I want to make the most of my time

With the exception of hemoptysis

In RELAY, adding CYRAMZA to erlotinib did not have a significant impact on overall QoL or average symptom burden 14

Time to deterioration for LCSS: ITT population¹⁴

	CYRAMZA + erlotinib (n=224)	Placebo + erlotinib (n=225)	Favors CYRAMZA + erlotinib	Favors placebo + erlotinib	
Category	Events	Events		1.5 2.0 2.5 3	HR (95% CI)
Loss of appetite	121	119			1.069 (0.829, 1.377)
Fatigue	113	116			0.980 (0.756, 1.271)
Cough	92	86			1.053 (0.784, 1.413)
Shortness of breath	95	88			1.121 (0.838, 1.498)
Hemoptysis	47	23			1.987 (1.206, 3.275)
Pain	102	94			1.109 (0.837, 1.468)
Symptom distress	84	87			0.940 (0.696, 1.269)
Activity level	126	112			1.222 (0.947, 1.577)
QoL	125	107			1.204 (0.930, 1.559)
Total LCSS	69	70			0.962 (0.690, 1.343)
ASBI	75	72			1.012 (0.732, 1.400)

Worsening in TTD for hemoptysis was consistent with symptoms expected in NSCLC and the known bleeding risk with CYRAMZA¹⁴

[•] CYRAMZA + erlotinib did not lead to a detriment in ECOG PS; however, there were insufficient events to perform a meaningful statistical evaluation. The exploratory analysis of TTD in ECOG PS revealed no difference between treatment arms¹⁴

No significant differences were observed in the total LCSS score or in most individual symptom items¹⁴