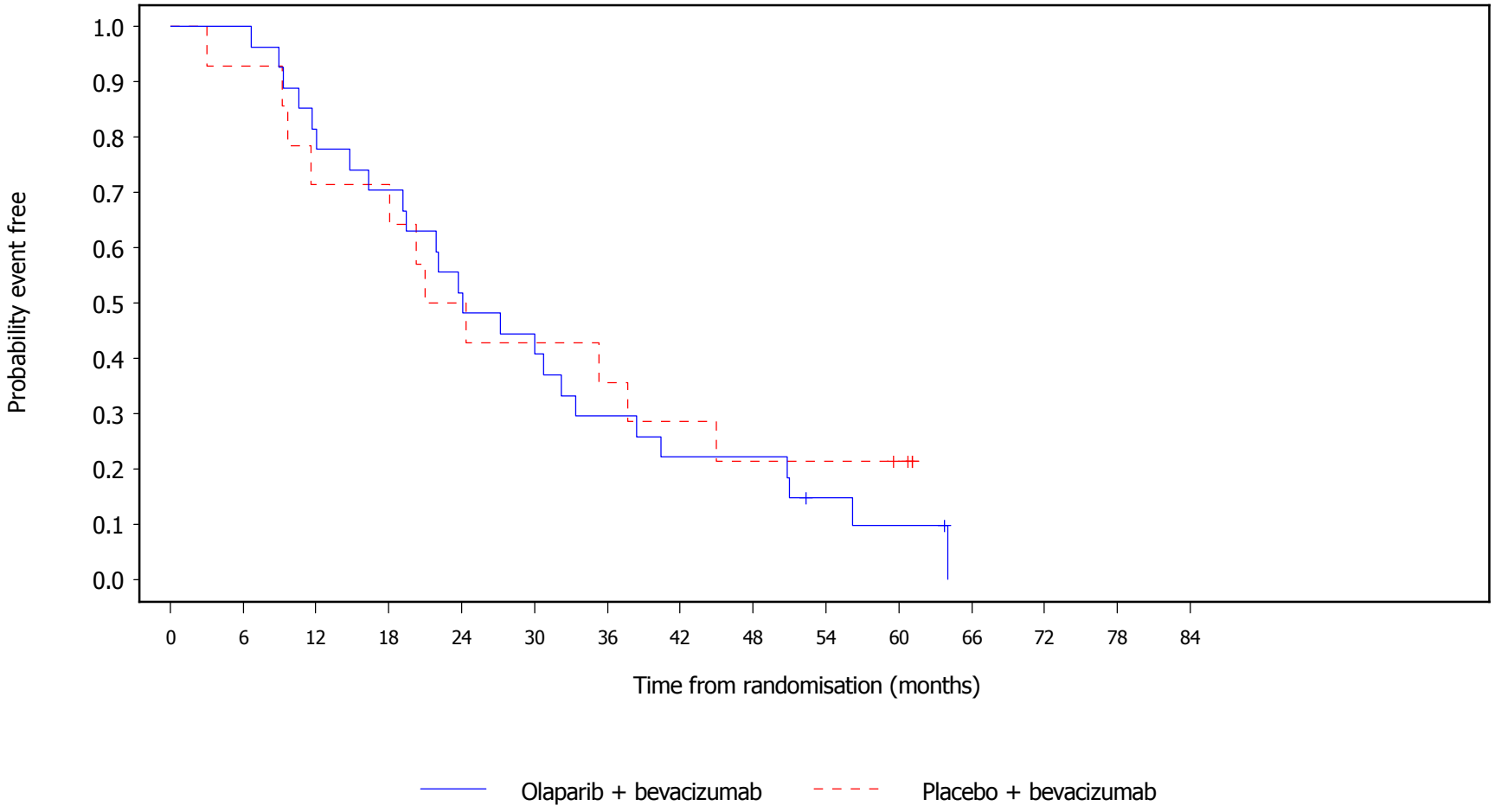
Figure 1.1.4.21 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for Baseline CA-125 value = <=ULN
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

228	225	217	206	184	167	157	148	140	123	77	41	7	0	0	Olaparib + bevacizumab
118	114	107	100	87	71	60	55	46	37	20	9	0	0	0	Placebo + bevacizumab

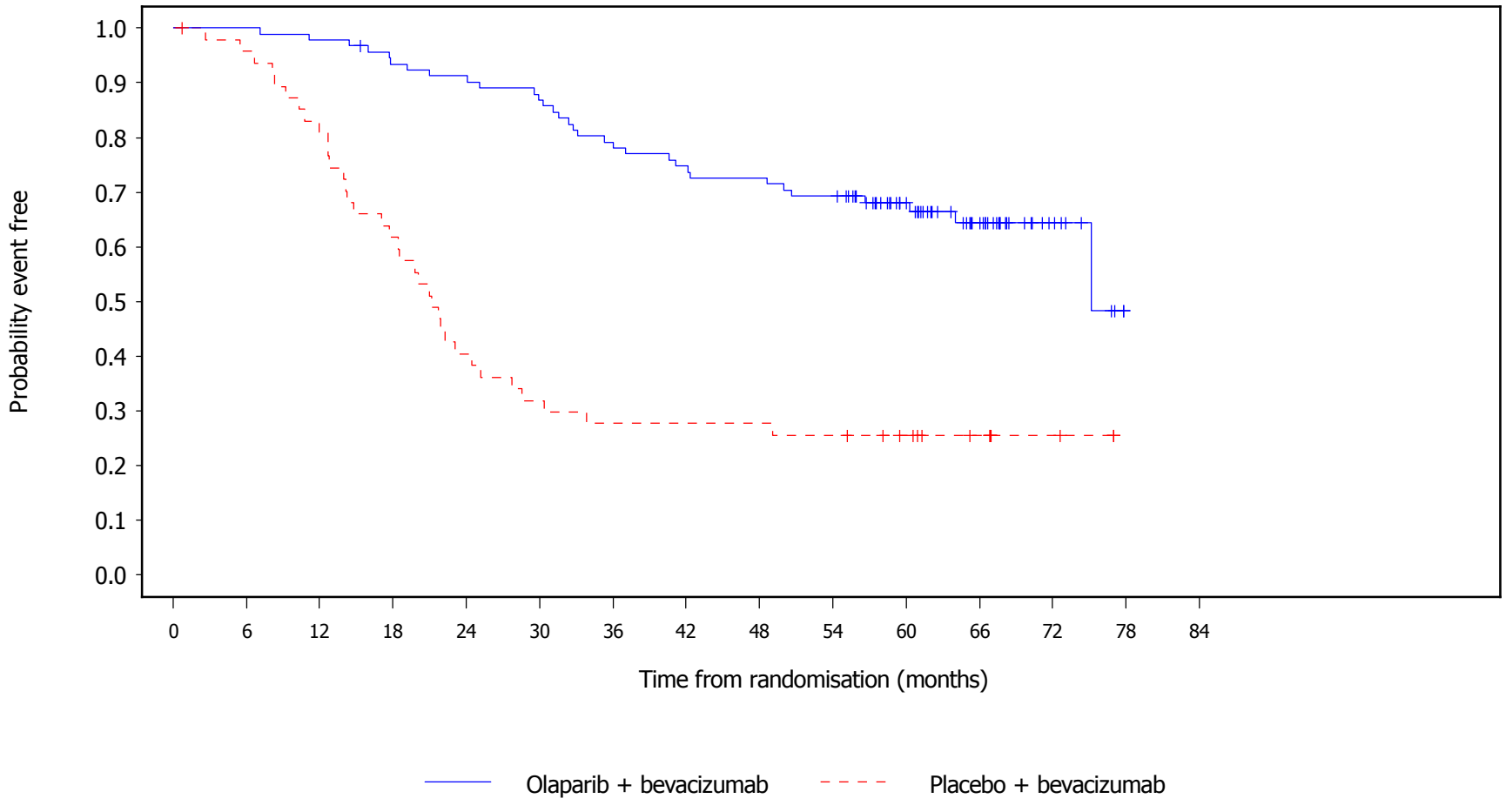
Figure 1.1.4.22 PAOLA1: Kaplan-Meier plot of Second Progression-free survival for Baseline CA-125 value = >ULN
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

27	27	22	19	14	12	8	6	6	3	2	0	0	0	0	Olaparib + bevacizumab
14	13	10	10	7	6	5	4	3	3	2	0	0	0	0	Placebo + bevacizumab

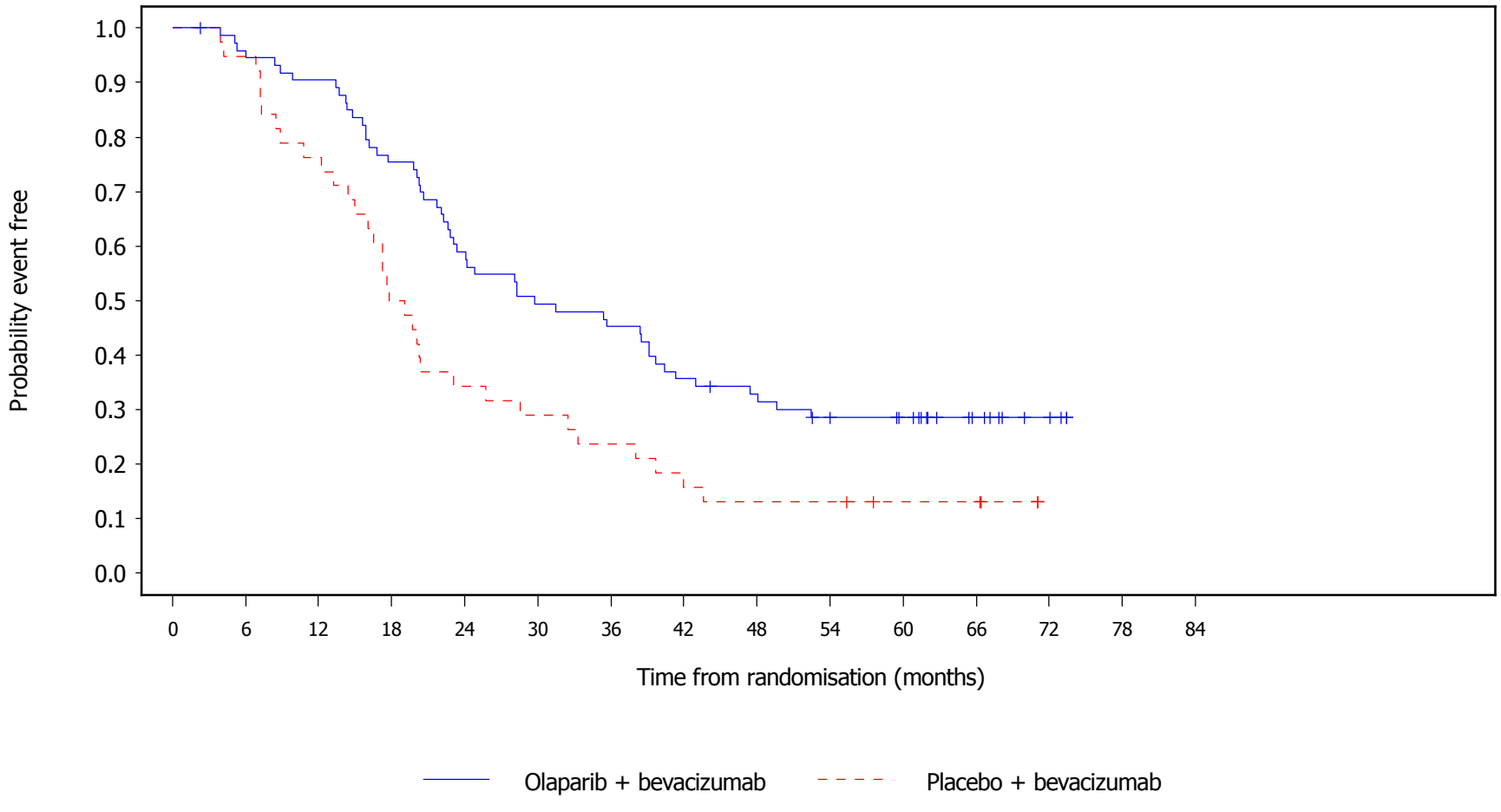
Figure 1.1.4.23 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death for First line treatment outcome (IVRS) = NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

92	92	90	85	83	79	72	68	66	63	44	26	8	0	0	Olaparib + bevacizumab
48	45	38	29	19	15	13	13	13	12	9	5	2	0	0	Placebo + bevacizumab

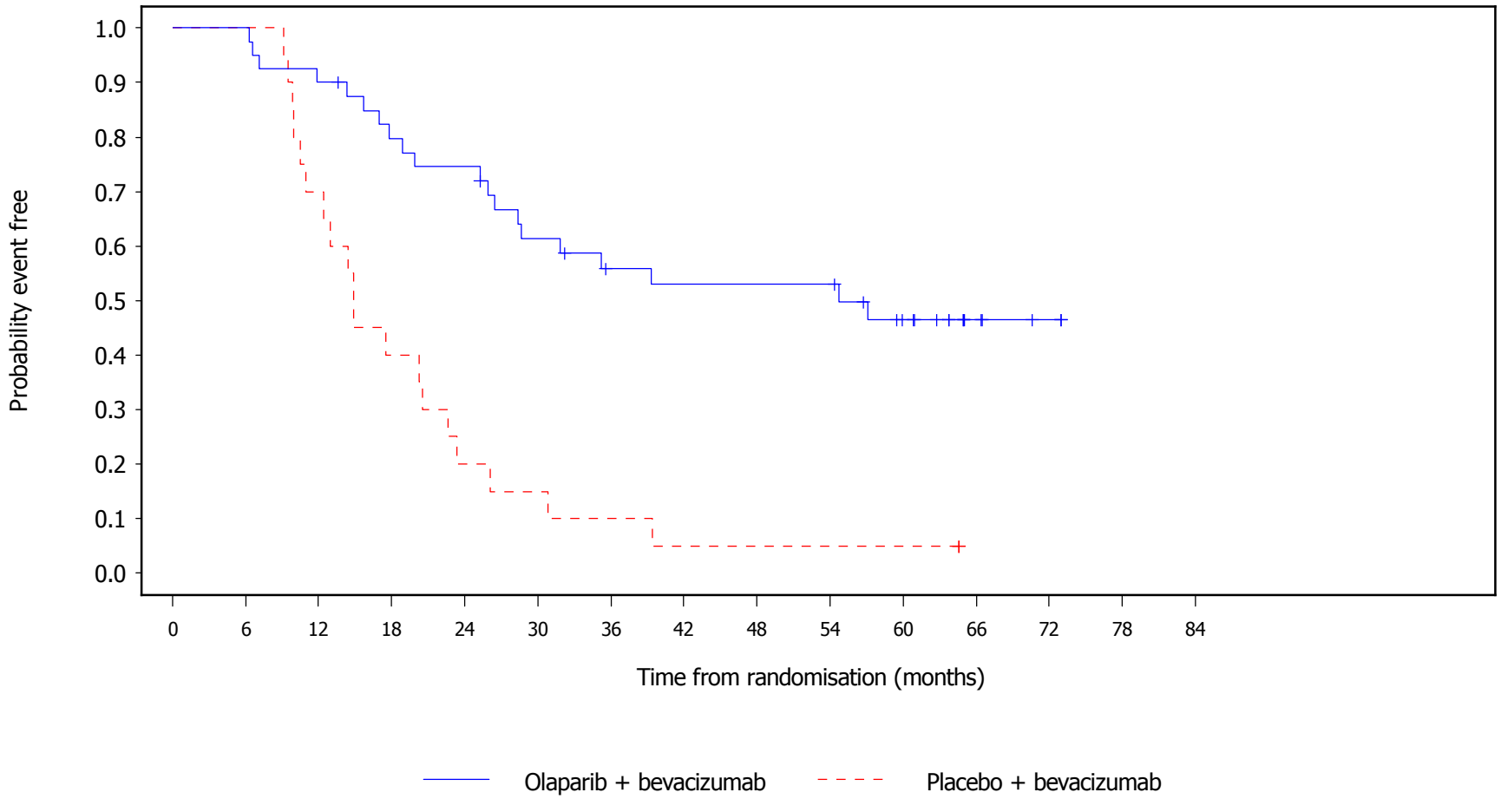
Figure 1.1.4.24 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death for First line treatment outcome (IVRS) = NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

74	70	66	55	43	36	33	26	23	19	16	8	3	0	0	Olaparib + bevacizumab
38	36	29	19	13	11	9	6	5	5	3	3	0	0	0	Placebo + bevacizumab

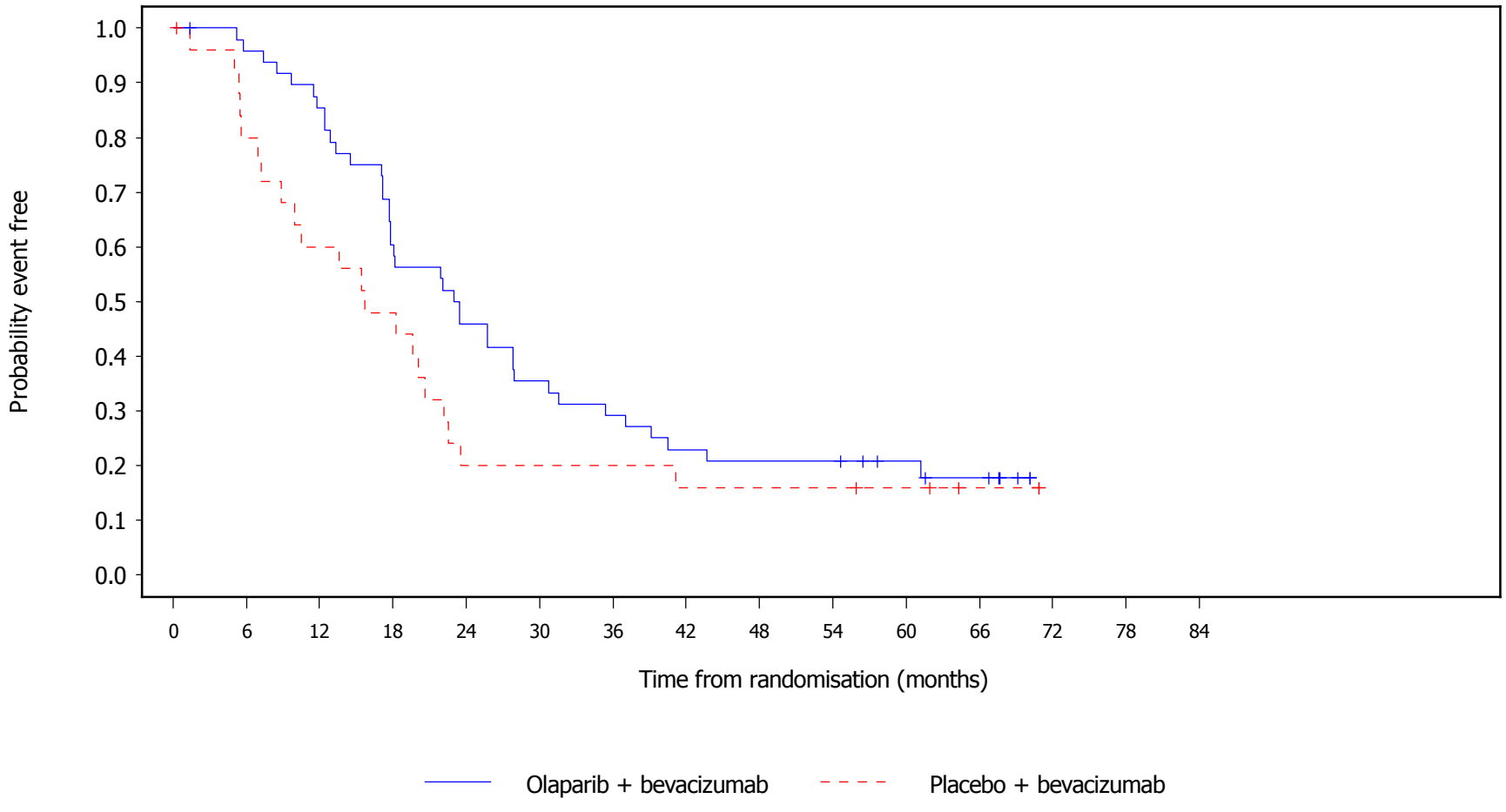
Figure 1.1.4.25 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death for First line treatment outcome (IVRS) = NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

40	40	36	31	29	23	19	18	18	18	12	4	1	0	0	Olaparib + bevacizumab
20	20	14	8	4	3	2	1	1	1	1	0	0	0	0	Placebo + bevacizumab

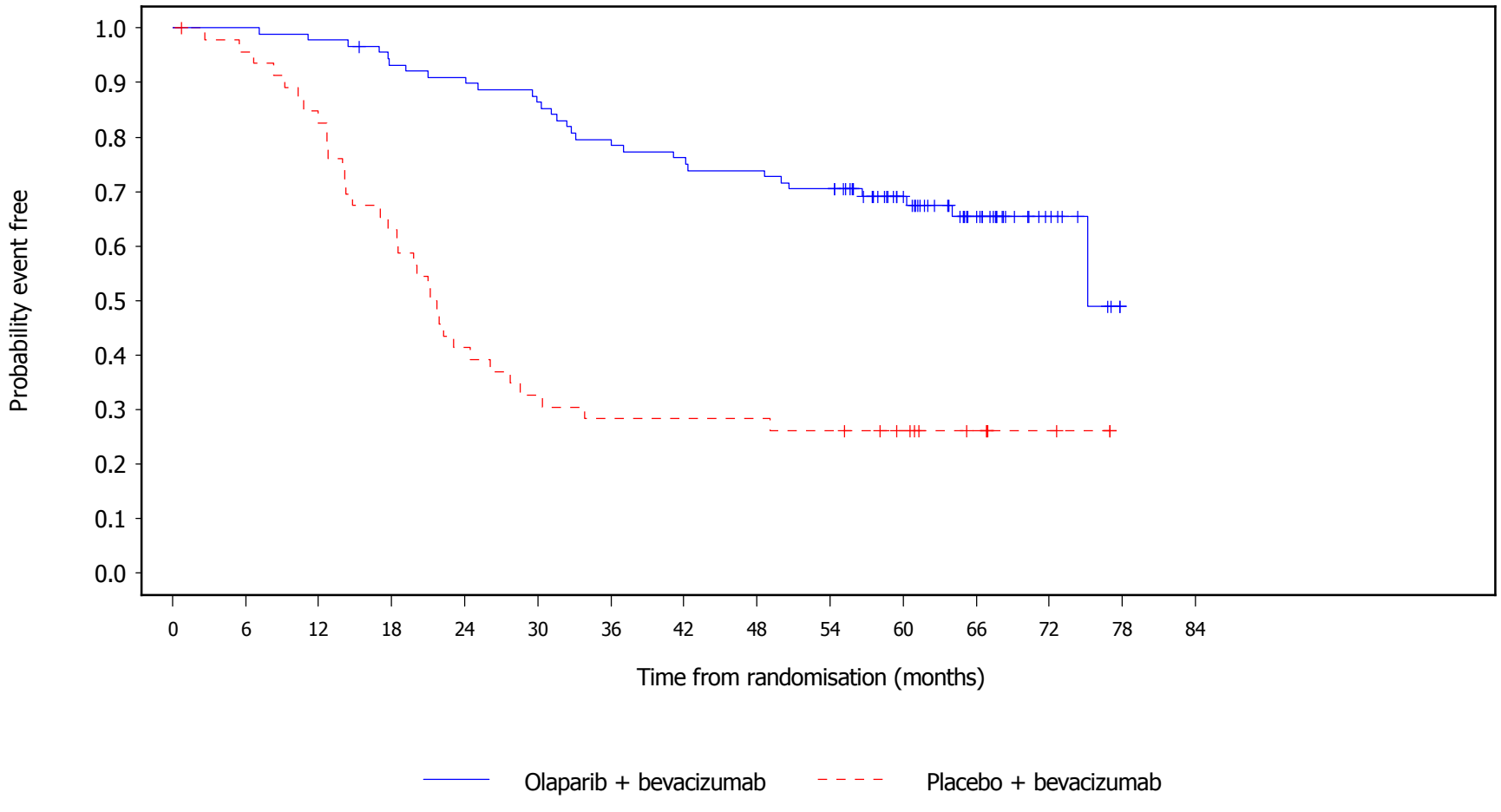
Figure 1.1.4.26 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death for First line treatment outcome (IVRS) = PR
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

49	46	41	29	22	17	14	11	10	10	7	5	0	0	0	Olaparib + bevacizumab
26	20	15	12	5	5	5	4	4	4	3	1	0	0	0	Placebo + bevacizumab

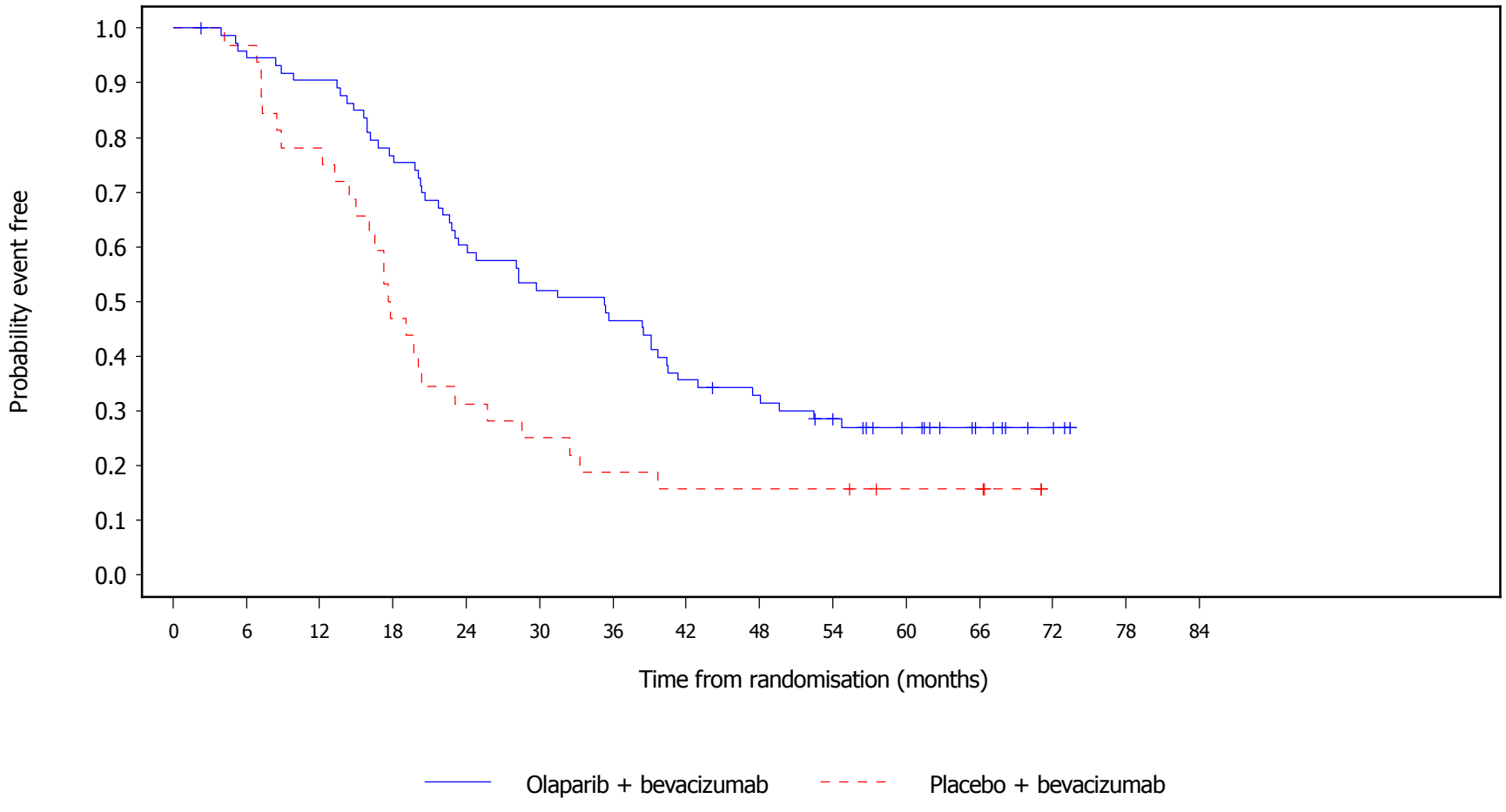
Figure 1.1.4.27 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death for First line treatment outcome (eCRF) = NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

89	89	87	82	80	76	70	67	65	62	43	25	8	0	0	Olaparib + bevacizumab
47	44	38	29	19	15	13	13	13	12	9	5	2	0	0	Placebo + bevacizumab

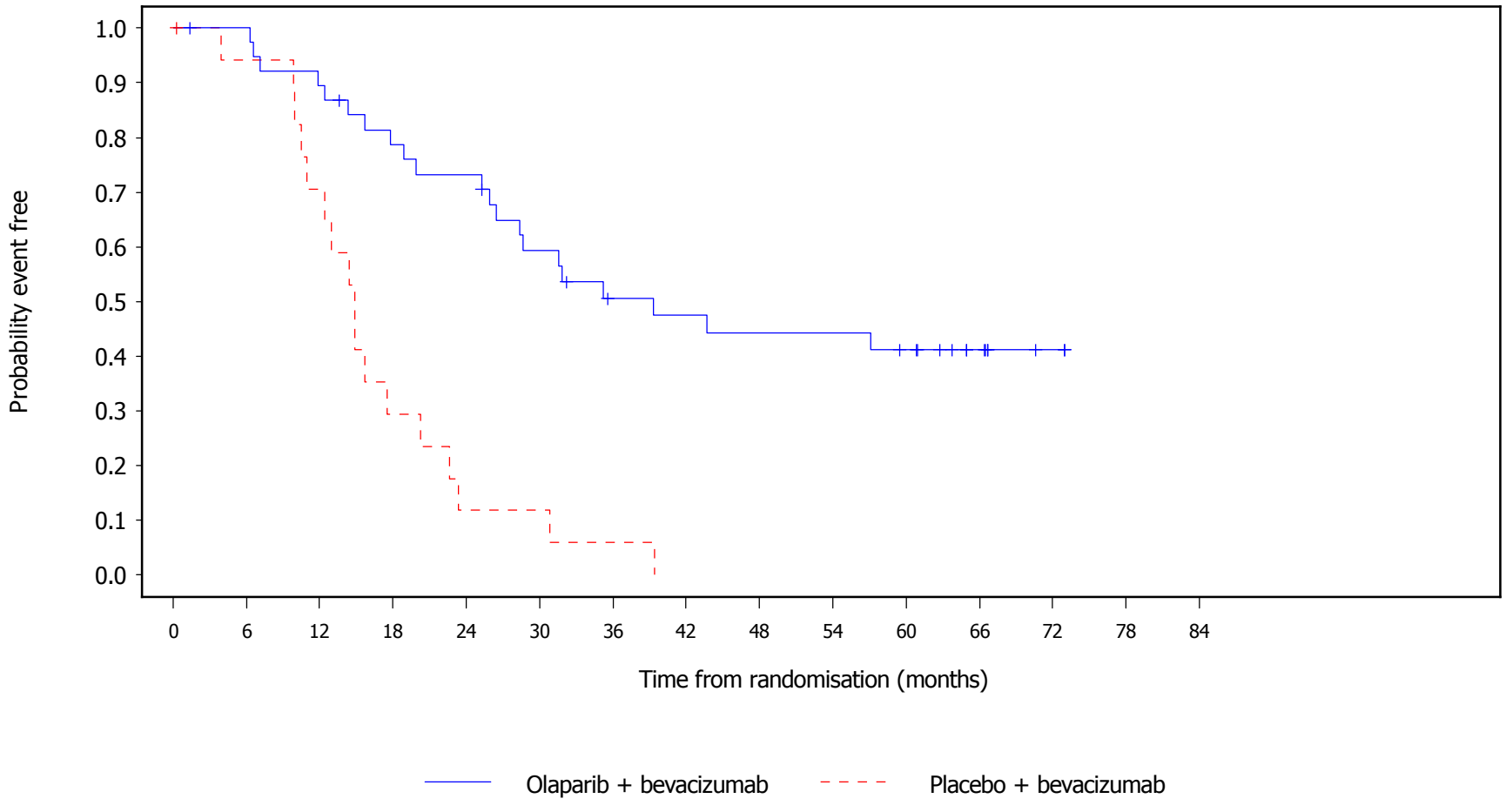
Figure 1.1.4.28 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death for First line treatment outcome (eCRF) = NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

74	70	66	56	44	38	34	26	23	19	13	7	3	0	0	Olaparib + bevacizumab
32	31	25	15	10	8	6	5	5	5	3	3	0	0	0	Placebo + bevacizumab

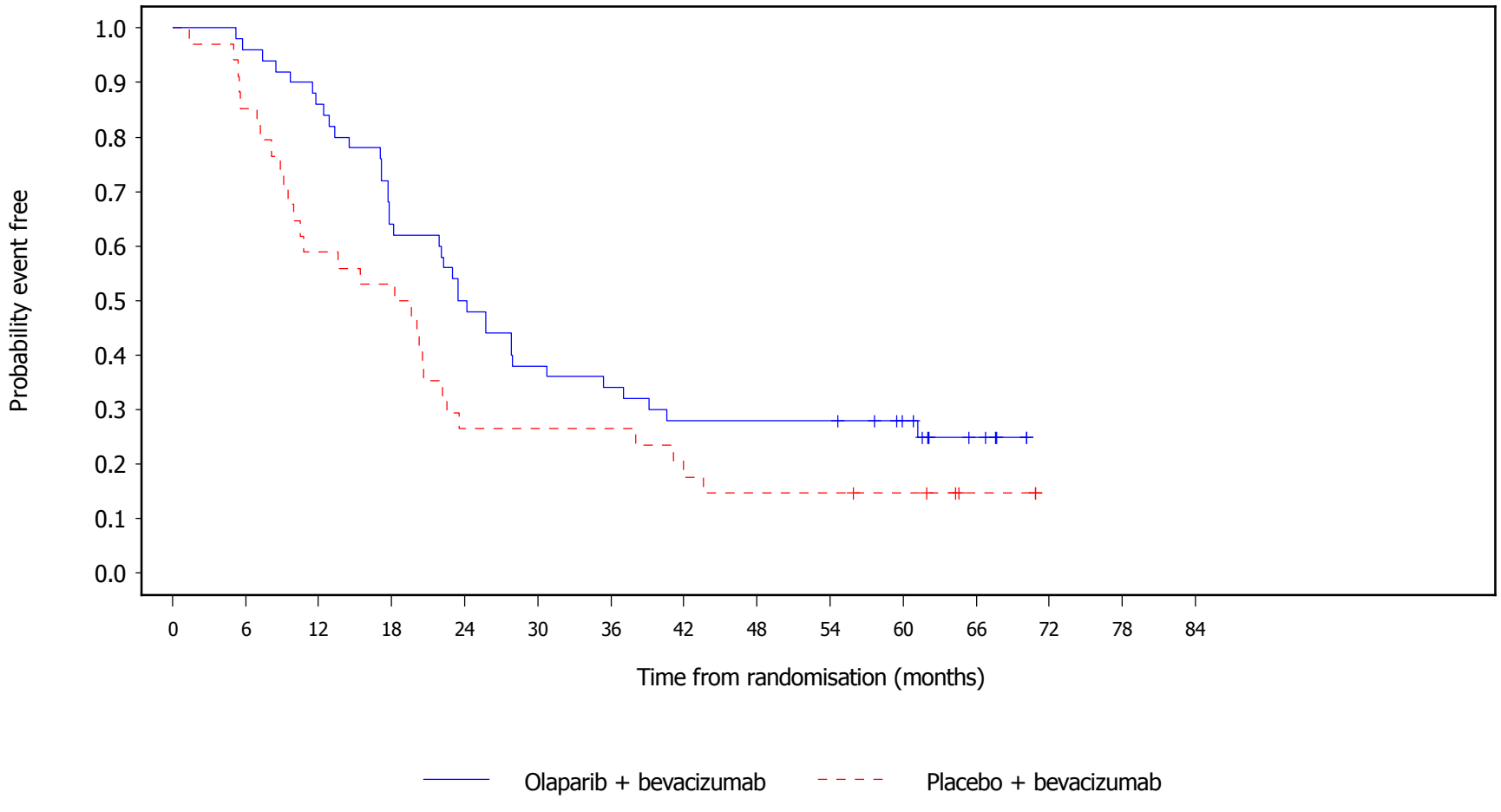
Figure 1.1.4.29 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death for First line treatment outcome (eCRF) = NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

39	38	34	29	27	21	16	15	14	14	12	6	1	0	0	Olaparib + bevacizumab
18	16	12	5	2	2	1	0	0	0	0	0	0	0	0	Placebo + bevacizumab

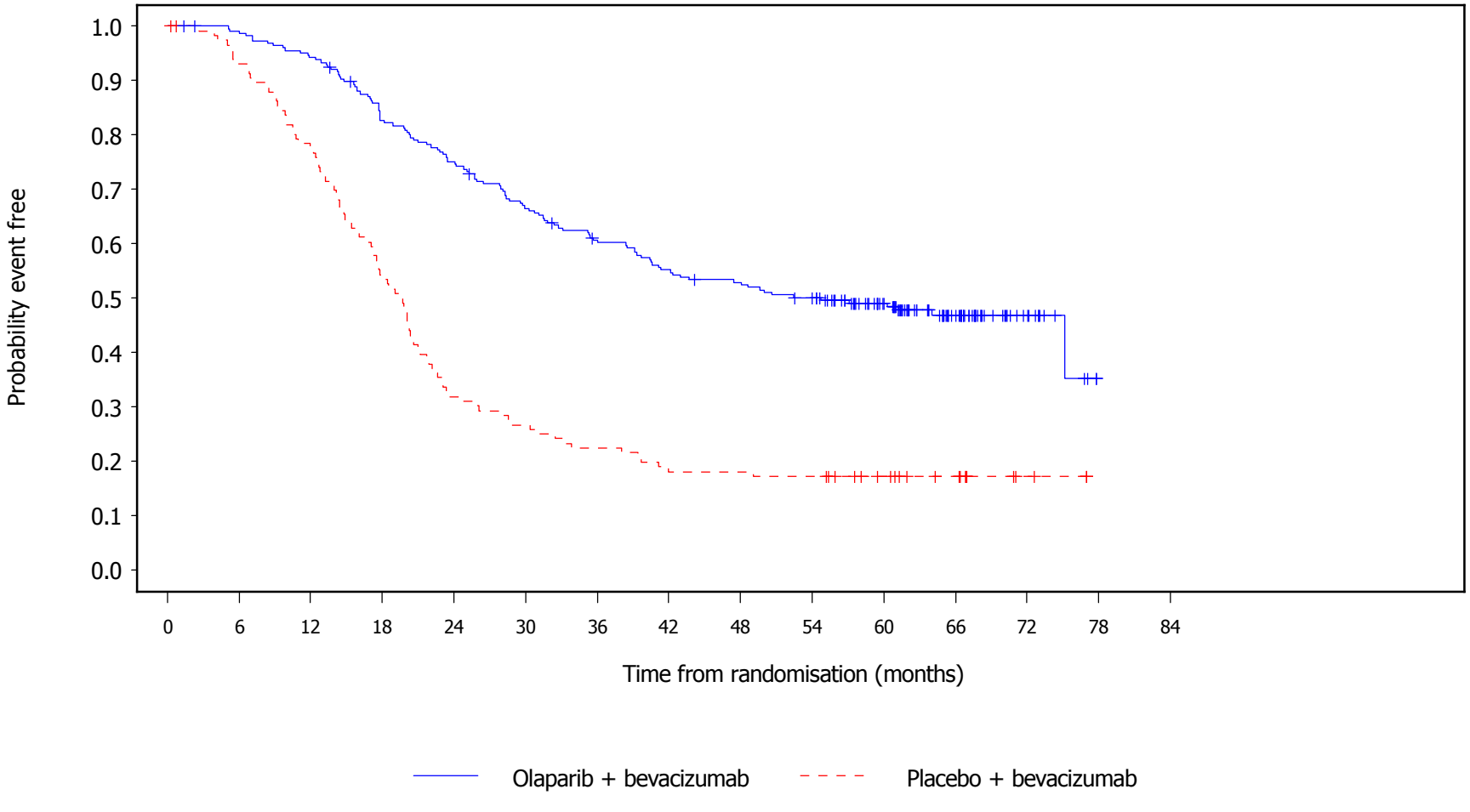
Figure 1.1.4.30 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death for First line treatment outcome (eCRF) = PR
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

50	48	43	32	25	19	17	14	14	14	10	4	0	0	0	Olaparib + bevacizumab
34	29	20	18	9	9	9	6	5	5	4	1	0	0	0	Placebo + bevacizumab

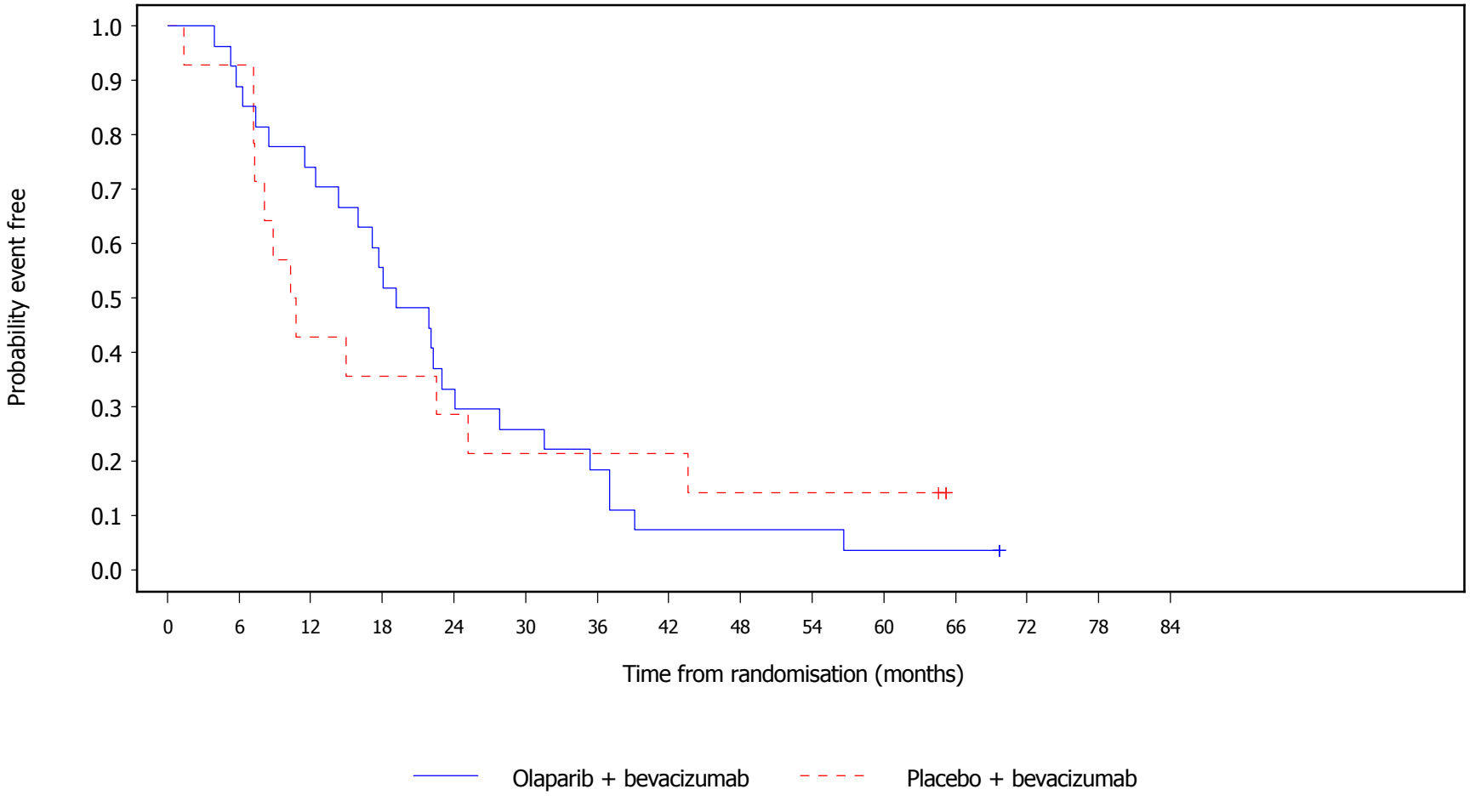
Figure 1.1.4.31 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death for Baseline CA-125 value = <=ULN
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

228	224	213	185	168	148	133	121	115	108	78	42	12	0	0	Olaparib + bevacizumab
118	108	90	63	37	31	26	21	21	20	14	9	2	0	0	Placebo + bevacizumab

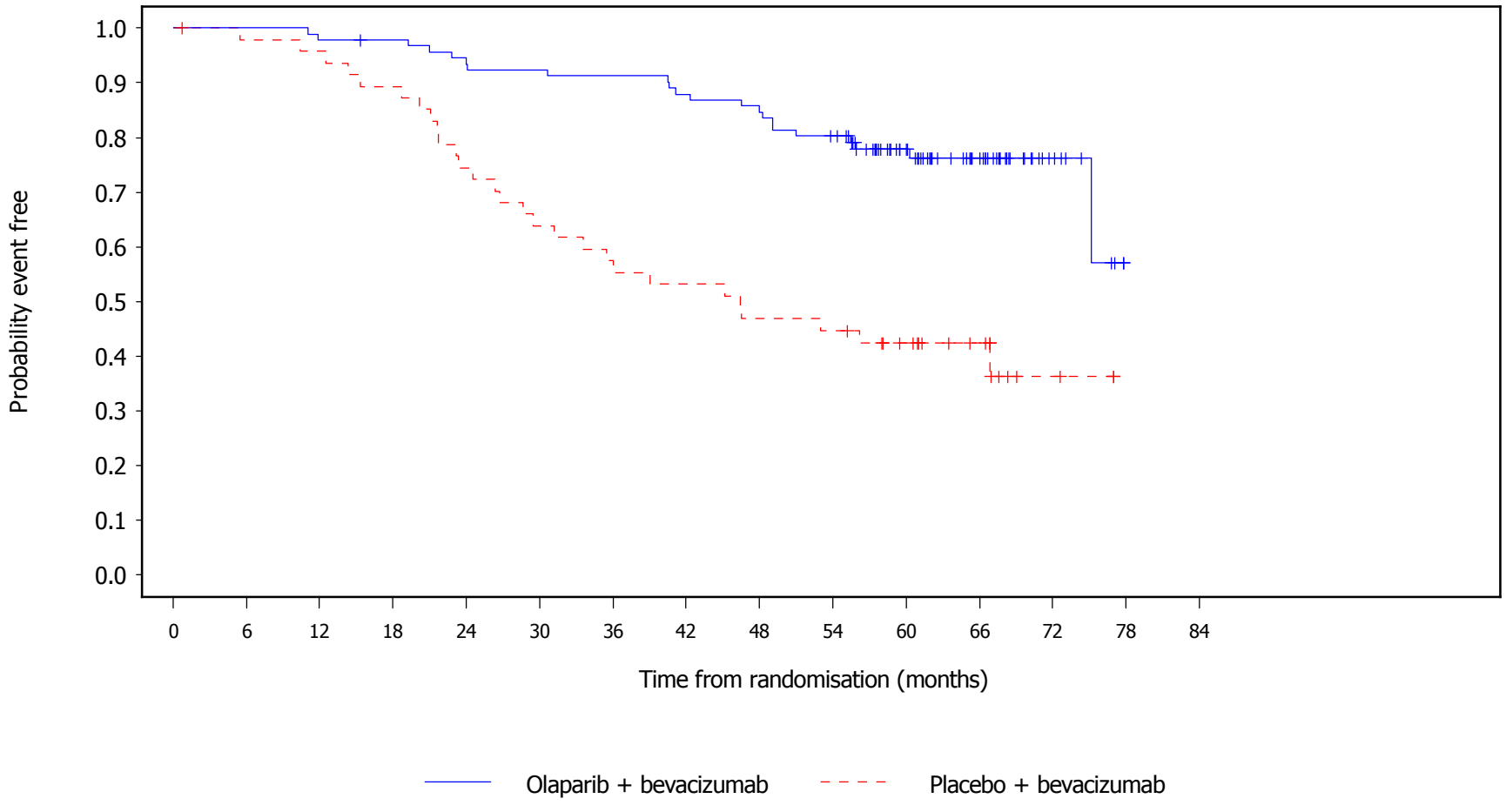
Figure 1.1.4.32 PAOLA1: Kaplan-Meier plot of Time to First Subsequent Cancer Therapy or Death for Baseline CA-125 value = >ULN
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

27	24	20	15	9	7	5	2	2	2	1	1	0	0	0	Olaparib + bevacizumab
14	13	6	5	4	3	3	3	2	2	2	0	0	0	0	Placebo + bevacizumab

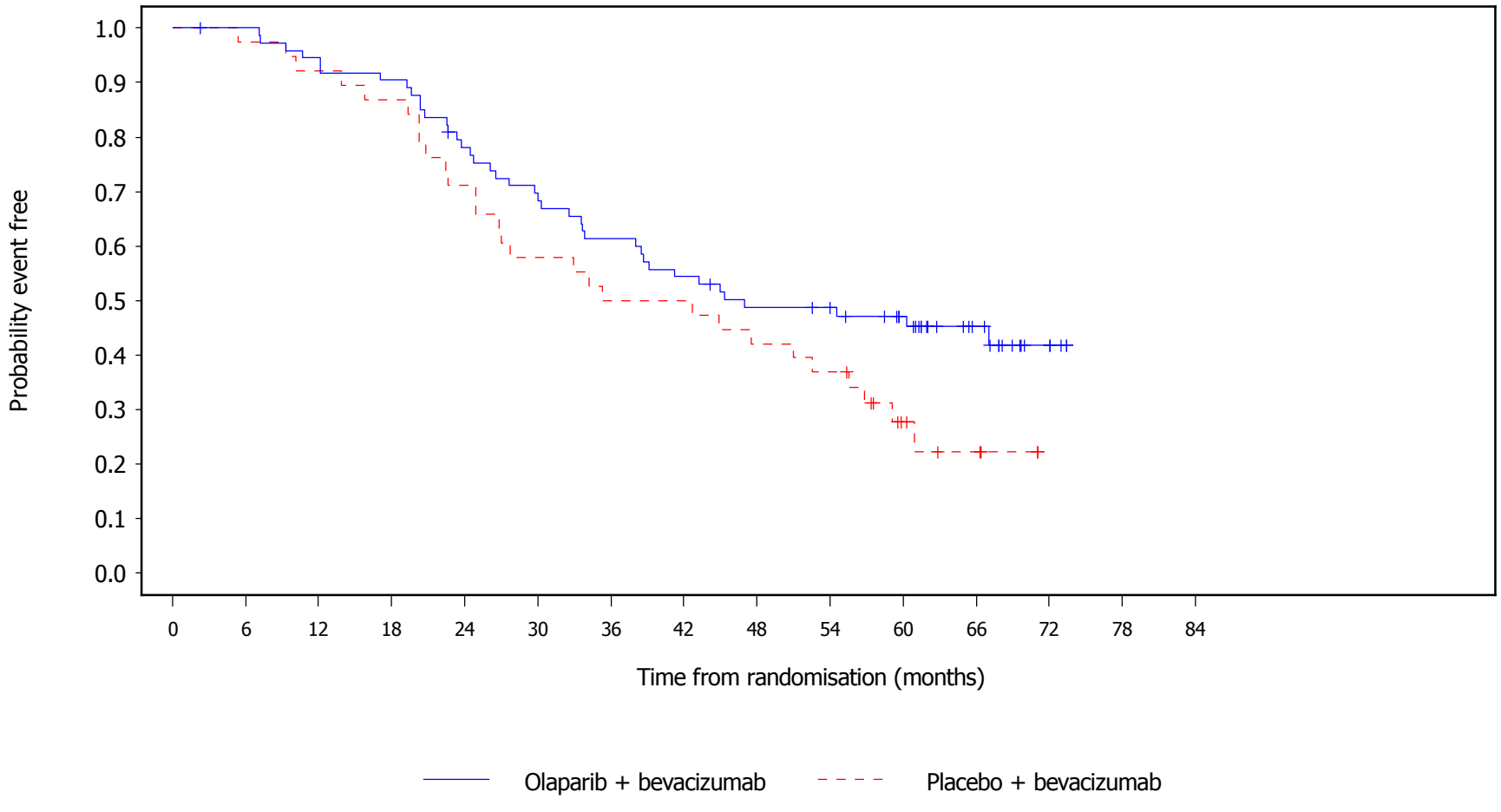
Figure 1.1.4.33 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death for First line treatment outcome (IVRS) = NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

92	92	90	89	85	84	83	80	78	72	48	29	8	0	0	Olaparib + bevacizumab
48	46	45	42	35	30	27	25	22	21	16	10	2	0	0	Placebo + bevacizumab

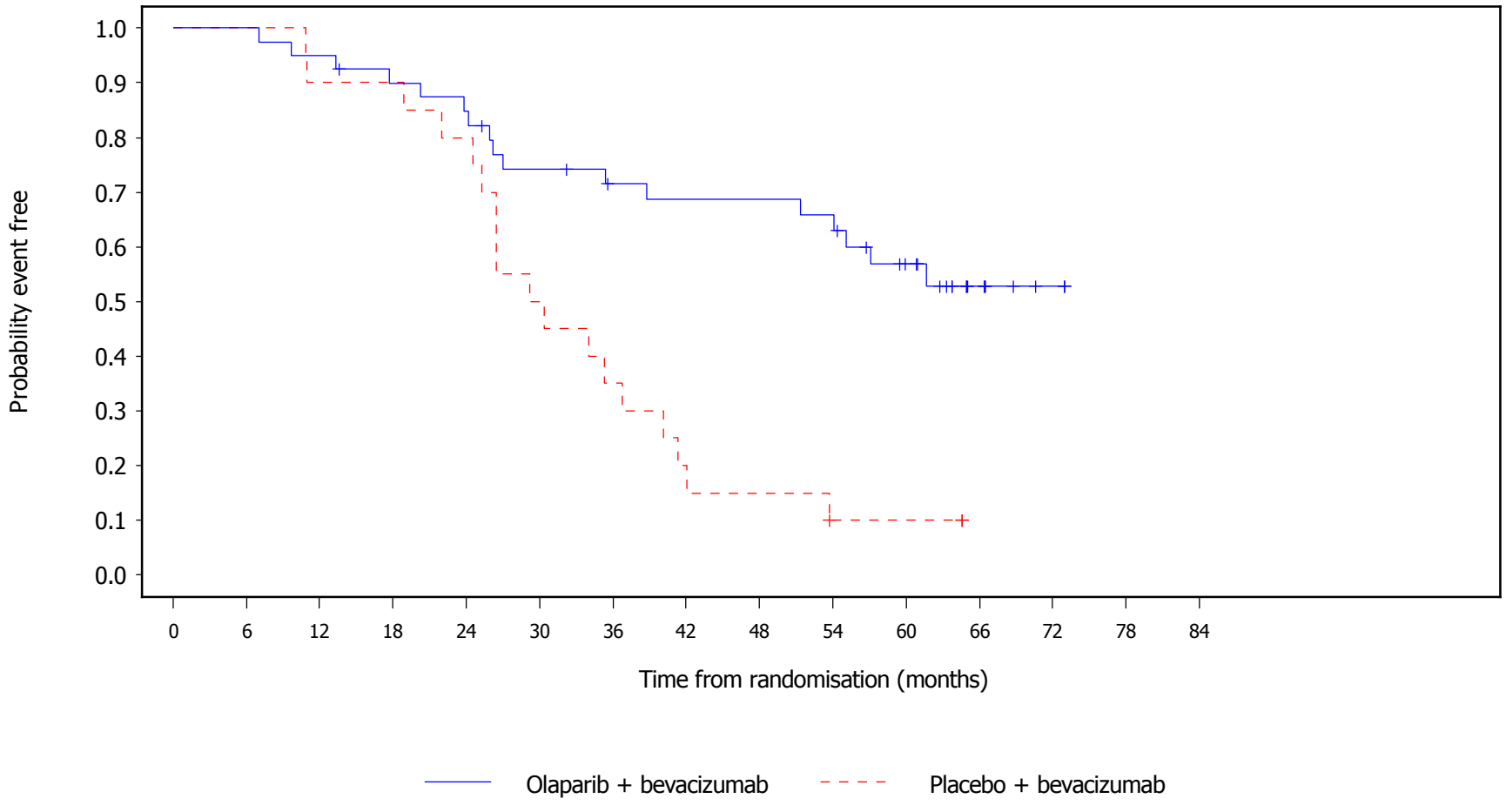
Figure 1.1.4.34 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death for First line treatment outcome (IVRS) = NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

74	73	69	66	56	50	44	39	34	33	26	14	4	0	0	Olaparib + bevacizumab
38	37	35	33	27	22	19	19	16	14	6	3	0	0	0	Placebo + bevacizumab

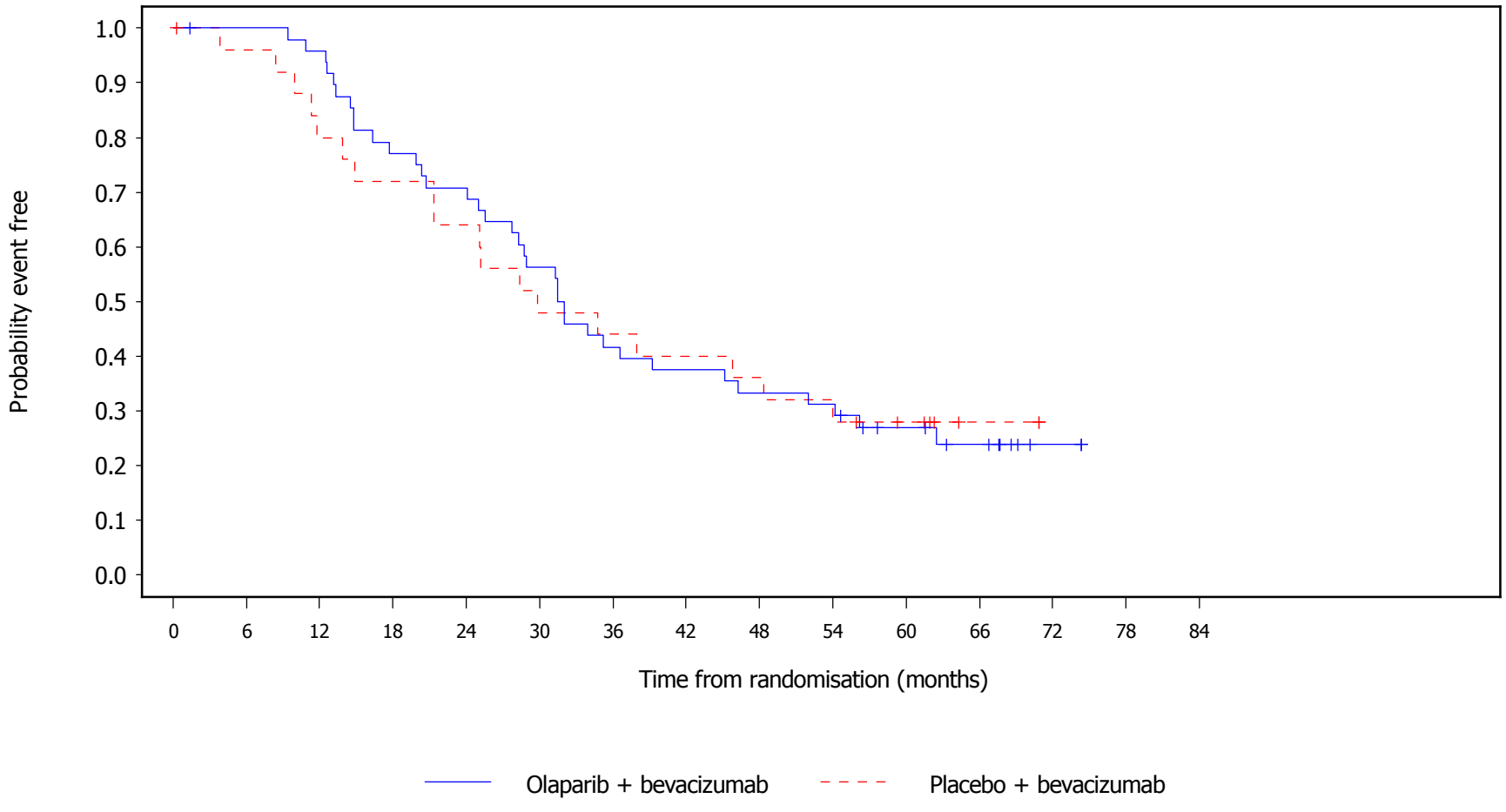
Figure 1.1.4.35 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death for First line treatment outcome (IVRS) = NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

40	40	38	35	33	28	25	24	24	23	16	6	1	0	0	Olaparib + bevacizumab
20	20	18	18	16	10	7	4	3	1	1	0	0	0	0	Placebo + bevacizumab

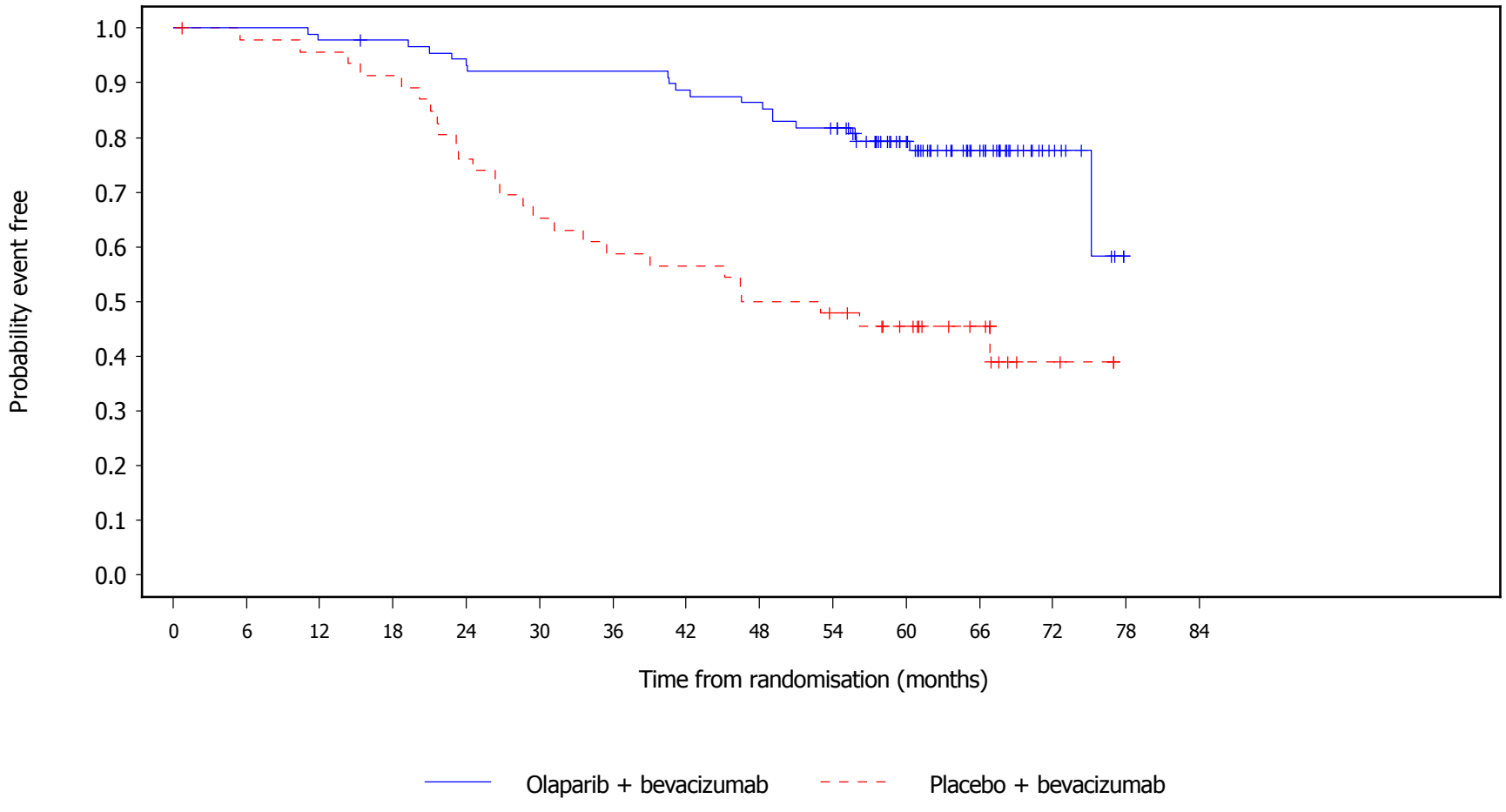
Figure 1.1.4.36 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death for First line treatment outcome (IVRS) = PR
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

49	48	46	37	34	27	20	18	16	15	10	7	1	0	0	Olaparib + bevacizumab
26	24	20	18	16	12	11	10	9	7	5	1	0	0	0	Placebo + bevacizumab

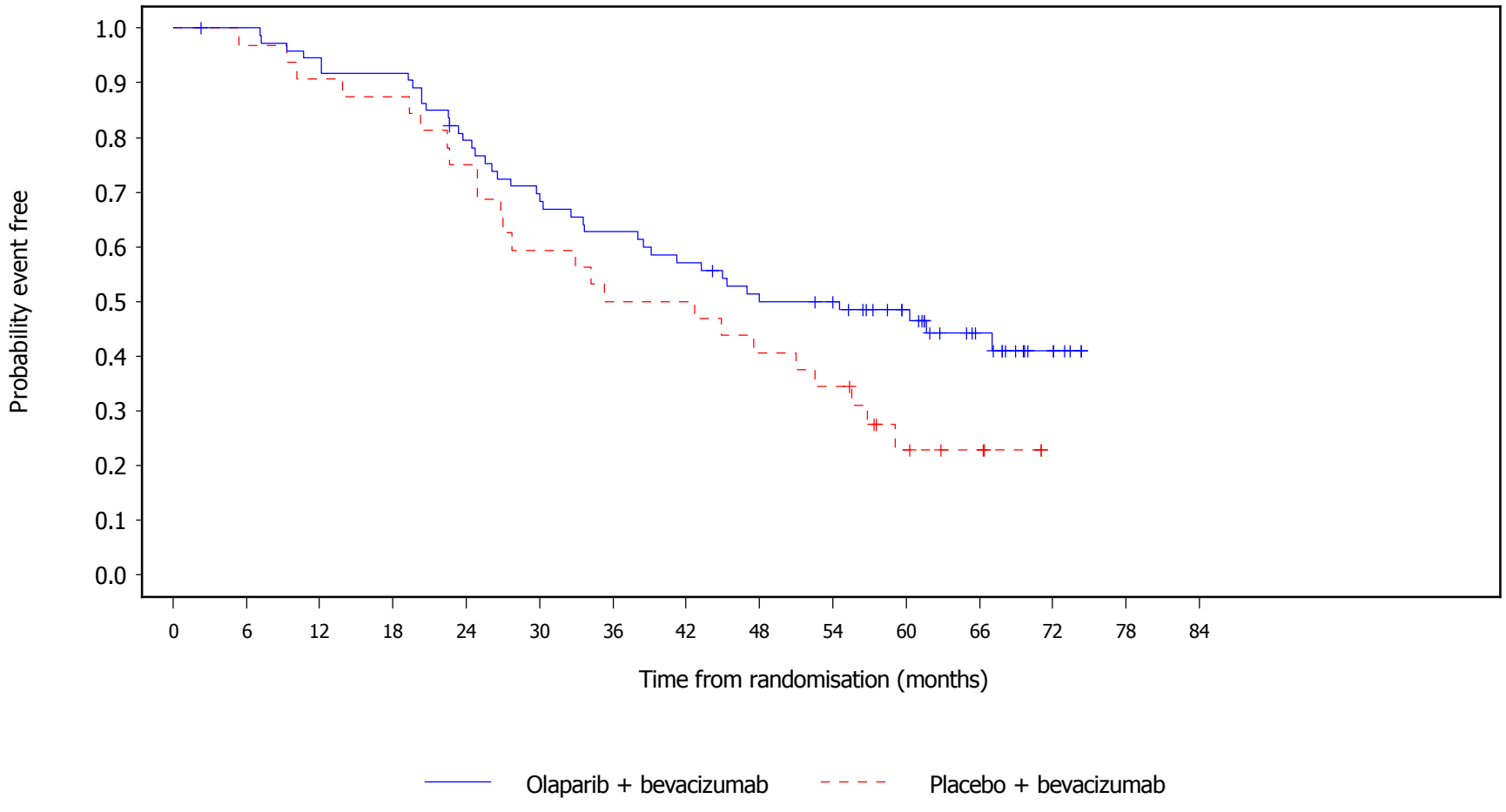
Figure 1.1.4.37 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death for First line treatment outcome (eCRF) = NED [PDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

89	89	87	86	82	81	81	78	76	71	48	28	8	0	0	Olaparib + bevacizumab
47	45	44	42	35	30	27	26	23	21	16	10	2	0	0	Placebo + bevacizumab

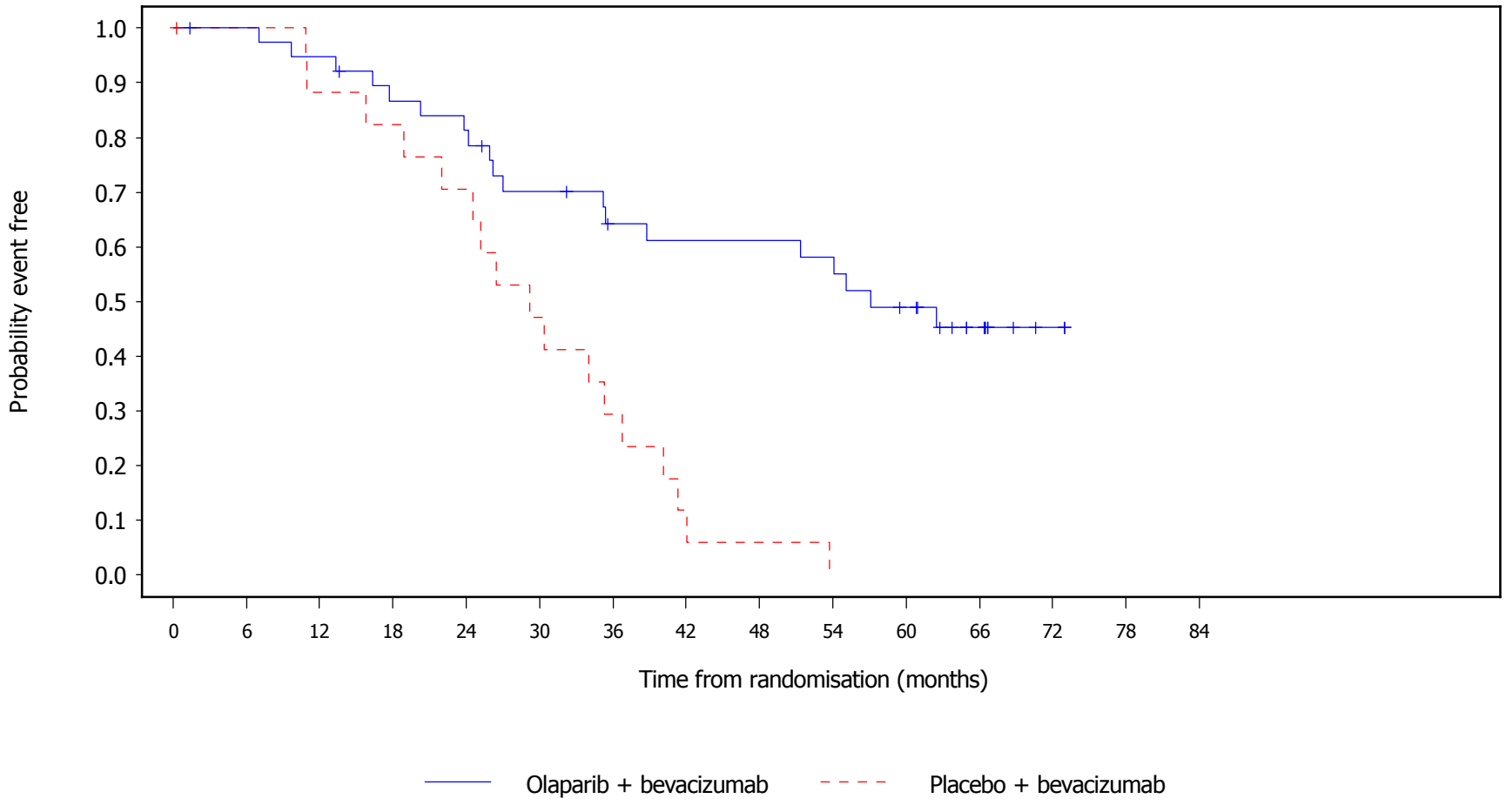
Figure 1.1.4.38 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death for First line treatment outcome (eCRF) = NED/CR [IDS]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

74	73	69	67	57	50	45	41	36	34	25	14	5	0	0	Olaparib + bevacizumab
32	31	29	28	24	19	16	16	13	11	5	3	0	0	0	Placebo + bevacizumab

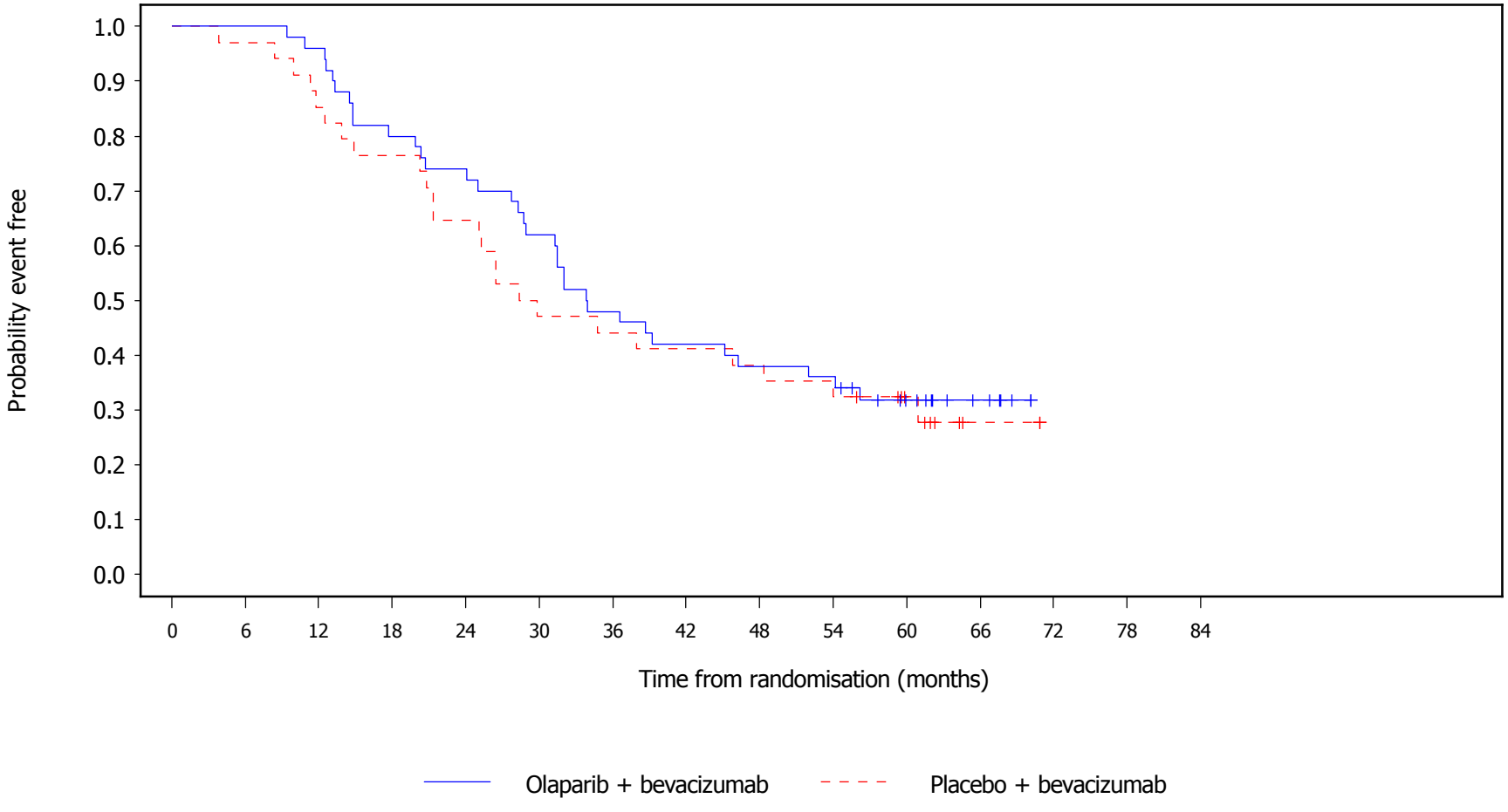
Figure 1.1.4.39 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death for First line treatment outcome (eCRF) = NED/CR [Chemo]
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

39	38	36	32	30	25	21	20	20	19	15	8	1	0	0	Olaparib + bevacizumab
18	17	15	14	12	8	5	2	1	0	0	0	0	0	0	Placebo + bevacizumab

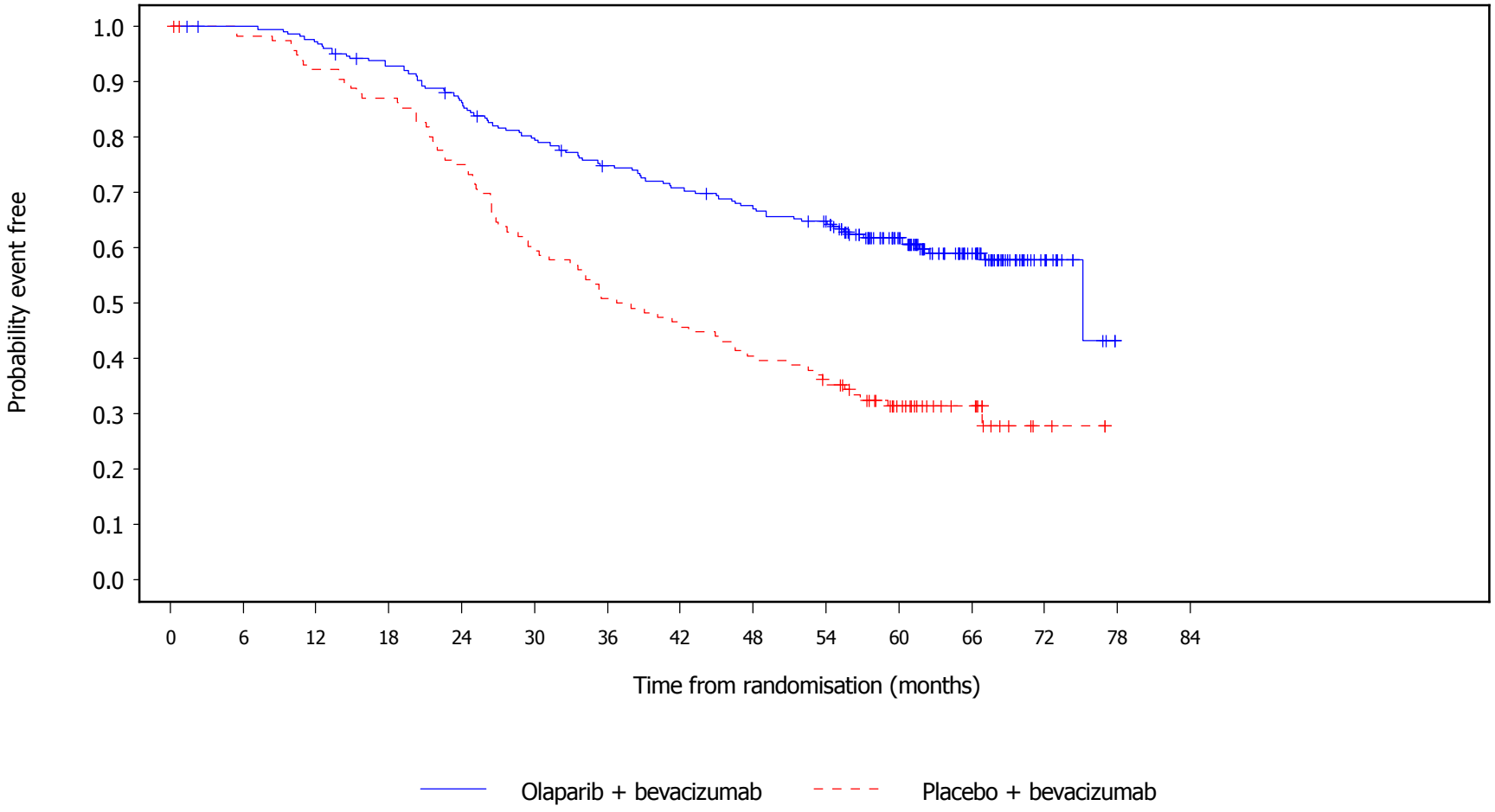
Figure 1.1.4.40 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death for First line treatment outcome (eCRF) = PR
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

50	50	48	40	37	31	24	21	19	18	11	5	0	0	0	Olaparib + bevacizumab
34	33	29	26	22	16	15	14	13	11	7	1	0	0	0	Placebo + bevacizumab

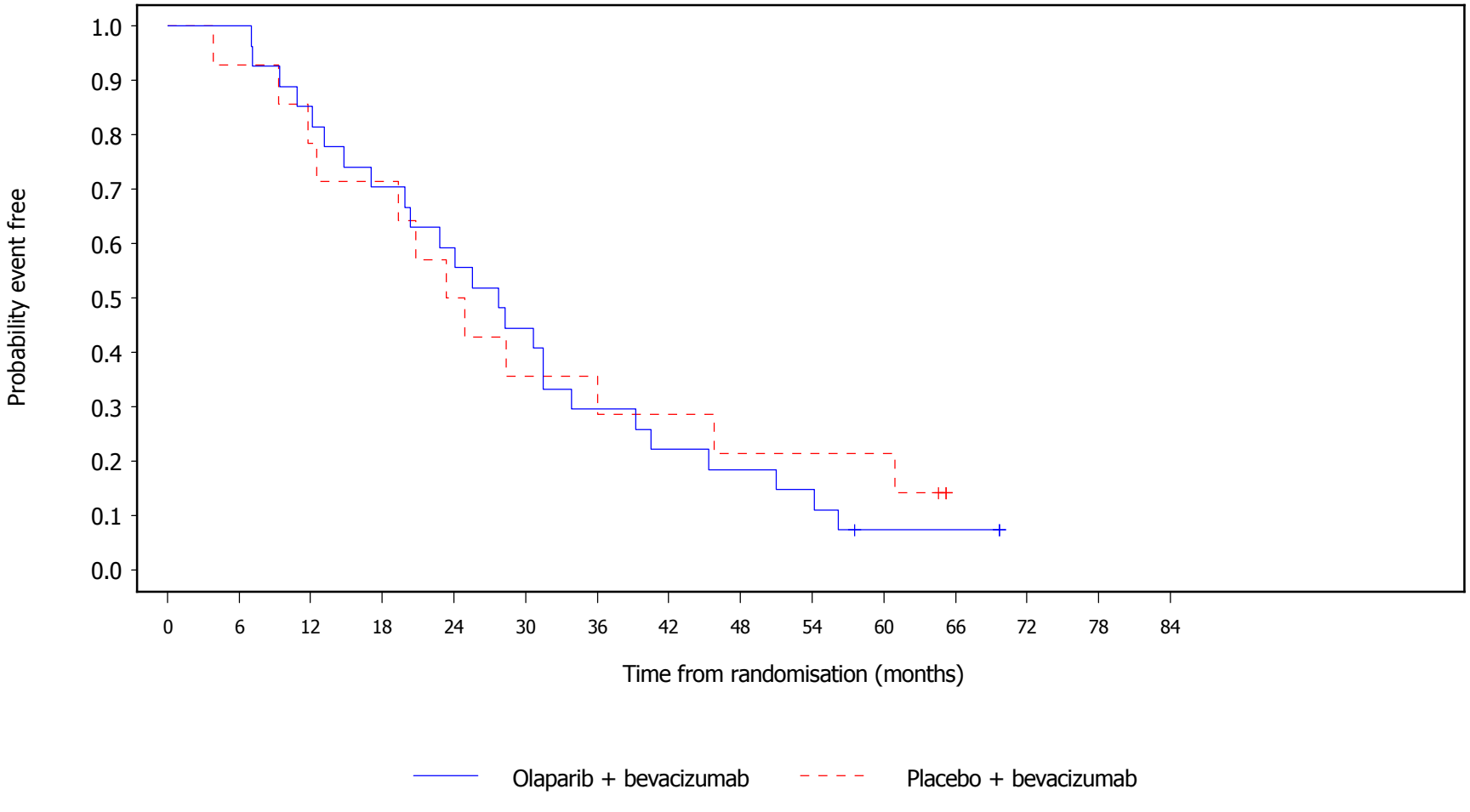
Figure 1.1.4.41 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death for Baseline CA-125 value = <=ULN
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

228	226	220	208	192	177	164	155	147	139	99	55	14	0	0	Olaparib + bevacizumab
118	114	107	101	87	69	59	54	47	40	25	14	2	0	0	Placebo + bevacizumab

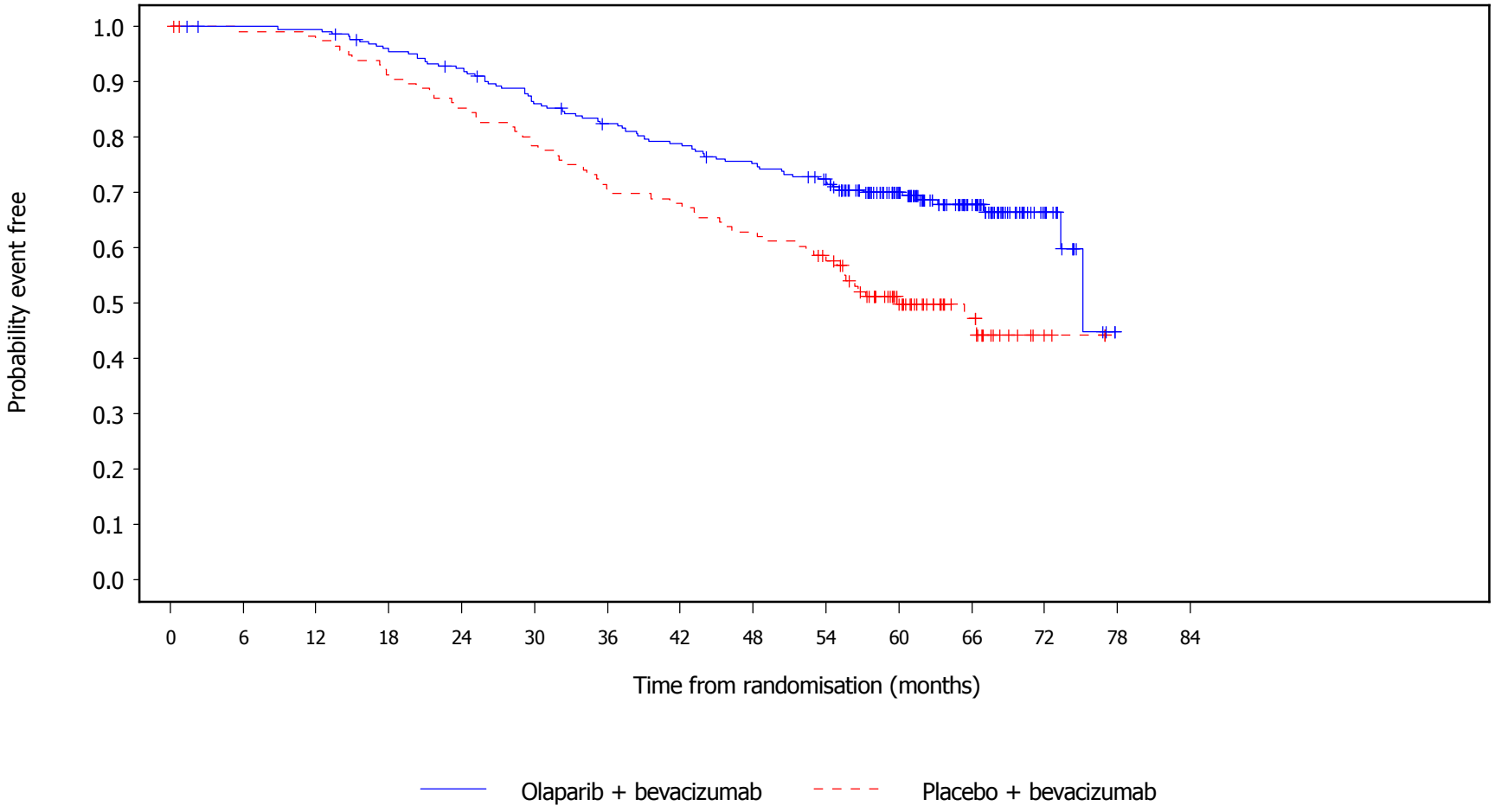
Figure 1.1.4.42 PAOLA1: Kaplan-Meier plot of Time to Second Subsequent Cancer Therapy or Death for Baseline CA-125 value = >ULN
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

27	27	23	19	16	12	8	6	5	4	1	1	0	0	0	Olaparib + bevacizumab
14	13	11	10	7	5	5	4	3	3	3	0	0	0	0	Placebo + bevacizumab

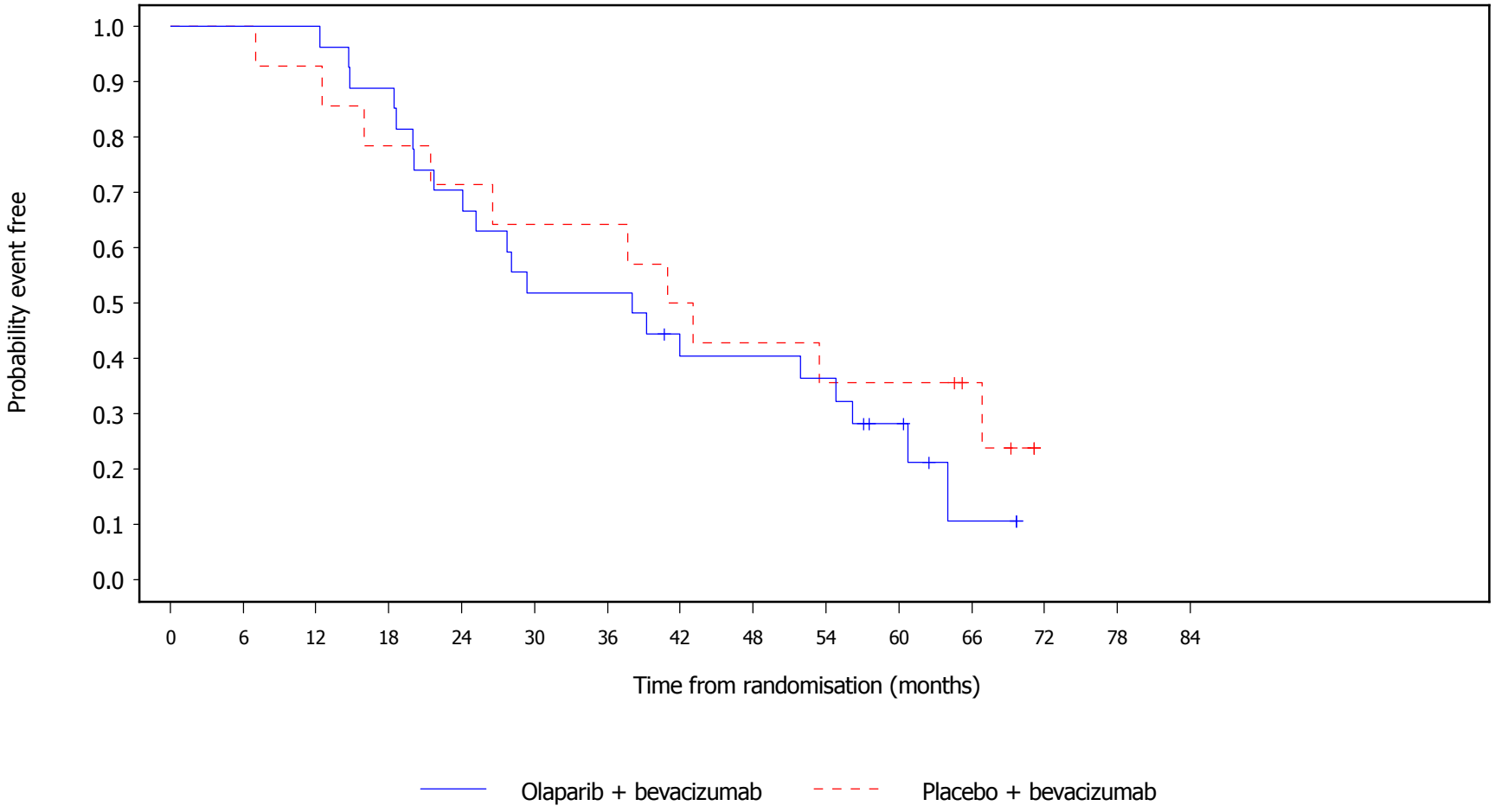
Figure 1.1.4.43 PAOLA1: Kaplan-Meier plot of Overall Survival for Baseline CA-125 value = <=ULN
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

228	226	225	214	206	191	181	173	164	155	111	61	17	0	0	Olaparib + bevacizumab
118	115	113	106	99	91	82	79	73	65	39	18	2	0	0	Placebo + bevacizumab

Figure 1.1.4.44 PAOLA1: Kaplan-Meier plot of Overall Survival for Baseline CA-125 value = >ULN
Full Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

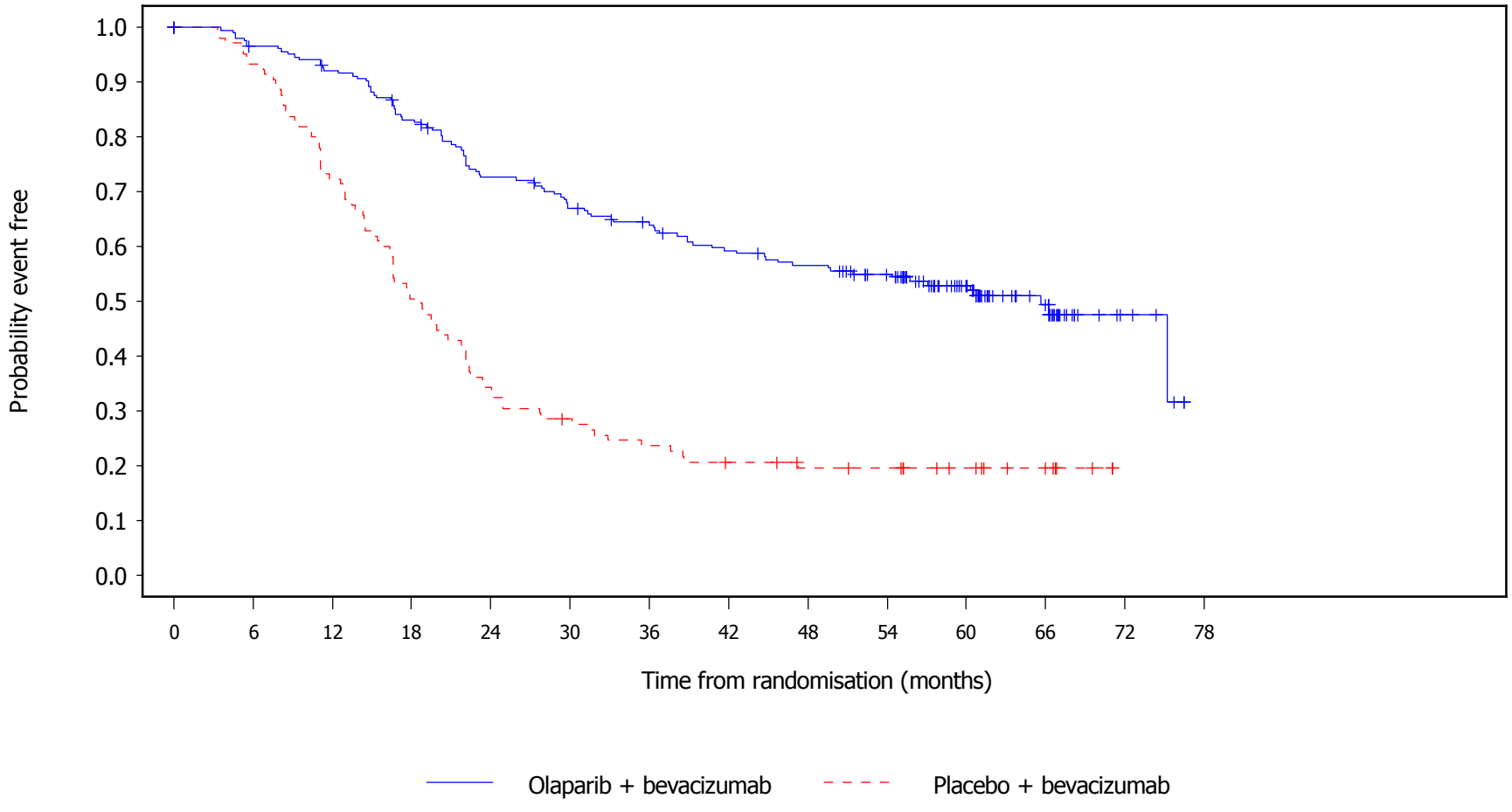
27	27	27	24	19	14	14	10	10	9	5	1	0	0	0	Olaparib + bevacizumab
14	14	13	11	10	9	9	7	6	5	5	3	0	0	0	Placebo + bevacizumab

Table 1.2.1.1 PAOLA1: Summary of time to recurrence or death free survival
NED and CR only, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=206)			Placebo + bevacizumab (N=106)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
Time to recurrence or death	206	97 (47.1)	65.7 (45.7, NE)	106	84 (79.2)	18.7 (15.8,22.1)	0.36	0.27, 0.49	<0.0001*

Only patients with NED and complete response (Stratification groups 1, 2 and 3).
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05.

Figure 1.2.2.1 PAOLA1: Kaplan-Meier plot of recurrence or death free survival
NED and CR only, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

206	196	186	167	144	132	124	113	107	95	57	29	5	0	Olaparib + bevacizumab
106	98	76	53	36	29	24	20	17	16	10	6	0	0	Placebo + bevacizumab

Only patients with NED and complete response (Stratification groups 1, 2 and 3).

Table 1.2.3.1 PAOLA1: Summary of recurrence or death free rate (odds ratio, relative risk and risk difference) - NED and CR only
Full Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=206)		Placebo + bevacizumab (N=106)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events	n	Number (%) of patients with events	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
Rate of recurrence or death [a][d][g]	206	97(47.1)	106	84(79.2)	0.23(0.13, 0.40)	<0.0001 *	0.59(0.50, 0.71)	<0.0001 *	-0.32(-0.42, -0.21)	<0.0001 *

Only patients with NED and complete response (Stratification groups 1, 2 and 3 based on IVRS).
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [b] as [a] but with Firth method. [c] OR NC via [a] or [b].
[d] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [e] RR, 95% CI, p-value via modified poisson regression. [f] RR NC via [d] or [e]. [g] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [h] RD NC via [g].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.

Table 3.1 PAOLA1: Summary of observation period (months) for adverse events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

		Olaparib + bevacizumab (N=255)	Placebo + bevacizumab (N=131)
All AESI endpoints	n	255	131
	Median	58.74	55.23
	Min	1.2	0.7
	Max	77.8	76.9

Observation period for AESI is defined as the time from first dose to the earliest date of the study completion, consent withdrawal, lost to follow-up, death or data cut-off date.

Table 3.2.1 PAOLA1: Summary of analysis of time to first occurrence of adverse events of special interest
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AESI: Anaemia	255	102 (40.0)	NE (NE, NE)	131	12 (9.2)	NE (NE, NE)	5.62	3.21, 10.80	<0.0001*
AESI: Neutropenia	255	53 (20.8)	NE (NE, NE)	131	22 (16.8)	NE (NE, NE)	1.28	0.79, 2.16	0.3420
AESI: Thrombocytopenia	255	18 (7.1)	NE (NE, NE)	131	7 (5.3)	NE (NE, NE)	1.29	0.56, 3.36	0.5650
AESI: Nausea	255	144 (56.5)	2.9 (0.8,16.0)	131	34 (26.0)	NE (NE, NE)	2.99	2.07, 4.44	<0.0001*
AESI: Vomiting	255	55 (21.6)	NE (NE, NE)	131	18 (13.7)	NE (NE, NE)	1.60	0.96, 2.81	0.0820
AESI: Fatigue and Asthenia	255	142 (55.7)	11.0 (4.1,30.1)	131	47 (35.9)	NE (NE, NE)	1.89	1.36, 2.66	0.0002*
AESI: Hypertension	255	127 (49.8)	30.5 (9.7, NE)	131	78 (59.5)	5.5 (3.4,11.3)	0.74	0.56, 0.99	0.0424*
AESI: Proteinuria	255	20 (7.8)	NE (NE, NE)	131	19 (14.5)	NE (NE, NE)	0.48	0.25, 0.91	0.0202*
AESI: GI perforations, abscesses and fistulae	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.2141
AESI: Wound healing complications	255	2 (0.8)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	0.31	0.04, 1.89	0.1790
AESI: Haemorrhage	255	30 (11.8)	NE (NE, NE)	131	12 (9.2)	NE (NE, NE)	1.21	0.63, 2.47	0.5786
AESI: Arterial thromboembolic events	255	3 (1.2)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.35	0.07, 1.61	0.1564

The time to event endpoint is the time to first AE of special interest or the time to censoring if the AE of special interest has not occurred prior to the date of DCO. Includes AEs with an onset date on or after the date of first dose.
MedDRA version 25.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.1 PAOLA1: Summary of analysis of time to first occurrence of adverse events of special interest
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AESI: Venous thromboembolic events	255	10 (3.9)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	5.16	0.98, 94.87	0.0815
AESI: Posterior Reversible Encephalopathy Syndrome (PRES)	255	0	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	0.1830
AESI: Congestive heart failure	255	0	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
AESI: Non-GI fistula or abscess	255	0	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	NC	NC	0.0468*
AESI: MDS/AML	255	4 (1.6)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	0.67	0.14, 3.52	0.6109
AESI: Myelodysplastic syndrome and Acute myeloid leukaemia	255	4 (1.6)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.51	0.12, 2.19	0.3360
AESI: Secondary cancer	255	15 (5.9)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.43	0.51, 5.06	0.5272
AESI: Pneumonitis	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.1935

The time to event endpoint is the time to first AE of special interest or the time to censoring if the AE of special interest has not occurred prior to the date of DCO. Includes AEs with an onset date on or after the date of first dose.
MedDRA version 25.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.2 PAOLA1: Summary of analysis of time to first occurrence of serious adverse events of special interest
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
Serious AESI: Anaemia	255	13 (5.1)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	6.96	1.38,126.60	0.0298*
Serious AESI: Neutropenia	255	2 (0.8)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.2766
Serious AESI: Thrombocytopenia	255	4 (1.6)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.1218
Serious AESI: Vomiting	255	0	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Serious AESI: Hypertension	255	22 (8.6)	NE (NE, NE)	131	16 (12.2)	NE (NE, NE)	0.64	0.33, 1.24	0.1667
Serious AESI: Proteinuria	255	1 (0.4)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.5101
Serious AESI: GI perforations, abscesses and fistulae	255	2 (0.8)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.2971
Serious AESI: Wound healing complications	255	0	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	0.1373
Serious AESI: Haemorrhage	255	2 (0.8)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	1.09	0.10, 23.54	0.9416
Serious AESI: Arterial thromboembolic events	255	1 (0.4)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	0.18	0.01, 1.39	0.0916
Serious AESI: Venous thromboembolic events	255	2 (0.8)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.3092

The time to event endpoint is the time to first AE of special interest or the time to censoring if the AE of special interest has not occurred prior to the date of DCO. Includes AEs with an onset date on or after the date of first dose.
MedDRA version 25.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s3/tlf/prod/program/ttemainae.sas ettemainaeab 11AUG2022:11:28 kpzx329

Table 3.2.2 PAOLA1: Summary of analysis of time to first occurrence of serious adverse events of special interest
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
Serious AESI: Non-GI fistula or abscess	255	0	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Serious AESI: MDS/AML	255	3 (1.2)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	0.46	0.08, 2.53	0.3326
Serious AESI: Myelodysplastic syndrome and Acute myeloid leukaemia	255	3 (1.2)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.35	0.07, 1.62	0.1561
Serious AESI: Secondary cancer	255	15 (5.9)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.43	0.51, 5.06	0.5272
Serious AESI: Pneumonitis	255	2 (0.8)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.2504

The time to event endpoint is the time to first AE of special interest or the time to censoring if the AE of special interest has not occurred prior to the date of DCO. Includes AEs with an onset date on or after the date of first dose.
MedDRA version 25.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.3 PAOLA1: Summary of analysis of time to first occurrence of severe adverse events of special interest with max. CTCAE grade >=3 including grade 5
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AESI G>=3: Anaemia	255	47 (18.4)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	27.87	6.09,493.95	<0.0001*
AESI G>=3: Neutropenia	255	21 (8.2)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	2.86	1.08, 9.85	0.0457*
AESI G>=3: Thrombocytopenia	255	5 (2.0)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.59	0.15, 2.43	0.4338
AESI G>=3: Nausea	255	9 (3.5)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.07	0.35, 4.00	0.9065
AESI G>=3: Vomiting	255	4 (1.6)	NE (NE, NE)	131	6 (4.6)	NE (NE, NE)	0.31	0.08, 1.09	0.0553
AESI G>=3: Fatigue and Asthenia	255	17 (6.7)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	3.06	1.02, 13.17	0.0611
AESI G>=3: Hypertension	255	50 (19.6)	NE (NE, NE)	131	42 (32.1)	NE (NE, NE)	0.52	0.34, 0.79	0.0016*
AESI G>=3: Proteinuria	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.2630
AESI G>=3: GI perforations, abscesses and fistulae	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.2141
AESI G>=3: Wound healing complications	255	0	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
AESI G>=3: Haemorrhage	255	2 (0.8)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	1.09	0.10, 23.54	0.9416

The time to event endpoint is the time to first AE of special interest or the time to censoring if the AE of special interest has not occurred prior to the date of DCO. Includes AEs with an onset date on or after the date of first dose.
MedDRA version 25.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.3 PAOLA1: Summary of analysis of time to first occurrence of severe adverse events of special interest with max. CTCAE grade >=3 including grade 5
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AESI G>=3: Arterial thromboembolic events	255	1 (0.4)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.12	0.01, 0.84	0.0271*
AESI G>=3: Venous thromboembolic events	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.1894
AESI G>=3: Congestive heart failure	255	0	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
AESI G>=3: Non-GI fistula or abscess	255	0	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	0.2367
AESI G>=3: MDS/AML	255	4 (1.6)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	0.67	0.14, 3.52	0.6109
AESI G>=3: Myelodysplastic syndrome and Acute myeloid leukaemia	255	4 (1.6)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	0.51	0.12, 2.19	0.3360
AESI G>=3: Secondary cancer	255	11 (4.3)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	1.47	0.45, 6.54	0.5572

The time to event endpoint is the time to first AE of special interest or the time to censoring if the AE of special interest has not occurred prior to the date of DCO. Includes AEs with an onset date on or after the date of first dose.
MedDRA version 25.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.4 PAOLA1: Summary of analysis of time to first occurrence of non-severe adverse events of special interest with max. CTCAE grade 1 or 2
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
	n	Number (%) of patients with events	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AESI G1-2: Anaemia	255	86 (33.7)	131	11 (8.4)	NE (NE, NE)	4.90	2.73, 9.76	<0.0001*
AESI G1-2: Neutropenia	255	39 (15.3)	131	19 (14.5)	NE (NE, NE)	1.05	0.61, 1.87	0.8637
AESI G1-2: Thrombocytopenia	255	14 (5.5)	131	4 (3.1)	NE (NE, NE)	1.80	0.64, 6.40	0.2958
AESI G1-2: Nausea	255	142 (55.7)	131	30 (22.9)	3.4 (1.1, NE)	3.29	2.24, 4.99	<0.0001*
AESI G1-2: Vomiting	255	52 (20.4)	131	14 (10.7)	NE (NE, NE)	1.98	1.13, 3.73	0.0213*
AESI G1-2: Fatigue and Asthenia	255	133 (52.2)	131	44 (33.6)	13.4 (6.0, NE)	1.82	1.30, 2.59	0.0006*
AESI G1-2: Hypertension	255	98 (38.4)	131	59 (45.0)	NE (NE, NE)	0.87	0.63, 1.20	0.3807
AESI G1-2: Proteinuria	255	18 (7.1)	131	19 (14.5)	NE (NE, NE)	0.43	0.22, 0.83	0.0092*
AESI G1-2: Wound healing complications	255	2 (0.8)	131	3 (2.3)	NE (NE, NE)	0.31	0.04, 1.89	0.1790
AESI G1-2: Haemorrhage	255	28 (11.0)	131	11 (8.4)	NE (NE, NE)	1.27	0.65, 2.67	0.5073
AESI G1-2: Arterial thromboembolic events	255	2 (0.8)	131	0	NE (NE, NE)	NC	NC	0.3737
AESI G1-2: Venous thromboembolic events	255	8 (3.1)	131	1 (0.8)	NE (NE, NE)	4.02	0.73, 74.64	0.1568

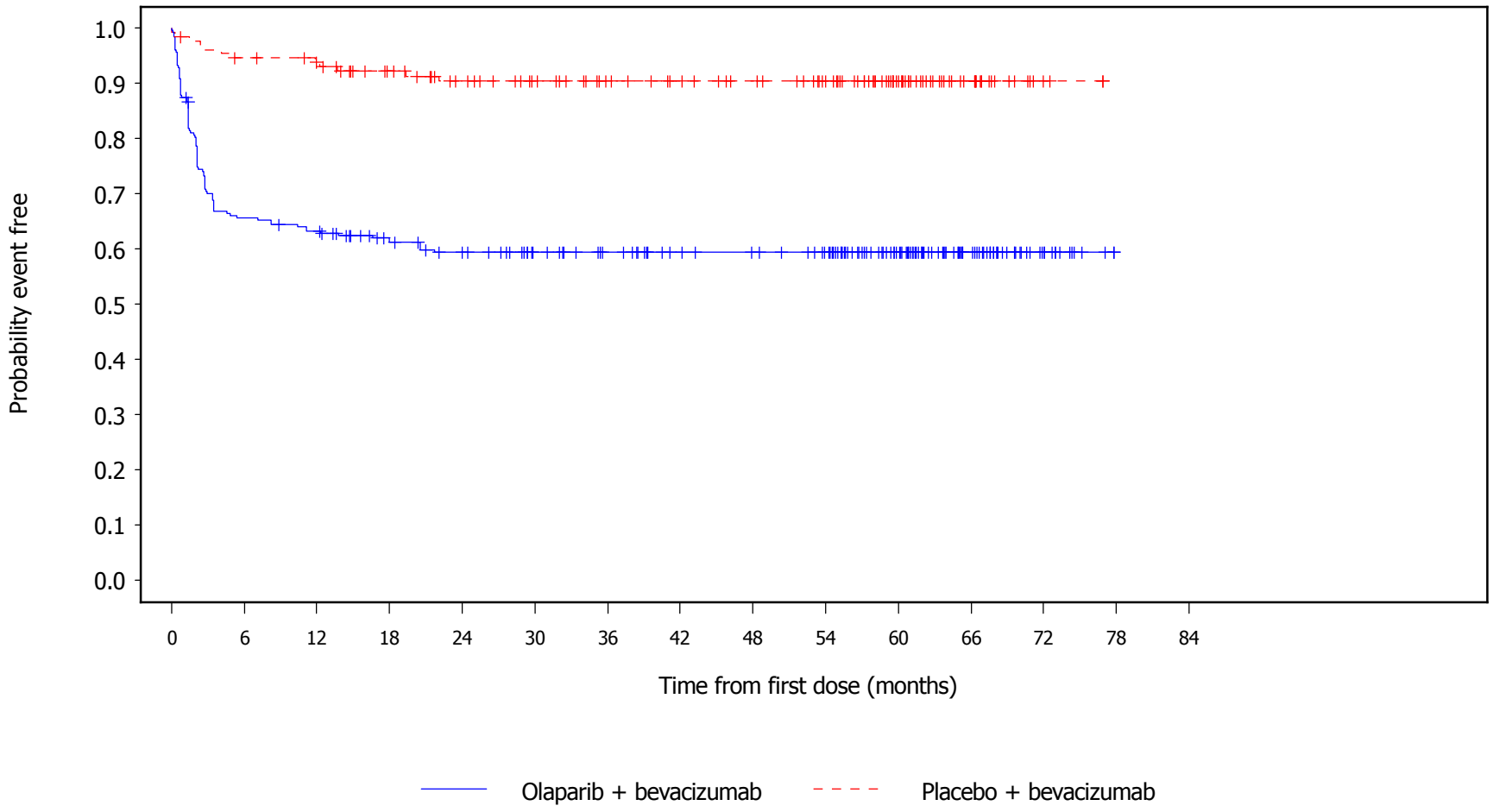
The time to event endpoint is the time to first AE of special interest or the time to censoring if the AE of special interest has not occurred prior to the date of DCO. Includes AEs with an onset date on or after the date of first dose.
MedDRA version 25.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

Table 3.2.4 PAOLA1: Summary of analysis of time to first occurrence of non-severe adverse events of special interest with max. CTCAE grade 1 or 2
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [c]
AESI G1-2: Posterior Reversible Encephalopathy Syndrome (PRES)	255	0	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	0.1830
AESI G1-2: Non-GI fistula or abscess	255	0	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	0.0973
AESI G1-2: Secondary cancer	255	3 (1.2)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	1.09	0.14, 22.17	0.9432
AESI G1-2: Pneumonitis	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	0.1935

The time to event endpoint is the time to first AE of special interest or the time to censoring if the AE of special interest has not occurred prior to the date of DCO. Includes AEs with an onset date on or after the date of first dose.
MedDRA version 25.0.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] Estimated from Cox proportional hazards model including treatment only. First line treatment outcome and tBRCA status included as stratification factors. Efron method for handling ties. 95% CI from profile likelihood estimation.
[c] Determined using log-rank test stratified by First line treatment outcome and tBRCA status. Breslow method for handling ties.
Hazard ratio <1 favours olaparib. * p<0.05. NC = not calculable.

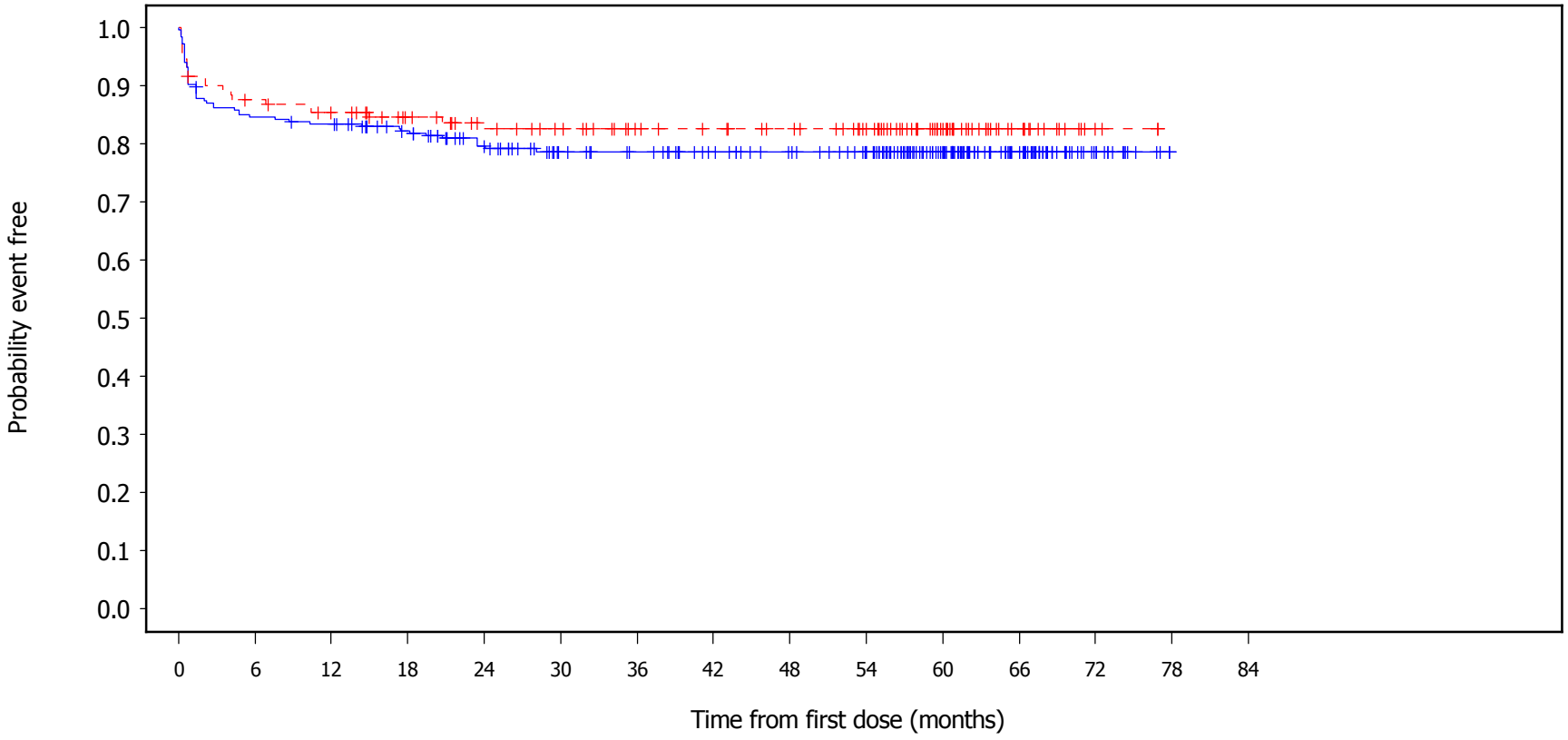
Figure 3.3.1 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	166	159	143	134	123	115	106	103	97	70	38	12	0	0	Olaparib + bevacizumab
131	122	118	107	97	89	80	75	70	61	40	19	2	0	0	Placebo + bevacizumab

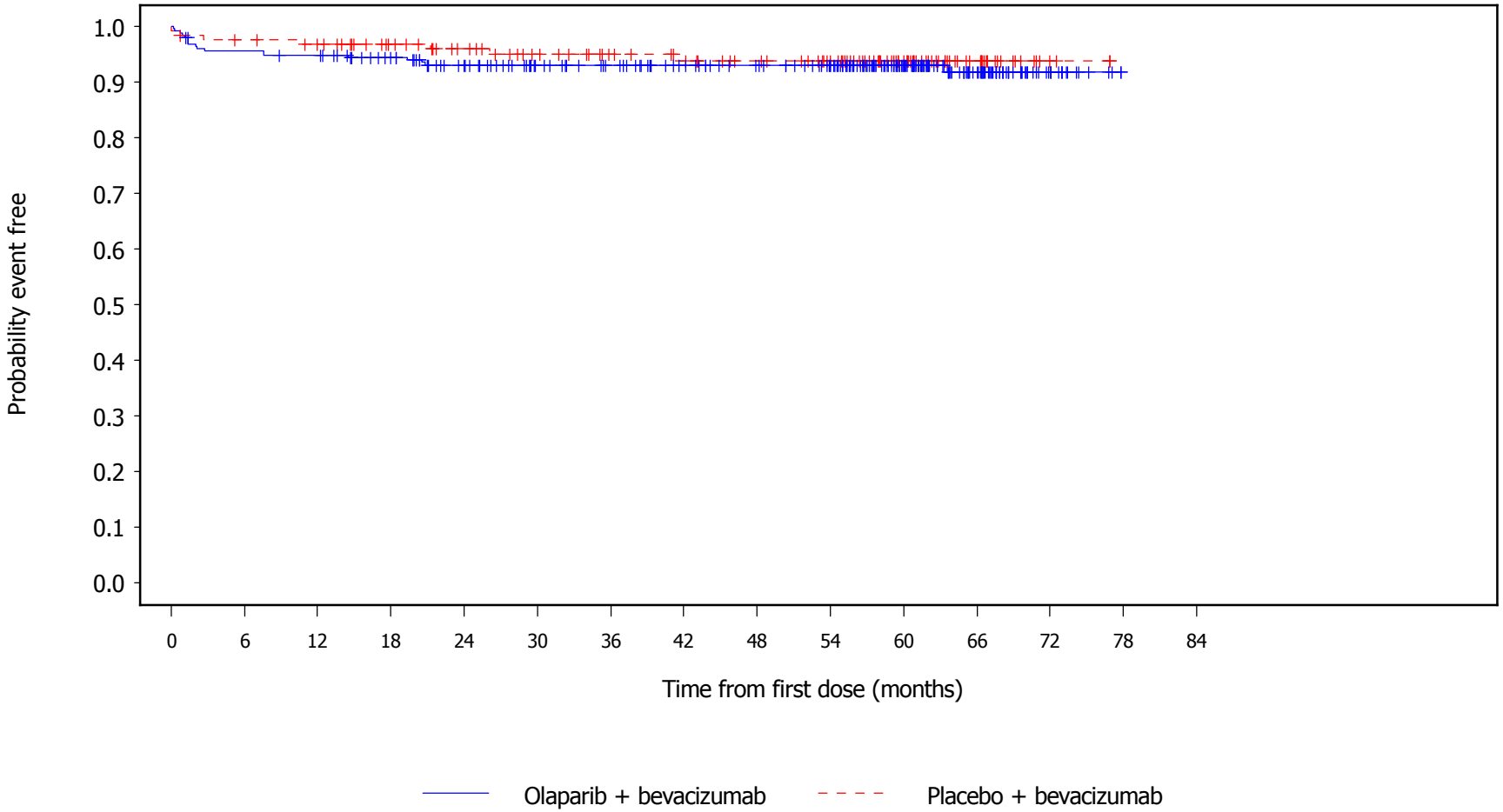
Figure 3.3.2 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	215	211	197	179	162	156	146	138	129	91	51	14	0	0	Olaparib + bevacizumab
131	113	107	97	88	83	74	71	67	58	37	16	2	0	0	Placebo + bevacizumab

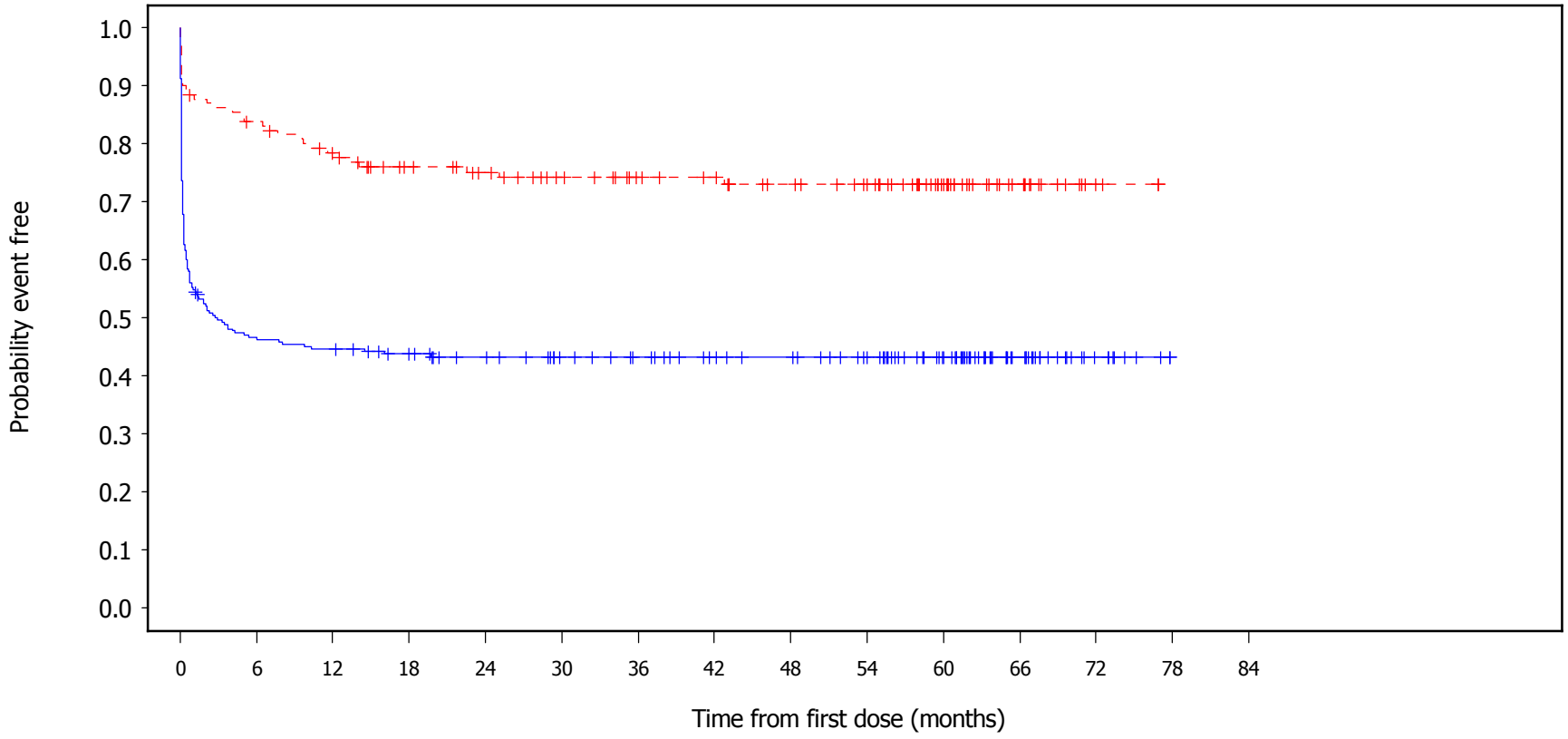
Figure 3.3.3 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	242	239	225	208	191	182	170	161	150	104	56	15	0	0	Olaparib + bevacizumab
131	126	122	112	103	94	86	81	75	66	44	21	2	0	0	Placebo + bevacizumab

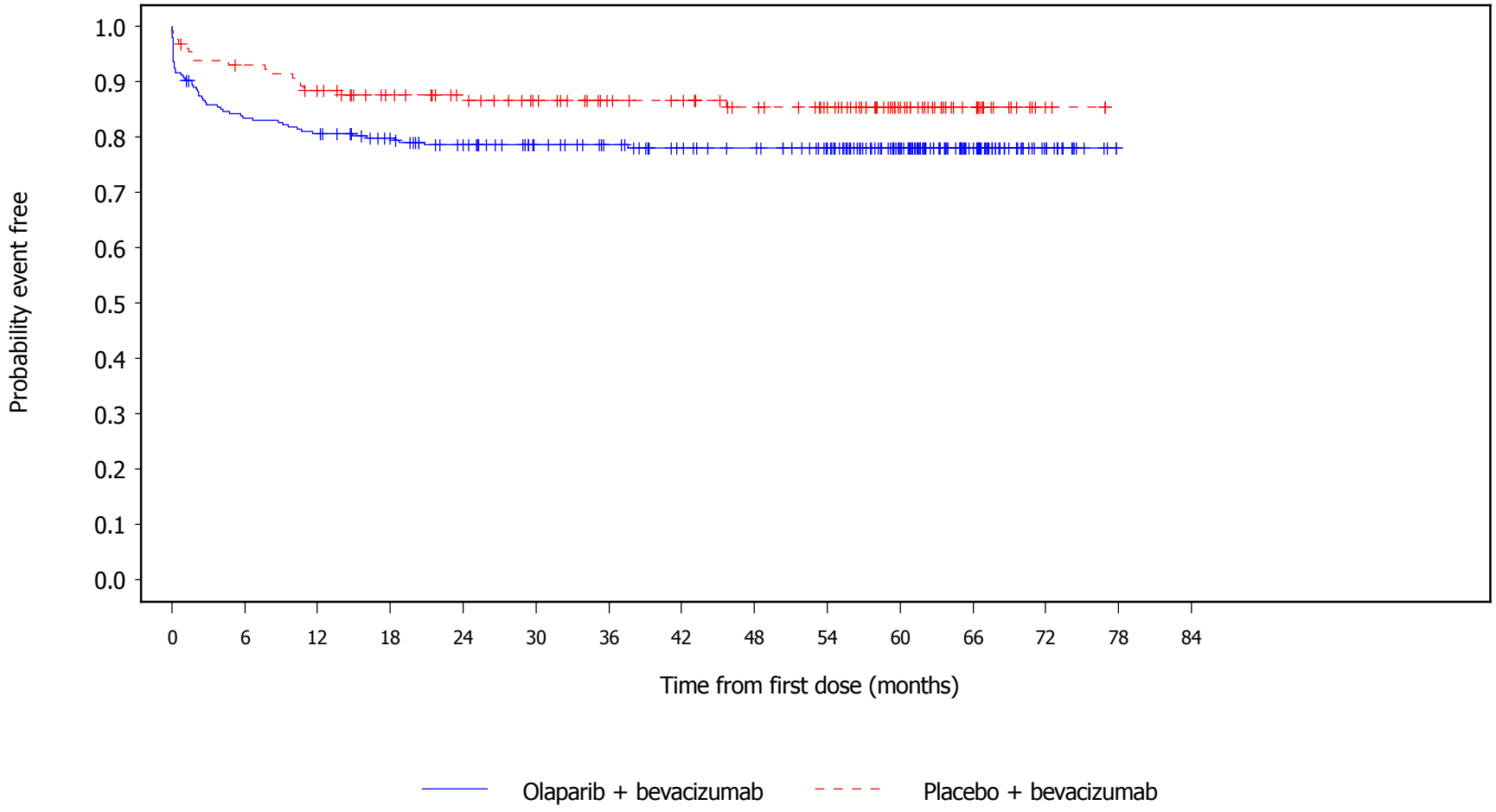
Figure 3.3.4 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	117	112	104	97	89	84	77	74	67	50	26	8	0	0	Olaparib + bevacizumab
131	108	98	87	81	73	66	63	56	50	33	16	2	0	0	Placebo + bevacizumab

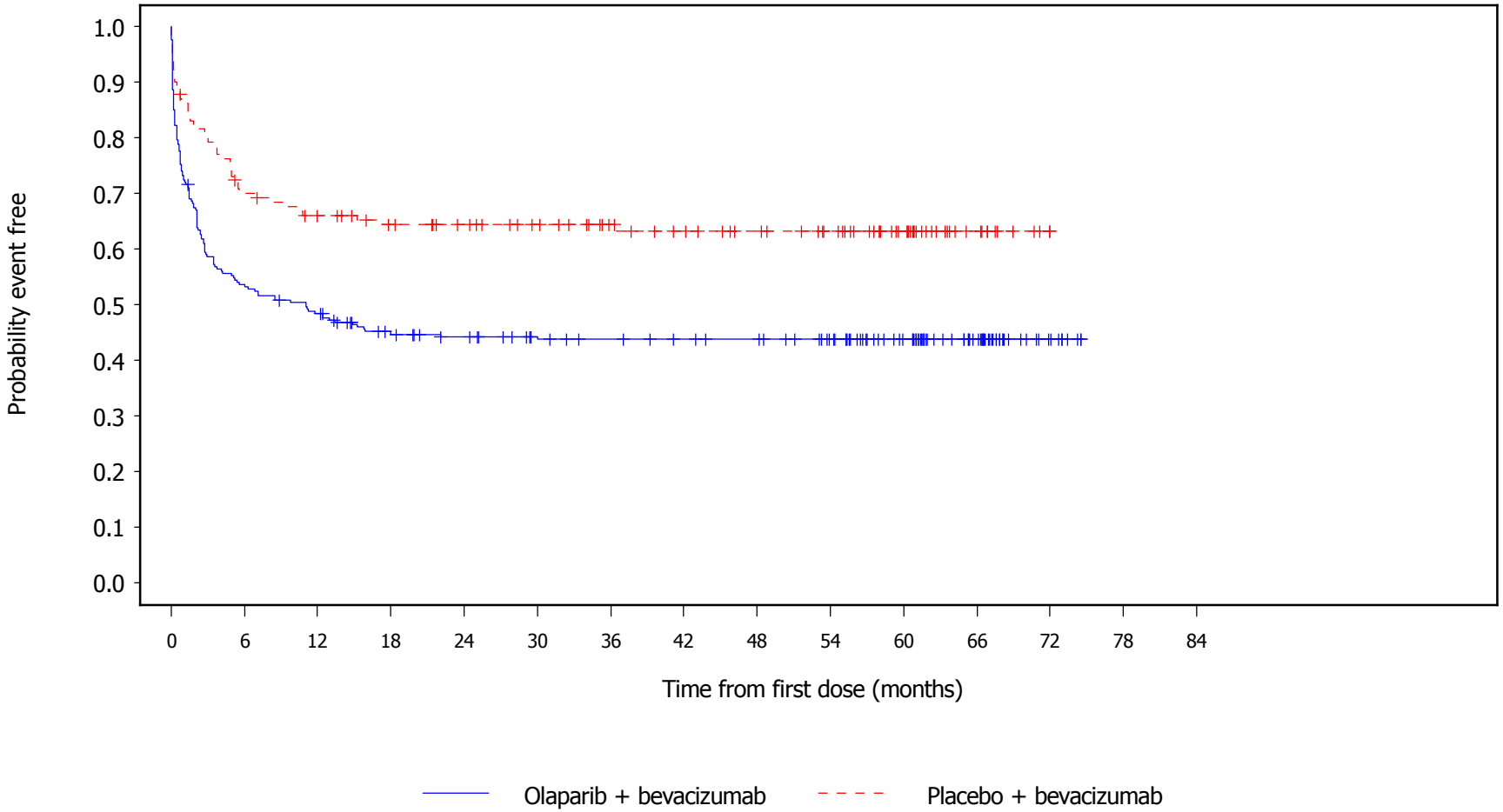
Figure 3.3.5 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	211	204	191	178	165	157	147	142	131	97	52	16	0	0	Olaparib + bevacizumab
131	120	112	102	94	87	78	75	67	59	38	20	2	0	0	Placebo + bevacizumab

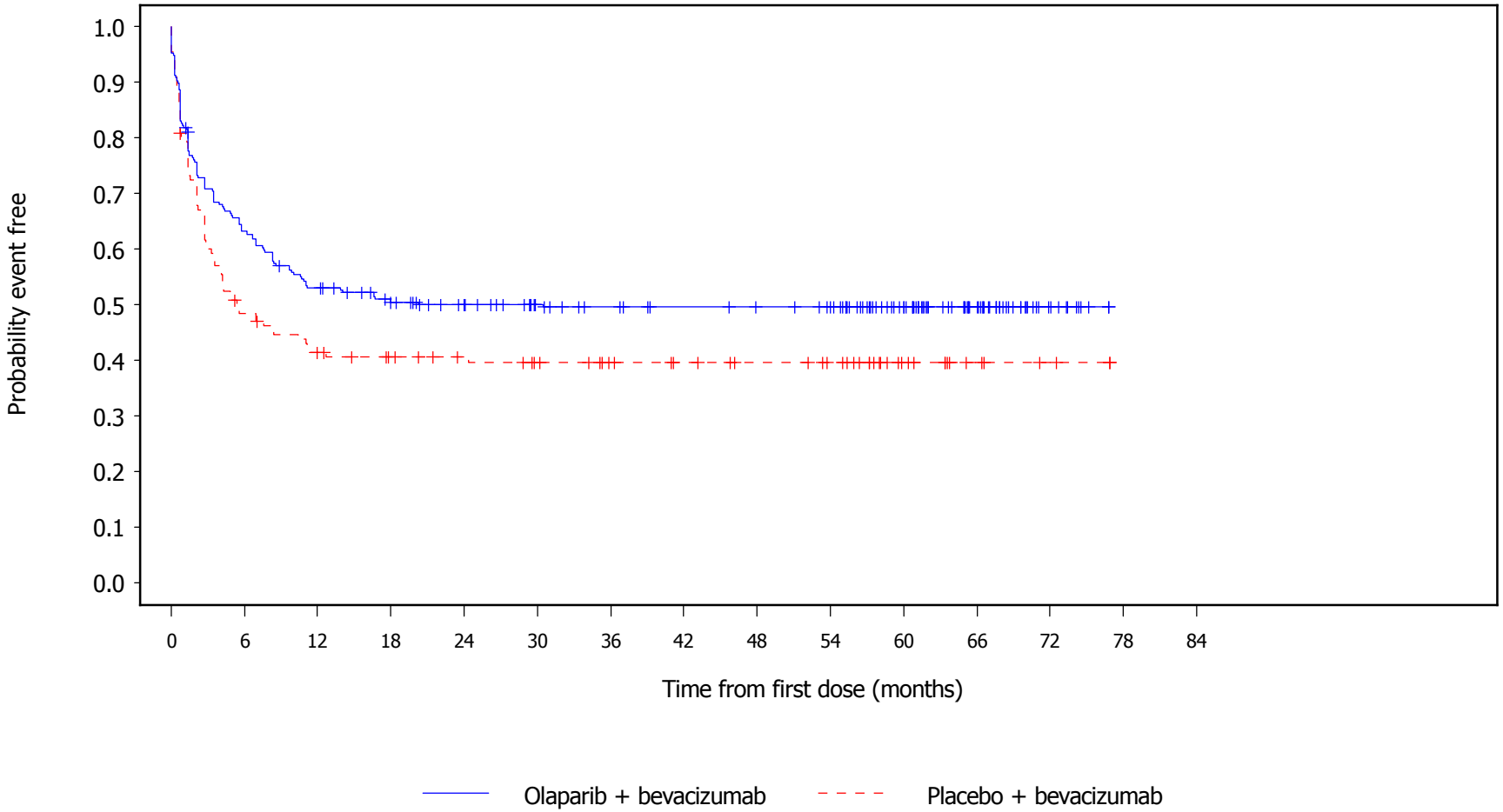
Figure 3.3.6 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	136	122	104	98	90	86	83	81	73	55	32	7	0	0	Olaparib + bevacizumab
131	90	82	75	70	64	56	51	46	40	27	10	0	0	0	Placebo + bevacizumab

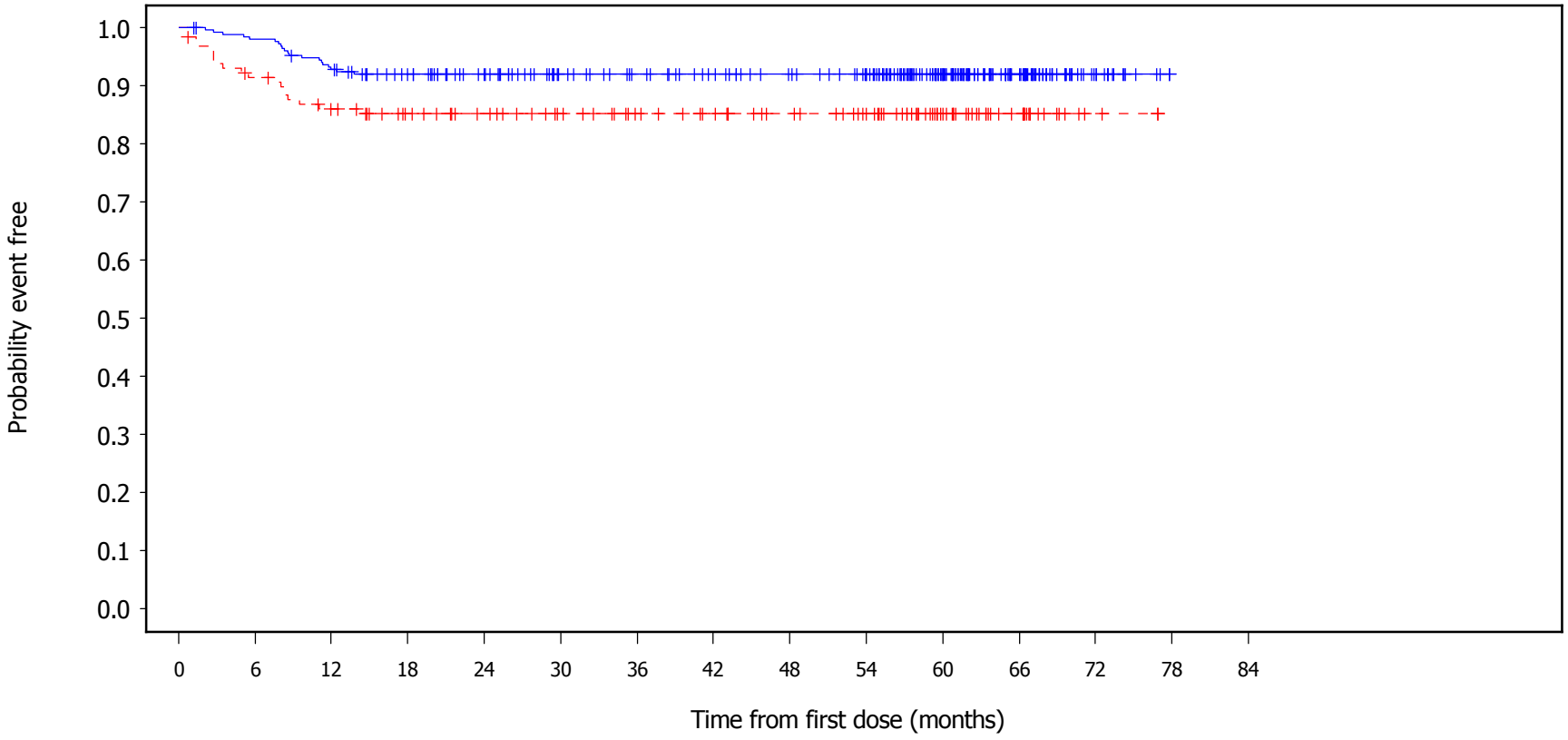
Figure 3.3.7 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	160	133	119	109	98	92	88	86	83	61	35	9	0	0	Olaparib + bevacizumab
131	62	51	46	42	38	33	30	27	24	12	5	2	0	0	Placebo + bevacizumab

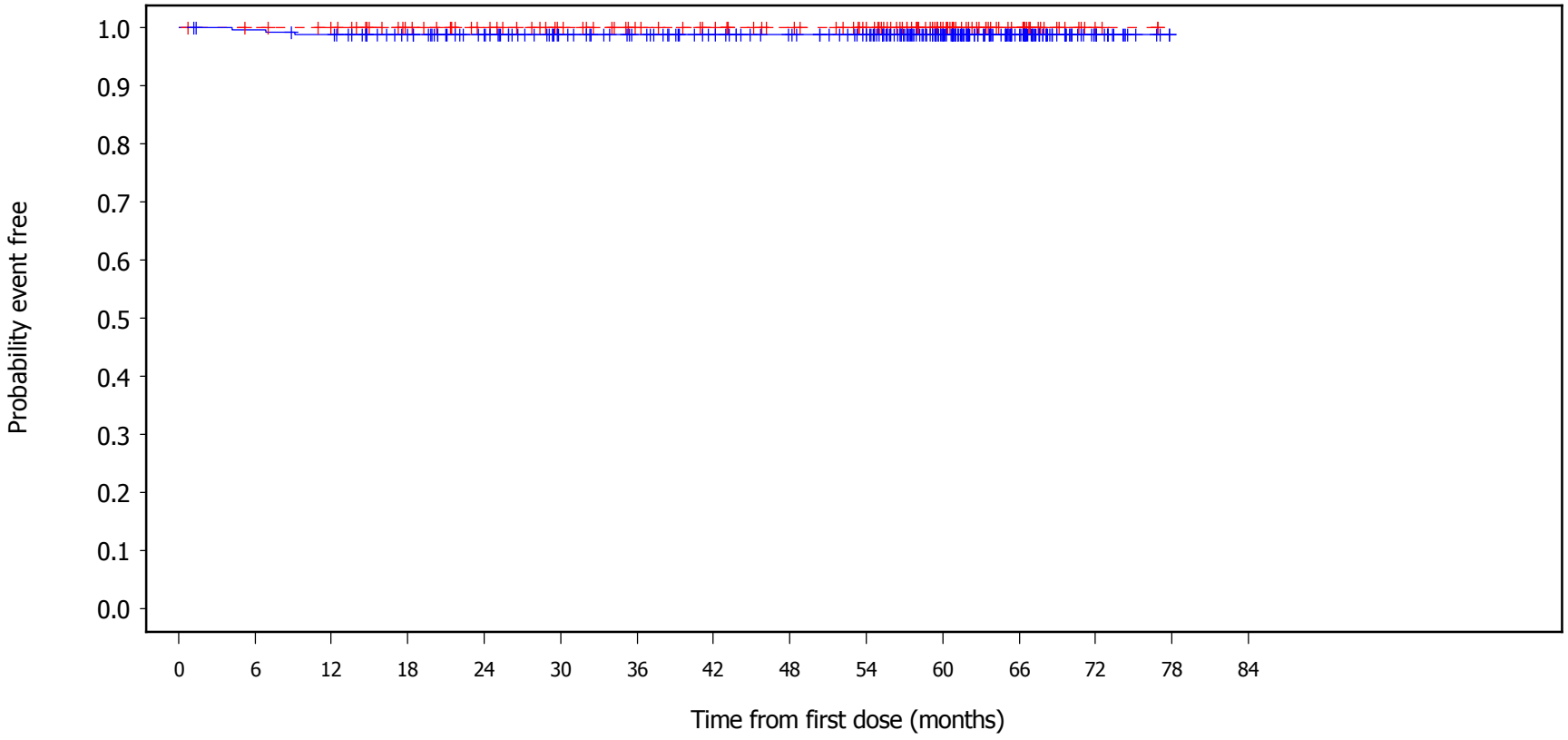
Figure 3.3.8 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	248	234	219	204	185	176	167	158	149	104	57	15	0	0	Olaparib + bevacizumab
131	118	108	98	91	83	75	70	63	55	35	18	2	0	0	Placebo + bevacizumab

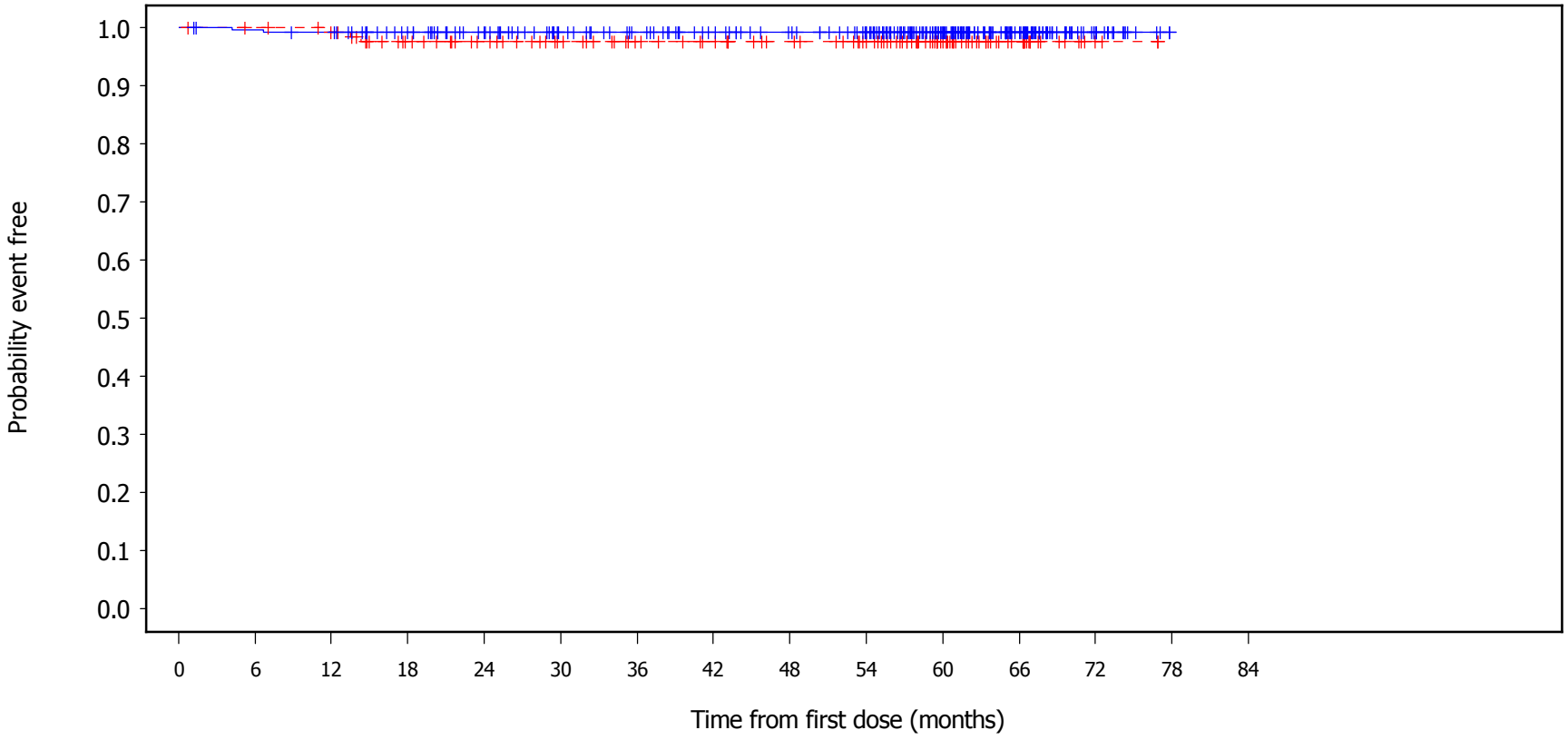
Figure 3.3.9 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	249	236	221	203	193	181	172	162	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

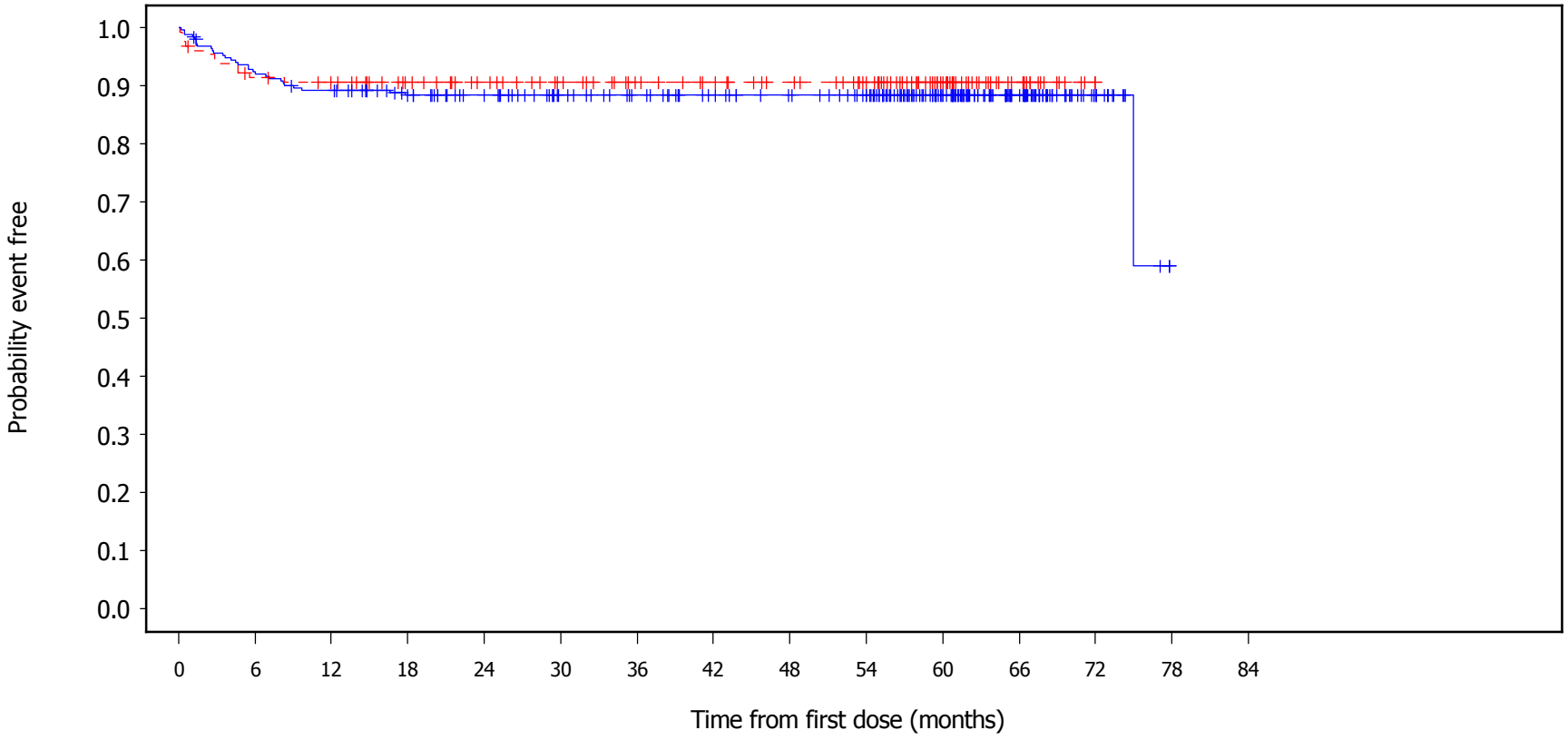
Figure 3.3.10 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	250	237	222	204	194	182	173	162	115	62	17	0	0	Olaparib + bevacizumab
131	129	125	113	105	96	87	82	75	66	42	19	2	0	0	Placebo + bevacizumab

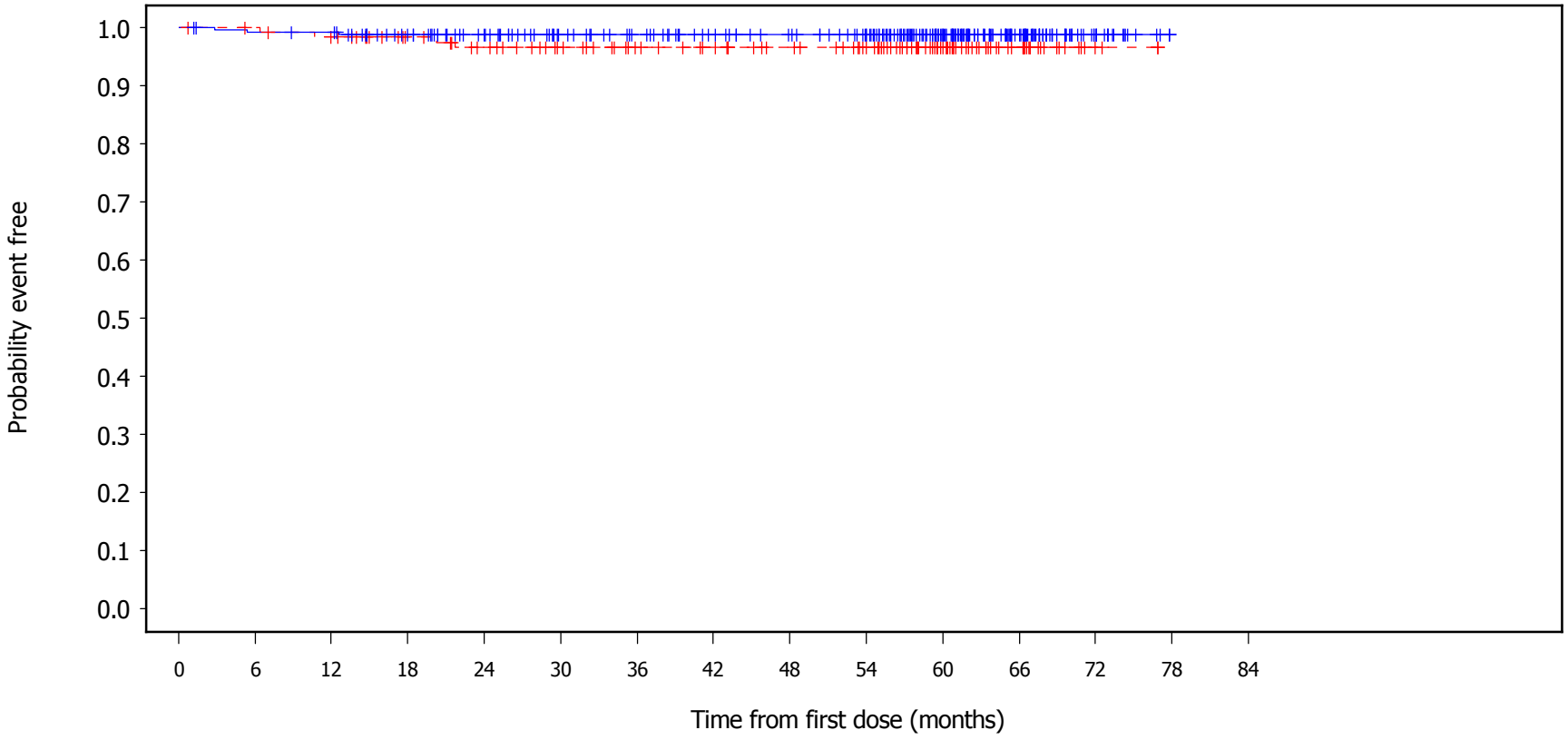
Figure 3.3.11 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	234	225	210	197	181	172	162	155	147	102	56	15	0	0	Olaparib + bevacizumab
131	118	114	104	96	88	79	74	68	59	37	15	0	0	0	Placebo + bevacizumab

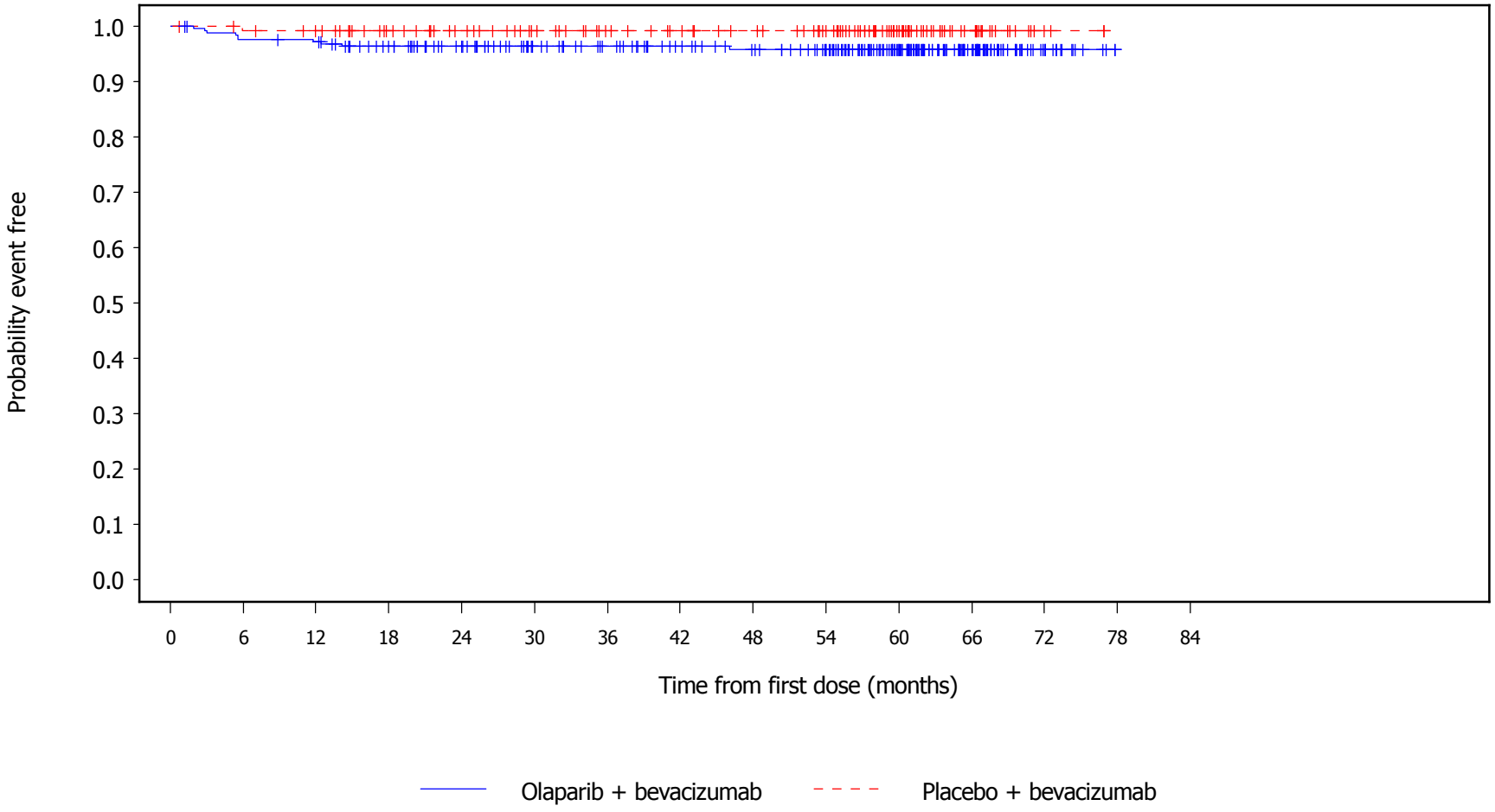
Figure 3.3.12 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	251	250	236	221	202	192	180	172	161	114	61	17	0	0	Olaparib + bevacizumab
131	129	125	115	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

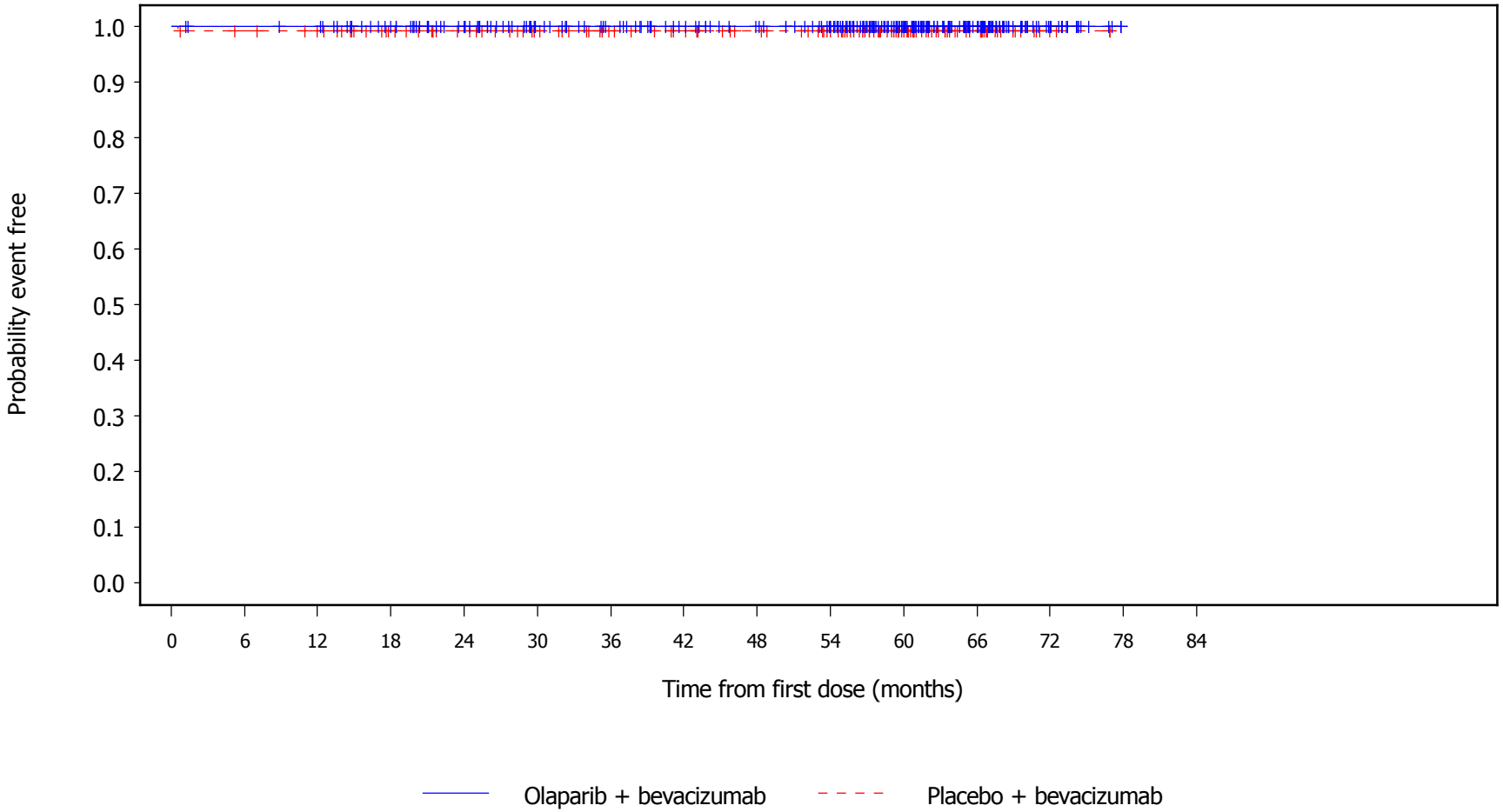
Figure 3.3.13 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	247	245	230	215	196	186	174	166	155	112	60	16	0	0	Olaparib + bevacizumab
131	128	125	115	107	98	89	84	78	69	44	21	2	0	0	Placebo + bevacizumab

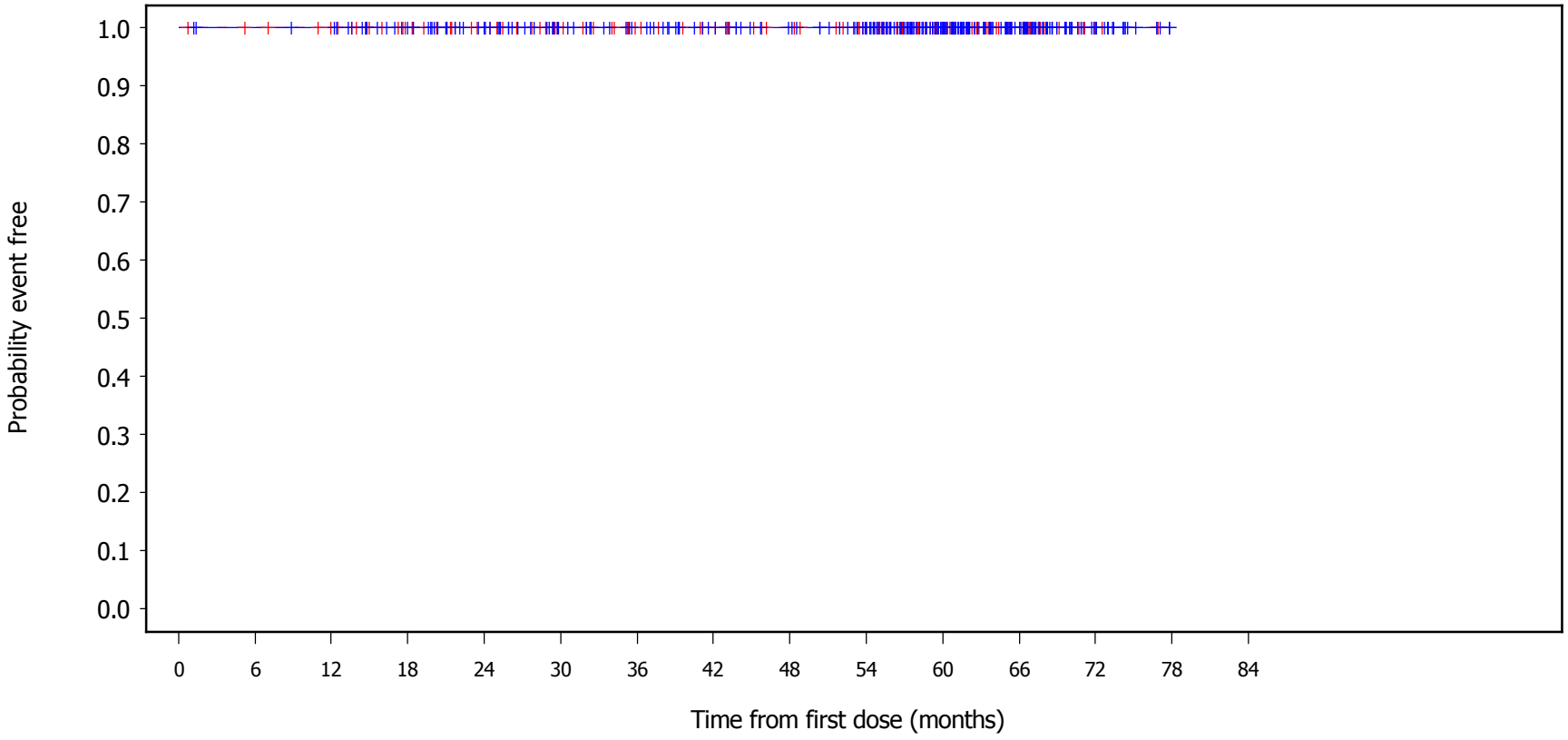
Figure 3.3.14 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Posterior Reversible Encephalopathy Syndrome (PRES)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	128	125	115	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

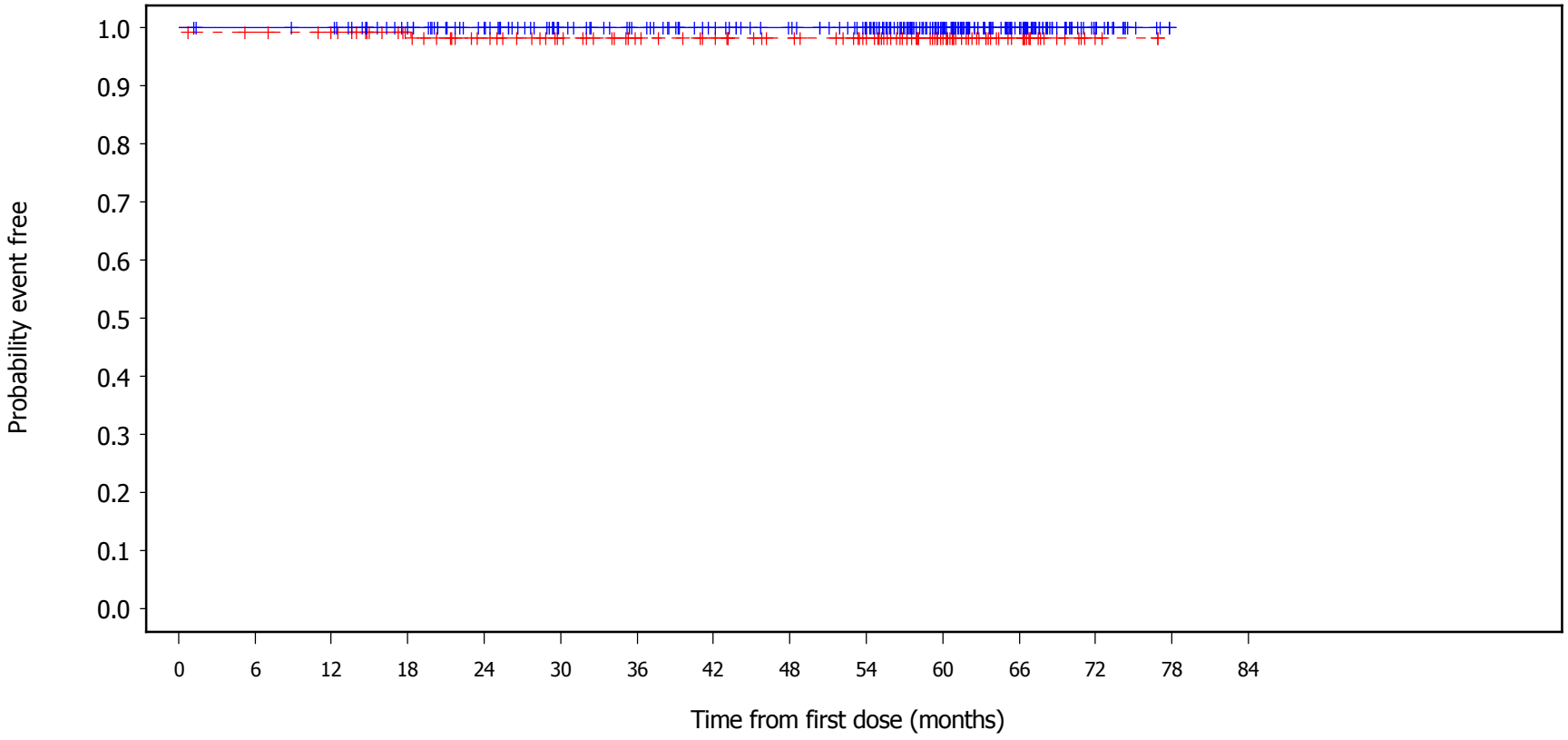
Figure 3.3.15 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Congestive heart failure
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

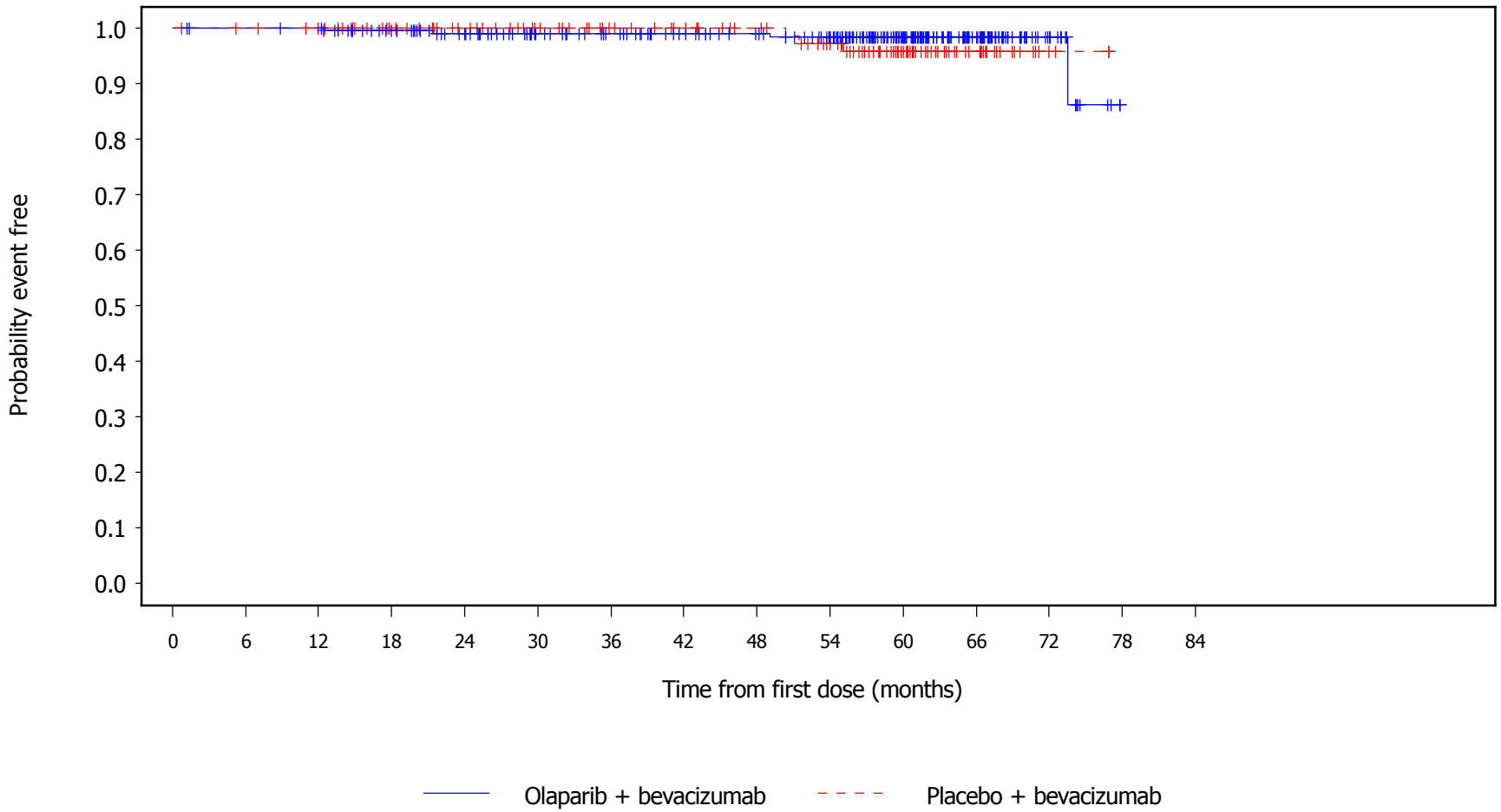
Figure 3.3.16 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	128	125	115	106	97	88	83	76	67	43	20	2	0	0	Placebo + bevacizumab

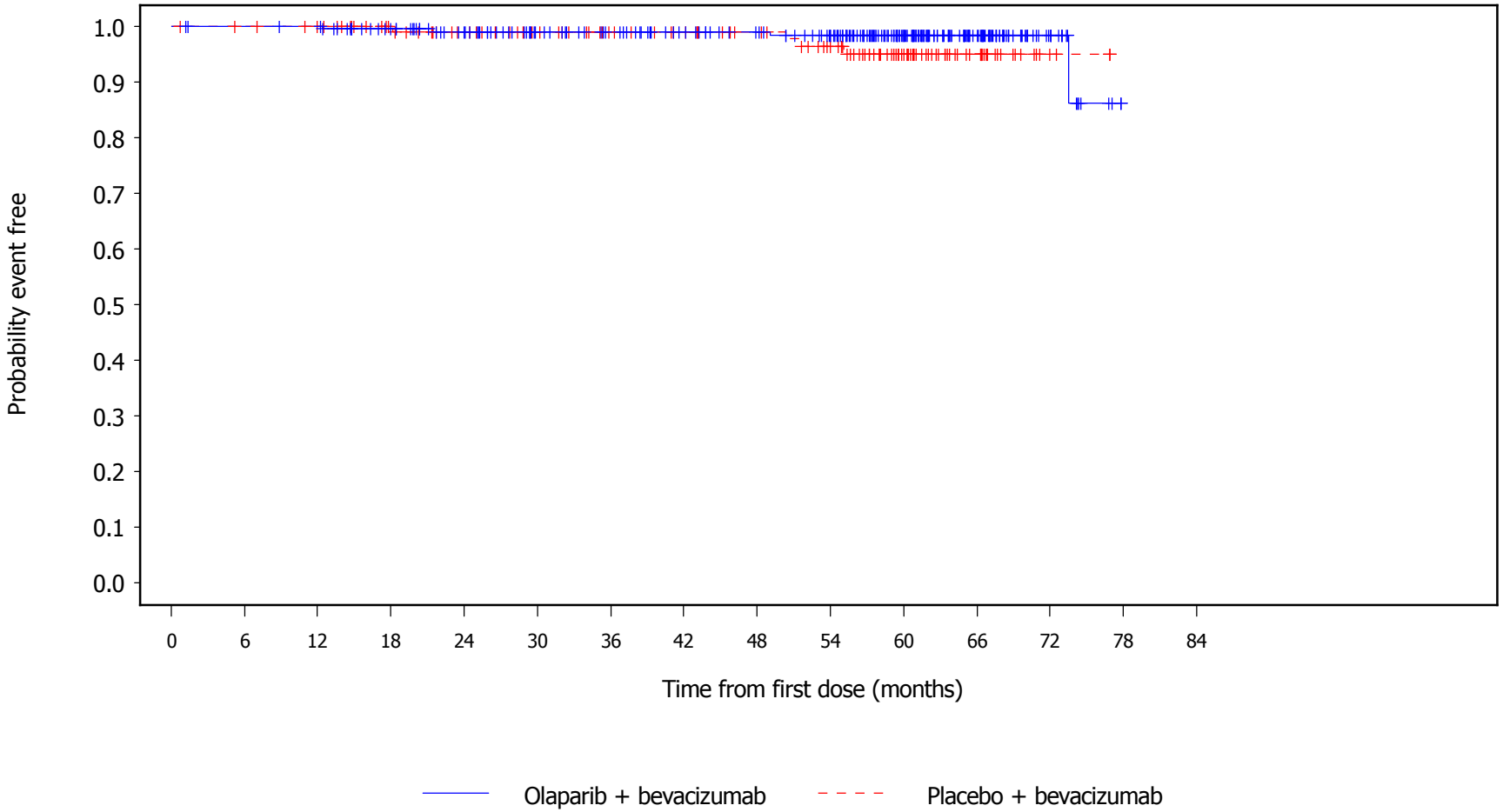
Figure 3.3.17 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	238	223	204	194	182	173	161	114	61	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	68	44	21	2	0	0	Placebo + bevacizumab

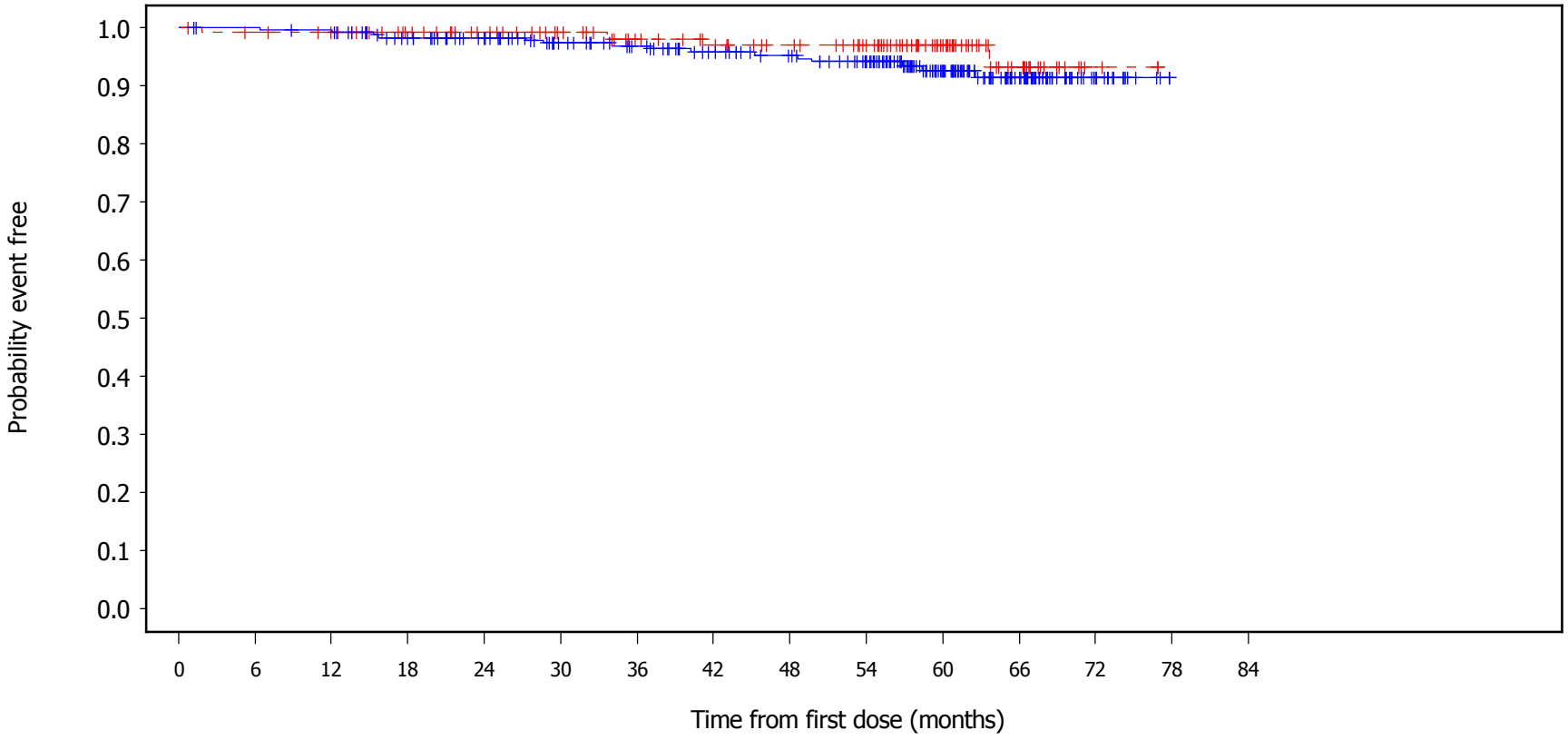
Figure 3.3.18 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	238	223	204	194	182	173	161	114	61	17	0	0	Olaparib + bevacizumab
131	129	126	116	107	99	90	85	78	68	44	21	2	0	0	Placebo + bevacizumab

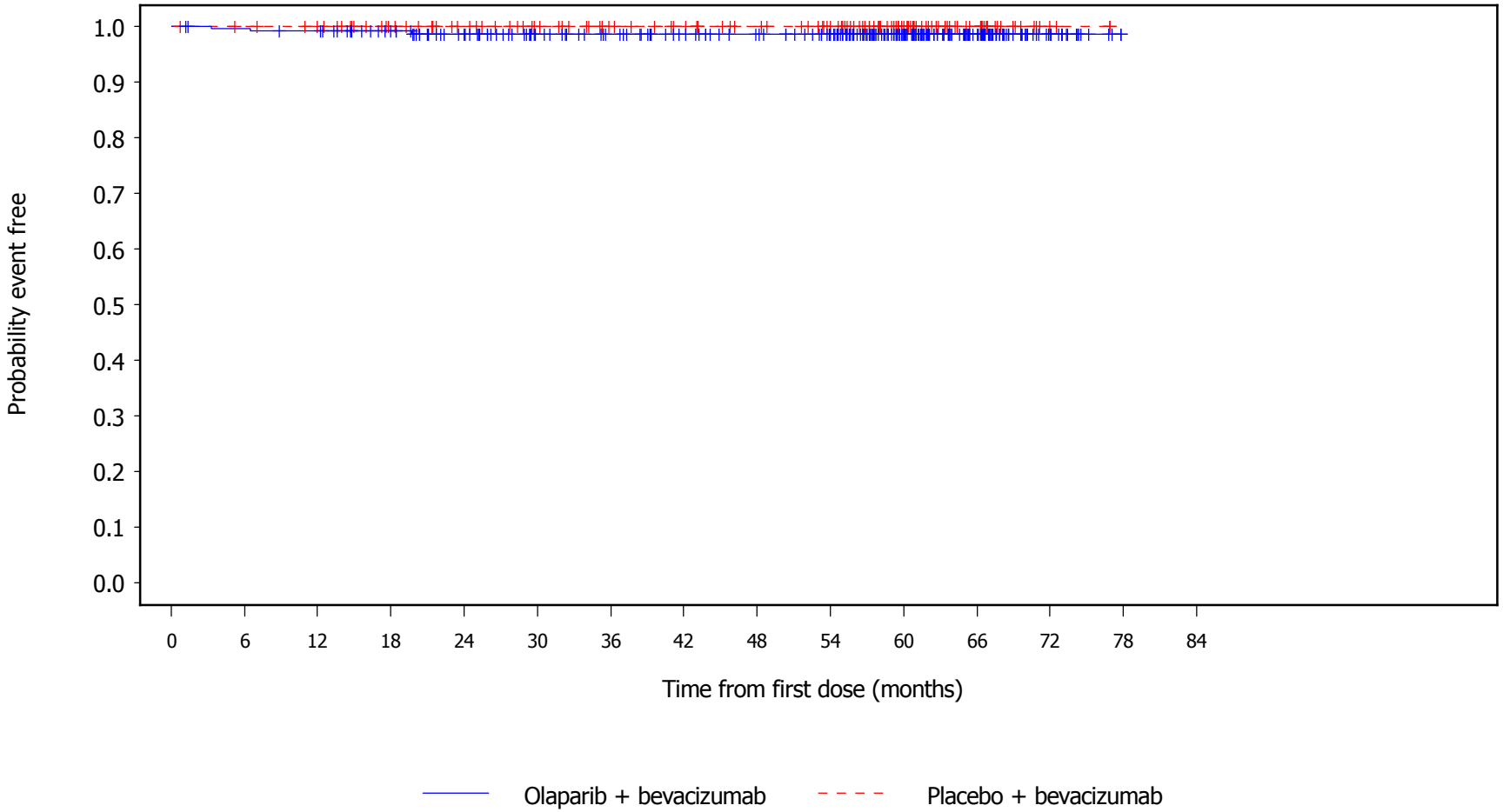
Figure 3.3.19 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	251	235	222	202	191	177	167	154	107	60	17	0	0	Olaparib + bevacizumab
131	128	125	115	107	98	88	82	75	66	43	20	2	0	0	Placebo + bevacizumab

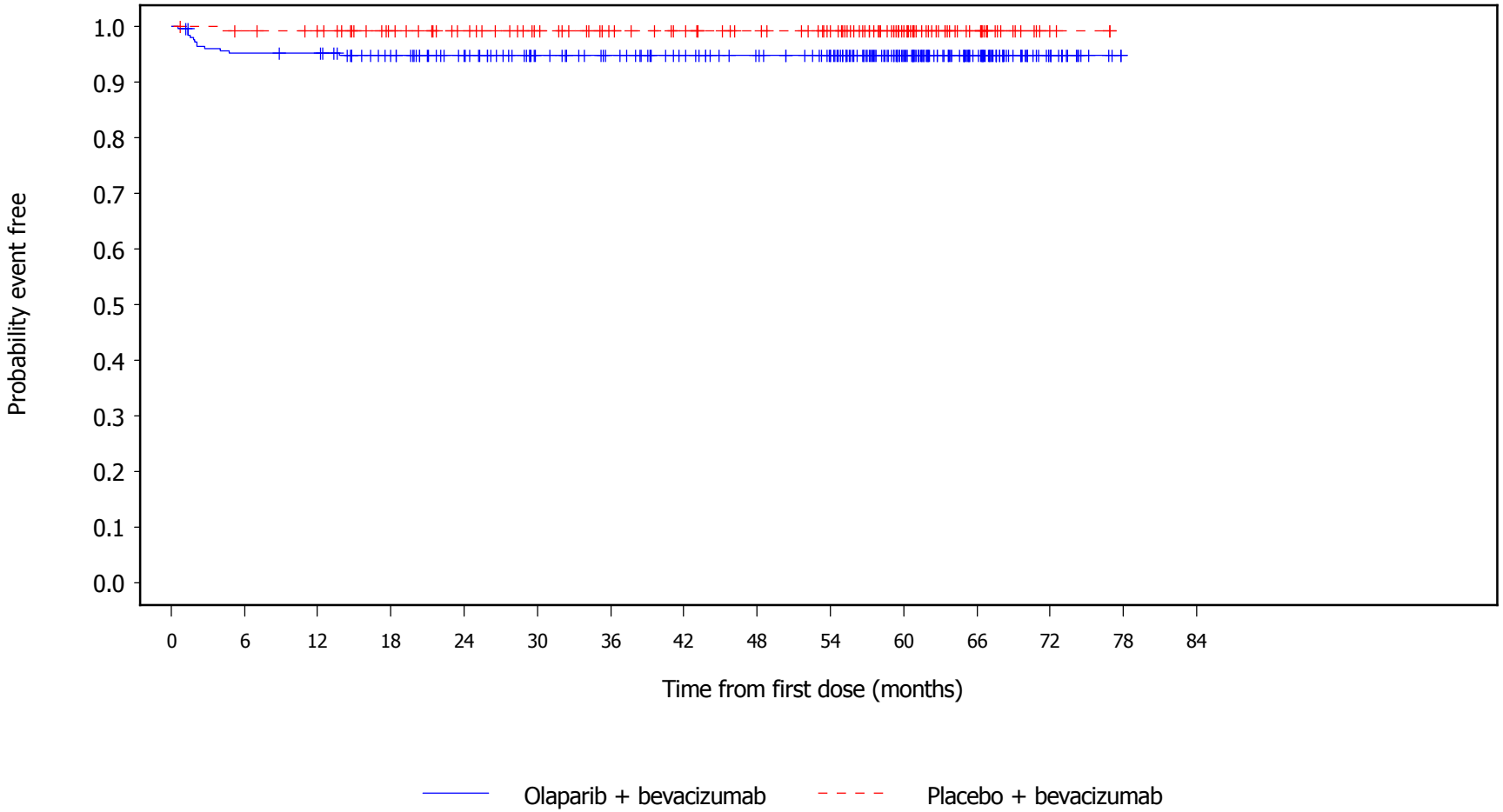
Figure 3.3.20 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	250	237	221	202	192	181	172	161	114	61	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

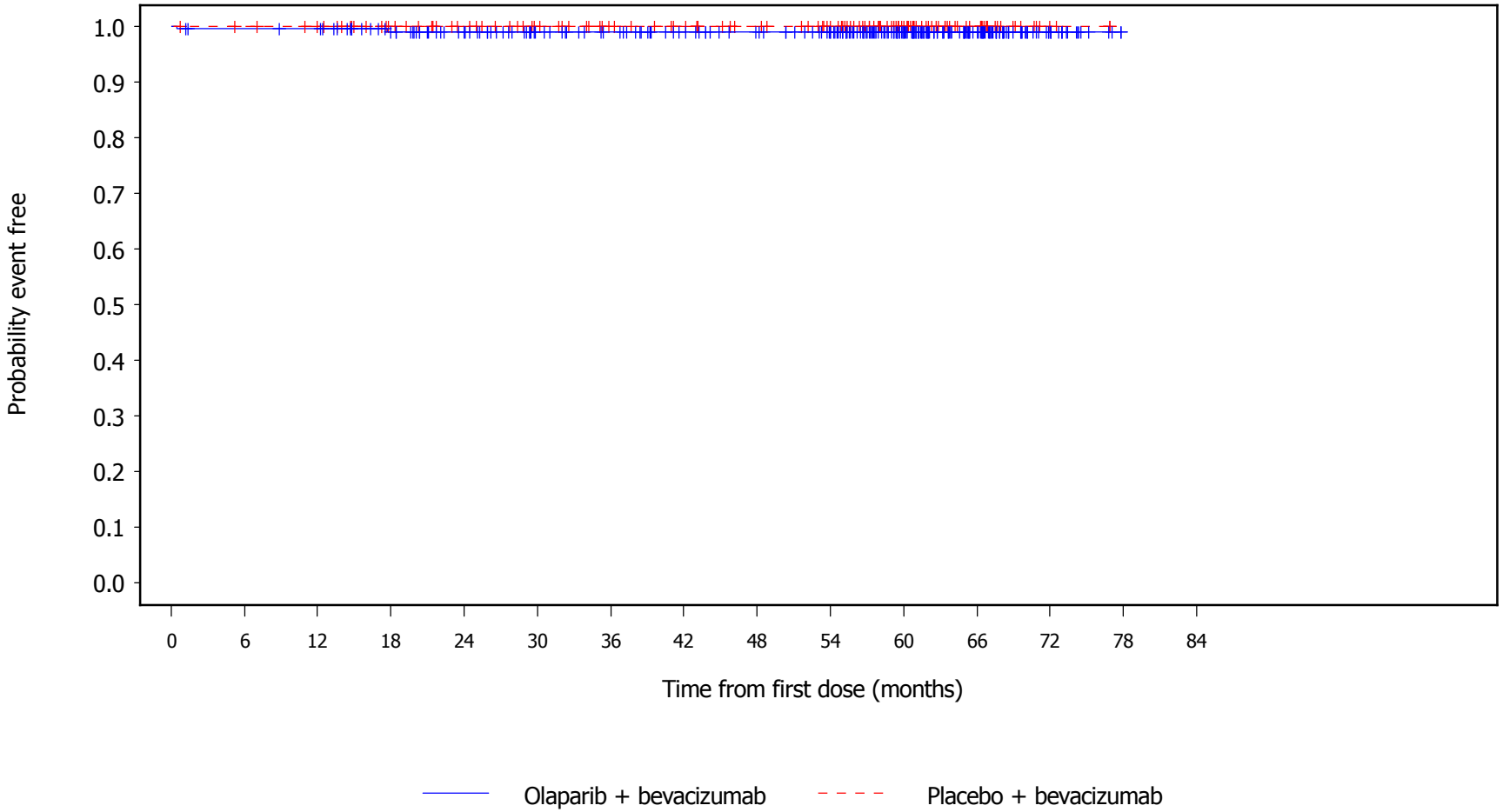
Figure 3.3.21 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	241	240	226	211	193	184	173	164	154	108	59	17	0	0	Olaparib + bevacizumab
131	128	125	115	107	98	89	84	77	68	44	21	2	0	0	Placebo + bevacizumab

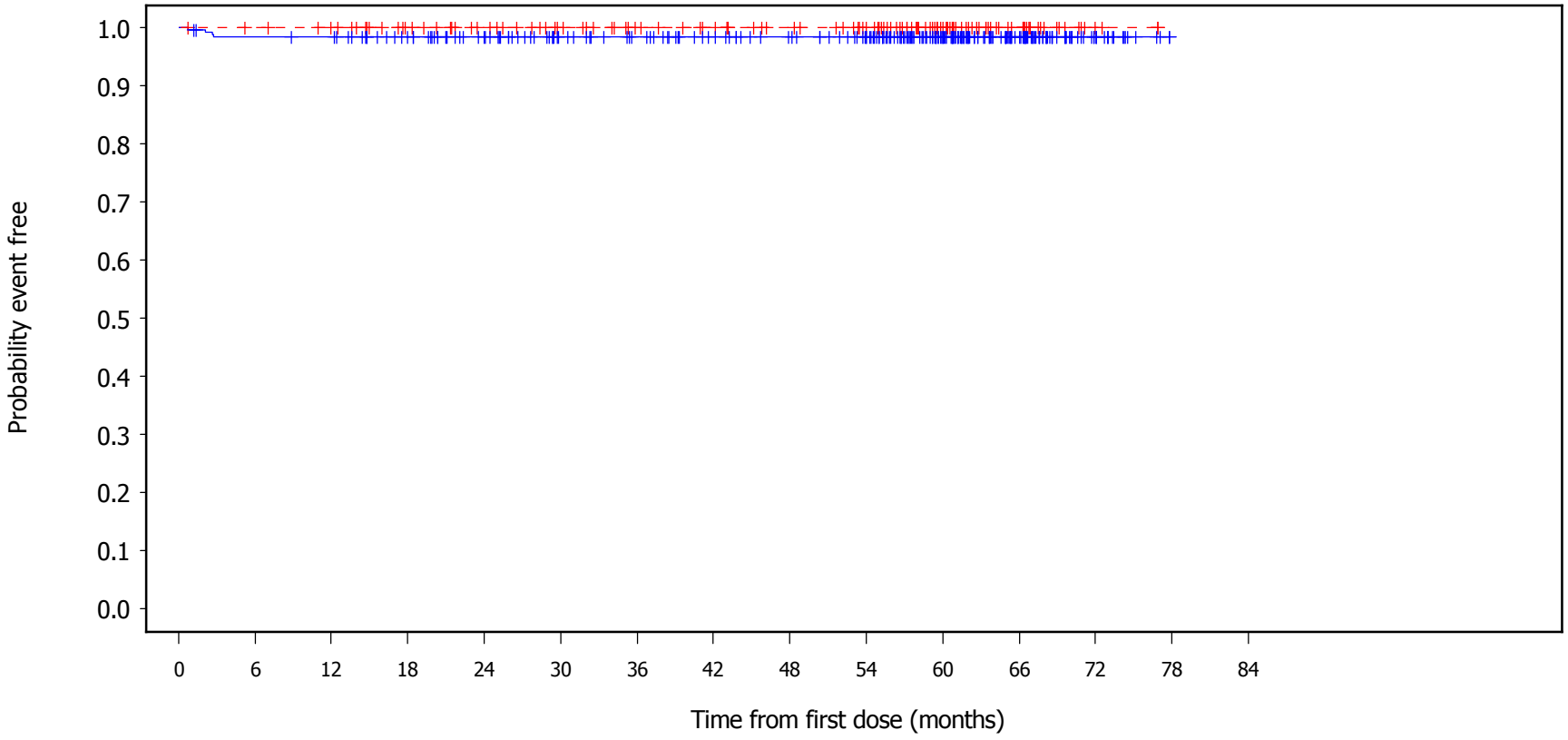
Figure 3.3.22 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	251	237	222	204	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

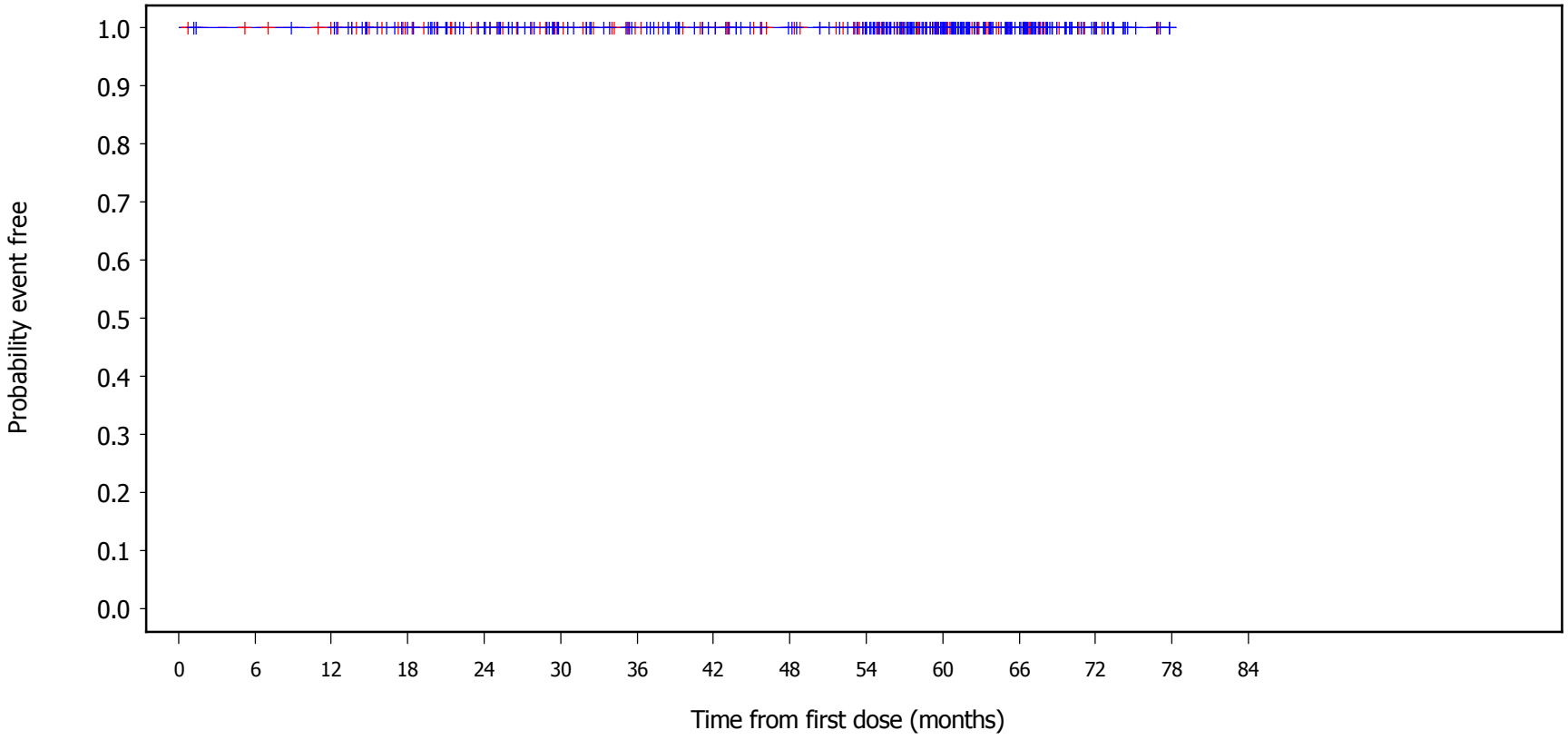
Figure 3.3.23 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	249	248	235	220	201	192	180	171	160	113	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

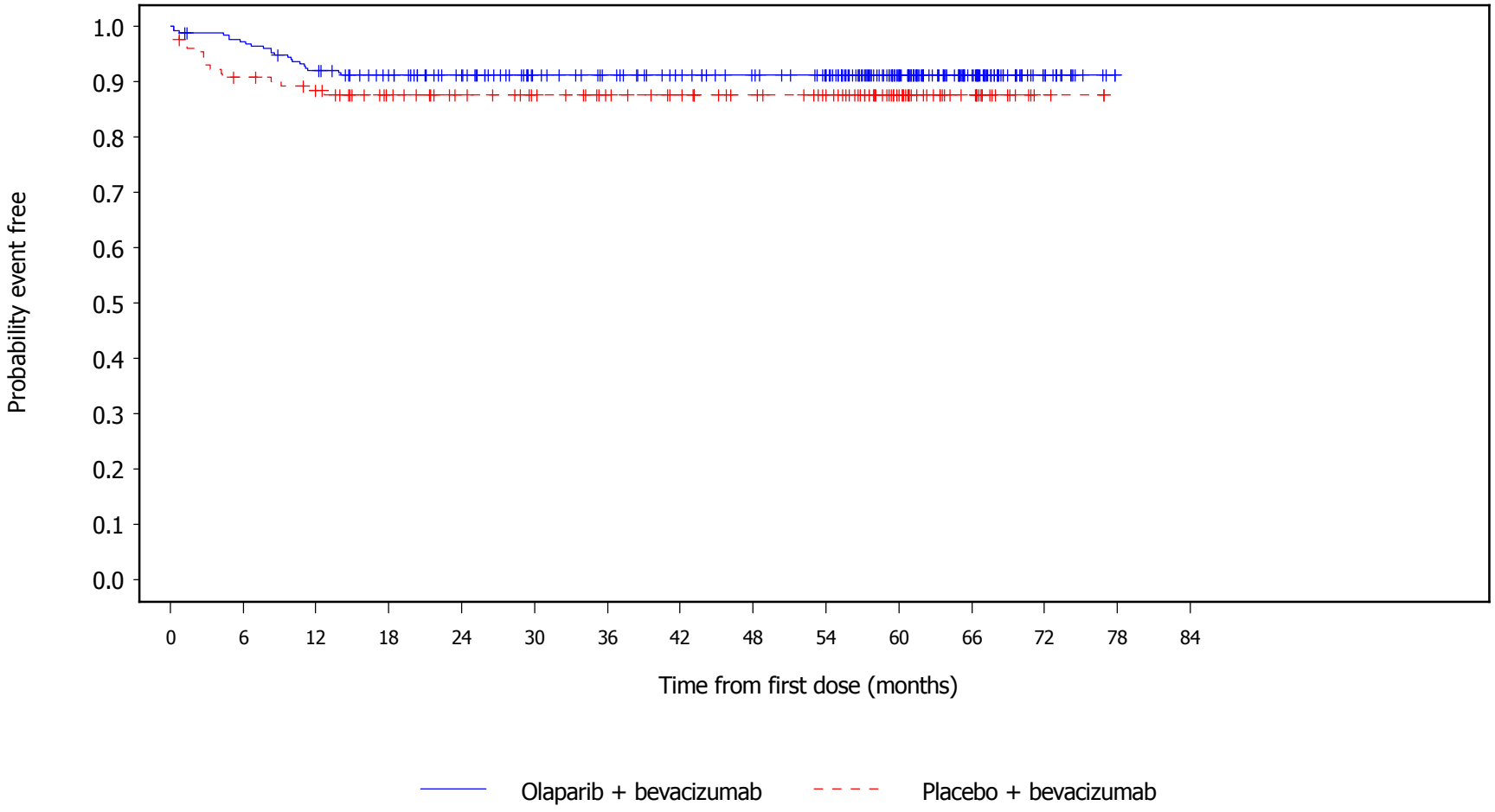
Figure 3.3.24 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

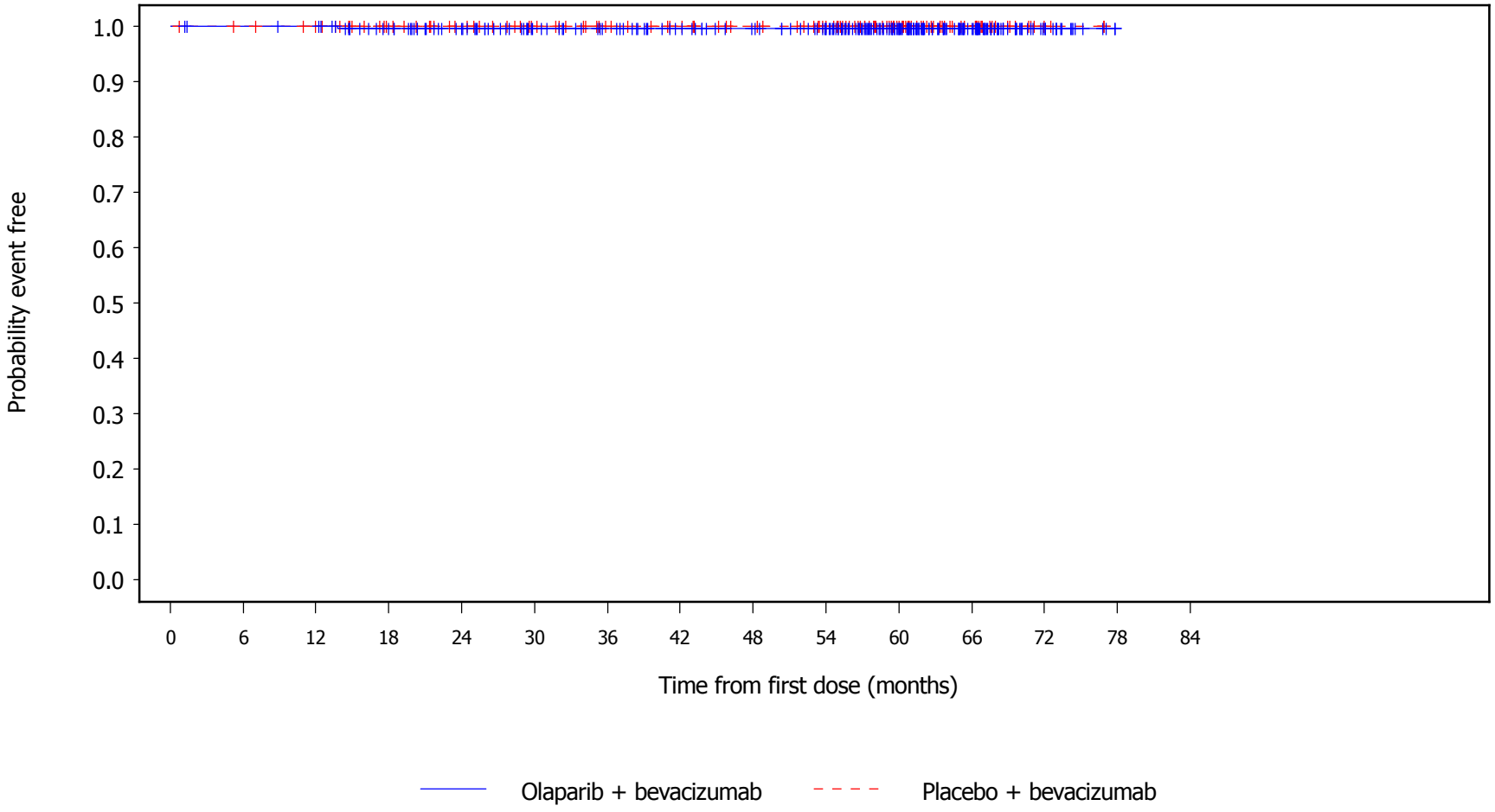
Figure 3.3.25 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	246	232	219	205	186	178	168	160	152	106	59	16	0	0	Olaparib + bevacizumab
131	117	111	100	92	86	79	74	67	60	38	19	2	0	0	Placebo + bevacizumab

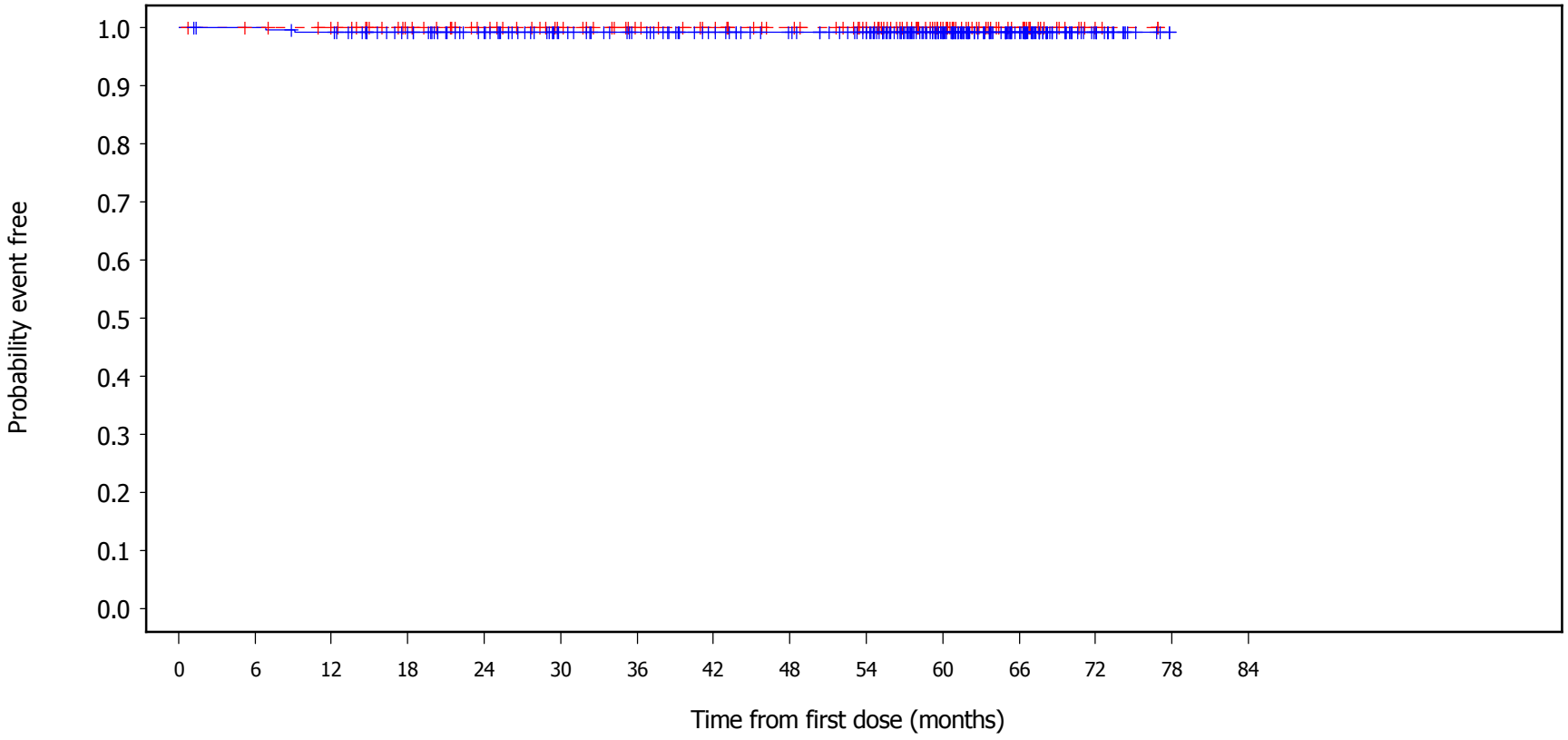
Figure 3.3.26 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	238	223	204	194	182	173	162	114	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

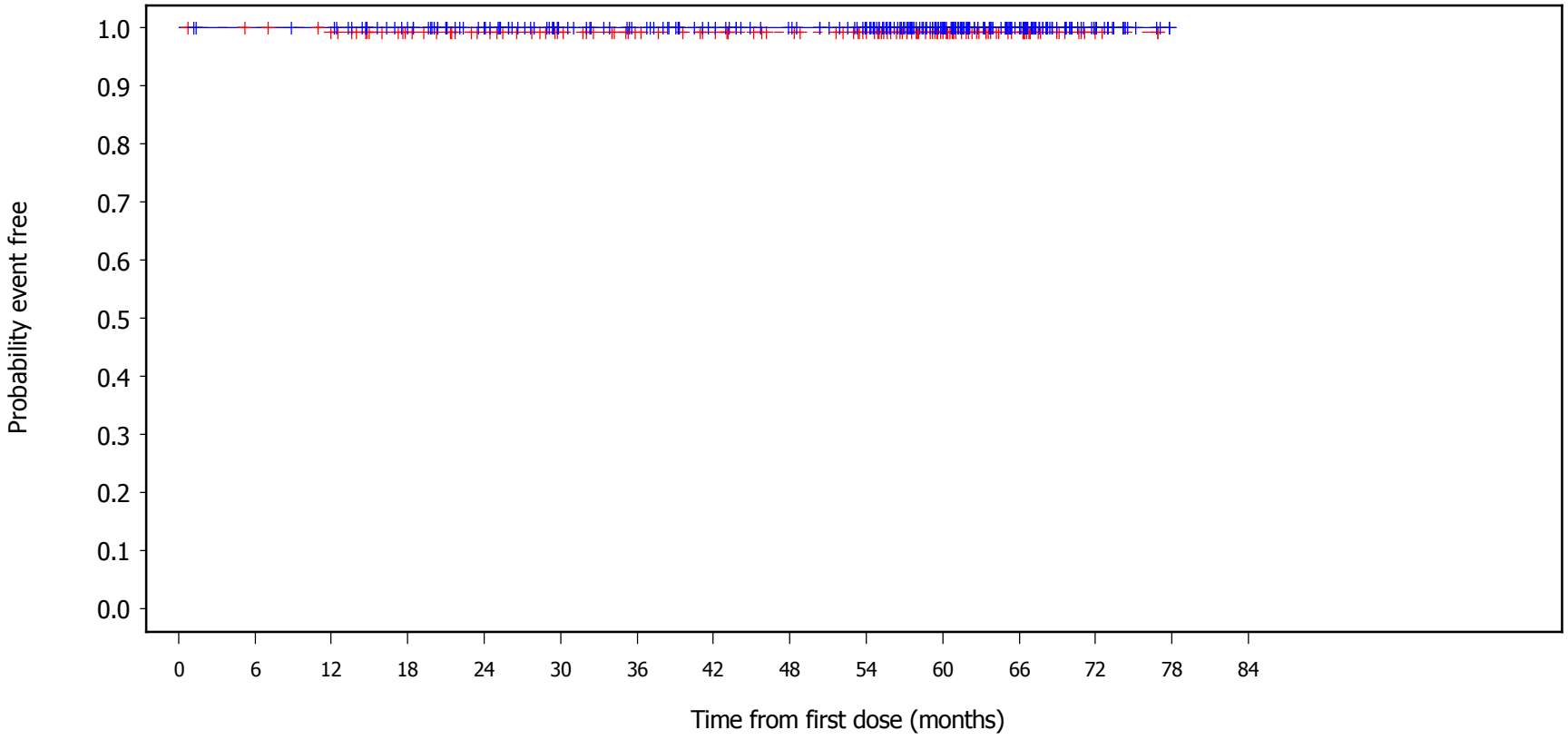
Figure 3.3.27 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	250	237	222	203	193	181	172	162	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

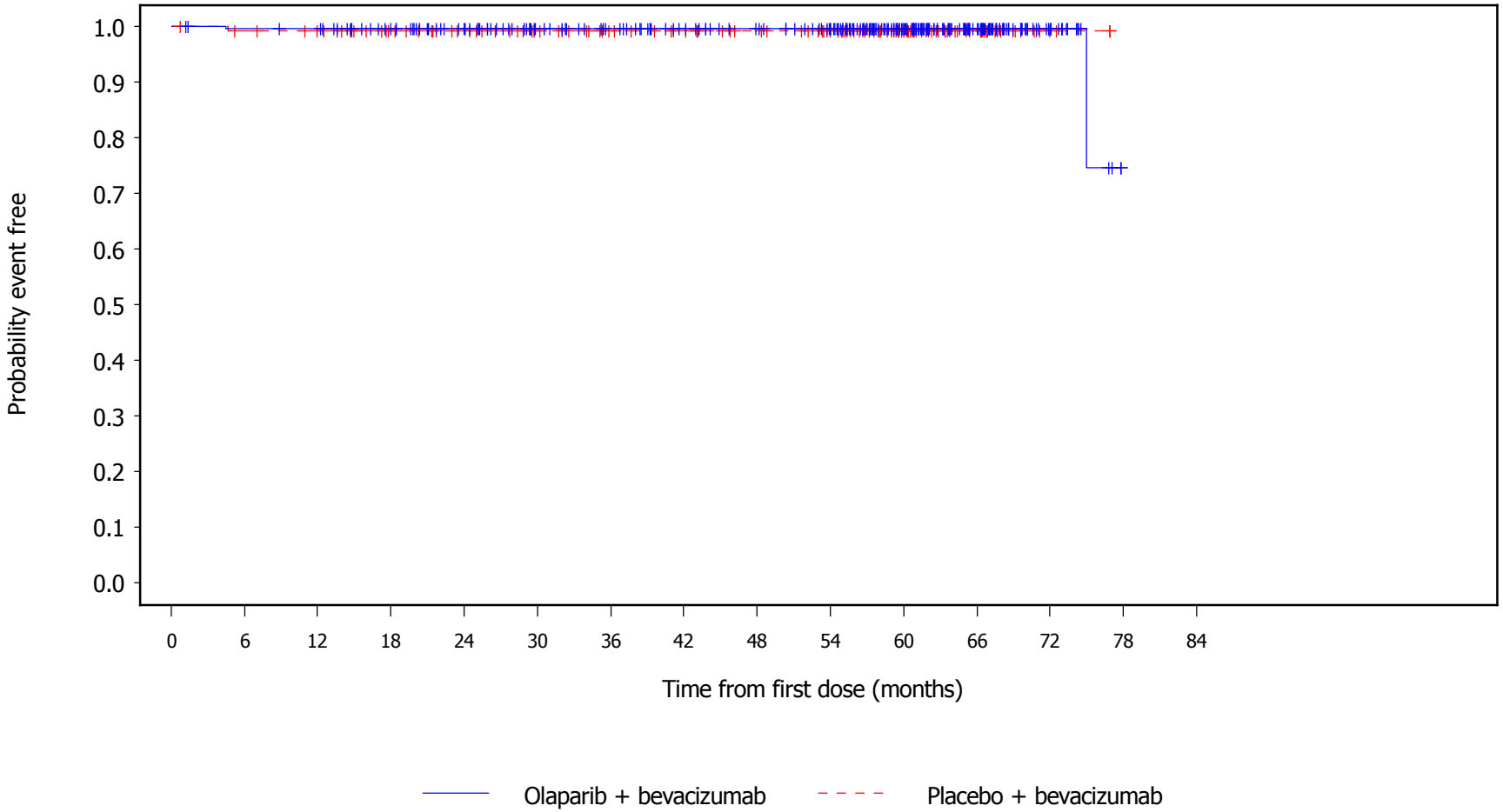
Figure 3.3.28 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	129	125	115	107	98	89	84	77	68	43	20	2	0	0	Placebo + bevacizumab

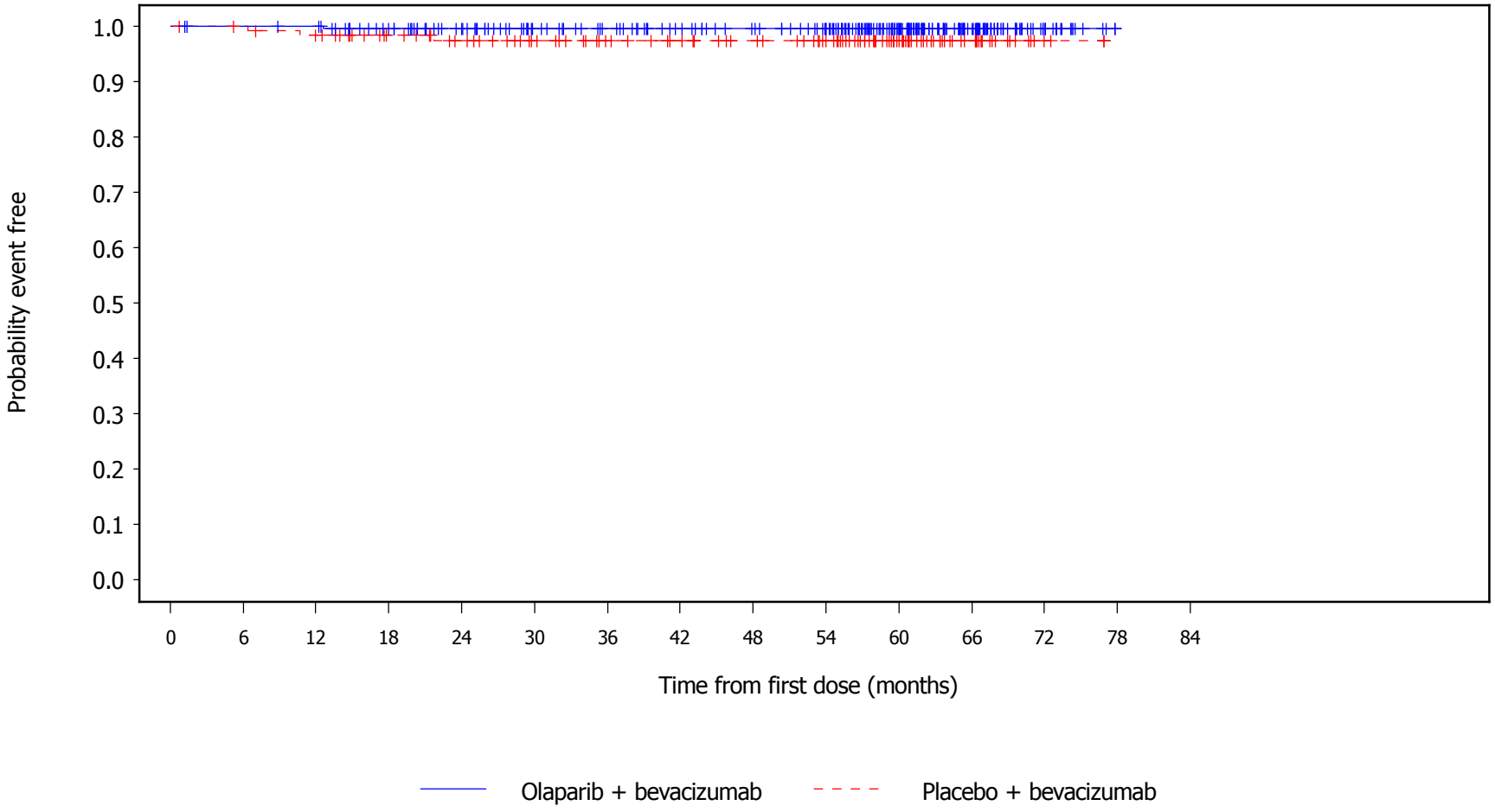
Figure 3.3.29 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	251	238	223	204	194	182	173	162	114	62	17	0	0	Olaparib + bevacizumab
131	128	125	115	107	98	89	84	77	68	44	21	2	0	0	Placebo + bevacizumab

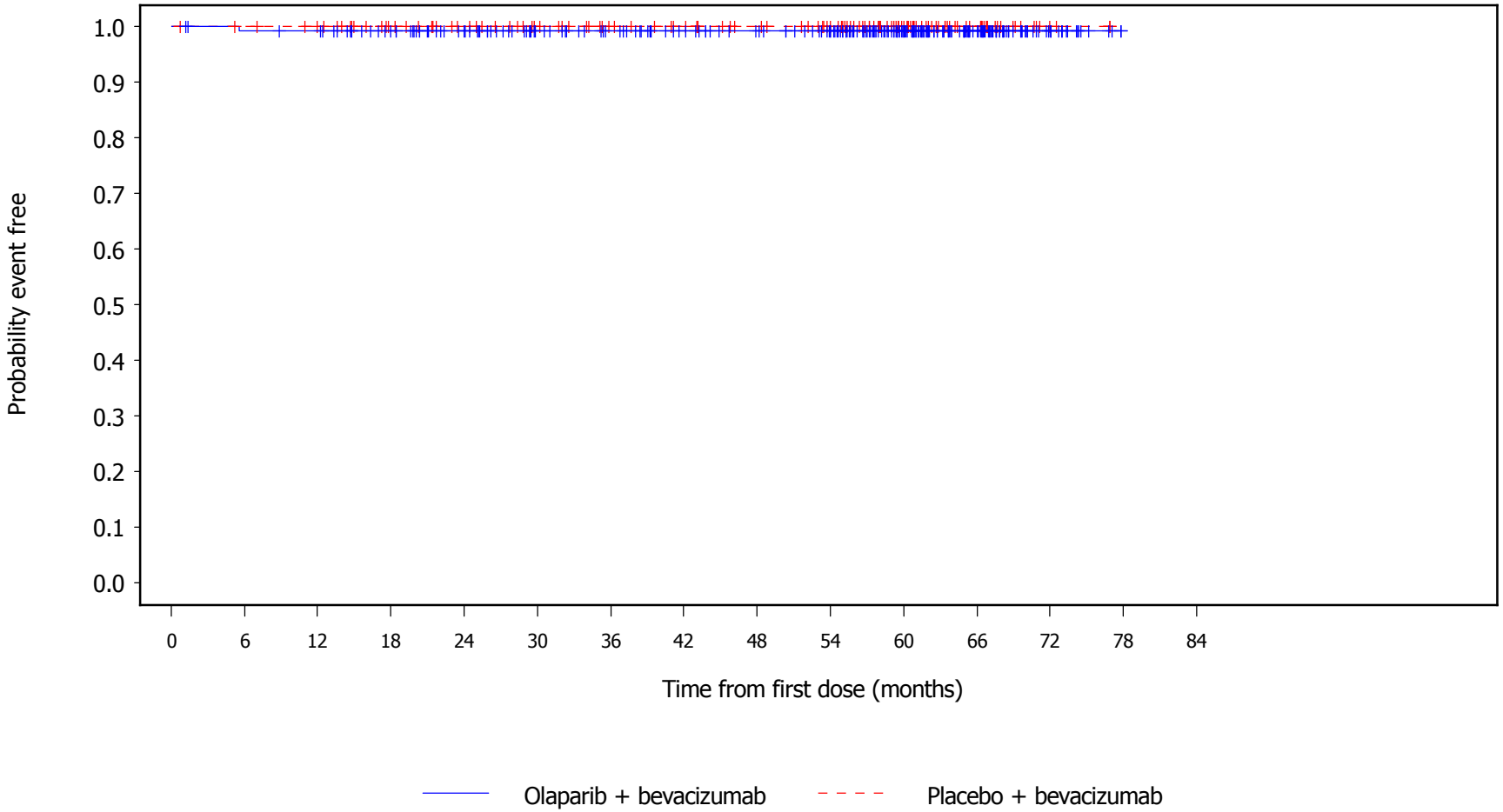
Figure 3.3.30 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	238	223	204	194	182	173	162	114	61	17	0	0	Olaparib + bevacizumab
131	129	125	115	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

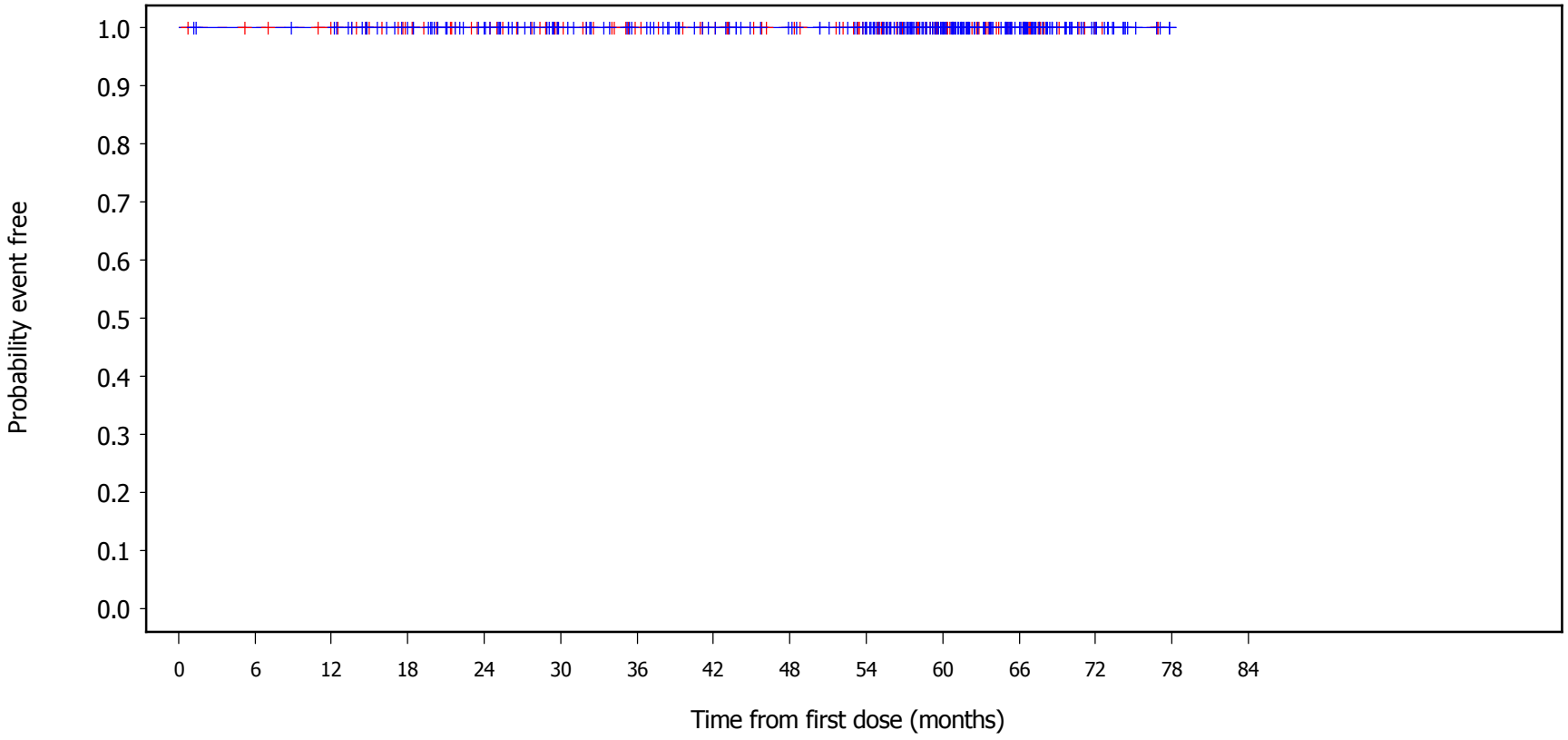
Figure 3.3.31 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	251	250	237	222	203	193	181	172	161	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

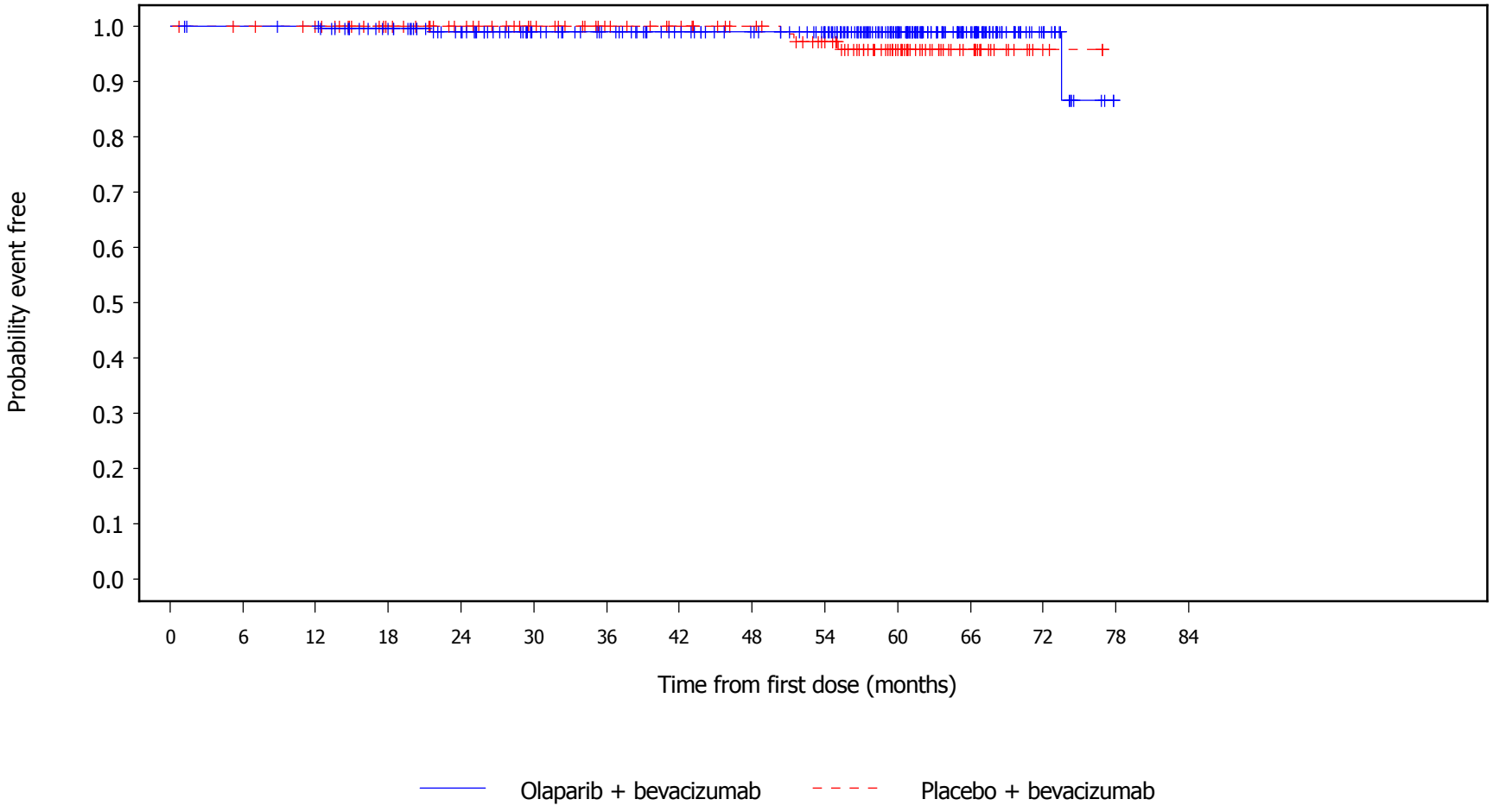
Figure 3.3.32 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

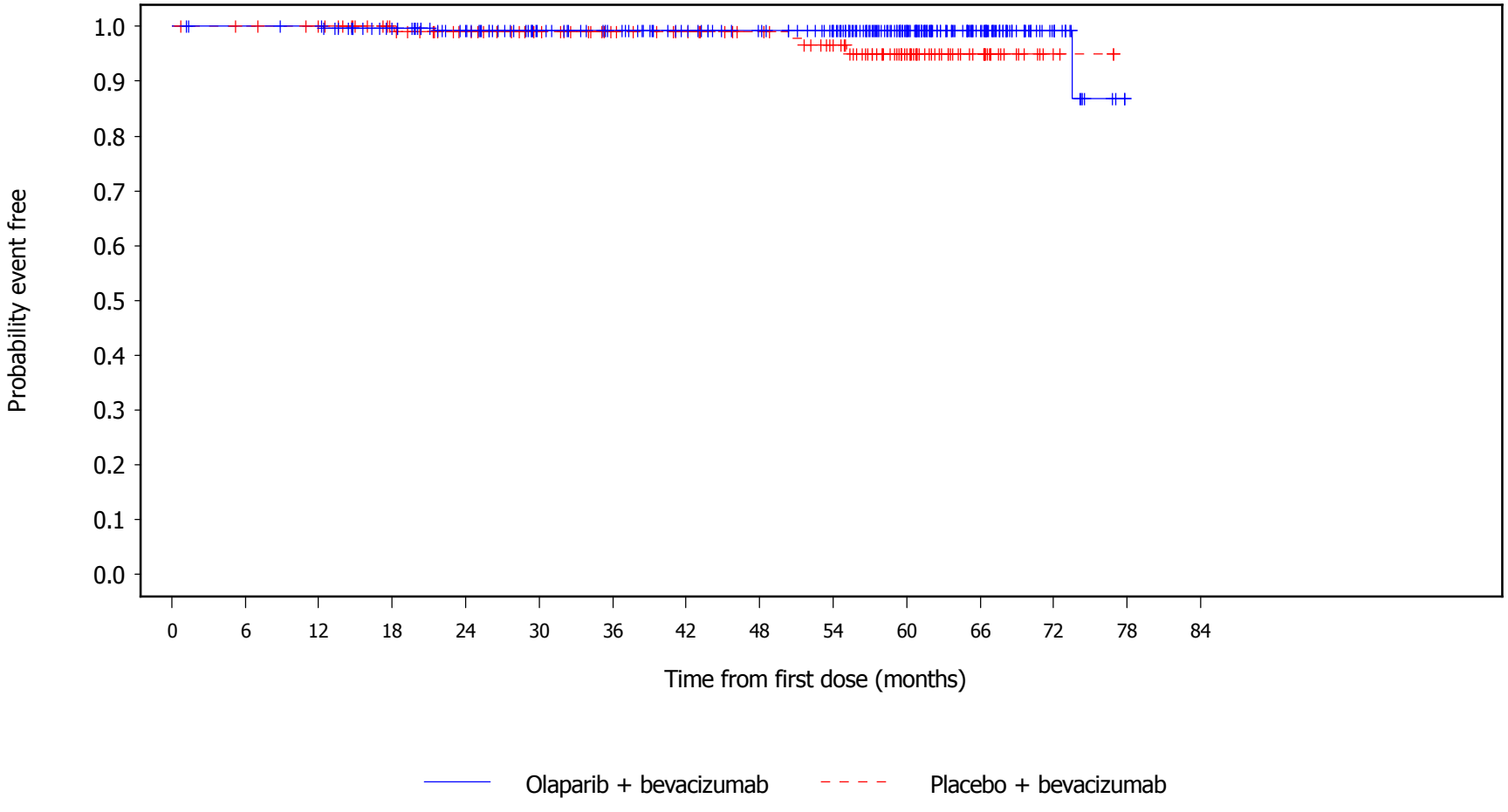
Figure 3.3.33 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	238	223	204	194	182	173	162	114	61	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	68	44	21	2	0	0	Placebo + bevacizumab

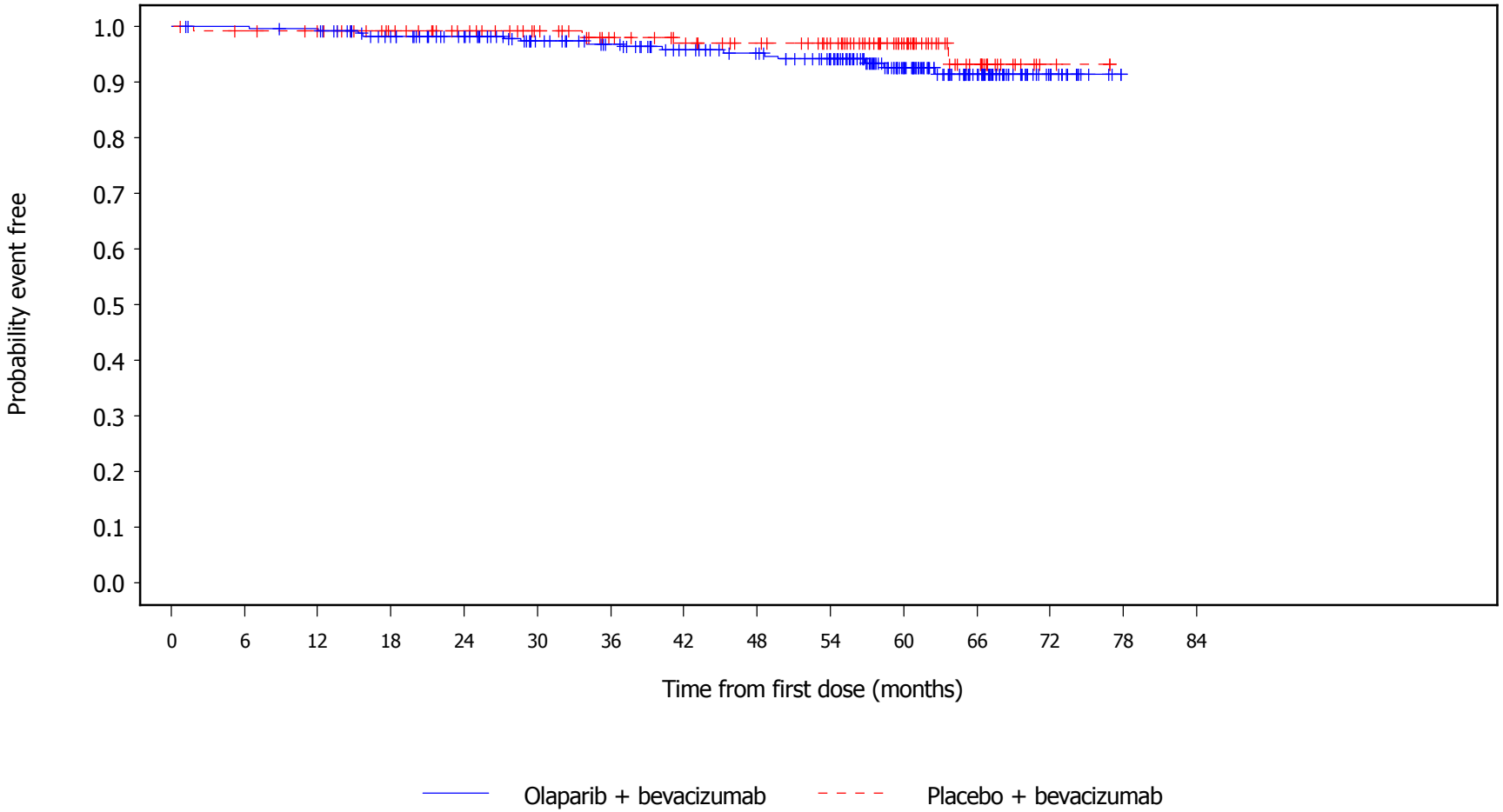
Figure 3.3.34 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	238	223	204	194	182	173	162	114	61	17	0	0	Olaparib + bevacizumab
131	129	126	116	107	99	90	85	78	68	44	21	2	0	0	Placebo + bevacizumab

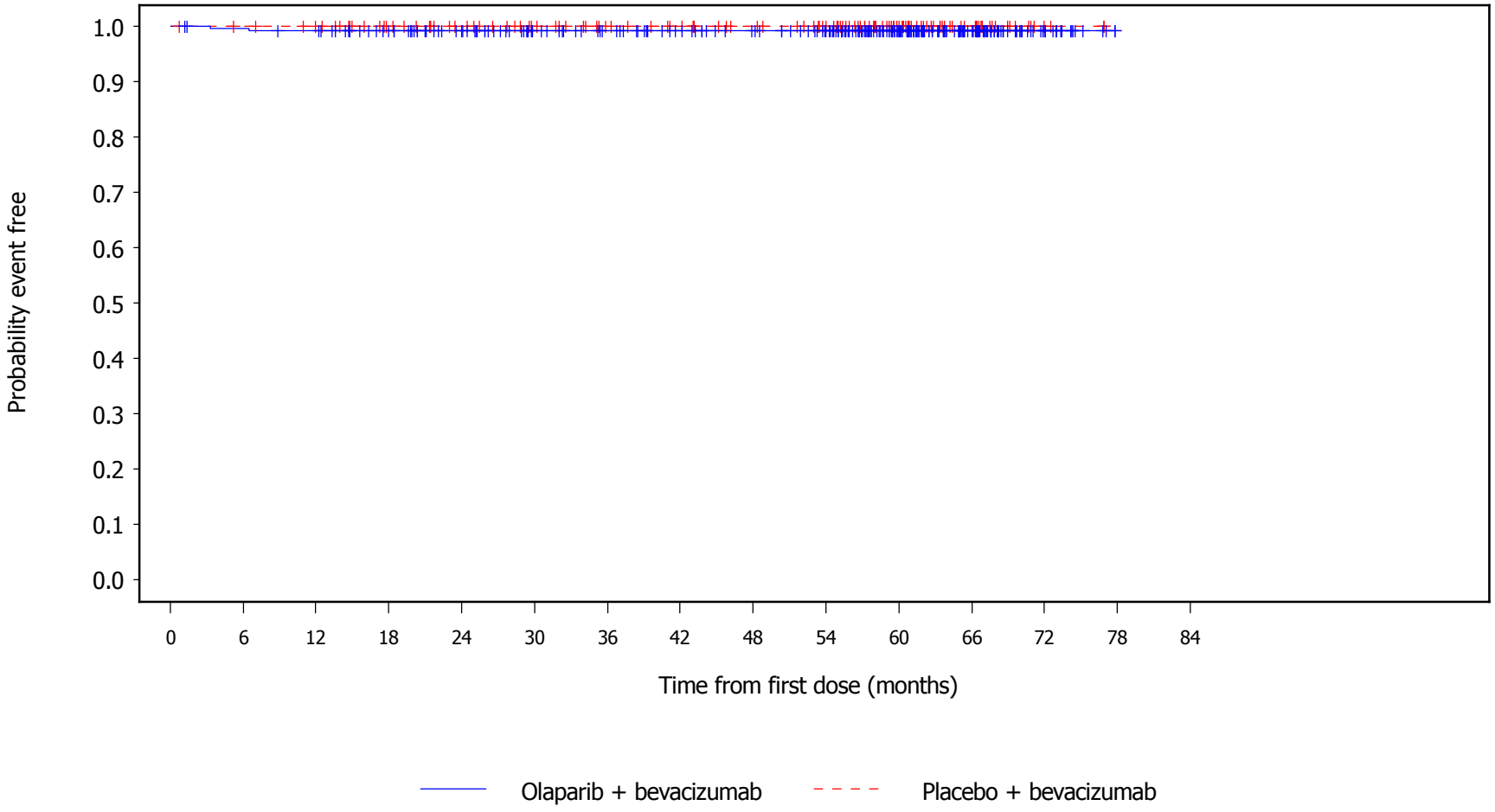
Figure 3.3.35 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	251	235	222	202	191	177	167	154	107	60	17	0	0	Olaparib + bevacizumab
131	128	125	115	107	98	88	82	75	66	43	20	2	0	0	Placebo + bevacizumab

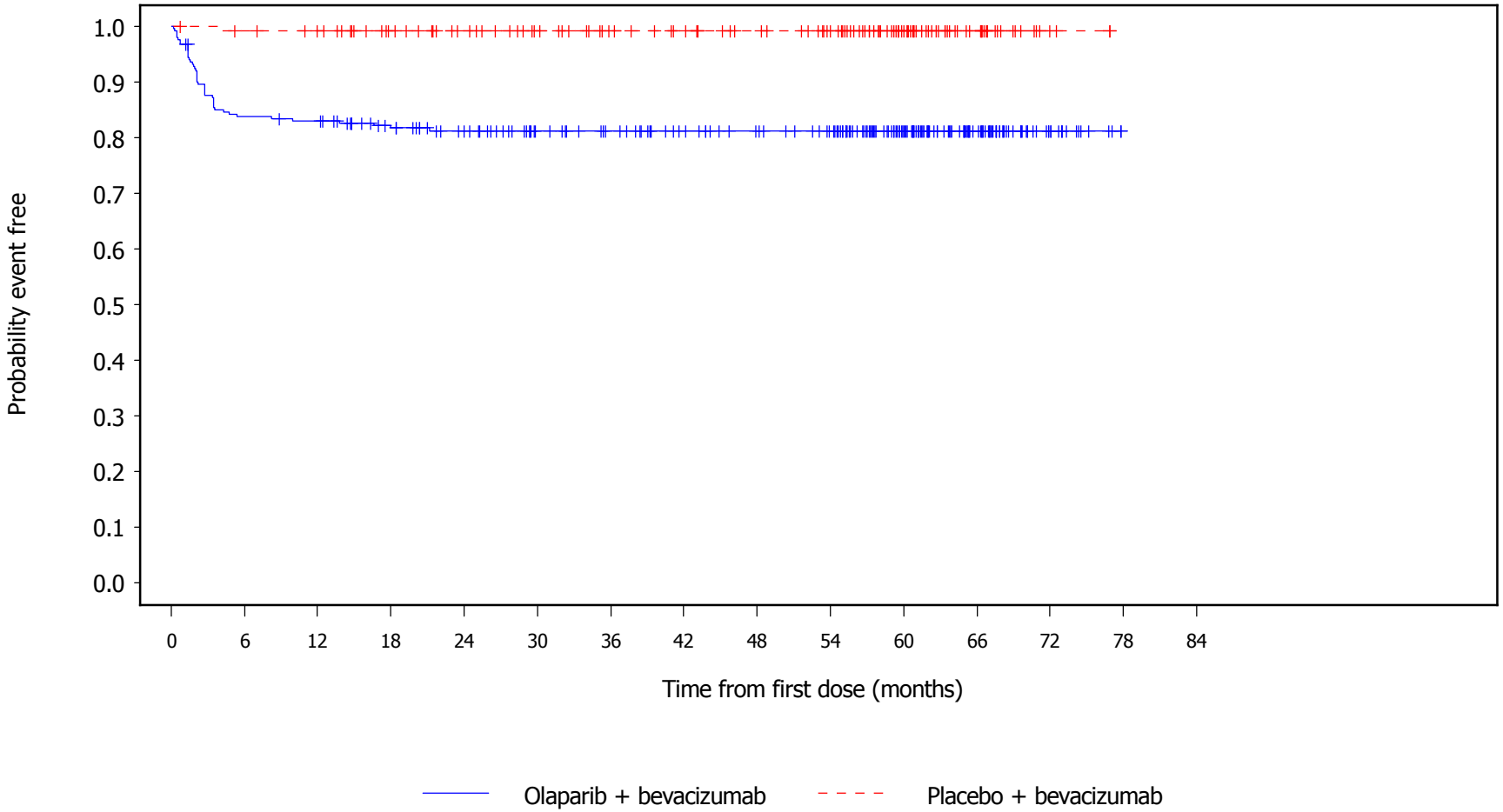
Figure 3.3.36 PAOLA1: Kaplan-Meier plot of time to first occurrence of Serious AESI: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	250	237	222	203	193	182	173	162	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

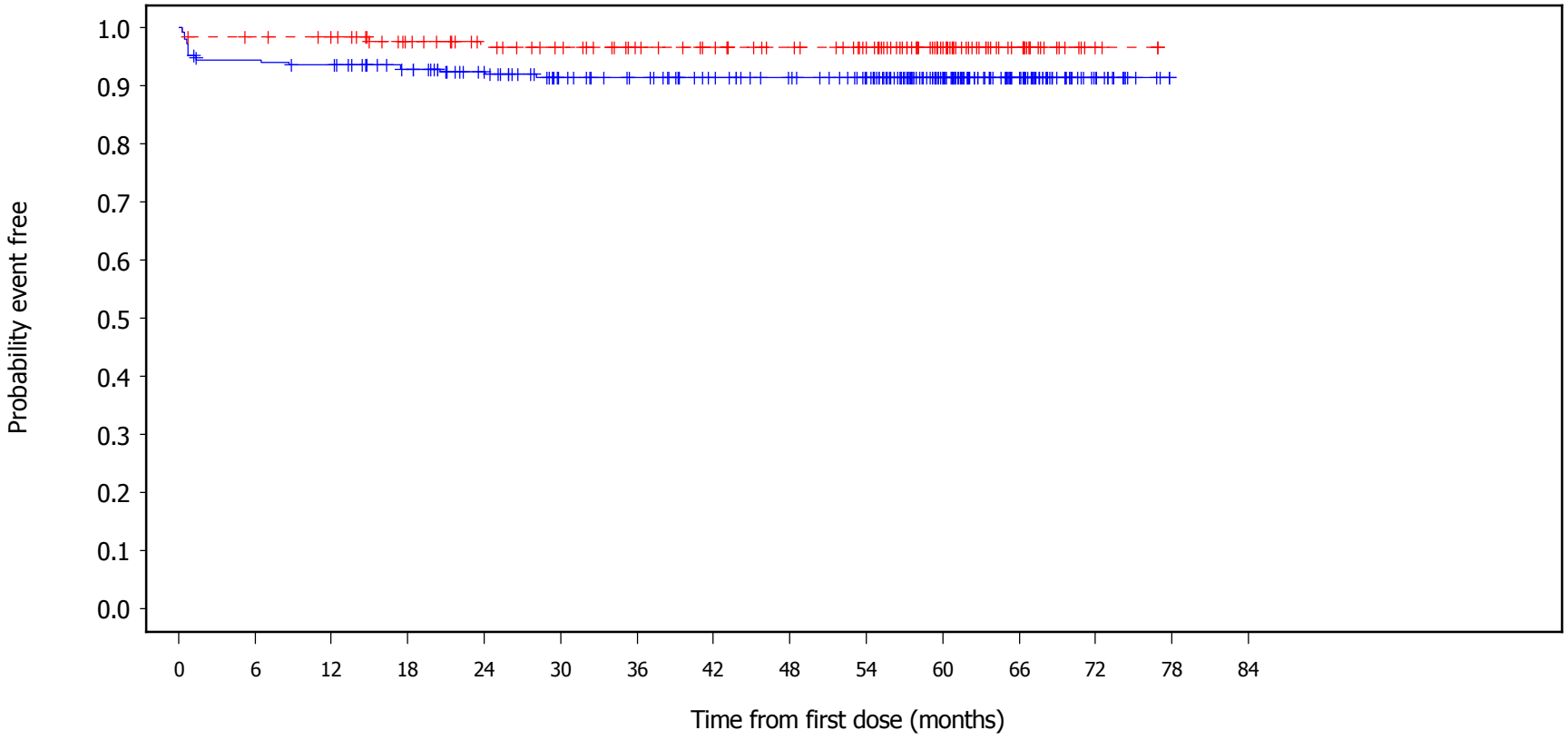
Figure 3.3.37 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	212	209	194	182	166	158	147	139	131	93	51	14	0	0	Olaparib + bevacizumab
131	128	125	115	107	98	89	84	77	68	44	21	2	0	0	Placebo + bevacizumab

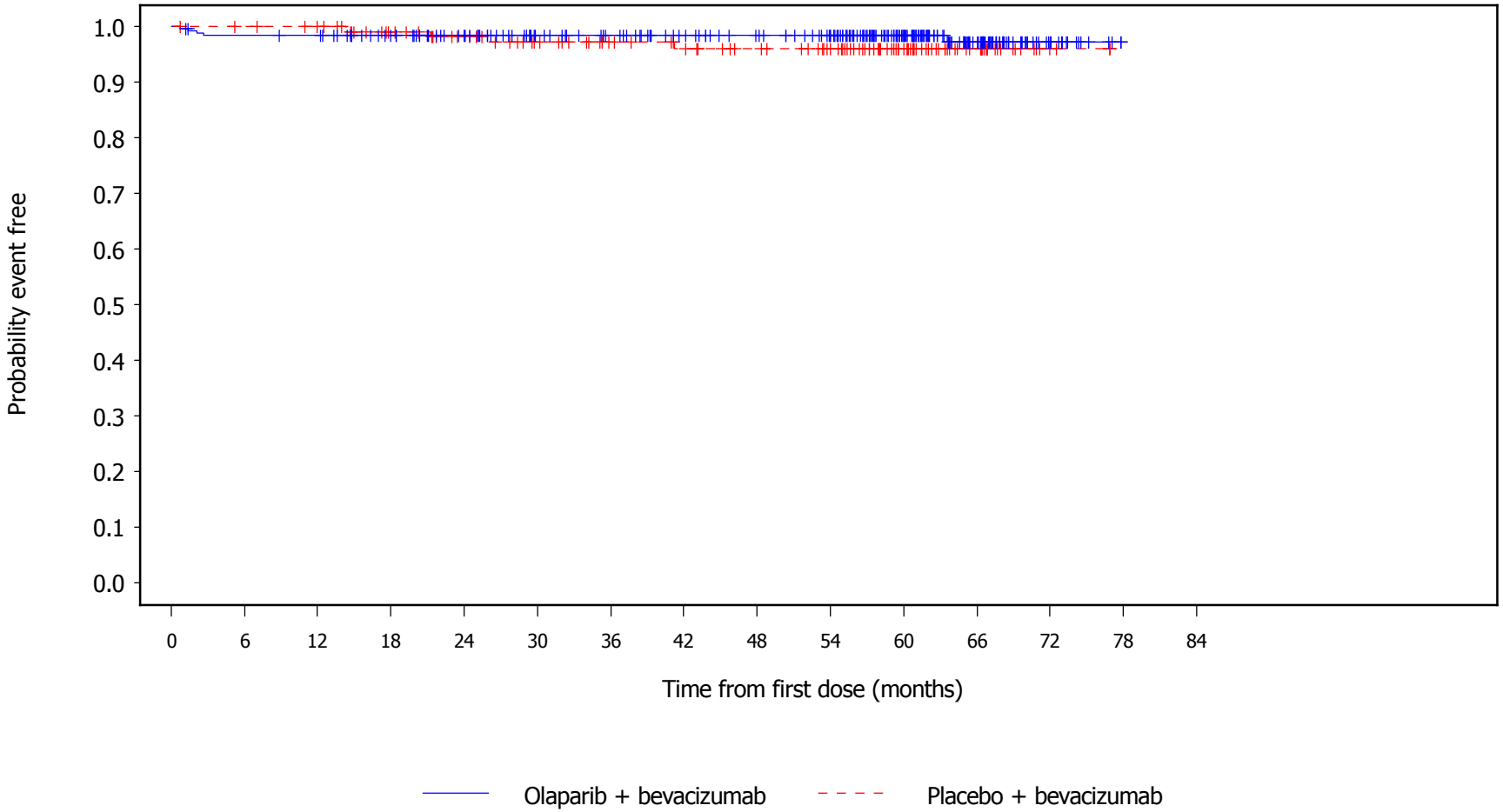
Figure 3.3.38 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	239	236	223	208	190	182	171	163	153	108	59	16	0	0	Olaparib + bevacizumab
131	127	124	113	104	98	89	84	77	68	44	21	2	0	0	Placebo + bevacizumab

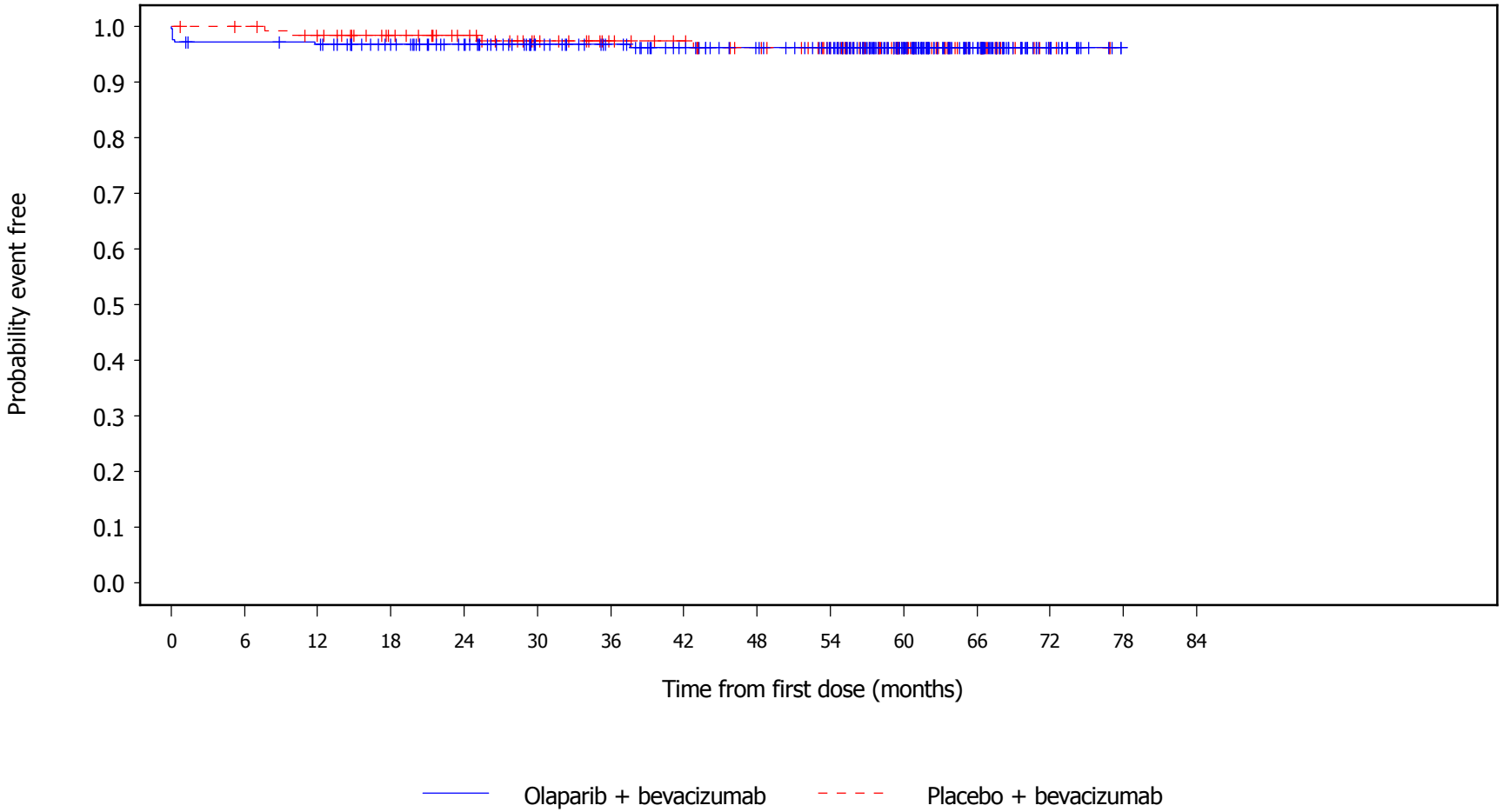
Figure 3.3.39 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	249	248	235	221	202	193	181	172	161	114	61	16	0	0	Olaparib + bevacizumab
131	129	126	115	106	96	87	82	76	67	44	21	2	0	0	Placebo + bevacizumab

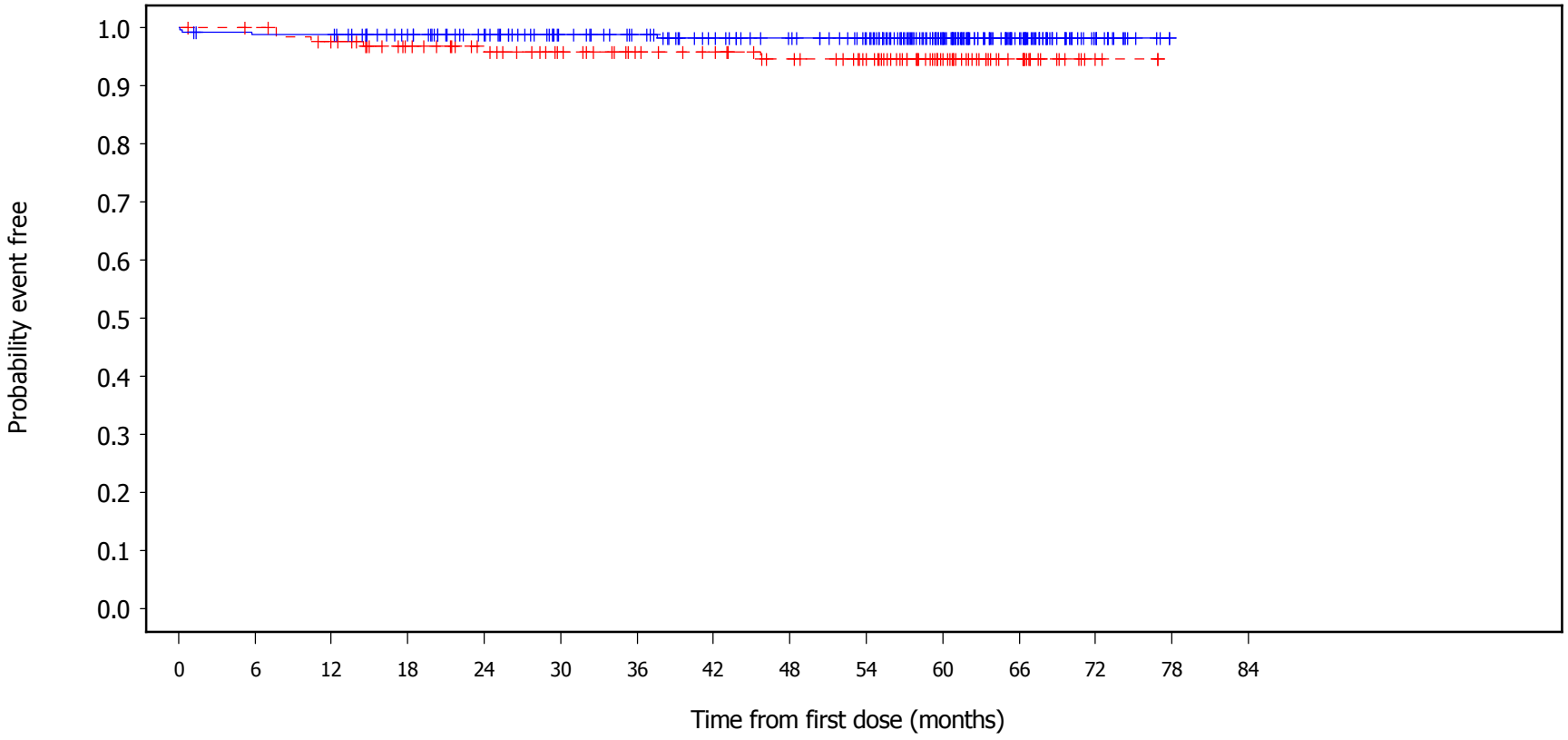
Figure 3.3.40 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	246	244	231	217	199	189	177	168	158	112	61	17	0	0	Olaparib + bevacizumab
131	129	124	114	106	96	88	84	77	68	43	20	2	0	0	Placebo + bevacizumab

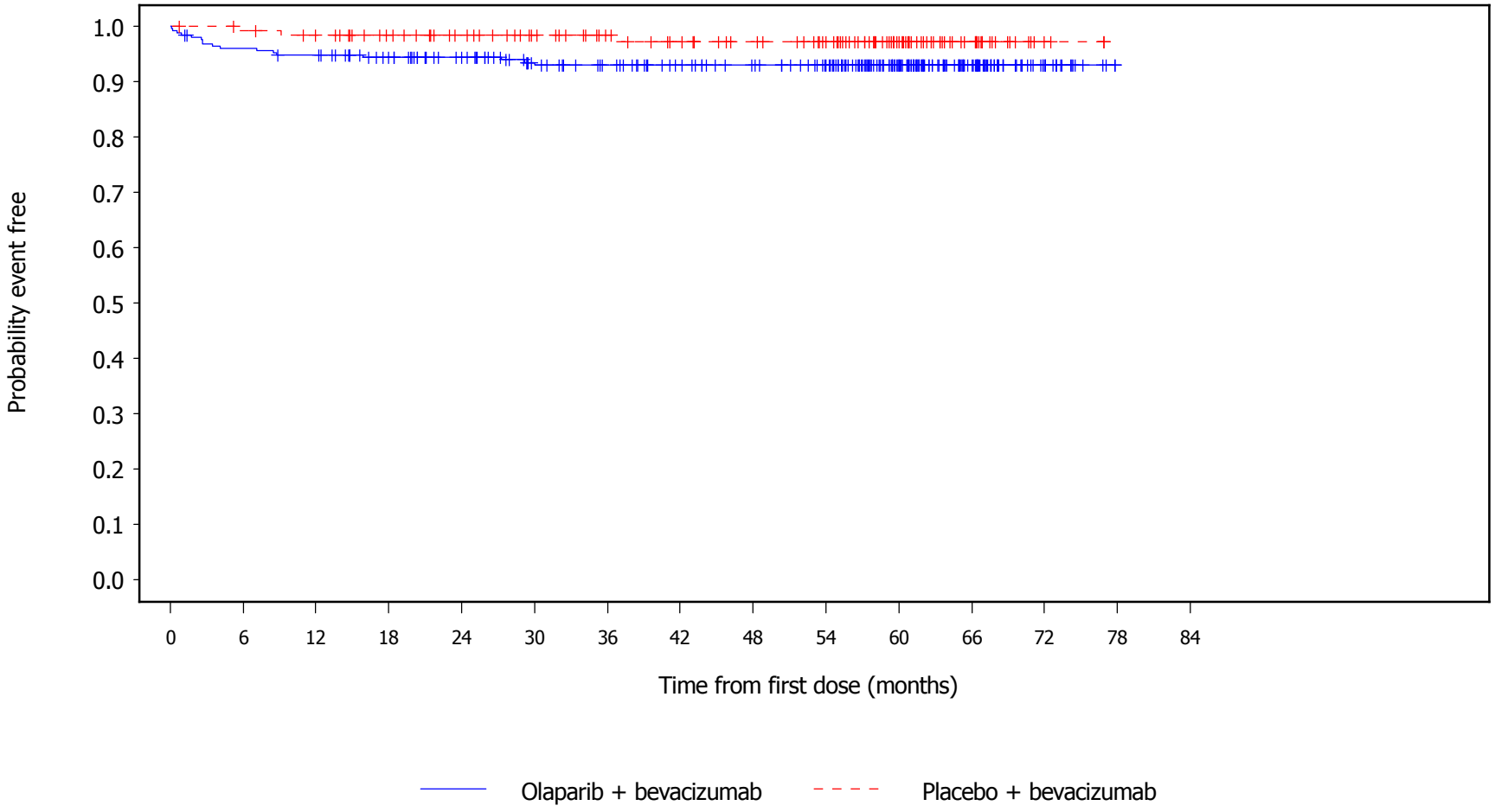
Figure 3.3.41 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	250	250	237	222	203	194	181	172	161	114	61	17	0	0	Olaparib + bevacizumab
131	129	123	112	103	94	85	81	73	64	40	20	2	0	0	Placebo + bevacizumab

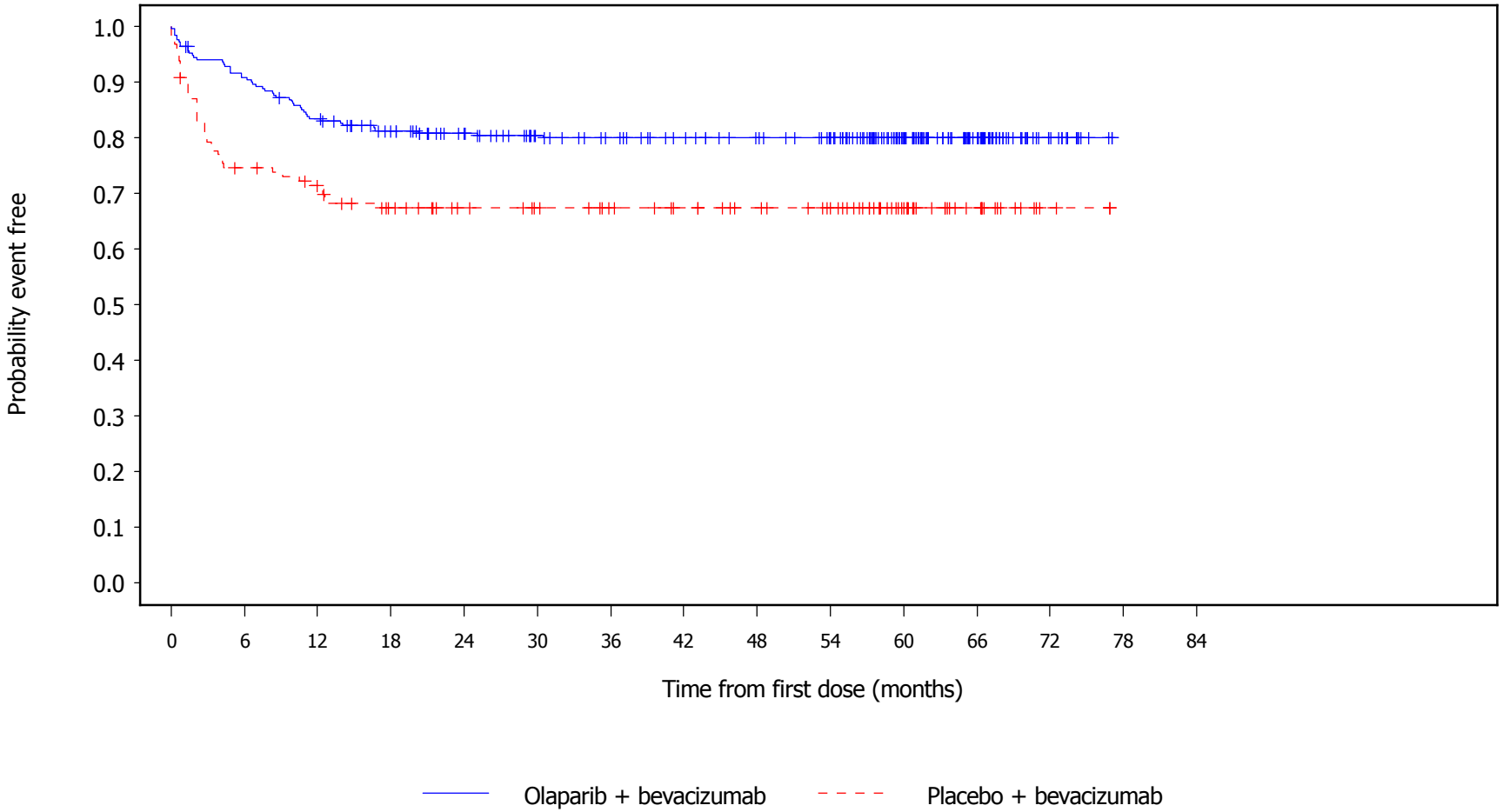
Figure 3.3.42 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	243	239	225	211	193	183	171	162	151	106	58	17	0	0	Olaparib + bevacizumab
131	128	124	116	108	99	90	84	77	68	44	21	2	0	0	Placebo + bevacizumab

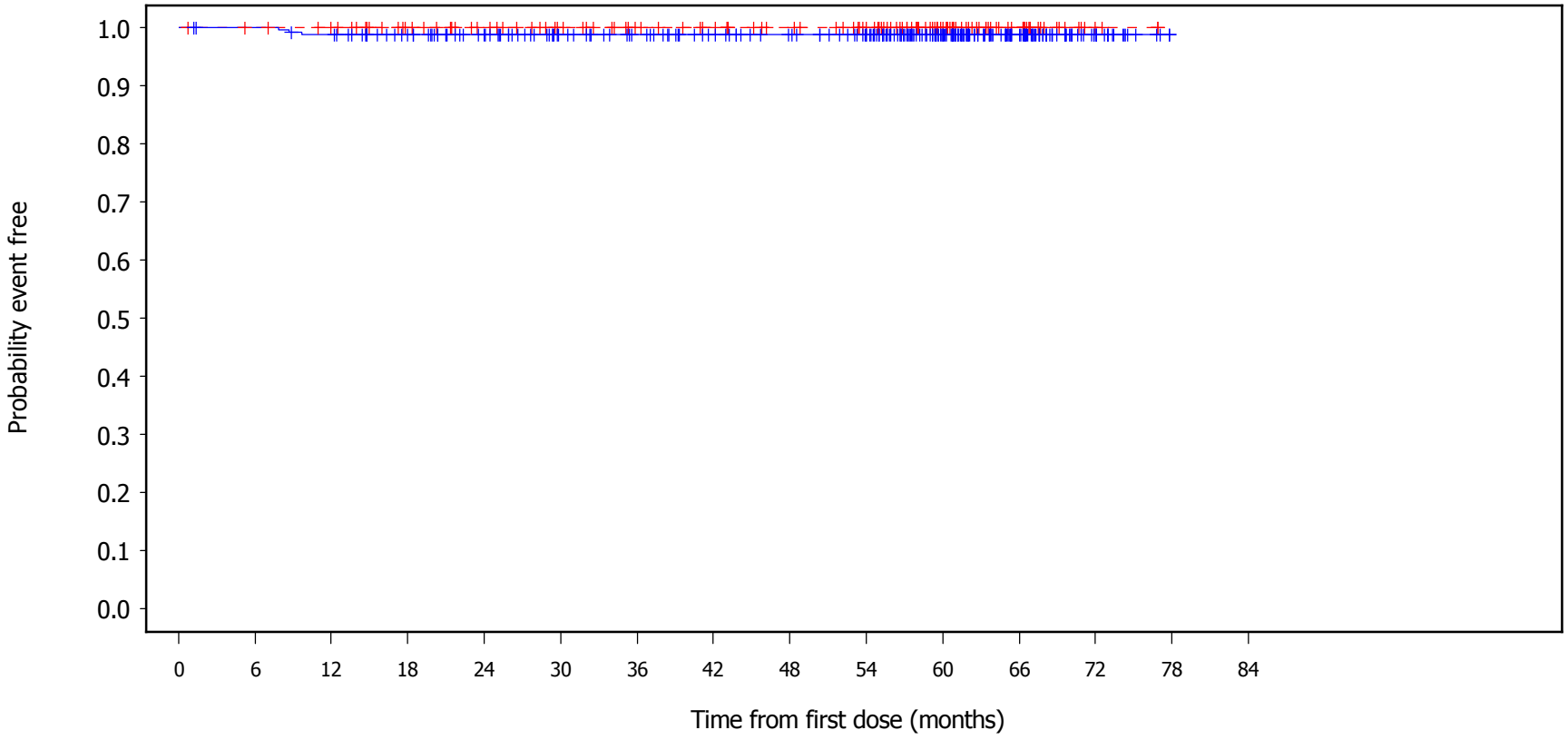
Figure 3.3.43 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	230	210	194	179	164	156	148	141	133	93	51	13	0	0	Olaparib + bevacizumab
131	96	89	78	70	66	61	57	52	46	29	15	2	0	0	Placebo + bevacizumab

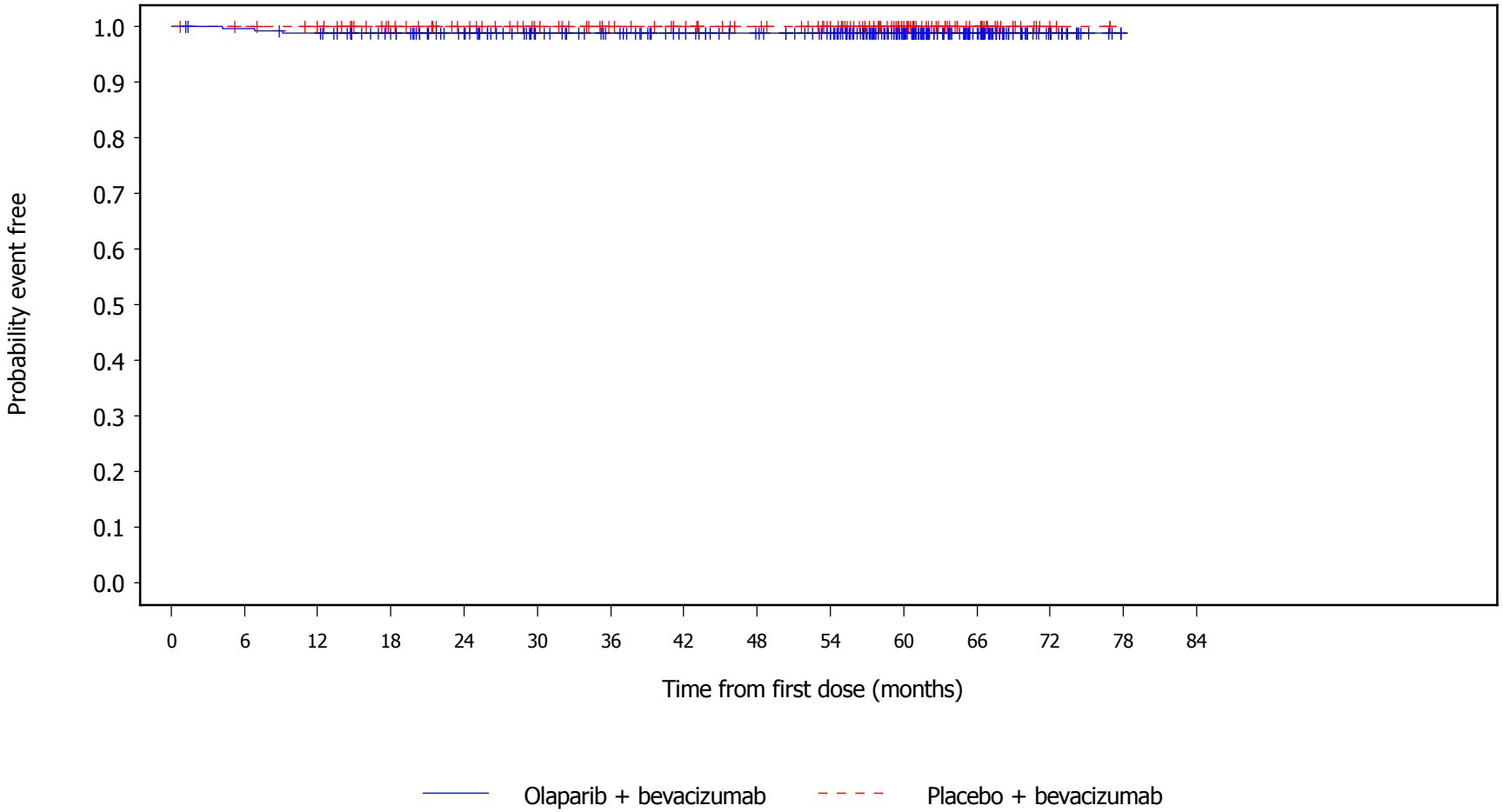
Figure 3.3.44 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	249	236	221	202	192	180	171	160	113	61	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

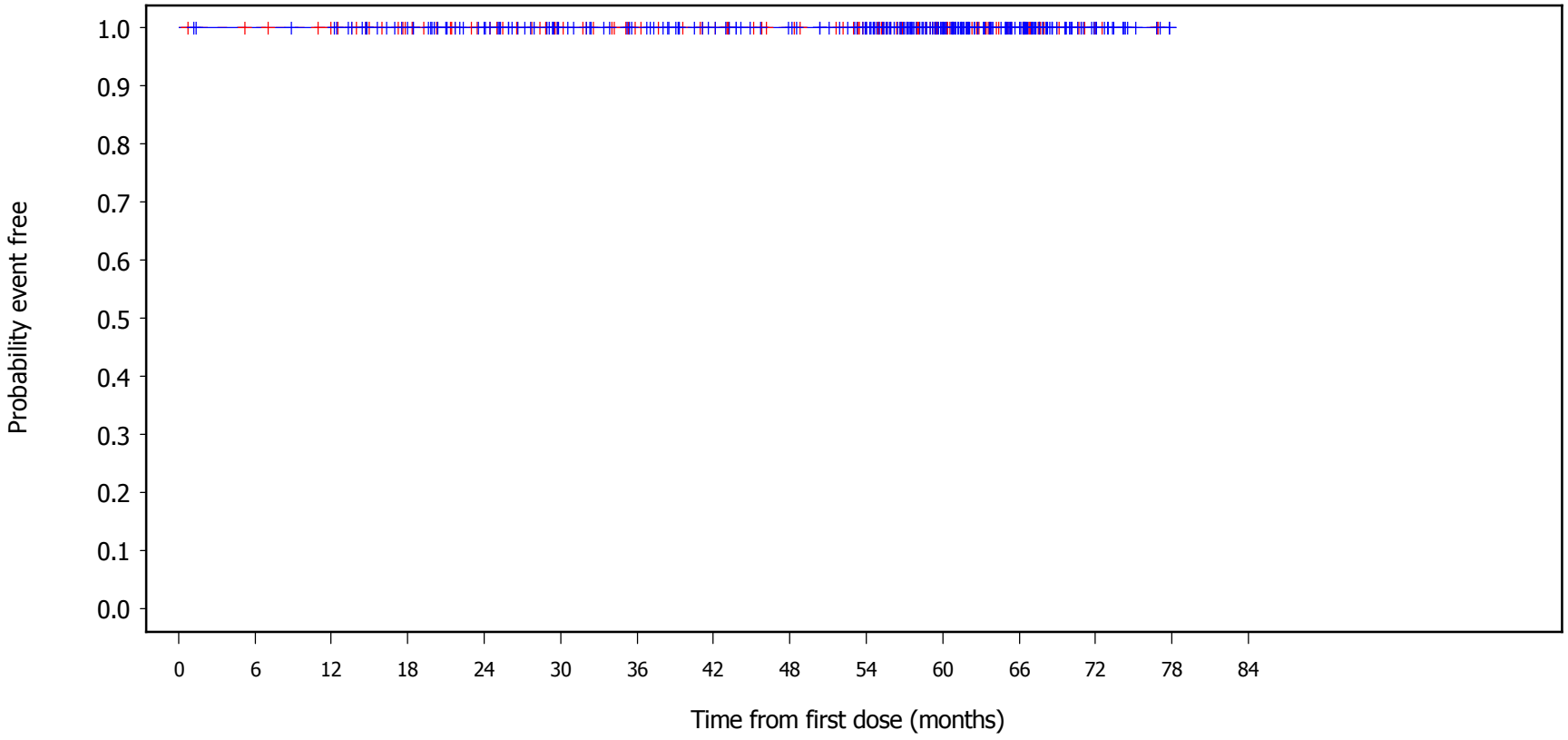
Figure 3.3.45 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	249	236	221	203	193	181	172	162	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

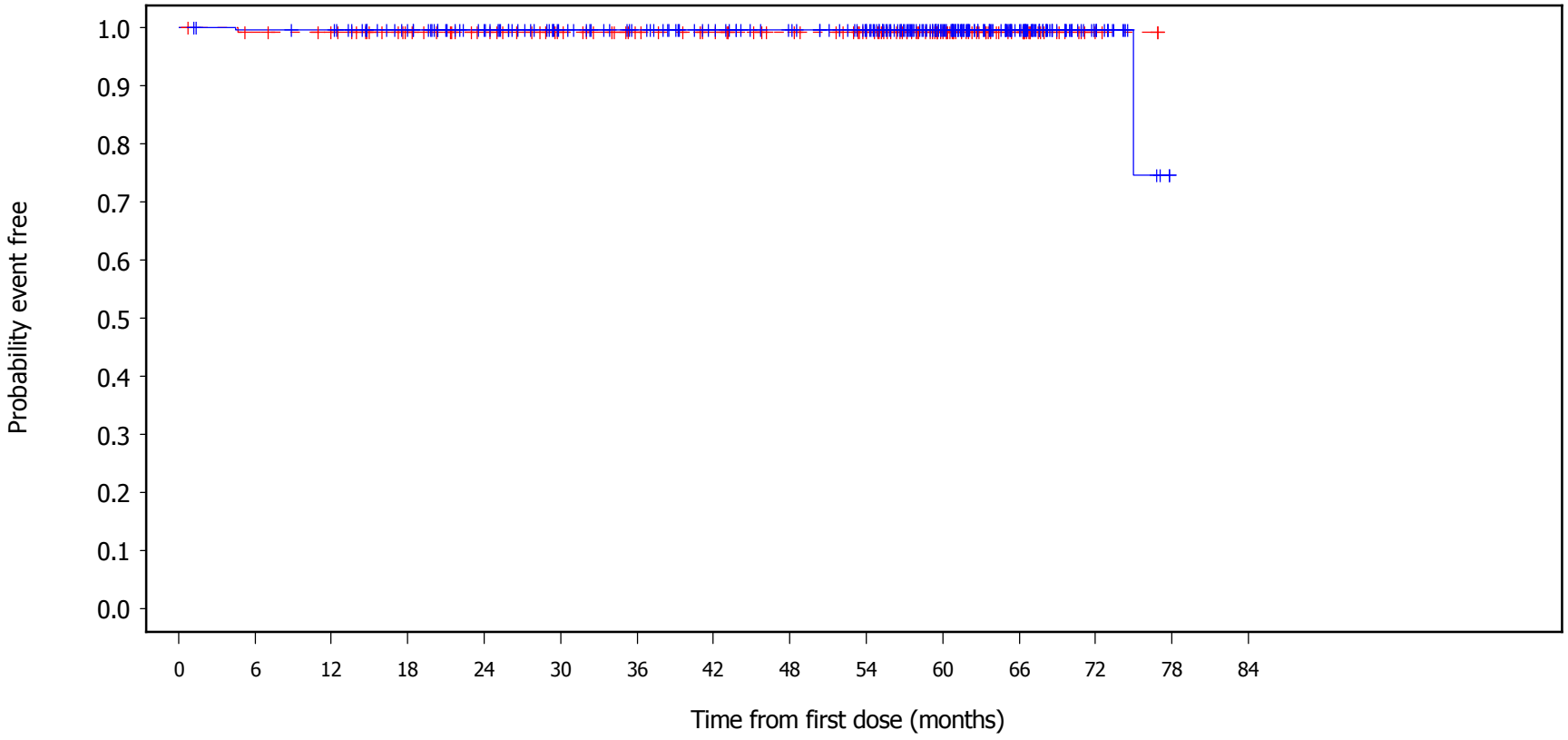
Figure 3.3.46 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

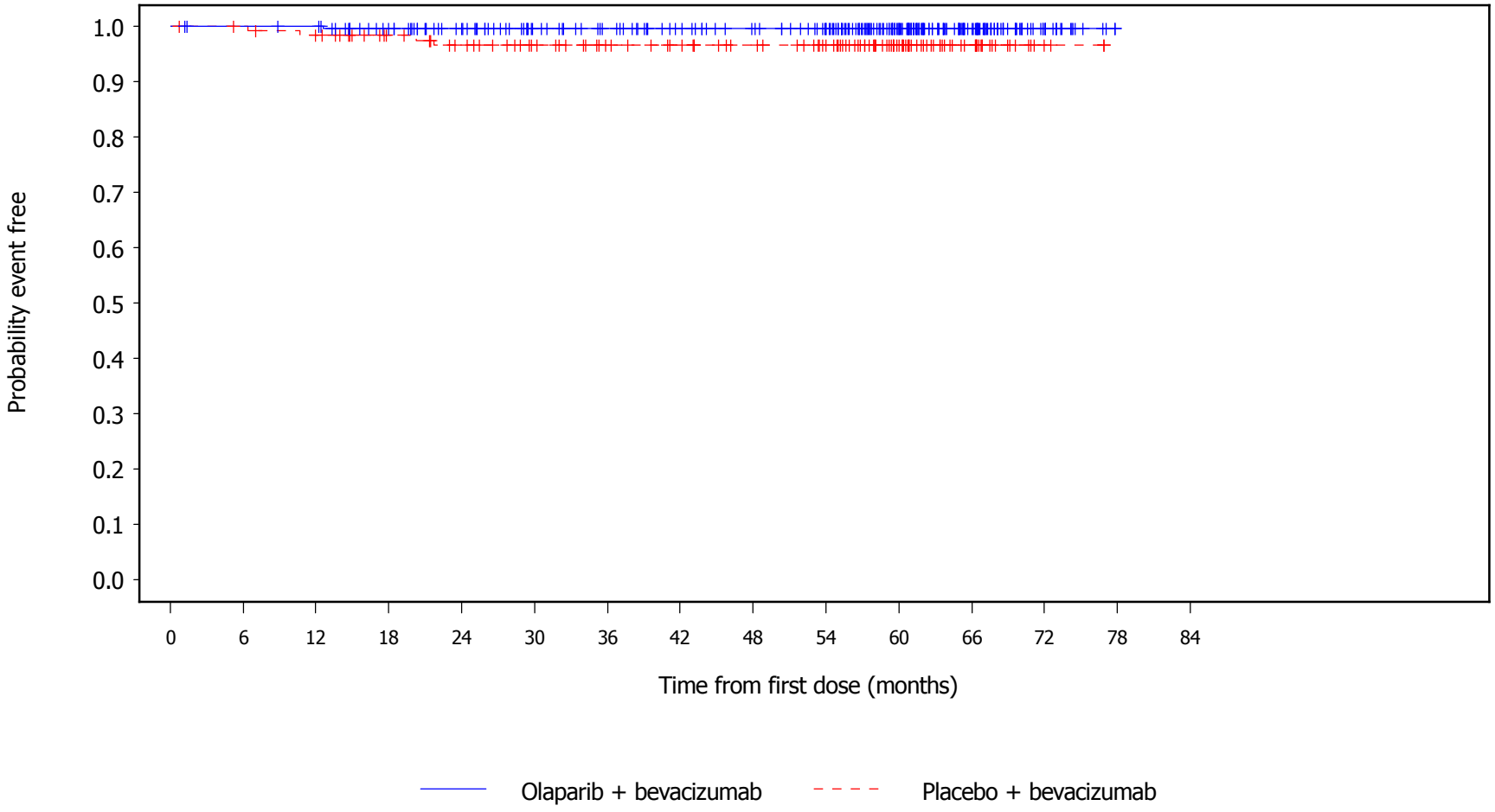
Figure 3.3.47 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	251	238	223	204	194	182	173	162	114	62	17	0	0	Olaparib + bevacizumab
131	128	125	115	107	98	89	84	77	68	44	21	2	0	0	Placebo + bevacizumab

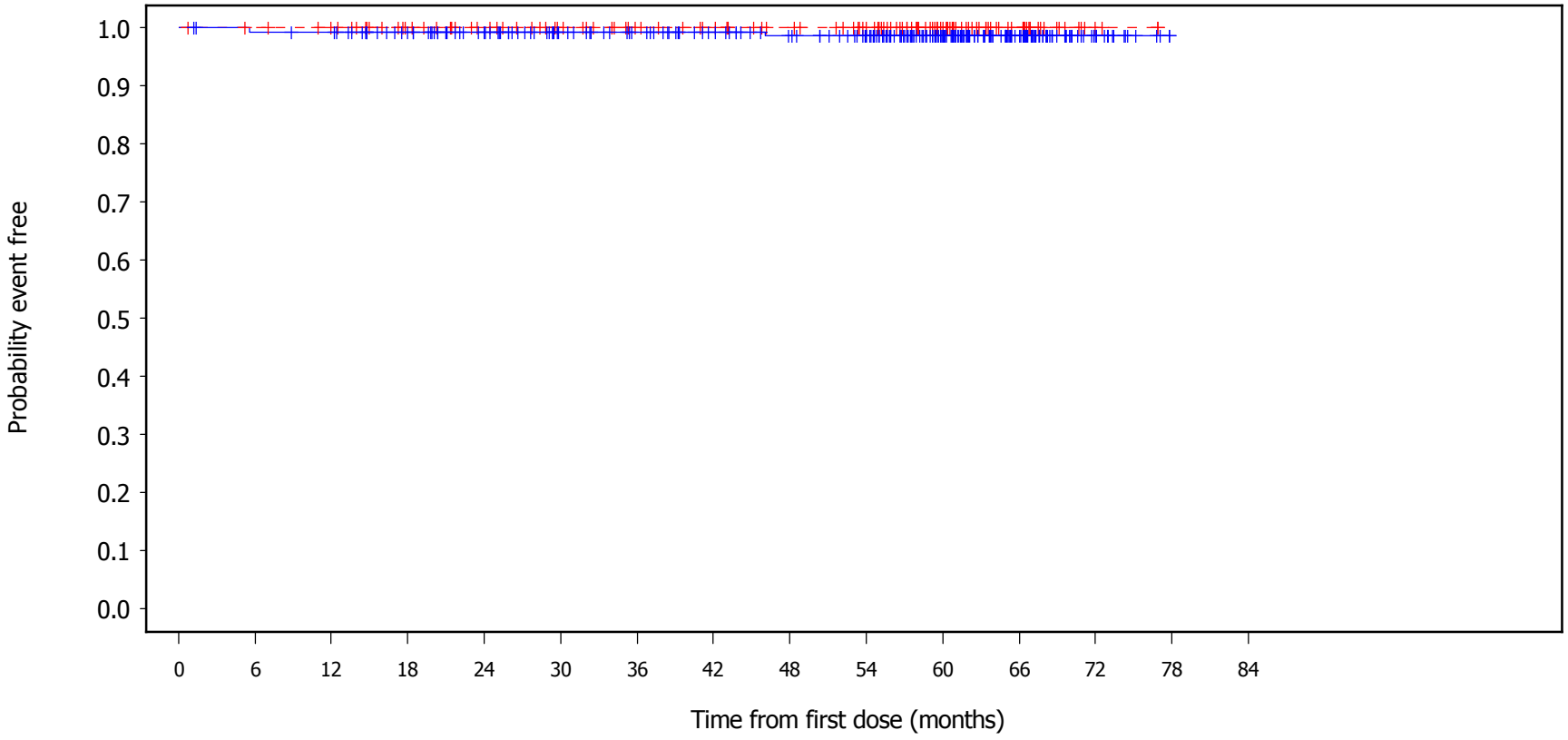
Figure 3.3.48 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	238	223	204	194	182	173	162	114	61	17	0	0	Olaparib + bevacizumab
131	129	125	115	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

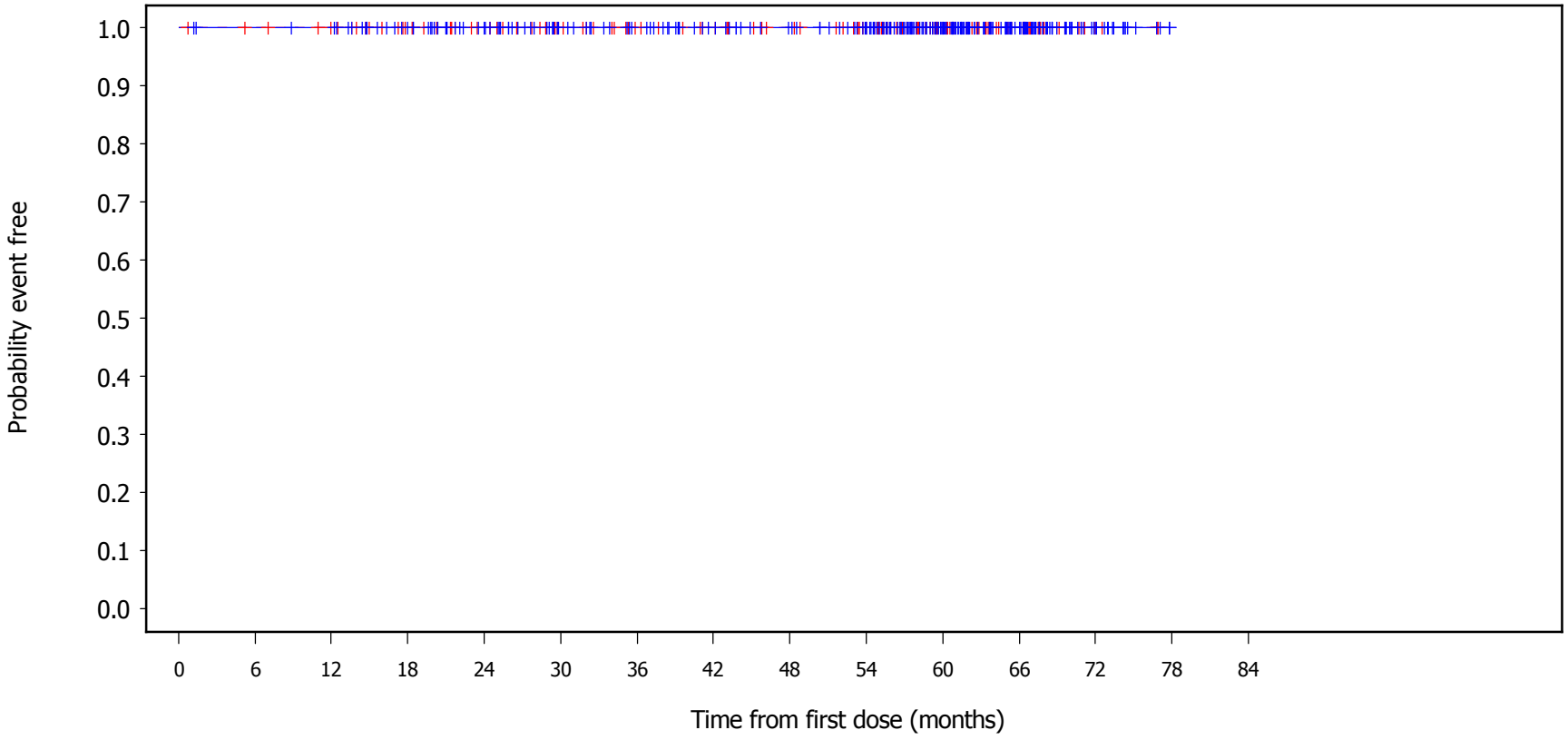
Figure 3.3.49 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	251	250	237	222	203	193	181	171	160	114	61	16	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

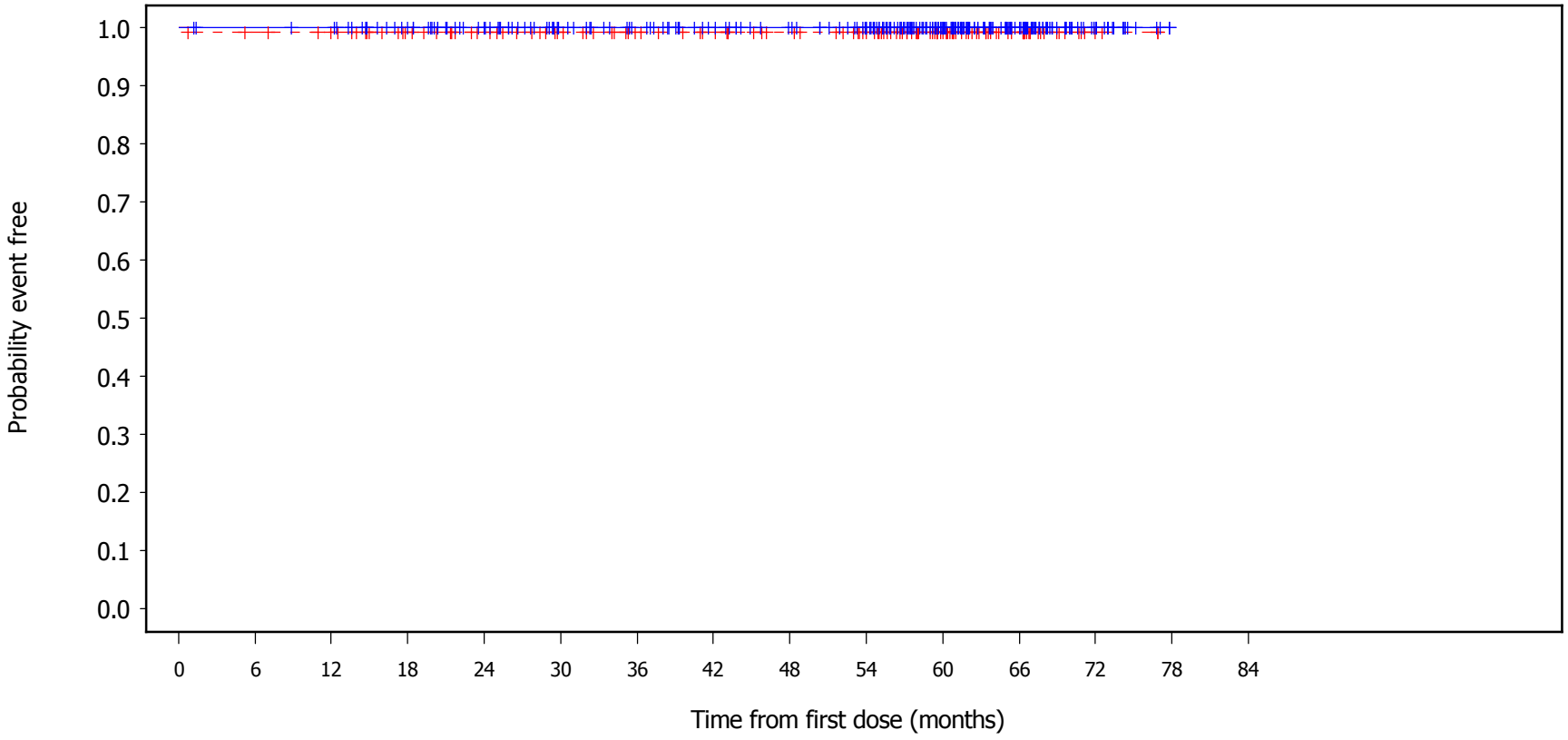
Figure 3.3.50 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Congestive heart failure
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

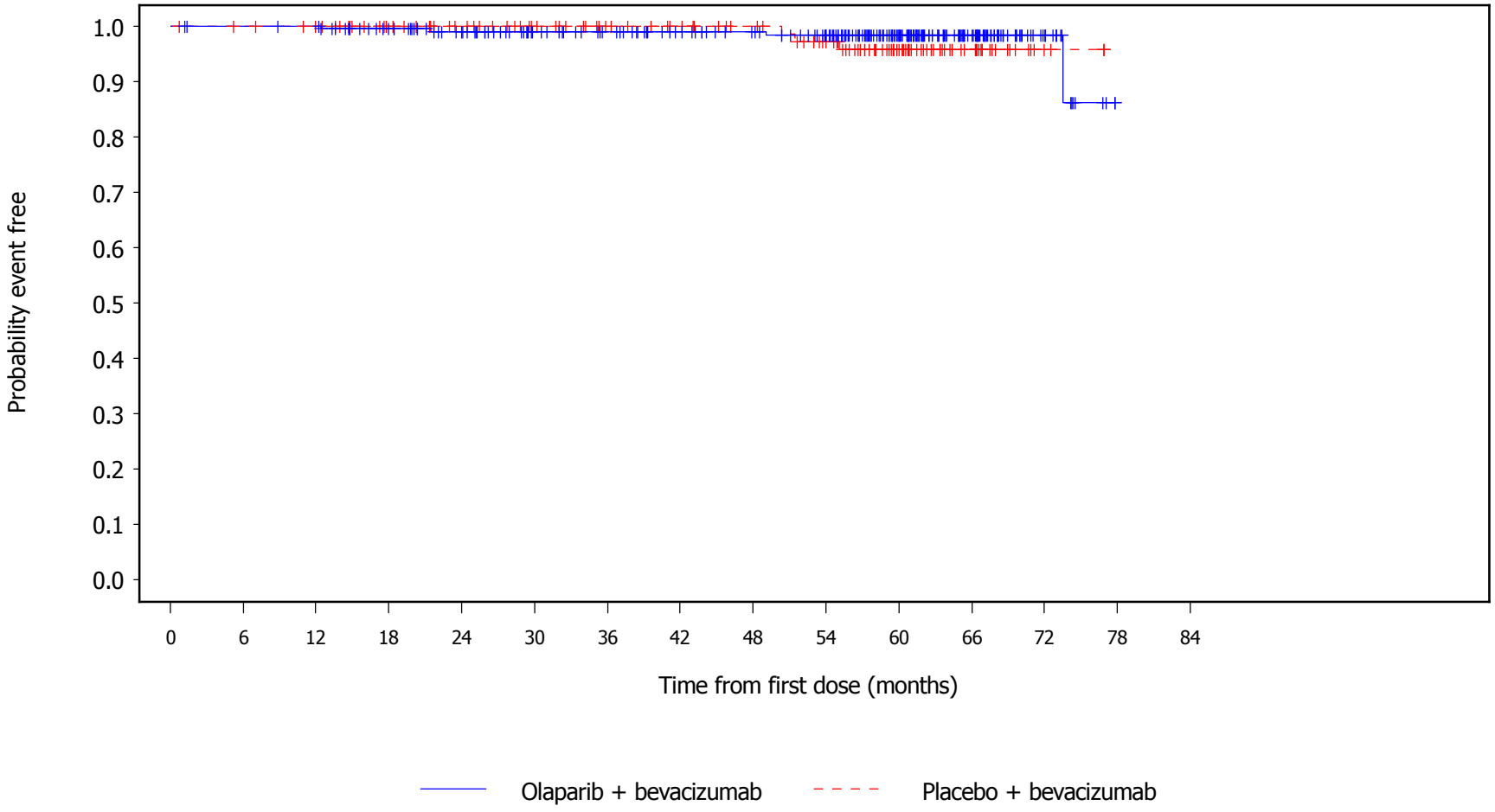
Figure 3.3.51 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	128	125	115	107	98	89	84	77	68	44	21	2	0	0	Placebo + bevacizumab

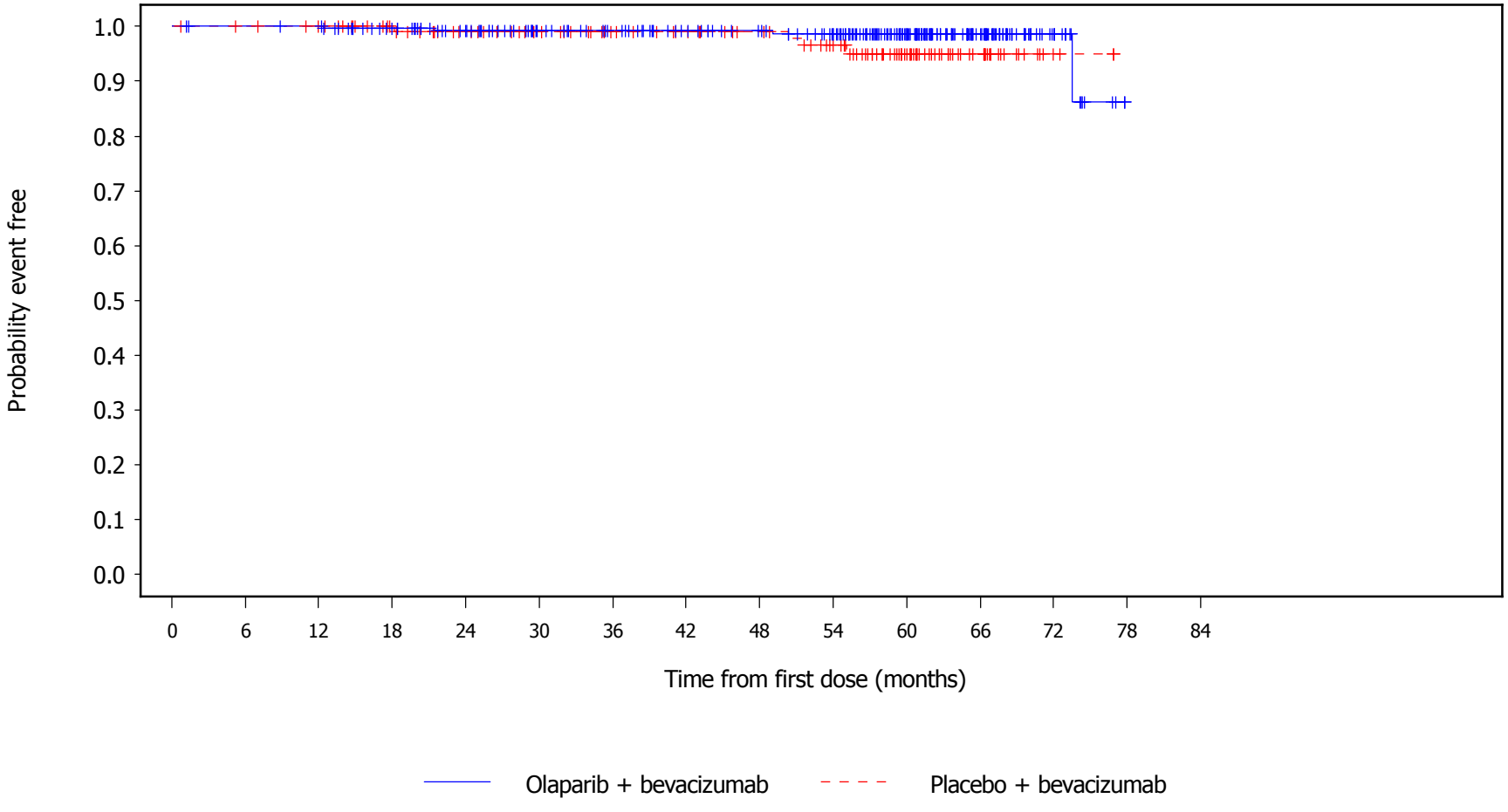
Figure 3.3.52 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	238	223	204	194	182	173	161	114	61	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	68	44	21	2	0	0	Placebo + bevacizumab

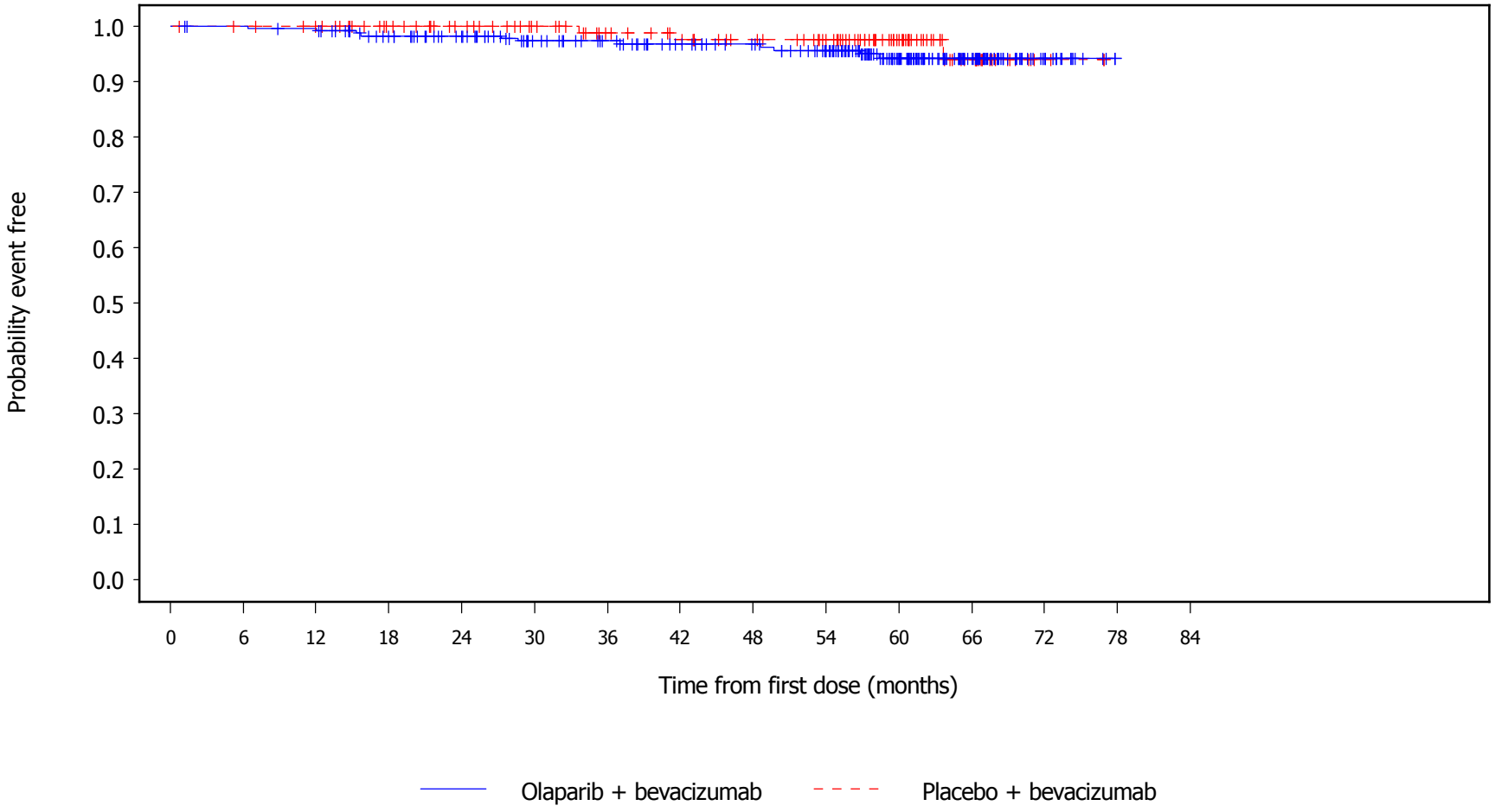
Figure 3.3.53 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	238	223	204	194	182	173	161	114	61	17	0	0	Olaparib + bevacizumab
131	129	126	116	107	99	90	85	78	68	44	21	2	0	0	Placebo + bevacizumab

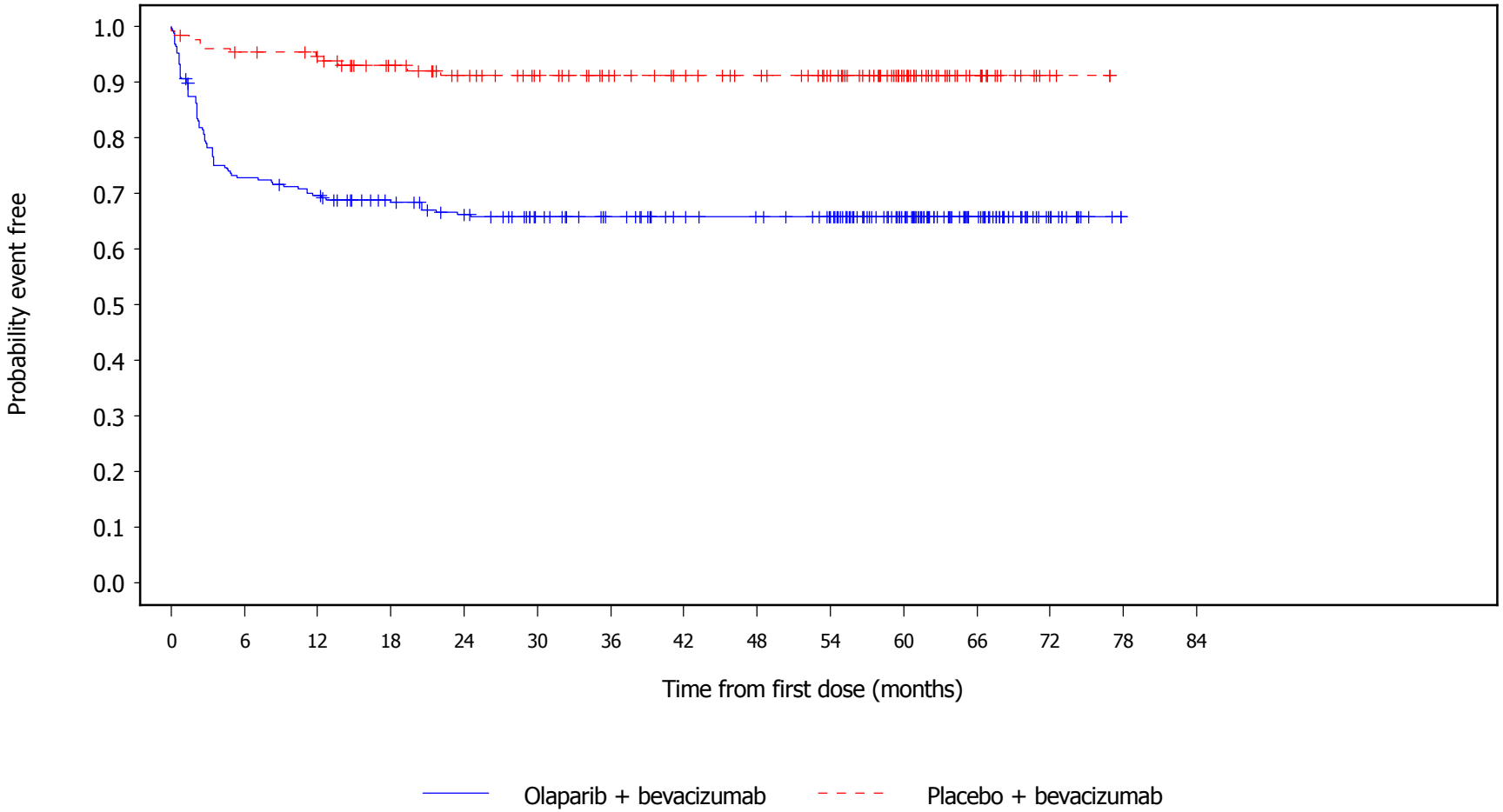
Figure 3.3.54 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G>=3: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	251	235	222	202	192	179	170	157	110	61	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	89	83	76	67	44	20	2	0	0	Placebo + bevacizumab

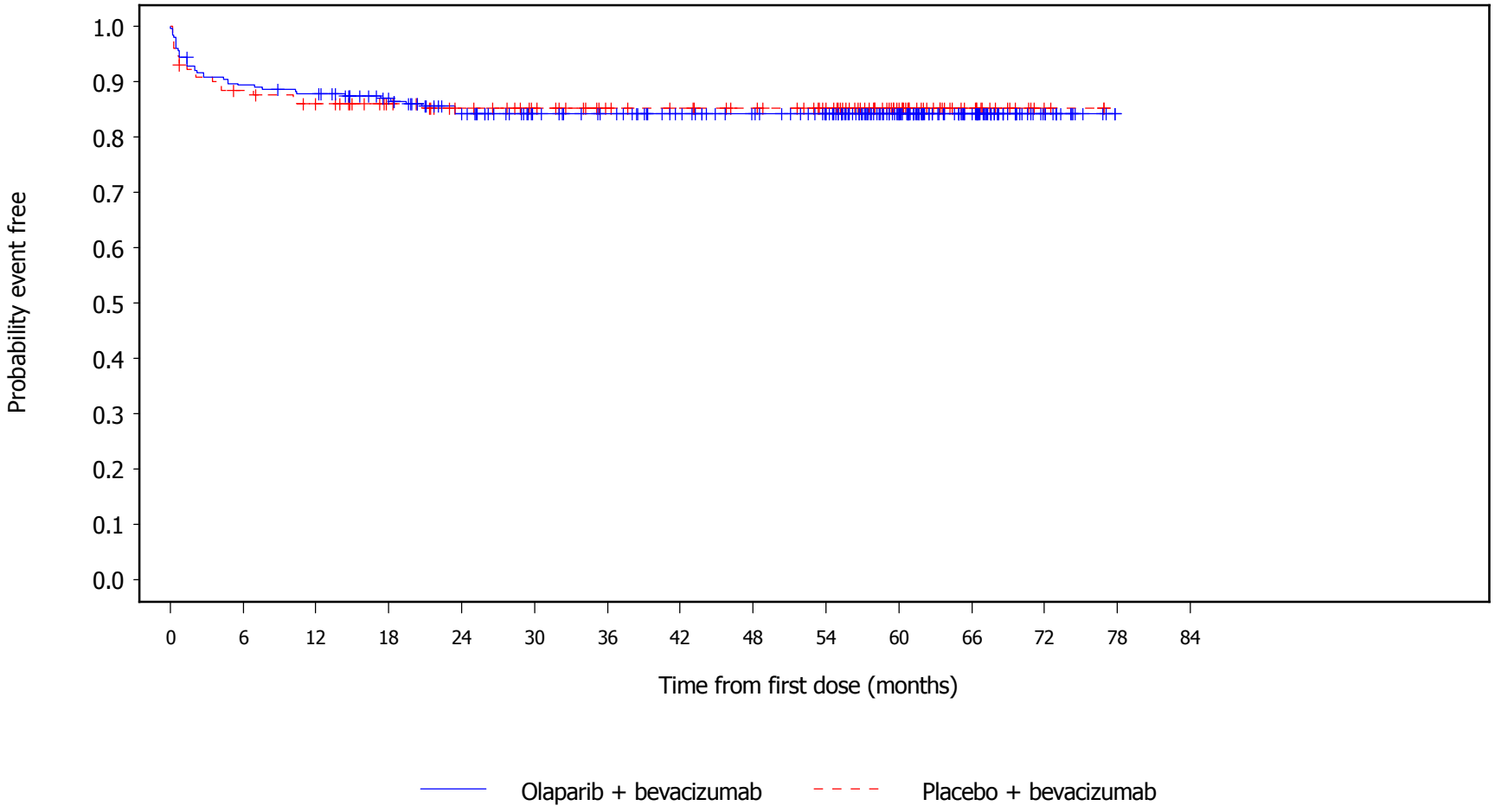
Figure 3.3.55 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	184	175	161	150	138	129	120	117	111	80	45	14	0	0	Olaparib + bevacizumab
131	123	119	108	98	90	81	76	71	62	40	19	2	0	0	Placebo + bevacizumab

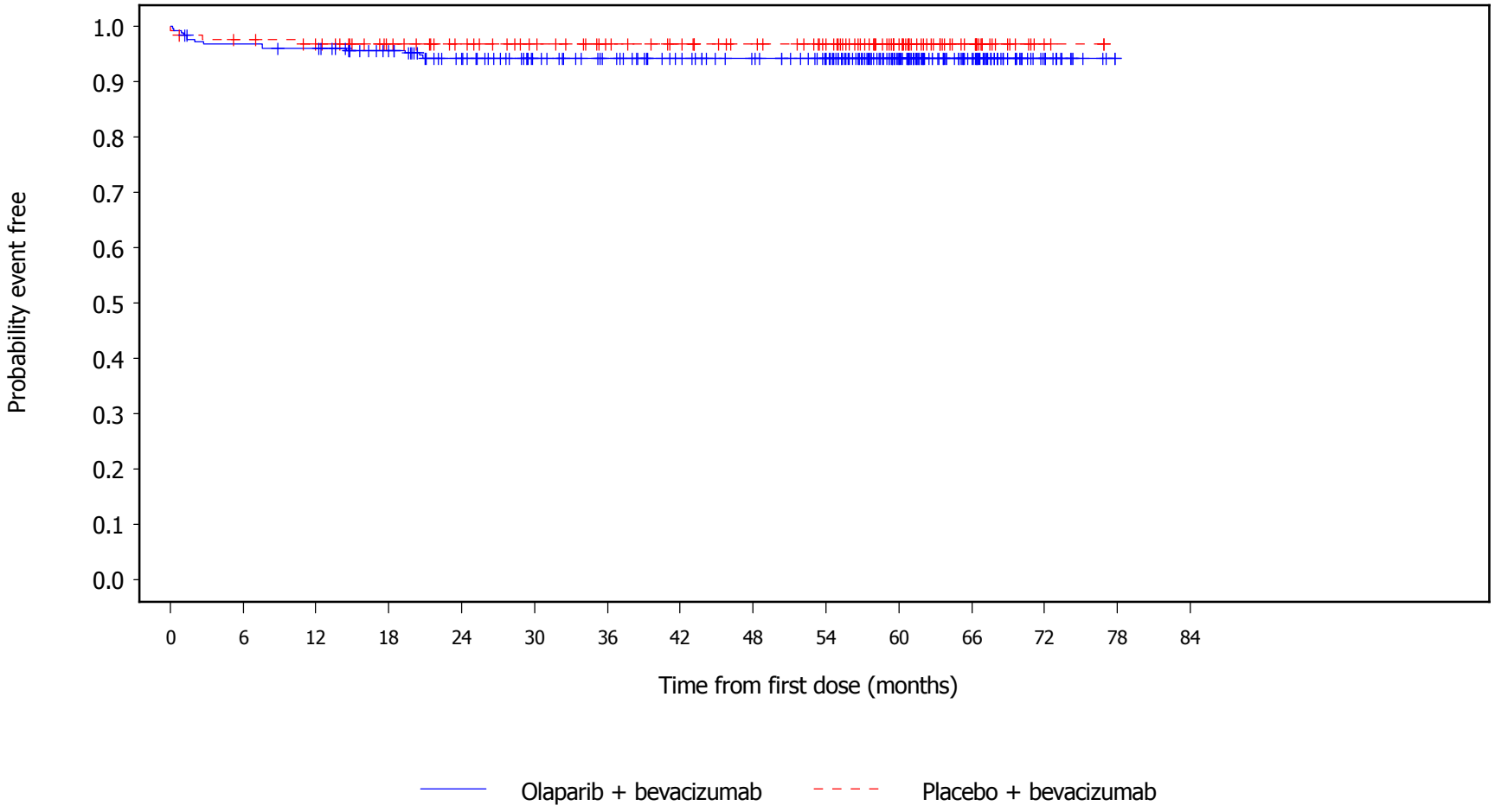
Figure 3.3.56 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	227	222	207	188	172	165	154	145	136	95	53	15	0	0	Olaparib + bevacizumab
131	114	108	99	91	84	75	72	68	59	37	16	2	0	0	Placebo + bevacizumab

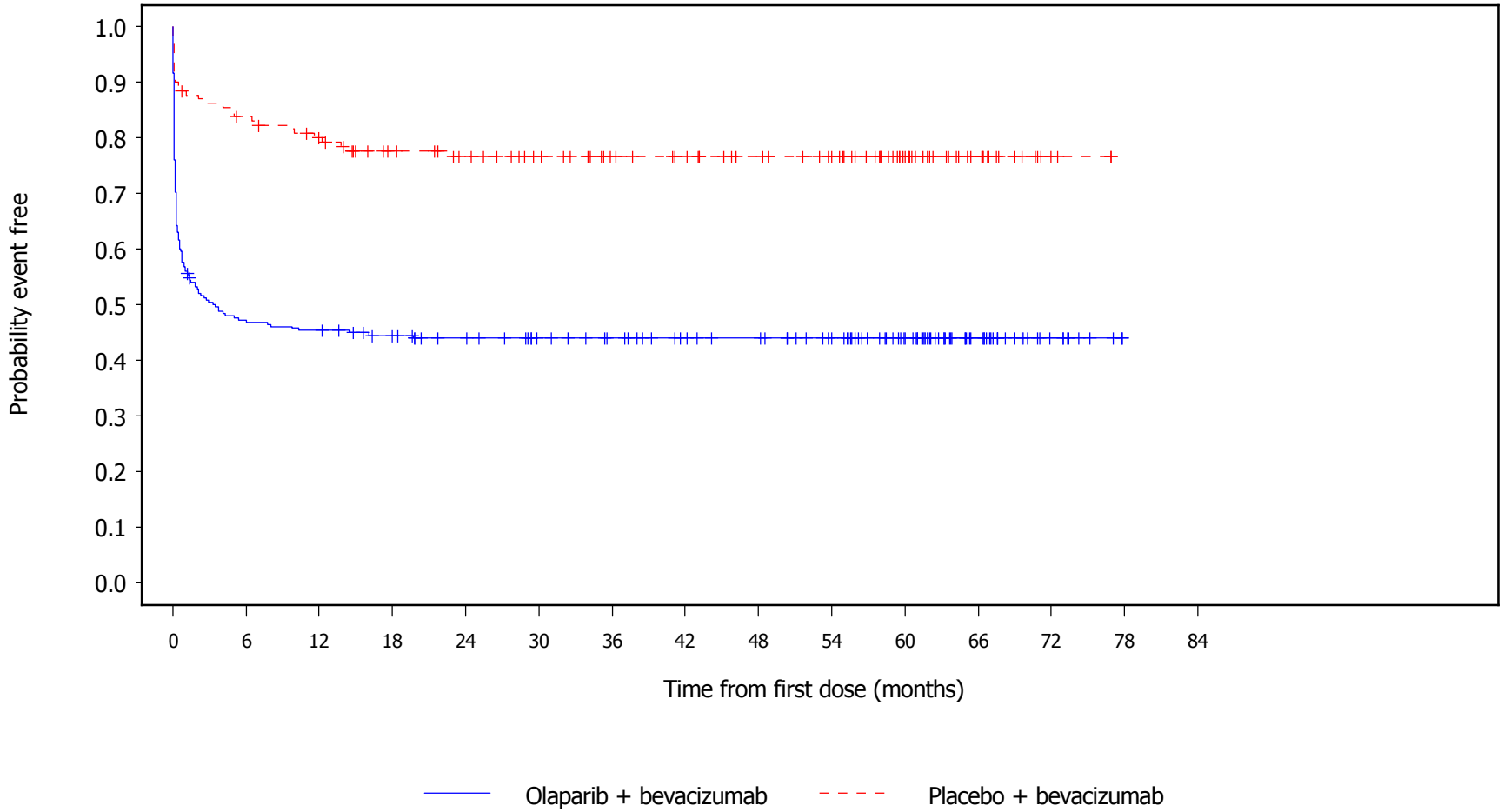
Figure 3.3.57 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	245	242	228	210	193	183	171	162	151	104	57	16	0	0	Olaparib + bevacizumab
131	126	122	112	104	96	88	83	76	67	44	21	2	0	0	Placebo + bevacizumab

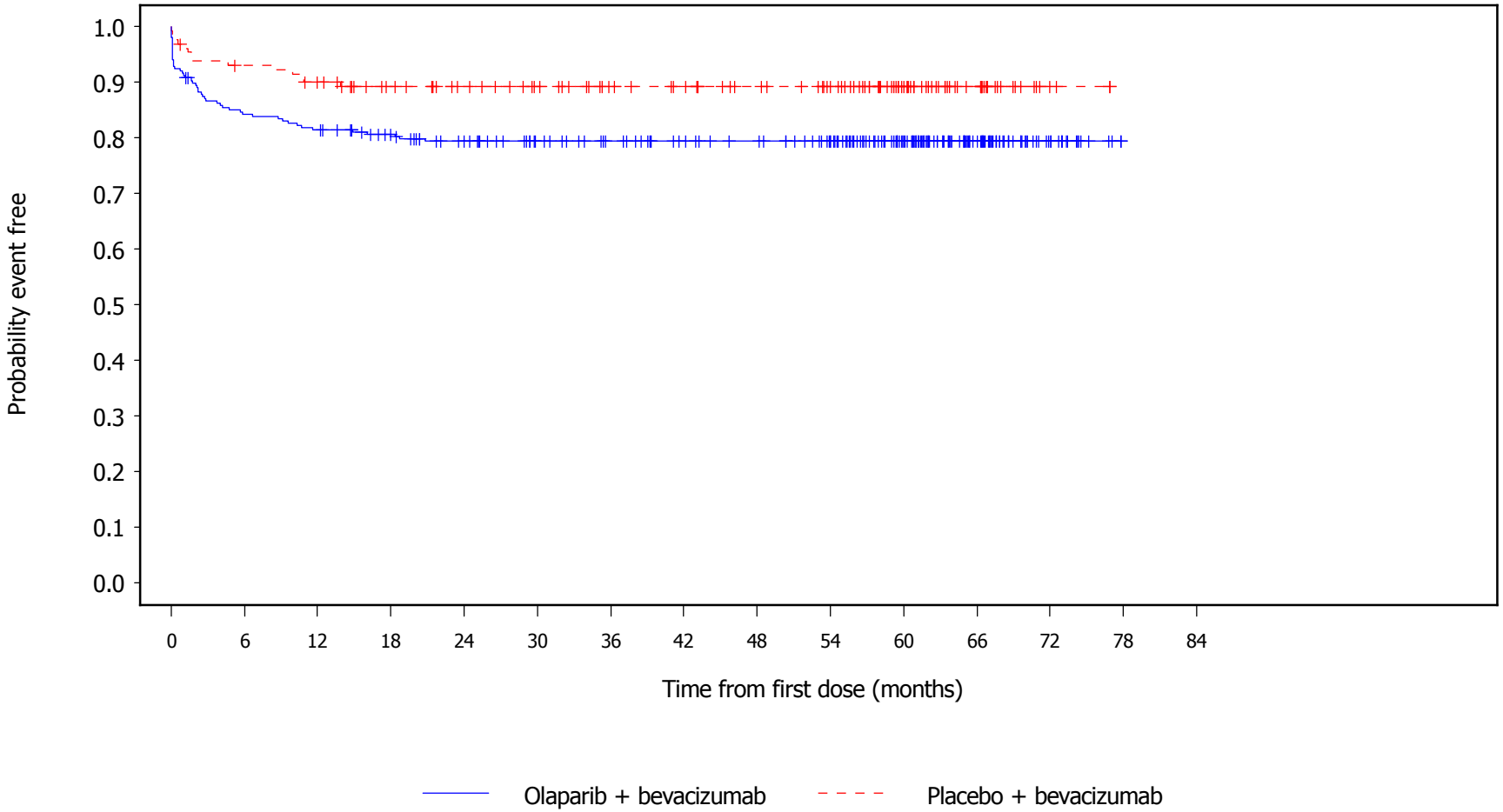
Figure 3.3.58 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	119	114	106	99	91	86	79	76	68	50	26	8	0	0	Olaparib + bevacizumab
131	108	100	89	83	76	68	64	57	51	34	17	2	0	0	Placebo + bevacizumab

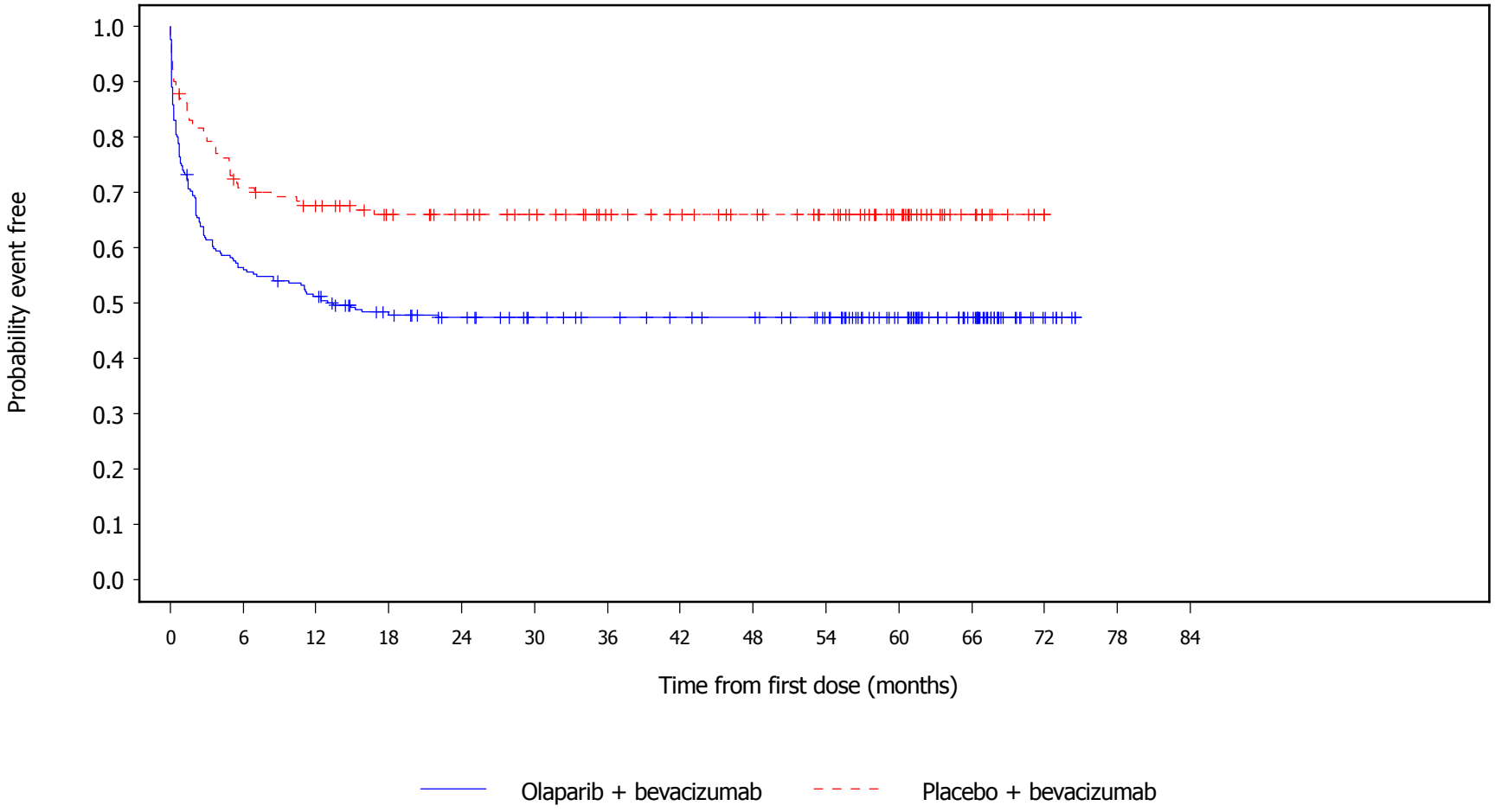
Figure 3.3.59 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	213	206	193	180	167	158	149	144	133	98	53	16	0	0	Olaparib + bevacizumab
131	120	114	104	97	90	81	77	70	62	41	21	2	0	0	Placebo + bevacizumab

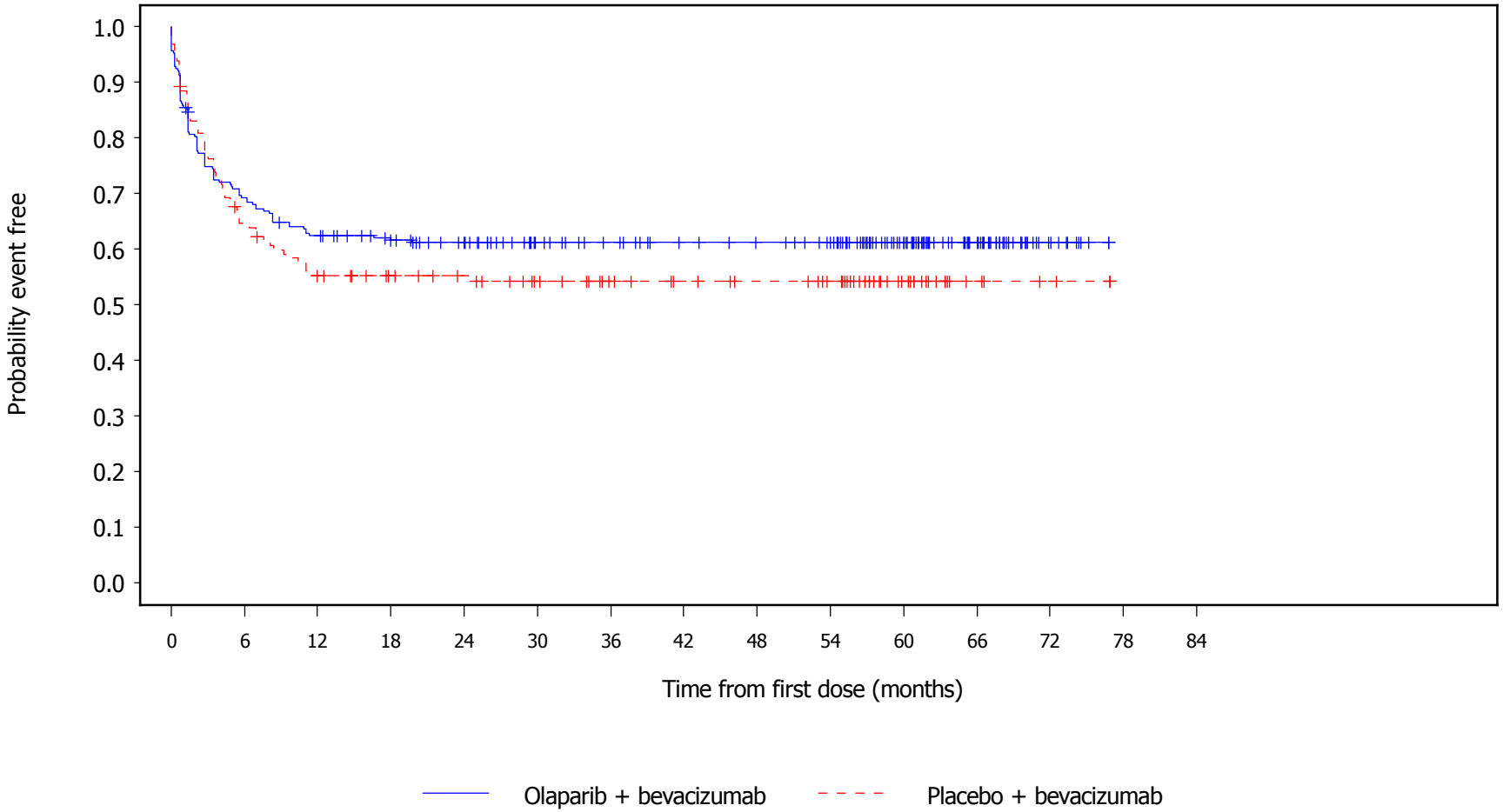
Figure 3.3.60 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	143	129	112	105	97	93	90	88	80	60	35	7	0	0	Olaparib + bevacizumab
131	91	84	75	70	64	56	52	47	41	27	10	0	0	0	Placebo + bevacizumab

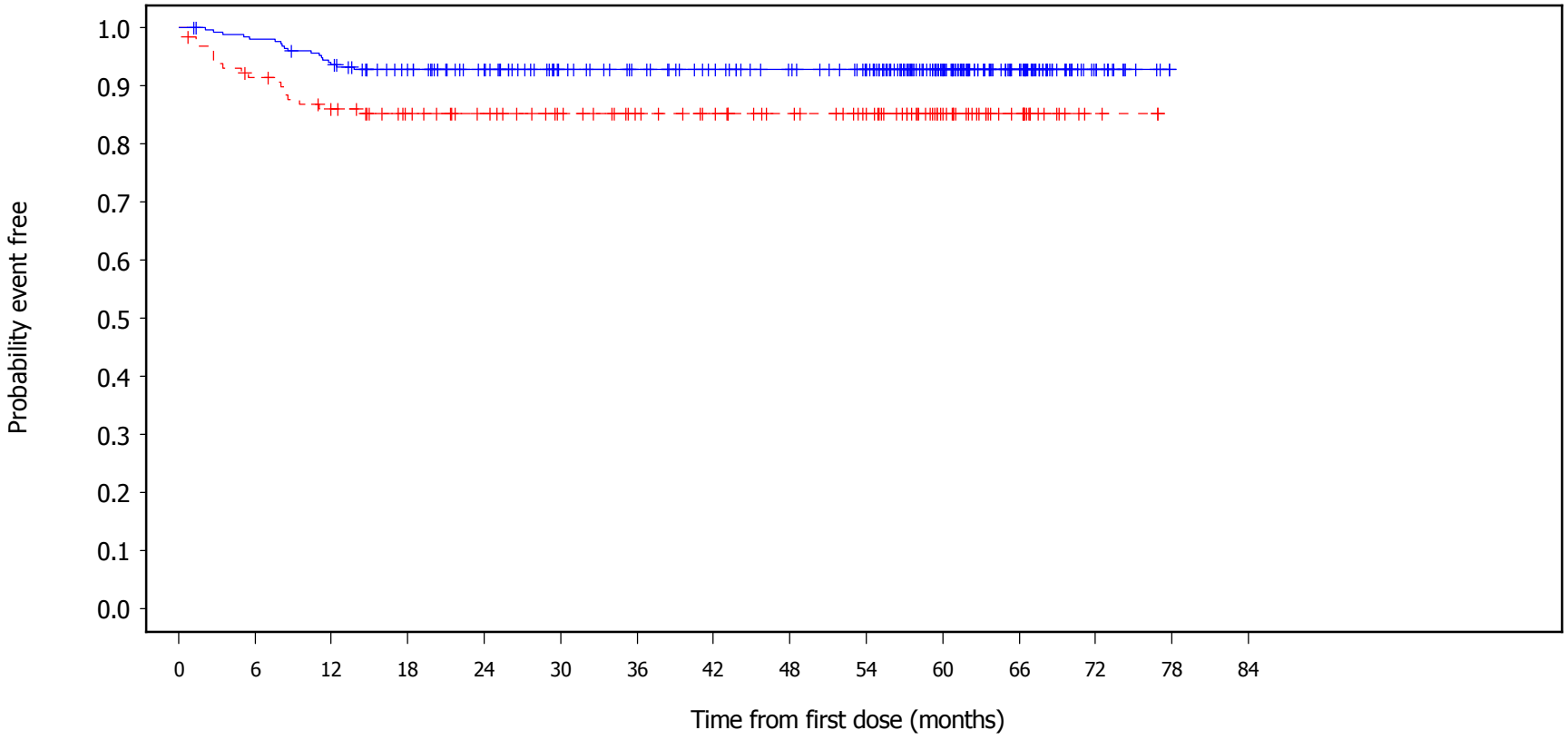
Figure 3.3.61 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	175	157	146	136	120	113	106	103	98	70	39	9	0	0	Olaparib + bevacizumab
131	83	69	63	59	52	45	41	38	34	18	5	2	0	0	Placebo + bevacizumab

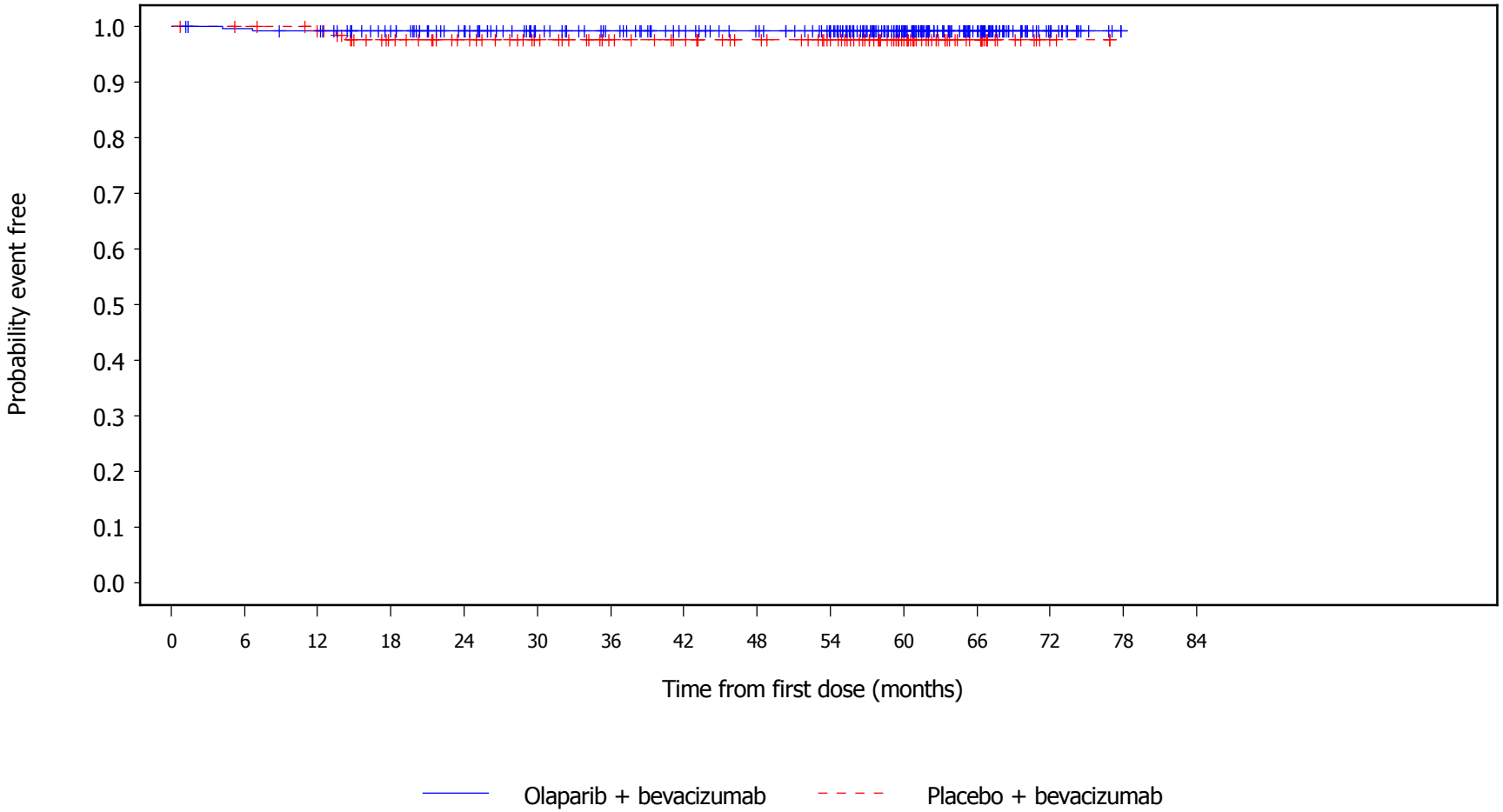
Figure 3.3.62 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	248	236	221	206	187	178	169	160	151	105	58	15	0	0	Olaparib + bevacizumab
131	118	108	98	91	83	75	70	63	55	35	18	2	0	0	Placebo + bevacizumab

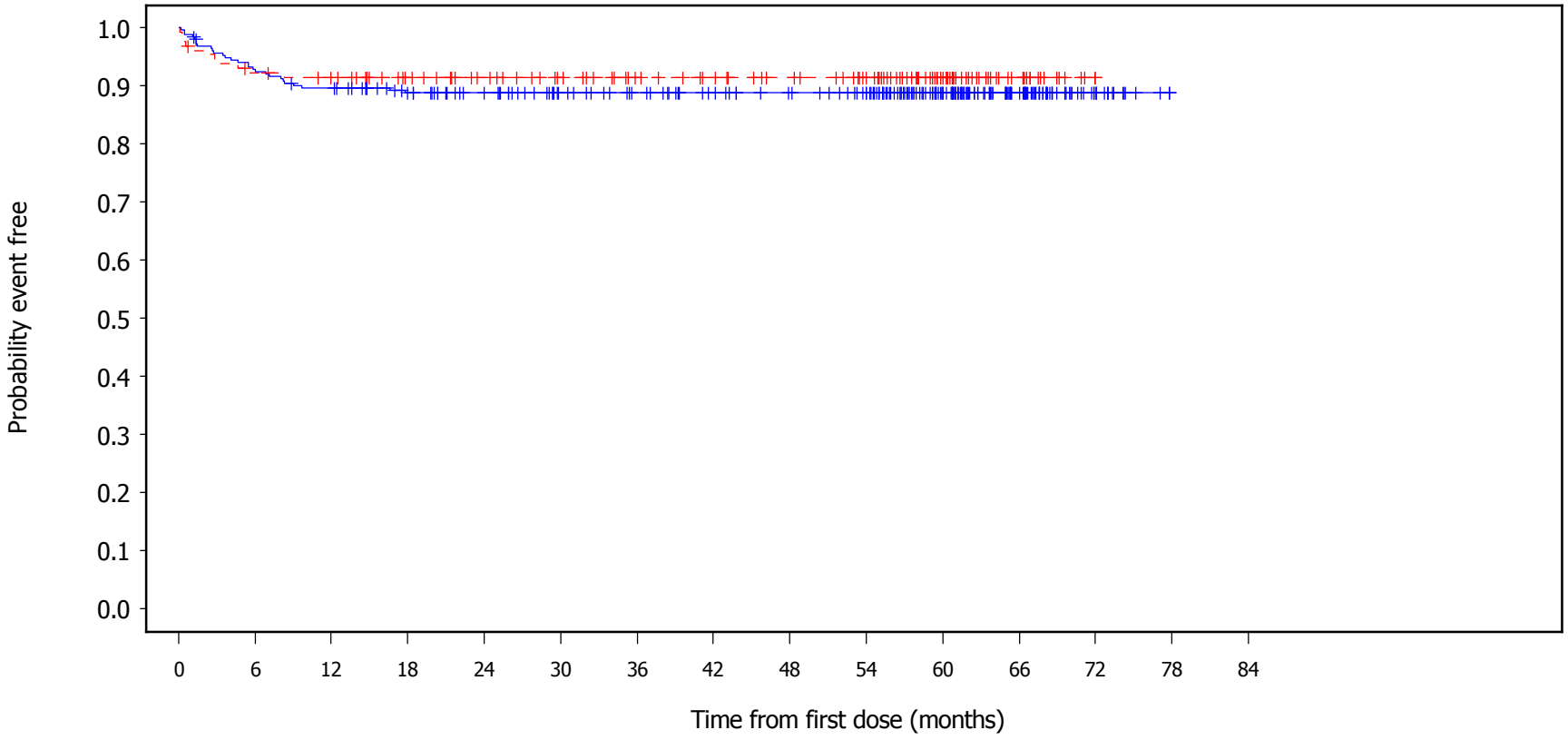
Figure 3.3.63 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	250	237	222	204	194	182	173	162	115	62	17	0	0	Olaparib + bevacizumab
131	129	125	113	105	96	87	82	75	66	42	19	2	0	0	Placebo + bevacizumab

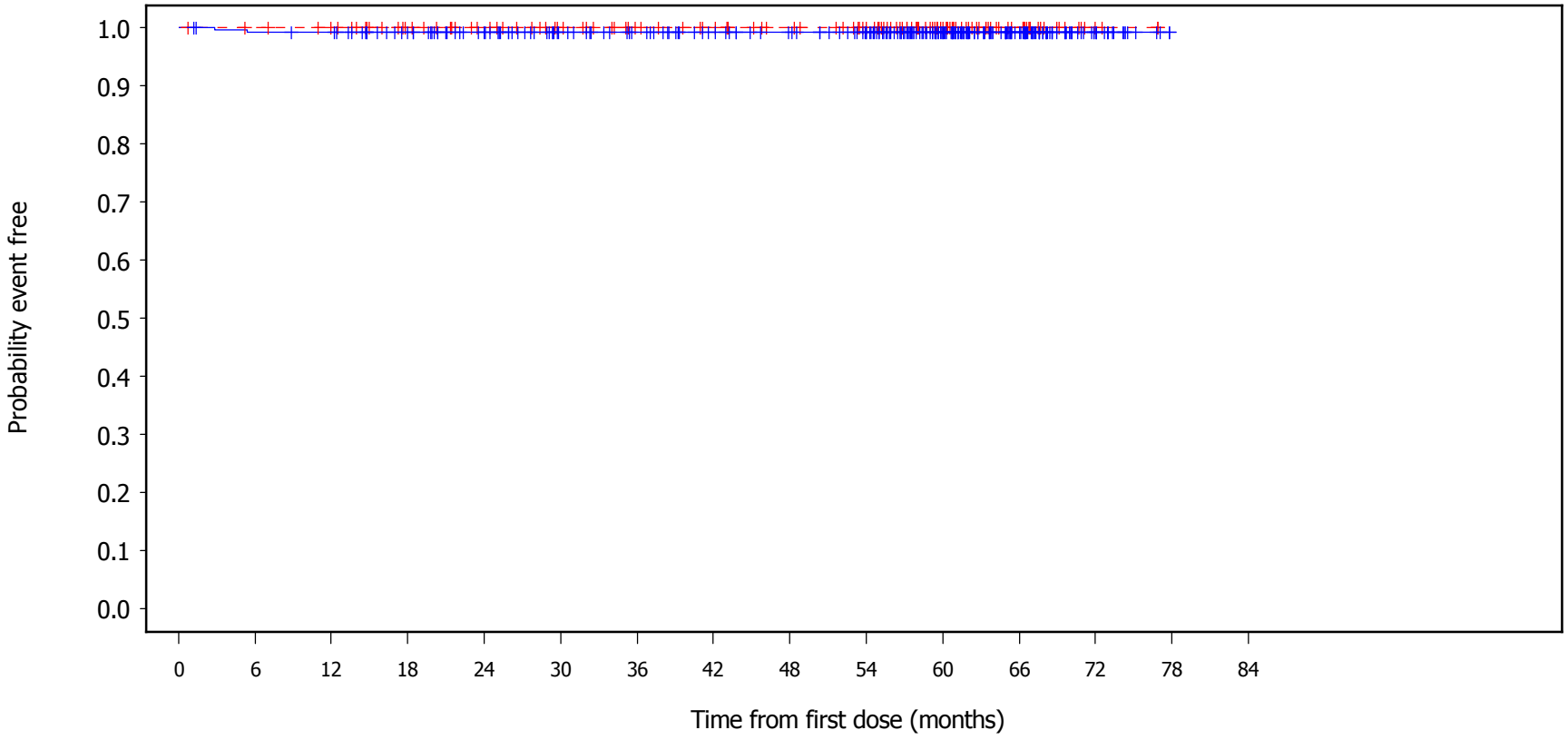
Figure 3.3.64 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	235	226	211	198	182	173	163	156	148	103	56	15	0	0	Olaparib + bevacizumab
131	119	115	105	97	89	80	75	69	60	37	15	0	0	0	Placebo + bevacizumab

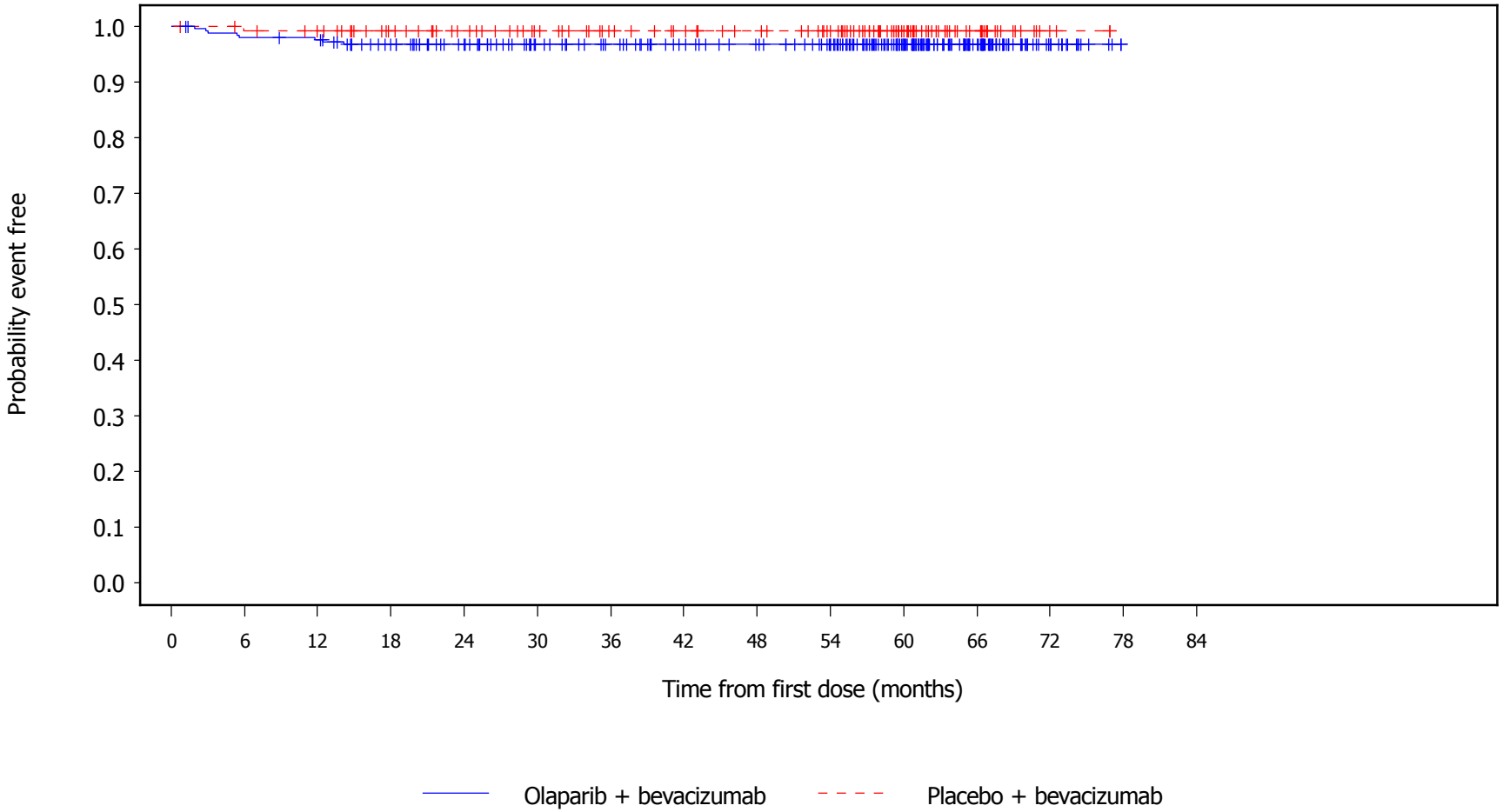
Figure 3.3.65 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	251	250	237	222	203	193	181	173	162	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

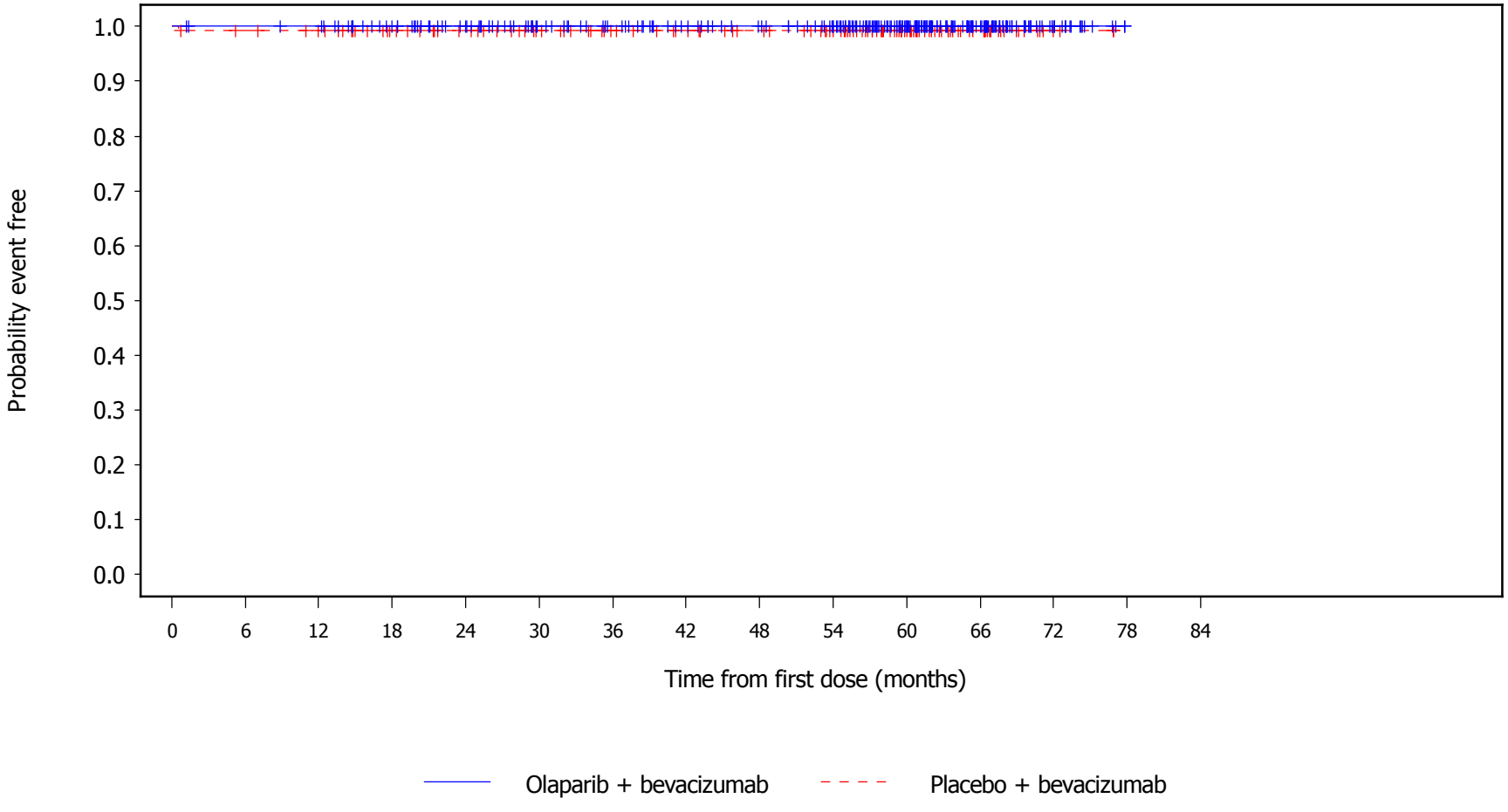
Figure 3.3.66 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	248	246	231	216	197	187	175	168	157	113	61	17	0	0	Olaparib + bevacizumab
131	128	125	115	107	98	89	84	78	69	44	21	2	0	0	Placebo + bevacizumab

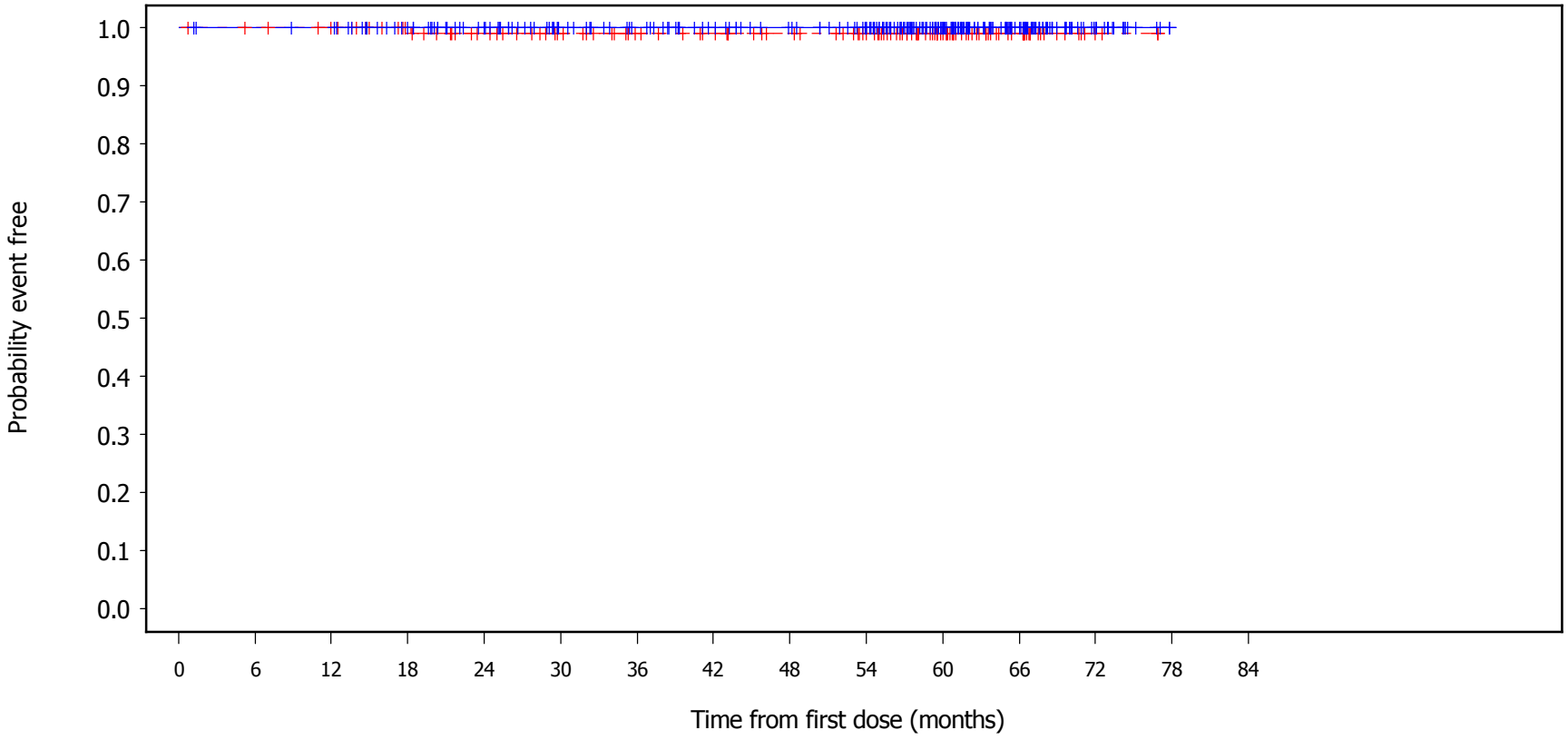
Figure 3.3.67 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Posterior Reversible Encephalopathy Syndrome (PRES)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	128	125	115	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

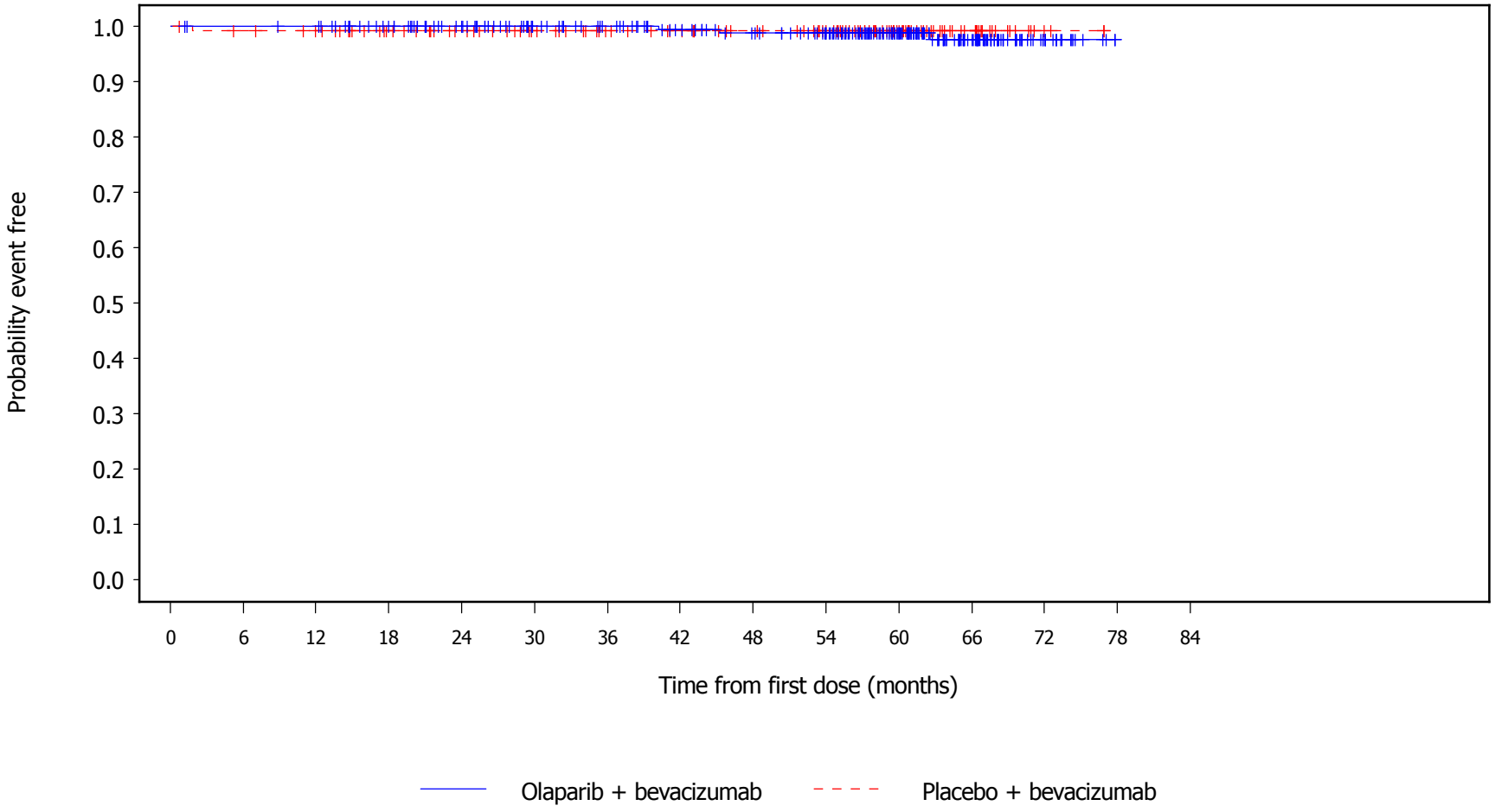
Figure 3.3.68 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	183	174	163	115	62	17	0	0	Olaparib + bevacizumab
131	129	126	116	107	98	89	84	77	68	43	20	2	0	0	Placebo + bevacizumab

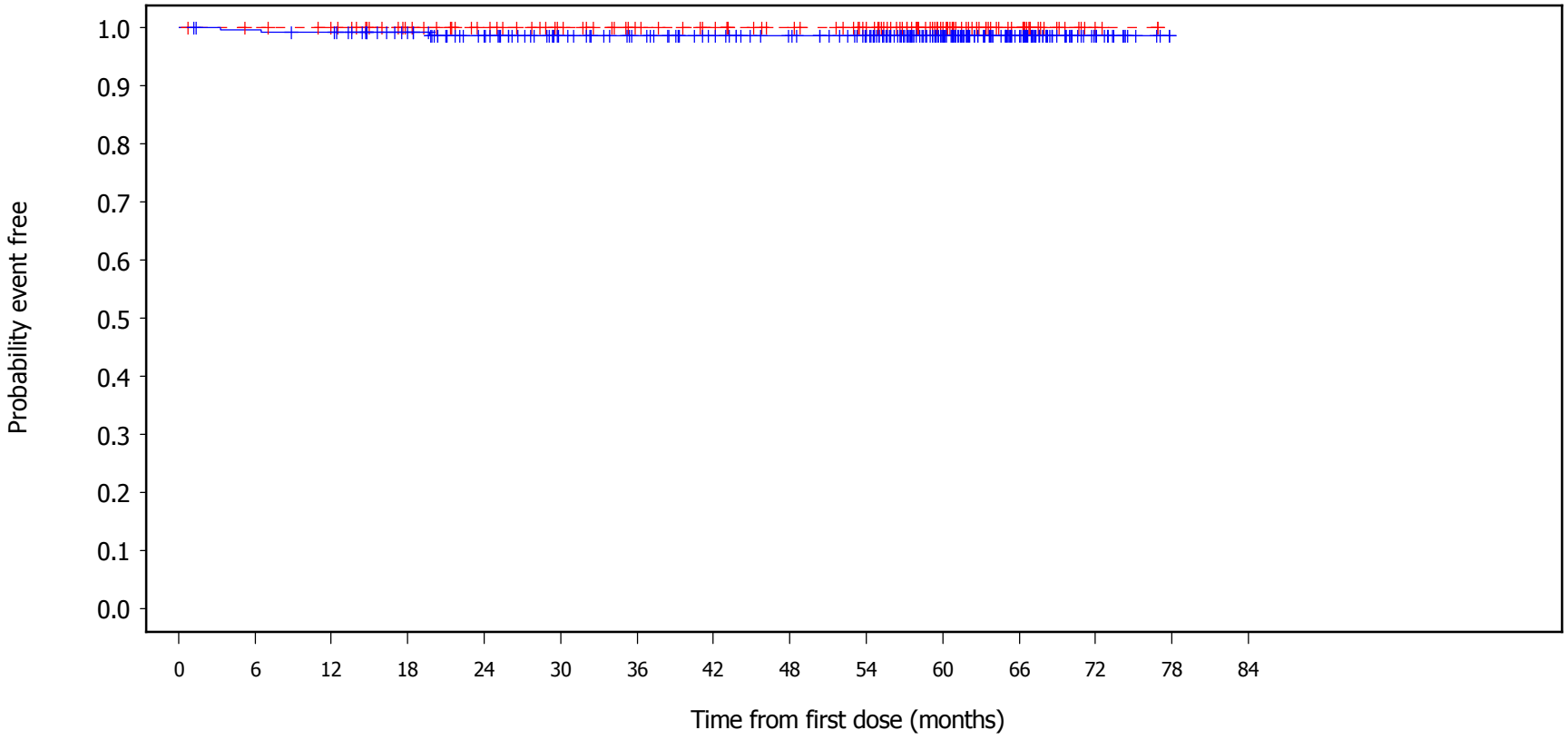
Figure 3.3.69 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	253	252	239	224	205	195	182	172	161	113	62	17	0	0	Olaparib + bevacizumab
131	128	125	115	107	98	89	84	77	68	43	21	2	0	0	Placebo + bevacizumab

Figure 3.3.70 PAOLA1: Kaplan-Meier plot of time to first occurrence of AESI G1-2: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

255	252	250	237	221	202	192	181	172	161	114	61	17	0	0	Olaparib + bevacizumab
131	129	126	116	108	99	90	85	78	69	44	21	2	0	0	Placebo + bevacizumab

Table 3.4.1 PAOLA1: Summary of subgroup analysis of AESI: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	37 (40.2)	NE (NE, NE)	48	8 (16.7)	NE (NE, NE)	2.92	1.43, 6.75	0.0023*
NED/CR [IDS]	74	34 (45.9)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	13 (32.5)	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	7.23	1.44,131.47	0.0117*
PR	49	18 (36.7)	NE (NE, NE)	25	3 (12.0)	NE (NE, NE)	3.81	1.29, 16.25	0.0132*
Interaction p-value									0.6593
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	55 (36.7)	NE (NE, NE)	65	7 (10.8)	NE (NE, NE)	4.01	1.95, 9.66	<0.0001*
non-tBRCAm	105	47 (44.8)	NE (NE, NE)	66	5 (7.6)	NE (NE, NE)	7.79	3.41, 22.45	<0.0001*
Interaction p-value									0.2788
First line treatment outcome (eCRF)									
NED [PDS]	89	35 (39.3)	NE (NE, NE)	47	8 (17.0)	NE (NE, NE)	2.78	1.36, 6.46	0.0041*
NED/CR [IDS]	74	32 (43.2)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	11 (28.2)	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	5.35	1.04, 97.72	0.0438*
PR	50	22 (44.0)	NE (NE, NE)	34	3 (8.8)	NE (NE, NE)	6.28	2.18, 26.54	0.0002*
Interaction p-value									0.4810
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	55 (37.4)	NE (NE, NE)	67	7 (10.4)	NE (NE, NE)	4.24	2.07, 10.22	<0.0001*
non-tBRCAm	108	47 (43.5)	NE (NE, NE)	64	5 (7.8)	NE (NE, NE)	7.28	3.19, 20.98	<0.0001*
Interaction p-value									0.3785
Age group									
<65 years	185	70 (37.8)	NE (NE, NE)	98	9 (9.2)	NE (NE, NE)	4.94	2.60, 10.61	<0.0001*
>=65 years	70	32 (45.7)	NE (NE, NE)	33	3 (9.1)	NE (NE, NE)	6.84	2.45, 28.45	<0.0001*
Interaction p-value									0.6348

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.1 PAOLA1: Summary of subgroup analysis of AESI: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	73 (40.1)	NE (NE, NE)	89	9 (10.1)	NE (NE, NE)	4.90	2.59, 10.51	<0.0001*
IV	73	29 (39.7)	NE (NE, NE)	42	3 (7.1)	NE (NE, NE)	6.93	2.46, 28.94	<0.0001*
Interaction p-value									0.6129
Region									
Europe	245	96 (39.2)	NE (NE, NE)	125	12 (9.6)	NE (NE, NE)	5.00	2.86, 9.61	<0.0001*
Japan	10	6 (60.0)	2.8 (0.3, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	74 (38.9)	NE (NE, NE)	100	8 (8.0)	NE (NE, NE)	6.10	3.13, 13.75	<0.0001*
(1) Restricted activity	61	28 (45.9)	NE (NE, NE)	30	4 (13.3)	NE (NE, NE)	4.17	1.63, 14.08	0.0016*
Interaction p-value									0.5651
Baseline CA-125 value									
<=ULN	228	89 (39.0)	NE (NE, NE)	117	11 (9.4)	NE (NE, NE)	5.09	2.84, 10.08	<0.0001*
>ULN	27	13 (48.1)	NE (NE, NE)	14	1 (7.1)	NE (NE, NE)	9.22	1.84,167.51	0.0036*
Interaction p-value									0.5569
Histological grade									
High grade	255	102 (40.0)	NE (NE, NE)	131	12 (9.2)	NE (NE, NE)	5.41	3.10, 10.37	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	69 (41.6)	NE (NE, NE)	80	8 (10.0)	NE (NE, NE)	5.29	2.70, 11.93	<0.0001*
Residue	79	28 (35.4)	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	8.99	2.71, 55.75	<0.0001*
Interaction p-value									0.4989

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.1 PAOLA1: Summary of subgroup analysis of AESI: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	52 (35.6)	NE (NE, NE)	78	10 (12.8)	NE (NE, NE)	3.25	1.73, 6.80	0.0001*
Interval	99	45 (45.5)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	63 (39.9)	NE (NE, NE)	77	6 (7.8)	NE (NE, NE)	6.25	2.94, 16.18	<0.0001*
Non-tBRCAm	97	39 (40.2)	NE (NE, NE)	54	6 (11.1)	NE (NE, NE)	4.57	2.09, 12.03	<0.0001*
Interaction p-value									0.6098
Status somatic BRCA mutations									
sBRCAm	25	10 (40.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	27 (39.1)	NE (NE, NE)	36	4 (11.1)	NE (NE, NE)	4.37	1.71, 14.79	0.0012*
Non-BRCAm	43	20 (46.5)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.2 PAOLA1: Summary of subgroup analysis of AESI: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	16 (17.4)	NE (NE, NE)	48	8 (16.7)	NE (NE, NE)	1.01	0.44, 2.49	0.9840
NED/CR [IDS]	74	21 (28.4)	NE (NE, NE)	38	7 (18.4)	NE (NE, NE)	1.57	0.70, 3.98	0.2872
NED/CR [Chemo]	40	9 (22.5)	NE (NE, NE)	20	5 (25.0)	NE (NE, NE)	0.89	0.31, 2.91	0.8421
PR	49	7 (14.3)	NE (NE, NE)	25	2 (8.0)	NE (NE, NE)	1.89	0.46, 12.66	0.4036
Interaction p-value									0.7661
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	29 (19.3)	NE (NE, NE)	65	11 (16.9)	NE (NE, NE)	1.13	0.58, 2.36	0.7326
non-tBRCAm	105	24 (22.9)	NE (NE, NE)	66	11 (16.7)	NE (NE, NE)	1.41	0.71, 2.99	0.3388
Interaction p-value									0.6626
First line treatment outcome (eCRF)									
NED [PDS]	89	19 (21.3)	NE (NE, NE)	47	7 (14.9)	NE (NE, NE)	1.44	0.63, 3.70	0.3940
NED/CR [IDS]	74	19 (25.7)	NE (NE, NE)	32	6 (18.8)	NE (NE, NE)	1.37	0.58, 3.77	0.4870
NED/CR [Chemo]	39	5 (12.8)	NE (NE, NE)	17	4 (23.5)	NE (NE, NE)	0.51	0.13, 2.04	0.3195
PR	50	10 (20.0)	NE (NE, NE)	34	5 (14.7)	NE (NE, NE)	1.41	0.50, 4.53	0.5225
Interaction p-value									0.5923
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	29 (19.7)	NE (NE, NE)	67	12 (17.9)	NE (NE, NE)	1.09	0.57, 2.21	0.8091
non-tBRCAm	108	24 (22.2)	NE (NE, NE)	64	10 (15.6)	NE (NE, NE)	1.46	0.72, 3.19	0.3055
Interaction p-value									0.5630
Age group									
<65 years	185	38 (20.5)	NE (NE, NE)	98	17 (17.3)	NE (NE, NE)	1.20	0.69, 2.18	0.5295
>=65 years	70	15 (21.4)	NE (NE, NE)	33	5 (15.2)	NE (NE, NE)	1.37	0.53, 4.23	0.5275
Interaction p-value									0.8167

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.2 PAOLA1: Summary of subgroup analysis of AESI: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

Subgroup	Olaparib + bevacizumab (N=255) n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Placebo + bevacizumab (N=131) n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	38 (20.9)	NE (NE, NE)	89	14 (15.7)	NE (NE, NE)	1.36	0.75, 2.59	0.3201
IV	73	15 (20.5)	NE (NE, NE)	42	8 (19.0)	NE (NE, NE)	1.04	0.45, 2.57	0.9349
Interaction p-value									0.6194
Region									
Europe	245	46 (18.8)	NE (NE, NE)	125	21 (16.8)	NE (NE, NE)	1.10	0.67, 1.88	0.7108
Japan	10	7 (70.0)	2.1 (0.5, NE)	6	1 (16.7)	NE (NE, NE)	6.62	1.17,123.99	0.0299*
Interaction p-value									0.0536
ECOG performance status at Baseline									
(0) Normal activity	190	40 (21.1)	NE (NE, NE)	100	15 (15.0)	NE (NE, NE)	1.41	0.80, 2.64	0.2444
(1) Restricted activity	61	12 (19.7)	NE (NE, NE)	30	7 (23.3)	NE (NE, NE)	0.83	0.33, 2.22	0.6901
Interaction p-value									0.3477
Baseline CA-125 value									
<=ULN	228	48 (21.1)	NE (NE, NE)	117	19 (16.2)	NE (NE, NE)	1.31	0.78, 2.28	0.3139
>ULN	27	5 (18.5)	NE (NE, NE)	14	3 (21.4)	NE (NE, NE)	0.82	0.20, 4.00	0.7887
Interaction p-value									0.5570
Histological grade									
High grade	255	53 (20.8)	NE (NE, NE)	131	22 (16.8)	NE (NE, NE)	1.24	0.77, 2.08	0.3894
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	38 (22.9)	NE (NE, NE)	80	13 (16.3)	NE (NE, NE)	1.42	0.78, 2.77	0.2628
Residue	79	12 (15.2)	NE (NE, NE)	43	8 (18.6)	NE (NE, NE)	0.79	0.33, 2.03	0.6175
Interaction p-value									0.3016

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.2 PAOLA1: Summary of subgroup analysis of AESI: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	27 (18.5)	NE (NE, NE)	78	12 (15.4)	NE (NE, NE)	1.21	0.63, 2.47	0.5853
Interval	99	23 (23.2)	NE (NE, NE)	45	9 (20.0)	NE (NE, NE)	1.14	0.54, 2.59	0.7425
Interaction p-value									0.9103
Myriad tumour BRCA mutation status									
tBRCAm	158	31 (19.6)	NE (NE, NE)	77	12 (15.6)	NE (NE, NE)	1.24	0.65, 2.52	0.5178
Non-tBRCAm	97	22 (22.7)	NE (NE, NE)	54	10 (18.5)	NE (NE, NE)	1.26	0.61, 2.78	0.5383
Interaction p-value									0.9766
Status somatic BRCA mutations									
sBRCAm	25	8 (32.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	2.80	0.51, 51.90	0.2692
gBRCAm	69	12 (17.4)	NE (NE, NE)	36	8 (22.2)	NE (NE, NE)	0.77	0.32, 1.97	0.5767
Non-BRCAm	43	14 (32.6)	NE (NE, NE)	23	4 (17.4)	NE (NE, NE)	2.01	0.72, 7.10	0.1913
Interaction p-value									0.2846

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.3 PAOLA1: Summary of subgroup analysis of AESI: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	7 (7.6)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	3.47	0.62, 64.78	0.1783
NED/CR [IDS]	74	7 (9.5)	NE (NE, NE)	38	6 (15.8)	NE (NE, NE)	0.59	0.20, 1.83	0.3487
NED/CR [Chemo]	40	3 (7.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									0.1009
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	9 (6.0)	NE (NE, NE)	65	4 (6.2)	NE (NE, NE)	0.96	0.31, 3.53	0.9400
non-tBRCAm	105	9 (8.6)	NE (NE, NE)	66	3 (4.5)	NE (NE, NE)	1.88	0.56, 8.46	0.3222
Interaction p-value									0.4497
First line treatment outcome (eCRF)									
NED [PDS]	89	5 (5.6)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	2.49	0.40, 47.65	0.3608
NED/CR [IDS]	74	9 (12.2)	NE (NE, NE)	32	5 (15.6)	NE (NE, NE)	0.77	0.27, 2.52	0.6511
NED/CR [Chemo]	39	2 (5.1)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	2 (4.0)	NE (NE, NE)	34	1 (2.9)	NE (NE, NE)	1.35	0.13, 29.09	0.8021
Interaction p-value									0.5863
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	9 (6.1)	NE (NE, NE)	67	5 (7.5)	NE (NE, NE)	0.80	0.28, 2.59	0.6876
non-tBRCAm	108	9 (8.3)	NE (NE, NE)	64	2 (3.1)	NE (NE, NE)	2.68	0.69, 17.55	0.1666
Interaction p-value									0.1906
Age group									
<65 years	185	12 (6.5)	NE (NE, NE)	98	6 (6.1)	NE (NE, NE)	1.04	0.40, 2.98	0.9397
>=65 years	70	6 (8.6)	NE (NE, NE)	33	1 (3.0)	NE (NE, NE)	2.82	0.48, 53.22	0.2818
Interaction p-value									0.3687

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.3 PAOLA1: Summary of subgroup analysis of AESI: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	15 (8.2)	NE (NE, NE)	89	5 (5.6)	NE (NE, NE)	1.45	0.56, 4.45	0.4610
IV	73	3 (4.1)	NE (NE, NE)	42	2 (4.8)	NE (NE, NE)	0.85	0.14, 6.44	0.8579
Interaction p-value									0.6141
Region									
Europe	245	17 (6.9)	NE (NE, NE)	125	7 (5.6)	NE (NE, NE)	1.21	0.52, 3.14	0.6609
Japan	10	1 (10.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	13 (6.8)	NE (NE, NE)	100	5 (5.0)	NE (NE, NE)	1.35	0.51, 4.21	0.5583
(1) Restricted activity	61	5 (8.2)	NE (NE, NE)	30	2 (6.7)	NE (NE, NE)	1.20	0.26, 8.36	0.8281
Interaction p-value									0.9020
Baseline CA-125 value									
<=ULN	228	17 (7.5)	NE (NE, NE)	117	7 (6.0)	NE (NE, NE)	1.21	0.52, 3.14	0.6619
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	18 (7.1)	NE (NE, NE)	131	7 (5.3)	NE (NE, NE)	1.30	0.57, 3.35	0.5484
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	14 (8.4)	NE (NE, NE)	80	6 (7.5)	NE (NE, NE)	1.09	0.44, 3.09	0.8549
Residue	79	3 (3.8)	NE (NE, NE)	43	1 (2.3)	NE (NE, NE)	1.62	0.21, 32.76	0.6641
Interaction p-value									0.7478

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.3 PAOLA1: Summary of subgroup analysis of AESI: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	7 (4.8)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	3.57	0.63, 66.67	0.1672
Interval	99	10 (10.1)	NE (NE, NE)	45	6 (13.3)	NE (NE, NE)	0.77	0.28, 2.25	0.6087
Interaction p-value									0.1507
Myriad tumour BRCA mutation status									
tBRCAm	158	10 (6.3)	NE (NE, NE)	77	6 (7.8)	NE (NE, NE)	0.78	0.29, 2.29	0.6312
Non-tBRCAm	97	8 (8.2)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	4.58	0.84, 84.87	0.0844
Interaction p-value									0.0906
Status somatic BRCA mutations									
sBRCAm	25	2 (8.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	0.69	0.07, 14.86	0.7676
gBRCAm	69	5 (7.2)	NE (NE, NE)	36	5 (13.9)	NE (NE, NE)	0.50	0.14, 1.79	0.2751
Non-BRCAm	43	5 (11.6)	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	2.60	0.42, 49.84	0.3370
Interaction p-value									0.3626

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.4 PAOLA1: Summary of subgroup analysis of AESI: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	52 (56.5)	3.7 (0.6, NE)	48	11 (22.9)	NE (NE, NE)	3.30	1.79, 6.68	<0.0001*
NED/CR [IDS]	74	48 (64.9)	1.3 (0.3, 4.3)	38	15 (39.5)	NE (NE, NE)	2.15	1.23, 3.98	0.0061*
NED/CR [Chemo]	40	21 (52.5)	0.6 (0.2, NE)	20	2 (10.0)	NE (NE, NE)	8.02	2.35, 50.17	0.0002*
PR	49	23 (46.9)	NE (NE, NE)	25	6 (24.0)	NE (NE, NE)	2.49	1.08, 6.74	0.0315*
Interaction p-value									0.2920
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	87 (58.0)	2.6 (0.7,19.7)	65	14 (21.5)	NE (NE, NE)	3.69	2.17, 6.78	<0.0001*
non-tBRCAm	105	57 (54.3)	3.3 (0.3, NE)	66	20 (30.3)	NE (NE, NE)	2.35	1.44, 4.01	0.0005*
Interaction p-value									0.2420
First line treatment outcome (eCRF)									
NED [PDS]	89	51 (57.3)	2.7 (0.5, NE)	47	10 (21.3)	NE (NE, NE)	3.65	1.94, 7.64	<0.0001*
NED/CR [IDS]	74	49 (66.2)	1.0 (0.3, 3.4)	32	12 (37.5)	NE (NE, NE)	2.45	1.35, 4.82	0.0026*
NED/CR [Chemo]	39	19 (48.7)	NE (NE, NE)	17	2 (11.8)	NE (NE, NE)	6.22	1.80, 39.02	0.0019*
PR	50	24 (48.0)	NE (NE, NE)	34	9 (26.5)	NE (NE, NE)	2.15	1.03, 4.89	0.0399*
Interaction p-value									0.4619
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	85 (57.8)	2.9 (0.8,19.7)	67	15 (22.4)	NE (NE, NE)	3.51	2.09, 6.32	<0.0001*
non-tBRCAm	108	59 (54.6)	2.7 (0.3, NE)	64	19 (29.7)	NE (NE, NE)	2.44	1.48, 4.21	0.0003*
Interaction p-value									0.3452
Age group									
<65 years	185	109 (58.9)	2.1 (0.6, 9.8)	98	24 (24.5)	NE (NE, NE)	3.32	2.17, 5.29	<0.0001*
>=65 years	70	35 (50.0)	19.7 (0.8, NE)	33	10 (30.3)	NE (NE, NE)	2.07	1.07, 4.42	0.0307*
Interaction p-value									0.2767

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.4 PAOLA1: Summary of subgroup analysis of AESI: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

Subgroup	Olaparib + bevacizumab (N=255) n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Placebo + bevacizumab (N=131) n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	100 (54.9)	3.7 (0.8, NE)	89	28 (31.5)	NE (NE, NE)	2.27	1.51, 3.51	<0.0001*
IV	73	44 (60.3)	2.1 (0.3, NE)	42	6 (14.3)	NE (NE, NE)	6.09	2.80, 15.94	<0.0001*
Interaction p-value									0.0292*
Region									
Europe	245	141 (57.6)	2.6 (0.8,10.3)	125	33 (26.4)	NE (NE, NE)	2.94	2.04, 4.38	<0.0001*
Japan	10	3 (30.0)	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	2.15	0.28, 43.49	0.4830
Interaction p-value									0.7942
ECOG performance status at Baseline									
(0) Normal activity	190	113 (59.5)	2.0 (0.5, 5.4)	100	22 (22.0)	NE (NE, NE)	3.74	2.42, 6.07	<0.0001*
(1) Restricted activity	61	30 (49.2)	NE (NE, NE)	30	12 (40.0)	NE (NE, NE)	1.53	0.80, 3.10	0.2020
Interaction p-value									0.0351*
Baseline CA-125 value									
<=ULN	228	129 (56.6)	2.7 (0.8,19.7)	117	30 (25.6)	NE (NE, NE)	2.95	2.01, 4.48	<0.0001*
>ULN	27	15 (55.6)	4.1 (0.1, NE)	14	4 (28.6)	NE (NE, NE)	2.70	0.98, 9.48	0.0550
Interaction p-value									0.8824
Histological grade									
High grade	255	144 (56.5)	2.9 (0.8,16.0)	131	34 (26.0)	NE (NE, NE)	2.92	2.04, 4.32	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	101 (60.8)	1.4 (0.4, 5.4)	80	23 (28.8)	NE (NE, NE)	2.89	1.87, 4.67	<0.0001*
Residue	79	39 (49.4)	NE (NE, NE)	43	10 (23.3)	NE (NE, NE)	2.74	1.42, 5.80	0.0020*
Interaction p-value									0.8946

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.4 PAOLA1: Summary of subgroup analysis of AESI: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	77 (52.7)	6.6 (0.6, NE)	78	14 (17.9)	NE (NE, NE)	4.01	2.35, 7.40	<0.0001*
Interval	99	63 (63.6)	1.9 (0.4, 5.0)	45	19 (42.2)	NE (NE, NE)	1.95	1.19, 3.34	0.0074*
Interaction p-value									0.0626
Myriad tumour BRCA mutation status									
tBRCAm	158	92 (58.2)	2.3 (0.7,16.0)	77	17 (22.1)	NE (NE, NE)	3.58	2.19, 6.22	<0.0001*
Non-tBRCAm	97	52 (53.6)	3.4 (0.4, NE)	54	17 (31.5)	NE (NE, NE)	2.25	1.33, 4.01	0.0021*
Interaction p-value									0.2269
Status somatic BRCA mutations									
sBRCAm	25	16 (64.0)	0.8 (0.1, NE)	9	2 (22.2)	NE (NE, NE)	3.94	1.12, 24.91	0.0306*
gBRCAm	69	44 (63.8)	2.1 (0.5, 5.4)	36	10 (27.8)	NE (NE, NE)	3.27	1.71, 6.88	0.0002*
Non-BRCAm	43	23 (53.5)	2.7 (0.2, NE)	23	8 (34.8)	NE (NE, NE)	2.07	0.97, 4.95	0.0620
Interaction p-value									0.6294

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.5 PAOLA1: Summary of subgroup analysis of AESI: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	23 (25.0)	NE (NE, NE)	48	7 (14.6)	NE (NE, NE)	1.82	0.82, 4.58	0.1471
NED/CR [IDS]	74	18 (24.3)	NE (NE, NE)	38	7 (18.4)	NE (NE, NE)	1.39	0.61, 3.58	0.4470
NED/CR [Chemo]	40	4 (10.0)	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	2.05	0.30, 40.11	0.4922
PR	49	10 (20.4)	NE (NE, NE)	25	3 (12.0)	NE (NE, NE)	1.85	0.57, 8.24	0.3266
Interaction p-value									0.9675
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	34 (22.7)	NE (NE, NE)	65	8 (12.3)	NE (NE, NE)	1.96	0.95, 4.55	0.0681
non-tBRCAm	105	21 (20.0)	NE (NE, NE)	66	10 (15.2)	NE (NE, NE)	1.39	0.67, 3.08	0.3865
Interaction p-value									0.5287
First line treatment outcome (eCRF)									
NED [PDS]	89	21 (23.6)	NE (NE, NE)	47	7 (14.9)	NE (NE, NE)	1.68	0.75, 4.26	0.2183
NED/CR [IDS]	74	17 (23.0)	NE (NE, NE)	32	5 (15.6)	NE (NE, NE)	1.59	0.63, 4.83	0.3457
NED/CR [Chemo]	39	5 (12.8)	NE (NE, NE)	17	2 (11.8)	NE (NE, NE)	1.14	0.25, 7.96	0.8738
PR	50	10 (20.0)	NE (NE, NE)	34	4 (11.8)	NE (NE, NE)	1.75	0.58, 6.37	0.3290
Interaction p-value									0.9793
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	33 (22.4)	NE (NE, NE)	67	8 (11.9)	NE (NE, NE)	2.00	0.97, 4.65	0.0608
non-tBRCAm	108	22 (20.4)	NE (NE, NE)	64	10 (15.6)	NE (NE, NE)	1.37	0.67, 3.03	0.4001
Interaction p-value									0.4904
Age group									
<65 years	185	44 (23.8)	NE (NE, NE)	98	12 (12.2)	NE (NE, NE)	2.11	1.15, 4.18	0.0146*
>=65 years	70	11 (15.7)	NE (NE, NE)	33	6 (18.2)	NE (NE, NE)	0.85	0.32, 2.47	0.7543
Interaction p-value									0.1420

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.5 PAOLA1: Summary of subgroup analysis of AESI: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	42 (23.1)	NE (NE, NE)	89	13 (14.6)	NE (NE, NE)	1.68	0.93, 3.26	0.0867
IV	73	13 (17.8)	NE (NE, NE)	42	5 (11.9)	NE (NE, NE)	1.55	0.59, 4.84	0.3899
Interaction p-value									0.8942
Region									
Europe	245	55 (22.4)	NE (NE, NE)	125	15 (12.0)	NE (NE, NE)	1.99	1.16, 3.66	0.0119*
Japan	10	0	NE (NE, NE)	6	3 (50.0)	45.7 (1.4, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	42 (22.1)	NE (NE, NE)	100	13 (13.0)	NE (NE, NE)	1.79	0.99, 3.46	0.0556
(1) Restricted activity	61	13 (21.3)	NE (NE, NE)	30	5 (16.7)	NE (NE, NE)	1.39	0.52, 4.33	0.5218
Interaction p-value									0.6864
Baseline CA-125 value									
<=ULN	228	44 (19.3)	NE (NE, NE)	117	16 (13.7)	NE (NE, NE)	1.47	0.85, 2.69	0.1732
>ULN	27	11 (40.7)	NE (NE, NE)	14	2 (14.3)	NE (NE, NE)	3.41	0.91, 22.03	0.0698
Interaction p-value									0.2754
Histological grade									
High grade	255	55 (21.6)	NE (NE, NE)	131	18 (13.7)	NE (NE, NE)	1.66	0.99, 2.90	0.0524
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	40 (24.1)	NE (NE, NE)	80	12 (15.0)	NE (NE, NE)	1.72	0.93, 3.43	0.0841
Residue	79	13 (16.5)	NE (NE, NE)	43	6 (14.0)	NE (NE, NE)	1.19	0.47, 3.40	0.7161
Interaction p-value									0.5409

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.5 PAOLA1: Summary of subgroup analysis of AESI: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	30 (20.5)	NE (NE, NE)	78	9 (11.5)	NE (NE, NE)	1.88	0.93, 4.20	0.0808
Interval	99	23 (23.2)	NE (NE, NE)	45	9 (20.0)	NE (NE, NE)	1.21	0.58, 2.77	0.6173
Interaction p-value									0.4251
Myriad tumour BRCA mutation status									
tBRCAm	158	36 (22.8)	NE (NE, NE)	77	9 (11.7)	NE (NE, NE)	2.08	1.05, 4.60	0.0357*
Non-tBRCAm	97	19 (19.6)	NE (NE, NE)	54	9 (16.7)	NE (NE, NE)	1.23	0.57, 2.84	0.6112
Interaction p-value									0.3368
Status somatic BRCA mutations									
sBRCAm	25	7 (28.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	2.77	0.49, 51.69	0.2823
gBRCAm	69	16 (23.2)	NE (NE, NE)	36	5 (13.9)	NE (NE, NE)	1.84	0.72, 5.63	0.2110
Non-BRCAm	43	6 (14.0)	NE (NE, NE)	23	5 (21.7)	NE (NE, NE)	0.61	0.18, 2.11	0.4172
Interaction p-value									0.2762

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.6 PAOLA1: Summary of subgroup analysis of AESI: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	49 (53.3)	12.7 (2.9, NE)	48	18 (37.5)	NE (NE, NE)	1.69	1.01, 2.99	0.0471*
NED/CR [IDS]	74	50 (67.6)	3.5 (1.8,11.8)	38	15 (39.5)	NE (NE, NE)	2.06	1.18, 3.79	0.0096*
NED/CR [Chemo]	40	19 (47.5)	NE (NE, NE)	20	5 (25.0)	NE (NE, NE)	2.34	0.94, 7.05	0.0690
PR	49	24 (49.0)	14.9 (3.5, NE)	25	9 (36.0)	NE (NE, NE)	1.57	0.76, 3.57	0.2348
Interaction p-value									0.8897
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	82 (54.7)	9.8 (3.5, NE)	65	25 (38.5)	NE (NE, NE)	1.62	1.05, 2.59	0.0276*
non-tBRCAm	105	60 (57.1)	11.0 (2.7, NE)	66	22 (33.3)	NE (NE, NE)	2.14	1.33, 3.56	0.0013*
Interaction p-value									0.4121
First line treatment outcome (eCRF)									
NED [PDS]	89	48 (53.9)	12.5 (2.8, NE)	47	18 (38.3)	NE (NE, NE)	1.67	0.99, 2.94	0.0552
NED/CR [IDS]	74	49 (66.2)	3.5 (1.4,11.0)	32	9 (28.1)	NE (NE, NE)	3.30	1.70, 7.18	0.0002*
NED/CR [Chemo]	39	18 (46.2)	NE (NE, NE)	17	4 (23.5)	NE (NE, NE)	2.40	0.90, 8.32	0.0839
PR	50	26 (52.0)	15.3 (3.5, NE)	34	16 (47.1)	NE (NE, NE)	1.09	0.59, 2.07	0.7935
Interaction p-value									0.1155
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	80 (54.4)	11.8 (3.5, NE)	67	25 (37.3)	NE (NE, NE)	1.68	1.09, 2.68	0.0189*
non-tBRCAm	108	62 (57.4)	11.0 (2.7, NE)	64	22 (34.4)	NE (NE, NE)	2.07	1.30, 3.45	0.0020*
Interaction p-value									0.5283
Age group									
<65 years	185	105 (56.8)	9.8 (2.9,30.1)	98	32 (32.7)	NE (NE, NE)	2.13	1.45, 3.22	<0.0001*
>=65 years	70	37 (52.9)	11.8 (3.5, NE)	33	15 (45.5)	NE (NE, NE)	1.27	0.71, 2.39	0.4252
Interaction p-value									0.1650

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.6 PAOLA1: Summary of subgroup analysis of AESI: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	100 (54.9)	11.1 (3.7, NE)	89	32 (36.0)	NE (NE, NE)	1.77	1.20, 2.68	0.0032*
IV	73	42 (57.5)	11.0 (2.1, NE)	42	15 (35.7)	NE (NE, NE)	2.05	1.16, 3.82	0.0121*
Interaction p-value									0.6848
Region									
Europe	245	142 (58.0)	7.2 (3.5,15.3)	125	47 (37.6)	NE (NE, NE)	1.85	1.34, 2.61	0.0001*
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	106 (55.8)	8.5 (3.5, NE)	100	33 (33.0)	NE (NE, NE)	2.03	1.39, 3.05	0.0002*
(1) Restricted activity	61	32 (52.5)	18.0 (2.9, NE)	30	13 (43.3)	NE (NE, NE)	1.37	0.74, 2.71	0.3282
Interaction p-value									0.3119
Baseline CA-125 value									
<=ULN	228	126 (55.3)	11.3 (5.1, NE)	117	41 (35.0)	NE (NE, NE)	1.86	1.32, 2.68	0.0003*
>ULN	27	16 (59.3)	2.1 (0.5, NE)	14	6 (42.9)	NE (NE, NE)	1.82	0.75, 5.07	0.1933
Interaction p-value									0.9656
Histological grade									
High grade	255	142 (55.7)	11.0 (4.1,30.1)	131	47 (35.9)	NE (NE, NE)	1.85	1.34, 2.60	0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	98 (59.0)	6.2 (2.5,15.9)	80	27 (33.8)	NE (NE, NE)	2.22	1.47, 3.46	<0.0001*
Residue	79	39 (49.4)	18.0 (3.7, NE)	43	15 (34.9)	NE (NE, NE)	1.52	0.85, 2.84	0.1580
Interaction p-value									0.3144

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.6 PAOLA1: Summary of subgroup analysis of AESI: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	75 (51.4)	14.9 (5.1, NE)	78	25 (32.1)	NE (NE, NE)	1.90	1.23, 3.05	0.0035*
Interval	99	62 (62.6)	4.1 (2.1,15.3)	45	17 (37.8)	NE (NE, NE)	2.00	1.20, 3.52	0.0074*
Interaction p-value									0.8947
Myriad tumour BRCA mutation status									
tBRCAm	158	87 (55.1)	9.8 (3.5, NE)	77	28 (36.4)	NE (NE, NE)	1.74	1.15, 2.70	0.0081*
Non-tBRCAm	97	55 (56.7)	11.0 (2.7, NE)	54	19 (35.2)	NE (NE, NE)	2.03	1.23, 3.51	0.0052*
Interaction p-value									0.6483
Status somatic BRCA mutations									
sBRCAm	25	13 (52.0)	15.8 (2.1, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	48 (69.6)	2.1 (1.0, 6.9)	36	18 (50.0)	36.5 (4.4, NE)	1.87	1.11, 3.30	0.0189*
Non-BRCAm	43	25 (58.1)	6.0 (1.4, NE)	23	12 (52.2)	10.4 (2.9, NE)	1.28	0.65, 2.63	0.4830
Interaction p-value									0.3969

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.7 PAOLA1: Summary of subgroup analysis of AESI: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	46 (50.0)	17.9 (7.6, NE)	48	26 (54.2)	11.0 (4.2, NE)	0.93	0.58, 1.52	0.7607
NED/CR [IDS]	74	36 (48.6)	30.5 (8.3, NE)	38	22 (57.9)	5.2 (2.1, NE)	0.70	0.42, 1.21	0.2016
NED/CR [Chemo]	40	21 (52.5)	13.9 (3.4, NE)	20	13 (65.0)	4.1 (0.8, NE)	0.72	0.36, 1.47	0.3518
PR	49	24 (49.0)	NE (NE, NE)	25	17 (68.0)	2.8 (0.7,11.3)	0.54	0.29, 1.03	0.0613
Interaction p-value									0.6093
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	70 (46.7)	NE (NE, NE)	65	40 (61.5)	6.9 (2.9,24.3)	0.66	0.45, 0.98	0.0415*
non-tBRCAm	105	57 (54.3)	11.1 (6.6, NE)	66	38 (57.6)	4.6 (2.2, NE)	0.86	0.58, 1.31	0.4903
Interaction p-value									0.3532
First line treatment outcome (eCRF)									
NED [PDS]	89	44 (49.4)	NE (NE, NE)	47	25 (53.2)	11.0 (4.2, NE)	0.94	0.58, 1.55	0.7981
NED/CR [IDS]	74	33 (44.6)	NE (NE, NE)	32	17 (53.1)	9.8 (2.8, NE)	0.73	0.41, 1.34	0.3008
NED/CR [Chemo]	39	23 (59.0)	5.6 (0.9, NE)	17	12 (70.6)	4.1 (0.8, NE)	0.84	0.43, 1.75	0.6372
PR	50	26 (52.0)	16.6 (5.7, NE)	34	23 (67.6)	2.5 (0.7,11.3)	0.53	0.30, 0.94	0.0311*
Interaction p-value									0.5104
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	68 (46.3)	NE (NE, NE)	67	40 (59.7)	6.9 (3.3, NE)	0.68	0.47, 1.02	0.0620
non-tBRCAm	108	59 (54.6)	10.6 (6.7, NE)	64	38 (59.4)	4.3 (2.1, NE)	0.83	0.56, 1.26	0.3797
Interaction p-value									0.4984
Age group									
<65 years	185	83 (44.9)	NE (NE, NE)	98	54 (55.1)	8.4 (4.1, NE)	0.72	0.52, 1.03	0.0693
>=65 years	70	44 (62.9)	5.8 (3.4,14.1)	33	24 (72.7)	2.8 (1.4, 5.4)	0.75	0.46, 1.25	0.2602
Interaction p-value									0.9181

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.7 PAOLA1: Summary of subgroup analysis of AESI: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	90 (49.5)	NE (NE, NE)	89	53 (59.6)	7.0 (4.1,24.3)	0.75	0.54, 1.06	0.1058
IV	73	37 (50.7)	16.7 (5.6, NE)	42	25 (59.5)	3.5 (2.1, NE)	0.73	0.44, 1.22	0.2266
Interaction p-value									0.9158
Region									
Europe	245	124 (50.6)	17.9 (9.7, NE)	125	72 (57.6)	5.6 (3.5, NE)	0.80	0.60, 1.07	0.1283
Japan	10	3 (30.0)	NE (NE, NE)	6	6 (100)	2.1 (0.3, NE)	0.17	0.04, 0.65	0.0095*
Interaction p-value									0.0268*
ECOG performance status at Baseline									
(0) Normal activity	190	89 (46.8)	NE (NE, NE)	100	59 (59.0)	4.2 (2.8, 8.1)	0.68	0.49, 0.95	0.0234*
(1) Restricted activity	61	35 (57.4)	9.8 (5.8, NE)	30	19 (63.3)	11.0 (2.8, NE)	0.91	0.53, 1.63	0.7475
Interaction p-value									0.3695
Baseline CA-125 value									
<=ULN	228	112 (49.1)	NE (NE, NE)	117	70 (59.8)	5.5 (3.4,12.6)	0.73	0.55, 0.99	0.0459*
>ULN	27	15 (55.6)	6.9 (2.8, NE)	14	8 (57.1)	4.9 (0.7, NE)	0.82	0.36, 2.05	0.6623
Interaction p-value									0.8023
Histological grade									
High grade	255	127 (49.8)	30.5 (9.7, NE)	131	78 (59.5)	5.5 (3.4,11.3)	0.74	0.56, 0.99	0.0429*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	78 (47.0)	NE (NE, NE)	80	43 (53.8)	11.0 (4.2, NE)	0.83	0.57, 1.21	0.3220
Residue	79	41 (51.9)	16.6 (5.6, NE)	43	27 (62.8)	4.2 (2.1, NE)	0.73	0.45, 1.21	0.2167
Interaction p-value									0.7006

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.7 PAOLA1: Summary of subgroup analysis of AESI: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	71 (48.6)	NE (NE, NE)	78	45 (57.7)	8.1 (4.2, NE)	0.81	0.56, 1.18	0.2650
Interval	99	48 (48.5)	NE (NE, NE)	45	25 (55.6)	5.6 (2.8, NE)	0.77	0.48, 1.26	0.2903
Interaction p-value									0.8716
Myriad tumour BRCA mutation status									
tBRCAm	158	77 (48.7)	NE (NE, NE)	77	45 (58.4)	7.0 (3.5, NE)	0.75	0.52, 1.10	0.1369
Non-tBRCAm	97	50 (51.5)	17.9 (7.5, NE)	54	33 (61.1)	4.3 (2.1, NE)	0.73	0.47, 1.15	0.1735
Interaction p-value									0.9289
Status somatic BRCA mutations									
sBRCAm	25	11 (44.0)	NE (NE, NE)	9	4 (44.4)	NE (NE, NE)	0.86	0.30, 3.12	0.8036
gBRCAm	69	33 (47.8)	NE (NE, NE)	36	22 (61.1)	6.2 (2.8, NE)	0.66	0.39, 1.15	0.1368
Non-BRCAm	43	22 (51.2)	20.3 (7.5, NE)	23	15 (65.2)	3.4 (1.4, NE)	0.59	0.31, 1.16	0.1209
Interaction p-value									0.8447

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.8 PAOLA1: Summary of subgroup analysis of AESI: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]		Number (%) of patients n with events	Median time (95% CI) (months) [a]		Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92 6 (6.5)	NE (NE, NE)		48 9 (18.8)	NE (NE, NE)		0.31	0.10, 0.85	0.0229*
NED/CR [IDS]	74 7 (9.5)	NE (NE, NE)		38 3 (7.9)	NE (NE, NE)		1.20	0.33, 5.57	0.7888
NED/CR [Chemo]	40 3 (7.5)	NE (NE, NE)		20 3 (15.0)	NE (NE, NE)		0.44	0.08, 2.36	0.3173
PR	49 4 (8.2)	NE (NE, NE)		25 4 (16.0)	NE (NE, NE)		0.49	0.12, 2.07	0.3173
Interaction p-value									0.4427
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150 15 (10.0)	NE (NE, NE)		65 9 (13.8)	NE (NE, NE)		0.67	0.30, 1.60	0.3532
non-tBRCAm	105 5 (4.8)	NE (NE, NE)		66 10 (15.2)	NE (NE, NE)		0.29	0.09, 0.82	0.0190*
Interaction p-value									0.2172
First line treatment outcome (eCRF)									
NED [PDS]	89 5 (5.6)	NE (NE, NE)		47 8 (17.0)	NE (NE, NE)		0.29	0.09, 0.88	0.0285*
NED/CR [IDS]	74 9 (12.2)	NE (NE, NE)		32 2 (6.3)	NE (NE, NE)		1.98	0.51, 13.00	0.3489
NED/CR [Chemo]	39 1 (2.6)	NE (NE, NE)		17 2 (11.8)	NE (NE, NE)		0.20	0.01, 2.07	0.1704
PR	50 4 (8.0)	NE (NE, NE)		34 6 (17.6)	NE (NE, NE)		0.41	0.11, 1.45	0.1648
Interaction p-value									0.1346
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147 14 (9.5)	NE (NE, NE)		67 9 (13.4)	NE (NE, NE)		0.66	0.29, 1.58	0.3362
non-tBRCAm	108 6 (5.6)	NE (NE, NE)		64 10 (15.6)	NE (NE, NE)		0.33	0.11, 0.89	0.0281*
Interaction p-value									0.2966
Age group									
<65 years	185 14 (7.6)	NE (NE, NE)		98 17 (17.3)	NE (NE, NE)		0.39	0.19, 0.80	0.0101*
>=65 years	70 6 (8.6)	NE (NE, NE)		33 2 (6.1)	NE (NE, NE)		1.41	0.33, 9.65	0.6628
Interaction p-value									0.1294

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.8 PAOLA1: Summary of subgroup analysis of AESI: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	15 (8.2)	NE (NE, NE)	89	12 (13.5)	NE (NE, NE)	0.56	0.26, 1.23	0.1473
IV	73	5 (6.8)	NE (NE, NE)	42	7 (16.7)	NE (NE, NE)	0.39	0.11, 1.21	0.1006
Interaction p-value									0.5834
Region									
Europe	245	20 (8.2)	NE (NE, NE)	125	16 (12.8)	NE (NE, NE)	0.60	0.31, 1.17	0.1293
Japan	10	0	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	15 (7.9)	NE (NE, NE)	100	13 (13.0)	NE (NE, NE)	0.57	0.27, 1.22	0.1459
(1) Restricted activity	61	5 (8.2)	NE (NE, NE)	30	6 (20.0)	NE (NE, NE)	0.36	0.10, 1.20	0.0948
Interaction p-value									0.5191
Baseline CA-125 value									
<=ULN	228	18 (7.9)	NE (NE, NE)	117	17 (14.5)	NE (NE, NE)	0.51	0.26, 0.99	0.0465*
>ULN	27	2 (7.4)	NE (NE, NE)	14	2 (14.3)	NE (NE, NE)	0.47	0.06, 3.91	0.4548
Interaction p-value									0.9439
Histological grade									
High grade	255	20 (7.8)	NE (NE, NE)	131	19 (14.5)	NE (NE, NE)	0.50	0.27, 0.95	0.0336*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	15 (9.0)	NE (NE, NE)	80	11 (13.8)	NE (NE, NE)	0.62	0.29, 1.38	0.2329
Residue	79	4 (5.1)	NE (NE, NE)	43	7 (16.3)	NE (NE, NE)	0.28	0.07, 0.92	0.0354*
Interaction p-value									0.2710

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.8 PAOLA1: Summary of subgroup analysis of AESI: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	8 (5.5)	NE (NE, NE)	78	14 (17.9)	NE (NE, NE)	0.27	0.11, 0.62	0.0022*
Interval	99	11 (11.1)	NE (NE, NE)	45	4 (8.9)	NE (NE, NE)	1.26	0.43, 4.54	0.6900
Interaction p-value									0.0270*
Myriad tumour BRCA mutation status									
tBRCAm	158	16 (10.1)	NE (NE, NE)	77	10 (13.0)	NE (NE, NE)	0.72	0.33, 1.65	0.4272
Non-tBRCAm	97	4 (4.1)	NE (NE, NE)	54	9 (16.7)	NE (NE, NE)	0.23	0.06, 0.71	0.0099*
Interaction p-value									0.1026
Status somatic BRCA mutations									
sBRCAm	25	2 (8.0)	NE (NE, NE)	9	2 (22.2)	NE (NE, NE)	0.29	0.04, 2.46	0.2356
gBRCAm	69	7 (10.1)	NE (NE, NE)	36	7 (19.4)	NE (NE, NE)	0.49	0.17, 1.43	0.1882
Non-BRCAm	43	2 (4.7)	NE (NE, NE)	23	2 (8.7)	NE (NE, NE)	0.53	0.06, 4.41	0.5280
Interaction p-value									0.8913

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.9 PAOLA1: Summary of subgroup analysis of AESI: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	2 (5.0)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	2 (1.3)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	1 (1.0)	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	2 (5.1)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	1 (2.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	2 (1.4)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	2 (1.1)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	1 (1.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.9 PAOLA1: Summary of subgroup analysis of AESI: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	2 (2.7)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	2 (1.1)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	2 (0.9)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	3 (3.8)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.9 PAOLA1: Summary of subgroup analysis of AESI: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	2 (1.4)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.10 PAOLA1: Summary of subgroup analysis of AESI: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	1 (1.1)	NE (NE, NE)	48	3 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	2 (1.3)	NE (NE, NE)	65	2 (3.1)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	1 (1.1)	NE (NE, NE)	47	3 (6.4)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	1 (2.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	2 (1.4)	NE (NE, NE)	67	2 (3.0)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	2 (1.1)	NE (NE, NE)	98	2 (2.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	1 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.10 PAOLA1: Summary of subgroup analysis of AESI: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	2 (0.8)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	1 (0.4)	NE (NE, NE)	117	3 (2.6)	NE (NE, NE)	NC	NC	NC
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	2 (0.8)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	1 (0.6)	NE (NE, NE)	80	3 (3.8)	NE (NE, NE)	NC	NC	NC
Residue	79	1 (1.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.10 PAOLA1: Summary of subgroup analysis of AESI: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	3 (3.8)	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	1 (0.6)	NE (NE, NE)	77	2 (2.6)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.11 PAOLA1: Summary of subgroup analysis of AESI: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	12 (13.0)	NE (NE, NE)	48	7 (14.6)	NE (NE, NE)	0.77	0.30, 2.09	0.5923
NED/CR [IDS]	74	9 (12.2)	NE (NE, NE)	38	3 (7.9)	NE (NE, NE)	1.55	0.46, 7.00	0.4938
NED/CR [Chemo]	40	4 (10.0)	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	1.95	0.29, 38.03	0.5266
PR	49	5 (10.2)	NE (NE, NE)	25	1 (4.0)	NE (NE, NE)	2.70	0.44, 51.77	0.3150
Interaction p-value									0.6104
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	18 (12.0)	75.0 (NE, NE)	65	9 (13.8)	NE (NE, NE)	0.81	0.37, 1.90	0.6210
non-tBRCAm	105	12 (11.4)	NE (NE, NE)	66	3 (4.5)	NE (NE, NE)	2.40	0.76, 10.56	0.1447
Interaction p-value									0.1420
First line treatment outcome (eCRF)									
NED [PDS]	89	11 (12.4)	NE (NE, NE)	47	7 (14.9)	NE (NE, NE)	0.71	0.27, 1.95	0.4882
NED/CR [IDS]	74	9 (12.2)	NE (NE, NE)	32	2 (6.3)	NE (NE, NE)	1.99	0.51, 13.07	0.3446
NED/CR [Chemo]	39	4 (10.3)	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	1.75	0.26, 34.22	0.5975
PR	50	5 (10.0)	NE (NE, NE)	34	2 (5.9)	NE (NE, NE)	1.71	0.37, 11.95	0.5065
Interaction p-value									0.5984
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	17 (11.6)	75.0 (NE, NE)	67	9 (13.4)	NE (NE, NE)	0.81	0.37, 1.90	0.6106
non-tBRCAm	108	13 (12.0)	NE (NE, NE)	64	3 (4.7)	NE (NE, NE)	2.47	0.79, 10.80	0.1258
Interaction p-value									0.1265
Age group									
<65 years	185	21 (11.4)	75.0 (75.0, NE)	98	9 (9.2)	NE (NE, NE)	1.17	0.55, 2.69	0.6927
>=65 years	70	9 (12.9)	NE (NE, NE)	33	3 (9.1)	NE (NE, NE)	1.38	0.41, 6.24	0.6200
Interaction p-value									0.8291

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.11 PAOLA1: Summary of subgroup analysis of AESI: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	24 (13.2)	NE (NE, NE)	89	11 (12.4)	NE (NE, NE)	0.99	0.49, 2.11	0.9732
IV	73	6 (8.2)	NE (NE, NE)	42	1 (2.4)	NE (NE, NE)	3.55	0.61, 67.09	0.1776
Interaction p-value									0.2116
Region									
Europe	245	30 (12.2)	NE (NE, NE)	125	12 (9.6)	NE (NE, NE)	1.21	0.64, 2.47	0.5659
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	24 (12.6)	NE (NE, NE)	100	10 (10.0)	NE (NE, NE)	1.24	0.61, 2.72	0.5588
(1) Restricted activity	61	5 (8.2)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	2.47	0.40, 47.23	0.3657
Interaction p-value									0.5311
Baseline CA-125 value									
<=ULN	228	25 (11.0)	NE (NE, NE)	117	12 (10.3)	NE (NE, NE)	1.00	0.51, 2.07	1.0000
>ULN	27	5 (18.5)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	30 (11.8)	NE (NE, NE)	131	12 (9.2)	NE (NE, NE)	1.22	0.64, 2.49	0.5492
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	21 (12.7)	NE (NE, NE)	80	9 (11.3)	NE (NE, NE)	1.04	0.49, 2.41	0.9149
Residue	79	8 (10.1)	NE (NE, NE)	43	3 (7.0)	NE (NE, NE)	1.45	0.42, 6.62	0.5738
Interaction p-value									0.6732

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.11 PAOLA1: Summary of subgroup analysis of AESI: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	17 (11.6)	NE (NE, NE)	78	8 (10.3)	NE (NE, NE)	1.04	0.46, 2.56	0.9296
Interval	99	12 (12.1)	NE (NE, NE)	45	4 (8.9)	NE (NE, NE)	1.36	0.48, 4.88	0.5817
Interaction p-value									0.7042
Myriad tumour BRCA mutation status									
tBRCAm	158	20 (12.7)	75.0 (NE, NE)	77	10 (13.0)	NE (NE, NE)	0.92	0.44, 2.05	0.8298
Non-tBRCAm	97	10 (10.3)	NE (NE, NE)	54	2 (3.7)	NE (NE, NE)	2.66	0.70, 17.37	0.1644
Interaction p-value									0.1920
Status somatic BRCA mutations									
sBRCAm	25	2 (8.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	11 (15.9)	75.0 (NE, NE)	36	6 (16.7)	NE (NE, NE)	0.90	0.34, 2.63	0.8411
Non-BRCAm	43	5 (11.6)	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	2.36	0.37, 45.47	0.3955
Interaction p-value									0.3979

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.12 PAOLA1: Summary of subgroup analysis of AESI: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	1 (1.1)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	38	1 (2.6)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	1 (4.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	3 (2.0)	NE (NE, NE)	65	2 (3.1)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	2 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	1 (1.1)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	2 (5.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	3 (2.0)	NE (NE, NE)	67	2 (3.0)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	2 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	1 (0.5)	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	2 (2.9)	NE (NE, NE)	33	3 (9.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.12 PAOLA1: Summary of subgroup analysis of AESI: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	3 (1.6)	NE (NE, NE)	89	2 (2.2)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	2 (4.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	2 (1.1)	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	2 (6.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	3 (1.3)	NE (NE, NE)	117	4 (3.4)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	3 (1.2)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	3 (7.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.12 PAOLA1: Summary of subgroup analysis of AESI: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	3 (3.8)	NE (NE, NE)	NC	NC	NC
Interval	99	2 (2.0)	NE (NE, NE)	45	1 (2.2)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	3 (1.9)	NE (NE, NE)	77	3 (3.9)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.13 PAOLA1: Summary of subgroup analysis of AESI: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	4 (4.3)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	4 (5.4)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	2 (4.1)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	7 (4.7)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	3 (2.9)	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	3 (3.4)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	7 (9.5)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	7 (4.8)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	3 (2.8)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	6 (3.2)	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	4 (5.7)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.13 PAOLA1: Summary of subgroup analysis of AESI: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	7 (3.8)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	3 (4.1)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	10 (4.1)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	5.07	0.97, 93.09	0.0550
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	7 (3.7)	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	3 (4.9)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	10 (4.4)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	5.12	0.98, 93.91	0.0534
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	10 (3.9)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	5.12	0.98, 93.88	0.0535
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	10 (6.0)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	4.81	0.92, 88.29	0.0650
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.13 PAOLA1: Summary of subgroup analysis of AESI: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	3 (2.1)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	7 (7.1)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	8 (5.1)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	2 (2.1)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	5 (7.2)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	2 (4.7)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.14 PAOLA1: Summary of subgroup analysis of AESI: Posterior Reversible Encephalopathy Syndrome (PRES)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.14 PAOLA1: Summary of subgroup analysis of AESI: Posterior Reversible Encephalopathy Syndrome (PRES)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.14 PAOLA1: Summary of subgroup analysis of AESI: Posterior Reversible Encephalopathy Syndrome (PRES)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.15 PAOLA1: Summary of subgroup analysis of AESI: Congestive heart failure
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.15 PAOLA1: Summary of subgroup analysis of AESI: Congestive heart failure
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.15 PAOLA1: Summary of subgroup analysis of AESI: Congestive heart failure
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.16 PAOLA1: Summary of subgroup analysis of AESI: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	1 (2.6)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	1 (2.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	2 (2.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.16 PAOLA1: Summary of subgroup analysis of AESI: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	2 (2.2)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	2 (1.6)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	1 (7.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	2 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.16 PAOLA1: Summary of subgroup analysis of AESI: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	1 (2.2)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	1 (1.3)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	1 (2.8)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.17 PAOLA1: Summary of subgroup analysis of AESI: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 2 (2.2)	NE (NE, NE)	48 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 1 (1.4)	NE (NE, NE)	38 2 (5.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 1 (2.5)	NE (NE, NE)	20 0	NE (NE, NE)	NC	NC	NC
PR	49 0	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 2 (1.3)	NE (NE, NE)	65 1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 2 (1.9)	NE (NE, NE)	66 2 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 2 (2.2)	NE (NE, NE)	47 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 1 (1.4)	NE (NE, NE)	32 2 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 1 (2.6)	NE (NE, NE)	17 0	NE (NE, NE)	NC	NC	NC
PR	50 0	NE (NE, NE)	34 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 2 (1.4)	NE (NE, NE)	67 1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 2 (1.9)	NE (NE, NE)	64 2 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 3 (1.6)	NE (NE, NE)	98 1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70 1 (1.4)	NE (NE, NE)	33 2 (6.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.17 PAOLA1: Summary of subgroup analysis of AESI: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	3 (1.6)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	4 (1.6)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	2 (3.3)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	4 (1.8)	NE (NE, NE)	117	3 (2.6)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	4 (1.6)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	3 (3.8)	NE (NE, NE)	NC	NC	NC
Residue	79	1 (1.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.17 PAOLA1: Summary of subgroup analysis of AESI: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	3 (2.1)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	2 (4.4)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	2 (2.6)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	2 (2.1)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	1 (2.8)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.18 PAOLA1: Summary of subgroup analysis of AESI: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	2 (2.2)	NE (NE, NE)	48	2 (4.2)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	1 (1.4)	NE (NE, NE)	38	2 (5.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	1 (2.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	2 (1.3)	NE (NE, NE)	65	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	2 (1.9)	NE (NE, NE)	66	3 (4.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	2 (2.2)	NE (NE, NE)	47	2 (4.3)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	1 (1.4)	NE (NE, NE)	32	2 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	1 (2.6)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	2 (1.4)	NE (NE, NE)	67	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	2 (1.9)	NE (NE, NE)	64	3 (4.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	3 (1.6)	NE (NE, NE)	98	2 (2.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	1 (1.4)	NE (NE, NE)	33	2 (6.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.18 PAOLA1: Summary of subgroup analysis of AESI: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	3 (1.6)	NE (NE, NE)	89	4 (4.5)	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	4 (1.6)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	3 (3.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	2 (3.3)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	4 (1.8)	NE (NE, NE)	117	4 (3.4)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	4 (1.6)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	4 (5.0)	NE (NE, NE)	NC	NC	NC
Residue	79	1 (1.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.18 PAOLA1: Summary of subgroup analysis of AESI: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	3 (2.1)	NE (NE, NE)	78	2 (2.6)	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	2 (4.4)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	3 (3.9)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	2 (2.1)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	2 (5.6)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.19 PAOLA1: Summary of subgroup analysis of AESI: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 5 (5.4)	NE (NE, NE)	48 2 (4.2)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 6 (8.1)	NE (NE, NE)	38 1 (2.6)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 4 (10.0)	NE (NE, NE)	20 1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49 0	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 13 (8.7)	NE (NE, NE)	65 3 (4.6)	NE (NE, NE)	1.68	0.54, 7.31	0.3956
non-tBRCAm	105 2 (1.9)	NE (NE, NE)	66 1 (1.5)	NE (NE, NE)	1.14	0.11, 24.54	0.9137
Interaction p-value							0.7833
First line treatment outcome (eCRF)							
NED [PDS]	89 6 (6.7)	NE (NE, NE)	47 2 (4.3)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 6 (8.1)	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 3 (7.7)	NE (NE, NE)	17 1 (5.9)	NE (NE, NE)	NC	NC	NC
PR	50 0	NE (NE, NE)	34 1 (2.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 13 (8.8)	NE (NE, NE)	67 3 (4.5)	NE (NE, NE)	1.74	0.56, 7.60	0.3605
non-tBRCAm	108 2 (1.9)	NE (NE, NE)	64 1 (1.6)	NE (NE, NE)	1.09	0.10, 23.35	0.9463
Interaction p-value							0.7367
Age group							
<65 years	185 13 (7.0)	NE (NE, NE)	98 3 (3.1)	NE (NE, NE)	2.13	0.69, 9.29	0.2042
>=65 years	70 2 (2.9)	NE (NE, NE)	33 1 (3.0)	NE (NE, NE)	0.74	0.07, 15.91	0.8085
Interaction p-value							0.4631

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.19 PAOLA1: Summary of subgroup analysis of AESI: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	10 (5.5)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	1.46	0.45, 6.51	0.5539
IV	73	5 (6.8)	NE (NE, NE)	42	1 (2.4)	NE (NE, NE)	2.57	0.41, 49.34	0.3422
Interaction p-value									0.6481
Region									
Europe	245	14 (5.7)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	1.59	0.57, 5.62	0.3937
Japan	10	1 (10.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	8 (4.2)	NE (NE, NE)	100	3 (3.0)	NE (NE, NE)	1.27	0.37, 5.80	0.7190
(1) Restricted activity	61	7 (11.5)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	2.91	0.52, 54.37	0.2574
Interaction p-value									0.4960
Baseline CA-125 value									
<=ULN	228	15 (6.6)	NE (NE, NE)	117	4 (3.4)	NE (NE, NE)	1.66	0.60, 5.82	0.3477
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	15 (5.9)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.71	0.62, 6.01	0.3157
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	12 (7.2)	NE (NE, NE)	80	2 (2.5)	NE (NE, NE)	2.55	0.69, 16.40	0.1732
Residue	79	3 (3.8)	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	0.73	0.12, 5.52	0.7299
Interaction p-value									0.2929

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.19 PAOLA1: Summary of subgroup analysis of AESI: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	9 (6.2)	NE (NE, NE)	78	3 (3.8)	NE (NE, NE)	1.33	0.40, 6.01	0.6596
Interval	99	6 (6.1)	NE (NE, NE)	45	1 (2.2)	NE (NE, NE)	2.62	0.45, 49.47	0.3204
Interaction p-value									0.5821
Myriad tumour BRCA mutation status									
tBRCAm	158	13 (8.2)	NE (NE, NE)	77	4 (5.2)	NE (NE, NE)	1.37	0.48, 4.86	0.5734
Non-tBRCAm	97	2 (2.1)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	6 (8.7)	NE (NE, NE)	36	2 (5.6)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	1 (2.3)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.20 PAOLA1: Summary of subgroup analysis of AESI: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	1 (0.7)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	2 (1.9)	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	3 (4.1)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	1 (0.7)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	2 (1.9)	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	1 (0.5)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	2 (2.9)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.20 PAOLA1: Summary of subgroup analysis of AESI: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	2 (1.1)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	3 (1.6)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	2 (0.9)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.20 PAOLA1: Summary of subgroup analysis of AESI: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	3 (3.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	1 (2.3)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.21 PAOLA1: Summary of subgroup analysis of Serious AESI: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 5 (5.4)	NE (NE, NE)	48 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 2 (2.7)	NE (NE, NE)	38 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 2 (5.0)	NE (NE, NE)	20 0	NE (NE, NE)	NC	NC	NC
PR	49 4 (8.2)	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 6 (4.0)	NE (NE, NE)	65 0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 7 (6.7)	NE (NE, NE)	66 1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 5 (5.6)	NE (NE, NE)	47 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 3 (4.1)	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 2 (5.1)	NE (NE, NE)	17 0	NE (NE, NE)	NC	NC	NC
PR	50 3 (6.0)	NE (NE, NE)	34 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 6 (4.1)	NE (NE, NE)	67 0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 7 (6.5)	NE (NE, NE)	64 1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 9 (4.9)	NE (NE, NE)	98 1 (1.0)	NE (NE, NE)	4.84	0.91, 89.20	0.0674
>=65 years	70 4 (5.7)	NE (NE, NE)	33 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.21 PAOLA1: Summary of subgroup analysis of Serious AESI: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	8 (4.4)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	5 (6.8)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	11 (4.5)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	5.72	1.11,104.45	0.0345*
Japan	10	2 (20.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	9 (4.7)	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	4.84	0.91, 89.22	0.0674
(1) Restricted activity	61	4 (6.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	12 (5.3)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	6.31	1.24,114.86	0.0224*
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	13 (5.1)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	6.83	1.36,124.06	0.0151*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	8 (4.8)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	3 (3.8)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.21 PAOLA1: Summary of subgroup analysis of Serious AESI: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	8 (5.5)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	3 (3.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	8 (5.1)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	5 (5.2)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	2 (8.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	3 (4.3)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	2 (4.7)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.22 PAOLA1: Summary of subgroup analysis of Serious AESI: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	1 (2.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	2 (1.9)	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	1 (2.6)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	1 (2.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	2 (1.9)	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	1 (0.5)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	1 (1.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.22 PAOLA1: Summary of subgroup analysis of Serious AESI: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	2 (0.8)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	2 (1.1)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	1 (0.4)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	2 (0.8)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	1 (1.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.22 PAOLA1: Summary of subgroup analysis of Serious AESI: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	1 (0.6)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.23 PAOLA1: Summary of subgroup analysis of Serious AESI: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	1 (1.1)	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	1 (2.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	1 (0.7)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	3 (2.9)	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	1 (1.1)	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	1 (2.6)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	1 (0.7)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	3 (2.8)	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	2 (1.1)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	2 (2.9)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.23 PAOLA1: Summary of subgroup analysis of Serious AESI: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	3 (1.6)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	1 (10.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	3 (1.6)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	4 (1.8)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	4 (1.6)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.23 PAOLA1: Summary of subgroup analysis of Serious AESI: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	2 (2.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	1 (0.6)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	3 (3.1)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	1 (2.3)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.24 PAOLA1: Summary of subgroup analysis of Serious AESI: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.24 PAOLA1: Summary of subgroup analysis of Serious AESI: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.24 PAOLA1: Summary of subgroup analysis of Serious AESI: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s3/tlf/prod/program/ttesubae.sas ettesubaeaax 11AUG2022:11:30 kpzx329

Table 3.4.25 PAOLA1: Summary of subgroup analysis of Serious AESI: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 7 (7.6)	NE (NE, NE)	48 2 (4.2)	NE (NE, NE)	1.75	0.42, 11.72	0.4655
NED/CR [IDS]	74 3 (4.1)	NE (NE, NE)	38 6 (15.8)	NE (NE, NE)	0.24	0.05, 0.90	0.0346*
NED/CR [Chemo]	40 3 (7.5)	NE (NE, NE)	20 5 (25.0)	NE (NE, NE)	0.25	0.05, 1.03	0.0553
PR	49 9 (18.4)	NE (NE, NE)	25 3 (12.0)	NE (NE, NE)	1.61	0.48, 7.27	0.4573
Interaction p-value							0.0506
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 14 (9.3)	NE (NE, NE)	65 10 (15.4)	NE (NE, NE)	0.55	0.25, 1.29	0.1638
non-tBRCAm	105 8 (7.6)	NE (NE, NE)	66 6 (9.1)	NE (NE, NE)	0.82	0.28, 2.49	0.7128
Interaction p-value							0.5661
First line treatment outcome (eCRF)							
NED [PDS]	89 6 (6.7)	NE (NE, NE)	47 1 (2.1)	NE (NE, NE)	3.08	0.53, 58.13	0.2383
NED/CR [IDS]	74 4 (5.4)	NE (NE, NE)	32 5 (15.6)	NE (NE, NE)	0.33	0.08, 1.24	0.0975
NED/CR [Chemo]	39 4 (10.3)	NE (NE, NE)	17 4 (23.5)	NE (NE, NE)	0.40	0.09, 1.69	0.2016
PR	50 8 (16.0)	NE (NE, NE)	34 5 (14.7)	NE (NE, NE)	1.04	0.35, 3.45	0.9424
Interaction p-value							0.1743
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 12 (8.2)	NE (NE, NE)	67 10 (14.9)	NE (NE, NE)	0.50	0.21, 1.18	0.1097
non-tBRCAm	108 10 (9.3)	NE (NE, NE)	64 6 (9.4)	NE (NE, NE)	0.98	0.36, 2.87	0.9626
Interaction p-value							0.3119
Age group							
<65 years	185 12 (6.5)	NE (NE, NE)	98 12 (12.2)	NE (NE, NE)	0.49	0.22, 1.10	0.0844
>=65 years	70 10 (14.3)	NE (NE, NE)	33 4 (12.1)	NE (NE, NE)	1.19	0.40, 4.33	0.7674
Interaction p-value							0.2076

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.25 PAOLA1: Summary of subgroup analysis of Serious AESI: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	16 (8.8)	NE (NE, NE)	89	9 (10.1)	NE (NE, NE)	0.84	0.38, 1.98	0.6770
IV	73	6 (8.2)	NE (NE, NE)	42	7 (16.7)	NE (NE, NE)	0.45	0.14, 1.35	0.1512
Interaction p-value									0.3656
Region									
Europe	245	22 (9.0)	NE (NE, NE)	125	16 (12.8)	NE (NE, NE)	0.66	0.35, 1.28	0.2163
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	12 (6.3)	NE (NE, NE)	100	12 (12.0)	NE (NE, NE)	0.49	0.22, 1.11	0.0856
(1) Restricted activity	61	9 (14.8)	NE (NE, NE)	30	4 (13.3)	NE (NE, NE)	1.10	0.36, 4.05	0.8779
Interaction p-value									0.2611
Baseline CA-125 value									
<=ULN	228	20 (8.8)	NE (NE, NE)	117	14 (12.0)	NE (NE, NE)	0.70	0.36, 1.41	0.3108
>ULN	27	2 (7.4)	NE (NE, NE)	14	2 (14.3)	NE (NE, NE)	0.46	0.06, 3.86	0.4471
Interaction p-value									0.6981
Histological grade									
High grade	255	22 (8.6)	NE (NE, NE)	131	16 (12.2)	NE (NE, NE)	0.67	0.35, 1.30	0.2279
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	10 (6.0)	NE (NE, NE)	80	7 (8.8)	NE (NE, NE)	0.66	0.25, 1.81	0.4034
Residue	79	8 (10.1)	NE (NE, NE)	43	9 (20.9)	NE (NE, NE)	0.44	0.16, 1.15	0.0925
Interaction p-value									0.5579

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.25 PAOLA1: Summary of subgroup analysis of Serious AESI: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	12 (8.2)	NE (NE, NE)	78	9 (11.5)	NE (NE, NE)	0.66	0.28, 1.63	0.3600
Interval	99	6 (6.1)	NE (NE, NE)	45	7 (15.6)	NE (NE, NE)	0.37	0.12, 1.11	0.0756
Interaction p-value									0.4070
Myriad tumour BRCA mutation status									
tBRCAm	158	14 (8.9)	NE (NE, NE)	77	11 (14.3)	NE (NE, NE)	0.57	0.26, 1.28	0.1678
Non-tBRCAm	97	8 (8.2)	NE (NE, NE)	54	5 (9.3)	NE (NE, NE)	0.88	0.29, 2.92	0.8286
Interaction p-value									0.5249
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	4 (5.8)	NE (NE, NE)	36	6 (16.7)	NE (NE, NE)	0.32	0.08, 1.12	0.0733
Non-BRCAm	43	4 (9.3)	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	2.22	0.33, 43.39	0.4433
Interaction p-value									0.1018

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.26 PAOLA1: Summary of subgroup analysis of Serious AESI: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	1 (1.1)	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	1 (0.7)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	1 (2.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	1 (0.7)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	1 (0.5)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.26 PAOLA1: Summary of subgroup analysis of Serious AESI: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	1 (0.4)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	1 (0.4)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	1 (0.4)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	1 (1.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.26 PAOLA1: Summary of subgroup analysis of Serious AESI: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	1 (0.6)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.27 PAOLA1: Summary of subgroup analysis of Serious AESI: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	2 (5.0)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	1 (0.7)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	1 (1.0)	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	2 (5.1)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	1 (0.7)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	1 (0.5)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	1 (1.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.27 PAOLA1: Summary of subgroup analysis of Serious AESI: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	2 (0.8)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	2 (1.1)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	2 (0.9)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	2 (0.8)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	2 (2.5)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.27 PAOLA1: Summary of subgroup analysis of Serious AESI: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	2 (1.4)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	1 (0.6)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.28 PAOLA1: Summary of subgroup analysis of Serious AESI: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.28 PAOLA1: Summary of subgroup analysis of Serious AESI: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.28 PAOLA1: Summary of subgroup analysis of Serious AESI: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	1 (1.3)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s3/tlf/prod/program/ttesubae.sas ettesubaeabb 11AUG2022:11:30 kpzx329

Table 3.4.29 PAOLA1: Summary of subgroup analysis of Serious AESI: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	2 (2.2)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	1 (0.7)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	1 (1.0)	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	2 (2.2)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	1 (0.7)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	1 (0.5)	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	1 (1.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
root/cdar/d081/_iemt/ar/iemt_payer_paola_germany_s3/tlf/prod/program/ttesubae.sas ettesubaeabc 11AUG2022:11:30 kpzx329

Table 3.4.29 PAOLA1: Summary of subgroup analysis of Serious AESI: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	2 (1.1)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	2 (0.8)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	2 (0.9)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	2 (0.8)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	2 (1.2)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.29 PAOLA1: Summary of subgroup analysis of Serious AESI: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	2 (1.4)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	75.0 (75.0, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.30 PAOLA1: Summary of subgroup analysis of Serious AESI: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 1 (1.1)	NE (NE, NE)	48 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 0	NE (NE, NE)	38 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 0	NE (NE, NE)	20 1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49 0	NE (NE, NE)	25 1 (4.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 1 (0.7)	NE (NE, NE)	65 1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 0	NE (NE, NE)	66 2 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 1 (1.1)	NE (NE, NE)	47 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 0	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 0	NE (NE, NE)	17 1 (5.9)	NE (NE, NE)	NC	NC	NC
PR	50 0	NE (NE, NE)	34 1 (2.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 1 (0.7)	NE (NE, NE)	67 1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 0	NE (NE, NE)	64 2 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 1 (0.5)	NE (NE, NE)	98 1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70 0	NE (NE, NE)	33 2 (6.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.30 PAOLA1: Summary of subgroup analysis of Serious AESI: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	2 (4.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	1 (0.4)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	1 (0.4)	NE (NE, NE)	117	3 (2.6)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	1 (0.4)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	1 (0.6)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.30 PAOLA1: Summary of subgroup analysis of Serious AESI: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	3 (3.8)	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	1 (0.6)	NE (NE, NE)	77	2 (2.6)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.31 PAOLA1: Summary of subgroup analysis of Serious AESI: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	1 (1.1)	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	1 (0.7)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	1 (1.0)	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	1 (1.1)	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	1 (1.4)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	1 (0.7)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	2 (1.1)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.31 PAOLA1: Summary of subgroup analysis of Serious AESI: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	2 (0.8)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	2 (0.9)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	2 (0.8)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	2 (1.2)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.31 PAOLA1: Summary of subgroup analysis of Serious AESI: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.32 PAOLA1: Summary of subgroup analysis of Serious AESI: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.32 PAOLA1: Summary of subgroup analysis of Serious AESI: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.32 PAOLA1: Summary of subgroup analysis of Serious AESI: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.33 PAOLA1: Summary of subgroup analysis of Serious AESI: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	2 (2.2)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	1 (1.4)	NE (NE, NE)	38	2 (5.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	2 (1.3)	NE (NE, NE)	65	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	1 (1.0)	NE (NE, NE)	66	2 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	2 (2.2)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	1 (1.4)	NE (NE, NE)	32	2 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	2 (1.4)	NE (NE, NE)	67	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	2 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	3 (1.6)	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	2 (6.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.33 PAOLA1: Summary of subgroup analysis of Serious AESI: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	3 (1.6)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	2 (3.3)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	3 (1.3)	NE (NE, NE)	117	3 (2.6)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	3 (1.2)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	3 (3.8)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.33 PAOLA1: Summary of subgroup analysis of Serious AESI: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	2 (1.4)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	2 (4.4)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	2 (2.6)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	1 (2.8)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.34 PAOLA1: Summary of subgroup analysis of Serious AESI: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	2 (2.2)	NE (NE, NE)	48	2 (4.2)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	1 (1.4)	NE (NE, NE)	38	2 (5.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	2 (1.3)	NE (NE, NE)	65	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	1 (1.0)	NE (NE, NE)	66	3 (4.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	2 (2.2)	NE (NE, NE)	47	2 (4.3)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	1 (1.4)	NE (NE, NE)	32	2 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	2 (1.4)	NE (NE, NE)	67	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	3 (4.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	3 (1.6)	NE (NE, NE)	98	2 (2.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	2 (6.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.34 PAOLA1: Summary of subgroup analysis of Serious AESI: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	3 (1.6)	NE (NE, NE)	89	4 (4.5)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	3 (3.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	2 (3.3)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	3 (1.3)	NE (NE, NE)	117	4 (3.4)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	3 (1.2)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	4 (5.0)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.34 PAOLA1: Summary of subgroup analysis of Serious AESI: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	2 (1.4)	NE (NE, NE)	78	2 (2.6)	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	2 (4.4)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	3 (3.9)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	2 (5.6)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.35 PAOLA1: Summary of subgroup analysis of Serious AESI: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 5 (5.4)	NE (NE, NE)	48 2 (4.2)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 6 (8.1)	NE (NE, NE)	38 1 (2.6)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 4 (10.0)	NE (NE, NE)	20 1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49 0	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 13 (8.7)	NE (NE, NE)	65 3 (4.6)	NE (NE, NE)	1.68	0.54, 7.31	0.3956
non-tBRCAm	105 2 (1.9)	NE (NE, NE)	66 1 (1.5)	NE (NE, NE)	1.14	0.11, 24.54	0.9137
Interaction p-value							0.7833
First line treatment outcome (eCRF)							
NED [PDS]	89 6 (6.7)	NE (NE, NE)	47 2 (4.3)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 6 (8.1)	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 3 (7.7)	NE (NE, NE)	17 1 (5.9)	NE (NE, NE)	NC	NC	NC
PR	50 0	NE (NE, NE)	34 1 (2.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 13 (8.8)	NE (NE, NE)	67 3 (4.5)	NE (NE, NE)	1.74	0.56, 7.60	0.3605
non-tBRCAm	108 2 (1.9)	NE (NE, NE)	64 1 (1.6)	NE (NE, NE)	1.09	0.10, 23.35	0.9463
Interaction p-value							0.7367
Age group							
<65 years	185 13 (7.0)	NE (NE, NE)	98 3 (3.1)	NE (NE, NE)	2.13	0.69, 9.29	0.2042
>=65 years	70 2 (2.9)	NE (NE, NE)	33 1 (3.0)	NE (NE, NE)	0.74	0.07, 15.91	0.8085
Interaction p-value							0.4631

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.35 PAOLA1: Summary of subgroup analysis of Serious AESI: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	10 (5.5)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	1.46	0.45, 6.51	0.5539
IV	73	5 (6.8)	NE (NE, NE)	42	1 (2.4)	NE (NE, NE)	2.57	0.41, 49.34	0.3422
Interaction p-value									0.6481
Region									
Europe	245	14 (5.7)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	1.59	0.57, 5.62	0.3937
Japan	10	1 (10.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	8 (4.2)	NE (NE, NE)	100	3 (3.0)	NE (NE, NE)	1.27	0.37, 5.80	0.7190
(1) Restricted activity	61	7 (11.5)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	2.91	0.52, 54.37	0.2574
Interaction p-value									0.4960
Baseline CA-125 value									
<=ULN	228	15 (6.6)	NE (NE, NE)	117	4 (3.4)	NE (NE, NE)	1.66	0.60, 5.82	0.3477
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	15 (5.9)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.71	0.62, 6.01	0.3157
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	12 (7.2)	NE (NE, NE)	80	2 (2.5)	NE (NE, NE)	2.55	0.69, 16.40	0.1732
Residue	79	3 (3.8)	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	0.73	0.12, 5.52	0.7299
Interaction p-value									0.2929

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.35 PAOLA1: Summary of subgroup analysis of Serious AESI: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	9 (6.2)	NE (NE, NE)	78	3 (3.8)	NE (NE, NE)	1.33	0.40, 6.01	0.6596
Interval	99	6 (6.1)	NE (NE, NE)	45	1 (2.2)	NE (NE, NE)	2.62	0.45, 49.47	0.3204
Interaction p-value									0.5821
Myriad tumour BRCA mutation status									
tBRCAm	158	13 (8.2)	NE (NE, NE)	77	4 (5.2)	NE (NE, NE)	1.37	0.48, 4.86	0.5734
Non-tBRCAm	97	2 (2.1)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	6 (8.7)	NE (NE, NE)	36	2 (5.6)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	1 (2.3)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.36 PAOLA1: Summary of subgroup analysis of Serious AESI: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	1 (1.4)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	2 (1.9)	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	2 (1.9)	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	2 (2.9)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.36 PAOLA1: Summary of subgroup analysis of Serious AESI: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	2 (1.1)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	2 (0.8)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	2 (1.1)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	1 (0.4)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	2 (0.8)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	2 (1.2)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.36 PAOLA1: Summary of subgroup analysis of Serious AESI: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	2 (2.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	1 (0.6)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	1 (2.3)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.37 PAOLA1: Summary of subgroup analysis of AESI G>=3: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	18 (19.6)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	10.12	2.09,182.11	0.0014*
NED/CR [IDS]	74	14 (18.9)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	7 (17.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	8 (16.3)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	23 (15.3)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	24 (22.9)	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	17.16	3.63,306.70	<0.0001*
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	19 (21.3)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	10.94	2.27,196.60	0.0008*
NED/CR [IDS]	74	16 (21.6)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	5 (12.8)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	7 (14.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	23 (15.6)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	24 (22.2)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	16.13	3.41,288.17	<0.0001*
Interaction p-value									NC
Age group									
<65 years	185	32 (17.3)	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	18.40	3.96,327.26	<0.0001*
>=65 years	70	15 (21.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.37 PAOLA1: Summary of subgroup analysis of AESI G>=3: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	35 (19.2)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	18.77	4.06,333.36	<0.0001*
IV	73	12 (16.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	43 (17.6)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	23.95	5.23,424.41	<0.0001*
Japan	10	4 (40.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	33 (17.4)	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	18.95	4.09,336.90	<0.0001*
(1) Restricted activity	61	14 (23.0)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	44 (19.3)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	24.98	5.46,442.61	<0.0001*
>ULN	27	3 (11.1)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	47 (18.4)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	26.53	5.81,469.83	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	35 (21.1)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	18.74	4.05,332.85	<0.0001*
Residue	79	8 (10.1)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.37 PAOLA1: Summary of subgroup analysis of AESI G>=3: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	26 (17.8)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	15.00	3.19,267.60	<0.0001*
Interval	99	17 (17.2)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	27 (17.1)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	20 (20.6)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	12.55	2.62,225.05	0.0003*
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	3 (12.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	10 (14.5)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	10 (23.3)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.38 PAOLA1: Summary of subgroup analysis of AESI G>=3: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 5 (5.4)	NE (NE, NE)	48 3 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 8 (10.8)	NE (NE, NE)	38 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 4 (10.0)	NE (NE, NE)	20 1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49 4 (8.2)	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 11 (7.3)	NE (NE, NE)	65 2 (3.1)	NE (NE, NE)	2.39	0.64, 15.43	0.2133
non-tBRCAm	105 10 (9.5)	NE (NE, NE)	66 2 (3.0)	NE (NE, NE)	3.21	0.85, 20.86	0.0911
Interaction p-value							0.7873
First line treatment outcome (eCRF)							
NED [PDS]	89 7 (7.9)	NE (NE, NE)	47 3 (6.4)	NE (NE, NE)	1.20	0.33, 5.55	0.7921
NED/CR [IDS]	74 8 (10.8)	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 1 (2.6)	NE (NE, NE)	17 1 (5.9)	NE (NE, NE)	0.45	0.02, 11.31	0.5748
PR	50 5 (10.0)	NE (NE, NE)	34 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							0.5354
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 11 (7.5)	NE (NE, NE)	67 2 (3.0)	NE (NE, NE)	2.51	0.67, 16.20	0.1865
non-tBRCAm	108 10 (9.3)	NE (NE, NE)	64 2 (3.1)	NE (NE, NE)	3.02	0.80, 19.68	0.1102
Interaction p-value							0.8634
Age group							
<65 years	185 14 (7.6)	NE (NE, NE)	98 4 (4.1)	NE (NE, NE)	1.87	0.67, 6.59	0.2450
>=65 years	70 7 (10.0)	NE (NE, NE)	33 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.38 PAOLA1: Summary of subgroup analysis of AESI G>=3: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	17 (9.3)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	2.81	0.94, 12.03	0.0649
IV	73	4 (5.5)	NE (NE, NE)	42	1 (2.4)	NE (NE, NE)	2.30	0.34, 44.90	0.4226
Interaction p-value									0.8764
Region									
Europe	245	20 (8.2)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	2.56	0.97, 8.81	0.0584
Japan	10	1 (10.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	11 (5.8)	NE (NE, NE)	100	4 (4.0)	NE (NE, NE)	1.43	0.49, 5.17	0.5263
(1) Restricted activity	61	9 (14.8)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	18 (7.9)	NE (NE, NE)	117	4 (3.4)	NE (NE, NE)	2.32	0.87, 8.04	0.0978
>ULN	27	3 (11.1)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	21 (8.2)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	2.72	1.04, 9.33	0.0415*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	15 (9.0)	NE (NE, NE)	80	3 (3.8)	NE (NE, NE)	2.42	0.80, 10.44	0.1261
Residue	79	4 (5.1)	NE (NE, NE)	43	1 (2.3)	NE (NE, NE)	2.19	0.32, 42.92	0.4499
Interaction p-value									0.9403

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.38 PAOLA1: Summary of subgroup analysis of AESI G>=3: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	10 (6.8)	NE (NE, NE)	78	4 (5.1)	NE (NE, NE)	1.32	0.44, 4.81	0.6325
Interval	99	9 (9.1)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	12 (7.6)	NE (NE, NE)	77	3 (3.9)	NE (NE, NE)	1.92	0.61, 8.45	0.2811
Non-tBRCAm	97	9 (9.3)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	5.23	0.98, 96.34	0.0531
Interaction p-value									0.3949
Status somatic BRCA mutations									
sBRCAm	25	5 (20.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	3 (4.3)	NE (NE, NE)	36	1 (2.8)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	5 (11.6)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.39 PAOLA1: Summary of subgroup analysis of AESI G>=3: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	2 (2.2)	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	38	4 (10.5)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	1 (2.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	1 (0.7)	NE (NE, NE)	65	3 (4.6)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	4 (3.8)	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	2 (2.2)	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	32	3 (9.4)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	1 (2.6)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	1 (2.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	1 (0.7)	NE (NE, NE)	67	3 (4.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	4 (3.7)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	4 (2.2)	NE (NE, NE)	98	3 (3.1)	NE (NE, NE)	NC	NC	NC
>=65 years	70	1 (1.4)	NE (NE, NE)	33	1 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.39 PAOLA1: Summary of subgroup analysis of AESI G>=3: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	4 (2.2)	NE (NE, NE)	89	2 (2.2)	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	2 (4.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	5 (2.0)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	3 (1.6)	NE (NE, NE)	100	3 (3.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	2 (3.3)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	5 (2.2)	NE (NE, NE)	117	4 (3.4)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	5 (2.0)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	4 (2.4)	NE (NE, NE)	80	3 (3.8)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	1 (2.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.39 PAOLA1: Summary of subgroup analysis of AESI G>=3: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	2 (1.4)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	2 (2.0)	NE (NE, NE)	45	4 (8.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	1 (0.6)	NE (NE, NE)	77	3 (3.9)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	4 (4.1)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	2 (5.6)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	2 (4.7)	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.40 PAOLA1: Summary of subgroup analysis of AESI G>=3: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	1 (1.1)	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	5 (6.8)	NE (NE, NE)	38	2 (5.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	1 (2.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	2 (4.1)	NE (NE, NE)	25	2 (8.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	7 (4.7)	NE (NE, NE)	65	2 (3.1)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	2 (1.9)	NE (NE, NE)	66	2 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	1 (1.1)	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	4 (5.4)	NE (NE, NE)	32	2 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	1 (2.6)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	3 (6.0)	NE (NE, NE)	34	2 (5.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	7 (4.8)	NE (NE, NE)	67	2 (3.0)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	2 (1.9)	NE (NE, NE)	64	2 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	8 (4.3)	NE (NE, NE)	98	3 (3.1)	NE (NE, NE)	1.41	0.41, 6.42	0.6053
>=65 years	70	1 (1.4)	NE (NE, NE)	33	1 (3.0)	NE (NE, NE)	0.46	0.02, 11.57	0.5855
Interaction p-value									0.4792

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.40 PAOLA1: Summary of subgroup analysis of AESI G>=3: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	7 (3.8)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	1.13	0.31, 5.26	0.8552
IV	73	2 (2.7)	NE (NE, NE)	42	1 (2.4)	NE (NE, NE)	1.13	0.11, 24.41	0.9170
Interaction p-value									0.9990
Region									
Europe	245	9 (3.7)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	1.52	0.45, 6.86	0.5156
Japan	10	0	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	7 (3.7)	NE (NE, NE)	100	3 (3.0)	NE (NE, NE)	1.23	0.34, 5.69	0.7653
(1) Restricted activity	61	2 (3.3)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	0.95	0.09, 20.42	0.9663
Interaction p-value									0.8570
Baseline CA-125 value									
<=ULN	228	8 (3.5)	NE (NE, NE)	117	2 (1.7)	NE (NE, NE)	2.03	0.51, 13.46	0.3386
>ULN	27	1 (3.7)	NE (NE, NE)	14	2 (14.3)	NE (NE, NE)	0.25	0.01, 2.66	0.2452
Interaction p-value									0.1366
Histological grade									
High grade	255	9 (3.5)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.14	0.37, 4.22	0.8218
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	5 (3.0)	NE (NE, NE)	80	2 (2.5)	NE (NE, NE)	NC	NC	NC
Residue	79	4 (5.1)	NE (NE, NE)	43	1 (2.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.40 PAOLA1: Summary of subgroup analysis of AESI G>=3: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	4 (2.7)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	5 (5.1)	NE (NE, NE)	45	3 (6.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	7 (4.4)	NE (NE, NE)	77	2 (2.6)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	2 (2.1)	NE (NE, NE)	54	2 (3.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	4 (5.8)	NE (NE, NE)	36	2 (5.6)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	2 (4.7)	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.41 PAOLA1: Summary of subgroup analysis of AESI G>=3: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	2 (4.2)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	3 (4.1)	NE (NE, NE)	38	2 (5.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	1 (4.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	3 (2.0)	NE (NE, NE)	65	3 (4.6)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	1 (1.0)	NE (NE, NE)	66	3 (4.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	2 (4.3)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	3 (4.1)	NE (NE, NE)	32	2 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	NC	NC	NC
PR	50	1 (2.0)	NE (NE, NE)	34	1 (2.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	3 (2.0)	NE (NE, NE)	67	3 (4.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	3 (4.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	4 (2.2)	NE (NE, NE)	98	5 (5.1)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	1 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.41 PAOLA1: Summary of subgroup analysis of AESI G>=3: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	4 (2.2)	NE (NE, NE)	89	5 (5.6)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	1 (2.4)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	4 (1.6)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	2 (33.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	4 (2.1)	NE (NE, NE)	100	4 (4.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	2 (6.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	4 (1.8)	NE (NE, NE)	117	5 (4.3)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	1 (7.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	4 (1.6)	NE (NE, NE)	131	6 (4.6)	NE (NE, NE)	0.33	0.08, 1.14	0.0792
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	4 (5.0)	NE (NE, NE)	NC	NC	NC
Residue	79	1 (1.3)	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.41 PAOLA1: Summary of subgroup analysis of AESI G>=3: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	3 (3.8)	NE (NE, NE)	NC	NC	NC
Interval	99	3 (3.0)	NE (NE, NE)	45	3 (6.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	3 (1.9)	NE (NE, NE)	77	3 (3.9)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	3 (5.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	2 (2.9)	NE (NE, NE)	36	2 (5.6)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	1 (2.3)	NE (NE, NE)	23	2 (8.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.42 PAOLA1: Summary of subgroup analysis of AESI G>=3: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 4 (4.3)	NE (NE, NE)	48 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 6 (8.1)	NE (NE, NE)	38 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 3 (7.5)	NE (NE, NE)	20 0	NE (NE, NE)	NC	NC	NC
PR	49 4 (8.2)	NE (NE, NE)	25 2 (8.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 9 (6.0)	NE (NE, NE)	65 2 (3.1)	NE (NE, NE)	1.96	0.51, 12.87	0.3566
non-tBRCAm	105 8 (7.6)	NE (NE, NE)	66 1 (1.5)	NE (NE, NE)	5.15	0.94, 95.50	0.0597
Interaction p-value							0.4513
First line treatment outcome (eCRF)							
NED [PDS]	89 4 (4.5)	NE (NE, NE)	47 0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 5 (6.8)	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 3 (7.7)	NE (NE, NE)	17 0	NE (NE, NE)	NC	NC	NC
PR	50 5 (10.0)	NE (NE, NE)	34 3 (8.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 9 (6.1)	NE (NE, NE)	67 2 (3.0)	NE (NE, NE)	2.06	0.53, 13.52	0.3203
non-tBRCAm	108 8 (7.4)	NE (NE, NE)	64 1 (1.6)	NE (NE, NE)	4.85	0.89, 90.03	0.0712
Interaction p-value							0.5046
Age group							
<65 years	185 10 (5.4)	NE (NE, NE)	98 2 (2.0)	NE (NE, NE)	2.67	0.70, 17.34	0.1617
>=65 years	70 7 (10.0)	NE (NE, NE)	33 1 (3.0)	NE (NE, NE)	3.39	0.60, 63.46	0.1865
Interaction p-value							0.8534

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.42 PAOLA1: Summary of subgroup analysis of AESI G>=3: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	14 (7.7)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	6.93	1.39,125.60	0.0133*
IV	73	3 (4.1)	NE (NE, NE)	42	2 (4.8)	NE (NE, NE)	0.88	0.15, 6.65	0.8857
Interaction p-value									0.1190
Region									
Europe	245	17 (6.9)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	2.93	0.98, 12.54	0.0540
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	10 (5.3)	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	5.28	1.01, 96.89	0.0482*
(1) Restricted activity	61	7 (11.5)	NE (NE, NE)	30	2 (6.7)	NE (NE, NE)	1.80	0.44, 12.09	0.4403
Interaction p-value									0.4008
Baseline CA-125 value									
<=ULN	228	16 (7.0)	NE (NE, NE)	117	2 (1.7)	NE (NE, NE)	4.16	1.18, 26.29	0.0236*
>ULN	27	1 (3.7)	NE (NE, NE)	14	1 (7.1)	NE (NE, NE)	0.53	0.02, 13.27	0.6516
Interaction p-value									0.2112
Histological grade									
High grade	255	17 (6.7)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	2.95	0.99, 12.63	0.0523
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	9 (5.4)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	6 (7.6)	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.42 PAOLA1: Summary of subgroup analysis of AESI G>=3: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	8 (5.5)	NE (NE, NE)	78	2 (2.6)	NE (NE, NE)	2.10	0.53, 13.94	0.3136
Interval	99	7 (7.1)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	9 (5.7)	NE (NE, NE)	77	2 (2.6)	NE (NE, NE)	2.19	0.56, 14.35	0.2793
Non-tBRCAm	97	8 (8.2)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	4.62	0.85, 85.68	0.0821
Interaction p-value									0.5614
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	7 (10.1)	NE (NE, NE)	36	2 (5.6)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	3 (7.0)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.43 PAOLA1: Summary of subgroup analysis of AESI G>=3: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	15 (16.3)	NE (NE, NE)	48	11 (22.9)	NE (NE, NE)	0.63	0.29, 1.41	0.2563
NED/CR [IDS]	74	14 (18.9)	NE (NE, NE)	38	13 (34.2)	NE (NE, NE)	0.47	0.22, 1.01	0.0543
NED/CR [Chemo]	40	9 (22.5)	NE (NE, NE)	20	7 (35.0)	NE (NE, NE)	0.57	0.21, 1.61	0.2791
PR	49	12 (24.5)	NE (NE, NE)	25	11 (44.0)	NE (NE, NE)	0.47	0.21, 1.08	0.0742
Interaction p-value									0.9388
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	29 (19.3)	NE (NE, NE)	65	23 (35.4)	NE (NE, NE)	0.44	0.26, 0.77	0.0046*
non-tBRCAm	105	21 (20.0)	NE (NE, NE)	66	19 (28.8)	NE (NE, NE)	0.65	0.35, 1.21	0.1735
Interaction p-value									0.3677
First line treatment outcome (eCRF)									
NED [PDS]	89	14 (15.7)	NE (NE, NE)	47	10 (21.3)	NE (NE, NE)	0.67	0.30, 1.55	0.3344
NED/CR [IDS]	74	13 (17.6)	NE (NE, NE)	32	9 (28.1)	NE (NE, NE)	0.57	0.24, 1.37	0.1997
NED/CR [Chemo]	39	9 (23.1)	NE (NE, NE)	17	7 (41.2)	NE (NE, NE)	0.51	0.19, 1.43	0.1910
PR	50	14 (28.0)	NE (NE, NE)	34	15 (44.1)	NE (NE, NE)	0.50	0.24, 1.05	0.0667
Interaction p-value									0.9609
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	27 (18.4)	NE (NE, NE)	67	23 (34.3)	NE (NE, NE)	0.43	0.25, 0.76	0.0041*
non-tBRCAm	108	23 (21.3)	NE (NE, NE)	64	19 (29.7)	NE (NE, NE)	0.67	0.37, 1.25	0.2060
Interaction p-value									0.2958
Age group									
<65 years	185	28 (15.1)	NE (NE, NE)	98	29 (29.6)	NE (NE, NE)	0.44	0.26, 0.74	0.0022*
>=65 years	70	22 (31.4)	NE (NE, NE)	33	13 (39.4)	NE (NE, NE)	0.71	0.36, 1.46	0.3434
Interaction p-value									0.2669

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.43 PAOLA1: Summary of subgroup analysis of AESI G>=3: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	38 (20.9)	NE (NE, NE)	89	25 (28.1)	NE (NE, NE)	0.68	0.41, 1.14	0.1368
IV	73	12 (16.4)	NE (NE, NE)	42	17 (40.5)	NE (NE, NE)	0.32	0.15, 0.66	0.0023*
Interaction p-value									0.0958
Region									
Europe	245	50 (20.4)	NE (NE, NE)	125	41 (32.8)	NE (NE, NE)	0.54	0.36, 0.82	0.0041*
Japan	10	0	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	30 (15.8)	NE (NE, NE)	100	32 (32.0)	NE (NE, NE)	0.42	0.26, 0.70	0.0008*
(1) Restricted activity	61	18 (29.5)	NE (NE, NE)	30	10 (33.3)	NE (NE, NE)	0.81	0.38, 1.82	0.5892
Interaction p-value									0.1658
Baseline CA-125 value									
<=ULN	228	44 (19.3)	NE (NE, NE)	117	35 (29.9)	NE (NE, NE)	0.57	0.37, 0.90	0.0162*
>ULN	27	6 (22.2)	NE (NE, NE)	14	7 (50.0)	NE (NE, NE)	0.31	0.10, 0.92	0.0363*
Interaction p-value									0.2959
Histological grade									
High grade	255	50 (19.6)	NE (NE, NE)	131	42 (32.1)	NE (NE, NE)	0.53	0.35, 0.81	0.0031*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	27 (16.3)	NE (NE, NE)	80	20 (25.0)	NE (NE, NE)	0.58	0.33, 1.05	0.0739
Residue	79	16 (20.3)	NE (NE, NE)	43	16 (37.2)	NE (NE, NE)	0.47	0.24, 0.96	0.0371*
Interaction p-value									0.6502

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.43 PAOLA1: Summary of subgroup analysis of AESI G>=3: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	25 (17.1)	NE (NE, NE)	78	21 (26.9)	NE (NE, NE)	0.57	0.32, 1.03	0.0634
Interval	99	18 (18.2)	NE (NE, NE)	45	15 (33.3)	NE (NE, NE)	0.47	0.24, 0.95	0.0357*
Interaction p-value									0.6728
Myriad tumour BRCA mutation status									
tBRCAm	158	31 (19.6)	NE (NE, NE)	77	25 (32.5)	NE (NE, NE)	0.50	0.30, 0.85	0.0115*
Non-tBRCAm	97	19 (19.6)	NE (NE, NE)	54	17 (31.5)	NE (NE, NE)	0.58	0.30, 1.13	0.1095
Interaction p-value									0.7189
Status somatic BRCA mutations									
sBRCAm	25	5 (20.0)	NE (NE, NE)	9	3 (33.3)	NE (NE, NE)	0.47	0.12, 2.31	0.3261
gBRCAm	69	13 (18.8)	NE (NE, NE)	36	12 (33.3)	NE (NE, NE)	0.48	0.22, 1.06	0.0677
Non-BRCAm	43	12 (27.9)	NE (NE, NE)	23	8 (34.8)	NE (NE, NE)	0.77	0.32, 1.96	0.5667
Interaction p-value									0.7047

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.44 PAOLA1: Summary of subgroup analysis of AESI G>=3: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	1 (1.1)	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	3 (2.0)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	1 (1.1)	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	3 (2.0)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	2 (1.1)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	1 (1.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.44 PAOLA1: Summary of subgroup analysis of AESI G>=3: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	2 (1.1)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	2 (1.1)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	3 (1.3)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.44 PAOLA1: Summary of subgroup analysis of AESI G>=3: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	2 (2.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	3 (1.9)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	2 (2.9)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.45 PAOLA1: Summary of subgroup analysis of AESI G>=3: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	2 (5.0)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	2 (1.3)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	1 (1.0)	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	2 (5.1)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	1 (2.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	2 (1.4)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	2 (1.1)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	1 (1.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.45 PAOLA1: Summary of subgroup analysis of AESI G>=3: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	2 (2.7)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	2 (1.1)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	2 (0.9)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	3 (3.8)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.45 PAOLA1: Summary of subgroup analysis of AESI G>=3: GI perforations, abscesses and fistulae
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	2 (1.4)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.46 PAOLA1: Summary of subgroup analysis of AESI G>=3: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.46 PAOLA1: Summary of subgroup analysis of AESI G>=3: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.46 PAOLA1: Summary of subgroup analysis of AESI G>=3: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.47 PAOLA1: Summary of subgroup analysis of AESI G>=3: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	2 (2.2)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	1 (0.7)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	1 (1.0)	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	2 (2.2)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	1 (0.7)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	1 (0.5)	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	1 (1.4)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.47 PAOLA1: Summary of subgroup analysis of AESI G>=3: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	2 (1.1)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	2 (0.8)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	2 (0.9)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	2 (0.8)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	2 (1.2)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.47 PAOLA1: Summary of subgroup analysis of AESI G>=3: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	2 (1.4)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	75.0 (75.0, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.48 PAOLA1: Summary of subgroup analysis of AESI G>=3: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 1 (1.1)	NE (NE, NE)	48 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 0	NE (NE, NE)	38 1 (2.6)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 0	NE (NE, NE)	20 1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49 0	NE (NE, NE)	25 1 (4.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 1 (0.7)	NE (NE, NE)	65 2 (3.1)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 0	NE (NE, NE)	66 2 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 1 (1.1)	NE (NE, NE)	47 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 0	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 0	NE (NE, NE)	17 1 (5.9)	NE (NE, NE)	NC	NC	NC
PR	50 0	NE (NE, NE)	34 2 (5.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 1 (0.7)	NE (NE, NE)	67 2 (3.0)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 0	NE (NE, NE)	64 2 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 1 (0.5)	NE (NE, NE)	98 1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70 0	NE (NE, NE)	33 3 (9.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.48 PAOLA1: Summary of subgroup analysis of AESI G>=3: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	2 (2.2)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	2 (4.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	1 (0.4)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	2 (6.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	1 (0.4)	NE (NE, NE)	117	4 (3.4)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	1 (0.4)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	1 (0.6)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	3 (7.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.48 PAOLA1: Summary of subgroup analysis of AESI G>=3: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	3 (3.8)	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	1 (2.2)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	1 (0.6)	NE (NE, NE)	77	3 (3.9)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.49 PAOLA1: Summary of subgroup analysis of AESI G>=3: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	1 (1.1)	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	2 (4.1)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	2 (1.3)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	1 (1.0)	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	1 (1.1)	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	2 (1.4)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	1 (0.9)	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	3 (1.6)	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.49 PAOLA1: Summary of subgroup analysis of AESI G>=3: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	2 (2.7)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	2 (3.3)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	3 (1.3)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.49 PAOLA1: Summary of subgroup analysis of AESI G>=3: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	2 (2.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	3 (1.9)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	2 (2.9)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.50 PAOLA1: Summary of subgroup analysis of AESI G>=3: Congestive heart failure
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.50 PAOLA1: Summary of subgroup analysis of AESI G>=3: Congestive heart failure
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.50 PAOLA1: Summary of subgroup analysis of AESI G>=3: Congestive heart failure
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.51 PAOLA1: Summary of subgroup analysis of AESI G>=3: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Number (%) of patients n with events		Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.51 PAOLA1: Summary of subgroup analysis of AESI G>=3: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	1 (2.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.51 PAOLA1: Summary of subgroup analysis of AESI G>=3: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.52 PAOLA1: Summary of subgroup analysis of AESI G>=3: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 2 (2.2)	NE (NE, NE)	48 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 1 (1.4)	NE (NE, NE)	38 2 (5.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 1 (2.5)	NE (NE, NE)	20 0	NE (NE, NE)	NC	NC	NC
PR	49 0	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 2 (1.3)	NE (NE, NE)	65 1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 2 (1.9)	NE (NE, NE)	66 2 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 2 (2.2)	NE (NE, NE)	47 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 1 (1.4)	NE (NE, NE)	32 2 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 1 (2.6)	NE (NE, NE)	17 0	NE (NE, NE)	NC	NC	NC
PR	50 0	NE (NE, NE)	34 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 2 (1.4)	NE (NE, NE)	67 1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 2 (1.9)	NE (NE, NE)	64 2 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 3 (1.6)	NE (NE, NE)	98 1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70 1 (1.4)	NE (NE, NE)	33 2 (6.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.52 PAOLA1: Summary of subgroup analysis of AESI G>=3: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	3 (1.6)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	4 (1.6)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	2 (3.3)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	4 (1.8)	NE (NE, NE)	117	3 (2.6)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	4 (1.6)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	3 (3.8)	NE (NE, NE)	NC	NC	NC
Residue	79	1 (1.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.52 PAOLA1: Summary of subgroup analysis of AESI G>=3: MDS/AML
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	3 (2.1)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	2 (4.4)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	2 (2.6)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	2 (2.1)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	1 (2.8)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.53 PAOLA1: Summary of subgroup analysis of AESI G>=3: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	2 (2.2)	NE (NE, NE)	48	2 (4.2)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	1 (1.4)	NE (NE, NE)	38	2 (5.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	1 (2.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	2 (1.3)	NE (NE, NE)	65	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	2 (1.9)	NE (NE, NE)	66	3 (4.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	2 (2.2)	NE (NE, NE)	47	2 (4.3)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	1 (1.4)	NE (NE, NE)	32	2 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	1 (2.6)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	2 (1.4)	NE (NE, NE)	67	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	2 (1.9)	NE (NE, NE)	64	3 (4.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	3 (1.6)	NE (NE, NE)	98	2 (2.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	1 (1.4)	NE (NE, NE)	33	2 (6.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.53 PAOLA1: Summary of subgroup analysis of AESI G>=3: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	3 (1.6)	NE (NE, NE)	89	4 (4.5)	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	4 (1.6)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	3 (3.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	2 (3.3)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	4 (1.8)	NE (NE, NE)	117	4 (3.4)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	4 (1.6)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	4 (5.0)	NE (NE, NE)	NC	NC	NC
Residue	79	1 (1.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.53 PAOLA1: Summary of subgroup analysis of AESI G>=3: Myelodysplastic syndrome and Acute myeloid leukaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	3 (2.1)	NE (NE, NE)	78	2 (2.6)	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	2 (4.4)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	3 (3.9)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	2 (2.1)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	2 (5.6)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.54 PAOLA1: Summary of subgroup analysis of AESI G>=3: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 3 (3.3)	NE (NE, NE)	48 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 6 (8.1)	NE (NE, NE)	38 1 (2.6)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 2 (5.0)	NE (NE, NE)	20 1 (5.0)	NE (NE, NE)	NC	NC	NC
PR	49 0	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 9 (6.0)	NE (NE, NE)	65 2 (3.1)	NE (NE, NE)	1.76	0.45, 11.55	0.4436
non-tBRCAm	105 2 (1.9)	NE (NE, NE)	66 1 (1.5)	NE (NE, NE)	1.14	0.11, 24.55	0.9137
Interaction p-value							0.7676
First line treatment outcome (eCRF)							
NED [PDS]	89 4 (4.5)	NE (NE, NE)	47 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 6 (8.1)	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 1 (2.6)	NE (NE, NE)	17 1 (5.9)	NE (NE, NE)	NC	NC	NC
PR	50 0	NE (NE, NE)	34 1 (2.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 9 (6.1)	NE (NE, NE)	67 2 (3.0)	NE (NE, NE)	1.83	0.47, 12.00	0.4121
non-tBRCAm	108 2 (1.9)	NE (NE, NE)	64 1 (1.6)	NE (NE, NE)	1.08	0.10, 23.32	0.9474
Interaction p-value							0.7222
Age group							
<65 years	185 9 (4.9)	NE (NE, NE)	98 2 (2.0)	NE (NE, NE)	2.21	0.57, 14.49	0.2736
>=65 years	70 2 (2.9)	NE (NE, NE)	33 1 (3.0)	NE (NE, NE)	0.75	0.07, 16.21	0.8199
Interaction p-value							0.4733

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.54 PAOLA1: Summary of subgroup analysis of AESI G>=3: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	7 (3.8)	NE (NE, NE)	89	2 (2.2)	NE (NE, NE)	NC	NC	NC
IV	73	4 (5.5)	NE (NE, NE)	42	1 (2.4)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	10 (4.1)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	1.52	0.47, 6.81	0.5068
Japan	10	1 (10.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	6 (3.2)	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	5 (8.2)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	11 (4.8)	NE (NE, NE)	117	3 (2.6)	NE (NE, NE)	1.64	0.51, 7.24	0.4309
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	11 (4.3)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	1.68	0.52, 7.44	0.4035
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	10 (6.0)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	4.30	0.82, 79.05	0.0910
Residue	79	1 (1.3)	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	0.24	0.01, 2.48	0.2223
Interaction p-value									0.0524

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.54 PAOLA1: Summary of subgroup analysis of AESI G>=3: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	5 (3.4)	NE (NE, NE)	78	2 (2.6)	NE (NE, NE)	NC	NC	NC
Interval	99	6 (6.1)	NE (NE, NE)	45	1 (2.2)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	9 (5.7)	NE (NE, NE)	77	3 (3.9)	NE (NE, NE)	1.27	0.38, 5.73	0.7149
Non-tBRCAm	97	2 (2.1)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	5 (7.2)	NE (NE, NE)	36	2 (5.6)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	1 (2.3)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.55 PAOLA1: Summary of subgroup analysis of AESI G1-2: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	28 (30.4)	NE (NE, NE)	48	7 (14.6)	NE (NE, NE)	2.31	1.07, 5.74	0.0328*
NED/CR [IDS]	74	31 (41.9)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	11 (27.5)	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	5.95	1.16,108.78	0.0298*
PR	49	16 (32.7)	NE (NE, NE)	25	3 (12.0)	NE (NE, NE)	3.29	1.10, 14.15	0.0322*
Interaction p-value									0.6375
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	46 (30.7)	NE (NE, NE)	65	7 (10.8)	NE (NE, NE)	3.18	1.53, 7.72	0.0011*
non-tBRCAm	105	40 (38.1)	NE (NE, NE)	66	4 (6.1)	NE (NE, NE)	7.81	3.15, 26.03	<0.0001*
Interaction p-value									0.1665
First line treatment outcome (eCRF)									
NED [PDS]	89	26 (29.2)	NE (NE, NE)	47	7 (14.9)	NE (NE, NE)	2.16	0.99, 5.39	0.0536
NED/CR [IDS]	74	28 (37.8)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	10 (25.6)	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	4.77	0.91, 87.51	0.0669
PR	50	20 (40.0)	NE (NE, NE)	34	3 (8.8)	NE (NE, NE)	5.59	1.92, 23.72	0.0008*
Interaction p-value									0.3918
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	46 (31.3)	NE (NE, NE)	67	7 (10.4)	NE (NE, NE)	3.36	1.62, 8.16	0.0006*
non-tBRCAm	108	40 (37.0)	NE (NE, NE)	64	4 (6.3)	NE (NE, NE)	7.32	2.95, 24.38	<0.0001*
Interaction p-value									0.2316
Age group									
<65 years	185	57 (30.8)	NE (NE, NE)	98	8 (8.2)	NE (NE, NE)	4.34	2.20, 9.85	<0.0001*
>=65 years	70	29 (41.4)	NE (NE, NE)	33	3 (9.1)	NE (NE, NE)	5.66	2.01, 23.64	0.0003*
Interaction p-value									0.7057

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.55 PAOLA1: Summary of subgroup analysis of AESI G1-2: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	61 (33.5)	NE (NE, NE)	89	8 (9.0)	NE (NE, NE)	4.33	2.20, 9.81	<0.0001*
IV	73	25 (34.2)	NE (NE, NE)	42	3 (7.1)	NE (NE, NE)	5.77	2.03, 24.25	0.0004*
Interaction p-value									0.6836
Region									
Europe	245	80 (32.7)	NE (NE, NE)	125	11 (8.8)	NE (NE, NE)	4.30	2.39, 8.55	<0.0001*
Japan	10	6 (60.0)	2.8 (0.3, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	63 (33.2)	NE (NE, NE)	100	7 (7.0)	NE (NE, NE)	5.68	2.79, 13.63	<0.0001*
(1) Restricted activity	61	23 (37.7)	NE (NE, NE)	30	4 (13.3)	NE (NE, NE)	3.14	1.21, 10.71	0.0168*
Interaction p-value									0.3900
Baseline CA-125 value									
<=ULN	228	74 (32.5)	NE (NE, NE)	117	10 (8.5)	NE (NE, NE)	4.40	2.38, 9.07	<0.0001*
>ULN	27	12 (44.4)	NE (NE, NE)	14	1 (7.1)	NE (NE, NE)	8.32	1.64,151.60	0.0066*
Interaction p-value									0.5311
Histological grade									
High grade	255	86 (33.7)	NE (NE, NE)	131	11 (8.4)	NE (NE, NE)	4.71	2.63, 9.35	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	56 (33.7)	NE (NE, NE)	80	7 (8.8)	NE (NE, NE)	4.55	2.22, 10.96	<0.0001*
Residue	79	26 (32.9)	NE (NE, NE)	43	2 (4.7)	NE (NE, NE)	8.36	2.50, 51.89	<0.0001*
Interaction p-value									0.4474

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.55 PAOLA1: Summary of subgroup analysis of AESI G1-2: Anaemia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	41 (28.1)	NE (NE, NE)	78	9 (11.5)	NE (NE, NE)	2.68	1.37, 5.90	0.0032*
Interval	99	41 (41.4)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	52 (32.9)	NE (NE, NE)	77	6 (7.8)	NE (NE, NE)	4.86	2.26, 12.64	<0.0001*
Non-tBRCAm	97	34 (35.1)	NE (NE, NE)	54	5 (9.3)	NE (NE, NE)	4.59	1.96, 13.38	0.0002*
Interaction p-value									0.9296
Status somatic BRCA mutations									
sBRCAm	25	9 (36.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	25 (36.2)	NE (NE, NE)	36	4 (11.1)	NE (NE, NE)	3.93	1.52, 13.35	0.0032*
Non-BRCAm	43	17 (39.5)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.56 PAOLA1: Summary of subgroup analysis of AESI G1-2: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	12 (13.0)	NE (NE, NE)	48	6 (12.5)	NE (NE, NE)	1.01	0.39, 2.91	0.9806
NED/CR [IDS]	74	16 (21.6)	NE (NE, NE)	38	7 (18.4)	NE (NE, NE)	1.14	0.49, 2.98	0.7645
NED/CR [Chemo]	40	6 (15.0)	NE (NE, NE)	20	4 (20.0)	NE (NE, NE)	0.70	0.20, 2.74	0.5863
PR	49	5 (10.2)	NE (NE, NE)	25	2 (8.0)	NE (NE, NE)	1.33	0.29, 9.28	0.7289
Interaction p-value									0.9193
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	21 (14.0)	NE (NE, NE)	65	10 (15.4)	NE (NE, NE)	0.87	0.42, 1.94	0.7272
non-tBRCAm	105	18 (17.1)	NE (NE, NE)	66	9 (13.6)	NE (NE, NE)	1.27	0.58, 2.96	0.5558
Interaction p-value									0.5062
First line treatment outcome (eCRF)									
NED [PDS]	89	13 (14.6)	NE (NE, NE)	47	5 (10.6)	NE (NE, NE)	1.36	0.51, 4.25	0.5462
NED/CR [IDS]	74	14 (18.9)	NE (NE, NE)	32	6 (18.8)	NE (NE, NE)	0.97	0.39, 2.74	0.9516
NED/CR [Chemo]	39	5 (12.8)	NE (NE, NE)	17	3 (17.6)	NE (NE, NE)	0.67	0.16, 3.27	0.5909
PR	50	7 (14.0)	NE (NE, NE)	34	5 (14.7)	NE (NE, NE)	0.96	0.31, 3.24	0.9435
Interaction p-value									0.8833
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	21 (14.3)	NE (NE, NE)	67	11 (16.4)	NE (NE, NE)	0.83	0.41, 1.79	0.6300
non-tBRCAm	108	18 (16.7)	NE (NE, NE)	64	8 (12.5)	NE (NE, NE)	1.34	0.60, 3.28	0.4790
Interaction p-value									0.3971
Age group									
<65 years	185	28 (15.1)	NE (NE, NE)	98	14 (14.3)	NE (NE, NE)	1.05	0.56, 2.05	0.8866
>=65 years	70	11 (15.7)	NE (NE, NE)	33	5 (15.2)	NE (NE, NE)	0.99	0.36, 3.13	0.9805
Interaction p-value									0.9247

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.56 PAOLA1: Summary of subgroup analysis of AESI G1-2: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	27 (14.8)	NE (NE, NE)	89	11 (12.4)	NE (NE, NE)	1.19	0.61, 2.51	0.6181
IV	73	12 (16.4)	NE (NE, NE)	42	8 (19.0)	NE (NE, NE)	0.82	0.34, 2.09	0.6653
Interaction p-value									0.5185
Region									
Europe	245	33 (13.5)	NE (NE, NE)	125	18 (14.4)	NE (NE, NE)	0.90	0.51, 1.64	0.7303
Japan	10	6 (60.0)	5.2 (0.5, NE)	6	1 (16.7)	NE (NE, NE)	5.17	0.88, 97.70	0.0715
Interaction p-value									0.0703
ECOG performance status at Baseline									
(0) Normal activity	190	31 (16.3)	NE (NE, NE)	100	12 (12.0)	NE (NE, NE)	1.35	0.71, 2.73	0.3679
(1) Restricted activity	61	7 (11.5)	NE (NE, NE)	30	7 (23.3)	NE (NE, NE)	0.46	0.16, 1.34	0.1483
Interaction p-value									0.0887
Baseline CA-125 value									
<=ULN	228	35 (15.4)	NE (NE, NE)	117	16 (13.7)	NE (NE, NE)	1.11	0.62, 2.05	0.7331
>ULN	27	4 (14.8)	NE (NE, NE)	14	3 (21.4)	NE (NE, NE)	0.64	0.14, 3.23	0.5590
Interaction p-value									0.5047
Histological grade									
High grade	255	39 (15.3)	NE (NE, NE)	131	19 (14.5)	NE (NE, NE)	1.03	0.61, 1.83	0.9077
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	27 (16.3)	NE (NE, NE)	80	11 (13.8)	NE (NE, NE)	1.16	0.59, 2.45	0.6702
Residue	79	10 (12.7)	NE (NE, NE)	43	7 (16.3)	NE (NE, NE)	0.74	0.29, 2.05	0.5512
Interaction p-value									0.4639

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.56 PAOLA1: Summary of subgroup analysis of AESI G1-2: Neutropenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	20 (13.7)	NE (NE, NE)	78	9 (11.5)	NE (NE, NE)	1.17	0.55, 2.71	0.6901
Interval	99	17 (17.2)	NE (NE, NE)	45	9 (20.0)	NE (NE, NE)	0.81	0.37, 1.91	0.6169
Interaction p-value									0.5236
Myriad tumour BRCA mutation status									
tBRCAm	158	22 (13.9)	NE (NE, NE)	77	10 (13.0)	NE (NE, NE)	1.04	0.51, 2.29	0.9193
Non-tBRCAm	97	17 (17.5)	NE (NE, NE)	54	9 (16.7)	NE (NE, NE)	1.05	0.48, 2.46	0.9056
Interaction p-value									0.9855
Status somatic BRCA mutations									
sBRCAm	25	4 (16.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	1.35	0.20, 26.47	0.7800
gBRCAm	69	11 (15.9)	NE (NE, NE)	36	7 (19.4)	NE (NE, NE)	0.81	0.32, 2.19	0.6595
Non-BRCAm	43	10 (23.3)	NE (NE, NE)	23	4 (17.4)	NE (NE, NE)	1.38	0.46, 5.02	0.5818
Interaction p-value									0.7553

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.57 PAOLA1: Summary of subgroup analysis of AESI G1-2: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	5 (5.4)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	5 (6.8)	NE (NE, NE)	38	3 (7.9)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	3 (7.5)	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	8 (5.3)	NE (NE, NE)	65	2 (3.1)	NE (NE, NE)	1.71	0.43, 11.34	0.4745
non-tBRCAm	105	6 (5.7)	NE (NE, NE)	66	2 (3.0)	NE (NE, NE)	1.88	0.43, 12.86	0.4159
Interaction p-value									0.9324
First line treatment outcome (eCRF)									
NED [PDS]	89	3 (3.4)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	1.52	0.20, 30.77	0.7066
NED/CR [IDS]	74	7 (9.5)	NE (NE, NE)	32	3 (9.4)	NE (NE, NE)	1.00	0.28, 4.66	0.9959
NED/CR [Chemo]	39	2 (5.1)	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	2 (4.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									0.7529
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	8 (5.4)	NE (NE, NE)	67	3 (4.5)	NE (NE, NE)	1.19	0.35, 5.45	0.7908
non-tBRCAm	108	6 (5.6)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	3.57	0.61, 67.41	0.1758
Interaction p-value									0.3672
Age group									
<65 years	185	8 (4.3)	NE (NE, NE)	98	4 (4.1)	NE (NE, NE)	1.03	0.32, 3.86	0.9598
>=65 years	70	6 (8.6)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.57 PAOLA1: Summary of subgroup analysis of AESI G1-2: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	11 (6.0)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	1.77	0.55, 7.82	0.3575
IV	73	3 (4.1)	NE (NE, NE)	42	1 (2.4)	NE (NE, NE)	1.74	0.22, 35.13	0.6176
Interaction p-value									0.9898
Region									
Europe	245	13 (5.3)	NE (NE, NE)	125	4 (3.2)	NE (NE, NE)	1.64	0.58, 5.81	0.3692
Japan	10	1 (10.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	10 (5.3)	NE (NE, NE)	100	3 (3.0)	NE (NE, NE)	1.73	0.53, 7.74	0.3812
(1) Restricted activity	61	4 (6.6)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	1.98	0.29, 38.62	0.5166
Interaction p-value									0.9196
Baseline CA-125 value									
<=ULN	228	13 (5.7)	NE (NE, NE)	117	4 (3.4)	NE (NE, NE)	1.65	0.58, 5.86	0.3609
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	14 (5.5)	NE (NE, NE)	131	4 (3.1)	NE (NE, NE)	1.78	0.64, 6.29	0.2835
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	10 (6.0)	NE (NE, NE)	80	4 (5.0)	NE (NE, NE)	1.18	0.39, 4.30	0.7790
Residue	79	3 (3.8)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.57 PAOLA1: Summary of subgroup analysis of AESI G1-2: Thrombocytopenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	5 (3.4)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	2.61	0.42, 49.93	0.3345
Interval	99	8 (8.1)	NE (NE, NE)	45	3 (6.7)	NE (NE, NE)	1.22	0.35, 5.55	0.7695
Interaction p-value									0.5400
Myriad tumour BRCA mutation status									
tBRCAm	158	9 (5.7)	NE (NE, NE)	77	4 (5.2)	NE (NE, NE)	1.06	0.34, 3.89	0.9287
Non-tBRCAm	97	5 (5.2)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	2 (8.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	4 (5.8)	NE (NE, NE)	36	4 (11.1)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	3 (7.0)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.58 PAOLA1: Summary of subgroup analysis of AESI G1-2: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	52 (56.5)	3.7 (0.8, NE)	48	11 (22.9)	NE (NE, NE)	3.29	1.79, 6.66	<0.0001*
NED/CR [IDS]	74	47 (63.5)	1.4 (0.3, 5.0)	38	13 (34.2)	NE (NE, NE)	2.37	1.32, 4.57	0.0031*
NED/CR [Chemo]	40	21 (52.5)	0.6 (0.3, NE)	20	2 (10.0)	NE (NE, NE)	7.94	2.33, 49.67	0.0002*
PR	49	22 (44.9)	NE (NE, NE)	25	4 (16.0)	NE (NE, NE)	3.51	1.34, 12.01	0.0084*
Interaction p-value									0.4170
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	85 (56.7)	3.7 (0.8, NE)	65	12 (18.5)	NE (NE, NE)	4.10	2.33, 7.91	<0.0001*
non-tBRCAm	105	57 (54.3)	3.3 (0.3, NE)	66	18 (27.3)	NE (NE, NE)	2.62	1.58, 4.59	0.0001*
Interaction p-value									0.2713
First line treatment outcome (eCRF)									
NED [PDS]	89	51 (57.3)	2.7 (0.5, NE)	47	10 (21.3)	NE (NE, NE)	3.64	1.93, 7.60	<0.0001*
NED/CR [IDS]	74	48 (64.9)	1.3 (0.3, 4.3)	32	10 (31.3)	NE (NE, NE)	2.80	1.48, 5.88	0.0010*
NED/CR [Chemo]	39	19 (48.7)	NE (NE, NE)	17	2 (11.8)	NE (NE, NE)	6.15	1.79, 38.62	0.0021*
PR	50	23 (46.0)	NE (NE, NE)	34	7 (20.6)	NE (NE, NE)	2.61	1.18, 6.57	0.0171*
Interaction p-value									0.7038
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	83 (56.5)	3.7 (1.1, NE)	67	13 (19.4)	NE (NE, NE)	3.85	2.23, 7.25	<0.0001*
non-tBRCAm	108	59 (54.6)	2.7 (0.3, NE)	64	17 (26.6)	NE (NE, NE)	2.74	1.63, 4.85	<0.0001*
Interaction p-value									0.3983
Age group									
<65 years	185	108 (58.4)	2.3 (0.8,10.3)	98	21 (21.4)	NE (NE, NE)	3.71	2.37, 6.09	<0.0001*
>=65 years	70	34 (48.6)	NE (NE, NE)	33	9 (27.3)	NE (NE, NE)	2.21	1.11, 4.91	0.0234*
Interaction p-value									0.2554

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.58 PAOLA1: Summary of subgroup analysis of AESI G1-2: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	98 (53.8)	5.4 (0.9, NE)	89	25 (28.1)	NE (NE, NE)	2.44	1.60, 3.87	<0.0001*
IV	73	44 (60.3)	2.1 (0.4, NE)	42	5 (11.9)	NE (NE, NE)	7.29	3.18, 21.06	<0.0001*
Interaction p-value									0.0233*
Region									
Europe	245	139 (56.7)	2.9 (0.9,16.0)	125	30 (24.0)	NE (NE, NE)	3.15	2.15, 4.76	<0.0001*
Japan	10	3 (30.0)	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	111 (58.4)	2.1 (0.8, 8.0)	100	19 (19.0)	NE (NE, NE)	4.18	2.64, 7.03	<0.0001*
(1) Restricted activity	61	30 (49.2)	NE (NE, NE)	30	11 (36.7)	NE (NE, NE)	1.66	0.86, 3.47	0.1351
Interaction p-value									0.0375*
Baseline CA-125 value									
<=ULN	228	127 (55.7)	3.3 (0.9, NE)	117	28 (23.9)	NE (NE, NE)	3.07	2.07, 4.71	<0.0001*
>ULN	27	15 (55.6)	4.1 (0.1, NE)	14	2 (14.3)	NE (NE, NE)	5.45	1.54, 34.60	0.0061*
Interaction p-value									0.4334
Histological grade									
High grade	255	142 (55.7)	3.4 (1.1, NE)	131	30 (22.9)	NE (NE, NE)	3.22	2.21, 4.87	<0.0001*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	100 (60.2)	1.9 (0.6, 7.8)	80	21 (26.3)	NE (NE, NE)	3.10	1.98, 5.10	<0.0001*
Residue	79	38 (48.1)	NE (NE, NE)	43	9 (20.9)	NE (NE, NE)	2.92	1.48, 6.45	0.0014*
Interaction p-value									0.8952

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.58 PAOLA1: Summary of subgroup analysis of AESI G1-2: Nausea
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	76 (52.1)	7.9 (0.8, NE)	78	14 (17.9)	NE (NE, NE)	3.92	2.29, 7.23	<0.0001*
Interval	99	62 (62.6)	2.0 (0.4, 6.1)	45	16 (35.6)	NE (NE, NE)	2.24	1.33, 4.02	0.0020*
Interaction p-value									0.1677
Myriad tumour BRCA mutation status									
tBRCAm	158	90 (57.0)	2.9 (0.8, NE)	77	15 (19.5)	NE (NE, NE)	3.87	2.31, 6.97	<0.0001*
Non-tBRCAm	97	52 (53.6)	3.4 (0.4, NE)	54	15 (27.8)	NE (NE, NE)	2.56	1.48, 4.71	0.0006*
Interaction p-value									0.3053
Status somatic BRCA mutations									
sBRCAm	25	16 (64.0)	0.8 (0.1, NE)	9	2 (22.2)	NE (NE, NE)	3.92	1.11, 24.81	0.0311*
gBRCAm	69	43 (62.3)	2.3 (0.5, 6.1)	36	8 (22.2)	NE (NE, NE)	3.88	1.92, 8.92	<0.0001*
Non-BRCAm	43	23 (53.5)	2.7 (0.3, NE)	23	7 (30.4)	NE (NE, NE)	2.37	1.07, 5.98	0.0327*
Interaction p-value									0.6746

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.59 PAOLA1: Summary of subgroup analysis of AESI G1-2: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	23 (25.0)	NE (NE, NE)	48	5 (10.4)	NE (NE, NE)	2.56	1.06, 7.63	0.0364*
NED/CR [IDS]	74	16 (21.6)	NE (NE, NE)	38	6 (15.8)	NE (NE, NE)	1.41	0.58, 3.92	0.4641
NED/CR [Chemo]	40	4 (10.0)	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	2.06	0.31, 40.33	0.4887
PR	49	9 (18.4)	NE (NE, NE)	25	2 (8.0)	NE (NE, NE)	2.52	0.65, 16.53	0.1962
Interaction p-value									0.8336
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	32 (21.3)	NE (NE, NE)	65	5 (7.7)	NE (NE, NE)	2.93	1.25, 8.57	0.0114*
non-tBRCAm	105	20 (19.0)	NE (NE, NE)	66	9 (13.6)	NE (NE, NE)	1.47	0.69, 3.40	0.3235
Interaction p-value									0.2642
First line treatment outcome (eCRF)									
NED [PDS]	89	21 (23.6)	NE (NE, NE)	47	5 (10.6)	NE (NE, NE)	2.37	0.97, 7.10	0.0604
NED/CR [IDS]	74	15 (20.3)	NE (NE, NE)	32	4 (12.5)	NE (NE, NE)	1.71	0.62, 5.99	0.3176
NED/CR [Chemo]	39	5 (12.8)	NE (NE, NE)	17	2 (11.8)	NE (NE, NE)	1.14	0.25, 7.99	0.8703
PR	50	9 (18.0)	NE (NE, NE)	34	3 (8.8)	NE (NE, NE)	2.11	0.63, 9.53	0.2357
Interaction p-value									0.8964
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	31 (21.1)	NE (NE, NE)	67	5 (7.5)	NE (NE, NE)	2.98	1.27, 8.74	0.0102*
non-tBRCAm	108	21 (19.4)	NE (NE, NE)	64	9 (14.1)	NE (NE, NE)	1.46	0.69, 3.36	0.3311
Interaction p-value									0.2447
Age group									
<65 years	185	41 (22.2)	NE (NE, NE)	98	8 (8.2)	NE (NE, NE)	2.93	1.45, 6.74	0.0019*
>=65 years	70	11 (15.7)	NE (NE, NE)	33	6 (18.2)	NE (NE, NE)	0.86	0.33, 2.50	0.7681
Interaction p-value									0.0596

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.59 PAOLA1: Summary of subgroup analysis of AESI G1-2: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	39 (21.4)	NE (NE, NE)	89	10 (11.2)	NE (NE, NE)	2.02	1.05, 4.28	0.0342*
IV	73	13 (17.8)	NE (NE, NE)	42	4 (9.5)	NE (NE, NE)	1.95	0.69, 6.94	0.2167
Interaction p-value									0.9593
Region									
Europe	245	52 (21.2)	NE (NE, NE)	125	13 (10.4)	NE (NE, NE)	2.17	1.22, 4.16	0.0074*
Japan	10	0	NE (NE, NE)	6	1 (16.7)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	39 (20.5)	NE (NE, NE)	100	11 (11.0)	NE (NE, NE)	1.94	1.03, 3.99	0.0393*
(1) Restricted activity	61	13 (21.3)	NE (NE, NE)	30	3 (10.0)	NE (NE, NE)	2.36	0.76, 10.30	0.1451
Interaction p-value									0.7858
Baseline CA-125 value									
<=ULN	228	41 (18.0)	NE (NE, NE)	117	13 (11.1)	NE (NE, NE)	1.68	0.93, 3.27	0.0876
>ULN	27	11 (40.7)	NE (NE, NE)	14	1 (7.1)	NE (NE, NE)	6.85	1.33,125.10	0.0172*
Interaction p-value									0.1355
Histological grade									
High grade	255	52 (20.4)	NE (NE, NE)	131	14 (10.7)	NE (NE, NE)	2.01	1.15, 3.78	0.0134*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	38 (22.9)	NE (NE, NE)	80	9 (11.3)	NE (NE, NE)	2.17	1.10, 4.78	0.0248*
Residue	79	12 (15.2)	NE (NE, NE)	43	5 (11.6)	NE (NE, NE)	1.34	0.50, 4.20	0.5783
Interaction p-value									0.4618

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.59 PAOLA1: Summary of subgroup analysis of AESI G1-2: Vomiting
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	29 (19.9)	NE (NE, NE)	78	7 (9.0)	NE (NE, NE)	2.35	1.09, 5.83	0.0281*
Interval	99	21 (21.2)	NE (NE, NE)	45	7 (15.6)	NE (NE, NE)	1.41	0.63, 3.58	0.4185
Interaction p-value									0.4006
Myriad tumour BRCA mutation status									
tBRCAm	158	34 (21.5)	NE (NE, NE)	77	6 (7.8)	NE (NE, NE)	2.93	1.32, 7.75	0.0064*
Non-tBRCAm	97	18 (18.6)	NE (NE, NE)	54	8 (14.8)	NE (NE, NE)	1.31	0.59, 3.20	0.5142
Interaction p-value									0.1884
Status somatic BRCA mutations									
sBRCAm	25	7 (28.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	2.77	0.49, 51.85	0.2807
gBRCAm	69	15 (21.7)	NE (NE, NE)	36	3 (8.3)	NE (NE, NE)	2.86	0.94, 12.36	0.0642
Non-BRCAm	43	5 (11.6)	NE (NE, NE)	23	5 (21.7)	NE (NE, NE)	0.52	0.14, 1.85	0.2994
Interaction p-value									0.1165

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.60 PAOLA1: Summary of subgroup analysis of AESI G1-2: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	47 (51.1)	13.2 (2.9, NE)	48	17 (35.4)	NE (NE, NE)	1.72	1.01, 3.07	0.0477*
NED/CR [IDS]	74	45 (60.8)	9.1 (2.2,22.1)	38	15 (39.5)	NE (NE, NE)	1.73	0.99, 3.20	0.0565
NED/CR [Chemo]	40	17 (42.5)	NE (NE, NE)	20	5 (25.0)	NE (NE, NE)	1.99	0.79, 6.07	0.1512
PR	49	24 (49.0)	14.9 (4.2, NE)	25	7 (28.0)	NE (NE, NE)	2.01	0.91, 5.05	0.0854
Interaction p-value									0.9843
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	78 (52.0)	13.4 (5.4, NE)	65	23 (35.4)	NE (NE, NE)	1.63	1.04, 2.65	0.0322*
non-tBRCAm	105	55 (52.4)	13.0 (3.5, NE)	66	21 (31.8)	NE (NE, NE)	2.00	1.23, 3.38	0.0047*
Interaction p-value									0.5549
First line treatment outcome (eCRF)									
NED [PDS]	89	46 (51.7)	13.0 (2.9, NE)	47	18 (38.3)	NE (NE, NE)	1.58	0.93, 2.80	0.0889
NED/CR [IDS]	74	44 (59.5)	6.2 (2.1, NE)	32	9 (28.1)	NE (NE, NE)	2.77	1.42, 6.07	0.0020*
NED/CR [Chemo]	39	16 (41.0)	NE (NE, NE)	17	4 (23.5)	NE (NE, NE)	2.04	0.75, 7.11	0.1747
PR	50	26 (52.0)	15.3 (4.2, NE)	34	13 (38.2)	NE (NE, NE)	1.34	0.70, 2.68	0.3858
Interaction p-value									0.4705
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	76 (51.7)	14.9 (5.6, NE)	67	23 (34.3)	NE (NE, NE)	1.68	1.07, 2.74	0.0230*
non-tBRCAm	108	57 (52.8)	11.3 (3.5, NE)	64	21 (32.8)	NE (NE, NE)	1.95	1.20, 3.28	0.0064*
Interaction p-value									0.6725
Age group									
<65 years	185	100 (54.1)	11.1 (4.9, NE)	98	30 (30.6)	NE (NE, NE)	2.12	1.43, 3.25	0.0001*
>=65 years	70	33 (47.1)	NE (NE, NE)	33	14 (42.4)	NE (NE, NE)	1.16	0.63, 2.23	0.6426
Interaction p-value									0.1179

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.60 PAOLA1: Summary of subgroup analysis of AESI G1-2: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	93 (51.1)	15.8 (6.0, NE)	89	31 (34.8)	NE (NE, NE)	1.65	1.11, 2.52	0.0119*
IV	73	40 (54.8)	11.3 (2.1, NE)	42	13 (31.0)	NE (NE, NE)	2.20	1.21, 4.28	0.0089*
Interaction p-value									0.4485
Region									
Europe	245	133 (54.3)	11.3 (5.1, NE)	125	44 (35.2)	NE (NE, NE)	1.80	1.29, 2.56	0.0004*
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	101 (53.2)	11.0 (3.7, NE)	100	32 (32.0)	NE (NE, NE)	1.96	1.34, 2.97	0.0005*
(1) Restricted activity	61	28 (45.9)	NE (NE, NE)	30	11 (36.7)	NE (NE, NE)	1.34	0.68, 2.80	0.4057
Interaction p-value									0.3549
Baseline CA-125 value									
<=ULN	228	117 (51.3)	15.3 (7.1, NE)	117	39 (33.3)	NE (NE, NE)	1.76	1.24, 2.56	0.0014*
>ULN	27	16 (59.3)	2.1 (0.5, NE)	14	5 (35.7)	NE (NE, NE)	2.18	0.85, 6.67	0.1064
Interaction p-value									0.6906
Histological grade									
High grade	255	133 (52.2)	13.4 (6.0, NE)	131	44 (33.6)	NE (NE, NE)	1.80	1.29, 2.56	0.0004*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	91 (54.8)	9.1 (3.5, NE)	80	27 (33.8)	NE (NE, NE)	2.00	1.32, 3.12	0.0009*
Residue	79	38 (48.1)	NE (NE, NE)	43	13 (30.2)	NE (NE, NE)	1.68	0.92, 3.28	0.0926
Interaction p-value									0.6623

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.60 PAOLA1: Summary of subgroup analysis of AESI G1-2: Fatigue and Asthenia
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	72 (49.3)	NE (NE, NE)	78	23 (29.5)	NE (NE, NE)	1.96	1.25, 3.21	0.0030*
Interval	99	57 (57.6)	9.8 (2.4, NE)	45	17 (37.8)	NE (NE, NE)	1.75	1.04, 3.10	0.0344*
Interaction p-value									0.7501
Myriad tumour BRCA mutation status									
tBRCAm	158	83 (52.5)	13.4 (5.4, NE)	77	26 (33.8)	NE (NE, NE)	1.73	1.13, 2.74	0.0106*
Non-tBRCAm	97	50 (51.5)	13.0 (3.5, NE)	54	18 (33.3)	NE (NE, NE)	1.89	1.13, 3.33	0.0153*
Interaction p-value									0.8029
Status somatic BRCA mutations									
sBRCAm	25	12 (48.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	45 (65.2)	3.5 (1.4,11.8)	36	16 (44.4)	NE (NE, NE)	1.84	1.06, 3.36	0.0292*
Non-BRCAm	43	23 (53.5)	11.0 (2.0, NE)	23	12 (52.2)	10.4 (2.9, NE)	1.15	0.58, 2.38	0.6996
Interaction p-value									0.3066

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.61 PAOLA1: Summary of subgroup analysis of AESI G1-2: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	41 (44.6)	NE (NE, NE)	48	22 (45.8)	NE (NE, NE)	1.07	0.65, 1.83	0.7854
NED/CR [IDS]	74	25 (33.8)	NE (NE, NE)	38	16 (42.1)	NE (NE, NE)	0.75	0.41, 1.44	0.3849
NED/CR [Chemo]	40	15 (37.5)	NE (NE, NE)	20	11 (55.0)	6.9 (1.4, NE)	0.60	0.28, 1.35	0.2100
PR	49	17 (34.7)	NE (NE, NE)	25	10 (40.0)	NE (NE, NE)	0.82	0.38, 1.85	0.6149
Interaction p-value									0.6405
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	54 (36.0)	NE (NE, NE)	65	26 (40.0)	NE (NE, NE)	0.94	0.60, 1.52	0.7974
non-tBRCAm	105	44 (41.9)	NE (NE, NE)	66	33 (50.0)	10.4 (4.1, NE)	0.79	0.50, 1.25	0.3032
Interaction p-value									0.5924
First line treatment outcome (eCRF)									
NED [PDS]	89	40 (44.9)	NE (NE, NE)	47	21 (44.7)	NE (NE, NE)	1.12	0.67, 1.93	0.6822
NED/CR [IDS]	74	23 (31.1)	NE (NE, NE)	32	12 (37.5)	NE (NE, NE)	0.80	0.40, 1.65	0.5261
NED/CR [Chemo]	39	17 (43.6)	NE (NE, NE)	17	8 (47.1)	NE (NE, NE)	0.97	0.43, 2.37	0.9345
PR	50	17 (34.0)	NE (NE, NE)	34	17 (50.0)	9.2 (3.4, NE)	0.57	0.29, 1.12	0.0993
Interaction p-value									0.4654
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	53 (36.1)	NE (NE, NE)	67	26 (38.8)	NE (NE, NE)	0.98	0.62, 1.59	0.9361
non-tBRCAm	108	45 (41.7)	NE (NE, NE)	64	33 (51.6)	7.6 (3.6, NE)	0.74	0.48, 1.17	0.2008
Interaction p-value									0.4027
Age group									
<65 years	185	69 (37.3)	NE (NE, NE)	98	44 (44.9)	NE (NE, NE)	0.81	0.56, 1.20	0.2907
>=65 years	70	29 (41.4)	NE (NE, NE)	33	15 (45.5)	NE (NE, NE)	0.92	0.50, 1.76	0.7911
Interaction p-value									0.7443

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.61 PAOLA1: Summary of subgroup analysis of AESI G1-2: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	68 (37.4)	NE (NE, NE)	89	41 (46.1)	NE (NE, NE)	0.80	0.55, 1.19	0.2622
IV	73	30 (41.1)	NE (NE, NE)	42	18 (42.9)	NE (NE, NE)	0.96	0.54, 1.75	0.8794
Interaction p-value									0.6165
Region									
Europe	245	95 (38.8)	NE (NE, NE)	125	53 (42.4)	NE (NE, NE)	0.92	0.66, 1.30	0.6278
Japan	10	3 (30.0)	NE (NE, NE)	6	6 (100)	3.5 (0.3, NE)	0.19	0.04, 0.73	0.0154*
Interaction p-value									0.0254*
ECOG performance status at Baseline									
(0) Normal activity	190	73 (38.4)	NE (NE, NE)	100	45 (45.0)	NE (NE, NE)	0.82	0.57, 1.19	0.2883
(1) Restricted activity	61	24 (39.3)	NE (NE, NE)	30	14 (46.7)	NE (NE, NE)	0.92	0.48, 1.83	0.8142
Interaction p-value									0.7479
Baseline CA-125 value									
<=ULN	228	89 (39.0)	NE (NE, NE)	117	53 (45.3)	NE (NE, NE)	0.85	0.61, 1.20	0.3542
>ULN	27	9 (33.3)	NE (NE, NE)	14	6 (42.9)	NE (NE, NE)	0.78	0.28, 2.33	0.6397
Interaction p-value									0.8755
Histological grade									
High grade	255	98 (38.4)	NE (NE, NE)	131	59 (45.0)	NE (NE, NE)	0.84	0.61, 1.17	0.3060
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	64 (38.6)	NE (NE, NE)	80	34 (42.5)	NE (NE, NE)	0.94	0.63, 1.44	0.7810
Residue	79	30 (38.0)	NE (NE, NE)	43	21 (48.8)	NE (NE, NE)	0.71	0.41, 1.26	0.2419
Interaction p-value									0.4346

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.61 PAOLA1: Summary of subgroup analysis of AESI G1-2: Hypertension
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	60 (41.1)	NE (NE, NE)	78	37 (47.4)	NE (NE, NE)	0.88	0.59, 1.34	0.5480
Interval	99	34 (34.3)	NE (NE, NE)	45	18 (40.0)	NE (NE, NE)	0.83	0.48, 1.51	0.5384
Interaction p-value									0.8786
Myriad tumour BRCA mutation status									
tBRCAm	158	59 (37.3)	NE (NE, NE)	77	31 (40.3)	NE (NE, NE)	0.97	0.63, 1.52	0.8982
Non-tBRCAm	97	39 (40.2)	NE (NE, NE)	54	28 (51.9)	9.0 (3.6, NE)	0.70	0.43, 1.15	0.1565
Interaction p-value									0.3255
Status somatic BRCA mutations									
sBRCAm	25	7 (28.0)	NE (NE, NE)	9	1 (11.1)	NE (NE, NE)	2.78	0.49, 51.95	0.2797
gBRCAm	69	24 (34.8)	NE (NE, NE)	36	16 (44.4)	NE (NE, NE)	0.78	0.42, 1.49	0.4431
Non-BRCAm	43	15 (34.9)	NE (NE, NE)	23	13 (56.5)	7.6 (2.2, NE)	0.48	0.23, 1.03	0.0579
Interaction p-value									0.1856

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.62 PAOLA1: Summary of subgroup analysis of AESI G1-2: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 5 (5.4)	NE (NE, NE)	48 9 (18.8)	NE (NE, NE)	0.25	0.08, 0.73	0.0115*
NED/CR [IDS]	74 6 (8.1)	NE (NE, NE)	38 3 (7.9)	NE (NE, NE)	1.03	0.27, 4.86	0.9720
NED/CR [Chemo]	40 3 (7.5)	NE (NE, NE)	20 3 (15.0)	NE (NE, NE)	0.44	0.08, 2.36	0.3170
PR	49 4 (8.2)	NE (NE, NE)	25 4 (16.0)	NE (NE, NE)	0.49	0.12, 2.07	0.3181
Interaction p-value							0.4634
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 13 (8.7)	NE (NE, NE)	65 9 (13.8)	NE (NE, NE)	0.58	0.25, 1.40	0.2174
non-tBRCAm	105 5 (4.8)	NE (NE, NE)	66 10 (15.2)	NE (NE, NE)	0.29	0.09, 0.82	0.0191*
Interaction p-value							0.3176
First line treatment outcome (eCRF)							
NED [PDS]	89 4 (4.5)	NE (NE, NE)	47 8 (17.0)	NE (NE, NE)	0.23	0.06, 0.74	0.0135*
NED/CR [IDS]	74 8 (10.8)	NE (NE, NE)	32 2 (6.3)	NE (NE, NE)	1.75	0.44, 11.62	0.4535
NED/CR [Chemo]	39 1 (2.6)	NE (NE, NE)	17 2 (11.8)	NE (NE, NE)	0.20	0.01, 2.07	0.1704
PR	50 4 (8.0)	NE (NE, NE)	34 6 (17.6)	NE (NE, NE)	0.41	0.11, 1.45	0.1655
Interaction p-value							0.1444
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 12 (8.2)	NE (NE, NE)	67 9 (13.4)	NE (NE, NE)	0.56	0.24, 1.38	0.1994
non-tBRCAm	108 6 (5.6)	NE (NE, NE)	64 10 (15.6)	NE (NE, NE)	0.33	0.11, 0.89	0.0283*
Interaction p-value							0.4301
Age group							
<65 years	185 13 (7.0)	NE (NE, NE)	98 17 (17.3)	NE (NE, NE)	0.37	0.17, 0.75	0.0062*
>=65 years	70 5 (7.1)	NE (NE, NE)	33 2 (6.1)	NE (NE, NE)	1.17	0.25, 8.18	0.8479
Interaction p-value							0.1829

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.62 PAOLA1: Summary of subgroup analysis of AESI G1-2: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	13 (7.1)	NE (NE, NE)	89	12 (13.5)	NE (NE, NE)	0.49	0.22, 1.08	0.0776
IV	73	5 (6.8)	NE (NE, NE)	42	7 (16.7)	NE (NE, NE)	0.39	0.11, 1.21	0.1008
Interaction p-value									0.7386
Region									
Europe	245	18 (7.3)	NE (NE, NE)	125	16 (12.8)	NE (NE, NE)	0.54	0.27, 1.06	0.0735
Japan	10	0	NE (NE, NE)	6	3 (50.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	14 (7.4)	NE (NE, NE)	100	13 (13.0)	NE (NE, NE)	0.53	0.25, 1.15	0.1062
(1) Restricted activity	61	4 (6.6)	NE (NE, NE)	30	6 (20.0)	NE (NE, NE)	0.29	0.07, 1.01	0.0520
Interaction p-value									0.4113
Baseline CA-125 value									
<=ULN	228	16 (7.0)	NE (NE, NE)	117	17 (14.5)	NE (NE, NE)	0.45	0.22, 0.89	0.0225*
>ULN	27	2 (7.4)	NE (NE, NE)	14	2 (14.3)	NE (NE, NE)	0.47	0.06, 3.92	0.4561
Interaction p-value									0.9635
Histological grade									
High grade	255	18 (7.1)	NE (NE, NE)	131	19 (14.5)	NE (NE, NE)	0.45	0.23, 0.86	0.0164*
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	13 (7.8)	NE (NE, NE)	80	11 (13.8)	NE (NE, NE)	0.53	0.24, 1.22	0.1316
Residue	79	4 (5.1)	NE (NE, NE)	43	7 (16.3)	NE (NE, NE)	0.28	0.07, 0.92	0.0356*
Interaction p-value									0.3748

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.62 PAOLA1: Summary of subgroup analysis of AESI G1-2: Proteinuria
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	7 (4.8)	NE (NE, NE)	78	14 (17.9)	NE (NE, NE)	0.23	0.09, 0.56	0.0011*
Interval	99	10 (10.1)	NE (NE, NE)	45	4 (8.9)	NE (NE, NE)	1.14	0.38, 4.16	0.8230
Interaction p-value									0.0273*
Myriad tumour BRCA mutation status									
tBRCAm	158	14 (8.9)	NE (NE, NE)	77	10 (13.0)	NE (NE, NE)	0.63	0.28, 1.46	0.2719
Non-tBRCAm	97	4 (4.1)	NE (NE, NE)	54	9 (16.7)	NE (NE, NE)	0.23	0.06, 0.71	0.0099*
Interaction p-value									0.1569
Status somatic BRCA mutations									
sBRCAm	25	2 (8.0)	NE (NE, NE)	9	2 (22.2)	NE (NE, NE)	0.30	0.04, 2.46	0.2365
gBRCAm	69	6 (8.7)	NE (NE, NE)	36	7 (19.4)	NE (NE, NE)	0.42	0.13, 1.26	0.1197
Non-BRCAm	43	2 (4.7)	NE (NE, NE)	23	2 (8.7)	NE (NE, NE)	0.53	0.06, 4.41	0.5276
Interaction p-value									0.9172

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.63 PAOLA1: Summary of subgroup analysis of AESI G1-2: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	1 (1.1)	NE (NE, NE)	48	3 (6.3)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	2 (1.3)	NE (NE, NE)	65	2 (3.1)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	1 (1.1)	NE (NE, NE)	47	3 (6.4)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	1 (2.0)	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	2 (1.4)	NE (NE, NE)	67	2 (3.0)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	2 (1.1)	NE (NE, NE)	98	2 (2.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	1 (3.0)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.63 PAOLA1: Summary of subgroup analysis of AESI G1-2: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	1 (0.5)	NE (NE, NE)	89	3 (3.4)	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	2 (0.8)	NE (NE, NE)	125	3 (2.4)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	2 (2.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	1 (0.4)	NE (NE, NE)	117	3 (2.6)	NE (NE, NE)	NC	NC	NC
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	2 (0.8)	NE (NE, NE)	131	3 (2.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	1 (0.6)	NE (NE, NE)	80	3 (3.8)	NE (NE, NE)	NC	NC	NC
Residue	79	1 (1.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.63 PAOLA1: Summary of subgroup analysis of AESI G1-2: Wound healing complications
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	1 (0.7)	NE (NE, NE)	78	3 (3.8)	NE (NE, NE)	NC	NC	NC
Interval	99	1 (1.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	1 (0.6)	NE (NE, NE)	77	2 (2.6)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.64 PAOLA1: Summary of subgroup analysis of AESI G1-2: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	10 (10.9)	NE (NE, NE)	48	6 (12.5)	NE (NE, NE)	0.82	0.30, 2.41	0.7030
NED/CR [IDS]	74	9 (12.2)	NE (NE, NE)	38	3 (7.9)	NE (NE, NE)	1.55	0.46, 7.00	0.4950
NED/CR [Chemo]	40	4 (10.0)	NE (NE, NE)	20	1 (5.0)	NE (NE, NE)	1.95	0.29, 38.08	0.5258
PR	49	5 (10.2)	NE (NE, NE)	25	1 (4.0)	NE (NE, NE)	2.70	0.44, 51.74	0.3152
Interaction p-value									0.6834
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	17 (11.3)	NE (NE, NE)	65	9 (13.8)	NE (NE, NE)	0.78	0.36, 1.84	0.5616
non-tBRCAm	105	11 (10.5)	NE (NE, NE)	66	2 (3.0)	NE (NE, NE)	3.49	0.94, 22.57	0.0637
Interaction p-value									0.0639
First line treatment outcome (eCRF)									
NED [PDS]	89	9 (10.1)	NE (NE, NE)	47	6 (12.8)	NE (NE, NE)	0.75	0.27, 2.23	0.5826
NED/CR [IDS]	74	9 (12.2)	NE (NE, NE)	32	2 (6.3)	NE (NE, NE)	1.99	0.51, 13.05	0.3457
NED/CR [Chemo]	39	4 (10.3)	NE (NE, NE)	17	1 (5.9)	NE (NE, NE)	1.75	0.26, 34.24	0.5971
PR	50	5 (10.0)	NE (NE, NE)	34	2 (5.9)	NE (NE, NE)	1.71	0.37, 11.95	0.5062
Interaction p-value									0.6706
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	16 (10.9)	NE (NE, NE)	67	9 (13.4)	NE (NE, NE)	0.78	0.35, 1.83	0.5471
non-tBRCAm	108	12 (11.1)	NE (NE, NE)	64	2 (3.1)	NE (NE, NE)	3.62	0.99, 23.23	0.0529
Interaction p-value									0.0545
Age group									
<65 years	185	20 (10.8)	NE (NE, NE)	98	8 (8.2)	NE (NE, NE)	1.30	0.59, 3.13	0.5263
>=65 years	70	8 (11.4)	NE (NE, NE)	33	3 (9.1)	NE (NE, NE)	1.27	0.37, 5.80	0.7197
Interaction p-value									0.9783

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.64 PAOLA1: Summary of subgroup analysis of AESI G1-2: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	22 (12.1)	NE (NE, NE)	89	10 (11.2)	NE (NE, NE)	1.04	0.51, 2.30	0.9148
IV	73	6 (8.2)	NE (NE, NE)	42	1 (2.4)	NE (NE, NE)	3.55	0.61, 67.08	0.1777
Interaction p-value									0.2360
Region									
Europe	245	28 (11.4)	NE (NE, NE)	125	11 (8.8)	NE (NE, NE)	1.28	0.66, 2.69	0.4788
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	24 (12.6)	NE (NE, NE)	100	9 (9.0)	NE (NE, NE)	1.39	0.67, 3.15	0.3924
(1) Restricted activity	61	4 (6.6)	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	1.96	0.29, 38.24	0.5230
Interaction p-value									0.7654
Baseline CA-125 value									
<=ULN	228	23 (10.1)	NE (NE, NE)	117	11 (9.4)	NE (NE, NE)	1.05	0.52, 2.23	0.9003
>ULN	27	5 (18.5)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	28 (11.0)	NE (NE, NE)	131	11 (8.4)	NE (NE, NE)	1.29	0.66, 2.71	0.4641
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	19 (11.4)	NE (NE, NE)	80	8 (10.0)	NE (NE, NE)	1.12	0.51, 2.71	0.7905
Residue	79	8 (10.1)	NE (NE, NE)	43	3 (7.0)	NE (NE, NE)	1.45	0.42, 6.62	0.5734
Interaction p-value									0.7422

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.64 PAOLA1: Summary of subgroup analysis of AESI G1-2: Haemorrhage
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	15 (10.3)	NE (NE, NE)	78	7 (9.0)	NE (NE, NE)	1.12	0.47, 2.92	0.8099
Interval	99	12 (12.1)	NE (NE, NE)	45	4 (8.9)	NE (NE, NE)	1.36	0.47, 4.87	0.5827
Interaction p-value									0.7850
Myriad tumour BRCA mutation status									
tBRCAm	158	18 (11.4)	NE (NE, NE)	77	10 (13.0)	NE (NE, NE)	0.84	0.40, 1.89	0.6636
Non-tBRCAm	97	10 (10.3)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	5.71	1.09,104.84	0.0368*
Interaction p-value									0.0426*
Status somatic BRCA mutations									
sBRCAm	25	2 (8.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	10 (14.5)	NE (NE, NE)	36	6 (16.7)	NE (NE, NE)	0.85	0.32, 2.51	0.7624
Non-BRCAm	43	5 (11.6)	NE (NE, NE)	23	1 (4.3)	NE (NE, NE)	2.66	0.43, 50.91	0.3239
Interaction p-value									0.3144

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.65 PAOLA1: Summary of subgroup analysis of AESI G1-2: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	2 (1.3)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	2 (2.7)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	2 (1.4)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	0	NE (NE, NE)	NC	NC	NC
>=65 years	70	2 (2.9)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.65 PAOLA1: Summary of subgroup analysis of AESI G1-2: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	2 (1.1)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	2 (0.8)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	1 (0.5)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	2 (0.9)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	2 (0.8)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	2 (1.2)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.65 PAOLA1: Summary of subgroup analysis of AESI G1-2: Arterial thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	2 (2.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.66 PAOLA1: Summary of subgroup analysis of AESI G1-2: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	3 (3.3)	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	4 (5.4)	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	1 (2.0)	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	5 (3.3)	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	3 (2.9)	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	2 (2.2)	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	6 (8.1)	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	5 (3.4)	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	3 (2.8)	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	4 (2.2)	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	4 (5.7)	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.66 PAOLA1: Summary of subgroup analysis of AESI G1-2: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	6 (3.3)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	2 (2.7)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	8 (3.3)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	6 (3.2)	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	2 (3.3)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	8 (3.5)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	8 (3.1)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	8 (4.8)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.66 PAOLA1: Summary of subgroup analysis of AESI G1-2: Venous thromboembolic events
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	2 (1.4)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	6 (6.1)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	6 (3.8)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	2 (2.1)	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	3 (4.3)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	2 (4.7)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.67 PAOLA1: Summary of subgroup analysis of AESI G1-2: Posterior Reversible Encephalopathy Syndrome (PRES)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	1 (1.5)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	1 (1.6)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.67 PAOLA1: Summary of subgroup analysis of AESI G1-2: Posterior Reversible Encephalopathy Syndrome (PRES)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	1 (3.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.67 PAOLA1: Summary of subgroup analysis of AESI G1-2: Posterior Reversible Encephalopathy Syndrome (PRES)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	1 (1.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.68 PAOLA1: Summary of subgroup analysis of AESI G1-2: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)									
NED [PDS]	92	0	NE (NE, NE)	48	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	38	1 (2.6)	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40	0	NE (NE, NE)	20	0	NE (NE, NE)	NC	NC	NC
PR	49	0	NE (NE, NE)	25	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (IVRS)									
tBRCAm	150	0	NE (NE, NE)	65	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105	0	NE (NE, NE)	66	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
First line treatment outcome (eCRF)									
NED [PDS]	89	0	NE (NE, NE)	47	0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74	0	NE (NE, NE)	32	0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39	0	NE (NE, NE)	17	0	NE (NE, NE)	NC	NC	NC
PR	50	0	NE (NE, NE)	34	1 (2.9)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Screening laboratory tBRCA status (eCRF)									
tBRCAm	147	0	NE (NE, NE)	67	1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108	0	NE (NE, NE)	64	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Age group									
<65 years	185	0	NE (NE, NE)	98	1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70	0	NE (NE, NE)	33	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.68 PAOLA1: Summary of subgroup analysis of AESI G1-2: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	0	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	0	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	0	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	0	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	0	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	1 (7.1)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	0	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	0	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	1 (2.3)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.68 PAOLA1: Summary of subgroup analysis of AESI G1-2: Non-GI fistula or abscess
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	1 (2.2)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	0	NE (NE, NE)	77	1 (1.3)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	1 (2.8)	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.69 PAOLA1: Summary of subgroup analysis of AESI G1-2: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 2 (2.2)	NE (NE, NE)	48 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 0	NE (NE, NE)	38 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 1 (2.5)	NE (NE, NE)	20 0	NE (NE, NE)	NC	NC	NC
PR	49 0	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 3 (2.0)	NE (NE, NE)	65 1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 0	NE (NE, NE)	66 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 2 (2.2)	NE (NE, NE)	47 1 (2.1)	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 0	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 1 (2.6)	NE (NE, NE)	17 0	NE (NE, NE)	NC	NC	NC
PR	50 0	NE (NE, NE)	34 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 3 (2.0)	NE (NE, NE)	67 1 (1.5)	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 0	NE (NE, NE)	64 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 3 (1.6)	NE (NE, NE)	98 1 (1.0)	NE (NE, NE)	NC	NC	NC
>=65 years	70 0	NE (NE, NE)	33 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.69 PAOLA1: Summary of subgroup analysis of AESI G1-2: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	2 (1.1)	NE (NE, NE)	89	1 (1.1)	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	1 (0.8)	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	2 (1.1)	NE (NE, NE)	100	1 (1.0)	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	1 (1.6)	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	3 (1.3)	NE (NE, NE)	117	1 (0.9)	NE (NE, NE)	NC	NC	NC
>ULN	27	0	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	3 (1.2)	NE (NE, NE)	131	1 (0.8)	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	2 (1.2)	NE (NE, NE)	80	1 (1.3)	NE (NE, NE)	NC	NC	NC
Residue	79	1 (1.3)	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.69 PAOLA1: Summary of subgroup analysis of AESI G1-2: Secondary cancer
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	3 (2.1)	NE (NE, NE)	78	1 (1.3)	NE (NE, NE)	NC	NC	NC
Interval	99	0	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	3 (1.9)	NE (NE, NE)	77	1 (1.3)	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	0	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	0	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	1 (1.4)	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	0	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.70 PAOLA1: Summary of subgroup analysis of AESI G1-2: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)				
Subgroup	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Number (%) of patients n with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
First line treatment outcome (IVRS)							
NED [PDS]	92 0	NE (NE, NE)	48 0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 2 (2.7)	NE (NE, NE)	38 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	40 0	NE (NE, NE)	20 0	NE (NE, NE)	NC	NC	NC
PR	49 1 (2.0)	NE (NE, NE)	25 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (IVRS)							
tBRCAm	150 1 (0.7)	NE (NE, NE)	65 0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	105 2 (1.9)	NE (NE, NE)	66 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
First line treatment outcome (eCRF)							
NED [PDS]	89 0	NE (NE, NE)	47 0	NE (NE, NE)	NC	NC	NC
NED/CR [IDS]	74 3 (4.1)	NE (NE, NE)	32 0	NE (NE, NE)	NC	NC	NC
NED/CR [Chemo]	39 0	NE (NE, NE)	17 0	NE (NE, NE)	NC	NC	NC
PR	50 0	NE (NE, NE)	34 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Screening laboratory tBRCA status (eCRF)							
tBRCAm	147 1 (0.7)	NE (NE, NE)	67 0	NE (NE, NE)	NC	NC	NC
non-tBRCAm	108 2 (1.9)	NE (NE, NE)	64 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC
Age group							
<65 years	185 1 (0.5)	NE (NE, NE)	98 0	NE (NE, NE)	NC	NC	NC
>=65 years	70 2 (2.9)	NE (NE, NE)	33 0	NE (NE, NE)	NC	NC	NC
Interaction p-value							NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.70 PAOLA1: Summary of subgroup analysis of AESI G1-2: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
FIGO Stage (Disease state)									
III	182	2 (1.1)	NE (NE, NE)	89	0	NE (NE, NE)	NC	NC	NC
IV	73	1 (1.4)	NE (NE, NE)	42	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Region									
Europe	245	3 (1.2)	NE (NE, NE)	125	0	NE (NE, NE)	NC	NC	NC
Japan	10	0	NE (NE, NE)	6	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
ECOG performance status at Baseline									
(0) Normal activity	190	3 (1.6)	NE (NE, NE)	100	0	NE (NE, NE)	NC	NC	NC
(1) Restricted activity	61	0	NE (NE, NE)	30	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Baseline CA-125 value									
<=ULN	228	2 (0.9)	NE (NE, NE)	117	0	NE (NE, NE)	NC	NC	NC
>ULN	27	1 (3.7)	NE (NE, NE)	14	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Histological grade									
High grade	255	3 (1.2)	NE (NE, NE)	131	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Cytoreductive surgery outcome									
No residue	166	3 (1.8)	NE (NE, NE)	80	0	NE (NE, NE)	NC	NC	NC
Residue	79	0	NE (NE, NE)	43	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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Table 3.4.70 PAOLA1: Summary of subgroup analysis of AESI G1-2: Pneumonitis
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)			Placebo + bevacizumab (N=131)					
Subgroup	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	n	Number (%) of patients with events	Median time (95% CI) (months) [a]	Hazard ratio [b]	95% CI [b]	2-sided p-value [b]
Timing of cytoreductive surgery									
Upfront	146	0	NE (NE, NE)	78	0	NE (NE, NE)	NC	NC	NC
Interval	99	3 (3.0)	NE (NE, NE)	45	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Myriad tumour BRCA mutation status									
tBRCAm	158	2 (1.3)	NE (NE, NE)	77	0	NE (NE, NE)	NC	NC	NC
Non-tBRCAm	97	1 (1.0)	NE (NE, NE)	54	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC
Status somatic BRCA mutations									
sBRCAm	25	1 (4.0)	NE (NE, NE)	9	0	NE (NE, NE)	NC	NC	NC
gBRCAm	69	0	NE (NE, NE)	36	0	NE (NE, NE)	NC	NC	NC
Non-BRCAm	43	1 (2.3)	NE (NE, NE)	23	0	NE (NE, NE)	NC	NC	NC
Interaction p-value									NC

The time to event endpoint is the time to first AESI or the time to censoring if the AESI has not occurred.
The censoring date is the earliest of study completion, consent withdrawal, lost to follow-up, death or data cut off.
MedDRA version 25.0. NC = not calculable.
[a] Median time to event based on the Kaplan Meier estimate. NE = not estimable as median (or 95% CLs) not reached.
[b] HR, 95% profile likelihood CIs and likelihood-ratio test p-values estimated from Cox PH model. Efron method for handling ties. If >=10 patients for all subgroup levels, >=10 events for 1 subgroup level, >0 events for all subgroup levels/treatments, results from model including treatment, subgroup, treatment by subgroup interaction. For subgroups with >2 levels, levels with insufficient data were dropped and interaction model re-fitted. If interaction model conditions not met but 1 level had >=10 events, and >0 events for both treatments, results from model for 1 level including treatment only. * p-value <0.05. HR <1 favours olaparib.
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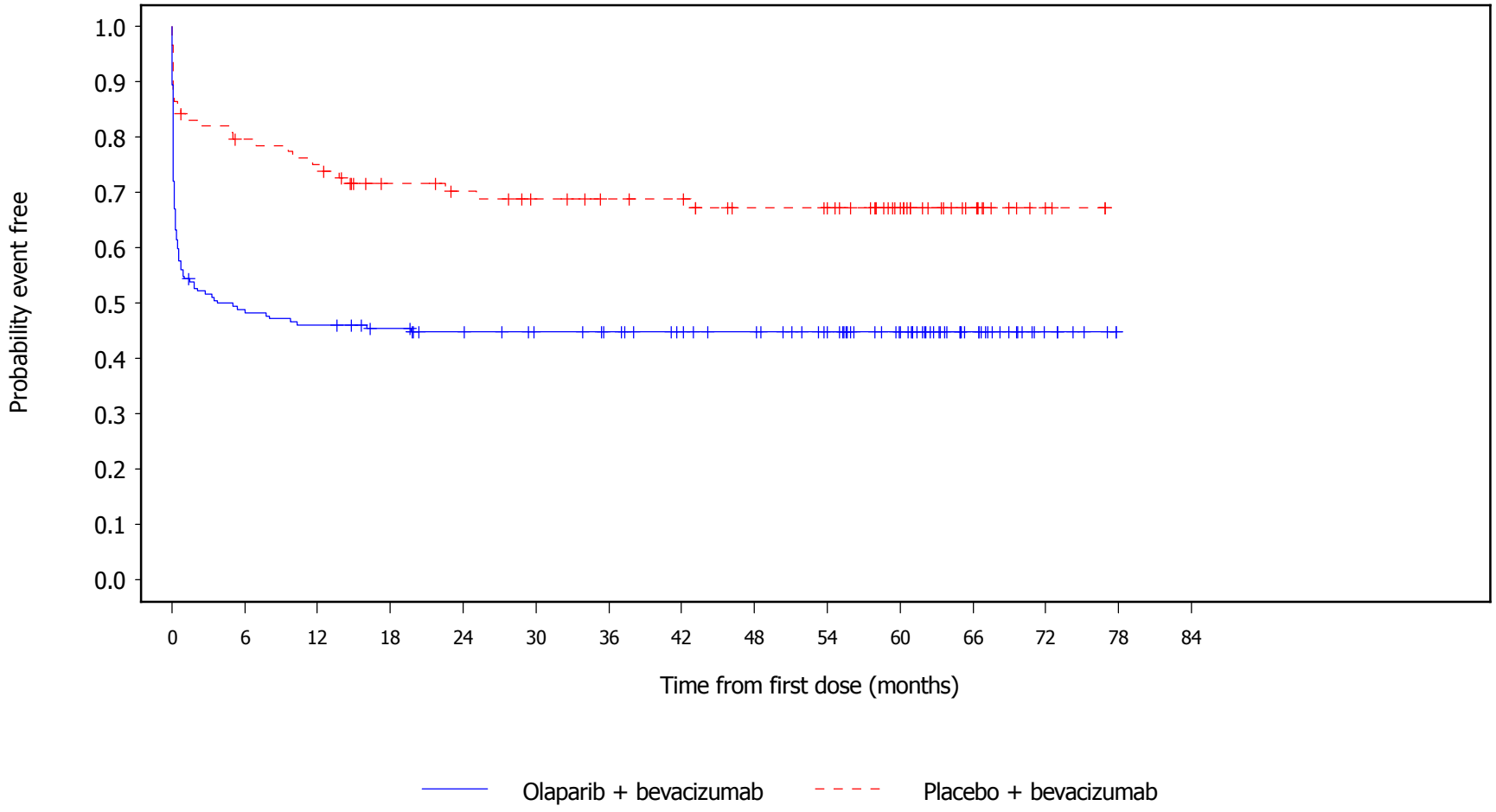
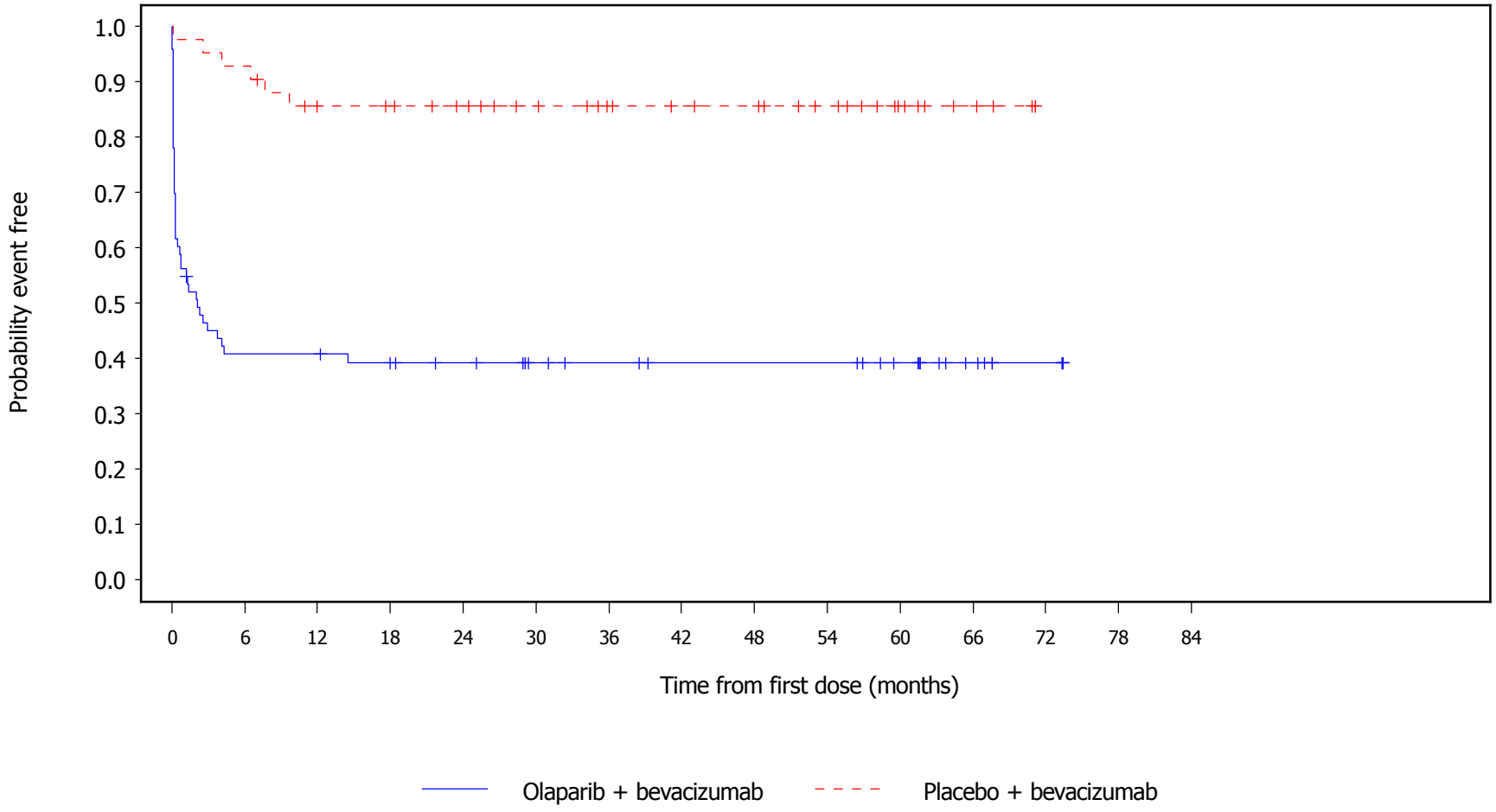
Figure 3.5.1 PAOLA1: Kaplan-Meier plot of AESI: Nausea for FIGO Stage (Disease state) = III
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

182	88	83	78	73	69	66	61	58	51	38	20	6	0	0	Olaparib + bevacizumab
89	69	65	55	52	48	45	44	38	36	25	12	2	0	0	Placebo + bevacizumab

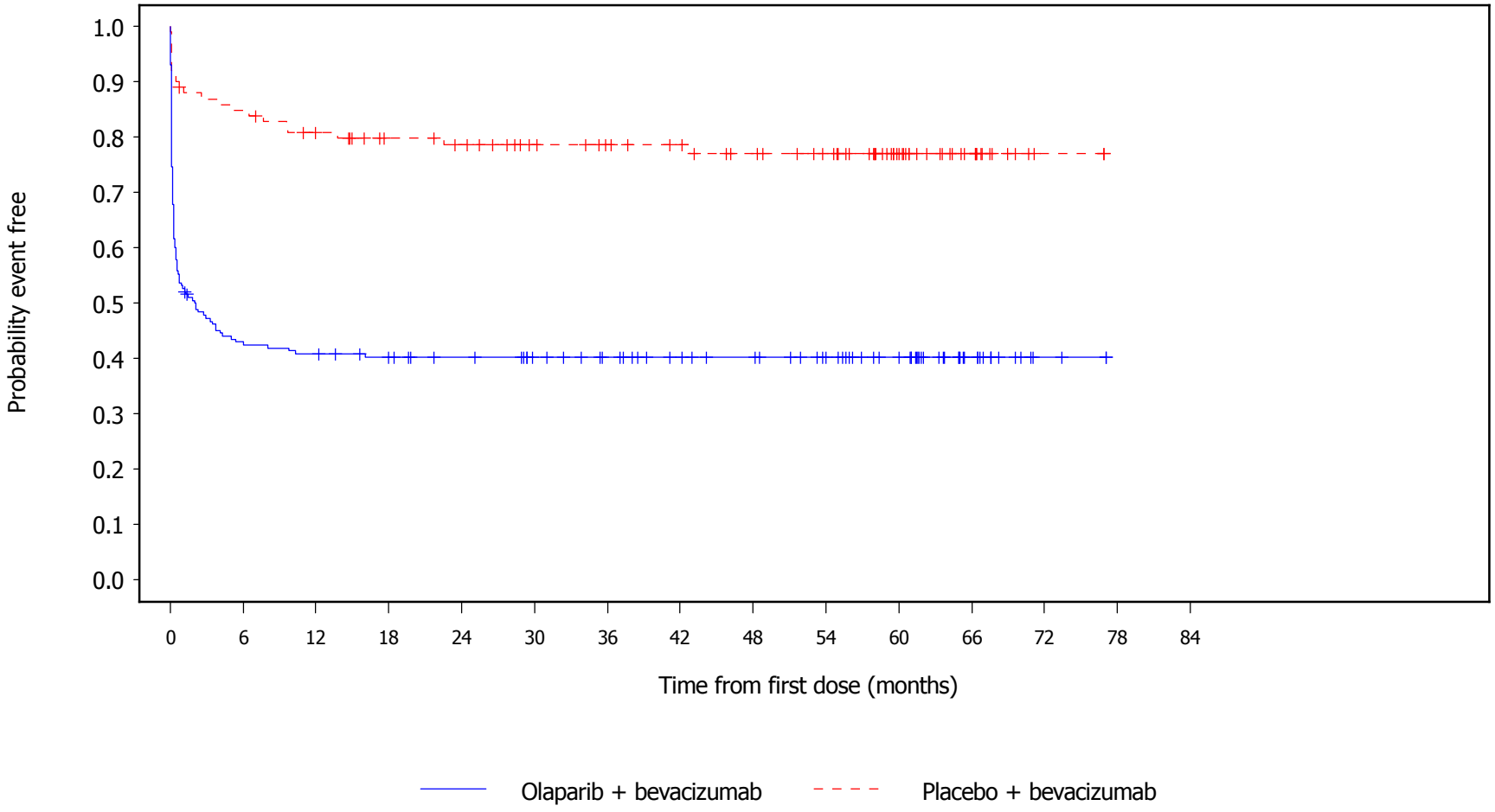
Figure 3.5.2 PAOLA1: Kaplan-Meier plot of AESI: Nausea for FIGO Stage (Disease state) = IV
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

73	29	29	26	24	20	18	16	16	16	12	6	2	0	0	Olaparib + bevacizumab
42	39	33	32	29	25	21	19	18	14	8	4	0	0	0	Placebo + bevacizumab

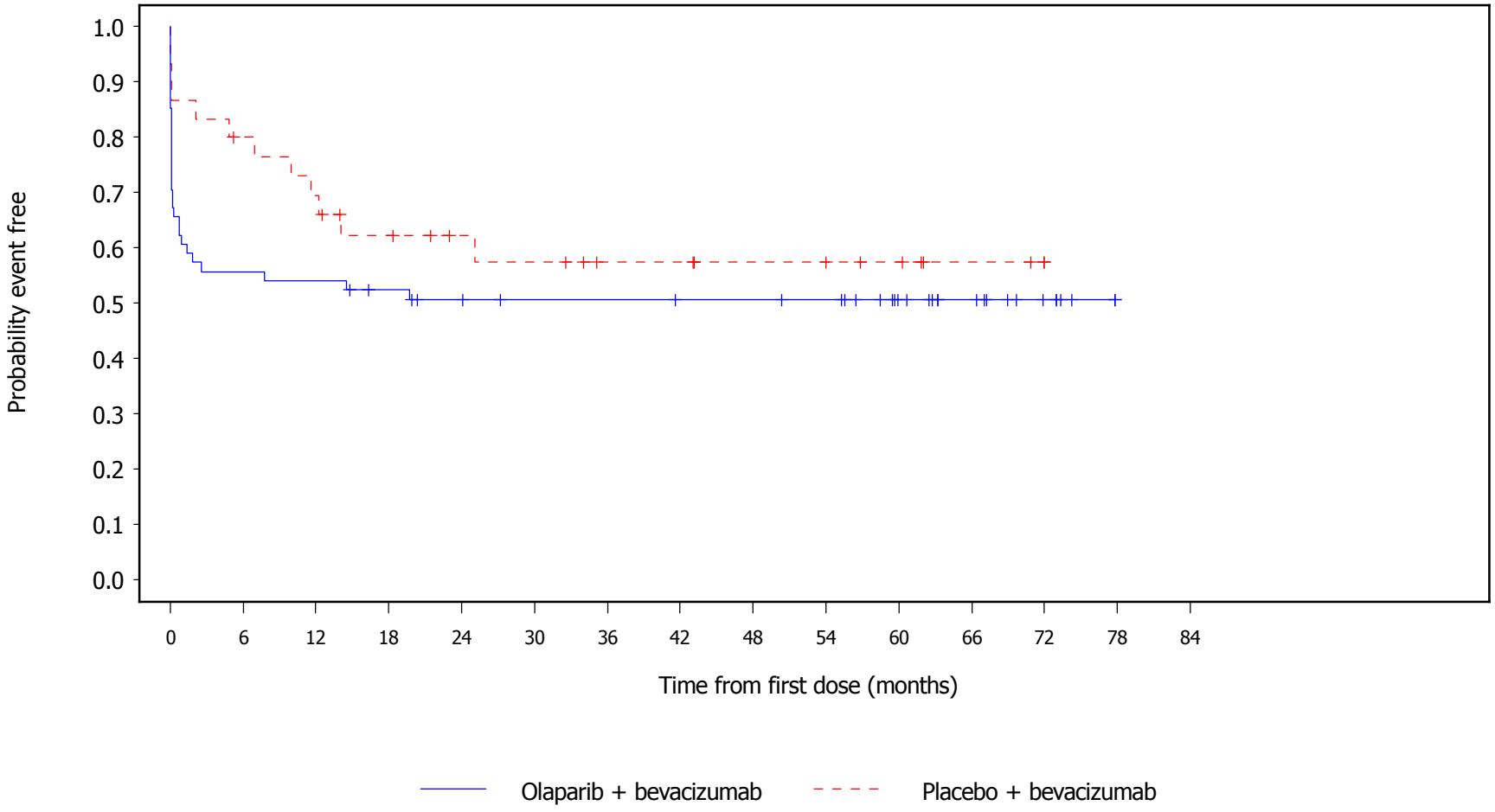
Figure 3.5.3 PAOLA1: Kaplan-Meier plot of AESI: Nausea for ECOG performance status at Baseline = (0) Normal activity
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

190	80	76	71	67	61	56	50	47	41	31	14	2	0	0	Olaparib + bevacizumab
100	84	77	70	67	60	56	53	48	43	27	13	1	0	0	Placebo + bevacizumab

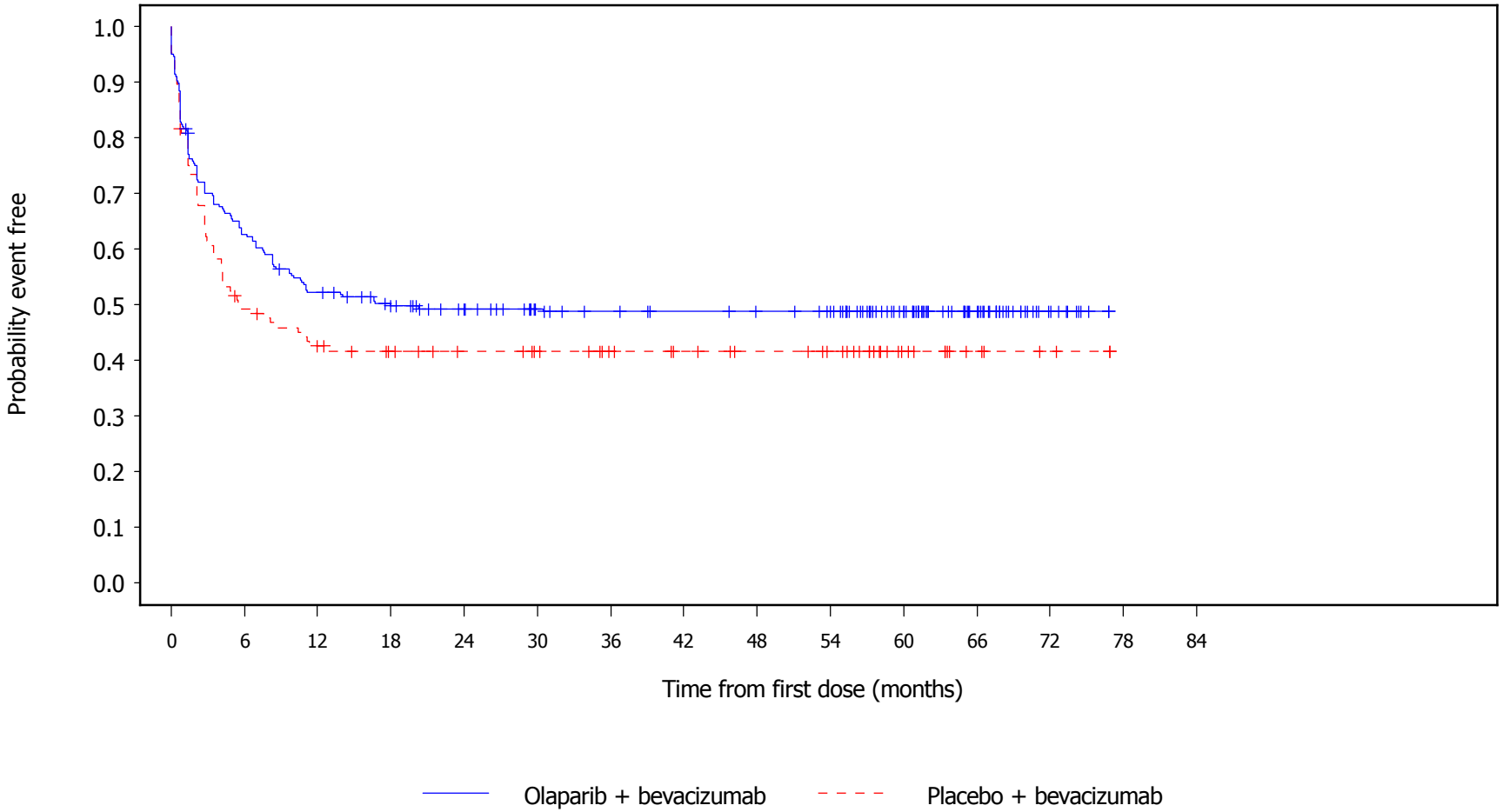
Figure 3.5.4 PAOLA1: Kaplan-Meier plot of AESI: Nausea for ECOG performance status at Baseline = (1) Restricted activity
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

61	34	33	30	27	25	25	24	24	23	16	11	5	0	0	Olaparib + bevacizumab
30	23	20	16	13	12	9	9	7	6	5	2	0	0	0	Placebo + bevacizumab

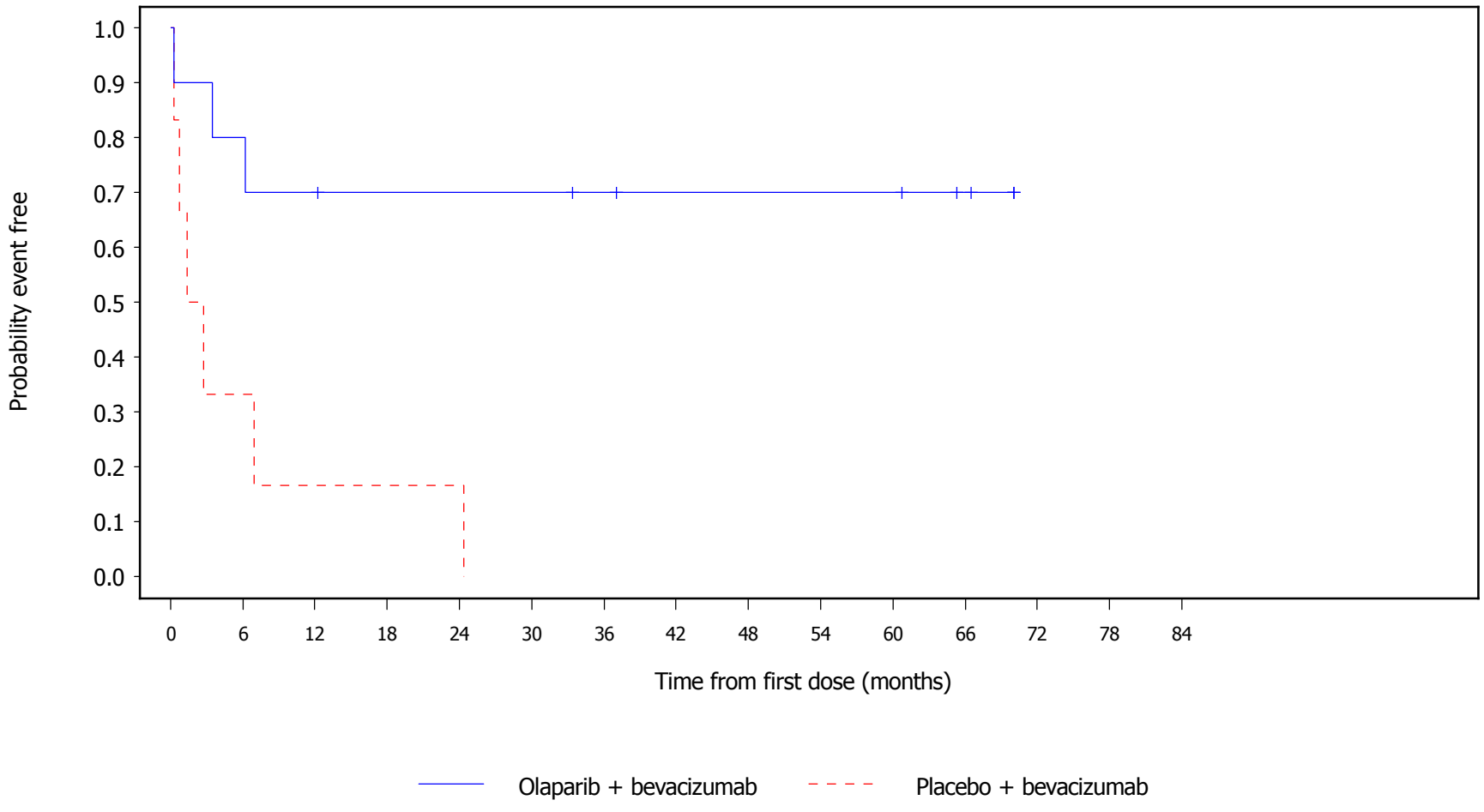
Figure 3.5.5 PAOLA1: Kaplan-Meier plot of AESI: Hypertension for Region = Europe
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

245	152	126	113	103	92	87	84	82	79	57	33	9	0	0	Olaparib + bevacizumab
125	60	50	45	41	38	33	30	27	24	12	5	2	0	0	Placebo + bevacizumab

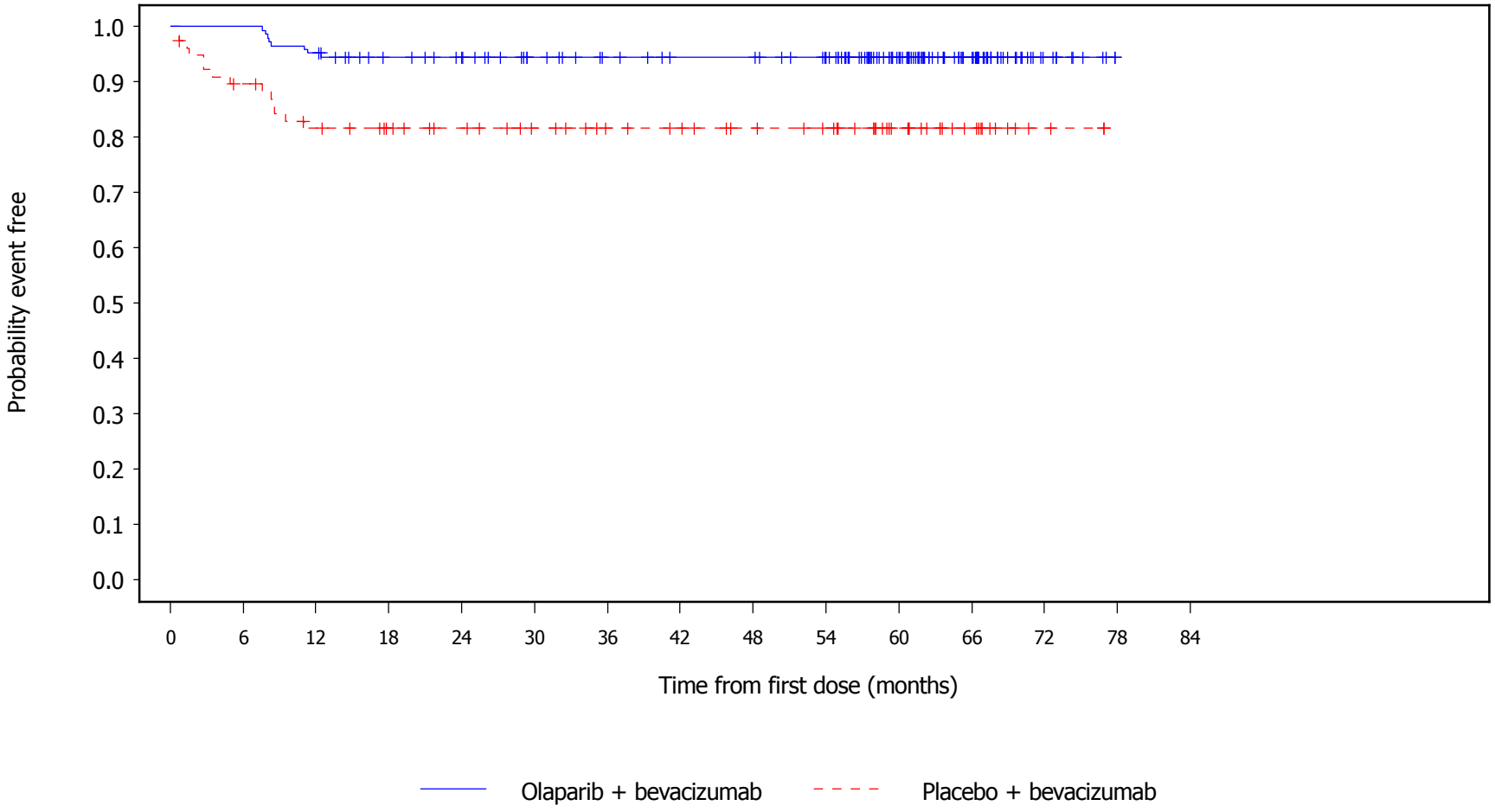
Figure 3.5.6 PAOLA1: Kaplan-Meier plot of AESI: Hypertension for Region = Japan
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

10	8	7	6	6	6	5	4	4	4	4	2	0	0	0	Olaparib + bevacizumab
6	2	1	1	1	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

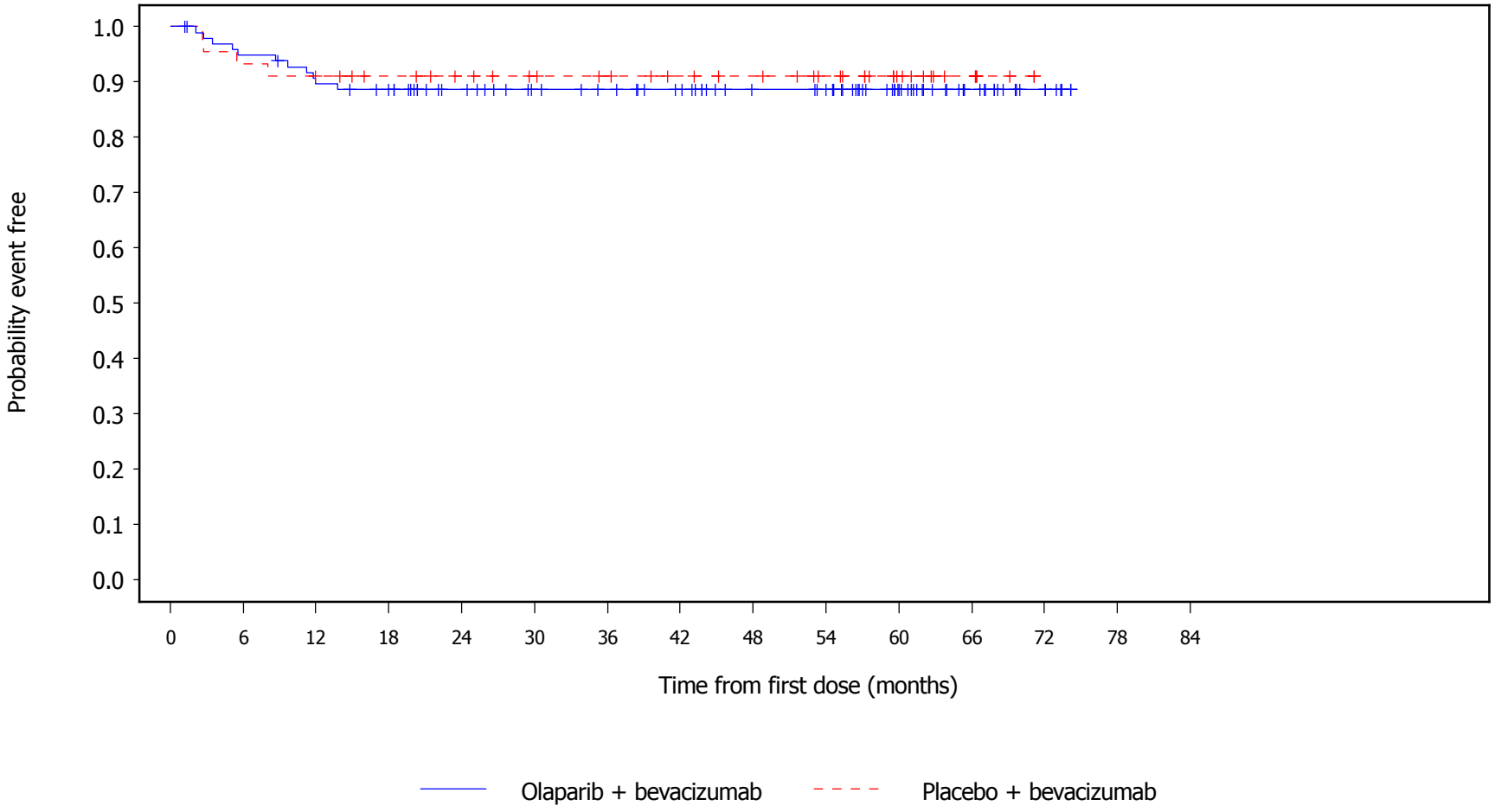
Figure 3.5.7 PAOLA1: Kaplan-Meier plot of AESI: Proteinuria for Timing of cytoreductive surgery = Upfront
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

146	146	139	130	125	116	110	106	106	100	72	40	9	0	0	Olaparib + bevacizumab
78	68	60	55	51	46	41	39	35	32	21	11	2	0	0	Placebo + bevacizumab

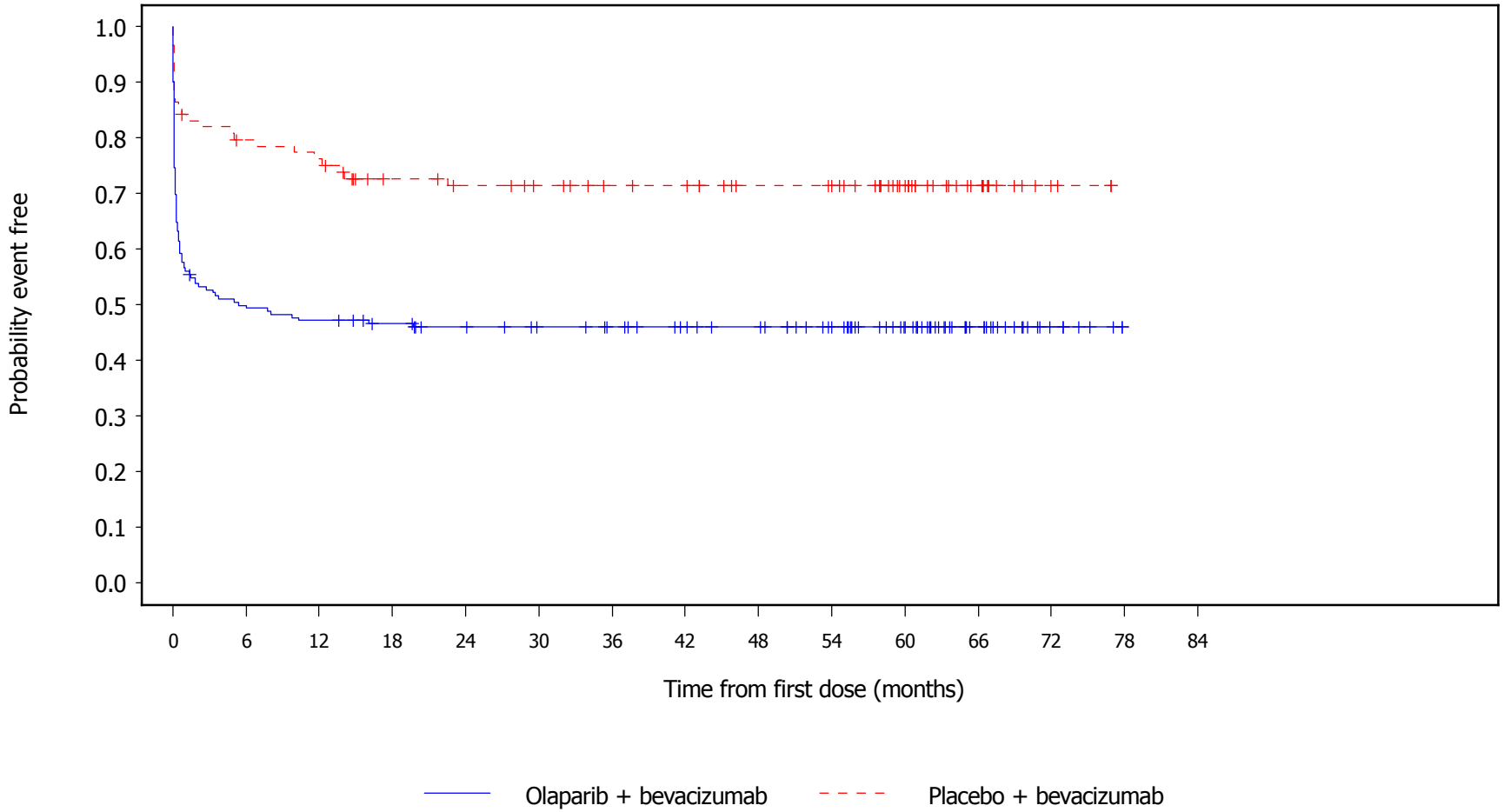
Figure 3.5.8 PAOLA1: Kaplan-Meier plot of AESI: Proteinuria for Timing of cytoreductive surgery = Interval
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

99	92	86	82	72	65	62	57	48	46	29	16	6	0	0	Olaparib + bevacizumab
45	42	40	37	34	31	29	26	24	20	12	6	0	0	0	Placebo + bevacizumab

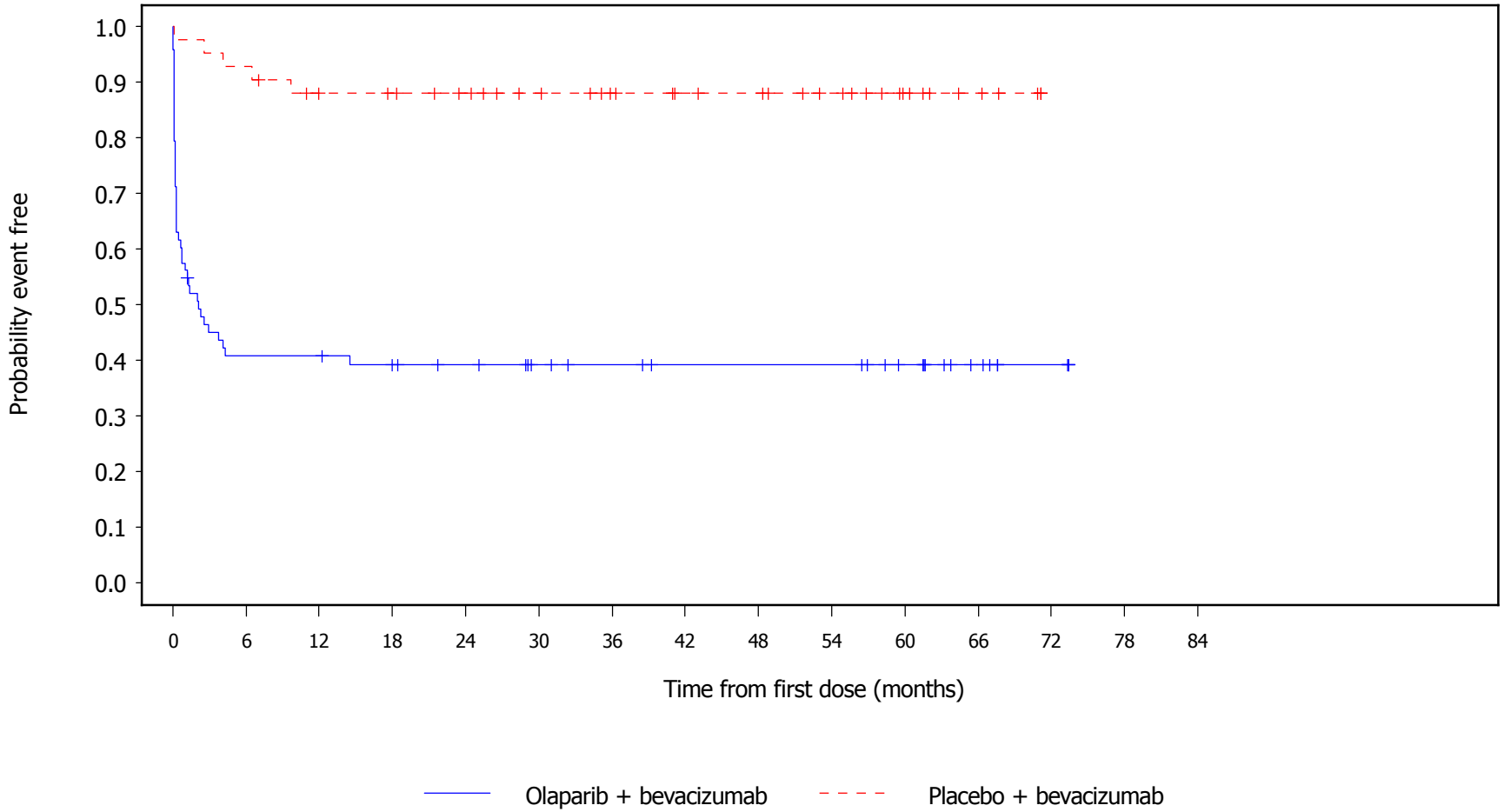
Figure 3.5.9 PAOLA1: Kaplan-Meier plot of AESI G1-2: Nausea for FIGO Stage (Disease state) = III
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

182	90	85	80	75	71	68	63	60	52	38	20	6	0	0	Olaparib + bevacizumab
89	69	66	56	53	50	46	45	39	37	26	13	2	0	0	Placebo + bevacizumab

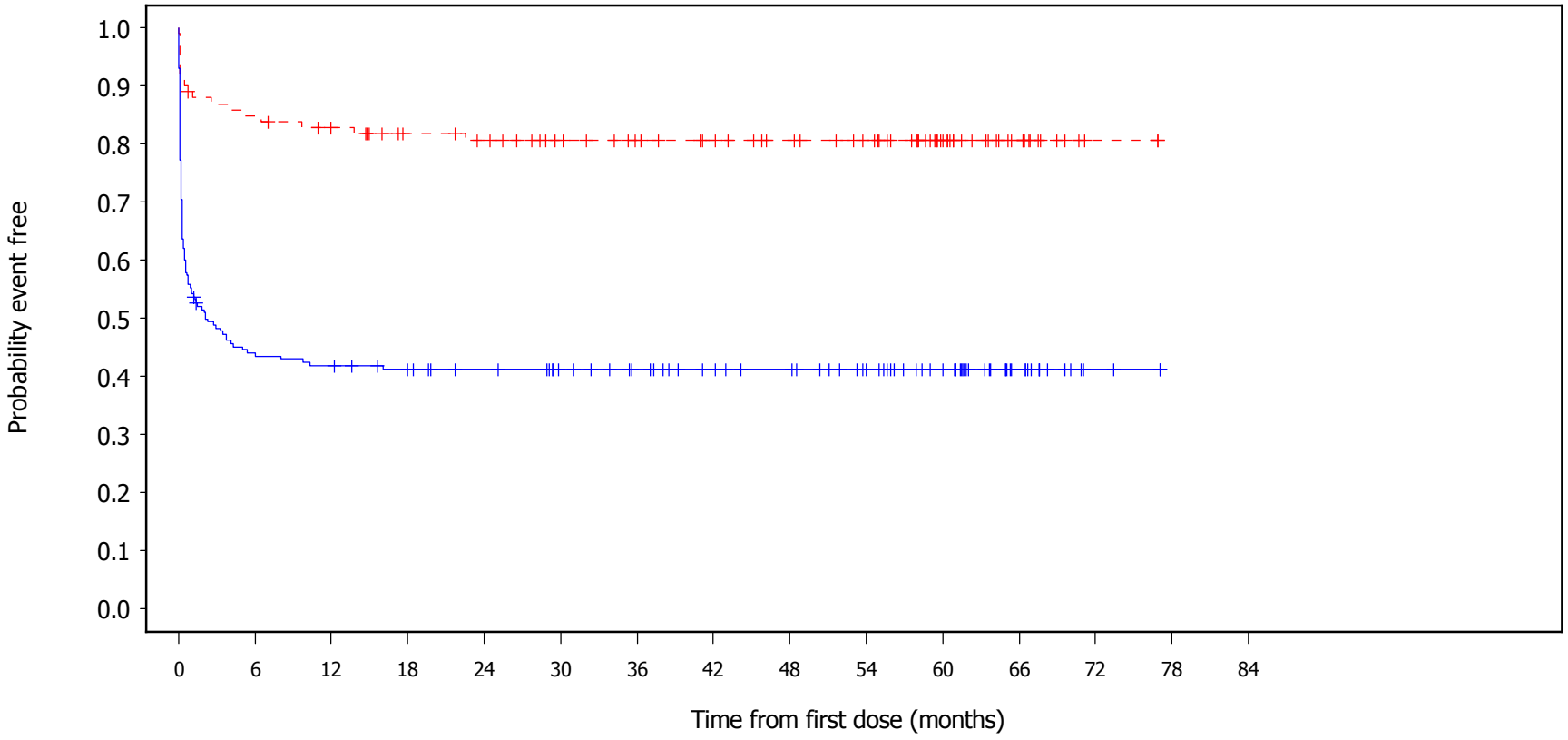
Figure 3.5.10 PAOLA1: Kaplan-Meier plot of AESI G1-2: Nausea for FIGO Stage (Disease state) = IV
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

73	29	29	26	24	20	18	16	16	16	12	6	2	0	0	Olaparib + bevacizumab
42	39	34	33	30	26	22	19	18	14	8	4	0	0	0	Placebo + bevacizumab

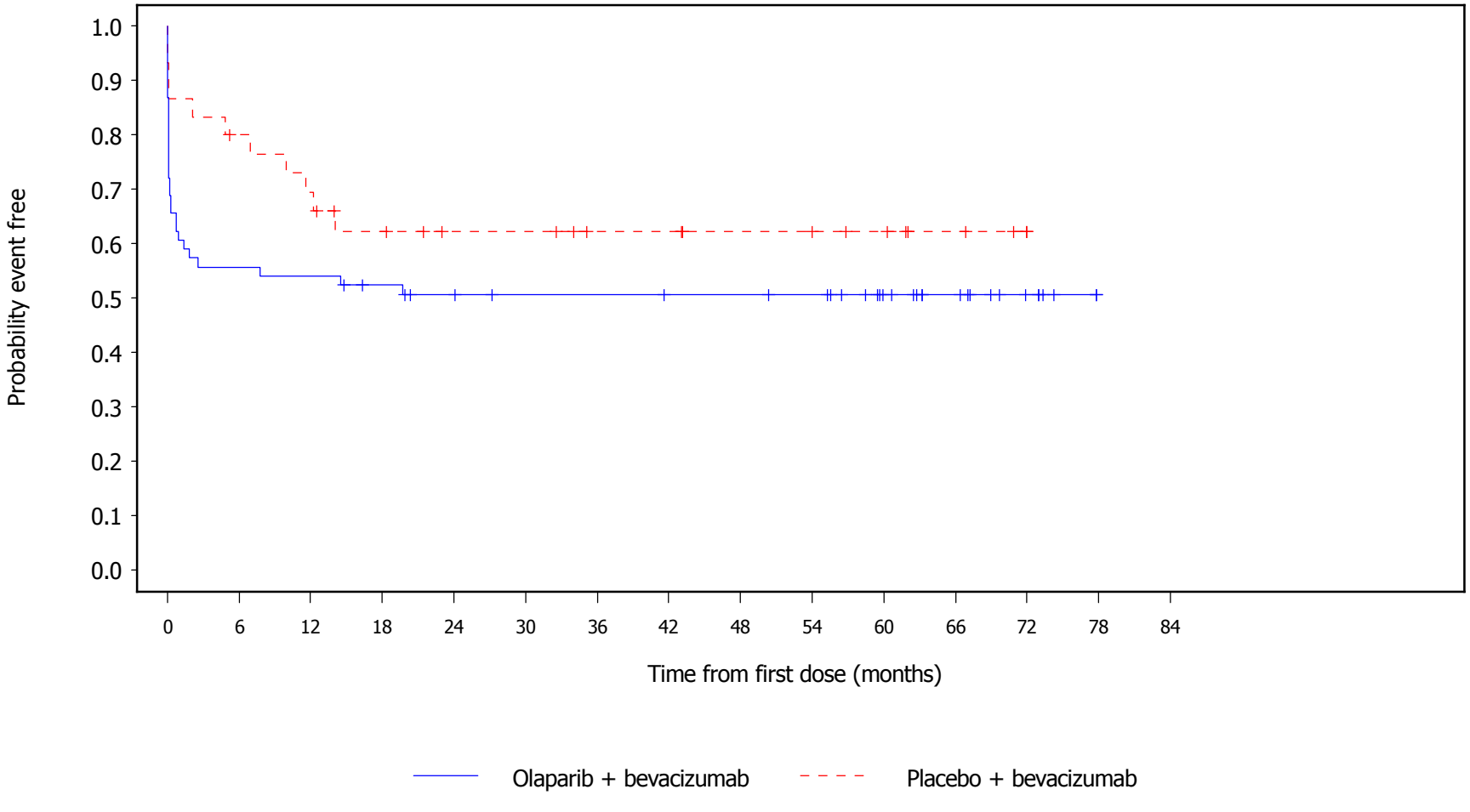
Figure 3.5.11 PAOLA1: Kaplan-Meier plot of AESI G1-2: Nausea for ECOG performance status at Baseline = (0) Normal activity
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

190	82	78	73	69	63	58	52	49	42	31	14	2	0	0	Olaparib + bevacizumab
100	84	79	72	69	62	57	53	48	43	27	13	1	0	0	Placebo + bevacizumab

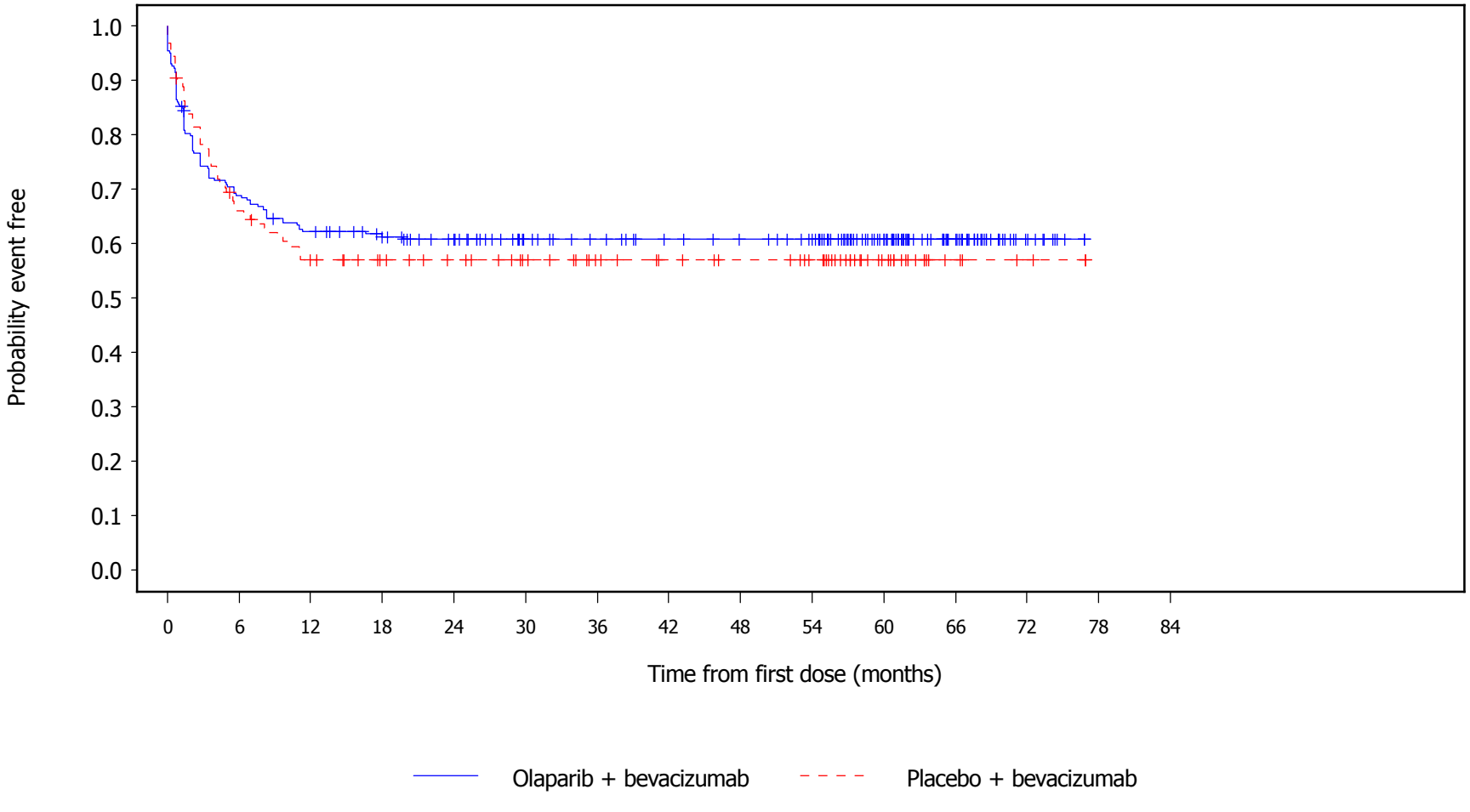
Figure 3.5.12 PAOLA1: Kaplan-Meier plot of AESI G1-2: Nausea for ECOG performance status at Baseline = (1) Restricted activity
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

61	34	33	30	27	25	25	24	24	23	16	11	5	0	0	Olaparib + bevacizumab
30	23	20	16	13	13	10	10	8	7	6	3	0	0	0	Placebo + bevacizumab

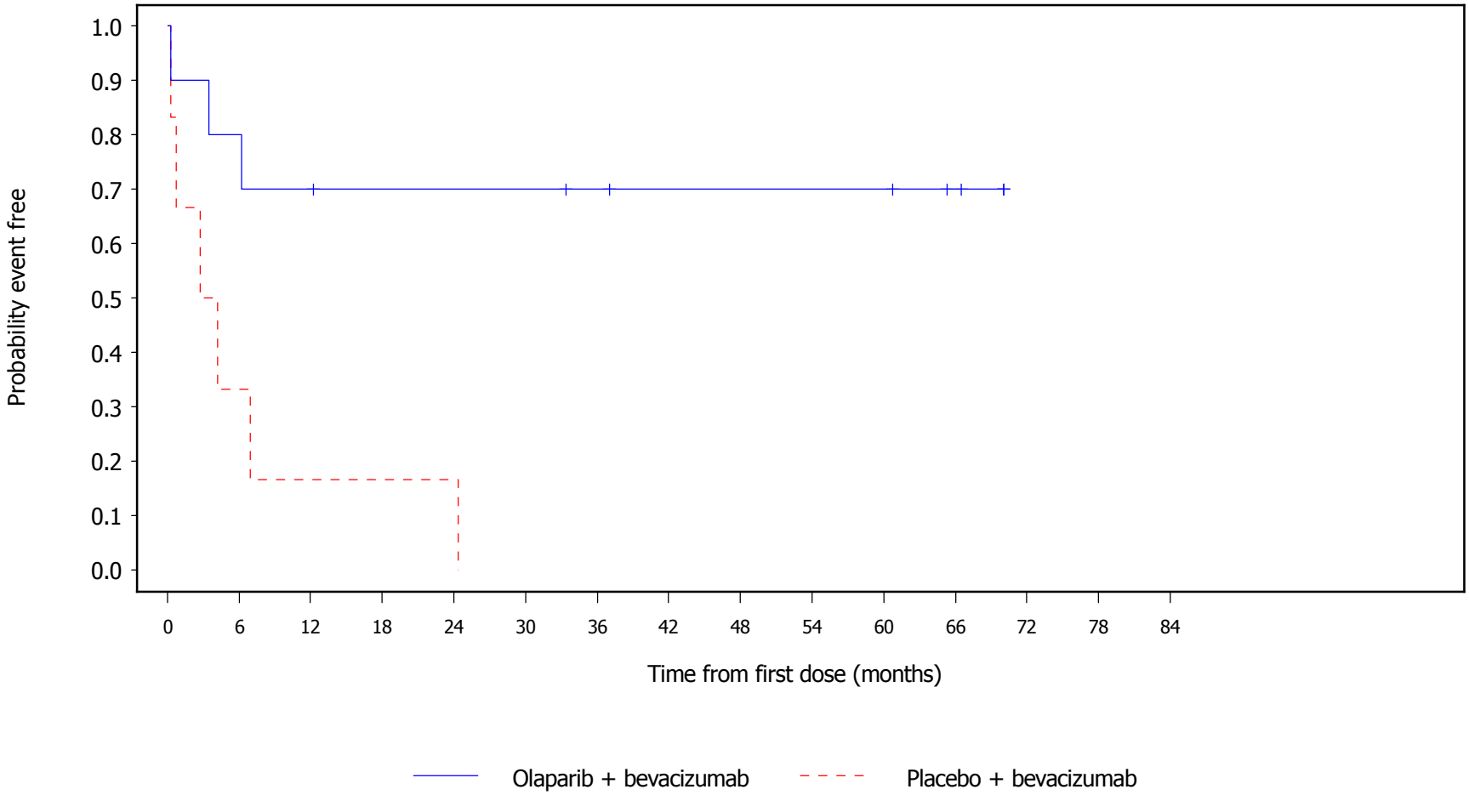
Figure 3.5.13 PAOLA1: Kaplan-Meier plot of AESI G1-2: Hypertension for Region = Europe
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

245	167	150	140	130	114	108	102	99	94	66	37	9	0	0	Olaparib + bevacizumab
125	81	68	62	58	52	45	41	38	34	18	5	2	0	0	Placebo + bevacizumab

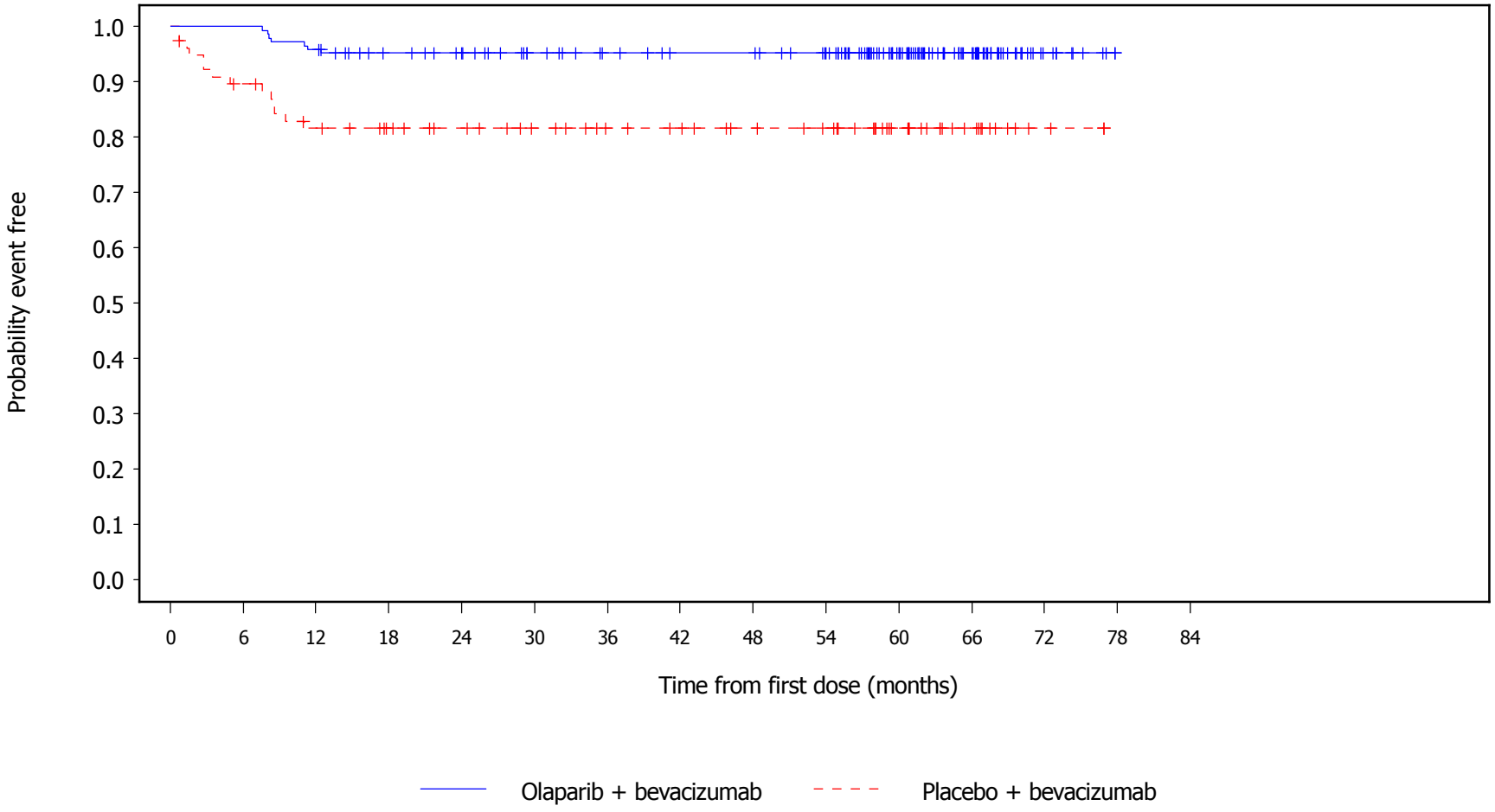
Figure 3.5.14 PAOLA1: Kaplan-Meier plot of AESI G1-2: Hypertension for Region = Japan
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

10	8	7	6	6	6	5	4	4	4	4	2	0	0	0	Olaparib + bevacizumab
6	2	1	1	1	0	0	0	0	0	0	0	0	0	0	Placebo + bevacizumab

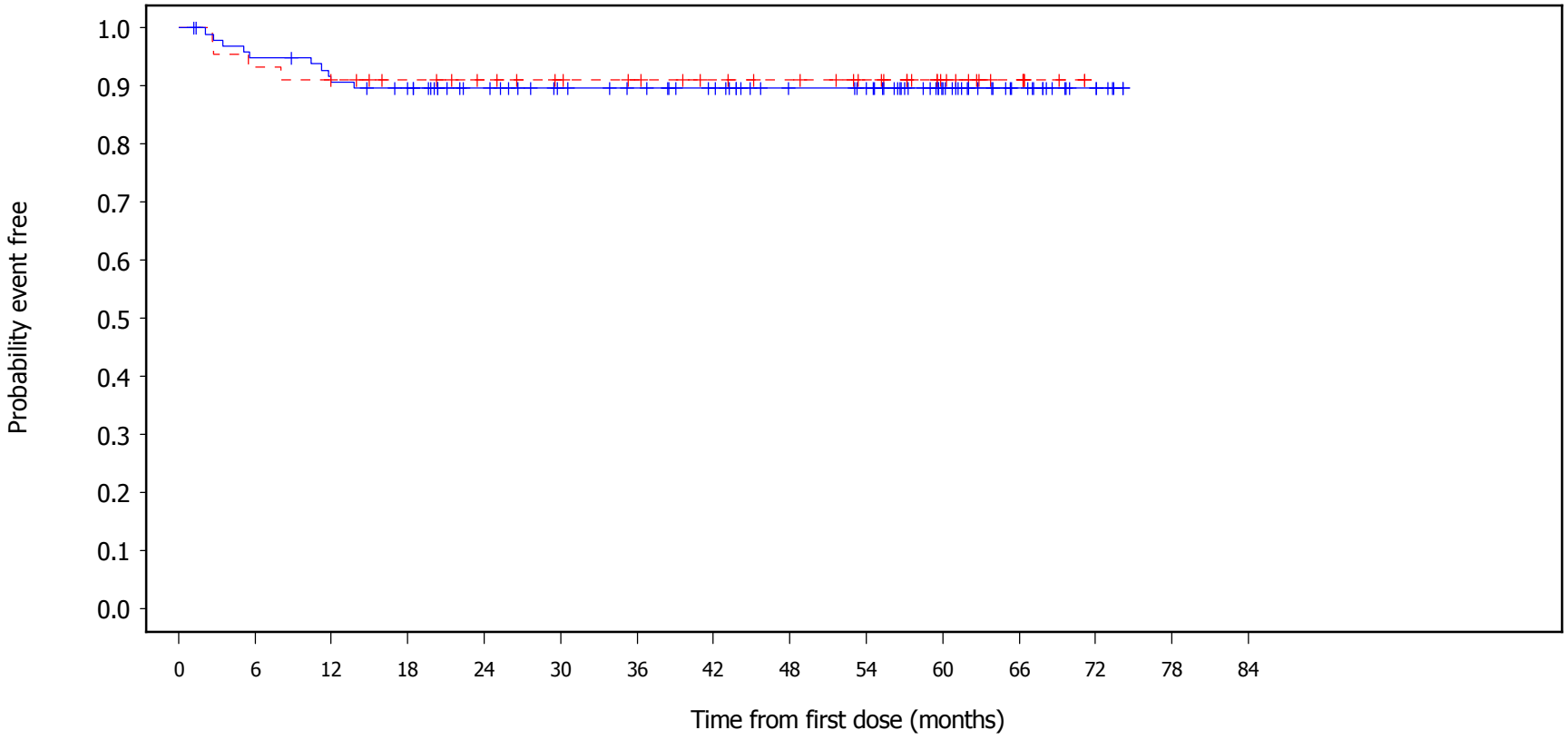
Figure 3.5.15 PAOLA1: Kaplan-Meier plot of AESI G1-2: Proteinuria for Timing of cytoreductive surgery = Upfront
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

146	146	140	131	126	117	111	107	107	101	73	41	9	0	0	Olaparib + bevacizumab
78	68	60	55	51	46	41	39	35	32	21	11	2	0	0	Placebo + bevacizumab

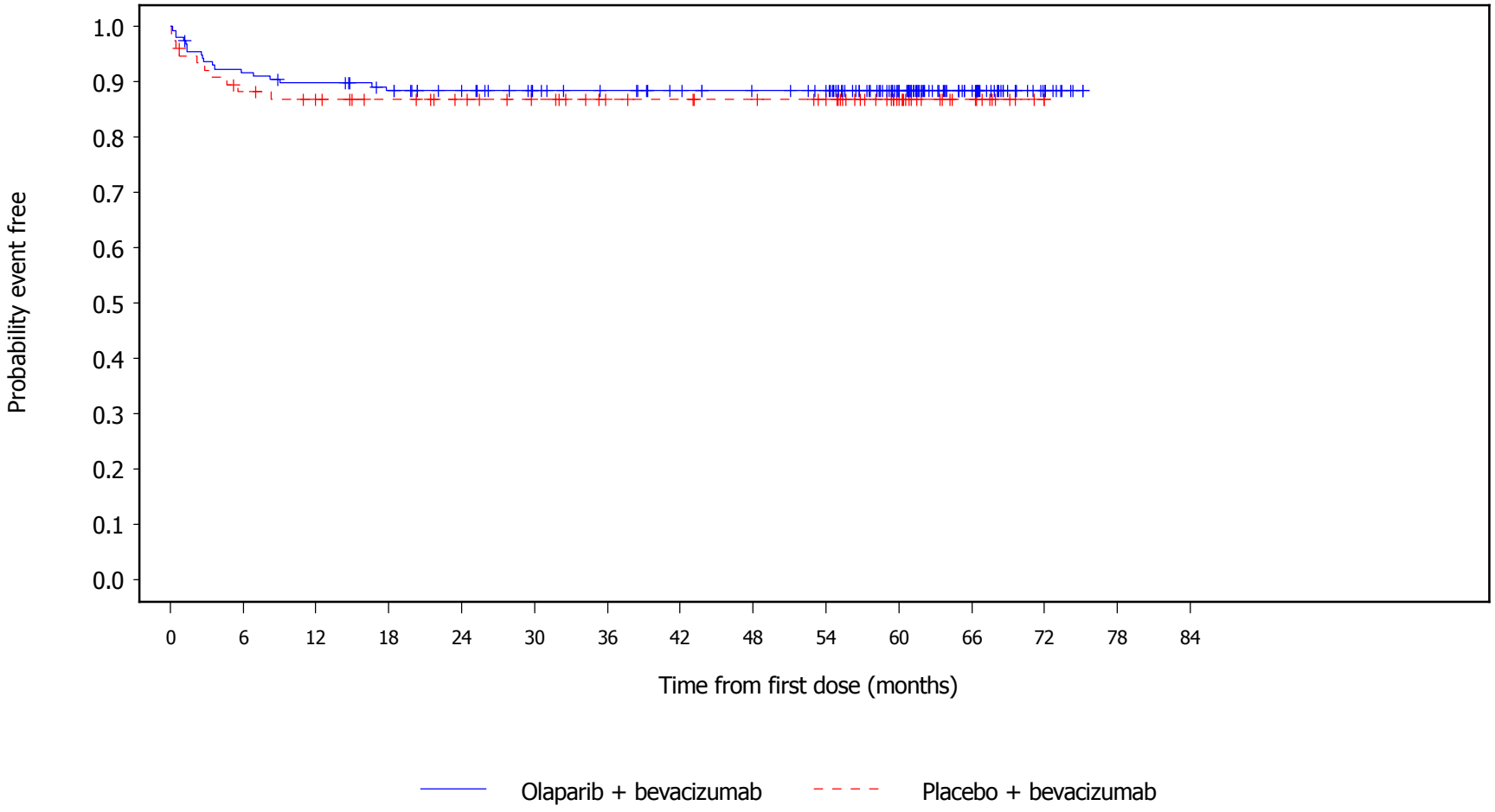
Figure 3.5.16 PAOLA1: Kaplan-Meier plot of AESI G1-2: Proteinuria for Timing of cytoreductive surgery = Interval
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

99	92	87	83	73	66	63	58	49	47	29	16	6	0	0	Olaparib + bevacizumab
45	42	40	37	34	31	29	26	24	20	12	6	0	0	0	Placebo + bevacizumab

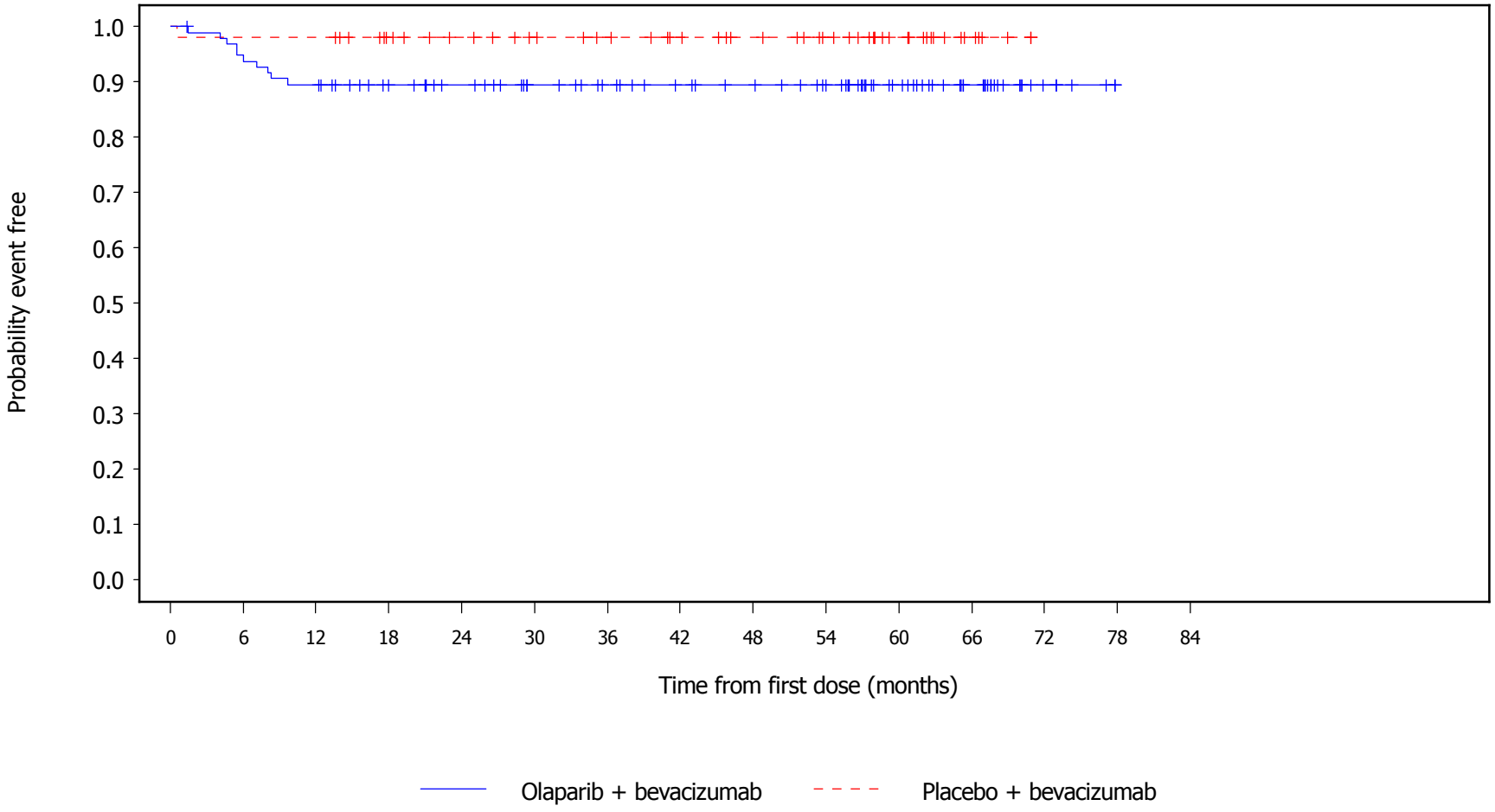
Figure 3.5.17 PAOLA1: Kaplan-Meier plot of AESI G1-2: Haemorrhage for Myriad tumour BRCA mutation status = tBRCAm
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

158	144	140	134	126	118	114	109	105	102	71	36	10	0	0	Olaparib + bevacizumab
77	66	62	58	54	50	44	43	41	37	23	10	0	0	0	Placebo + bevacizumab

Figure 3.5.18 PAOLA1: Kaplan-Meier plot of AESI G1-2: Haemorrhage for Myriad tumour BRCA mutation status = Non-tBRCAm
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022



Number of patients at risk:

97	91	86	77	72	64	59	54	51	46	32	20	5	0	0	Olaparib + bevacizumab
54	53	53	47	43	39	36	32	28	23	14	5	0	0	0	Placebo + bevacizumab

Table 3.6.1 PAOLA1: Summary of analysis of adverse events of special interest (total, and by grouped or preferred term)
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AESI: Anaemia [b][e][h]	255	102(40.0)	131	12(9.2)	6.61(3.60, 13.19)	<0.0001 *	4.37(2.62, 8.11)	<0.0001 *	0.31(0.23, 0.38)	<0.0001 *
AESI: Neutropenia [b][e][h]	255	53(20.8)	131	22(16.8)	1.30(0.76, 2.29)	0.3437	1.24(0.80, 1.99)	0.3437	0.04(-0.04, 0.12)	0.3437
AESI: Thrombocytopenia [b][e][h]	255	18(7.1)	131	7(5.3)	1.35(0.57, 3.54)	0.5105	1.32(0.59, 3.32)	0.5105	0.02(-0.04, 0.07)	0.5105
AESI: Nausea [b][e][h]	255	144(56.5)	131	34(26.0)	3.70(2.35, 5.94)	<0.0001 *	2.18(1.63, 3.03)	<0.0001 *	0.31(0.21, 0.40)	<0.0001 *
AESI: Vomiting [b][e][h]	255	55(21.6)	131	18(13.7)	1.73(0.98, 3.16)	0.0575	1.57(0.99, 2.64)	0.0575	0.08(-0.00, 0.15)	0.0575
AESI: Fatigue and Asthenia [b][e][h]	255	142(55.7)	131	47(35.9)	2.25(1.46, 3.48)	0.0002 *	1.55(1.22, 2.03)	0.0002 *	0.20(0.09, 0.30)	0.0002 *
AESI: Hypertension [b][e][h]	255	127(49.8)	131	78(59.5)	0.67(0.44, 1.03)	0.0688	0.84(0.70, 1.01)	0.0688	-0.10(-0.20, 0.01)	0.0688
AESI: Proteinuria [b][e][h]	255	20(7.8)	131	19(14.5)	0.50(0.26, 0.98)	0.0445 *	0.54(0.30, 0.98)	0.0445 *	-0.07(-0.14, -0.00)	0.0445 *

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events of special interest (total, and by grouped or preferred term)
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AESI: GI perforations, abscesses and fistulae [c][g][i]	255	3(1.2)	131	0	3.65(0.35,491.54)	0.3214	NC		NC	
AESI: Wound healing complications [b][e][h]	255	2(0.8)	131	3(2.3)	0.34(0.04, 2.06)	0.2314	0.34(0.05, 2.04)	0.2314	-0.02(-0.05, 0.01)	0.2314
AESI: Haemorrhage [b][e][h]	255	30(11.8)	131	12(9.2)	1.32(0.67, 2.77)	0.4307	1.28(0.70, 2.53)	0.4307	0.03(-0.04, 0.09)	0.4307
AESI: Arterial thromboembolic events [b][e][h]	255	3(1.2)	131	4(3.1)	0.38(0.07, 1.74)	0.2055	0.39(0.08, 1.72)	0.2055	-0.02(-0.06, 0.01)	0.2055
AESI: Venous thromboembolic events [b][e][h]	255	10(3.9)	131	1(0.8)	5.31(0.9996, 97.88)	0.0501	5.14(0.9996, 93.73)	0.0501	0.03(-0.00, 0.06)	0.0501
AESI: Posterior Reversible Encephalopathy Syndrome (PRES) [c][g][i]	255	0	131	1(0.8)	0.17(0.00, 3.21)	0.2352	NC		NC	

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.1 PAOLA1: Summary of analysis of adverse events of special interest (total, and by grouped or preferred term)
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AESI: Congestive heart failure [d][g][i]	255	0	131	0	NC		NC		NC	
AESI: Non-GI fistula or abscess [c][g][i]	255	0	131	2(1.5)	0.10(0.00, 1.26)	0.0769	NC		NC	
AESI: MDS/AML [b][e][h]	255	4(1.6)	131	3(2.3)	0.68(0.15, 3.49)	0.6211	0.68(0.15, 3.43)	0.6211	-0.01(-0.04, 0.02)	0.6211
AESI: Myelodysplastic syndrome and Acute myeloid leukaemia [b][e][h]	255	4(1.6)	131	4(3.1)	0.51(0.12, 2.17)	0.3452	0.51(0.12, 2.14)	0.3452	-0.01(-0.06, 0.02)	0.3452
AESI: Secondary cancer [b][e][h]	255	15(5.9)	131	4(3.1)	1.98(0.70, 7.07)	0.2062	1.93(0.72, 6.65)	0.2062	0.03(-0.02, 0.07)	0.2062
AESI: Pneumonitis [c][g][i]	255	3(1.2)	131	0	3.65(0.35,491.54)	0.3214	NC		NC	

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.2 PAOLA1: Summary of analysis of serious adverse events of special interest
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
Serious AESI: Anaemia [b][e][h]	255	13(5.1)	131	1(0.8)	6.98(1.37,127.51)	0.0151 *	6.68(1.35,120.60)	0.0151 *	0.04(0.01, 0.08)	0.0151 *
Serious AESI: Neutropenia [c][g][i]	255	2(0.8)	131	0	2.59(0.21,358.70)	0.4990	NC		NC	
Serious AESI: Thrombocytopenia [c][g][i]	255	4(1.6)	131	0	4.71(0.50,625.36)	0.2078	NC		NC	
Serious AESI: Vomiting [d][g][i]	255	0	131	0	NC		NC		NC	
Serious AESI: Hypertension [b][e][h]	255	22(8.6)	131	16(12.2)	0.68(0.34, 1.36)	0.2698	0.71(0.39, 1.32)	0.2698	-0.04(-0.11, 0.03)	0.2698
Serious AESI: Proteinuria [c][g][i]	255	1(0.4)	131	0	1.55(0.08,226.84)	0.7818	NC		NC	
Serious AESI: GI perforations, abscesses and fistulae [c][g][i]	255	2(0.8)	131	0	2.59(0.21,358.70)	0.4990	NC		NC	

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.2 PAOLA1: Summary of analysis of serious adverse events of special interest
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
Serious AESI: Wound healing complications [c][g][i]	255	0	131	1(0.8)	0.17(0.00, 3.21)	0.2352	NC		NC	
Serious AESI: Haemorrhage [c][e][h]	255	2(0.8)	131	1(0.8)	0.86(0.11, 9.45)	0.8835	1.03(0.10, 21.97)	0.9823	0.00(-0.03, 0.02)	0.9823
Serious AESI: Arterial thromboembolic events [c][e][h]	255	1(0.4)	131	3(2.3)	0.22(0.02, 1.33)	0.0989	0.17(0.01, 1.32)	0.0916	-0.02(-0.05,0.003)	0.0916
Serious AESI: Venous thromboembolic events [c][g][i]	255	2(0.8)	131	0	2.59(0.21,358.70)	0.4990	NC		NC	
Serious AESI: Non-GI fistula or abscess [d][g][i]	255	0	131	0	NC		NC		NC	
Serious AESI: MDS/AML [b][e][h]	255	3(1.2)	131	3(2.3)	0.51(0.09, 2.78)	0.4150	0.51(0.10, 2.74)	0.4150	-0.01(-0.05, 0.01)	0.4150

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.2 PAOLA1: Summary of analysis of serious adverse events of special interest
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
Serious AESI: Myelodysplastic syndrome and Acute myeloid leukaemia [b][e][h]	255	3(1.2)	131	4(3.1)	0.38(0.07, 1.74)	0.2055	0.39(0.08, 1.72)	0.2055	-0.02(-0.06, 0.01)	0.2055
Serious AESI: Secondary cancer [b][e][h]	255	15(5.9)	131	4(3.1)	1.98(0.70, 7.07)	0.2062	1.93(0.72, 6.65)	0.2062	0.03(-0.02, 0.07)	0.2062
Serious AESI: Pneumonitis [c][g][i]	255	2(0.8)	131	0	2.59(0.21,358.70)	0.4990	NC		NC	

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.3 PAOLA1: Summary of analysis of severe adverse events of special interest with max. CTCAE grade >=3
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AESI G>=3: Anaemia [b][e][h]	255	47(18.4)	131	1(0.8)	29.37(6.31,523.04)	<0.0001 *	24.15(5.39,425.07)	<0.0001 *	0.18(0.13, 0.23)	<0.0001 *
AESI G>=3: Neutropenia [b][e][h]	255	21(8.2)	131	4(3.1)	2.85(1.06, 9.93)	0.0377 *	2.70(1.05, 9.10)	0.0377 *	0.05(0.003, 0.10)	0.0377 *
AESI G>=3: Thrombocytopenia [b][e][h]	255	5(2.0)	131	4(3.1)	0.63(0.17, 2.60)	0.5090	0.64(0.17, 2.56)	0.5090	-0.01(-0.05, 0.02)	0.5090
AESI G>=3: Nausea [b][e][h]	255	9(3.5)	131	4(3.1)	1.16(0.37, 4.35)	0.8046	1.16(0.38, 4.20)	0.8046	0.00(-0.04, 0.04)	0.8046
AESI G>=3: Vomiting [b][e][h]	255	4(1.6)	131	6(4.6)	0.33(0.08, 1.18)	0.0883	0.34(0.09, 1.18)	0.0883	-0.03(-0.08,0.004)	0.0883
AESI G>=3: Fatigue and Asthenia [b][e][h]	255	17(6.7)	131	3(2.3)	3.05(1.0005, 13.22)	0.0499 *	2.91(1.0004, 12.31)	0.0499 *	0.04(0.00002, 0.08)	0.0499 *
AESI G>=3: Hypertension [b][e][h]	255	50(19.6)	131	42(32.1)	0.52(0.32, 0.84)	0.0074 *	0.61(0.43, 0.87)	0.0074 *	-0.12(-0.22, -0.03)	0.0074 *

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.3 PAOLA1: Summary of analysis of severe adverse events of special interest with max. CTCAE grade >=3
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AESI G>=3: Proteinuria [c][g][i]	255	3(1.2)	131	0	3.65(0.35,491.54)	0.3214	NC		NC	
AESI G>=3: GI perforations, abscesses and fistulae [c][g][i]	255	3(1.2)	131	0	3.65(0.35,491.54)	0.3214	NC		NC	
AESI G>=3: Wound healing complications [d][g][i]	255	0	131	0	NC		NC		NC	
AESI G>=3: Haemorrhage [c][e][h]	255	2(0.8)	131	1(0.8)	0.86(0.11, 9.45)	0.8835	1.03(0.10, 21.97)	0.9823	0.00(-0.03, 0.02)	0.9823
AESI G>=3: Arterial thromboembolic events [b][e][h]	255	1(0.4)	131	4(3.1)	0.13(0.01, 0.86)	0.0333 *	0.13(0.01, 0.86)	0.0333 *	-0.03(-0.07, -0.00)	0.0333 *
AESI G>=3: Venous thromboembolic events [c][g][i]	255	3(1.2)	131	0	3.65(0.35,491.54)	0.3214	NC		NC	

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.3 PAOLA1: Summary of analysis of severe adverse events of special interest with max. CTCAE grade >=3
(odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AESI G>=3: Congestive heart failure [d][g][i]	255	0	131	0	NC		NC		NC	
AESI G>=3: Non-GI fistula or abscess [c][g][i]	255	0	131	1(0.8)	0.17(0.00, 3.21)	0.2352	NC		NC	
AESI G>=3: MDS/AML [b][e][h]	255	4(1.6)	131	3(2.3)	0.68(0.15, 3.49)	0.6211	0.68(0.15, 3.43)	0.6211	-0.01(-0.04, 0.02)	0.6211
AESI G>=3: Myelodysplastic syndrome and Acute myeloid leukaemia [b][e][h]	255	4(1.6)	131	4(3.1)	0.51(0.12, 2.17)	0.3452	0.51(0.12, 2.14)	0.3452	-0.01(-0.06, 0.02)	0.3452
AESI G>=3: Secondary cancer [b][e][h]	255	11(4.3)	131	3(2.3)	1.92(0.59, 8.61)	0.2958	1.88(0.60, 8.22)	0.2958	0.02(-0.02, 0.06)	0.2958

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.4 PAOLA1: Summary of analysis of non-severe adverse events of special interest with max. CTCAE grade 1 or 2 (odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AESI G1-2: Anaemia [b][e][h]	255	86(33.7)	131	11(8.4)	5.55(2.95, 11.41)	<0.0001 *	4.02(2.34, 7.73)	<0.0001 *	0.25(0.18, 0.33)	<0.0001 *
AESI G1-2: Neutropenia [b][e][h]	255	39(15.3)	131	19(14.5)	1.06(0.59, 1.96)	0.8366	1.05(0.65, 1.79)	0.8366	0.01(-0.07, 0.08)	0.8366
AESI G1-2: Thrombocytopenia [b][e][h]	255	14(5.5)	131	4(3.1)	1.84(0.65, 6.61)	0.2659	1.80(0.66, 6.25)	0.2659	0.02(-0.02, 0.06)	0.2659
AESI G1-2: Nausea [b][e][h]	255	142(55.7)	131	30(22.9)	4.23(2.65, 6.90)	<0.0001 *	2.43(1.78, 3.47)	<0.0001 *	0.33(0.23, 0.42)	<0.0001 *
AESI G1-2: Vomiting [b][e][h]	255	52(20.4)	131	14(10.7)	2.14(1.17, 4.17)	0.0133 *	1.91(1.14, 3.46)	0.0133 *	0.10(0.02, 0.17)	0.0133 *
AESI G1-2: Fatigue and Asthenia [b][e][h]	255	133(52.2)	131	44(33.6)	2.16(1.40, 3.36)	0.0005 *	1.55(1.20, 2.06)	0.0005 *	0.19(0.08, 0.28)	0.0005 *
AESI G1-2: Hypertension [b][e][h]	255	98(38.4)	131	59(45.0)	0.76(0.50, 1.17)	0.2119	0.85(0.67, 1.10)	0.2119	-0.07(-0.17, 0.04)	0.2119

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.4 PAOLA1: Summary of analysis of non-severe adverse events of special interest with max. CTCAE grade 1 or 2 (odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AESI G1-2: Proteinuria [b][e][h]	255	18(7.1)	131	19(14.5)	0.45(0.22, 0.89)	0.0218 *	0.49(0.26, 0.90)	0.0218 *	-0.07(-0.15, -0.01)	0.0218 *
AESI G1-2: Wound healing complications [b][e][h]	255	2(0.8)	131	3(2.3)	0.34(0.04, 2.06)	0.2314	0.34(0.05, 2.04)	0.2314	-0.02(-0.05, 0.01)	0.2314
AESI G1-2: Haemorrhage [b][e][h]	255	28(11.0)	131	11(8.4)	1.35(0.66, 2.91)	0.4188	1.31(0.69, 2.67)	0.4188	0.03(-0.04, 0.08)	0.4188
AESI G1-2: Arterial thromboembolic events [c][g][i]	255	2(0.8)	131	0	2.59(0.21,358.70)	0.4990	NC		NC	
AESI G1-2: Venous thromboembolic events [b][e][h]	255	8(3.1)	131	1(0.8)	4.21(0.76, 78.53)	0.1092	4.11(0.77, 75.81)	0.1092	0.02(-0.01, 0.05)	0.1092
AESI G1-2: Posterior Reversible Encephalopathy Syndrome (PRES) [c][g][i]	255	0	131	1(0.8)	0.17(0.00, 3.21)	0.2352	NC		NC	

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 3.6.4 PAOLA1: Summary of analysis of non-severe adverse events of special interest with max. CTCAE grade 1 or 2 (odds ratio, relative risk and risk difference)
Safety Analysis Set, HRD[42] positive, DCO 22Mar2022

	Olaparib + bevacizumab (N=255)		Placebo + bevacizumab (N=131)		Treatment effect					
					Odds Ratio		Relative Risk		Risk Difference	
	n	Number (%) of patients with events [a]	n	Number (%) of patients with events [a]	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value	Estimate (95% CI)	2-sided p-value
AESI G1-2: Non-GI fistula or abscess [c][g][i]	255	0	131	1(0.8)	0.17(0.00, 3.21)	0.2352	NC		NC	
AESI G1-2: Secondary cancer [c][e][h]	255	3(1.2)	131	1(0.8)	1.21(0.20, 12.53)	0.8470	1.54(0.20, 30.97)	0.6971	0.00(-0.02, 0.03)	0.6971
AESI G1-2: Pneumonitis [c][g][i]	255	3(1.2)	131	0	3.65(0.35,491.54)	0.3214	NC		NC	

Includes adverse events of special interest with an onset date on or after the date of first dose and up to the date of DCO.
MedDRA version 25.0.
NC=not calculable. CI=confidence interval. PL=profile likelihood. LR=likelihood ratio test. All models include treatment only.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
[b] Odds ratio (OR), 95% PL CI, LR p-value via logistic regression. [c] As [b] but with Firth method. [d] OR NC via [b] or [c].
[e] Relative risk (RR), 95% PL CI, LR p-value via log-binomial regression. [f] RR, 95% CI, p-value via modified poisson regression. [g] RR NC via [e] or [f]. [h] Risk difference (RD), 95% PL CI, LR p-value via binomial regression. [i] RD NC via [h].
Odds ratio and relative risk <1, and risk difference <0 favours olaparib. * p<0.05.
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Table 4.1 PAOLA1 Appendix: Summary of Myelodysplastic syndrome/Acute myeloid leukaemia - adverse events of special interests by preferred term
Safety Analysis Set, HRD[42] positive, DCO 22MAR2022

	Number (%) of patients	
AESI term/ MedDRA Preferred term	Olaparib+ bevacizumab (N=255)	Placebo + bevacizumab (N=131)
MDS/AML	4 (1.6)	3 (2.3)
Acute myeloid leukaemia	4 (1.6)	1 (0.8)
Myelodysplastic syndrome	1 (0.4)	3 (2.3)
Myelodysplastic syndrome and Acute myeloid leukaemia	4 (1.6)	4 (3.1)
Acute leukaemia	0	1 (0.8)
Acute myeloid leukaemia	4 (1.6)	1 (0.8)
Myelodysplastic syndrome	1 (0.4)	3 (2.3)

Includes adverse events with an onset date on or after the date of first dose.
MedDRA versio 25.0.
[a] Patients with multiple events in the same category are counted only once in that category.
Patients with events in more than one category are counted once in each of those categories.
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