



## Clinical trial results:

### A Phase 3 Randomized, Double-Blind, Active-Controlled, Multicenter Study of the Long-Term Safety and Efficacy of Subcutaneous Administration of Tanezumab in Subjects With Osteoarthritis of the hip or Knee

#### Summary

EudraCT number	2012-003721-22
Trial protocol	BG SK LT HR
Global end of trial date	27 February 2019

#### Results information

Result version number	v1 (current)
This version publication date	12 March 2020
First version publication date	12 March 2020

#### Trial information

##### Trial identification

Sponsor protocol code	A4091058
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##### Additional study identifiers

ISRCTN number	-
ClinicalTrials.gov id (NCT number)	NCT02528188
WHO universal trial number (UTN)	-

Notes:

##### Sponsors

Sponsor organisation name	Pfizer Inc.
Sponsor organisation address	235 E 42nd Street, New York, United States, NY 10017
Public contact	Pfizer ClinicalTrials.gov Call Center, Pfizer Inc., 001 18007181021, ClinicalTrials.gov_Inquiries@pfizer.com
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Notes:

##### Paediatric regulatory details

Is trial part of an agreed paediatric investigation plan (PIP)	No
Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial?	No
Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial?	No

Notes:

##### Results analysis stage

Analysis stage	Final
Date of interim/final analysis	27 February 2019

Is this the analysis of the primary completion data?	No
Global end of trial reached?	Yes
Global end of trial date	27 February 2019
Was the trial ended prematurely?	No

Notes:

## General information about the trial

Main objective of the trial:

To characterize the long-term risk of joint safety events in subjects with osteoarthritis of the knee or hip who received tanezumab 2.5 milligram (mg) or tanezumab 5 mg subcutaneously (SC) versus nonsteroidal anti-inflammatory drugs (NSAIDs) treatment (naproxen 500 mg twice in a day [BID], celecoxib 100 mg BID, or diclofenac extended release [ER] 75 mg BID) over the course of 56-weeks of treatment using a composite endpoint (includes adjudication outcomes of rapidly progressive osteoarthritis type-1 or type-2, subchondral insufficiency fracture (SPONK), primary osteonecrosis, or pathological fracture) and to demonstrate superior efficacy of tanezumab 2.5 mg and tanezumab 5 mg SC versus NSAID treatment (naproxen 500 mg BID, celecoxib 100 mg BID, or diclofenac ER 75 mg BID) at Week 16.

Protection of trial subjects:

The study was in compliance with the ethical principles derived from the Declaration of Helsinki and in compliance with all International Council for Harmonisation (ICH) Good Clinical Practice (GCP) Guidelines. All the local regulatory requirements pertinent to safety of trial subjects were followed.

Background therapy: -

Evidence for comparator: -

Actual start date of recruitment	21 July 2015
Long term follow-up planned	No
Independent data monitoring committee (IDMC) involvement?	Yes

Notes:

## Population of trial subjects

### Subjects enrolled per country

Country: Number of subjects enrolled	Slovakia: 4
Country: Number of subjects enrolled	Taiwan: 6
Country: Number of subjects enrolled	Ukraine: 78
Country: Number of subjects enrolled	United States: 2350
Country: Number of subjects enrolled	Australia: 49
Country: Number of subjects enrolled	Brazil: 67
Country: Number of subjects enrolled	Bulgaria: 28
Country: Number of subjects enrolled	Colombia: 3
Country: Number of subjects enrolled	Croatia: 1
Country: Number of subjects enrolled	Japan: 200
Country: Number of subjects enrolled	Korea, Republic of: 34
Country: Number of subjects enrolled	Lithuania: 13
Country: Number of subjects enrolled	New Zealand: 50
Country: Number of subjects enrolled	Peru: 36
Country: Number of subjects enrolled	Philippines: 4
Country: Number of subjects enrolled	Russian Federation: 28
Country: Number of subjects enrolled	Serbia: 45
Worldwide total number of subjects	2996
EEA total number of subjects	46

Notes:

<b>Subjects enrolled per age group</b>	
In utero	0
Preterm newborn - gestational age < 37 wk	0
Newborns (0-27 days)	0
Infants and toddlers (28 days-23 months)	0
Children (2-11 years)	0
Adolescents (12-17 years)	0
Adults (18-64 years)	1986
From 65 to 84 years	997
85 years and over	13

## Subject disposition

### Recruitment

Recruitment details: -

### Pre-assignment

Screening details:

A total of 3021 subjects were enrolled into the study. 2996 subjects received study treatment.

### Period 1

Period 1 title	Overall Study (overall period)
Is this the baseline period?	Yes
Allocation method	Randomised - controlled
Blinding used	Double blind
Roles blinded	Investigator, Subject

### Arms

Are arms mutually exclusive?	Yes
<b>Arm title</b>	Tanezumab 2.5 mg

Arm description:

Tanezumab (RN624 or PF-04383119) 2.5 mg injection administered SC once every 8 weeks, from Baseline (Day 1) up to Week 48 and oral placebo tablets matched to naproxen, celecoxib or diclofenac ER, BID, from Baseline up to Week 56.

Arm type	Experimental
Investigational medicinal product name	Tanezumab
Investigational medicinal product code	RN624 or PF-04383119
Other name	
Pharmaceutical forms	Injection
Routes of administration	Subcutaneous use

Dosage and administration details:

Subjects received 2.5 mg injection SC once every 8 weeks

<b>Arm title</b>	Tanezumab 5 mg
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Arm description:

Tanezumab (RN624 or PF-04383119) 5 mg injection administered SC once every 8 weeks, from Baseline up to Week 48 and oral placebo tablets matched to naproxen, celecoxib or diclofenac ER, twice daily, from Baseline up to week 56.

Arm type	Experimental
Investigational medicinal product name	Tanezumab
Investigational medicinal product code	RN624 or PF-04383119
Other name	
Pharmaceutical forms	Injection
Routes of administration	Subcutaneous use

Dosage and administration details:

Subjects received 5 mg injection SC once every 8 weeks

<b>Arm title</b>	NSAID
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Arm description:

Non-steroidal anti-inflammatory drug (NSAID) tablets (naproxen 500 mg, celecoxib 100 mg, or diclofenac ER 75 mg), administered orally, twice daily, from Baseline up to week 56 and placebo matched to tanezumab (RN624 or PF-04383119) injection administered SC once every 8 weeks, from Baseline up to Week 48.

Arm type	Experimental
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Investigational medicinal product name	Naproxen 500 mg, Celecoxib 100 mg, or diclofenac ER 75 mg
Investigational medicinal product code	
Other name	
Pharmaceutical forms	Tablet
Routes of administration	Oral use

Dosage and administration details:

Subjects received Naproxen 500 mg, celecoxib 100 mg, or diclofenac ER 75 mg tablet orally, twice daily.

<b>Number of subjects in period 1</b>	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID
Started	1002	998	996
Completed	741	729	757
Not completed	261	269	239
Protocol deviation	4	6	4
Lack of efficacy	19	21	22
Adverse event, serious fatal	4	4	-
Adverse event, non-fatal	23	22	8
Unspecified	89	91	74
Consent withdrawn by subject	97	104	100
Lost to follow-up	25	21	31

## Baseline characteristics

### Reporting groups

Reporting group title	Tanezumab 2.5 mg
Reporting group description: Tanezumab (RN624 or PF-04383119) 2.5 mg injection administered SC once every 8 weeks, from Baseline (Day 1) up to Week 48 and oral placebo tablets matched to naproxen, celecoxib or diclofenac ER, BID, from Baseline up to Week 56.	
Reporting group title	Tanezumab 5 mg
Reporting group description: Tanezumab (RN624 or PF-04383119) 5 mg injection administered SC once every 8 weeks, from Baseline up to Week 48 and oral placebo tablets matched to naproxen, celecoxib or diclofenac ER, twice daily, from Baseline up to week 56.	
Reporting group title	NSAID
Reporting group description: Non-steroidal anti-inflammatory drug (NSAID) tablets (naproxen 500 mg, celecoxib 100 mg, or diclofenac ER 75 mg), administered orally, twice daily, from Baseline up to week 56 and placebo matched to tanezumab (RN624 or PF-04383119) injection administered SC once every 8 weeks, from Baseline up to Week 48.	

Reporting group values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID
Number of subjects	1002	998	996
Age categorical Units: Subjects			
In utero	0	0	0
Preterm newborn infants (gestational age < 37 wks)	0	0	0
Newborns (0-27 days)	0	0	0
Infants and toddlers (28 days-23 months)	0	0	0
Children (2-11 years)	0	0	0
Adolescents (12-17 years)	0	0	0
Adults (18-64 years)	673	637	676
From 65-84 years	325	356	316
85 years and over	4	5	4
Age Continuous Units: years			
arithmetic mean	60.30	61.15	60.25
standard deviation	± 9.17	± 9.57	± 9.46
Sex: Female, Male Units: Subjects			
Female	637	654	662
Male	365	344	334
Race (NIH/OMB) Units: Subjects			
American Indian or Alaska Native	0	0	0
Asian	110	95	99
Native Hawaiian or Other Pacific Islander	0	0	0
Black or African American	166	162	186
White	705	712	680
More than one race	0	0	0

Unknown or Not Reported	21	29	31
Ethnicity (NIH/OMB)			
Units: Subjects			
Hispanic or Latino	181	179	192
Not Hispanic or Latino	821	819	804
Unknown or Not Reported	0	0	0

<b>Reporting group values</b>	Total		
Number of subjects	2996		
Age categorical			
Units: Subjects			
In utero	0		
Preterm newborn infants (gestational age < 37 wks)	0		
Newborns (0-27 days)	0		
Infants and toddlers (28 days-23 months)	0		
Children (2-11 years)	0		
Adolescents (12-17 years)	0		
Adults (18-64 years)	1986		
From 65-84 years	997		
85 years and over	13		
Age Continuous			
Units: years			
arithmetic mean			
standard deviation	-		
Sex: Female, Male			
Units: Subjects			
Female	1953		
Male	1043		
Race (NIH/OMB)			
Units: Subjects			
American Indian or Alaska Native	0		
Asian	304		
Native Hawaiian or Other Pacific Islander	0		
Black or African American	514		
White	2097		
More than one race	0		
Unknown or Not Reported	81		
Ethnicity (NIH/OMB)			
Units: Subjects			
Hispanic or Latino	552		
Not Hispanic or Latino	2444		
Unknown or Not Reported	0		

## End points

### End points reporting groups

Reporting group title	Tanezumab 2.5 mg
Reporting group description: Tanezumab (RN624 or PF-04383119) 2.5 mg injection administered SC once every 8 weeks, from Baseline (Day 1) up to Week 48 and oral placebo tablets matched to naproxen, celecoxib or diclofenac ER, BID, from Baseline up to Week 56.	
Reporting group title	Tanezumab 5 mg
Reporting group description: Tanezumab (RN624 or PF-04383119) 5 mg injection administered SC once every 8 weeks, from Baseline up to Week 48 and oral placebo tablets matched to naproxen, celecoxib or diclofenac ER, twice daily, from Baseline up to week 56.	
Reporting group title	NSAID
Reporting group description: Non-steroidal anti-inflammatory drug (NSAID) tablets (naproxen 500 mg, celecoxib 100 mg, or diclofenac ER 75 mg), administered orally, twice daily, from Baseline up to week 56 and placebo matched to tanezumab (RN624 or PF-04383119) injection administered SC once every 8 weeks, from Baseline up to Week 48.	

### Primary: Percentage of Subjects With Adjudicated Primary Composite Joint Safety Outcome

End point title	Percentage of Subjects With Adjudicated Primary Composite Joint Safety Outcome
End point description: Any subject with incidence of an adjudicated outcome of primary osteonecrosis, rapidly progressive osteoarthritis (OA) type 1 or type 2, subchondral insufficiency fracture, or pathological fracture. Rapidly progressive OA type 1 events were those that the Adjudication Committee considered to have significant loss of joint space width (JSW) (greater than or equal to [ $\geq$ ] 2 millimeters [mm]) within approximately 1 year without gross structural failure. Rapidly progressive OA type 2 events were those considered to have abnormal loss/destruction of bone including limited or total collapse of at least one subchondral surface (e.g., medial femoral condyle) that is not normally present in conventional end-stage OA. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).	
End point type	Primary
End point timeframe: Baseline up to Week 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: percentage of subjects				
number (confidence interval 95%)	3.9 (2.8 to 5.3)	7.1 (5.6 to 8.9)	1.5 (0.8 to 2.5)	

### Statistical analyses



<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0123
Method	Exact methods for risk difference
Parameter estimate	Risk difference (RD)
Point estimate	2.39
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.58
upper limit	4.68

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Exact methods for risk difference
Parameter estimate	Risk difference (RD)
Point estimate	5.61
Confidence interval	
level	95 %
sides	2-sided
lower limit	3.55
upper limit	8.14

### **Primary: Observation Time-Adjusted Event Rate of Subjects With Adjudicated Primary Composite Joint Safety Outcome**

End point title	Observation Time-Adjusted Event Rate of Subjects With Adjudicated Primary Composite Joint Safety Outcome
End point description:	
Observation time was defined as the start day of first SC study medication until either the (i) date of completion of or withdrawal from study, if a subject did not have the event, or (ii) date of the event (earliest event within each subject in the case of multiple events). Primary joint safety outcome included subjects with adjudicated outcome of primary osteonecrosis, rapidly progressive OA type 1 or type 2, subchondral insufficiency fracture, or pathological fracture. Event rate was calculated as the number of events per 1000 subject-years at risk. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).	
End point type	Primary
End point timeframe:	
Baseline up to Week 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: events per 1000 subject-years				
number (confidence interval 95%)	38.3 (28.0 to 52.5)	71.5 (56.7 to 90.2)	14.8 (8.9 to 24.6)	

### Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0012
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	23.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	9.3
upper limit	37.7

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	56.7
Confidence interval	
level	95 %
sides	2-sided
lower limit	38.4
upper limit	74.9

### Primary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Week 16

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Week 16
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**End point description:**

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. The WOMAC pain subscale is a 5-item questionnaire used to assess the amount of pain experienced due to OA of index joint (knee or hip) during past 48 hours. It was calculated as the mean of scores from 5 individual questions, which may not be a whole (integer) number, scored on a numerical rating scale (NRS). Scores for each question and WOMAC Pain subscale score on NRS ranged from 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. Intent to treat (ITT) population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Primary
End point timeframe:	
Baseline, Week 16	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
least squares mean (standard error)	-3.22 (± 0.11)	-3.33 (± 0.11)	-3.07 (± 0.11)	

**Statistical analyses**

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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**Statistical analysis description:**

Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. analysis of covariance (ANCOVA) model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority <sup>[1]</sup>
P-value	= 0.1597
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.15
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.36
upper limit	0.06
Variability estimate	Standard error of the mean
Dispersion value	0.11

**Notes:**

[1] - A graphical testing procedure was applied to maintain Type I error. Tanezumab 5 mg versus NSAID was tested first and if all primary endpoints were found significant, then the testing was continued for Tanezumab 2.5 mg versus NSAID and the key secondary endpoint ( $\geq 50\%$  reduction from baseline in WOMAC Pain at Week 16). Primary endpoints were tested sequentially within a dose in order of WOMAC pain, WOMAC physical function, and Patient's Global Assessment (PGA).

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority <sup>[2]</sup>
P-value	= 0.0148
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.26
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.46
upper limit	-0.05
Variability estimate	Standard error of the mean
Dispersion value	0.11

Notes:

[2] - A graphical testing procedure was applied to maintain Type I error. Tanezumab 5 mg versus NSAID was tested first and if all primary endpoints were found significant, then the testing was continued for Tanezumab 2.5 mg versus NSAID and the key secondary endpoint ( $\geq 50\%$  reduction from baseline in WOMAC Pain at Week 16). Primary endpoints were tested sequentially within a dose in order of WOMAC pain, WOMAC physical function, and PGA.

### **Primary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Week 16**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Week 16
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End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Physical function refers to subject's ability to move around and perform usual activities of daily living. The WOMAC physical function subscale is a 17-item questionnaire used to assess the degree of difficulty experienced due to OA in index joint (knee or hip) during past 48 hours. It was calculated as mean of the scores from 17 individual questions, which may not be a whole (integer) number, scored on a NRS. Scores for each question and WOMAC physical function subscale score on NRS ranged from 0 (no difficulty) to 10 (extreme difficulty), where higher scores indicated extreme difficulty/worse physical function. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Primary
End point timeframe:	
Baseline, Week 16	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
least squares mean (standard error)	-3.27 ( $\pm$ 0.11)	-3.39 ( $\pm$ 0.11)	-3.08 ( $\pm$ 0.11)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority <sup>[3]</sup>
P-value	= 0.0691
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.4
upper limit	0.02
Variability estimate	Standard error of the mean
Dispersion value	0.11

Notes:

[3] - A graphical testing procedure was applied to maintain Type I error. Tanezumab 5 mg versus NSAID was tested first and if all primary endpoints were found significant, then the testing was continued for Tanezumab 2.5 mg versus NSAID and the key secondary endpoint ( $\geq$ 50% reduction from baseline in WOMAC Pain at Week 16). Primary endpoints were tested sequentially within a dose in order of WOMAC pain, WOMAC physical function, and PGA.

Statistical analysis title	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority <sup>[4]</sup>
P-value	= 0.003
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.31

Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.52
upper limit	-0.11
Variability estimate	Standard error of the mean
Dispersion value	0.1

Notes:

[4] - A graphical testing procedure was applied to maintain Type I error. Tanezumab 5 mg versus NSAID was tested first and if all primary endpoints were found significant, then the testing was continued for Tanezumab 2.5 mg versus NSAID and the key secondary endpoint ( $\geq 50\%$  reduction from baseline in WOMAC Pain at Week 16). Primary endpoints were tested sequentially within a dose in order of WOMAC pain, WOMAC physical function, and PGA.

### Primary: Change from Baseline in Patient's Global Assessment (PGA) of Osteoarthritis at Week 16

End point title	Change from Baseline in Patient's Global Assessment (PGA) of Osteoarthritis at Week 16
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End point description:

PGA of OA was assessed by asking a question from subjects: "Considering all the ways your OA in your knee or hip (index joint) affects you, how are you doing today?" Subjects responded on a scale ranging from 1-5, using Interactive Response Technology (IRT), where 1=very good (no symptom and no limitation of normal activities), 2= good (mild symptoms and no limitation of normal activities), 3= fair (moderate symptoms and limitation of some normal activities), 4= poor (severe symptoms and inability to carry out most normal activities), and 5= very poor (very severe symptoms and inability to carry out all normal activities). Higher scores indicated worsening of condition. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Primary
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End point timeframe:

Baseline, Week 16

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
least squares mean (standard error)	-0.96 ( $\pm$ 0.04)	-0.97 ( $\pm$ 0.04)	-0.94 ( $\pm$ 0.04)	

### Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority <sup>[5]</sup>
P-value	= 0.6332

Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.09
upper limit	0.06
Variability estimate	Standard error of the mean
Dispersion value	0.04

Notes:

[5] - A graphical testing procedure was applied to maintain Type I error. Tanezumab 5 mg versus NSAID was tested first and if all primary endpoints were found significant, then the testing was continued for Tanezumab 2.5 mg versus NSAID and the key secondary endpoint ( $\geq 50\%$  reduction from baseline in WOMAC Pain at Week 16). Primary endpoints were tested sequentially within a dose in order of WOMAC pain, WOMAC physical function, and PGA.

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority <sup>[6]</sup>
P-value	= 0.3431
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.11
upper limit	0.04
Variability estimate	Standard error of the mean
Dispersion value	0.04

Notes:

[6] - A graphical testing procedure was applied to maintain Type I error. Tanezumab 5 mg versus NSAID was tested first and if all primary endpoints were found significant, then the testing was continued for Tanezumab 2.5 mg versus NSAID and the key secondary endpoint ( $\geq 50\%$  reduction from baseline in WOMAC Pain at Week 16). Primary endpoints were tested sequentially within a dose in order of WOMAC pain, WOMAC physical function, and PGA.

## Secondary: Percentage of Subjects With Adjudicated Secondary Composite Joint Safety Outcome

End point title	Percentage of Subjects With Adjudicated Secondary Composite Joint Safety Outcome
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End point description:

Any subject with incidence of an adjudicated outcome of primary osteonecrosis, rapidly progressive OA type 2, subchondral insufficiency fracture, or pathological fracture. Rapidly progressive OA type 2 events were those considered to have abnormal loss/destruction of bone including limited or total collapse of at least one subchondral surface (e.g., medial femoral condyle) that is not normally present in conventional end-stage OA. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
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End point timeframe:  
Baseline up to Week 80

<b>End point values</b>	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: percentage of subjects				
number (confidence interval 95%)	1.0 (0.5 to 1.8)	2.2 (1.4 to 3.3)	0.5 (0.2 to 1.2)	

### Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4082
Method	Exact methods for risk difference
Parameter estimate	Risk difference (RD)
Point estimate	0.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.75
upper limit	2.28

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0238
Method	Exact methods for risk difference
Parameter estimate	Risk difference (RD)
Point estimate	1.7
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.31
upper limit	3.63



## Secondary: Observation Time-Adjusted Event Rate of Subjects With Adjudicated Secondary Composite Joint Safety Outcome

End point title	Observation Time-Adjusted Event Rate of Subjects With Adjudicated Secondary Composite Joint Safety Outcome
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End point description:

Observation time was defined as the start day of first SC study medication until either the (i) date of completion of or withdrawal from study, if a subject did not have the event, or (ii) date of the event (earliest event within each subject in the case of multiple events). Secondary joint safety outcome included primary osteonecrosis, rapidly progressive OA (type-2), subchondral insufficiency fracture, or pathological fracture. Event rate was calculated as the number of events per 1000 subject-years at risk. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
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End point timeframe:

Baseline up to Week 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: events per 1000 subject-years				
number (confidence interval 95%)	9.7 (5.2 to 18.1)	21.8 (14.4 to 33.1)	4.9 (2.1 to 11.8)	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2035
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	4.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	-2.6
upper limit	12.2

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority

P-value	= 0.001
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	16.9
Confidence interval	
level	95 %
sides	2-sided
lower limit	6.8
upper limit	27

## Secondary: Percentage of Subjects With Individual Adjudicated Joint Safety Outcome

End point title	Percentage of Subjects With Individual Adjudicated Joint Safety Outcome
End point description:	
Any subject with incidence of an adjudicated outcome of rapidly progressive OA (type-1 only), rapidly progressive OA (type-2 only), rapidly progressive OA (type-1 or type-2 combined), subchondral insufficiency fracture, primary osteonecrosis, and pathological fracture. Rapidly progressive OA type 1 events were those that the Adjudication Committee considered to have significant loss of JSW $\geq 2$ mm within approximately 1 year without gross structural failure. Rapidly progressive OA type 2 events were those considered to have abnormal loss/destruction of bone including limited or total collapse of at least one subchondral surface (e.g., medial femoral condyle) that is not normally present in conventional end-stage OA. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).	
End point type	Secondary
End point timeframe:	
Baseline up to Week 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: percentage of subjects				
number (confidence interval 95%)				
Rapidly Progressive OA Type 1 or 2	3.2 (2.2 to 4.5)	6.3 (4.9 to 8.0)	1.2 (0.6 to 2.1)	
Rapidly Progressive OA type 1	2.9 (1.9 to 4.1)	4.9 (3.7 to 6.4)	1.1 (0.6 to 2.0)	
Rapidly Progressive OA type 2	0.3 (0.1 to 0.9)	1.4 (0.8 to 2.3)	0.1 (0.0 to 0.6)	
Primary Osteonecrosis	0.1 (0.0 to 0.6)	0.1 (0.0 to 0.6)	0 (0.0 to 0.4)	
Pathological Fracture	0 (0.0 to 0.4)	0 (0.0 to 0.4)	0 (0.0 to 0.4)	
Subchondral Insufficiency Fracture	0.6 (0.2 to 1.3)	0.7 (0.3 to 1.4)	0.4 (0.1 to 1.0)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg vs NSAID
Statistical analysis description:	
Rapidly progressive OA Type 1 or 2	
Comparison groups	Tanezumab 2.5 mg v NSAID

Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0248
Method	Exact methods for risk difference
Parameter estimate	Risk Difference
Point estimate	1.99
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.31
upper limit	4.17

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 1 or 2	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Exact methods for risk difference
Parameter estimate	Risk difference
Point estimate	5.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	3.16
upper limit	7.54

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 1	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0366
Method	Exact methods for risk difference
Parameter estimate	Risk difference
Point estimate	1.79
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.16
upper limit	3.92

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 1	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0001
Method	Exact methods for risk difference
Parameter estimate	Risk difference
Point estimate	3.81
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.99
upper limit	6.12

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 2	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6168
Method	Exact methods for risk difference
Parameter estimate	Risk difference
Point estimate	0.2
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.76
upper limit	1.71

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 2	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0388
Method	Exact methods for risk difference

Parameter estimate	Risk difference
Point estimate	1.3
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.17
upper limit	2.97

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Primary osteonecrosis	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7245
Method	Exact methods for risk difference
Parameter estimate	Risk difference
Point estimate	0.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.74
upper limit	1.51

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Primary osteonecrosis	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7182
Method	Exact methods for risk difference
Parameter estimate	Risk difference (RD)
Point estimate	0.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.74
upper limit	1.52

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	

## Subchondral insufficiency fracture

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6824
Method	Exact methods for risk difference
Parameter estimate	Risk difference (RD)
Point estimate	0.2
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.96
upper limit	1.9

## Statistical analysis title

Tanezumab 5 mg Vs NSAID

### Statistical analysis description:

#### Subchondral insufficiency fracture

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5632
Method	Exact methods for risk difference
Parameter estimate	Risk difference (RD)
Point estimate	0.3
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.86
upper limit	2.03

## Secondary: Observation Time-Adjusted Event Rate of Subjects With Individual Adjudicated Joint Safety Outcome

End point title	Observation Time-Adjusted Event Rate of Subjects With Individual Adjudicated Joint Safety Outcome
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### End point description:

Observation time was defined as the start day of first SC study medication until either the (i) date of completion of or withdrawal from study, if a subject did not have the event, or (ii) date of the event (earliest event within each subject in the case of multiple events). Individual joint safety outcome included rapidly progressive OA (type-1 only), rapidly progressive OA (type-2 only), rapidly progressive OA (type-1 or type-2 combined), subchondral insufficiency fracture, primary osteonecrosis, and pathological fracture. Event rate was calculated as the number of events per 1000 subject-years at risk. 99999 = 95% CI was not estimable since no subjects had events. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
End point timeframe:	
Baseline up to Week 80	

<b>End point values</b>	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: events per 1000 subject-years				
number (confidence interval 95%)				
Rapidly Progressive OA Type 1 or 2	31.4 (22.2 to 44.4)	63.3 (49.5 to 81.1)	11.9 (6.7 to 20.9)	
Rapidly Progressive OA Type 1	28.4 (19.8 to 40.9)	49.1 (37.1 to 65.0)	10.9 (6.0 to 19.6)	
Rapidly Progressive OA Type 2	2.9 (0.9 to 9.1)	13.9 (8.2 to 23.4)	1.0 (0.1 to 7.0)	
Primary Osteonecrosis	1.0 (0.1 to 6.9)	1.0 (0.1 to 7.0)	0 (-99999 to 99999)	
Pathological Fracture	0 (-99999 to 99999)	0 (-99999 to 99999)	0 (-99999 to 99999)	
Subchondral Insufficiency Fracture	5.8 (2.6 to 13.0)	6.9 (3.3 to 14.5)	3.9 (1.5 to 10.5)	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 1 or 2	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0027
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	19.56
Confidence interval	
level	95 %
sides	2-sided
lower limit	6.78
upper limit	32.35

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 1 or 2	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority

P-value	< 0.0001
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	51.48
Confidence interval	
level	95 %
sides	2-sided
lower limit	34.47
upper limit	68.5

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 1	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0047
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	17.58
Confidence interval	
level	95 %
sides	2-sided
lower limit	5.39
upper limit	29.76

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 1	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	38.22
Confidence interval	
level	95 %
sides	2-sided
lower limit	23.05
upper limit	53.4



<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 2	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3214
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	1.94
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.89
upper limit	5.76

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Rapidly Progressive OA Type 2	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0008
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	12.88
Confidence interval	
level	95 %
sides	2-sided
lower limit	5.36
upper limit	20.39

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Subchondral Insufficiency Fracture	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5394
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	1.9
Confidence interval	

level	95 %
sides	2-sided
lower limit	-4.17
upper limit	7.96

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Subchondral Insufficiency Fracture	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3636
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	2.98
Confidence interval	
level	95 %
sides	2-sided
lower limit	-3.44
upper limit	9.39

### Secondary: Percentage of Subjects With Total Joint Replacement or Adjudicated Primary Composite Joint Safety Outcome

End point title	Percentage of Subjects With Total Joint Replacement or Adjudicated Primary Composite Joint Safety Outcome
End point description: Percentage of subjects with total joint replacement (hip or knee) or adjudicated primary composite joint safety outcomes were reported. Adjudicated primary composite joint safety outcomes included primary osteonecrosis, rapidly progressive OA type 1 or type 2, subchondral insufficiency fracture, or pathological fracture. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).	
End point type	Secondary
End point timeframe: Baseline up to Week 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: percentage of subject				
number (confidence interval 95%)	8.6 (6.9 to 10.5)	13.1 (11.1 to 15.4)	3.7 (2.6 to 5.1)	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: The event of adjudicated primary osteonecrosis in the tanezumab 2.5 mg treatment group is not included in this analysis. Conclusions for this analysis do not change as the comparison to NSAID is already statistically significant in favor of NSAID.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	Exact methods for risk difference
Parameter estimate	Risk difference (RD)
Point estimate	4.87
Confidence interval	
level	95 %
sides	2-sided
lower limit	2.43
upper limit	7.74

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Exact methods for risk difference
Parameter estimate	Risk difference (RD)
Point estimate	9.41
Confidence interval	
level	95 %
sides	2-sided
lower limit	6.73
upper limit	12.52

## Secondary: Observation Time-Adjusted Event Rate of Subjects With Total Joint Replacement or Adjudicated Primary Composite Joint Safety Outcome

End point title	Observation Time-Adjusted Event Rate of Subjects With Total Joint Replacement or Adjudicated Primary Composite Joint Safety Outcome
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**End point description:**

Observation time was defined as the start day of first SC study medication until either the (i) date of completion of or withdrawal from study, if a subject did not have the event, or (ii) date of the event (earliest event within each subject in the case of multiple events). Adjudicated primary composite joint safety outcomes included primary osteonecrosis, rapidly progressive OA type 1 or type 2, subchondral insufficiency fracture, or pathological fracture. Event rate was calculated as the number of events per 1000 subject-years at risk. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
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End point timeframe:

Baseline up to Week 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: events per 1000 subject-years				
number (confidence interval 95%)	84.9 (68.7 to 104.9)	132.5 (111.7 to 157.3)	36.7 (26.6 to 50.6)	

**Statistical analyses**

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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**Statistical analysis description:**

The event of adjudicated primary osteonecrosis in the tanezumab 2.5 mg treatment group is not included in this analysis. Conclusions for this analysis do not change as the comparison to NSAID is already statistically significant in favor of NSAID.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	48.25
Confidence interval	
level	95 %
sides	2-sided
lower limit	26.76
upper limit	69.74

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Comparison groups	Tanezumab 5 mg v NSAID
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Number of subjects included in analysis	1994
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Analysis specification	Pre-specified
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Analysis type	superiority
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P-value	< 0.0001
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Method	Poisson model for rate difference
Parameter estimate	Rate Difference
Point estimate	95.83
Confidence interval	
level	95 %
sides	2-sided
lower limit	70.25
upper limit	121.42

## Secondary: Change From Baseline in Medial or Lateral Joint Space Width of the Index Knee (Kellgren-Lawrence Grade [KLG] 2 or 3) at Weeks 56 and 80

End point title	Change From Baseline in Medial or Lateral Joint Space Width of the Index Knee (Kellgren-Lawrence Grade [KLG] 2 or 3) at Weeks 56 and 80
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End point description:

Change from baseline in JSW was defined as change in JSW compared to baseline in subjects with KLG 2 or 3 over the course of the study. It was measured radiographically in the medial and lateral tibiofemoral of knee in subjects with OA. KLG system was a method of classifying the severity of knee OA using five grades i.e. 0 [no radiographic features of OA], 1 [doubtful joint space narrowing (JSN) and possible osteophytic lipping], 2 [definite osteophytes and possible JSN on anteroposterior weight-bearing radiograph], 3 [multiple osteophytes, definite JSN, sclerosis, possible bony deformity], 4 [large osteophytes, marked JSN, severe sclerosis and definite bony deformity]. Higher grade indicating worse knee function. The number of subjects with progression of OA in the index knee are summarized separately by the compartment of OA at baseline (medial or lateral). Safety population was analyzed. 'n' =subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 56 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	651	668	695	
Units: millimeter (mm)				
least squares mean (standard error)				
Change in Medial JSW at Week 56 (n=486,506,523)	-0.25 (± 0.03)	-0.34 (± 0.03)	-0.19 (± 0.03)	
Change in Medial JSW at Week 80 (n=402,413,432)	-0.33 (± 0.04)	-0.37 (± 0.04)	-0.25 (± 0.03)	
Change in Lateral JSW at Week 56 (n=110,94,114)	-0.26 (± 0.07)	-0.32 (± 0.07)	-0.27 (± 0.07)	
Change in Lateral JSW at Week 80 (n=88,75,98)	-0.46 (± 0.08)	-0.32 (± 0.09)	-0.37 (± 0.08)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change in medial JSW at Week 56: ANCOVA model included treatment, baseline JSW as covariate, and

study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1346
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0979
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.15
upper limit	0.01
Variability estimate	Standard error of the mean
Dispersion value	0.04

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**Statistical analysis title**

Tanezumab 5 mg Vs NSAID

Statistical analysis description:

Change in medial JSW at Week 56: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1363
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.16
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.24
upper limit	-0.08
Variability estimate	Standard error of the mean
Dispersion value	0.04

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**Statistical analysis title**

Tanezumab 2.5 mg Vs NSAID

Statistical analysis description:

Change in medial JSW at Week 80: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1346
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1162
Method	ANCOVA

Parameter estimate	LS Mean Difference
Point estimate	-0.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.17
upper limit	0.02
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Change in medial JSW at Week 80: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1363
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0128
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.22
upper limit	-0.03
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Change in lateral JSW at Week 56: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1346
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8885
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.17
upper limit	0.2

Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change in lateral JSW at Week 56: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1363
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6345
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.24
upper limit	0.15
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change in lateral JSW at Week 80: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1346
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4406
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.09
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.32
upper limit	0.14
Variability estimate	Standard error of the mean
Dispersion value	0.12

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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## Statistical analysis description:

Change in lateral JSW at Week 80: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1363
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7109
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.19
upper limit	0.28
Variability estimate	Standard error of the mean
Dispersion value	0.12

### Secondary: Change From Baseline in Joint Space Width of the Index hip (Kellgren-Lawrence Grade 2 or 3) at Weeks 56 and 80

End point title	Change From Baseline in Joint Space Width of the Index hip (Kellgren-Lawrence Grade 2 or 3) at Weeks 56 and 80
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## End point description:

Change from baseline in JSW was defined as narrowing in JSW compared to baseline in subjects with KLG 2 or 3 over the course of the study. It was measured radiographically in the index hip in subjects with OA. KLG system was a method of classifying the severity of hip OA using five grades i.e.0 [no radiographic features of OA], 1 [doubtful JSN) and possible osteophytic lipping], 2 [definite osteophytes and possible JSN on anteroposterior weight-bearing radiograph], 3 [multiple osteophytes, definite JSN, sclerosis, possible bony deformity], 4 [large osteophytes, marked JSN, severe sclerosis and definite bony deformity]. Higher grade indicating worse hip function. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'Number of subjects analysed' =subjects who were evaluable for this endpoint. 'n'=subjects who were evaluable at specified time.

End point type	Secondary
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## End point timeframe:

Baseline, Weeks 56 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	123	132	120	
Units: mm				
least squares mean (standard error)				
Change at Week 56 (n =110, 112, 107)	-0.35 (± 0.06)	-0.40 (± 0.06)	-0.21 (± 0.06)	
Change at Week 80 (n =89, 89, 86)	-0.46 (± 0.07)	-0.35 (± 0.07)	-0.28 (± 0.07)	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Change at Week 56: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	243
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.102
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.14
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.3
upper limit	0.03
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Change at Week 56: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	252
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.023
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.35
upper limit	-0.03
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Change at Week 80: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	243

Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0645
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.18
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.37
upper limit	0.01
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 80: ANCOVA model included treatment, baseline JSW as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	252
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5005
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.26
upper limit	0.13
Variability estimate	Standard error of the mean
Dispersion value	0.1

### **Secondary: Number of Subjects With Progression of Osteoarthritis in the Index Knee (Kellgren-Lawrence Grade 2 or 3) According to Bland and Altman Method at Weeks 56 and 80**

End point title	Number of Subjects With Progression of Osteoarthritis in the Index Knee (Kellgren-Lawrence Grade 2 or 3) According to Bland and Altman Method at Weeks 56 and 80
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#### **End point description:**

Progression of OA according to Bland-Altman as defined by a decrease JSW  $\geq 1.96$  times within-subject standard deviation of change in JSW. The number of subjects with progression of OA in the index knee are summarized separately by the compartment of OA at baseline (medial or lateral). Kellgren-Lawrence grade system was a method of classifying the severity of knee OA using five grades i.e. 0 [no radiographic features of OA], 1 [doubtful joint space narrowing (JSN) and possible osteophytic lipping], 2 [definite osteophytes and possible JSN on anteroposterior weight-bearing radiograph], 3 [multiple osteophytes, definite JSN, sclerosis, possible bony deformity], 4 [large osteophytes, marked JSN, severe sclerosis and definite bony deformity]. Higher grade indicating worse knee function. Safety population was analyzed. 'Number of subjects analysed' = subjects who were evaluable for this endpoint. 'n'

=subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
End point timeframe:	
Weeks 56 and 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	651	668	695	
Units: subjects				
Decreased medial JSW at Week 56 (n=486,506,523)	33	43	20	
Decreased medial JSW at Week 80 (n=402,413,432)	29	38	16	
Decreased lateral JSW at Week 56 (n=110,94,114)	5	8	9	
Decreased lateral JSW at Week 80 (n=88,75,98)	9	4	7	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Decrease in medial JSW at Week 56: Logistic regression model included treatment, and baseline JSW as covariate.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1346
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0358
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.85
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.04
upper limit	3.29

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Decrease in medial JSW at Week 56: Logistic regression model included treatment, and baseline JSW as covariate.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1363
Analysis specification	Pre-specified

Analysis type	superiority
P-value	= 0.0021
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.37
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.37
upper limit	4.12

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Decrease in medial JSW at Week 80: Logistic regression model included treatment, and baseline JSW as covariate.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1346
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0301
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.07
upper limit	3.77

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Decrease in medial JSW at Week 80: Logistic regression model included treatment, and baseline JSW as covariate.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1363
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0016
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.65
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.45
upper limit	4.85

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Decrease in lateral JSW at Week 56: Logistic regression model included treatment, and baseline JSW as covariate.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1346
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3002
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.55
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.18
upper limit	1.7

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Decrease in lateral JSW at Week 56: Logistic regression model included treatment, and baseline JSW as covariate.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1363
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8997
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.39
upper limit	2.89

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Decrease in lateral JSW at Week 80: Logistic regression model included treatment, and baseline JSW as covariate.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1346
Analysis specification	Pre-specified
Analysis type	superiority

P-value	= 0.4559
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.48
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.53
upper limit	4.18

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Decrease in lateral JSW at Week 80: Logistic regression model included treatment, and baseline JSW as covariate.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1363
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5996
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.71
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.2
upper limit	2.54

## **Secondary: Number of Subjects With Progression of Osteoarthritis in the Index Hip (Kellgren-Lawrence Grade 2 or 3) According to Bland and Altman Method at Weeks 56 and 80**

End point title	Number of Subjects With Progression of Osteoarthritis in the Index Hip (Kellgren-Lawrence Grade 2 or 3) According to Bland and Altman Method at Weeks 56 and 80
End point description:	
Progression of OA according to Bland-Altman methodology as defined by a decrease in JSW $\geq 1.96$ times within-subject standard deviation of the change in JSW in the index hip. The number of subjects with progression of OA in the index hip per Bland-Altman methodology are reported. Kellgren-Lawrence grade system was a method of classifying the severity of hip OA using five grades i.e. 0 (no radiographic features of OA), 1 (doubtful JSN and possible osteophytic lipping), 2 (definite osteophytes and possible JSN on anteroposterior weight-bearing radiograph), 3 (multiple osteophytes, definite JSN, sclerosis, possible bony deformity), 4 (large osteophytes, marked JSN, severe sclerosis and definite bony deformity). Higher grade indicating worse hip function. Safety population was analyzed. 'Number of subjects analysed' =subjects who were evaluable for this endpoint. 'n'=subjects who were evaluable at specified time point for each arm, respectively.	
End point type	Secondary
End point timeframe:	
Weeks 56 and 80	

<b>End point values</b>	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	123	132	120	
Units: subjects				
Week 56 (n = 110, 112, 107)	10	10	3	
Week 80 (n = 89, 89, 86)	9	9	3	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Decrease at week 56: Logistic regression model included treatment, and baseline JSW as covariate	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	243
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0714
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3.37
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.9
upper limit	12.65

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Decrease at week 56: Logistic regression model included treatment, and baseline JSW as covariate	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	252
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0681
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3.42
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.91
upper limit	12.84



<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Decrease at week 80: Logistic regression model included treatment, and baseline JSW as covariate	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	243
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0967
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.81
upper limit	11.95

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Decrease at week 80: Logistic regression model included treatment, and baseline JSW as covariate	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	252
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0976
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	3.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.81
upper limit	11.9

## **Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Weeks 2, 4, 8, 24, 32, 40, 48 and 56**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Weeks 2, 4, 8, 24, 32, 40, 48 and 56
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End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. The WOMAC pain subscale is a 5-item questionnaire used to assess the amount of pain experienced due to OA of index joint (knee or hip) during past 48 hours. It was calculated as the mean of scores from 5 individual questions scored on a NRS, which may not be a whole (integer) number. Scores for each question and

WOMAC Pain subscale score on NRS ranged from 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
End point timeframe:	
Baseline, Weeks 2, 4, 8, 24, 32, 40, 48 and 56	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on scale				
least squares mean (standard error)				
Change at Week 2	-1.65 (± 0.08)	-1.49 (± 0.08)	-1.55 (± 0.08)	
Change at Week 4	-2.25 (± 0.09)	-2.29 (± 0.09)	-1.98 (± 0.09)	
Change at Week 8	-2.41 (± 0.10)	-2.65 (± 0.10)	-2.27 (± 0.10)	
Change at Week 24	-2.73 (± 0.13)	-2.86 (± 0.13)	-2.67 (± 0.13)	
Change at Week 32	-2.64 (± 0.13)	-2.68 (± 0.13)	-2.57 (± 0.13)	
Change at Week 40	-2.56 (± 0.13)	-2.57 (± 0.13)	-2.52 (± 0.13)	
Change at Week 48	-2.54 (± 0.13)	-2.48 (± 0.13)	-2.47 (± 0.13)	
Change at Week 56	-2.44 (± 0.13)	-2.37 (± 0.13)	-2.42 (± 0.14)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2212
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.27
upper limit	0.06
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4557
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.06
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.1
upper limit	0.23
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0029
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.27
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.45
upper limit	-0.09
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization	

stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0005
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.32
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.5
upper limit	-0.14
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1273
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.14
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.33
upper limit	0.04
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994

Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.38
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.57
upper limit	-0.2
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6349
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.06
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.31
upper limit	0.19
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1339
Method	ANCOVA

Parameter estimate	LS Mean Difference
Point estimate	-0.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.44
upper limit	0.06
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6237
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.33
upper limit	0.2
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4224
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.11
Confidence interval	
level	95 %

sides	2-sided
lower limit	-0.37
upper limit	0.16
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7526
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.31
upper limit	0.22
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7328
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.31
upper limit	0.22
Variability estimate	Standard error of the mean

Dispersion value	0.13
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<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5888
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.33
upper limit	0.19
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9345
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.28
upper limit	0.26
Variability estimate	Standard error of the mean
Dispersion value	0.14



<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8782
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.29
upper limit	0.25
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline WOMAC pain subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7076
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.22
upper limit	0.32
Variability estimate	Standard error of the mean
Dispersion value	0.14

## Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Week 64

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at
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## End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. The WOMAC pain subscale is a 5-item questionnaire used to assess the amount of pain experienced due to OA of index joint (knee or hip) during past 48 hours. It was calculated as the mean of scores from 5 individual questions scored on a NRS, which may not be a whole (integer) number. Scores for each question and WOMAC Pain subscale score on NRS ranged from 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" = subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Week 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n =1000, 995, 994)	7.01 (± 1.12)	7.02 (± 1.12)	6.96 (± 1.08)	
Change at Week 64 (n =437, 419, 445)	-3.47 (± 2.45)	-3.12 (± 2.40)	-3.85 (± 2.07)	

## Statistical analyses

No statistical analyses for this end point

**Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Weeks 2, 4, 8, 24, 32, 40, 48 and 56**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Weeks 2, 4, 8, 24, 32, 40, 48 and 56
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## End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Physical function refers to subject's ability to move around and perform usual activities of daily living. The WOMAC physical function subscale is a 17-item questionnaire used to assess the degree of difficulty experienced due to OA in index joint (knee or hip) during past 48 hours. It was calculated as mean of the scores from 17 individual questions, which may not be a whole (integer) number, scored on a NRS. Scores for each question and WOMAC physical function subscale score on NRS ranged from 0 (no difficulty) to 10 (extreme difficulty), where higher scores indicated extreme difficulty/worse physical function. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 24, 32, 40, 48 and 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.76 (± 0.08)	-1.64 (± 0.08)	-1.55 (± 0.08)	
Change at Week 4	-2.29 (± 0.09)	-2.31 (± 0.09)	-1.96 (± 0.09)	
Change at Week 8	-2.46 (± 0.10)	-2.69 (± 0.10)	-2.27 (± 0.10)	
Change at Week 24	-2.78 (± 0.13)	-2.88 (± 0.13)	-2.66 (± 0.13)	
Change at Week 32	-2.66 (± 0.13)	-2.67 (± 0.13)	-2.55 (± 0.13)	
Change at Week 40	-2.56 (± 0.13)	-2.57 (± 0.13)	-2.50 (± 0.13)	
Change at Week 48	-2.56 (± 0.14)	-2.49 (± 0.13)	-2.45 (± 0.13)	
Change at Week 56	-2.45 (± 0.14)	-2.36 (± 0.13)	-2.41 (± 0.14)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.015
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.21
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.37
upper limit	-0.04
Variability estimate	Standard error of the mean
Dispersion value	0.08

Statistical analysis title	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994

Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3286
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.25
upper limit	0.08
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0004
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.32
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.5
upper limit	-0.15
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0001

Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.35
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.53
upper limit	-0.17
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0517
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.18
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.37
upper limit	0
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.42

Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.61
upper limit	-0.23
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3621
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.37
upper limit	0.13
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0832
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.22
Confidence interval	
level	95 %
sides	2-sided

lower limit	-0.47
upper limit	0.03
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4072
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.38
upper limit	0.15
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3404
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.13
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.39
upper limit	0.13
Variability estimate	Standard error of the mean

Dispersion value	0.13
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<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6344
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.34
upper limit	0.2
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5756
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.35
upper limit	0.19
Variability estimate	Standard error of the mean
Dispersion value	0.14



<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4394
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.38
upper limit	0.16
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7747
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.31
upper limit	0.23
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7305
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.32
upper limit	0.22
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint and highest KLG and NSAID) as fixed effects, baseline WOMAC physical function subscale and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.733
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.22
upper limit	0.32
Variability estimate	Standard error of the mean
Dispersion value	0.14

## **Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Week 64**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Week 64
End point description:	
WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Physical function refers to subject's ability to move around and perform usual activities of daily living. The WOMAC physical function subscale is a 17-item questionnaire used to assess the degree of difficulty experienced due to OA in index joint (knee or hip) during past 48 hours. It was calculated as mean of the scores from 17 individual questions, which may not be a whole (integer) number, scored on NRS. Scores for each question and WOMAC physical function subscale score on NRS ranged from 0 (no difficulty) to 10 (extreme difficulty), higher scores indicated extreme difficulty/worse physical function. ITT population was analyzed. "n" =subjects who were evaluable at specified time point for each arm, respectively.	
End point type	Secondary
End point timeframe:	
Baseline, Week 64	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n =1000,995,994)	7.09 (± 1.07)	7.08 (± 1.11)	6.99 (± 1.09)	
Change at Week 64 (n =437, 419, 445)	-3.42 (± 2.40)	-3.12 (± 2.41)	-3.81 (± 2.12)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Patient's Global Assessment (PGA) of Osteoarthritis at Weeks 2, 4, 8, 24, 32, 40, 48 and 56

End point title	Change From Baseline in Patient's Global Assessment (PGA) of Osteoarthritis at Weeks 2, 4, 8, 24, 32, 40, 48 and 56
End point description:	
PGA of OA was assessed by asking a question from subjects: "Considering all the ways your OA in your knee or hip (index joint) affects you, how are you doing today?" Subjects responded on a scale ranging from 1-5, using IRT, where 1=very good (no symptom and no limitation of normal activities), 2= good (mild symptoms and no limitation of normal activities), 3= fair (moderate symptoms and limitation of some normal activities), 4= poor (severe symptoms and inability to carry out most normal activities), and 5= very poor (very severe symptoms and inability to carry out all normal activities). Higher scores indicated worsening of condition. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).	
End point type	Secondary
End point timeframe:	
Baseline, Weeks 2, 4, 8, 24, 32, 40, 48 and 56	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-0.67 (± 0.03)	-0.67 (± 0.03)	-0.63 (± 0.03)	
Change at Week 4	-0.81 (± 0.03)	-0.84 (± 0.03)	-0.69 (± 0.03)	
Change at Week 8	-0.77 (± 0.03)	-0.85 (± 0.03)	-0.76 (± 0.03)	
Change at Week 24	-0.74 (± 0.05)	-0.79 (± 0.05)	-0.74 (± 0.05)	
Change at Week 32	-0.72 (± 0.05)	-0.71 (± 0.05)	-0.72 (± 0.05)	
Change at Week 40	-0.70 (± 0.05)	-0.69 (± 0.05)	-0.69 (± 0.05)	
Change at Week 48	-0.70 (± 0.05)	-0.66 (± 0.05)	-0.67 (± 0.05)	
Change at Week 56	-0.65 (± 0.05)	-0.60 (± 0.05)	-0.66 (± 0.05)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2159
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.1
upper limit	0.02
Variability estimate	Standard error of the mean
Dispersion value	0.03

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority

P-value	= 0.2049
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.1
upper limit	0.02
Variability estimate	Standard error of the mean
Dispersion value	0.03

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.19
upper limit	-0.06
Variability estimate	Standard error of the mean
Dispersion value	0.03

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.15

Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.21
upper limit	-0.08
Variability estimate	Standard error of the mean
Dispersion value	0.03

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7799
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.08
upper limit	0.06
Variability estimate	Standard error of the mean
Dispersion value	0.03

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0061
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.09
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.16

upper limit	-0.03
Variability estimate	Standard error of the mean
Dispersion value	0.03

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Change at Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9718
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.1
upper limit	0.1
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3292
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.14
upper limit	0.05
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.983
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.1
upper limit	0.1
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9137
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.09
upper limit	0.11
Variability estimate	Standard error of the mean
Dispersion value	0.05



<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8784
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.11
upper limit	0.09
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9995
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.1
upper limit	0.1
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment,	

randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6648
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.13
upper limit	0.08
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Change at Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.728
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.09
upper limit	0.12
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Change at Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998

Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8856
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.09
upper limit	0.11
Variability estimate	Standard error of the mean
Dispersion value	0.05

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Change at Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline PGA and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2814
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.06
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.05
upper limit	0.16
Variability estimate	Standard error of the mean
Dispersion value	0.05

## Secondary: Change From Baseline in Patient's Global Assessment (PGA) of Osteoarthritis at Week 64

End point title	Change From Baseline in Patient's Global Assessment (PGA) of Osteoarthritis at Week 64
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End point description:

PGA of OA was assessed by asking a question from subjects: "Considering all the ways your OA in your knee or hip (index joint) affects you, how are you doing today?" Subjects responded on a scale ranging from 1-5, using IRT, where 1=very good (no symptom and no limitation of normal activities), 2= good (mild symptoms and no limitation of normal activities), 3= fair (moderate symptoms and limitation of some normal activities), 4= poor (severe symptoms and inability to carry out most normal activities), and 5= very poor (very severe symptoms and inability to carry out all normal activities). Higher scores indicated worsening of condition. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" =subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
End point timeframe:	
Baseline, Week 64	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n =1000, 995, 994)	3.49 (± 0.61)	3.46 (± 0.60)	3.44 (± 0.59)	
Change at Week 64 (n =437, 419, 445)	-0.79 (± 0.96)	-0.64 (± 0.98)	-0.95 (± 0.96)	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Percentage of Subjects Meeting Outcome Measures in Arthritis Clinical Trials-Osteoarthritis Research Society International (OMERACT-OARSI) Responder Index at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64

End point title	Percentage of Subjects Meeting Outcome Measures in Arthritis Clinical Trials-Osteoarthritis Research Society International (OMERACT-OARSI) Responder Index at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64
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End point description:

OMERACT-OARSI responders=if the change (improvement) from baseline to week of interest was  $\geq 50\%$  and  $\geq 2$  units in either WOMAC pain subscale or physical function subscale score; if change (improvement) from baseline to week of interest was  $\geq 20\%$  and  $\geq 1$  unit in at least 2 of the following: 1) WOMAC pain subscale score, 2) WOMAC physical function subscale score, 3) PGA of OA. WOMAC pain subscale assess amount of pain experienced (score: 0 [no pain] to 10 [extreme pain], higher score = more pain), WOMAC physical function subscale assess degree of difficulty experienced (score: 0 [no difficulty] to 10 [extreme difficulty], higher score = worse physical function) and PGA of OA (score: 1 [very good] to 5 [very poor], higher score =worse condition). Missing data was imputed using mixed baseline/last observation carried forward (BOCF/LOCF). ITT population was analyzed. Overall number of subjects analyzed=subjects evaluable for this endpoint. 'n'=subjects evaluable at specified time points.

End point type	Secondary
End point timeframe:	
Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: percentage of subjects				
number (not applicable)				
Week 2 (n =1001, 996, 996)	46.7	43.7	44.8	
Week 4 (n =1001, 996, 996)	62.6	62.7	56.4	

Week 8 (n =1001, 996, 996)	67.5	70.3	64.4	
Week 16 (n =1001, 996, 996)	78.2	78.3	75.1	
Week 24 (n =1001, 996, 995)	62.4	64.8	61.3	
Week 32 (n =1001, 996, 995)	59.2	59.9	58.6	
Week 40 (n =1001, 996, 995)	58.4	58.7	58.2	
Week 48 (n =1001, 996, 995)	57.4	56.2	57.3	
Week 56 (n =1001, 996, 995)	56.5	54.5	56.0	
Week 64 (n =437, 420, 446)	79.2	75.2	86.5	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4691
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.28

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5451
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.95
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 4: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0059
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.29
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.08
upper limit	1.54

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 4: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0057
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.29
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.08
upper limit	1.55

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 8: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID

Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1584
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.14
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.95
upper limit	1.38

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.006
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.3
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.08
upper limit	1.58

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1117
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.18
Confidence interval	
level	95 %
sides	2-sided

lower limit	0.96
upper limit	1.46

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1004
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.97
upper limit	1.47

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6258
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.87
upper limit	1.25

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index



joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1154
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.16
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.96
upper limit	1.39

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8018
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 32: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5697
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.05
Confidence interval	

level	95 %
sides	2-sided
lower limit	0.88
upper limit	1.26

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 40: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9557
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.84
upper limit	1.2

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 40: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8553
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 48: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9901
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.84
upper limit	1.2

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 48: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.587
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.95
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.8
upper limit	1.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 56: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8302
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)

Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4823
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.94
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.12

**Secondary: Percentage of Subjects Achieving Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Reduction  $\geq 30$  Percent (%),  $\geq 50\%$ ,  $\geq 70\%$  and  $\geq 90\%$  Response at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64**

End point title	Percentage of Subjects Achieving Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Reduction $\geq 30$ Percent (%), $\geq 50\%$ , $\geq 70\%$ and $\geq 90\%$ Response at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64
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End point description:

Percentage of subjects with reduction in WOMAC pain intensity of at least 30%,50%,70% and 90% at Weeks 2, 4, 8,16,24,32,40,48,56 and 64 compared to baseline were classified as responders to WOMAC pain subscale and are reported here. WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. The WOMAC pain subscale is a 5-item questionnaire used to assess the amount of pain experienced due to OA of index joint (knee or hip) during past 48 hours. It was calculated as the mean of scores from 5 individual questions scored on a NRS. Scores for each question and WOMAC Pain subscale score on NRS ranged from 0 (no pain) to 10 (extreme pain), higher scores indicated higher pain. Missing data was imputed using mixed BOCF/LOCF. ITT population was analysed. 'n'=subjects evaluable at specified time points.

End point type	Secondary
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End point timeframe:

Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: percentage of subjects				
number (not applicable)				
Week 2: At least 30% reduction (n =1002,998,996)	34.8	30.5	32.4	
Week 2: At least 50% reduction (n =1002,998,996)	17.8	16.5	14.7	
Week 2: At least 70% reduction (n =1002,998,996)	7.7	7.1	6.2	
Week 2: At least 90% reduction (n =1002,998,996)	2.4	2.5	1.8	
Week 4: At least 30% reduction (n =1002,998,996)	50.2	49.5	44.4	
Week 4: At least 50% reduction (n =1002,998,996)	30.4	30.5	24.9	
Week 4: At least 70% reduction (n =1002,998,996)	14.5	16.4	11.9	
Week 4: At least 90% reduction (n =1002,998,996)	4.3	4.9	3.1	
Week 8: At least 30% reduction (n =1002,998,996)	55.9	59.0	54.1	
Week 8: At least 50% reduction (n =1002,998,996)	36.8	39.3	32.6	
Week 8: At least 70% reduction (n =1002,998,996)	19.3	22.4	15.9	
Week 8: At least 90% reduction (n =1002,998,996)	4.7	6.6	4.2	
Week 16: At least 30% reduction (n =1002,998,996)	71.8	72.9	68.9	
Week 16: At least 50% reduction (n =1002,998,996)	54.9	56.5	51.5	
Week 16: At least 70% reduction (n =1002,998,996)	28.9	35.0	28.8	
Week 16: At least 90% reduction (n =1002,998,996)	10.3	12.7	8.5	
Week 24: At least 30% reduction (n =1002,998,996)	59.4	61.1	59.4	
Week 24: At least 50% reduction (n =1002,998,996)	49.3	49.4	47.5	
Week 24: At least 70% reduction (n =1002,998,996)	30.8	33.8	29.0	
Week 24: At least 90% reduction (n =1002,998,996)	10.3	13.3	11.5	
Week 32: At least 30% reduction (n =1002,998,996)	56.8	55.7	56.3	
Week 32: At least 50% reduction (n =1002,998,996)	47.4	45.8	46.3	
Week 32: At least 70% reduction (n =1002,998,996)	31.2	31.5	27.4	
Week 32: At least 90% reduction (n =1002,998,996)	10.3	12.9	10.0	
Week 40: At least 30% reduction (n =1002,998,996)	55.7	54.6	54.8	

Week 40: At least 50% reduction (n =1002,998,996)	47.2	45.2	46.0	
Week 40: At least 70% reduction (n =1002,998,996)	30.0	30.4	29.3	
Week 40: At least 90% reduction (n =1002,998,996)	10.8	12.0	10.4	
Week 48: At least 30% reduction (n =1002,998,996)	54.6	52.9	54.2	
Week 48: At least 50% reduction (n =1002,998,996)	46.2	43.2	44.4	
Week 48: At least 70% reduction (n =1002,998,996)	29.6	29.4	28.5	
Week 48: At least 90% reduction (n =1002,998,996)	10.3	11.4	10.6	
Week 56: At least 30% reduction (n =1002,998,996)	53.1	51.2	52.7	
Week 56: At least 50% reduction (n =1002,998,996)	44.3	41.5	43.5	
Week 56: At least 70% reduction (n =1002,998,996)	28.2	27.0	27.5	
Week 56: At least 90% reduction (n =1002,998,996)	10.1	10.5	10.1	
Week 64: At least 30% reduction (n =437,419,445)	73.0	69.0	81.3	
Week 64: At least 50% reduction (n =437,419,445)	55.4	47.3	60.2	
Week 64: At least 70% reduction (n =437,419,445)	31.1	24.3	34.2	
Week 64: At least 90% reduction (n =437,419,445)	9.6	7.9	12.6	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2, >=30% reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2938
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.92
upper limit	1.33

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2, $\geq 30\%$ : reduction OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3146
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.91
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.75
upper limit	1.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2, $\geq 50\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	
P-value	= 0.0748
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.24
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.98
upper limit	1.58

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2, $\geq 50\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3

Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.14
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.45

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 2,  $\geq 70\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.255
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.23
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	1.74

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 2,  $\geq 70\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.478
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.14
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.8
upper limit	1.62



<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2, $\geq 90\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4006
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.3
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.7
upper limit	2.42

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2, $\geq 90\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3089
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.38
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.74
upper limit	2.54

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 4, $\geq 30\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID

Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0114
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.26
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.05
upper limit	1.5

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 4,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0239
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.23
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.03
upper limit	1.47

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 4,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0079
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.31
Confidence interval	
level	95 %
sides	2-sided

lower limit	1.07
upper limit	1.6

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 4,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0068
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.32
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.08
upper limit	1.6

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 4,  $\geq 70\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1037
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.24
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.96
upper limit	1.62

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 4,  $\geq 70\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification

variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0046
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.45
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.12
upper limit	1.88

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 4,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1971
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.36
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	2.19

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 4,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.048
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.59
Confidence interval	

level	95 %
sides	2-sided
lower limit	1
upper limit	2.52

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4744
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.28

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0336
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.21
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.02
upper limit	1.45

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0559
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.2
Confidence interval	
level	95 %
sides	2-sided
lower limit	1
upper limit	1.44

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 8, $\geq 50\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0021
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.34
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.11
upper limit	1.61

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 8, $\geq 70\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0535
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)

Point estimate	1.26
Confidence interval	
level	95 %
sides	2-sided
lower limit	1
upper limit	1.59

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8,  $\geq 70\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0003
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.53
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.22
upper limit	1.92

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6421
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.72
upper limit	1.7

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 8, $\geq 90\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0207
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.6
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.07
upper limit	2.38

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 16, $\geq 30\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1635
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.15
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.95
upper limit	1.39

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 16, $\geq 30\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0529



Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.21
Confidence interval	
level	95 %
sides	2-sided
lower limit	1
upper limit	1.47

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority <sup>[7]</sup>
P-value	= 0.1322
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.15
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.96
upper limit	1.37

Notes:

[7] - The two key secondary comparisons for 'Subjects with  $\geq 50\%$  reduction from baseline in WOMAC Pain at Week 16' (tanezumab 2.5 mg treatment group versus NSAID and tanezumab 5 mg treatment group versus NSAID) could not be considered significant since preceding tests in the graphical testing procedure were not significant.

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority <sup>[8]</sup>
P-value	= 0.0262
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.22
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.02
upper limit	1.46

Notes:

[8] - The two key secondary comparisons for 'Subjects with  $\geq 50\%$  reduction from baseline in WOMAC Pain at Week 16' (tanezumab 2.5 mg treatment group versus NSAID and tanezumab 5 mg treatment group versus NSAID) could not be considered significant since preceding tests in the graphical testing procedure were not significant.

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 16, $\geq 70\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9805
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.83
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 16, $\geq 70\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0033
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.33
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.1
upper limit	1.61

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 16, $\geq 90\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.159
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.24
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.92
upper limit	1.69

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 16, >=90% reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0024
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.57
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.17
upper limit	2.11

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 24, >=30% reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9932
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1
Confidence interval	
level	95 %

sides	2-sided
lower limit	0.83
upper limit	1.2

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4374
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.9
upper limit	1.29

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4406
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.9
upper limit	1.28

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic

regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4078
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.9
upper limit	1.29

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 24, $\geq 70\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4071
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.31

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 24, $\geq 70\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0248
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.24

Confidence interval	
level	95 %
sides	2-sided
lower limit	1.03
upper limit	1.5

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3641
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.88
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.66
upper limit	1.16

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2497
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.17
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.53

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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**Statistical analysis description:**

Week 32,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8682
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.21

**Statistical analysis title**

Tanezumab 5 mg Vs NSAID

**Statistical analysis description:**

Week 32,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7317
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.97
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.81
upper limit	1.16

**Statistical analysis title**

Tanezumab 2.5 mg Vs NSAID

**Statistical analysis description:**

Week 32,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6493
Method	Regression, Logistic

Parameter estimate	Odds ratio (OR)
Point estimate	1.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.87
upper limit	1.24

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 32, $\geq 50\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7973
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.98
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.82
upper limit	1.17

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 32, $\geq 70\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0757
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.98
upper limit	1.45



<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 32, $\geq 70\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0578
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.21
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.99
upper limit	1.47

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 32, $\geq 90\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.901
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.76
upper limit	1.37

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 32, $\geq 90\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0548

Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.32
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.99
upper limit	1.74

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 40,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7331
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	1.23

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 40,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8632
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.98
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.82
upper limit	1.18

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 40, $\geq 50\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6262
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.88
upper limit	1.25

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Week 40, $\geq 50\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6817
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.96
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.81
upper limit	1.15

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 40, $\geq 70\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID

Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.799
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.24

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 40,  $\geq 70\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6786
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	1.26

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 40,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8069
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.04
Confidence interval	
level	95 %
sides	2-sided

lower limit	0.78
upper limit	1.38

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 40,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2951
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.16
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.88
upper limit	1.54

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9093
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.21

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification

variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5032
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.94
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.12

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4382
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.9
upper limit	1.28

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5638
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.95
Confidence interval	

level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 70\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6436
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	1.27

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 70\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.706
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.26

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7729
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.96
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.72
upper limit	1.28

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6405
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.81
upper limit	1.42

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9046
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)



Point estimate	1.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.21

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 30\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4491
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.93
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.78
upper limit	1.11

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 50\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7429
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	1.23

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 56, $\geq 50\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3467
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.92
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.77
upper limit	1.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 56, $\geq 70\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7624
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.26

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 56, $\geq 70\%$ reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7686

Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.97
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.8
upper limit	1.18

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9384
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.99
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.74
upper limit	1.33

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 90\%$  reduction: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8495
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.77
upper limit	1.38

## Secondary: Percentage of Subjects With Cumulative Percent Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Weeks 16, 24 and 56

End point title	Percentage of Subjects With Cumulative Percent Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale at Weeks 16, 24 and 56
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End point description:

WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. The WOMAC pain subscale is a 5-item questionnaire used to assess the amount of pain experienced due to OA of index joint during past 48 hours. It was calculated as the mean of scores from 5 individual questions scored on a NRS. Scores for each question and WOMAC Pain subscale score on NRS ranged from 0 (no pain) to 10 (extreme pain), higher scores indicated higher pain. Percentage of subjects with cumulative reduction (as %) (>0%; >= 10, 20,30,40,50,60,70,80 and 90%; = 100%) in WOMAC pain subscale from Baseline to Weeks 16,24,56 were reported, subjects (%) are reported more than once in categories specified. Missing data was imputed using mixed BOCF/LOCF. ITT population was analysed. 'Number of subjects analysed'=subjects evaluable for this endpoint.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 16, 24 and 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1000	995	994	
Units: percentage of subjects				
number (not applicable)				
Week 16: >0%	89.5	87.6	87.1	
Week 16: >=10%	85.0	82.8	82.8	
Week 16: >=20%	78.1	78.3	75.8	
Week 16: >=30%	71.8	72.9	68.9	
Week 16: >=40%	63.7	63.5	59.9	
Week 16: >=50%	54.9	56.5	51.5	
Week 16: >=60%	40.9	44.8	38.8	
Week 16: >=70%	28.9	35.0	28.8	
Week 16: >=80%	19.4	23.9	18.8	
Week 16: >=90%	10.3	12.7	8.5	
Week 16: =100%	4.4	3.9	3.3	
Week 24: >=0%	66.7	68.2	64.8	
Week 24: >=10%	64.9	66.4	63.4	
Week 24: >=20%	62.2	65.2	62.1	
Week 24: >=30%	59.4	61.1	59.4	
Week 24: >=40%	55.2	55.7	54.7	
Week 24: >=50%	49.3	49.4	47.5	
Week 24: >=60%	40.7	41.2	38.1	
Week 24: >=70%	30.8	33.8	29.0	
Week 24: >=80%	20.6	24.0	20.2	
Week 24: >=90%	10.3	13.3	11.5	

Week 24: =100%	3.9	4.5	3.4	
Week 56: >=0%	60.8	59.1	59.7	
Week 56: >=10%	59.1	57.0	58.1	
Week 56: >=20%	55.9	54.8	56.3	
Week 56: >=30%	53.1	51.2	52.7	
Week 56: >=40%	48.6	46.8	48.6	
Week 56: >=50%	44.3	41.5	43.5	
Week 56: >=60%	37.0	33.8	36.3	
Week 56: >=70%	28.2	27.0	27.5	
Week 56: >=80%	18.9	19.1	18.6	
Week 56: >=90%	10.1	10.5	10.1	
Week 56: =100%	4.5	5.3	4.1	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Percentage of Subjects Achieving Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale Reduction of >=30%, >=50%, >=70% and >=90% Response at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64

End point title	Percentage of Subjects Achieving Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale Reduction of >=30%, >=50%, >=70% and >=90% Response at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64
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#### End point description:

Percentage of subjects with reduction in WOMAC physical function compared to baseline were classified as responders. WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Physical function: Subject's ability to move around and perform usual activities of daily living. WOMAC physical function subscale 17-item questionnaire used to assess the degree of difficulty experienced due to OA in knee/hip during past 48 hours, calculated as mean of the scores from 17 individual questions scored on NRS. Scores for each question and WOMAC physical subscale on NRS ranged from 0 (no difficulty) to 10 (extreme difficulty), higher scores indicated extreme difficulty/worse physical function. Missing data was imputed using mixed BOCF/LOCF. ITT population was analysed. 'Number of subjects analysed' = subjects evaluable for this endpoint. 'n' = subjects evaluable at specified

End point type	Secondary
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#### End point timeframe:

Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1000	995	994	
Units: percentage of subjects				
number (not applicable)				
Week 2: At least 30% reduction (n=1000,995,994)	35.8	32.1	31.7	
Week 2: At least 50% reduction (n=1000,995,994)	20.0	17.0	15.4	

Week 2: At least 70% reduction (n=1000,995,994)	8.3	8.2	5.8	
Week 2: At least 90% reduction (n=1000,995,994)	2.1	3.2	1.7	
Week 4: At least 30% reduction (n=1000,995,994)	49.0	49.1	43.2	
Week 4: At least 50% reduction (n=1000,995,994)	31.1	31.3	23.1	
Week 4: At least 70% reduction (n=1000,995,994)	15.5	15.8	11.2	
Week 4: At least 90% reduction (n=1000,995,994)	4.6	5.4	2.6	
Week 8: At least 30% reduction (n=1000,995,994)	56.0	59.5	55.0	
Week 8: At least 50% reduction (n=1000,995,994)	36.6	40.0	31.4	
Week 8: At least 70% reduction (n=1000,995,994)	18.7	21.3	14.1	
Week 8: At least 90% reduction (n=1000,995,994)	5.8	7.1	4.4	
Week 16: At least 30% reduction (n=1000,995,994)	71.6	71.8	68.1	
Week 16: At least 50% reduction (n=1000,995,994)	53.1	55.8	50.1	
Week 16: At least 70% reduction (n=1000,995,994)	29.9	34.3	27.9	
Week 16: At least 90% reduction (n=1000,995,994)	10.7	13.4	9.7	
Week 24: At least 30% reduction (n=1000,995,994)	59.5	61.3	59.0	
Week 24: At least 50% reduction (n=1000,995,994)	49.9	48.2	46.8	
Week 24: At least 70% reduction (n=1000,995,994)	30.4	32.7	27.8	
Week 24: At least 90% reduction (n=1000,995,994)	11.0	13.0	9.8	
Week 32: At least 30% reduction (n=1000,995,994)	56.7	56.6	55.9	
Week 32: At least 50% reduction (n=1000,995,994)	47.2	45.7	44.7	
Week 32: At least 70% reduction (n=1000,995,994)	29.7	30.2	26.8	
Week 32: At least 90% reduction (n=1000,995,994)	11.0	13.1	9.4	
Week 40: At least 30% reduction (n=1000,995,994)	55.5	55.5	54.9	
Week 40: At least 50% reduction (n=1000,995,994)	45.5	45.0	45.0	
Week 40: At least 70% reduction (n=1000,995,994)	29.5	29.1	27.6	
Week 40: At least 90% reduction (n=1000,995,994)	10.3	13.2	9.5	
Week 48: At least 30% reduction (n=1000,995,994)	54.5	53.3	54.6	
Week 48: At least 50% reduction (n=1000,995,994)	45.3	43.5	43.4	
Week 48: At least 70% reduction (n=1000,995,994)	29.1	27.9	26.1	
Week 48: At least 90% reduction (n=1000,995,994)	10.2	12.0	9.4	
Week 56: At least 30% reduction (n=1000,995,994)	52.0	51.1	52.9	

Week 56: At least 50% reduction (n=1000,995,994)	44.1	41.3	42.5	
Week 56: At least 70% reduction (n=1000,995,994)	26.9	26.4	26.0	
Week 56: At least 90% reduction (n=1000,995,994)	9.3	10.5	9.0	
Week 64: At least 30% reduction (n =437,419,445)	71.4	68.0	78.2	
Week 64: At least 50% reduction (n =437,419,445)	52.9	44.6	58.9	
Week 64: At least 70% reduction (n =437,419,445)	31.4	22.9	33.9	
Week 64: At least 90% reduction (n =437,419,445)	9.4	7.9	13.3	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 2, >=30% reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0651
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.99
upper limit	1.44

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Week 2, >=30% reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9032
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.01
Confidence interval	

level	95 %
sides	2-sided
lower limit	0.84
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 2,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.01
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.36
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.08
upper limit	1.72

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 2,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3728
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.88
upper limit	1.42

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:



Week 2,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0434
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.44
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.01
upper limit	2.04

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2, $\geq 70\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0425
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.44
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.01
upper limit	2.04

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2, $\geq 90\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5442
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)

Point estimate	1.22
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.64
upper limit	2.34

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 2,  $\geq 90\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0349
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.9
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.05
upper limit	3.45

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 4,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0108
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.26
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.05
upper limit	1.51

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 4, $\geq 30\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.008
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.27
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.07
upper limit	1.52

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 4, $\geq 50\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.5
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.22
upper limit	1.83

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 4, $\geq 50\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001

Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.51
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.24
upper limit	1.85

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 4,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.006
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.45
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.11
upper limit	1.88

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 4,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0031
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.49
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.14
upper limit	1.93

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 4, $\geq 90\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0235
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.76
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.08
upper limit	2.88

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Week 4, $\geq 90\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0021
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	2.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.31
upper limit	3.42

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 8, $\geq 30\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID

Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7613
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	1.23

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0548
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	1
upper limit	1.43

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0196
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.25
Confidence interval	
level	95 %
sides	2-sided

lower limit	1.04
upper limit	1.51

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.45
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.2
upper limit	1.75

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0077
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.39
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.09
upper limit	1.77

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and

classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.65
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.3
upper limit	2.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8, >=90% reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1942
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.31
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.87
upper limit	1.96

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8, >=90% reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0122
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.64
Confidence interval	



level	95 %
sides	2-sided
lower limit	1.11
upper limit	2.43

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0977
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.18
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.97
upper limit	1.43

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0806
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.98
upper limit	1.44

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2097
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.94
upper limit	1.34

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 16, $\geq 50\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0135
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.25
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.05
upper limit	1.49

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 16, $\geq 70\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3571
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)

Point estimate	1.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.9
upper limit	1.33

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0025
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.34
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.11
upper limit	1.63

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16,  $\geq 90\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4658
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.83
upper limit	1.49

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 16, $\geq 90\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0108
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.44
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.09
upper limit	1.9

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 24, $\geq 30\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8393
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 24, $\geq 30\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2977

Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.92
upper limit	1.32

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1944
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.94
upper limit	1.34

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5714
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.88
upper limit	1.26

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 24, $\geq 70\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2472
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.92
upper limit	1.36

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Week 24, $\geq 70\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0235
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.25
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.03
upper limit	1.51

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 24, $\geq 90\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID

Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4074
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.13
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.51

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24,  $\geq 90\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0296
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.37
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.03
upper limit	1.81

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7607
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.03
Confidence interval	
level	95 %
sides	2-sided

lower limit	0.86
upper limit	1.23

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 32,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7979
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2964
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.92
upper limit	1.31

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 32,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and



classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.695
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.87
upper limit	1.24

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1985
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.14
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.93
upper limit	1.38

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 32,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1239
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.17
Confidence interval	

level	95 %
sides	2-sided
lower limit	0.96
upper limit	1.42

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32,  $\geq 90\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2762
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.18
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.88
upper limit	1.58

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 32,  $\geq 90\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0121
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.44
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.08
upper limit	1.91

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 40,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8443
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 40, $\geq 30\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8472
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 40, $\geq 50\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.898
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)

Point estimate	1.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.21

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 40,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9385
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.99
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.83
upper limit	1.19

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 40,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4261
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.32

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 40, $\geq 70\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.525
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.88
upper limit	1.3

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 40, $\geq 90\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6273
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.8
upper limit	1.45

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 40, $\geq 90\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0132

Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.43
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.08
upper limit	1.9

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9095
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.99
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.83
upper limit	1.18

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5098
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.94
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.12

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 48, $\geq 50\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4488
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.9
upper limit	1.28

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Week 48, $\geq 50\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9757
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.83
upper limit	1.19

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 48, $\geq 70\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID

Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1843
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.14
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.94
upper limit	1.39

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4356
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.32

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 90\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6342
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.08
Confidence interval	
level	95 %
sides	2-sided



lower limit	0.8
upper limit	1.45

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48,  $\geq 90\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.081
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.29
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.97
upper limit	1.73

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6527
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.96
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.8
upper limit	1.15

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 30\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and

classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3857
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.92
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.77
upper limit	1.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.528
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.06
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.27

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 50\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5355
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.94
Confidence interval	

level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7732
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.84
upper limit	1.26

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 70\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9397
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.82
upper limit	1.23

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56,  $\geq 90\%$  reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9044
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.75
upper limit	1.39

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 56, $\geq 90\%$ reduction: Odds ratio and 95% CI estimated from logistic regression model. Logistic regression model included baseline WOMAC physical function subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3193
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.16
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	1.57

## **Secondary: Percentage of Subjects With Cumulative Percent Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Weeks 16, 24 and 56**

End point title	Percentage of Subjects With Cumulative Percent Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Physical Function Subscale at Weeks 16, 24 and 56
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End point description:

Percentage of subjects with cumulative reduction (in percent) in WOMAC physical function subscale from baseline to Weeks 16, 24 and 56 were reported. WOMAC: Self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Physical function: subject's ability to move around and perform usual activities of daily living. WOMAC physical function subscale: 17-item questionnaire to assess the degree of difficulty experienced due to OA in index joint (knee or hip) during past 48 hours, calculated

as mean of the scores from 17 individual questions scored on a NRS. Scores for each question and WOMAC Pain subscale on NRS ranged from 0 (no difficulty) to 10 (extreme difficulty), higher scores indicated extreme difficulty/worse physical function. Missing data was imputed using mixed BOCF/LOCF. ITT population was analysed. 'Number of subjects analysed'=subjects evaluable for this endpoint.

End point type	Secondary
End point timeframe:	
Baseline, Weeks 16, 24 and 56	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1000	995	994	
Units: percentage of subjects				
number (not applicable)				
Week 16: >0%	90.0	88.8	87.4	
Week 16: >=10%	85.0	83.9	81.4	
Week 16: >=20%	78.4	77.3	73.7	
Week 16: >=30%	71.6	71.8	68.1	
Week 16: >=40%	63.7	64.1	61.0	
Week 16: >=50%	53.1	55.8	50.1	
Week 16: >=60%	41.4	44.7	39.8	
Week 16: >=70%	29.9	34.3	27.9	
Week 16: >=80%	20.8	24.4	17.9	
Week 16: >=90%	10.7	13.4	9.7	
Week 16: =100%	2.9	3.3	2.0	
Week 24: >=0%	66.7	68.6	65.0	
Week 24: >=10%	65.0	66.6	63.3	
Week 24: >=20%	62.6	64.2	60.8	
qWeek 24: >=30%	59.5	61.3	59.0	
Week 24: >=40%	54.9	56.0	53.9	
Week 24: >=50%	49.9	48.2	46.8	
Week 24: >=60%	41.3	42.0	37.7	
Week 24: >=70%	30.4	32.7	27.8	
Week 24: >=80%	19.9	22.6	18.9	
Week 24: >=90%	11.0	13.0	9.8	
Week 24: =100%	3.0	3.2	2.7	
Week 56: >=0%	61.1	59.5	60.1	
Week 56: >=10%	59.3	57.3	57.8	
Week 56: >=20%	56.1	54.3	55.4	
Week 56: >=30%	52.0	51.1	52.9	
Week 56: >=40%	48.5	46.3	48.9	
Week 56: >=50%	44.1	41.3	42.5	
Week 56: >=60%	36.7	34.6	34.8	
Week 56: >=70%	26.9	26.4	26.0	
Week 56: >=80%	17.1	17.1	17.4	
Week 56: >=90%	9.3	10.5	9.0	
Week 56: =100%	2.9	3.6	3.3	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Percentage of Subjects Achieving Improvement of $\geq 2$ Points in Patient's Global Assessment (PGA) of Osteoarthritis at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64

End point title	Percentage of Subjects Achieving Improvement of $\geq 2$ Points in Patient's Global Assessment (PGA) of Osteoarthritis at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64
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End point description:

PGA of OA was assessed by asking a question from subjects: "Considering all the ways your osteoarthritis in your knee or hip affects you, how are you doing today?" Subjects responded on a scale ranging from 1-5, where, 1=very good (no symptom and no limitation of normal activities), 2= good (mild symptoms and no limitation of normal activities), 3= fair (moderate symptoms and limitation of some normal activities), 4= poor (severe symptoms and inability to carry out most normal activities), and 5 = very poor (very severe symptoms and inability to carry out all normal activities). Higher scores indicated worse condition. Percentage of subjects with improvement of at least 2 points from baseline in PGA of OA were reported. Missing data was imputed using mixed BOCF/LOCF. ITT population was analysed. 'Overall number of subjects analyzed'=subjects evaluable for this endpoint. 'n'=subjects evaluable at specified time points for each arm, respectively.

End point type	Secondary
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End point timeframe:

Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56 and 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1000	995	994	
Units: percentage of subjects				
number (not applicable)				
Week 2 (n= 1000, 995, 994)	14.6	15.6	11.6	
Week 4 (n= 1000, 995, 994)	21.4	22.4	15.9	
Week 8 (n= 1000, 995, 994)	21.9	23.7	19.0	
Week 16 (n= 1000, 995, 994)	29.1	30.3	28.2	
Week 24 (n= 1000, 995, 994)	23.4	24.8	23.7	
Week 32 (n= 1000, 995, 994)	23.7	22.3	23.6	
Week 40 (n= 1000, 995, 994)	21.7	21.7	21.0	
Week 48 (n= 1000, 995, 994)	22.0	21.7	21.1	
Week 56 (n= 1000, 995, 994)	21.0	19.7	20.8	
Week 64 (n= 437, 419, 445))	21.1	17.4	25.8	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1772
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.22
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.91
upper limit	1.62

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0154
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.42
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.07
upper limit	1.89

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 4: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0105

Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.4
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.08
upper limit	1.81

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 4: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.63
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.26
upper limit	2.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4007
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.87
upper limit	1.43



<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Week 8: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0116
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.37
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.07
upper limit	1.75

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 16: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6279
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.95
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.76
upper limit	1.18

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Week 16: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID

Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4674
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.09
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.87
upper limit	1.35

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3135
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.89
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.71
upper limit	1.12

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7581
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.04
Confidence interval	
level	95 %
sides	2-sided

lower limit	0.83
upper limit	1.3

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4504
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.92
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.73
upper limit	1.15

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 32: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2629
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.88
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.7
upper limit	1.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 40: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest

KLG, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6763
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.95
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.75
upper limit	1.2

### Statistical analysis title

Tanezumab 5 mg Vs NSAID

Statistical analysis description:

Week 40: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9456
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.8
upper limit	1.27

### Statistical analysis title

Tanezumab 2.5 mg Vs NSAID

Statistical analysis description:

Week 48: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.752
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.96
Confidence interval	

level	95 %
sides	2-sided
lower limit	0.76
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9981
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.26

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5284
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.93
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.74
upper limit	1.17

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline PGA of OA scale, baseline diary average pain, and classification variables index joint, highest KLG, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.322
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.89
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.7
upper limit	1.12

### Secondary: Change From Baseline in Average Pain Score in the Index Joint at Weeks 1, 2, 3, 4, 6, 8, 10, 12, 16, 20, 24, 32, 40, 48 and 56

End point title	Change From Baseline in Average Pain Score in the Index Joint at Weeks 1, 2, 3, 4, 6, 8, 10, 12, 16, 20, 24, 32, 40, 48 and 56
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End point description:

Subjects assessed their average pain in the index hip/knee in the past 24 hours using NRS, with a scale ranging from 0 (no pain) to 10 (worst possible pain). Higher scores indicated higher pain. Data for Weeks 20 through 56 represents averages of the values reported during the 4-week interval up to and including the given week. Change from baseline was calculated using the difference between each post-baseline weekly mean and the baseline mean score. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
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End point timeframe:

Baseline, Weeks 1, 2, 3, 4, 6, 8, 10, 12, 16, 20, 24, 32, 40, 48 and 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 1	-0.47 (± 0.05)	-0.56 (± 0.05)	-0.56 (± 0.05)	
Change at Week 2	-1.02 (± 0.07)	-0.97 (± 0.07)	-0.91 (± 0.07)	
Change at Week 3	-1.40 (± 0.08)	-1.30 (± 0.08)	-1.23 (± 0.08)	
Change at Week 4	-1.62 (± 0.09)	-1.65 (± 0.09)	-1.32 (± 0.09)	
Change at Week 6	-1.85 (± 0.09)	-1.97 (± 0.09)	-1.49 (± 0.09)	
Change at Week 8	-1.83 (± 0.10)	-2.04 (± 0.10)	-1.59 (± 0.10)	
Change at Week 10	-2.35 (± 0.10)	-2.46 (± 0.10)	-1.98 (± 0.10)	
Change at Week 12	-2.48 (± 0.10)	-2.55 (± 0.10)	-2.10 (± 0.10)	
Change at Week 16	-2.41 (± 0.10)	-2.52 (± 0.10)	-2.17 (± 0.11)	
Change at Week 20	-2.56 (± 0.11)	-2.60 (± 0.11)	-2.27 (± 0.11)	
Change at Week 24	-2.35 (± 0.13)	-2.41 (± 0.12)	-2.11 (± 0.12)	

Change at Week 32	-2.27 ( $\pm$ 0.13)	-2.26 ( $\pm$ 0.13)	-2.06 ( $\pm$ 0.13)	
Change at Week 40	-2.25 ( $\pm$ 0.13)	-2.20 ( $\pm$ 0.13)	-2.07 ( $\pm$ 0.13)	
Change at Week 48	-2.20 ( $\pm$ 0.13)	-2.10 ( $\pm$ 0.13)	-2.03 ( $\pm$ 0.13)	
Change at Week 56	-2.17 ( $\pm$ 0.13)	-2.03 ( $\pm$ 0.13)	-2.04 ( $\pm$ 0.13)	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 1: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.112
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.09
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.02
upper limit	0.2
Variability estimate	Standard error of the mean
Dispersion value	0.06

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 1: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9686
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.11
upper limit	0.11

Variability estimate	Standard error of the mean
Dispersion value	0.06

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1589
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.25
upper limit	0.04
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.472
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.2
upper limit	0.09
Variability estimate	Standard error of the mean
Dispersion value	0.08



<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 3: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.032
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.17
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.33
upper limit	-0.01
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 3: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3336
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.24
upper limit	0.08
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0005
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.3
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.47
upper limit	-0.13
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.33
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.5
upper limit	-0.16
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 6: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification	

variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.37
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.55
upper limit	-0.18
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 6: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.48
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.66
upper limit	-0.3
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998

Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0115
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.24
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.42
upper limit	-0.05
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.45
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.63
upper limit	-0.26
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 10: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	ANCOVA

Parameter estimate	LS Mean Difference
Point estimate	-0.36
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.56
upper limit	-0.17
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 10: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.48
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.67
upper limit	-0.28
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.37
Confidence interval	
level	95 %

sides	2-sided
lower limit	-0.57
upper limit	-0.18
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 12: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.45
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.64
upper limit	-0.25
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0238
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.24
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.44
upper limit	-0.03
Variability estimate	Standard error of the mean

Dispersion value	0.1
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<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0011
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.34
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.55
upper limit	-0.14
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 20: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0064
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.3
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.51
upper limit	-0.08
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 20: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0025
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.33
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.54
upper limit	-0.12
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0589
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.23
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.48
upper limit	0.01
Variability estimate	Standard error of the mean
Dispersion value	0.12

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization	



stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.018
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.29
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.53
upper limit	-0.05
Variability estimate	Standard error of the mean
Dispersion value	0.12

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0944
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.22
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.47
upper limit	0.04
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994

Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1198
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.2
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.45
upper limit	0.05
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1837
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.17
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.43
upper limit	0.08
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.317
Method	ANCOVA

Parameter estimate	LS Mean Difference
Point estimate	-0.13
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.39
upper limit	0.13
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1873
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.17
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.43
upper limit	0.08
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5719
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.07
Confidence interval	
level	95 %

sides	2-sided
lower limit	-0.33
upper limit	0.18
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3571
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.39
upper limit	0.14
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest KLG and NSAID) as fixed effects, baseline pain in the index joint as covariate, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9072
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.25
upper limit	0.28
Variability estimate	Standard error of the mean

Dispersion value	0.14
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## Secondary: Change From Baseline in Average Pain Score in the Index Joint at Week 64

End point title	Change From Baseline in Average Pain Score in the Index Joint at Week 64
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### End point description:

Subjects assessed their average pain in the index hip/knee in the past 24 hours using NRS, with a scale ranging from 0 (no pain) to 10 (worst possible pain). Higher scores indicated higher pain. Data represents averages of the values reported during the 8-week interval (4-week interval for weeks 20 to 56) up to and including the given week. Change from baseline was calculated using the difference between each post-baseline weekly mean and the baseline mean score. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" =subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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### End point timeframe:

Baseline, Week 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n= 995, 992, 990 )	6.76 (± 1.59)	6.77 (± 1.58)	6.76 (± 1.54)	
Change at Week 64 (n =436, 416, 434)	-3.01 (± 2.60)	-2.81 (± 2.71)	-3.24 (± 2.55)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Stiffness Subscale at Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Stiffness Subscale at Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56
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### End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Stiffness was defined as a sensation of decreased ease of movement in the index joint (knee or hip). The WOMAC stiffness subscale is a 2-item questionnaire used to assess the amount of stiffness experienced due to OA in the index joint (knee or hip) during the past 48 hours. It was calculated as the mean of scores from 2 individual questions scored on NRS. Scores for each question and WOMAC stiffness subscale score on NRS ranged from 0 (no stiffness) to 10 (extreme stiffness), where higher scores indicated higher stiffness. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
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### End point timeframe:

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.79 (± 0.09)	-1.70 (± 0.09)	-1.48 (± 0.09)	
Change at Week 4	-2.32 (± 0.10)	-2.43 (± 0.10)	-1.95 (± 0.10)	
Change at Week 8	-2.46 (± 0.10)	-2.79 (± 0.10)	-2.16 (± 0.10)	
Change at Week 16	-3.32 (± 0.11)	-3.54 (± 0.11)	-3.10 (± 0.11)	
Change at Week 24	-2.77 (± 0.13)	-2.95 (± 0.13)	-2.63 (± 0.13)	
Change at Week 32	-2.68 (± 0.13)	-2.74 (± 0.13)	-2.52 (± 0.13)	
Change at Week 40	-2.58 (± 0.14)	-2.64 (± 0.14)	-2.46 (± 0.14)	
Change at Week 48	-2.60 (± 0.14)	-2.54 (± 0.13)	-2.44 (± 0.14)	
Change at Week 56	-2.46 (± 0.14)	-2.46 (± 0.14)	-2.42 (± 0.14)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0004
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.31
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.49
upper limit	-0.14
Variability estimate	Standard error of the mean
Dispersion value	0.09

Statistical analysis title	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason

for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0134
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.22
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.4
upper limit	-0.05
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.38
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.56
upper limit	-0.19
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994

Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.48
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.67
upper limit	-0.29
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0031
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.29
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.49
upper limit	-0.1
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA



Parameter estimate	LS Mean Difference
Point estimate	-0.63
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.82
upper limit	-0.43
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0425
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.22
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.43
upper limit	-0.01
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.44
Confidence interval	

level	95 %
sides	2-sided
lower limit	-0.65
upper limit	-0.23
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.298
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.14
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.4
upper limit	0.12
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0179
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.32
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.58

upper limit	-0.05
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2328
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.16
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.42
upper limit	0.1
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1019
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.22
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.49
upper limit	0.04
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4002
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.38
upper limit	0.15
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2149
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.17
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.45
upper limit	0.1
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2442
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.16
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.43
upper limit	0.11
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4609
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.37
upper limit	0.17
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	

Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8129
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.31
upper limit	0.24
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC stiffness subscales and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7883
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.32
upper limit	0.24
Variability estimate	Standard error of the mean
Dispersion value	0.14

**Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Stiffness Subscale at Week 64**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Stiffness Subscale at Week 64
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**End point description:**

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA. Stiffness was defined as a sensation of decreased ease of movement in the index joint (knee or hip). The WOMAC stiffness subscale is a 2-item questionnaire used to assess the amount of stiffness experienced due to OA in the index joint (knee or hip) during the past 48 hours. It was calculated as the mean of scores from 2 individual questions scored on NRS. Scores for each question and WOMAC stiffness subscale score on NRS ranged from 0 (no stiffness) to 10 (extreme stiffness), where higher scores indicated higher stiffness. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" =subjects who were evaluable at specified time point for each arm, respectively.

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End point type	Secondary
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End point timeframe:

Baseline, Week 64

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End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n =1000, 995, 994)	7.15 (± 1.42)	7.20 (± 1.40)	7.09 (± 1.42)	
Change at Week 64 (n =437, 419, 445)	-3.31 (± 2.72)	-3.04 (± 2.64)	-3.66 (± 2.36)	

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**Statistical analyses**

No statistical analyses for this end point

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**Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Average Score at Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56**

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End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Average Score at Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56
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End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA of index joint (knee or hip). WOMAC pain subscale assess amount of pain experienced (score: 0 [no pain] to 10 [extreme pain], higher score = more pain), WOMAC physical function subscale assess degree of difficulty experienced (score: 0 [no difficulty] to 10 [extreme difficulty], higher score = worse physical function) and WOMAC stiffness subscale assess the amount of stiffness experienced (score: 0 [no stiffness] to 10 [extreme stiffness], higher score = higher stiffness). WOMAC average score was the mean of WOMAC pain, physical function and stiffness subscale scores and ranges from 0 to 10, where higher scores indicated worse response. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

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End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56

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End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.73 (± 0.08)	-1.61 (± 0.08)	-1.52 (± 0.08)	
Change at Week 4	-2.28 (± 0.09)	-2.34 (± 0.09)	-1.95 (± 0.09)	
Change at Week 8	-2.44 (± 0.10)	-2.71 (± 0.10)	-2.23 (± 0.10)	
Change at Week 16	-3.26 (± 0.11)	-3.41 (± 0.11)	-3.07 (± 0.11)	
Change at Week 24	-2.74 (± 0.13)	-2.88 (± 0.13)	-2.64 (± 0.13)	
Change at Week 32	-2.65 (± 0.13)	-2.69 (± 0.13)	-2.54 (± 0.13)	
Change at Week 40	-2.57 (± 0.13)	-2.58 (± 0.13)	-2.49 (± 0.13)	
Change at Week 48	-2.56 (± 0.13)	-2.48 (± 0.13)	-2.44 (± 0.13)	
Change at Week 56	-2.45 (± 0.13)	-2.38 (± 0.13)	-2.40 (± 0.13)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0119
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.21
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.37
upper limit	-0.05
Variability estimate	Standard error of the mean
Dispersion value	0.08

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified



Analysis type	superiority
P-value	= 0.3073
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.24
upper limit	0.08
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0002
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.33
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.5
upper limit	-0.15
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference

Point estimate	-0.39
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.56
upper limit	-0.22
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0251
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.21
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.39
upper limit	-0.03
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.48
Confidence interval	
level	95 %
sides	2-sided

lower limit	-0.66
upper limit	-0.3
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0625
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.39
upper limit	0.01
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.34
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.54
upper limit	-0.14
Variability estimate	Standard error of the mean

Dispersion value	0.1
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<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4005
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.36
upper limit	0.14
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.053
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.25
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.5
upper limit	0
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4074
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.37
upper limit	0.15
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2629
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.15
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.41
upper limit	0.11
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5582
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.34
upper limit	0.18
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4907
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.09
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.35
upper limit	0.17
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	

Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4043
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.38
upper limit	0.15
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7663
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.31
upper limit	0.23
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects,

baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7415
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.31
upper limit	0.22
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC average scores and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8688
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.24
upper limit	0.29
Variability estimate	Standard error of the mean
Dispersion value	0.13

## Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Average Score at Week 64

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Average Score at Week 64
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End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA of index joint (knee or



hip). WOMAC pain subscale assess amount of pain experienced (score: 0 [no pain] to 10 [extreme pain], higher score = more pain), WOMAC physical function subscale assess degree of difficulty experienced (score: 0 [no difficulty] to 10 [extreme difficulty], higher score = worse physical function) and WOMAC stiffness subscale assess the amount of stiffness experienced (score: 0 [no stiffness] to 10 [extreme stiffness], higher score = higher stiffness). WOMAC average score was the mean of WOMAC pain, physical function and stiffness subscale scores and ranges from 0 to 10, where higher scores indicated worse response. ITT population was analysed. 'n'=subjects evaluable at specified time points for each arm,

End point type	Secondary
End point timeframe:	
Baseline, Week 64	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n =1000, 995, 994)	7.09 (± 1.08)	7.10 (± 1.10)	7.01 (± 1.08)	
Change at Week 64 (n =437, 419, 445)	-3.40 (± 2.40)	-3.09 (± 2.37)	-3.77 (± 2.06)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item: Pain When Walking on a Flat Surface at Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item: Pain When Walking on a Flat Surface at Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56
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End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA in index joint (knee or hip). Subjects answered a question: "How much pain have you had when walking on a flat surface?". Subjects responded about the amount of pain they experienced when walking on a flat surface by using a NRS of 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
End point timeframe:	
Baseline, Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.54 (± 0.08)	-1.39 (± 0.08)	-1.46 (± 0.08)	
Change at Week 4	-2.14 (± 0.10)	-2.15 (± 0.10)	-1.91 (± 0.10)	
Change at Week 8	-2.26 (± 0.10)	-2.47 (± 0.10)	-2.22 (± 0.10)	
Change at Week 16	-3.01 (± 0.11)	-3.13 (± 0.11)	-2.95 (± 0.11)	
Change at Week 24	-2.64 (± 0.13)	-2.76 (± 0.13)	-2.60 (± 0.13)	
Change at Week 32	-2.54 (± 0.13)	-2.54 (± 0.13)	-2.52 (± 0.14)	
Change at Week 40	-2.48 (± 0.14)	-2.42 (± 0.14)	-2.48 (± 0.14)	
Change at Week 48	-2.45 (± 0.14)	-2.34 (± 0.14)	-2.42 (± 0.14)	
Change at Week 56	-2.37 (± 0.14)	-2.21 (± 0.14)	-2.39 (± 0.14)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3622
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.25
upper limit	0.09
Variability estimate	Standard error of the mean
Dispersion value	0.09

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID

Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3894
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.09
upper limit	0.24
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0137
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.23
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.42
upper limit	-0.05
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority

P-value	= 0.0106
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.24
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.43
upper limit	-0.06
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7179
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.23
upper limit	0.16
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.012
Method	ANCOVA
Parameter estimate	LS Mean Difference

Point estimate	-0.25
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.44
upper limit	-0.05
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5372
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.28
upper limit	0.15
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0899
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.18
Confidence interval	
level	95 %

sides	2-sided
lower limit	-0.4
upper limit	0.03
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7646
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.3
upper limit	0.22
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2547
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.15
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.41
upper limit	0.11

Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8806
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.29
upper limit	0.25
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8416
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.3
upper limit	0.24
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9981
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.28
upper limit	0.28
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6485
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.06
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.21
upper limit	0.34
Variability estimate	Standard error of the mean
Dispersion value	0.14



<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8317
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.3
upper limit	0.24
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5819
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.19
upper limit	0.35
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	

Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8538
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.26
upper limit	0.31
Variability estimate	Standard error of the mean
Dispersion value	0.14

#### Statistical analysis title

Tanezumab 5 mg Vs NSAID

Statistical analysis description:

Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when walking on a flat surface and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1981
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.1
upper limit	0.47
Variability estimate	Standard error of the mean
Dispersion value	0.15

#### Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item: Pain When Walking on a Flat Surface at Week 64

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item: Pain When Walking on a Flat Surface at Week 64
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End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA in index joint (knee or hip). Subjects answered a question: "How much pain have you had when walking on a flat surface?". Subjects responded about the amount of pain they experienced when walking on a flat surface by using a NRS of 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. ITT population was analysed. 'n'=subjects evaluable at specified time points for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Week 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n =1000, 995, 994)	6.86 (± 1.33)	6.90 (± 1.34)	6.86 (± 1.30)	
Change at Week 64 (n =437, 419, 445)	-3.20 (± 2.78)	-2.69 (± 2.58)	-3.67 (± 2.32)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item: Pain When Going Up or Downstairs at Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item: Pain When Going Up or Downstairs at Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56
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End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA in index joint (knee or hip). Subjects answered a question: "How much pain have you had when going up or down the stairs?" Subjects responded about the amount of pain they experienced when going up or down stairs by using a NRS of 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
least squares mean (standard error)				
Change at Week 2	-1.81 (± 0.08)	-1.66 (± 0.08)	-1.66 (± 0.09)	
Change at Week 4	-2.34 (± 0.10)	-2.43 (± 0.10)	-2.08 (± 0.10)	
Change at Week 8	-2.48 (± 0.10)	-2.81 (± 0.10)	-2.40 (± 0.10)	
Change at Week 16	-3.34 (± 0.11)	-3.50 (± 0.11)	-3.18 (± 0.12)	
Change at Week 24	-2.89 (± 0.13)	-3.03 (± 0.13)	-2.83 (± 0.14)	
Change at Week 32	-2.76 (± 0.14)	-2.84 (± 0.14)	-2.74 (± 0.14)	
Change at Week 40	-2.69 (± 0.14)	-2.74 (± 0.14)	-2.70 (± 0.14)	
Change at Week 48	-2.70 (± 0.14)	-2.63 (± 0.14)	-2.67 (± 0.14)	
Change at Week 56	-2.55 (± 0.14)	-2.47 (± 0.14)	-2.55 (± 0.14)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0846
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.15
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.33
upper limit	0.02
Variability estimate	Standard error of the mean
Dispersion value	0.09

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID

Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9749
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.18
upper limit	0.17
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0076
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.26
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.45
upper limit	-0.07
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 4: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority

P-value	= 0.0003
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.35
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.54
upper limit	-0.16
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4402
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.27
upper limit	0.12
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference

Point estimate	-0.41
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.61
upper limit	-0.21
Variability estimate	Standard error of the mean
Dispersion value	0.1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1543
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.16
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.38
upper limit	0.06
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0053
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.31
Confidence interval	
level	95 %

sides	2-sided
lower limit	-0.53
upper limit	-0.09
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6445
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.06
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.33
upper limit	0.2
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1439
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.2
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.47
upper limit	0.07



Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8402
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.3
upper limit	0.25
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 32: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4439
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.11
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.38
upper limit	0.17
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9376
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.27
upper limit	0.29
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 40: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7614
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.33
upper limit	0.24
Variability estimate	Standard error of the mean
Dispersion value	0.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8081
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.32
upper limit	0.25
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 48: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8078
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.25
upper limit	0.33
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	

Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9705
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.28
upper limit	0.29
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Multiple imputation method was applied for missing data, with imputation dependent on reason for missing data. ANCOVA model for imputed datasets included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WOMAC pain when going up or down stairs and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5785
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.21
upper limit	0.38
Variability estimate	Standard error of the mean
Dispersion value	0.15

**Secondary: Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item: Pain When Going Up or Downstairs at Week 64**

End point title	Change From Baseline in Western Ontario and McMaster Universities Osteoarthritis Index (WOMAC) Pain Subscale Item: Pain When Going Up or Downstairs at Week 64
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End point description:

WOMAC: self-administered, disease-specific questionnaire which assesses clinically important, subject-relevant symptoms for pain, stiffness and physical function in subjects with OA in index joint (knee or hip). Subjects answered a question: "How much pain have you had when going up or down the stairs?" Subjects responded about the amount of pain they experienced when going up or down stairs by using a NRS of 0 (no pain) to 10 (extreme pain), where higher scores indicated higher pain. ITT population was analysed. Here, "n"=subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Week 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n =1000, 995, 994)	7.89 (± 1.24)	7.88 (± 1.29)	7.83 (± 1.19)	
Change at Week 64 (n =437, 419, 445)	-3.28 (± 2.67)	-2.97 (± 2.69)	-3.70 (± 2.50)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Work Productivity and Activity Impairment Questionnaire for Osteoarthritis (WPAI:OA) Scores at Weeks 16, 24 and 56

End point title	Change From Baseline in Work Productivity and Activity Impairment Questionnaire for Osteoarthritis (WPAI:OA) Scores at Weeks 16, 24 and 56
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End point description:

WPAI is 6-question subject rated questionnaire to determine the impact of OA on absenteeism, presenteeism, work productivity, and daily activity impairment for a period of 7 days prior to a visit. It yields 4 sub-scores: work time missed (absenteeism), impairment while working (presenteeism), overall work impairment (work productivity) and activity impairment (daily activity impairment). These sub-scores are expressed as an impairment percentage (range from 0 to 100), with higher numbers indicating greater impairment and less productivity. ITT population was analyzed. Here, Overall number of subjects analyzed'=subjects evaluable for this endpoint. Here, "n" =subjects evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Weeks 16, 24 and 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	932	941	930	
Units: units on a scale				
least squares mean (standard error)				
CAW 16:%Work Time Missed(n=350,339,338)	-2.33 (± 0.62)	-3.35 (± 0.64)	-2.92 (± 0.63)	
CAW 16:%Impairment While Working(n=343,336,336)	-28.07 (± 1.58)	-26.94 (± 1.61)	-26.59 (± 1.60)	
CAW 16:%Overall Work Impairment(n=343,336,336)	-28.67 (± 1.62)	-27.51 (± 1.65)	-27.04 (± 1.63)	
CAW 16:%Activity Impairment(n=932,941,930)	-30.59 (± 1.04)	-31.36 (± 1.04)	-29.38 (± 1.05)	
CAW 24:%Work Time Missed(n=300,286,282)	-2.70 (± 0.80)	-2.19 (± 0.81)	-2.73 (± 0.81)	
CAW 24:%Impairment While Working(n=297,282,279)	-25.34 (± 1.73)	-26.66 (± 1.74)	-25.15 (± 1.74)	
CAW 24:%Overall Work Impairment(n=297,282,279)	-26.05 (± 1.78)	-27.33 (± 1.80)	-25.90 (± 1.80)	
CAW 24:%Activity Impairment(n=822,821,820)	-29.88 (± 1.13)	-30.53 (± 1.13)	-29.76 (± 1.14)	
CAW 56:%Work Time Missed(n=163,178,152)	-0.12 (± 1.56)	-1.84 (± 1.47)	-0.81 (± 1.53)	
CAW 56:%Impairment While Working(n=162,174,152)	-31.49 (± 2.22)	-29.92 (± 2.12)	-34.59 (± 2.17)	
CAW 56:%Overall Work Impairment(n=162,174,152)	-31.21 (± 2.39)	-29.29 (± 2.28)	-34.26 (± 2.34)	
CAW 56:%Activity Impairment(n=480,486,477)	-34.47 (± 1.42)	-32.91 (± 1.39)	-36.17 (± 1.41)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 16: Percent Work Time Missed: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4303
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.58
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.87
upper limit	2.04
Variability estimate	Standard error of the mean
Dispersion value	0.74

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 16: Percent Work Time Missed: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5656
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.43
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.9
upper limit	1.04
Variability estimate	Standard error of the mean
Dispersion value	0.75

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 24: Percent Work Time Missed: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.976
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.78
upper limit	1.83
Variability estimate	Standard error of the mean
Dispersion value	0.92

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	

Week 24: Percent Work Time Missed: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5678
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.53
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.3
upper limit	2.36
Variability estimate	Standard error of the mean
Dispersion value	0.93

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: Percent Work Time Missed: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6974
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.68
Confidence interval	
level	95 %
sides	2-sided
lower limit	-2.77
upper limit	4.14
Variability estimate	Standard error of the mean
Dispersion value	1.76

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Percent Work Time Missed: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified



Analysis type	superiority
P-value	= 0.1261
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	2.64
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.75
upper limit	6.04
Variability estimate	Standard error of the mean
Dispersion value	1.72

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16: Percent Impairment While Working: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.406
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-1.48
Confidence interval	
level	95 %
sides	2-sided
lower limit	-4.96
upper limit	2.01
Variability estimate	Standard error of the mean
Dispersion value	1.78

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16: Percent Impairment While Working: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.848
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.34
Confidence interval	

level	95 %
sides	2-sided
lower limit	-3.84
upper limit	3.15
Variability estimate	Standard error of the mean
Dispersion value	1.78

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24: Percent Impairment While Working: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.923
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.19
Confidence interval	
level	95 %
sides	2-sided
lower limit	-4
upper limit	3.63
Variability estimate	Standard error of the mean
Dispersion value	1.94

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: Percent Impairment While Working: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4421
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-1.51
Confidence interval	
level	95 %
sides	2-sided
lower limit	-5.36
upper limit	2.34
Variability estimate	Standard error of the mean
Dispersion value	1.96

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 56: Percent Impairment While Working: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2049
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	3.1
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.7
upper limit	7.91
Variability estimate	Standard error of the mean
Dispersion value	2.44

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 56: Percent Impairment While Working: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0527
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	4.68
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.05
upper limit	9.41
Variability estimate	Standard error of the mean
Dispersion value	2.4

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	

Week 16: Percent Overall Work Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3699
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-1.63
Confidence interval	
level	95 %
sides	2-sided
lower limit	-5.21
upper limit	1.94
Variability estimate	Standard error of the mean
Dispersion value	1.82

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16: Percent Overall Work Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7945
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.48
Confidence interval	
level	95 %
sides	2-sided
lower limit	-4.06
upper limit	3.11
Variability estimate	Standard error of the mean
Dispersion value	1.83

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24: Percent Overall Work Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified

Analysis type	superiority
P-value	= 0.941
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.15
Confidence interval	
level	95 %
sides	2-sided
lower limit	-4.13
upper limit	3.83
Variability estimate	Standard error of the mean
Dispersion value	2.03

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: Percent Overall Work Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.486
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-1.43
Confidence interval	
level	95 %
sides	2-sided
lower limit	-5.44
upper limit	2.59
Variability estimate	Standard error of the mean
Dispersion value	2.05

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: Percent Overall Work Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2448
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	3.05
Confidence interval	

level	95 %
sides	2-sided
lower limit	-2.1
upper limit	8.2
Variability estimate	Standard error of the mean
Dispersion value	2.62

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Percent Overall Work Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0551
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	4.96
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.11
upper limit	10.04
Variability estimate	Standard error of the mean
Dispersion value	2.58

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16: Percent Activity Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.247
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-1.21
Confidence interval	
level	95 %
sides	2-sided
lower limit	-3.26
upper limit	0.84
Variability estimate	Standard error of the mean
Dispersion value	1.05

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 16: Percent Activity Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.057
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-1.98
Confidence interval	
level	95 %
sides	2-sided
lower limit	-4.01
upper limit	0.06
Variability estimate	Standard error of the mean
Dispersion value	1.04

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 24: Percent Activity Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.917
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.12
Confidence interval	
level	95 %
sides	2-sided
lower limit	-2.36
upper limit	2.12
Variability estimate	Standard error of the mean
Dispersion value	1.14

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	

Week 24: Percent Activity Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4991
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-0.77
Confidence interval	
level	95 %
sides	2-sided
lower limit	-3
upper limit	1.46
Variability estimate	Standard error of the mean
Dispersion value	1.14

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: Percent Activity Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1862
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2377
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	1.7
Confidence interval	
level	95 %
sides	2-sided
lower limit	-1.12
upper limit	4.52
Variability estimate	Standard error of the mean
Dispersion value	1.44

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Percent Activity Impairment: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline WPAI score and baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1871
Analysis specification	Pre-specified



Analysis type	superiority
P-value	= 0.0238
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	3.26
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.43
upper limit	6.08
Variability estimate	Standard error of the mean
Dispersion value	1.44

## Secondary: Change From Baseline in Work Productivity and Activity Impairment Questionnaire for Osteoarthritis (WPAI:OA) Scores at Week 64

End point title	Change From Baseline in Work Productivity and Activity Impairment Questionnaire for Osteoarthritis (WPAI:OA) Scores at Week 64
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End point description:

WPAI is 6-question subject rated questionnaire to determine the impact of OA on absenteeism, presenteeism, work productivity, and daily activity impairment for a period of 7 days prior to a visit. It yields 4 sub-scores: work time missed (absenteeism), impairment while working (presenteeism), overall work impairment (work productivity) and activity impairment (daily activity impairment). These sub-scores are expressed as an impairment percentage (range from 0 to 100), with higher numbers indicating greater impairment and less productivity. CAW = Change at Week, (%) = Percent. ITT population was analyzed. Here, "n" =subjects evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Week 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline: % Work Time Missed (n=438,417,420)	6.1 (± 15.81)	6.0 (± 15.56)	5.2 (± 14.54)	
Baseline:%Impairment While Working (n=434,413,417)	60.5 (± 20.39)	58.3 (± 20.78)	59.3 (± 18.97)	
Baseline:%Overall Work Impairment (n=434,413,417)	62.1 (± 21.02)	60.0 (± 21.37)	60.6 (± 19.78)	
Baseline: % Activity Impairment (n=1000,995,994)	68.3 (± 14.93)	67.9 (± 15.83)	66.7 (± 15.35)	
CAW 64: % Work Time Missed(n=149,137,142)	-1.8 (± 19.35)	4.1 (± 21.88)	-2.1 (± 16.65)	
CAW 64:% Impairment While Working(n=146,135,141)	-24.2 (± 27.69)	-20.7 (± 29.13)	-26.5 (± 26.24)	
CAW 64:% Overall Work Impairment (n=146,135,141)	-24.5 (± 28.77)	-19.2 (± 30.54)	-27.0 (± 27.22)	

CAW 64: % Activity Impairment(n=450,427,453)	-28.7 (± 26.68)	-24.1 (± 27.80)	-32.1 (± 24.51)	
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## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Subjects With Responses to European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L): Mobility Domain

End point title	Number of Subjects With Responses to European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L): Mobility Domain
End point description:	
<p>Number of subjects with mobility domain responses of EQ-5D-5L were provided. EQ-5D-5L is a standardized subjects completed questionnaire that measures health-related quality of life and translates that score into an index value or utility score. EQ-5D-5L consists of two components: a health state profile and an optional visual analogue scale (VAS). EQ-5D health state profile is comprised of 5 dimensions: mobility, self-care, usual activities, pain/discomfort and anxiety/depression. Each dimension has 5 levels: 1=no problems, 2=slight problems, 3=moderate problems, 4=severe problems, and 5=extreme problems. Higher scores indicated greater levels of problems across the five dimensions. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" signifies those subjects who were evaluable at specified time point for each arm, respectively.</p>	
End point type	Secondary
End point timeframe:	
Baseline, Weeks 8, 16, 24, 40, 56 and 64	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Baseline:No problem in walking(n=1000,995,994)	26	20	23	
Week 8:No problem in walking(n=956,966,956)	223	241	216	
Week 16:No problem in walking(n=913,920,915)	299	319	292	
Week 24:No problem in walking(n=817,816,813)	259	261	260	
Week 40:No problem in walking(n=561,553,535)	217	211	218	
Week 56:No problem in walking(n=458,458,459)	157	147	170	
Week 64:No problem in walking(n=450,428,454)	98	66	107	
Baseline:Slight problem in walking(n=1000,995,994)	203	192	194	
Week 8:Slight problem in walking(n=956,966,956)	374	411	392	
Week 16:Slight problem in walking(n=913,920,915)	388	371	412	

Week 24:Slight problem in walking(n=817,816,813)	308	310	337	
Week 40:Slight problem in walking(n=561,553,535)	215	209	217	
Week 56:Slight problem in walking(n=458,458,459)	205	166	189	
Week 64:Slight problem in walking(n=450,428,454)	156	156	205	
Baseline:Moderate problem in walk(n=1000,995,994)	567	579	588	
Week 8:Moderate problem in walk(n=956,966,956)	318	266	301	
Week 16:Moderate problem in walk(n=913,920,915)	199	196	185	
Week 24:Moderate problem in walk(n=817,816,813)	216	200	186	
Week 40:Moderate problem in walk(n=561,553,535)	110	106	91	
Week 56:Moderate problem in walk(n=458,458,459)	77	120	91	
Week 64:Moderate problem in walk(n=450,428,454)	150	151	121	
Baseline:Severe problem in walk(n=1000,995,994)	204	202	189	
Week 8:Severe problem in walk(n=956,966,956)	41	48	44	
Week 16:Severe problem in walk(n=913,920,915)	27	34	26	
Week 24:Severe problem in walk(n=817,816,813)	34	43	29	
Week 40:Severe problem in walk(n=561,553,535)	19	27	9	
Week 56:Severe problem in walk(n=458,458,459)	19	24	9	
Week 64:Severe problem in walking(n=450,428,454)	45	54	21	
Baseline:Unable to walk(n=1000,995,994)	0	2	0	
Week 8:Unable to walk(n=956,966,956)	0	0	3	
Week 16:Unable to walk(n=913,920,915)	0	0	0	
Week 24:Unable to walk(n=817,816,813)	0	2	1	
Week 40:Unable to walk(n=561,553,535)	0	0	0	
Week 56:Unable to walk(n=458,458,459)	0	1	0	
Week 64:Unable to walk(n=450,428,454)	1	1	0	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Subjects With Responses to European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L): Self-Care Domain

End point title	Number of Subjects With Responses to European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L): Self-Care Domain
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End point description:

Number of subjects with self-care domain responses of EQ-5D-5L were provided. EQ-5D-5L is a standardized subjects completed questionnaire that measures health-related quality of life and translates that score into an index value or utility score. EQ-5D-5L consists of two components: a health state profile and an optional VAS. EQ-5D health state profile is comprised of 5 dimensions: mobility, self-care, usual activities, pain/discomfort and anxiety/depression. Each dimension has 5 levels: 1=no problems, 2=slight problems, 3=moderate problems, 4=severe problems, and 5=extreme problems. Higher scores indicated greater levels of problems across the five dimensions. Washing or dressing =W/D. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" signifies those subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 8, 16, 24, 40, 56 and 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Baseline:No problems in W/D(n=1000,995,994)	251	242	270	
Week 8:No problems in W/D(n=956,966,956)	551	569	542	
Week 16:No problems in W/D(n=913,920,915)	610	597	583	
Week 24:No problems in W/D(n=817,816,813)	504	504	527	
Week 40:No problems in W/D(n=561,553,535)	377	359	371	
Week 56:No problems in W/D(n=458,458,459)	305	294	291	
Week 64:No problems in W/D(n=450,428,454)	233	192	264	
Baseline:Slight problems in W/D(n=1000,995,994)	315	295	319	
Week 8:Slight problems in W/D(n=956,966,956)	270	261	276	
Week 16:Slight problems in W/D(n=913,920,915)	216	231	246	
Week 24:Slight problems in W/D(n=817,816,813)	214	200	192	
Week 40:Slight problems in W/D(n=561,553,535)	140	136	125	
Week 56:Slight problems in W/D(n=458,458,459)	107	115	122	
Week 64:Slight problems in W/D(n=450,428,454)	142	136	131	
Baseline:Moderate problems in W/D(n=1000,995,994)	361	389	350	
Week 8:Moderate problems in W/D(n=956,966,956)	126	128	134	
Week 16:Moderate problems in W/D(n=913,920,915)	81	87	77	
Week 24:Moderate problems in W/D(n=817,816,813)	91	102	86	
Week 40:Moderate problems in W/D(n=561,553,535)	42	54	38	

Week 56: Moderate problems in W/D(n=458,458,459)	42	47	40	
Week 64: Moderate problems in W/D(n=450,428,454)	66	89	57	
Baseline: Severe problems in W/D(n=1000,995,994)	73	69	55	
Week 8: Severe problems in W/D(n=956,966,956)	8	8	3	
Week 16: Severe problems in W/D(n=913,920,915)	6	5	9	
Week 24: Severe problems in W/D(n=817,816,813)	7	9	8	
Week 40: Severe problems in W/D(n=561,553,535)	1	4	1	
Week 56: Severe problems in W/D(n=458,458,459)	3	2	5	
Week 64: Severe problems in W/D(n=450,428,454)	8	11	2	
Baseline: Unable to wash or dress(n=1000,995,994)	0	0	0	
Week 8: Unable to wash or dress(n=956,966,956)	1	0	1	
Week 16: Unable to wash or dress(n=913,920,915)	0	0	0	
Week 24: Unable to wash or dress(n=817,816,813)	1	1	0	
Week 40: Unable to wash or dress(n=561,553,535)	1	0	0	
Week 56: Unable to wash or dress(n=458,458,459)	1	0	1	
Week 64: Unable to wash or dress(n=450,428,454)	1	0	0	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Subjects With Responses to European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L): Usual Activities Domain

End point title	Number of Subjects With Responses to European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L): Usual Activities Domain
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End point description:

Number of subjects with usual activities domain responses of EQ-5D-5L were provided. EQ-5D-5L is a standardized subjects completed questionnaire that measures health-related quality of life and translates that score into an index value or utility score. EQ-5D-5L consists of two components: a health state profile and an optional VAS. EQ-5D health state profile is comprised of 5 dimensions: mobility, self-care, usual activities, pain/discomfort and anxiety/depression. Each dimension has 5 levels: 1=no problems, 2=slight problems, 3=moderate problems, 4=severe problems, and 5=extreme problems. Higher scores indicated greater levels of problems across the five dimensions. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" signifies those subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 8, 16, 24, 40, 56 and 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Baseline:No problems (n=1000,995,994)	22	24	38	
Week 8:No problems (n=956,966,956)	229	266	221	
Week 16:No problems (n=913,920,915)	302	333	310	
Week 24:No problems(n=817,816,813)	262	290	273	
Week 40:No problems(n=561,553,535)	225	221	218	
Week 56:No problems(n=458,458,459)	155	170	182	
Week 64:No problems(n=450,428,454)	101	69	129	
Baseline:Slight problems (n=1000,995,994)	229	218	225	
Week 8:Slight problems (n=956,966,956)	402	411	426	
Week 16:Slight problems (n=913,920,915)	402	382	408	
Week 24:Slight problems (n=817,816,813)	353	315	344	
Week 40:Slight problems (n=561,553,535)	239	213	233	
Week 56:Slight problems (n=458,458,459)	211	179	199	
Week 64:Slight problems (n=450,428,454)	173	163	197	
Baseline:Moderate problems (n=1000,995,994)	538	551	561	
Week 8:Moderate problems (n=956,966,956)	292	256	274	
Week 16:Moderate problems (n=913,920,915)	184	182	172	
Week 24:Moderate problems (n=817,816,813)	174	182	166	
Week 40:Moderate problems (n=561,553,535)	85	97	74	
Week 56:Moderate problems (n=458,458,459)	79	86	69	
Week 64:Moderate problems (n=450,428,454)	138	155	115	
Baseline:Severe problems (n=1000,995,994)	208	201	169	
Week 8:Severe problems (n=956,966,956)	33	31	35	
Week 16:Severe problems (n=913,920,915)	24	21	24	
Week 24:Severe problems (n=817,816,813)	27	27	29	
Week 40:Severe problems (n=561,553,535)	12	20	10	
Week 56:Severe problems (n=458,458,459)	13	22	9	
Week 64:Severe problems (n=450,428,454)	37	37	12	

Baseline:Unable to do activities(n=1000,995,994)	3	1	1	
Week 8:Unable to do activities (n=956,966,956)	0	2	0	
Week 16:Unable to do activities(n=913,920,915)	1	2	1	
Week 24:Unable to do activities(n=817,816,813)	1	2	1	
Week 40:Unable to do activities(n=561,553,535)	0	2	0	
Week 56:Unable to do activities(n=458,458,459)	0	1	0	
Week 64:Unable to do activities(n=450,428,454)	1	4	1	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Subjects With Responses to European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L): Pain/Discomfort Domain

End point title	Number of Subjects With Responses to European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L): Pain/Discomfort Domain
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End point description:

Number of subjects with pain/discomfort domain responses of EQ-5D-5L were provided. EQ-5D-5L is a standardized subject completed questionnaire that measures health-related quality of life and translates that score into an index value or utility score. EQ-5D-5L consists of two components: a health state profile and an optional VAS. EQ-5D health state profile is comprised of 5 dimensions: mobility, self-care, usual activities, pain/discomfort and anxiety/depression. Each dimension has 5 levels: 1=no problems, 2=slight problems, 3=moderate problems, 4=severe problems, and 5=extreme problems. Higher scores indicated greater levels of problems across the five dimensions. Pain or discomfort = P/D. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" signifies those subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 8, 16, 24, 40, 56 and 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Baseline:No P/D(n=1000,995,994)	6	4	5	
Week 8:No P/D(n=956,966,956)	82	102	83	
Week 16:No P/D(n=913,920,915)	128	163	131	
Week 24:No P/D(n=817,816,813)	117	148	130	
Week 40:No P/D(n=561,553,535)	97	122	110	
Week 56:No P/D(n=458,458,459)	76	90	85	
Week 64:No P/D(n=450,428,454)	45	35	62	
Baseline:Slight P/D(n=1000,995,994)	81	75	86	

Week 8:Slight P/D(n=956,966,956)	433	465	434	
Week 16:Slight P/D(n=913,920,915)	508	482	515	
Week 24:Slight P/D(n=817,816,813)	413	384	413	
Week 40:Slight P/D(n=561,553,535)	298	264	308	
Week 56:Slight P/D(n=458,458,459)	248	211	259	
Week 64:Slight P/D(n=450,428,454)	169	115	191	
Baseline:Moderate P/D(n=1000,995,994)	548	574	588	
Week 8:Moderate P/D(n=956,966,956)	369	327	365	
Week 16:Moderate P/D(n=913,920,915)	235	225	217	
Week 24:Moderate P/D(n=817,816,813)	213	218	215	
Week 40:Moderate P/D(n=561,553,535)	139	130	104	
Week 56:Moderate P/D(n=458,458,459)	111	128	103	
Week 64:Moderate P/D(n=450,428,454)	165	191	171	
Baseline:Severe P/D(n=1000,995,994)	334	314	295	
Week 8:Severe P/D(n=956,966,956)	68	68	71	
Week 16:Severe P/D(n=913,920,915)	39	44	46	
Week 24:Severe P/D(n=817,816,813)	70	62	51	
Week 40:Severe P/D(n=561,553,535)	25	30	13	
Week 56:Severe P/D(n=458,458,459)	23	26	9	
Week 64:Severe P/D(n=450,428,454)	66	76	29	
Baseline:Extreme P/D(n=1000,995,994)	31	28	20	
Week 8:Extreme P/D(n=956,966,956)	4	4	3	
Week 16:Extreme P/D(n=913,920,915)	3	6	6	
Week 24:Extreme P/D(n=817,816,813)	4	4	4	
Week 40:Extreme P/D(n=561,553,535)	2	7	0	
Week 56:Extreme P/D(n=458,458,459)	0	3	3	
Week 64:Extreme P/D(n=450,428,454)	5	11	1	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Subjects With Responses to European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L): Anxiety/ Depression Domain

End point title	Number of Subjects With Responses to European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L): Anxiety/ Depression Domain
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End point description:

Number of subjects with anxiety/depression domain responses of EQ-5D-5L were provided. EQ-5D-5L is a standardized subject completed questionnaire that measures health-related quality of life and translates that score into an index value or utility score. EQ-5D-5L consists of two components: a health state profile and an optional VAS. EQ-5D health state profile is comprised of 5 dimensions: mobility, self-care, usual activities, pain/discomfort and anxiety/depression. Each dimension has 5 levels: 1=no problems, 2=slight problems, 3=moderate problems, 4=severe problems, and 5=extreme problems. Higher scores indicated greater levels of problems across the five dimensions. Anxious/depressed = A/D. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" signifies those subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 8, 16, 24, 40, 56 and 64



End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Baseline:Not A/D(n=1000,995,994)	560	570	585	
Week 8:Not A/D(n=956,966,956)	693	703	664	
Week 16:Not A/D(n=913,920,915)	680	701	701	
Week 24:Not A/D(n=817,816,813)	611	606	599	
Week 40:Not A/D(n=561,553,535)	442	429	400	
Week 56:Not A/D(n=458,458,459)	351	330	338	
Week 64:Not A/D(n=450,428,454)	308	275	315	
Baseline:Slight A/D(n=1000,995,994)	252	235	236	
Week 8:Slight A/D(n=956,966,956)	189	180	206	
Week 16:Slight A/D(n=913,920,915)	170	147	151	
Week 24:Slight A/D(n=817,816,813)	147	131	144	
Week 40:Slight A/D(n=561,553,535)	92	82	107	
Week 56:Slight A/D(n=458,458,459)	88	90	86	
Week 64:Slight A/D(n=450,428,454)	104	96	100	
Baseline:Moderate A/D(n=1000,995,994)	155	151	144	
Week 8:Moderate A/D(n=956,966,956)	64	71	75	
Week 16:Moderate A/D(n=913,920,915)	53	62	53	
Week 24:Moderate A/D(n=817,816,813)	52	66	58	
Week 40:Moderate A/D(n=561,553,535)	24	35	21	
Week 56:Moderate A/D(n=458,458,459)	18	33	34	
Week 64:Moderate A/D(n=450,428,454)	29	46	34	
Baseline:Severe A/D(n=1000,995,994)	28	37	26	
Week 8:Severe A/D(n=956,966,956)	9	7	9	
Week 16:Severe A/D(n=913,920,915)	8	6	8	
Week 24:Severe A/D(n=817,816,813)	7	10	11	
Week 40:Severe A/D(n=561,553,535)	3	6	7	
Week 56:Severe A/D(n=458,458,459)	0	3	1	
Week 64:Severe A/D(n=450,428,454)	8	9	5	
Baseline:Extreme A/D(n=1000,995,994)	5	2	3	
Week 8:Extreme A/D(n=956,966,956)	1	5	2	
Week 16:Extreme A/D(n=913,920,915)	2	4	2	
Week 24:Extreme A/D(n=817,816,813)	0	3	1	
Week 40:Extreme A/D(n=561,553,535)	0	1	0	
Week 56:Extreme A/D(n=458,458,459)	1	2	0	
Week 64:Extreme A/D(n=450,428,454)	1	2	0	

## Statistical analyses

No statistical analyses for this end point

### Secondary: European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L) Overall Health Utility Score/Index Value

End point title	European Quality of Life-5 Dimensions-5 Levels (EQ-5D-5L) Overall Health Utility Score/Index Value
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End point description:

EQ-5D-5L: Standardized subject completed questionnaire that measures health-related quality of life and translates that score into an index value or utility score. It consists of two components: a health state profile and an optional VAS. EQ-5D health state profile comprises of 5 dimensions: mobility, self-care, usual activities, pain/discomfort and anxiety/depression. Each dimension has 5 levels: 1=no problems, 2=slight problems, 3=moderate problems, 4=severe problems, 5=extreme problems. Responses from the 5 domains were used to calculate single utility index (overall health utility score) where values are  $\leq 1$ . Overall health utility score for a subject with no problems in all 5 items is 1 for all countries (except for Zimbabwe where it is 0.9), and is reduced where a subject reports greater levels of problems across the 5 dimensions. ITT population. Here, 'n'=subjects who were evaluable at specified time point.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 8, 16, 24, 40, 56 and 64

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n = 992, 985, 980)	0.61 ( $\pm$ 0.14)	0.61 ( $\pm$ 0.14)	0.62 ( $\pm$ 0.13)	
Week 8 (n = 948, 957, 942)	0.74 ( $\pm$ 0.12)	0.75 ( $\pm$ 0.13)	0.74 ( $\pm$ 0.13)	
Week 16 (n = 905, 912, 901)	0.77 ( $\pm$ 0.12)	0.78 ( $\pm$ 0.13)	0.77 ( $\pm$ 0.13)	
Week 24 (n = 809, 808, 799)	0.76 ( $\pm$ 0.14)	0.76 ( $\pm$ 0.15)	0.77 ( $\pm$ 0.14)	
Week 40 (n = 554, 545, 523)	0.79 ( $\pm$ 0.13)	0.78 ( $\pm$ 0.15)	0.80 ( $\pm$ 0.12)	
Week 56 (n = 453, 452, 449)	0.78 ( $\pm$ 0.12)	0.77 ( $\pm$ 0.15)	0.79 ( $\pm$ 0.12)	
Week 64 (n = 444, 421, 445)	0.72 ( $\pm$ 0.15)	0.69 ( $\pm$ 0.16)	0.75 ( $\pm$ 0.13)	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Treatment Satisfaction Questionnaire Medicine Version II (TSQM v.II) Satisfaction With Effectiveness, Side Effects, Convenience, and Overall Satisfaction Responses

End point title	Treatment Satisfaction Questionnaire Medicine Version II (TSQM v.II) Satisfaction With Effectiveness, Side Effects, Convenience, and Overall Satisfaction Responses
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End point description:

TSQM v.II is a self-administered 11-item validated scale that quantified subject's level of satisfaction with study medication (scored on a 7-point Likert scale [1= extremely dissatisfied, 2=very dissatisfied, 3=dissatisfied, 4=somewhat satisfied, 5=satisfied, 6=very satisfied, 7=extremely satisfied]) and dissatisfaction with side effects (3 questions scored on 5 point Likert scale [1= extremely dissatisfied,

2=very dissatisfied, 3=somewhat dissatisfied, 4=slightly dissatisfied, 5=not at all dissatisfied] and 1 question on 2 point scale [0 =No, 1=Yes]). Subjects were asked to assess their level of satisfaction. The 11 questions of the TSQM were used to calculate the 4 endpoints of effectiveness, side Effects, convenience and global satisfaction, each scored on a 0-100 scale with 100 being the best level of satisfaction. ITT population. Overall number of subjects analyzed'=subjects evaluable for this endpoint. n=subjects who were evaluable at specified timepoint.

End point type	Secondary
End point timeframe:	
Weeks 16 and 56	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	939	954	936	
Units: units on a scale				
least squares mean (standard error)				
Week 16: Effectiveness (n=939, 954, 936)	64.26 (± 1.03)	66.27 (± 1.02)	61.61 (± 1.03)	
Week 16: Side Effects (n=86, 94, 84)	68.61 (± 3.20)	73.32 (± 3.09)	71.03 (± 3.15)	
Week 16: Convenience (n=939, 954, 936)	75.50 (± 0.80)	75.78 (± 0.79)	73.70 (± 0.80)	
Week 16: Global Satisfaction (n=939, 954, 936)	70.32 (± 0.99)	70.69 (± 0.98)	67.13 (± 0.99)	
Week 56: Effectiveness (n=498, 487, 489)	69.79 (± 1.38)	67.91 (± 1.36)	67.64 (± 1.38)	
Week 56: Side Effects (n=30, 38, 24)	78.62 (± 5.28)	62.00 (± 4.88)	71.34 (± 5.14)	
Week 56: Convenience (n=498, 487, 489)	78.03 (± 1.12)	77.67 (± 1.10)	76.18 (± 1.11)	
Week 56: Global Satisfaction (n=498, 487, 489)	75.31 (± 1.27)	73.37 (± 1.25)	73.37 (± 1.26)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
TSQM Effectiveness; Week 16: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1875
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0142
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	2.66
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.53
upper limit	4.78

Variability estimate	Standard error of the mean
Dispersion value	1.08

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

TSQM Effectiveness; Week 16: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1890
Analysis specification	Pre-specified
Analysis type	superiority
P-value	< 0.0001
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	4.67
Confidence interval	
level	95 %
sides	2-sided
lower limit	2.56
upper limit	6.78
Variability estimate	Standard error of the mean
Dispersion value	1.08

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

TSQM Effectiveness; Week 56: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1875
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1371
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	2.15
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.69
upper limit	4.99
Variability estimate	Standard error of the mean
Dispersion value	1.45

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
TSQM Effectiveness; Week 56: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1890
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8524
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.27
Confidence interval	
level	95 %
sides	2-sided
lower limit	-2.6
upper limit	3.14
Variability estimate	Standard error of the mean
Dispersion value	1.46

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
TSQM Side Effects; Week 16: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1875
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5253
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	-2.42
Confidence interval	
level	95 %
sides	2-sided
lower limit	-9.93
upper limit	5.09
Variability estimate	Standard error of the mean
Dispersion value	3.8

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
TSQM Side Effects; Week 16: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID

Number of subjects included in analysis	1890
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5381
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	2.29
Confidence interval	
level	95 %
sides	2-sided
lower limit	-5.04
upper limit	9.62
Variability estimate	Standard error of the mean
Dispersion value	3.71

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

TSQM Side Effects; Week 56: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1875
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2694
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	7.27
Confidence interval	
level	95 %
sides	2-sided
lower limit	-5.99
upper limit	20.54
Variability estimate	Standard error of the mean
Dispersion value	6.44

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

TSQM Side Effects; Week 56: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1890
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1349
Method	ANCOVA
Parameter estimate	LS Mean Difference

Point estimate	-9.34
Confidence interval	
level	95 %
sides	2-sided
lower limit	-21.8
upper limit	3.11
Variability estimate	Standard error of the mean
Dispersion value	6.05

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

TSQM Convenience; Week 16: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1875
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0264
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	1.8
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.21
upper limit	3.38
Variability estimate	Standard error of the mean
Dispersion value	0.81

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

TSQM Convenience; Week 16: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1890
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0098
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	2.07
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.5
upper limit	3.65

Variability estimate	Standard error of the mean
Dispersion value	0.8

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

TSQM Convenience; Week 56: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1875
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0937
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	1.85
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.31
upper limit	4.01
Variability estimate	Standard error of the mean
Dispersion value	1.1

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

TSQM Convenience; Week 56: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1890
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1838
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	1.48
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.7
upper limit	3.67
Variability estimate	Standard error of the mean
Dispersion value	1.11



<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
TSQM Global Satisfaction; Week 16: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1875
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0025
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	3.18
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.12
upper limit	5.25
Variability estimate	Standard error of the mean
Dispersion value	1.05

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
TSQM Global Satisfaction; Week 16: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1890
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0007
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	3.55
Confidence interval	
level	95 %
sides	2-sided
lower limit	1.51
upper limit	5.6
Variability estimate	Standard error of the mean
Dispersion value	1.04

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
TSQM Global Satisfaction; Week 56: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.	
Comparison groups	Tanezumab 2.5 mg v NSAID

Number of subjects included in analysis	1875
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1373
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	1.94
Confidence interval	
level	95 %
sides	2-sided
lower limit	-0.62
upper limit	4.51
Variability estimate	Standard error of the mean
Dispersion value	1.31

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

TSQM Global Satisfaction; Week 56: ANCOVA model included treatment, randomization stratification variables (index joint, highest Kellgren-Lawrence grade and NSAID) as fixed effects, baseline diary average pain as covariates, and study site as a random effect.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1890
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.996
Method	ANCOVA
Parameter estimate	LS Mean Difference
Point estimate	0.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	-2.59
upper limit	2.6
Variability estimate	Standard error of the mean
Dispersion value	1.32

**Secondary: Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 56: Subject Global Preference Assessment- What is The Current or Most Recent Treatment You Were Receiving for Osteoarthritis Pain Before Enrolling?**

End point title	Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 56: Subject Global Preference Assessment- What is The Current or Most Recent Treatment You Were Receiving for Osteoarthritis Pain Before Enrolling?
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End point description:

The mPRTI is a self-administered questionnaire containing subject's global preference assessment (to assess previous treatment and preference to continue using the investigational product) and subject's willingness to use drug again assessment. To assess current or most recent treatment, subjects responded for, 1=injectable prescription medicines, 2=prescription medicines taken by mouth,

3=surgery, 4=prescription medicines and surgery and 5=no treatment. Number of subjects who responded for the specified question were reported. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" signifies those subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
End point timeframe:	
Weeks 16 and 56	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Week 16:Injectable pres med(n=939,954,936)	99	98	82	
Week 56:Injectable pres med(n=498,487,489)	44	47	40	
Week 16:Pres med taken by mouth(n=939,954,936)	611	633	647	
Week 56:Pres med taken by mouth(n=498,487,489)	307	296	324	
Week 16:Surgery(n=939,954,936)	7	7	9	
Week 56:Surgery(n=498,487,489)	8	4	2	
Week 16:Pres med and surgery(n=939,954,936)	33	28	27	
Week 56:Pres medicines and surgery(n=498,487,489)	20	18	20	
Week 16:No treatment(n=939,954,936)	189	188	171	
Week 56:No treatment(n=498,487,489)	119	122	103	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 56: Subject Global Preference Assessment- Overall, do You Prefer the Drug That you Received in This Study to Previous Treatment?

End point title	Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 56: Subject Global Preference Assessment- Overall, do You Prefer the Drug That you Received in This Study to Previous Treatment?
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End point description:

The mPRTI is a self-administered questionnaire containing subject reported treatment impact assessment (to assess subject satisfaction), subject global preference assessment (to assess previous treatment and preference to continue using the investigational product) and subject willingness to use drug again assessment. To assess preference to continue using the investigational product, subjects responded using interactive response technology (IRT) on a 5 point likert scale from 1-5, where, 1= yes, I definitely prefer the drug that I am receiving now, 2= I have a slight preference for the drug that I am receiving now, 3= I have no preference either way, 4= I have a slight preference for my previous treatment, 5= No, I definitely prefer my previous treatment. Higher scores indicate lesser preference to use the investigational product. ITT population was analyzed. n= subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Weeks 16 and 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: Subjects				
Week 16: Definitely prefer study Drug (n=939,954,936)	577	597	531	
Week 56: Definitely prefer study Drug (n=498,487,489)	342	323	302	
Week 16: Slightly prefer study Drug (n=939,954,936)	141	169	158	
Week 56: Slightly prefer study Drug (n=498,487,489)	70	75	89	
Week 16: No preference either way (n=939,954,936)	149	114	164	
Week 56: No preference either way (n=498,487,489)	61	65	71	
Week 16: Slightly prefer my PT (n=939,954,936)	28	34	36	
Week 56: Slightly prefer my PT (n=498,487,489)	16	16	13	
Week 16: No, definitely prefer my PT (n=939,954,936)	44	40	47	
Week 56: No, definitely prefer my PT (n=498,487,489)	9	8	14	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 16: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0823
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Week 16: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994

Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0049
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0718
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1947
Method	Cochran-Mantel-Haenszel

### **Secondary: Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 56: Subject Willingness to Use Drug Again Assessment- Willing to use the Same Drug That you Have Received in This Study for Your Osteoarthritis Pain?**

End point title	Patient Reported Treatment Impact Assessment-Modified (mPRTI) Score at Weeks 16 and 56: Subject Willingness to Use Drug Again Assessment- Willing to use the Same Drug That you Have Received in This Study for Your Osteoarthritis Pain?
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End point description:

The mPRTI is a self-administered questionnaire containing subject reported treatment impact assessment (to assess subject satisfaction), subject global preference assessment (to assess previous treatment and preference to continue using the investigational product) and subject willingness to use drug again assessment. To assess subject willingness to use drug again, subjects responded using IRT on a 5 point likert scale from 1-5, where, 1= yes, I would definitely want to use the same drug again, 2= I might want to use the same drug again, 3= I am not sure, 4= I might not want to use the same drug again, 5= no, I definitely would not want to use the same drug again. Higher scores indicate lesser willingness to use the investigational product. ITT population included all randomized subjects who received at least one dose of SC study medication (either Tanezumab or matching placebo). Here, "n" = subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Week 16: Definitely want to use SDA(n=939,954,936)	627	641	560	
Week 56: Definitely want to use SDA(n=498,487,489)	352	341	310	
Week 16: Might want to use SDA(n=939,954,936)	138	154	169	
Week 56: Might want to use SDA(n=498,487,489)	78	75	97	
Week 16: I am not sure(n=939,954,936)	108	96	134	
Week 56: I am not sure(n=498,487,489)	54	46	58	
Week 16: Might not want to use SDA(n=939,954,936)	19	21	23	
Week 56: Might not want to use SDA(n=498,487,489)	4	11	12	
Week 16: Wouldn't want to use SDA(n=939,954,936)	47	42	50	
Week 56: Wouldn't want to use SDA(n=498,487,489)	10	14	12	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 16: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0229
Method	Cochran-Mantel-Haenszel

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 16: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0029

Method	Cochran-Mantel-Haenszel
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<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0266
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1835
Method	Cochran-Mantel-Haenszel

## Secondary: Number of Subjects Who Withdrew Due to Lack of Efficacy

End point title	Number of Subjects Who Withdrew Due to Lack of Efficacy
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End point description:

Number of subjects who withdrew from treatment due to lack of efficacy have been reported here. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
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End point timeframe:

Baseline up to Week 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects	60	63	91	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline diary average pain, baseline WOMAC pain score, classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0076
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.63
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.45
upper limit	0.88

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Statistical analysis description: OR and 95% CI estimated from logistic regression model. Logistic regression model included baseline diary average pain, baseline WOMAC pain score, classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0187
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.67
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.48
upper limit	0.94

## Secondary: Time to Discontinuation Due to Lack of Efficacy

End point title	Time to Discontinuation Due to Lack of Efficacy
End point description: Time to discontinuation due to lack of efficacy was defined as the time interval from the date of first study drug administration up to the date of discontinuation of subject from treatment due to lack of efficacy. 99999 =Due to the Kaplan-Meier estimate not reaching the level for discontinuation due to lack of efficacy, median and upper limit could not be calculated. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, 'Overall number of subjects analyzed' signifies subjects who discontinued from the study	



due to lack of efficacy.

End point type	Secondary
End point timeframe:	
Baseline up to Week 56	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	60	63	91	
Units: days				
median (full range (min-max))	99999 (7 to 99999)	99999 (14 to 99999)	99999 (14 to 99999)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Missing data for the selected percentile(s) was due to the Kaplan-Meier estimate not reaching the level for discontinuation due to lack of efficacy.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	151
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0074
Method	Logrank

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Missing data for the selected percentile(s) was due to the Kaplan-Meier estimate not reaching the level for discontinuation due to lack of efficacy.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	154
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0162
Method	Logrank

## Secondary: Number of Subjects who Took Rescue Medication During Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56

End point title	Number of Subjects who Took Rescue Medication During Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56
End point description:	
In case of inadequate pain relief, acetaminophen/paracetamol up to 3000 mg per day and up to 3 days	

in a week between baseline and Week 16, and 3000 mg per day and up to 7 days per week between Week 16 and 64 could be taken as rescue medication. Number of subjects with any use of rescue medication during the particular study week were summarized. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'n'=subjects who were evaluable at specified time point for each arm respectively.

End point type	Secondary
End point timeframe:	
Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Week 2 (n= 998, 994, 993)	567	548	527	
Week 4 (n= 1002, 995, 995)	481	437	469	
Week 8 (n= 1002, 998, 996)	433	377	418	
Week 16 (n= 1002, 998, 996)	353	330	352	
Week 24 (n= 1002, 998, 996)	372	358	384	
Week 32 (n= 1002, 998, 996)	391	380	390	
Week 40 (n= 1002, 998, 996)	391	388	388	
Week 48 (n= 1002, 998, 996)	391	393	389	
Week 56 (n= 1002, 998, 996)	391	408	397	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1136
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.15
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.97
upper limit	1.38

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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**Statistical analysis description:**

Week 2: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.391
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.08
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.9
upper limit	1.29

**Statistical analysis title**

Tanezumab 2.5 mg Vs NSAID

**Statistical analysis description:**

Week 4: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7691
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.03
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.86
upper limit	1.22

**Statistical analysis title**

Tanezumab 5 mg Vs NSAID

**Statistical analysis description:**

Week 4: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.143
Method	Regression, Logistic

Parameter estimate	Odds ratio (OR)
Point estimate	0.88
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.73
upper limit	1.05

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6454
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.04
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.87
upper limit	1.25

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0561
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.84
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.7
upper limit	1

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 16: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9056
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.99
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.82
upper limit	1.19

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 16: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2919
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.9
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.75
upper limit	1.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 24: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.4976

Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.94
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.78
upper limit	1.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2425
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.9
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.75
upper limit	1.08

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9242
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.99
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.83
upper limit	1.19

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Week 32: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6621
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.96
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.8
upper limit	1.15

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description: Week 40: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9977
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.83
upper limit	1.2

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description: Week 40: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.	
Comparison groups	Tanezumab 5 mg v NSAID

Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9762
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.84
upper limit	1.2

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 48: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9718
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.83
upper limit	1.19

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8219
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided



lower limit	0.85
upper limit	1.22

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6936
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	0.96
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.8
upper limit	1.16

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Odds ratio and 95%CI estimated from logistic regression model. Logistic regression model included baseline WOMAC pain subscale, baseline diary average pain, and classification variables index joint, highest Kellgren-Lawrence grade, NSAID and treatment.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5769
Method	Regression, Logistic
Parameter estimate	Odds ratio (OR)
Point estimate	1.05
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.88
upper limit	1.26

## Secondary: Number of Subjects Who Took Rescue Medication During Week 64

End point title	Number of Subjects Who Took Rescue Medication During Week 64
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End point description:

In case of inadequate pain relief, after Week 16, acetaminophen/paracetamol up to 3000 mg per day up to 7 days in a week could be taken as rescue medication and use was reported weekly via diary. Number of subjects with any use of rescue medication during Week 64 were summarized. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'Number of subjects analysed' =subjects who were evaluable for this endpoint.

End point type	Secondary
End point timeframe:	
Week 64	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	437	417	437	
Units: subject	251	268	215	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Days of Rescue Medication Used During Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56

End point title	Number of Days of Rescue Medication Used During Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56
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End point description:

In case of inadequate pain relief during the treatment period, acetaminophen/paracetamol up to 3000 mg per day and up to 3 days in a week between baseline and Week 16, and 3000 mg per day and up to 7 days per week between Week 16 and 64 could be taken as rescue medication. Number of days the subjects used the rescue medication during the particular study weeks were summarized. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
End point timeframe:	
Weeks 2, 4, 8, 16, 24, 32, 40, 48 and 56	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: days				
least squares mean (standard error)				
Week 2	2.31 (± 0.13)	2.29 (± 0.13)	2.26 (± 0.13)	
Week 4	1.80 (± 0.12)	1.70 (± 0.11)	1.86 (± 0.12)	
Week 8	1.65 (± 0.12)	1.42 (± 0.11)	1.65 (± 0.12)	
Week 16	1.29 (± 0.11)	1.25 (± 0.10)	1.39 (± 0.11)	
Week 24	1.56 (± 0.12)	1.56 (± 0.13)	1.65 (± 0.13)	
Week 32	1.67 (± 0.13)	1.66 (± 0.13)	1.78 (± 0.13)	

Week 40	1.70 ( $\pm$ 0.13)	1.71 ( $\pm$ 0.13)	1.76 ( $\pm$ 0.13)	
Week 48	1.68 ( $\pm$ 0.13)	1.76 ( $\pm$ 0.14)	1.74 ( $\pm$ 0.13)	
Week 56	1.73 ( $\pm$ 0.13)	1.85 ( $\pm$ 0.14)	1.74 ( $\pm$ 0.13)	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7746
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	1.02
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.16
Variability estimate	Standard error of the mean
Dispersion value	0.07

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.8441
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	1.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.16
Variability estimate	Standard error of the mean
Dispersion value	0.07

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 4: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.658
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.97
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.83
upper limit	1.13
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 4: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2279
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.91
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.78
upper limit	1.06
Variability estimate	Standard error of the mean
Dispersion value	0.07

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	

Week 8: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9986
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	1
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.84
upper limit	1.18
Variability estimate	Standard error of the mean
Dispersion value	0.09

#### Statistical analysis title

Tanezumab 5 mg Vs NSAID

Statistical analysis description:

Week 8: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0771
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.86
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.72
upper limit	1.02
Variability estimate	Standard error of the mean
Dispersion value	0.07

#### Statistical analysis title

Tanezumab 2.5 mg Vs NSAID

Statistical analysis description:

Week 16: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified

Analysis type	superiority
P-value	= 0.4485
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.93
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.77
upper limit	1.13
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.2817
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.9
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.74
upper limit	1.09
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5426
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.94
Confidence interval	

level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.13
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5385
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.94
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.13
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 32: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5041
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.94
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.79
upper limit	1.12
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 32: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.441
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.93
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.78
upper limit	1.11
Variability estimate	Standard error of the mean
Dispersion value	0.08

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 40: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7426
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.97
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.81
upper limit	1.16
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	



Week 40: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7469
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.97
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.81
upper limit	1.16
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 48: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6784
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.96
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.81
upper limit	1.15
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 48: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified

Analysis type	superiority
P-value	= 0.8822
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	1.01
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.85
upper limit	1.21
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9119
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.99
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.83
upper limit	1.18
Variability estimate	Standard error of the mean
Dispersion value	0.09

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.5148
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	1.06
Confidence interval	

level	95 %
sides	2-sided
lower limit	0.89
upper limit	1.26
Variability estimate	Standard error of the mean
Dispersion value	0.09

### Secondary: Number of Days of Rescue Medication Used During Week 64

End point title	Number of Days of Rescue Medication Used During Week 64
End point description:	
In case of inadequate pain relief, after week 16, acetaminophen/paracetamol up to 3000 mg per day up to 7 days in a week could be taken as rescue medication and use was reported weekly via diary. Number of days the subjects used the rescue medication during Week 64 were summarized. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here 'Overall number of subjects analyzed' = subjects who took rescue medication.	
End point type	Secondary
End point timeframe:	
Week 64	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	437	417	437	
Units: days				
arithmetic mean (standard deviation)	2.0 (± 2.38)	2.3 (± 2.46)	1.7 (± 2.26)	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Amount of Rescue Medication Used During Weeks 2, 4, 8 and 16

End point title	Amount of Rescue Medication Used During Weeks 2, 4, 8 and 16
End point description:	
In case of inadequate pain relief, acetaminophen/paracetamol up to 3000 mg per day up to 3 days in a week could be taken as rescue medication. The total dosage of acetaminophen in milligrams used during the specified week were summarized. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).	
End point type	Secondary
End point timeframe:	
Weeks 2, 4, 8 and 16	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: milligrams				
least squares mean (standard error)				
Week 2	2880.3 (± 353.05)	2898.7 (± 358.72)	3310.5 (± 410.42)	
Week 4	2107.8 (± 302.24)	1946.5 (± 277.29)	2814.1 (± 401.29)	
Week 8	1995.6 (± 322.53)	1628.8 (± 258.90)	2839.7 (± 446.00)	
Week 16	1696.4 (± 307.80)	1581.6 (± 284.12)	2320.0 (± 413.14)	

## Statistical analyses

Statistical analysis title	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 2: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3348
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.87
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.66
upper limit	1.15
Variability estimate	Standard error of the mean
Dispersion value	0.13

Statistical analysis title	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 2: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.3595
Method	Negative binomial model
Parameter estimate	LS Mean Ratio

Point estimate	0.88
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.66
upper limit	1.16
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 4: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0854
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.75
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.54
upper limit	1.04
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 4: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0281
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.69
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.5
upper limit	0.96

Variability estimate	Standard error of the mean
Dispersion value	0.12

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 8: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0595
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.7
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.49
upper limit	1.01
Variability estimate	Standard error of the mean
Dispersion value	0.13

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.003
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.57
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.4
upper limit	0.83
Variability estimate	Standard error of the mean
Dispersion value	0.11

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 16: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1998
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1389
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.73
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.48
upper limit	1.11
Variability estimate	Standard error of the mean
Dispersion value	0.15

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 16: Analysis was performed using negative binomial model with model terms of baseline WOMAC Pain subscale score, baseline diary average pain score, index joint, Kellgren Lawrence grade, NSAID and treatment group.	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.0709
Method	Negative binomial model
Parameter estimate	LS Mean Ratio
Point estimate	0.68
Confidence interval	
level	95 %
sides	2-sided
lower limit	0.45
upper limit	1.03
Variability estimate	Standard error of the mean
Dispersion value	0.14

## Secondary: Health Care Resource Utilization (HCRU): Number of Visits of Services Directly Related to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Visits of Services Directly Related to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during the last 3 months (for Baseline and Week 80) and

past 8 weeks (for Week 64). Visits of services directly related to osteoarthritis evaluated were: visits to primary care physician, neurologist, rheumatologist, physician assistant or nurse practitioner, pain specialist, orthopedist, physical therapist, chiropractor, alternative medicine or therapy, podiatrist, nutritionist/dietitian, radiologist, home healthcare services and other practitioner. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). Here, "n" signifies those subjects who were evaluable at specified time point for this endpoint for each arm, respectively.

End point type	Secondary
End point timeframe:	
Baseline, Weeks 64 and 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: visits				
median (full range (min-max))				
Baseline: Primary Care Physician (n = 442,433,436)	1.0 (1.0 to 100.0)	1.0 (1.0 to 101.0)	1.0 (1.0 to 150.0)	
Baseline: Neurologist (n = 10, 15, 12)	1.0 (1.0 to 120.0)	1.0 (1.0 to 90.0)	1.0 (1.0 to 10.0)	
Baseline: Rheumatologist (n = 83, 108, 114)	1.0 (1.0 to 15.0)	2.0 (1.0 to 111.0)	2.0 (1.0 to 6.0)	
Baseline:Physician Assistant or Nurse(n=35,38,30)	1.0 (1.0 to 6.0)	1.0 (1.0 to 122.0)	1.0 (1.0 to 120.0)	
Baseline: Pain Specialist (n = 42, 51, 41)	1.0 (1.0 to 100.0)	2.0 (1.0 to 111.0)	1.0 (1.0 to 23.0)	
Baseline: Orthopedist (n = 171, 189, 160)	2.0 (1.0 to 18.0)	1.0 (1.0 to 190.0)	2.0 (1.0 to 100.0)	
Baseline: Physical Therapist (n = 57, 62, 51)	4.0 (1.0 to 100.0)	3.0 (1.0 to 111.0)	3.0 (1.0 to 32.0)	
Baseline: Chiropractor (n = 48, 33, 43)	3.0 (1.0 to 190.0)	3.0 (1.0 to 30.0)	3.0 (1.0 to 24.0)	
Baseline:Alternative Medicine/Therapy(n=33,50,52)	2.0 (1.0 to 24.0)	2.0 (1.0 to 111.0)	2.0 (1.0 to 80.0)	
Baseline: Podiatrist (n = 10, 20, 13)	1.0 (1.0 to 2.0)	1.0 (1.0 to 91.0)	1.0 (1.0 to 2.0)	
Baseline: Nutritionist/Dietitian (n = 8, 11, 14)	1.0 (1.0 to 3.0)	1.0 (1.0 to 3.0)	1.0 (1.0 to 4.0)	
Baseline: Radiologist (n = 139, 152, 138)	1.0 (1.0 to 100.0)	1.0 (1.0 to 111.0)	1.0 (1.0 to 5.0)	
Baseline: Home Healthcare Services (n = 7, 5, 7)	2.0 (1.0 to 24.0)	1.0 (1.0 to 111.0)	3.0 (1.0 to 91.0)	
Baseline: Other Practitioner (n = 82, 98, 91)	2.0 (1.0 to 190.0)	2.0 (1.0 to 111.0)	2.0 (1.0 to 111.0)	
Week 64: Primary Care Physician (n=231, 264, 223)	1.0 (1.0 to 190.0)	1.0 (1.0 to 101.0)	1.0 (1.0 to 120.0)	
Week 64: Neurologist (n = 17, 20, 13)	1.0 (1.0 to 110.0)	1.0 (1.0 to 4.0)	1.0 (1.0 to 83.0)	
Week 64: Rheumatologist (n = 27, 32, 35)	1.0 (1.0 to 4.0)	1.0 (1.0 to 4.0)	1.0 (1.0 to 3.0)	
Week 64:Physician Assistant or Nurse(n =30,36,27)	1.0 (1.0 to 10.0)	1.0 (1.0 to 100.0)	1.0 (1.0 to 101.0)	
Week 64: Pain Specialist (n = 37, 43, 29)	1.0 (1.0 to 190.0)	1.0 (1.0 to 144.0)	1.0 (1.0 to 180.0)	
Week 64: Orthopedist (n = 146, 163, 121)	1.0 (1.0 to 190.0)	1.0 (1.0 to 30.0)	1.0 (1.0 to 100.0)	



Week 64: Physical Therapist (n = 69, 50, 37)	4.0 (1.0 to 180.0)	4.5 (1.0 to 111.0)	3.0 (1.0 to 100.0)
Week 64: Chiropractor (n = 32, 25, 22)	3.0 (1.0 to 21.0)	2.0 (1.0 to 30.0)	3.0 (1.0 to 111.0)
Week 64: Alternative Medicine/Therapy (n = 33, 45, 46)	1.0 (1.0 to 11.0)	2.0 (1.0 to 10.0)	2.0 (1.0 to 190.0)
Week 64: Podiatrist (n = 11, 18, 12)	1.0 (1.0 to 5.0)	1.0 (1.0 to 3.0)	1.0 (1.0 to 2.0)
Week 64: Nutritionist/Dietitian (n = 9, 8, 6)	2.0 (1.0 to 8.0)	1.0 (1.0 to 3.0)	1.0 (1.0 to 3.0)
Week 64: Radiologist (n = 63, 79, 58)	1.0 (1.0 to 100.0)	1.0 (1.0 to 30.0)	1.0 (1.0 to 100.0)
Week 64: Home Healthcare Services (n = 5, 9, 6)	4.0 (1.0 to 9.0)	4.0 (1.0 to 16.0)	5.0 (2.0 to 90.0)
Week 64: Other Practitioner (n = 74, 106, 80)	1.0 (1.0 to 190.0)	1.0 (1.0 to 190.0)	1.0 (1.0 to 111.0)
Week 80: Primary Care Physician (n = 134, 118, 110)	1.0 (1.0 to 102.0)	1.0 (1.0 to 111.0)	1.0 (1.0 to 101.0)
Week 80: Neurologist (n = 7, 6, 3)	1.0 (1.0 to 1.0)	1.0 (1.0 to 6.0)	1.0 (1.0 to 2.0)
Week 80: Rheumatologist (n = 16, 33, 15)	1.0 (1.0 to 100.0)	1.0 (1.0 to 111.0)	1.0 (1.0 to 101.0)
Week 80: Physician Assistant or Nurse (n = 25, 10, 9)	1.0 (1.0 to 6.0)	1.0 (1.0 to 4.0)	1.0 (1.0 to 90.0)
Week 80: Pain Specialist (n = 16, 19, 15)	1.5 (1.0 to 4.0)	2.0 (1.0 to 111.0)	1.0 (1.0 to 190.0)
Week 80: Orthopedist (n = 86, 79, 44)	1.5 (1.0 to 101.0)	1.0 (1.0 to 101.0)	1.0 (1.0 to 100.0)
Week 80: Physical Therapist (n = 28, 32, 19)	8.0 (1.0 to 30.0)	5.5 (1.0 to 21.0)	3.0 (1.0 to 21.0)
Week 80: Chiropractor (n = 20, 18, 11)	3.0 (1.0 to 111.0)	4.5 (1.0 to 61.0)	3.0 (1.0 to 120.0)
Week 80: Alternative Medicine/Therapy (n = 12, 15, 18)	3.5 (1.0 to 90.0)	1.0 (1.0 to 90.0)	2.0 (1.0 to 90.0)
Week 80: Podiatrist (n = 12, 6, 5)	1.0 (1.0 to 90.0)	1.0 (1.0 to 111.0)	3.0 (1.0 to 101.0)
Week 80: Nutritionist/Dietitian (n = 5, 2, 4)	1.0 (1.0 to 100.0)	1.5 (1.0 to 2.0)	1.0 (1.0 to 2.0)
Week 80: Radiologist (n = 39, 36, 36)	1.0 (1.0 to 100.0)	1.0 (1.0 to 4.0)	1.0 (1.0 to 101.0)
Week 80: Home Healthcare Services (n = 4, 3, 2)	2.5 (1.0 to 140.0)	4.0 (1.0 to 18.0)	1.0 (1.0 to 1.0)
Week 80: Other Practitioner (n = 40, 36, 24)	1.0 (1.0 to 190.0)	1.0 (1.0 to 100.0)	1.0 (1.0 to 100.0)

## Statistical analyses

No statistical analyses for this end point

## Secondary: Health Care Resource Utilization (HCRU): Number of Subjects who Visited the Emergency Room Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Subjects who Visited the Emergency Room Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during the last 3 months (for Baseline and Week 80) and past 8 weeks (for Week 64). Domain evaluated was number of subjects who visited the emergency room due to osteoarthritis. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'n'=subjects who were evaluable at specified time point for this endpoint for each arm, respectively.

End point type	Secondary
End point timeframe:	
Baseline, Weeks 64 and 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Baseline (n = 1001, 997, 995)	15	23	11	
Week 64 (n = 773, 782, 799)	10	15	5	
Week 80 (n = 432, 396, 424)	4	5	2	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Health Care Resource Utilization (HCRU): Number of Visits to the Emergency Room Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Visits to the Emergency Room Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during the last 3 months (for Baseline and Week 80) and past 8 weeks (for Week 64). Domain evaluated was number of visits to the emergency room due to OA. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'Overall number of subjects analysed' =subjects who were evaluable for this endpoint. 'n'=subjects who were evaluable at specified time point for this endpoint for each arm, respectively.

End point type	Secondary
End point timeframe:	
Baseline, Weeks 64 and 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	15	23	11	
Units: visits				
median (full range (min-max))				
Baseline (n = 15, 23, 11)	1.0 (1.0 to 3.0)	1.0 (1.0 to 222.0)	1.0 (1.0 to 6.0)	
Week 64 (n = 10, 15, 5)	1.0 (1.0 to 2.0)	1.0 (1.0 to 3.0)	1.0 (1.0 to 2.0)	
Week 80 (n = 4, 5, 2)	1.0 (1.0 to 2.0)	3.0 (1.0 to 11.0)	1.0 (1.0 to 1.0)	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Health Care Resource Utilization (HCRU): Number of Subjects Hospitalized Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Subjects Hospitalized Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during the last 3 months (for Baseline and Week 80) and past 8 weeks (for Week 64). Domain evaluated was number of subjects who were hospitalized due to OA. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'n'=subjects who were evaluable at specified time point for this endpoint for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 64 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Baseline (n = 1001, 997, 995)	11	6	1	
Week 64 (n = 773, 782, 799)	5	11	6	
Week 80 (n = 432, 396, 424)	8	12	0	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Health Care Resource Utilization (HCRU): Number of Nights Stayed in the Hospital Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Nights Stayed in the Hospital Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during the last 3 months (for Baseline and Week 80) and past 8 weeks (for Week 64). Domain evaluated was number of nights stayed in the hospital due to OA. Here, 99999 =median and full range could not be estimated as no subjects were analyzed. ITT population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'Overall number of subjects analysed' =subjects who were evaluable for this endpoint. 'n'=subjects who were evaluable at specified time point for this endpoint for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 64 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	11	12	6	
Units: Nights				
median (full range (min-max))				
Baseline (n = 11, 6, 1)	12.0 (1.0 to 15.0)	9.0 (1.0 to 14.0)	11.0 (11.0 to 11.0)	
Week 64 (n = 5, 11, 6)	2.0 (1.0 to 20.0)	2.0 (1.0 to 40.0)	2.0 (1.0 to 4.0)	
Week 80 (n = 8, 12, 0)	2.0 (1.0 to 26.0)	2.0 (1.0 to 21.0)	99999 (99999 to 99999)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Health Care Resource Utilization (HCRU): Number of Subjects who Used Any Aids/Devices for Doing Things Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Subjects who Used Any Aids/Devices for Doing Things Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during the last 3 months (for Baseline and Week 80) and past 8 weeks (for Week 64). Domain evaluated was number of subjects who used any aids/devices for doing things. Aids such as walking aid, wheelchair, device or utensil for dress/bathe/eat and any other aids/devices. Response for each aid/device usage was in terms of Never (Ne), Rarely (R), Sometimes (S), Often (O) and Always (A). Device/Utensil =D/U. The ITT population included all randomized subjects who received at least one dose of subcutaneous study medication (either Tanezumab or placebo). 'n'=subjects who were evaluable at specified time point for this endpoint for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 64 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Baseline: Walking Aid Use-Ne (n=1001,997,995)	852	838	851	
Baseline: Wheelchair Use-Ne (n=1001,997,995)	992	989	988	
Baseline: D/U to Dress Bathe Eat-Ne (n=1001,997,995)	970	976	977	
Baseline: Other Aids/Devices-Ne (n=1001,997,995)	932	935	921	
Week 64: Walking Aid Use-Ne (n=773,782,799)	662	662	714	
Week 64: Wheelchair Use-Ne (n=773,782,799)	765	776	794	

Week 64: D/U to Dress Bathe Eat- Ne(n=773,782,799)	760	768	792	
Week 64: Other Aids Or Devices Ne(n=773,782,799)	733	720	771	
Week 80: Walking Aid Use Ne(n=432,396,424)	373	322	386	
Week 80: Wheelchair Use Ne(n=432,396,424)	430	389	421	
Week 80: D/U to Dress Bathe Eat Ne(n=432,396,424)	425	383	422	
Week 80: Other Aids or Devices Ne(n=432,396,424)	416	375	410	
Baseline: Walking Aid Use R(n=1001,997,995)	27	18	24	
Baseline: Wheelchair Use R(n=1001,997,995)	2	2	1	
Baseline: D/U to Dress Bathe Eat R(n=1001,997,995)	2	1	0	
Baseline: Other Aids Or Devices R(n=1001,997,995)	8	7	9	
Week 64: Walking Aid Use R(n=773,782,799)	21	9	12	
Week 64: Wheelchair Use R(n=773,782,799)	2	1	2	
Week 64: D/U to Dress Bathe Eat R(n=773,782,799)	2	1	1	
Week 64: Other Aids Or Devices R(n=773,782,799)	6	9	11	
Week 80: Walking Aid Use R(n=432,396,424)	12	10	6	
Week 80: Wheelchair Use R(n=432,396,424)	0	2	2	
Week 80: D/U to Dress Bathe Eat R(n=432,396,424)	0	0	1	
Week 80: Other Aids Or Devices R(n=432,396,424)	4	3	4	
Baseline: Walking Aid Use S(n=1001,997,995)	71	69	75	
Baseline: Wheelchair Use S(n=1001,997,995)	4	6	5	
Baseline: D/U to Dress Bathe Eat S(n=1001,997,995)	7	6	6	
Baseline: Other Aids Or Devices S(n=1001,997,995)	27	22	41	
Week 64: Walking Aid Use S(n=773,782,799)	48	47	37	
Week 64: Wheelchair Use S(n=773,782,799)	4	2	3	
Week 64: D/U to Dress Bathe Eat S(n=773,782,799)	7	7	2	
Week 64: Other Aids Or Devices S(n=773,782,799)	19	26	8	
Week 80: Walking Aid Use S(n=432,396,424)	25	25	17	
Week 80: Wheelchair Use S(n=432,396,424)	1	4	1	
Week 80: D/U to Dress Bathe Eat S(n=432,396,424)	2	6	1	
Week 80: Other Aids Or Devices S(n=432,396,424)	5	11	4	
Baseline: Walking Aid Use O(n=1001,997,995)	32	43	26	

Baseline: Wheelchair Use O(n=1001,997,995)	3	0	1	
Baseline: D/U to Dress Bathe Eat O(n=1001,997,995)	16	9	7	
Baseline: Other Aids Or Devices O(n=1001,997,995)	27	22	14	
Week 64: Walking Aid Use O(n=773,782,799)	20	30	17	
Week 64: Wheelchair Use O(n=773,782,799)	2	1	0	
Week 64: D/U to Dress Bathe Eat O(n=773,782,799)	3	5	2	
Week 64: Other Aids Or Devices O(n=773,782,799)	12	20	6	
Week 80: Walking Aid Use O(n=432,396,424)	14	17	7	
Week 80: Wheelchair Use O(n=432,396,424)	0	0	0	
Week 80: D/U to Dress Bathe Eat O(n=432,396,424)	3	5	0	
Week 80: Other Aids Or Devices O(n=432,396,424)	5	4	2	
Baseline: Walking Aid Use A(n=1001,997,995)	19	29	19	
Baseline: Wheelchair Use A(n=1001,997,995)	0	0	0	
Baseline: D/U to Dress Bathe Eat A(n=1001,997,995)	6	5	5	
Baseline: Other Aids Or Devices A(n=1001,997,995)	7	11	10	
Week 64: Walking Aid Use A(n=773,782,799)	22	34	19	
Week 64: Wheelchair Use A(n=773,782,799)	0	2	0	
Week 64: D/U to Dress Bathe Eat A(n=773,782,799)	1	1	2	
Week 64: Other Aids Or Devices A(n=773,782,799)	3	7	3	
Week 80: Walking Aid Use A(n=432,396,424)	8	22	8	
Week 80: Wheelchair Use A(n=432,396,424)	1	1	0	
Week 80: D/U to Dress Bathe Eat A(n=432,396,424)	2	2	0	
Week 80: Other Aids Or Devices A(n=432,396,424)	2	3	4	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Health Care Resource Utilization (HCRU): Number of Subjects who Quit Job Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Number of Subjects who Quit Job Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during the last 3 months (for Baseline and Week 80) and past 8 weeks (for Week 64). Domain evaluated was number of subjects who quit job due to OA. ITT

population was analyzed. Here 'Overall number of subjects analyzed'=subjects evaluable for this endpoint. Here, "n" =subjects evaluable at specified time point for each arm, respectively.

End point type	Secondary
End point timeframe:	
Baseline, Weeks 64 and 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	995	
Units: subject				
Baseline (n =1001, 997, 995)	47	55	65	
Week 64 (n =773, 782, 799)	28	35	26	
Week 80 (n =432, 396, 424)	12	18	6	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Health Care Resource Utilization (HCRU): Duration Since Quitting Job Due to Osteoarthritis

End point title	Health Care Resource Utilization (HCRU): Duration Since Quitting Job Due to Osteoarthritis
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End point description:

Osteoarthritis HCRU assessed healthcare usage during the last 3 months (for Baseline and Week 80) and past 8 weeks (for Week 64). Domain evaluated was duration since quitting job due to OA. ITT population was analyzed. One additional subject apart from the ones who had responded for quitting job responded to duration since quitting job. Here 'Overall number of subjects analyzed'=subjects evaluable for this endpoint. Here, "n" =subjects evaluable at specified time point for each arm, respectively.

End point type	Secondary
End point timeframe:	
Baseline, Weeks 64 and 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	47	55	66	
Units: years				
median (full range (min-max))				
Baseline (n =47, 55, 66)	2.0 (0.1 to 15.4)	1.8 (0.3 to 20.0)	2.4 (0.1 to 80.0)	
Week 64 (n =33, 38, 32)	2.4 (0.2 to 18.6)	1.8 (0.1 to 31.0)	4.0 (0.1 to 90.0)	
Week 80 (n =12, 18, 6)	2.0 (0.3 to 30.4)	2.0 (0.1 to 50.0)	1.8 (0.2 to 20.4)	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Number of Subjects With Categorical Change From Baseline in Lower Extremity Activity Scale (LEAS) at Weeks 4, 8, 16, 24, 56 and 80

End point title	Number of Subjects With Categorical Change From Baseline in Lower Extremity Activity Scale (LEAS) at Weeks 4, 8, 16, 24, 56 and 80
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#### End point description:

LEAS is a self-administered scale to assess activity level in subjects with total knee arthroplasty. LEAS scale reflected 4 levels of lower-extremity activity: housebound, more ordinary walking about the house, walking about community, walking about the community as well as substantial work or exercise. It consisted of 12 questions resulting in 18-level scale that allowed subject to select a single description that most represented his/her self-perceived activity level. Final score was number of descriptor selected by subjects as being most representative of his/her activity level. Minimum possible score was 1 (entirely bedbound) and maximum possible score was 18 (currently competitive athlete). Higher score indicated increased activity. Categorical changes from baseline were reported in terms of improvement (Change >0), No change and worsening (Change <0). ITT. Overall number of subjects analyzed=subjects evaluable for this endpoint. 'n' =subjects evaluable at specified time point.

End point type	Secondary
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#### End point timeframe:

Baseline, Weeks 4, 8, 16, 24, 56 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1000	995	994	
Units: subjects				
Change at Week 4, Improvement (n =1000,995,994)	423	421	411	
Change at Week 8, Improvement (n =1000,995,994)	454	443	445	
Change at Week 16, Improvement (n =1000,995,994)	488	470	477	
Change at Week 24, Improvement (n =1000,995,994)	478	458	467	
Change at Week 56, Improvement (n =1000,995,994)	486	429	461	
Change at Week 80, Improvement (n =438,408,432)	220	196	227	
Change at Week 4, No Change (n =1000,995,994)	370	394	369	
Change at Week 8, No Change (n =1000,995,994)	325	362	348	
Change at Week 16, No Change (n =1000,995,994)	288	312	312	
Change at Week 24, No Change (n =1000,995,994)	277	302	291	



Change at Week 56, No Change (n =1000,995,994)	270	314	300	
Change at Week 80, No Change (n =438,408,432)	105	97	125	
Change at Week 4, Worsening (n =1000,995,994)	207	180	214	
Change at Week 8, Worsening (n =1000,995,994)	221	190	201	
Change at Week 16, Worsening (n =1000,995,994)	224	213	205	
Change at Week 24, Worsening (n =1000,995,994)	245	235	236	
Change at Week 56, Worsening (n =1000,995,994)	244	252	233	
Change at Week 80, Worsening (n =438,408,432)	113	115	80	

## Statistical analyses

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 4: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6037
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
Statistical analysis description:	
Week 4: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)	
Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1928
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
Statistical analysis description:	
Week 8: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)	
Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified

Analysis type	superiority
P-value	= 0.7204
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 8: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7969
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 16: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7857
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 16: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.6627
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 24: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 2.5 mg v NSAID
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Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.9867
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 24: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.819
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 2.5 mg Vs NSAID
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Statistical analysis description:

Week 56: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 2.5 mg v NSAID
Number of subjects included in analysis	1994
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.7284
Method	Cochran-Mantel-Haenszel

<b>Statistical analysis title</b>	Tanezumab 5 mg Vs NSAID
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Statistical analysis description:

Week 56: Cochran-Mantel-Haenszel test for row mean scores differ, stratified by the combinations of the three stratification factors (index joint, highest Kellgren-Lawrence grade and NSAID)

Comparison groups	Tanezumab 5 mg v NSAID
Number of subjects included in analysis	1989
Analysis specification	Pre-specified
Analysis type	superiority
P-value	= 0.1545
Method	Cochran-Mantel-Haenszel

## Secondary: Change From Baseline in Average Daily Minutes of Physical Activity at Weeks 16 and 56

End point title	Change From Baseline in Average Daily Minutes of Physical
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## End point description:

Subject activity level was assessed using actigraphy. Subjects continuously wore the accelerometer (apart for water activities) in the morning until going to bed at night for 7 or 14 consecutive days while going about their usual daily activities. Subjects maintained a log (electronic or written) to record when the accelerometer was put on in the morning and removed at night (or if removed for any other purpose). Accelerometry analysis set = All subjects treated with tanezumab or matching placebo SC who had any baseline or post-baseline accelerometry data. 'Overall number of subjects analysed' = subjects evaluable for this endpoint. 'n'=subjects evaluable at specified time points for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 16 and 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	36	46	44	
Units: minutes				
median (full range (min-max))				
Baseline (n = 36, 46, 44)	97.0 (22.6 to 164.9)	107.1 (50.5 to 195.5)	99.2 (13.9 to 176.9)	
Change at Week 16 (n = 20, 29, 24)	3.9 (-39.5 to 60.1)	2.9 (-49.4 to 45.1)	-4.2 (-45.5 to 67.8)	
Change at Week 56 (n = 7, 8, 10)	-8.9 (-63.5 to 16.9)	-10.1 (-25.4 to 30.2)	3.9 (-17.7 to 15.3)	

## Statistical analyses

No statistical analyses for this end point

**Secondary: Change From Baseline in Average Daily Physical Activity Counts at Weeks 16 and 56**

End point title	Change From Baseline in Average Daily Physical Activity Counts at Weeks 16 and 56
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## End point description:

An average daily physical activity count was measured using actigraphy. Subjects continuously wore the accelerometer (apart for water activities) in the morning until going to bed at night for 7 or 14 consecutive days while going about their usual daily activities. Subjects maintained a log (electronic or written) to record when the accelerometer was put on in the morning and removed at night (or if removed for any other purpose). Accelerometry analysis set = All subjects treated with tanezumab or matching placebo SC who had any baseline or post-baseline accelerometry data. 'Overall number of subjects analysed' = subjects evaluable for this endpoint. 'n'=subjects evaluable at specified time points for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 16 and 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	36	46	44	
Units: physical activity counts				
median (full range (min-max))				
Baseline (n = 36, 46, 44)	75244 (12385 to 129724)	95911 (25816 to 428586)	74414 (8136.6 to 253672)	
Change at Week 16 (n = 20, 29, 24)	-470.0 (-32693 to 225384)	-2261 (-114000 to 125895)	1202.9 (-70004 to 300461)	
Change at Week 56 (n = 7, 8, 10)	-14552 (-42956 to 24607)	-8313 (-60556 to 53888)	4414.3 (-15896 to 56451)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Average Daily Minutes of Moderate to Vigorous Physical Activity at Weeks 16 and 56

End point title	Change From Baseline in Average Daily Minutes of Moderate to Vigorous Physical Activity at Weeks 16 and 56
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End point description:

An average daily physical activity count was measured using actigraphy which was then sorted into three intensity thresholds: light (100 – less than {<1500} counts moderate (1,500 – <6500 counts), and vigorous (>=6500 counts).subjects continuously wore the accelerometer (apart for water activities) in the morning until going to bed at night for 7 or 14 consecutive days while going about their usual daily activities. Subjects maintained a log (electronic or written) to record when the accelerometer was put on in the morning and removed at night (or if removed for any other purpose). Accelerometry analysis set = All subjects treated with tanezumab or matching placebo SC who had any baseline or post-baseline accelerometry data. 'Number of subjects analysed' = subjects evaluable for this endpoint. 'n'=subjects evaluable at specified time points for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 16 and 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	36	46	44	
Units: minutes				
median (full range (min-max))				
Baseline (n = 36, 46, 44)	41.2 (2.2 to 80.4)	53.1 (7.3 to 156.0)	41.9 (0.7 to 117.0)	
Change at Week 16 (n = 20, 29, 24)	0.7 (-25.3 to 62.7)	-1.6 (-72.2 to 78.8)	-0.1 (-39.2 to 68.7)	
Change at Week 56 (n = 7, 8, 10)	-3.8 (-27.5 to 23.5)	2.7 (-27.5 to 38.5)	7.4 (-13.4 to 40.7)	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Change From Baseline in Average Daily Minutes of Bouted (Sustained) Moderate to Vigorous Physical Activity at Weeks 16 and 56

End point title	Change From Baseline in Average Daily Minutes of Bouted (Sustained) Moderate to Vigorous Physical Activity at Weeks 16 and 56
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End point description:

An average daily physical activity count was measured using actigraphy which was then sorted into three intensity thresholds: light (100 – <1,500 counts moderate (1,500 – <6,500 counts), and vigorous (>=6,500 counts).subjects continuously wore the accelerometer (apart for water activities) in the morning until going to bed at night for 7 or 14 consecutive days while going about their usual daily activities. Subjects maintained a log (electronic or written) to record when the accelerometer was put on in the morning and removed at night (or if removed for any other purpose). A "bout" of moderate to vigorous activity was defined as 10 or more consecutive minutes above the moderate physical activity level threshold, with allowance for interruptions of 1 or 2 minutes below the threshold. Accelerometry analysis set was analysed. 'Overall number of subjects analysed'=subjects evaluable for this endpoint. 'n'=subjects evaluable at specified time points.

End point type	Secondary
End point timeframe:	Baseline, Weeks 16 and 56

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	36	46	44	
Units: minutes				
median (full range (min-max))				
Baseline (n =36,46,44)	0.0 (0.0 to 16.5)	0.0 (0.0 to 111.5)	0.0 (0.0 to 42.4)	
Change at Week 16 (n =20,29,24)	0.0 (-13.1 to 25.9)	0.0 (-73.3 to 13.0)	0.0 (-12.6 to 64.8)	
Change at Week 56 (n =7,8,10)	0.0 (-5.8 to 0.0)	-1.4 (-11.5 to 8.2)	0.0 (-2.0 to 6.5)	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Change From Baseline in Average Daily Step Count at Weeks 16 and 56

End point title	Change From Baseline in Average Daily Step Count at Weeks 16 and 56
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End point description:

Average daily step count was measured using actigraphy. Subjects continuously wore the accelerometer (apart for water activities) in the morning until going to bed at night for 7 or 14 consecutive days while going about their usual daily activities. Subjects maintained a log (electronic or written) to record when the accelerometer was put on in the morning and removed at night (or if removed for any other purpose). Accelerometry analysis set = All subjects treated with tanezumab or matching placebo SC who had any baseline or post-baseline accelerometry data. 'Overall number of subjects analysed'=subjects evaluable for this endpoint. 'n'=subjects evaluable at specified time points for each arm, respectively.

End point type	Secondary
End point timeframe:	
Baseline, Weeks 16 and 56	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	36	46	44	
Units: step count				
median (full range (min-max))				
Baseline (n = 36, 46, 44)	4851.0 (827.6 to 9206.5)	5834.8 (2041.0 to 17895)	4779.0 (1015.6 to 11759)	
Change at Week 16 (n = 20, 29, 24)	350.9 (-4970 to 5017.9)	87.8 (-9415 to 5849.9)	-705.7 (-3286 to 6270.4)	
Change at Week 56 (n = 7, 8, 10)	-1938 (-4055 to 138.3)	-543.2 (-1856 to 3609.9)	242.6 (-4411 to 3312.2)	

### Statistical analyses

No statistical analyses for this end point

### Secondary: Number of Subjects With Treatment-Emergent Adverse Events (AEs) and Serious Adverse Events (SAEs)

End point title	Number of Subjects With Treatment-Emergent Adverse Events (AEs) and Serious Adverse Events (SAEs)
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End point description:

An AE was any untoward medical occurrence in a subject who received study drug without regard to possibility of causal relationship. SAE was an AE resulting in any of the following outcomes or deemed significant for any other reason: death; initial or prolonged inpatient hospitalization; life-threatening experience (immediate risk of dying); persistent or significant disability/incapacity; congenital anomaly. Treatment-emergent were events between first dose of study drug and up to week 80 that were absent before treatment or that worsened relative to pre-treatment state. AEs included both serious and non-serious AEs. Clinically significant physical examination abnormalities were reported as AEs. Safety population included all randomised subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
End point timeframe:	
Baseline up to Week 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
AEs	681	744	666	
SAEs	78	110	66	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Number of Subjects With Treatment-Related Treatment-Emergent Adverse Events (AEs) and Serious Adverse Events (SAEs)

End point title	Number of Subjects With Treatment-Related Treatment-Emergent Adverse Events (AEs) and Serious Adverse Events (SAEs)
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End point description:

Treatment-related AE was any untoward medical occurrence attributed to study drug in a subject who received study drug. SAE was an AE resulting in any of the following outcomes or deemed significant for any other reason: death; initial or prolonged inpatient hospitalization; life-threatening experience (immediate risk of dying); persistent or significant disability/incapacity; congenital anomaly. Treatment-emergent were events between first dose of study drug and up to week 80 that were absent before treatment or that worsened relative to pre-treatment state. Relatedness to study drug was assessed by the investigator. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo).

End point type	Secondary
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End point timeframe:

Baseline up to Week 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: subjects				
Treatment Related AEs	190	250	179	
Treatment Related SAEs	7	20	7	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Number of Subjects With Laboratory Test Abnormalities With Regard to Normal Baseline

End point title	Number of Subjects With Laboratory Test Abnormalities With Regard to Normal Baseline
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End point description:

Primary Abnormality criteria: HGB, hematocrit, RBC count  $<0.8 \times \text{LLN}$ ; Ery. mean corpuscular volume/Hg/ HGB conc., RBCs distribution width  $<0.9 \times \text{LLN}$ ,  $>1.1 \times \text{ULN}$ ; platelets  $<0.5 \times \text{LLN}$ ,  $>1.75 \times \text{ULN}$ ; WBC count  $<0.6 \times \text{LLN}$ ,  $>1.5 \times \text{ULN}$ ; Lymphocytes, Leukocytes, Neutrophils  $<0.8 \times \text{LLN}$ ,  $>1.2 \times \text{ULN}$ ; Basophils, Eosinophils, Monocytes  $>1.2 \times \text{ULN}$ ; Prothrombin time/Intl. normalized ratio  $>1.1 \times \text{ULN}$ ; total bilirubin  $>1.5 \times \text{ULN}$ ; aspartate aminotransferase, ALT, gamma GT, LDH, alkaline phosphatase  $>3.0 \times \text{ULN}$ ; total protein; albumin  $<0.8 \times \text{LLN}$ ,  $>1.2 \times \text{ULN}$ ; blood urea nitrogen, creatinine, Cholesterol, triglycerides



Urate>1.2\*ULN; sodium<0.95\*LLN,>1.05\*ULN; potassium,chloride,calcium,magnesium,bicarbonate <0.9\*LLN, >1.1\*ULN; phosphate<0.8\*LLN, >1.2\*ULN; glucose<0.6\*LLN, >1.5\*ULN; HGB A1C >1.3\*ULN; creatine kinase>2.0\*ULN, specific gravity<1.003, >1.030; pH<4.5, >8; Urine Glucose, protein,HGB,bilirubin >=1; Ketones>=1;Urine erythrocytes,Leukocytes>=20. Safety population. Number of subjects analysed=subjects evaluable for this endpoint.

End point type	Secondary
End point timeframe:	
Baseline up to Week 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	877	897	884	
Units: Subjects	109	102	121	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Subjects With Laboratory Test Abnormalities With Regard to Abnormal Baseline

End point title	Number of Subjects With Laboratory Test Abnormalities With Regard to Abnormal Baseline
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End point description:

Primary Abnormality criteria: hemoglobin; hematocrit; RBC count < 0.8\*LLN; Ery. mean corpuscular volume/ hemoglobin/ HGB concentration, erythrocytes distribution width <0.9\*LLN, >1.1\*ULN; platelets <0.5\*LLN,>1.75\*upper limit of normal (ULN); white blood cell count<0.6\*LLN, >1.5\*ULN; Lymphocytes, Leukocytes, Neutrophils <0.8\*LLN, >1.2\*ULN; Basophils, Eosinophils, Monocytes >1.2\*ULN; total bilirubin>1.5\*ULN; aspartate aminotransferase, alanine aminotransferase, gamma GT,LDH, alkaline phosphatase >3.0\*ULN; total protein; albumin<0.8\*LLN, >1.2\*ULN; blood urea nitrogen, creatinine, Cholesterol, triglycerides >1.3\*ULN; Urate >1.2\*ULN; sodium <0.95\*LLN,>1.05\*ULN; potassium, chloride, calcium, magnesium, bicarbonate <0.9\*LLN, >1.1\*ULN; phosphate <0.8\*LLN, >1.2\*ULN; glucose <0.6\*LLN, >1.5\*ULN; Hemoglobin A1C >1.3\*ULN; creatine kinase >2.0\*ULN; Nitrite >=1. Safety population was analysed. 'Number of subjects analysed'=subjects evaluable for this endpoint.

End point type	Secondary
End point timeframe:	
Baseline up to Week 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	706	731	691	
Units: subjects	78	61	84	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Change From Baseline in Blood Pressure (BP) at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56, 64 and 80

End point title	Change From Baseline in Blood Pressure (BP) at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56, 64 and 80
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End point description:

Measurement of BP included sitting systolic blood pressure (SBP) and diastolic blood pressure (DBP). Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'n'=subjects evaluable at specified time points for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56, 64 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: millimeters of mercury (mmHg)				
arithmetic mean (standard deviation)				
SBP: Baseline (n = 1002, 998, 996)	128.9 (± 12.91)	129.3 (± 13.43)	128.8 (± 13.26)	
SBP: Change at Week 2 (n = 973, 971, 966)	-2.7 (± 11.69)	-4.2 (± 11.92)	-1.2 (± 11.24)	
SBP: Change at Week 4 (n = 967, 955, 949)	-4.0 (± 11.44)	-4.9 (± 12.68)	-1.8 (± 11.29)	
SBP: Change at Week 8 (n = 930, 926, 918)	-2.9 (± 12.16)	-3.8 (± 12.60)	-1.8 (± 11.68)	
SBP: Change at Week 16 (n = 635, 637, 601)	-3.0 (± 11.66)	-3.7 (± 12.95)	-1.3 (± 12.37)	
SBP: Change at Week 24 (n = 545, 542, 528)	-3.0 (± 12.35)	-3.1 (± 13.49)	-1.7 (± 11.83)	
SBP: Change at Week 32 (n = 518, 512, 505)	-2.8 (± 11.95)	-3.3 (± 13.70)	-1.7 (± 13.49)	
SBP: Change at Week 40 (n = 492, 474, 482)	-2.5 (± 11.35)	-3.8 (± 14.41)	-2.3 (± 13.42)	
SBP: Change at Week 48 (n = 471, 449, 459)	-2.7 (± 12.21)	-3.0 (± 13.29)	-2.2 (± 12.97)	
SBP: Change at Week 56 (n = 446, 421, 445)	-3.1 (± 11.76)	-3.4 (± 13.78)	-2.2 (± 12.64)	
SBP: Change at Week 64 (n = 430, 407, 435)	-2.1 (± 13.40)	-2.1 (± 13.56)	-2.8 (± 13.33)	
SBP: Change at Week 80 (n = 423, 390, 415)	-1.0 (± 13.24)	-1.3 (± 13.71)	-2.3 (± 13.31)	
DBP: Baseline (n = 1002, 998, 996)	79.3 (± 8.56)	79.1 (± 8.68)	79.3 (± 8.57)	
DBP: Change at Week 2 (n = 973, 971, 966)	-1.3 (± 8.29)	-2.1 (± 7.96)	-1.1 (± 7.84)	
DBP: Change at Week 4 (n = 967, 955, 949)	-2.2 (± 8.06)	-2.5 (± 8.10)	-1.4 (± 8.19)	
DBP: Change at Week 8 (n = 930, 926, 918)	-1.1 (± 7.84)	-1.7 (± 8.24)	-1.1 (± 8.23)	
DBP: Change at Week 16 (n = 635, 637, 601)	-1.3 (± 8.14)	-1.8 (± 8.53)	-1.1 (± 8.30)	

DBP: Change at Week 24 (n = 545, 542, 528)	-1.3 (± 8.39)	-1.7 (± 8.91)	-1.4 (± 8.26)	
DBP: Change at Week 32 (n = 518, 512, 505)	-1.3 (± 8.28)	-1.4 (± 9.14)	-1.2 (± 8.91)	
DBP: Change at Week 40 (n = 492, 474, 482)	-1.2 (± 8.07)	-2.0 (± 8.90)	-1.1 (± 8.69)	
DBP: Change at Week 48 (n = 471, 449, 459)	-0.9 (± 8.82)	-1.8 (± 8.89)	-1.5 (± 8.65)	
DBP: Change at Week 56 (n = 446, 421, 445)	-1.8 (± 8.61)	-1.9 (± 9.11)	-1.2 (± 8.69)	
DBP: Change at Week 64 (n = 430, 407, 435)	-0.8 (± 8.63)	-0.8 (± 9.23)	-1.7 (± 9.03)	
DBP: Change at Week 80 (n = 423, 390, 415)	-0.6 (± 8.73)	-0.6 (± 9.66)	-1.2 (± 9.35)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Heart Rate at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56, 64 and 80

End point title	Change From Baseline in Heart Rate at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56, 64 and 80
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End point description:

Heart rate was measured at sitting position. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'n'=subjects evaluable at specified time points for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56, 64 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	998	996	
Units: beats per minute				
arithmetic mean (standard deviation)				
Baseline (n =1002, 998, 996)	70.8 (± 9.09)	70.5 (± 9.66)	70.6 (± 9.36)	
Change at Week 2 (n =973, 971, 966)	1.8 (± 8.65)	2.0 (± 8.50)	1.1 (± 8.31)	
Change at Week 4 (n =967, 955, 949)	1.6 (± 9.00)	2.0 (± 9.03)	1.2 (± 8.75)	
Change at Week 8 (n =930, 926, 917)	0.7 (± 9.06)	0.8 (± 8.54)	0.1 (± 8.78)	
Change at Week 16 (n =635, 637, 601)	0.5 (± 9.37)	0.5 (± 9.14)	0.8 (± 8.86)	
Change at Week 24 (n =545, 542, 528)	0.4 (± 9.46)	0.7 (± 9.36)	0.8 (± 9.24)	
Change at Week 32 (n =518, 512, 505)	1.2 (± 9.67)	1.6 (± 9.34)	1.7 (± 9.70)	
Change at Week 40 (n =492, 474, 482)	1.2 (± 9.89)	1.6 (± 9.40)	1.4 (± 8.71)	
Change at Week 48 (n =471, 448, 458)	0.6 (± 9.86)	1.0 (± 9.34)	1.3 (± 9.44)	
Change at Week 56 (n =446, 421, 445)	0.2 (± 9.51)	0.1 (± 10.15)	-0.0 (± 9.28)	
Change at Week 64 (n =430, 407, 435)	1.5 (± 9.81)	1.5 (± 9.55)	0.5 (± 9.84)	
Change at Week 80 (n =423, 390, 415)	0.9 (± 10.24)	0.6 (± 9.97)	0.9 (± 9.61)	

## Statistical analyses

No statistical analyses for this end point

### Secondary: Change From Baseline in Electrocardiogram (ECG) Parameters at Weeks 56 and 80

End point title	Change From Baseline in Electrocardiogram (ECG) Parameters at Weeks 56 and 80
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End point description:

A 12-lead ECG was recorded after subjects had rested for at least 5 minutes in the supine position in a quiet environment. All standard intervals (PR, QRS, QT, QTcF, QTcB, RR intervals) were collected. ECG abnormalities included: 1) QT interval, QT interval corrected using Bazett's formula (QTcB) and QT interval corrected using Fridericia's formula (QTcF): increase from baseline greater than (>) 30 millisecond (ms) or 60 ms; absolute value > 450 ms, >480 ms and > 500 ms; 2) heart rate (HR): absolute value ≤50 bpm and decrease from baseline ≥20 bpm; absolute value ≥120 beats per minute (bpm) and increase from baseline ≥20 bpm; 3) PR interval: absolute value ≥220 ms and increase from baseline ≥20 ms; 4) QRS interval: absolute value ≥ 120 ms. Safety population included all subjects treated with tanezumab or placebo SC. 'Overall number of subjects analyzed'=subjects evaluable for this endpoint. n=subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 56 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	995	995	
Units: milliseconds				
arithmetic mean (standard deviation)				
RR Interval: Baseline (n = 1002,995,995)	940.5 (± 136.21)	940.1 (± 144.48)	936.1 (± 142.31)	
RR Interval: Change at Week 56 (n = 440,413,441)	-26.3 (± 123.23)	-22.6 (± 128.58)	-14.9 (± 128.73)	
RR Interval: Change at Week 80 (n = 419,381,410)	-33.6 (± 119.23)	-32.4 (± 126.08)	-34.3 (± 133.83)	
PR Interval: Baseline (n = 996,990,991)	165.0 (± 27.43)	165.9 (± 25.45)	163.9 (± 23.98)	
PR Interval: Change at Week 56 (n = 435,410,434)	1.7 (± 12.98)	0.6 (± 13.33)	1.7 (± 14.40)	
PR Interval: Change at Week 80 (n = 412,378,401)	0.3 (± 13.39)	-0.8 (± 14.70)	0.6 (± 13.80)	
QRS Interval: Baseline (n = 1002,995,995)	94.9 (± 13.12)	94.6 (± 13.65)	94.3 (± 13.16)	
QRS Interval: Change at Week 56 (n = 440,413,441)	0.2 (± 8.22)	0.4 (± 8.30)	-0.4 (± 7.39)	
QRS Interval: Change at Week 80 (n = 419,381,410)	-0.2 (± 8.12)	1.0 (± 8.64)	-0.1 (± 7.81)	

QT Interval: Baseline (n =999,994,994)	405.0 (± 28.86)	403.8 (± 30.08)	404.3 (± 29.33)	
QT Interval: Change at Week 56 (n =437,413,440)	-3.5 (± 24.07)	-4.5 (± 25.06)	-2.9 (± 26.58)	
QT Interval: Change at Week 80 (n =417,381,408)	-6.2 (± 22.56)	-6.8 (± 24.46)	-6.0 (± 25.34)	
QTCB Interval: Baseline (n =999,994,994)	419.3 (± 21.85)	418.5 (± 21.96)	419.7 (± 21.60)	
QTCB Interval: Change at Week 56 (n =437,413,440)	2.3 (± 18.82)	0.5 (± 17.83)	0.2 (± 19.66)	
QTCB Interval: Change at Week 80(n =417,381,408)	1.5 (± 19.37)	0.2 (± 17.98)	1.7 (± 19.06)	
QTCF Interval: Baseline (n =999,994,994)	414.2 (± 19.96)	413.3 (± 20.09)	414.3 (± 19.49)	
QTCF Interval: Change at Week 56 (n =437,413,440)	0.3 (± 16.24)	-1.2 (± 15.55)	-0.8 (± 17.50)	
QTCF Interval: Change at Week 80 (n =417,381,408)	-1.2 (± 16.16)	-2.1 (± 15.55)	-1.0 (± 16.21)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Heart Rate (as Assessed by ECG) at Weeks 56 and 80

End point title	Change From Baseline in Heart Rate (as Assessed by ECG) at Weeks 56 and 80
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End point description:

Heart rate was measured at sitting position. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'Overall number of subjects analyzed'=subjects evaluable for this endpoint. 'n'=subjects evaluable at specified time points for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 56 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1002	995	995	
Units: beats per minute				
arithmetic mean (standard deviation)				
Baseline (n = 1002, 995, 995)	65.2 (± 9.70)	65.4 (± 10.30)	65.6 (± 10.36)	
Change at Week 56 (n = 440, 413, 441)	2.0 (± 9.10)	1.7 (± 9.72)	1.0 (± 9.95)	
Change at Week 80 (n = 419, 381, 410)	2.7 (± 9.00)	2.3 (± 9.34)	2.5 (± 10.02)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Subjects With Confirmed Orthostatic Hypotension

End point title	Number of Subjects With Confirmed Orthostatic Hypotension
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End point description:

Orthostatic hypotension was defined as postural change (supine to standing) that met the following criteria: For systolic BP  $\leq 150$  mmHg (mean supine): Reduction in systolic BP  $\geq 20$  mmHg or reduction in diastolic BP  $\geq 10$  mmHg at the 1 and/or 3 minute standing BP measurements. For systolic BP  $> 150$  mmHg (mean supine): Reduction in systolic BP  $\geq 30$  mmHg or reduction in diastolic BP  $\geq 15$  mmHg at the 1 and/or 3 minute standing BP measurements. If the 1 minute or 3 minute standing BP in a sequence met the orthostatic hypotension criteria, then that sequence was considered positive. If 2 of 2 or 2 of 3 sequences were positive, then orthostatic hypotension was considered confirmed. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'Overall number of subjects analysed'=subjects evaluable for this endpoint. 'n'=subjects evaluable at specified time points for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56, 64 and 80

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1001	996	996	
Units: subjects				
Baseline (n = 1001, 996, 996)	0	3	1	
Week 2 (n = 956, 957, 954)	2	4	2	
Week 4 (n = 949, 938, 937)	1	1	2	
Week 8 (n = 917, 918, 914)	0	2	1	
Week 16 (n = 677, 697, 654)	1	1	0	
Week 24 (n = 544, 538, 525)	0	1	1	
Week 32 (n = 511, 503, 497)	2	2	0	
Week 40 (n = 488, 472, 480)	1	1	1	
Week 48 (n = 467, 447, 459)	2	2	0	
Week 56 (n = 441, 419, 442)	1	1	1	
Week 64 (n = 429, 402, 425)	0	1	3	
Week 80 (n = 420, 386, 414)	0	1	0	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Survey of Autonomic Symptom (SAS) Scores at Weeks 24, 56 and 80

End point title	Change From Baseline in Survey of Autonomic Symptom (SAS) Scores at Weeks 24, 56 and 80
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End point description:

The SAS is a 12 item (11 for females) questionnaire, from which the total number of symptoms (0-12 for males and 0-11 for females) is calculated. Each positive symptom is rated from 1 (not at all) to 5 (a lot). The total impact score was the sum of all symptom rating scores, with 0 assigned where the subject did not have the particular symptom. The range for the total impact score is 0-60 for males and 0-55 for females, higher scores indicating higher impact. Safety population included all randomized subjects who received at least one dose of SC study medication (either tanezumab or matching placebo). 'Overall number of subjects analysed'=subjects evaluable for this endpoint. 'n'=subjects

evaluable at specified time points for each arm, respectively. Here, number is abbreviated as '#', symptom impact score abbreviated as 'SIS', Week abbreviated as 'W'

End point type	Secondary
End point timeframe:	
Baseline, Weeks 24, 56 and 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1000	997	996	
Units: units on a score				
arithmetic mean (standard deviation)				
# of symptoms reported: Baseline(n=1000,997,996)	0.47 (± 0.76)	0.53 (± 0.78)	0.49 (± 0.76)	
# symptoms reported:Change at W24(n=546,543,532)	0.21 (± 1.13)	0.18 (± 1.22)	0.11 (± 1.20)	
# symptoms reported:Change at W56(n=448,421,443)	0.28 (± 1.19)	0.33 (± 1.34)	0.22 (± 1.21)	
# symptoms reported:Change at W80(n=423,391,414)	0.89 (± 1.39)	0.94 (± 1.43)	0.74 (± 1.22)	
Total SIS: Baseline(n=1000,997,996)	1.10 (± 1.84)	1.23 (± 1.89)	1.13 (± 1.82)	
Total SIS: Change at W24(n=546,543,532)	0.66 (± 2.90)	0.52 (± 3.19)	0.33 (± 2.99)	
Total SIS: Change at W56(n=448,421,443)	0.97 (± 3.29)	1.21 (± 4.01)	0.82 (± 3.40)	
Total SIS: Change at W80(n=423,391,414)	1.33 (± 3.85)	1.31 (± 4.36)	0.89 (± 3.65)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Change From Baseline in Neuropathy Impairment Score (NIS) at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56, 64 and 80

End point title	Change From Baseline in Neuropathy Impairment Score (NIS) at Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56, 64 and 80
End point description:	
<p>NIS is a standardized instrument used to evaluate subject for signs of peripheral neuropathy. NIS is the sum of scores of 37 items, from both the left and right side, where 24 items scored from 0 (normal) to 4 (paralysis), higher score indicated higher abnormality/impairment and 13 items scored from 0 (normal), 1 (decreased) and 2 (absent), higher score indicated higher impairment. NIS possible overall score ranged from 0 (no impairment) to 244 (maximum impairment), higher scores indicated increased impairment. Safety population included all randomized subjects who received at least one dose of SC study medication (either Tanezumab or matching placebo). 'Overall number of subjects analysed'=subjects evaluable for this endpoint. 'n'=subjects evaluable at specified time points for each arm, respectively.</p>	
End point type	Secondary
End point timeframe:	
Baseline, Weeks 2, 4, 8, 16, 24, 32, 40, 48, 56, 64 and 80	

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg	NSAID	
Subject group type	Reporting group	Reporting group	Reporting group	
Number of subjects analysed	1000	995	994	
Units: units on a scale				
arithmetic mean (standard deviation)				
Baseline (n =1000, 995, 994)	1.85 (± 4.30)	1.70 (± 4.45)	1.87 (± 4.47)	
Change at Week 2 (n =971, 965, 951)	-0.22 (± 2.15)	-0.13 (± 1.40)	-0.15 (± 1.67)	
Change at Week 4 (n =986, 981, 977)	-0.16 (± 2.06)	-0.17 (± 1.92)	-0.19 (± 2.32)	
Change at Week 8 (n =988, 988, 982)	-0.27 (± 2.28)	-0.22 (± 2.08)	-0.36 (± 2.55)	
Change at Week 16 (n =989, 988, 982)	-0.27 (± 2.32)	-0.31 (± 2.48)	-0.47 (± 3.06)	
Change at Week 24 (n =989, 988, 982)	-0.32 (± 2.39)	-0.35 (± 2.76)	-0.49 (± 3.08)	
Change at Week 32 (n =989, 988, 982)	-0.37 (± 2.46)	-0.40 (± 2.75)	-0.53 (± 3.17)	
Change at Week 40 (n =989, 988, 982)	-0.35 (± 2.42)	-0.43 (± 2.80)	-0.53 (± 3.32)	
Change at Week 48 (n =989, 988, 982)	-0.37 (± 2.46)	-0.49 (± 3.13)	-0.55 (± 3.21)	
Change at Week 56 (n =989, 988, 982)	-0.35 (± 2.48)	-0.52 (± 3.26)	-0.58 (± 3.22)	
Change at Week 64 (n =989, 988, 982)	-0.32 (± 2.60)	-0.47 (± 3.24)	-0.57 (± 3.20)	
Change at Week 80 (n =989, 988, 982)	-0.35 (± 2.53)	-0.47 (± 3.35)	-0.62 (± 3.28)	

## Statistical analyses

No statistical analyses for this end point

## Secondary: Number of Subjects With Anti-Tanezumab Antibodies

End point title	Number of Subjects With Anti-Tanezumab Antibodies <sup>[9]</sup>
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End point description:

Human serum anti-drug antibody (ADA) samples were analyzed for the presence or absence of anti-tanezumab antibodies by using a semi quantitative enzyme linked immunosorbent assay (ELISA). Safety population included all subjects treated with tanezumab or placebo SC. Here, "n" =subjects who were evaluable at specified time point for each arm, respectively.

End point type	Secondary
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End point timeframe:

Baseline, Weeks 8, 16, 32, 48, 56, 64 and 80

Notes:

[9] - The end point is not reporting statistics for all the arms in the baseline period. It is expected all the baseline period arms will be reported on when providing values for an end point on the baseline period.

Justification: No statistical analysis was planned for this endpoint.

End point values	Tanezumab 2.5 mg	Tanezumab 5 mg		
Subject group type	Reporting group	Reporting group		
Number of subjects analysed	1002	998		
Units: subjects				
Baseline (n=993, 985)	116	83		
Week 8 (n =923, 920)	120	93		
Week 16 (n =618, 616)	98	83		
Week 32 (n =512, 503)	108	81		
Week 48 (n =466, 444)	96	78		
Week 56 (n =436, 412)	82	66		
Week 64 (n =420, 390)	69	60		
Week 80 (n =414, 384)	50	42		



## **Statistical analyses**

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No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

Baseline up to Week 56

Assessment type	Non-systematic
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### Dictionary used

Dictionary name	MedDRA
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Dictionary version	21.1
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### Reporting groups

Reporting group title	Tanezumab 2.5 mg
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Reporting group description:

Tanezumab (RN624 or PF-04383119) 2.5 milligram (mg) injection administered subcutaneously (SC) once every 8 weeks, from Baseline (Day 1) up to Week 48 and oral placebo tablets matched to naproxen, celecoxib or diclofenac extended release (ER), twice daily, from Baseline up to Week 56.

Reporting group title	NSAID
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Reporting group description:

Non-steroidal anti-inflammatory drug (NSAID) tablets (naproxen 500 mg, celecoxib 100 mg, or diclofenac ER 75 mg), administered orally, twice daily, from Baseline up to week 56 and placebo matched to tanezumab (RN624 or PF-04383119) injection administered SC once every 8 weeks, from Baseline up to Week 48.

Reporting group title	Tanezumab 5 mg
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Reporting group description:

Tanezumab (RN624 or PF-04383119) 5 mg injection administered SC once every 8 weeks, from Baseline up to Week 48 and oral placebo tablets matched to naproxen, celecoxib or diclofenac ER, twice daily, from Baseline up to week 56.

Serious adverse events	Tanezumab 2.5 mg	NSAID	Tanezumab 5 mg
Total subjects affected by serious adverse events			
subjects affected / exposed	51 / 1002 (5.09%)	46 / 996 (4.62%)	80 / 998 (8.02%)
number of deaths (all causes)	4	1	5
number of deaths resulting from adverse events	0	0	0
Vascular disorders			
Deep vein thrombosis			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Haematoma			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hypertensive crisis			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	0 / 998 (0.00%)

occurrences causally related to treatment / all	0 / 1	1 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Phlebitis			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Neoplasms benign, malignant and unspecified (incl cysts and polyps)			
Breast cancer			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cervix neoplasm			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastric cancer			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Invasive ductal breast carcinoma			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Lung adenocarcinoma			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 0
Malignant melanoma			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Prostate cancer			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	1 / 998 (0.10%)

occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Rectal cancer			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Thyroid adenoma			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Thyroid neoplasm			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Immune system disorders			
Hypersensitivity			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
General disorders and administration site conditions			
Chest pain			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Non-cardiac chest pain			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Sensation of foreign body			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Psychiatric disorders			

Major depression			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Mental status changes			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Reproductive system and breast disorders			
Cervical cyst			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cystocele			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Ovarian cyst			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Uterine prolapse			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Injury, poisoning and procedural complications			
Adjacent segment degeneration			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Ankle fracture			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0

deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Fall			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Forearm fracture			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hip fracture			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Joint dislocation			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Limb crushing injury			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Meniscus injury			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	3 / 998 (0.30%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 3
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Road traffic accident			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Skin abrasion			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Skin laceration			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Ulna fracture			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cardiac disorders			
Acute myocardial infarction			
subjects affected / exposed	1 / 1002 (0.10%)	3 / 996 (0.30%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 1	0 / 3	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Aortic valve incompetence			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Atrial fibrillation			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Atrial flutter			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cardiac arrest			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 0
Cardiac failure congestive			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Myocardial infarction			

subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 1	0 / 0	0 / 1
Myocardial rupture			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 1
Palpitations			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pericarditis			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Prinzmetal angina			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Ventricular tachycardia			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Respiratory, thoracic and mediastinal disorders			
Acute respiratory failure			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 1
Chronic obstructive pulmonary disease			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 3	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cough			



subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pleural effusion			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pulmonary embolism			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 1
Respiratory failure			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Blood and lymphatic system disorders			
Anaemia			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Nervous system disorders			
Brain stem infarction			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Carpal tunnel syndrome			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cerebrovascular accident			
subjects affected / exposed	2 / 1002 (0.20%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 2	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Dizziness			

subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Loss of consciousness			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Presyncope			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Subarachnoid haemorrhage			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Syncope			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Transient ischaemic attack			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Eye disorders			
Cataract			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Entropion			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Retinal detachment			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)

occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal disorders			
Colitis			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Enteritis			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastric ulcer haemorrhage			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	1 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Gastrointestinal haemorrhage			
subjects affected / exposed	0 / 1002 (0.00%)	2 / 996 (0.20%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	2 / 2	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Large intestine polyp			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Obstructive pancreatitis			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Renal and urinary disorders			
Acute kidney injury			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	2 / 998 (0.20%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Ureterolithiasis			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)

occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Hepatobiliary disorders			
Cholecystitis			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cholecystitis acute			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cholelithiasis			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Skin and subcutaneous tissue disorders			
Rosacea			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Musculoskeletal and connective tissue disorders			
Arthralgia			
subjects affected / exposed	4 / 1002 (0.40%)	0 / 996 (0.00%)	9 / 998 (0.90%)
occurrences causally related to treatment / all	0 / 4	0 / 0	5 / 10
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Arthritis			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Back pain			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Intervertebral disc protrusion			

subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	2 / 998 (0.20%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Lumbar spinal stenosis			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Musculoskeletal pain			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 1	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Osteoarthritis			
subjects affected / exposed	9 / 1002 (0.90%)	4 / 996 (0.40%)	17 / 998 (1.70%)
occurrences causally related to treatment / all	2 / 10	1 / 4	2 / 18
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Osteonecrosis			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	2 / 998 (0.20%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pain in extremity			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Rapidly progressive osteoarthritis			
subjects affected / exposed	3 / 1002 (0.30%)	0 / 996 (0.00%)	11 / 998 (1.10%)
occurrences causally related to treatment / all	1 / 3	0 / 0	8 / 12
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Rotator cuff syndrome			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Spinal osteoarthritis			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)

occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Spondylolisthesis			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Subchondral insufficiency fracture			
subjects affected / exposed	1 / 1002 (0.10%)	2 / 996 (0.20%)	4 / 998 (0.40%)
occurrences causally related to treatment / all	1 / 1	0 / 2	4 / 4
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Thoracic spinal stenosis			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Infections and infestations			
Appendicitis			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Cellulitis			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	2 / 998 (0.20%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 2
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Diverticulitis			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Endocarditis			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Escherichia pyelonephritis			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to	0 / 0	0 / 0	0 / 1

treatment / all			
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Extradural abscess			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Influenza			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Intervertebral discitis			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Localised infection			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Osteomyelitis			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pelvic abscess			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	1 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Periorbital cellulitis			
subjects affected / exposed	1 / 1002 (0.10%)	0 / 996 (0.00%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 1	0 / 0	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pneumonia			
subjects affected / exposed	1 / 1002 (0.10%)	1 / 996 (0.10%)	2 / 998 (0.20%)
occurrences causally related to treatment / all	0 / 1	0 / 1	0 / 2

deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Pneumonia mycoplasmal			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Sepsis			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Testicular abscess			
subjects affected / exposed	0 / 1002 (0.00%)	1 / 996 (0.10%)	0 / 998 (0.00%)
occurrences causally related to treatment / all	0 / 0	0 / 1	0 / 0
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0
Wound infection			
subjects affected / exposed	0 / 1002 (0.00%)	0 / 996 (0.00%)	1 / 998 (0.10%)
occurrences causally related to treatment / all	0 / 0	0 / 0	0 / 1
deaths causally related to treatment / all	0 / 0	0 / 0	0 / 0

Frequency threshold for reporting non-serious adverse events: 5 %

<b>Non-serious adverse events</b>	Tanezumab 2.5 mg	NSAID	Tanezumab 5 mg
Total subjects affected by non-serious adverse events			
subjects affected / exposed	301 / 1002 (30.04%)	264 / 996 (26.51%)	318 / 998 (31.86%)
Injury, poisoning and procedural complications			
Fall			
subjects affected / exposed	65 / 1002 (6.49%)	46 / 996 (4.62%)	52 / 998 (5.21%)
occurrences (all)	71	48	59
Nervous system disorders			
Headache			
subjects affected / exposed	56 / 1002 (5.59%)	25 / 996 (2.51%)	45 / 998 (4.51%)
occurrences (all)	68	30	59
Musculoskeletal and connective tissue disorders			



Arthralgia			
subjects affected / exposed	131 / 1002 (13.07%)	117 / 996 (11.75%)	160 / 998 (16.03%)
occurrences (all)	187	148	220
Back pain			
subjects affected / exposed	34 / 1002 (3.39%)	34 / 996 (3.41%)	55 / 998 (5.51%)
occurrences (all)	37	38	59
Infections and infestations			
Nasopharyngitis			
subjects affected / exposed	57 / 1002 (5.69%)	40 / 996 (4.02%)	67 / 998 (6.71%)
occurrences (all)	67	50	82
Upper respiratory tract infection			
subjects affected / exposed	57 / 1002 (5.69%)	59 / 996 (5.92%)	45 / 998 (4.51%)
occurrences (all)	64	70	47

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

Date	Amendment
15 May 2015	Exclusion criteria updated to provide additional clarity regarding exclusion of subjects who have a history of heart block.

Notes:

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### Interruptions (globally)

Were there any global interruptions to the trial? No

### Limitations and caveats

Limitations of the trial such as small numbers of subjects analysed or technical problems leading to unreliable data.

2 deaths occurred after end of study and are captured in adverse event section.

Notes: