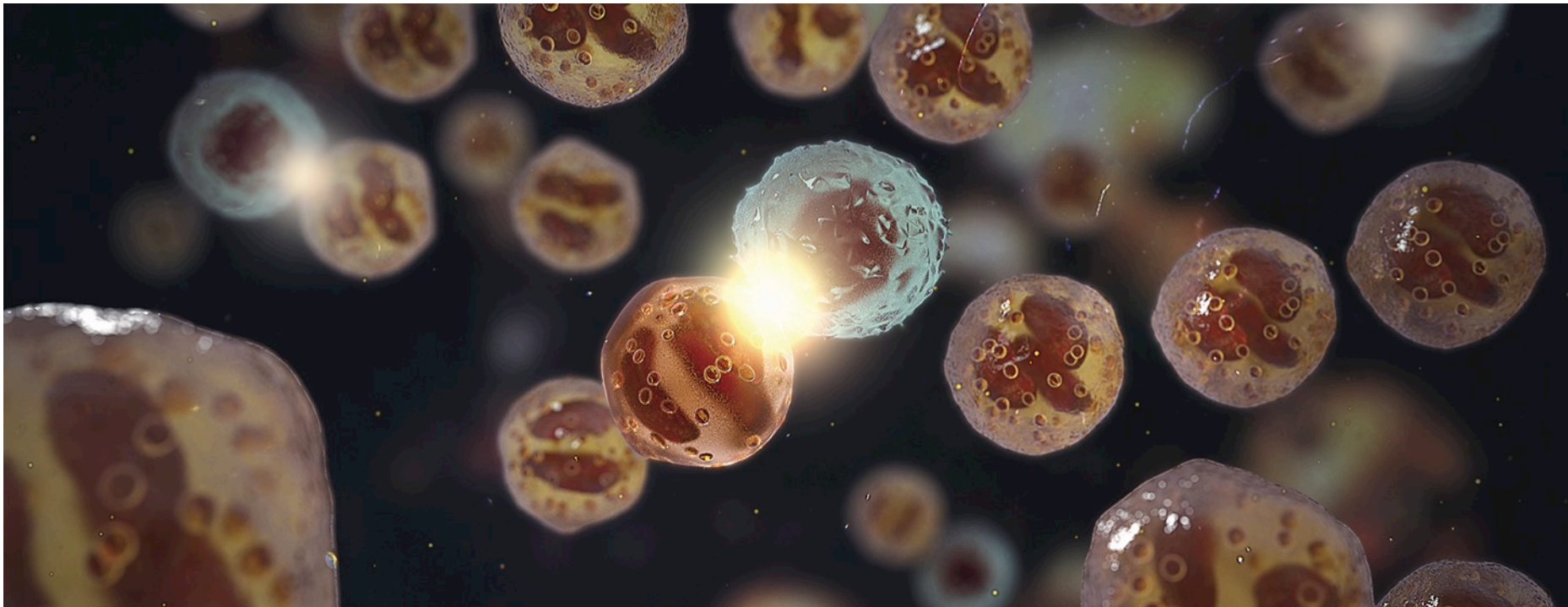


Clinical trials appendix

Q1 2018 Results update



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 March 2018, 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
C_{MAX}	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
FPCD	First Patient Commenced Dosing
IM	Intra Muscular
IR	Immediate Release
IV	Intravenous

LCM	Lifecycle 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

PD	Pharmacodynamics
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	Subcutaneous
TID	Ter In Die (three times a day)
TOC	Test Of Cure
XR	Extended Release



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Q1 2018 Lifecycle Management (LCM) pipeline

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Other

Late-stage pipeline
Oncology
CVRM
Respiratory
Other

Early development - IMED (AstraZeneca Research & Early Development)
Oncology
CVRM
Respiratory
Other

Early development - MedImmune
Oncology
CVRM
Respiratory
Other



Movement since Q4 2017 update

New to Phase I	New to Phase II	New to Pivotal Study	New to Registration
<p>NMEs AZD9977 MCR CV disease Calquence + AZD6738 BTK inhibitor + ATR inhibitor haematological malignancies MEDI1314 alpha synuclein mAb parkinson's disease MEDI7219 anti-diabetic type-2 diabetes</p> <p>Additional indications Imfinzi + danvatirsen (AZD9150) + chemotherapy PD-L1 mAb + STAT3 inhibitor + chemotherapy solid tumours</p>	<p>NMEs Imfinzi + Lynparza BAYOU PD-L1 mAb + PARP inhibitor 1st-line unresectable stage IV bladder cancer AZD8601# VEGF-A CV disease</p>	<p>Additional indications roxadustat# HIFPH anaemia in myelodysplastic syndrome</p> <p>Life-cycle Management Fasenra# OSTRO IL-5R mAb nasal polyposis</p>	<p>NMEs moxetumomab# PLAIT [US] 1 anti-CD22 recombinant immunotoxin 3rd-line hairy cell leukaemia</p> <p>Life-cycle Management Forxiga [EU] 1 SGLT2 inhibitor type-1 diabetes Bydureon EXSCEL [EU] 1 GLP-1 receptor agonist type-2 diabetes outcomes trial</p>
Removed from Phase I	Removed from Phase II	Removed from Phase III	Removed from Registration
<p>NMEs MEDI-565# CEA BiTE mAb solid tumours MEDI4920 3 anti-CD40L-Tn3 fusion protein primary Sjögren's syndrome MEDI7734 3 IL-T7 mAb myositis MEDI9314 IL-4R mAb atopic dermatitis</p>	<p>NMEs inebilizumab# 3 CD19 mAb neuromyolitis optica mavrilimumab# 3 GM-CSFR mAb rheumatoid arthritis</p>	<p>Additional indications Imfinzi# + tremelimumab ARCTIC PD-L1 mAb + CTLA-4 mAb 3rd-line NSCLC</p>	<p>NMEs Lokelma (ZS-9) [US] 2 potassium binder hyperkalaemia</p> <p>Life-cycle Management Imfinzi# PACIFIC [US] 2 PD-L1 mAb locally-advanced (Stage III), NSCLC Tagrisso FLAURA [US] 2 EGFR inhibitor 1st-line advanced EGFRm NSCLC</p>

¶ Registrational Phase II/III study

Partnered and/or in collaboration

1 Submission Accepted 2 Submission Approved 3 Divested



Q1 2018 New Molecular Entity (NME)¹ Pipeline

Phase I

31 New Molecular Entities

Small molecule		Large molecule
AZD0156 ATM solid tumours	AZD4831 MPO HFpEF	MEDI0582# hOX40 solid tumours
AZD1390 ATM healthy volunteer study	AZD9977 MCR cardiovascular	MEDI1873 GITR solid tumours
AZD2811# Aurora solid tumours	AZD1402# inhaled IL-4Ra asthma	MEDI3726# PSMA prostate
AZD4573 CDK9 hematological malignancies	AZD5634 inhaled ENaC cystic fibrosis	MEDI4276 HER2 solid tumours
AZD4635 A2aR inhibitor solid tumours	AZD7594+abediterol# Inhaled SGRM+LABA asthma/COPD	MEDI5083 CD40 ligand fusion protein solid tumours
AZD4785 KRAS solid tumours	AZD0284 RORg psoriasis/respiratory	MEDI7247 antibody drug conjugate haems
AZD5153 BRD4 solid tumours		oleclumab CD73 solid tumours
AZD5991 MCL1 hematological malignancies		MEDI7219 anti-diabetic type-2 diabetes
AZD6738 ATR solid tumours		MEDI3506 IL-33 COPD
AZD8186 PI3Kβ solid tumours		MEDI0700# BAFF/B7RP1 SLE
AZD9496 SERD ER+ breast		MEDI1341 alpha synuclein parkinson's disease
MEDI9197# TLR 7/8 solid tumours		MEDI1814# amyloidβ alzheimer's disease
		MEDI7352 NGF/TNF osteoarthritis pain

Phase II

21 New Molecular Entities

Small molecule	Large molecule
adavosertib# (AZD1775)+chemotherapy Wee1+chemo ovarian cancer	MEDI0382 GLP-1/glucagon type-2 diabetes
AZD4547 FGFR solid tumours	MEDI5884# cholesterol modulation cardiovascular
capivasertib (AZD5363)# AKT breast cancer	MEDI6012 LCAT cardiovascular
vistusertib mTOR 1/2 solid tumours	MEDI3902 Psl/PcrV Pseudomonas pneumonia
AZD5718 FLAP coronary artery disease	MEDI8852 influenza A treatment
AZD8601# VEGF-A cardiovascular	MEDI8897# passive RSV prophylaxis
verinurad URAT-1 chronic kidney disease	prezalumab# primary Sjögren's syndrome
abediterol# LABA asthma/COPD	suratoxumab α-Toxin Staphylococcus pneumonia
AZD1419# inhaled TLR9 asthma	
AZD7594 Inhaled SGRM asthma/COPD	
AZD7986# DPP1 COPD	
AZD8871# MABA COPD	
AZD9567 SGRM RA/respiratory	

Phase III

8 New Molecular Entities

Small molecule	Large molecule
Lynparzel# + cediranib CONCERTO PARP+VEGF recurrent Pt-R ovarian	Imfinzi# + tremelimumab MYSTIC PD-L1+CTLA-4 1L NSCLC
savolitinib# SAVOIR MET pRCC	tezepelumab# NAVIGATOR SOURCE TSLP severe uncontrolled asthma
selumetinib ASTRA MEK differentiated thyroid cancer	anifrolumab# TULIP Type I IFN receptor SLE
PT010 LABA/LAMA/ICS COPD	
lanabecestat# BACE early alzheimer's disease	

Applications Under Review

2 New Molecular Entities

Small molecule	Large molecule
roxadustat# HIFPH anaemia CKD/ESRD	moxetumomab pasudotox# PLAIT CD22 3L HCL

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

■ Oncology
 ■ Cardiovascular, Renal & Metabolism
 ■ Respiratory
 ■ Other



Q1 2018 Lifecycle Management (LCM)¹ Pipeline

Phase I	Phase II		Phase III			Applications Under Review	
1 Projects	7 Projects		21 Projects			4 Projects	
Small molecule	Small molecule	Large molecule	Small molecule		Large molecule	Small molecule	Large molecule
adavosertib# (AZD1775) Wee1 solid tumours	Tagrisso BLOOM EGFR NSCLC CNS mets	Imfinzi# PD-L1 solid tumours	Calquence# BTK inhibitor 1st line MCL	Brinto/Brintique THALES P2Y12 stroke	Imfinzi# PEARL (China) PD-L1 1L NSCLC	Bydureon EXSCEL outcomes	
	Brinto/Brintique HESTIA P2Y12 paed's w/ sickle cell	Izuprelumab# TSLP atopic dermatitis	Calquence# BTK inhibitor 1st line CLL	Brinto/Brintique THEMIS P2Y12 diabetes & CAD outcomes	Fasenra# IL-5R COPD	Farxiga/Farxiga type-1 diabetes	
	PT010 LABA/LAMA/ICS asthma	anifrolumab# Type I IFN receptor SLE SC	Calquence# BTK inhibitor 1st CLL, high risk	Epanova STRENGTH outcomes	Fasenra# OSTRO IL-5R nasal polyposis	linacotide# (CN only) IBS-c	
		anifrolumab# Type I IFN receptor lupus nephritis	Lynparza OlympiA PARP gBRCA adjuvant breast	Farxiga/Farxiga SGLT2 heart failure		Nexium (CN only) stress ulcer prophylaxis	
			Lynparza POLO PARP pancreatic cancer	Farxiga/Farxiga SGLT2 CKD			
			Lynparza PROfound PARP prostate cancer	Farxiga/Farxiga DECLARE outcomes			
			Lynparza SOLO-1 PARP 1L BRCAm ovarian	roxadustat# HIFPH anaemia MDS			
			Lynparza SOLO-3 PARP BRCAm PSR ovarian	saxagliptin/dapagliflozin metformin DPP4 type-2 diabetes			
			Tagrisso ADAURA EGFR adj. EGFRm NSCLC	Symbicort SYGMA as needed in mild asthma			

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

■ Oncology
 ■ Cardiovascular, Renal & Metabolism
 ■ Respiratory
 ■ Other



Q1 2018 Lifecycle Management (LCM)¹ Pipeline

Oncology Combinations

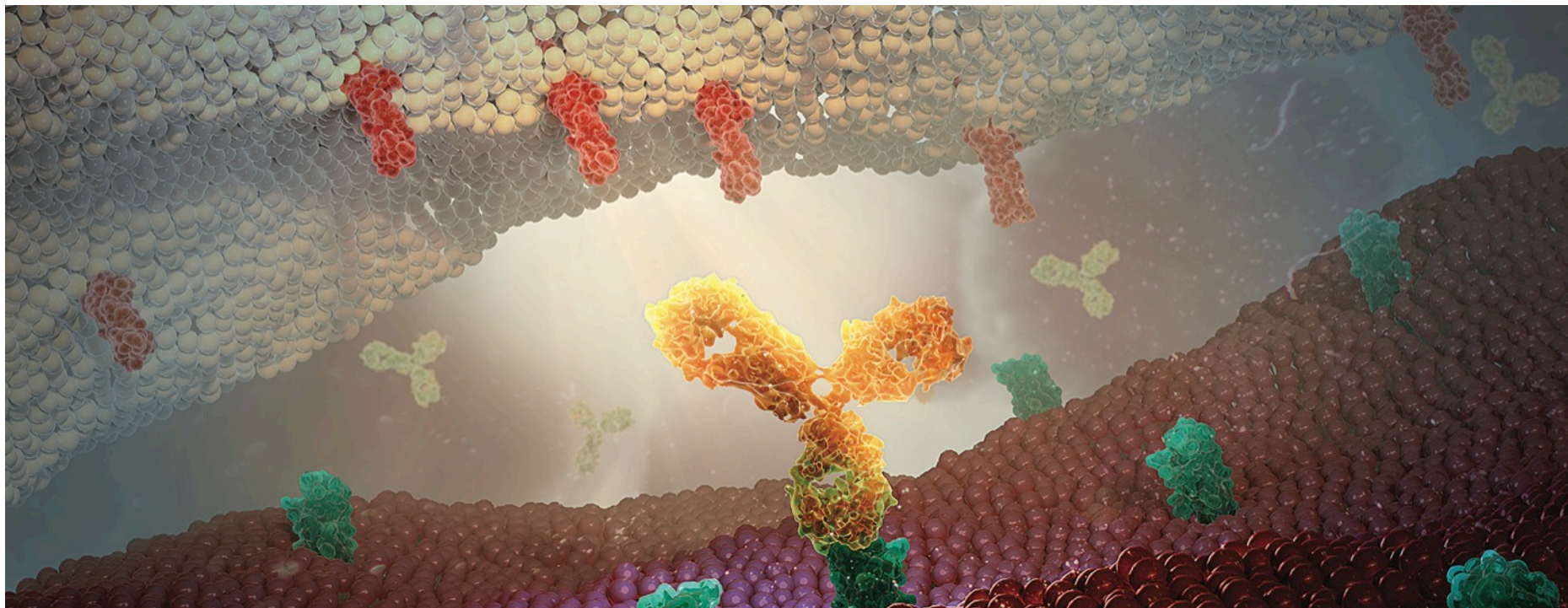
Phase I 18 Projects		Phase II 10 Projects	Phase III 7 Projects	Applications Under Review 0 Projects
Calquence+AZD6738 BTK+ATR hematological tumours	Imfinzi#+monalizumab PD-L1+NKG2a solid tumours	Imfinzi#+AZD5069 PD-L1+CXCR2 PDAC	Imfinzi#+tremelimumab DANUBE PD-L1+CTLA-4 1L bladder	
Calquence+vistusertib BTK+mTOR hematological tumours	Imfinzi#+oleclumab PD-L1+CD73 solid tumours	Imfinzi#+AZD5069 or Imfinzi#+danvatirsens#(AZD9150)	Imfinzi#+tremelimumab EAGLE PD-L1+CTLA-4 2L HNSCC	
Imfinzi# or Imfinzi#+(treme or danvatirsens#) PD-L1 or PD-L1+(CTLA-4 or STAT3) DLBCL	Imfinzi#+RT (platform) CLOVER PD-L1+RT HNSCC NSCLC SCLC	Imfinzi#+MEDI0457# PD-L1+DNA HPV vaccine HNSCC	Imfinzi#+tremelimumab HIMALAYA PD-L1+CTLA-4 1L HCC	
Imfinzi#+adavosertib#(AZD1775) PD-L1+Wee1 solid tumours	Imfinzi#+selumetinib# PL-L1 solid tumours + MEK inhibitor	Imfinzi#+MEDI0880 PD-L1+PD-1 solid tumours	Imfinzi#+tremelimumab KESTREL PD-L1+CTLA-4 1L NSCLC	
Imfinzi#+azacitidine# PD-L1+azacitidine MDS	Imfinzi#+tremelimumab PD-L1+CTLA-4 solid tumours	Imfinzi#+tremelimumab PD-L1+CTLA-4 gastric cancer	Imfinzi#+tremelimumab NEPTUNE PD-L1+CTLA-4 1L NSCLC	
Imfinzi#+dabrafenib+trametinib PD-L1+BRAF+MEK melanoma	Imfinzi#+tremelimumab+chemo PD-L1+CTLA-4 1L PDAC oesophageal	Imfinzi#+tremelimumab PD-L1+CTLA-4 biliary tract oesophageal	Imfinzi#+tremelimumab+SoC CASPIAN PD-L1+CTLA-4+SoC 1L SCLC	
Imfinzi#+Iressa PD-L1+EGFR NSCLC	Imfinzi#+danvatirsens(AZD9150)+chemo PD-L1+STAT3+chemo solid tumours	Imfinzi#+Lynparza BAYOU PD-L1+PARP bladder	Imfinzi#+tremelimumab+SoC POSEIDON PD-L1+CTLA-4+SoC 1L NSCLC	
Imfinzi#+MEDI0562# PD-L1+ROX40 solid tumours	Lynparza+adavosertib# (AZD1775) PARP+Wee1 solid tumours	Lynparza#+Imfinzi MEDIOLA PARP+PD-L1 solid tumours		
Imfinzi#+MEDI0197# PD-L1+TLR 7/8 agonist	tremelimumab+MEDI0562# CTLA-4+hOX40 solid tumours	Lynparza+AZD6738 PARP+ATR gastric		
		Tagrisso comb# TATTON EGFR+PD-L1/MEK/MET 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 cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase III SOLO-2 NCT01874353	Platinum-sensitive recurrent (PSR) BRCAm ovarian cancer	295	<ul style="list-style-type: none"> Arm 1: <i>Lynparza</i> tablets 300mg BID as maintenance therapy until progression Arm 2: placebo tablets BID Global trial	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoint: OS 	<ul style="list-style-type: none"> FPCD: Q3 2013 LPCD: Q4 2014 Data readout: Q4 2016 Primary endpoint met
Phase III SOLO-1 NCT01844986	1L maintenance BRCAm ovarian cancer	391	<ul style="list-style-type: none"> Arm 1: <i>Lynparza</i> tablets 300mg BID maintenance therapy for 2 years or until disease progression Arm 2: placebo Global trial	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoint: OS 	<ul style="list-style-type: none"> FPCD: Q3 2013 LPCD: Q1 2015 Data anticipated: H1 2018
Phase III SOLO-3 NCT02282020	PSR gBRCAm ovarian cancer 3L+ Line	411	<ul style="list-style-type: none"> Arm 1: <i>Lynparza</i> 300mg BID to progression Arm 2: Physician's choice (single-agent chemotherapy) Global trial	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoint: OS 	<ul style="list-style-type: none"> FPCD: Q1 2015
Phase I / II MEDIOLA NCT02734004	gBRCAm ovarian cancer 2L+ gBRCAm HER2-negative breast cancer 1-3L Small cell lung cancer (SCLC) 2L+ Gastric cancer 2L+	133	<ul style="list-style-type: none"> Arm 1: <i>Lynparza</i> tablets 300mg BID starting on week 1 day 1 / <i>Imfinzi</i> IV 1.5g every 4 weeks starting on week 5 day 1 Dose until progression Global trial	Primary endpoints <ul style="list-style-type: none"> Disease control rate (DCR) at 12 weeks Safety and tolerability Secondary endpoints <ul style="list-style-type: none"> DCR at 28 weeks ORR, duration of response (DoR), PFS, TDT, OS PK 	<ul style="list-style-type: none"> FPCD: Q2 2016 LPCD: Q2 2017

PARP = Poly ADP Ribose Polymerase



Lynparza (PARP inhibitor)

Breast cancer and other cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase III OlympiAD NCT02000622	BRCAm metastatic breast cancer	302	<ul style="list-style-type: none"> Arm 1: <i>Lynparza</i> 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 <p>Global trial</p>	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoint: OS 	<ul style="list-style-type: none"> FPCD: Q2 2014 LPCC: Q4 2015 Data readout: Q1 2017 Primary endpoint met
Phase III OlympiA NCT02032823 Partnered	BRCAm adjuvant breast cancer	1,500	<ul style="list-style-type: none"> Arm 1: <i>Lynparza</i> 300mg BiD 12 month duration Arm 2: Placebo 12 month duration <p>Global trial partnership with BIG and NCI/NRG</p>	<ul style="list-style-type: none"> Primary endpoint: invasive disease-free survival (IDFS) Secondary endpoint: distant disease-free survival and OS 	<ul style="list-style-type: none"> FPCD: Q2 2014
Phase III POLO NCT02184195	gBRCAm pancreatic cancer	145	<ul style="list-style-type: none"> Arm 1: <i>Lynparza</i> tablets 300mg twice daily as maintenance therapy until progression Arm 2: Placebo tablets BiD <p>Global trial</p>	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoint: OS 	<ul style="list-style-type: none"> FPCD: Q1 2015 Data readout: 2019
Phase II NCT01972217	Metastatic castration-resistant prostate cancer	142	<ul style="list-style-type: none"> Arm 1: <i>Lynparza</i> 300mg BiD + abiraterone Arm 2: Placebo + abiraterone <p>Global trial</p>	<ul style="list-style-type: none"> Primary endpoint: Radiologic PFS 	<ul style="list-style-type: none"> FPCD: Q3 2014 LPCC: Q3 2015 Data readout: Q4 2017
Phase III PROfound NCT02987543	Metastatic castration-resistant prostate cancer HRRm, 2L+	340	<ul style="list-style-type: none"> Arm 1: <i>Lynparza</i> 300mg BID Arm 2: Physician's choice: enzalutamide 160mg once daily abiraterone acetate 1000mg once daily <p>Global trial</p>	<ul style="list-style-type: none"> Primary endpoint: Radiologic PFS Secondary endpoints: ORR, Time to Pain Progression, OS 	<ul style="list-style-type: none"> FPCD: Q2 2017

PARP = Poly ADP Ribose Polymerase

HRRm = Homologous recombination repair mutation



Tagrisso (Highly-selective, irreversible EGFRi)

Non-small cell lung cancer (NSCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase III AURA3 NCT02151981	Advanced EGFRm NSCLC tyrosine kinase inhibitor (TKI) failure and primary resistance mutation T790M	410	<ul style="list-style-type: none"> Arm 1: <i>Tagrisso</i> 80mg QD Arm 2: pemetrexed 500mg/m² + carboplatin AUC5 or pemetrexed 500mg/m² + cisplatin 75mg/m² (2:1 randomisation) Global trial – 18 countries	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoints: OS and quality of life (QoL) 	<ul style="list-style-type: none"> FPCD: Q3 2014 Data readout: Q3 2016 Primary endpoint met
Phase III FLAURA NCT02296125	Advanced EGFRm NSCLC 1L	556	<ul style="list-style-type: none"> Arm 1: <i>Tagrisso</i> 80mg Arm 2: erlotinib 150mg or <i>Iressa</i> 250mg (physicians choice); 1:1 randomisation Global trial – 30 countries	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoints: OS and QoL 	<ul style="list-style-type: none"> FPCD: Q1 2015 LPD: Q4 2016 Data readout: Q3 2017 Primary endpoint met
Phase III ADAURA NCT02511106	Adjuvant EGFRm NSCLC	700	<ul style="list-style-type: none"> Arm 1: <i>Tagrisso</i> 80mg QD following complete tumour resection, with or without chemotherapy Arm 2: Placebo Global trial – 25 countries	<ul style="list-style-type: none"> Primary endpoint: Disease Free Survival (DFS) Secondary endpoints: DFS Rate, OS, OS Rate, QoL 	<ul style="list-style-type: none"> FPCD: Q4 2015 Data anticipated: 2022
Phase II AURA17 NCT02442349	Advanced EGFRm NSCLC TKI failure and primary resistance mutation T790M	171	<ul style="list-style-type: none"> <i>Tagrisso</i> 80mg QD Asia-Pacific regional trial – 3 countries	<ul style="list-style-type: none"> Primary endpoint: ORR Secondary endpoints: PFS and OS 	<ul style="list-style-type: none"> FPCD: Q3 2015 Data readout: Q2 2016
Phase II AURA2 NCT02094261	Advanced EGFRm NSCLC TKI failure and primary resistance mutation T790M	210	<ul style="list-style-type: none"> <i>Tagrisso</i> 80mg QD Global trial - 8 countries	<ul style="list-style-type: none"> Primary endpoint: ORR Secondary endpoints: PFS and DoR 	<ul style="list-style-type: none"> FPCD: Q2 2014 LPD: Q4 2014 Data readout: Q2 2015
Phase I/II AURA NCT01802632	Advanced EGFRm NSCLC TKI failure + /- primary resistance mutation T790M	603	<ul style="list-style-type: none"> Dose escalation trial Ph II Extension cohort (T790M only) <i>Tagrisso</i> 80mg QD Global trial – 10 countries	<ul style="list-style-type: none"> Primary endpoint: ORR Secondary endpoints: PFS and OS 	<ul style="list-style-type: none"> FPCD: Q1 2013 LPD: Q4 2014 Data readout: Q2 2015 (Phase II portion)



Tagrisso (Highly-selective, irreversible EGFRi)

Non-small cell lung cancer (NSCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase Ib TATTON NCT02143466	Advanced EGFRm TKI failure	308	<ul style="list-style-type: none"> • Arm 1: <i>Tagrisso</i> + <i>Imfinzi</i> • Arm 2: <i>Tagrisso</i> + savolitinib • Arm 3: <i>Tagrisso</i> + selumetinib • Enrolment to <i>Imfinzi</i> combination arms will not restart Global trial	<ul style="list-style-type: none"> • Safety, Tolerability, Pharmacokinetics and Preliminary anti-tumour Activity 	<ul style="list-style-type: none"> • FPCD: Q3 2014
Phase III ASTRIS NCT02474355	Real world setting in adult patients with advanced or metastatic, EGFR T790M+	3,515	Single-arm trial - <i>Tagrisso</i> 80mg Global trial – 16 countries	<ul style="list-style-type: none"> • Primary endpoints: OS and Safety • Secondary endpoint: PFS 	<ul style="list-style-type: none"> • FPCD: Q3 2015
Phase II ELIOS NCT03239340	EGFR TKI treatment-naïve patients with locally-advanced or metastatic EGFRm+ NS	100	Single arm study – <i>Tagrisso</i> 80 mg Global trial – 5 countries	<ul style="list-style-type: none"> • Primary Endpoint: Proportion of patients with a given tumour genetic and proteomic marker at the point of disease progression as defined by the Investigator • Secondary Endpoint: PFS, ORR, DoR 	
Phase III LAURA NCT03521154	Maintenance therapy in patients with locally advanced, unresectable EGFRm+ Stage III whose disease has not progressed following platinum-based chemoradiation therapy	200	<ul style="list-style-type: none"> • Arm 1: <i>Tagrisso</i> 80mg • Arm 2: placebo Global trial - 11 countries	<ul style="list-style-type: none"> • Primary endpoint: PFS (via BICR) • Secondary endpoints: CNS PFS, OS, DoR, ORR, DCR 	



Imfinzi (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	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> mg/kg IV Q4W x 12m Arm 2: Placebo Global trial	<ul style="list-style-type: none"> Primary endpoint: DFS Secondary endpoint: OS 	<ul style="list-style-type: none"> FPCD: Q1 2015 Data anticipated: 2020
Phase III PACIFIC NCT02125461	Unresectable NSCLC patients following platinum-based concurrent chemo-radiation therapy	702	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> IV Q2W Arm 2: Placebo Global trial	Primary endpoints: <ul style="list-style-type: none"> PFS OS 	<ul style="list-style-type: none"> FPCD: Q2 2014 LPD: Q2 2016 Data readout: Q2 2017 Primary endpoint met OS Data anticipated: 2019
Phase II/III Lung Master Protocol NCT02154490 Partnered	Stage IV squamous NSCLC patients Biomarker-targeted 2L therapy	140 ; 100 <i>Imfinzi</i> treated	Umbrella trial with five arms based on biomarker expression <ul style="list-style-type: none"> Substudy A: <i>Imfinzi</i> (non-match for other biomarker driven substudies) IVQ2W single arm <i>Imfinzi</i> 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) 	Primary endpoints: <ul style="list-style-type: none"> ORR PFS OS 	<ul style="list-style-type: none"> FPCD: Q2 2014 Data anticipated: 2022
Phase I/II Sequencing Study NCT02179671	Stage IIIB-IV NSCLC patients	72	<ul style="list-style-type: none"> Arm 1: <i>Iressa</i> initially then switch to <i>Imfinzi</i> IVQ2W Arm 2: <i>Tagrisso</i> then switch to <i>Imfinzi</i> Arm 3: selumetinib + docetaxel then switch to <i>Imfinzi</i> Arm 4: tremelimumab then switch to <i>Imfinzi</i> 	<ul style="list-style-type: none"> Primary endpoint: Complete Response Rate Secondary endpoints: ORR, Disease Control Rate 	<ul style="list-style-type: none"> FPCD: Q3 2014 LPD: Q2 2016 Data readout: Q3 2016
Phase III PEARL NCT03003962	NSCLC 1L	440	<ul style="list-style-type: none"> Arm 1 <i>Imfinzi</i> Q4W Arm 2 Chemotherapy (SoC) Asia trial	Primary endpoints: <ul style="list-style-type: none"> PFS OS 	<ul style="list-style-type: none"> FPCD: Q1 2017 Data anticipated: 2020
Phase III PACIFIC-2	<i>Imfinzi</i> + CRT in Unresected Locally Advanced NSCLC	300	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> IV Q4W + Chemo/RT Arm 2: Placebo + Chemo/RT ex US global trial	Primary endpoint: <ul style="list-style-type: none"> PFS ORR Secondary endpoint: <ul style="list-style-type: none"> OS 	<ul style="list-style-type: none"> FPCD: Q2 2018 Data readout: 2021



Imfinzi (PD-L1 mAb)

Other cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02301130 Partnered	Solid tumours	108	<ul style="list-style-type: none"> Dose Escalation: N=36, three cohorts receiving Treatment A (mogamulizumab + <i>Imfinzi</i>) and three cohorts receiving Treatment B (mogamulizumab + tremelimumab), in parallel Dose Expansion: N=72, Multiple solid tumour types (NSCLC, HNSCC, Pancreatic), Treatment A or B (12 subjects per treatment per disease type, in parallel) 	<ul style="list-style-type: none"> Safety and Tolerability MTD ORR, DoR, DCR, PFS, OS 	<ul style="list-style-type: none"> FPCD: Q4 2014 LPCD: Q3 2017 Data anticipated: 2018
Phase I NCT01938612	Solid tumours (all-comers)	176	<ul style="list-style-type: none"> 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, <i>Imfinzi</i> Q4W 20mg/kg + tremelimumab Q4W 1mg/kg <p>Trial conducted in Japan</p>	<ul style="list-style-type: none"> Safety Optimal biologic dose 	<ul style="list-style-type: none"> FPCD: Q3 2013 LPCD: Q1 2017 Data anticipated: 2018



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

Non-small cell lung cancer (NSCLC) and other cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase III ARCTIC NCT02352948	Stage IIIB-IV 3L NSCLC patients who have not been tested positive for EGFR/ALK mutation	480	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> + tremelimumab (PD-L1 –ve patients) Arm 2: Standard of care Arm 3: tremelimumab (PD-L1 –ve patients) Arm 4: <i>Imfinzi</i> (PD-L1 –ve patients) 	Primary endpoints: <ul style="list-style-type: none"> PFS OS 	<ul style="list-style-type: none"> FPCD: Q2 2015 LPCD: Q3 2016 Data readout: Q1 2018
Phase III MYSTIC NCT02453282	NSCLC 1L	1,118	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> Arm 2: <i>Imfinzi</i> + tremelimumab Arm 3: Standard of care 	Primary endpoints: <ul style="list-style-type: none"> PFS OS 	<ul style="list-style-type: none"> FPCD: Q3 2015 LPCD: Q3 2016 Data anticipated: H2 2018 (OS) PFS primary endpoint not met
Phase III NEPTUNE NCT02542293	NSCLC 1L	960	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> + tremelimumab Arm 2: Standard of care 	<ul style="list-style-type: none"> Primary endpoint: OS Secondary endpoint: PFS 	<ul style="list-style-type: none"> FPCD: Q4 2015 LPCD: Q2 2017 Data anticipated: 2019
Phase III POSEIDON NCT03164616	NSCLC 1L	1,000	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> + CTx Arm 2: <i>Imfinzi</i> + tremelimumab + chemotherapy Arm 3: chemotherapy 	Primary endpoints: <ul style="list-style-type: none"> PFS 	<ul style="list-style-type: none"> FPCD: Q2 2017 Data anticipated: 2019
Phase III EAGLE NCT02369874	HNSCC 2L	736	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> + tremelimumab Arm 2: <i>Imfinzi</i> Arm 3: Standard of care 	<ul style="list-style-type: none"> Primary endpoint: OS Secondary endpoint: PFS 	<ul style="list-style-type: none"> FPCD: Q4 2015 LPCD: Q3 2017 Data anticipated: H2 2018
Phase III KESTREL NCT02551159	HNSCC 1L	823	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> Arm 2: <i>Imfinzi</i> + tremelimumab Arm 3: Standard of care 	Primary endpoints: <ul style="list-style-type: none"> PFS OS 	<ul style="list-style-type: none"> FPCD: Q4 2015 LPCD: Q1 2017 Data anticipated: H2 2018
Phase III DANUBE NCT02516241	Bladder 1L cis-eligible and ineligible	1,005	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> + tremelimumab Arm 2: <i>Imfinzi</i> Arm 3: Standard of care 	Primary endpoints: <ul style="list-style-type: none"> OS 	<ul style="list-style-type: none"> FPCD: Q4 2015 LPCD: Q1 2017 Data anticipated: 2019
Phase III CASPIAN NCT03043872	SCLC 1L	795	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> + tremelimumab + EP (carboplatin or cisplatin + etoposide) Arm 2: <i>Imfinzi</i> + EP (carboplatin or cisplatin + etoposide) Arm 3: <i>Imfinzi</i> + EP (carboplatin or cisplatin + etoposide) 	Primary endpoints: <ul style="list-style-type: none"> PFS OS 	<ul style="list-style-type: none"> FPCD: Q1 2017 Data anticipated: 2019

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

Other cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase III STRONG NCT03084471	Advanced Solid Malignancies	1,200	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> Arm 2: <i>Imfinzi</i> + tremelimumab 	<ul style="list-style-type: none"> Primary endpoint: Safety 	<ul style="list-style-type: none"> FPCD: Q2 2017 Data anticipated: 2022
Phase II NCT02527434	Urothelial Bladder Cancer Triple-negative Breast Cancer Pancreatic Ductal-Adenocarcinoma	76	<ul style="list-style-type: none"> Arm 1 tremelimumab in urothelial bladder cancer Arm 2 tremelimumab triple-negative breast cancer Arm 3 tremelimumab pancreatic ductal-adenocarcinoma 	<ul style="list-style-type: none"> Primary endpoint: ORR Secondary endpoints: <ul style="list-style-type: none"> Safety DoR 	<ul style="list-style-type: none"> FPCD: Q4 2015 Data anticipated: 2018
Phase II BALTIC NCT02937818	SCLC	80	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> + tremelimumab Q4W Arm 2: AZD1775 and carboplatin BID 	<ul style="list-style-type: none"> Primary endpoint: ORR 	<ul style="list-style-type: none"> FPCD: Q4 2016 Data Anticipated: 2020
Phase I Combination in Advanced Solid Tumours NCT02658214	Solid tumours	80	<ul style="list-style-type: none"> Arm 2 SCLC: <i>Imfinzi</i> + tremelimumab + carboplatin + etoposide Arm 3 TNBC: <i>Imfinzi</i>+ tremelimumab + gemcitabine + carboplatin Arm 4 TNBC: <i>Imfinzi</i> + tremelimumab + nab-paclitaxel (paclitaxel-albumin) + carboplatin Arm 5 Gastric/gastro-Oesophageal junction (GEJ): <i>Imfinzi</i> + tremelimumab + oxaliplatin + 5-fluorouracil (5FU) + leucovorin (calcium folinate/folinic acid) Arm 6 PDAC: <i>Imfinzi</i>+ tremelimumab + nab-paclitaxel (paclitaxel-albumin) + gemcitabine Arm 7 ESSC: <i>Imfinzi</i>+ tremelimumab + cisplatin + 5-fluorouracil (5FU) 	<ul style="list-style-type: none"> Safety 	<ul style="list-style-type: none"> FPCD: Q1 2016 LPCD: Q4 2016 Data anticipated: 2019
Phase III HIMALAYA NCT03298451	Unresectable Hepatocellular Carcinoma	1,200	<ul style="list-style-type: none"> Arm 1: <i>Imfinzi</i> + tremelimumab (Regimen 1) Arm 2: <i>Imfinzi</i> + tremelimumab (Regimen 2) Arm 3: <i>Imfinzi</i> Arm 4: sorafenib 	<ul style="list-style-type: none"> Primary endpoint: OS Secondary endpoint: PFS, time to tumour progression (TTP), ORR 	<ul style="list-style-type: none"> Data anticipated: 2020



Calquence (BTK inhibitor)

Blood cancers

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoint(s)	Status
Phase III ACE-CL-006 (ELEVATE-RR) NCT02477696	Relapsed/refractory chronic lymphocytic leukaemia (CLL), high risk	533	<ul style="list-style-type: none"> Arm A: <i>Calquence</i> Arm B: ibrutinib 	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoints: comparison of incidence of infections, RTs and atrial fibrillation, OS 	<ul style="list-style-type: none"> FPCD: Q2 2015 Data anticipated: 2019
Phase III ACE-CL-007 (ELEVATE-TN) NCT02475681	Previously untreated CLL	535	<ul style="list-style-type: none"> Arm A: chlorambucil + obinutuzumab Arm B: <i>Calquence</i>+ obinutuzumab Arm C: <i>Calquence</i> 	<ul style="list-style-type: none"> Primary endpoint: PFS (Arm A vs Arm B) Secondary endpoints: IRC assessed ORR, TTNT, OS (Arm A vs Arm B vs Arm C) 	<ul style="list-style-type: none"> FPCD: Q2 2015 Data anticipated: 2019
Phase III ACE-CL-309 NCT02970318	Relapsed/refractory CLL	306	<ul style="list-style-type: none"> Arm A: <i>Calquence</i> Arm B: rituximab + idelalisib or bendamustine (investigator's choice) 	<ul style="list-style-type: none"> Primary endpoint: IRC assessed PFS (arm A vs Arm B) Secondary endpoints: INV-assessed ORR, TTNT, OS, DOR, PROs 	<ul style="list-style-type: none"> FPCD Q3 2016 Data anticipated: 2020
Phase III ACE-LY-308 NCT02972840	Previously untreated Mantle cell lymphoma (MCL)	546	<ul style="list-style-type: none"> Arm A: <i>Calquence</i> + bendamustine + rituximab Arm B: bendamustine + rituximab 	<ul style="list-style-type: none"> Primary endpoint: PFS by Lugano Classification for NHL Secondary endpoints: Investigator-assessed (IA) PFS, ORR; IRC-assessed ORR, DOR, time to response; OS 	<ul style="list-style-type: none"> FPCD: Q1 2017 Data anticipated: 2022
Phase II ACE-CL-208 NCT02717611	Relapsed/ refractory CLL, intolerant to ibrutinib	60	<i>Calquence</i> monotherapy	<ul style="list-style-type: none"> ORR at 36 cycles 	<ul style="list-style-type: none"> FPCD: Q1 2016 Data anticipated: 2020
Phase II 15-H-0016 NCT02337829	Relapsed/refractory and treatment naive/del17p CLL/small lymphocytic lymphoma (SLL)	48	<i>Calquence</i> monotherapy <ul style="list-style-type: none"> Arm A: Lymph node biopsy Arm B: Bone marrow biopsy 	<ul style="list-style-type: none"> ORR Secondary endpoints: Safety, TTP, PFS, OS 	<ul style="list-style-type: none"> FPCD: Q4 2014 Data readout: Q4 2017
Phase II ACE-LY-004 NCT02213926	Relapsed/refractory MCL	124	<i>Calquence</i> monotherapy	<ul style="list-style-type: none"> ORR 	<ul style="list-style-type: none"> FPCD: Q1 2015 Data readout: Q2 2017
Phase I/II ACE-CL-001 NCT02029443	CLL/SLL/Richter's transformation (RT)	286	<i>Calquence</i> monotherapy Dose escalation and expansion	<ul style="list-style-type: none"> Safety, PK, PD Secondary endpoints: ORR, DOR, and PFS 	<ul style="list-style-type: none"> FPCD: Q1 2014 Data anticipated: 2019



Calquence (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 <i>Calquence</i> and ACP-319 (PI3K inhibitor)	<ul style="list-style-type: none"> Safety ORR 	<ul style="list-style-type: none"> FPCD: Q4 2014 Data readout: Q4 2017
Phase I/II ACE-LY-005 NCT02362035	Haematological Malignancies	159	<i>Calquence</i> + pembrolizumab	<ul style="list-style-type: none"> Safety Secondary endpoints: ORR, DOR, PFS, OS, TTNT 	<ul style="list-style-type: none"> FPCD: Q1 2015 Data anticipated: 2021
Phase I/II ACE-WM-001 NCT02180724	Waldenstrom Microglobulinaemia (WM)	106	<i>Calquence</i> monotherapy	<ul style="list-style-type: none"> ORR 	<ul style="list-style-type: none"> FPCD: Q3 2014 Data readout: 2020
Phase Ib ACE-LY-002 NCT02112526	Relapsed/refractory de novo ABC Diffuse large B-cell lymphoma (DLBCL)	21	<i>Calquence</i> monotherapy	<ul style="list-style-type: none"> Safety 	<ul style="list-style-type: none"> FPCD: Q3 2014 Data readout: Q2 2017
Phase Ib ACE-LY-106 NCT02717624	Mantle Cell Lymphoma (MCL)	48	<i>Calquence</i> in combination with bendamustine and rituximab <ul style="list-style-type: none"> Arm A: Treatment naive Arm B: Relapsed/refractory 	<ul style="list-style-type: none"> Safety 	<ul style="list-style-type: none"> FPCD: Q1 2016 Data anticipated: 2021
Phase Ib ACE-MY-001 NCT02211014	Relapsed/refractory Multiple Myeloma	28	<ul style="list-style-type: none"> Arm A: <i>Calquence</i> Arm B: <i>Calquence</i> + dexamethasone 	<ul style="list-style-type: none"> Safety 	<ul style="list-style-type: none"> FPCD: Q1 2015 Data readout: Q2 2017
Phase I ACE-LY-003 NCT02180711	Relapsed/refractory Follicular Lymphoma	80	<ul style="list-style-type: none"> Arm A: <i>Calquence</i> Arm B: <i>Calquence</i> + rituximab 	<ul style="list-style-type: none"> Safety 	<ul style="list-style-type: none"> FPCD: Q3 2014 Data anticipated: 2022
Phase I ACE-CL-002 NCT02157324	Relapsed/refractory CLL/SLL	12	<i>Calquence</i> in combination with ACP-319 Dose escalation	<ul style="list-style-type: none"> Safety, PK, PD 	<ul style="list-style-type: none"> FPCD: Q3 2014 Data anticipated: 2018
Phase I ACE-CL-003 NCT02296918	CLL/SLL/Prolymphocytic leukaemia (PLL)	45	<i>Calquence</i> + obinutuzumab <ul style="list-style-type: none"> Arm A: Relapsed/refractory Arm B: Treatment naive 	<ul style="list-style-type: none"> Safety, ORR Secondary endpoints: PD, PFS, TTN, OS 	<ul style="list-style-type: none"> FPCD: Q4 2014 Data anticipated: 2022

Calquence (BTK inhibitor)

Blood cancers

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoint(s)	Status
Phase I NCT03198650	Japanese Adults with Advanced B-cell Malignancies	28	<ul style="list-style-type: none">• <i>Calquence</i> monotherapy• Dose confirmation and expansion	<ul style="list-style-type: none">• Safety	<ul style="list-style-type: none">• FPCD: Q2 2017• Data anticipated: 2021
Phase I/II NCT03205046	R/R B-cell Malignancies	59	<ul style="list-style-type: none">• Arm A: <i>Calquence</i> daily + vistusertib daily• Arm B: <i>Calquence</i> daily + vistusertib 5 days on and 2 days off	<ul style="list-style-type: none">• Identify dose and schedule for vistusertib• Safety of coadministration of <i>Calquence</i> + vistusertib	<ul style="list-style-type: none">• FPCD: Q3 2017• Data anticipated: 2019
Phase I/II CL-110 NCT03328273	CLL R/R	62	Arm A: AZD 6738 monotherapy Arm B: <i>Calquence</i> + AZD 6738	Identify dose of AZD 6738 and safety of coadministration of <i>Calquence</i> + AZD 6738	FPCD: Q1 2018 Data anticipated: 2020



Calquence (BTK inhibitor)

Other cancers

Trial	Population	Patients	Design	Endpoint(s)	Status
Phase II ACE-ST-006 NCT02454179	≥ 2L advanced or metastatic HNSCC	74	<ul style="list-style-type: none"> Arm A: pembrolizumab Arm B: <i>Calquence</i> + pembrolizumab 	• ORR	<ul style="list-style-type: none"> FPCD: Q2 2015 Data readout: Q4 2017
Phase II ACE-ST-007 NCT02448303	≥ 2L advanced or metastatic NSCLC	74	<ul style="list-style-type: none"> Arm A: pembrolizumab Arm B: <i>Calquence</i> + pembrolizumab 	• ORR	<ul style="list-style-type: none"> FPCD: Q2 2015 Data readout: Q2 2017
Phase II ACE-ST-208 NCT02537444	Recurrent ovarian cancer	76	<ul style="list-style-type: none"> Arm A: <i>Calquence</i> Arm B: <i>Calquence</i> + pembrolizumab 	• ORR	<ul style="list-style-type: none"> FPCD: Q4 2015 Data readout: Q4 2017
Phase II ACE-ST-003 NCT02362048	≥ 2L advanced or metastatic pancreatic cancer	73	<ul style="list-style-type: none"> Arm A: <i>Calquence</i> Arm B: <i>Calquence</i> + pembrolizumab 	• Safety	<ul style="list-style-type: none"> FPCD: Q2 2015 Data readout: Q2 2017
Phase II ACE-ST-005 NCT02351739	Platinum-resistant urothelial bladder cancer	75	<ul style="list-style-type: none"> Arm A: pembrolizumab Arm B: <i>Calquence</i> + pembrolizumab 	• ORR	<ul style="list-style-type: none"> Data readout: Q4 2017
Phase Ib/II ACE-ST-209 NCT02586857	≥ 2L glioblastoma multiforme	72	<ul style="list-style-type: none"> Arm A: <i>Calquence</i> 200 mg BID Arm B: <i>Calquence</i> 400 mg QD 	<ul style="list-style-type: none"> Safety, ORR Secondary Endpoints: DOR, PFS, PFS-6, OS 	<ul style="list-style-type: none"> FPCD: Q1 2016 Data anticipated: H1 2018



Brilinta (ADP receptor antagonist)

Cardiovascular risk reduction

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	<ul style="list-style-type: none"> Arm 1: <i>Brilinta</i> 60mg BID Arm 2: Placebo BID on a background of acetylsalicylic acid if not contra-indicated or not tolerated Global trial – 42 countries	<ul style="list-style-type: none"> Primary endpoint: Composite of cardiovascular (CV) death, non-fatal MI and non-fatal stroke Secondary endpoints: <ul style="list-style-type: none"> Prevention of CV death Prevention of MI Prevention of ischaemic stroke Prevention of all-cause death 	<ul style="list-style-type: none"> FPCD: Q1 2014 LPCD: Q2 2016 Data anticipated: 2019
Phase III THALES NCT03354429	Patients with Acute Ischaemic Stroke or Transient Ischaemic Attack	13,000	<ul style="list-style-type: none"> Arm 1: <i>Brilinta</i> 90mg BiD Arm 2: Placebo BiD on a background of acetylsalicylic acid if not contra-indicated or not tolerated Global trial – 28 countries	Primary endpoint: <ul style="list-style-type: none"> Prevention of the composite of subsequent stroke and death at 30 days Secondary endpoints include: <ul style="list-style-type: none"> Prevention of subsequent ischaemic stroke at 30 days Reduction of overall disability at 30 days 	<ul style="list-style-type: none"> FPCD: Q1 2018 Data anticipated: 2020



Farxiga (SGLT2 inhibitor)

Diabetes

Trial	Population	Patients	Design	Endpoints	Status
Phase III/IV DECLARE NCT01730534	Type-2 diabetes with high risk for CV event	17,160	<ul style="list-style-type: none"> Arm 1: <i>Farxiga</i> 10mg QD + SoC therapy QD Arm 2: Placebo + SoC therapy for type-2 Diabetes Global trial – 33 countries	<ul style="list-style-type: none"> Primary endpoint: Time to first event included in the composite endpoint of CV death, MI or ischaemic stroke 	<ul style="list-style-type: none"> FPCD: Q2 2013 Data anticipated: H2 2018
Phase III NCT02096705 Partnered	Asian patients with type-2 diabetes with inadequate glyceamic control on insulin	273	<ul style="list-style-type: none"> Arm 1: <i>Farxiga</i> 10mg QD for 24 weeks + background insulin Arm 2: Placebo QD for 24 weeks + background insulin Asia trial – three countries	<ul style="list-style-type: none"> Primary endpoint: Change from baseline in Haemoglobin A1C (HbA1c) at week 24 	<ul style="list-style-type: none"> FPCD: Q1 2014 LPCD: Q1 2016 Data Readout: Q2 2016 Primary endpoint met
Phase III DERIVE NCT02413398	Patients with type-2 diabetes and moderate renal impairment	302	<ul style="list-style-type: none"> Arm 1: <i>Farxiga</i> 10mg QD for 24 weeks Arm 2: Placebo 10mg QD for 24 weeks Global trial – eight countries	<ul style="list-style-type: none"> Primary endpoint: Change from baseline in HbA1c at week 24 	<ul style="list-style-type: none"> FPCD: Q2 2015 LPCD: Q2 2017 Data readout: Q1 2018
Phase III DEPICT 1 NCT02268214 Partnered	Type-1 diabetes	833	<ul style="list-style-type: none"> Arm 1: <i>Farxiga</i> 5mg QD 52 weeks + insulin Arm 2: <i>Farxiga</i> 10mg QD 52 weeks + insulin Arm 3: Placebo QD 52 weeks + insulin Global trial – 17 countries	<ul style="list-style-type: none"> Primary endpoint: : Adjusted Mean Change From Baseline in HbA1c at week 24 	<ul style="list-style-type: none"> FPCD: Q4 2014 LPCD Q2 2016 Data readout: Q1 2017
Phase III DEPICT 2 NCT02460978 Partnered	Type-1 diabetes	813	<ul style="list-style-type: none"> Arm 1: <i>Farxiga</i> 5mg QD 52 weeks + insulin Arm 2: <i>Farxiga</i> 10mg QD 52 weeks + insulin Arm 3: Placebo QD 52 weeks + insulin Global trial – 14 countries	<ul style="list-style-type: none"> Primary endpoint: Adjusted Mean Change From Baseline in Haemoglobin A1C (HbA1c) at week 24 	<ul style="list-style-type: none"> FPCD: Q3 2015 LPCD: Q1 2017 Data readout: Q4 2017



Farxiga (SGLT2 inhibitor)

Diabetes / cardiovascular risk reduction

Trial	Population	Patients	Design	Endpoints	Status
Phase III Dapa-HF NCT03036124	Patients With Chronic Heart Failure (CHF)	4,500	<ul style="list-style-type: none"> Arm 1: <i>Farxiga</i> 10mg or 5 mg QD + standard of care therapy Arm 2: Placebo + standard of care therapy <ul style="list-style-type: none"> Global trial - 20 countries 	<ul style="list-style-type: none"> Primary endpoint: Time to the first occurrence of any of the components of the composite: CV death or hospitalisation for heart failure (HF) or an urgent HF visit 	<ul style="list-style-type: none"> FPCD: Q1 2017 Data anticipated: 2019
Phase III Dapa-CKD NCT03036150	Patients With Chronic Kidney Disease (CKD)	4,000	<ul style="list-style-type: none"> Arm 1: <i>Farxiga</i> 10mg or 5 mg QD Arm 2: Placebo <ul style="list-style-type: none"> Global trial - 20 countries 	<ul style="list-style-type: none"> Primary endpoint: Time to the first occurrence of any of the components of the composite: $\geq 50\%$ sustained decline in eGFR or reaching end stage renal disease (ESRD) or CV death or renal death 	<ul style="list-style-type: none"> FPCD: Q1 2017 Data anticipated: 2020



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

Type-2 diabetes

Trial	Population	Patients	Design	Endpoints	Status
Phase III NCT02284893	Type-2 diabetes	420	<ul style="list-style-type: none"> Arm 1: saxagliptin 5mg + dapagliflozin 10mg + Met IR/XR Arm 2: sitagliptin 100mg + Met IR/XR <p>Global trial – six countries</p>	<ul style="list-style-type: none"> Primary endpoint: Mean change from baseline in HbA1c at week 24 <p>Secondary endpoints:</p> <ul style="list-style-type: none"> The proportion of subjects achieving a therapeutic glycaemic response at week 24 defined as HbA1c<7% Mean change in total body weight at week 24 	<ul style="list-style-type: none"> FPCD: Q1 2015 LPCD: Q3 2015 Data readout: Q3 2016 Primary endpoint met
Phase III NCT02419612	Type-2 diabetes	440	<ul style="list-style-type: none"> Arm 1: saxagliptin 5mg + dapagliflozin 10mg + Met IR/XR Arm 2: glimeperide 1-6mg + Met IR/XR <p>Global trial – 10 countries</p>	<ul style="list-style-type: none"> Primary endpoint: Mean change from baseline in HbA1c at week 52 <p>Secondary endpoints:</p> <ul style="list-style-type: none"> Mean change from baseline in total body weight at week 52 The proportion of subjects achieving a therapeutic glycaemic response at week 52 defined as HbA1c<7.0% 	<ul style="list-style-type: none"> FPCD: Q3 2015 LPCD: Q3 2016 Data readout: Q4 2017
Phase III NCT02551874	Type-2 diabetes	598	<ul style="list-style-type: none"> Arm 1: saxagliptin 5mg + dapagliflozin 10mg + Met IR/XR with or without SU Arm 2: insulin glargine + Met IR/XR with or without SU <p>Global trial – 12 countries</p>	<ul style="list-style-type: none"> Primary endpoint: Mean change from baseline in HbA1c at week 24 <p>Secondary endpoints:</p> <ul style="list-style-type: none"> Mean change in total body weight at week 24 The proportion of subjects with confirmed hypoglycaemia at week 24 	<ul style="list-style-type: none"> FPCD: Q4 2015 LPCD: Q4 2016 Data readout: Q4 2017
Phase III NCT02681094	Type-2 diabetes	900	<ul style="list-style-type: none"> 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 <p>Global trial – six countries</p>	<ul style="list-style-type: none"> Primary endpoint: Mean change from baseline in HbA1c at week 24 <p>Secondary endpoints:</p> <ul style="list-style-type: none"> The proportion of subjects achieving a therapeutic glycaemic response at week 24 defined as HbA1c<7% Mean change in fasting plasma glucose at 24 weeks 	<ul style="list-style-type: none"> FPCD: Q1 2016 LPCD: Q4 2016 Data readout: Q4 2017



Bydureon (GLP-1 receptor agonist)

Type-2 diabetes

Trial	Population	Patients	Design	Endpoints	Status
Phase IV EXSCEL NCT01144338 Partnered	Type-2 diabetes	14,742	<ul style="list-style-type: none"> • Arm 1: <i>Bydureon</i> once weekly 2mg SC • Arm 2: Placebo <p>On a background of SoC medication, different degree of CV risk</p> <p>Global trial</p>	<ul style="list-style-type: none"> • Primary endpoint: Time to first confirmed CV event in the primary composite CV endpoint (CV death, non-fatal MI, non-fatal stroke) 	<ul style="list-style-type: none"> • FPD: Q2 2010 • LPCD: Q4 2015 • Data readout: Q3 2017 • Primary safety endpoint met • Primary efficacy endpoint not met
Phase III DURATION 7 NCT02229383	Type-2 diabetes	440	<ul style="list-style-type: none"> • Arm 1: <i>Bydureon</i> once weekly 2mg SC + titrated basal insulin • Arm 2: Placebo + titrated basal insulin <p>Double-blind 1:1 randomisation. Background therapy with or without metformin</p> <p>Global trial</p>	<ul style="list-style-type: none"> • Primary endpoint: Change in HbA1c from baseline at 28 weeks 	<ul style="list-style-type: none"> • FPCD: Q3 2014 • LPCD: Q3 2016 • Data readout: Q4 2016 • Primary endpoint met
Phase III DURATION 8 NCT02229396	Type-2 diabetes	660	<ul style="list-style-type: none"> • Arm 1: <i>Bydureon</i> once weekly 2mg SC • Arm 2: <i>Forxiga</i> 10mg • Arm 3: <i>Bydureon</i> once weekly 2mg SC + <i>Forxiga</i> 10mg <p>Double-blind 1:1:1 randomisation. Background therapy with metformin 1500mg/day up to 2 months prior to screening</p> <p>Global trial</p>	<ul style="list-style-type: none"> • Primary endpoint: Change in HbA1c from baseline at 28 weeks 	<ul style="list-style-type: none"> • FPCD: Q3 2014 • LPCD: H2 2017 • Data readout: Q3 2016 – 28-week data Q1 2017 – 52-week data Q1 2018 – 104-week data • Primary endpoint met



Epanova (omega-3 carboxylic acids)

Hypertriglyceridaemia

Trial	Population	Patients	Design	Endpoints	Status
Phase III STRENGTH (CVOT) NCT02104817	Patients with hypertriglyceridaemia and high cardiovascular disease risk	13,000	<ul style="list-style-type: none"> Arm 1: <i>Epanova</i> 4g QD + statin Arm 2: Placebo (corn oil) + statin Global trial – 22 countries	<ul style="list-style-type: none"> Primary endpoint: Composite of MACE 	<ul style="list-style-type: none"> FPCD: Q4 2014 LPD: Q2 2017 Data anticipated: 2019
Phase III NCT02463071	Japanese patients with hypertriglyceridaemia	375	<ul style="list-style-type: none"> <i>Epanova</i> 2g and 4g vs Placebo (after meal) daily for 52 weeks Global trial – one country	Primary endpoints: <ul style="list-style-type: none"> Safety in Japanese patients % change in triglycerides 	<ul style="list-style-type: none"> FPCD: Q2 2015 LPD: Q1 2016 Data readout: Q2 2017
Phase III EVOLVE II NCT02009865	Severe hypertriglyceridaemia	162	<ul style="list-style-type: none"> Arm 1: <i>Epanova</i> 2g QD Arm 2: Placebo (olive oil) Global trial – seven countries	<ul style="list-style-type: none"> Primary endpoint: Change in serum triglycerides over 12 weeks 	<ul style="list-style-type: none"> FPCD: Q4 2013 LPD: Q4 2014 Data readout: Q4 2015 Primary endpoint met
Phase II EFFECT I NCT02354976	Overweight patients with hypertriglyceridaemia	75	<ul style="list-style-type: none"> <i>Epanova</i> 4g vs Placebo vs Fenofibrate 200mg daily for 12 weeks Global trial – one country	Primary endpoints: <ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> FPCD: Q3 2015 LPD: Q2 2016 Data readout: Q4 2016
Phase II EFFECT II NCT02279407	Type-2 diabetes Liver fat >5.5%	80	<ul style="list-style-type: none"> Arm 1: <i>Epanova</i> 4g QD Arm 2: Placebo (olive oil) Arm 3: <i>Epanova</i> 4g + <i>Farxiga</i> 10mg QD Arm 4: <i>Farxiga</i> 10mg Local trial – one country	<ul style="list-style-type: none"> Primary endpoints: Reduction in liver fat content (%) at the end of 12 weeks 	<ul style="list-style-type: none"> FPCD: Q1 2015 LPD: Q4 2015 Data readout: Q2 2016
Phase I PRECISE NCT02370537	Pancreatic Exocrine Insufficiency (PEI) in patients with type-2 diabetes	66	<ul style="list-style-type: none"> Arm 1: <i>Epanova</i> 4g single dose Arm 2: <i>Omacor</i> 4g single dose Global trial – six countries in Europe	<ul style="list-style-type: none"> Primary endpoint: PEI, PK of <i>Epanova</i> and <i>Omacor</i> following a single oral dose in patients with different degrees of PEI 	<ul style="list-style-type: none"> FPCD: Q1 2015 LPD: Q4 2015 Data readout: Q2 2016



Lokelma (ZS-9, sodium zirconium cyclosilicate)

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase II NCT01493024	Hyperkalaemia and moderate chronic kidney disease (CKD)	90	<ul style="list-style-type: none"> Arm 1: Escalating TID doses (0.3g, 3g and 10g) of ZS Arm 2: Placebo TID 	<ul style="list-style-type: none"> Primary endpoint: Change in serum potassium levels from baseline 	<ul style="list-style-type: none"> FPCD: Q4 2011 LPD: Q2 2012 Data readout: Q2 2012
Phase III NCT01737697	Hyperkalaemia	754	<ul style="list-style-type: none"> Arm 1: ZS-9 1.25g TID for 48 hrs followed by QD for 12 days Arm 2: ZS-9 2.5g TID for 48 hrs followed by QD for 12 days Arm 3: ZS-9 5g TID for 48 hrs followed by QD for 12 days Arm 4: ZS-9 10g TID for 48 hrs followed by QD for 12 days Arm 5: Placebo TID for 48 hrs followed by QD for 12 days <p>Global trial – three countries</p>	<ul style="list-style-type: none"> Primary endpoint: Change in serum potassium levels from baseline 	<ul style="list-style-type: none"> FPCD: Q4 2012 LPD: Q4 2013 Data readout: Q4 2013 Primary endpoint met
Phase III NCT02088073	Hyperkalaemia	258	<p>Open-label ZS-9 10g TID for 48 hrs followed by:</p> <ul style="list-style-type: none"> Arm 1: ZS-9 5g QD for 28 days Arm 2: ZS-9 10g QD for 28 days Arm 3: ZS-9 15g QD for 28 days Arm 4: Placebo QD for 28 days <p>Global trial – three countries</p>	<ul style="list-style-type: none"> Primary endpoint: Maintenance of normokalaemia 	<ul style="list-style-type: none"> FPCD: Q1 2014 LPD: Q3 2014 Data readout: Q4 2014 Primary endpoint met
Phase III Open-label Extension to Study NCT02088073 NCT02107092	Participation in trial NCT02088073	123	<ul style="list-style-type: none"> Arm 1: ZS-9 10g QD for 11 months. Option to uptitrate to 15g QD or downtitrate to 5g QD and 5g QOD <p>Global trial – three countries</p>	<ul style="list-style-type: none"> Primary endpoint: Maintenance of normokalaemia 	<ul style="list-style-type: none"> FPCD: Q2 2014 LPD: Q3 2015 Data readout: Q3 2015
Phase III NCT02163499	Hyperkalaemia	751	<ul style="list-style-type: none"> Arm 1: ZS-9 5g QD for 12 months. Option to uptitrate to 10 and 15g QD or downtitrate to 5g QOD <p>Global trial – seven countries</p>	<ul style="list-style-type: none"> Primary endpoint: Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q2 2014 LPD: Q4 2016 Data readout: Q2 2017 Primary endpoint met
Phase III NCT02875834	Hyperkalaemia	255	<p>Open-label ZS-9 10g TID for 48 hrs followed by:</p> <ul style="list-style-type: none"> Arm 1: ZS-9 5g QD for 28 days Arm 2: ZS-9 10g QD for 28 days Arm 3: Placebo QD for 28 days <p>Global trial – four countries</p>	<ul style="list-style-type: none"> Primary endpoint: Maintenance of normokalaemia 	<ul style="list-style-type: none"> FPCD: Q1 2017 LPD: Q1 2018
Phase II/III NCT03127644	Hyperkalaemia	102	<ul style="list-style-type: none"> Arm 1: ZS-9 5g TID for 48 hours Arm 2: ZS-9 10g TID for 48 hours Arm 3: Placebo TID for 48 hours <p>Japan</p>	<ul style="list-style-type: none"> Primary endpoint: Exponential rate of change in serum potassium 	<ul style="list-style-type: none"> FPCD: Q2 2017 LPD: Q1 2018
Phase III NCT03172702	Hyperkalaemia	150	<ul style="list-style-type: none"> Arm 1: Open-label ZS 10g TID for up to 72 hrs followed by ZS-9 5g QD for 12 months. Option to uptitrate to 10 and 15g QD or downtitrate to 5g QOD (or 2.5g QD) <p>Japan</p>	<ul style="list-style-type: none"> Primary endpoint: Safety and tolerability as measured by adverse events reporting, vital signs, ECGs, physical examinations and safety laboratory measurements 	<ul style="list-style-type: none"> FPCD: Q3 2017



Lokelma (ZS-9, sodium zirconium cyclosilicate)

Hyperkalaemia

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03283267	Healthy Subjects	22	Arm 1: Open-label ZS 5g QD for 4 days Arm 2: Open-label ZS 10g QD for 4 days China	<ul style="list-style-type: none"> Primary endpoint: Mean change from baseline to ZS treatment period in urine potassium excretion 	<ul style="list-style-type: none"> FPCD: Q4 2017 LPCD: Q4 2017
Phase IIIb NCT03303521	Patients on haemodialysis with persistent pre-dialysis hyperkalaemia	180	Arm 1: ZS 5g QD for 8 weeks on non-dialysis days. Option to uptitrate to 10 and 15g QD. Arm 2: Placebo QD for 8 weeks on non-dialysis days Global trial – four countries	<ul style="list-style-type: none"> Primary endpoint: Proportion of patients who maintain a pre-dialysis serum K between 4.0-5.0 mmol/L on 3 out of 4 dialysis treatments following the long interdialytic interval 	<ul style="list-style-type: none"> FPCD: Q4 2017
Phase II NCT03337477	Hyperkalaemia	132	Arm 1: ZS 10g TID for 24 hours on top off SOC (insulin and glucose) Arm 2: Placebo TID for 24 hours on top off SOC (insulin and glucose) Global trial – four countries	<ul style="list-style-type: none"> Primary endpoint: Mean absolute change in S-K from baseline until 4h after start of dosing 	<ul style="list-style-type: none"> FPCD: Q1 2018



Eklira/Tudorza (LAMA)

Chronic obstructive pulmonary disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase IV NCT02375724 Partnered	Patients with COPD	224	<ul style="list-style-type: none"> Arm 1: <i>Eklira/Tudorza</i> 400µg Arm 2: Placebo to aclidinium bromide 400µg Global trial – five countries	<ul style="list-style-type: none"> Primary endpoint: Change from baseline in overall E-RS Total score (i.e. score over the whole eight weeks study period) Secondary endpoints: <ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> FPCD: Q1 2015 LPCD: Q3 2015 Data readout: Q1 2016
Phase IV ASCENT NCT01966107	Patients with moderate to very severe COPD	4,000	<ul style="list-style-type: none"> Arm 1: <i>Eklira/Tudorza</i> 400µg Arm 2: Placebo to aclidinium bromide 400µg Global trial – two countries	Primary endpoints: <ul style="list-style-type: none"> 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 Secondary endpoints: <ul style="list-style-type: none"> Rate of hospitalisations due to COPD exacerbation per patient per year during the first year of treatment Time to first MACE or other serious cardiovascular events of interest. Up to 36 Months 	<ul style="list-style-type: none"> FPCD: Q3 2013 LPCD: Q3 2016 Data readout: Q4 2017 Primary endpoints met
Phase IV NCT02153489 Partnered	Patients with stable moderate and severe COPD	30	<ul style="list-style-type: none"> Arm 1: <i>Eklira/Tudorza</i> 400µg Arm 2: Placebo to aclidinium bromide 400µg Local trial – one country	<ul style="list-style-type: none"> Primary endpoint: 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 Secondary endpoint: Adverse events. Week 5 	<ul style="list-style-type: none"> FPCD: Q2 2014 LPCD: Q1 2015 Data readout: Q4 2015

LAMA = Long Acting Muscarinic Agonist



Ekliral/Tudorza (LAMA)

Chronic Obstructive Pulmonary Disease (COPD)

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Number of patients	Design	Endpoints	Status
Phase I NCT03276052	Healthy Chinese Subjects	18	Open-label, 2-period ascending dose incomplete block, cross-over study • Arm 1: Acclidinium bromide 200 µg • Arm 2: Acclidinium bromide 400 µg • Arm 3: Acclidinium bromide 800 µg Global Study – 1 Country	<ul style="list-style-type: none">To investigate the pharmacokinetics (PK) of acclidinium bromide and its metabolites after single and multiple doses (twice-daily [BID]) of acclidinium bromide 200 µg, 400 µg and 800 µgTo evaluate the safety, and tolerability of acclidinium bromide 200 µg, 400 µg and 800 µg after single and multiple dose administration (twice-daily [BID])	<ul style="list-style-type: none">FPCD: H1 2018Data readout: H2 2018

Oncology

CV/RM

Respiratory

Other



Duaklir Genuair (LAMA/LABA)

Chronic obstructive pulmonary disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase IIb ACHIEVE NCT02796651	Patients with moderate COPD	120	<ul style="list-style-type: none"> Arm 1: <i>Duaklir Genuair</i> 400/12 µg Arm 2: Placebo to acclidinium/formoterol FDC 400/12 µg <p>Global trial – one country</p>	<ul style="list-style-type: none"> Primary endpoint: Change from baseline in normalised FEV1 AUC over the 12h period immediately after morning trial drug administration, AUC0-12/12h at Day 7 on treatment <p>Secondary endpoint:</p> <ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> FPCD: Q3 2016 LPD: Q3 2016 Data readout: Q1 2017
Phase III AMPLIFY NCT02796677	Patients with stable COPD	1,500	<ul style="list-style-type: none"> Arm 1: <i>Duaklir Genuair</i> 400/12 µg Arm 2: acclidinium bromide 400µg Arm 3: formoterol fumarate 12µg Arm 4: tiotropium 18µg <p>Global trial – 13 countries</p>	<p>Primary endpoints:</p> <ul style="list-style-type: none"> Change from baseline in 1-hour morning post-dose dose FEV1 of <i>Duaklir Genuair</i> 400/12 µg compared to AB 400µg at week 24 Change from baseline in morning predose (trough) FEV1 of <i>Duaklir Genuair</i> 400/12 µg compared to FF 12µg at week 24 Change from baseline in morning predose (trough) FEV1 at week 24 comparing AB 400µg versus TIO 18µg 	<ul style="list-style-type: none"> FPCD: Q3 2016 LPD: Q4 2016 Data readout Q3 2017 Primary endpoint met
Phase III AVANT NCT03022097	Patients with stable COPD	1,060	<ul style="list-style-type: none"> Arm 1: <i>Duaklir Genuair</i> 400/12 µg Arm 2: acclidinium bromide 400 µg Arm 3: formoterol fumarate 12 µg Arm 4: tiotropium 18 µg <p>Global Study – five countries</p>	<p>Primary endpoints:</p> <ul style="list-style-type: none"> Change from baseline in 1-hour morning post-dose dose FEV1 <i>Duaklir Genuair</i> 400/12 µg compared to Acclidinium bromide at Week 24 Change from baseline in morning pre-dose (trough) FEV1 of <i>Duaklir Genuair</i> 400/12 µg compared to Formoterol fumarate at Week 24 Change from baseline in trough FEV1 of Acclidinium bromide 400 µg compared to placebo at Week 24 	<ul style="list-style-type: none"> FPCD: Q1 2017 Data anticipated: 2019

LAMA = Long Acting Muscarinic Agonist

LABA = Long Acting Beta Agonist



Duaklir Genuair (LAMA/LABA)

Chronic obstructive pulmonary disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase IIa NCT03276078	Chinese patients with stable moderate to severe COPD	20	<ul style="list-style-type: none"> Single and multiple twice daily doses of inhaled aclidinium bromide/formoterol fumarate 400/12 Global Study – One country	<ul style="list-style-type: none"> To evaluate the pharmacokinetics (PK) of aclidinium bromide, its metabolites LAS34850 and LAS34823 and formoterol after administration of aclidinium bromide/formoterol 400/12 µg twice-daily (BID) for five days To evaluate the safety and tolerability of aclidinium bromide/formoterol 400/12 µg twice-daily (BID) administered for 5 days 	<ul style="list-style-type: none"> FPCD: Q4 2017 Data anticipated: H2 2018

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) <ul style="list-style-type: none"> • Arm 1: GFF MDI (<i>Bevespi Aerosphere</i>) 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	<ul style="list-style-type: none"> • Primary endpoint: Change from baseline in morning pre-dose trough FEV₁ 	<ul style="list-style-type: none"> • FPCC: 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) <ul style="list-style-type: none"> • Arm 1: GFF MDI (<i>Bevespi Aerosphere</i>) 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	<ul style="list-style-type: none"> • Primary endpoint: Change from baseline in morning pre-dose trough FEV₁ 	<ul style="list-style-type: none"> • FPCC: Q3 2013 • LPCD: Q3 2014 • Data readout: Q1 2015
Phase III PINNACLE 3 NCT01970878	Moderate to very severe COPD	893	Treatment (28-week Treatment Period) <ul style="list-style-type: none"> • Arm 1: GFF MDI (<i>Bevespi Aerosphere</i>) 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	<ul style="list-style-type: none"> • Primary endpoint: Change from baseline in morning pre-dose trough FEV₁ 	<ul style="list-style-type: none"> • FPCC: Q4 2013 • LPCD: Q2 2014 • Data readout: Q1 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 (G = glycopyrronium, F = formoterol fumarate)	Endpoints	Status
Phase III PINNACLE 4 NCT02343458	Moderate to very severe COPD	1,614	Treatments (24-week Treatment Period) <ul style="list-style-type: none"> GFF MDI (<i>Bevespi Aerosphere</i>) 14.4/9.6µg (N=514) GP 14.4µg (N=440) FF 9.6µg (N=440) Placebo (N=220) US/China: Trough FEV ₁ at week 24 of treatment EU/Hybrid: Co-primary = Trough FEV ₁ 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	<ul style="list-style-type: none"> Primary endpoint: change from baseline in morning pre-dose trough FEV₁ of treatment [Time Frame: At Week 24] Assessed at week 24 for US/China and over weeks 12-24 for Japan, and over 24 weeks for EU/South Korea/Taiwan Secondary endpoint: TDI score (co-primary endpoint for EU and Hybrid) [Time Frame: Over 24 weeks] 	<ul style="list-style-type: none"> FPCD: Q2 2015 LPDQ: Q1 2017 Data readout: Q3 2017 Primary endpoint met
Phase IIIb AERISTO NCT03162055	Moderate to very severe COPD	1,000	Treatments (24-week Treatment Period) <ul style="list-style-type: none"> GFF MDI (<i>Bevespi Aerosphere</i>) 14.4/9.6µg Umeclidinium/vilanterol DPI 62.5/25µg Randomised, Double-Blind, Double-Dummy, Multicentre, Parallel Group US, Canada, Bulgaria, France, Hungary, Russia, Ukraine	Co-primary endpoints: <ul style="list-style-type: none"> Change from baseline in morning pre-dose trough FEV₁ over 24 weeks Peak change from baseline in FEV₁ within 2 hours post-dosing over 24 weeks 	<ul style="list-style-type: none"> FPCD: Q2 2017 LPDQ: Q4 2017

LAMA = Long Acting Muscarinic Agonist

LABA = Long Acting Beta Agonist

GFF = Glycopyrronium 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	<ul style="list-style-type: none"> 52W, randomised, DB with <i>Daliresp</i> 500µg OD vs placebo, in COPD on top of ICS/LABA 	<ul style="list-style-type: none"> Primary endpoint: Rate of moderate or severe COPD exacerbations per subject per year 	<ul style="list-style-type: none"> FPCD: Q4 2011 LPCD: Q1 2016 Data readout: Q4 2016
Phase IV OPTIMIZE NCT02165826	COPD	1,323	<ul style="list-style-type: none"> 12W, randomised, DB to evaluate tolerability and PK of <i>Daliresp</i> 500µg OD with an up-titration regimen during the first 4Ws, including an open label down-titration evaluating tolerability and PK of 250µg <i>Daliresp</i> OD in subjects not tolerating 500µg OD 	<ul style="list-style-type: none"> Primary endpoint: Percentage of participants prematurely discontinuing trial treatment for any reason during the main period 	<ul style="list-style-type: none"> FPCD: Q2 2014 LPCD: Q3 2015 Data readout: Q4 2016
Phase IIIb ROBERT NCT01509677	COPD	158	<ul style="list-style-type: none"> 16W, randomised, placebo-controlled, DB, parallel-group trial to assess the anti-inflammatory effects of <i>Daliresp</i> in COPD 	<ul style="list-style-type: none"> Primary endpoint: Number of inflammatory cells CD8+ in bronchial biopsy tissue specimen (sub-mucosa) measured at randomisation and at the end of the intervention period 	<ul style="list-style-type: none"> FPCD: Q1 2012 LPCD: Q1 2016 Data readout: Q4 2016
Post Launch PASS NCT03381573	COPD	124080	<ul style="list-style-type: none"> This is a retrospective cohort study comparing COPD patients aged 40 years and older with new exposure to roflumilast with up to 5 unexposed (ie, not roflumilast-exposed) COPD controls matched by propensity score (PS), age, sex, and year of cohort entry. The study is using electronic healthcare databases in the US (Military Health System database), Germany (GER) (German Pharmacoepidemiological Research Database), and Sweden (SWE) (national databases including healthcare, death, and demographics data). 	<ul style="list-style-type: none"> Primary endpoint: All-cause mortality (up to 5 years) 	<ul style="list-style-type: none"> Data readout: 2020

ICS = Inhaled corticosteroids
LABA = Long Acting Beta Agonist



Fasenra (IL-5R mAb)

Severe, uncontrolled asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase III CALIMA NCT01914757	Severe, uncontrolled asthma, despite background controller medication, medium dose (MD) & high dose (HD) ICS + LABA ± chronic OCS Age 12-75 years	1,026 HD + ~200 MD	<ul style="list-style-type: none"> • Arm 1: 30mg Q8w SC • Arm 2: 30mg Q4w SC • Arm 3: Placebo SC 56-week trial Global trial – 11 countries	<ul style="list-style-type: none"> • Primary endpoint: Annual asthma exacerbation rate • Secondary endpoints: Assess pulmonary function, asthma symptoms, other asthma control metrics, ER/ED hospitalisation visits, PK, and IM 	<ul style="list-style-type: none"> • FPCD: Q4 2013 • Data readout: Q2 2016 • Primary endpoint met
Phase III SIROCCO NCT01928771	Severe, uncontrolled asthma, despite background controller medication HD ICS + LABA ± chronic OCS Age 12-75 years	1,134	<ul style="list-style-type: none"> • Arm 1: 30mg Q8w SC • Arm 2: 30mg Q4w SC • Arm 3: Placebo SC 48-week trial Global trial – 17 countries	<ul style="list-style-type: none"> • Primary endpoint: Annual asthma exacerbation rate • Secondary endpoints: Assess pulmonary function, asthma symptoms, other asthma control metrics, ER/ED hospitalisation visits, PK, and IM 	<ul style="list-style-type: none"> • FPCD: Q4 2013 • Data readout: Q2 2016 • Primary endpoint met
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	<ul style="list-style-type: none"> • Arm 1: 30mg Q8w SC • Arm 2: 30mg Q4w SC • Arm 3: Placebo SC 46-week trial Global trial – 12 countries	<ul style="list-style-type: none"> • Primary endpoint: Reduction of oral corticosteroid dose 	<ul style="list-style-type: none"> • FPCD: Q3 2014 • Data readout: Q3 2016 • Primary endpoint met
Phase III MELTEMI NCT02808819	A multi-centre, open-label, safety extension trial with benralizumab for asthmatic adults on ICS plus LABA2 Agonist Age 18-75 years	770	<ul style="list-style-type: none"> • Arm 1: 30mg Q4W SC • Arm 2: 30mg Q8W SC 	<ul style="list-style-type: none"> • Primary endpoint: Safety and tolerability 	<ul style="list-style-type: none"> • FPCD: Q2 2016 • Data anticipated: 2019
Phase III ALIZE NCT02814643	A multi-centre, 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	<ul style="list-style-type: none"> • 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 IM at week 	Primary endpoints: <ul style="list-style-type: none"> • Post-dose strain-specific haemagglutination-inhibition (HAI) antibody geometric mean fold rises (GMFRs) • Post-dose strain-specific serum HAI antibody geometric mean 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 	<ul style="list-style-type: none"> • FPCD: Q3 2016 • Data readout: Q3 2017 • Primary endpoint met

ICS = Inhaled corticosteroids

LABA = Long Acting Beta Agonist



Fasenra (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	<ul style="list-style-type: none"> Arm 1: 30mg Q4W SC Arm 3: Placebo SC 12-week trial Global trial – six countries	<ul style="list-style-type: none"> Primary endpoint: Pulmonary function (FEV₁) 	<ul style="list-style-type: none"> FPCD: Q1 2015 Data readout: Q1 2016 Primary endpoint met
Phase III BORA NCT02258542	Severe asthma, inadequately controlled despite background controller medication, MD & HD ICS + LABA ± chronic OCS Age 12-75 years	2,550	<ul style="list-style-type: none"> Arm 1: 30mg Q4W SC Arm 2: 30mg Q8W SC* <ul style="list-style-type: none"> Placebo administered at select interim visits to maintain blind between treatment arms 56-week (adults) 108-week (adolescents) Global trial	<ul style="list-style-type: none"> Primary endpoint: Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q4 2014 Data anticipated: H2 2018
Phase III GREGALE NCT02417961	Severe asthma, inadequately controlled despite background controller medication, MD & HD ICS + LABA ± chronic OCS Age 18-75 years	120	<ul style="list-style-type: none"> Arm 1: 30mg Q4W SC 28-week (adults) Global trial – two countries	<ul style="list-style-type: none"> Primary endpoint: Functionality, reliability, and performance of a pre-filled syringe with benralizumab administered at home 	<ul style="list-style-type: none"> FPCD: Q2 2015 Data readout: Q2 2016 Primary endpoint met
Phase 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	<ul style="list-style-type: none"> Arm 1 : 30mg Q4W SC Arm 2: Placebo SC 	<ul style="list-style-type: none"> Primary endpoint: Safety and tolerability 	<ul style="list-style-type: none"> FPCD Q4 2016 Data anticipated: 2019

ICS = Inhaled corticosteroids
LABA = Long Acting Beta Agonist



Fasenra (IL-5R mAb)

Severe, uncontrolled asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase III SOLANA NCT02869438	Severe asthma Age 18-75 years	230	<ul style="list-style-type: none"> Arm 1: 30mg Q4W SC Arm 2: Placebo SC 16-week trial Global trial – six countries	<ul style="list-style-type: none"> Primary endpoint: Onset and maintenance of effect on lung function 	<ul style="list-style-type: none"> FPCD: Q4 2016 Data anticipated: H2 2018
Phase III GRECO NCT02918071	Severe asthma Age 18-75 years	120	Open label 30mg Q4w 28-week trial Global trial - two countries	<ul style="list-style-type: none"> Primary endpoint: % of patients/ caregivers who successfully self administer at home 	<ul style="list-style-type: none"> FPCD: Q4 2016 Data readout: Q4 2017 Primary endpoint met
Phase IIIb ANDHI NCT03170271	A Multicenter, Randomised, Double-blind, Parallel Group, Placebo Controlled, Phase 3b Study to Evaluate the Safety and Efficacy of Benralizumab 30 mg sc in Patients With Severe Asthma Uncontrolled on Standard of Care Treatment. Age 18-75	800	<ul style="list-style-type: none"> Arm 1: 30mg Q8W SC Arm 2: placebo SC 	<ul style="list-style-type: none"> Primary Endpoint: rate of asthma exacerbations Secondary Outcome Measures: Saint George Respiratory Questionnaire (SGRQ) 	<ul style="list-style-type: none"> FPCD: Q3 2017 Data anticipated 2019
Phase I AMES NCT02968914	Healthy Volunteer Age 18-55 years	162	Open label study to compare 30 mg benralizumab PK administered by APFS or AI device 8-week study Global trial – two countries	<ul style="list-style-type: none"> Primary endpoint: PK Comparability 	<ul style="list-style-type: none"> FPCD: Q1 2017 Data readout: Q3 2017

ICS = Inhaled corticosteroids

LABA = Long Acting Beta Agonist



Fasenra (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	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • Primary endpoint: Rate of COPD exacerbation 	<ul style="list-style-type: none"> • FPCD: Q3 2014 • Data anticipated: Q2 2018
Phase III GALATHEA NCT02138916	Moderate to very severe COPD with exacerbation history	1,626	<ul style="list-style-type: none"> • Arm 1: 30mg Q4W SC • Arm 2: 100mg Q8W SC • Arm 3: Placebo SC 48-week trial Global trial – 17 countries	<ul style="list-style-type: none"> • Primary endpoint: Rate of COPD exacerbation 	<ul style="list-style-type: none"> • FPCD: Q3 2014 • Data readout: Q2 2018 • Primary endpoint not met



Fasenra (IL-5R mAb)

Nasal Polyposis

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase III OSTRO NCT03401229	Patients with severe bilateral nasal polyposis who are still symptomatic despite standard of care therapy	400	<ul style="list-style-type: none">• Arm 1: 30mg Q8W SC• Arm 2: Placebo SC 56-week trial Global trial- 8 countries	<ul style="list-style-type: none">• Primary endpoint: Effect of <i>Fasenra</i> on nasal polyp burden and on patient reported nasal blockage	<ul style="list-style-type: none">• FPCD: Q1 2018• Data anticipated: 2020

Oncology

CVRM

Respiratory

Other



Calquence (BTK inhibitor)

Rheumatoid arthritis

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Patients	Design	Endpoint(s)	Status
Phase II ACE-RA-001 NCT02387762	Rheumatoid Arthritis	31	<ul style="list-style-type: none">• Arm A: <i>Calquence</i> + methotrexate• Arm B: methotrexate	Disease Activity Score 28-CRP at week 4	FPCD: Q2 2015 LPCD: Q2 2016 Data readout: Q2 2016

Oncology

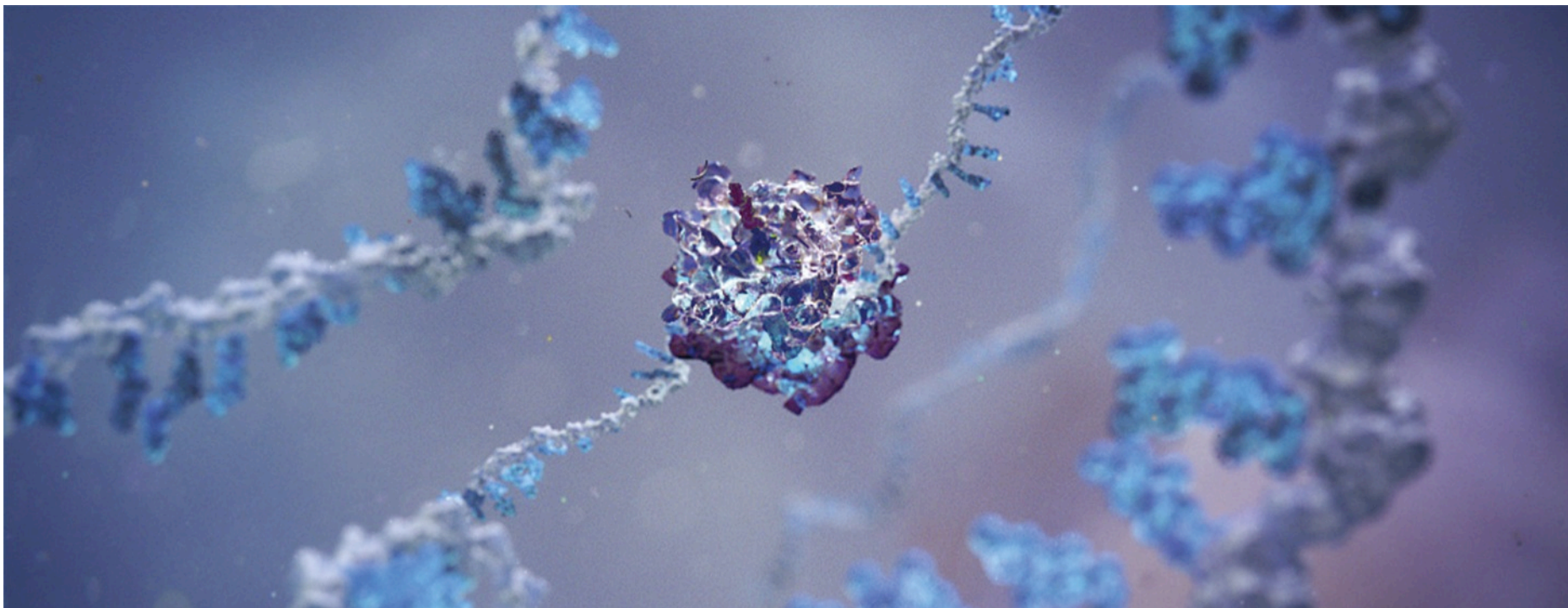
CVRM

Respiratory

Other



Late-stage pipeline



Moxetumomab pasudotox (CD22 mAb)

Blood cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase III PLAIT NCT01829711	Adults with relapsed or refractory hairy cell leukaemia (HCL)	77	<ul style="list-style-type: none">Multicentre, single-arm, open-label Phase III trialMoxetumomab pasudotox IV at the recommended dose	<ul style="list-style-type: none">Primary endpoint: Rate of durable CR: CR maintained for > 180 daysEfficacy: CR rate, ORR, Duration of CR and ORR, time to response (TTR), PFSSafety and tolerabilityPK and immunogenicity	<ul style="list-style-type: none">FPCD: Q2 2013Data readout: Q3 2017Primary endpoint met
Phase I NCT00586924	Adults with relapsed refractory HCL	49	<ul style="list-style-type: none">Open-label dose escalation Phase I trialMoxetumomab pasudotox IV	<ul style="list-style-type: none">Maximum tolerated dose (MTD) and efficacy	<ul style="list-style-type: none">FPCD: Q2 2007LPCD: Q1 2014Data readout: Q2 2015



Selumetinib (MEK inhibitor)

Thyroid cancer and other cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase III ASTRA NCT01843062	Differentiated thyroid cancer	304	<ul style="list-style-type: none"> Arm 1: selumetinib 75mg BiD 5 weeks duration + radioactive iodine (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)	<ul style="list-style-type: none"> Primary endpoint: Complete remission (CR) rate at 18 months post-radioactive iodine 	<ul style="list-style-type: none"> FPCD: Q3 2013 LPCD: Q1 2016 Data anticipated: H2 2018
Phase II SPRINT NCT01362803 Partnered	Paediatric neurofibromatosis type 1 (NF-1)	50	<ul style="list-style-type: none"> Single Arm: selumetinib 25mg/m² BiD with 2 strata: <ul style="list-style-type: none"> Stratum 1: PN related morbidity present at enrolment Stratum 2: No PN related morbidity present at enrolment 	<ul style="list-style-type: none"> Complete partial and complete response rate measured by volumetric MRI; Duration of response and functional outcomes/QoL 	<ul style="list-style-type: none"> FPCD: Q3 2015 LPCD: Q4 2016



Savolitinib (MET inhibitor)

Papillary renal cell and other cancers

Trial	Population	Patients	Design	Endpoints	Status
Phase III NCT03091192 Partnered	MET-Driven, Papillary renal cell cancer	180	<ul style="list-style-type: none"> Arm 1: savolitinib 600mg QD Arm 2: sunitinib 50mg QD (4 weeks on / 2 weeks off) Global trial	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoints include ORR, DoR and OS 	<ul style="list-style-type: none"> FPCD: Q4 2017 Data anticipated: 2021
Phase I NCT01985555 Partnered	Advanced cancer (all comers)	~70	<ul style="list-style-type: none"> Dose escalation trial Conducted in China	<ul style="list-style-type: none"> Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q2 2013 Data anticipated: H2 2018
Phase I NCT02374645	NSCLC	64	<ul style="list-style-type: none"> Dose escalation trial Conducted in China	<ul style="list-style-type: none"> Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q2 2015 Data anticipated: H2 2018
Phase II NCT02897479 Partnered	Lung Pulmonary Sarcomatoid Carcinoma (PSC)	45	<ul style="list-style-type: none"> Single arm trial: savolitinib 600mg QD Conducted in China	<ul style="list-style-type: none"> ORR 	<ul style="list-style-type: none"> FPCD: Q1 2017 Data anticipated: 2019



Cediranib (VEGF receptor inhibitor)

Ovarian cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase IIb CONCERTO	Platinum resistant recurrent (PRR) ovarian cancer - heavily pre-treated BRCAwt	100	<ul style="list-style-type: none">Cediranib 30 mg + <i>Lynparza</i> 200 mg bd	<ul style="list-style-type: none">ORR DoR, DCR, QoL, OS; Safety	<ul style="list-style-type: none">FPCD: Q1 2017

VEGF - Vascular endothelial growth factor



Roxadustat (HIF-PHI inhibitor)

Anaemia

Trial	Population	Patients	Design	Endpoints	Status
Phase III ANDES NCT01750190 Partnered	Anaemia in CKD patients not receiving dialysis	900	<ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: placebo Global trial	Primary endpoint: Haemoglobin response	<ul style="list-style-type: none"> FPCD: Q4 2012 Data anticipated: H2 2018 Sponsored by FibroGen
Phase III ALPS NCT01887600 Partnered		597	<ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: Placebo Global trial	Primary endpoint: Haemoglobin response	<ul style="list-style-type: none"> FPCD: Q2 2013 Data anticipated: H2 2018 Sponsored by Astellas
Phase III DOLOMITES NCT02021318 Partnered		570	<ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: darbepoetin alfa Global trial	Primary endpoint: Haemoglobin response	<ul style="list-style-type: none"> FPCD: Q1 2014 Data anticipated: H2 2018 Sponsored by Astellas
Phase III OLYMPUS NCT02174627		2,700	<ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: Placebo Global trial	Primary endpoint: MACE	<ul style="list-style-type: none"> FPCD: Q3 2014 Data anticipated: H2 2018 Sponsored by AstraZeneca
Phase III ROCKIES NCT02174731	Anaemia in CKD in patients receiving dialysis	2,100	<ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: epoetin alfa Global trial	Primary endpoint: MACE	<ul style="list-style-type: none"> FPCD: Q3 2014 Data anticipated: H2 2018 Sponsored by AstraZeneca
Phase III SIERRAS NCT02273726 Partnered		820	<ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: epoetin alfa Global trial	Primary endpoint: Haemoglobin response	<ul style="list-style-type: none"> FPCD: Q4 2014 Data anticipated: H2 2018 Sponsored by FibroGen
Phase III PYRENEES NCT02278341 Partnered-1		838	<ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: erythropoiesis stimulating agent Arm 3: darbepoetin alfa Global trial	Primary endpoint: Haemoglobin response	<ul style="list-style-type: none"> FPCD: Q4 2014 Data anticipated: H2 2018 Sponsored by Astellas

HIF-PHI = Hypoxia-Inducible Factor Prolyl Hydroxylase Inhibitor



Roxadustat (HIF-PHI inhibitor)

Anaemia

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase III HIMALAYAS NCT02052310 Partnered	Anaemia in newly initiated dialysis patients	750	<ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: epoetin alfa <p>Global trial</p>	Primary endpoint: Haemoglobin response	<ul style="list-style-type: none"> FPCD: Q4 2013 Data anticipated: 2018 <p>Sponsored by FibroGen</p>
Phase III NCT02652819 Partnered	Anaemia in CKD patients not receiving dialysis	150	<ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: placebo <p>China trial</p>	Primary endpoint: Haemoglobin response	<ul style="list-style-type: none"> FPCD: Q4 2015 LPCD: Q4 2016 Data readout: Q2 2017 Primary endpoint met <p>Sponsored by FibroGen</p>
Phase III NCT02652806 Partnered	Anaemia in CKD patients receiving dialysis	300	<ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: epoetin alfa <p>China trial</p>	Primary endpoint: Haemoglobin response	<ul style="list-style-type: none"> FPCD: Q4 2015 LPCD: Q2 2016 Data readout: Q2 2017 Primary endpoint met <p>Sponsored by FibroGen</p>
Phase III NCT03263091 Partnered	Anemia in lower risk Myelodysplastic Syndrome (MDS) patients	184	<p>Open label roxadustat lead-in</p> <ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: placebo <p>US/global trial</p>	Primary endpoint: Proportion of patients achieving transfusion independence	<p>FPCD: Q1 2018</p> <p>Sponsored by FibroGen</p>
Phase II/III NCT03303066 Partnered	Anemia in lower risk Myelodysplastic Syndrome (MDS) patients	175	<p>Open label roxadustat lead-in</p> <ul style="list-style-type: none"> Arm 1: roxadustat Arm 2: placebo <p>China</p>	Primary endpoint: Haemoglobin response	<p>Sponsored by FibroGen</p>

HIF-PHI = Hypoxia-Inducible Factor Prolyl Hydroxylase Inhibitor



PT010 (LAMA/LABA/ICS)

Chronic obstructive pulmonary disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
Phase III NCT02536508	Moderate to very severe COPD	500	Treatments (52-week Treatment Period) <ul style="list-style-type: none"> BGF MDI 320/14.4/9.6µg GFF MDI 14.4/9.6µg BFF MDI 320/9.6µg Randomised, double-blind, chronic-dosing, multi-centre Country – US	Primary endpoints: <ul style="list-style-type: none"> 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. 	<ul style="list-style-type: none"> FPCD: Q3 2015 LPD: Q3 2016 Data readout: Q1 2018
Phase III ETHOS NCT02465567	Moderate to very severe COPD	8,000 (possible increase by 4,000 after blinded sample size re-assessment)	Treatments (1-year Treatment Period) <ul style="list-style-type: none"> BGF MDI 320/14.4/9.6µg BID BGF MDI 160/14.4/9.6µg BID BFF MDI 320/9.6µg BID GFF MDI 14.4/9.6µg BID Randomised, double-blind, multi-centre and parallel-group Multi-country	<ul style="list-style-type: none"> Primary endpoint: Rate of moderate or severe COPD exacerbations Secondary endpoint: Time to first moderate or severe COPD exacerbation 	<ul style="list-style-type: none"> FPCD: Q3 2015
Phase III KRONOS NCT02497001	Moderate to very severe COPD	1,800	Treatments (24-week Treatment Period) <ul style="list-style-type: none"> 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	Primary Endpoints: <ul style="list-style-type: none"> FEV₁ 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 FEV₁ over 24 weeks (BGF MDI vs GFF MDI) Transition dyspnoea index (TDI) focal score over 24 weeks (BGF MDI vs BFF MDI and BGF MDI vs GFF MDI) 	<ul style="list-style-type: none"> FPCD: Q3 2015 LPD: Q2 2017 Data readout: Q1 2018 8/9 Primary endpoints met
Phase III NCT03262012	Moderate to very severe COPD	324	Treatments (28-week Treatment Period) <ul style="list-style-type: none"> 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, chronic dosing, multicenter Country: Japan	Primary outcome measures: <ul style="list-style-type: none"> Long-term safety and tolerability (52 weeks): adverse events, 12-lead ECG, laboratory tests, vital signs 	<ul style="list-style-type: none"> FPCD Q3 2016 LPD Q4 2017



Tezepelumab (TSLP mAb)

Severe, uncontrolled asthma

Trial	Population	Patients	Design	Endpoints	Status
Phase III NAVIGATOR NCT03347279 Partnered	Severe asthma Age 12-80 years	1,060	<ul style="list-style-type: none"> • Arm 1: tezepelumab SC • Arm 2: Placebo SC 52 week trial Global trial – 18 countries	<ul style="list-style-type: none"> • Primary endpoint: Annual asthma exacerbation rate • Secondary endpoints: Change from baseline in pre-BD FEV1, asthma related QoL (AQLQ(S)+12), asthma control (ACQ-6) 	<ul style="list-style-type: none"> • FPCD: Q1 2018 • Data anticipated: 2020
Phase III SOURCE NCT03406078 Partnered	Severe asthma Age 12-80 years	140	<ul style="list-style-type: none"> • Arm 1: tezepelumab SC • Arm 2: Placebo SC 48 week trial Global trial – 7 countries	<ul style="list-style-type: none"> • Primary endpoint: Reduction from baseline in daily OCS dose while not losing asthma control • Secondary endpoint: Annual asthma exacerbation rate 	<ul style="list-style-type: none"> • FPCD: Q2 2018

TSLP = thymic stromal lymphopoietin



Anifrolumab (type I IFN receptor mAb)

Systemic lupus erythematosus (SLE) / Lupus nephritis (LN)

Trial	Population	Patients	Design	Endpoints	Status
Phase III NCT02446912	Moderate to severe SLE TULIP SLE 1	450	<ul style="list-style-type: none"> Arm 1: 300mg IV anifrolumab Q4W for 48 weeks Arm 2: 150mg IV anifrolumab Q4W for 48 weeks Arm 3: Placebo IV Q4W for 48 weeks 	<ul style="list-style-type: none"> Primary endpoint: Response in SLE responder index at week 52 	<ul style="list-style-type: none"> FPCD: Q3 2015 Data anticipated: H2 2018
Phase III NCT02446899	Moderate to severe SLE TULIP SLE 2	360	<ul style="list-style-type: none"> Arm 1: 300mg IV anifrolumab Q4W for 48 weeks Arm 2: Placebo IV Q4W for 48 weeks 	<ul style="list-style-type: none"> Primary endpoint: Response in SLE responder index at week 52 	<ul style="list-style-type: none"> FPCD: Q3 2015 Data anticipated: H2 2018
Phase II NCT01438489	Moderate to severe SLE patients	307	<ul style="list-style-type: none"> Arm 1: 300mg IV anifrolumab Q4W for 48 weeks Arm 2: 1000mg IV anifrolumab Q4W for 48 weeks Arm 3: Placebo IV Q4W for 48 weeks 	<ul style="list-style-type: none"> Primary endpoint: Response in SLE responder index at 6 months 	<ul style="list-style-type: none"> FPCD: Q1 2012 LPD: Q1 2015 Data readout: Q3 2014
Phase II NCT01753193	Moderate to severe SLE patients	218	<ul style="list-style-type: none"> Arm 1: anifrolumab, IV Q4W for 104 weeks 	<ul style="list-style-type: none"> Primary endpoint: Open-label extension to evaluate long-term safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q1 2013 Data anticipated: H2 2018
Phase II NCT01559090	Japanese SLE patients	17	Open-label, dose escalation trial: <ul style="list-style-type: none"> 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 then 1000mg IV Q4W for 104 weeks 	<ul style="list-style-type: none"> Safety, tolerability, PK/PD 	<ul style="list-style-type: none"> FPCD: Q1 2012 Data readout: Q1 2015
Phase I NCT02601625	Healthy subjects	30	<ul style="list-style-type: none"> Arm 1: 300mg SC single dose Arm 2: 300mg IV single dose Arm 3: 600 mg SC single dose 	<ul style="list-style-type: none"> Safety, tolerability, PK/PD 	<ul style="list-style-type: none"> FPCD: Q4 2015 LPD: H1 2016 Data readout: Q3 2016
Phase II NCT02962960	Moderate to severe SLE patients	32	<ul style="list-style-type: none"> Arm 1: 150mg SC every other week Arm 2: 300mg SC every other week Arm 3: Placebo SC every other week 	<ul style="list-style-type: none"> PK/PD, Safety, tolerability, Primary analysis at week 12, Secondary analysis at week 52 	<ul style="list-style-type: none"> FPCD: Q1 2017 Data readout: Q1 2018
Phase II NCT02547922	Active Proliferative LN (TULIP-LN1)	150	<ul style="list-style-type: none"> Arm 1: 900 mg IV Q4W for 12 weeks then 300mg IV anifrolumab Q4W for 36 weeks Arm 2: 300 mg IV anifrolumab Q4W for 48 weeks Arm 3: Placebo IV Q4W for 48 weeks 	<ul style="list-style-type: none"> Response in proteinuria at week 52 	<ul style="list-style-type: none"> FPCD: Q4 2015 Data anticipated: 2019



Lanabecestat (BACE inhibitor)

Alzheimer's disease

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase III AMARANTH NCT02245737	Early Alzheimer's disease patients	2,218	<ul style="list-style-type: none"> • Arm 1: lanabecestat 20mg once daily • Arm 2: lanabecestat 50mg once daily • Arm 3: Placebo once daily <p>24-month treatment duration</p> <p>Global trial – 14 countries</p>	<ul style="list-style-type: none"> • Primary endpoint: Changes in cognitive (ADAS-Cog 13) scale <p>Secondary endpoints:</p> <ul style="list-style-type: none"> • Changes in other cognitive and functional (ADCS-ADL) scales • Changes in composite scales (CDR-SB) • Changes in biomarkers and imaging assays • Safety and tolerability 	<ul style="list-style-type: none"> • FPCD: Q4 2014 • LPCD: Q3 2017 • Data anticipated: 2019
Phase III AMARANTH - EXTENSION NCT02972658 Partnered	Early Alzheimer's disease patients	1,400	<ul style="list-style-type: none"> • lanabecestat 20mg or 50mg once daily <p>24-month delayed start treatment extension</p> <p>Global trial – 14 countries</p>	<ul style="list-style-type: none"> • Primary endpoint: Delayed start analysis 	<ul style="list-style-type: none"> • FPCD: Q1 2017 • Data anticipated: 2021
Phase III DAYBREAK-ALZ NCT02783573	Mild Alzheimer's disease patients	1,899	<ul style="list-style-type: none"> • Arm 1: lanabecestat 20 mg once daily • Arm 2: lanabecestat 50 mg once daily • Arm 3: placebo once daily <p>18-month treatment duration + 18-month delayed start extension</p> <p>Global trial – 18 countries</p>	<ul style="list-style-type: none"> • Primary endpoint: Changes in cognitive (ADAS-Cog 13) scale <p>Secondary endpoints:</p> <ul style="list-style-type: none"> • Changes in cognitive and functional (ADCS-ADL) scales • Changes in composite scales (CDR-SB) • Changes in biomarkers and imaging assays • Safety and tolerability 	<ul style="list-style-type: none"> • FPCD: Q3 2016 • Data anticipated: 2020

Oncology

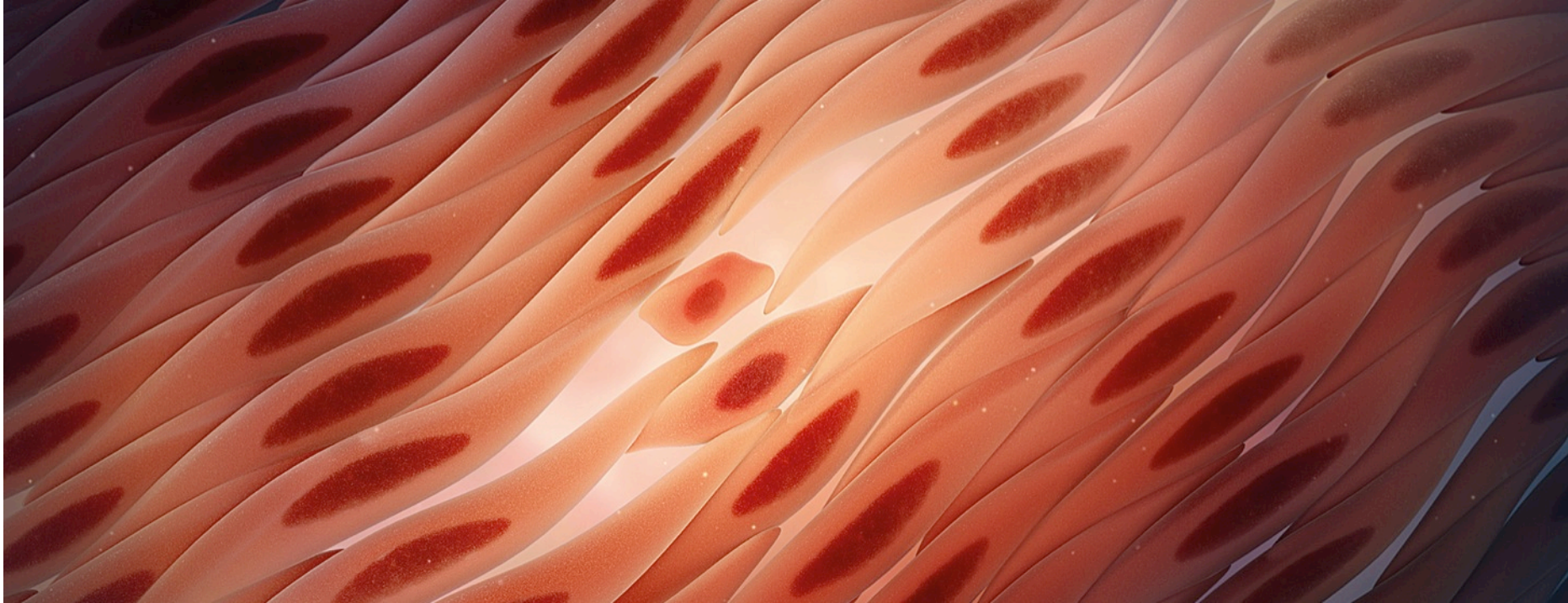
CVRM

Respiratory

Other



Early development - IMED (AstraZeneca Research and Early Development)



Capivasertib (AZD5363, AKT inhibitor)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
<p>Phase I</p> <p>NCT01226316</p>	Breast and gynaecological cancers with PIK pathway mutation	12-24 per arm (Parts E & F)	<p>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]</p> <ul style="list-style-type: none"> Part E arm 1: ER+ Breast with AKT-1 mutation (prior <i>Faslodex</i> resistance) Part E arm 2: ER+ Breast with AKT-1 mutation (first exposure to <i>Faslodex</i>) Part F arm 1: ER+ Breast with PTEN mutation (prior <i>Faslodex</i> resistance) Part F arm 2: ER+ Breast with PTEN mutation (first exposure to <i>Faslodex</i>) 	<ul style="list-style-type: none"> Safety and tolerability ORR Clinical Benefit Rate at 24 weeks (CBR24) [Parts E & F only] 	<ul style="list-style-type: none"> Data anticipated: 2019



Vistusertib (mTORC1/2 inhibitor)

Cancer

Trial	Population	Patients	Design	Endpoints	Status
Phase II MANTA NCT02216786 Partnered	2L oestrogen-receptor positive (ER+) metastatic breast cancer	316	<ul style="list-style-type: none"> Arm 1: <i>Faslodex</i> Arm 2: <i>Faslodex</i> + vistusertib 50mg BD continuous dosing Arm 3: <i>Faslodex</i> + vistusertib 125mg BD two days on, 5 off Arm 4: <i>Faslodex</i> + everolimus Multicentre: European sites	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoint: OS 	<ul style="list-style-type: none"> FPCD: Q2 2014 LPD: H2 2016 Data readout: Q4 2017
Phase I NCT02398747	Japanese Patients with Advanced Solid Malignancies	18	Open label Monotherapy and combination with paclitaxel cohorts	<ul style="list-style-type: none"> Safety and tolerability of AZD2014 monotherapy and in combination with paclitaxel PK 	<ul style="list-style-type: none"> FPCD: Q2 2015 Data readout: Q4 2017
Phase I/II PASTOR NCT02599714	Postmenopausal women with locally advanced/metastatic oestrogen 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 + <i>Faslodex</i>) Part C – randomised, double-blind, placebo-controlled, stratified, parallel group extension at RP2D for triplet combination (vistusertib + palbociclib + <i>Faslodex</i> vs matching vistusertib placebo + palbociclib + <i>Faslodex</i>)	Primary endpoints: <ul style="list-style-type: none"> 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 endpoints: Best Objective Response Rate (BOR) and Objective Response Rate (ORR)	<ul style="list-style-type: none"> FPCD: Q1 2016 Data anticipated: 2019
Phase I/II NCT03205046 Partnered	Relapsed/Refractory B-cell Malignancies	59	Part 1 - Identify a dose and schedule for vistusertib in combination with acalabrutinib Part 2: Evaluation of the safety of acalabrutinib and vistusertib when coadministered	<ul style="list-style-type: none"> Number of participants experiencing dose-limiting toxicities Incidence of adverse events from the combination of acalabrutinib and vistusertib 	<ul style="list-style-type: none"> FPCD: Q3 2016 Data anticipated: 2019
Phase I/II NCT03205046	Relapsed/Refractory B-cell Malignancies	59	Part 1 - Identify dose and schedule for vistusertib + acalabrutinib Part 2: Single arm expansions to further explore tolerability, PK and clinical activity of vistusertib + acalabrutinib Conducted in US, EU	Primary endpoints: <ul style="list-style-type: none"> Safety and tolerability Secondary endpoints: <ul style="list-style-type: none"> Overall response rate, Duration of response, Durable response rate, PFS PK 	<ul style="list-style-type: none"> FPCD: Q3 2017 Data anticipated: 2019



AZD0156 (ATM inhibitor)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02588105	Solid tumours	130	<ul style="list-style-type: none">• Arm 1: AZD0156 + <i>Lynparza</i>• Arm 2: AZD0156 + irinotecan <p>Trial conducted in North America, Europe and South Korea</p>	<ul style="list-style-type: none">• Safety, tolerability, PK and efficacy	<ul style="list-style-type: none">• FPCD: Q4 2015• Data anticipated: 2018



AZD1390 (ATM inhibitor, blood brain barrier)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Subjects	Design	Endpoints	Status
Phase I NCT03215381	Healthy Volunteers	8	<ul style="list-style-type: none">Positron-Emission Tomography (PET) Study[11C]AZD1390 Microdose administered by IV bolusTrial conducted in a single centre in Sweden	<ul style="list-style-type: none">Brain distribution of AZD1390 to assess if [11C]AZD1390 crosses the blood brain barrier in healthy volunteers	<ul style="list-style-type: none">FPCD: Q4 2017Data anticipated: 2018



AZD1775 (WEE-1 inhibitor)

Ovarian cancer, triple-negative breast cancer, small cell lung cancer (SCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase II NCT02272790	Platinum-resistant (PR) ovarian cancer	97	<ul style="list-style-type: none"> Arm B: paclitaxel + AZD1775 Arm C: carboplatin + AZD1775 Global trial	<ul style="list-style-type: none"> Primary endpoint: ORR Secondary endpoints: Duration of Response (DOR), PFS, OS, Disease Control Rate, safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q1 2015
Phase I/II NCT02482311	Advanced solid tumours	97	<ul style="list-style-type: none"> 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 SCLC Conducted in US, Canada	<ul style="list-style-type: none"> Safety and tolerability Secondary endpoints: Overall response rate, DCR, DoR, PFS 	<ul style="list-style-type: none"> FPCD: Q3 2015 LPCD: Q4 2016
Phase I NCT02610075	Advanced solid tumours	78	<ul style="list-style-type: none"> Monotherapy Dose escalation trial to determine MTD Conducted in US	<ul style="list-style-type: none"> Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q4 2015 LPCD: Q3 2017
Phase I NCT02511795	Advanced solid tumours	102	<ul style="list-style-type: none"> Dose escalation trial to determine MTD (AZD1775 + <i>Lynparza</i>) followed by expansions into specific tumour types, inc ovarian cancer, triple negative breast cancer (TNBC) and small cell lung cancer (SCLC) Conducted in US, Canada	<ul style="list-style-type: none"> Safety and tolerability Secondary endpoints: Overall response rate, Disease Control Rate, Duration of Response, PFS 	<ul style="list-style-type: none"> FPCD: Q3 2015
Phase I NCT02617277	Advanced solid tumours	55	<ul style="list-style-type: none"> Dose escalation trial to determine MTD (AZD1775 + <i>Imfinzi</i>) Conducted in US	<ul style="list-style-type: none"> Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q4 2015
Phase I NCT02341456	Advanced solid tumours	19	<ul style="list-style-type: none"> Dose escalation trial to determine MTD (AZD1775 + carboplatin + paclitaxel: AZD1775 + Carbo) Conducted in Australia, Japan and Republic of Korea	<ul style="list-style-type: none"> Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q1 2015 LPCD: Q2 2016 Data readout Q1 2018



AZD1775 (WEE-1 inhibitor)

Ovarian cancer, triple-negative breast cancer, small cell lung cancer (SCLC)

Trial	Population	Patients	Design	Endpoints	Status
Phase I D6014C00005 NCT03315091	Advanced solid tumours	24	Open-label, randomised, 2-period crossover design: <ul style="list-style-type: none"> Fasted (Treatment A): Single dose 300 mg AZD1775 Fed (Treatment B): Single dose 300 mg AZD1775 Conducted in Europe	<ul style="list-style-type: none"> Primary endpoints: Plasma AUC, AUC0-t and Cmax Secondary endpoints: Plasma tmax, λz, t½, CL/F and Vz/F Safety and tolerability 	• FPCD: Q4 2017
Phase I D6014C00006 NCT03333824	Advanced solid tumours	30	Part A: caffeine (200mg), omeprazole (20mg) and midazolam (1mL of 2mg/mL syrup) followed 7-14 days later by AZD1775 225mg bid for 2.5 days plus caffeine (200mg), omeprazole (20mg) and midazolam (1mL of 2mg/mL syrup) on day 3. Part B: 7-14 days after end of Part A, AZD1775 225mg BID for 2.5 days. Conducted in US	<ul style="list-style-type: none"> Primary endpoints: <ul style="list-style-type: none"> Part A: Plasma AUC, AUC0-t and Cmax for cocktail parent compounds (midazolam, omeprazole and caffeine) Part B: dECG intervals (QTcF) for absolute values and time-matched change from baseline Secondary endpoints: <ul style="list-style-type: none"> Plasma tmax, t½, λz, CL/F and Vz/F for cocktail parent compounds (midazolam, omeprazole, and caffeine). Plasma AUC, AUC0-t, tmax, Cmax, t½, and λz for cocktail metabolites (1'-hydroxy-midazolam, 5-hydroxy-omeprazole, and paraxanthine) and the AUC and Cmax ratios in relation to parent compound. Plasma AZD1775 Day 1: Part B only: AUC0-12, tmax, and Cmax Plasma AZD1775 Day 3: Parts A & B: AUC0-12, tmax, Cmax, Cmin, Cavg, CLss/F and FI; Part B only: RAUC0-12 and Rcmx dECG intervals (heart rate, RR, PR, QRS, QTcB, QTcF and QT) for absolute values and time-matched change from baseline; changes in dECG morphology Safety and tolerability 	• FPCD: Q4 2017
Phase I D6014C00007 NCT03313557	Advanced solid tumours	54	AZD1775 monotherapy once daily. Conducted in US and Europe	<ul style="list-style-type: none"> Safety and tolerability 	• FPCD: Q4 2017



AZD2811 (aurora kinase B inhibitor)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02579226	Solid tumours	72	<ul style="list-style-type: none"> Arm 1: AZD2811 dose escalation Arm 2: AZD2811 dose expansion 	<ul style="list-style-type: none"> Safety and tolerability Pharmacokinetics and efficacy 	<ul style="list-style-type: none"> FPCD: Q4 2015 Data anticipated: 2019
Phase I NCT03217838	Acute Myeloid Leukaemia/High-Risk Myelodysplastic Syndrome	36	<ul style="list-style-type: none"> Part A: AZD2811 single agent dose escalation cohorts Part B: AZD2811 dose expansion to further explore the tolerability, PK and clinical activity. 	<ul style="list-style-type: none"> Safety and tolerability Pharmacokinetics and efficacy 	<ul style="list-style-type: none"> FPCD: Q3 2017 Data anticipated: 2019
Phase I NCT02579226	Solid tumours	72	<ul style="list-style-type: none"> Arm 1: AZD2811 dose escalation Arm 2: AZD2811 dose expansion 	<ul style="list-style-type: none"> Safety and tolerability Pharmacokinetics and efficacy 	<ul style="list-style-type: none"> FPCD: Q4 2015 Data anticipated: 2019
Phase I NCT03217838	Acute Myeloid Leukaemia/High-Risk Myelodysplastic Syndrome	36	<ul style="list-style-type: none"> Part A: AZD2811 single agent dose escalation cohorts Part B: AZD2811 dose expansion to further explore the tolerability, PK and clinical activity. 	<ul style="list-style-type: none"> Safety and tolerability Pharmacokinetics and efficacy 	<ul style="list-style-type: none"> FPCD: Q3 2017 Data anticipated: 2019



AZD4547 (FGFR inhibitor)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
<p>Phase II GLOW</p> <p>NCT01202591</p>	Female ER+ breast cancer patients whose disease has progressed following treatment with one prior endocrine therapy	40	<ul style="list-style-type: none"> Part A: AZD4547 in ascending multiple doses in combination with 25mg exemestane Part B: <ul style="list-style-type: none"> Arm 1: AZD4547 (dose from part A) + <i>Faslodex</i> Arm 2: placebo + <i>Faslodex</i> <p>Patients with FGFR1 polysomy (30 patients) or FGFR1 amplification (60 patients)</p> <p>Conducted in eight countries in Europe</p>	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> FPCD: Q4 2010 LPCD: Q1 2014 Data readout: Q3 2014
<p>Phase II SHINE</p> <p>NCT01457846</p>	Advanced gastro-oesophageal cancer	71	<ul style="list-style-type: none"> 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) <p>Conducted in 16 countries across Europe and Asia</p>	<ul style="list-style-type: none"> Primary endpoint: PFS Secondary endpoint: OS/Tumour size 	<ul style="list-style-type: none"> FPCD: Q4 2011 LPCD: Q2 2013 Data readout: Q1 2015
<p>Phase I</p> <p>NCT01213160</p>	Advanced cancer who have failed standard therapy or for whom no standard therapy exists	33	<ul style="list-style-type: none"> 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) <p>Conducted in Japan</p>	<ul style="list-style-type: none"> Part A: MTD and Recommended dose for Parts B and C Part B: Safety and tolerability and preliminary anti-tumour activity 	<ul style="list-style-type: none"> FPCD: Q4 2010 LPCD: Q4 2012 Data readout: Q2 2013
<p>Phase I</p> <p>NCT00979134</p>	Advanced cancer who have failed standard therapy or for whom no standard therapy exists	94	<ul style="list-style-type: none"> 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 patients with FGFR1 and FGFR2 amplified tumours at the RD defined from Part A <p>Conducted in seven countries across North America and Europe</p>	<ul style="list-style-type: none"> Part A: MTD and recommended dose for Parts B and C Part B and C: Safety and tolerability, PK and preliminary anti-tumour activity 	<ul style="list-style-type: none"> FPCD: Q4 2009 LPCD: Q4 2013 Data readout: Q1 2015
<p>Phase I BISCAY</p> <p>NCT02546661</p>	2L Muscle-invasive metastatic bladder cancer in patients who have failed prior therapy	110	<ul style="list-style-type: none"> Multi-drug biomarker-directed trial Arm 1: AZD4547 Arm 2: AZD4547 + <i>Imfinzi</i> Arm 3: <i>Lynparza</i> + <i>Imfinzi</i> Arm 4: AZD1775 + <i>Imfinzi</i> Arm 5: <i>Imfinzi</i> Arm 6: <i>vistusertib</i> + <i>Imfinzi</i> Arm 7: AZD9150 + <i>Imfinzi</i> <p>Planned in North America and Europe</p>	<ul style="list-style-type: none"> Safety and tolerability of the combinations PK and preliminary anti-tumour activity 	<ul style="list-style-type: none"> FPCD: Q4 2016 Data anticipated: 2019



AZD4573 (CDK9 inhibitor)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03263637	Relapsed/refractory haematologic malignancies	42	Dose Escalation in relapsed/refractory haematological malignancies AZD4573 will be administered 2 parallel arms of (1-6 cohorts of dose escalations) based on the haematological malignancy	<ul style="list-style-type: none">Primary-Safety/PK; secondary-efficacy trial	<ul style="list-style-type: none">FPCD: Q4 2017Data anticipated: 2019

* clinicaltrials.gov being updated



AZD4635 (A_{2A}R inhibitor)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02740985	Phase Ia: patients with advanced solid tumours 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	36 (estimated) 15	<ul style="list-style-type: none"> Phase 1a: dose escalation to determine the Maximum Tolerated Dose (MTD) of AZD4635 given as monotherapy and in combination with <i>Imfinzi</i>. 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 Phase 1b will consist of an additional expansion phase in NSCLC at the combination MTD or maximum feasible dose <p>Both parts conducted at sites in the US</p>	<p>Primary Outcome Measure: Safety and tolerability</p> <p>Secondary Outcome Measures:</p> <ul style="list-style-type: none"> PK of AZD4635 as monotherapy and combination with <i>Imfinzi</i> Preliminary assessment of anti-tumour activity 	<ul style="list-style-type: none"> FPCD: Q2 2016 Data anticipated: 2018



AZD4785 (KRAS antisense oligonucleotide)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03101839	Phase Ia: patients with advanced solid tumours which harbour mutations of KRAS. Phase Ib: patients with advanced NSCLC with tumours harbouring mutations of KRAS.	30 (estimated) 20	<ul style="list-style-type: none"> Phase Ia: dose escalation to determine the Maximum Tolerated Dose (MTD) of AZD4785 given as monotherapy. When the MTD is determined, additional patients with advanced solid malignancies may be enrolled to explore further the safety, tolerability, pharmacokinetics (PK), and biological activity Phase Ib will consist of an expansion phase in patients with KRASm NSCLC at the MTD or maximum feasible dose. <p>To be conducted at sites in the USA and UK</p>	<p>Primary Outcome Measure: Safety and tolerability</p> <p>Secondary Outcome Measures:</p> <ul style="list-style-type: none"> Pharmacokinetics of AZD4785 Change in KRAS mRNA from baseline Objective clinical response 	<ul style="list-style-type: none"> FPCD: Q2 2017 Data anticipated: 2019



AZD5069 (CXCR2 antagonist)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase Ib/II NCT02499328	Squamous Cell Carcinoma of the Head & Neck (HNSCC)	465	Dose Escalation advanced solid and blood cancers <ul style="list-style-type: none"> • Arm A1: AZD9150/<i>Imfinzi</i> • Arm A2 : AZD5069/<i>Imfinzi</i> • Arm A4: AZD9150/<i>Imfinzi</i>/treme • Arm A5: AZD5069/<i>Imfinzi</i>/treme Dose Expansion 2L HNSCC: <ul style="list-style-type: none"> • Arm B1: AZD9150 • Arm B2: AZD5069 • Arm B3: AZD9150/<i>Imfinzi</i> • Arm B4: AZD5069/<i>Imfinzi</i> • Arm B5: AZD9150 Mono • Arm B6: AZD5069 Mono • Arm B7: AZD9150/<i>Imfinzi</i> (1L HNSCC) 	<ul style="list-style-type: none"> • Safety/Efficacy trial 	<ul style="list-style-type: none"> • FPCD: Q3 2015 • Data anticipated: 2019
Phase Ib/II NCT02583477	Metastatic Pancreatic Ductal Carcinoma	16	Dose escalation and expansion Arms: <i>Imfinzi</i> in combination with nab-paclitaxel and gemcitabine <i>Imfinzi</i> in combination with AZD5069	<ul style="list-style-type: none"> • Safety/Efficacy trial 	<ul style="list-style-type: none"> • FPCD: Q1 2016 • Data anticipated: 2018

* clinicaltrials.gov being updated



AZD5153 (BRD4 inhibitor)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I/IIb NCT03205176	Relapsed/refractory solid tumours, lymphomas	54	Dose Escalation advanced solid and lymphomas 6 dose escalation cohorts of AZD5153 Dose and schedule from dose escalation will be applied in dose expansion Phase in platinum-resistant or platinum-refractory high grade serous (HGS) ovarian cancer	<ul style="list-style-type: none">Primary-Safety/ secondary-Efficacy trial	<ul style="list-style-type: none">FPCD: Q2 2017Data anticipated: 2019

* clinicaltrials.gov being updated



AZD5991 (MCL1 inhibitor)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CV/PM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03218683	Relapsed/refractory haematologic malignancies	30	Dose Escalation in relapsed/refractory haematological malignancies 5 dose escalation cohorts of AZD5991	<ul style="list-style-type: none">Primary-Safety/ secondary-Efficacy trial	<ul style="list-style-type: none">FPCD: Q3 2017Data anticipated: 2019

* clinicaltrials.gov being updated



AZD6738 (ATR inhibitor)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02264678	Solid tumours	160	<ul style="list-style-type: none">• Arm 1: AZD6738 + carboplatin• Arm 2: AZD6738 dose escalation, AZD6738 + <i>Lynparza</i>• Arm 3: AZD6738 + <i>Imfinzi</i> <p>Trial conducted in North America, Europe and South Korea</p>	<ul style="list-style-type: none">• Safety and tolerability• PK and efficacy	<ul style="list-style-type: none">• FPCD: Q4 2014• Data anticipated: Q1 2018



AZD8186 (PI3Kb/d inhibitor)

Cancer

Approved medicines
Late-stage development
Early development - IMED
Early development - MedImmune

Oncology

CVRM

Respiratory

Other

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	<ul style="list-style-type: none"> 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 acetate (with prednisone) in PTEN deficient metastatic castrate resistant prostate cancer (mCRPC) patients. Initial dose/ schedule confirmation phase using AZD8186 monotherapy 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 ½ 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 <p>Trial conducted in Canada, US, Spain & UK</p>	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> FPCD: Q2 2013 Data anticipated: 2019



AZD9150 (STAT3 inhibitor)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CV/IM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase Ib/II NCT02499328	Squamous Cell Carcinoma of the Head & Neck (HNSCC)	405	Dose Escalation advanced solid and blood cancers <ul style="list-style-type: none"> • Arm A1: AZD9150/<i>Imfinzi</i> • Arm A2 : AZD5069/<i>Imfinzi</i> • Arm A4: AZD9150/<i>Imfinzi</i>/treme • Arm A5: AZD5069/<i>Imfinzi</i>/treme Dose Expansion 2L HNSCC: <ul style="list-style-type: none"> • Arm B1: AZD9150 • Arm B2: AZD5069 • Arm B3: AZD9150/<i>Imfinzi</i> • Arm B4: AZD5069/<i>Imfinzi</i> • Arm B5: AZD9150 Mono • Arm B6: AZD5069 Mono • Arm B7: AZD9150/<i>Imfinzi</i> (1L HNSCC) 	<ul style="list-style-type: none"> • Safety/Efficacy trial 	<ul style="list-style-type: none"> • FPCD: Q3 2015 • Data anticipated: 2019
Phase Ib/II NCT02549651	Diffuse Large B-cell Lymphoma	190	Dose escalation and expansion Arms: <ul style="list-style-type: none"> • Experimental Arm: <i>Imfinzi</i> monotherapy • Experimental Arm: <i>Imfinzi</i> and tremelimumab • Experimental Arm: <i>Imfinzi</i> and AZD9150 	<ul style="list-style-type: none"> • Safety/Efficacy trial 	<ul style="list-style-type: none"> • FPCD: Q3 2016 • Data anticipated: 2021
Phase Ib/II NCT03421353	Non Small Cell Lung Cancer (NSCLC)	213	Dose Escalation advanced solid and blood cancers <ul style="list-style-type: none"> • Arm A1: AZD9150 alternate week/<i>Imfinzi</i> • Arm A2-A5 : AZD9150/<i>Imfinzi</i> + SOC chemotherapy Dose Expansion 1L HNSCC: <ul style="list-style-type: none"> • Arm B1: AZD9150 alternate week/<i>Imfinzi</i> • Arm B2: AZD9150 weekly/<i>Imfinzi</i> • Arm C1: AZD9150/<i>Imfinzi</i>+SOC chemo 	<ul style="list-style-type: none"> • Safety/Efficacy trial 	<ul style="list-style-type: none"> • FPCD: Q1 2018 • Data anticipated: 2020

* clinicaltrials.gov being updated



AZD9496 (selective estrogen receptor degrader)

Breast cancer

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03236974	ER+ Breast Cancer	~50	<ul style="list-style-type: none"> This is an open label randomised multicentre pre-surgical pharmacodynamics study to compare and assess the biological effects of AZD9496 and <i>Faslodex</i> in postmenopausal women with oestrogen receptor positive (ER+), human epidermal growth factor receptor 2 negative (HER2-) primary breast cancer. Patients will receive AZD9496 or <i>Faslodex</i> and will have a pre-dose and an on-treatment core biopsy after 5-14 days of commencing treatment. 	<ul style="list-style-type: none"> Primary Outcome Measures: Pharmacodynamics changes to estrogen receptor (ER) expression following treatment with AZD9496 or <i>Faslodex</i> Secondary Outcome Measures: Pharmacodynamics changes to Ki67 and progesterone receptor (PgR) expression following treatment with AZD9496 or <i>Faslodex</i> 	<ul style="list-style-type: none"> FPCD: Q4 2017 Data anticipated: 2019
Phase I NCT02248090	ER+ Breast Cancer	~50	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> Primary Outcome Measures: Safety and tolerability Secondary Outcome Measures: Single and multiple dose pharmacokinetics of AZD9496 4β-hydroxycholesterol concentration in blood Anti-tumour activity 	<ul style="list-style-type: none"> FPCD: Q4 2014 LPCD: Q2 2016 Data readout: Q2 2017
Phase I NCT02780713	Healthy subjects	14	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> Primary Outcome Measures: Pharmacokinetics for AZD9496 and its metabolites Secondary Outcome Measures: Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q2 2016 LPCD: Q3 2016 Data readout: Q2 2017



Verinurad (RDEA3170, URAT1 inhibitor)

Chronic kidney disease

Trial	Population	Patients	Design	Endpoints	Status
Phase II NCT03118739	CKD patients with hyperuricaemia, albuminuria, and Type 2 diabetes	60	<ul style="list-style-type: none"> Arm A: verinurad 9 mg and febuxostat 80 mg Arm B: Placebo The trial is a multi-centre trial conducted in the US	To assess the effects of intensive uric acid lowering therapy with RDEA3170 and febuxostat on UACR (urine albumin creatinine ratio)	<ul style="list-style-type: none"> FPCD: Q2 2017
Phase II NCT03316131	Asymptomatic hyperuricemic subjects (sUA > 6.0 mg/dL)	24	<ul style="list-style-type: none"> Arm A: 9 mg verinurad + 80 mg febuxostat + 10 mg dapagliflozin Arm B: 9 mg verinurad + 80 mg febuxostat + placebo The trial is a two-centre trial conducted in the US	Primary: Peak UA excretion during the first 8 hours) on Day 7 of treatment Secondary: serum uric acid levels after 7 days of treatment.	<ul style="list-style-type: none"> FPCD: Q4 2017 LPCD: Q1 2018



AZD4831 & AZD5718

Cardiovascular disease

Trial	Population	Patients	Design	Endpoints	Status
AZD4831 (MPO) Phase I NCT02712372	Healthy subjects	~96	SAD trial (one trial site in Germany) <ul style="list-style-type: none"> Planned to investigate 6 different dose levels vs placebo but up to 10 cohort may be used 	<ul style="list-style-type: none"> Safety and tolerability PK parameters 	<ul style="list-style-type: none"> FPCD: Q3 2016 LPCD: Q4 2016 Data readout Q2 2017
AZD4831 (MPO) Phase I NCT03136991	Healthy subjects	~40	MAD (one trial site in USA) <ul style="list-style-type: none"> The planned number of cohorts is four but up to five cohorts may be included 	<ul style="list-style-type: none"> Safety and tolerability PK parameters 	<ul style="list-style-type: none"> FPCD: Q2 2017
AZD5718 (FLAP) Phase I NCT02632526	Healthy subjects	96	SMAD trial (one trial site in UK) SAD <ul style="list-style-type: none"> Oral administration MAD	<ul style="list-style-type: none"> Safety and tolerability PK parameters, bioavailability 	<ul style="list-style-type: none"> FPCD: Q1 2016 LPCD: Q3 2016 Data readout: Q4 2016
AZD5718 (FLAP) Phase I NCT02963116	Healthy subjects	12	DDI/BA study (one trial site in UK) A Randomised, 5-Period, 5-Treatment, Single-Dose, open-label, cross-over study to	<ul style="list-style-type: none"> PK and bioavailability To further assess the safety of single doses of AZD5718 in healthy subjects 	<ul style="list-style-type: none"> FPCD: Q2 2016 LPCD: Q1 2017 Data readout Q2 2017
AZD5718 (FLAP) Phase IIa NCT03317002	Coronary Artery Disease (CAD)	100	Phase 2A trial <ul style="list-style-type: none"> Arm 1: AZD5718 Dose A Arm 2: AZD 5718 Dose B Arm 3: Placebo Global trial – three countries in Europe	<ul style="list-style-type: none"> Primary endpoint: PD effect of AZD5718 by assessment of u-LTE4 	<ul style="list-style-type: none"> FPCD: Q4 2017
AZD5718 (FLAP) Phase I NCT03400488	Healthy subjects	48	Combined SAD and MAD study in Japanese subjects (one trial site in USA)	<ul style="list-style-type: none"> Safety and tolerability PK and PD parameters 	<ul style="list-style-type: none"> FPCD: Q1 2018
AZD5718 (FLAP) Phase I NCT03420092	Healthy subjects	14	BA study (one trial site in UK) A randomised, 6-period, 6-treatment, single-dose, open-label, crossover, study to assess the relative bioavailability of different formulations of AZD5718 and the food effect	<ul style="list-style-type: none"> PK and bioavailability Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q1 2018



AZD8601 (VEGF-A)

Cardiovascular disease

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02935712	Type 2 diabetic patients	~60	SAD trial (one trial site in Germany) <ul style="list-style-type: none">Planned to investigate 3 different dose levels vs placebo but up to 5 cohort may be used	<ul style="list-style-type: none">Safety and tolerability	<ul style="list-style-type: none">FPCD: Q1 2017LPCD: Q3 2017Data readout: Q1 2018
Phase IIa NCTT03370887	Heart Failure	Up to 33	Phase 2A trial (Two trial sites in Finland) <ul style="list-style-type: none">Arm 1: AZD8601 Dose AArm 2: AZD 8601 Dose BArm 3: Placebo	<ul style="list-style-type: none">Safety and tolerability	<ul style="list-style-type: none">FPCD: Q1 2018



AZD9977

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Heart Failure with preserved Ejection Fraction

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03435276	Healthy subjects	27	MAD Dose escalation in 3 cohorts with 6 subjects receiving AZD9977 and 3 subjects receiving placebo in each cohort Trial conducted in the UK.	Primary: • Safety and tolerability Secondary; • PK parameters	• FPCD: Q1 2018
Phase I NCT03450759	Healthy subjects	12	Bioavailability study Investigation of four different oral formulations of AZD9977 and influence of food. Trial conducted in the UK.	Primary: • relative bioavailability vs oral suspension (reference) • PK parameters	• FPCD: Q2 2018



Abediterol (AZD0548, LABA)

Asthma

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CV/RM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03273127	Patients With Asthma on Inhaled Corticosteroids	12	A randomised, single-blind, placebo-controlled study to assess PK and safety of abediterol 5 µg DPI given QD for 9 days, compared to placebo, in patients with asthma on ICSs	<ul style="list-style-type: none">To assess Cmax after single inhaled dose of abediterol 5 µg. Cmax will be taken directly from the individual concentration-time curveTo assess tmax after single inhaled dose of abediterol 5 µg. tmax will be taken directly from the individual concentration-time curve	<ul style="list-style-type: none">FPCD: Q3 2017LPCD: Q4 2017Data readout: Q2 2018



AZD1419 (TLR9 agonist)

Asthma

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase IIa INCONTRO NCT02898662	Adults with eosinophilic, moderate to severe asthma on ICS + LABA background treatment	81	<ul style="list-style-type: none">• Arm 1: AZD1419, once-weekly adaptive dosing (4mg, 1mg, 8mg)• Arm 2: placebo Inhaled (nebulised) administration Trial conducted in EU	<ul style="list-style-type: none">• Time to loss of asthma control	<ul style="list-style-type: none">• FPCD: Q4 2016• LPCD: Q4 2017• Data anticipated: H2 2018

ICS = Inhaled corticosteroids

LABA = Long Acting Beta Agonist



AZD5634 (epithelial NaC inhibitor)

Cystic fibrosis

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02679729	Healthy subjects	Part A: 57 Part B: 6	SAD. A Phase I, Randomised, Single-Blind, Placebo-Controlled Study to Assess the Safety, Tolerability and Pharmacokinetics of AZD5634 Following Single-Ascending Inhaled Doses (Part A) and After Single Inhaled and Intravenous Doses (Part B) in Healthy Subjects	Primary Endpoint • Safety and tolerability Secondary Endpoint • PK parameters	<ul style="list-style-type: none"> FPCD: Q1 2016 LPCD: Q3 2016 Data readout: Q2 2017
Phase Ib NCT02950805	Patients with Cystic Fibrosis	10	PoM. A Phase Ib, Randomised, Blinded, Placebo-Controlled Cross-Over Study to Assess the Effect of AZD5634 on Mucociliary Clearance as Well as Safety, Tolerability and Pharmacokinetic Parameters Following Single Inhaled Dose Administration to Patients with Cystic Fibrosis	Primary Endpoint • Mucociliary clearance (MCC) Secondary Endpoint • PK parameters • Safety and tolerability	<ul style="list-style-type: none"> FPCD: Q2 2017 LPCD Q1 2018 Data readout Q2 2018

Oncology

CVRM

Respiratory

Other



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	<ul style="list-style-type: none"> Primary: morning trough forced expiratory volume in one second (FEV1) 	<ul style="list-style-type: none"> FPCD: Q3 2015 LPCD: Q4 2015 Data readout: Q3 2016
Phase I NCT02967159	Healthy subjects	32	A randomised open label cross-over study to evaluate pharmacokinetics and safety of single inhaled doses of abediterol and AZD7594 given alone, in fixed dose combination (FDC) and in free combination using dry powder inhaler (DPI), in male healthy volunteers	<ul style="list-style-type: none"> PK, safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q4 2016 LPCD: Q1 2017 Data readout: Q2 2017
Phase I NCT02928354	Healthy subjects	12	This study is an open label, randomised, three-way cross-over study to assess the effect of particle size on the PK and safety of single inhaled doses of AZD7594 in healthy subjects (males aged 18 to 55 years [inclusive]). The study will be performed at a single study centre	<ul style="list-style-type: none"> PK and safety 	<ul style="list-style-type: none"> FPCD: Q4 2016 LPCD: Q1 2017 Data readout: Q2 2017
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	<ul style="list-style-type: none"> Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q4 2012 LPCD: Q2 2013 Data readout: Q4 2013
Phase I NCT02648438	Healthy subjects	30	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)	<ul style="list-style-type: none"> Bioavailability and pharmacokinetics 	<ul style="list-style-type: none"> FPCD: Q1 2016 LPCD: Q2 2016 Data readout: Q3 2016
Phase I NCT02645253	Healthy subjects	27	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	<ul style="list-style-type: none"> Safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q1 2016 LPCD: Q2 2016 Data readout: Q4 2016

AZD7594 (inhaled SGRM)

Asthma/chronic obstructive pulmonary disease (COPD)

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02928354	Healthy subjects	18	A randomised open label three-way cross-over study in healthy male volunteers to investigate the effect of particle size on PK following a single inhaled dose of AZD7594 via a dry powder inhaler (DPI)	<ul style="list-style-type: none">• PK• Safety and tolerability	<ul style="list-style-type: none">• FPCD: Q4 2016• LPCD: Q1 2017
Phase I NCT02967159	Healthy subjects	32	A randomised open label cross-over study to evaluate the pharmacokinetics and safety of single inhaled doses of abediterol and AZD7594 given alone, in fixed dose combination and in free combination, using DPI, in male healthy volunteers	<ul style="list-style-type: none">• PK• Safety and tolerability	<ul style="list-style-type: none">• FPCD: Q4 2016• LPCD: Q1 2017

Oncology

CVRM

Respiratory

Other



AZD8871 (MABA2)

Chronic obstructive pulmonary disease (COPD)

Trial	Population	Patients	Design	Endpoints	Status
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 <ul style="list-style-type: none"> AZD8871 600 µg once daily (double-blind) AZD8871 100 µg once daily (double-blind) Placebo (double-blind) Global study – 2 countries (UK & Germany)	Primary Endpoint: <ul style="list-style-type: none"> To evaluate the efficacy of inhaled AZD8871 in patients with moderate to severe COPD Secondary Endpoint: <ul style="list-style-type: none"> To investigate the PK of AZD8871 and its metabolites after multiple dose administration of AZD8871 in patients with moderate to severe COPD 	<ul style="list-style-type: none"> FPCD: Q1 2017 LPCD: Q1 2017 Data readout: Q3 2017
Phase I NCT03159442	Healthy Japanese Volunteers	24	MAD study with 3 dose levels - 300 µg, 600µg, and 900 µg (plus placebo control group in each dose level). Global Study – 1 country (UK)	Primary Endpoint: <ul style="list-style-type: none"> The primary objective is to investigate the safety and tolerability of AZD8871 at steady state Secondary Endpoint: <ul style="list-style-type: none"> To characterize 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 	<ul style="list-style-type: none"> FPCD: Q3 2017 LPCD: Q3 2017 Data readout: Q4 2017



AZD9567 (oSGRM)

Respiratory

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02760316	Healthy subjects	71	MAD trial with a total of 6 dose levels of AZD9567: 10 mg, 20mg, 40mg, 80mg and 125 mg as well as with 3 dose levels of prednisolone: 5 mg, 20 mg and 40 mg	Primary Endpoint: <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> FPCD: Q2 2016 Data anticipated: Q2 2018
Phase IIa NCT03368235	Patients with active RA	40	A Phase II, Randomised, Double-blind, Parallel Study to Assess the Efficacy, Safety and Tolerability of AZD9567 compared to Prednisolone 20 mg in patients with active Rheumatoid Arthritis	Primary Endpoint: To assess the efficacy of AZD9567, 40 mg, compared to prednisolone 20 mg in patients with active rheumatoid arthritis in spite of stable treatment with conventional and/or s.c./i.v. biological DMARDs	<ul style="list-style-type: none"> FPCD: Q1 2018



AZD0284 (ROR γ inverse agonist)

Plaque psoriasis vulgaris

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CV/RM

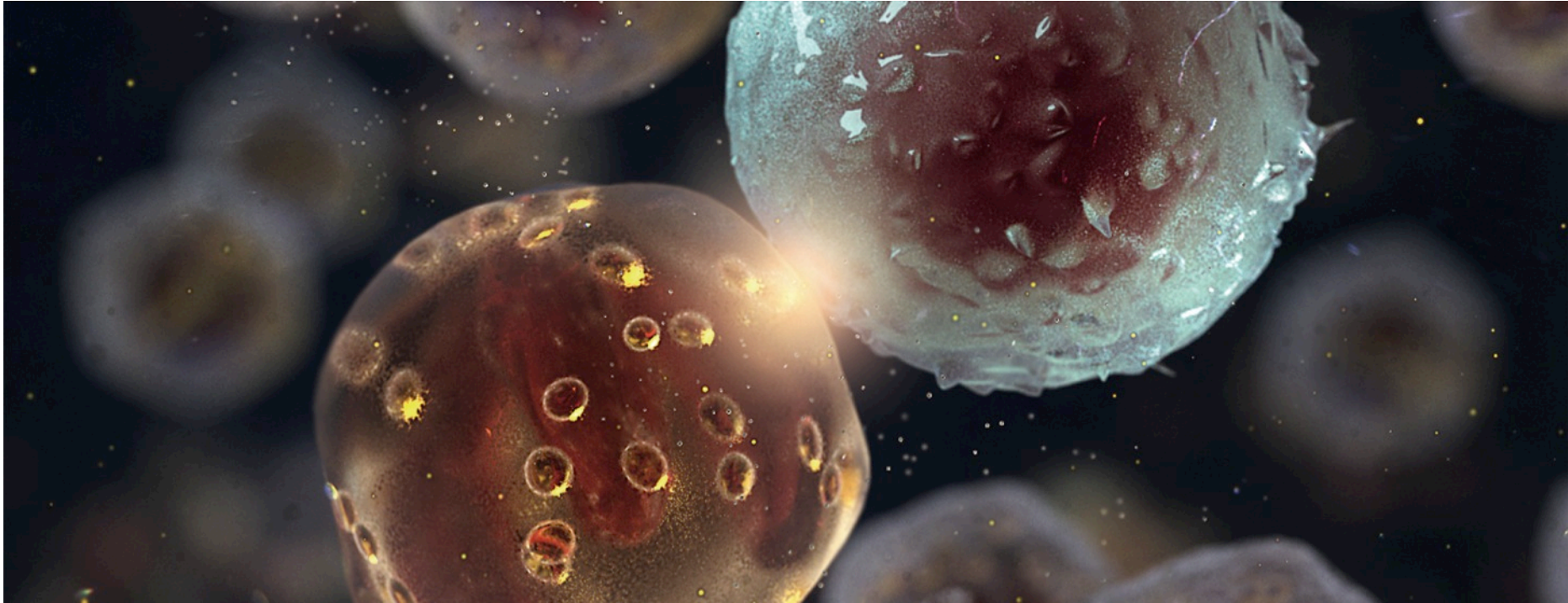
Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02976831	Healthy subjects	80	Part 1 (SAD) <ul style="list-style-type: none"> Seven different dose levels investigated vs placebo oral administration 	<ul style="list-style-type: none"> 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 AZD0284 	<ul style="list-style-type: none"> FPCD: Q3 2016 LPCD: Q2 2017
			Part 2 (MAD) <ul style="list-style-type: none"> Three different dose levels investigated vs placebo in healthy subjects oral administration 	<ul style="list-style-type: none"> Safety and tolerability & PK in healthy subjects following administration of multiple ascending oral doses Proof of Mechanism (PoM) confirmed by demonstrating that oral dosing of AZD0284 reduces IL-17 secretion by ex vivo stimulated whole blood T cells 	<ul style="list-style-type: none"> FPCD: Q1 2017 LPCD: Q1 2017
Phase I NCT03029741	Healthy subjects	6	A Phase I, single centre, open-label, non-randomised, single dose study performed in 6 healthy male subjects aged 18 to 65 years, inclusive. The study will assess the absolute bioavailability of a single oral dose of AZD0284 and the pharmacokinetics (PK) of a single intravenous (IV) microdose of [14C]AZD0284 in healthy male and female subjects. Oral AZD0284 and [14C]AZD0284 intravenous solution are referred to as the investigational products in this study	<ul style="list-style-type: none"> Determination of absolute bioavailability of AZD0284 Safety and tolerability of AZD0284 	<ul style="list-style-type: none"> FPCD: Q1 2017 LPCD: Q1 2017



Early development - MedImmune Research & Early Development



Imfinzi (PD-L1 mAb)

Cancer

Approved medicines
 Late-stage development
 Early development - IMED
 Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Compound	Population	Patients	Design	Endpoints	Status
Phase I/II STUDY 1108 NCT01693562	<i>Imfinzi</i>	Solid tumours	1,022	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> Safety Optimal biologic dose Secondary endpoints include PK, immunogenicity and anti-tumour activity 	<ul style="list-style-type: none"> FPCD: Q3 2012 LPCD: Q4 2015 Data readout: Ongoing
Phase I NCT02117219	<i>Imfinzi</i> , azacitidine (Vidaza)	Myelodysplastic syndrome	73	Dose-escalation and dose-expansion trial <ul style="list-style-type: none"> Part 1: <i>Imfinzi</i> Part 2 Arm 1: <i>Imfinzi</i> and tremelimumab Part 2 Arm 2: <i>Imfinzi</i>, tremelimumab, and azacitidine Global trial – four countries	<ul style="list-style-type: none"> Safety and tolerability of monotherapy and combination Secondary endpoints include duration of response, PFS and OS, PK and immunogenicity 	<ul style="list-style-type: none"> FPCD: Q2 2014 Data anticipated: 2019
Phase 1 NCT02900157	<i>Imfinzi</i>	Solid tumours	42	Multi-centre, open-label, single-arm trial for adult subjects US and Japan trial centers	<ul style="list-style-type: none"> Safety, PK, number of subjects reporting infusion related reaction 	<ul style="list-style-type: none"> FPCD: Q3 2016 Data anticipated: 2019
Phase II HUDSON NCT03334617	<i>Imfinzi</i> <i>Lynparza</i> Vistusertib AZD6738 AZD9150	NSCLC	200	4 modules encompassing 10 cohorts Module 1; <i>Imfinzi</i> and <i>Lynparza</i> Module 2; <i>Imfinzi</i> and AZD9150 Module 3; <i>Imfinzi</i> and AZD6738 Module 4; <i>Imfinzi</i> and vistusertib Open-Label, Biomarker-Directed, Multi-Centre Phase II Umbrella Study in Patients with Non-Small Cell Lung Cancer, who Progressed on an anti-PD-1/PD-L1 Containing Therapy (HUDSON)	<ul style="list-style-type: none"> Primary outcome; Objective response rate (ORR). Secondary outcomes; efficacy including OS, PFS, DCR, and safety and tolerability 	<ul style="list-style-type: none"> FPCD: Q1 2018 Data anticipated: 2020



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

Cancer

Trial	Population	Patients	Design	Endpoints	Status
Phase Ib/II STUDY 21 NCT02340975	Gastric or GEJ adenocarcinoma	236	<ul style="list-style-type: none"> Arm A: <i>Imfinzi</i> + tremelimumab 2L Arm B: <i>Imfinzi</i> 2L Arm C: tremelimumab 2L Arm D: <i>Imfinzi</i> + tremelimumab 3L US and ROW trial centres	<ul style="list-style-type: none"> Primary endpoints: Safety & tolerability, ORR, PFS Secondary endpoints: DCR, OS, DoR, PD-L1 Expression 	<ul style="list-style-type: none"> FPCD: Q2 2015 Data anticipated: 2019
Phase Ib/II STUDY 22 NCT02519348	Hepatocellular Carcinoma	144	<ul style="list-style-type: none"> Arm A: <i>Imfinzi</i> + tremelimumab Arm B: <i>Imfinzi</i> 2L Arm C: tremelimumab 2L 	<ul style="list-style-type: none"> Primary endpoints: Safety & tolerability, ORR, PFS Secondary endpoints: DCR, OS, DoR, PD-L1 Expression 	<ul style="list-style-type: none"> FPCD: Q4 2015 Data anticipated: 2018
Phase Ib STUDY 006 NCT02000947	NSCLC (Immunotx naïve and Immunotx pretreated patient cohorts)	459	<ul style="list-style-type: none"> Dose Escalation: minimum 5 cohorts exploring various treme Q4W and <i>Imfinzi</i> 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	<ul style="list-style-type: none"> Primary endpoints: <ul style="list-style-type: none"> Safety Optimal biologic dose for the combination Secondary endpoints include Antitumour activity, PK and immunogenicity 	<ul style="list-style-type: none"> FPCD: Q4 2013 LPCD: H1 2017 Data anticipated: 2019
Phase I STUDY 10 NCT02261220	Solid tumours (Basket trial)	380	<ul style="list-style-type: none"> Dose Exploration: 2 cohorts exploring various Q4W treme and <i>Imfinzi</i> dose combinations and 2 cohorts exploring various Q2W treme and <i>Imfinzi</i> 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	<ul style="list-style-type: none"> Primary endpoints: <ul style="list-style-type: none"> Safety Optimal biologic dose for the combination Secondary endpoints include anti-tumour activity, PK/PD and immunogenicity 	<ul style="list-style-type: none"> FPCD: Q4 2014 LPCD: H1 2017 Data anticipated: H2 2018
Phase I STUDY 11 NCT02262741	HNSCC	71	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> Primary endpoint: Safety & tolerability Secondary endpoints: OR, DC, DoR, PFS, OS, PK/PD, immunogenicity and biomarkers 	<ul style="list-style-type: none"> FPCD: Q4 2014 LPCD: Q3 2016 Data readout: Q4 2017
Phase Ib STUDY 23 NCT02549651	Diffuse Large B cell Lymphoma	207	<ul style="list-style-type: none"> Arm A: <i>Imfinzi</i> Arm B: <i>Imfinzi</i> + tremelimumab Arm C: tremelimumab + AZD9150 US and European trial centres	<ul style="list-style-type: none"> Primary endpoint: Safety & tolerability Secondary endpoints: OR, DC, DoR, PFS, OS, PK/PD, immunogenicity and biomarkers 	<ul style="list-style-type: none"> FPCD: Q3 2016 Data anticipated: 2023

Imfinzi (PD-L1 mAb) + *Iressa* (gefitinib)

Non-small cell lung cancer (NSCLC)

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CV/RM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02088112	NSCLC (Escalation phase) EGFR M+ NSCLC naïve to EGFR-TKI therapy (Expansion phase)	56	Escalation phase Standard 3+3 design with 28 days DLT period • <i>Iressa</i> (QD) + <i>Imfinzi</i> IV Expansion phase • <i>Iressa</i> (QD) + <i>Imfinzi</i> IV recommended dose Global trial – three countries	Primary endpoints: • Safety • Optimal biologic dose for the combination • Secondary endpoints: tumour response (CR, PR, SD, PD), Objective response rate, disease control rate, progression- free survival, immunogenicity, pharmacokinetics, pharmacodynamics	<ul style="list-style-type: none"> • FPCD: Q2 2014 • LPCD: Q2 2015 • Data anticipated: 2019



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

Cancer

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02118337	Advanced malignancies (escalation phase) Renal cell carcinoma (RCC) (expansion phase)	96	Dose-escalation phase • <i>Imfinzi</i> IV + MEDI0680 IV Dose-expansion phase at selected dose from dose-escalation phase • <i>Imfinzi</i> IV + MEDI0680 IV recommended dose	Primary endpoints: • 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	• FPCD: Q2 2014 • Data anticipated: 2021
Phase I NCT02013804	Advanced malignancies (escalation phase)	58	Dose-escalation phase • MEDI0680 IV	• Primary endpoint: Safety & Tolerability • Secondary endpoints include tumour response such as objective response rate, immunogenicity, pharmacokinetics, pharmacodynamics	• FPCD: Q4 2013 • Data anticipated: Q2 2017



Imfinzi (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)	68	Dose Escalation: <ul style="list-style-type: none"> Cohort A: dabrafenib 150mg BiD/ trametinib 2mg QD/ <i>Imfinzi</i> IV Cohort B: trametinib 2mg QD/ <i>Imfinzi</i> IV Cohort C: trametinib 2mg QD/ <i>Imfinzi</i> IV Dose Expansion: <ul style="list-style-type: none"> Each cohort will be expanded at the MTD to enroll a total of 20 subjects per cohort Global trial – two countries	Primary endpoints: <ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> FPCD: Q1 2014 LPD: Q2 2015 Data anticipated: Q2 2018



Imfinzi (PD-L1 mAb) + oleclumab (MEDI9447, CD73 mAb)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02503774	Advanced malignancies	188	<p>Dose-escalation phase</p> <ul style="list-style-type: none"> oleclumab IV oleclumab IV + <i>Imfinzi</i> IV <p>Dose expansion phase</p> <ul style="list-style-type: none"> oleclumab IV recommended dose oleclumab IV recommended dose + <i>Imfinzi</i> IV <p>US and Australian trial centres</p>	<p>Primary endpoints:</p> <ul style="list-style-type: none"> Safety Determination of MTD <p>Secondary endpoints include preliminary anti-tumour activity, pharmacokinetics, pharmacodynamics, and immunogenicity</p>	<ul style="list-style-type: none"> FPCD: Q3 2015 Data anticipated: 2022



Imfinzi (PD-L1 mAb) + monalizumab (NKG2a mAb)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CV/RM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02671435	Advanced solid tumours	280	Escalation phase • monalizumab + <i>Imfinzi</i> IV Expansion phase • monalizumab + <i>Imfinzi</i> IV recommended dose Global Trial	Primary endpoints: • 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	• FPCD: Q2 2016 • Data anticipated: 2022



MEDI0457

+ *Imfinzi* (PD-L1 mAb)

Squamous cell carcinoma of the Head and Neck (SCCHN)

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase Ib/IIa NCT03162224	Human papillomavirus (HPV) Associated Recurrent/Metastatic Head and Neck Cancer	50	Multi-centre, open label study to evaluate the safety and efficacy of combination treatment with MEDI0457 and <i>Imfinzi</i>	Primary endpoints: Safety & Tolerability, ORR Secondary endpoints: PK, ADA, DCR, OS, PFS	<ul style="list-style-type: none">FPCD: 3Q 2017Data anticipated: 2019



MEDI0562 (OX40 mAb)

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

Cancer

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02318394	Advanced malignancies	106	Dose-escalation phase • MEDI0562 IV Dose-expansion phase • MEDI0562 IV recommended dose	Primary endpoints: • Safety • Determination of MTD • Secondary endpoint: preliminary anti-tumour activity, pharmacokinetics, biomarker activity, and immunogenicity	• FPCD: Q1 2015 • Data readout : Q1 2018
Phase I NCT02705482	Advanced malignancies	404	• Arm A: MEDI0562 IV + <i>Imfinzi</i> IV • Arm B: MEDI0562 IV + tremelimumab IV	• Primary endpoint: Safety • Secondary endpoint: preliminary anti-tumour activity, pharmacokinetics, and immunogenicity and pharmacodynamics	• FPCD: Q2 2016 • Data anticipated: 2020



MEDI1873 (GITR agonist)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02583165	Adult subjects with select advanced solid tumours	51	Dose-escalation phase • MEDI1873 IV US trial centres	Primary endpoints: • Safety • Determination of MTD • Secondary endpoints: preliminary anti-tumour activity, pharmacokinetics, pharmacodynamics, and immunogenicity	• FPCD: Q4 2015 • Data anticipated: 2021



MEDI2228

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03489525	Relapsed/Refractory Multiple Myeloma	129	First-time-in-human Phase 1, multi-centre, open-label, single-arm, dose-escalation, and dose-expansion trial for adult subjects	Primary endpoints: <ul style="list-style-type: none">• Safety• Determination of MTD Secondary endpoints: pharmacokinetics, immunogenicity, ORR, DoR, PFS, OS	<ul style="list-style-type: none">• FPCD: Planning Q2 2018

Oncology

CVRM

Respiratory

Other



MEDI3726 (PSMA antibody drug conjugate)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I/II NCT02991911	Subjects with metastatic castration resistant prostate cancer	224	Open-label, Dose-escalation and Dose-expansion <ul style="list-style-type: none">Three arm study<ul style="list-style-type: none">Post-chemoPre-chemoMEDI3726+Enzalutamide	Primary endpoint: <ul style="list-style-type: none">Safety Secondary endpoints <ul style="list-style-type: none">RECIST responsePSA50 responseCTC responsePharmacokinetics, and immunogenicity	<ul style="list-style-type: none">FPCD: Q1 2017



MEDI4276 (HER2 ADC mAb)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02576548	Advanced HER2+ metastatic breast and gastric cancer	Dose escalation Up to 66 Dose expansion Up to 150	<ul style="list-style-type: none">First-time-in-human Phase 1, multi-centre, open-label, single-arm, dose-escalation, and dose-expansion trial for adult subjects	<ul style="list-style-type: none">Primary endpoint: safetySecondary endpoints: anti-tumour activity, overall response, disease control, PFS, OS and change from baseline tumour size	<ul style="list-style-type: none">FPCD: Q4 2015Data anticipated: 2019



MEDI5083 + *Imfinzi* (PD-L1 mAb)

Cancer

Approved medicines
Late-stage development
Early development - IMED
Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03089645	Advanced Solid Tumours	204	<p>Dose-escalation phase</p> <ul style="list-style-type: none">• Part 1: MEDI5083• Part 2: MEDI5083 + <i>Imfinzi</i> IV <p>Dose expansion phase</p> <ul style="list-style-type: none">• Part 3: MEDI5083 recommended dose + <i>Imfinzi</i> IV <p>US and Australian trial centres</p>	<p>Primary-endpoints:</p> <ul style="list-style-type: none">• Safety• Determination of MTD <p>• Secondary endpoints: preliminary anti-tumour activity, pharmacokinetics, pharmacodynamics, and immunogenicity</p>	<ul style="list-style-type: none">• FPCD: Q1 2017• Data anticipated: 2022

Oncology

CVRM

Respiratory

Other



MEDI7247 (PBD ADC mAb)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03106428	Relapsed/Refractory Haematological Malignancies	228	First-time-in-human Phase 1, multi-centre, open-label, single-arm, dose-escalation, and dose-expansion trial for adult subjects	<ul style="list-style-type: none">Primary endpoint: safetySecondary endpoints: Pharmacokinetics, immunogenicity and anti-tumour activity	<ul style="list-style-type: none">FPCD: Q2 2017Data anticipated: 2020



MEDI9197 (TLR7/8 agonist)

Cancer

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02556463	Advanced solid tumour malignancies readily accessible for injection	135	Dose-escalation phase <ul style="list-style-type: none">• MEDI9197 IT• MEDI9197 IT + <i>Imfinzi</i>• MEDI9197 IT + <i>Imfinzi</i> + palliative radiation Global trial – three countries	Primary-endpoints: <ul style="list-style-type: none">• Safety• Determination of MTD Secondary endpoints include: <ul style="list-style-type: none">– Objective response, disease control and duration of response– Intratumoural and systemic PK and PD profiles/relationships	<ul style="list-style-type: none">• FPCD: Q4 2015• Data anticipated: 2021



MEDI0382 (GLP-1-glucagon agonist)

Diabetes

Approved medicines
Late-stage development
Early development - IMED
Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02394314 Completed	Healthy adult subjects	64	<ul style="list-style-type: none"> SAD SC administration Germany 	<ul style="list-style-type: none"> Safety profile in terms of adverse events (AE), vital signs, ECG, telemetry, lab variables, nausea, immunogenicity and physical examination 	<ul style="list-style-type: none"> FPCD: Q1 2015 LPCD: Q4 2015 Data readout: Q4 2015
Phase II NCT02548585 Completed	Adults with type-2 diabetes	113	<ul style="list-style-type: none"> MAD SC administration Germany 	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> FPCD: Q1 2016 LPCD: Q1 2017 Data readout: Q1 2017
Phase II NCT03244800	Adults with type-2 diabetes	65	<ul style="list-style-type: none"> ARM1: MEDI0382 SC or placebo ARM2: MEDI0382 SC or placebo Germany 	<ul style="list-style-type: none"> Efficacy: MMT glucose AUC, body weight loss, HbA1c, fasting plasma glucose Safety profile in terms of adverse events (AE), heart rate, blood pressure, vital signs, ECG, lab variables 	<ul style="list-style-type: none"> FPCD: Q3 2017 LPCD: Q4 2017 Data readout: Q1 2018
Phase II NCT03235050	Overweight and Obese subjects with type-2 diabetes	834	<ul style="list-style-type: none"> ARM1: MEDI0382 low dose SC + metformin ARM2: MEDI0382 mid dose SC + metformin ARM3: MEDI0382 high dose SC + metformin ARM4: placebo SC + metformin ARM5: liraglutide SC + metformin US, Canada, Bulgaria, Czech Rep, Germany, Mexico, Russia, Slovakia 	<ul style="list-style-type: none"> Efficacy; HbA1c, body weight loss Percentage of subjects achieving weight loss of $\geq 5\%$ and $\geq 10\%$ Proportion of subjects rescued or discontinued for lack of glycaemic control PK and immunogenicity 	<ul style="list-style-type: none"> FPCD: Q3 2017 LPCD: Q1 2018
Phase I NCT03235375	Adults with renal impairment	37	<ul style="list-style-type: none"> ARM1: Subjects with CrCl < 20ml/min MEDI082 SC ARM2: Subjects with CrCl 20-30ml/min MEDI0382 SC ARM3: Subjects with CrCl > 90ml/min MEDI0382 SC 	<ul style="list-style-type: none"> PK, safety, tolerability and immunogenicity 	<ul style="list-style-type: none"> FPCD: Q3 2017 LPCD: Q1 2018



MEDI0382 (GLP-1-glucagon agonist)

Diabetes

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03347968	Healthy adult subjects	22	<ul style="list-style-type: none"> Open label, one sequence, cross-over MEDI0382 with warfarin and esmolol US 	<ul style="list-style-type: none"> Effect of MEDI0382 on PK & PD of warfarin & esmolol Safety profile Immunogenicity 	<ul style="list-style-type: none"> FPCD: Q4 2017 LPCD: Q1 2018
Phase I NCT03341013	Healthy adult subjects	24	<ul style="list-style-type: none"> Open label, cross-over, two period Single dose MEDI0382 formulation 2 SC Single dose MEDI0382 formulation 3 SC US 	<ul style="list-style-type: none"> PK Safety profile Immunogenicity 	<ul style="list-style-type: none"> FPCD: Q4 2017 LPCD: Q4 2017
Phase I NCT03385369	Overweight/obese subjects of Japanese or Chinese descent	32	<ul style="list-style-type: none"> ARM1: Single low dose of MEDI0382 or placebo (Japanese) ARM2: Single intermediate-low dose of MEDI0382 or placebo (Japanese) ARM3: Single intermediate-high dose of MEDI0382 or placebo (Japanese) ARM4: Single high dose of MEDI0382 or placebo (Japanese) ARM5: Single intermediate-low dose of MEDI0382 or placebo US 	<ul style="list-style-type: none"> Safety profile Tolerability PK Immunogenicity 	<ul style="list-style-type: none"> FPCD: Q1 2018 LPCD: Q2 2018
Phase II NCT03444584	Overweight/obese subjects with type-2 diabetes	46	<ul style="list-style-type: none"> ARM1: MEDI0382 + Dapagliflozin ARM2: Placebo + Dapagliflozin 	<ul style="list-style-type: none"> Efficacy: MMT glucose AUC Safety PK Immunogenicity 	<ul style="list-style-type: none"> FPCD: planned Q3 2018



MEDI7219

Diabetes

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT03362593	Healthy Volunteers	106	<ul style="list-style-type: none">• 4 part study• Part A : SAD• Part B & C : open label, single dose studies• Part D : MAD	<ul style="list-style-type: none">• Safety and tolerability• Pharmacokinetics	<ul style="list-style-type: none">• FPCD: Q1 2018• Data anticipated: H2 2018



Biologics

Cardiovascular & metabolic diseases

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

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	<ul style="list-style-type: none"> SAD in stable CAD patients 	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> FPCD: Q4 2015 LPCD: Q2 2016 Data readout: Q4 2016
Phase IIa NCT03004638		Adults with Stable Atherosclerotic Cardiovascular Disease (ACD)	32	<ul style="list-style-type: none"> MAD in stable ACD patients 	<ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> FPCD: Q1 2017 Data readout: Q4 2017
Phase I NCT03001297	MEDI5884 Cholesterol modulation	Healthy Volunteers	64	<ul style="list-style-type: none"> SAD SC administration 	<ul style="list-style-type: none"> Safety profile in terms of adverse events (AE), vital signs, ECG, lab variables Changes in HDL-C over time 	<ul style="list-style-type: none"> FPCD Q1 2017 LPCD Q3 2017 Data anticipated: H2 2018
Phase IIa NCT03351738		Adults With Stable Coronary Heart Disease (CHD)	120	<ul style="list-style-type: none"> MEDI5884 (5 dose cohorts) vs Placebo in stable CHD patients 	<ul style="list-style-type: none"> Safety profile in terms of adverse events (AE), vital signs, ECG, lab variables Changes in HDL-C over time PK, immunogenicity, and Apolipoprotein B 	<ul style="list-style-type: none"> FPCD Q4 2017 Data anticipated: H2 2018



MEDI3506 (IL-33 mAb)

COPD

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase I (Combined SAD / MAD) NCT03096795	SAD: Healthy subjects with mild atopy MAD: COPD	SAD: 56 MAD: 24	SAD: <ul style="list-style-type: none">7 sequential placebo-controlled single dose cohorts (active N=6 / placebo N = 2 within each cohort)Dose levels: 1mg SC, 3 mg SC, 10 mg SC, 30 mg SC, 100 mg SC, 300 mg SC and 300 mg IV MAD: <ul style="list-style-type: none">3 sequential placebo-controlled multiple dosing cohorts (active N=6 / placebo N = 2 within each cohort)Dose levels: 30 mg SC, 100 mg SC and 300 mg SC	<ul style="list-style-type: none">Safety and tolerability	<ul style="list-style-type: none">FPCD: Q2 2017LPD: Q3 2018Data anticipated: 2019

Oncology

CVRM

Respiratory

Other



MEDI7836 (IL-13 mAb)

Asthma

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Oncology

CVRM

Respiratory

Other

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02388347	Healthy subjects	32	<ul style="list-style-type: none">• 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	<ul style="list-style-type: none">• Safety and tolerability	<ul style="list-style-type: none">• FPCD: Q1 2015• LPCD: Q3 2015• Data readout: Q1 2016



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

Systemic lupus erythematosus (SLE)

Approved medicines
Late-stage development
Early development - IMED
Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase Ia NCT02618967 Partnered	Healthy subjects	48	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	• FPCD: Q1 2016 • Data anticipated: H2 2018

Oncology

CV/RM

Respiratory

Other



MEDI1814 (amyloid beta mAb)

Alzheimer's disease

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02036645	Alzheimer's disease & healthy elderly	121	<ul style="list-style-type: none">SAD & MADUp to 10 IV cohorts are planned vs placebo2 SC cohorts are planned vs placebo US only	<ul style="list-style-type: none">Safety, tolerability	<ul style="list-style-type: none">FPCD: Q2 2014LPCD: Q2 2016Data readout: Q4 2016

Oncology

CVRM

Respiratory

Other



MEDI5872 - AMG 557 (B7RP-1 mAb)

Systemic lupus erythematosus (SLE)

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase IIa NCT02334306 Partnered	Primary Sjögren's syndrome	42	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> Safety and tolerability Change in the ESSDAI score from baseline to Day 99 	<ul style="list-style-type: none"> FPCD: Q3 2015 Data anticipated: H2 2018
Phase I NCT01683695 Partnered Completed	SLE and lupus related inflammatory arthritis	20	Dose escalation trial: <ul style="list-style-type: none"> Arm 1: MEDI5872 SC Arm 2: placebo SC Global trial – eight countries	<ul style="list-style-type: none"> Safety and tolerability Lupus Arthritis Response Rate 	<ul style="list-style-type: none"> FPCD: Q2 2012 LPCD: Q4 2015 Data readout: Q2 2016

Oncology

CV/RM

Respiratory

Other



MEDI7352 (NGF TNF bispecific)

Osteoarthritis pain

Approved medicines

Late-stage development

Early development - IMED

Early development - MedImmune

Trial	Population	Patients	Design	Endpoints	Status
Phase I NCT02508155	Painful osteoarthritis of the knee	160	<ul style="list-style-type: none">SAD & MADUp to 10 IV cohorts are planned vs placebo2 SC cohorts are planned vs placebo Europe only	<ul style="list-style-type: none">Safety, tolerability, PK, PD	<ul style="list-style-type: none">FPCD: Q1 2016Data anticipated: Q2 2018

Oncology

CVRM

Respiratory

Other



Other biologics

Infections

Approved medicines
Late-stage development
Early development - IMED
Early development - MedImmune

Trial	Compound	Population	Patients	Design	Endpoints	Status
Phase II EudraCT 2014-001097-34	Anti-Staph AT (MEDI4893)	Intubated ICU	285	<ul style="list-style-type: none"> Placebo-controlled, single-dose, dose-ranging Route of administration: intravenous 	<ul style="list-style-type: none"> Efficacy and safety 	<ul style="list-style-type: none"> FPCD: Q4 2014 Data anticipated: 2019
Phase IIb NCT02878330	Anti-Respiratory Syncytial Virus mAb-YTE (MEDI8897)	29-35 WK GA infants	1,453	<ul style="list-style-type: none"> Randomised, double-blind, placebo-controlled trial Route of administration: IM 	<ul style="list-style-type: none"> Safety and efficacy 	<ul style="list-style-type: none"> FPCD: Q4 2016 Data anticipated: 2019
Phase Ib/Ila NCT02290340 Completed		32-35 WK GA infants	89	<ul style="list-style-type: none"> Randomised, double-blind, placebo-controlled, Dose-escalation trial Route of administration: IM 	<ul style="list-style-type: none"> Evaluate Safety, tolerability, PK and ADA 	<ul style="list-style-type: none"> FPCD: Q1 2015 LPCD: Q3 2015 Data readout: Q3 2016
Phase Ia NCT02114268 Completed		Healthy adults	136	<ul style="list-style-type: none"> Randomised, double-blind, placebo-controlled, Dose-escalation trial Route of administration: IV and IM 	<ul style="list-style-type: none"> Evaluate Safety, tolerability, PK and ADA 	<ul style="list-style-type: none"> FPCD: Q2 2014 LPCD: Q2 2014 Data readout: Q2 2015
Phase Ib/Ila NCT02603952 Completed	Anti-influenza A mAb (MEDI8852)	Adults	126	<ul style="list-style-type: none"> Randomised, partial double-blind, single dose, active-controlled, dose ranging trial Route of administration: intravenous 	<ul style="list-style-type: none"> Evaluate safety in adults with acute, uncomplicated Influenza 	<ul style="list-style-type: none"> FPCD: Q4 2015 LPCD: Q4 2016 Data readout: Q4 2016
Phase I NCT02350751 Completed		Healthy adults	40	<ul style="list-style-type: none"> Double-blind, single-dose, placebo-controlled, dose-escalation trial Route of administration: intravenous 	<ul style="list-style-type: none"> Evaluate the safety and pharmacokinetics 	<ul style="list-style-type: none"> FPCD: Q1 2015 LPCD: Q1 2015 Data readout: Q2 2015
Phase I NCT02255760 Completed	Anti-Pseudomonas A mAb (MEDI3902)	Healthy adults	56	<ul style="list-style-type: none"> Randomised, double-blind, placebo-controlled, dose-escalation trial Route of administration: intravenous 	<ul style="list-style-type: none"> Evaluate the safety, tolerability, and pharmacokinetics 	<ul style="list-style-type: none"> FPCD: Q3 2014 LPCD: Q1 2015 Data readout: Q2 2015
Phase II NCT02696902		Intubated ICU	429	<ul style="list-style-type: none"> Placebo-controlled, single-dose, dose-ranging Route of administration: intravenous 	<ul style="list-style-type: none"> Efficacy and safety 	<ul style="list-style-type: none"> FPCD: Q2 2016 Data anticipated: 2021



Clinical trials appendix

Q1 2018 Results update

