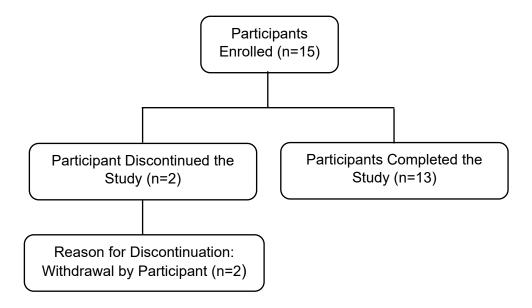
Study Title: A Phase I, open-label, fixed-sequence study to evaluate the effect of a single dose of cyclosporine on the single-dose pharmacokinetics of pralsetinib in healthy subjects

Participants Flow



Baseline Characteristics

Table 1: Baseline Characteristics

Demographic and Baseline Variable	Statistics	Pralsetinib 200 milligrams (mg) (N=15)
Age (years)	n	15
	Median	42.0
	Minimum - Maximum	23 - 55
Sex (percentage of participants)		
Male	n (%)	13 (86.7)
Female	n (%)	2 (13.3)
Race (percentage of participants)		
White	n (%)	9 (60.0)
Black or African American	n (%)	6 (40.0)
Ethnicity (percentage of participants)		
Not Hispanic or Latino	n (%)	8 (53.3)
Hispanic or Latino	n (%)	7 (46.7)

Outcome measures

Primary Outcome Measures:

1. Maximum plasma concentration (Cmax) of pralsetinib when administered alone and in combination with cyclosporine measured using noncompartmental methods of analysis at pre-dose and 0.5 hour (h), 1 h, 2 h, 3 h, 4 h, 6 h, 8 h, 12 h, 24 h, 36 h, 48 h, 72 h, 96 h, 144 h, 192 h, 216 h, 240 h (cyclosporine arm only) and 264 h (cyclosporine arm only) post dose

Analysis population description: Pharmacokinetics (PK) population included all participants who received at least 1 dose of study drug and had at least 1 evaluable post dose PK sample. Overall number analysed is the number of participants with data available for analysis.

Table 2: Summarized Pralsetinib Cmax

Treatment	Number of Participants Analysed	Geometric Mean	% Geometric Coefficient of Variation
Pralsetinib 200 mg	15	648	53.6
Pralsetinib 200 mg + Cyclosporine 600 mg	14	955	59.8

Unit of measurement: nanograms per millilitre (ng/mL)

Statistics: Cmax

Treatment	Number of Participants Analysed	Geometric Least Squares Mean (GLSM)	Geometric Mean Ratio (GMR) % (90% CI)	Within- Subject Coefficient of Variation (CV)
Pralsetinib 200 mg	15	648		
Pralsetinib 200 mg + Cyclosporine 600 mg	14	959	148 (109, 201)	49.2

2. Time to maximum concentration (tmax) of pralsetinib when administered alone and in combination with cyclosporine measured using noncompartmental methods of analysis at pre-dose and 0.5 h, 1 h, 2 h, 3 h, 4 h, 6 h, 8 h, 12 h, 24 h, 36 h, 48 h, 72 h, 96 h, 144

h, 192 h, 216 h, 240 h (cyclosporine arm only) and 264 h (cyclosporine arm only) post dose

Analysis population description: PK population included all participants who received at least 1 dose of study drug and had at least 1 evaluable post dose PK sample. Overall number analysed is the number of participants with data available for analysis.

Table 3: Summarized Pralsetinib tmax

Treatment	Number of Participants Analysed	Median	Minimum and Maximum
Pralsetinib 200 mg	15	3.00	2.00 - 3.23
Pralsetinib 200 mg + Cyclosporine 600 mg	14	4.00	3.00 – 8.00

Unit of measurement: h

3. Area under the concentration-time curve (AUC) from hour 0 to the time of the last quantifiable concentration (AUC0-t) of pralsetinib when administered alone and in combination with cyclosporine measured using noncompartmental method of analysis at pre-dose and 0.5 h, 1 h, 2 h, 3 h, 4 h, 6 h, 8 h, 12 h, 24 h, 36 h, 48 h, 72 h, 96 h, 144 h, 192 h, 216 h, 240 h (cyclosporine arm only) and 264 h (cyclosporine arm only) post dose

Analysis population description: PK population included all participants who received at least 1 dose of study drug and had at least 1 evaluable post dose PK sample. Overall number analysed is the number of participants with data available for analysis.

Table 4: Summarized Pralsetinib AUC0-t

Treatment	Number of Participants Analysed	Geometric Mean	% Geometric Coefficient of Variation
Pralsetinib 200 mg	15	9840	65.1
Pralsetinib 200 mg + Cyclosporine 600 mg	13	16900	71.6

Unit of measurement: hours*nanograms per millilitre (h*ng/mL)

Statistics: AUC0-t

Treatment	Number of Participants Analysed	GLSM	GMR % 90% CI	Within- Subject CV
Pralsetinib 200 mg	15	9840	179 (131, 245)	48.0

Pralsetinib 200	13	17600	
mg +			
Cyclosporine			
600 mg			

4. AUC from Hour 0 to "192," where "192" is a common nominal timepoint across participants of pralsetinib when administered alone and in combination with cyclosporine measured using noncompartmental method of analysis at pre-dose and 0.5 h, 1 h, 2 h, 3 h, 4 h, 6 h, 8 h, 12 h, 24 h, 36 h, 48 h, 72 h, 96 h, 144 h, and 192 h post dose

Analysis population description: PK population included all participants who received at least 1 dose of study drug and had at least 1 evaluable post dose PK sample. Overall number analysed is the number of participants with data available for analysis.

Table 5: Summarized Pralsetinib AUC0-192

Treatment	Number of Participants Analysed	Geometric Mean	% Geometric Coefficient of Variation
Pralsetinib 200 mg	15	9940	64.2
Pralsetinib 200 mg + Cyclosporine 600 mg	14	17900	71.5

Statistics: AUC0-192

Treatment	Number of Participants Analysed	GLSM	GMR % (90% CI)	Within- Subject CV
Pralsetinib 200 mg	15	9940		
Pralsetinib 200 mg + Cyclosporine 600 mg	14	18000	181 (136, 241)	45.3

5. AUC from time zero to infinity (AUC0-∞) of pralsetinib when administered alone and in combination with cyclosporine measured using noncompartmental methods of analysis at pre-dose and 0.5 h, 1 h, 2 h, 3 h, 4 h, 6 h, 8 h, 12 h, 24 h, 36 h, 48 h, 72 h, 96 h, 144 h, 192 h, 216 h, 240 h (cyclosporine arm only) and 264 h (cyclosporine arm only) post dose

Analysis population description: PK population included all participants who received at least 1 dose of study drug and had at least 1 evaluable post dose PK sample. Overall number analysed is the number of participants with data available for analysis.

Table 6: Summarized Pralsetinib AUC0-∞

Treatment	Number of Participants Analysed	Geometric Mean	% Geometric Coefficient of Variation
Pralsetinib 200 mg	15	9970	64.4
Pralsetinib 200 mg + Cyclosporine 600 mg	14	18000	71.6

Unit of measurement: h*ng/mL

Statistics: AUC0-∞

Treatment	Number of Participants Analysed	GLSM	GMR % (90% CI)	Within- Subject CV
Pralsetinib 200 mg	15	9970		
Pralsetinib 200 mg + Cyclosporine 600 mg	14	18000	181 (136, 241)	45.4

6. Apparent terminal elimination half-life (t1/2) of pralsetinib when administered alone and in combination with cyclosporine measured using noncompartmental methods of analysis at pre-dose and 0.5 h, 1 h, 2 h, 3 h, 4 h, 6 h, 8 h, 12 h, 24 h, 36 h, 48 h, 72 h, 96 h, 144 h, 192 h, 216 h, 240 h (cyclosporine arm only) and 264 h (cyclosporine arm only) post dose

Analysis population description: PK population included all participants who received at least 1 dose of study drug and had at least 1 evaluable post dose PK sample. Overall number analysed is the number of participants with data available for analysis.

Table 7: Summarized Pralsetinib t1/2

Treatment	Number of Participants Analysed	Median	Minimum and Maximum
Pralsetinib 200 mg	15	14.0	9.36-44.4
Pralsetinib 200 mg + Cyclosporine 600 mg	14	14.3	11.3-26.5

Secondary Outcome Measures:

 Number of participants with treatment emergent adverse events (TEAEs) and severity of TEAEs measured using National Cancer Institute Common Terminology Criteria for Adverse Events version 5.0 (NCI CTCAE v 5.0) from study initiation up to follow up at Day 38

Analysis population description: Safety population included all participants who received at least 1 dose of study drug.

Table 8: Summary of AEs

	Pralsetinib 200 mg (N=15)	Pralsetinib 200 mg + Cyclosporine 600 mg (N=14)
Participants with TEAEs [number (%)]	3 (20.0%)	4 (28.6%)
Participants with serious TEAEs [number (%)]	0 (0.0%)	0 (0.0%)
Grade 1 [number (%)]	3 (20.0%)	3 (21.4%)
Grade 2 [number (%)]	0 (0.0%)	1 (7.1%)
Grade 3[number (%)]	0 (0.0%)	1 (7.1%)

2. Number of participants with abnormal electrocardiogram (ECG) parameter measured using triplicate 12-lead ECG at screening, check-in (Day -1) Days 1, 2, 5, 9, 10, 11, 14, 18 and at discharge (Day 21)

Analysis population description: Safety population included all participants who received at least 1 dose of study drug. Overall number analysed is the number of participants with data available for analysis.

Table 9: Summary of Abnormal ECG Parameters Reported as AE

	Pralsetinib 200 mg (N=15)	Pralsetinib 200 mg + Cyclosporine 600 mg (N=14)
Participants with Abnormal ECG Parameters	0 (0.0%)	1 (7.1%)

Adverse Events

Table 10: Adverse Events by System Organ Class and Preferred Term

System Organ Class	Preferred Term	Pralsetinib 200 mg n (%) (N=15)	Pralsetinib 200 mg + Cyclosporine 600 mg n (%) (N=14)
Gastrointestinal disorders	Constipation	3 (20.0%)	0 (0.0%)
	Nausea	0 (0.0%)	1 (7.1%)
Investigations	Alanine aminotransferase increased	0 (0.0%)	1 (7.1%)
	Aspartate aminotransferase increased	0 (0.0%)	1 (7.1%)
Blood and lymphatic system disorders	Neutropenia	0 (0.0%)	1 (7.1%)
Cardiac disorders	Palpitations	0 (0.0%)	1 (7.1%)
Vascular disorders	Flushing	0 (0.0%)	1 (7.1%)