

Immune-mediated facial paresis

Facial paresis occurred in < 0.1% (1/4 739) of patients who received atezolizumab monotherapy. The time to onset was 29 days. The duration was 1.1 months. The event did not require the use of corticosteroids and the event did not lead to discontinuation of atezolizumab.

Immune-mediated myelitis

Myelitis occurred in < 0.1% (1/4 739) of patients who received atezolizumab monotherapy. The time to onset was 3 days. The event required the use of corticosteroids but did not lead to discontinuation of atezolizumab.

Myasthenic syndrome

Myasthenia gravis occurred in < 0.1% (1/4 739) of patients who received atezolizumab monotherapy. The time to onset was 1.2 months.

Immune-mediated pancreatitis

Pancreatitis, including amylase increased and lipase increased, occurred in 0.8% (37/4 739) of patients who received atezolizumab monotherapy. The median time to onset was 5.5 months (range: 1 day to 24.8 months). The median duration was 1 month (range: 3 days to 40.4+ months; + denotes a censored value). Pancreatitis led to the discontinuation of atezolizumab in 3 (< 0.1%) patients. Pancreatitis requiring the use of corticosteroids occurred in 0.1% (7/4 739) of patients receiving atezolizumab monotherapy.

Immune-mediated myocarditis

Myocarditis occurred in < 0.1% (4/4 739) of patients who received atezolizumab monotherapy. Of the 4 patients, one experienced a fatal event in the adjuvant NSCLC setting. The median time to onset was 3.4 months (range: 1.5 to 4.9 months). The median duration was 15 days (range: 12 days to 2.8 months). Myocarditis led to the discontinuation of atezolizumab in 3 (< 0.1%) patients. Two (< 0.1%) patients required the use of corticosteroids.

Immune-mediated nephritis

Nephritis occurred in 0.2% (11/4 739) of patients who received atezolizumab. The median time to onset was 5.1 months (range: 3 days to 17.5 months). Nephritis led to discontinuation of atezolizumab in 5 (0.1%) patients. Five (0.1%) patients required the use of corticosteroids.

Immune-mediated myositis

Myositis occurred in 0.5% (25/4 739) of patients who received atezolizumab monotherapy. The median time to onset was 3.5 months (range: 12 days to 11.5 months). The median duration was 3.2 months (range: 9 days to 51.1+ months; + denotes a censored value). Myositis led to discontinuation of atezolizumab in 6 (0.1%) patients. Seven (0.1%) patients required the use of corticosteroids.

Immune-mediated severe cutaneous adverse reactions

Severe cutaneous adverse reactions (SCARs) occurred in 0.6% (30/4 739) of patients who received atezolizumab monotherapy. Of the 30 patients, one experienced a fatal event. The median time to onset was 4.8 months (range: 3 days to 15.5 months). The median duration was 2.4 months (range: 1 day to 37.5+ months; + denotes a censored value). SCARs led to discontinuation of atezolizumab in 3