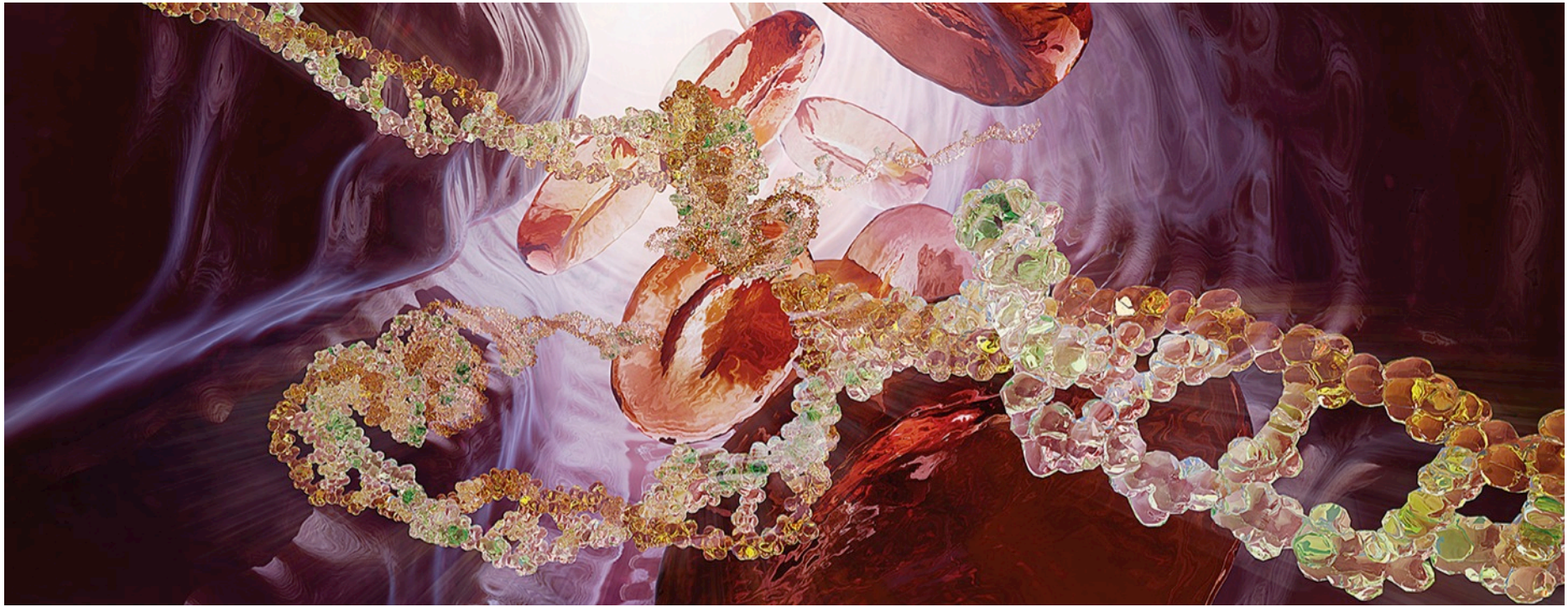
Clinical trials appendix
Full-Year and Q4 2016 Results update

AstraZeneca
What science can do



The following information about AstraZeneca clinical trials in Phases I-IV has been created with selected information from https://clinicaltrials.gov/ to facilitate understanding of key aspects of ongoing clinical programmes and is correct to the best of the Company's knowledge as of 31 December 2016, unless otherwise specified.

It includes estimated timelines with regards to trial completion and first external presentations of primary data. These estimates are subject to change as programmes recruit faster or slower than anticipated and many times are event driven.

Project postings on clinicaltrials.gov are updated on a continuous basis as projects progress. For the most up to date information on our clinical programmes please visit clinicaltrials.gov (https://clinicaltrials.gov/)

List of abbreviations

AE	Adverse Event
AUC	Area Under Curve
BID	Bis In Die (two times a day)
CE	Clinically Evaluable
CMAX	Maximum Concentration Absorbed
cMITT	Clinical-Modified Intent To Treat
CNS	Central Nervous System
DLT	Dose-Limiting Toxicity
FDC	Fixed-Dose Combination
FEV	Forced-Expiratory Volume
FPD	First Patient Dosed
IM	Intra Muscular
IR	Immediate Release
IV	Intravenous
LCM	Life-Cycle Management
LPCD	Last Patient Commenced Dosing
MAD	Multiple Ascending Dose
MDI	Metered-Dose Inhaler
MITT	Modified Intent To Treat
mMITT	Microbiological-Modified Intent To Treat
MTD	Maximum Tolerated Dose
NME	New Molecular Entity
OLE	Open Long-term Extension
ORR	Objective Response Rate
OS	Overall Survival
PFS	Progression-Free Survival
PK	Pharmacokinetics
Q2W	Quaque (every) Two Weeks
Q3W	Quaque (every) Three Weeks
Q4W	Quaque (every) Four Weeks
Q8W	Quaque (every) Eight Weeks
QD	Quaque Die (one time a day)
SAD	Single Ascending Dose
SC	Sub Cutaneous
TID	Ter In Die (three times a day)
TOC	Test Of Cure
XR	Extended Release

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Movement since Q3 2016 update

New to Phase I	New to Phase II	New to Pivotal Study	New to Registration
NMEs **AZD0284** Inhaled RORg psorisis **AZD7594+abediterol#** Inhaled SGRM+LABA asthma/COPD **AZD8601#** VEGF-A cardiovascular **Additional indications** **durva# or durva#+(treme or AZD9150#)** PD-L1 or PD-L1+(CTLA-4 or STAT3)	**NMEs** **AZD1419#** TLR9 asthma **AZD1775#** Wee1 solid tumours **AZD4076** miR103/107 NASH **AZD8871#** MABA COPD **Additional indications** **durvalumab#+tremelimumab** PD-L1+CTLA-4 HCC		**NME's** **benralizumab# [EU & US]**[1] IL-5R severe asthma **Additional indications** **durvalumab# [US]**[1] PD-L1 2L bladder **Tagrisso AURA3 [US & EU]** [1] EGFR T790M NSCLC >2L

Removed from Phase I	Removed from Phase II	Removed from Phase III	Removed from Registration
NME **AZD8108**[3] NMDA suicidal ideation	**NMEs** **ATM AVI#**[3] BL/BLI SBI **CXL#**[3] BLI/cephalosporin MRSA **MEDI2070#**[3] IL-23 Crohns **MEDI7510** sF+GLA-SE RSV prevention	**Additional indications** **durvalumab HAWK#¶**[4] solid tumours **durvalumab#+tremelimumab CONDOR¶**[4] PD-L1+CTLA-4 2L SCCHN **durvalumab#+tremelimuab ALPS¶** PD-L1+CTLA-4 1L metastatic pancreatic ductal carcinoma	

¶ Registrational Phase II/III study
# Partnered and/or in collaboration
[1] Submission Accepted [2] Submitted [3] Divested [4] Completed

Q4 2016 New Molecular Entity (NME)[1] Pipeline

Oncology | Cardiovascular and metabolic disease | Respiratory | Other

Phase I
29 New Molecular Entities

Small molecule	Large molecule
AZD0156 ATM solid tumours	MEDI0562# hOX40 solid tumours
AZD2811# Aurora solid tumours	MEDI0680 PD-1 solid tumours
AZD4635 A2aR inhibitor solid tumours	MEDI1873 GITR solid tumours
AZD6738 ATR solid tumours	MEDI4276 HER2 solid tumours
AZD8186 PI3Kβ solid tumours	MEDI-565# CEA BiTE GI tumours
AZD9150# STAT3 haems & solids	MEDI9197# TLR 7/8 solid tumours
AZD9496 SERD ER+ breast	MEDI9447 CD73 solid tumours
AZD4831 MPO HFpEF	MEDI8111 Rh-Factor II trauma/bleeding
AZD5718 FLAP CAD	MEDI9314 IL4R atopic dermatitis
AZD8601# VEGF-A cardiovascular	MEDI1814# amyloidβ Alzheimer's disease
AZD0284 Inhaled RORg psorisis	MEDI7352 NGF/TNF osteoarthritis pain
AZD5634 inhaled ENaC cystic fibrosis	MEDI0700# BAFF/BTRP1 SLE
AZD7594+abediterol# Inhaled SGRM+LABA	MEDI4920 CD40L-Tn3 pSS
AZD7986# DPP1 COPD	MEDI7734 IL7 myositis
AZD9567 SGRM RA	

Phase II
26 New Molecular Entities

Small molecule	Large molecule
AZD1775# Wee1 solid tumours	MEDI-573# IGF metastatic breast cancer
AZD4547 FGFR solid tumours	MEDI0382 GLP-1/glucagon diabetes/obesity
AZD5363# AKT breast cancer	MEDI4166 PCSK9/GLP-1 diabetes/CV
savolitinib# MET pRCC	MEDI6012 LCAT ACS
Tagrisso BLOOM EGFR NSCLC CNS mets	AZD9412# Inhaled βIFN asthma/COPD
vistusertib (AZD2014) mTOR 1/2 solid tumours	tezepelumab# TSLP asthma/atopic dermatitis
AZD4076 miR103/107 NASH	inebilizumab# CD19 neuromyelitis optica
abediterol# LABA asthma/COPD	mavrilimumab# GM-CSFR rheumatoid arthritis
AZD1419# TLR9 asthma	MEDI5872# primary Sjögren's syndrome
AZD7594 Inhaled SGRM asthma	MEDI3902¶ Psl/PcrV pseudomonas
AZD8871# MABA COPD	MEDI4893 staph alpha toxin SSI
AZD3241 MPO Multiple System Atrophy	MEDI8852 influenza A treatment
verinurad URAT-1 hyperuricemia/gout	MEDI8897# RSV passive prophylaxis

Phase III
9 New Molecular Entities

Small molecule	Large molecule
acalabrutinib# BTK inhibitor B cell malignancy	durvalumab#+tremelimumab MYSTIC
selumetinib ASTRA MEK 2L diff. thyroid	moxetumomab pasudotox# PLAIT CD22 HCL
roxadustat# HIFPH anaemia CKD/ESRD	tralokinumab IL-13 severe asthma
PT010 LABA/LAMA/ICS COPD	anifrolumab# TULIP IFNαR SLE
AZD3293# BACE Early Alzheimer's disease	

Applications Under Review
3 New Molecular Entities

Small molecule	Large molecule
ZS-9 potassium binder hyperkalaemia	durvalumab# PD-L1 2L bladder
	benralizumab# IL-5R severe asthma

[1] Includes significant fixed-dose combination projects, and parallel indications that are in a separate therapy area *(See LCM chart for other parallel indications and oncology combination projects)*

Partnered and/or in collaboration; ¶ Registrational P2/3 study

Q4 2016 Lifecycle Management (LCM)[1] Pipeline

Oncology | Cardiovascular and metabolic disease | Respiratory | Other

Phase I
1 Proejct

Small molecule

Large molecule
- anifrolumab# IFNαR SLE SC

Phase II
5 Projects

Small molecule
- *Lynparza* PARP prostate cancer
- *Brilinta/Brilique* HESTIA paeds w/ sickle cell
- PT010 LABA/LAMA/ICS asthma

Large molecule
- durvalumab# PD-L1 solid tumours
- anifrolumab# IFNαR lupus nephritis

Phase III
20 Projects

Small molecule
- acalabrutinib# BTK inhibitor 1st line CLL
- acalabrutinib# BTK inhibitor r/r CLL, high risk
- *Lynparza* OlympiA PARP gBRCA adjuvant breast
- *Lynparza* OlympiAD PARP gBRCA metastatic breast
- *Lynparza* POLO PARP pancreatic cancer
- *Lynparza* SOLO-1 PARP 1L BRCAm ovarian
- *Lynparza* SOLO-2 PARP >2L BRCAm PSR ovarian
- *Lynparza* SOLO-3 PARP BRCAm PSR ovarian
- *Tagrisso* ADAURA EGFR adj. EGFRm NSCLC

Large molecule
- *Tagrisso* FLAURA EGFR 1L adv. EGFRm NSCLC
- *Brilinta/Brilique* THEMIS diabetes & CAD outcomes
- *Bydureon* EXSCEL outcomes
- *Bydureon* wkly suspension type-2 diabetes
- *Epanova* STRENGTH outcomes
- *Farxiga/Forxiga* type-1 diabetes
- *Farxiga/Forxiga* DECLARE outcomes
- *Symbicort* BAI asthma/COPD
- *Symbicort* SYGMA as needed in mild asthma

Large molecule
- durvalumab# PACIFIC PD-L1 stage 3 NSCLC
- benralizumab# IL-5R COPD

Applications Under Review
4 Projects

Small molecule
- *Faslodex* FALCON oestrogen receptor 1L adv. breast
- *Tagrisso* AURA 3 EGFR T790M NSCLC >2L
- *linaclotide#* (CN only) IBS-c
- *Nexium* (CN only) stress ulcer prophylaxis

Large molecule

Oncology Combinations

Phase I
11 Projects
- AZD1775#+durvalumab# Wee1+PD-L1 solid tumours
- durva# or durva#+(treme or AZD9150#) PD-L1 or PD-L1+(CTLA-4 or STAT3)
- durvalumab#+dabrafenib+trametinib PD-L1+BRAF+MEK melanoma
- durvalumab#+Iressa PD-L1+EGFR NSCLC
- durvalumab#+MEDI0562# PD-L1+hOX40 solid tumours
- durvalumab#+MEDI9447 PD-L1+CD73 solid tumours
- durvalumab#+monalizumab¥ PD-L1+NKG2a solid tumours
- durvalumab#+tremelimumab PD-L1+CTLA-4 solid tumours
- *Lynparza*+AZD1775# PARP+Wee1 solid tumours
- selumetinib#+durvalumab# MEK inhibitor+PL-L1 solid tumours
- tremelimumab+MEDI0562# CTLA-4+hOX40 solid tumours

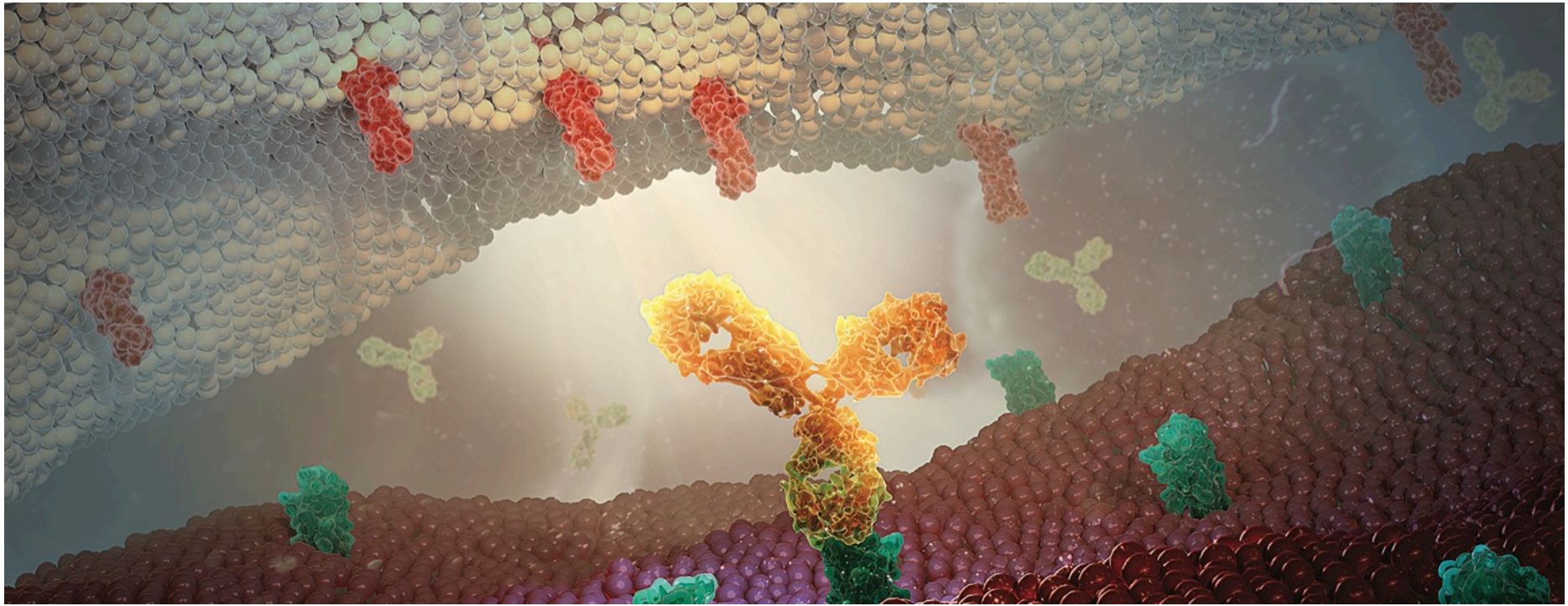
Phase II
7 Projects
- AZD1775#+chemotherapy Wee1+chemo ovarian cancer
- durva#+AZD5069 or durva+AZD9150 PD-L1+(CXCR2 or STAT3) SCCHN
- durvalumab#+MEDI0680 PD-L1+PD-1 solid tumours
- durvalumab#+tremelimumab PD-L1+CTLA-4 gastric cancer
- durvalumab#+tremelimumab PD-L1+CTLA-4 HCC
- *Lynparza*+AZD6738 PARP+ATR gastric
- *Tagrisso* combo# TATTON EGFR+PD-L1/MEK/MET NSCLC

Phase III
5 Projects
- durvalumab#+tremelimumab ARCTIC PD-L1+CTLA-4 3L NSCLC
- durvalumab#+tremelimumab DANUBE PD-L1+CTLA-4 1L bladder
- durvalumab#+tremelimumab EAGLE PD-L1+CTLA-4 2L SCCHN
- durvalumab#+tremelimumab KESTREL PD-L1+CTLA-4 1L SCCHN
- durvalumab#+tremelimumab NEPTUNE PD-L1+CTLA-4 1L NSCLC

[1] Includes significant LCM projects and parallel indications for assets in P3 or beyond. Excludes LCM projects already launched in a major market

Partnered and/or in collaboration; ¶ Registrational P2/3 study

Approved medicines



Lynparza (PARP inhibitor)

Ovarian cancer and other solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase III **SOLO-2** **Partnered** **NCT01874353**	Platinum-sensitive recurrent (PSR) BRCAm ovarian cancer	295	• Arm 1: *Lynparza* tablets 300mg BiD as maintenance therapy until progression • Arm 2: placebo tablets BiD Global trial	• PFS • OS secondary endpoint	• FPD: Q3 2013 • LPCD: Q4 2014 • Data readout: Q4 2016 • Primary endpoint met
Phase III **SOLO-1** **Partnered** **NCT01844986**	1L maintenance BRCAm ovarian cancer	391	• Arm 1: *Lynparza* tablets 300mg BiD maintenance therapy for 2 years or until disease progression • Arm 2: placebo Global trial	• PFS • OS secondary endpoint	• FPD: Q3 2013 • LPCD: Q1 2015 • Data anticipated: H2 2017
Phase III **SOLO-3** **NCT02282020**	PSR gBRCAm ovarian cancer 3L+ Line	411	• Arm 1: *Lynparza* 300mg BiD to progression • Arm 2: Physician's choice (single agent chemotherapy) Global trial	• PFS • OS secondary endpoint	• FPD: Q1 2015
Phase I / II **MEDIOLA** **NCT02734004**	gBRCAm ovarian cancer 2L+ gBRCAm HER2-negative breast cancer 1-3L Small cell lung cancer 2L+ Gastric cancer 2L+	133	• Arm 1: Lynparza tablets 300mg BID starting on week 1 day 1 / durvalumab IV 1.5g every 4 weeks starting on week 5 day 1. • Dose until progression. Global trial	Primary endpoints • DCR at 12 weeks • Safety and tolerability Secondary endpoints • DCR at 28 weeks • ORR, DoR, PFS, TDT, OS • PK	• FPD: Q2 2016

PARP= Poly ADP Ribose Polymerase

Lynparza (PARP inhibitor)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase III **OlympiAD** **NCT02000622**	BRCAm metastatic breast cancer	302	• Arm 1: *Lynparza* 300mg BiD, continuous to progression • Arm 2: Physician's choice: capecitabine 2500mg/m2 x 14 q 21 vinorelbine 30mg/m2 d 1, 8 q 21 eribulin 1.4mg/m2 d 1, 8 q 21 to progression Global trial	• PFS • Secondary endpoint: OS	• FPD: Q2 2014 • LPCD: Q4 2015 • Data anticipated: H1 2017
Phase III **OlympiA** **Partnered** **NCT02032823**	BRCAm adjuvant breast cancer	1,500	• Arm 1: *Lynparza* 30mg BiD 12 month duration • Arm 2: Placebo 12 month duration Global trial partnership with BIG and NCI/NRG	• Invasive Disease Free Survival (IDFS) • Secondary endpoint: Distant Disease Free Survival and OS	• FPD: Q2 2014
Phase III **POLO** **NCT02184195**	Pancreas gBRCA	145	• Arm 1: *Lynparza* tablets 300mg twice daily as maintenance therapy until progression. • Arm 2: Placebo tablets BiD Global trial	• PFS • Secondary endpoint: OS	• FPD: Q1 2015
Phase II **NCT01972217**	Metastatic castration resistant prostate cancer	142	• Arm 1: *Lynparza* 300mg BiD + abiraterone • Arm 2: Placebo + abiraterone Global trial	• Radiologic PFS	• FPD: Q3 2014 • LPCD: Q3 2015

PARP= Poly ADP Ribose Polymerase

Tagrisso
(Highly-selective, irreversible EGFR TKI)
Non-small cell lung cancer (NSCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase III **AURA3** **NCT02151981**	Advanced EGFRm NSCLC TKI failure and primary resistance mutation T790M	410	• Arm 1: *Tagrisso* 80mg QD • Arm 2: pemetrexed 500mg/m2 + carboplatin AUC5 or pemetrexed 500mg/m2 + cisplatin 75mg/m2 (2:1 randomisation Global trial	• PFS • OS and QoL as secondary endpoints	• FPD: Q3 2014 • Data readout: Q3 2016 • Primary endpoint met
Phase III **FLAURA** **NCT02296125**	Advanced EGFRm NSCLC 1L	674	• Arm 1: *Tagrisso* 80mg • Arm 2: erlotinib 150mg or *Iressa* 250mg (dealers choice); 1:1 randomisation Global trial	• PFS • OS and QoL as secondary endpoints	• FPD: Q1 2015 • LPCD: Q4 2016 • Data anticipated: H2 2017
Phase III **ADAURA** **NCT02511106**	Adjuvant EGFRm NSCLC	700	• Arm 1: *Tagrisso* 80mg QD following complete tumour resection, with or without chemotherapy • Arm 2: Placebo Global trial	• DFS • DFS Rate, OS, OS Rate, QoL	• FPD: Q4 2015 • Data anticipated: 2022
Phase II **AURA17** **NCT02442349**	Advanced EGFRm NSCLC TKI failure and primary resistance mutation T790M	171	• *Tagrisso* 80mg QD Asia Pacific regional trial	• ORR • PFS and OS secondary endpoints	• FPD: Q3 2015 • Data readout: Q2 2016
Phase II **AURA2** **NCT02094261**	Advanced EGFRm NSCLC TKI failure and primary resistance mutation T790M	210	• *Tagrisso* 80mg QD Global trial	• ORR • PFS and OS secondary endpoints	• FPD: Q2 2014
Phase I/II **AURA** **NCT01802632**	Advanced EGFRm NSCLC TKI failure + /- primary resistance mutation T790M	605	• Dose escalation trial • Ph II Extension cohort (T790M only) *Tagrisso* 80mg QD Global trial	• Safety and tolerability • ORR • PFS and OS secondary endpoints	• FPD: Q1 2013

Tagrisso
(Highly-selective, irreversible EGFR TKI)
Non-small cell lung cancer (NSCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase Ib TATTON NCT02143466	Advanced EGFRm NSCLC TKI failure	~90	• Arm 1: *Tagrisso* + durvalumab • Arm 2: *Tagrisso* + savolitinib • Arm 3: *Tagrisso* + selumetinib Global trial	• Safety, Tolerability, Pharmacokinetics and Preliminary Anti-tumour Activity	• FPD: Q3 2014 • Enrolment to durvalumab combination arms will not restart
Phase I BLOOM NCT02228369	EGFRm NSCLC, CNS disease	47	• MAD • Expansion in leptomeningeal metastasis (LM) and brain metastasis (BM) patients at RP2D with AZD3759 • Expansion in LM patients at 160mg with *Tagrisso* including cohort with T790M NSCLC Global trial – four countries	• Safety and tolerability • Preliminary anti-tumour activity	• FPD: Q4 2014 • Data anticipated: H1 2017

Brilinta (ADP receptor antagonist)

Cardiovascular

Trial	Population	Patients	Design	Endpoints (primary)	Status
Phase III **THEMIS** **NCT01991795**	Patients with type-2 diabetes and coronary artery disease without a previous history of myocardial infarction (MI) or stroke	19,000	• Arm 1: *Brilinta* 60mg BiD • Arm 2: Placebo BiD *on a background of Acetylsalicylic Acid if not contra indicated or not tolerated* Global trial – 42 countries	• Composite of cardiovascular (CV) death, non-fatal MI and non-fatal stroke	• FPD: Q1 2014 • LPCD: Q2 2016 • Data anticipated: 2018
Phase III (BE) **NCT02436577**	Japanese healthy subjects	36	Single dose, Cross-Over • Arm 1 *Brilinta* (oral dispersible) OD tablet 90mg + 150mL of water • Arm 2 *Brilinta* OD tablet 90mg without water • Arm 3 *Brilinta* Immediate Release (IR) tablet 90mg + 200mL of water Local trial – one country	• Bioequivalence (BE) of *Brilinta* OD tablet vs *Brilinta* IR tablet	• FPD: Q2 2015 • LPCD: Q3 2015 • Data readout: Q4 2015
Phase III (BE) **NCT02400333**	Caucasian healthy subjects	36	Single dose, Cross-Over • Arm 1 *Brilinta* OD tablet 90mg +200ml of water • Arm 2 *Brilinta* OD tablet 90mg without water • Arm 3 *Brilinta* OD tablet 90mg (suspended in water) via nasogastric tube • Arm 4 *Brilinta* IR tablet 90mg + 200mL of water Local trial – one country	• BA/BE of *Brilinta* dispersible tablet vs *Brilinta* immediate release tablet	• FPD: Q2 2015 • LPCD: Q3 2015 • Data readout: Q4 2015
Phase II **HESTIA2** **NCT02482298**	Patients with sickle cell disease	90	• Arm 1: *Brilinta* 10mg BiD • Arm 2: *Brilinta* 45mg BiD • Arm 3: Placebo BiD Global trial – eight countries	• Number of days with pain due to Sickle Cell Disease	• FPD: Q3 2015 • LPCD: H2 2016 • Data readout: H2 2016

Farxiga (SGLT2 inhibitor)

Type-2 diabetes

Trial	Population	Patients	Design	Endpoints	Status
Phase IV **NCT02157298**	Japanese patients with type-2 diabetes with inadequate glycemic control on insulin	266	• Arm 1: *Farxiga* 5mg • Arm 2: Placebo Japan trial	• Change from baseline in Haemoglobin A1C (HbA1c) at week 16 • 1 year LT data	• FPD: Q2 2014 • LPCD: Q4 2015 • Data readout: Q2 2016
Phase III/IV **DECLARE** **NCT01730534**	Type-2 diabetes with high risk for CV event	17,276	• Arm 1: *Farxiga* 10mg QD + standard of care therapy QD • Arm 2: Placebo + standard of care therapy for type-2 Diabetes Global trial – 33 countries	• Time to first event included in the composite endpoint of CV death, MI or ischemic stroke	• FPD: Q2 2013 • LPCD: 2019 • Data anticipated: 2019
Phase III **NCT02096705** Partnered	Asian patients with type-2 diabetes with inadequate glycemic control on insulin	273	• Arm 1: *Farxiga* 10mg QD for 24 weeks + background Insulin • Arm 2: Placebo QD for 24 weeks + background Insulin Asia trial – three countries	• Change from baseline in HbA1c at week 24	• FPD: Q1 2014 • LPCD: Q1 2016 • Data Readout: Q2 2016
Phase III **DERIVE** **NCT02413398**	Patients with type-2 diabetes and moderate renal impairment	302	• Arm 1: *Farxiga* 10mg QD for 24 weeks • Arm 2: Placebo 10mg QD for 24 weeks Global trial – five countries	• Change from baseline in HbA1c at week 24	• FPD: Q2 2015 • Data anticipated: H2 2017
Phase III **DEPICT 1** **NCT02268214** Partnered	Type-1 diabetes	768	• Arm 1: *Farxiga* 5mg QD 52 weeks + insulin • Arm 2: *Farxiga* 10mg QD 52 weeks + insulin • Arm 3: Placebo QD 52 weeks + insulin Global trial – 17 countries	Primary: • Adjusted Mean Change From Baseline in Haemoglobin A1C (HbA1c) at week 24	• FPD: Q4 2014 • LPCD Q2 2016 • Data anticipated: H1 2017
Phase III **DEPICT 2** **NCT02460978** Partnered	Type-1 diabetes	768	• Arm 1: *Farxiga* 5mg QD 52 weeks + insulin • Arm 2: *Farxiga* 10mg QD 52 weeks + insulin • Arm 3: Placebo QD 52 weeks + insulin Global trial – 14 countries	Primary: • Adjusted Mean Change From Baseline in Haemoglobin A1C (HbA1c) at week 24	• FPD: Q3 2015 • Data anticipated: 2018

Onglyza (DPP-4 inhibitor)

Type-2 diabetes

Trial	Population	Patients	Design	Endpoints	Status
Phase III **NCT02104804**	Type-2 diabetes	444	• Arm 1: *Onglyza* 5mg QD + insulin with or without metformin • Arm 2: Placebo QD + insulin with or without metformin Trial in China	Primary: • Change from baseline in HbA1C at 24 weeks Secondary: • Change from baseline at 24 weeks in 120-minute postprandial plasma glucose (PPG) in response to a meal tolerance	• FPD: Q3 2014 • LPCD: Q3 2015 • Data readout: Q2 2016
Phase III **NCT02273050**	Type-2 diabetes	639	• Arm 1: *Onglyza* 5mg + Met (500mg with titration) • Arm 2: *Onglyza* 5mg + Placebo • Arm 3: Met (500mg with titration) + Placebo Trial in China	Primary: • The change in HbA1c from baseline to week 24 (prior to rescue) Secondary: • The proportion of subjects achieving a therapeutic glycaemic response at week 24 (prior to rescue) defined as HbA1c <7.0%	• FPD: Q1 2015 • LPCD: Q1 2016 • Data readout: Q4 2016

Qtern (saxagliptin/dapagliflozin) (DPP-4/SGLT2 inhibitor)

Type-2 diabetes

Trial	Population	Patients	Design	Endpoints	Status
Phase III **NCT02284893**	Type-2 diabetes	420	• Arm 1: Saxagliptin 5mg + dapagliflozin 10mg + Met IR/XR • Arm 2: Sitagliptin 100mg + Met IR/XR Global trial – six countries	Primary: • Mean change from baseline in HbA1C at week 24 Secondary: • The proportion of subjects achieving a therapeutic glycemic response at week 24 defined as HbA1C<7% • Mean change in total body weight at week 24	• FPD: Q1 2015 • LPCD: Q3 2015 • Data readout: Q3 2016
Phase III **NCT02419612**	Type-2 diabetes	440	• Arm 1: Saxagliptin 5mg + dapagliflozin 10mg + Met IR/XR • Arm 2: Glimeperide 1-6mg + Met IR/XR Global trial – 10 countries	Primary: • Mean change from baseline in HbA1c at week 52 Secondary: • Mean change from baseline in total body weight at week 52 • The proportion of subjects achieving a therapeutic glycemic response at week 52 defined as HbA1c<7.0%	• FPD: Q3 2015 • LPCD: Q3 2016 • Data anticipated: H2 2017
Phase III **NCT02551874**	Type-2 diabetes	598	• Arm 1: Saxagliptin 5mg + dapagliflozin 10mg + Met IR/XR with or without SU • Arm 2: Insulin glargine + Met IR/XR with or without SU Global trial – 12 countries	Primary: • Mean change from baseline in HbA1C at week 24 Secondary: • Mean change in total body weight at week 24 • The proportion of subjects with confirmed hypoglycemia at week 24	• FPD: Q4 2015 • LPCD: Q4 2016 • Data anticipated: H2 2017
Phase III **NCT02681094**	Type-2 diabetes	900	• Arm 1: Saxagliptin 5mg + dapagliflozin 5mg + Met IR/XR • Arm 2: Dapagliflozin 5mg + placebo + Met IR/XR • Arm 3: Saxagliptin 5mg + placebo + Met IR/XR Global trial – six countries	Primary: • Mean change from baseline in HbA1C at week 24 Secondary: • The proportion of subjects achieving a therapeutic glycemic respons at week 24 defined as HbA1C<7% • Mean change in fasting plasma glucose at 24 weeks	• FPD: Q1 2016 • LPCD: HQ4 2016 • Data anticipated: H2 2017

Bydureon (GLP-1 receptor agonist)

Type-2 diabetes

Trial	Population	Patients	Design	Endpoints	Status
Phase IV **EXSCEL** **NCT01144338** **Partnered**	Type-2 diabetes	14,743	• Arm 1: *Bydureon* once weekly 2mg SC • Arm 2: Placebo On a background of SoC medication, different degree of CV risk Global trial	• Time to first confirmed CV event in the primary composite CV endpoint (CV death, non-fatal MI, non-fatal stroke)	• FPD: Q2 2010 • LPCD: 2H 2017 • Data anticipated: 2018
Phase III **DURATION-NEO 1** **NCT01652716** **Partnered**	Type-2 diabetes	375	• Arm 1: *Bydureon* BiD SC (autoinjector) • Arm 2: *Bydureon* weekly suspension SC (autoinjector) On a background of diet & exercise alone or with stable regimen of oral antidiabetics US only	• Change in HbA1c from baseline at 28 weeks	• FPD: Q1 2013 • LPCD: • Data readout: Q3 2014 • Primary endpoint met
Phase III **DURATION-NEO 2** **NCT01652729** **Partnered**	Type-2 diabetes	360	• Arm 1: Sitagliptin • Arm 2: *Bydureon* weekly suspension SC (autoinjector) • Arm 3: Placebo On a background of diet & exercise alone or with stable regimen of oral antidiabetics US only	• Change in HbA1c from baseline at 28 weeks	• FPD: Q1 2013 • LPCD: • Data readout : Q3 2014 • Primary endpoint met
Phase III **DURATION 7** **NCT02229383**	Type-2 diabetes	440	• Arm 1: *Bydureon* once weekly 2mg SC + Titrated Basal Insulin • Arm 2: Placebo + Titrated Basal Insulin Double-blind 1:1 randomisation. Background therapy with or without Metformin Global trial	• Change in HbA1c from baseline at 28 weeks	• FPD: Q3 2014 • LPCD: Q3 2016 • Data readout: Q4 2016 • Primary endpoint met
Phase III **DURATION 8** **NCT02229396**	Type-2 diabetes	660	• Arm 1: *Bydureon* once weekly 2mg SC • Arm 2: Dapagliflozin 10mg • Arm 3: *Bydureon* once weekly 2mg SC + dapagliflozin 10mg Double-blind 1:1:1 randomisation. Background therapy with Metformin 1500mg/day up to 2 months prior to screening Global trial	• Change in HbA1c from baseline at 28 weeks	• FPD: Q3 2014 • LPCD: 2H 2017 • Data readout: Q3 2016 - 28-week data • Data anticipated: H1 2017 - 52-week data 2018 - 104-week data

Epanova (omega-3 carboxylic acids)

Hypertriglyceridaemia

Trial	Population	Patients	Design	Endpoints	Status
Phase III **NCT02463071**	Japanese patients with hypertriglyceridemia	375	• *Epanova* 2g and 4g vs. Placebo (after meal) daily for 52 weeks Global trial – one country	• Safety in Japanese patients • % change in triglycerides	• FPD: Q2 2015 • LPCD: Q1 2016 • Data anticipated: H1 2017
Phase III **EVOLVE II** **NCT02009865**	Severe hyper-triglyceridaemia	162	• Arm 1: *Epanova* 2g QD • Arm 2: Placebo (olive oil) Global trial – seven countries	• Change in serum triglycerides over 12 weeks	• FPD: Q4 2013 • LPCD: Q4 2014 • Data readout: Q4 2015
Phase III **STRENGTH (CVOT)** **NCT02104817**	Patients with hypertri-glyceridaemia and high cardiovascular disease risk	13,000	• Arm 1: *Epanova* 4g QD + statin • Arm 2: Placebo (corn oil) + statin Global trial – 22 countries	• Composite of MACE	• FPD: Q4 2014 • Data anticipated: 2019
Phase II **EFFECT I** **NCT02354976**	Overweight patients with hypertriglyceridemia	75	• *Epanova* 4g vs. Placebo vs. Fenofibrate 200mg daily for 12 weeks Global trial – one country	• Reduction in liver fat content (%) at the end of 12 weeks compared to placebo • Reduction in liver fat content (%) at the end of 12 weeks compared to fenofibrate	• FPD: Q3 2015 • LPCD: Q2 2016 • Data readout: Q4 2016
Phase II **EFFECT II** **NCT02279407**	Type-2 diabetes Liver fat >5.5%	80	• Arm 1: *Epanova* 4g QD • Arm 2: Placebo (olive oil) • Arm 3: *Epanova* 4g + dapaglifozin 10mg QD • Arm 4: Dapaglifozin 10mg Local trial – one country	• Reduction in liver fat content (%) at the end of 12 weeks	• FPD: Q1 2015 • LPCD: Q4 2015 • Data readout: Q2 2016
Phase I **PRECISE** **NCT02370537**	Pancreatic Exocrine Insufficiency (PEI) in patients with type-2 diabetes	66	• Arm 1: *Epanova* 4g single dose • Arm 2: *Omacor* 4g single dose Global trial – six countries in Europe	• Presence of Pancreatic Exocrine Insufficiency (PEI), Pharmacokinetics of Epanova and Omacor following a single oral dose in patients with different degrees of PEI	• FPD: Q1 2015 • LPCD: Q4 2015 • Data readout: Q2 2016

Epanova (omega-3 carboxylic acids)

Hypertriglyceridaemia

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02359045**	Healthy subjects	40 Part A 42 Part B	• Arm 1: D1400147 4g • Arm 2: D14000136 4g • Arm 3: D14000137 4g • Arm 4: *Epanova* 4g Local trial – one country	• Rate and extent of absorption of omega-3-carboxylic acids following single-dose oral administration of test formulations A, B and C and reference formulation (Epanova®) under fed and fasted condition, by assessment of AUC, AUC(0-72) and Cmax	• FPD: Q1 2015 • LPCD: Q3 2015 • Data readout: Q2 2016
Phase I **NCT02372344**	Healthy male subjects	42	• *Epanova* 4g X 3 separate occasions (fasting, before meal, and after meal) Local trial – one country	• Effect of food timing (fasting, before meal, and after meal) on pharmacokinetics (AUC, Cmax, AUC0-72)	• FPD: Q1 2015 • LPCD: Q2 2015 • Data readout: Q4 2015
Phase I **NCT02209766**	Healthy male Japanese and Caucasian subjects	18	• Arm 1: (Japanese): *Epanova* 2g vs. Placebo QD • Arm 2: (Japanese): *Epanova* 4g vs Placebo QD • Arm 3: (Caucasian): *Epanova* 4g vs Placebo Local trial – one country	• PK of single and multiple doses in healthy male Japanese subjects • Safety/tolerability profile	• FPD: Q3 2014 • LPCD: Q4 2014 • Data readout: Q3 2015
Phase I **NCT02189252**	Patients with a history of pancreatitis	16	• Arm 1: *Epanova* 4g →omega-3-acid ethyl esters capusles 4g QD • Arm 2: omega-3-acid ethyl esters capusles 4g →Epanova 4 g QD • Arm 3: *Epanova* 2g →omega-3-acid ethyl esters capusles 4g QD • Arm 4: omega-3-acid ethyl esters capusles 4g →Epanova 2g QD Global trial – two countries	• Plasma concentration vs. time curve ($AUC_{0-\tau}$) [Time Frame: 0 to 24 hours (AUC0-24)]	• FPD: Q3 2014 • LPCD: Q2 2015 • Data readout: Q4 2015

Symbicort (ICS/LABA)

Mild asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase III **SYGMA1** **NCT02149199**	Patients in need of GINA step-2 treatment	3,850	• Arm 1: *Symbicort Turbuhaler* 160/4.5 µg 'as needed' + Placebo *Pulmicort Turbuhaler* 200µg bid • Arm 2: *Pulmicort* 200 µg Turbuhaler bid + terbutaline 0.4mg Turbuhaler 'as needed' • Arm 3: terbutaline Turbuhaler 0.4mg 'as needed' + placebo *Pulmicort* 200µg Turbuhaler bid Global trial – 19 countries	• Well-controlled asthma weeks • Time to first severe asthma exacerbation • Time to first moderate or severe asthma exacerbation • Average change from baseline in pre-dose FEV_1	• FPD: Q4 2014 • LPCD: Q3 2016 • Data anticipated: H2 2017
Phase III **SYGMA2** **NCT02224157**	Patients in need of GINA step-2 treatment	4,214	• Arm 1: *Symbicort Turbuhaler* 160/4.5µg 'as needed' + Placebo *Pulmicort Turbuhaler* 200µg bid • Arm 2: *Pulmicort* 200µg Turbuhaler bid + terbutaline 0.4mg Turbuhaler 'as needed' Global trial – 25 countries	• Annual severe asthma exacerbation rate • Time to first severe asthma exacerbation • Average change from baseline in pre-dose FEV_1 • Time to trial specific asthma related discontinuation	• FPD: Q1 2015 • LPCD: Q3 2016 • Data anticipated: H2 2017

ICS= Inhaled corticosteroids
LABA= Long Acting Beta Agonist
GINA - Global Initiative for Asthma guidelines

Eklira/*Tudorza* (LAMA)

Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase IV **NCT02375724** **Partnered**	Patients with COPD	224	• Arm 1: Aclidinium bromide 400µg • Arm 2: Placebo to aclidinium bromide 400µg Global trial – five countries	• Change from baseline in overall E-RS Total score (i.e. score over the whole 8 weeks study period) • Change from baseline in overall E-RS Cough and Sputum domain score. • Change from baseline in the LCQ Total score at Week 8. Average change from baseline in pre-dose FEV1	• FPD: Q1 2015 • LPCD: Q3 2015 • Data readout: Q1 2016
Phase IV **ASCENT** **NCT01966107**	Patients with moderate to very severe COPD	4,000	• Arm 1: Aclidinium bromide 400µg • Arm 2: Placebo to aclidinium bromide 400µg Global trial – two countries	• Time to first Major Adverse Cardiovascular Event (MACE). Up to 36 Months • Rate of moderate or severe COPD exacerbations per patient per year during the first year of treatment. • Rate of hospitalisations due to COPD exacerbation per patient per year during the first year of treatment • Time to first Major Adverse Cardiovascular Event (MACE) or other serious cardiovascular events of interest. Up to 36 Months	• FPD: Q3 2013 • LPCD: Q3 2016 • Data anticipated: 2018
Phase IV **NCT02153489** **Partnered**	Patients with stable moderate and severe COPD	30	• Arm 1: aclidinium bromide 400µg • Arm 2: Placebo to Aclidinium bromide 400µg Local trial – one country	• Change from baseline in normalised forced expiratory volume in one second (FEV1). Week 3. FEV1 over the 24-hour period (AUC0-24) will be measured following morning administration • Adverse events. Week 5. A follow up telephone call will be made 14 days after the last study drug administration (for completed patients) or premature discontinuation visit (when applicable) to record adverse events.	• FPD: Q2 2014 • LPCD: Q1 2015 • Data readout: Q4 2015

LAMA= Long Acting Muscarinic Agonist

Duaklir (LAMA/LABA)

Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase IIb **ACHIEVE** **NCT02796651**	Patients with moderate COPD	120	• Arm 1: Aclidinium/formoterol FDC 400/12 µg • Arm 2: Placebo to aclidinium/formoterol FDC 400/12 µg Global trial – one Country	• Change from baseline in normalised FEV1 AUC over the 12h period immediately after morning study drug administration, AUC0-12/12h at Day 7 on treatment. • Change from baseline in FEV1 AUC0-6/6h at day one and day seven on treatment. • Change from baseline in morning pre-dose FEV1 at day seven on treatment.	• FPD: Q3 2016 • LPCD: Q3 2016 • Data anticipated: H1 2017
Phase III **AMPLIFY** **NCT02796677**	Patients with stable COPD	1,500	• Arm 1: Aclidinium bromide 400µg/Formoterol Fumarate 12 µg • Arm 2: Aclidinium bromide 400µg • Arm 3: Formoterol fumarate 12µg • Arm 4: Tiotropium 18µg Global trial – 13 Countries	• Change from baseline in 1-hour morning post-dose dose FEV1 of AB/FF 400/12µg compared to AB 400µg at week 24. • Change from baseline in morning predose (trough) FEV1 of AB/FF 400/12µg compared to FF 12µg at week 24. • Change from baseline in morning predose (trough) FEV1 at week 24 • comparing AB 400µg versus TIO 18µg.	• FPD: Q3 2016 • LPCD: Q4 2016 • Data anticipated: H2 2017
Phase III **AVANT** **CTs.gov Identifier:** **TBD**	Patients with stable COPD	1,060	• **Arm 1:** Aclidinium bromide 400 µg/Formoterol Fumarate 12 µg • **Arm 2:** Aclidinium bromide 400 µg • **Arm 3**: Formoterol fumarate 12 µg • **Arm 4:** Tiotropium 18 µg Global Study – 5 Countries	• Change from baseline in 1-hour morning post-dose dose FEV1 of Aclidinium bromide 400 µg/Formoterol fumarate 12 µg compared to Aclidinium bromide at Week 24. • Change from baseline in morning pre-dose (trough) FEV1 of Aclidinium bromide 400 µg/Formoterol fumarate 12 µg compared to Formoterol fumarate at Week 24. • Change from baseline in trough FEV1 of Aclidinium bromide 400 µg compared to placebo at Week 24.	• FPD: Q1 2017 • Data anticipated: H2 2018

LAMA= Long Acting Muscarinic Agonist
LABA= Long Acting Beta Agonist

Duaklir (LAMA/LABA)

Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase IV ACTIVATE NCT02424344 **Partnered**	Patients with moderate COPD	268	• Arm 1: Aclidinium/formoterol FDC 400/12 µg • Arm 2: Placebo to aclidinium/formoterol FDC 400/12 µg Global Study – 5 Countries	• Change from baseline in trough Functional Residual capacity (FRC) after 4 weeks of treatment • Change from baseline in Endurance Time (ET) during constant work rate cycle ergometry to symptom limitation at 75% of Wmax after 8 weeks of treatment • Percentage of inactive patients (<6000 steps per day) after 8 weeks on treatment	• FPD: Q2 2015 • LPD: Q2 2016 • Data readout: Q3 2016

LAMA= Long Acting Muscarinic Agonist
LABA= Long Acting Beta Agonist

Bevespi Aerosphere (LAMA/LABA)

Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase III **PINNACLE 1** **NCT01854645**	Moderate to very severe COPD	2,103	Treatment (24-week Treatment Period) • Arm 1: GFF MDI (*Bevespi Aerosphere*) 14.4/9.6µg BiD • Arm 2: GP MDI (PT001) 14.4µg BiD • Arm 3: FF MDI (PT005) 9.6µg BiD • Arm 4: Open-label tiotropium bromide inhalation powder 18µg QD • Arm 5: Placebo MDI BiD Multicentre, randomised, double-blind, parallel-group, chronic dosing, placebo- and active- controlled US, Australia, New Zealand	• Change from baseline in morning pre-dose trough FEV1	• FPD: Q2 2013 • LPCD: Q3 2014 • Data readout: Q1 2015
Phase III **PINNACLE 2** **NCT01854658**	Moderate to very severe COPD	1,615	Treatment (24-week Treatment Period) • Arm 1: GFF MDI (*Bevespi Aerosphere)* 14.4/9.6µg BiD • Arm 2: GP MDI (PT001) 14.4µg BiD • Arm 3: FF MDI (PT005) 9.6µg BiD • Arm 4: Placebo MDI BiD Multicentre, randomised, double-blind, parallel group, chronic dosing and placebo-controlled US	• Change from baseline in morning pre-dose trough FEV1	• FPD: Q3 2013 • LPCD: Q3 2014 • ToData readout: Q2 2015
Phase III **PINNACLE 3** **NCT01970878**	Moderate to very severe COPD	893	Treatment (28-week Treatment Period) • Arm 1: GFF MDI (*Bevespi Aerosphere*) 14.4/9.6µg BiD • Arm 2: GP MDI (PT001) 14.4µg BiD • Arm 3: FF MDI (PT005) 9.6µg BiD • Arm 4: Open-label tiotropium bromide inhalation powder QD Multi-centre, randomised, double-blind, parallel-group and active-controlled US, Australia, New Zealand	• Overall safety, tolerability and efficacy	• FPD: Q4 2013 • LPCD: Q3 2014 • Data readout: Q2 2015

LAMA= Long Acting Muscarinic Agonist
LABA= Long Acting Beta Agonist
GFF= Glycopyrronium and formoterol

Bevespi Aerosphere (LAMA/LABA)

Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase IIIb **NCT02268396**	Moderate to severe COPD	150	Treatment (5- to 6- week Treatment Period) • GFF 14.4/9.6µg • Placebo MDI BID Open-label and multiple-centre US	• Percentage of devices where number of actuations as counted at the end of the trial using dose indicator reading is consistent (± 20 actuations) with number of actuations reported by subject	• FPD: Q4 2014 • LPCD: Q4 2014 • Data readout: Q1 2015
Phase IIIb **NCT02347085**	Moderate to severe COPD	40	Treatments (8-week Treatment Period) • GFF MDI 14.4/9.6µg BID • Placebo MDI BID Randomised, 2-period, 2-treatment Double-blind, Multi-centre and Cross-over US	• FEV1 AUC0-24 on Day 29	• FPD: Q1 2015 • LPCD: Q1 2015 • Data readout: Q3 2015
Phase IIIb **NCT02347072**	Moderate to severe COPD	80	Treatments (12-week Treatment Period) • GFF MDI 14.4/9.6µg BID • Placebo • Spiriva Respimat 5µg QD (open-label) Randomised and 3-way cross-over US	• FEV1 AUC0-24 on Day 29	• FPD: Q1 2015 • LPCD: Q2 2015 • Data readout: Q3 2015
Phase III **NCT02454959**	Moderate to severe COPD	80	Treatments (2 week treatment Period) • GFF MDI 14.4/9.6µg with a spacer • GFF MDI 14.4/9.6µg without a spacer Randomised, 7-day, cross-over in subjects with moderate to severe COPD US	• Change from morning pre-dose trough FEV1 GFF 14.4/9.6µg with Aerochamber Plus VHC relative to GFF14.4µg w/o Aerochamber Plus VHC on day eight • PK parameters at all doses will include Cmax, AUC0-12, AUC0-t, tmax, Other PD/PK parameters may be calculated, as appropriate	• FPD: Q2 2015 • LPCD: Q1 2016 • Data readout: Q2 2016

LAMA= Long Acting Muscarinic Agonist
LABA= Long Acting Beta Agonist
GFF= Glycopyrronium and formoterol

Bevespi Aerosphere (LAMA/LABA)

Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design (G = glycopyrronium, F = formoterol fumarate)	Endpoints	Status
Phase III **NCT02343458**	Moderate to very severe COPD	1,614	Treatments (24-week Treatment Period) • GFF 14.4/9.6µg (N=514) • GP 14.4µg (N=440) • FF 9.6µg (N=440) • Placebo (N=220) • US/China: Trough FEV1 at week 24 of treatment • EU/Hybrid: Co-primary= Trough FEV1 over week 24 of treatment and TDI score over 24 weeks Randomised, Double-Blind, Chronic-Dosing , Placebo-Controlled, Parallel-Group and Multi-Centre US, UK, Germany, Costa Rica, Hungary, Poland, Russia, South Korea, Taiwan, China, Japan	• For the US/China approach, the primary endpoint will be the change from baseline in morning pre-dose trough FEV_1 at week 24 of treatment • For the Japan approach, the primary endpoint will be the change from baseline in morning pre-dose trough FEV_1 over weeks 12 to 24 of treatment • For the EU and Hybrid approaches, the primary endpoint will be the change from baseline in morning pre-dose trough FEV_1 over 24 weeks of treatment • TDI score (co-primary endpoint for EU and Hybrid) [Time Frame: Over 24 weeks]	• FPD: Q2 2015 • LPCD: H2 2016 • Data anticipated: H2 2017
Phase IIb **NCT02685293**	Moderate to severe COPD	40	Treatments (5-week Treatment Period) • GFF MDI (PT003) 14.4/9.6 µg ex-actuator • Placebo MDI Randomised, 2-period, Double-Blind, 2-treatment, Chronic-Dosing (7 Days), Crossover trial US	• Right Ventricular End Diastolic Volume Index (RVEDVi) measured at 2-hours post-dose on day eight	• FPD: Q4 2016 • LPCD: H2 2017 • Data anticipated: 2018

LAMA= Long Acting Muscarinic Agonist
LABA= Long Acting Beta Agonist
GFF= Glycopyronium and formoterol

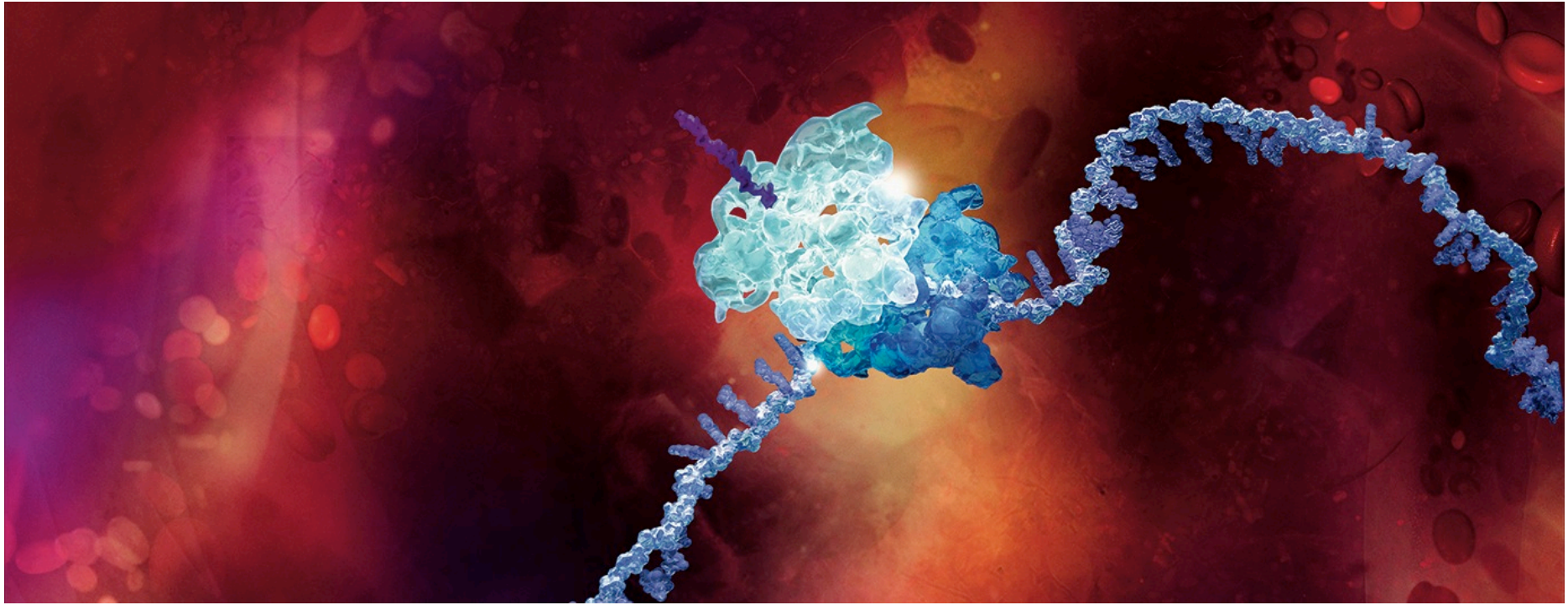
Daliresp/Daxas (oral PDE4 inhibitor)

Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase IV RESPOND NCT01443845	COPD	2,354	• 52W, randomised, DB with *Daliresp* 500µg OD vs placebo, in COPD on top of ICS/LABA	• Rate of moderate or severe COPD exacerbations per subject per year	• Data readout: Q4 2016
Phase IV OPTIMIZE NCT02165826	COPD	1,323	• 12W, randomised, DB to evaluate tolerability and PK of *Daliresp* 500µg OD with an up-titration regimen during the first 4Ws, including an open label down-titration evaluating tolerability and PK of 250µg Roflumilast OD in subjects not tolerating 500µg OD	• Percentage of participants prematurely discontinuing trial treatment for any reason during the main period	• Data readout: Q4 2016
Phase IIIb ROBERT NCT01509677	COPD	158	• 16W, randomised, placebo-controlled, DB, parallel-group trial to assess the anti-inflammatory effects of Roflumilast in COPD	• Number of inflammatory cells CD8+ in bronchial biopsy tissue specimen (sub-mucosa) measured at randomisation and at the end of the intervention period	• Data readout: Q4 2016

ICS= Inhaled corticosteroids
LABA= Long Acting Beta Agonist

Late-stage pipeline



Durvalumab (PD-L1 mAb)

Non-small cell lung cancer (NSCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase III ADJUVANT **NCT02273375** **Partnered**	Adjuvant NSCLC patients IB (≥4cm) – IIIA resected NSCLC (incl. EGFR/ALK positive)	1,100	• Arm 1: Durvalumab mg/kg IV Q4W x 12m • Arm 2: Placebo Global trial	• DFS • OS	• FPD: Q1 2015 • Data anticipated: 2020
Phase III PACIFIC **NCT02125461**	Unresectable Stage III NSCLC patients following platinum-based concurrent chemo-radiation therapy	702	• Arm 1: Durvalumab IV Q2W • Arm 2: placebo Global trial	• PFS • OS	• FPD: Q2 2014 • LPCD: Q2 2016 • Data anticipated: H2 2017
Phase II/III Lung Master Protocol **NCT02154490** **Partnered**	Stage IV squamous NSCLC patients Biomarker-targeted 2L therapy	140 ; 100 Durvalumab treated	Umbrella trial with 5 arms based on biomarker expression • Substudy A: Durvalumab (non-match for other biomarker driven substudies) IVQ2W single arm durvalumab PhII only • Substudy B: PI3K Inhibitor vs. docetaxel • Substudy C: CDK4/6 inhibitor vs. docetaxel • Substudy D: AZD4547 (FGFR inhibitor) vs. docetaxel • Substudy E: C-MET/HGFR Inhibitor + erlotinib vs. Erlotinib (Substudy is closed)	• ORR, PDL1 +	• FPD: Q2 2014 • Data anticipated: 2022
Phase II ATLANTIC **NCT02087423**	Stage IIIB-IV NSCLC patients PD-L1+ve patients 3L	293	• Arm 1: Durvalumab IV Q2W (EFGR/ALK WT) • Arm 2: Durvalumab IV Q2W (EFGR/ALK M+) • Arm 3: Durvalumab IV Q2W (EFGR/ALK WT) (90% PD-L1 - expression) Global trial – 18 countries	• Objective Response Rate • Secondary endpoints include duration of response, PFS and OS	• FPD: Q1 2014 • LPCD: Q2 2015 • Data readout: Q4 2015
Phase I/II Sequencing Study **NCT02179671**	Stage IIIB-IV NSCLC patients	72	• Arm 1: Iressa initially then switch to durvalumab IVQ2W • Arm 2: AZD9291 then switch to durvalumab • Arm 3: selumetinib + docetaxel then switch to durvalumab • Arm 4: tremelimumab then switch to durvalumab	• Complete Response Rate • ORR, Disease Control Rate	• FPD: Q3 2014 • LPCD: Q2 2016 • Data readout: Q3 2016

Durvalumab (PD-L1 mAb)

Squamous Cell Carcinoma of the Head & Neck (HNSCC) and other solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02301130** **Partnered**	Solid tumours	108	• Dose Escalation: N=36, 3 cohorts receiving Treatment A (mogamulizumab + durvalumab) and 3 cohorts receiving Treatment B (mogamulizumab + treme), in parallel • Dose Expansion: N=72, Multiple solid tumour types (NSCLC, Head and Neck, Pancreatic), Treatment A or B (12 subjects per treatment per disease type, in parallel)	• Safety and Tolerability • MTD • ORR, DoR, DCR, PFS, OS	• FPD: Q4 2014 • LPCD: Q3 2017 • Data anticipated: 2018
Phase I **NCT01938612**	Solid tumours (all-comers)	176	• Dose Escalation: 3 cohorts at Q2W and 1 cohort at Q3W • Dose Expansion: Biliary Tract Cancer, Oesophageal Cancer and SCCNH, Q2, and Q4 schedule • Dose Expansion of combination: Biliary Tract Cancer and Oesophageal Cancer, durvalumab Q4W 20mg/kg + tremelimumab Q4W 1mg/kg Trial conducted in Japan	• Safety • Optimal biologic dose	• FPD: Q3 2013 • LPCD: H2 2017 • Data anticipated: 2018

Durvalumab (PD-L1 mAb) + tremelimumab (CTLA-4 mAb)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase III ARCTIC NCT02352948	Stage IIIB-IV 3L NSCLC patients who have not be tested positive for EGFR/ALK mutation	480	• Arm 1: durvalumab + tremelimumab (PD-L1 –ve patients) • Arm 2: Standard of Care • Arm 3: tremelimumab (PD-L1 –ve patients) • Arm 4: durvalumab (PD-L1 –ve patients)	• PFS • OS • Safety	• FPD: Q2 2015 • LPCD: Q3 2016 • Data anticipated: H1 2017
Phase III MYSTIC NCT02453282	NSCLC 1L	1,118	• Arm 1: durvalumab • Arm 2: durvalumab + tremelimumab • Arm 3: Standard of care	• PFS • OS • Safety	• FPD: Q3 2015 • LPCD: Q3 2016 • Data anticipated: mid 2017
Phase III NEPTUNE NCT02542293	NSCLC 1L	800	• Arm 1: durvalumab + tremelimumab • Arm 2: Standard of care	• OS • Safety	• FPD: Q4 2015 • Data anticipated: 2018
Phase III EAGLE NCT02369874	HNSCC 2L	720	• Arm 1: durvalumab + tremelimumab • Arm 2: durvalumab • Arm 3: Standard of care	• OS • PFS • Safety	• FPD: Q4 2015 • Data anticipated: 2018
Phase III KESTREL NCT02551159	HNSCC 1L	628	• Arm 1: durvalumab • Arm 2: durvalumab + tremelimumab • Arm 3: Standard of care	• PFS • OS • Safety	• FPD: Q4 2015 • Data anticipated: H2 2017
Phase III DANUBE NCT02516241	Bladder 1L cis eligible and ineligible	525	• Arm 1: durvalumab + tremelimumab • Arm 2: durvalumab • Arm 3: Standard of care	• PFS • OS • Safety	• FPD: Q4 2015 • Data anticipated: 2018

Durvalumab (PD-L1 mAb) + tremelimumab (CTLA-4 mAb)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT02527434**	Urothelial Bladder Cancer Triple-negative Breast Cancer Pancreatic Ductal-Adenocarcinoma	76	• Arm 1 Tremelimumab in Urothelial Bladder Cancer • Arm 2 TremelimumabTriple-negative Breast Cancer • Arm 3 Tremelimumab Pancreatic Ductal-Adenocarcinoma	• Safety • Objective Response rate • Duration of Response	• FPD: Q1 2016 • Data anticipated: 2018
Phase I combination in advanced solid tumours in Japanese patients **NCT02141347**	Solid tumours (treme Phase I)	22	• Tremelimumab + durvalumab • Dose Escalation trial • Tremelimumab Q4W/Q12W 3-10mg/kg • Tremelimumab Q4W/Q12W X mg/kg + durvalumab Q4W X mg/kg	• Safety • Optimal biologic dose	• FPD: Q2 2014 • LPCD: Q2 2015 • Data anticipated: H1 2017
Phase 1 Combination in Advanced Solid Tumours **NCT02658214**	Solid tumours	80	• Arm 2 SCLC. Durvalumab + tremelimumab + carboplatin + etoposide • Arm 3 TNBC: Durvalumab + tremelimumab + gemcitabine + carboplatin • Arm 4 TNBC: Durvalumab + tremelimumab + nab-paclitaxel (paclitaxel-albumin) + carboplatin • Arm 5 Gastric/gastro-oOesophageal junction (GEJ): Durvalumab + tremelimumab + oxaliplatin + 5-fluorouracil (5FU) + leucovorin (calcium folinate/folinic acid)	• Safety	• FPD: Q1 2016 • LPCD: Q4 2016 • Data anticipated: 2018

Acalabrutinib (BTK inhibitor)

Blood cancers

Trial	Population	Patients	Design	Endpoint(s)	Status
Phase III **ACE-CL-006 (ELEVATE-RR)** NCT02477696	Relapsed/refractory chronic lymphocytic leukaemia (CLL), high risk	500	• Arm A: acalabrutinib • Arm B: ibrutinib	• PFS • Secondary endpoints: comparison of incidence of infections, RTs and atrial fibrillation, OS	• FPD: Q4 2015 • Data anticipated: 2019
Phase III **ACE-CL-007 (ELEVATE-TN)** NCT02475681	Previously untreated CLL	510	• Arm A: chlorambucil + obinutuzumab • Arm B: acalabrutinib + obinutuzumab • Arm C: acalabrutinib	• PFS (Arm A vs Arm B) • Secondary endpoints: IRC assessed ORR, TTNT, OS (Arm A vs Arm B vs. Arm C)	• FPD: Q3 2015 • Data anticipated: 2019
Phase III **ACE-CL-309** NCT02970318	Relapsed/refractory CLL	306	• Arm A: acalabrutinib • Arm B: rituximab + idelalisib or bendamustine (investigator's choice)	PFS Secondary endpoints: IRC assessed ORR, TTNT, OS, DOR, PROs	• Data anticipated: 2020
Phase III **ACE-LY-308** NCT02972840	Previously untreated Mantle cell lymphoma (MCL)	546	• Arm A: acalabrutinib + bendamustine + rituximab • Arm B: bendamustine + rituximab	PFS by Lugano Classification for NHL Secondary endpoints: Investigator-assessed (IA) PFS, ORR; IRC assessed ORR, DOR, time to response; OS	• Data anticipated: 2022
Phase II **ACE-CL-208** NCT02717611	Relapsed/ refractory CLL, intolerant to ibrutinib	80	Acalabrutinib monotherapy	• ORR at 36 cycles	• FPD: Q1 2016 • Data anticipated: 2020
Phase II **15-H-0016** NCT02337829	Relapsed/refractory and treatment naive/del17p CLL/small lymphocytic lymphoma (SLL)	48	Acalabrutinib monoherapy • Arm A: Lymph node biopsy • Arm B: Bone marrow biopsy	• Efficacy • Secondary endpoints: Safety, TTP, PFS, OS	• FPD: Q1 2015 • Data anticipated: H2 2017
Phase II **ACE-LY-004** NCT02213926	Relapsed/refractory MCL	124	Acalabrutinib monotherapy	• ORR	• FPD: Q1 2015 • Data anticipated: H1 2017
Phase I/II **ACE-CL-001** NCT02029443	CLL/SLL/Richter's transformation (RT)	286	Acalabrutinib monotherapy Dose escalation and expansion	• Safety, PK, PD • Secondary endpoints: ORR, DOR, and PFS	• FPD: Q1 2014 • LPCD: Q2 2016 • Data anticipated: 2019

Acalabrutinib (BTK inhibitor)

Blood cancers

Trial	Population	Patients	Design	Endpoint(s)	Status
Phase I/II **ACE-LY-001** **NCT02328014**	B-Cell Malignancies	126	Dose escalation and expansion trial of the combination of acalabrutinib and ACP-319 (Pi3K inhibitor)	• Safety • ORR	• FPD: Q1 2015 • Data anticipated: H2 2017
Phase I/II **ACE-LY-005** **NCT02362035**	Hematological Malignancies	187	Acalabrutinib + pembrolizumab	• Safety • Secondary endpoints: ORR, DOR, PFS, OS, TTNT	• FPD: Q1 2015 • Data anticipated: 2021
Phase I/II **ACE-WM-001** **NCT02180724**	Waldenstrom Microglobulinemia (WM)	88	Acalabrutinib monotherapy	• ORR	• FPD: Q3 14 • LPCD: Q4 15 • Data anticipated: H1 2017
Phase Ib **ACE-LY-002** **NCT02112526**	Relapsed/refractory de novo ABC DLBCL	21	Acalabrutinib monotherapy	• Safety	• FPD: Q3 2014 • LPCD: Q2 2016 • Data anticipated: H1 2017
Phase Ib **ACE-LY-106** **NCT02717624**	Mantle Cell Lymphoma (MCL)	48	Acalabrutinib in combination with bendamustine and rituximab • Arm A: Treatment naive • Arm B: Relapsed/refractory	• Safety	• FPD: Q2 2016 • Data anticipated: 2021
Phase Ib **ACE-MY-001** **NCT02211014**	Relapsed/refractory Multiple Myeloma	40	• Arm A: acalabrutinib • Arm B: acalabrutinib + dexamethasone	• Safety	• FPD: Q1 2015 • LPCD: Q1 2016 • Data anticipated: H1 2017
Phase I **ACE-LY-003** **NCT02180711**	Relapsed/refractory Follicular Lymphoma	38	• Arm A: acalabrutinib • Arm B: acalabrutinib + rituximab	• Safety	• FPD: Q1 2015 • LPCD: Q3 2016 • Data anticipated: 2018
Phase I **ACE-CL-002** **NCT02157324**	Relapsed/refractory CLL/SLL	12	Acalabrutinib in combination with ACP-319 Dose escalation	• Safety, PK, PD	• FPD: Q3 2014 • LPCD: Q3 2015 • Data anticipated: 2018
Phase I **ACE-CL-003** **NCT02296918**	CLL/SLL/Prolymphocytic leukemia (PLL)	45	Acalabrutinib + obinutuzumab • Arm A: Relapsed/refractory • Arm B: Treatment naive	• Safety, ORR • Secondary endpoints: PD, PFS, TTN, OS	• FPD: Q1 2015 • LPCD: Q1 2018 • Data anticipated: 2018

Acalabrutinib (BTK inhibitor)

Solid tumours

Trial	Population	Patients	Design	Endpoint(s)	Status
Phase II **ACE-ST-006** **NCT02454179**	≥ 2L advanced or metastatic head and neck squamous cell carcinoma	78	• Arm A: pembrolizumab • Arm B: acalabrutinib+ pembrolizumab	• ORR	• FPD: Q2 2015 • LPCD: Q2 2016 • Data anticipated: H2 2017
Phase II **ACE-ST-007** **NCT02448303**	≥ 2L advanced or metastatic NSCLC	74	• Arm A: pembrolizumab • Arm B: acalabrutinib+ pembrolizumab	• ORR	• FPD: Q2 2015 • LPCD Q2 2016 • Data anticipated: H1 2017
Phase II **ACE-ST-208** **NCT02537444**	Recurrent ovarian cancer	78	• Arm A: acalabrutinib • Arm B: acalabrutinib+ pembrolizumab	• ORR	• FPD: Q4 2015 • LPCD Q2 2016 • Data anticipated: H2 2017
Phase II **ACE-ST-003** **NCT02362048**	≥ 2L advanced or metastatic pancreatic cancer	77	• Arm A: acalabrutinib • Arm B: acalabrutinib+ pembrolizumab	• Safety	• FPD: Q2 2015 • LPCD: Q1 2016 • Data anticipated: H2 2017
Phase II **ACE-ST-005** **NCT02351739**	Platinum-resistant urothelial bladder cancer	78	• Arm A: pembrolizumab • Arm B: acalabrutinib+ pembrolizumab	• ORR	• FPD: Q2 2015 • LPCD: Q1 2016 • Data anticipated: 2018
Phase Ib/II **ACE-ST-209** **NCT02586857**	≥ 2L glioblastoma multiforme	72	• Arm A: acalabrutinib 200 mg BID • Arm B: acalabrutinib 400 mg QD	• Safety, ORR • Secondary Endpoints: DOR, PFS, PFS-6, OS	• FPD: Q1 2016 • Data anticipated: 2018

Moxetumomab pasudotox (CD22 mAb)

Blood cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase III PLAIT **NCT01829711**	Adults with relapsed or refractory hairy cell leukemia (HCL)	77	• Multicentre, single-arm, open-label Phase III trial • Moxetumomab pasudotox IV at the recommended dose	• Primary: Rate of durable CR: CR maintained for > 180 days • Efficacy: CR rate, ORR, Duration of CR and ORR, time to response (TTR), PFS • Safety and tolerability • PK and immunogenicity	• FPD: Q2 2013 • Data anticipated: H2 2017
Phase I **NCT00586924**	Adults with relapsed refractory HCL	49	• Open Label dose escalation Phase I trial • Moxetumomab pasudotox IV	• MTD and efficacy	• FPD: Q2 2007 • LPCD: Q1 2014 • Data readout: Q2 2015

Selumetinib (MEK-inhibitor)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase III **ASTRA** **NCT01843062**	Differentiated thyroid cancer	304	• Arm 1: Selumetinib 75mg BiD 5 weeks duration + RAI 100mCi[a] • Arm 2: Placebo BiD 5 weeks duration + RAI 100mCi[a] Global trial – eight countries [a] Single dose of 100mCi ^{131}I administered following 4 weeks of selumetinib (or placebo)	• Complete remission (CR) rate at 18 months post-radioactive iodine • Clinical remission rate at 18 months post RAI (per SoC)	• FPD: Q3 2013 • LPCD: Q1 2016 • Data anticipated: 2018

Phase II
 	
NCT01362803
 	
Partnered
	Pediatric Neurofibromatosis type 1	minimum of 50	• Single Arm: selumetinib 25mg/m^2 BID with 2 strata:
			  • Stratum 1: PN related morbidity present at enrolment
			  • Stratum 2: No PN related morbidity present at enrolment
				• Complete partial and complete response rate measured by volumetric MRI;
				• Duration of response and functional outcomes/QoL
					• FPD: Q3 2015
					• LPCD: H2 2016
					• Data anticipated: 2018

Phase I **NCT02586987**	Advanced solid tumours	40	• Dose escalation trial: Starting dose selumetinib 50mg bd 1 week on/1 week off - durvalumab 20mg/kg Q4 – after 7 days of selumetinib dosing • Note: No escalation in durvalumab dose; selumetinib escalation with 25mg bd increment / dose cohort	• Safety and tolerability • PK of selumetinib and durvalumab and preliminary anti-tumour activity	• FPD: Q1 2016 • LPCD: 2017 • Data anticipated: 2017

Roxadustat (HIF-PHI)

Chronic Kidney Disease/End Stage Renal Disease (CKD/ESRD)

Trial	Population	Patients	Design	Endpoints	Status
Phase III ANDES **NCT01750190**	Anaemia in CKD patients not receiving dialysis	600	• Arm 1: Roxadustat • Arm 2: Placebo Global trial	Haemoglobin response	• FPD: Q4 2012 • Data anticipated: 2018 Sponsored by FibroGen
Phase III ALPS **NCT01887600**		600	• Arm 1: Roxadustat • Arm 2: Placebo Global trial	Haemoglobin response	• FPD: Q2 2013 • Data anticipated: 2018 Sponsored by Astellas
Phase III DOLOMITES **NCT02021318**		570	• Arm 1: Roxadustat • Arm 2: Darbepoetin alfa Global trial	Haemoglobin response	• FPD: Q1 2014 • Data anticipated: H2 2017 Sponsored by Astellas
Phase III OLYMPUS **NCT02174627**		2,600	• Arm 1: Roxadustat • Arm 2: Placebo Global trial	MACE	• FPD: Q3 2014 • Data anticipated: 2018 Sponsored by AstraZeneca
Phase III ROCKIES **NCT02174731**	Anaemia in CKD in patients receiving dialysis	1,425	• Arm 1: Roxadustat • Arm 2: Epoetin alfa Global trial	MACE	• FPD: Q3 2014 •Data anticipated: 2018 Sponsored by AstraZeneca
Phase III SIERRAS **NCT02273726**		600	• Arm 1: Roxadustat • Arm 2: Epoetin alfa Global trial	Haemoglobin response	• FPD: Q4 2014 •Data anticipated: 2018 Sponsored by FibroGen
Phase III PYRENEES **NCT02278341**		750	• Arm 1: Roxadustat • Arm 2: Erythropoiesis Stimulating Agent • Arm 3: Darbepoetin alfa Global trial	Haemoglobin response	• FPD: Q4 2014 • Data anticipated: H1 2017 Sponsored by Astellas

HIF-PHI= Hypoxia-Inducible Factor Prolyl Hydroxylase Inhibitor

Roxadustat (HIF-PHI)

Chronic Kidney Disease/End Stage Renal Disease (CKD/ESRD)

Trial	Population	Patients	Design	Endpoints	Status
Phase III HIMALAYAS **NCT02052310**	Anaemia in newly initiated dialysis patients	1,000	• Arm 1: Roxadustat • Arm 2: Epoetin alfa Global trial	Haemoglobin response	• FPD: Q4 2013 • Data anticipated: 2018 Sponsored by FibroGen
Phase III **NCT02652819**	Anemia in CKD patients not receiving dialysis	150	Arm 1: FG-4592 (roxadustat) Arm 2: Placebo China trial	Haemoglobin response	• FPD: Q4 2015 • LPCD: Q4 2016 • Data anticipated: H1 2017 • Primary endpoint met Sponsored by FibroGen
Phase III **NCT02652806**	Anemia in CKD patients receiving dialysis	300	Arm 1: FG-4592 (roxadustat) Arm 2: Epoetin alfa China trial	Haemoglobin response	• FPD: Q4 2015 • LPCD: Q2 2016 • Data readout: H1 2017 • Primary endpoint met Sponsored by FibroGen

HIF-PHI= Hypoxia-Inducible Factor Prolyl Hydroxylase Inhibitor

ZS-9 (Sodium zirconium cyclosilicate)

Hyperkalemia

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT01493024**	Hyperkalemia and moderate chronic kidney disease (CKD)	90	• Arm 1: Escalating TID doses (0.3g, 3g and 10g) of ZS • Arm 2: Placebo TID US	• Change in serum potassium levels from baseline	• FPD: Q4 2011 • LPCD: Q2 2012 • Data readout: Q2 2012
Phase III **NCT01737697**	Hyperkalemia	754	• Arm 1: ZS 1.25g TID for 48 hrs followed by QD for 12 days • Arm 2: ZS 2.5g TID for 48 hrs followed by QD for 12 days • Arm 3: ZS 5g TID for 48 hrs followed by QD for 12 days • Arm 4: ZS 10g TID for 48 hrs followed by QD for 12 days • Arm 5: Placebo TID for 48 hrs followed by QD for 12 days Global trial – three countries	• Change in serum potassium levels from baseline	• FPD: Q4 2012 • LPCD: Q4 2013 • Data readout: Q4 2013 • Primary endpoint met
Phase III **NCT02088073**	Hyperkalemia	258	Open-label ZS 10g TID for 48 hrs followed by: • Arm 1: ZS 5g QD for 28 days • Arm 2: ZS 10g QD for 28 days • Arm 3: ZS 15g QD for 28 days • Arm 4: Placebo QD for 28 days Global trial – three countries	• Maintenance of normokalemia	• FPD: Q1 2014 • LPCD: Q3 2014 • Data readout: Q4 2014 • Primary endpoint met
Phase III **Open-label Extension to Study NCT02088073** **NCT02107092**	Participation in study NCT02088073	123	• Arm 1: ZS 10g QD for 11 months. Option to uptitrate to 15g QD or downtitrate to 5g QD and 5g QOD Global trial – three countries	• Maintenance of normokalemia	• FPD: Q2 2014 • LPCD: Q3 2015 • Data readout: Q3 2015
Phase III **NCT02163499**	Hyperkalemia	751	• Arm 1: ZS 5g QD for 12 months. Option to uptitrate to 10 and15g QD or downtitrate to 5g QOD Global trial – seven countries	• Safety and tolerability	• FPD: Q2 2014 • LPCD: Q4 2016

Benralizumab (IL-5R mAb)

Severe, uncontrolled asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase III **CALIMA** **NCT01914757**	Severe, uncontrolled asthma, despite background controller medication, MD & HD ICS + LABA ± chronic OCS Age 12-75 years	1,026 HD + ~200 MD	• Arm 1: 30mg Q8w SC • Arm 2: 30mg Q4w SC • Arm 3: Placebo SC 56-week trial Global trial – 11 countries	• Annual asthma exacerbation rate • Assess pulmonary function, asthma symptoms, other asthma control metrics, ER/ED hospitalisation visits, PK, and IM	• FPD: Q4 2013 • Data readout: Q2 2016
Phase III **SIROCCO** **NCT01928771**	Severe, uncontrolled asthma, despite background controller medication HD ICS + LABA ± chronic OCS Age 12-75 years	1,134	• Arm 1: 30mg Q8w SC • Arm 2: 30mg Q4w SC • Arm 3: Placebo SC 48-week trial Global trial – 17 countries	• Annual asthma exacerbation rate • Assess pulmonary function, asthma symptoms, other asthma control metrics, ER/ED hospitalisation visits, PK, and IM	• FPD: Q4 2013 • Data readout: Q2 2016
Phase III **ZONDA** **NCT02075255**	Severe, uncontrolled asthma on HD ICS plus long-acting β2 agonist and chronic oral corticosteroid therapy Age 18-75 years	210	• Arm 1: 30mg Q8w SC • Arm 2: 30mg Q4w SC • Arm 3: Placebo SC 46-week trial Global trial – 12 countries	• Reduction of oral corticosteroid dose	• FPD: Q3 2014 • Data readout: Q3 2016
Phase III **MELTEMI** **NCT02808819**	A multicenter, open-label, safety extension trial with benralizumab for asthmatic adults on Inhaled Corticosteroid plus Long-acting Beta2 Agonist Age 18-75 years	770	• Arm 1: 30mg Q4W SC • Arm 2: 30mg Q8W SC	• Safety and tolerability	• FPD: Q2 2016 • Data anticipated: 2019
Phase III **ALIZE**	A multicenter, randomised, double-blind, parallel group, placebo-controlled, Phase IIIb trial to evaluate the potential effect of benralizumab on the humoral immune response to the seasonal influenza vaccination in adolescent and young adult patients with severe asthma Ages 12-21 years	100	• Arm1 30mg Q4W SC with one dose of seasonal influenza virus vaccine Intramuscular (IM) at week eight. • Arm1 Placebo Q4W SC with one dose of seasonal influenza virus vaccine Intramuscular (IM) at week	• Post-dose strain-specific hemagglutination-inhibition (HAI) antibody geometric mean fold rises (GMFRs • Post-dose strain-specific serum HAI antibody geometric meant titers (GMTs) • Proportion of patients who experience a strain-specific post-dose antibody response with antibody response defined as a ≥4-fold rise in HAI antibody titer	• FPD: Q2 2016 • Data anticipated: H1 2017

Benralizumab (IL-5R mAb)

Severe, uncontrolled asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase III **BISE** **NCT02322775**	Asthmatic with FEV_1 (50-90% predicted) on low to medium dose inhaled corticosteroid Age 18-75 years	200	• Arm 1: 30mg Q4W SC • Arm 3: Placebo SC 12-week trial Global trial – six countries	• Pulmonary function (FEV_1)	• FPD: Q1 2015 • Data readout: Q1 2016
Phase III **BORA** **NCT02258542**	Severe asthma, inadequately controlled despite background controller medication, MD & HD ICS + LABA ± chronic OCS Age 12-75 years	2,550	• Arm 1: 30mg Q4W SC • Arm 2: 30mg Q8W SC* • Placebo administered at select interim visits to maintain blind between treatment arms 56-week (adults) 108-week (adolescents) Global trial	• Safety and tolerability	• FPD: Q4 2014 • Data anticipated: 2018
Phase III **GREGALE** **NCT02417961**	Severe asthma, inadequately controlled despite background controller medication, MD & HD ICS + LABA ± chronic OCS Age 18-75 years	120	• Arm 1: 30mg Q4W SC 28-week (adults) Global trial – two countries	• Functionality, reliability, and performance of a pre-filled syringe with benralizumab Administered at Home	• FPD: Q2 2015 • Data readout: Q2 2016
Ph III **ARIA** **NCT02821416**	A Double-Blind, randomised, parallel group, placebo-controlled multi-centre trial to evaluate the effect of benralizumab on allergen-induced inflammation in Mild, atopic asthmatic Age 18-65 years	38	• Arm 1 : 30mg Q4W SC • Arm 2: Placebo SC	• Safety and tolerability	• FPD Q3 2016 • Data anticipated: 2019

ICS= Inhaled corticosteroids
LABA= Long Acting Beta Agonist

Benralizumab (IL-5R mAb)

Severe, uncontrolled asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase III SOLANA **NCT02869438**	Severe asthma Age 18-75 years	230	• Arm 1: 30mg Q4W SC • Arm 2: Placebo SC 16-week trial Global trial – six countries	• Onset and maintenance of effect on lung function	• FPD: Q4 2016 • Data anticipated: 2018
Phase III GRECO **NCT02918071**	Severe asthma Age 18-75 years	120	Open label 30mg Q4w 28-week trial Global trial - two countries	• % of patients/ caregivers who successfully self administer at home	• FPD: Q4 2016 • Data anticipated: 2018
AMES **NCT02968914**	Healthy Volunteer Age 18-55years	162	Open label study to compare 30 mg benralizumab PK administered by APFS or AI device 8-week study Global study – two countries	• PK Comparability	• FPD: Q4 2016 • Data anticipated: H2 2017

Benralizumab (IL-5R mAb)

Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase III **TERRANOVA** **NCT02155660**	Moderate to very severe COPD with exacerbation history	2,168	• Arm 1: 10mg Q8W SC • Arm 2: 30mg Q4W SC • Arm 3: 100mg Q8W SC • Arm 4: Placebo SC 48-week trial Global trial – 23 countries	• Rate of COPD exacerbation	• FPD: Q3 2014 • Data anticipated: 2018
Phase III **GALATHEA** **NCT02138916**	Moderate to very severe COPD with exacerbation history	1,626	• Arm 1: 30mg Q4W SC • Arm 2: 100mg Q8W SC • Arm 3: Placebo SC 48-week trial Global trial – 17 countries	• Rate of COPD exacerbation	• FPD: Q3 2014 • Data anticipated: 2018

Tralokinumab (IL-13 mAb)

Severe, uncontrolled asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase III **STRATOS 1** **NCT02161757**	Adults with severe, uncontrolled asthma	1,140	Cohort 1: • Arm 1: Tralokinumab dose regimen 1, SC • Arm 2: Placebo SC Cohort 2 : • Arm 1: Tralokinumab dose regimen 2, SC • Arm 2: Placebo SC 2:1 randomisation in both cohorts Global trial – 14 countries	Primary: • Asthma exacerbation rate reduction Key secondary: • Effect of tralokinumab on measures of pulmonary function (FEV1), asthma symptoms (Asthma Daily Diary), asthma control (ACQ-6) and asthma related QoL (AQLQ (S) +12)	• FPD: Q3 2014 • LPCD: Q1 2016 • Data anticipated: H1 2017
Phase III **STRATOS 2** **NCT02194699**	Adults with severe, uncontrolled asthma	770	• Arm 1: Tralokinumab SC • Arm 2: Placebo SC 1:1 randomisation Global trial – 12 countries including Japan	Primary: • Asthma exacerbation rate reduction Key secondary: • Effect of tralokinumab on measures of pulmonary function (FEV1), asthma symptoms (Asthma Daily Diary), asthma control (ACQ-6) and asthma related QoL (AQLQ (S) +12)	• FPD: Q4 2014 • LPCD: Q1 2016 • Data anticipated: H1 2017
Phase III **TROPOS** **NCT02281357**	Adults with oral corticosteroid dependent asthma	120	• Arm 1: Tralokinumab SC • Arm 2: Placebo SC 1:1 randomisation Global trial – seven countries	Primary: • % Change in OCS dose Key secondary: • Proportion of subjects achieving final daily OCS dose ≤5 mg • Proportion of subjects achieving ≥50% reduction in OCS dose	• FPD: Q1 2015 • LPCD: Q3 2016 • Data anticipated: H2 2017
Phase II **MESOS** **NCT02449473**	Adults with uncontrolled asthma	80	• Arm 1: Tralokinumab SC • Arm 2: Placebo SC 1:1 randomisation Global trial – three countries	Primary: • Change in number of airway • sub-mucosal eosinophils Secondary: • Change in blood eosinophils levels • Change in eosinophil cationic protein as a measure of activated eosinophils in blood and sputum	• FPD: Q3 2015 • LPCD: Q4 2016 • Data anticipated: H2 2017

PT010 (LAMA/LABA/ICS)

Chronic Obstructive Pulmonary Disease (COPD) & Asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase III **NCT02536508**	Moderate to very severe COPD	500	Treatments (52-week Treatment Period) • BGF MDI 320/14.4/9.6µg • GFF MDI 14.4/9.6µg • BFF MDI 320/9.6µg • *Symbicort* Turbuhaler 400/1 µg Randomised, double-blind, chronic-dosing, multi-centre Country – US	Bone Mineral Density sub-study Endpoint: • Change from baseline in BMD of the lumbar spine measured using DXA scans of L1-L4 at week 52 Ocular Sub-study Safety Endpoint: • Change from baseline in LOCS III at week 52	• FPD: Q3 2015 • LPCD: Q3 2016 • Data anticipated: H2 2017
Phase III **NCT02465567**	Moderate to very severe COPD	8,000 (possible increase by 4,000 after blinded sample size re-assessment)	Treatments (1-year Treatment Period) • BGF MDI 320/14.4/9.6µg BID • BGF MDI 160/14.4/9.6µg BID • BFF MDI 320/9.6µg BID • GFF MDL 14.4/9.6µg BID Randomised, double-blind, multi-centre and parallel-group Multi-country	• Rate of moderate or severe COPD exacerbations • Time to first moderate or severe COPD exacerbation	• FPD: Q3 2015 • Data anticipated: 2019
Phase III **KRONOS** **NCT02497001**	Moderate to very severe COPD	1,800	Treatments (24-week Treatment Period) • BGF MDI 320/14.4/9.6µg • GFF MDI 14.4/9.6µg • BFF MDI 320/9.6µg • *Symbicort* Turbuhaler 400/12µg Randomised, double-blind, parallel-group, and chronic dosing and multi-centre Multi-country	Co-Primary Endpoints (EU): • FEV_1 area under curve from 0 to 4 hours (AUC0-4) over 24 weeks (BGF MDI vs BFF MDI and BGF MDI vs *Symbicort* Turbuhaler) • Change from baseline in morning pre-dose trough FEV_1 over 24 weeks (BGF MDI vs GFF MDI) • Transition dyspnea index (TDI) focal score over 24 weeks (BGF MDI vs BFF MDI and BGF MDI vs GFF MDI) Primary Endpoint (Japan): • Change from baseline in morning pre-dose trough FEV_1 over 24 weeks (BGF MDI vs BFF MDI, BGF MDI vs GFF MDI) Primary Endpoint (US): • FEV_1 area under curve from 0 to 4 hours (AUC0-4) at week 24 (BGF MDI vs BFF MDI • Change from baseline in morning pre-dose trough FEV_1 at week 24 (MDI vs GFF MDI)	• FPD: Q3 2015 • Data anticipated: 2018

PT010 (LAMA/LABA/ICS)

Chronic Obstructive Pulmonary Disease (COPD) & Asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT02105012**	Adult mild to moderate persistent asthma	150	• Arm 1: BD MDI 320µg BiD • Arm 2: BD MDI 160µg BiD • Arm 3: BD MDI 80µg BiD • Arm 4: BD MDI 40µg BiD • Arm 5: Placebo MDI BiD Randomised, four-period, five-treatment incomplete-block and cross-over US	• Change from baseline in morning pre-dose trough forced expiratory volume in one second (FEV_1) • Mean evening pre-dose peak flow rate (PEFR) • Mean number of puffs of rescue Ventolin hydrofluoroalkane (HFA) • Asthma Control Questionnaire score	• FPD: Q2 2014 • LPCD: Q1 2015 • Data readout: Q3 2015
Phase II **NCT02433834**	Intermittent asthma/mild to moderate persistent asthma	200	Treatment (18-week Treatment Period) • GP MDI 28.8µg BiD • GP MDI 14.4µg BiD • GP MDI 7.2µ BID • GP MDI 3.6µ BID • Severent® Diskus® 50µ BID • Placebo MDI Randomised, double-blind, chronic-dosing, placebo controlled, incomplete block, cross-over, multi-centre, dose-ranging trial	• Peak change from baseline in FEV_1 within three hours post-dosing on Day 15	• FPD: Q2 2015 • LPCD: Q4 2015 • Data readout: Q2 2016

PT010 (LAMA/LABA/ICS)

Chronic Obstructive Pulmonary Disease (COPD) & Asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02189304**	Healthy subjects	60	• Arm 1: BGF MDI 320/14.4/9.6µg • Arm 2: BFF MDI (320/9.6µg) • Arm 3: *Symbicort Turbuhaler* 400/12µg Randomised, double-blind, single-dose, three-period, three-treatment and cross-over US	• Overall safety • PK parameters AUC_{0-12} and Cmax	• FPD: Q3 2014 • LPCD: Q3 2014 • Data readout: Q4 2014
Phase I **NCT02197975**	Japanese healthy subjects	28	Treatment (2-week Treatment Period) • Arm 1: BGF MDI 320/14.4/9.6µg • Arm 2: BGF MDI 160/14.4/9.6µg • Arm 3: Placebo MDI Randomised, double-blind, placebo-controlled, 2-period, ascending-dose and crossover Japan	• Overall safety • PK parameters AUC_{0-12} and Cmax	• FPD: Q3 2014 • LPCD: Q3 2014 • Data readout: Q4 2014
Phase I **NCT02196714**	Japanese healthy subjects	24	Treatment (four-day Treatment Period) • Arm 1: GFF MDI 14.4/9.6µg • Arm 2: GFF MDI 28.8/9.6µg • Arm 2: GP MDI 14.4µg • Arm 2: GP MDI 28.8µg Randomised, double-blind, single-dose, four-period, four-treatment and cross-over Japan	• Overall safety • PK parameters AUC_{0-12} and Cmax	• FPD: Q3 2014 • LPCD: Q3 2014 • Data readout: Q4 2014

LAMA= Long Acting Muscarinic Agonist
LABA= Long Acting Beta Agonist
ICS= Inhaled corticosteroids

Anifrolumab (type I IFN receptor mAb)

Systemic Lupus Erythematosus (SLE)

Trial	Population	Patients	Design	Endpoints	Status
Phase III **NCT02446912**	Moderate to severe SLE TULIP SLE 1	450	• Arm 1: 300mg IV MEDI-546 Q4W for 48 weeks • Arm 2: 150mg IV MEDI-546 Q4W for 48 weeks • Arm 3: Placebo IV Q4W for 48 weeks	Response in SLE responder index at week 52	• FPD: Q3 2015 • LPCD: 2018 • Data anticipated: 2018
Phase III **NCT02446899**	Moderate to severe SLE TULIP SLE 2	360	• Arm 1: 300mg IV MEDI-546 Q4W for 48 weeks • Arm 2: Placebo IV Q4W for 48 weeks	Response in SLE responder index at week 52	• FPD: Q3 2015 • LPCD: 2018 • Data anticipated: 2018
Phase II **NCT01438489**	Moderate to severe SLE patients	307	• Arm 1: 300mg IV MEDI-546 Q4W for 48 weeks • Arm 2: 1000mg IV MEDI-546 Q4W for 48 weeks • Arm 3: Placebo IV Q4W for 48 weeks	Response in SLE responder index at 6 months	• FPD: Q1 2012 • Data readout: Q3 2014
Phase II **NCT01753193**	Moderate to severe SLE patients	218	• Arm 1: MEDI-546, IV Q4W for 104 weeks	Open-label extension to evaluate long-term safety and tolerability	• FPD: Q1 2013 • Data anticipated: 2017
Phase II **NCT01559090**	Japanese SLE patients	17	Open-label, dose escalation trial: • Arm 1: 100mg IV Q4W for 48 weeks then 300mg IV Q4W for 104 weeks • Arm 2: 300mg IV Q4W for 48 weeks then 300mg IV Q4W for 104 weeks • Arm 3: 1000mg IV Q4W for 48 weeks then1000mg IV Q4W for 104 weeks	Safety, tolerability, PK/PD	• Data readout: Q1 2015
Phase I **NCT02601625**	Healthy subjects	30	• Arm 1: 300mg SC single dose • Arm 2: 300mg IV single dose • Arm 3: 600 mg SC single dose	Safety, tolerability, PK/PD	• FPD: Q4 2015 • LPCD: H1 2016 • Data readout: Q3 2016

Anifrolumab (type I IFN receptor mAb)

Lupus Nephritis (LN)

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT02547922**	Active Proliferative LN (TULIP-LN1)	150	• Arm 1: 900 mg IV Q4W for 12 weeks then 300mg IV MEDI-546 Q4W for 36 weeks • Arm 2: 300 mg IV MEDI-546 Q4W for 48 weeks • Arm 3: Placebo IV Q4W for 48 weeks	Response in proteinuria at week 52	• FPD: Q4 2015 • LPCD: 2018 • Data anticipated: 2018

AZD3293 (BACE inhibitor)

Alzheimer's disease

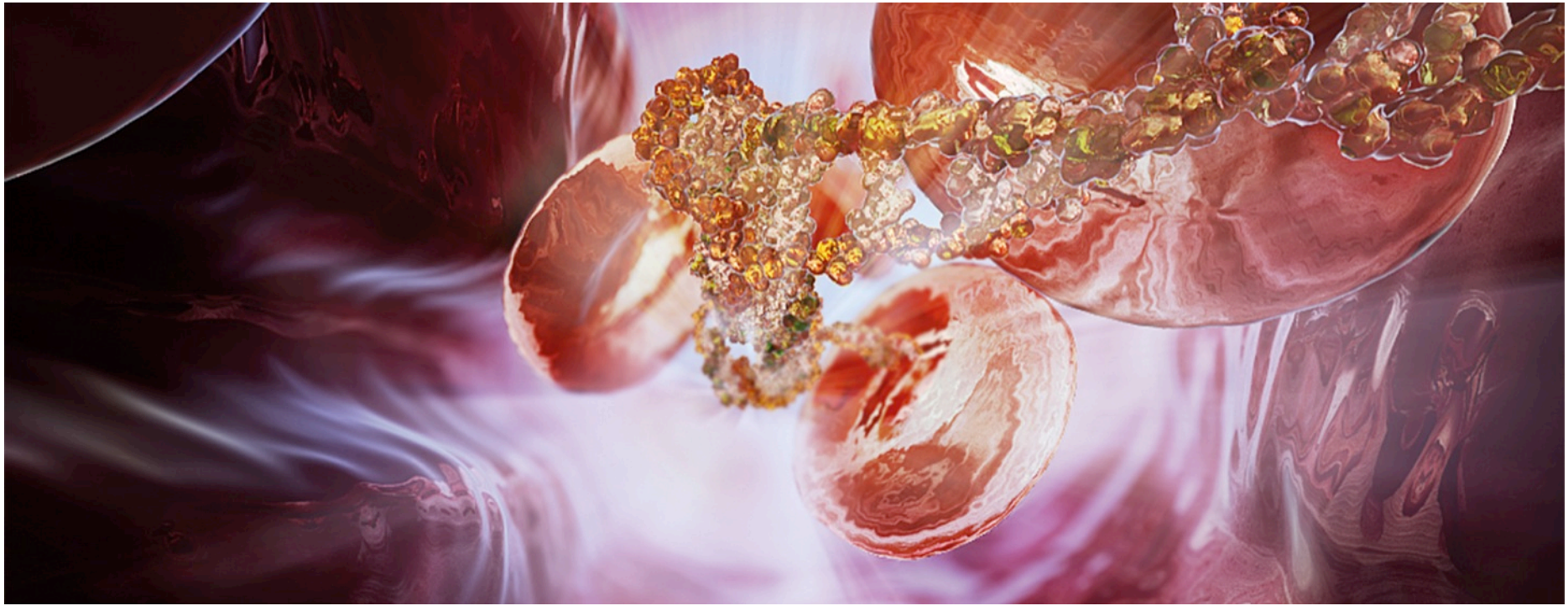
Trial	Population	Patients	Design	Endpoints	Status
Phase III **AMARANTH** **NCT02245737**	Early Alzheimer's disease patients	2,202	• Arm 1: AZD3293 20mg once daily • Arm 2: AZD3293 50mg once daily • Arm 3: Placebo once daily 24-month treatment duration Global trial – 14 countries	• Changes in cognitive (ADAS-Cog 13) and functional (ADCS-ADL) scales • Changes in composite scales (CDR-SB) • Changes in biomarkers and imaging assays • Safety and tolerability	• FPD: Q4 2014 • LPCD: H2 2017 • Data anticipated: 2019
Phase III **DAYBREAK-ALZ** **NCT02783573**	Mild Alzheimer's disease patients	1,899	• Arm 1: AZD3293 20 mg once daily • Arm 2: AZD3293 50 mg once daily • Arm 3: placebo once daily 18-month treatment duration + 18-month delayed start extension Global trial – 18 countries	• Changes in cognitive (ADAS-Cog 13) and functional (ADCS-ADL) scales • Changes in composite scales (CDR-SB) • Changes in biomarkers and imaging assays • Safety and tolerability	• FPD: Q3 2016 • LPCD: 2018 • Data anticipated: 2019

Acalabrutinib (ACP-196)

Rheumatoid Arthritis

Trial	Population	Patients	Design	Endpoint(s)	Status
Phase II **ACE-RA-001** **NCT02387762**	Rheumatoid Arthritis	31	• Arm A: Acalabrutinib + methotrexate • Arm B: Methotrexate	Disease Activity Score 28-CRP at week 4	FPD: Q2 2015 LPCD: Q2 2016 Data readout: Q2 2016

Early development - IMED



AZD0156 (ATM)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02588105**	Solid tumours	130	• Arm 1: AZD0156 + *Lynparza* • Arm 2: AZD0156 + irinotecan Trial conducted in North America, Europe and South Korea	• Safety, tolerability, pharmacokinetics and efficacy	• FPD: Q4 2015 • Data anticipated: 2018

AZD1775 (WEE-1)

Ovarian cancer, triple-negative breast cancer, Non-Small Cell Lung Cancer (NSCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT01357161** **Partnered**	p53 mutant PSR ovarian cancer	136	• Arm 1: Carbo/paclitaxel + AZD1775 225mg • Arm 2: Carbo/paclitaxel + placebo Global trial 10 countries	• PFS • Secondary endpoint: OS	• FPD: Q4 2012 • LPCD: Q3 2014 • Data readout Q4 2016
Phase II **NCT02272790**	PR ovarian cancer	70	• Arm C: Carboplatin + AZD1775 • Arm D: PLD + AZD1775 Global trial	• Overall Response Rate (ORR) • Secondary endpoints: Duration of Response (DOR), PFS, OS, Disease Control Rate, safety and tolerability	• FPD: Q1 2015
Phase I/II **NCT02482311**	Advanced solid tumours	152	• Monotherapy Safety Run-in (part A, N=12); solid tumours Expansions into specific tumour types, inc ovarian cancer (BRCAm PARP failures and BRCAwt with three or more prior lines of treatment), triple negative breast cancer (TNBC) and small cell lung cancer (SCLC) Conducted in US, Canada	• Safety and tolerability • Secondary endpoints: Overall response rate, Disease Control Rate, Duration of Response, PFS	• FPD: Q3 2015
Phase I **NCT02610075**	Advanced solid tumours	98	• Monotherapy Dose escalation trial to determine MTD Conducted in US	• Safety and tolerability	• FPD: Q4 2015
Phase I **NCT02511795**	Advanced solid tumours	200	• Dose escalation trial (AZD1775 + *Lynparza*) Conducted in US	• Safety and tolerability	• FPD: Q3 2015
Phase I **NCT02617277**	Advanced solid tumours	42	• Dose escalation trial (AZD1775 + durvalumab) Conducted in US	• Safety and tolerability	• FPD: Q4 2015
Phase I **NCT02341456**	Advanced solid tumours	20	• Dose escalation trial (AZD1775 + carboplatin + paclitaxel: AZD1775 + Carbo: AZD1775 + PLD) Conducted in Australia, Japan and Republic of Korea	• Safety and tolerability	• FPD: Q1 2015

Vistusertib (AZD2014) (TORC 1/2)

Breast and squamous Non-Small Cell Lung Cancer (NSCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase II **MANTA** **NCT02216786** **Partnered**	2L ER+ metastatic breast cancer	316	• Arm 1: *Faslodex* • Arm 2: *Faslodex* + vistusertib 50mg BD continuous dosing • Arm 3: *Faslodex* + vistusertib 125mg BD two days on, 5 off • Arm 4: *Faslodex* + everolimus Multicentre: European sites	• PFS • Secondary endpoint: OS	• FPD: Q2 2014 • LPCD: H2 2016 • Data anticipated: 2018
Phase I **NCT02398747**	Japanese Patients with Advanced Solid Malignancies	18	Open label Monotherapy and combination with paclitaxel cohorts	• Safety and tolerability of AZD2014 monotherapy and in combination with paclitaxel • PK	• FPD: Q2 2015 • LPCD: 2017 • Data anticipated: 2017
Phase I/II **PASTOR** **NCT02599714**	Postmenopausal women with locally advanced/metastatic estrogen receptor positive (ER+) breast cancer	225	Part A - Phase I triplet dose finding to determine the maximum tolerated dose (MTD) of the triplet (vistusertib + palbociclib + fulvestrant) Part B - Phase I single arm expansions (vistusertib + palbociclib + *Faslodex*) Part C - randomised, double-blind, placebo-controlled, stratified, parallel group extension at RP2D for triplet combination (vistusertib + palbociclib + *Faslodex* vs matching vistusertib placebo + palbociclib + *Faslodex*)	Primary • Part A:Safety and tolerability of the triplet. MTD and recommended dose for Parts B and C • Part B: Safety and tolerability • Part C: PFS Secondary: Best Objective Response Rate (BOR) and Objective Response Rate (ORR)	• FPD: Q1 2016 • LPCD: 2018 • Data anticipated: 2019

AZD2811 (AURN)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02579226**	Solid tumours	72	• Arm 1: AZD2811 dose escalation • Arm 2: AZD2811 dose expansion AZD2811 + irinotecan Trial conducted in North America	• Safety and tolerability • Pharmacokinetics and efficacy	• FPD: Q4 2015 • Data anticipated: 2019

AZD4547 (FGFR)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status

Phase II
GLOW
 	
NCT01202591
	Female ER+ breast cancer patients whose disease has progressed following treatment with one prior endocrine therapy	40	• Part A: AZD4547 in ascending multiple doses in combination with 25mg exemestane
			• Part B:
			  • Arm 1: AZD4547 (dose from part A) + *Faslodex*
			  • Arm 2: placebo + *Faslodex*
			Patients with FGFR1 polysomy (30 patients) or FGFR1 amplification (60 patients)
			
			Conducted in eight countries in Europe
				• Part A: MTD of AZD4547 in combination with 25mg exemestane in three schedules of AZD4547
				• Part B Interim analysis: Tumour size analysis on 30 FGFR amplified patients
				• Part B Final analysis: PFS
					• FPD: Q4 2010
					• LPCD: Q1 2014
					• Data readout: Q3 2014

Phase II **SHINE** **NCT01457846**	Advanced gastro-oesophageal cancer	71	• Arm 1 (FGFR2 polysomy): AZD4547 vs paclitaxel randomised 1:1 (30 to 80 patients) • Arm 2 (FGFR 2 low gene amplification: AZD4547 vs paclitaxel randomised 3:2 (25 to 80 patients) • Arm 3 (FGFR2 high gene amplification: AZD4547 vs paclitaxel randomised 3:2 (25 to 80 patients) Conducted in 16 countries across Europe and Asia	• PFS • Key Secondary: OS/Tumour size	• FPD: Q4 2011 • LPCD: Q2 2013 • Data readout: Q1 2015
Phase I **NCT01213160**	Advanced cancer who have failed standard therapy or for whom no standard therapy exists	33	• Part A: AZD4547 in ascending multiple doses given bd and od (c. 30 patients) • Part B: AZD4547 in patients whose tumours have FGFR amplification (c. eight patients) Conducted in Japan	• Part A: MTD and Recommended dose for Parts B and C • Part B: Safety and tolerability and preliminary anti-tumour activity	• FPD: Q4 2010 • LPCD: Q4 2012 • Data readout: Q2 2013
Phase I **NCT00979134**	Advanced cancer who have failed standard therapy or for whom no standard therapy exists	94	• Part A: Ascending oral doses of AZD4547 to define maximum tolerated dose (MTD) and /or continuous, tolerable recommended dose (RD) • Part B: Dose expansion phase at RD defined in Part A • Part C: Expansion phase in patiens with FGFR1 and FGFR2 amplified tumours at the RD defined from Part A Conducted in seven countries across North America and Europe	• Part A: MTD and Recommended dose for Parts B and C • Part B and C: Safety and tolerability, PK and preliminary anti-tumour activity	• FPD: Q4 2009 • LPCD: Q4 2013 • Data readout: Q1 2015
Phase I **BISCAY** **NCT02546661**	2L Muscle Invasive Metastatic Bladder Cancer in patients who have failed prior therapy	110	• Multi-drug biomarker-directed trial • Arm 1: AZD454 • Arm 2: AZD4547 + durvalumab • Arm 3: *Lynparza* + durvalumab • Arm 4: AZD1775 + durvalumab • Arm 5: durvalumab • Arm 6: vistusertib + durvalumab Planned in North America and Europe	• Safety and tolerability of the combinations • PK and preliminary anti-tumour activity	• FPD: Q4 2016 • Data anticipated: 2018

AZD4635 ($A_{2A}R$)

Solid tumours and Non-Small Cell Lung Cancer (NSCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02740985**	Phase Ia: patients with advanced solid tumours	36 (estimated)	• Phase 1a: dose escalation to determine the Maximum Tolerated Dose (MTD) of AZD4635 given as monotherapy and in combination with durvalumab. When the combination MTD is determined, additional patients with advanced solid malignancies will be enrolled to a dose expansion cohort to explore further the safety, tolerability, pharmacokinetics (PK), and biological activity.	Primary Outcome Measure: Safety and tolerability Secondary Outcome Measures: • Pharmacokinetics of AZD4635 as monotherapy and combination with durvalumab • Preliminary assessment of anti-tumour activity	• FPD: Q2 2016 • Data anticipated: 2018
	Phase Ib: patients with advanced NSCLC who have previously received anti-PD-1 therapy, but either failed to respond or stopped responding after an initial response	15	• Phase 1b will consist of an additional expansion phase in NSCLC at the combination MTD or maximum feasible dose Both parts conducted at sites in the US		

AZD5069 (CXCR2)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase Ib/II **NCT02499328**	Squamous Cell Carcinoma of the Head & Neck (HNSCC)	213	Dose Escalation advanced solid and blood cancers • Arm A1: AZD9150/durvalumab • Arm A2 : AZD5069/durvalumab Dose Expansion 2L HNSCC: • Arm B1: AZD9150 • Arm B2: AZD5069 • Arm B3: AZD9150/durvalumab • Arm B4: AZD5069/durvalumab	• Safety/Efficacy trial	• FPD: Q3 2015 • Data anticipated: 2019
Phase Ib/II **NCT02583477**	Metastatic Pancreatic Ductal Carcinoma	26	Dose escalation and expansion Arms: Durvalumab in combination with nab-paclitaxel and gemcitabine Durvalumab in combination with AZD5069	• Safety/Efficacy trial	• FPD: Q1 2016 • Data anticipated: 2018

* clinicaltrials.gov being updated

AZD5363 (AKT)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase IIb **NCT01625286**	ER+ breast cancer receiving 1st treatment with paclitaxel in the advanced setting	100	• Arm 1: AZD5363 + paclitaxel • Arm 2: AZD5363 placebo + paclitaxel Two strata (50 points per stratum): PIK3CA mutation positive vs Mutation not detected	• PFS • ORR & OS are secondary endpoints	• FPD: Q1 2014 • Data anticipated: H2 2017
Phase I **NCT01226316**	Breast and gynaecological cancers with PIK pathway mutation	12-24 per arm (Parts E & F)	AZD5363 400mg BD 4 days on 3 days off combined with 500mg fulvestrant [initially 12 patients per arm with option to expand to 24 patients in one or more arms] • Part E arm 1: ER+ Breast with AKT-1 mutation (prior *Faslodex* resistance) • Part E arm 2: ER+ Breast with AKT-1 mutation (first exposure to *Faslodex*) • Part F arm 1: ER+ Breast with PTEN mutation (prior *Faslodex* resistance) • Part F arm 2: ER+ Breast with PTEN mutation (first exposure to *Faslodex*)	• Safety and tolerability • ORR • Clinical Benefit Rate at 24 weeks (CBR24) [Parts E & F only]	• Data anticipated: H2 2017

Savolitinib (AZD6094) (MET)

Papillary renal cell and other cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT02127710**	Papillary renal cell cancer	90	• Single arm trial: savolitinib 600mg QD Conducted in UK, Spain, US, Canada	• ORR	• FPD: Q2 2014 • LPCD: Q4 2015 • Data anticipated: 2017
Phase I **NCT01773018** **Partnered**	Advanced cancer (all comers)	~50	• Dose escalation trial Conducted in Australia	• Safety and tolerability	• FPD: Q1 2012 • LPCD: Q3 2015 • Data anticipated: Q4 2016
Phase I **NCT01985555** **Partnered**	Advanced cancer (all comers)	~70	• Dose escalation trial Conducted in China	• Safety and tolerability	• FPD: Q2 2013 • LPCD: H2 2017 • Data anticipated: 2018
Phase I **NCT02374645**	Non-Small Cell Lung Cancer	~53	• Dose escalation trial Conducted in China	• Safety and tolerability	• FPD: Q2 2015 • Data anticipated: H2 2017

AZD6738 (ATR)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02264678**	Solid tumours	160	• Arm 1: AZD6738 + carboplatin • Arm 2: AZD6738 dose escalation, AZD6738 + *Lynparza* • Arm 3: AZD6738 + durvalumab Trial conducted in North America, Europe and South Korea	• Safety and tolerability • Pharmacokinetics and efficacy	• FPD: Q4 2014 • Data anticipated: 2017

AZD8186 (PI3Kb/d)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT01884285**	Advanced Castrate Resistant Prostate Cancer /sqNSCLC /TNBC and patients with known PTEN-deficient/ mutated or PIK3CM mutated/ amplified advanced solid malignancies.	153	• Part A: AZD8186 monotherapy in ascending intermittent doses in 3 schedules • Part B: AZD8186 monotherapy at recommended dose and schedule(s) from Part A in PTEN deficient patients with advanced cancer • Part C: Combination AZD8186 added to abiraterone actetate (with prednisone) in PTEN deficient mCRPC patients. Initial dose/ schedule confirmation phase using AZD8186 mononotherapy recommended dose/ schedule from Part A and the labelled dose of abiraterone followed by an expansion cohort to explore clinical activity • Part D: Combination AZD8186 and AZD2014 (a novel dual mTORC 1/2 inhibitor). Initial dose/ schedule determination phase in same patient population as Part A followed by an expansion cohort in PTEN deficient TNBC patients to explore clinical activity Trial conducted in Canada, US, Spain & UK	• Part A: PK, MTD and Recommended dose and schedule(s) for Part B • Part B: Safety, tolerability and preliminary assessment of anti-tumour activity (POM) • Part C: PK, safety, tolerability and recommended dose/ schedule of AZD8186 in combination with abiraterone. Preliminary assessment of anti-tumour activity of AZD8186 in combination with abiraterone. • Part D: PK, safety, tolerability and recommended dose and schedule of AZD8186 in combination with AZD2014. Preliminary assessment of anti-tumour activity of AZD8186 in combination with AZD2014.	• FPD: Q2 2013 • Data anticipated: 2018

AZD9150 (STAT3)

Solid tumours and blood cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase Ib/II **NCT02499328**	Squamous Cell Carcinoma of the Head & Neck (HNSCC)	213	Dose Escalation advanced solid and blood cancers • Arm A1: AZD9150/durvalumab • Arm A2 : AZD5069/durvalumab Dose Expansion 2L HNSCC: • Arm B1: AZD9150 • Arm B2: AZD5069 • Arm B3: AZD9150/durvalumab • Arm B4: AZD5069/durvalumab	• Safety/Efficacy trial	• FPD: Q3 2015 • Data anticipated: 2019
Phase 1b/II **NCT02549651**	Diffuse Large B-cell Lymphoma	186	Dose escalation and expansion Arms: Experimental Arm: durvalumab monotherapy Experimental Arm: durvalumab and tremelimumab Experimental Arm: durvalumab and AZD9150	• Safety/Efficacy trial	• FPD: Q3 2016 • Data anticipated: 2021

* clinicaltrials.gov being updated

AZD9496 (SERD)

Breast cancer

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02248090**	ER+ Breast Cancer	~50	• This is a Phase I open label multicentre trial of AZD9496 administered orally in patients with advanced ER+ HER2 negative breast cancer. The trial design allows an escalation of dose with intensive safety monitoring to ensure the safety of patients. The trial will determine the maximum tolerated dose. In addition, expansion cohort(s) at potential therapeutic dose(s) in patients with or without ESR1 mutations will be enrolled to further determine the safety, tolerability, pharmacokinetics and biological activity of AZD9496	• Primary Outcome Measures: Safety and tolerability • Secondary Outcome Measures: Single and multiple dose pharmacokinetics of AZD9496 4β-hydroxycholesterol concentration in blood • Anti-tumour activity	• FPD: Q4 2014 • LPCD: Q2 2016 • Data anticipated: H1 2017
Phase I **NCT02780713**	Healthy subjects	~14	• This is a Phase I open label single centre trial to assess the pharmacokinetics and safety of different forms and formulations of AZD9496 in healthy subjects	• Primary Outcome Measures: Pharmacokinetics for AZD9496 and its metabolites • Secondary Outcome Measures: Safety and tolerability	• FPD: Q2 2016 • LPCD: Q3 2016 • Data readout: H1 2017

AZD4076 (anti-miR 103/107)

Non-alcoholic steatohepatitis (NASH)

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02612662**	Healthy subjects	40	SAD trial (one trial site in US) • 5 different dose levels investigated vs. placebo • Sub-cutaneous injection	• Safety and tolerability • PK parameters	• FPD: Q4 2015 • LPCD: Q3 2016
Phase I/IIa **NCT02826525**	Type-2 Diabetic patients with non-alcoholic fatty liver disease	~51	MAD trial (one trial site in US) • Up to 3 different dose levels investigated vs. placebo • Sub-cutaneous injection	• Safety and tolerability • Glucose infusion rate at hyperinsulinemic clamp • Reduction in liver fat content (%) per MRI • 24 hour glucose area under the curve • PK parameters	• FPD: Q3 2016

AZD4831

Cardiovascular disease

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02712372**	Healthy subjects	~96	SMAD trial (one trial site in Germany) SAD • Planned to investigate 6 different dose levels vs. placebo but up to 10 cohort may be used MAD • The planned number of cohorts is three but up to five cohorts may be included	• Safety and tolerability • PK parameters	• FPD: Q3 2016 • LPCD: Q4 2016

AZD5718

Cardiovascular disease

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02632526**	Healthy subjects	96	SMAD trial (one trial site in UK) SAD • Planned to investigate 8 different dose levels vs. placebo but up to 11 cohort may be used • Amorphous and crystalline form of AZD5718 will be investigated • Oral administration MAD • The planned number of cohorts is four but up to six cohorts may be included • Once or twice daily oral administration of AZD5718	• Safety and tolerability • PK parameters • Pharmacodynamic analysis by ex-vivo stimulation of LTB4 production using calcium ionophore • Pharmacodynamics of AZD5718 after single ascending doses and multiple ascending doses • To evaluate the relative bioavailability between the amorphous and crystalline form of AZD5718	• FPD: Q1 2016 • LPCD: Q3 2016 • Data anticipated: Q4 2016
Phase 1 **NCT02963116**	Healthy subjects	12	DDI/BA study (one trial site in UK) A Randomized, 5-Period, 5-Treatment, Single-Dose, open-label, crossover study to • estimate the effect of AZD5718 on the pharmacokinetics of Rosuvastatin • assess the relative bioavailability of AZD5718 oral suspension vs AZD5718 IR tablet formulation • assess the food effect of AZD5718	• To evaluate the PK of rosuvastatin when administered alone and in combination with AZD5718, by assessment of AUC, AUC(0-last) and Cmax of rosuvastatin. • To evaluate the relative bioavailability of an immediate release (IR) tablet vs oral suspension formulation of AZD5718. • To examine the PK profiles of IR tablet formulation of AZD5718 when administered in fed and fasted conditions. • To further assess the safety of single doses of AZD5718 in healthy subjects.	• FPD: H1 2017

AZD8601

Cardiovascular disease

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02935712**	Type 2 diabetic patients	~60	SAD trial (one trial site in Germany) • Planned to investigate 3 different dose levels vs. placebo but up to 5 cohort may be used	• Safety and tolerability	• FPD: Q1 2017

Abediterol (AZD0548) (LABA)

Asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT02777827**	Patients With Asthma on Inhaled Corticosteroids	36	Single-dose 6-way crossover to investigate ultra-low doses of abediterol and to compare 2 different devices (pMDI and 3 DPI). • Abediterol 0.156 µg • Drug: Abediterol 2.5 µg • Drug: Abediterol 0.05 µg • Other: Placebo	Primary Endpoint. • To assess the PD response (bronchodilation) of ultra-low doses of abediterol. • To compare the PD response at the same doses between the 2 devices • To compare PK (2.5 µg dose only) between the 2 devices	• FPD: Q3 2016 • LPCD: Q4 2016 • Data anticipated: H1 2017

AZD1419 (TLR9 agonist)

Asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase IIa INCONTRO **NCT02898662**	Adults with eosinophilic, moderate to severe asthma on ICS + LABA background treatment	70	• Arm 1: AZD1419, once-weekly adaptive dosing (4mg, 1mg, 8mg) • Arm 2: placebo Inhaled (nebulised) administration Trial conducted in EU.	• Time to loss of asthma control	• FPD: Q4 2016

ICS= Inhaled corticosteroids
LABA= Long Acting Beta Agonist

AZD7594 (inhaled SGRM)

Asthma/Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT02479412**	Patients with mild to moderate asthma	48	A randomised, double blind, multiple dosing (14 days), placebo-controlled, incomplete block cross-over, multi-centre trial to assess efficacy and safety of three dose levels of AZD7594, given once daily by inhalation, in patients with mild to moderate asthma	• Forced expiratory volume in one second (FEV1)	• FPD: Q3 2015
Phase I **NCT01636024**	Healthy subjects	73	SAD/MAD A Phase I, single centre, double-blind, randomised, placebo controlled, parallel-group trial to assess the safety, tolerability, Pharmacokinetics and Pharmacodynamics after single and multiple ascending inhaled doses of AZD7594 in healthy male subjects - suspension inhaled via Spira nebuliser Trial conducted in the UK	• Safety and tolerability	• FPD: Q4 2012
Phase I **NCT02648438**	Healthy subjects	24	An open label, partially randomised, four-period trial in healthy male subjects to investigate the bioavailability and pharmacokinetics of a single dose of AZD7594 when administered intravenously, orally and inhaled via two different dry powder inhalers (DPI) and a pressurised metered-dose inhaler (pMDI)	• Bioavailability and pharmacokinetics	• FPD: Q1 2016
Phase I **NCT02645253**	Healthy subjects	36	A phase I, randomised, single-blind, placebo-controlled, sequential-group, single-centre trial to investigate the safety, tolerability, pharmacokinetics and pharmacodynamics of single and multiple ascending doses of AZD7594 given once daily as inhaled formulation in healthy Japanese men	• Safety and tolerability	• FPD: Q1 2016

AZD7986 (DPP1 inhibitor)

Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02303574**	Healthy subjects	152	Part 1 (SAD) • Five different dose levels investigated vs placebo • oral administration	• Safety and tolerability and PK following oral administration with single ascending dose • Preliminary assessment of the effect of food on the single dose PK parameters of AZD7986	• FPD: Q4 2014
			Part 2 (MAD) • Three different dose levels investigated vs placebo in healthy subjects • oral administration Trial conducted in the UK	• Safety and tolerability & PK in healthy subjects following administration of multiple ascending oral doses • NE activity	• FPD: Q1 2016
Phase I **NCT02653872**	Healthy subjects	15	A phase 1, non-randomised, fixed sequence, 3-period, drug-drug interaction trial to assess the pharmacokinetics (PK) of AZD7986 in healthy subjects when administered alone and in combination with multiple doses of verapamil and itraconazole or diltiazem.	• Effect of verapamil and the effect of itraconazole/diltiazem on the pharmacokinetics (PK) of AZD7986 • Safety and tolerability of AZD7986	• FPD: Q1 2016

AZD8871 (MABA2)

Chronic Obstructive Pulmonary Disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02573155**	Part 1: Mild Asthmatic Part 2: Moderate to severe COPD	N (Part 1) = 16 N (Part 2) = 40	**Part 1** SAD trial with 6 dose levels - 50 µg, 200 µg, 400 µg, 900 µg, 1800 µg, and 2100 µg **Part 2** Comprises 5 treatment periods of 36 hours each separated by a washout period of at least 7 to 14 days (one exception per patient of up to 28 days would be acceptable). • AZD8871 400 µg once daily (double-blind) • AZD8871 1800 µg once daily (double-blind) • Indacaterol 150 µg once daily (open-label) • Tiotropium 18 µg once daily (open-label) • Placebo (double-blind)	• To assess the safety and tolerability of single doses of AZD8871 administered by inhalation to mild persistent asthmatic male subjects (Part 1) or moderate to severe COPD subjects (Part 2) • To evaluate the pharmacodynamics (PD) (bronchodilation) of single doses of AZD8871 in mild persistent asthmatic male subjects (Part 1) or in in moderate to severe COPD subjects (Part 2)	Part 1 • FPD: Q4 2015 • LPCD: Q4 2015 • Data readout: Q4 2016 Part 2 • FPD: Q2 2016 • LPCD: Q3 2016 • Data readout: Q4 2016
Phase I **NCT02814656**	Healthy subjects	24	MAD trial with 3 dose levels - 300 µg, 600µg, and 900 µg (TBC) and placebo	Primary Endpoint: • The primary objective is to investigate the safety and tolerability of AZD8871 at steady state Secondary Endpoint: • To characterise the PK of AZD8871 and its metabolites LAS191861 and LAS34850 after multiple doses of AZD8871 and assess the time required to reach steady state, the degree of accumulation and the time dependency	• FPD: Q3 2016 • LPCD: Q4 2016 • Data anticipated: H1 2017
Phase IIa NCT02971293	Moderate to severe COPD	42	Comprises 3 treatment periods of 14 days each separated by a washout period of 28 to 35 days. • AZD8871 600 µg once daily (double-blind) • AZD8871 100 µg once daily (double-blind) • Placebo (double-blind) Global study – two countries (UK & Germany)	Primary Endpoint: • To evaluate the efficacy of inhaled AZD8871 in patients with moderate to severe COPD Secondary Endpoint: • To investigate the PK of AZD8871 and its metabolites after multiple dose administration of AZD8871 in patients with moderate to severe COPD	• FPD: Q1 2017 • Data anticipated: H2 2017

AZD9567 (oSGRM)

Respiratory

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02512575**	Healthy subjects	72	SAD trial with 8 dose levels - single ascending doses (starting at 2 mg up to 155 mg)"	• A Phase I, Randomised, Single-Blind, Placebo-Controlled trial To Assess The Safety, Tolerability, Pharmacokinetics And Pharmacodynamics Of Single Ascending Oral Doses Of AZD9567 In Healthy subjects	• FPD: Q4 2015 • LPCD: Q2 2016 • Data anticipated: H1 2017
Phase I **NCT02760316**	Healthy subjects	64	MAD trial with 4 dose levels – 10 mg, 20mg, 40mg, 80mg and Prednisolone 20 mg	Primary Endpoint: • To assess the safety and tolerability of AZD9567 following multiple oral ascending doses in subjects with BMI between 28 and 38 kg/m2 and with a positive glucose tolerance test (7,8 to 11,0 mmol/L). Secondary Endpoints: • To characterise the pharmacokinetics of AZD9567 following multiple oral administration of ascending doses. • To characterise the pharmacodynamics of AZD9567 assessed as effect on glucose homeostasis through OGTT (oral glucose tolerance test) in comparison with prednisolone 20 mg.	• FPD: Q2 2016 • Data anticipated: H1 2017

Verinurad (RDEA3170 - SURI, URAT1 inhibitor)

Gout and hyperuricemia development programme

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT02246673**	Combination therapy trial with febuxostat in subjects with gout	60	• Arm A: Verinurad 2.5mg QD • Arm B: Verinurad 5.0mg QD • Arm C: Verinurad 10mg QD • Arm D: Verinurad 15mg QD • Arm E: Sequential doses of verinurad 10, 15 and 20mg QD in combination with 40mg QD febuxostat *Arms A-D include combination with 40mg QD febuxostat for 7 days followed by combination with 80mg QD febuxostat for 7 days	• To assess the PK and PD profiles of verinurad administered with febuxostat	• FPD: Q4 2014 • LPCD: Q2 2015 • Data readout: Q4 2016
Phase II **NCT02317861**	Combination trial with febuxostat for treating gout or asymptomatic hyperuricemia in Japanese patients	92	• Arm A: Verinurad 2.5mg QD + 10mg or 20mg QD febuxostat • Arm B: Verinurad 5.0mg QD + 10mg or 20mg QD febuxostat • Arm C: Verinurad 5.0mg QD + 20mg or 40mg QD febuxostat • Arm D: Verinurad 10mg QD + 20mg or 40mg QD febuxostat • Arm E: Benzbromarone 50mg QD	• To assess the PD, PK and safety profiles of verinurad administered with febuxostat	• FPD: Q4 2014 • LPCD: Q2 2015 • Data readout: Q4 2016
Phase II **NCT02498652**	Combination therapy trial with allopurinol in subjects with gout	40	• Arm A: Placebo • Arm B: Verinurad 2.5mg QD • Arm C: Verinurad 5.0mg QD • Arm D: Verinurad 7.5mg QD • Arm E: Verinurad 10mg QD • Arm F: Verinurad 15mg QD • Arm G: Verinurad 20mg QD *All arms include combination with 300mg QD allopurinol. Placebo group also includes combination with 300mg BID allopurinol or 600mg QD allopurinol	• To assess the PK and PD profiles of verinurad administered with allopurinol	• FPD: Q3 2015 • LPCD: Q4 2015 • Data readout: Q4 2016
Phase I **NCT02608710**	Pharmacokinetic and Pharmacodynamic trial in healthy adult male subjects	40	• Part 1: Single doses of verinurad at 4.5mg, 6.0mg, or 12mg • Part 2: Multiple doses of verinurad at 12mg QD for 7 days • Part 3: Food effect trial with single doses of verinurad at 6.0mg	• To assess the PK, PD and food effect profiles of verinurad	• FPD: Q4 2015 • LPCD: Q4 2015 • Data readout: Q3 2016

AZD3241 (MPO)

Multiple System Atrophy (MSA)

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT01527695**	Parkinson's disease patients	24	• Arm 1: AZD3241 600mg BID for 8 weeks • Arm 2: Placebo Randomisation 3:1 active to placebo. Three sites in Sweden and Finland	• Microglia activation represented by [11C]PBR28 binding Secondary endpoints: • PD symptoms measured by UPDRS • Plasma MPO activity	• FPD: Q4 2014 • LPCD: Q2 2015
Phase II **NCT01603069**	Parkinson's disease patients	51	• Arm 1: AZD3241 300mg BID for 12 weeks • Arm 2: AZD3241 600mg BID for 12 weeks • Arm 3: Placebo Randomisation 1:1:1 across arms 13 sites in US	• AEs, labs, vital signs, ECGs Secondary endpoints: • PD symptoms measured by UPDRS • Plasma MPO activity	• FPD: Q4 2014 • LPCD: Q2 2015
Phase II **NCT02388295**	MSA	30	• Arm 1: AZD3241 300mg BID for 12 weeks • Arm 2: AZD3241 600mg BID for 12 weeks • Arm 3: Placebo Randomisation 1:1:1 across arms Eight sites in US Nine sites in Europe	• Microglia activation represented by [11C]PBR28 binding • AEs, labs, vital signs, ECGs Secondary endpoints: • MSA symptoms measured by UMSARS and MSA QoL • Plasma MPO activity	• FPD: Q2 2015 • LPCD: H2 2016 • Data anticipated: H2 2016
Phase I **NCT00729443**	Healthy subjects	46	• Active ArmS: SAD • Comparator Arm: placebo One site in Sweden	• AEs, labs, vital signs, ECGs • PK	• FPD: Q4 2014 • LPCD: Q2 2015
Phase I **NCT01457807**	Healthy subjects	18	• Active ArmS: MAD • Comparator Arm: placebo One site in UK	• AEs, labs, vital signs, ECGs • PK	• FPD: Q4 2014 • LPCD: Q2 2015
Phase I **NCT00914303**	Healthy subjects	59	• Active ArmS: MAD • Comparator Arm: placebo One site in Sweden	• AEs, labs, vital signs, ECGs • PK	• FPD: Q4 2014 • LPCD: Q2 2015

MedImmune

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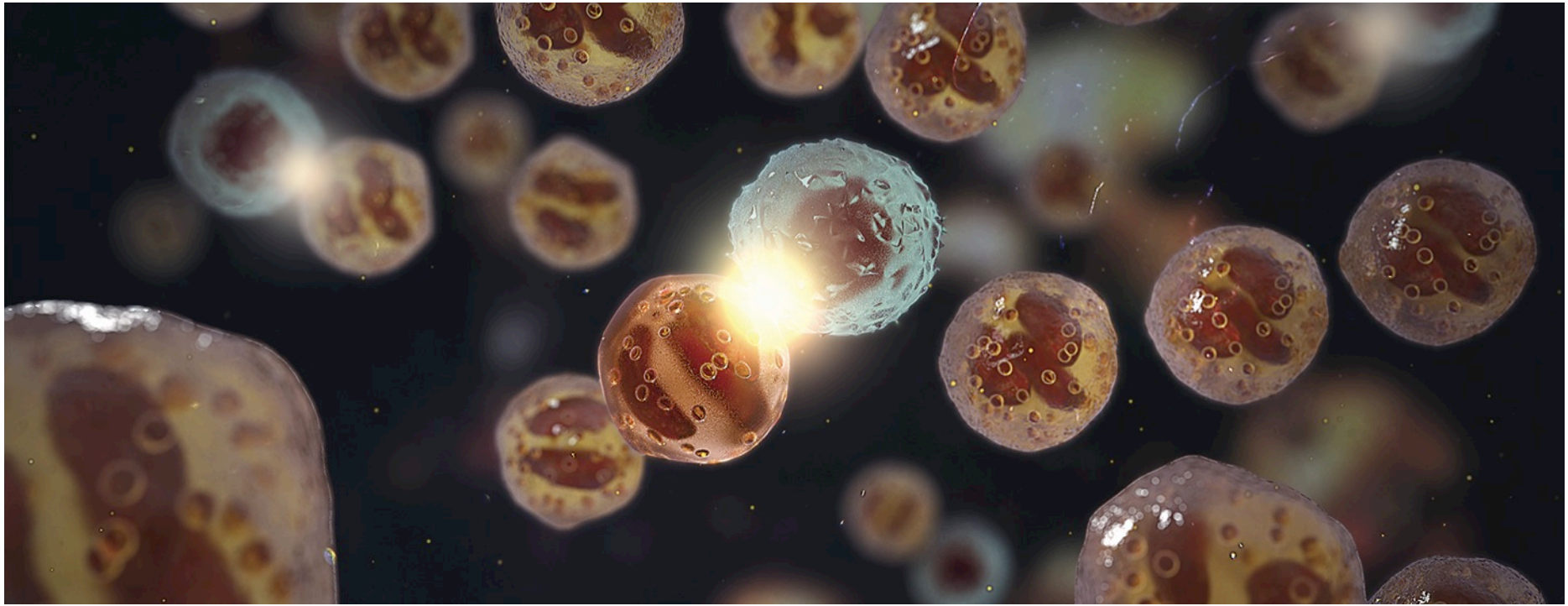
Early development - MedImmune



Durvalumab (PD-L1 mAb)

Immuno-oncology

Trial	Compound	Population	Patients	Design	Endpoints	Status
Phase I/II **STUDY 1108** **NCT01693562**	Durvalumab	Solid tumours	1,014	• Dose Escalation: 5 cohorts at Q2W and 1 cohort at Q3W • Dose Expansion: 16 tumour type cohorts at the Q2W MTD defined during dose escalation; one cohort at 20mg Q4W Global trial – eight countries	• Safety • Optimal biologic dose • Secondary endpoints include PK, immunogenicity and anti-tumour activity	• FPD: Q3 2012 • LPCD: Q4 2015 • Data anticipated: H2 2017
Phase I **NCT02117219**	Durvalumab, azacitidine (Vidaza)	Myelodysplastic syndrome	41	Dose-escalation and dose-expansion trial • Arm 1: durvalumab Global trial – four countries	• Safety and tolerability of monotherapy and combination • Secondary endpoints include duration of response, PFS and OS	• FPD: Q2 2014 • LPCD: Q2 2015 • Data anticipated: 2019
Phase 1 **NCT02900157**	Durvalumab	Solid tumours	30	Multi-centre, open-label, single-arm trial for adult subjects	• Safety, PK, number of subjects reporting infusion related reaction	• FPD: Q3 2016 • Data anticipated: 2018

Durvalumab (PD-L1 mAb) + tremelimumab (CTLA-4 mAb)

Solid and hematologic tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase Ib/II **STUDY 21** **NCT02340975**	Gastric or GEJ adenocarcinoma	236	• Arm A: durvalumab + tremelimumab 2L • Arm B: durvalumab 2L • Arm C: tremelimumab 2L • Arm D: durvalumab + tremelimumab 3L US and ROW trial centres	• Safety & tolerability, ORR, PFS • Secondary endpoints include DCR, OS, DoR, PD-L1 Expression	• FPD: Q2 2015 • Data anticipated: 2018
Phase Ib/II **STUDY 22** **NCT02519348**	Hepatocellular Carcinoma	144	• Arm A: durvalumab + tremelimumab • Arm B: durvalumab 2L • Arm C: tremelimumab 2L	• Safety & tolerability, ORR, PFS • Secondary endpoints include DCR, OS, DoR, PD-L1 Expression	• FPD: Q4 2015 • Data anticipated: 2018
Phase Ib **STUDY 006** **NCT02000947**	NSCLC (Immunotx naïve and Immunotx pretreated patient cohorts)	446	• Dose Escalation: minimum 5 cohorts exploring various treme Q4W and durvalumab IV Q4W dose combinations, higher dose levels and alternate Q2 schedule added with amendment • Dose Expansion: MTD for the combination in escalation to be explored in expansion North American trial centres, exploration of ex-US countries for expansion into EU and ROW	• Safety • Optimal biologic dose for the combination • Secondary endpoints include Antitumour activity, PK and immunogenicity	• FPD: Q4 2013 • LPCD: H1 2017 • Data anticipated: 2018
Phase I **STUDY 10** **NCT02261220**	Solid tumours (Basket trial)	380	• Dose Exploration: 2 cohorts exploring various Q4W treme and durvalumab dose combinations and 2 cohorts exploring various Q2W treme and durvalumab dose combinations • Dose Expansion: MTD for the combination in escalation to be explored in expansion cohorts specific for each of 7 tumour types North American trial centres	• Safety & tolerability • Optimal biologic dose for the combination • Secondary endpoints include anti-tumour activity, PK/PD and immunogenicity	• FPD: Q4 2014 • LPCD: H1 2017 • Data anticipated: 2018
Phase I **STUDY 11** **NCT02262741**	HNSCC	69	• Arm A: treatment-naïve, PD-L1+, combo • Arm B: treatment-naïve, PD-L1-, combo • Arm C: PD-1/PD-L1 refractory, combo North American trial centres	• Safety & tolerability • Secondary endpoints include OR, DC, DoR, PFS, OS, PK/PD, immunogenicity and biomarkers	• FPD: Q4 2014 • LPCD: Q3 2016 • Data anticipated: H1 2017
Phase Ib **STUDY 23** **NCT02549651**	Diffuse Large B cell Lymphoma	186	• Arm A: durvalumab • Arm B: durvalumab + tremelimumab • Arm C: tremelimumab + AZD9150 US and European trial centres	• Safety & tolerability • Secondary endpoints include OR, DC, DoR, PFS, OS, PK/PD, immunogenicity and biomarkers	• FPD: Q3 2016 • Data anticipated: 2021

Durvalumab (PD-L1 mAb) + Iressa (gefitinib)

Non-small cell lung cancer (NSCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02088112**	NSCLC (Escalation phase) EGFR M+ NSCLC naïve to EGFR-TKI therapy (Expansion phase)	36	Escalation phase Standard 3+3 design with 28 days DLT period • *Iressa* (QD) + durvalumab IV Expansion phase • *Iressa* (QD) + durvalumab IV recommended dose Global trial – three countries	• Safety • Optimal biologic dose for the combination • Secondary endpoints include tumour response (CR, PR, SD, PD), Objective response rate, disease control rate, progression-free survival, immunogenicity, pharmacokinetics, pharmacodynamics	• FPD: Q2 2014 • LPCD: Q2 2015 • Data anticipated: 2019

Durvalumab (PD-L1 mAb) + MEDI0680 (PD-1 mAb)

Advanced cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02118337**	Advanced malignancies (escalation phase) RCC (expansion phase)	150	Dose-escalation phase • Durvalumab IV + MEDI0680 IV Dose-expansion phase at selected dose from dose-escalation phase • Durvalumab IV + MEDI0680 IV recommended dose	• Safety • Determination of MTD • Secondary endpoints include tumour response such as objective response rate, disease control rate, progression-free survival, duration of response, OS, immunogenicity, pharmacokinetics, pharmacodynamics	• FPD: Q2 2014 • Data anticipated: 2019
Phase I **NCT02013804**	Advanced malignancies (escalation phase)	58	Dose-escalation phase • MEDI0680 IV	• Safety & Tolerability • Secondary endpoints include tumour response such as objective response rate, immunogenicity, pharmacokinetics, pharmacodynamics	• FPD: Q4 2013 • Data readout: Q4 2016

Durvalumab (PD-L1 mAb) + dabrafenib (BRAF inhibitor) / trametinib (MEK inhibitor)

Melanoma

Trial	Population	Patients	Design	Endpoints	Status
Phase I/II **NCT02027961**	Metastatic or unresectable melanoma BRAF mutation+ (Cohort A) BRAF wild type (Cohorts B&C)	69	Dose Escalation: • Cohort A dabrafenib 150mg BiD/ trametinib 2mg QD/ durvalumab IV • Cohort B trametinib 2mg QD/ durvalumab IV • Cohort C trametinib 2mg QD/ durvalumab IV Dose Expansion: • Each cohort will be expanded at the MTD to enroll a total of 20 subjects per cohort Global trial – two countries	• Safety • Optimal biologic dose for the combination • Secondary endpoints include objective response and disease control, duration of response, progression-free survival and OS, pharmacokinetics and immunogenicity	• FPD: Q1 2014 • LPCD: Q2 2015 • Data anticipated: H1 2017

Durvalumab (PD-L1 mAb) + Monalizumab (NKG2a mAb)

Advanced Solid Tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02671435**	Advanced solid tumours	175	Escalation phase • Monalizumab + durvalumab IV Expansion phase • Monalizumab + durvalumab IV recommended dose Global Trial	• Safety • Optimal biologic dose for the combination • Secondary endpoints include tumour response (CR, PR, SD, PD), Objective response rate, disease control rate, progression-free survival, immunogenicity, pharmacokinetics, pharmacodynamics	• FPD: Q2 2016 • Data anticipated: 2019

MEDI0562 (OX40 mAb)
MEDI0562 (OX40 mAb) + durvalumab (PD-L1 mAb) or tremelimumab (CTLA-4 mAb)

Advanced cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02318394**	Advanced malignancies	196	Dose-escalation phase • MEDI0562 IV Dose-expansion phase • MEDI0562 IV recommended dose	• Safety • Determination of MTD • Secondary endpoints include preliminary anti-tumour activity, pharmacokinetics, biomarker activity, and immunogenicity	• FPD: Q1 2015 • Data anticipated: H2 2017
Phase I **NCT02705482**	Advanced malignancies	182	• ARM A: MEDI0562 IV + durvalumab IV • ARM B: MEDI0562 IV + tremelimumab IV	• Safety • Secondary endpoints include preliminary anti-tumour activity, pharmacokinetics, and immunogenicity	• FPD: Q2 2016 • Data anticipated: 2018

Inebilizumab (MEDI-551, CD19 mAb)

Blood cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase II **NCT01453205**	Adults with relapsed or refractory B-cell diffuse large B-cell lymphoma	170	• Arm 1: MEDI-551 dose level 1 and ICE/DHAP • Arm 2: MEDI-551 dose level 2 and ICE/DHAP • Arm 2: rituximab + ICE/DHAP Open-label trial	• ORR, including Complete Response (CR) or Partial Response (PR)	• FPD: Q1 2012 • LPCD: Q2 2016 • Data readout: Q3 2016
Phase I **NCT01957579**	Adults with relapsed or refractory B-cell malignancies	18	• Dose-escalation trial IV Conducted in Japan	• MTD and efficacy	• FPD: Q2 2011 • LPCD: Q3 2015 • Data readout: Q3 2015

MEDI1873 (GITR agonist)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02583165**	Adult subjects with select advanced solid tumours	42	Dose-escalation phase • MEDI1873 IV US trial centres	• Safety • Determination of MTD • Secondary endpoints include preliminary anti-tumour activity, pharmacokinetics, pharmacodynamics, and immunogenicity	• FPD: Q4 2015 • LPCD: Q4 2016 • Data anticipated: 2018

MEDI4276 (HER2 ADC mAb)

Advanced cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02576548**	Advanced HER2+ metastatic breast and gastric cancer	Dose escalation 21-36 Dose expansion 80	• First-time-in-human Phase 1, multi-centre, open-label, single-arm, dose-escalation, and dose-expansion trial for adult subjects	• Primary: safety • Secondary endpoints include anti-tumour activity, overall response, disease control, PFS, OS and change from baseline tumour size	• FPD: Q4 2015 • Data anticipated: 2019

MEDI9197 (TLR7/8 agonist)

Solid tumours

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02556463**	Advanced solid tumour malignancies readily accessible for injection	43	Dose-escalation phase • MEDI9197 IT US trial centres- Ex US under evaluation	• Safety • Determination of MTD • Secondary endpoints include: – Objective response, disease control and duration of response . – Intratumoural and systemic PK and PD profiles/relationships	• FPD: Q4 2015 • Data anticipated: H2 2017

MEDI9447 (CD73 mAb) + durvalumab (PD-L1 mAb)

Advanced cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02503774**	Advanced malignancies	188	Dose-escalation phase • MEDI9447 IV • MEDI9447 IV + durvalumab IV Dose expansion phase • MEDI9447 IV recommended dose • MEDI9447 IV recommended dose + Durvalumab IV US and Australian trial centres	• Safety • Determination of MTD • Secondary endpoints include preliminary anti-tumour activity, pharmacokinetics, pharmacodynamics, and immunogenicity	• FPD: Q3 2015 • Data anticipated: 2019

Other biologics

Solid tumours

Trial	Compound	Population	Patients	Design	Endpoints	Status
Phase I/II **NCT01446159**	Anti-IGF ligand mAb (MEDI-573)	Patients with HR+ HER2-, 1L, metastatic breast cancer taking aromatase inhibitors	176	• Arm 1: MEDI-573 IV and Aromatase Inhibitor • Arm 2: Aromatase Inhibitor alone Open label trial	• PFS • Retrospective evaluation of predictive biomarker +ve subgroups	• FPD: Q2 2012 • LPCD: Q2 2013 • Data anticipated: H2 2017
Phase I **NCT01284231** **Partnered**	Anti-CEA BiTE mAb (MEDI-565)	Adults with gastrointestinal (GI) adenocarcinoma with no available standard or curative treatments. Refractory pancreatic, colorectal and gastro-Oesophageal cancers	51 max 60 max, 20 in each cohort	• Dose-escalation (3+3), IV • Dose expansion trial, IV	• MTD and safety profile	• FPD: Q1 2011 • LPCD Q3 2014 • Data readout: Q1 2015
Phase I **NCT01577745**	Anti-DLL4 mAb (MEDI0639)	Adults with advanced solid tumours including SCLC	up to 28	• Dose-escalation trial (3+3); IV	• MTD and safety profile	• FPD: Q2 2012 • LPCD: Q2 2015 • Data readout: Q4 2015

Biologics

Cardiovascular & metabolic disease

Trial	Compound	Population	Patients	Design	Endpoints	Status
Phase IIa **NCT02601560**	rhLCAT MEDI6012	Adults with stable coronary artery disease (CAD) and low High-density lipoprotein (HDL)	56	• SAD in stable CAD patients	• Safety profile in terms of adverse events (AE), vital signs, ECG, telemetry, lab variables, immunogenicity and physical examination • Changes in baseline adjusted post dose HDL-C	• FPD: Q4 2015 • LPCD: Q2 2016 • Data readout: H2 2016
Phase IIa **NCT03004638**	rhLCAT MEDI6012	Adults with Stable Atherosclerotic Cardiovascular Disease (ACD)	24	• MAD in stable ACD patients	• Safety profile in terms of adverse events (AE), vital signs, ECG, lab variables • Changes in baseline adjusted post dose HDL-C, HDL-CE, and CE AUC • PK, immunogenicity, Apolipoprotein A,LDL, and Apolipoprotein B	• FPD: Q1 2017 • Data anticipated: H2 2017
Phase II **NCT02394314**	GLP-1-Glu MEDI0382	Healthy male subjects	64	• SAD SC administration • Germany	• Safety profile in terms of adverse events (AE), vital signs, ECG, telemetry, lab variables, nausea, immunogenicity and physical examination	• FPD: Q1 2015 • LPCD: Q4 2015 • Data readout: Q4 2015
Phase II **NCT02548585**	GLP-1-Glu MEDI0382	Male Adults with type-2 diabetes	75	• MAD SC administration • Germany	• Safety profile in terms of adverse events (AE), vital signs, ECG, telemetry, lab variables, nausea, immunogenicity and physical examination • Efficacy: MMT glucose AUC, HbA1c, fructosamine and body weight loss	• FPD: Q1 2016 • LPCD: H2 2016 • Data anticipated: H1 2017
Phase I/IIa **NCT02524782**	MEDI4166	Adults with type-2 diabetes	124	• SAD/MAD SC administration	Part A (Ph1) • Safety/tolerability following SC dosing of 4166 Part B (Ph2a) • Characterise the effect of multiple-ascending SC doses on glucose metabolism following an MMTT as measured by glucose AUC • Characterise the effect of multiple-ascending SC doses on LDL-c level	• FPD: Q4 2015 • LPCD: H2 2016 • Data readout: H1 2017

Tezepelumab (MEDI9929, TSLP mAb)

Asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase II **PATHWAY** **NCT02054130** Partnered	Adult subjects with inadequately controlled, severe asthma	552	• Arm 1: Placebo • Arm 2: Low dose tezepelumumab 70mg SC • Arm 3: Medium dose tezepelumumab 210mg SC • Arm 4: High dose tezepelumumab 280mg SC	• Reduction in the annualised asthma exacerbation rate (AER) measured at week 52	• FPD: Q2 2014 • LPCD: Q4 2015 • Data readout: H1 2017
Phase II **NCT02525094** Partnered	Adult subjects with moderate-to-severe atopic dermatitis	100	• Arm 1: Placebo • Arm 2: Dose of tezepelumumab SC	• 50% reduction from baseline in the eczema area and severity index measured at week 12	• FPD: Q2 2015 • LPCD: Q2 2016 • Data readout: Q4 2016

MEDI7836 (IL-13 mAb)

Asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02388347**	Healthy subjects	32	• Arm 1: 30mg MEDI7836 (6) or placebo (2) as a single SC dose • Arm 2: 105mg MEDI7836 (6) or placebo (2) as a single SC dose • Arm 3: 300mg MEDI7836 (6) or placebo (2) as a single SC dose • Arm 4: 600mg MEDI7836 (6) or placebo (2) as a single SC dose	• Safety and tolerability	• FPD: Q1 2015 • LPCD: Q3 2015 • Data readout: Q1 2016

MEDI0700 - AMG 570 (Anti-B7RP-1 mAb/BAFF)

Systemic Lupus Erythematosus (SLE)

Trial	Population	Patients	Design	Endpoints	Status
Phase Ia **NCT02618967** **Partnered**	Healthy Subjects	40	Single Ascending Dose • Arm 1: MEDI0700 administered as single SC dose • Arm 2: Dose levels of Placebo administered as single SC dose	• Safety and tolerability • PK/PD	• FPD: Q1 2016 • Data anticipated: H2 2017

MEDI1814 (amyloid beta mAb)

Alzheimer's disease

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02036645**	Alzheimer's disease & healthy elderly	121	• SAD & MAD • Up to 10 iv cohorts are planned vs. placebo • 2 SC cohorts are planned vs. placebo US only	• Safety, tolerability	• FPD: Q2 2014 • LPCD: Q2 2016 • Data readout: Q4 2016

MEDI5872 - AMG 557 (B7RP-1 mAb)

Systemic Lupus Erythematosus (SLE)

Trial	Population	Patients	Design	Endpoints	Status
Phase IIa **NCT02334306** **Partnered**	Primary Sjögren's syndrome	42	• Arm 1: MEDI5872 210mg SC QW for 3 weeks and then Q2W for 9 weeks • Arm 2: placebo SC QW for 3 weeks and then Q2W for 9 weeks Global trial – five countries	• Safety and tolerability • Change in the ESSDAI score from baseline to Day 99	• FPD: Q3 2015 • Data anticipated: H2 2017
Phase I **NCT01683695** **Partnered** **Completed**	SLE and lupus related inflammatory arthritis	40	Dose escalation trial: • Arm 1: MEDI5872 SC • Arm 2: placebo SC Global trial – eight countries	• Safety and tolerability • Lupus Arthritis Response Rate	• FPD: Q2 2012 • LPCD: Q4 2015 • Data readout: Q2 2016

MEDI7352 (NGF TNF Bispecific)

Osteoarthritis pain

Trial	Compound	Population	Patients	Design	Endpoints	Status
Phase I **NCT02508155**	MEDI7352 (NGF TNF Bispecific)	Painful osteoarthritis of the knee	160	• SAD & MAD • Up to 10 iv cohorts are planned vs. placebo • 2 SC cohorts are planned vs. placebo Europe only	• Safety, tolerability, PK, PD	• FPD: Q1 2016 • LPCD: H1 2017 • Data anticipated: H2 2017

MEDI9314 (IL-4Ra mAb)

Atopic Dermatitis

Trial	Population	Patients	Design	Endpoints	Status
Phase I **NCT02669667**	Healthy subjects	44	• Arm 1: 45mg MEDI9314 (4) or placebo (2) as a single SC dose • Arm 2: 150mg MEDI9314 (4) or placebo (2) as a single SC dose • Arm 3: 300mg MEDI9314 (6) or placebo (2) as a single SC dose • Arm 4: MEDI9314 (6) or placebo (2) as a single IV dose • Arm 5: 300300mg mg MEDI9314 (6) or placebo (2) as a single SC dose (Japanese subjects) • Arm 6: 450mg MEDI9314 (6) or placebo (2) as a single IV dose	• Safety and tolerability • Pharmacokinetic and immunogenicity profile	• FPD: Q1 2016 • LPCD: Q4 2016 • Data readout: Q4 2016

Other biologics

Autoimmunity

Trial	Compound	Population	Patients	Design	Endpoints	Status
Phase II/III **NCT02200770**	Inebilizumab Anti-CD19 mAb (MEDI-551)	Adults with Neuromyelitis Optica and Neuromyelitis Optica Spectrum Disorders (NMO/NMOSD)	212 (estimated)	• Arm 1: MEDI-551 500mg IV • Arm 2: placebo IV • Open-label extension 300mg Global trial - 26 Countries	• Primary: Time to attack • Secondary: Attack rate, safety and tolerability	• FPD: Q1 2015 • Data anticipated: 2018
Phase I **NCT02151110**	Anti-CD40L (MEDI4920)	Healthy adults	56	• Arm 1: 3mg MEDI4920 (2) or placebo (1) as a single IV dose • Arm 2: 10mg MEDI4920 (2) or placebo (1) as a single IV dose • Arm 3: 3mg MEDI4920 (3) or placebo (2) as a single IV dose • Arm 4: 100mg MEDI4920 (8) or placebo (2) as a single IV dose • Arm 5: 300mg MEDI4920 (8) or placebo (2) as a single IV dose • Arm 6: 1000mg MEDI4920 (8) or placebo (2) as a single IV dose • Arm 7: 2000mg MEDI4920 (8) or placebo (2) as a single IV dose	• Safety, tolerability, and pharmacokinetics, anti-drug antibody, inhibition of T-cell dependent antibody response	• FPD: Q2 2014 • LPCD: Q4 2015 • Data readout: Q2 2016
Phase I **NCT02780674**	Anti-ILT7 (MEDI7734)	Patients with Type I Interferon-Mediated Autoimmune Diseases: Dermatomyositis, Polymyositis, Sjögren's Syndrome, Systemic Lupus Erythematosus, Systemic Sclerosis	36	• Arm 1: 1mg MEDI7734 (3) or placebo (1) as a single SC dose • Arm 2: 5mg MEDI7734 (6) or placebo (2) as a single SC dose • Arm 3: 15mg MEDI7734 (6) or placebo (2) as a single SC dose • Arm 4: 50mg MEDI7734 (6) or placebo (2) as a single SC dose • Arm 5: 150mg MEDII7734 (6) or placebo (2) as a single SC dose	• Safety, tolerability • Pharmacokinetics and pharmacodynamics	• FPD Q3 2016 • Data anticipated: H2 2017

Other biologics

Infections

Trial	Compound	Population	Patients	Design	Endpoints	Status
Phase II **EudraCT 2014-001097-34**	Anti-Staph AT (MEDI4893)	Intubated ICU	462	• Placebo-controlled, single-dose, dose-ranging • Route of administration: intravenous	• Efficacy and safety	• FPD: Q4 2014 • Data anticipated: 2018
Phase IIb **NCT02878330**	Anti-Respiratory Syncytial Virus mAb-YTE (MEDI8897)	32-35 WK GA infants	1,500	• Randomised, double-blind, placebo-controlled trial • Route of administration: IM	• Safety and efficacy	• FPD: Q4 2016 • Data anticipated: 2018
Phase Ib/IIa **NCT02290340**		32-35 WK GA infants	89	• Randomised, double-blind, placebo-controlled, Dose-escalation trial • Route of administration: IM	• Evaluate Safety, tolerability, PK and ADA	• FPD: Q1 2015 • LPCD: Q3 2015 • Data anticipated: Q3 2016
Phase Ia **NCT02114268 Competed**		Healthy adults	136	• Randomised, double-blind, placebo-controlled, Dose-escalation trial • Route of administration: IV and IM	• Evaluate Safety, tolerability, PK and ADA	• FPD: Q2 2014 • LPCD: Q2 2014 • Data readout: Q2 2015

Other biologics

Infections

Trial	Compound	Population	Patients	Design	Endpoints	Status
Phase Ib/IIa **NCT02603952** **Phase I** **NCT02350751** **Completed**	Anti-influenza A mAb (MEDI8852)	Adults Healthy adults	160 40	• Randomised, partial double-blind, single dose, active-controlled, dose ranging trial • Route of administration: intravenous • Double-blind, single-dose, placebo-controlled, dose-escalation trial • Route of administration: intravenous	• Evaluate safety in adults with acute, uncomplicated Influenza • Evaluate the safety and pharmacokinetics	• FPD: Q4 2015 • LPCD: H2 2016 • Data readout: Q4 2016 • FPD: Q1 2015 • LPCD: Q1 2015 • Data readout: Q2 2015
Phase I **NCT02255760** **Completed**	Anti-Pseudomonas A mAb (MEDI3902)	Healthy adults	56	• Randomised, double-blind, placebo-controlled, dose-escalation trial • Route of administration: intravenous	• Evaluate the safety, tolerability, and pharmacokinetics	• FPD: Q3 2014 • LPCD: Q1 2015 • Data readout: Q2 2015
Phase II **NCT02696902**		Intubated ICU	429	• Placebo-controlled, single-dose, dose-ranging • Route of administration: intravenous	• Efficacy and safety	• FPD: H1 2016 • LPCD: 2018 • Data anticipated: 2018

Clinical trials appendix
Full-Year and Q4 2016 Results update

AstraZeneca
What science can do