

**Dossier zur Nutzenbewertung
gemäß § 35a SGB V**

Inebilizumab (Uplizna[®])

Amgen GmbH

Anhang 4-G zu Modul 4 C

*Zusatzbehandlung zur Standardtherapie von
Erwachsenen mit generalisierter Myasthenia
gravis, die AChR-Antikörper- oder MuSK-
Antikörper-positiv sind*

Stand: 05.03.2026

Inhaltsverzeichnis

| | Seite |
|---|----------|
| Modul 4 C, Anhang 4-G | 4 |
| 1 Subgruppenanalysen | 4 |
| 1.1 Todesfälle | 4 |
| 1.1.1 Todesfälle | 4 |
| 1.2 Myasthenia gravis Activities of Daily Living (MG-ADL) | 7 |
| 1.2.1 Anteil an Patientinnen und Patienten mit einer Verbesserung des MG-ADL um ≥ 4 Punkte (keine Rescue-Therapie) | 7 |
| 1.2.2 Anteil an Patientinnen und Patienten mit minimaler Symptomausprägung im MG-ADL (MG-ADL = 0 oder 1) (keine Rescue-Therapie) | 10 |
| 1.3 Quantitativer Myasthenia gravis (QMG) | 14 |
| 1.3.1 Anteil an Patientinnen und Patienten mit einer Verbesserung des QMG um ≥ 6 Punkte (keine Rescue-Therapie) | 14 |
| 1.4 Myasthenia gravis Composite (MGC) | 17 |
| 1.4.1 Anteil an Patientinnen und Patienten mit Verbesserung des MGC um ≥ 8 Punkte (keine Rescue-Therapie) | 17 |
| 1.5 Exazerbationen und myasthene Krisen | 21 |
| 1.5.1 Anteil an Patientinnen und Patienten mit Exazerbationen (Treatment-policy Strategie) | 21 |
| 1.5.2 Zeit bis zur ersten Exazerbation (Treatment-policy Strategie) | 24 |
| 1.5.3 Kaplan-Meier-Kurven: Zeit bis zur ersten Exazerbation (Treatment-policy Strategie) | 34 |
| 1.5.4 Jährliche Exazerbationsrate (Treatment-policy Strategie) | 72 |
| 1.6 Rescue-Therapien | 98 |
| 1.6.1 Anteil an Patientinnen und Patienten mit Rescue-Therapie | 98 |
| 1.6.2 Zeit bis zur ersten Rescue-Therapie (Treatment-policy Strategie) | 101 |
| 1.6.3 Kaplan-Meier-Kurven: Zeit bis zur ersten Rescue-Therapie (Treatment-policy Strategie) | 111 |
| 1.7 Steroid-Reduktion | 149 |
| 1.7.1 Anteil an Patientinnen und Patienten mit einer Steroid-Reduktion auf ≤ 5 mg bei einer Steroid-Dosis von > 5 mg zur Baseline | 149 |
| 1.7.2 Anteil an Patientinnen und Patienten mit einer Steroid-Reduktion um ≥ 50 % bei einer Steroid-Dosis von > 5 mg zur Baseline | 152 |
| 1.8 Hospitalisierung | 155 |
| 1.8.1 Hospitalisierung (Treatment-policy Strategie) | 155 |
| 1.9 Patient Global Impression of Change (PGIC) | 158 |
| 1.9.1 Anteil an Patientinnen und Patienten mit Verbesserung im PGIC (Composite Strategie; Kategorien: sehr stark verbessert oder stark verbessert) | 158 |
| 1.10 Neuro-QoL Fatigue | 161 |

| | |
|---|-----|
| 1.10.1 Anteil an Patientinnen und Patienten mit Verbesserung des Neuro-QoL Fatigue um ≥ 12 Punkte (keine Rescue-Therapie)..... | 161 |
| 1.11 Myasthenia gravis Quality of Life-15, revised (MG-QoL-15r) | 164 |
| 1.11.1 Anteil an Patientinnen und Patienten mit Verbesserung des MG-QoL-15r um ≥ 5 Punkte (keine Rescue-Therapie)..... | 164 |
| 1.12 Sicherheitsrelevante Endpunkte..... | 167 |
| 1.12.1 Gesamtraten: UE..... | 167 |
| 1.12.2 Gesamtraten: SUE..... | 170 |
| 1.12.3 Gesamtraten: Schwere UE (CTCAE Grad ≥ 3)..... | 173 |
| 1.12.4 Gesamtraten: Therapieabbruch aufgrund von UE..... | 176 |
| 1.12.5 UE nach SOC/PT, die bei ≥ 10 % der Patientinnen und Patienten in einem der beiden Behandlungsarmen oder bei mindestens 10 Patientinnen und Patienten insgesamt und bei ≥ 1 % in einem der beiden Behandlungsarmen auftraten..... | 179 |
| 1.12.6 SUE nach SOC/PT, die bei ≥ 5 % der Patientinnen und Patienten in einem der beiden Behandlungsarmen oder bei mindestens 10 Patientinnen und Patienten insgesamt und bei ≥ 1 % in einem der beiden Behandlungsarmen auftraten..... | 181 |
| 1.12.7 Schwere UE (CTCAE Grad ≥ 3) nach SOC/PT, die bei ≥ 5 % der Patientinnen und Patienten in einem der beiden Behandlungsarmen oder bei mindestens 10 Patientinnen und Patienten insgesamt und bei ≥ 1 % in einem der beiden Behandlungsarmen auftraten..... | 182 |

Modul 4 C, Anhang 4-G

1 Subgruppenanalysen

1.1 Todesfälle

1.1.1 Todesfälle

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 1 / 81 (1.2) | 1 / 76 (1.3) | NA | NA | NA | NA | NA | NA | NA |
| >= 65 years | 1 / 14 (7.1) | 0 / 19 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Sex | | | | | | | | | |
| Male | 2 / 46 (4.3) | 1 / 35 (2.9) | NA | NA | NA | NA | NA | NA | NA |
| Female | 0 / 49 (0.0) | 0 / 60 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 0 / 55 (0.0) | 0 / 63 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Prednisone > 20 mg/day | 2 / 31 (6.5) | 1 / 27 (3.7) | NA | NA | NA | NA | NA | NA | NA |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 0 / 39 (0.0) | 0 / 38 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| QMG >= 16 | 2 / 53 (3.8) | 1 / 55 (1.8) | NA | NA | NA | NA | NA | NA | NA |
| Baseline MGFA class | | | | | | | | | |
| II | 2 / 36 (5.6) | 0 / 43 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| III | 0 / 49 (0.0) | 1 / 49 (2.0) | NA | NA | NA | NA | NA | NA | NA |
| IV | 0 / 8 (0.0) | 0 / 3 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Asia | 2 / 40 (5.0) | 1 / 30 (3.3) | NA | NA | NA | NA | NA | NA | NA |
| Europe | 0 / 40 (0.0) | 0 / 37 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| North America | 0 / 12 (0.0) | 0 / 19 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Rest of the world | 0 / 3 (0.0) | 0 / 9 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| EU | 0 / 40 (0.0) | 0 / 37 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-EU | 2 / 55 (3.6) | 1 / 58 (1.7) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Japan | 0 / 1 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 2 / 94 (2.1) | 1 / 94 (1.1) | NA | NA | NA | NA | NA | NA | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 0 / 22 (0.0) | 0 / 21 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| >= 65 years | 0 / 2 (0.0) | 0 / 3 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Sex | | | | | | | | | |
| Male | 0 / 7 (0.0) | 0 / 5 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Female | 0 / 17 (0.0) | 0 / 19 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 0 / 13 (0.0) | 0 / 19 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Prednisone > 20 mg/day | 0 / 10 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 0 / 9 (0.0) | 0 / 13 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| QMG >= 16 | 0 / 15 (0.0) | 0 / 9 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline MGFA class | | | | | | | | | |
| II | 0 / 12 (0.0) | 0 / 13 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| III | 0 / 12 (0.0) | 0 / 9 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| IV | 0 / 0 (-) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Asia | 0 / 15 (0.0) | 0 / 14 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Europe | 0 / 2 (0.0) | 0 / 7 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| North America | 0 / 2 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Rest of the world | 0 / 5 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| EU | 0 / 2 (0.0) | 0 / 7 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-EU | 0 / 22 (0.0) | 0 / 17 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Japan | 0 / 2 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 0 / 22 (0.0) | 0 / 22 (0.0) | NA | NA | NA | NA | NA | NA | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|--|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>n = Number of subjects with observed data. N1 = Number of subjects in each subgroup level.</p> <p>Grade 1: Mild; Grade 2: Moderate; Grade 3: Severe; Grade 4: Life-threatening; Grade 5: Fatal</p> <p>Serious adverse event criteria: death, life-threatening, required inpatient hospitalization, prolongation of existing hospitalization, persistent or significant disability/incapacity, important medical event, congenital anomaly/birth defect (in the offspring of the subject).</p> <p>95% CI for risk difference, risk ratio, and odds ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> <p>If Zero cell correction applied, 95% CI for risk difference, risk ratio, and odds ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.2 Myasthenia gravis Activities of Daily Living (MG-ADL)**1.2.1 Anteil an Patientinnen und Patienten mit einer Verbesserung des MG-ADL um ≥ 4 Punkte (keine Rescue-Therapie)**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|-------------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| $\geq 18 - < 65$ years | 22 / 69 (31.9) | 47 / 63 (74.6) | 6.00 (2.80, 12.87) | <0.0001 | 2.34 (1.64, 3.45) | <0.0001 | 42.01 (26.31, 57.71) | <0.0001 | |
| ≥ 65 years | 3 / 10 (30.0) | 9 / 16 (56.3) | 4.09 (0.55, 30.32) | 0.1687 | 1.88 (0.76, 5.56) | 0.2475 | 31.04 (-7.95, 70.02) | 0.1187 | |
| Sex | | | | | | | | | |
| Male | 13 / 39 (33.3) | 18 / 27 (66.7) | 3.22 (1.11, 9.32) | 0.0308 | 2.00 (1.20, 3.41) | 0.0119 | 28.44 (3.98, 52.91) | 0.0227 | 0.7211 |
| Female | 12 / 40 (30.0) | 38 / 52 (73.1) | 6.23 (2.45, 15.86) | 0.0001 | 2.44 (1.54, 4.13) | <0.0001 | 42.56 (23.84, 61.29) | <0.0001 | |
| Baseline steroid use | | | | | | | | | |
| Prednisone \leq 20 mg/day | 18 / 47 (38.3) | 41 / 52 (78.8) | 5.54 (2.28, 13.43) | 0.0002 | 2.06 (1.44, 3.12) | <0.0001 | 39.88 (21.42, 58.33) | <0.0001 | 0.7057 |
| Prednisone $>$ 20 mg/day | 7 / 27 (25.9) | 14 / 24 (58.3) | 3.23 (0.97, 10.77) | 0.0561 | 2.25 (1.14, 4.71) | 0.0249 | 28.07 (-1.01, 57.14) | 0.0585 | |
| Baseline QMG | | | | | | | | | |
| QMG ≤ 15 | 11 / 31 (35.5) | 18 / 29 (62.1) | 3.10 (1.03, 9.28) | 0.0436 | 1.75 (1.03, 3.11) | 0.0695 | 27.03 (1.78, 52.27) | 0.0359 | 0.2926 |
| QMG ≥ 16 | 14 / 46 (30.4) | 36 / 48 (75.0) | 6.70 (2.66, 16.92) | <0.0001 | 2.46 (1.60, 4.02) | <0.0001 | 44.20 (25.55, 62.85) | <0.0001 | |
| Baseline MGFA class | | | | | | | | | |
| II | 11 / 29 (37.9) | 23 / 35 (65.7) | 2.71 (0.95, 7.71) | 0.0621 | 1.73 (1.06, 3.02) | 0.0435 | 24.20 (-0.42, 48.82) | 0.0540 | 0.3482 |
| III | 13 / 42 (31.0) | 31 / 41 (75.6) | 6.69 (2.47, 18.17) | 0.0002 | 2.44 (1.56, 4.06) | <0.0001 | 43.69 (23.57, 63.80) | <0.0001 | |
| IV | 0 / 7 (0.0) | 2 / 3 (66.7) | ND | ND | 10.00 (1.14, 100.51) | 0.0667 | ND | ND | |
| Region | | | | | | | | | |
| Asia | 14 / 32 (43.8) | 17 / 26 (65.4) | 2.43 (0.80, 7.39) | 0.1191 | 1.49 (0.92, 2.47) | 0.1195 | 21.65 (-4.88, 48.19) | 0.1097 | 0.1490 |
| Europe | 6 / 33 (18.2) | 24 / 32 (75.0) | 10.41 (3.17, 34.19) | 0.0001 | 4.13 (2.09, 8.90) | <0.0001 | 49.30 (26.68, 71.92) | <0.0001 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| North America | 5 / 11 (45.5) | 10 / 14 (71.4) | 2.72 (0.50, 14.76) | 0.2452 | 1.57 (0.81, 3.53) | 0.2406 | 23.79 (-15.02, 62.61) | 0.2296 | |
| Rest of the world | 0 / 3 (0.0) | 5 / 7 (71.4) | ND | ND | 5.50 (0.93, 53.27) | 0.1667 | ND | ND | |
| Region | | | | | | | | | 0.0764 |
| EU | 6 / 33 (18.2) | 24 / 32 (75.0) | 10.41 (3.17, 34.19) | 0.0001 | 4.13 (2.09, 8.90) | <0.0001 | 49.30 (26.68, 71.92) | <0.0001 | |
| Non-EU | 19 / 46 (41.3) | 32 / 47 (68.1) | 2.92 (1.24, 6.90) | 0.0142 | 1.65 (1.13, 2.50) | 0.0126 | 26.17 (6.19, 46.15) | 0.0103 | |
| Region | | | | | | | | | NA |
| Japan | 0 / 1 (0.0) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 25 / 78 (32.1) | 55 / 78 (70.5) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| ≥ 18 - < 65 years | 9 / 22 (40.9) | 11 / 21 (52.4) | NA | NA | NA | NA | NA | NA | |
| ≥ 65 years | 0 / 2 (0.0) | 2 / 3 (66.7) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | 0.2433 |
| Male | 4 / 7 (57.1) | 2 / 5 (40.0) | 0.62 (0.04, 8.58) | 0.7205 | 0.70 (0.19, 2.17) | 1.0000 | -11.68 (-74.86, 51.50) | 0.7171 | |
| Female | 5 / 17 (29.4) | 11 / 19 (57.9) | 3.37 (0.75, 15.22) | 0.1139 | 1.97 (0.91, 4.66) | 0.1065 | 27.35 (-4.40, 59.11) | 0.0914 | |
| Baseline steroid use | | | | | | | | | 0.8704 |
| Prednisone ≤ 20 mg/day | 3 / 13 (23.1) | 10 / 19 (52.6) | 2.83 (0.60, 13.38) | 0.1885 | 2.28 (0.88, 6.85) | 0.1469 | 23.28 (-9.50, 56.05) | 0.1639 | |
| Prednisone > 20 mg/day | 5 / 10 (50.0) | 2 / 2 (100.0) | 14.76 (0.18, 1241.43) | 0.2339 | 1.67 (0.56, 3.63) | 0.4697 | 45.41 (-1.94, 92.75) | 0.0602 | |
| Baseline QMG | | | | | | | | | 1.0000 |
| QMG ≤ 15 | 3 / 9 (33.3) | 6 / 13 (46.2) | 1.56 (0.26, 9.48) | 0.6295 | 1.38 (0.51, 4.28) | 0.6740 | 10.54 (-31.56, 52.65) | 0.6235 | |
| QMG ≥ 16 | 6 / 15 (40.0) | 6 / 9 (66.7) | 2.77 (0.44, 17.51) | 0.2787 | 1.67 (0.74, 3.68) | 0.4003 | 24.81 (-18.48, 68.10) | 0.2613 | |
| Baseline MGFA class | | | | | | | | | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|----------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| II | 3 / 12 (25.0) | 9 / 13 (69.2) | NA | NA | NA | NA | NA | NA | |
| III | 6 / 12 (50.0) | 3 / 9 (33.3) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 0 (-) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Asia | 5 / 15 (33.3) | 9 / 14 (64.3) | NA | NA | NA | NA | NA | NA | |
| Europe | 2 / 2 (100.0) | 3 / 7 (42.9) | NA | NA | NA | NA | NA | NA | |
| North America | 0 / 2 (0.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | |
| Rest of the world | 2 / 5 (40.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| EU | 2 / 2 (100.0) | 3 / 7 (42.9) | NA | NA | NA | NA | NA | NA | |
| Non-EU | 7 / 22 (31.8) | 10 / 17 (58.8) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Japan | 0 / 2 (0.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 9 / 22 (40.9) | 12 / 22 (54.5) | NA | NA | NA | NA | NA | NA | |

Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects with assessment in each subgroup level. CI = Confidence interval. Baseline is defined as the last valid value on or prior to the 1st dose of Randomized controlled period. If a subject used rescue therapy between Day 28 and Week 52 or discontinued from the study before Week 52, the subject was considered as a non-responder.

^a Based on logistic regression with treatment, baseline steroid use (Daily dose <= 5 mg vs > 5 mg), baseline QMG score (QMG <= 15 vs QMG >= 16), and baseline MG-ADL score as common covariates.

95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.

If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.2.2 Anteil an Patientinnen und Patienten mit minimaler Symptomausprägung im MG-ADL (MG-ADL = 0 oder 1) (keine Rescue-Therapie)

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|-----------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | 0.4143 |
| >= 18 - < 65 years | 4 / 69 (5.8) | 22 / 63 (34.9) | 8.97 (2.94, 27.37) | 0.0001 | 6.02 (2.34, 16.10) | <0.0001 | 27.07 (11.82, 42.32) | 0.0005 | |
| >= 65 years | 1 / 10 (10.0) | 4 / 16 (25.0) | 2.82 (0.31, 25.34) | 0.3541 | 2.50 (0.46, 15.74) | 0.6169 | 13.74 (-12.77, 40.25) | 0.3096 | |
| Sex | | | | | | | | | 0.6278 |
| Male | 3 / 39 (7.7) | 8 / 27 (29.6) | 3.50 (0.91, 13.56) | 0.0693 | 3.85 (1.22, 12.53) | 0.0400 | 17.15 (-3.62, 37.92) | 0.1057 | |
| Female | 2 / 40 (5.0) | 18 / 52 (34.6) | 12.01 (2.71, 53.23) | 0.0011 | 6.92 (1.97, 26.06) | 0.0007 | 28.24 (11.91, 44.58) | 0.0007 | |
| Baseline steroid use | | | | | | | | | 0.6173 |
| Prednisone <= 20 mg/day | 4 / 47 (8.5) | 17 / 52 (32.7) | 4.65 (1.49, 14.55) | 0.0082 | 3.84 (1.49, 10.38) | 0.0059 | 20.51 (5.17, 35.86) | 0.0088 | |
| Prednisone > 20 mg/day | 1 / 27 (3.7) | 8 / 24 (33.3) | 9.76 (1.47, 64.66) | 0.0182 | 9.00 (1.64, 53.62) | 0.0085 | 35.03 (0.02, 70.04) | 0.0499 | |
| Baseline QMG | | | | | | | | | 1.0000 |
| QMG <= 15 | 2 / 31 (6.5) | 12 / 29 (41.4) | 7.51 (1.71, 32.98) | 0.0076 | 6.41 (1.82, 24.38) | 0.0019 | 32.05 (8.30, 55.80) | 0.0082 | |
| QMG >= 16 | 3 / 46 (6.5) | 14 / 48 (29.2) | 6.56 (1.73, 24.95) | 0.0058 | 4.47 (1.51, 13.94) | 0.0063 | 21.60 (6.76, 36.43) | 0.0043 | |
| Baseline MGFA class | | | | | | | | | 0.7211 |
| II | 1 / 29 (3.4) | 11 / 35 (31.4) | 9.09 (1.57, 52.75) | 0.0139 | 9.11 (1.69, 53.61) | 0.0080 | 26.61 (8.09, 45.12) | 0.0049 | |
| III | 4 / 42 (9.5) | 14 / 41 (34.1) | 5.19 (1.52, 17.76) | 0.0087 | 3.59 (1.38, 9.78) | 0.0080 | 23.74 (4.41, 43.08) | 0.0161 | |
| IV | 0 / 7 (0.0) | 1 / 3 (33.3) | ND | ND | 6.00 (0.57, 65.88) | 0.3000 | ND | ND | |
| Region | | | | | | | | | 0.3028 |
| Asia | 5 / 32 (15.6) | 8 / 26 (30.8) | 2.45 (0.68, 8.79) | 0.1680 | 1.97 (0.76, 5.18) | 0.2134 | 8.43 (-7.73, 24.59) | 0.3064 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|-------------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| Europe | 0 / 33 (0.0) | 9 / 32 (28.1) | 24.90 (1.74, 357.10) | 0.0180 | 19.58 (2.14, 192.89) | 0.0009 | 20.16 (-3.28, 43.59) | 0.0918 | |
| North America | 0 / 11 (0.0) | 5 / 14 (35.7) | 23.24 (0.80, 675.10) | 0.0672 | 8.80 (1.04, 87.81) | 0.0464 | 38.65 (6.55, 70.74) | 0.0183 | |
| Rest of the world | 0 / 3 (0.0) | 4 / 7 (57.1) | ND | ND | 4.50 (0.70, 44.25) | 0.2000 | ND | ND | |
| Region | | | | | | | | | 0.2235 |
| EU | 0 / 33 (0.0) | 9 / 32 (28.1) | 24.90 (1.74, 357.10) | 0.0180 | 19.58 (2.14, 192.89) | 0.0009 | 20.16 (-3.28, 43.59) | 0.0918 | |
| Non-EU | 5 / 46 (10.9) | 17 / 47 (36.2) | 4.68 (1.56, 14.04) | 0.0058 | 3.33 (1.41, 8.19) | 0.0065 | 23.09 (7.19, 38.99) | 0.0044 | |
| Region | | | | | | | | | NA |
| Japan | 0 / 1 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 5 / 78 (6.4) | 26 / 78 (33.3) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| >= 18 - < 65 years | 3 / 22 (13.6) | 3 / 21 (14.3) | NA | NA | NA | NA | NA | NA | |
| >= 65 years | 0 / 2 (0.0) | 0 / 3 (0.0) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | NE |
| Male | 2 / 7 (28.6) | 0 / 5 (0.0) | NA | NA | NA | NA | NA | NA | |
| Female | 1 / 17 (5.9) | 3 / 19 (15.8) | NA | NA | NA | NA | NA | NA | |
| Baseline steroid use | | | | | | | | | NA |
| Prednisone <= 20 mg/day | 2 / 13 (15.4) | 2 / 19 (10.5) | NA | NA | NA | NA | NA | NA | |
| Prednisone > 20 mg/day | 1 / 10 (10.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | |
| Baseline QMG | | | | | | | | | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|---|-----------------------|----------------------------|--------------------------|---------|-----------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| QMG ≤ 15 | 2 / 9 (22.2) | 1 / 13 (7.7) | NA | NA | NA | NA | NA | NA | |
| QMG ≥ 16 | 1 / 15 (6.7) | 2 / 9 (22.2) | NA | NA | NA | NA | NA | NA | |
| Baseline MGFA class | | | | | | | | | NA |
| II | 3 / 12 (25.0) | 2 / 13 (15.4) | NA | NA | NA | NA | NA | NA | |
| III | 0 / 12 (0.0) | 1 / 9 (11.1) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 0 (-) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Asia | 2 / 15 (13.3) | 3 / 14 (21.4) | NA | NA | NA | NA | NA | NA | |
| Europe | 1 / 2 (50.0) | 0 / 7 (0.0) | NA | NA | NA | NA | NA | NA | |
| North America | 0 / 2 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | |
| Rest of the world | 0 / 5 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| EU | 1 / 2 (50.0) | 0 / 7 (0.0) | NA | NA | NA | NA | NA | NA | |
| Non-EU | 2 / 22 (9.1) | 3 / 17 (17.6) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Japan | 0 / 2 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 3 / 22 (13.6) | 3 / 22 (13.6) | NA | NA | NA | NA | NA | NA | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects with assessment in each subgroup level. CI = Confidence interval.</p> <p>Minimal symptom expression, defined as MG-ADL = 0 or 1.</p> <p>If a subject used rescue therapy between Day 28 and Week 52 or discontinued from the study before Week 52, the subject was considered as a non-responder.</p> <p>^a Based on logistic regression with treatment, baseline steroid use (Daily dose ≤ 5 mg vs > 5 mg), baseline QMG score (QMG ≤ 15 vs QMG ≥ 16), and baseline MG-ADL score as common covariates.</p> <p>95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|---|-----------------------|----------------------------|--------------------------|---------|-----------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction. | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.3 Quantitativer Myasthenia gravis (QMG)**1.3.1 Anteil an Patientinnen und Patienten mit einer Verbesserung des QMG um ≥ 6 Punkte (keine Rescue-Therapie)**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | 0.3050 |
| >= 18 - < 65 years | 12 / 67 (17.9) | 35 / 61 (57.4) | 5.95 (2.65, 13.39) | <0.0001 | 3.20 (1.88, 5.64) | <0.0001 | 40.30 (23.95, 56.66) | <0.0001 | |
| >= 65 years | 3 / 10 (30.0) | 7 / 15 (46.7) | 3.79 (0.39, 37.09) | 0.2520 | 1.56 (0.58, 4.77) | 0.6785 | 27.02 (-13.38, 67.42) | 0.1899 | |
| Sex | | | | | | | | | 1.0000 |
| Male | 9 / 38 (23.7) | 16 / 27 (59.3) | 4.54 (1.49, 13.79) | 0.0077 | 2.50 (1.34, 4.85) | 0.0049 | 35.70 (11.31, 60.09) | 0.0041 | |
| Female | 6 / 39 (15.4) | 26 / 49 (53.1) | 6.54 (2.25, 19.03) | 0.0006 | 3.45 (1.68, 7.60) | 0.0003 | 39.34 (20.40, 58.29) | <0.0001 | |
| Baseline steroid use | | | | | | | | | 0.6992 |
| Prednisone <= 20 mg/day | 9 / 46 (19.6) | 30 / 51 (58.8) | 5.44 (2.18, 13.59) | 0.0003 | 3.01 (1.67, 5.72) | <0.0001 | 38.32 (19.87, 56.78) | <0.0001 | |
| Prednisone > 20 mg/day | 5 / 26 (19.2) | 11 / 22 (50.0) | 4.08 (1.00, 16.61) | 0.0496 | 2.60 (1.12, 6.36) | 0.0337 | 33.70 (2.04, 65.36) | 0.0370 | |
| Baseline QMG | | | | | | | | | 1.0000 |
| QMG <= 15 | 5 / 31 (16.1) | 15 / 28 (53.6) | 6.15 (1.75, 21.64) | 0.0047 | 3.32 (1.48, 7.98) | 0.0052 | 41.40 (15.73, 67.07) | 0.0016 | |
| QMG >= 16 | 10 / 46 (21.7) | 27 / 48 (56.3) | 4.51 (1.81, 11.25) | 0.0012 | 2.59 (1.47, 4.79) | 0.0007 | 33.59 (15.12, 52.07) | 0.0004 | |
| Baseline MGFA class | | | | | | | | | NA |
| II | 6 / 29 (20.7) | 20 / 34 (58.8) | NA | NA | NA | NA | NA | NA | |
| III | 9 / 42 (21.4) | 21 / 39 (53.8) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 5 (0.0) | 1 / 3 (33.3) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | 0.6805 |
| Asia | 9 / 32 (28.1) | 14 / 25 (56.0) | 3.51 (1.08, 11.35) | 0.0364 | 1.99 (1.05, 3.87) | 0.0560 | 28.17 (1.63, 54.71) | 0.0375 | |
| Europe | 3 / 31 (9.7) | 15 / 30 (50.0) | 7.71 (1.99, 29.80) | 0.0031 | 5.17 (1.85, 15.64) | 0.0007 | 42.25 (16.27, 68.23) | 0.0014 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|-----------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| North America | 3 / 11 (27.3) | 9 / 14 (64.3) | 3.77 (0.69, 20.66) | 0.1263 | 2.36 (0.95, 6.94) | 0.1107 | 31.89 (-5.96, 69.74) | 0.0987 | |
| Rest of the world | 0 / 3 (0.0) | 4 / 7 (57.1) | ND | ND | 4.50 (0.70, 44.25) | 0.2000 | ND | ND | |
| Region | | | | | | | | | 0.4407 |
| EU | 3 / 31 (9.7) | 15 / 30 (50.0) | 7.71 (1.99, 29.80) | 0.0031 | 5.17 (1.85, 15.64) | 0.0007 | 42.25 (16.27, 68.23) | 0.0014 | |
| Non-EU | 12 / 46 (26.1) | 27 / 46 (58.7) | 4.07 (1.64, 10.10) | 0.0025 | 2.25 (1.34, 3.94) | 0.0029 | 32.98 (13.36, 52.60) | 0.0010 | |
| Region | | | | | | | | | NA |
| Japan | 0 / 1 (0.0) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 15 / 76 (19.7) | 41 / 75 (54.7) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| >= 18 - < 65 years | 6 / 22 (27.3) | 9 / 20 (45.0) | NA | NA | NA | NA | NA | NA | |
| >= 65 years | 0 / 2 (0.0) | 1 / 3 (33.3) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | 0.4970 |
| Male | 3 / 7 (42.9) | 2 / 5 (40.0) | ND | ND | 0.93 (0.23, 3.34) | 1.0000 | ND | ND | |
| Female | 3 / 17 (17.6) | 8 / 18 (44.4) | 5.85 (0.87, 39.39) | 0.0696 | 2.52 (0.88, 7.85) | 0.1464 | 37.69 (1.17, 74.20) | 0.0431 | |
| Baseline steroid use | | | | | | | | | 0.1522 |
| Prednisone <= 20 mg/day | 2 / 13 (15.4) | 9 / 18 (50.0) | 11.81 (1.18, 118.24) | 0.0356 | 3.25 (1.01, 12.25) | 0.0656 | 51.17 (12.96, 89.37) | 0.0087 | |
| Prednisone > 20 mg/day | 3 / 10 (30.0) | 0 / 2 (0.0) | 3.44 (0.02, 743.98) | 0.6522 | 0.52 (0.05, 3.40) | 1.0000 | 26.00 (-95.01, 147.00) | 0.6737 | |
| Baseline QMG | | | | | | | | | 0.9184 |
| QMG <= 15 | 0 / 9 (0.0) | 3 / 13 (23.1) | 6.22 (0.23, 165.28) | 0.2747 | 5.00 (0.56, 51.72) | 0.2403 | 21.85 (-10.02, 53.71) | 0.1790 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|---|-----------------------|----------------------------|--------------------------|---------|-------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| QMG >= 16 | 6 / 15 (40.0) | 7 / 9 (77.8) | 3.76 (0.58, 24.58) | 0.1664 | 1.94 (0.94, 4.13) | 0.1049 | 29.02 (-8.50, 66.54) | 0.1295 | |
| Baseline MGFA class | | | | | | | | | NA |
| II | 1 / 12 (8.3) | 7 / 13 (53.8) | NA | NA | NA | NA | NA | NA | |
| III | 5 / 12 (41.7) | 3 / 9 (33.3) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 0 (-) | 0 / 0 (-) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Asia | 1 / 15 (6.7) | 8 / 14 (57.1) | NA | NA | NA | NA | NA | NA | |
| Europe | 1 / 2 (50.0) | 1 / 6 (16.7) | NA | NA | NA | NA | NA | NA | |
| North America | 1 / 2 (50.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | |
| Rest of the world | 3 / 5 (60.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| EU | 1 / 2 (50.0) | 1 / 6 (16.7) | NA | NA | NA | NA | NA | NA | |
| Non-EU | 5 / 22 (22.7) | 9 / 17 (52.9) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Japan | 0 / 2 (0.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 6 / 22 (27.3) | 8 / 21 (38.1) | NA | NA | NA | NA | NA | NA | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects with assessment in each subgroup level. CI = Confidence interval.</p> <p>Baseline is defined as the last valid value on or prior to the 1st dose of Randomized controlled period.</p> <p>If a subject used rescue therapy between Day 28 and Week 26 or discontinued from the study before Week 26, the subject was considered as a non-responder.</p> <p>^a Based on logistic regression with treatment, baseline steroid use (Daily dose <= 5 mg vs > 5 mg), baseline QMG score, and baseline MG-ADL score as common covariates. 95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> <p>If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.4 Myasthenia gravis Composite (MGC)**1.4.1 Anteil an Patientinnen und Patienten mit Verbesserung des MGC um ≥ 8 Punkte (keine Rescue-Therapie)**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|-------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | 1.0000 |
| >= 18 - < 65 years | 21 / 69 (30.4) | 36 / 63 (57.1) | 3.47 (1.64, 7.35) | 0.0012 | 1.88 (1.25, 2.87) | 0.0027 | 29.92 (12.88, 46.96) | 0.0006 | |
| >= 65 years | 2 / 10 (20.0) | 6 / 15 (40.0) | 2.99 (0.25, 35.25) | 0.3840 | 2.00 (0.60, 7.80) | 0.4018 | 16.36 (-17.84, 50.56) | 0.3484 | |
| Sex | | | | | | | | | 0.0179 |
| Male | 16 / 39 (41.0) | 12 / 27 (44.4) | 0.91 (0.31, 2.67) | 0.8612 | 1.08 (0.60, 1.88) | 0.8051 | -2.35 (-28.62, 23.92) | 0.8609 | |
| Female | 7 / 40 (17.5) | 30 / 51 (58.8) | 9.15 (3.00, 27.90) | <0.0001 | 3.36 (1.74, 6.94) | <0.0001 | 46.82 (27.35, 66.29) | <0.0001 | |
| Baseline steroid use | | | | | | | | | 1.0000 |
| Prednisone <= 20 mg/day | 16 / 47 (34.0) | 29 / 52 (55.8) | 2.41 (1.05, 5.55) | 0.0391 | 1.64 (1.05, 2.65) | 0.0430 | 21.55 (1.73, 41.38) | 0.0331 | |
| Prednisone > 20 mg/day | 7 / 27 (25.9) | 12 / 23 (52.2) | 3.37 (0.93, 12.25) | 0.0646 | 2.01 (0.98, 4.30) | 0.0812 | 28.95 (0.28, 57.62) | 0.0478 | |
| Baseline QMG | | | | | | | | | 0.2981 |
| QMG <= 15 | 12 / 31 (38.7) | 14 / 28 (50.0) | 1.62 (0.55, 4.77) | 0.3832 | 1.29 (0.73, 2.32) | 0.4383 | 11.89 (-14.65, 38.42) | 0.3800 | |
| QMG >= 16 | 11 / 46 (23.9) | 26 / 48 (54.2) | 4.59 (1.77, 11.91) | 0.0018 | 2.27 (1.31, 4.09) | 0.0033 | 34.23 (14.53, 53.93) | 0.0007 | |
| Baseline MGFA class | | | | | | | | | NA |
| II | 9 / 29 (31.0) | 15 / 34 (44.1) | 1.84 (0.61, 5.55) | 0.2782 | 1.42 (0.75, 2.80) | 0.3115 | 14.88 (-11.58, 41.34) | 0.2703 | |
| III | 13 / 42 (31.0) | 27 / 41 (65.9) | 3.73 (1.46, 9.56) | 0.0061 | 2.13 (1.32, 3.59) | 0.0021 | 31.66 (10.56, 52.76) | 0.0033 | |
| IV | 0 / 7 (0.0) | 0 / 3 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | 0.0029 |
| Asia | 14 / 32 (43.8) | 13 / 25 (52.0) | 1.23 (0.42, 3.60) | 0.7030 | 1.19 (0.68, 2.05) | 0.5994 | 5.19 (-21.46, 31.84) | 0.7029 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| Europe | 3 / 33 (9.1) | 19 / 32 (59.4) | 14.52 (3.44, 61.23) | 0.0003 | 6.53 (2.39, 19.47) | <0.0001 | 54.04 (29.16, 78.92) | <0.0001 | |
| North America | 6 / 11 (54.5) | 5 / 14 (35.7) | 0.72 (0.11, 4.93) | 0.7388 | 0.65 (0.27, 1.58) | 0.4347 | -8.13 (-55.75, 39.48) | 0.7378 | |
| Rest of the world | 0 / 3 (0.0) | 5 / 7 (71.4) | ND | ND | 5.50 (0.93, 53.27) | 0.1667 | ND | ND | |
| Region | | | | | | | | | 0.0046 |
| EU | 3 / 33 (9.1) | 19 / 32 (59.4) | 14.52 (3.44, 61.23) | 0.0003 | 6.53 (2.39, 19.47) | <0.0001 | 54.04 (29.16, 78.92) | <0.0001 | |
| Non-EU | 20 / 46 (43.5) | 23 / 46 (50.0) | 1.42 (0.60, 3.39) | 0.4257 | 1.15 (0.74, 1.80) | 0.6763 | 8.78 (-12.71, 30.28) | 0.4233 | |
| Region | | | | | | | | | NA |
| Japan | 0 / 1 (0.0) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 23 / 78 (29.5) | 41 / 77 (53.2) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| >= 18 - < 65 years | 11 / 22 (50.0) | 13 / 21 (61.9) | NA | NA | NA | NA | NA | NA | |
| >= 65 years | 0 / 2 (0.0) | 1 / 3 (33.3) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | 0.4937 |
| Male | 4 / 7 (57.1) | 2 / 5 (40.0) | ND | ND | 0.70 (0.19, 2.17) | 1.0000 | ND | ND | |
| Female | 7 / 17 (41.2) | 12 / 19 (63.2) | 2.34 (0.56, 9.76) | 0.2450 | 1.53 (0.82, 3.11) | 0.3161 | 20.71 (-13.32, 54.75) | 0.2329 | |
| Baseline steroid use | | | | | | | | | 1.0000 |
| Prednisone <= 20 mg/day | 5 / 13 (38.5) | 11 / 19 (57.9) | 2.80 (0.57, 13.79) | 0.2065 | 1.51 (0.73, 3.50) | 0.4725 | 25.14 (-12.26, 62.55) | 0.1876 | |
| Prednisone > 20 mg/day | 5 / 10 (50.0) | 1 / 2 (50.0) | 2.22 (0.07, 68.07) | 0.6488 | 1.00 (0.18, 2.97) | 1.0000 | 18.84 (-56.26, 93.94) | 0.6230 | |
| Baseline QMG | | | | | | | | | 1.0000 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|---|-----------------------|----------------------------|--------------------------|---------|-------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| QMG ≤ 15 | 3 / 9 (33.3) | 6 / 13 (46.2) | 3.15 (0.37, 27.18) | 0.2967 | 1.38 (0.51, 4.28) | 0.6740 | 27.40 (-20.81, 75.61) | 0.2654 | |
| QMG ≥ 16 | 8 / 15 (53.3) | 7 / 9 (77.8) | 2.29 (0.36, 14.73) | 0.3825 | 1.46 (0.76, 2.74) | 0.3891 | 18.01 (-20.81, 56.82) | 0.3632 | |
| Baseline MGFA class | | | | | | | | | NA |
| II | 3 / 12 (25.0) | 9 / 13 (69.2) | NA | NA | NA | NA | NA | NA | |
| III | 8 / 12 (66.7) | 4 / 9 (44.4) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 0 (-) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Asia | 5 / 15 (33.3) | 10 / 14 (71.4) | NA | NA | NA | NA | NA | NA | |
| Europe | 2 / 2 (100.0) | 3 / 7 (42.9) | NA | NA | NA | NA | NA | NA | |
| North America | 1 / 2 (50.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | |
| Rest of the world | 3 / 5 (60.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| EU | 2 / 2 (100.0) | 3 / 7 (42.9) | NA | NA | NA | NA | NA | NA | |
| Non-EU | 9 / 22 (40.9) | 11 / 17 (64.7) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Japan | 0 / 2 (0.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 11 / 22 (50.0) | 12 / 22 (54.5) | NA | NA | NA | NA | NA | NA | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>MGC = Myasthenia Gravis Composite. MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects with assessment in each subgroup level. CI = Confidence interval.</p> <p>Baseline is defined as the last valid value on or prior to the 1st dose of Randomized controlled period.</p> <p>If a subject used rescue therapy between Day 28 and Week 26 or discontinued from the study before Week 26, the subject was considered as a non-responder.</p> <p>^a Based on logistic regression with treatment, baseline steroid use (Daily dose ≤ 5 mg vs > 5 mg), baseline QMG score (QMG ≤ 15 vs QMG ≥ 16), baseline MG-ADL score, and baseline MGC score as common covariates.</p> <p>95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|---|-----------------------|----------------------------|--------------------------|---------|-----------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction. | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.5 Exazerbationen und myasthene Krisen**1.5.1 Anteil an Patientinnen und Patienten mit Exazerbationen (Treatment-policy Strategie)**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|----------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 36 / 79 (45.6) | 16 / 76 (21.1) | 0.33 (0.16, 0.67) | 0.0020 | 0.46 (0.28, 0.75) | 0.0013 | -22.83 (- 36.83, -8.83) | 0.0014 | |
| >= 65 years | 5 / 14 (35.7) | 3 / 19 (15.8) | 0.50 (0.10, 2.61) | 0.4092 | 0.44 (0.13, 1.44) | 0.2379 | -11.17 (- 39.08, 16.74) | 0.4328 | |
| Sex | | | | | | | | | |
| Male | 18 / 45 (40.0) | 5 / 35 (14.3) | 0.29 (0.10, 0.90) | 0.0313 | 0.36 (0.15, 0.81) | 0.0137 | -22.28 (- 41.34, -3.23) | 0.0219 | 1.0000 |
| Female | 23 / 48 (47.9) | 14 / 60 (23.3) | 0.34 (0.15, 0.79) | 0.0123 | 0.49 (0.28, 0.83) | 0.0087 | -22.61 (- 40.32, -4.90) | 0.0123 | |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 20 / 54 (37.0) | 9 / 63 (14.3) | 0.31 (0.13, 0.75) | 0.0096 | 0.39 (0.19, 0.76) | 0.0054 | -22.28 (- 39.01, -5.54) | 0.0091 | 1.0000 |
| Prednisone > 20 mg/day | 18 / 30 (60.0) | 9 / 27 (33.3) | 0.36 (0.12, 1.13) | 0.0794 | 0.56 (0.29, 0.99) | 0.0637 | -21.15 (- 50.01, 7.70) | 0.1508 | |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 15 / 39 (38.5) | 6 / 38 (15.8) | 0.30 (0.10, 0.91) | 0.0339 | 0.41 (0.18, 0.90) | 0.0397 | -23.78 (- 44.45, -3.11) | 0.0241 | 1.0000 |
| QMG >= 16 | 25 / 52 (48.1) | 12 / 55 (21.8) | 0.31 (0.13, 0.73) | 0.0074 | 0.45 (0.25, 0.79) | 0.0049 | -23.43 (- 40.31, -6.56) | 0.0065 | |
| Baseline MGFA class | | | | | | | | | |
| II | 16 / 36 (44.4) | 6 / 43 (14.0) | 0.25 (0.09, 0.74) | 0.0120 | 0.31 (0.14, 0.69) | 0.0049 | -24.52 (- 44.53, -4.50) | 0.0164 | 0.3263 |
| III | 19 / 49 (38.8) | 12 / 49 (24.5) | 0.51 (0.21, 1.23) | 0.1368 | 0.63 (0.34, 1.14) | 0.1921 | -13.61 (- 31.22, 4.00) | 0.1297 | |
| IV | 6 / 7 (85.7) | 1 / 3 (33.3) | ND | ND | 0.39 (0.07, 1.15) | 0.1833 | ND | ND | |
| Region | | | | | | | | | |
| Asia | 13 / 39 (33.3) | 6 / 30 (20.0) | 0.47 (0.15, 1.49) | 0.2010 | 0.60 (0.26, 1.33) | 0.2815 | -11.06 (- 28.34, 6.23) | 0.2099 | 0.5605 |
| Europe | 19 / 39 (48.7) | 6 / 37 (16.2) | 0.22 (0.07, 0.64) | 0.0054 | 0.33 (0.15, 0.70) | 0.0034 | -30.41 (- 49.98, -10.85) | 0.0023 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| North America | 6 / 12 (50.0) | 4 / 19 (21.1) | 0.32 (0.07, 1.56) | 0.1589 | 0.42 (0.15, 1.15) | 0.1271 | -25.74 (-60.60, 9.13) | 0.1479 | |
| Rest of the world | 3 / 3 (100.0) | 3 / 9 (33.3) | 0.27 (0.00, 14.65) | 0.5205 | 0.40 (0.15, 1.12) | 0.1818 | -30.53 (-111.37, 50.31) | 0.4592 | |
| Region | | | | | | | | | 0.3334 |
| EU | 19 / 39 (48.7) | 6 / 37 (16.2) | 0.22 (0.07, 0.64) | 0.0054 | 0.33 (0.15, 0.70) | 0.0034 | -30.41 (-49.98, -10.85) | 0.0023 | |
| Non-EU | 22 / 54 (40.7) | 13 / 58 (22.4) | 0.44 (0.19, 1.01) | 0.0530 | 0.55 (0.31, 0.96) | 0.0430 | -16.12 (-32.48, 0.24) | 0.0535 | |
| Region | | | | | | | | | NA |
| Japan | 1 / 1 (100.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 40 / 92 (43.5) | 19 / 94 (20.2) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| ≥ 18 - < 65 years | 9 / 22 (40.9) | 3 / 21 (14.3) | NA | NA | NA | NA | NA | NA | |
| ≥ 65 years | 2 / 2 (100.0) | 0 / 3 (0.0) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | NA |
| Male | 4 / 7 (57.1) | 1 / 5 (20.0) | NA | NA | NA | NA | NA | NA | |
| Female | 7 / 17 (41.2) | 2 / 19 (10.5) | NA | NA | NA | NA | NA | NA | |
| Baseline steroid use | | | | | | | | | NA |
| Prednisone ≤ 20 mg/day | 4 / 13 (30.8) | 3 / 19 (15.8) | NA | NA | NA | NA | NA | NA | |
| Prednisone > 20 mg/day | 6 / 10 (60.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | |
| Baseline QMG | | | | | | | | | NA |
| QMG ≤ 15 | 4 / 9 (44.4) | 1 / 13 (7.7) | NA | NA | NA | NA | NA | NA | |
| QMG ≥ 16 | 7 / 15 (46.7) | 1 / 9 (11.1) | NA | NA | NA | NA | NA | NA | |
| Baseline MGFA class | | | | | | | | | NA |
| II | 7 / 12 (58.3) | 1 / 13 (7.7) | NA | NA | NA | NA | NA | NA | |
| III | 4 / 12 (33.3) | 2 / 9 (22.2) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 0 (-) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|--|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| Region | | | | | | | | | |
| Asia | 6 / 15 (40.0) | 1 / 14 (7.1) | NA | NA | NA | NA | NA | NA | NA |
| Europe | 1 / 2 (50.0) | 2 / 7 (28.6) | NA | NA | NA | NA | NA | NA | NA |
| North America | 1 / 2 (50.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Rest of the world | 3 / 5 (60.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| EU | 1 / 2 (50.0) | 2 / 7 (28.6) | NA | NA | NA | NA | NA | NA | NA |
| Non-EU | 10 / 22 (45.5) | 1 / 17 (5.9) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Japan | 1 / 2 (50.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 10 / 22 (45.5) | 3 / 22 (13.6) | NA | NA | NA | NA | NA | NA | NA |
| <p>An exacerbation is defined as Use of protocol defined rescue therapy, or Myasthenic crisis or Significant symptomatic worsening. MG crisis is defined as worsening of myasthenic weakness requiring intubation or noninvasive ventilation to avoid intubation, except when these measures are employed during routine postoperative management. Significant symptomatic worsening is defined as MG-ADL total score of 3 or a 2-point worsening from baseline on any one of the individual items other than double vision or eyelid droop. MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects in each subgroup level. CI = Confidence interval. ^a Based on logistic regression with treatment, baseline steroid use (Daily dose <= 5 mg vs > 5 mg), baseline QMG score (QMG <= 15 vs QMG >= 16), and baseline MG-ADL score as common covariates. 95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios. If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.5.2 Zeit bis zur ersten Exazerbation (Treatment-policy Strategie)

| Subgroup | Placebo | Inebilizumab |
|--|----------------|----------------|
| AChR+ Population (Week 52) | | |
| Treatment by age interaction p-value ^a | | 0.9244 |
| Age | | |
| >= 18 - < 65 years | | |
| Subjects with exacerbation - n / N1 (%) | 36 / 79 (45.6) | 16 / 76 (21.1) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 8.77, NA | NA, NA |
| Hazard ratio ^c | 0.42 | |
| 95% CI ^c | 0.23, 0.75 | |
| p-value ^c | 0.0035 | |
| >= 65 years | | |
| Subjects with exacerbation - n / N1 (%) | 5 / 14 (35.7) | 3 / 19 (15.8) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 1.94, NA | NA, NA |
| Hazard ratio ^c | 0.42 | |
| 95% CI ^c | 0.09, 1.89 | |
| p-value ^c | 0.2587 | |
| Treatment by sex interaction p-value ^a | | 0.8159 |
| Sex | | |
| Male | | |
| Subjects with exacerbation - n / N1 (%) | 18 / 45 (40.0) | 5 / 35 (14.3) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 7.75, NA | NA, NA |
| Hazard ratio ^c | 0.34 | |
| 95% CI ^c | 0.12, 0.95 | |
| p-value ^c | 0.0388 | |
| Female | | |
| Subjects with exacerbation - n / N1 (%) | 23 / 48 (47.9) | 14 / 60 (23.3) |
| Median time to first exacerbation (months) ^b | 11.37 | NA |
| 95% CI ^b | 5.98, NA | NA, NA |
| Hazard ratio ^c | 0.41 | |
| 95% CI ^c | 0.21, 0.82 | |
| p-value ^c | 0.0110 | |
| Treatment by baseline steroid use interaction p-value ^a | | 0.6323 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|----------------|----------------|
| Baseline steroid use | | |
| Prednisone <= 20 mg/day | | |
| Subjects with exacerbation - n / N1 (%) | 20 / 54 (37.0) | 9 / 63 (14.3) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 8.77, NA | NA, NA |
| Hazard ratio ^c | 0.36 | |
| 95% CI ^c | 0.16, 0.80 | |
| p-value ^c | 0.0115 | |
| Prednisone > 20 mg/day | | |
| Subjects with exacerbation - n / N1 (%) | 18 / 30 (60.0) | 9 / 27 (33.3) |
| Median time to first exacerbation (months) ^b | 10.45 | NA |
| 95% CI ^b | 6.01, NA | 7.43, NA |
| Hazard ratio ^c | 0.50 | |
| 95% CI ^c | 0.22, 1.12 | |
| p-value ^c | 0.0935 | |
| Treatment by baseline QMG interaction p-value ^a | | 0.8812 |
| Baseline QMG | | |
| QMG <= 15 | | |
| Subjects with exacerbation - n / N1 (%) | 15 / 39 (38.5) | 6 / 38 (15.8) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 8.77, NA | NA, NA |
| Hazard ratio ^c | 0.37 | |
| 95% CI ^c | 0.14, 0.98 | |
| p-value ^c | 0.0445 | |
| QMG >= 16 | | |
| Subjects with exacerbation - n / N1 (%) | 25 / 52 (48.1) | 12 / 55 (21.8) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 7.43, NA | NA, NA |
| Hazard ratio ^c | 0.38 | |
| 95% CI ^c | 0.19, 0.76 | |
| p-value ^c | 0.0061 | |
| Treatment by baseline MGFA class interaction p-value ^a | | 0.5669 |
| Baseline MGFA class | | |
| II | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|----------------|----------------|
| Subjects with exacerbation - n / N1 (%) | 16 / 36 (44.4) | 6 / 43 (14.0) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 7.79, NA | NA, NA |
| Hazard ratio ^c | 0.32 | |
| 95% CI ^c | 0.12, 0.83 | |
| p-value ^c | 0.0186 | |
| III | | |
| Subjects with exacerbation - n / N1 (%) | 19 / 49 (38.8) | 12 / 49 (24.5) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 7.43, NA | NA, NA |
| Hazard ratio ^c | 0.54 | |
| 95% CI ^c | 0.26, 1.11 | |
| p-value ^c | 0.0921 | |
| IV | | |
| Subjects with exacerbation - n / N1 (%) | 6 / 7 (85.7) | 1 / 3 (33.3) |
| Median time to first exacerbation (months) ^b | 3.55 | NA |
| 95% CI ^b | 0.49, 7.46 | 1.22, NA |
| Hazard ratio ^c | 0.48 | |
| 95% CI ^c | 0.03, 7.88 | |
| p-value ^c | 0.6081 | |
| Treatment by region interaction p-value ^a | | 0.8544 |
| Region | | |
| Asia | | |
| Subjects with exacerbation - n / N1 (%) | 13 / 39 (33.3) | 6 / 30 (20.0) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 11.33, NA | NA, NA |
| Hazard ratio ^c | 0.43 | |
| 95% CI ^c | 0.16, 1.16 | |
| p-value ^c | 0.0968 | |
| Europe | | |
| Subjects with exacerbation - n / N1 (%) | 19 / 39 (48.7) | 6 / 37 (16.2) |
| Median time to first exacerbation (months) ^b | 11.07 | NA |
| 95% CI ^b | 5.78, NA | NA, NA |
| Hazard ratio ^c | 0.28 | |
| 95% CI ^c | 0.11, 0.72 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|----------------|----------------|
| p-value ^c | 0.0079 | |
| North America | | |
| Subjects with exacerbation - n / N1 (%) | 6 / 12 (50.0) | 4 / 19 (21.1) |
| Median time to first exacerbation (months) ^b | 10.32 | NA |
| 95% CI ^b | 2.40, NA | NA, NA |
| Hazard ratio ^c | 0.39 | |
| 95% CI ^c | 0.11, 1.43 | |
| p-value ^c | 0.1564 | |
| Rest of the world | | |
| Subjects with exacerbation - n / N1 (%) | 3 / 3 (100.0) | 3 / 9 (33.3) |
| Median time to first exacerbation (months) ^b | 5.52 | NA |
| 95% CI ^b | 1.58, NA | 1.22, NA |
| Hazard ratio ^c | 0.62 | |
| 95% CI ^c | 0.10, 3.99 | |
| p-value ^c | 0.6155 | |
| Treatment by region interaction p-value ^a | 0.3118 | |
| Region | | |
| EU | | |
| Subjects with exacerbation - n / N1 (%) | 19 / 39 (48.7) | 6 / 37 (16.2) |
| Median time to first exacerbation (months) ^b | 11.07 | NA |
| 95% CI ^b | 5.78, NA | NA, NA |
| Hazard ratio ^c | 0.28 | |
| 95% CI ^c | 0.11, 0.72 | |
| p-value ^c | 0.0079 | |
| Non-EU | | |
| Subjects with exacerbation - n / N1 (%) | 22 / 54 (40.7) | 13 / 58 (22.4) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 10.32, NA | NA, NA |
| Hazard ratio ^c | 0.51 | |
| 95% CI ^c | 0.25, 1.01 | |
| p-value ^c | 0.0532 | |
| Treatment by region interaction p-value ^a | NA | |
| Region | | |
| Japan | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|----------------|----------------|
| Subjects with exacerbation - n / N1 (%) | 1 / 1 (100.0) | 0 / 1 (0.0) |
| Median time to first exacerbation (months) ^b | 1.91 | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Non-Japan | | |
| Subjects with exacerbation - n / N1 (%) | 40 / 92 (43.5) | 19 / 94 (20.2) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 8.77, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| MuSK+ Population (Week 26) | | |
| Treatment by age interaction p-value ^a | | NA |
| Age | | |
| >= 18 - < 65 years | | |
| Subjects with exacerbation - n / N1 (%) | 9 / 22 (40.9) | 3 / 21 (14.3) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 2.69, NA | 6.44, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| >= 65 years | | |
| Subjects with exacerbation - n / N1 (%) | 2 / 2 (100.0) | 0 / 3 (0.0) |
| Median time to first exacerbation (months) ^b | 4.48 | NA |
| 95% CI ^b | 4.11, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by sex interaction p-value ^a | | NA |
| Sex | | |
| Male | | |
| Subjects with exacerbation - n / N1 (%) | 4 / 7 (57.1) | 1 / 5 (20.0) |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|---------------|---------------|
| Median time to first exacerbation (months) ^b | 4.86 | NA |
| 95% CI ^b | 0.49, NA | 6.44, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Female | | |
| Subjects with exacerbation - n / N1 (%) | 7 / 17 (41.2) | 2 / 19 (10.5) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 2.69, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by baseline steroid use interaction p-value ^a | | NA |
| Baseline steroid use | | |
| Prednisone <= 20 mg/day | | |
| Subjects with exacerbation - n / N1 (%) | 4 / 13 (30.8) | 3 / 19 (15.8) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 2.79, NA | 6.44, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Prednisone > 20 mg/day | | |
| Subjects with exacerbation - n / N1 (%) | 6 / 10 (60.0) | 0 / 2 (0.0) |
| Median time to first exacerbation (months) ^b | 4.48 | NA |
| 95% CI ^b | 0.46, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by baseline QMG interaction p-value ^a | | NA |
| Baseline QMG | | |
| QMG <= 15 | | |
| Subjects with exacerbation - n / N1 (%) | 4 / 9 (44.4) | 1 / 13 (7.7) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 0.99, NA | 6.44, NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|---------------|--------------|
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| QMG >= 16 | | |
| Subjects with exacerbation - n / N1 (%) | 7 / 15 (46.7) | 1 / 9 (11.1) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 0.49, NA | 0.95, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by baseline MGFA class interaction p-value ^a | | NA |
| Baseline MGFA class | | |
| II | | |
| Subjects with exacerbation - n / N1 (%) | 7 / 12 (58.3) | 1 / 13 (7.7) |
| Median time to first exacerbation (months) ^b | 4.34 | NA |
| 95% CI ^b | 0.99, NA | 6.44, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| III | | |
| Subjects with exacerbation - n / N1 (%) | 4 / 12 (33.3) | 2 / 9 (22.2) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 0.49, NA | 0.95, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| IV | | |
| Subjects with exacerbation - n / N1 (%) | 0 / 0 (-) | 0 / 1 (0.0) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by region interaction p-value ^a | | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|---------------|--------------|
| Region | | |
| Asia | | |
| Subjects with exacerbation - n / N1 (%) | 6 / 15 (40.0) | 1 / 14 (7.1) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 2.79, NA | 6.44, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Europe | | |
| Subjects with exacerbation - n / N1 (%) | 1 / 2 (50.0) | 2 / 7 (28.6) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 0.46, NA | 0.95, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| North America | | |
| Subjects with exacerbation - n / N1 (%) | 1 / 2 (50.0) | 0 / 2 (0.0) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 2.69, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Rest of the world | | |
| Subjects with exacerbation - n / N1 (%) | 3 / 5 (60.0) | 0 / 1 (0.0) |
| Median time to first exacerbation (months) ^b | 4.11 | NA |
| 95% CI ^b | 0.49, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by region interaction p-value ^a | | NA |
| Region | | |
| EU | | |
| Subjects with exacerbation - n / N1 (%) | 1 / 2 (50.0) | 2 / 7 (28.6) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 0.46, NA | 0.95, NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

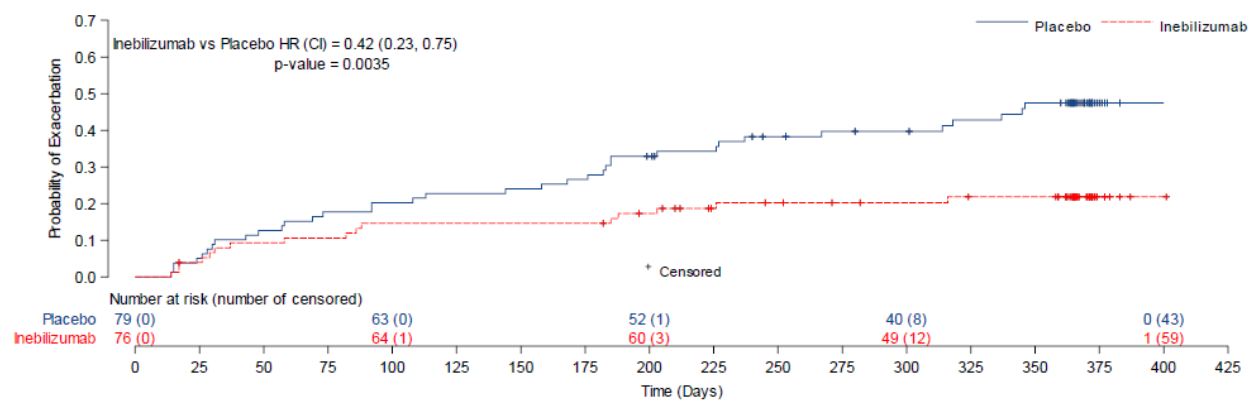
| Subgroup | Placebo | Inebilizumab |
|---|----------------|---------------|
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Non-EU | | |
| Subjects with exacerbation - n / N1 (%) | 10 / 22 (45.5) | 1 / 17 (5.9) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 2.79, NA | 6.44, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by region interaction p-value ^a | NA | |
| Region | | |
| Japan | | |
| Subjects with exacerbation - n / N1 (%) | 1 / 2 (50.0) | 0 / 2 (0.0) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 2.79, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Non-Japan | | |
| Subjects with exacerbation - n / N1 (%) | 10 / 22 (45.5) | 3 / 22 (13.6) |
| Median time to first exacerbation (months) ^b | NA | NA |
| 95% CI ^b | 2.69, NA | 6.44, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects in each subgroup level. CI = Confidence interval.</p> <p>To convert days to months: 1 month = 30.4375 days. An exacerbation is defined as Use of protocol defined rescue therapy, or Myasthenic crisis or Significant symptomatic worsening.</p> <p>^aBased on Cox regression method, with common covariates of treatment group, baseline steroid use status (daily prednisone dose ≤ 5 mg vs daily prednisone dose > 5 mg), baseline QMG score (QMG ≤ 15 vs QMG ≥ 16), baseline MG-ADL score, subgroup variable, and treatment × subgroup variable.</p> <p>^bBased on Kaplan-Meier method.</p> | | |

| Subgroup | Placebo | Inebilizumab |
|--|---------|--------------|
| *Based on Cox regression method, with common covariates of treatment group, baseline steroid use status (daily prednisone dose \leq 5 mg vs daily prednisone dose $>$ 5 mg), baseline QMG score (QMG \leq 15 vs QMG \geq 16), and baseline MG-ADL score. | | |

1.5.3 Kaplan-Meier-Kurven: Zeit bis zur ersten Exazerbation (Treatment-policy Strategie)

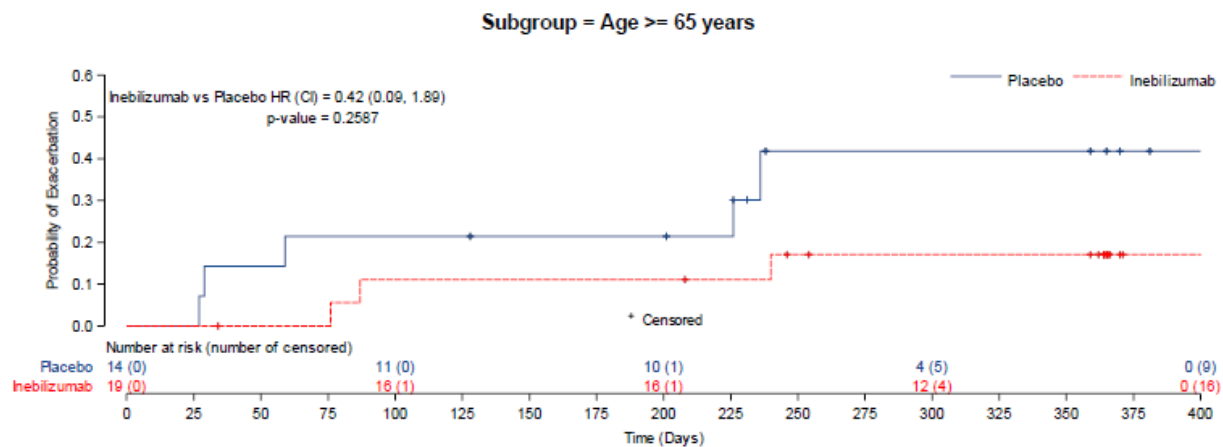
Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

Subgroup = Age ≥ 18 - < 65 years



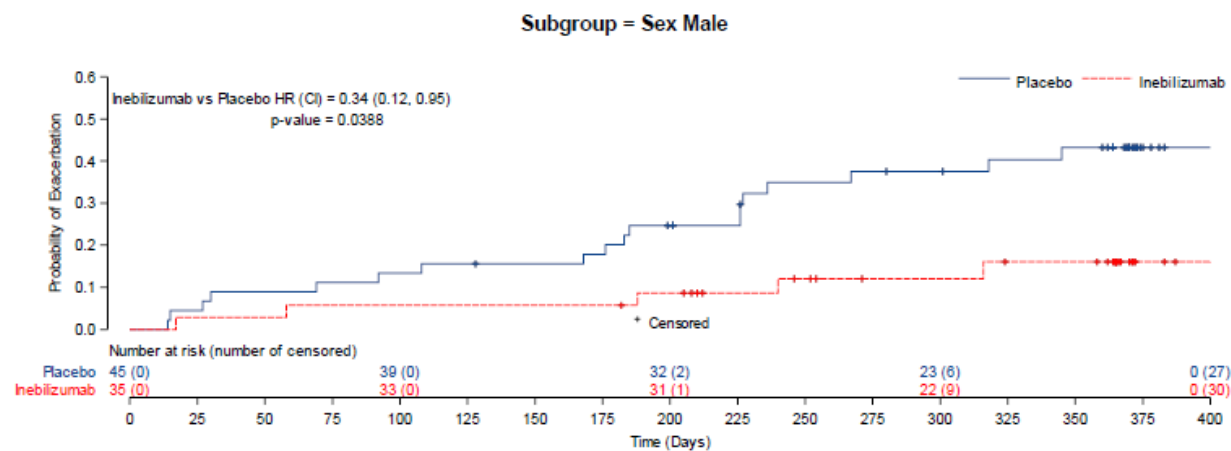
Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



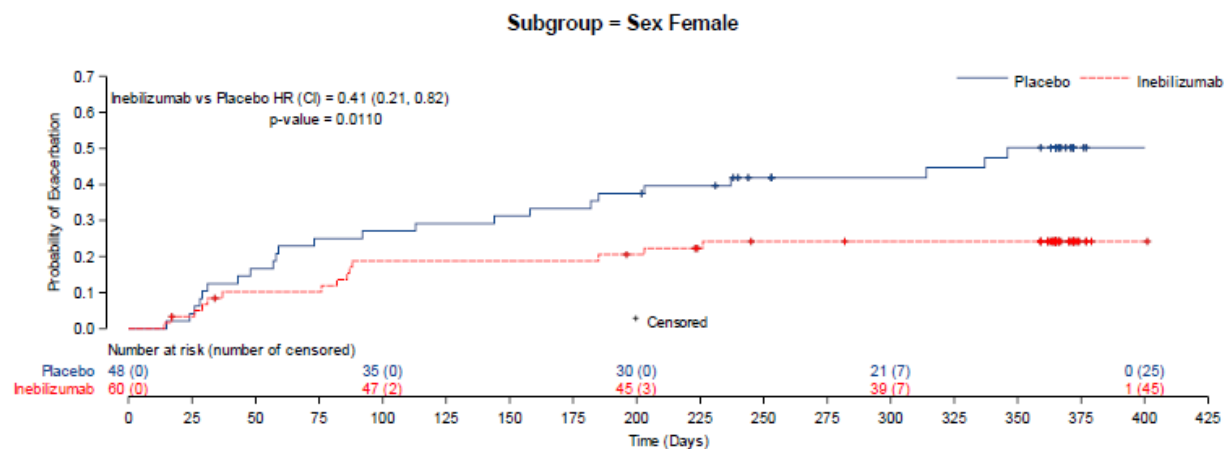
Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

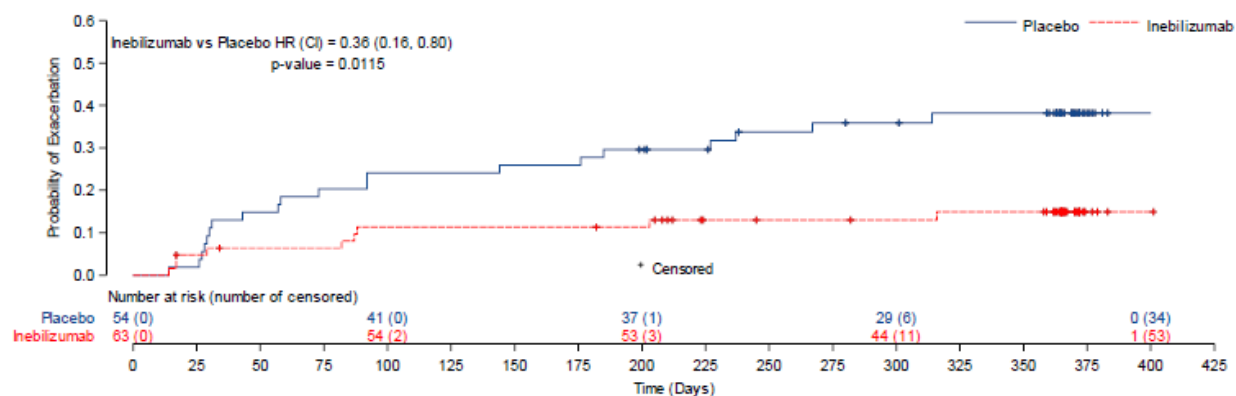
Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

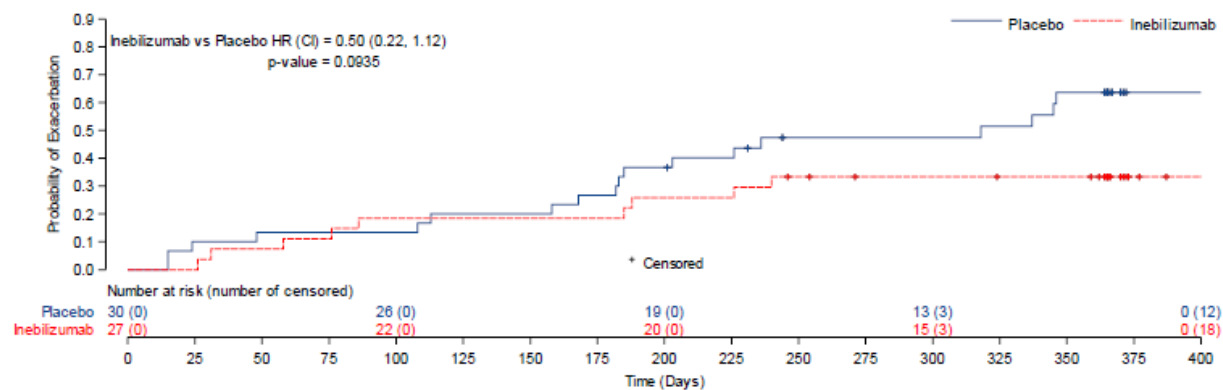
Subgroup = Baseline steroid use Prednisone <= 20 mg/day



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

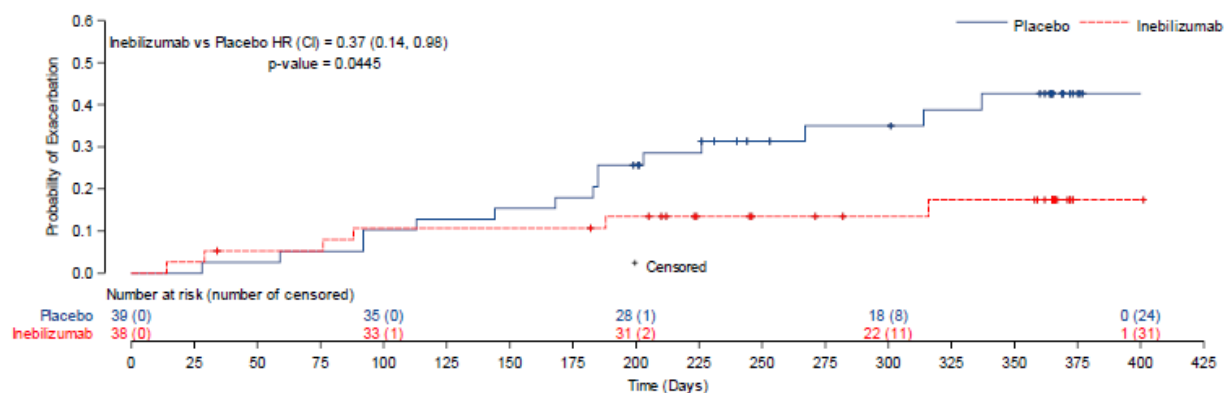
Subgroup = Baseline steroid use Prednisone > 20 mg/day



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

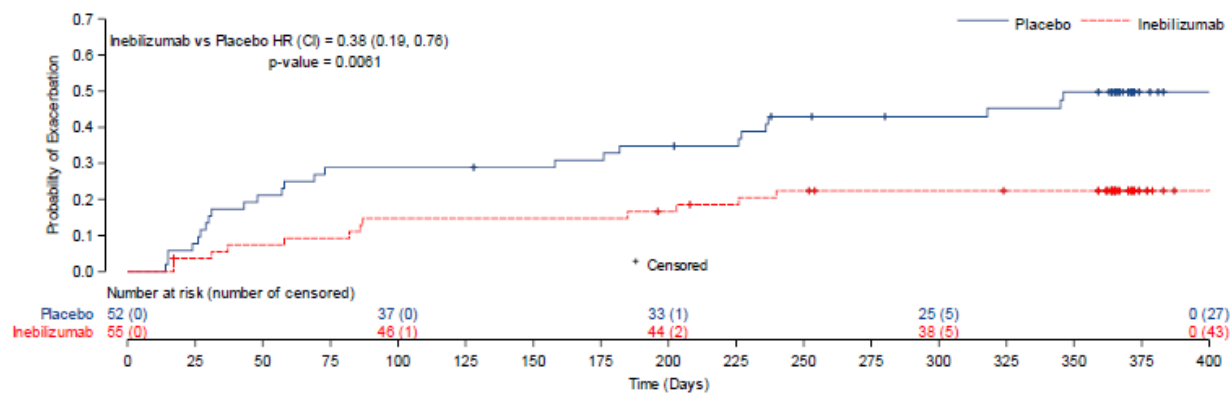
Subgroup = Baseline QMG QMG <= 15



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

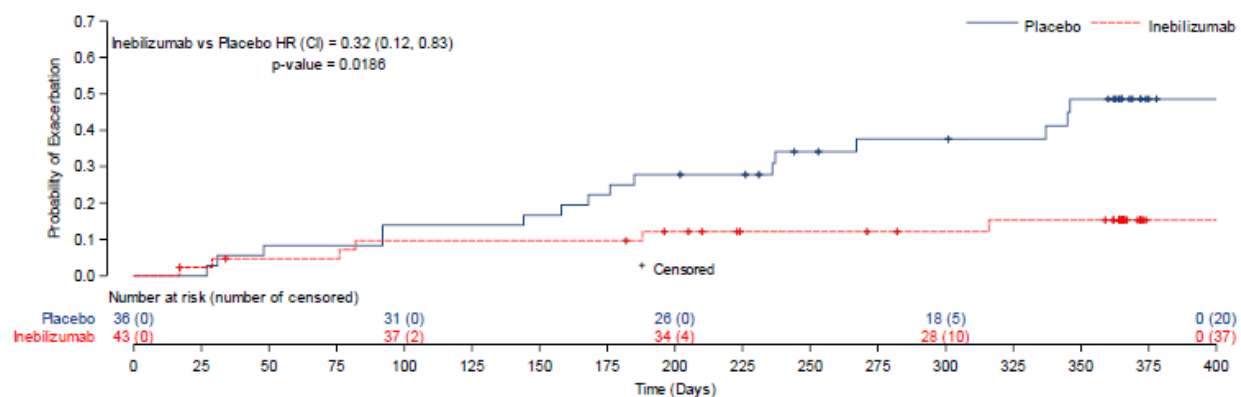
Subgroup = Baseline QMG QMG >= 16



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

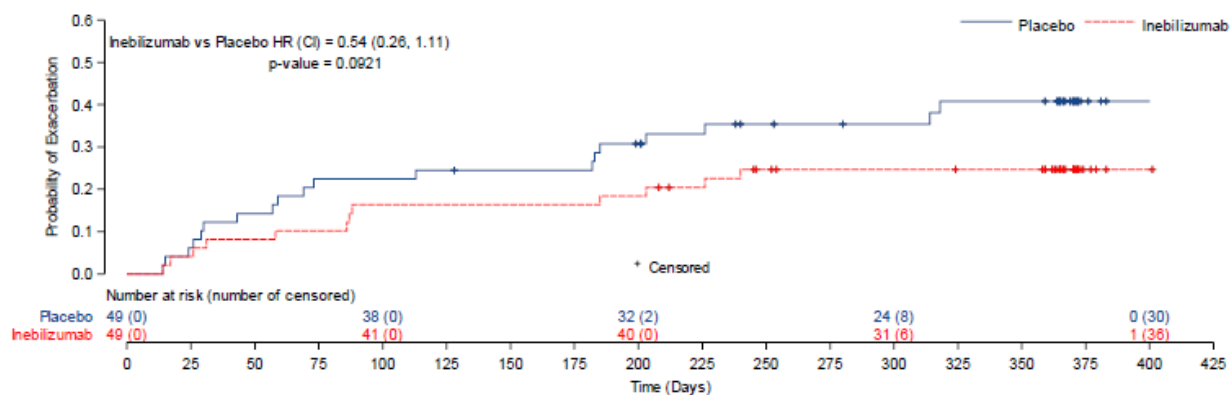
Subgroup = Baseline MGFA class II



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

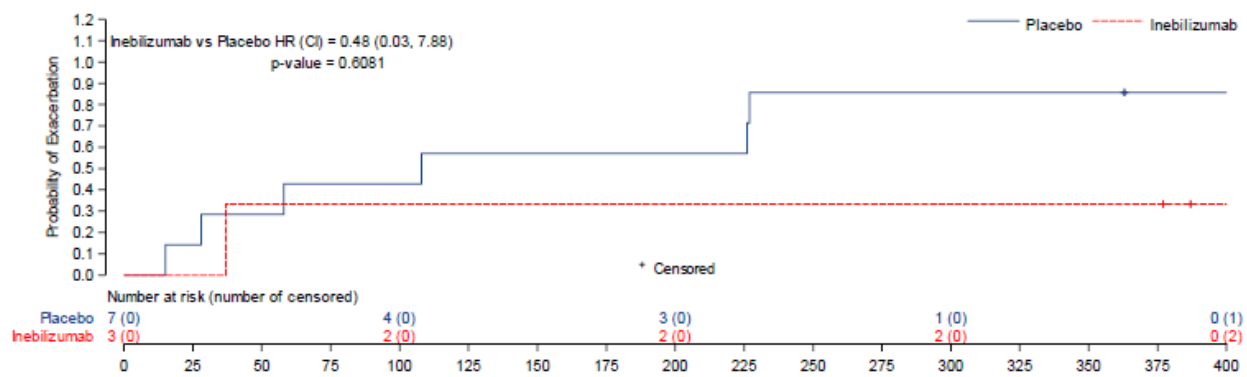
Subgroup = Baseline MGFA class III



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

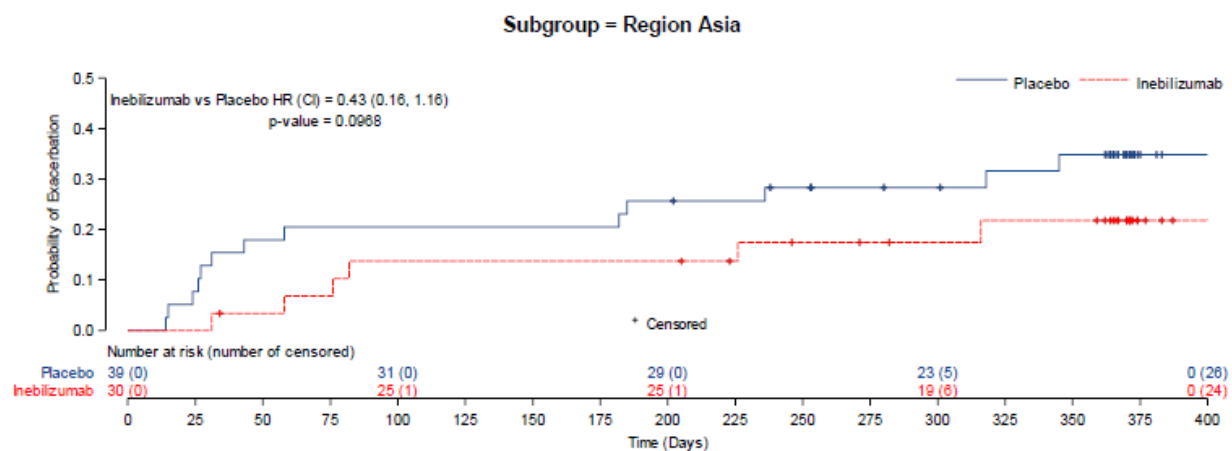
Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

Subgroup = Baseline MGFA class IV



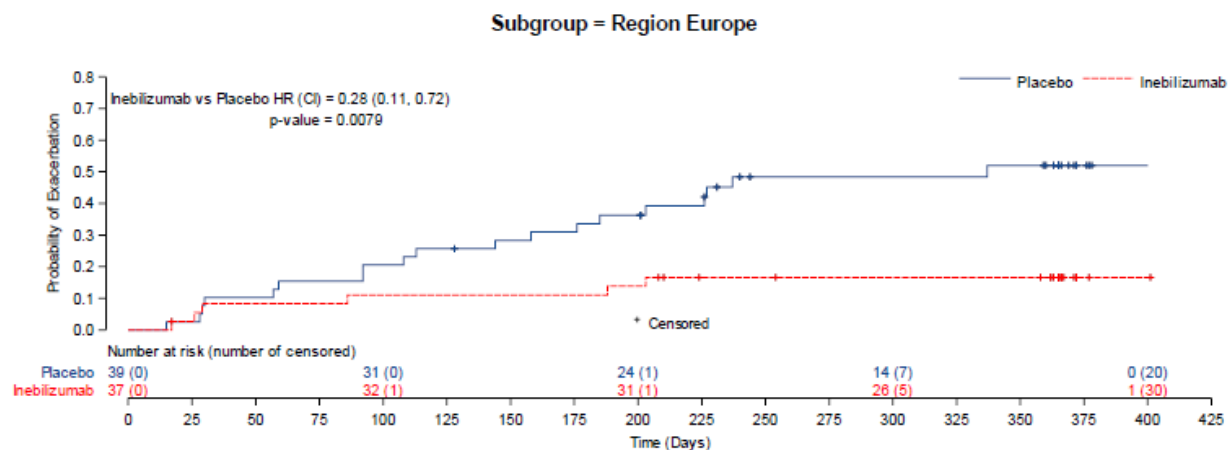
Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

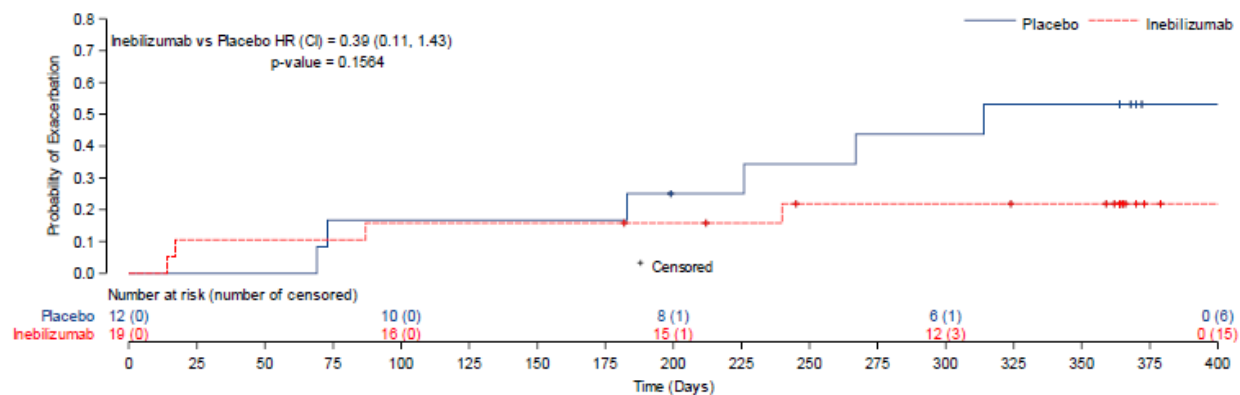
Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

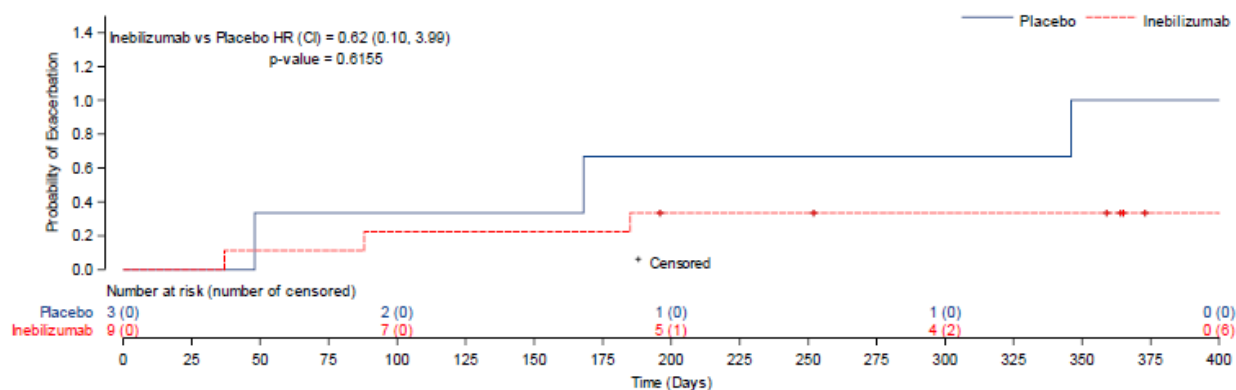
Subgroup = Region North America



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

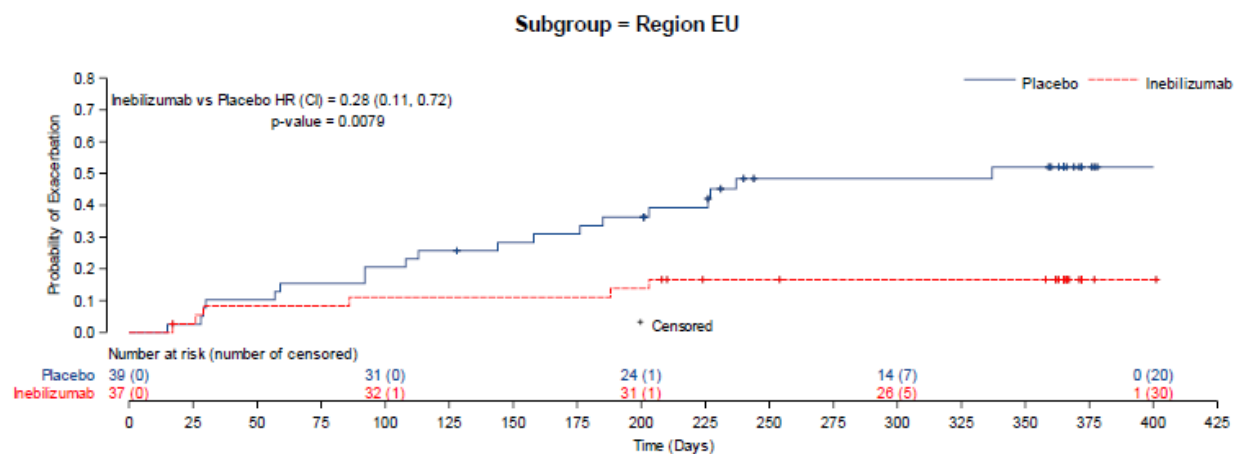
Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

Subgroup = Region Rest of the world



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

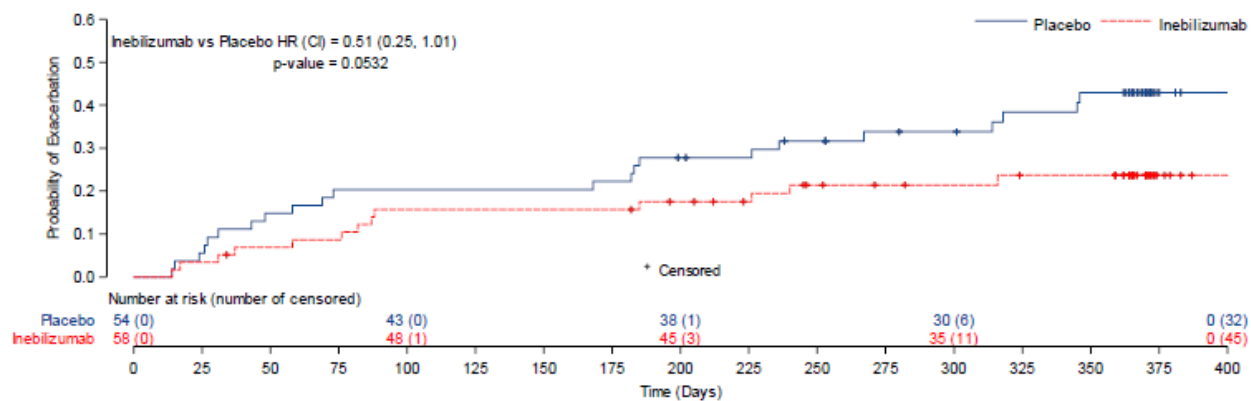
Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

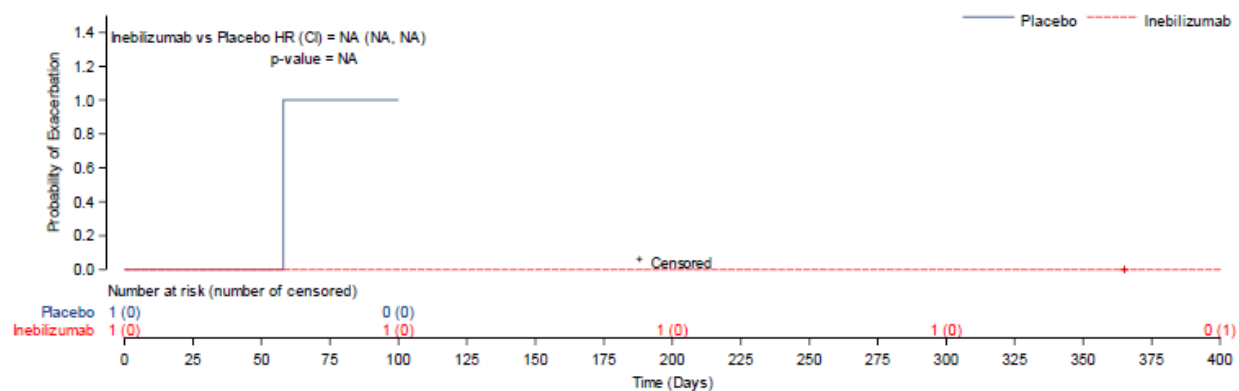
Subgroup = Region Non-EU



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

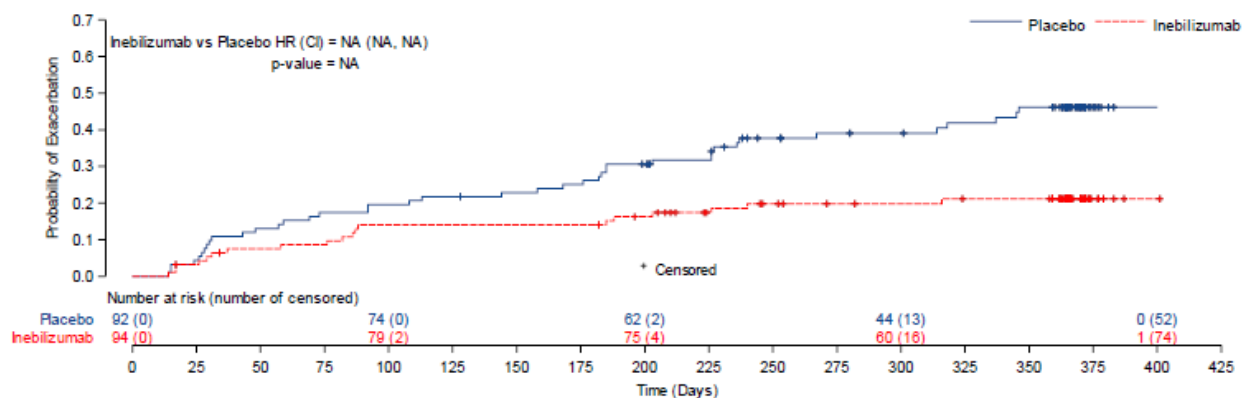
Subgroup = Region Japan



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

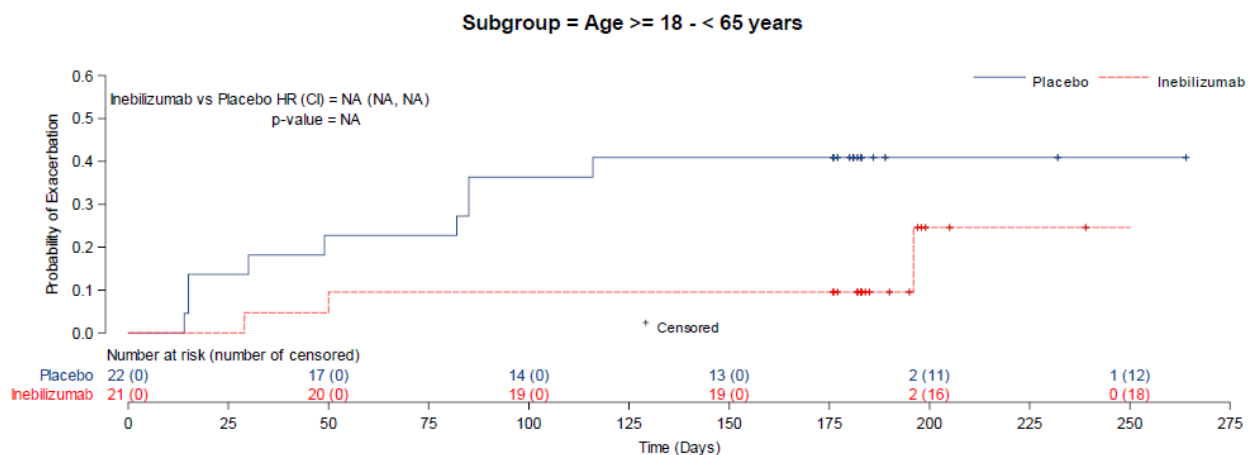
Figure 14-2.7.3.1.584. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

Subgroup = Region Non-Japan



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

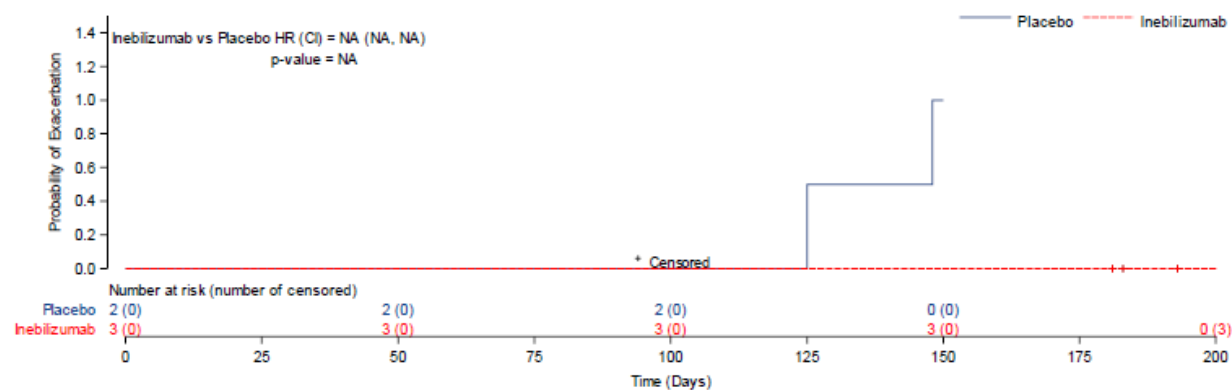
Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

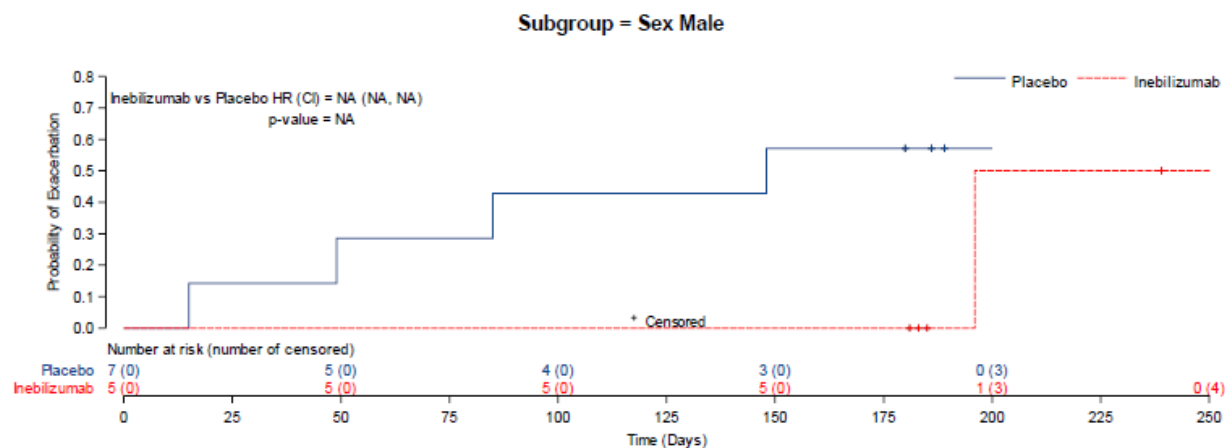
Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

Subgroup = Age >= 65 years



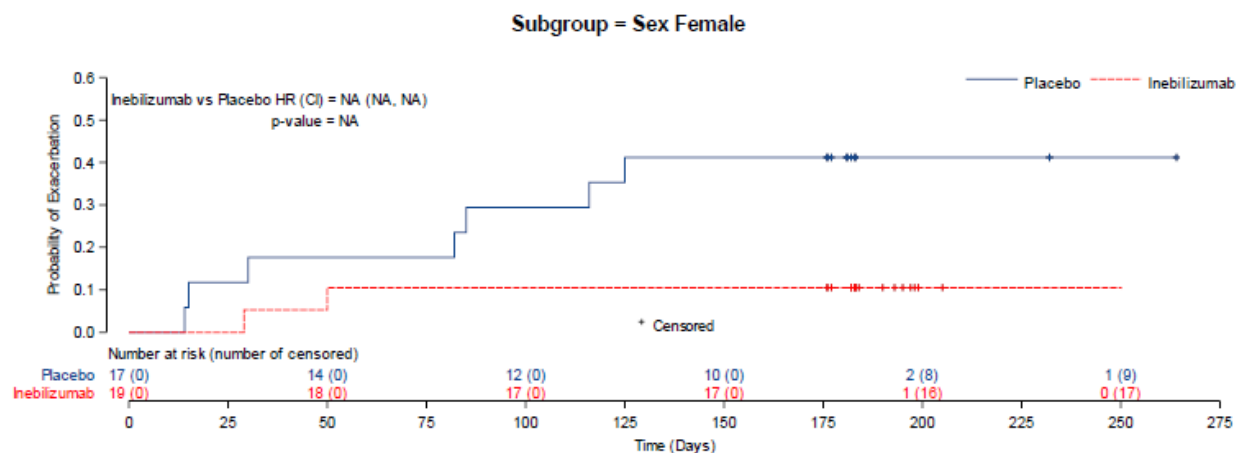
Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

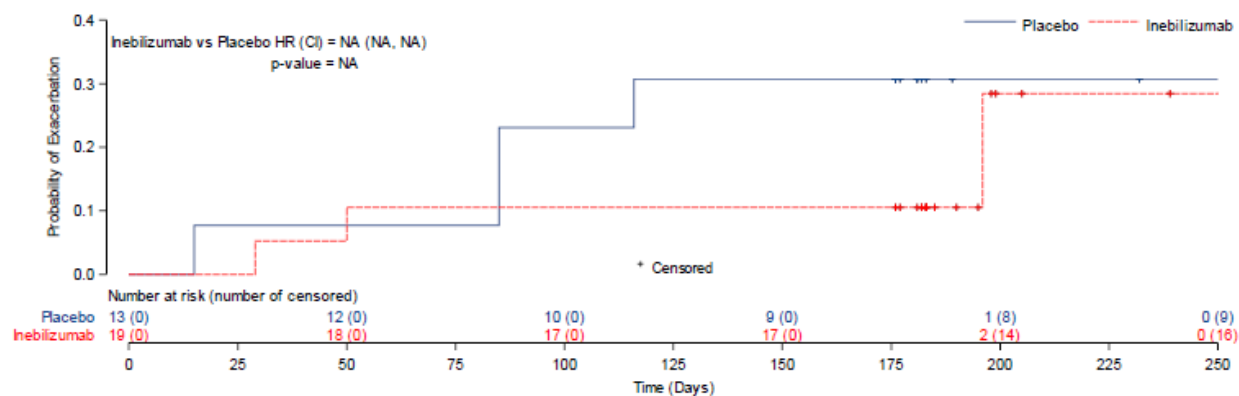
Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

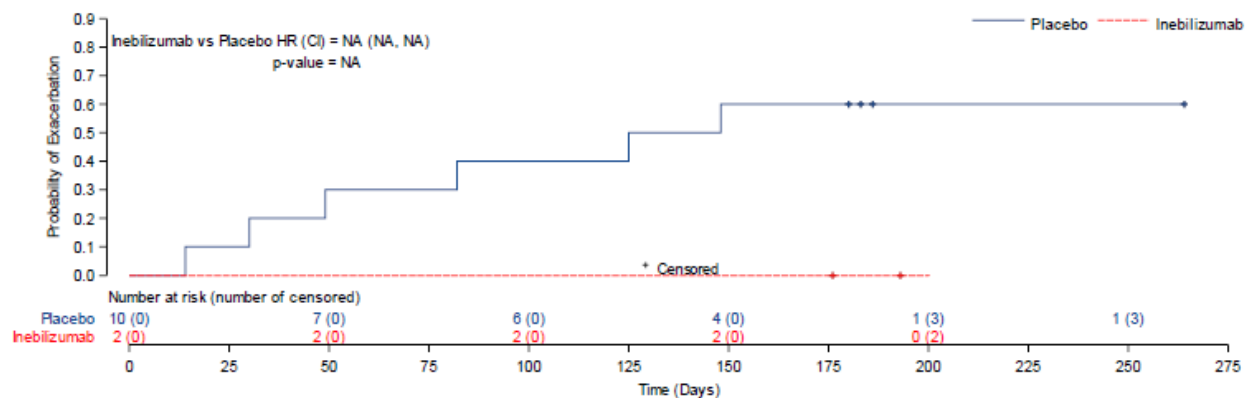
Subgroup = Baseline steroid use Prednisone <= 20 mg/day



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

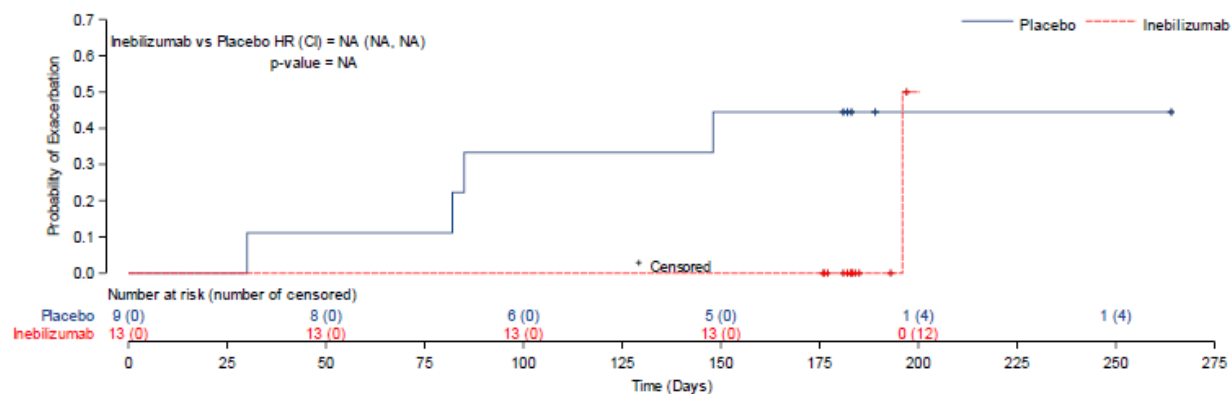
Subgroup = Baseline steroid use Prednisone > 20 mg/day



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

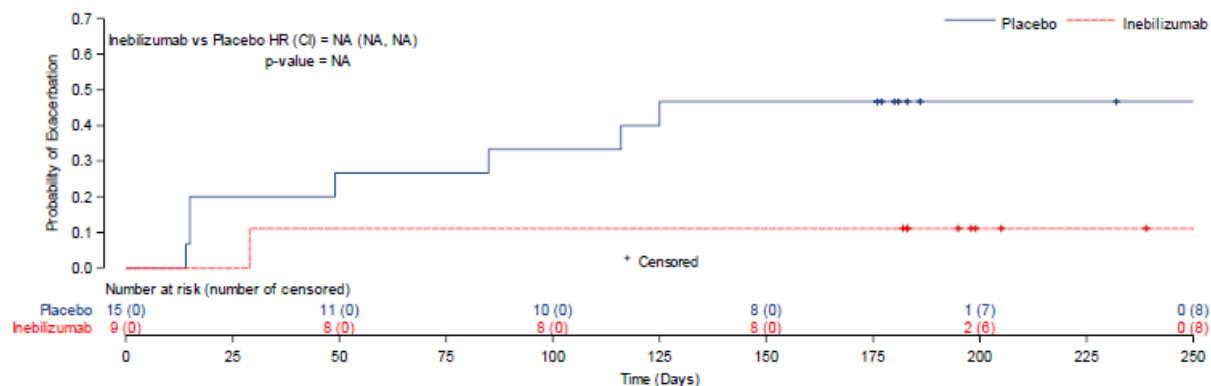
Subgroup = Baseline QMG QMG <= 15



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

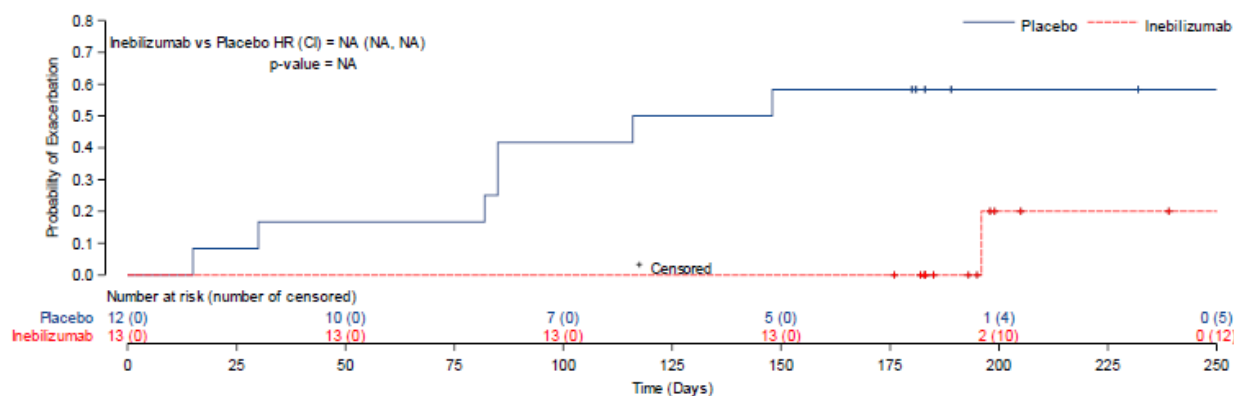
Subgroup = Baseline QMG QMG >= 16



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

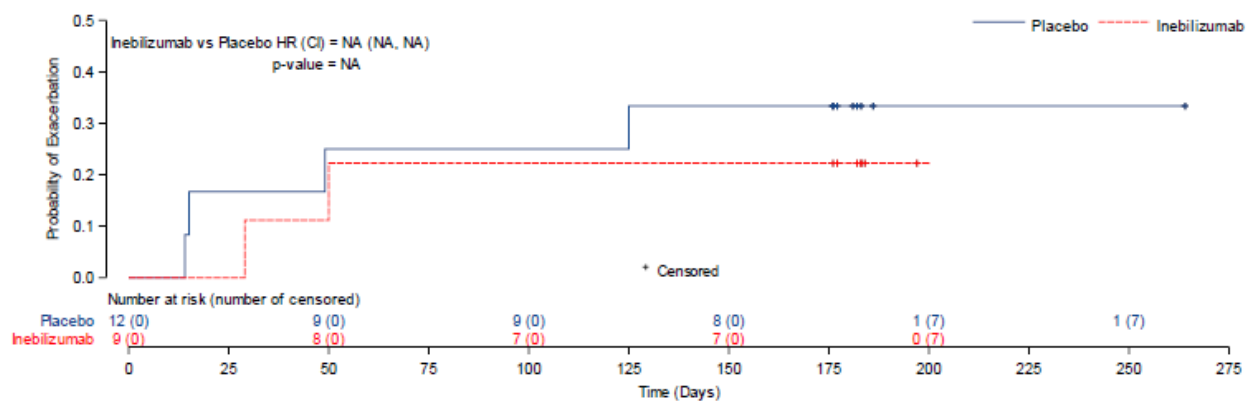
Subgroup = Baseline MGFA class II



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

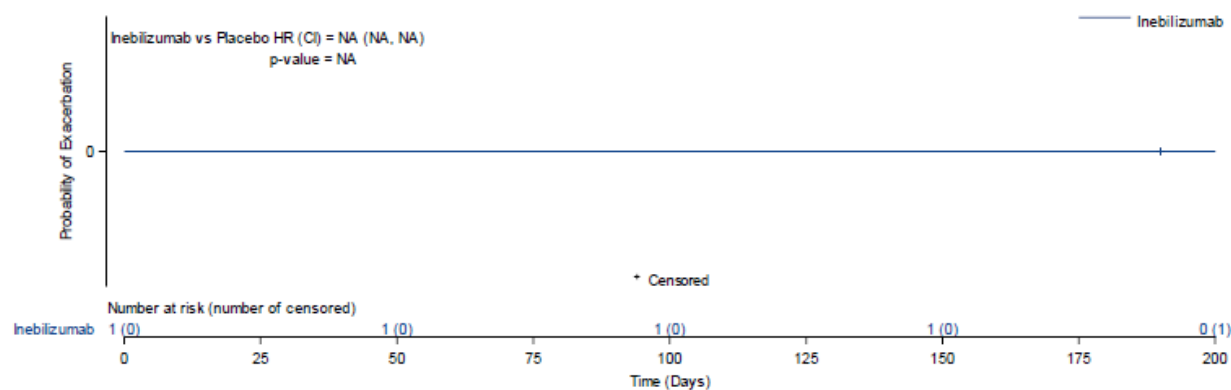
Subgroup = Baseline MGFA class III



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

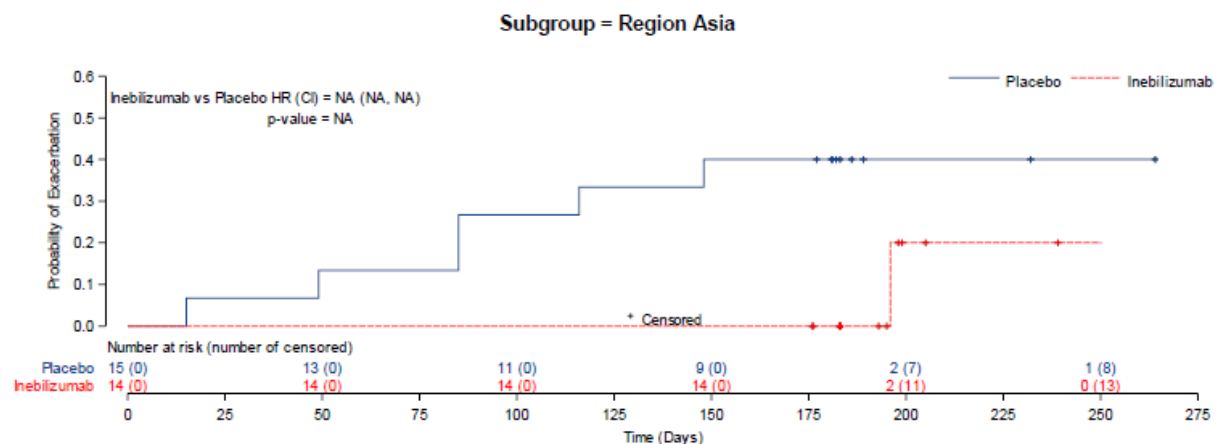
Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

Subgroup = Baseline MGFA class IV



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

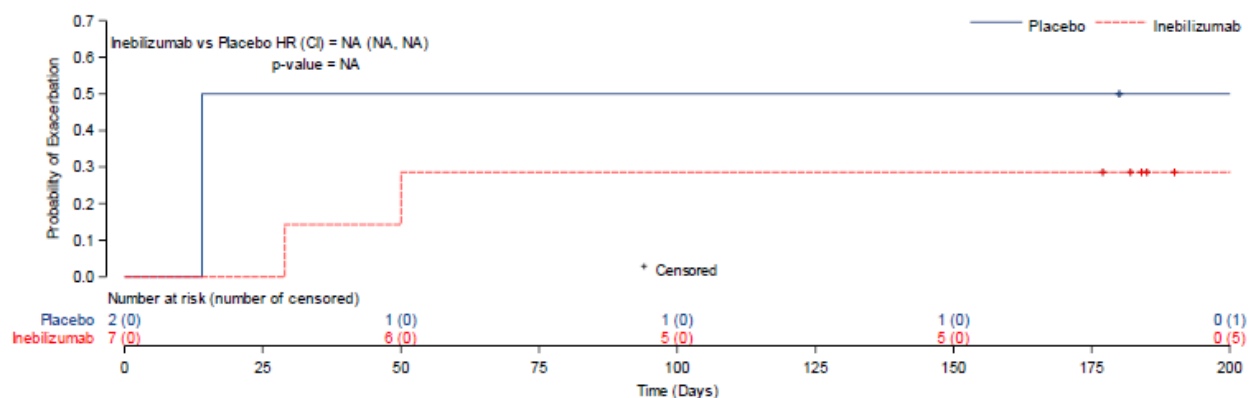
Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

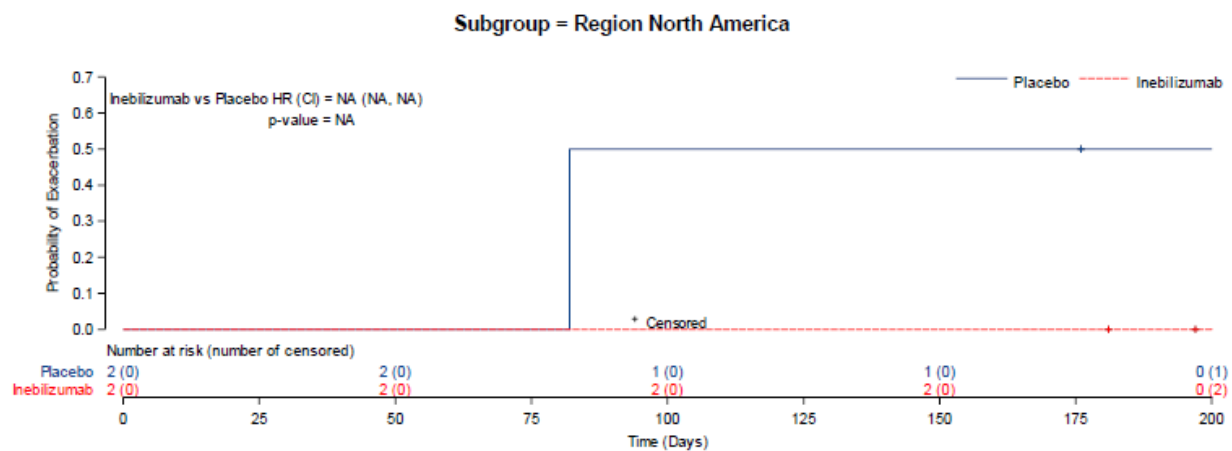
Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

Subgroup = Region Europe



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

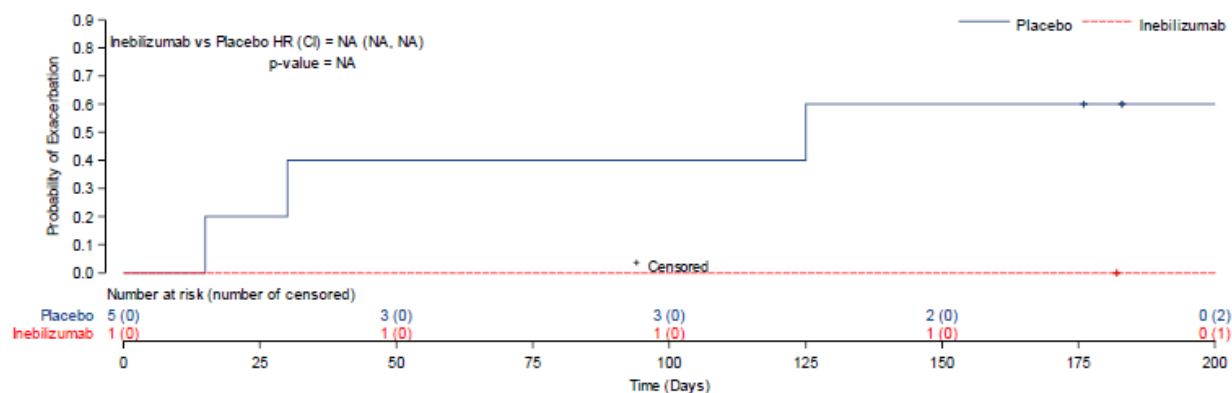
Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

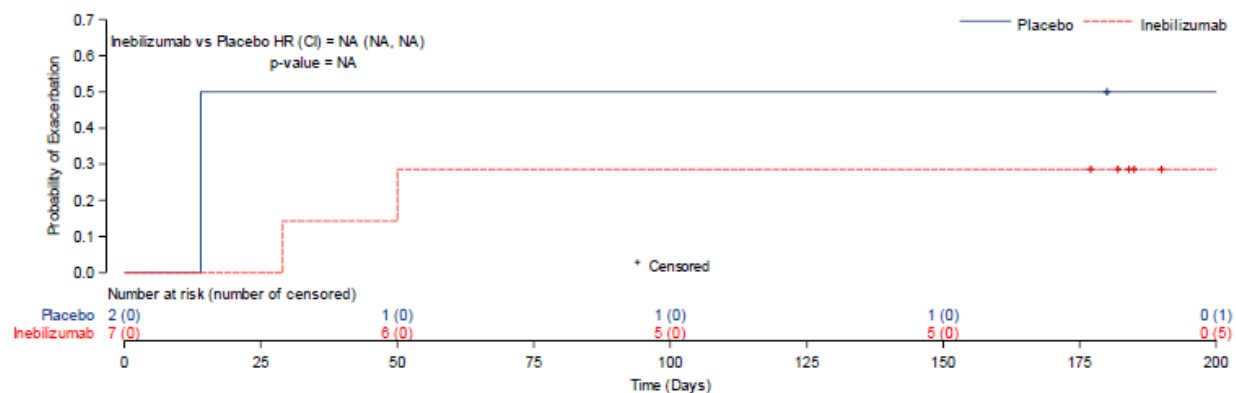
Subgroup = Region Rest of the world



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

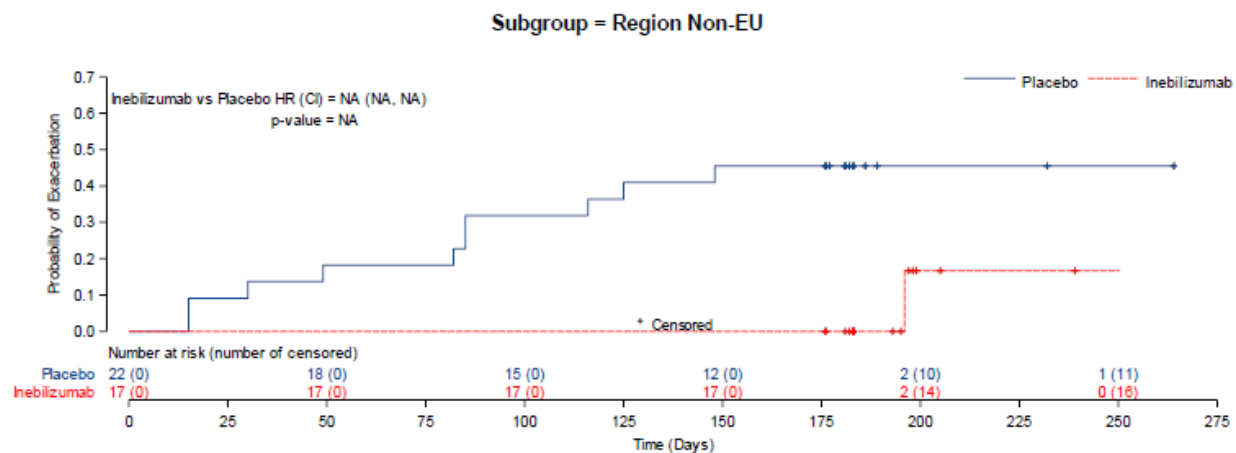
Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

Subgroup = Region EU



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

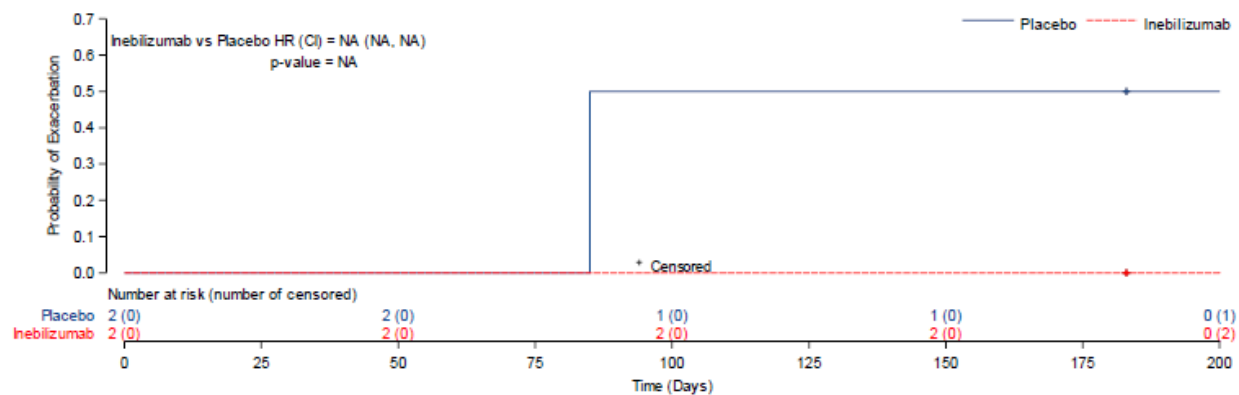
Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

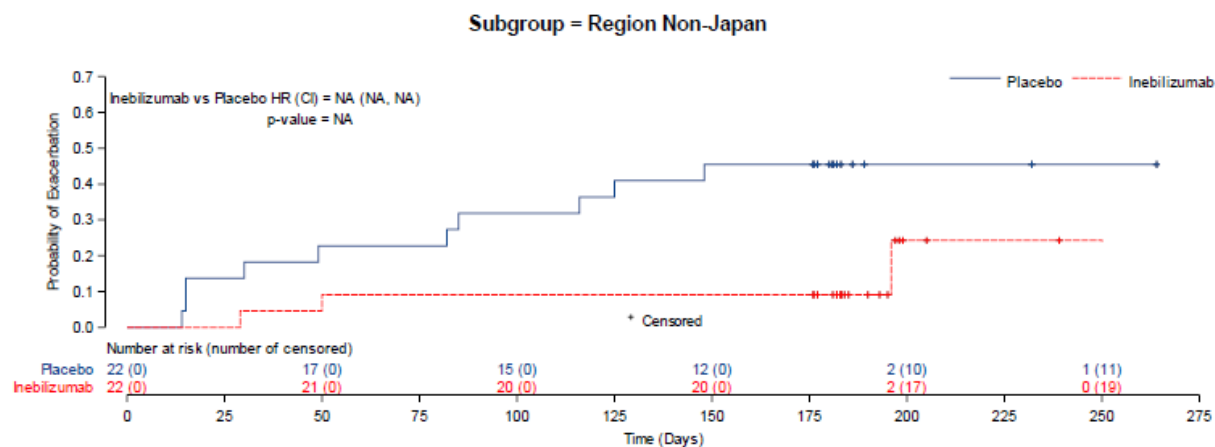
Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

Subgroup = Region Japan



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.1.583. Subgroup Analysis: Kaplan Meier Plot for Time to First MG Exacerbation Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.5.4 Jährliche Exazerbationsrate (Treatment-policy Strategie)

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| AChR+ Population (Week 52) | | |
| Treatment by age interaction p-value ^a | | 0.1970 |
| Age | | |
| >= 18 - < 65 years - N1 | 79 | 76 |
| Annualized exacerbation rate ^b | 1.12 | 0.35 |
| Rate ratio ^b | 0.31 | |
| 95% CI ^b | 0.17, 0.58 | |
| p-value ^b | 0.0003 | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.28 | 0.39 |
| SD | 1.98 | 0.96 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.99 | 0.00, 0.00 |
| Min, Max | 0.0, 8.2 | 0.0, 4.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 76 | 24 |
| Total person years | 71.86 | 70.05 |
| Rate | 1.06 | 0.34 |
| Subject with exacerbation | | |
| n | 36 | 16 |
| Number of exacerbations | | |
| Mean | 2.11 | 1.50 |
| SD | 1.28 | 0.89 |
| Median | 2.00 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 2.00 |
| Min, Max | 1.0, 5.0 | 1.0, 4.0 |
| >= 65 years - N1 | 14 | 19 |
| Annualized exacerbation rate ^b | 0.21 | 0.18 |
| Rate ratio ^b | 0.86 | |
| 95% CI ^b | 0.19, 3.88 | |
| p-value ^b | 0.8391 | |
| Annualized exacerbation rate per subject | | |
| Mean | 0.60 | 0.46 |
| SD | 0.99 | 1.38 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 0.98 | 0.00, 0.00 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| Min, Max | 0.0, 3.2 | 0.0, 5.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 9 | 9 |
| Total person years | 11.93 | 17.06 |
| Rate | 0.75 | 0.53 |
| Subject with exacerbation | | |
| n | 5 | 3 |
| Number of exacerbations | | |
| Mean | 1.80 | 3.00 |
| SD | 1.30 | 2.65 |
| Median | 1.00 | 2.00 |
| Q1, Q3 | 1.00, 2.00 | 1.00, 6.00 |
| Min, Max | 1.0, 4.0 | 1.0, 6.0 |
| Treatment by sex interaction p-value ^a | | 0.8305 |
| Sex | | |
| Male - N1 | 45 | 35 |
| Annualized exacerbation rate ^b | 0.82 | 0.25 |
| Rate ratio ^b | 0.31 | |
| 95% CI ^b | 0.11, 0.88 | |
| p-value ^b | 0.0273 | |
| Annualized exacerbation rate per subject | | |
| Mean | 0.97 | 0.35 |
| SD | 1.64 | 1.03 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.01 | 0.00, 0.00 |
| Min, Max | 0.0, 7.4 | 0.0, 4.4 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 39 | 9 |
| Total person years | 41.52 | 30.90 |
| Rate | 0.94 | 0.29 |
| Subject with exacerbation | | |
| n | 18 | 5 |
| Number of exacerbations | | |
| Mean | 2.17 | 1.80 |
| SD | 1.38 | 1.30 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|------------|--------------|
| Median | 1.50 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 2.00 |
| Min, Max | 1.0, 5.0 | 1.0, 4.0 |
| Female - N1 | 48 | 60 |
| Annualized exacerbation rate ^b | 1.04 | 0.39 |
| Rate ratio ^b | 0.37 | |
| 95% CI ^b | 0.18, 0.76 | |
| p-value ^b | 0.0066 | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.37 | 0.43 |
| SD | 2.08 | 1.07 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.00 | 0.00, 0.00 |
| Min, Max | 0.0, 8.2 | 0.0, 5.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 46 | 24 |
| Total person years | 42.27 | 56.21 |
| Rate | 1.09 | 0.43 |
| Subject with exacerbation | | |
| n | 23 | 14 |
| Number of exacerbations | | |
| Mean | 2.00 | 1.71 |
| SD | 1.21 | 1.38 |
| Median | 2.00 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 2.00 |
| Min, Max | 1.0, 5.0 | 1.0, 6.0 |
| Treatment by baseline steroid use interaction p-value ^a | | 0.9817 |
| Baseline steroid use | | |
| Prednisone <= 20 mg/day - N1 | 54 | 63 |
| Annualized exacerbation rate ^b | 1.03 | 0.37 |
| Rate ratio ^b | 0.36 | |
| 95% CI ^b | 0.15, 0.88 | |
| p-value ^b | 0.0244 | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.13 | 0.34 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| SD | 1.84 | 1.09 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.00 | 0.00, 0.00 |
| Min, Max | 0.0, 8.0 | 0.0, 5.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 48 | 20 |
| Total person years | 49.71 | 57.70 |
| Rate | 0.97 | 0.35 |
| Subject with exacerbation | | |
| n | 20 | 9 |
| Number of exacerbations | | |
| Mean | 2.40 | 2.22 |
| SD | 1.23 | 1.79 |
| Median | 2.00 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 3.00 |
| Min, Max | 1.0, 5.0 | 1.0, 6.0 |
| Prednisone > 20 mg/day - N1 | | |
| Annualized exacerbation rate ^b | 0.00 | 0.00 |
| Rate ratio ^b | 0.40 | |
| 95% CI ^b | 0.19, 0.85 | |
| p-value ^b | 0.0177 | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.31 | 0.54 |
| SD | 1.83 | 1.00 |
| Median | 0.98 | 0.00 |
| Q1, Q3 | 0.00, 1.82 | 0.00, 1.00 |
| Min, Max | 0.0, 8.2 | 0.0, 4.4 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 31 | 11 |
| Total person years | 27.08 | 25.21 |
| Rate | 1.14 | 0.44 |
| Subject with exacerbation | | |
| n | 18 | 9 |
| Number of exacerbations | | |
| Mean | 1.72 | 1.22 |
| SD | 1.23 | 0.44 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|------------|--------------|
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 2.00 | 1.00, 1.00 |
| Min, Max | 1.0, 5.0 | 1.0, 2.0 |
| Treatment by baseline QMG interaction p-value ^a | | 0.7909 |
| Baseline QMG | | |
| QMG ≤ 15 - N1 | 39 | 38 |
| Annualized exacerbation rate ^b | 0.77 | 0.27 |
| Rate ratio ^b | 0.35 | |
| 95% CI ^b | 0.13, 0.92 | |
| p-value ^b | 0.0338 | |
| Annualized exacerbation rate per subject | | |
| Mean | 0.78 | 0.29 |
| SD | 1.31 | 0.88 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.00 | 0.00, 0.00 |
| Min, Max | 0.0, 5.5 | 0.0, 4.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 24 | 9 |
| Total person years | 34.14 | 33.17 |
| Rate | 0.70 | 0.27 |
| Subject with exacerbation | | |
| n | 15 | 6 |
| Number of exacerbations | | |
| Mean | 1.60 | 1.50 |
| SD | 0.99 | 0.84 |
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 2.00 | 1.00, 2.00 |
| Min, Max | 1.0, 4.0 | 1.0, 3.0 |
| QMG ≥ 16 - N1 | 52 | 55 |
| Annualized exacerbation rate ^b | 1.21 | 0.40 |
| Rate ratio ^b | 0.33 | |
| 95% CI ^b | 0.16, 0.70 | |
| p-value ^b | 0.0037 | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.50 | 0.48 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| SD | 2.20 | 1.17 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.47 | 0.00, 0.00 |
| Min, Max | 0.0, 8.2 | 0.0, 5.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 60 | 23 |
| Total person years | 47.64 | 51.93 |
| Rate | 1.26 | 0.44 |
| Subject with exacerbation | | |
| n | 25 | 12 |
| Number of exacerbations | | |
| Mean | 2.40 | 1.92 |
| SD | 1.35 | 1.56 |
| Median | 2.00 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 2.00 |
| Min, Max | 1.0, 5.0 | 1.0, 6.0 |
| Mean | 2.40 | 1.92 |
| Treatment by baseline MGFA class interaction p-value ^a | | 0.5369 |
| Baseline MGFA class | | |
| II - N1 | 36 | 43 |
| Annualized exacerbation rate ^b | 0.76 | 0.20 |
| Rate ratio ^b | 0.27 | |
| 95% CI ^b | 0.10, 0.67 | |
| p-value ^b | 0.0051 | |
| Annualized exacerbation rate per subject | | |
| Mean | 0.90 | 0.23 |
| SD | 1.31 | 0.79 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.15 | 0.00, 0.00 |
| Min, Max | 0.0, 5.0 | 0.0, 4.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 32 | 8 |
| Total person years | 33.75 | 37.80 |
| Rate | 0.95 | 0.21 |
| Subject with exacerbation | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| n | 16 | 6 |
| Number of exacerbations | | |
| Mean | 2.00 | 1.33 |
| SD | 1.37 | 0.82 |
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 1.00 |
| Min, Max | 1.0, 5.0 | 1.0, 3.0 |
| III - N1 | 49 | 49 |
| Annualized exacerbation rate ^b | 0.76 | 0.36 |
| Rate ratio ^b | 0.48 | |
| 95% CI ^b | 0.20, 1.12 | |
| p-value ^b | 0.0905 | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.14 | 0.54 |
| SD | 1.97 | 1.23 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.00 | 0.00, 0.00 |
| Min, Max | 0.0, 8.2 | 0.0, 5.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 41 | 23 |
| Total person years | 43.34 | 46.22 |
| Rate | 0.95 | 0.50 |
| Subject with exacerbation | | |
| n | 19 | 12 |
| Number of exacerbations | | |
| Mean | 2.16 | 1.92 |
| SD | 1.34 | 1.56 |
| Median | 2.00 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 2.00 |
| Min, Max | 1.0, 5.0 | 1.0, 6.0 |
| IV - N1 | 7 | 3 |
| Annualized exacerbation rate ^b | 3.55 | 0.56 |
| Rate ratio ^b | 0.16 | |
| 95% CI ^b | 0.01, 3.42 | |
| p-value ^b | 0.2388 | |
| Annualized exacerbation rate per subject | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|------------|--------------|
| Mean | 3.06 | 0.67 |
| SD | 2.85 | 1.16 |
| Median | 2.95 | 0.00 |
| Q1, Q3 | 0.98, 5.49 | 0.00, 2.00 |
| Min, Max | 0.0, 8.0 | 0.0, 2.0 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 12 | 2 |
| Total person years | 5.66 | 3.09 |
| Rate | 2.12 | 0.65 |
| Subject with exacerbation | | |
| n | 6 | 1 |
| Number of exacerbations | | |
| Mean | 2.00 | 2.00 |
| SD | 0.89 | NA |
| Median | 2.00 | 2.00 |
| Q1, Q3 | 1.00, 3.00 | 2.00, 2.00 |
| Min, Max | 1.0, 3.0 | 2.0, 2.0 |
| Treatment by region interaction p-value ^a | | 0.6580 |
| Region | | |
| Asia - N1 | 39 | 30 |
| Annualized exacerbation rate ^b | 0.44 | 0.11 |
| Rate ratio ^b | 0.26 | |
| 95% CI ^b | 0.08, 0.79 | |
| p-value ^b | 0.0175 | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.09 | 0.32 |
| SD | 2.09 | 0.87 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.26 | 0.00, 0.00 |
| Min, Max | 0.0, 8.2 | 0.0, 4.4 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 31 | 6 |
| Total person years | 35.98 | 26.77 |
| Rate | 0.86 | 0.22 |
| Subject with exacerbation | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| n | 13 | 6 |
| Number of exacerbations | | |
| Mean | 2.38 | 1.00 |
| SD | 1.19 | 0.00 |
| Median | 2.00 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 1.00 |
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| Europe - N1 | 39 | 37 |
| Annualized exacerbation rate ^b | 1.31 | 0.30 |
| Rate ratio ^b | 0.23 | |
| 95% CI ^b | 0.09, 0.55 | |
| p-value ^b | 0.0011 | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.21 | 0.29 |
| SD | 1.63 | 0.89 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.00 | 0.00, 0.00 |
| Min, Max | 0.0, 5.5 | 0.0, 4.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 42 | 9 |
| Total person years | 34.95 | 34.37 |
| Rate | 1.20 | 0.26 |
| Subject with exacerbation | | |
| n | 19 | 6 |
| Number of exacerbations | | |
| Mean | 2.21 | 1.50 |
| SD | 1.36 | 0.84 |
| Median | 2.00 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 2.00 |
| Min, Max | 1.0, 5.0 | 1.0, 3.0 |
| North America - N1 | 12 | 19 |
| Annualized exacerbation rate ^b | 1.09 | 0.34 |
| Rate ratio ^b | 0.31 | |
| 95% CI ^b | 0.04, 2.27 | |
| p-value ^b | 0.2507 | |
| Annualized exacerbation rate per subject | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| Mean | 1.29 | 0.67 |
| SD | 2.26 | 1.58 |
| Median | 0.48 | 0.00 |
| Q1, Q3 | 0.00, 1.00 | 0.00, 0.00 |
| Min, Max | 0.0, 7.4 | 0.0, 5.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 9 | 13 |
| Total person years | 10.41 | 17.72 |
| Rate | 0.86 | 0.73 |
| Subject with exacerbation | | |
| n | 6 | 4 |
| Number of exacerbations | | |
| Mean | 1.50 | 3.25 |
| SD | 1.22 | 2.22 |
| Median | 1.00 | 3.00 |
| Q1, Q3 | 1.00, 1.00 | 1.50, 5.00 |
| Min, Max | 1.0, 4.0 | 1.0, 6.0 |
| Rest of the world - N1 | 3 | 9 |
| Annualized exacerbation rate ^b | 0.80 | 0.66 |
| Rate ratio ^b | 0.82 | |
| 95% CI ^b | 0.16, 4.21 | |
| p-value ^b | 0.8139 | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.39 | 0.55 |
| SD | 0.66 | 0.88 |
| Median | 1.03 | 0.00 |
| Q1, Q3 | 0.99, 2.15 | 0.00, 0.98 |
| Min, Max | 1.0, 2.1 | 0.0, 2.0 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 3 | 5 |
| Total person years | 2.44 | 8.25 |
| Rate | 1.23 | 0.61 |
| Subject with exacerbation | | |
| n | 3 | 3 |
| Number of exacerbations | | |
| Mean | 1.00 | 1.67 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|------------|--------------|
| SD | 0.00 | 0.58 |
| Median | 1.00 | 2.00 |
| Q1, Q3 | 1.00, 1.00 | 1.00, 2.00 |
| Min, Max | 1.0, 1.0 | 1.0, 2.0 |
| Treatment by region interaction p-value ^a | | 0.2096 |
| Region | | |
| EU - N1 | 39 | 37 |
| Annualized exacerbation rate ^b | 1.31 | 0.30 |
| Rate ratio ^b | 0.23 | |
| 95% CI ^b | 0.09, 0.55 | |
| p-value ^b | 0.0011 | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.21 | 0.29 |
| SD | 1.63 | 0.89 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.00 | 0.00, 0.00 |
| Min, Max | 0.0, 5.5 | 0.0, 4.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 42 | 9 |
| Total person years | 34.95 | 34.37 |
| Rate | 1.20 | 0.26 |
| Subject with exacerbation | | |
| n | 19 | 6 |
| Number of exacerbations | | |
| Mean | 2.21 | 1.50 |
| SD | 1.36 | 0.84 |
| Median | 2.00 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 2.00 |
| Min, Max | 1.0, 5.0 | 1.0, 3.0 |
| Non-EU - N1 | 54 | 58 |
| Annualized exacerbation rate ^b | 0.65 | 0.32 |
| Rate ratio ^b | 0.49 | |
| 95% CI ^b | 0.23, 1.05 | |
| p-value ^b | 0.0653 | |
| Annualized exacerbation rate per subject | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|------------|--------------|
| Mean | 1.15 | 0.47 |
| SD | 2.05 | 1.14 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.03 | 0.00, 0.00 |
| Min, Max | 0.0, 8.2 | 0.0, 5.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 43 | 24 |
| Total person years | 48.84 | 52.75 |
| Rate | 0.88 | 0.45 |
| Subject with exacerbation | | |
| n | 22 | 13 |
| Number of exacerbations | | |
| Mean | 1.95 | 1.85 |
| SD | 1.21 | 1.52 |
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 2.00 |
| Min, Max | 1.0, 4.0 | 1.0, 6.0 |
| Treatment by region interaction p-value ^a | | NA |
| Region | | |
| Japan - N1 | 1 | 1 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 8.03 | 0.00 |
| SD | NA | NA |
| Median | 8.03 | 0.00 |
| Q1, Q3 | 8.03, 8.03 | 0.00, 0.00 |
| Min, Max | 8.0, 8.0 | 0.0, 0.0 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 2 | 0 |
| Total person years | 0.25 | 1.00 |
| Rate | 8.03 | 0.00 |
| Subject with exacerbation | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| n | 1 | 0 |
| Number of exacerbations | | |
| Mean | 2.00 | NA |
| SD | NA | NA |
| Median | 2.00 | NA |
| Q1, Q3 | 2.00, 2.00 | NA, NA |
| Min, Max | 2.0, 2.0 | NA, NA |
| Non-Japan - N1 | 92 | 94 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.10 | 0.41 |
| SD | 1.75 | 1.06 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.54 | 0.00, 0.00 |
| Min, Max | 0.0, 8.2 | 0.0, 5.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 83 | 33 |
| Total person years | 83.54 | 86.12 |
| Rate | 0.99 | 0.38 |
| Subject with exacerbation | | |
| n | 40 | 19 |
| Number of exacerbations | | |
| Mean | 2.08 | 1.74 |
| SD | 1.29 | 1.33 |
| Median | 1.50 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 2.00 |
| Min, Max | 1.0, 5.0 | 1.0, 6.0 |
| MuSK+ Population (Week 26) | | |
| Treatment by age interaction p-value ^a | | NA |
| Age | | |
| >= 18 - < 65 years - N1 | 22 | 21 |
| Annualized exacerbation rate ^b | NA | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.79 | 0.27 |
| SD | 2.76 | 0.67 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.00 | 0.00, 0.00 |
| Min, Max | 0.0, 8.0 | 0.0, 1.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 20 | 3 |
| Total person years | 11.38 | 10.96 |
| Rate | 1.76 | 0.27 |
| Subject with exacerbation | | |
| n | 9 | 3 |
| Number of exacerbations | | |
| Mean | 2.22 | 1.00 |
| SD | 1.39 | 0.00 |
| Median | 2.00 | 1.00 |
| Q1, Q3 | 1.00, 4.00 | 1.00, 1.00 |
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| >= 65 years - N1 | 2 | 3 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 2.00 | 0.00 |
| SD | 0.09 | 0.00 |
| Median | 2.00 | 0.00 |
| Q1, Q3 | 1.94, 2.06 | 0.00, 0.00 |
| Min, Max | 1.9, 2.1 | 0.0, 0.0 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 2 | 0 |
| Total person years | 1.00 | 1.52 |
| Rate | 2.00 | 0.00 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| Subject with exacerbation | | |
| n | 2 | 0 |
| Number of exacerbations | | |
| Mean | 1.00 | NA |
| SD | 0.00 | NA |
| Median | 1.00 | NA |
| Q1, Q3 | 1.00, 1.00 | NA, NA |
| Min, Max | 1.0, 1.0 | NA, NA |
| Treatment by sex interaction p-value ^a | | NA |
| Sex | | |
| Male - N1 | 7 | 5 |
| Annualized exacerbation rate ^b | | |
| Rate ratio ^b | NA | NA |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 2.30 | 0.35 |
| SD | 2.93 | 0.79 |
| Median | 1.92 | 0.00 |
| Q1, Q3 | 0.00, 4.10 | 0.00, 0.00 |
| Min, Max | 0.0, 8.0 | 0.0, 1.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 8 | 1 |
| Total person years | 3.51 | 2.73 |
| Rate | 2.28 | 0.37 |
| Subject with exacerbation | | |
| n | 4 | 1 |
| Number of exacerbations | | |
| Mean | 2.00 | 1.00 |
| SD | 1.41 | NA |
| Median | 1.50 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 1.00 |
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| Female - N1 | 17 | 19 |
| Annualized exacerbation rate ^b | | |
| | NA | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|------------|--------------|
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.60 | 0.20 |
| SD | 2.57 | 0.61 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.99 | 0.00, 0.00 |
| Min, Max | 0.0, 7.7 | 0.0, 1.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 14 | 2 |
| Total person years | 8.87 | 9.76 |
| Rate | 1.58 | 0.20 |
| Subject with exacerbation | | |
| n | 7 | 2 |
| Number of exacerbations | | |
| Mean | 2.00 | 1.00 |
| SD | 1.41 | 0.00 |
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 4.00 | 1.00, 1.00 |
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| Treatment by baseline steroid use interaction p-value ^a | NA | |
| Baseline steroid use | | |
| Prednisone <= 20 mg/day - N1 | 13 | 19 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 0.77 | 0.30 |
| SD | 1.32 | 0.70 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.93 | 0.00, 0.00 |
| Min, Max | 0.0, 4.1 | 0.0, 1.9 |
| Observed annualized exacerbation rate | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|------------|--------------|
| Total number of exacerbations | 5 | 3 |
| Total person years | 6.60 | 9.93 |
| Rate | 0.76 | 0.30 |
| Subject with exacerbation | | |
| n | 4 | 3 |
| Number of exacerbations | | |
| Mean | 1.25 | 1.00 |
| SD | 0.50 | 0.00 |
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 1.50 | 1.00, 1.00 |
| Min, Max | 1.0, 2.0 | 1.0, 1.0 |
| Prednisone > 20 mg/day - N1 | 10 | 2 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | NA |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 3.14 | 0.00 |
| SD | 3.45 | 0.00 |
| Median | 2.00 | 0.00 |
| Q1, Q3 | 0.00, 7.61 | 0.00, 0.00 |
| Min, Max | 0.0, 8.0 | 0.0, 0.0 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 16 | 0 |
| Total person years | 5.26 | 1.01 |
| Rate | 3.04 | 0.00 |
| Subject with exacerbation | | |
| n | 6 | 0 |
| Number of exacerbations | | |
| Mean | 2.67 | NA |
| SD | 1.51 | NA |
| Median | 3.00 | NA |
| Q1, Q3 | 1.00, 4.00 | NA, NA |
| Min, Max | 1.0, 4.0 | NA, NA |
| Treatment by baseline QMG interaction p-value ^a | | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| Baseline QMG | | |
| QMG <= 15 - N1 | 9 | 13 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.75 | 0.14 |
| SD | 2.63 | 0.49 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.06 | 0.00, 0.00 |
| Min, Max | 0.0, 7.6 | 0.0, 1.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 8 | 1 |
| Total person years | 4.74 | 6.59 |
| Rate | 1.69 | 0.15 |
| Subject with exacerbation | | |
| n | 4 | 1 |
| Number of exacerbations | | |
| Mean | 2.00 | 1.00 |
| SD | 1.41 | NA |
| Median | 1.50 | 1.00 |
| Q1, Q3 | 1.00, 3.00 | 1.00, 1.00 |
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| QMG >= 16 - N1 | 15 | 9 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.84 | 0.21 |
| SD | 2.73 | 0.64 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.00 | 0.00, 0.00 |
| Min, Max | 0.0, 8.0 | 0.0, 1.9 |
| Observed annualized exacerbation rate | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| Total number of exacerbations | 14 | 1 |
| Total person years | 7.64 | 4.86 |
| Rate | 1.83 | 0.21 |
| Subject with exacerbation | | |
| n | 7 | 1 |
| Number of exacerbations | | |
| Mean | 2.00 | 1.00 |
| SD | 1.41 | NA |
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 4.00 | 1.00, 1.00 |
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| Treatment by baseline MGFA class interaction p-value ^a | | NA |
| Baseline MGFA class | | |
| II - N1 | 12 | 13 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.98 | 0.14 |
| SD | 2.34 | 0.49 |
| Median | 1.96 | 0.00 |
| Q1, Q3 | 0.00, 3.06 | 0.00, 0.00 |
| Min, Max | 0.0, 7.6 | 0.0, 1.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 12 | 1 |
| Total person years | 6.15 | 6.92 |
| Rate | 1.95 | 0.14 |
| Subject with exacerbation | | |
| n | 7 | 1 |
| Number of exacerbations | | |
| Mean | 1.71 | 1.00 |
| SD | 1.11 | NA |
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 2.00 | 1.00, 1.00 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| III - N1 | 12 | 9 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.63 | 0.43 |
| SD | 3.00 | 0.85 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 1.93 | 0.00, 0.00 |
| Min, Max | 0.0, 8.0 | 0.0, 1.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 10 | 2 |
| Total person years | 6.23 | 4.54 |
| Rate | 1.61 | 0.44 |
| Subject with exacerbation | | |
| n | 4 | 2 |
| Number of exacerbations | | |
| Mean | 2.50 | 1.00 |
| SD | 1.73 | 0.00 |
| Median | 2.50 | 1.00 |
| Q1, Q3 | 1.00, 4.00 | 1.00, 1.00 |
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| IV - N1 | 0 | 1 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | NA | 0.00 |
| SD | NA | NA |
| Median | NA | 0.00 |
| Q1, Q3 | NA, NA | 0.00, 0.00 |
| Min, Max | NA, NA | 0.0, 0.0 |
| Observed annualized exacerbation rate | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|------------|--------------|
| Total number of exacerbations | 0 | 0 |
| Total person years | 0 | 0.52 |
| Rate | NA | 0.00 |
| Subject with exacerbation | | |
| n | 0 | 0 |
| Number of exacerbations | | |
| Mean | NA | NA |
| SD | NA | NA |
| Median | NA | NA |
| Q1, Q3 | NA, NA | NA, NA |
| Min, Max | NA, NA | NA, NA |
| Treatment by region interaction p-value ^a | | NA |
| Region | | |
| Asia - N1 | 15 | 14 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.34 | 0.13 |
| SD | 2.23 | 0.47 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.00 | 0.00, 0.00 |
| Min, Max | 0.0, 8.0 | 0.0, 1.8 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 10 | 1 |
| Total person years | 7.85 | 7.40 |
| Rate | 1.27 | 0.14 |
| Subject with exacerbation | | |
| n | 6 | 1 |
| Number of exacerbations | | |
| Mean | 1.67 | 1.00 |
| SD | 1.21 | NA |
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 2.00 | 1.00, 1.00 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| Europe - N1 | 2 | 7 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 3.87 | 0.55 |
| SD | 5.47 | 0.94 |
| Median | 3.87 | 0.00 |
| Q1, Q3 | 0.00, 7.73 | 0.00, 1.92 |
| Min, Max | 0.0, 7.7 | 0.0, 1.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 4 | 2 |
| Total person years | 1.01 | 3.55 |
| Rate | 3.96 | 0.56 |
| Subject with exacerbation | | |
| n | 1 | 2 |
| Number of exacerbations | | |
| Mean | 4.00 | 1.00 |
| SD | NA | 0.00 |
| Median | 4.00 | 1.00 |
| Q1, Q3 | 4.00, 4.00 | 1.00, 1.00 |
| Min, Max | 4.0, 4.0 | 1.0, 1.0 |
| North America - N1 | 2 | 2 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 2.03 | 0.00 |
| SD | 2.87 | 0.00 |
| Median | 2.03 | 0.00 |
| Q1, Q3 | 0.00, 4.06 | 0.00, 0.00 |
| Min, Max | 0.0, 4.1 | 0.0, 0.0 |
| Observed annualized exacerbation rate | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|------------|--------------|
| Total number of exacerbations | 2 | 0 |
| Total person years | 0.97 | 1.03 |
| Rate | 2.05 | 0.00 |
| Subject with exacerbation | | |
| n | 1 | 0 |
| Number of exacerbations | | |
| Mean | 2.00 | NA |
| SD | NA | NA |
| Median | 2.00 | NA |
| Q1, Q3 | 2.00, 2.00 | NA, NA |
| Min, Max | 2.0, 2.0 | NA, NA |
| Rest of the world - N1 | 5 | 1 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 2.29 | 0.00 |
| SD | 3.12 | NA |
| Median | 1.92 | 0.00 |
| Q1, Q3 | 0.00, 1.94 | 0.00, 0.00 |
| Min, Max | 0.0, 7.6 | 0.0, 0.0 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 6 | 0 |
| Total person years | 2.54 | 0.50 |
| Rate | 2.36 | 0.00 |
| Subject with exacerbation | | |
| n | 3 | 0 |
| Number of exacerbations | | |
| Mean | 2.00 | NA |
| SD | 1.73 | NA |
| Median | 1.00 | NA |
| Q1, Q3 | 1.00, 4.00 | NA, NA |
| Min, Max | 1.0, 4.0 | NA, NA |
| Treatment by region interaction p-value ^a | | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| Region | | |
| EU - N1 | 2 | 7 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 3.87 | 0.55 |
| SD | 5.47 | 0.94 |
| Median | 3.87 | 0.00 |
| Q1, Q3 | 0.00, 7.73 | 0.00, 1.92 |
| Min, Max | 0.0, 7.7 | 0.0, 1.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 4 | 2 |
| Total person years | 1.01 | 3.55 |
| Rate | 3.96 | 0.56 |
| Subject with exacerbation | | |
| n | 1 | 2 |
| Number of exacerbations | | |
| Mean | 4.00 | 1.00 |
| SD | NA | 0.00 |
| Median | 4.00 | 1.00 |
| Q1, Q3 | 4.00, 4.00 | 1.00, 1.00 |
| Min, Max | 4.0, 4.0 | 1.0, 1.0 |
| Non-EU - N1 | 22 | 17 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.62 | 0.10 |
| SD | 2.40 | 0.43 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.00 | 0.00, 0.00 |
| Min, Max | 0.0, 8.0 | 0.0, 1.8 |
| Observed annualized exacerbation rate | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|------------|--------------|
| Total number of exacerbations | 18 | 1 |
| Total person years | 11.37 | 8.94 |
| Rate | 1.58 | 0.11 |
| Subject with exacerbation | | |
| n | 10 | 1 |
| Number of exacerbations | | |
| Mean | 1.80 | 1.00 |
| SD | 1.23 | NA |
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 2.00 | 1.00, 1.00 |
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| Treatment by region interaction p-value ^a | | NA |
| Region | | |
| Japan - N1 | 2 | 2 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 2.05 | 0.00 |
| SD | 2.90 | 0.00 |
| Median | 2.05 | 0.00 |
| Q1, Q3 | 0.00, 4.10 | 0.00, 0.00 |
| Min, Max | 0.0, 4.1 | 0.0, 0.0 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 2 | 0 |
| Total person years | 0.99 | 1.00 |
| Rate | 2.02 | 0.00 |
| Subject with exacerbation | | |
| n | 1 | 0 |
| Number of exacerbations | | |
| Mean | 2.00 | NA |
| SD | NA | NA |
| Median | 2.00 | NA |
| Q1, Q3 | 2.00, 2.00 | NA, NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|------------|--------------|
| Min, Max | 2.0, 2.0 | NA, NA |
| Non-Japan - N1 | 22 | 22 |
| Annualized exacerbation rate ^b | NA | NA |
| Rate ratio ^b | NA | |
| 95% CI ^b | NA, NA | |
| p-value ^b | NA | |
| Annualized exacerbation rate per subject | | |
| Mean | 1.78 | 0.26 |
| SD | 2.68 | 0.66 |
| Median | 0.00 | 0.00 |
| Q1, Q3 | 0.00, 2.00 | 0.00, 0.00 |
| Min, Max | 0.0, 8.0 | 0.0, 1.9 |
| Observed annualized exacerbation rate | | |
| Total number of exacerbations | 20 | 3 |
| Total person years | 11.39 | 11.48 |
| Rate | 1.76 | 0.26 |
| Subject with exacerbation | | |
| n | 10 | 3 |
| Number of exacerbations | | |
| Mean | 2.00 | 1.00 |
| SD | 1.41 | 0.00 |
| Median | 1.00 | 1.00 |
| Q1, Q3 | 1.00, 4.00 | 1.00, 1.00 |
| Min, Max | 1.0, 4.0 | 1.0, 1.0 |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. N1 = Number of subjects in each subgroup level. The denominator of the percentage is the N1 under each subgroup.</p> <p>An exacerbation is defined as Use of protocol defined rescue therapy, or Myasthenic crisis or Significant symptomatic worsening. Annual exacerbation rate per subject = $365.25 \times \text{total number of exacerbations for a subject} / \text{total duration of follow-up for this subject (days)}$.</p> <p>^a Estimated from the negative binomial regression with common covariate of treatment group, baseline steroid use (daily prednisone dose ≤ 5 mg vs daily prednisone dose > 5 mg), baseline QMG score (QMG ≤ 15 vs QMG ≥ 16), baseline MG-ADL score, treatment \times subgroup variable. The logarithm of the subject's corresponding follow-up time is used as an offset variable.</p> <p>^b Estimated from the negative binomial regression with common covariate of treatment group, baseline steroid use (daily prednisone dose ≤ 5 mg vs daily prednisone dose > 5 mg), baseline QMG score (QMG ≤ 15 vs QMG ≥ 16), and baseline MG-ADL score. The logarithm of the subject's corresponding follow-up time is used as an offset variable.</p> | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.6 Rescue-Therapien**1.6.1 Anteil an Patientinnen und Patienten mit Rescue-Therapie**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|----------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 28 / 79 (35.4) | 9 / 76 (11.8) | 0.25 (0.11, 0.58) | 0.0011 | 0.33 (0.17, 0.64) | 0.0006 | -20.70 (- 33.10, -8.30) | 0.0011 | |
| >= 65 years | 4 / 14 (28.6) | 2 / 19 (10.5) | 0.47 (0.08, 2.95) | 0.4223 | 0.37 (0.09, 1.51) | 0.3631 | -10.62 (- 38.08, 16.85) | 0.4488 | |
| Sex | | | | | | | | | |
| Male | 14 / 45 (31.1) | 3 / 35 (8.6) | 0.26 (0.07, 0.95) | 0.0423 | 0.28 (0.09, 0.80) | 0.0256 | -18.72 (- 35.92, -1.53) | 0.0328 | 1.0000 |
| Female | 18 / 48 (37.5) | 8 / 60 (13.3) | 0.27 (0.10, 0.69) | 0.0062 | 0.36 (0.17, 0.73) | 0.0059 | -21.95 (- 38.36, -5.54) | 0.0088 | |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 13 / 54 (24.1) | 5 / 63 (7.9) | 0.31 (0.11, 0.92) | 0.0356 | 0.33 (0.13, 0.83) | 0.0207 | -14.33 (- 28.29, -0.37) | 0.0442 | |
| Prednisone > 20 mg/day | 16 / 30 (53.3) | 5 / 27 (18.5) | 0.22 (0.06, 0.76) | 0.0166 | 0.35 (0.15, 0.76) | 0.0124 | -29.49 (- 63.23, 4.24) | 0.0866 | |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 11 / 39 (28.2) | 2 / 38 (5.3) | 0.16 (0.04, 0.70) | 0.0148 | 0.19 (0.05, 0.68) | 0.0127 | -22.03 (- 39.10, -4.97) | 0.0114 | 0.6732 |
| QMG >= 16 | 20 / 52 (38.5) | 8 / 55 (14.5) | 0.29 (0.11, 0.73) | 0.0085 | 0.38 (0.18, 0.76) | 0.0077 | -22.16 (- 38.50, -5.83) | 0.0078 | |
| Baseline MGFA class | | | | | | | | | |
| II | 12 / 36 (33.3) | 3 / 43 (7.0) | 0.20 (0.05, 0.75) | 0.0172 | 0.21 (0.07, 0.63) | 0.0038 | -13.74 (- 31.77, 4.30) | 0.1355 | 0.3995 |
| III | 14 / 49 (28.6) | 7 / 49 (14.3) | 0.44 (0.16, 1.18) | 0.1023 | 0.50 (0.22, 1.09) | 0.1385 | -13.62 (- 29.70, 2.46) | 0.0968 | |
| IV | 6 / 7 (85.7) | 1 / 3 (33.3) | ND | ND | 0.39 (0.07, 1.15) | 0.1833 | ND | ND | |
| Region | | | | | | | | | |
| Asia | 9 / 39 (23.1) | 4 / 30 (13.3) | 0.52 (0.15, 1.81) | 0.3031 | 0.58 (0.20, 1.58) | 0.3650 | -9.39 (-27.22, 8.43) | 0.3018 | 0.2154 |
| Europe | 16 / 39 (41.0) | 3 / 37 (8.1) | 0.12 (0.03, 0.47) | 0.0023 | 0.20 (0.06, 0.56) | 0.0012 | -26.83 (- 44.43, -9.23) | 0.0028 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| North America | 4 / 12 (33.3) | 3 / 19 (15.8) | 0.43 (0.08, 2.31) | 0.3237 | 0.47 (0.14, 1.65) | 0.3839 | -16.24 (-48.73, 16.26) | 0.3274 | |
| Rest of the world | 3 / 3 (100.0) | 1 / 9 (11.1) | 0.03 (0.00, 2.87) | 0.1305 | 0.17 (0.04, 0.68) | 0.0182 | 70.37 (-123.35, -17.40) | 0.0092 | |
| Region | | | | | | | | | 0.2524 |
| EU | 16 / 39 (41.0) | 3 / 37 (8.1) | 0.12 (0.03, 0.47) | 0.0023 | 0.20 (0.06, 0.56) | 0.0012 | -26.83 (-44.43, -9.23) | 0.0028 | |
| Non-EU | 16 / 54 (29.6) | 8 / 58 (13.8) | 0.40 (0.16, 1.03) | 0.0565 | 0.47 (0.22, 0.97) | 0.0640 | -14.64 (-29.87, 0.60) | 0.0597 | |
| Region | | | | | | | | | NA |
| Japan | 1 / 1 (100.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 31 / 92 (33.7) | 11 / 94 (11.7) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| >= 18 - < 65 years | 4 / 22 (18.2) | 1 / 21 (4.8) | NA | NA | NA | NA | NA | NA | |
| >= 65 years | 2 / 2 (100.0) | 0 / 3 (0.0) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | NA |
| Male | 3 / 7 (42.9) | 0 / 5 (0.0) | NA | NA | NA | NA | NA | NA | |
| Female | 3 / 17 (17.6) | 1 / 19 (5.3) | NA | NA | NA | NA | NA | NA | |
| Baseline steroid use | | | | | | | | | NA |
| Prednisone <= 20 mg/day | 2 / 13 (15.4) | 1 / 19 (5.3) | NA | NA | NA | NA | NA | NA | |
| Prednisone > 20 mg/day | 4 / 10 (40.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | |
| Baseline QMG | | | | | | | | | NA |
| QMG <= 15 | 2 / 9 (22.2) | 0 / 13 (0.0) | NA | NA | NA | NA | NA | NA | |
| QMG >= 16 | 4 / 15 (26.7) | 0 / 9 (0.0) | NA | NA | NA | NA | NA | NA | |
| Baseline MGFA class | | | | | | | | | NA |
| II | 4 / 12 (33.3) | 0 / 13 (0.0) | NA | NA | NA | NA | NA | NA | |
| III | 2 / 12 (16.7) | 1 / 9 (11.1) | NA | NA | NA | NA | NA | NA | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|----------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| IV | 0 / 0 (-) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Asia | 4 / 15 (26.7) | 0 / 14 (0.0) | NA | NA | NA | NA | NA | NA | |
| Europe | 0 / 2 (0.0) | 1 / 7 (14.3) | NA | NA | NA | NA | NA | NA | |
| North America | 0 / 2 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | |
| Rest of the world | 2 / 5 (40.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| EU | 0 / 2 (0.0) | 1 / 7 (14.3) | NA | NA | NA | NA | NA | NA | |
| Non-EU | 6 / 22 (27.3) | 0 / 17 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Japan | 1 / 2 (50.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 5 / 22 (22.7) | 1 / 22 (4.5) | NA | NA | NA | NA | NA | NA | |

Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

IVIg = Intravenous immunoglobulin; PLEX = Plasma exchange. MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects in each subgroup level. CI = Confidence interval.

^a Based on logistic regression with treatment, baseline steroid use (Daily dose <= 5 mg vs > 5 mg), baseline QMG score (QMG <= 15 vs QMG >= 16), and baseline MG-ADL score as common covariates.

95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.

If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.6.2 Zeit bis zur ersten Rescue-Therapie (Treatment-policy Strategie)

| Subgroup | Placebo | Inebilizumab |
|--|----------------|---------------|
| AChR+ Population (Week 52) | | |
| Treatment by age interaction p-value ^a | | 0.9472 |
| Age | | |
| >= 18 - < 65 years | | |
| Subjects with rescue therapy - n / N1 (%) | 28 / 79 (35.4) | 9 / 76 (11.8) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | 0.31 | |
| 95% CI ^c | 0.15, 0.66 | |
| p-value ^c | 0.0022 | |
| >= 65 years | | |
| Subjects with rescue therapy - n / N1 (%) | 4 / 14 (28.6) | 2 / 19 (10.5) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 7.43, NA | NA, NA |
| Hazard ratio ^c | 0.29 | |
| 95% CI ^c | 0.04, 1.93 | |
| p-value ^c | 0.1985 | |
| Treatment by sex interaction p-value ^a | | 0.9852 |
| Sex | | |
| Male | | |
| Subjects with rescue therapy - n / N1 (%) | 14 / 45 (31.1) | 3 / 35 (8.6) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 11.96, NA | NA, NA |
| Hazard ratio ^c | 0.29 | |
| 95% CI ^c | 0.08, 1.03 | |
| p-value ^c | 0.0555 | |
| Female | | |
| Subjects with rescue therapy - n / N1 (%) | 18 / 48 (37.5) | 8 / 60 (13.3) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 11.17, NA | NA, NA |
| Hazard ratio ^c | 0.30 | |
| 95% CI ^c | 0.13, 0.70 | |
| p-value ^c | 0.0056 | |
| Treatment by baseline steroid use interaction p-value ^a | | 0.8012 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|----------------|---------------|
| Baseline steroid use | | |
| Prednisone <= 20 mg/day | | |
| Subjects with rescue therapy - n / N1 (%) | 13 / 54 (24.1) | 5 / 63 (7.9) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | 0.35 | |
| 95% CI ^c | 0.13, 1.00 | |
| p-value ^c | 0.0503 | |
| Prednisone > 20 mg/day | | |
| Subjects with rescue therapy - n / N1 (%) | 16 / 30 (53.3) | 5 / 27 (18.5) |
| Median time to first rescue therapy (months) ^b | 11.37 | NA |
| 95% CI ^b | 6.67, NA | NA, NA |
| Hazard ratio ^c | 0.30 | |
| 95% CI ^c | 0.11, 0.81 | |
| p-value ^c | 0.0184 | |
| Treatment by baseline QMG interaction p-value ^a | | 0.5255 |
| Baseline QMG | | |
| QMG <= 15 | | |
| Subjects with rescue therapy - n / N1 (%) | 11 / 39 (28.2) | 2 / 38 (5.3) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | 0.17 | |
| 95% CI ^c | 0.04, 0.77 | |
| p-value ^c | 0.0218 | |
| QMG >= 16 | | |
| Subjects with rescue therapy - n / N1 (%) | 20 / 52 (38.5) | 8 / 55 (14.5) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 10.45, NA | NA, NA |
| Hazard ratio ^c | 0.33 | |
| 95% CI ^c | 0.15, 0.75 | |
| p-value ^c | 0.0085 | |
| Treatment by baseline MGFA class interaction p-value ^a | | 0.6778 |
| Baseline MGFA class | | |
| II | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|----------------|---------------|
| Subjects with rescue therapy - n / N1 (%) | 12 / 36 (33.3) | 3 / 43 (7.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 11.37, NA | NA, NA |
| Hazard ratio ^c | 0.25 | |
| 95% CI ^c | 0.07, 0.89 | |
| p-value ^c | 0.0324 | |
| III | | |
| Subjects with rescue therapy - n / N1 (%) | 14 / 49 (28.6) | 7 / 49 (14.3) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | 0.44 | |
| 95% CI ^c | 0.18, 1.09 | |
| p-value ^c | 0.0769 | |
| IV | | |
| Subjects with rescue therapy - n / N1 (%) | 6 / 7 (85.7) | 1 / 3 (33.3) |
| Median time to first rescue therapy (months) ^b | 4.60 | NA |
| 95% CI ^b | 1.91, 7.49 | 1.22, NA |
| Hazard ratio ^c | 0.54 | |
| 95% CI ^c | 0.03, 9.47 | |
| p-value ^c | 0.6731 | |
| Treatment by region interaction p-value ^a | | 0.3766 |
| Region | | |
| Asia | | |
| Subjects with rescue therapy - n / N1 (%) | 9 / 39 (23.1) | 4 / 30 (13.3) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | 0.50 | |
| 95% CI ^c | 0.15, 1.63 | |
| p-value ^c | 0.2504 | |
| Europe | | |
| Subjects with rescue therapy - n / N1 (%) | 16 / 39 (41.0) | 3 / 37 (8.1) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 7.43, NA | NA, NA |
| Hazard ratio ^c | 0.17 | |
| 95% CI ^c | 0.05, 0.58 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|----------------|---------------|
| p-value ^c | 0.0047 | |
| North America | | |
| Subjects with rescue therapy - n / N1 (%) | 4 / 12 (33.3) | 3 / 19 (15.8) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 2.40, NA | NA, NA |
| Hazard ratio ^c | 0.44 | |
| 95% CI ^c | 0.09, 2.05 | |
| p-value ^c | 0.2948 | |
| Rest of the world | | |
| Subjects with rescue therapy - n / N1 (%) | 3 / 3 (100.0) | 1 / 9 (11.1) |
| Median time to first rescue therapy (months) ^b | 5.52 | NA |
| 95% CI ^b | 1.58, NA | 1.22, NA |
| Hazard ratio ^c | 0.00 | |
| 95% CI ^c | 0.00, NA | |
| p-value ^c | 0.9972 | |
| Treatment by region interaction p-value ^a | | 0.2110 |
| Region | | |
| EU | | |
| Subjects with rescue therapy - n / N1 (%) | 16 / 39 (41.0) | 3 / 37 (8.1) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 7.43, NA | NA, NA |
| Hazard ratio ^c | 0.17 | |
| 95% CI ^c | 0.05, 0.58 | |
| p-value ^c | 0.0047 | |
| Non-EU | | |
| Subjects with rescue therapy - n / N1 (%) | 16 / 54 (29.6) | 8 / 58 (13.8) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | 0.44 | |
| 95% CI ^c | 0.19, 1.04 | |
| p-value ^c | 0.0621 | |
| Treatment by region interaction p-value ^a | | NA |
| Region | | |
| Japan | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|----------------|----------------|
| Subjects with rescue therapy - n / N1 (%) | 1 / 1 (100.0) | 0 / 1 (0.0) |
| Median time to first rescue therapy (months) ^b | 1.91 | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Non-Japan | | |
| Subjects with rescue therapy - n / N1 (%) | 31 / 92 (33.7) | 11 / 94 (11.7) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| MuSK+ Population (Week 26) | | |
| Treatment by age interaction p-value ^a | | NA |
| Age | | |
| >= 18 - < 65 years | | |
| Subjects with rescue therapy - n / N1 (%) | 4 / 22 (18.2) | 1 / 21 (4.8) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| >= 65 years | | |
| Subjects with rescue therapy - n / N1 (%) | 2 / 2 (100.0) | 0 / 3 (0.0) |
| Median time to first rescue therapy (months) ^b | 4.48 | NA |
| 95% CI ^b | 4.11, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by sex interaction p-value ^a | | NA |
| Sex | | |
| Male | | |
| Subjects with rescue therapy - n / N1 (%) | 3 / 7 (42.9) | 0 / 5 (0.0) |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|--|---------------|--------------|
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 1.61, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Female | | |
| Subjects with rescue therapy - n / N1 (%) | 3 / 17 (17.6) | 1 / 19 (5.3) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by baseline steroid use interaction p-value ^a | | NA |
| Baseline steroid use | | |
| Prednisone <= 20 mg/day | | |
| Subjects with rescue therapy - n / N1 (%) | 2 / 13 (15.4) | 1 / 19 (5.3) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Prednisone > 20 mg/day | | |
| Subjects with rescue therapy - n / N1 (%) | 4 / 10 (40.0) | 0 / 2 (0.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 1.02, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by baseline QMG interaction p-value ^a | | NA |
| Baseline QMG | | |
| QMG <= 15 | | |
| Subjects with rescue therapy - n / N1 (%) | 2 / 9 (22.2) | 0 / 13 (0.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 1.02, NA | NA, NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|---------------|--------------|
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| QMG >= 16 | | |
| Subjects with rescue therapy - n / N1 (%) | 4 / 15 (26.7) | 0 / 9 (0.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 3.81, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by baseline MGFA class interaction p-value ^a | | NA |
| Baseline MGFA class | | |
| II | | |
| Subjects with rescue therapy - n / N1 (%) | 4 / 12 (33.3) | 0 / 13 (0.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 2.79, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| III | | |
| Subjects with rescue therapy - n / N1 (%) | 2 / 12 (16.7) | 1 / 9 (11.1) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 4.11, NA | 1.64, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| IV | | |
| Subjects with rescue therapy - n / N1 (%) | 0 / 0 (-) | 0 / 1 (0.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by region interaction p-value ^a | | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo | Inebilizumab |
|---|---------------|--------------|
| Region | | |
| Asia | | |
| Subjects with rescue therapy - n / N1 (%) | 4 / 15 (26.7) | 0 / 14 (0.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 3.81, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Europe | | |
| Subjects with rescue therapy - n / N1 (%) | 0 / 2 (0.0) | 1 / 7 (14.3) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | 1.64, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| North America | | |
| Subjects with rescue therapy - n / N1 (%) | 0 / 2 (0.0) | 0 / 2 (0.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Rest of the world | | |
| Subjects with rescue therapy - n / N1 (%) | 2 / 5 (40.0) | 0 / 1 (0.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 1.02, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by region interaction p-value ^a | | NA |
| Region | | |
| EU | | |
| Subjects with rescue therapy - n / N1 (%) | 0 / 2 (0.0) | 1 / 7 (14.3) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | 1.64, NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

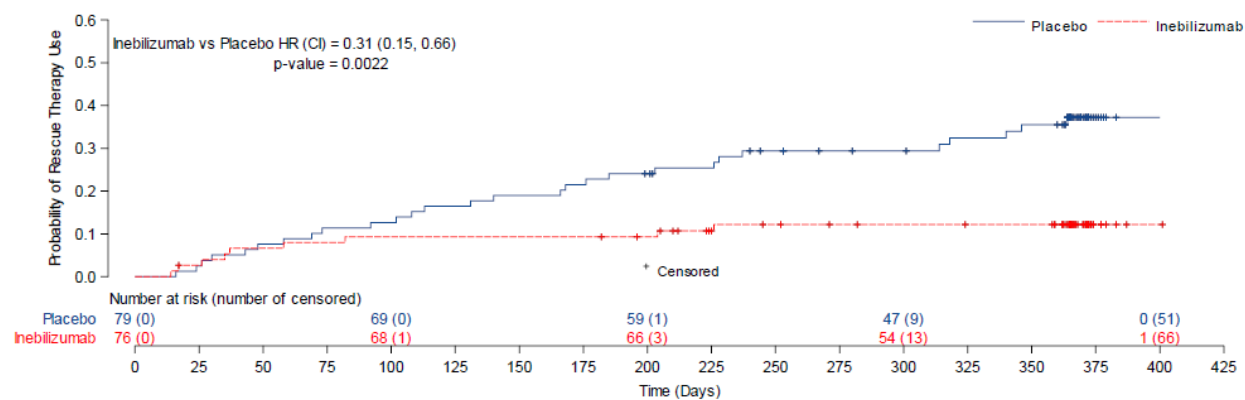
| Subgroup | Placebo | Inebilizumab |
|---|---------------|--------------|
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Non-EU | | |
| Subjects with rescue therapy - n / N1 (%) | 6 / 22 (27.3) | 0 / 17 (0.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 4.86, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Treatment by region interaction p-value ^a | | NA |
| Region | | |
| Japan | | |
| Subjects with rescue therapy - n / N1 (%) | 1 / 2 (50.0) | 0 / 2 (0.0) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | 2.79, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| Non-Japan | | |
| Subjects with rescue therapy - n / N1 (%) | 5 / 22 (22.7) | 1 / 22 (4.5) |
| Median time to first rescue therapy (months) ^b | NA | NA |
| 95% CI ^b | NA, NA | NA, NA |
| Hazard ratio ^c | NA | |
| 95% CI ^c | NA, NA | |
| p-value ^c | NA | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. CI = Confidence interval.</p> <p>To convert days to months: 1 month = 30.4375 days. An exacerbation is defined as Use of protocol defined rescue therapy, or Myasthenic crisis or Significant symptomatic worsening.</p> <p>^a Based on Cox regression method, with common covariates of treatment group, baseline steroid use status (daily prednisone dose ≤ 5 mg vs daily prednisone dose > 5 mg), baseline QMG score (QMG ≤ 15 vs QMG ≥ 16), baseline MG-ADL score, subgroup variable, and treatment × subgroup variable.</p> <p>^b Based on Kaplan-Meier method.</p> | | |

| Subgroup | Placebo | Inebilizumab |
|--|---------|--------------|
| *Based on Cox regression method, with common covariates of treatment group, baseline steroid use status (daily prednisone dose \leq 5 mg vs daily prednisone dose $>$ 5 mg), baseline QMG score (QMG \leq 15 vs QMG \geq 16), and baseline MG-ADL score. | | |

1.6.3 Kaplan-Meier-Kurven: Zeit bis zur ersten Rescue-Therapie (Treatment-policy Strategie)

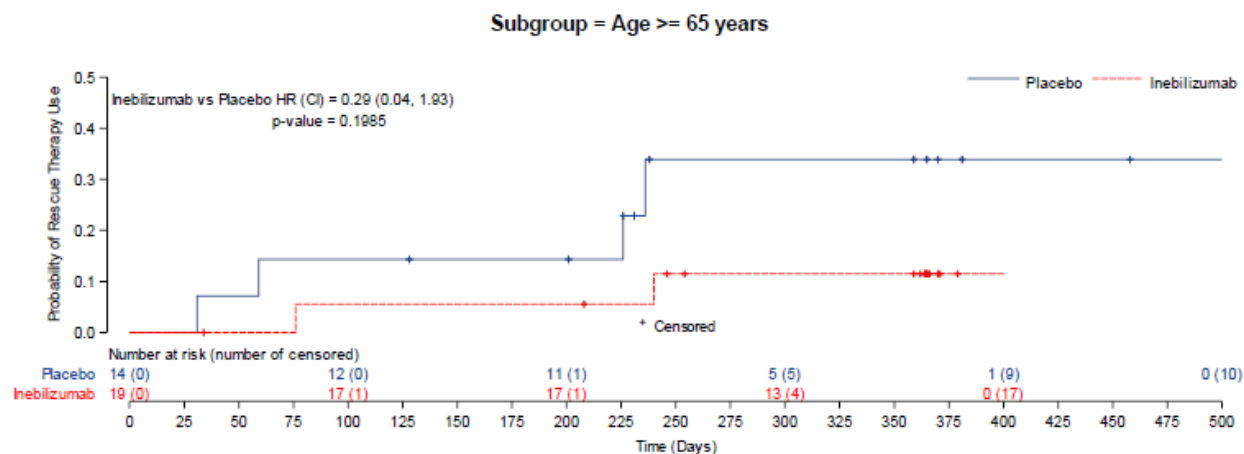
Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

Subgroup = Age >= 18 - < 65 years



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

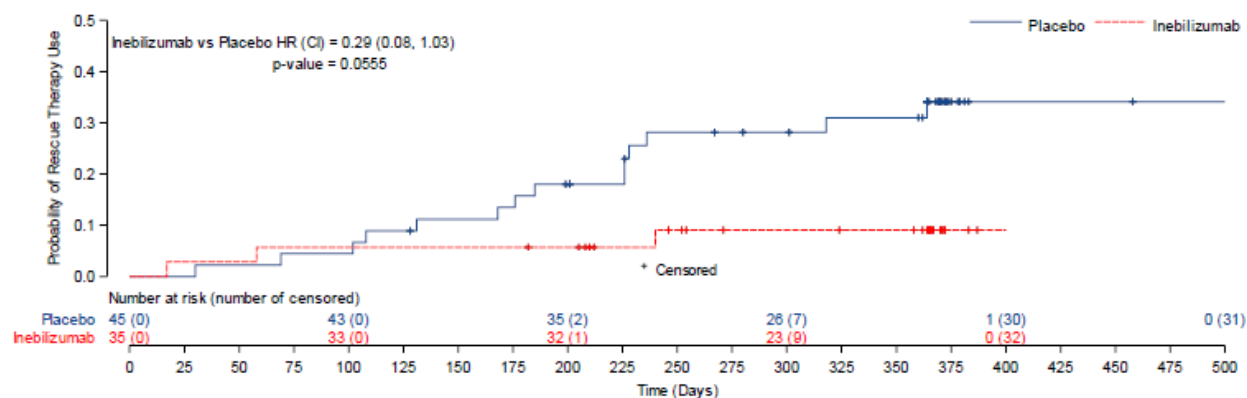
Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

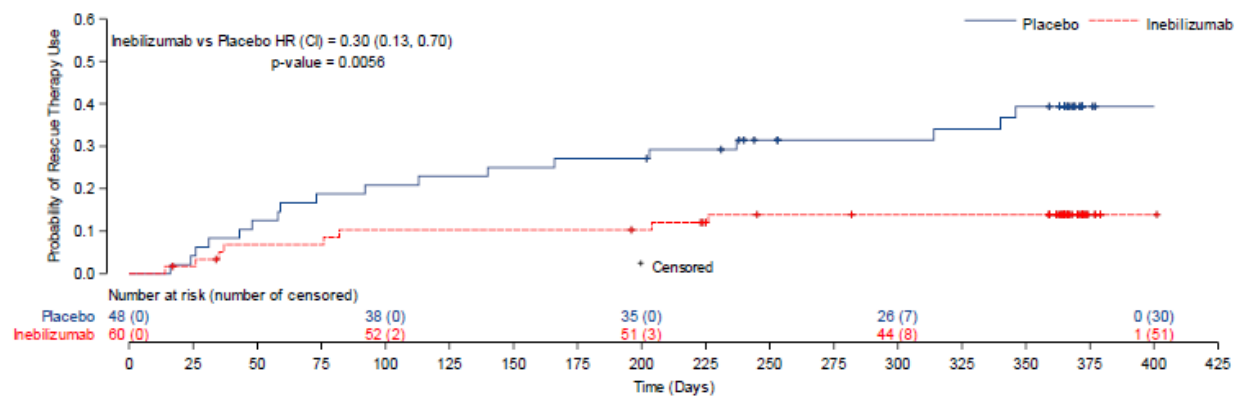
Subgroup = Sex Male



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14.2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

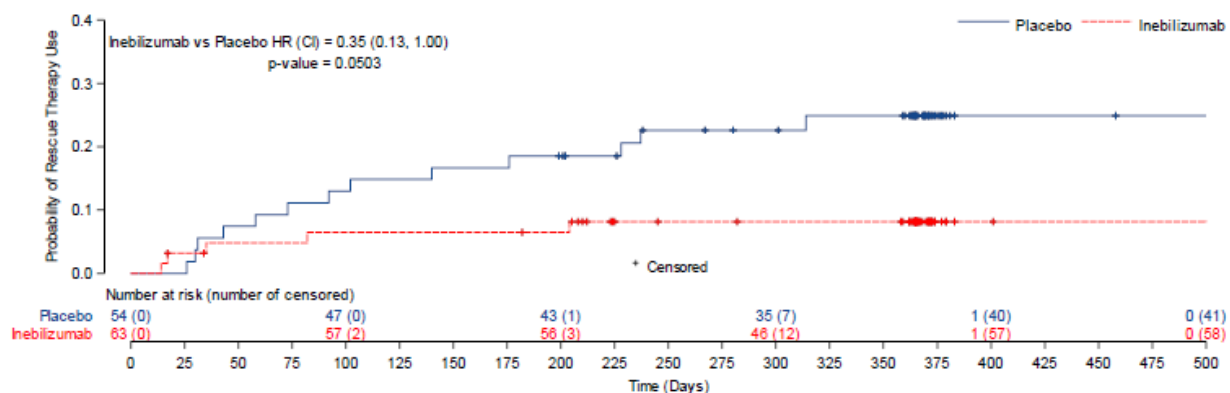
Subgroup = Sex Female



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

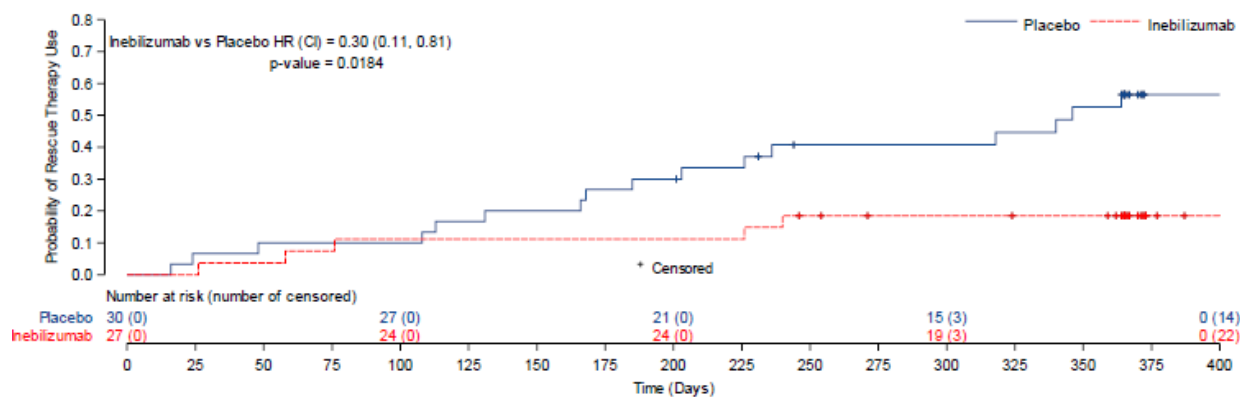
Subgroup = Baseline steroid use Prednisone <= 20 mg/day



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

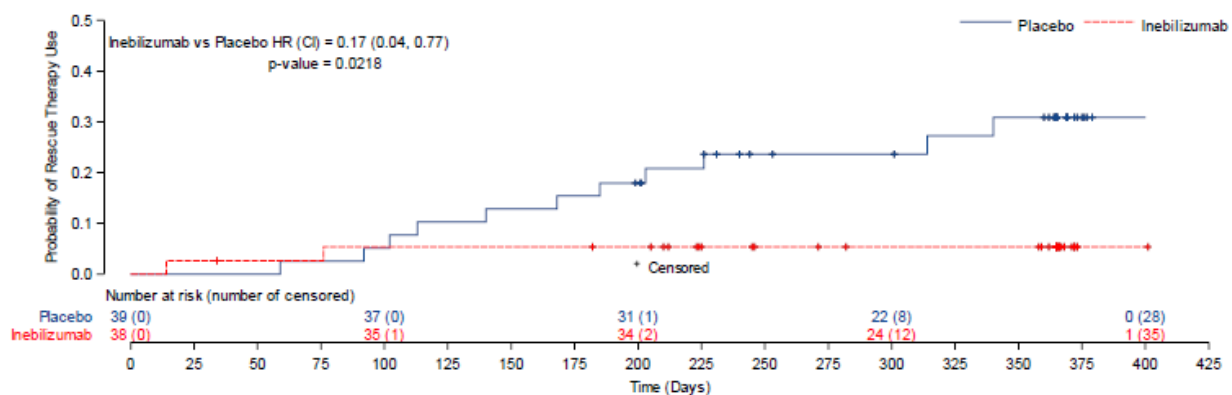
Subgroup = Baseline steroid use Prednisone > 20 mg/day



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

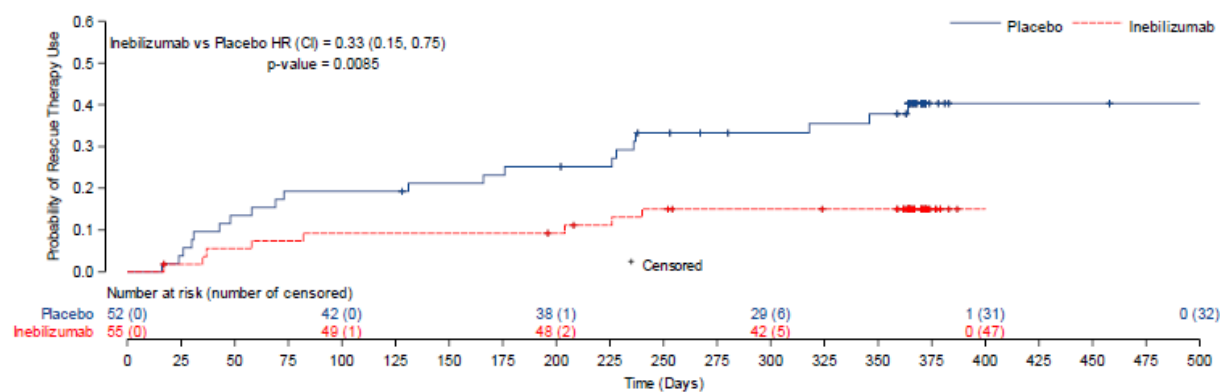
Subgroup = Baseline QMG QMG <= 15



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

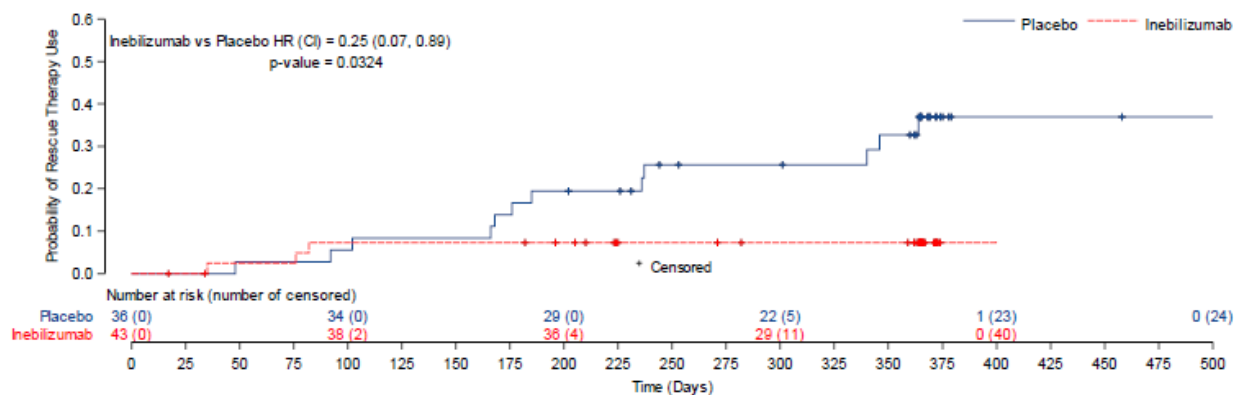
Subgroup = Baseline QMG QMG >= 16



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

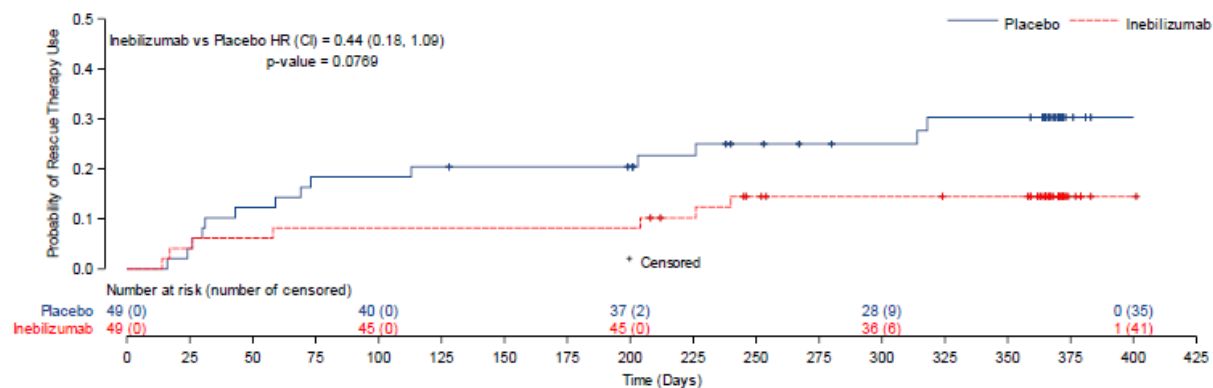
Subgroup = Baseline MGFA class II



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14.2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

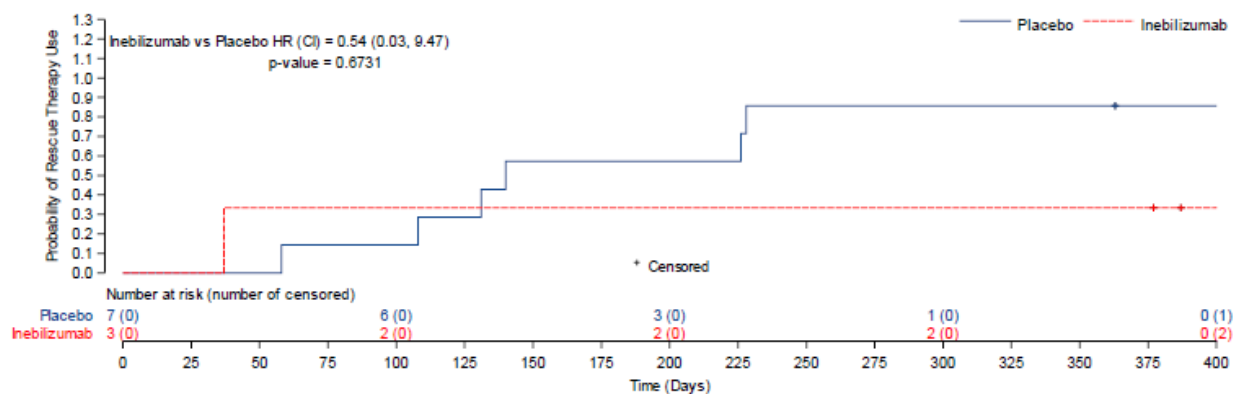
Subgroup = Baseline MGFA class III



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

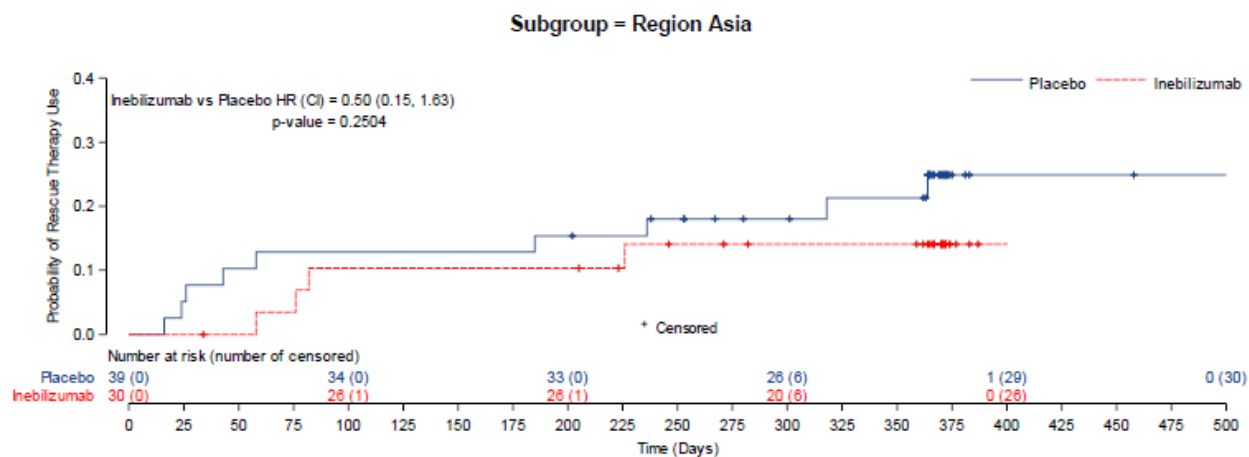
Figure 14.2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

Subgroup = Baseline MGFA class IV



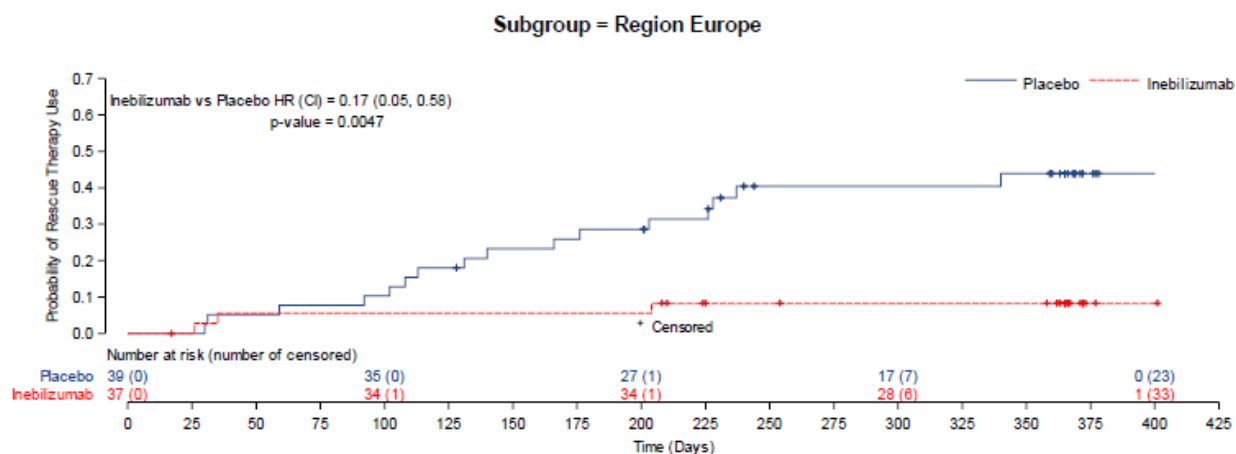
Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

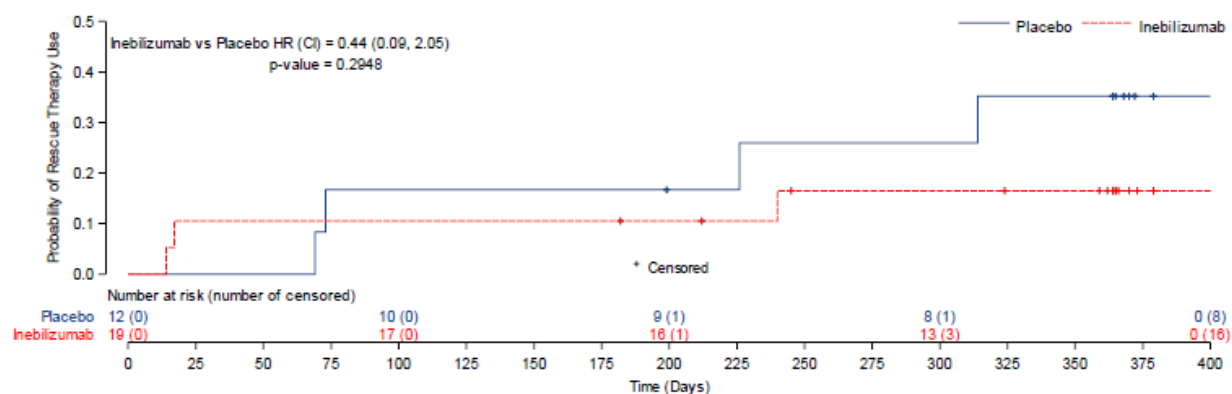
Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

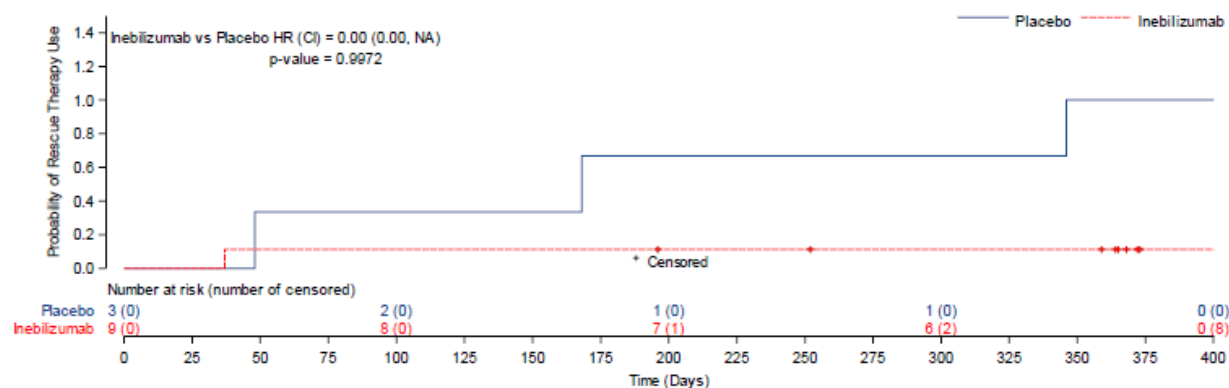
Subgroup = Region North America



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

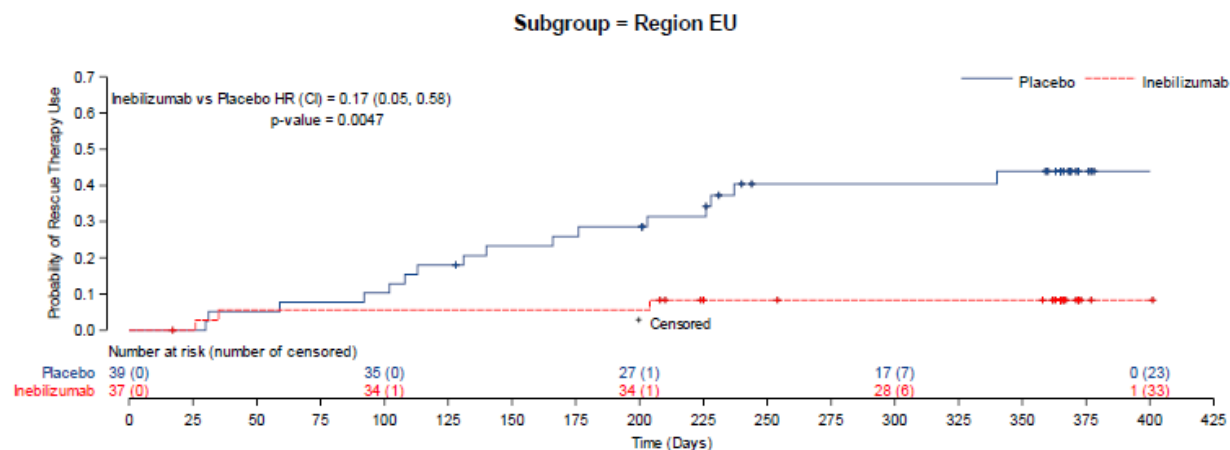
Figure 14.2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

Subgroup = Region Rest of the world



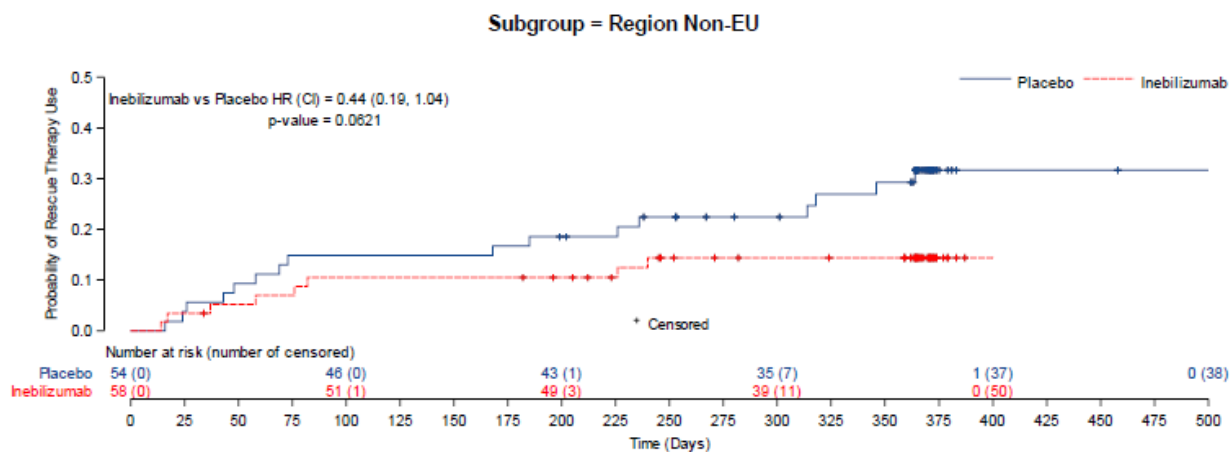
Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

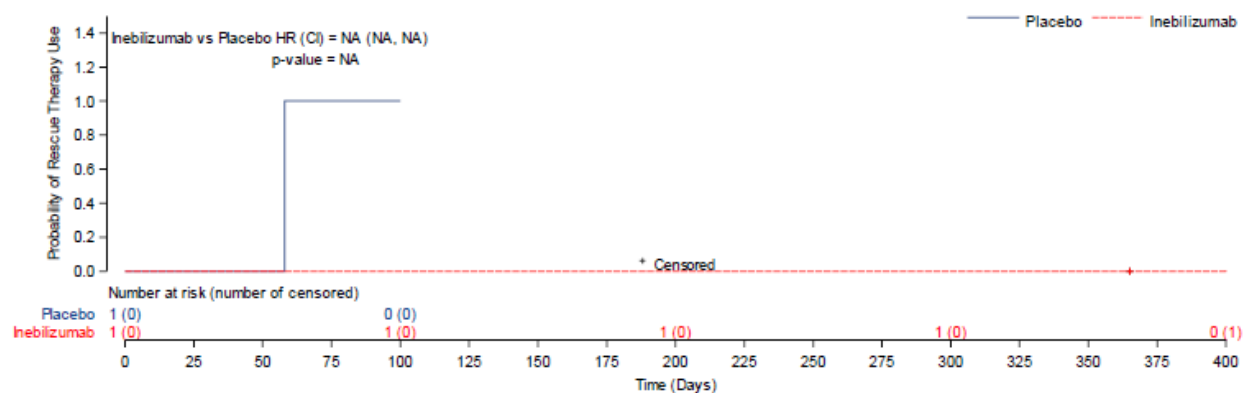
Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

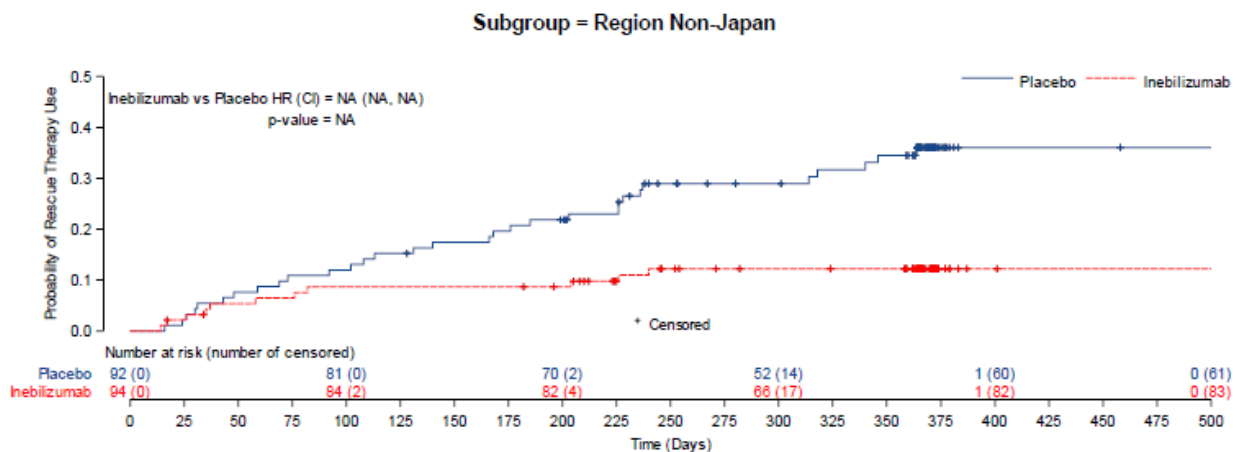
Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)

Subgroup = Region Japan



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

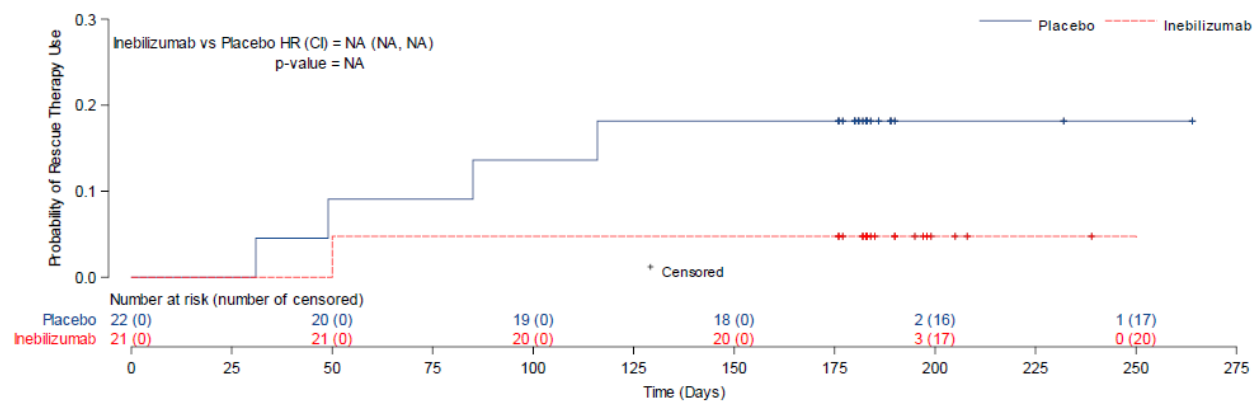
Figure 14-2.7.3.2.584. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 52 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: AChR+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

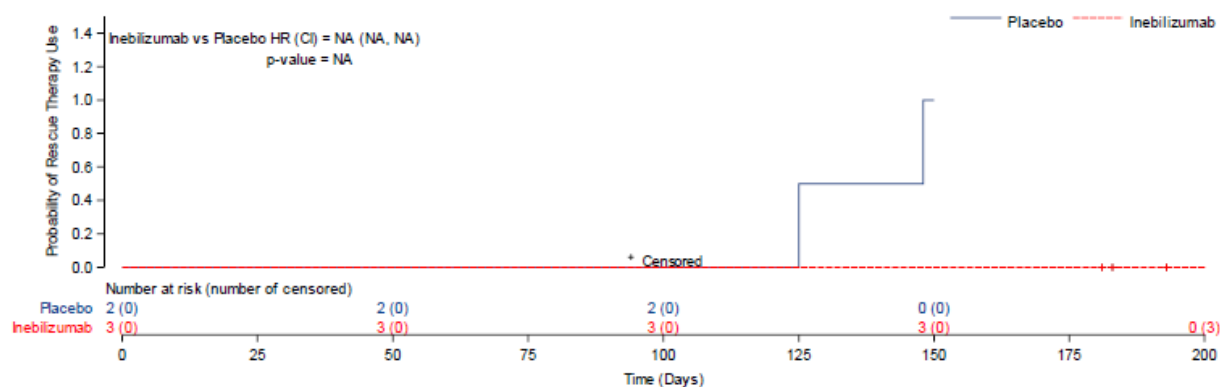
Subgroup = Age >= 18 - < 65 years



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

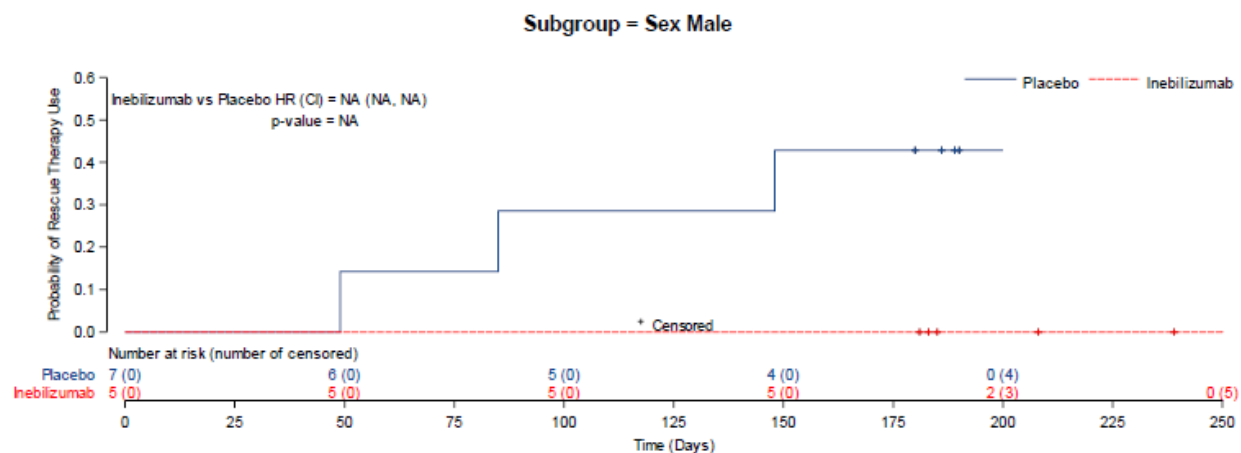
Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

Subgroup = Age >= 65 years



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

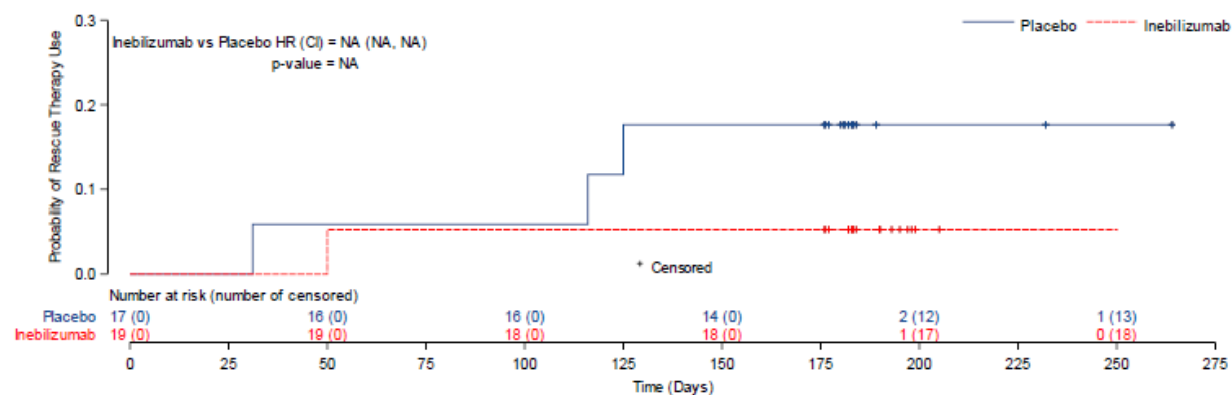
Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

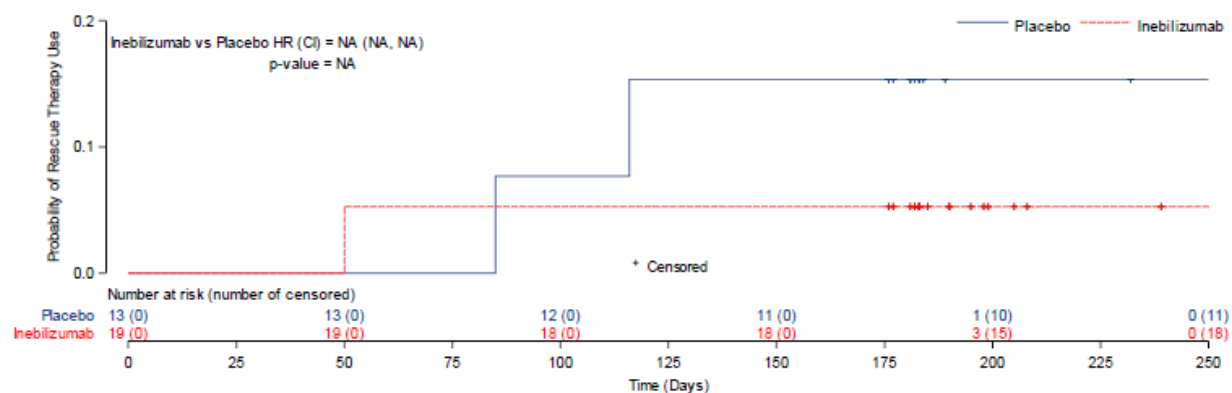
Subgroup = Sex Female



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

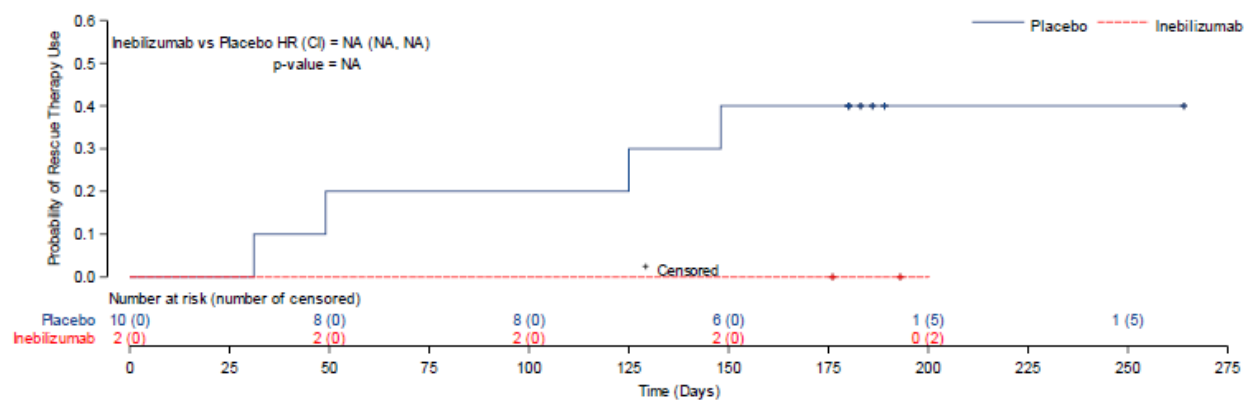
Subgroup = Baseline steroid use Prednisone <= 20 mg/day



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

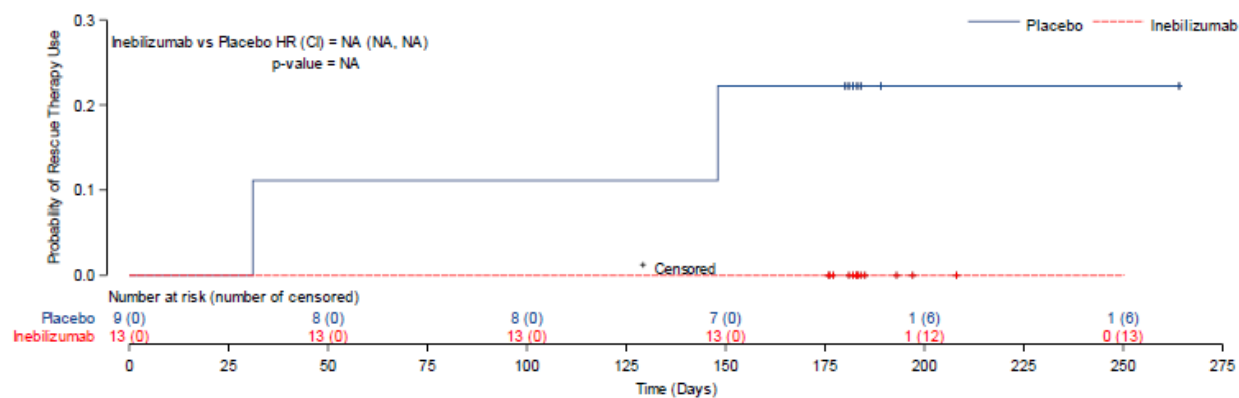
Subgroup = Baseline steroid use Prednisone > 20 mg/day



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

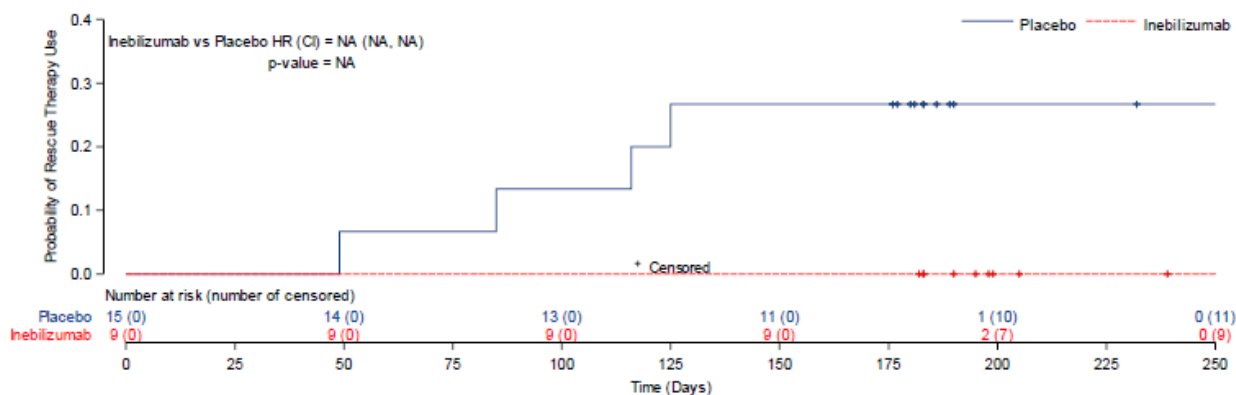
Subgroup = Baseline QMG QMG <= 15



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

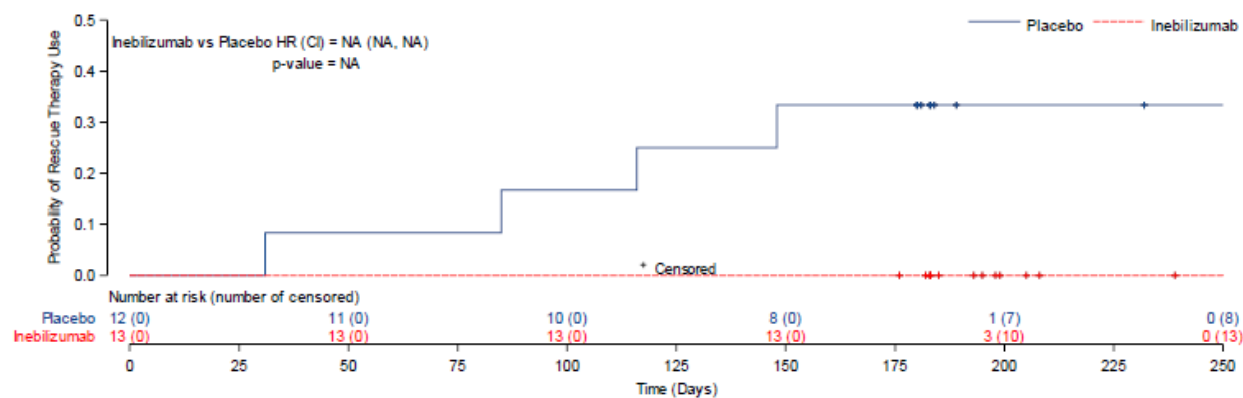
Subgroup = Baseline QMG QMG >= 16



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

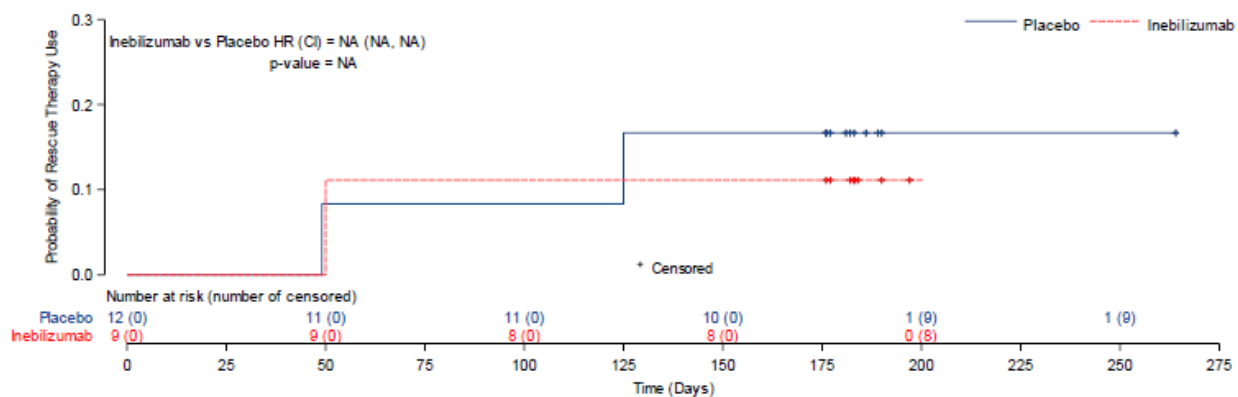
Subgroup = Baseline MGFA class II



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

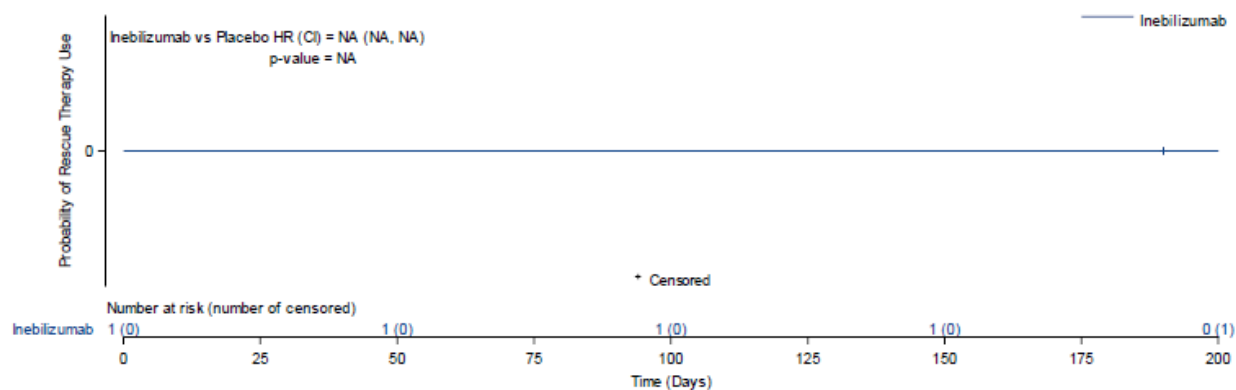
Subgroup = Baseline MGFA class III



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

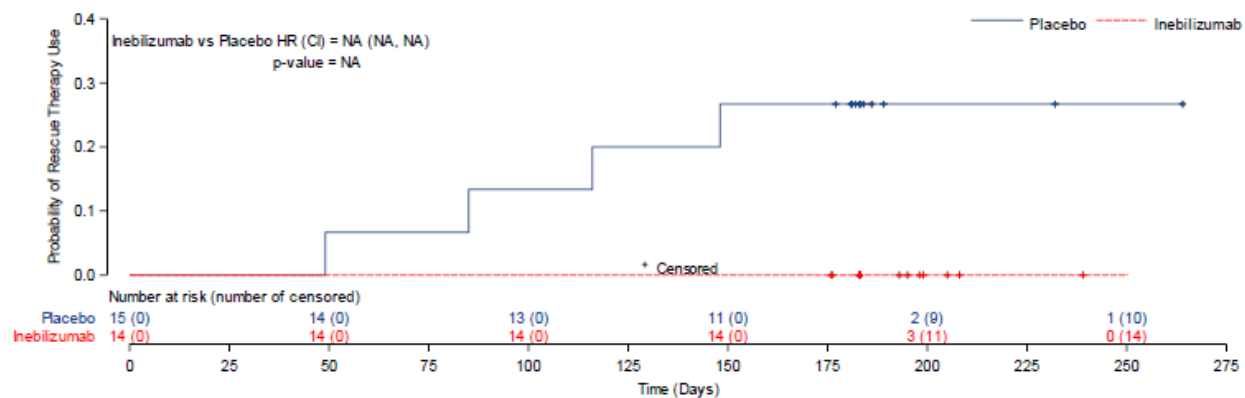
Subgroup = Baseline MGFA class IV



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

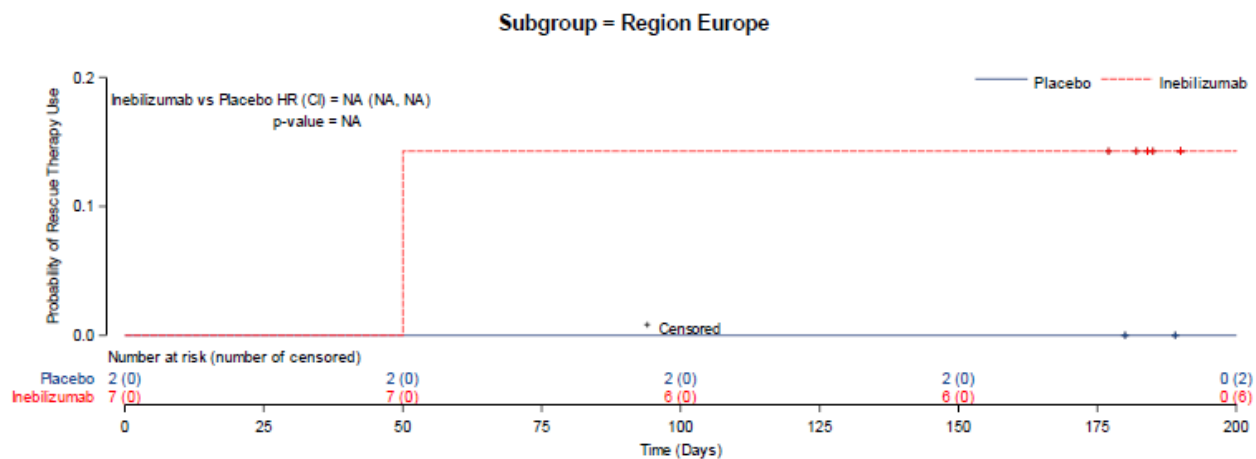
Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

Subgroup = Region Asia



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

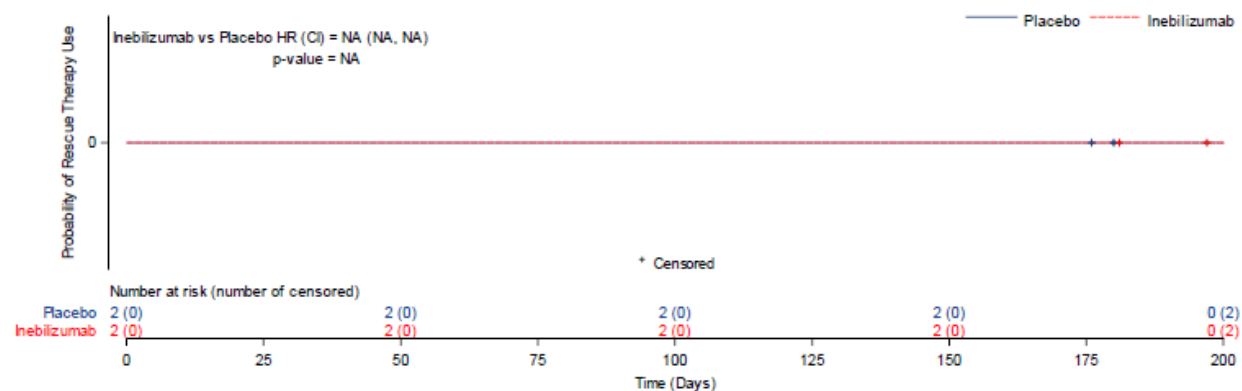
Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

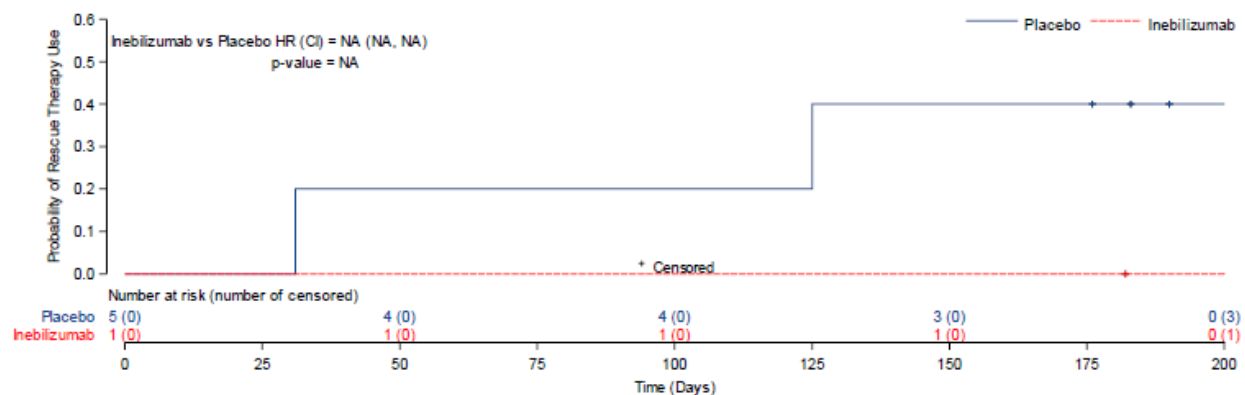
Subgroup = Region North America



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

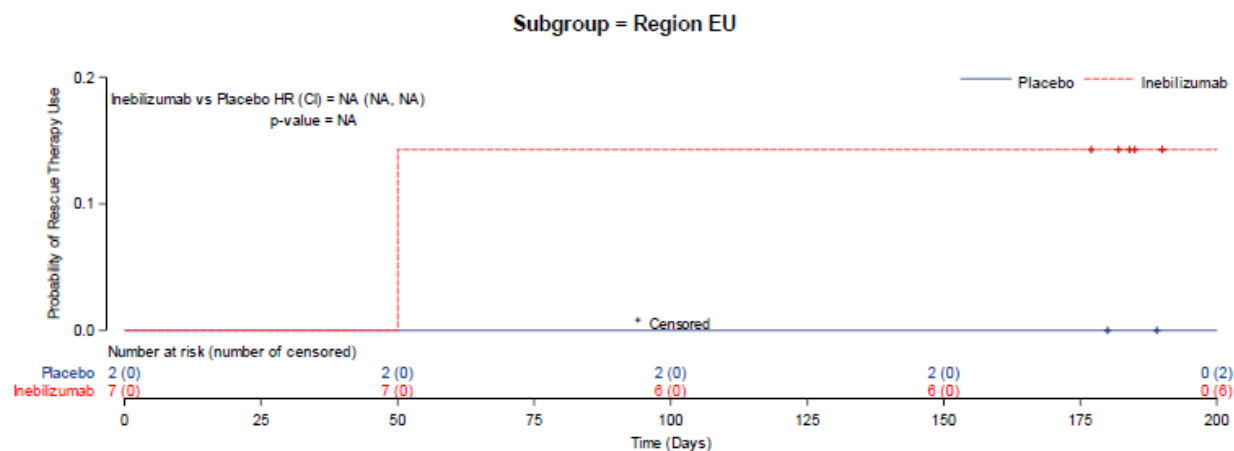
Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)

Subgroup = Region Rest of the world



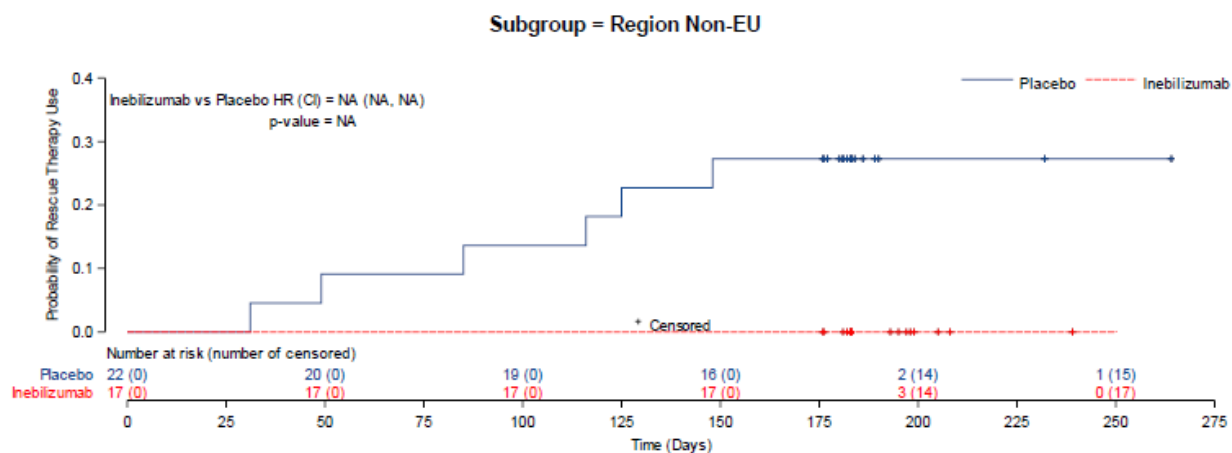
Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



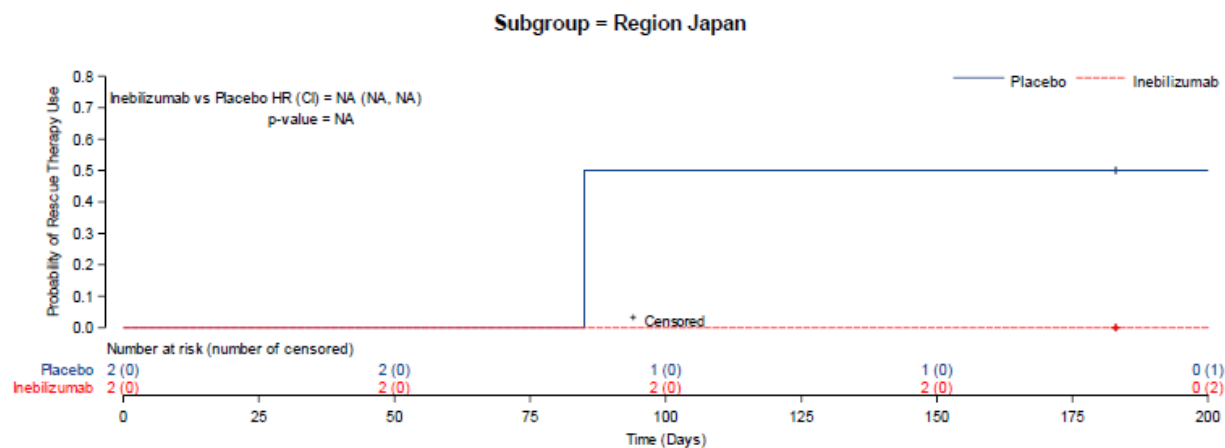
Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



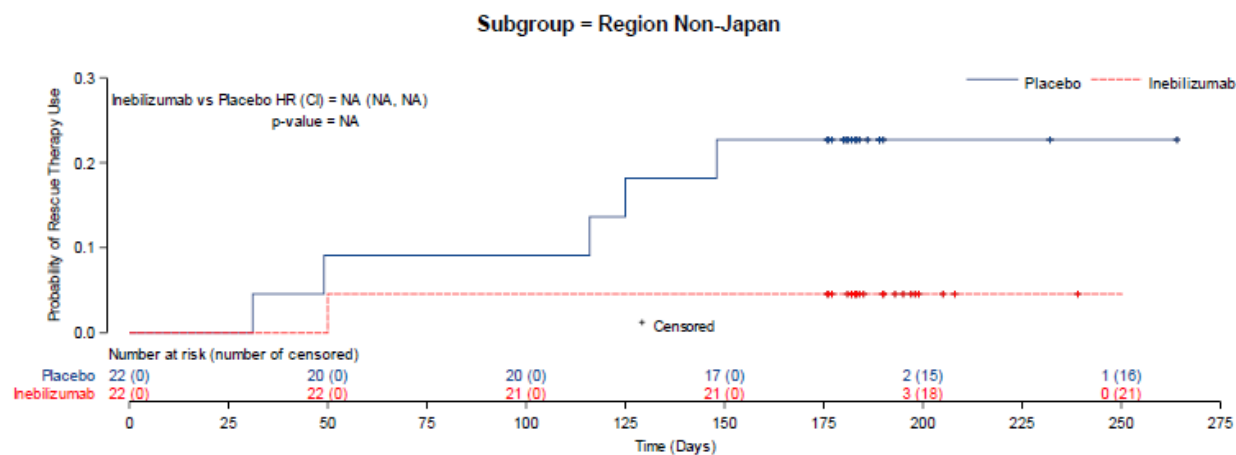
Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Figure 14-2.7.3.2.583. Subgroup Analysis: Kaplan Meier Plot for Time to First Rescue Therapy Use Using Treatment-policy Strategy by Week 26 Using Treatment-policy Strategy During Randomized Controlled Period (Full Analysis Set: MuSK+ Population)



Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.7 Steroid-Reduktion**1.7.1 Anteil an Patientinnen und Patienten mit einer Steroid-Reduktion auf ≤ 5 mg bei einer Steroid-Dosis von > 5 mg zur Baseline**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|----------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| $\geq 18 - < 65$ years | 50 / 54 (92.6) | 51 / 55 (92.7) | 0.90 (0.23, 3.49) | 0.8746 | 1.00 (0.88, 1.14) | 1.0000 | -0.39 (-5.17, 4.39) | 0.8738 | |
| ≥ 65 years | 6 / 6 (100.0) | 9 / 11 (81.8) | 0.30 (0.01, 8.64) | 0.4813 | 0.85 (0.54, 1.47) | 0.5147 | -15.26 (- 50.14, 19.62) | 0.3912 | |
| Sex | | | | | | | | | |
| Male | 26 / 29 (89.7) | 17 / 21 (81.0) | 0.58 (0.12, 2.75) | 0.4963 | 0.90 (0.66, 1.15) | 0.4341 | -6.90 (-27.21, 13.41) | 0.5056 | |
| Female | 30 / 31 (96.8) | 43 / 45 (95.6) | 0.78 (0.12, 5.12) | 0.7935 | 0.99 (0.88, 1.15) | 1.0000 | -1.12 (-9.35, 7.11) | 0.7892 | |
| Baseline steroid use | | | | | | | | | |
| Prednisone \leq 20 mg/day | 36 / 37 (97.3) | 41 / 45 (91.1) | 0.40 (0.07, 2.29) | 0.3013 | 0.94 (0.81, 1.07) | 0.3717 | -5.42 (-16.97, 6.14) | 0.3584 | |
| Prednisone $>$ 20 mg/day | 20 / 23 (87.0) | 19 / 21 (90.5) | 1.11 (0.20, 6.36) | 0.9032 | 1.04 (0.80, 1.36) | 1.0000 | 1.17 (-18.15, 20.49) | 0.9055 | |
| Baseline QMG | | | | | | | | | |
| QMG ≤ 15 | 23 / 23 (100.0) | 25 / 25 (100.0) | NA | NA | NA | NA | NA | NA | NA |
| QMG ≥ 16 | 31 / 35 (88.6) | 34 / 39 (87.2) | 0.75 (0.19, 2.97) | 0.6815 | 0.98 (0.81, 1.20) | 1.0000 | -2.64 (-15.13, 9.85) | 0.6789 | |
| Baseline MGFA class | | | | | | | | | |
| II | 21 / 23 (91.3) | 24 / 26 (92.3) | NA | NA | NA | NA | NA | NA | NA |
| III | 30 / 32 (93.8) | 34 / 38 (89.5) | NA | NA | NA | NA | NA | NA | NA |
| IV | 4 / 4 (100.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Asia | 23 / 26 (88.5) | 18 / 20 (90.0) | NA | NA | NA | NA | NA | NA | NA |
| Europe | 26 / 27 (96.3) | 29 / 30 (96.7) | NA | NA | NA | NA | NA | NA | NA |
| North America | 5 / 5 (100.0) | 8 / 11 (72.7) | NA | NA | NA | NA | NA | NA | NA |
| Rest of the world | 2 / 2 (100.0) | 5 / 5 (100.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| | | | | | | | | | 1.0000 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|----------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| EU | 26 / 27 (96.3) | 29 / 30 (96.7) | 0.92 (0.10, 8.68) | 0.9455 | 1.00 (0.86, 1.19) | 1.0000 | -0.21 (-6.32, 5.90) | 0.9455 | |
| Non-EU | 30 / 33 (90.9) | 31 / 36 (86.1) | 0.57 (0.14, 2.37) | 0.4409 | 0.95 (0.77, 1.15) | 0.7117 | -5.30 (-18.89, 8.30) | 0.4453 | |
| Region | | | | | | | | | NA |
| Japan | 0 / 0 (-) | 0 / 0 (-) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 56 / 60 (93.3) | 60 / 66 (90.9) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| >= 18 - < 65 years | 12 / 17 (70.6) | 14 / 15 (93.3) | NA | NA | NA | NA | NA | NA | |
| >= 65 years | 1 / 2 (50.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | 0.9138 |
| Male | 4 / 6 (66.7) | 5 / 5 (100.0) | 7.28 (0.14, 379.72) | 0.3251 | 1.43 (0.72, 3.09) | 0.4545 | 28.93 (-21.34, 79.21) | 0.2594 | |
| Female | 9 / 13 (69.2) | 11 / 12 (91.7) | 2.98 (0.35, 25.29) | 0.3162 | 1.32 (0.87, 2.20) | 0.3217 | 15.79 (-14.10, 45.67) | 0.3006 | |
| Baseline steroid use | | | | | | | | | 0.9454 |
| Prednisone <= 20 mg/day | 7 / 9 (77.8) | 14 / 15 (93.3) | 3.33 (0.32, 34.97) | 0.3153 | 1.20 (0.85, 2.08) | 0.5331 | 12.58 (-14.30, 39.47) | 0.3591 | |
| Prednisone > 20 mg/day | 6 / 10 (60.0) | 2 / 2 (100.0) | 3.61 (0.06, 223.30) | 0.5417 | 1.41 (0.49, 2.82) | 0.5152 | 25.42 (-37.53, 88.38) | 0.4286 | |
| Baseline QMG | | | | | | | | | 0.9203 |
| QMG <= 15 | 5 / 7 (71.4) | 9 / 9 (100.0) | 3.97 (0.11, 138.37) | 0.4470 | 1.38 (0.87, 2.69) | 0.1750 | 13.92 (-22.28, 50.12) | 0.4511 | |
| QMG >= 16 | 8 / 12 (66.7) | 6 / 6 (100.0) | 5.12 (0.26, 100.07) | 0.2817 | 1.42 (0.80, 2.43) | 0.2451 | 25.64 (-10.40, 61.69) | 0.1632 | |
| Baseline MGFA class | | | | | | | | | NA |
| II | 7 / 10 (70.0) | 10 / 10 (100.0) | NA | NA | NA | NA | NA | NA | |
| III | 6 / 9 (66.7) | 4 / 5 (80.0) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 0 (-) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|--|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| Asia | 10 / 13 (76.9) | 10 / 10 (100.0) | NA | NA | NA | NA | NA | NA | |
| Europe | 2 / 2 (100.0) | 4 / 5 (80.0) | NA | NA | NA | NA | NA | NA | |
| North America | 1 / 1 (100.0) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Rest of the world | 0 / 3 (0.0) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| EU | 2 / 2 (100.0) | 4 / 5 (80.0) | NA | NA | NA | NA | NA | NA | |
| Non-EU | 11 / 17 (64.7) | 12 / 12 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Japan | 1 / 1 (100.0) | 0 / 0 (-) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 12 / 18 (66.7) | 16 / 17 (94.1) | NA | NA | NA | NA | NA | NA | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects who had baseline steroid > 5 mg/day and were ongoing at that visit in each subgroup level. CI = Confidence interval.</p> <p>Baseline is defined as the last valid value on or prior to the 1st dose of Randomized controlled period.</p> <p>^a Based on logistic regression with treatment, baseline steroid use (Daily dose <= 5 mg vs > 5 mg), baseline QMG score (QMG <= 15 vs QMG >= 16), and baseline MG-ADL score as common covariates.</p> <p>95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> <p>If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.7.2 Anteil an Patientinnen und Patienten mit einer Steroid-Reduktion um $\geq 50\%$ bei einer Steroid-Dosis von > 5 mg zur Baseline

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| $\geq 18 - < 65$ years | 34 / 54 (63.0) | 34 / 55 (61.8) | 0.97 (0.44, 2.16) | 0.9487 | 0.98 (0.73, 1.32) | 1.0000 | -0.64 (-20.26, 18.97) | 0.9487 | |
| ≥ 65 years | 5 / 6 (83.3) | 8 / 11 (72.7) | 0.55 (0.05, 6.21) | 0.6253 | 0.87 (0.50, 1.76) | 1.0000 | -11.26 (-53.49, 30.97) | 0.6012 | |
| Sex | | | | | | | | | |
| Male | 17 / 29 (58.6) | 14 / 21 (66.7) | 1.41 (0.42, 4.67) | 0.5781 | 1.14 (0.72, 1.76) | 0.7685 | 8.05 (-19.99, 36.09) | 0.5737 | |
| Female | 22 / 31 (71.0) | 28 / 45 (62.2) | 0.70 (0.25, 1.92) | 0.4850 | 0.88 (0.63, 1.24) | 0.4703 | -8.67 (-32.58, 15.25) | 0.4775 | |
| Baseline steroid use | | | | | | | | | |
| Prednisone ≤ 20 mg/day | 19 / 37 (51.4) | 22 / 45 (48.9) | 0.97 (0.39, 2.39) | 0.9473 | 0.95 (0.62, 1.49) | 1.0000 | -0.74 (-22.72, 21.24) | 0.9474 | |
| Prednisone > 20 mg/day | 20 / 23 (87.0) | 20 / 21 (95.2) | 1.93 (0.27, 13.70) | 0.5127 | 1.10 (0.87, 1.41) | 0.6086 | 7.57 (-19.79, 34.92) | 0.5877 | |
| Baseline QMG | | | | | | | | | |
| QMG ≤ 15 | 13 / 23 (56.5) | 14 / 25 (56.0) | 1.19 (0.36, 3.93) | 0.7783 | 0.99 (0.60, 1.66) | 1.0000 | 3.59 (-21.31, 28.50) | 0.7773 | |
| QMG ≥ 16 | 24 / 35 (68.6) | 26 / 39 (66.7) | 0.86 (0.32, 2.28) | 0.7609 | 0.97 (0.70, 1.36) | 1.0000 | -2.39 (-17.77, 12.99) | 0.7605 | |
| Baseline MGFA class | | | | | | | | | |
| II | 12 / 23 (52.2) | 15 / 26 (57.7) | NA | NA | NA | NA | NA | NA | |
| III | 23 / 32 (71.9) | 25 / 38 (65.8) | NA | NA | NA | NA | NA | NA | |
| IV | 4 / 4 (100.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | |
| Asia | 16 / 26 (61.5) | 13 / 20 (65.0) | NA | NA | NA | NA | NA | NA | |
| Europe | 17 / 27 (63.0) | 20 / 30 (66.7) | NA | NA | NA | NA | NA | NA | |
| North America | 4 / 5 (80.0) | 7 / 11 (63.6) | NA | NA | NA | NA | NA | NA | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| Rest of the world | 2 / 2 (100.0) | 2 / 5 (40.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | 0.7121 |
| EU | 17 / 27 (63.0) | 20 / 30 (66.7) | 1.29 (0.42, 3.96) | 0.6529 | 1.06 (0.72, 1.60) | 0.7885 | 6.17 (-20.71, 33.06) | 0.6527 | |
| Non-EU | 22 / 33 (66.7) | 22 / 36 (61.1) | 0.83 (0.30, 2.31) | 0.7156 | 0.92 (0.63, 1.32) | 0.8024 | -4.69 (-29.71, 20.33) | 0.7135 | |
| Region | | | | | | | | | NA |
| Japan | 0 / 0 (-) | 0 / 0 (-) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 39 / 60 (65.0) | 42 / 66 (63.6) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| ≥ 18 - < 65 years | 11 / 17 (64.7) | 8 / 15 (53.3) | NA | NA | NA | NA | NA | NA | |
| ≥ 65 years | 1 / 2 (50.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | 1.0000 |
| Male | 4 / 6 (66.7) | 3 / 5 (60.0) | 1.08 (0.05, 22.48) | 0.9597 | 0.90 (0.32, 2.32) | 1.0000 | 1.79 (-67.57, 71.16) | 0.9596 | |
| Female | 8 / 13 (61.5) | 7 / 12 (58.3) | 0.65 (0.11, 3.78) | 0.6318 | 0.95 (0.47, 1.84) | 1.0000 | -10.08 (-51.02, 30.87) | 0.6296 | |
| Baseline steroid use | | | | | | | | | 0.6136 |
| Prednisone ≤ 20 mg/day | 5 / 9 (55.6) | 8 / 15 (53.3) | 0.95 (0.18, 5.09) | 0.9546 | 0.96 (0.46, 2.21) | 1.0000 | -1.21 (-42.85, 40.43) | 0.9546 | |
| Prednisone > 20 mg/day | 7 / 10 (70.0) | 2 / 2 (100.0) | 2.82 (0.04, 187.84) | 0.6282 | 1.22 (0.43, 2.27) | 1.0000 | 18.16 (-40.51, 76.83) | 0.5440 | |
| Baseline QMG | | | | | | | | | 1.0000 |
| QMG ≤ 15 | 5 / 7 (71.4) | 6 / 9 (66.7) | 0.27 (0.02, 3.95) | 0.3375 | 0.93 (0.46, 2.02) | 1.0000 | -25.76 (-74.08, 22.56) | 0.2961 | |
| QMG ≥ 16 | 7 / 12 (58.3) | 3 / 6 (50.0) | 0.74 (0.10, 5.33) | 0.7638 | 0.86 (0.30, 1.96) | 1.0000 | -7.52 (-56.57, 41.53) | 0.7638 | |
| Baseline MGFA class | | | | | | | | | NA |
| II | 5 / 10 (50.0) | 5 / 10 (50.0) | NA | NA | NA | NA | NA | NA | |
| III | 7 / 9 (77.8) | 4 / 5 (80.0) | NA | NA | NA | NA | NA | NA | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|--|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| IV | 0 / 0 (-) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Asia | 8 / 13 (61.5) | 7 / 10 (70.0) | NA | NA | NA | NA | NA | NA | |
| Europe | 2 / 2 (100.0) | 2 / 5 (40.0) | NA | NA | NA | NA | NA | NA | |
| North America | 1 / 1 (100.0) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Rest of the world | 1 / 3 (33.3) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| EU | 2 / 2 (100.0) | 2 / 5 (40.0) | NA | NA | NA | NA | NA | NA | |
| Non-EU | 10 / 17 (58.8) | 8 / 12 (66.7) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Japan | 1 / 1 (100.0) | 0 / 0 (-) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 11 / 18 (61.1) | 10 / 17 (58.8) | NA | NA | NA | NA | NA | NA | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log. MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects who had baseline steroid > 5 mg/day and were ongoing at that visit in each subgroup level. CI = Confidence interval. Baseline is defined as the last valid value on or prior to the 1st dose of Randomized controlled period.</p> <p>^a Based on logistic regression with treatment, baseline steroid use (Daily dose ≤ 5 mg vs > 5 mg), baseline QMG score (QMG ≤ 15 vs QMG ≥ 16), and baseline MG-ADL score as common covariates. 95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios. If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.8 Hospitalisierung**1.8.1 Hospitalisierung (Treatment-policy Strategie)**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| ACHR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 30 / 79 (38.0) | 13 / 76 (17.1) | - No data to report - | | | | | | 1.0000 |
| >= 65 years | 3 / 14 (21.4) | 2 / 19 (10.5) | | | | | | | |
| Sex | | | | | | | | | |
| Male | 15 / 45 (33.3) | 6 / 35 (17.1) | - No data to report - | | | | | | 0.7204 |
| Female | 18 / 48 (37.5) | 9 / 60 (15.0) | | | | | | | |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 17 / 54 (31.5) | 10 / 63 (15.9) | - No data to report - | | | | | | 0.4448 |
| Prednisone > 20 mg/day | 15 / 30 (50.0) | 4 / 27 (14.8) | | | | | | | |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 13 / 39 (33.3) | 4 / 38 (10.5) | - No data to report - | | | | | | 0.7087 |
| QMG >= 16 | 19 / 52 (36.5) | 10 / 55 (18.2) | | | | | | | |
| Baseline MGFA class | | | | | | | | | |
| II | 10 / 36 (27.8) | 4 / 43 (9.3) | - No data to report - | | | | | | 0.8449 |
| III | 18 / 49 (36.7) | 10 / 49 (20.4) | | | | | | | |
| IV | 5 / 7 (71.4) | 1 / 3 (33.3) | | | | | | | |
| Region | | | | | | | | | |
| Asia | 11 / 39 (28.2) | 6 / 30 (20.0) | - No data to report - | | | | | | 0.3482 |
| Europe | 17 / 39 (43.6) | 4 / 37 (10.8) | | | | | | | |
| North America | 4 / 12 (33.3) | 4 / 19 (21.1) | | | | | | | |
| Rest of the world | 1 / 3 (33.3) | 1 / 9 (11.1) | | | | | | | |
| Region | | | | | | | | | |
| EU | 17 / 39 (43.6) | 4 / 37 (10.8) | - No data to report - | | | | | | 0.1510 |
| Non-EU | 16 / 54 (29.6) | 11 / 58 (19.0) | | | | | | | |
| Region | | | | | | | | | |
| Japan | 1 / 1 (100.0) | 0 / 1 (0.0) | - No data to report - | | | | | | NA |
| Non-Japan | 32 / 92 (34.8) | 15 / 94 (16.0) | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 4 / 22 (18.2) | 2 / 21 (9.5) | - No data to report - | | | | | | NA |
| >= 65 years | 2 / 2 (100.0) | 1 / 3 (33.3) | | | | | | | |
| Sex | | | | | | | | | |
| Male | 4 / 7 (57.1) | 0 / 5 (0.0) | - No data to report - | | | | | | NA |
| Female | 2 / 17 (11.8) | 3 / 19 (15.8) | | | | | | | |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 1 / 13 (7.7) | 1 / 19 (5.3) | - No data to report - | | | | | | NA |
| Prednisone > 20 mg/day | 5 / 10 (50.0) | 1 / 2 (50.0) | | | | | | | |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 2 / 9 (22.2) | 2 / 13 (15.4) | - No data to report - | | | | | | NA |
| QMG >= 16 | 4 / 15 (26.7) | 0 / 9 (0.0) | | | | | | | |
| Baseline MGFA class | | | | | | | | | |
| II | 4 / 12 (33.3) | 1 / 13 (7.7) | - No data to report - | | | | | | NA |
| III | 2 / 12 (16.7) | 2 / 9 (22.2) | | | | | | | |
| IV | 0 / 0 (-) | 0 / 1 (0.0) | | | | | | | |
| Region | | | | | | | | | |
| Asia | 3 / 15 (20.0) | 1 / 14 (7.1) | - No data to report - | | | | | | NA |
| Europe | 1 / 2 (50.0) | 2 / 7 (28.6) | | | | | | | |
| North America | 0 / 2 (0.0) | 0 / 2 (0.0) | | | | | | | |
| Rest of the world | 2 / 5 (40.0) | 0 / 1 (0.0) | | | | | | | |
| Region | | | | | | | | | |
| EU | 1 / 2 (50.0) | 2 / 7 (28.6) | - No data to report - | | | | | | NA |
| Non-EU | 5 / 22 (22.7) | 1 / 17 (5.9) | | | | | | | |
| Region | | | | | | | | | |
| Japan | 1 / 2 (50.0) | 0 / 2 (0.0) | - No data to report - | | | | | | NA |

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|---|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| Non-Japan | 5 / 22 (22.7) | 3 / 22 (13.6) | | | | | | | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log. MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of subjects with observed data. N1 = Number of subjects in each subgroup level. The denominator of the percentage is the N1 under each subgroup. IVIg = Intravenous immunoglobulin. PLEX = Plasma exchange. ER = Emergency room. ^a Interaction p-value was based on Zelen's exact test for equal odds ratios. If Zero cell correction applied, interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.9 Patient Global Impression of Change (PGIC)**1.9.1 Anteil an Patientinnen und Patienten mit Verbesserung im PGIC (Composite Strategie; Kategorien: sehr stark verbessert oder stark verbessert)**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|-----------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 17 / 59 (28.8) | 38 / 59 (64.4) | 4.23 (1.93, 9.26) | 0.0003 | 2.24 (1.47, 3.54) | 0.0002 | 34.40 (17.18, 51.63) | <0.0001 | 0.2743 |
| >= 65 years | 3 / 7 (42.9) | 7 / 15 (46.7) | 1.57 (0.19, 13.06) | 0.6767 | 1.09 (0.44, 3.26) | 1.0000 | 9.52 (-32.79, 51.82) | 0.6593 | |
| Sex | | | | | | | | | |
| Male | 13 / 34 (38.2) | 14 / 24 (58.3) | 1.93 (0.64, 5.82) | 0.2421 | 1.53 (0.88, 2.65) | 0.1828 | 16.20 (-10.57, 42.96) | 0.2356 | |
| Female | 7 / 32 (21.9) | 31 / 50 (62.0) | 5.52 (1.96, 15.55) | 0.0012 | 2.83 (1.52, 5.79) | 0.0006 | 39.66 (18.92, 60.41) | 0.0002 | |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 16 / 42 (38.1) | 29 / 50 (58.0) | 2.11 (0.91, 4.91) | 0.0837 | 1.52 (0.99, 2.44) | 0.0636 | 18.43 (-1.95, 38.80) | 0.0763 | 0.1087 |
| Prednisone > 20 mg/day | 3 / 21 (14.3) | 14 / 21 (66.7) | 8.79 (1.92, 40.16) | 0.0050 | 4.67 (1.78, 13.82) | 0.0013 | 49.04 (21.38, 76.70) | 0.0005 | |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 7 / 26 (26.9) | 15 / 26 (57.7) | 3.57 (1.10, 11.60) | 0.0344 | 2.14 (1.10, 4.47) | 0.0483 | 30.54 (4.01, 57.08) | 0.0241 | |
| QMG >= 16 | 13 / 38 (34.2) | 29 / 46 (63.0) | 3.14 (1.25, 7.88) | 0.0146 | 1.84 (1.16, 3.09) | 0.0154 | 27.86 (6.62, 49.09) | 0.0101 | |
| Baseline MGFA class | | | | | | | | | |
| II | 8 / 27 (29.6) | 16 / 32 (50.0) | NA | NA | NA | NA | NA | NA | NA |
| III | 12 / 33 (36.4) | 28 / 39 (71.8) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 5 (0.0) | 1 / 3 (33.3) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | |
| Asia | 13 / 26 (50.0) | 14 / 22 (63.6) | NA | NA | NA | NA | NA | NA | |
| Europe | 2 / 29 (6.9) | 18 / 31 (58.1) | NA | NA | NA | NA | NA | NA | |
| North America | 5 / 9 (55.6) | 8 / 14 (57.1) | NA | NA | NA | NA | NA | NA | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| Rest of the world | 0 / 2 (0.0) | 5 / 7 (71.4) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | 0.0109 |
| EU | 2 / 29 (6.9) | 18 / 31 (58.1) | 16.55 (3.34, 81.98) | 0.0006 | 8.42 (2.52, 31.14) | <0.0001 | 52.70 (26.39, 79.01) | <0.0001 | |
| Non-EU | 18 / 37 (48.6) | 27 / 43 (62.8) | 1.65 (0.67, 4.09) | 0.2759 | 1.29 (0.87, 1.98) | 0.2600 | 12.41 (-9.75, 34.58) | 0.2724 | |
| Region | | | | | | | | | NA |
| Japan | 0 / 0 (-) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 20 / 66 (30.3) | 44 / 73 (60.3) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| >= 18 - < 65 years | 10 / 19 (52.6) | 14 / 21 (66.7) | NA | NA | NA | NA | NA | NA | |
| >= 65 years | 0 / 2 (0.0) | 1 / 3 (33.3) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | 1.0000 |
| Male | 3 / 7 (42.9) | 3 / 5 (60.0) | ND | ND | 1.40 (0.44, 4.34) | 1.0000 | ND | ND | |
| Female | 7 / 14 (50.0) | 12 / 19 (63.2) | 1.83 (0.42, 7.97) | 0.4233 | 1.26 (0.70, 2.51) | 0.4969 | 14.85 (-21.13, 50.83) | 0.4185 | |
| Baseline steroid use | | | | | | | | | 1.0000 |
| Prednisone <= 20 mg/day | 5 / 11 (45.5) | 13 / 19 (68.4) | 2.39 (0.51, 11.22) | 0.2701 | 1.51 (0.80, 3.36) | 0.2663 | 21.20 (-15.67, 58.08) | 0.2598 | |
| Prednisone > 20 mg/day | 4 / 9 (44.4) | 1 / 2 (50.0) | 1.17 (0.04, 33.09) | 0.9257 | 1.13 (0.19, 3.69) | 1.0000 | 3.96 (-79.46, 87.38) | 0.9258 | |
| Baseline QMG | | | | | | | | | 0.5363 |
| QMG <= 15 | 4 / 8 (50.0) | 7 / 13 (53.8) | 1.22 (0.18, 8.22) | 0.8357 | 1.08 (0.48, 2.76) | 1.0000 | 5.03 (-42.32, 52.37) | 0.8352 | |
| QMG >= 16 | 6 / 13 (46.2) | 7 / 9 (77.8) | 3.35 (0.49, 22.75) | 0.2165 | 1.69 (0.83, 3.53) | 0.2031 | 27.76 (-13.02, 68.54) | 0.1821 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|---|-----------------------|----------------------------|--------------------------|---------|-----------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| Baseline MGFA class | | | | | | | | | |
| II | 5 / 10 (50.0) | 8 / 13 (61.5) | NA | NA | NA | NA | NA | NA | |
| III | 5 / 11 (45.5) | 6 / 9 (66.7) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 0 (-) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | |
| Asia | 5 / 13 (38.5) | 10 / 14 (71.4) | NA | NA | NA | NA | NA | NA | |
| Europe | 2 / 2 (100.0) | 3 / 7 (42.9) | NA | NA | NA | NA | NA | NA | |
| North America | 1 / 2 (50.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | |
| Rest of the world | 2 / 4 (50.0) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | |
| EU | 2 / 2 (100.0) | 3 / 7 (42.9) | NA | NA | NA | NA | NA | NA | |
| Non-EU | 8 / 19 (42.1) | 12 / 17 (70.6) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | |
| Japan | 0 / 1 (0.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 10 / 20 (50.0) | 13 / 22 (59.1) | NA | NA | NA | NA | NA | NA | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>PGIC = Patient Global Impression of Change. MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. N = Number of subjects in analysis set. n = Number of responders. N1 = Number of subjects with assessment in each subgroup level. CI = Confidence interval. RCP = Randomized controlled period.</p> <p>Composite strategy: The analyses include all data collected by Week 26. If a subject used rescue therapy after Day 28 during RCP, the data collected on or after the initiation of the rescue therapy were imputed using the subject's worst observation collected.</p> <p>^a Based on logistic regression with treatment, baseline steroid use (Daily dose ≤ 5 mg vs > 5 mg), baseline QMG score (QMG ≤ 15 vs QMG ≥ 16), and baseline MG-ADL score as common covariates.</p> <p>95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> <p>If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.10 Neuro-QoL Fatigue**1.10.1 Anteil an Patientinnen und Patienten mit Verbesserung des Neuro-QoL Fatigue um ≥ 12 Punkte (keine Rescue-Therapie)**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|-----------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| ≥ 18 - < 65 years | 16 / 68 (23.5) | 25 / 62 (40.3) | 2.65 (1.21, 5.84) | 0.0154 | 1.71 (1.03, 2.91) | 0.0582 | 20.93 (4.19, 37.68) | 0.0143 | |
| ≥ 65 years | 2 / 10 (20.0) | 6 / 17 (35.3) | 1.11 (0.11, 11.24) | 0.9326 | 1.76 (0.52, 6.94) | 0.6655 | 2.30 (-50.62, 55.23) | 0.9320 | |
| Sex | | | | | | | | | |
| Male | 11 / 39 (28.2) | 10 / 27 (37.0) | 1.51 (0.48, 4.77) | 0.4869 | 1.31 (0.65, 2.61) | 0.5918 | 8.51 (-16.00, 33.01) | 0.4963 | 0.4693 |
| Female | 7 / 39 (17.9) | 21 / 52 (40.4) | 3.15 (1.14, 8.67) | 0.0264 | 2.25 (1.12, 4.79) | 0.0241 | 23.92 (4.55, 43.28) | 0.0155 | |
| Baseline steroid use | | | | | | | | | |
| Prednisone \leq 20 mg/day | 12 / 47 (25.5) | 21 / 52 (40.4) | 2.15 (0.88, 5.27) | 0.0935 | 1.58 (0.89, 2.88) | 0.1385 | 17.14 (-2.46, 36.75) | 0.0866 | 1.0000 |
| Prednisone > 20 mg/day | 6 / 26 (23.1) | 8 / 24 (33.3) | ND | ND | 1.44 (0.60, 3.52) | 0.5330 | ND | ND | |
| Baseline QMG | | | | | | | | | |
| QMG ≤ 15 | 7 / 31 (22.6) | 10 / 29 (34.5) | 1.88 (0.55, 6.51) | 0.3168 | 1.53 (0.69, 3.46) | 0.3937 | 13.82 (-13.19, 40.83) | 0.3161 | 1.0000 |
| QMG ≥ 16 | 11 / 45 (24.4) | 20 / 48 (41.7) | 2.48 (0.99, 6.21) | 0.0531 | 1.70 (0.94, 3.17) | 0.1227 | 19.85 (0.45, 39.25) | 0.0449 | |
| Baseline MGFA class | | | | | | | | | |
| II | 6 / 29 (20.7) | 15 / 35 (42.9) | 2.50 (0.72, 8.67) | 0.1496 | 2.07 (0.97, 4.70) | 0.0687 | 19.09 (-6.03, 44.22) | 0.1364 | 0.4995 |
| III | 11 / 41 (26.8) | 15 / 41 (36.6) | 1.59 (0.60, 4.16) | 0.3498 | 1.36 (0.72, 2.61) | 0.4769 | 9.83 (-10.84, 30.50) | 0.3511 | |
| IV | 0 / 7 (0.0) | 1 / 3 (33.3) | ND | ND | 6.00 (0.57, 65.88) | 0.3000 | ND | ND | |
| Region | | | | | | | | | |
| Asia | 10 / 31 (32.3) | 11 / 26 (42.3) | 1.25 (0.40, 3.93) | 0.6973 | 1.31 (0.67, 2.58) | 0.5823 | 4.07 (-16.73, 24.86) | 0.7014 | 0.2824 |
| Europe | 3 / 33 (9.1) | 12 / 32 (37.5) | 7.37 (1.70, 31.95) | 0.0076 | 4.13 (1.41, 12.81) | 0.0084 | 35.74 (9.27, 62.22) | 0.0081 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| North America | 5 / 11 (45.5) | 6 / 14 (42.9) | 1.28 (0.23, 7.24) | 0.7816 | 0.94 (0.39, 2.35) | 1.0000 | 6.12 (-37.03, 49.26) | 0.7811 | |
| Rest of the world | 0 / 3 (0.0) | 2 / 7 (28.6) | ND | ND | 2.50 (0.32, 26.21) | 1.0000 | ND | ND | |
| Region | | | | | | | | | 0.1302 |
| EU | 3 / 33 (9.1) | 12 / 32 (37.5) | 7.37 (1.70, 31.95) | 0.0076 | 4.13 (1.41, 12.81) | 0.0084 | 35.74 (9.27, 62.22) | 0.0081 | |
| Non-EU | 15 / 45 (33.3) | 19 / 47 (40.4) | 1.36 (0.57, 3.27) | 0.4915 | 1.21 (0.71, 2.09) | 0.5226 | 7.17 (-13.13, 27.47) | 0.4887 | |
| Region | | | | | | | | | NA |
| Japan | 0 / 1 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 18 / 77 (23.4) | 31 / 78 (39.7) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| ≥ 18 - < 65 years | 8 / 20 (40.0) | 12 / 21 (57.1) | NA | NA | NA | NA | NA | NA | |
| ≥ 65 years | 0 / 2 (0.0) | 1 / 3 (33.3) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | 0.0608 |
| Male | 4 / 7 (57.1) | 1 / 5 (20.0) | ND | ND | 0.35 (0.06, 1.56) | 0.2929 | ND | ND | |
| Female | 4 / 15 (26.7) | 12 / 19 (63.2) | 2.79 (0.59, 13.19) | 0.1942 | 2.37 (1.06, 6.08) | 0.0454 | 25.10 (-11.01, 61.21) | 0.1731 | |
| Baseline steroid use | | | | | | | | | 0.2032 |
| Prednisone ≤ 20 mg/day | 4 / 12 (33.3) | 12 / 19 (63.2) | 3.22 (0.60, 17.21) | 0.1722 | 1.89 (0.89, 4.80) | 0.1489 | 27.16 (-10.82, 65.14) | 0.1611 | |
| Prednisone > 20 mg/day | 3 / 9 (33.3) | 0 / 2 (0.0) | ND | ND | 0.48 (0.05, 3.08) | 1.0000 | ND | ND | |
| Baseline QMG | | | | | | | | | 0.2537 |
| QMG ≤ 15 | 3 / 8 (37.5) | 5 / 13 (38.5) | 1.21 (0.17, 8.78) | 0.8497 | 1.03 (0.36, 3.27) | 1.0000 | 4.65 (-43.13, 52.43) | 0.8488 | |
| QMG ≥ 16 | 5 / 14 (35.7) | 7 / 9 (77.8) | 6.34 (0.64, 63.12) | 0.1150 | 2.18 (1.00, 5.00) | 0.0894 | 38.40 (-3.94, 80.74) | 0.0755 | |
| Baseline MGFA class | | | | | | | | | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|----------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| II | 4 / 11 (36.4) | 7 / 13 (53.8) | NA | NA | NA | NA | NA | NA | |
| III | 4 / 11 (36.4) | 5 / 9 (55.6) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 0 (-) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Asia | 4 / 14 (28.6) | 7 / 14 (50.0) | NA | NA | NA | NA | NA | NA | |
| Europe | 1 / 2 (50.0) | 4 / 7 (57.1) | NA | NA | NA | NA | NA | NA | |
| North America | 2 / 2 (100.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | |
| Rest of the world | 1 / 4 (25.0) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| EU | 1 / 2 (50.0) | 4 / 7 (57.1) | NA | NA | NA | NA | NA | NA | |
| Non-EU | 7 / 20 (35.0) | 9 / 17 (52.9) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Japan | 0 / 1 (0.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 8 / 21 (38.1) | 11 / 22 (50.0) | NA | NA | NA | NA | NA | NA | |

Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

Neuro-QoL = Quality of Life in Neurological Disorders. MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects with assessment in each subgroup level. CI = Confidence interval.

Baseline is defined as the last valid value on or prior to the 1st dose of Randomized controlled period.

If a subject used rescue therapy between Day 28 and Week 26 or discontinued from the study before Week 26, the subject was considered as a non-responder.

^a Based on logistic regression with treatment, baseline steroid use (Daily dose <= 5 mg vs > 5 mg), baseline QMG score (QMG <= 15 vs QMG >= 16), baseline MGADL score, and baseline Neuro-QoL Fatigue score as common covariates.

95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.

If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.11 Myasthenia gravis Quality of Life-15, revised (MG-QoL-15r)**1.11.1 Anteil an Patientinnen und Patienten mit Verbesserung des MG-QoL-15r um ≥ 5 Punkte (keine Rescue-Therapie)**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|-------------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| ≥ 18 - < 65 years | 20 / 68 (29.4) | 30 / 62 (48.4) | 2.80 (1.30, 6.02) | 0.0086 | 1.65 (1.06, 2.59) | 0.0312 | 24.94 (7.05, 42.82) | 0.0063 | |
| ≥ 65 years | 1 / 10 (10.0) | 6 / 17 (35.3) | 2.35 (0.20, 27.44) | 0.4955 | 3.53 (0.71, 21.18) | 0.2040 | 14.77 (-22.43, 51.97) | 0.4365 | |
| Sex | | | | | | | | | |
| Male | 14 / 39 (35.9) | 9 / 27 (33.3) | 1.06 (0.34, 3.24) | 0.9226 | 0.93 (0.46, 1.78) | 1.0000 | 1.27 (-24.48, 27.03) | 0.9227 | 0.0349 |
| Female | 7 / 39 (17.9) | 27 / 52 (51.9) | 4.90 (1.79, 13.41) | 0.0020 | 2.89 (1.48, 6.02) | 0.0010 | 35.37 (15.76, 54.99) | 0.0004 | |
| Baseline steroid use | | | | | | | | | |
| Prednisone \leq 20 mg/day | 16 / 47 (34.0) | 24 / 52 (46.2) | 1.81 (0.77, 4.25) | 0.1728 | 1.36 (0.84, 2.25) | 0.3052 | 14.45 (-6.00, 34.91) | 0.1661 | 0.2648 |
| Prednisone > 20 mg/day | 4 / 26 (15.4) | 11 / 24 (45.8) | 4.26 (1.10, 16.49) | 0.0359 | 2.98 (1.18, 8.05) | 0.0302 | 30.25 (3.79, 56.70) | 0.0251 | |
| Baseline QMG | | | | | | | | | |
| QMG \leq 15 | 10 / 31 (32.3) | 12 / 29 (41.4) | 1.61 (0.52, 4.98) | 0.4087 | 1.28 (0.66, 2.51) | 0.5933 | 11.54 (-15.67, 38.74) | 0.4059 | 0.4821 |
| QMG \geq 16 | 11 / 45 (24.4) | 23 / 48 (47.9) | 3.12 (1.24, 7.81) | 0.0152 | 1.96 (1.11, 3.59) | 0.0305 | 25.98 (6.11, 45.85) | 0.0104 | |
| Baseline MGFA class | | | | | | | | | |
| II | 8 / 29 (27.6) | 14 / 35 (40.0) | 1.74 (0.54, 5.61) | 0.3518 | 1.45 (0.73, 3.00) | 0.4283 | 12.21 (-12.99, 37.40) | 0.3424 | 0.2962 |
| III | 13 / 41 (31.7) | 20 / 41 (48.8) | 2.10 (0.82, 5.40) | 0.1219 | 1.54 (0.90, 2.69) | 0.1763 | 18.30 (-4.39, 41.00) | 0.1140 | |
| IV | 0 / 7 (0.0) | 2 / 3 (66.7) | ND | ND | 10.00 (1.14, 100.51) | 0.0667 | ND | ND | |
| Region | | | | | | | | | |
| Asia | 12 / 31 (38.7) | 13 / 26 (50.0) | 1.55 (0.51, 4.77) | 0.4424 | 1.29 (0.72, 2.34) | 0.4323 | 10.54 (-16.43, 37.52) | 0.4436 | 0.1914 |
| Europe | 3 / 33 (9.1) | 12 / 32 (37.5) | 6.15 (1.51, 25.06) | 0.0112 | 4.13 (1.41, 12.81) | 0.0084 | 34.72 (8.28, 61.17) | 0.0101 | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| North America | 6 / 11 (54.5) | 7 / 14 (50.0) | 0.87 (0.16, 4.81) | 0.8762 | 0.92 (0.43, 2.03) | 1.0000 | -3.37 (-45.74, 39.00) | 0.8761 | |
| Rest of the world | 0 / 3 (0.0) | 4 / 7 (57.1) | ND | ND | 4.50 (0.70, 44.25) | 0.2000 | ND | ND | |
| Region | | | | | | | | | 0.1417 |
| EU | 3 / 33 (9.1) | 12 / 32 (37.5) | 6.15 (1.51, 25.06) | 0.0112 | 4.13 (1.41, 12.81) | 0.0084 | 34.72 (8.28, 61.17) | 0.0101 | |
| Non-EU | 18 / 45 (40.0) | 24 / 47 (51.1) | 1.65 (0.69, 3.96) | 0.2621 | 1.28 (0.82, 2.03) | 0.3040 | 12.43 (-9.06, 33.93) | 0.2569 | |
| Region | | | | | | | | | NA |
| Japan | 0 / 1 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 21 / 77 (27.3) | 36 / 78 (46.2) | NA | NA | NA | NA | NA | NA | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | NA |
| ≥ 18 - < 65 years | 9 / 20 (45.0) | 14 / 21 (66.7) | NA | NA | NA | NA | NA | NA | |
| ≥ 65 years | 0 / 2 (0.0) | 1 / 3 (33.3) | NA | NA | NA | NA | NA | NA | |
| Sex | | | | | | | | | 0.0480 |
| Male | 4 / 7 (57.1) | 1 / 5 (20.0) | ND | ND | 0.35 (0.06, 1.56) | 0.2929 | ND | ND | |
| Female | 5 / 15 (33.3) | 14 / 19 (73.7) | 3.87 (0.79, 19.10) | 0.0963 | 2.21 (1.13, 5.02) | 0.0359 | 31.51 (-4.13, 67.15) | 0.0831 | |
| Baseline steroid use | | | | | | | | | 1.0000 |
| Prednisone ≤ 20 mg/day | 5 / 12 (41.7) | 12 / 19 (63.2) | 2.47 (0.50, 12.14) | 0.2670 | 1.52 (0.77, 3.45) | 0.2883 | 20.63 (-15.80, 57.07) | 0.2670 | |
| Prednisone > 20 mg/day | 3 / 9 (33.3) | 1 / 2 (50.0) | 2.99 (0.09, 104.74) | 0.5456 | 1.50 (0.25, 5.68) | 1.0000 | 26.37 (-51.70, 104.44) | 0.5080 | |
| Baseline QMG | | | | | | | | | 1.0000 |
| QMG ≤ 15 | 3 / 8 (37.5) | 7 / 13 (53.8) | 1.60 (0.24, 10.89) | 0.6310 | 1.44 (0.57, 4.28) | 0.6594 | 11.69 (-35.54, 58.92) | 0.6275 | |
| QMG ≥ 16 | 6 / 14 (42.9) | 7 / 9 (77.8) | 7.11 (0.51, 99.67) | 0.1456 | 1.81 (0.88, 3.83) | 0.1968 | 34.77 (-15.21, 84.75) | 0.1727 | |
| Baseline MGFA class | | | | | | | | | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | Treatment by Subgroup Interaction p- value |
|----------------------|-----------------------|----------------------------|--------------------------|---------|--------------------|---------|----------------------------------|---------|---|
| | | | Odds Ratio ^a | | Risk Ratio | | Risk Difference ^a (%) | | |
| | | | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | Pt Est (95% CI) | p-value | |
| II | 3 / 11 (27.3) | 7 / 13 (53.8) | NA | NA | NA | NA | NA | NA | |
| III | 6 / 11 (54.5) | 7 / 9 (77.8) | NA | NA | NA | NA | NA | NA | |
| IV | 0 / 0 (-) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Asia | 5 / 14 (35.7) | 8 / 14 (57.1) | NA | NA | NA | NA | NA | NA | |
| Europe | 1 / 2 (50.0) | 5 / 7 (71.4) | NA | NA | NA | NA | NA | NA | |
| North America | 1 / 2 (50.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | |
| Rest of the world | 2 / 4 (50.0) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| EU | 1 / 2 (50.0) | 5 / 7 (71.4) | NA | NA | NA | NA | NA | NA | |
| Non-EU | 8 / 20 (40.0) | 10 / 17 (58.8) | NA | NA | NA | NA | NA | NA | |
| Region | | | | | | | | | NA |
| Japan | 0 / 1 (0.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | |
| Non-Japan | 9 / 21 (42.9) | 13 / 22 (59.1) | NA | NA | NA | NA | NA | NA | |

Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.

MG-QoL15r = Myasthenia Gravis Quality of Life-15, revised. MG-ADL = Myasthenia Gravis Activities of Daily Living. QMG = Quantitative Myasthenia Gravis. n = Number of responders. N1 = Number of subjects with assessment in each subgroup level. CI = Confidence interval.

Baseline is defined as the last valid value on or prior to the 1st dose of Randomized controlled period.

If a subject used rescue therapy between Day 28 and Week 26 or discontinued from the study before Week 26, the subject was considered as a non-responder.

^a Based on logistic regression with treatment, baseline steroid use (Daily dose <= 5 mg vs > 5 mg), baseline QMG score (QMG <= 15 vs QMG >= 16), baseline MGADL score, and baseline MG-QoL score as common covariates.

95% CI for risk ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.

If Zero cell correction applied, 95% CI for risk ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.12 Sicherheitsrelevante Endpunkte**1.12.1 Gesamtraten: UE**

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|----------------|------------|--------------|---------------------|-----------------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 62 / 81 (76.5) | 61 / 76 (80.3) | 1.25 | (0.59, 2.65) | 1.05 | (0.88, 1.24) | 3.72 | (-9.35, 16.60) | 0.3772 |
| >= 65 years | 8 / 14 (57.1) | 16 / 19 (84.2) | 4.00 | (0.84, 18.73) | 1.47 | (0.95, 2.64) | 27.07 | (-3.68, 55.35) | 0.6987 |
| Sex | | | | | | | | | |
| Male | 36 / 46 (78.3) | 28 / 35 (80.0) | 1.11 | (0.38, 3.19) | 1.02 | (0.79, 1.29) | 1.74 | (-17.06, 19.23) | 0.4807 |
| Female | 34 / 49 (69.4) | 49 / 60 (81.7) | 1.97 | (0.82, 4.73) | 1.18 | (0.95, 1.50) | 12.28 | (-3.80, 28.62) | 1.0000 |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 35 / 55 (63.6) | 48 / 63 (76.2) | 1.83 | (0.83, 4.03) | 1.20 | (0.94, 1.55) | 12.55 | (-3.96, 28.83) | 0.1601 |
| Prednisone > 20 mg/day | 26 / 31 (83.9) | 24 / 27 (88.9) | 1.54 | (0.36, 6.47) | 1.06 | (0.84, 1.35) | 5.02 | (-14.45, 23.65) | 0.7119 |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 27 / 39 (69.2) | 27 / 38 (71.1) | 1.09 | (0.42, 2.85) | 1.03 | (0.76, 1.39) | 1.82 | (-18.56, 22.00) | 0.4767 |
| QMG >= 16 | 40 / 53 (75.5) | 48 / 55 (87.3) | 2.23 | (0.83, 5.96) | 1.16 | (0.96, 1.42) | 11.80 | (-2.96, 26.74) | 1.0000 |
| Baseline MGFA class | | | | | | | | | |
| II | 25 / 36 (69.4) | 34 / 43 (79.1) | 1.66 | (0.61, 4.53) | 1.14 | (0.88, 1.53) | 9.63 | (-9.59, 29.05) | 0.1406 |
| III | 39 / 49 (79.6) | 41 / 49 (83.7) | 1.31 | (0.48, 3.58) | 1.05 | (0.86, 1.29) | 4.08 | (-11.62, 19.79) | 0.4369 |
| IV | 5 / 8 (62.5) | 2 / 3 (66.7) | 1.20 | (0.10, 12.94) | 1.07 | (0.31, 2.55) | 4.17 | (-52.62, 51.71) | 0.7948 |
| Region | | | | | | | | | |
| Asia | 29 / 40 (72.5) | 27 / 30 (90.0) | 3.41 | (0.91, 12.55) | 1.24 | (0.98, 1.60) | 17.50 | (-1.61, 34.91) | 1.0000 |
| Europe | 28 / 40 (70.0) | 23 / 37 (62.2) | 0.70 | (0.28, 1.80) | 0.89 | (0.63, 1.23) | -7.84 | (-28.44, 13.17) | 0.0805 |
| North America | 11 / 12 (91.7) | 18 / 19 (94.7) | 1.64 | (0.16, 17.31) | 1.03 | (0.81, 1.48) | 3.07 | (-18.01, 31.00) | 0.4819 |
| Rest of the world | 2 / 3 (66.7) | 9 / 9 (100.0) | 11.40 | (0.65, 172.05) | 1.52 | (0.90, 4.36) | 32.50 | (-8.12, 74.71) | 1.0000 |
| Region | | | | | | | | | |
| EU | 28 / 40 (70.0) | 23 / 37 (62.2) | 0.70 | (0.28, 1.80) | 0.89 | (0.63, 1.23) | -7.84 | (-28.44, 13.17) | 0.0314 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------------|------------|--------------|---------------------|-----------------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| Non-EU | 42 / 55 (76.4) | 54 / 58 (93.1) | 4.18 | (1.33, 13.04) | 1.22 | (1.05, 1.48) | 16.74 | (3.79, 30.49) | 0.0172 |
| Region | | | | | | | | | |
| Japan | 0 / 1 (0.0) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 70 / 94 (74.5) | 76 / 94 (80.9) | NA | NA | NA | NA | NA | NA | NA |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 16 / 22 (72.7) | 17 / 21 (81.0) | NA | NA | NA | NA | NA | NA | NA |
| >= 65 years | 1 / 2 (50.0) | 2 / 3 (66.7) | NA | NA | NA | NA | NA | NA | NA |
| Sex | | | | | | | | | |
| Male | 7 / 7 (100.0) | 4 / 5 (80.0) | 0.20 | (0.01, 3.22) | 0.80 | (0.38, 1.35) | -18.75 | (-59.26, 21.75) | 0.4167 |
| Female | 10 / 17 (58.8) | 15 / 19 (78.9) | 2.63 | (0.63, 10.77) | 1.34 | (0.86, 2.27) | 20.12 | (-10.04, 47.80) | 0.2814 |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 7 / 13 (53.8) | 14 / 19 (73.7) | 2.40 | (0.56, 10.28) | 1.37 | (0.81, 2.63) | 19.84 | (-13.12, 50.41) | 0.2826 |
| Prednisone > 20 mg/day | 9 / 10 (90.0) | 2 / 2 (100.0) | 0.79 | (0.04, 11.64) | 0.96 | (0.35, 1.56) | -3.03 | (-58.65, 32.58) | 1.0000 |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 6 / 9 (66.7) | 10 / 13 (76.9) | 1.67 | (0.28, 10.01) | 1.15 | (0.67, 2.27) | 10.26 | (-26.12, 47.20) | 0.6550 |
| QMG >= 16 | 11 / 15 (73.3) | 7 / 9 (77.8) | 1.27 | (0.20, 7.55) | 1.06 | (0.59, 1.73) | 4.44 | (-33.37, 36.46) | 1.0000 |
| Baseline MGFA class | | | | | | | | | |
| II | 7 / 12 (58.3) | 9 / 13 (69.2) | NA | NA | NA | NA | NA | NA | NA |
| III | 10 / 12 (83.3) | 8 / 9 (88.9) | NA | NA | NA | NA | NA | NA | NA |
| IV | 0 / 0 (-) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Asia | 10 / 15 (66.7) | 10 / 14 (71.4) | NA | NA | NA | NA | NA | NA | NA |
| Europe | 2 / 2 (100.0) | 7 / 7 (100.0) | NA | NA | NA | NA | NA | NA | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|--|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| North America | 2 / 2 (100.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | NA |
| Rest of the world | 3 / 5 (60.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | NA |
| EU | 2 / 2 (100.0) | 7 / 7 (100.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-EU | 15 / 22 (68.2) | 12 / 17 (70.6) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | NA |
| Japan | 1 / 2 (50.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 16 / 22 (72.7) | 18 / 22 (81.8) | NA | NA | NA | NA | NA | NA | NA |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>n = Number of subjects with observed data. N1 = Number of subjects in each subgroup level.</p> <p>Grade 1: Mild; Grade 2: Moderate; Grade 3: Severe; Grade 4: Life-threatening; Grade 5: Fatal</p> <p>Serious adverse event criteria: death, life-threatening, required inpatient hospitalization, prolongation of existing hospitalization, persistent or significant disability/incapacity, important medical event, congenital anomaly/birth defect (in the offspring of the subject).</p> <p>95% CI for risk difference, risk ratio, and odds ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> <p>If Zero cell correction applied, 95% CI for risk difference, risk ratio, and odds ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.12.2 Gesamtraten: SUE

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|--------------|------------|--------------|---------------------|-----------------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 12 / 81 (14.8) | 6 / 76 (7.9) | 0.49 | (0.18, 1.35) | 0.53 | (0.22, 1.30) | -6.92 | (-17.38, 3.30) | 0.2142 |
| >= 65 years | 3 / 14 (21.4) | 2 / 19 (10.5) | 0.43 | (0.07, 2.58) | 0.49 | (0.11, 2.21) | -10.90 | (-39.18, 14.65) | 0.6285 |
| Sex | | | | | | | | | |
| Male | 10 / 46 (21.7) | 6 / 35 (17.1) | 0.74 | (0.25, 2.23) | 0.79 | (0.32, 1.88) | -4.60 | (-21.62, 13.82) | 0.7795 |
| Female | 5 / 49 (10.2) | 2 / 60 (3.3) | 0.30 | (0.07, 1.43) | 0.33 | (0.08, 1.40) | -6.87 | (-18.87, 2.75) | 0.2396 |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 8 / 55 (14.5) | 6 / 63 (9.5) | 0.62 | (0.21, 1.84) | 0.65 | (0.25, 1.70) | -5.02 | (-17.95, 6.99) | 0.5696 |
| Prednisone > 20 mg/day | 6 / 31 (19.4) | 2 / 27 (7.4) | 0.33 | (0.07, 1.62) | 0.38 | (0.09, 1.50) | -11.95 | (-30.34, 6.85) | 0.2633 |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 6 / 39 (15.4) | 2 / 38 (5.3) | 0.31 | (0.07, 1.44) | 0.34 | (0.08, 1.38) | -10.12 | (-25.37, 4.13) | 0.2626 |
| QMG >= 16 | 9 / 53 (17.0) | 6 / 55 (10.9) | 0.60 | (0.20, 1.76) | 0.64 | (0.25, 1.62) | -6.07 | (-19.94, 7.37) | 0.4136 |
| Baseline MGFA class | | | | | | | | | |
| II | 7 / 36 (19.4) | 3 / 43 (7.0) | 0.31 | (0.08, 1.21) | 0.36 | (0.11, 1.18) | -12.47 | (-29.14, 2.43) | 0.1723 |
| III | 8 / 49 (16.3) | 5 / 49 (10.2) | 0.58 | (0.18, 1.84) | 0.63 | (0.23, 1.69) | -6.12 | (-20.42, 7.86) | 0.5529 |
| IV | 0 / 8 (0.0) | 0 / 3 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Asia | 9 / 40 (22.5) | 5 / 30 (16.7) | 0.69 | (0.21, 2.24) | 0.74 | (0.28, 1.88) | -5.83 | (-24.11, 14.14) | 0.7637 |
| Europe | 2 / 40 (5.0) | 0 / 37 (0.0) | 0.21 | (0.02, 2.41) | 0.22 | (0.02, 2.31) | -4.78 | (-16.69, 5.92) | 0.4942 |
| North America | 3 / 12 (25.0) | 3 / 19 (15.8) | 0.56 | (0.10, 3.01) | 0.63 | (0.17, 2.45) | -9.21 | (-40.55, 18.81) | 0.6526 |
| Rest of the world | 1 / 3 (33.3) | 0 / 9 (0.0) | 0.09 | (0.01, 1.54) | 0.13 | (0.01, 1.43) | -32.50 | (-74.71, 8.12) | 0.2500 |
| Region | | | | | | | | | |
| EU | 2 / 40 (5.0) | 0 / 37 (0.0) | 0.21 | (0.02, 2.41) | 0.22 | (0.02, 2.31) | -4.78 | (-16.69, 5.92) | 0.4942 |
| Non-EU | 13 / 55 (23.6) | 8 / 58 (13.8) | 0.52 | (0.20, 1.34) | 0.58 | (0.27, 1.27) | -9.84 | (-24.54, 4.64) | 0.2285 |
| Region | | | | | | | | | |
| NA | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| Japan | 0 / 1 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 15 / 94 (16.0) | 8 / 94 (8.5) | NA | NA | NA | NA | NA | NA | NA |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 1 / 22 (4.5) | 1 / 21 (4.8) | NA | NA | NA | NA | NA | NA | NA |
| >= 65 years | 0 / 2 (0.0) | 1 / 3 (33.3) | NA | NA | NA | NA | NA | NA | NA |
| Sex | | | | | | | | | |
| Male | 1 / 7 (14.3) | 0 / 5 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Female | 0 / 17 (0.0) | 2 / 19 (10.5) | NA | NA | NA | NA | NA | NA | NA |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 0 / 13 (0.0) | 0 / 19 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Prednisone > 20 mg/day | 1 / 10 (10.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 0 / 9 (0.0) | 2 / 13 (15.4) | NA | NA | NA | NA | NA | NA | NA |
| QMG >= 16 | 1 / 15 (6.7) | 0 / 9 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline MGFA class | | | | | | | | | |
| II | 0 / 12 (0.0) | 1 / 13 (7.7) | NA | NA | NA | NA | NA | NA | NA |
| III | 1 / 12 (8.3) | 1 / 9 (11.1) | NA | NA | NA | NA | NA | NA | NA |
| IV | 0 / 0 (-) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Asia | 1 / 15 (6.7) | 1 / 14 (7.1) | NA | NA | NA | NA | NA | NA | NA |
| Europe | 0 / 2 (0.0) | 1 / 7 (14.3) | NA | NA | NA | NA | NA | NA | NA |
| North America | 0 / 2 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Rest of the world | 0 / 5 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| EU | 0 / 2 (0.0) | 1 / 7 (14.3) | NA | NA | NA | NA | NA | NA | NA |
| Non-EU | 1 / 22 (4.5) | 1 / 17 (5.9) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| Japan | 0 / 2 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 1 / 22 (4.5) | 2 / 22 (9.1) | NA | NA | NA | NA | NA | NA | NA |

Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.
n = Number of subjects with observed data. N1 = Number of subjects in each subgroup level.
Grade 1: Mild; Grade 2: Moderate; Grade 3: Severe; Grade 4: Life-threatening; Grade 5: Fatal
Serious adverse event criteria: death, life-threatening, required inpatient hospitalization, prolongation of existing hospitalization, persistent or significant disability/incapacity, important medical event, congenital anomaly/birth defect (in the offspring of the subject).
95% CI for risk difference, risk ratio, and odds ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.
If Zero cell correction applied, 95% CI for risk difference, risk ratio, and odds ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.12.3 Gesamtraten: Schwere UE (CTCAE Grad ≥ 3)

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|---------------|------------|--------------|---------------------|-----------------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| ≥ 18 - < 65 years | 9 / 81 (11.1) | 7 / 76 (9.2) | 0.81 | (0.30, 2.23) | 0.83 | (0.33, 2.05) | -1.90 | (-11.90, 8.18) | 0.7947 |
| ≥ 65 years | 2 / 14 (14.3) | 3 / 19 (15.8) | 1.13 | (0.19, 6.54) | 1.11 | (0.25, 5.11) | 1.50 | (-27.00, 26.66) | 1.0000 |
| Sex | | | | | | | | | |
| Male | 7 / 46 (15.2) | 6 / 35 (17.1) | 1.15 | (0.37, 3.65) | 1.13 | (0.43, 2.93) | 1.93 | (-14.22, 19.57) | 1.0000 |
| Female | 4 / 49 (8.2) | 4 / 60 (6.7) | 0.80 | (0.21, 3.11) | 0.82 | (0.23, 2.86) | -1.50 | (-13.40, 9.10) | 1.0000 |
| Baseline steroid use | | | | | | | | | |
| Prednisone \leq 20 mg/day | 4 / 55 (7.3) | 6 / 63 (9.5) | 1.34 | (0.38, 4.69) | 1.31 | (0.42, 4.16) | 2.25 | (-9.01, 13.15) | 0.6501 |
| Prednisone > 20 mg/day | 6 / 31 (19.4) | 4 / 27 (14.8) | 0.72 | (0.19, 2.74) | 0.77 | (0.25, 2.27) | -4.54 | (-24.31, 16.20) | 0.7371 |
| Baseline QMG | | | | | | | | | |
| QMG \leq 15 | 3 / 39 (7.7) | 3 / 38 (7.9) | 1.03 | (0.22, 4.79) | 1.03 | (0.25, 4.23) | 0.20 | (-13.66, 14.28) | 1.0000 |
| QMG \geq 16 | 8 / 53 (15.1) | 7 / 55 (12.7) | 0.82 | (0.28, 2.37) | 0.84 | (0.34, 2.09) | -2.37 | (-16.19, 11.19) | 0.7857 |
| Baseline MGFA class | | | | | | | | | |
| II | 6 / 36 (16.7) | 4 / 43 (9.3) | 0.51 | (0.14, 1.86) | 0.56 | (0.18, 1.71) | -7.36 | (-24.00, 7.79) | 0.4988 |
| III | 4 / 49 (8.2) | 6 / 49 (12.2) | 1.57 | (0.44, 5.55) | 1.50 | (0.48, 4.72) | 4.08 | (-8.77, 17.34) | 0.7404 |
| IV | 1 / 8 (12.5) | 0 / 3 (0.0) | 0.71 | (0.05, 12.36) | 0.75 | (0.07, 7.17) | -4.17 | (-41.43, 47.95) | 1.0000 |
| Region | | | | | | | | | |
| Asia | 6 / 40 (15.0) | 6 / 30 (20.0) | 1.42 | (0.43, 4.72) | 1.33 | (0.49, 3.58) | 5.00 | (-12.85, 24.51) | 0.7503 |
| Europe | 2 / 40 (5.0) | 0 / 37 (0.0) | 0.21 | (0.02, 2.41) | 0.22 | (0.02, 2.31) | -4.78 | (-16.69, 5.92) | 0.4942 |
| North America | 2 / 12 (16.7) | 4 / 19 (21.1) | 1.33 | (0.23, 7.40) | 1.26 | (0.32, 5.43) | 4.39 | (-27.42, 31.12) | 1.0000 |
| Rest of the world | 1 / 3 (33.3) | 0 / 9 (0.0) | 0.09 | (0.01, 1.54) | 0.13 | (0.01, 1.43) | -32.50 | (-74.71, 8.12) | 0.2500 |
| Region | | | | | | | | | |
| EU | 2 / 40 (5.0) | 0 / 37 (0.0) | 0.21 | (0.02, 2.41) | 0.22 | (0.02, 2.31) | -4.78 | (-16.69, 5.92) | 0.4942 |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|--------------|------------|--------------|---------------------|-----------------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| Non-EU | 9 / 55 (16.4) | 10 / 58 (17.2) | 1.06 | (0.41, 2.79) | 1.05 | (0.47, 2.36) | 0.88 | (-13.42, 14.98) | 1.0000 |
| Region | | | | | | | | | |
| Japan | 0 / 1 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 11 / 94 (11.7) | 10 / 94 (10.6) | NA | NA | NA | NA | NA | NA | NA |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 2 / 22 (9.1) | 1 / 21 (4.8) | NA | NA | NA | NA | NA | NA | NA |
| >= 65 years | 0 / 2 (0.0) | 1 / 3 (33.3) | NA | NA | NA | NA | NA | NA | NA |
| Sex | | | | | | | | | |
| Male | 1 / 7 (14.3) | 0 / 5 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Female | 1 / 17 (5.9) | 2 / 19 (10.5) | NA | NA | NA | NA | NA | NA | NA |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 1 / 13 (7.7) | 1 / 19 (5.3) | NA | NA | NA | NA | NA | NA | NA |
| Prednisone > 20 mg/day | 1 / 10 (10.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 0 / 9 (0.0) | 2 / 13 (15.4) | NA | NA | NA | NA | NA | NA | NA |
| QMG >= 16 | 2 / 15 (13.3) | 0 / 9 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline MGFA class | | | | | | | | | |
| II | 0 / 12 (0.0) | 2 / 13 (15.4) | NA | NA | NA | NA | NA | NA | NA |
| III | 2 / 12 (16.7) | 0 / 9 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| IV | 0 / 0 (-) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Asia | 1 / 15 (6.7) | 1 / 14 (7.1) | NA | NA | NA | NA | NA | NA | NA |
| Europe | 0 / 2 (0.0) | 1 / 7 (14.3) | NA | NA | NA | NA | NA | NA | NA |
| North America | 1 / 2 (50.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Rest of the world | 0 / 5 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| NA | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|--|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| EU | 0 / 2 (0.0) | 1 / 7 (14.3) | NA | NA | NA | NA | NA | NA | NA |
| Non-EU | 2 / 22 (9.1) | 1 / 17 (5.9) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Japan | 0 / 2 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 2 / 22 (9.1) | 2 / 22 (9.1) | NA | NA | NA | NA | NA | NA | NA |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>n = Number of subjects with observed data. N1 = Number of subjects in each subgroup level.</p> <p>Grade 1: Mild; Grade 2: Moderate; Grade 3: Severe; Grade 4: Life-threatening; Grade 5: Fatal</p> <p>Serious adverse event criteria: death, life-threatening, required inpatient hospitalization, prolongation of existing hospitalization, persistent or significant disability/incapacity, important medical event, congenital anomaly/birth defect (in the offspring of the subject).</p> <p>95% CI for risk difference, risk ratio, and odds ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> <p>If Zero cell correction applied, 95% CI for risk difference, risk ratio, and odds ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.12.4 Gesamtraten: Therapieabbruch aufgrund von UE

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| AChR+ Population (Week 52) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 1 / 81 (1.2) | 1 / 76 (1.3) | NA | NA | NA | NA | NA | NA | NA |
| >= 65 years | 0 / 14 (0.0) | 1 / 19 (5.3) | NA | NA | NA | NA | NA | NA | NA |
| Sex | | | | | | | | | |
| Male | 1 / 46 (2.2) | 1 / 35 (2.9) | NA | NA | NA | NA | NA | NA | NA |
| Female | 0 / 49 (0.0) | 1 / 60 (1.7) | NA | NA | NA | NA | NA | NA | NA |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 0 / 55 (0.0) | 1 / 63 (1.6) | NA | NA | NA | NA | NA | NA | NA |
| Prednisone > 20 mg/day | 1 / 31 (3.2) | 1 / 27 (3.7) | NA | NA | NA | NA | NA | NA | NA |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 1 / 39 (2.6) | 2 / 38 (5.3) | NA | NA | NA | NA | NA | NA | NA |
| QMG >= 16 | 0 / 53 (0.0) | 0 / 55 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline MGFA class | | | | | | | | | |
| II | 1 / 36 (2.8) | 2 / 43 (4.7) | NA | NA | NA | NA | NA | NA | NA |
| III | 0 / 49 (0.0) | 0 / 49 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| IV | 0 / 8 (0.0) | 0 / 3 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Asia | 0 / 40 (0.0) | 2 / 30 (6.7) | NA | NA | NA | NA | NA | NA | NA |
| Europe | 0 / 40 (0.0) | 0 / 37 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| North America | 0 / 12 (0.0) | 0 / 19 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Rest of the world | 1 / 3 (33.3) | 0 / 9 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| EU | 0 / 40 (0.0) | 0 / 37 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-EU | 1 / 55 (1.8) | 2 / 58 (3.4) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Japan | 0 / 1 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 1 / 94 (1.1) | 2 / 94 (2.1) | NA | NA | NA | NA | NA | NA | NA |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|-----------------------------------|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| Age | | | | | | | | | |
| >= 18 - < 65 years | 0 / 22 (0.0) | 1 / 21 (4.8) | NA | NA | NA | NA | NA | NA | NA |
| >= 65 years | 0 / 2 (0.0) | 0 / 3 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Sex | | | | | | | | | |
| Male | 0 / 7 (0.0) | 0 / 5 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Female | 0 / 17 (0.0) | 1 / 19 (5.3) | NA | NA | NA | NA | NA | NA | NA |
| Baseline steroid use | | | | | | | | | |
| Prednisone <= 20 mg/day | 0 / 13 (0.0) | 1 / 19 (5.3) | NA | NA | NA | NA | NA | NA | NA |
| Prednisone > 20 mg/day | 0 / 10 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline QMG | | | | | | | | | |
| QMG <= 15 | 0 / 9 (0.0) | 0 / 13 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| QMG >= 16 | 0 / 15 (0.0) | 1 / 9 (11.1) | NA | NA | NA | NA | NA | NA | NA |
| Baseline MGFA class | | | | | | | | | |
| II | 0 / 12 (0.0) | 1 / 13 (7.7) | NA | NA | NA | NA | NA | NA | NA |
| III | 0 / 12 (0.0) | 0 / 9 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| IV | 0 / 0 (-) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Asia | 0 / 15 (0.0) | 1 / 14 (7.1) | NA | NA | NA | NA | NA | NA | NA |
| Europe | 0 / 2 (0.0) | 0 / 7 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| North America | 0 / 2 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Rest of the world | 0 / 5 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| EU | 0 / 2 (0.0) | 0 / 7 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-EU | 0 / 22 (0.0) | 1 / 17 (5.9) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | |
| Japan | 0 / 2 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 0 / 22 (0.0) | 1 / 22 (4.5) | NA | NA | NA | NA | NA | NA | NA |

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|--|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>n = Number of subjects with observed data. N1 = Number of subjects in each subgroup level.</p> <p>Grade 1: Mild; Grade 2: Moderate; Grade 3: Severe; Grade 4: Life-threatening; Grade 5: Fatal</p> <p>Serious adverse event criteria: death, life-threatening, required inpatient hospitalization, prolongation of existing hospitalization, persistent or significant disability/incapacity, important medical event, congenital anomaly/birth defect (in the offspring of the subject).</p> <p>95% CI for risk difference, risk ratio, and odds ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> <p>If Zero cell correction applied, 95% CI for risk difference, risk ratio, and odds ratio was based on the same confidence limits above after Zero cell correction; p-value was based on Fisher's exact test for association before Zero cell correction; interaction p-value was based on Breslow-Day test for homogeneity of odds ratios after Zero cell correction.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.12.5 UE nach SOC/PT, die bei $\geq 10\%$ der Patientinnen und Patienten in einem der beiden Behandlungsarmen oder bei mindestens 10 Patientinnen und Patienten insgesamt und bei $\geq 1\%$ in einem der beiden Behandlungsarmen auftraten

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|--|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| AChR+ Population (Week 52) | | | | | | | | | |
| --no data to report-- | | | | | | | | | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| SOC: Erkrankungen des Nervensystems | | | | | | | | | |
| Age | | | | | | | | | NA |
| ≥ 18 - < 65 years | 2 / 22 (9.1) | 7 / 21 (33.3) | NA | NA | NA | NA | NA | NA | NA |
| ≥ 65 years | 0 / 2 (0.0) | 1 / 3 (33.3) | NA | NA | NA | NA | NA | NA | NA |
| Sex | | | | | | | | | NA |
| Male | 1 / 7 (14.3) | 3 / 5 (60.0) | NA | NA | NA | NA | NA | NA | NA |
| Female | 1 / 17 (5.9) | 5 / 19 (26.3) | NA | NA | NA | NA | NA | NA | NA |
| Baseline steroid use | | | | | | | | | NA |
| Prednisone \leq 20 mg/day | 2 / 13 (15.4) | 7 / 19 (36.8) | NA | NA | NA | NA | NA | NA | NA |
| Prednisone > 20 mg/day | 0 / 10 (0.0) | 0 / 2 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Baseline QMG | | | | | | | | | NA |
| QMG \leq 15 | 0 / 9 (0.0) | 4 / 13 (30.8) | NA | NA | NA | NA | NA | NA | NA |
| QMG \geq 16 | 2 / 15 (13.3) | 3 / 9 (33.3) | NA | NA | NA | NA | NA | NA | NA |
| Baseline MGFA class | | | | | | | | | NA |
| II | 1 / 12 (8.3) | 3 / 13 (23.1) | NA | NA | NA | NA | NA | NA | NA |
| III | 1 / 12 (8.3) | 3 / 9 (33.3) | NA | NA | NA | NA | NA | NA | NA |
| IV | 0 / 0 (-) | 1 / 1 (100.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | NA |
| Asia | 1 / 15 (6.7) | 3 / 14 (21.4) | NA | NA | NA | NA | NA | NA | NA |
| Europe | 0 / 2 (0.0) | 3 / 7 (42.9) | NA | NA | NA | NA | NA | NA | NA |
| North America | 1 / 2 (50.0) | 2 / 2 (100.0) | NA | NA | NA | NA | NA | NA | NA |
| Rest of the world | 0 / 5 (0.0) | 0 / 1 (0.0) | NA | NA | NA | NA | NA | NA | NA |
| Region | | | | | | | | | NA |
| EU | 0 / 2 (0.0) | 3 / 7 (42.9) | NA | NA | NA | NA | NA | NA | NA |
| Non-EU | 2 / 22 (9.1) | 5 / 17 (29.4) | NA | NA | NA | NA | NA | NA | NA |

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|--|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| Region | | | | | | | | | NA |
| Japan | 1 / 2 (50.0) | 1 / 2 (50.0) | NA | NA | NA | NA | NA | NA | NA |
| Non-Japan | 1 / 22 (4.5) | 7 / 22 (31.8) | NA | NA | NA | NA | NA | NA | NA |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>n = Number of subjects with observed data. N1 = Number of subjects in each subgroup level.</p> <p>Coded using MedDRA version 23.0</p> <p>95% CI for risk difference, risk ratio, and odds ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.12.6 SUE nach SOC/PT, die bei $\geq 5\%$ der Patientinnen und Patienten in einem der beiden Behandlungsarmen oder bei mindestens 10 Patientinnen und Patienten insgesamt und bei $\geq 1\%$ in einem der beiden Behandlungsarmen auftraten

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|---|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| AChR+ Population (Week 52) | | | | | | | | | |
| --no data to report-- | | | | | | | | | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| --no data to report-- | | | | | | | | | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log.</p> <p>n = Number of subjects with observed data. N1 = Number of subjects in each subgroup level.</p> <p>Coded using MedDRA version 23.0</p> <p>Serious adverse event criteria: death, life-threatening, required inpatient hospitalization, prolongation of existing hospitalization, persistent or significant disability/incapacity, important medical event, congenital anomaly/birth defect (in the offspring of the subject).</p> <p>95% CI for risk difference, risk ratio, and odds ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> | | | | | | | | | |

Medizinischer Nutzen, medizinischer Zusatznutzen, Patientengruppen mit therap. bedeutsamem Zusatznutzen

1.12.7 Schwere UE (CTCAE Grad ≥ 3) nach SOC/PT, die bei ≥ 5 % der Patientinnen und Patienten in einem der beiden Behandlungsarmen oder bei mindestens 10 Patientinnen und Patienten insgesamt und bei ≥ 1 % in einem der beiden Behandlungsarmen auftraten

| Subgroup | Placebo n / N1 (%) | Inebilizumab n / N1 (%) | Inebilizumab vs. Placebo | | | | | | p-value |
|--|-----------------------|----------------------------|--------------------------|----------|------------|----------|---------------------|----------|---------|
| | | | Odds Ratio | | Risk Ratio | | Risk Difference (%) | | |
| | | | Pt Est | (95% CI) | Pt Est | (95% CI) | Pt Est | (95% CI) | |
| AChR+ Population (Week 52) | | | | | | | | | |
| --no data to report-- | | | | | | | | | |
| MuSK+ Population (Week 26) | | | | | | | | | |
| --no data to report-- | | | | | | | | | |
| <p>Three duplicate steroid records were excluded from baseline dose calculation to fix data errors in EDC that caused overlapping of start and stop dates. The errors were identified after DBL and documented in the data errata log. n = Number of subjects with observed data. N1 = Number of subjects in each subgroup level. Coded using MedDRA version 23.0 95% CI for risk difference, risk ratio, and odds ratio was based on Miettinen-Nurminen (score) confidence limits without default bias correction factor; p-value was based on Fisher's exact test for association; interaction p-value was based on Zelen's exact test for equal odds ratios.</p> | | | | | | | | | |