Medicinrådet

Bilag til Medicinrådets vurdering af tislelizumab i kombination med kemoterapi til behandling af HER2-negativ, lokalt fremskreden, ikke-resektabel eller metastatisk mave- eller gastroøsofageal adenokarcinom

Patienter med PD-L1-ekspression ≥ 5 %

Vers. 1.0

Bilagsoversigt

1. Ansøgers notat til Rådet vedr. tislelizumab
2. Forhandlingsnotat fra Amgros vedr. tislelizumab
3. Ansøgers endelige ansøgning vedr. tislelizumab

2025-09-25

Til Medicinrådet

På vegne af BeOne Medicines vil jeg takke for muligheden for at give en tilbagemelding på udkastet til vurderingsrapporten for tislelizumab i kombination med platin- og fluoropyrimidin-baseret kemoterapi som har indikation til førstelinjebehandling af voksne patienter med HER-2-negativ, lokalt fremskreden, ikke-resektabel eller metastatisk mave- eller gastroøsofageal (G/GEJ) adenokarcinom, hvis tumorer udtrykker PD-L1 med en tumorareal-positivitetsscore (TAP) ≥ 5 %.

BeOne Medicines ønsker ligeledes at takke for en god og konstruktiv dialog med sekretariatet igennem processen og vi har noteret at Medicinrådet synes enige i de antagelser, der er valgt i ansøgningen.

BeOne Medicines har et udtrykt ønske om hurtig adgang til behandling for patienter i Danmark og ser således ikke anledning til yderligere kommentarer.

Vi ser frem til Medicinrådets anbefaling af tislelizumab.

Med venlig hilsen

Nicolai Bendtsen
Director, Nordic Market Access

BeOne Medicines
10 Earlsfort Terrace
Dublin D02 T380
Ireland
BeOneMedicines.com

Amgros I/S
Dampfærgevej 22
2100 København Ø
Danmark

T +45 88713000
F +45 88713008

Medicin@amgros.dk
www.amgros.dk

03.10.2025

DBS, LSC

Forhandlingsnotat

Dato for behandling i Medicinrådet	29. oktober 2025
Leverandør	BeiGene
Lægemiddel	Tevimbra (tislelizumab)
Ansøgt indikation	Tevimbra i kombination med platin- og fluoropyrimidin-baseret kemoterapi til førstelinjebehandling af voksne patienter med HER-2-negativ, lokalt fremskreden, ikke-resektabel eller metastatisk mave- eller gastroøsofageal (G/GEJ) adenokarcinom, hvis tumorer udtrykker PD-L1 med en tumorareal-positivitetsscore (TAP) ≥ 5 %.
Nyt lægemiddel / indikationsudvidelse	Indikationsudvidelse

Prisinformation

Amgros har følgende pris på Tevimbra (tislelizumab):

Tabel 1: Forhandlingsresultat

Lægemiddel	Styrke (pakningsstørrelse)	AIP (DKK)	Nuværende SAIP (DKK)	Forhandlet rabat ift. AIP
Tevimbra	10 mg/ml (10 ml)	19.315,00	[redacted]	[redacted]

[redacted]

Tabel 2: Udbudsresultat pr. 1. november 2025

Lægemiddel	Styrke (pakningsstørrelse)	AIP (DKK)	Forhandlet SAIP (DKK)	Forhandlet rabat ift. AIP
Tevimbra	10 mg/ml (10 ml)	19.315,00	[redacted]	[redacted]

Aftaleforhold

[redacted]

Konkurrencesituationen

Tevimbra er på nuværende tidspunkt under vurdering i Medicinrådet til to nye indikationer udover denne indikation. Der vil være konkurrence på flere af disse indikationer.

Tabel 2 viser den årlige lægemiddeludgift på udvalgte sammenlignelige lægemidler.
[redacted]

Tabel 2: Sammenligning af lægemiddeludgifter pr. patient

Lægemiddel	Styrke (pakningsstørrelse)	Dosering	Pris pr. pakning (SAIP, DKK)	Lægemiddeludgift pr. år (SAIP, DKK)
Tevimbra	10 mg/ml (10 ml)	200 mg hver 3. uge	[redacted]	[redacted]
Keytruda	25 mg/ml (4 ml)	2 mg/kg* hver 3. uge eller 4 mg/kg hver 6. uge	[redacted]	[redacted]
Opdivo	100 mg (10 ml)	4,5 mg/kg* hver 3. uge	[redacted]	[redacted]

*Patientvægt 68 kg, jf. Medicinrådets vurderingsrapport på Opdivo (nivolumab)

Status fra andre lande

Tabel 3: Status fra andre lande

Land	Status	Link
Norge	Anbefalet	Link til vurdering
England	Vurdering suspenderet	Link til vurderingsstatus
Sverige	Under vurdering	Link til vurderingsstatus

Opsummering

[redacted]

Application for the assessment of Tevimbra® (tislelizumab) in combination with platinum and fluoropyrimidine-based chemotherapy for first-line treatment of adult patients with HER-2-negative locally advanced unresectable or metastatic gastric or gastroesophageal junction adenocarcinoma whose tumours express PD-L1 with a tumour area positivity score ≥ 5%

Color scheme for text highlighting	
Color of highlighted text	**Definition of highlighted text**
	Confidential information
[Other]	**[Definition of color-code]**

Contact information

Contact information	
Name	**Nicolai Bendtsen / BeiGene**
Title	Market Access Director, Nordics
Phone number	(+45) 28 12 41 16
E-mail	nicolai.bendtsen@beigene.com
Name (External representation)	**Jeppe Rasmussen / Zealth**
Title	Senior Consultant
Phone number	(+45) 31 24 94 91
E-mail	jera@zealthcon.com

Table of contents

Tables and Figures

List of tables

List of figures

Abbreviations

1L	First-line	**IS**	Iceland
2L	Second-line	**ISPOR**	The Professional Society for Health Economics and Outcomes Research
5-FU	5-fluorouracil	**ITC**	Indirect treatment comparison
AACR	American Association for Cancer Research	**ITT**	Intent-to-treat
AE	Adverse event	**IV**	Intravenous
AIDS	Acquired immunodeficiency syndrome	**JGCA**	Japanese Gastric Cancer Association
AJCC	American Joint Committee on Cancer	**JNHB**	Joint Nordic Assessment
ANZCTR	Australian New Zealand Clinical Trials Registry	**KMbase**	Korean Medical Article Database
ASCO	American Society of Clinical Oncology	**KSMO**	Korean Society of Medical Oncology
ASCO GI	American Society of Clinical Oncology Gastrointestinal Cancers Symposium	**LSM**	Least squares mean
ATC	Anatomical Therapeutic Chemical Code	**MEDLINE**	Medical literature analysis and retrieval system online
ATMP	Advanced Therapy Medicinal Products	**MMR**	Mismatch repair
b.i.d.	Twice daily	**mo**	Months
BICR	Blinded independent committee review	**MRI**	Magnetic resonance imaging
CADTH	Canadian Agency for Drugs and Technologies in Health	**MSI-H**	Microsatellite instability high
CAPOX	Capecitabine + oxaliplatin	**MSI-L**	Microsatellite instability low
CBR	Clinical benefit rate	**MSS**	Microsatellite stable
CCRCT	Cochrane Central Register of Controlled Trials	**N/A**	Not applicable
CDSR	Cochrane Database of Systematic Reviews	**n/N**	Number
Chemo	Chemotherapy	**NR**	Not reported

CI	Confidence interval	**NCI CTCAE**	National Cancer Institute Common Terminology Criteria for Adverse Events
CLDN12.2	Claudin12.2	**NE**	Not evaluable
CPS	Combined positive score	**NIV**	Nivolumab
CR	Complete response	**NMA**	Network meta-analysis
CSCO	Chinese Society of Clinical Oncology	**NO**	Norway
CSR	Clinical study report	**NSCLC**	Non-small cell lung cancer
CT	Chemotherapy	**OR**	Odds ratio
CT	Computed tomography	**ORR**	Objective response rate
CTCAE	Common Terminology Criteria for Adverse Avents	**OS**	Overall survival
DCO	Data cut-off	**OSCC**	Oesophageal squamous cell carcinoma
DCR	Disease control rate	**P/p**	Probability
DEGC	Danish Esophagogastric Cancer Group	**PBAC**	Pharmaceutical benefits advisory committee
DK	Denmark	**PBO**	Placebo
DKK	Danish krone	**PD-1**	Programmed cell death-1
DMC	Danish Medicines Agency	**PD-L1**	Programmed death-ligand 1
dMMR	Deficient mismatch repair	**PD-L2**	Programmed death-ligand 2
DoR	Duration of response	**PEM**	Pembrolizumab
DRG	Diagnosis related group	**PFS**	Progression-free survival
EAC	Esophageal adenocarcinoma	**PH**	Proportional hazards
EC	European Commission	**PICOS**	Population, intervention, comparator, outcome
ECOG PS	Eastern Cooperative Oncology Group Performance Status	**pMMR**	Proficient mismatch repair
EGFR	Epidermal growth factor receptor	**PR**	Partial response
EMA	European Medicines Agency	**PRESS**	Peer review of electronic search strategies
EORTC QLQ-C30 GHS	European Organization for Research and Treatment of Cancer Quality of Life Questionnaire-core 30 global health status	**PRISMA**	Preferred reporting items for systematic literature reviews and meta-analyses
EORTC QLQ-STO22	European Organization for Research and Treatment of Cancer Quality of Life Questionnaire -stomach 22	**PRO**	Patient reported outcome
EOT	End of trial	**PSA**	Probabilistic sensitivity analyses
EQ-5D	EuroQoL 5-dimensions	**Q3W**	Every three weeks

EQ-5D-3L	EuroQoL 5-dimensions 3-level	**QALY**	Quality-adjusted life year
EQ-5D-5L	EuroQoL 5-dimensions 5-level	**QoL**	Quality of life
EQ-VAS	EuroQoL visual analogue scale	**RCT**	Randomized controlled trials
ERBB2	ERB-B2 receptor tyrosine kinase 2	**RECIST**	Response Evaluation Criteria in Solid Tumours
ESMO	European society for medical oncology	**ROW**	Rest of the world
ESMO-IO	European society for medical oncology immuno-oncology congress	**SAE**	Serious adverse event
FACT-Ga	Functional assessment of cancer therapy-gastric	**SCLC**	Small-cell lung cancer
FI	Finland	**SD**	Standard deviation
FGFR2b	fibroblast growth factor receptor 2b	**SE**	Standard error
FU	Fluorouracil	**SEOM**	Sociedad española de oncología médica
G	Gastric	**SLR**	Systematic literature review
GC	Gastric cancer	**SMC**	Scottish medicines consortium
GEJ	Gastroesophageal junction	**SmPC**	Summary of product characteristics
GHS	Global health status	**SOX**	Oral S-1 [tegafur–gimeracil–oteracil potassium] + oxaliplatin
H. pylori	Helicobacter pylori	**SUCRA**	Surface area under the cumulative ranking curve
HAS	Haute Autorité de Santé	**SW**	Sweden
HER-2	Human epidermal growth factor receptor 2	**TAP**	Tumour area positivity
HIRA	Health insurance review and assessment service	**TEAE**	Treatment-emergent adverse event
HIV	Human immunodeficiency virus	**TIS**	Tislelizumab
HR	Hazard ratio	**TKI**	Tyrosine kinase inhibitors
HRQoL	Health-related quality of life	**TNM**	Tumour node metastases
HRQoL VAS	Health-related quality of life visual analogue scale	**ToT**	Time on treatment
HTA	Health technology assessment	**TRAE**	Treatment related adverse event
HuMAb	Monoclonal antibody	**TTR**	Time to response
ICC	Investigator's choice of chemotherapy	**TTSD**	Time to symptom deterioration
ICTRP	International clinical trials registry platform	**UICC**	Union for international cancer control

IgG4	Human immunoglobulin G4	**UK**	United Kingdom
IQR	Interquartile range	**US**	United States
IQWiG	Instit für qualität und wirtschaftlichkeit im gesunheitswesen	**VEGFR-2**	Vascular endothelial growth factor receptor-2
ISPOR	The professional society for health economics and outcomes research	**WCGI**	World congress on gastrointestinal cancer
		WHO	World health organization

1. Regulatory information on the medicine

Overview of the medicine	
Proprietary name	Tevimbra®
Generic name	Tislelizumab
Therapeutic indication as defined by EMA	Tevimbra®, in combination with platinum and fluoropyrimidine-based chemotherapy, is indicated for the first-line treatment of adult patients with HER-2-negative locally advanced unresectable or metastatic gastric or gastroesophageal junction (G/GEJ) adenocarcinoma whose tumours express PD-L1 with a tumour area positivity (TAP) score ≥ 5%
Marketing authorization holder in Denmark	BeOne Medicines Ireland Ltd 10 Earlsfort Terrace Dublin 02 T380 Ireland
ATC code	L01FF09
Combination therapy and/or co-medication	Tevimbra® (tislelizumab) in combination with platinum and fluoropyrimidine-based chemotherapy
Date of EC approval	27th of November 2024
Has the medicine received a conditional marketing authorization?	No
Accelerated assessment in the European Medicines Agency (EMA)	N/A
Orphan drug designation (include date)	N/A
Other therapeutic indications approved by EMA	**Non-small cell lung cancer (NSCLC)** *"Tevimbra® (tislelizumab) in combination with pemetrexed and platinum-containing chemotherapy is indicated for the first-line treatment of adult patients with non-squamous NSCLC whose tumours have PD-L1 expression on ≥50% of tumour cells with no EGFR or ALK positive mutations and who have:* • *locally advanced NSCLC and are not candidates for surgical resection or platinum-based chemoradiation, or* • *metastatic NSCLC."* *"Tevimbra® (tislelizumab) in combination with carboplatin and either paclitaxel or nab-paclitaxel is indicated for the first-line treatment of adult patients with squamous NSCLC who have:*

Overview of the medicine	
	• *locally advanced NSCLC and are not candidates for surgical resection or platinum-based chemoradiation, or* • *metastatic NSCLC."* *"Tevimbra® (tislelizumab) as monotherapy is indicated for the treatment of adult patients with locally advanced or metastatic NSCLC after prior platinum-based therapy. Patients with EGFR mutant or ALK positive NSCLC should also have received targeted therapies before receiving tislelizumab."* **Small cell lung cancer (SCLC)** *"Tevimbra® (tislelizumab), in combination with etoposide and platinum chemotherapy, is indicated for the first-line treatment of adult patients with extensive-stage SCLC."* **Oesophageal squamous cell carcinoma (OSCC)** *"Tevimbra® (tislelizumab), in combination with platinum-based chemotherapy, is indicated for the first-line treatment of adult patients with unresectable, locally advanced or metastatic OSCC whose tumours express PD-L1 with a TAP score ≥ 5%."* *"Tevimbra® (tislelizumab) as monotherapy is indicated for the treatment of adult patients with unresectable, locally advanced or metastatic OSCC after prior platinum-based chemotherapy."* **Nasopharyngeal carcinoma (NPC)** *"Tevimbra®, in combination with gemcitabine and cisplatin, is indicated for the first-line treatment of adult patients with recurrent, not amenable to curative surgery or radiotherapy, or metastatic NPC."*
Other indications that have been evaluated by the DMC (yes/no)	Tevimbra® have been recommended for OSCC by the DMC. Tevimbra for sqNSCLC is currently in the evaluation process.
Joint Nordic assessment (JNHB)	Are the current treatment practices similar across the Nordic countries (DK, FI, IS, NO, SE)? Not relevant. Is the product suitable for a joint Nordic assessment? No. If no, why not? A joint Nordic assessment is not relevant, as Tevimbra® (tislelizumab) has already been processed in other Nordic countries.
Dispensing group	BEGR
Packaging – types, sizes/number of units and concentrations	Tevimbra® (tislelizumab) is available as a 100 mg concentrate for solution for infusion. Each ml of the concentrate for solution for infusion contains 10 mg of tislelizumab. Each vial of 10 ml contains 100 mg of tislelizumab.

Source: [1–3].

2. Summary table

Summary	
Indication relevant for the assessment	Tevimbra®, in combination with platinum and fluoropyrimidine-based chemotherapy, is indicated for the first-line treatment of adult patients with HER-2-negative locally advanced unresectable or metastatic gastric or gastroesophageal junction (G/GEJ) adenocarcinoma whose tumours express PD-L1 with a tumour area positivity (TAP) score ≥ 5% [3].
Dosage regiment and administration	The recommended dose of Tevimbra® (tislelizumab) is 200 mg, administered by intravenous (IV) infusion once every 3 weeks (Q3W), in combination with chemotherapy. Patients should be treated with Tevimbra® (tislelizumab) until disease progression or unacceptable toxicity [3].
Choice of comparator	Nivolumab in combination with chemotherapy, as this is one of two equivalentcurrent possible standard treatments recommended by the Danish Medicines Council (DMC) [4].
Prognosis with current treatment (comparator)	No Danish data on the prognosis of patients with G/GEJ adenocarcinoma treated with nivolumab plus chemotherapy or pembrolizumab plus chemotherapy have been published since these treatments were recommended by the DMC in 2022 and 2024, respectively [4,5]. However, according to data from 2018-2022, the relative 1-year age-standardized survival rate for gastric cancer (GC) patients, expressed as percentage (95% CI), 59.8% (57.7-61.9) for men and 61.2% (58.3-64.3) for women, while the 5-year age-standardized relative survival rates, were 29.9% (27.7-32.3) for men and 37.3% (34.2-40.8) for women [6].
Type of evidence for the clinical evaluation	Network meta-analysis (NMA).
Most important efficacy endpoints (Difference/gain compared to comparator)	Overall Survival (OS), Progression-free survival (PFS), Grade ≥3 Treatment Related Adverse Event (TRAE), and health-related quality of life (HRQoL) between the intervention and comparator were compared in the NMA. From these endpoints, the NMA showed that tislelizumab combined with chemotherapy performed equally to nivolumab combined with chemotherapy [7]. The following results of each clinical trial were used in the NMA: **RATIONALE-305** Tislelizumab plus chemotherapy: • OS: 15.0 months • PFS: 6.9 months

Summary	
	Placebo plus chemotherapy: • OS: 12.9 months • PFS: 6.2 months **CheckMate 649** Nivolumab plus chemotherapy: • OS: 13.7 months • PFS: 7.7 months Chemotherapy: • OS: 11.6 months • PFS: 6.9 months Section 6, presents the available data from the clinical trials, including the data used in the NMA.
Most important serious adverse events for the intervention and comparator	The NMA showed no statistically significant difference between tislelizumab or nivolumab (all in combination with chemotherapy) when comparing Grade ≥3 TRAEs. Serious TRAEs with a frequency of ≥1% for tislelizumab plus chemotherapy at final analysis data-cutoff (DCO) February 2023) include: • Platelet count decreased n=16 (3.2%) • Vomiting n=6 (1.2%) Serious adverse event (SAEs) with a frequency of ≥1% were not reported in the publications for nivolumab plus chemotherapy.
Impact on health-related quality of life	Clinical documentation: **EuroQol visual analogue scale (EQ-VAS)**: Tislelizumab + chemotherapy led to a smaller decrease in health status according to the VAS score of the EQ-5D (EuroQol 5-dimensions) compared to placebo + chemotherapy. At cycle 6, the mean score change from baseline was 3.0 (SD): 16.38) for tislelizumab + chemotherapy and -0.8 (SD: 15.17) for placebo + chemotherapy. Health economic model: N/A
Type of economic analysis that is submitted	N/A
Data sources used to model the clinical effects	N/A

Summary	
Data sources used to model the health-related quality of life	N/A
Life years gained	N/A
QALYs gained	N/A
Incremental costs	N/A
ICER (DKK/QALY)	N/A
Uncertainty associated with the ICER estimate	N/A
Number of eligible patients in Denmark	N/A
Budget impact (in year 5)	N/A

3. The patient population, intervention, choice of comparator(s) and relevant outcomes

3.1 The medical condition

Disease description: Gastric cancer (GC) is the fifth most common cancer globally [8], with around 1.1 million new cases diagnosed in 2020 [9]. Gastric adenocarcinomas are classified into two subtypes based on their location. True gastric adenocarcinoma (G adenocarcinoma; also: non-cardia GC) arises in the lower portion of the stomach and gastroesophageal junction adenocarcinoma (GEJ; also: cardia GC) which arises in the region adjoining the oesophageal-gastric junction [10]. A decline in G adenocarcinoma has been observed over the past decades, while GEJ adenocarcinoma incidence is observed to increase [11,12]. HER-2 overexpression is observed in approximately 10-30% of all advanced G/GEJ adenocarcinomas [13].

Pathogenesis and risk factors: GC develops from chronic inflammation of epithelial cells, which progresses to atrophy, metaplasia, dysplasia, and eventually GC [14,15]. About 90-95% of GCs are adenocarcinoma (develops from gland cells) [16]. Around two-thirds of gastric adenocarcinoma arise from the lower portion of the stomach (G adenocarcinoma) and one-third in the GEJ (GEJ adenocarcinoma) [11,12]. More than 40% of patients with GC have tumors with PD-L1 expression [17]. PD-1 is an immune checkpoint protein expressed on T-cells that plays a pivotal role in monitoring immune responses [18,19]. Its

ligands, PD-L1 and PD-L2, are highly expressed in tumor cells, and the interaction with PD-1 induces an inhibitory signal that weakens T-cell activity, and therefore, allows the tumor cells to evade T-cell-mediated immune response. The etiology of GC is multifactorial and strongly depends on cancer subtype, ethnicity, geography and socioeconomic status. Chronic Helicobacter pylori (H. pylori) infection is considered the most common contributor to GC, with more than 60% of cases attributed to the bacterium [20]. G adenocarcinoma is associated with H. pylori in up to 90% of cases. GEJ adenocarcinoma is less commonly associated with H. pylori, with around 20% of cases attributed to the bacterium [21]. Other risk factors for GC include alcohol consumption, tobacco smoking, foods preserved by salting, low fruit intake, and high consumption of processed, grilled or barbecued meat [22–26]. Around 10%-20% of GCs are linked to germline genetic alterations [27,28].

Diagnosis: GC often remains unnoticed in the early stage due to lack of symptoms and is usually detected only in the advanced or metastatic stage [29]. The European Society for Medical Oncology (ESMO) Clinical Practice Guidelines for GC recommends endoscopic examination and foresees biopsies as the gold standard method for diagnosing GC. Diagnosis should be made from multiple (5-8) endoscopic biopsies to guarantee an adequate representation of the tumor. The diagnosis should be made from an endoscopic biopsy with histology classified according to the World Health Organization (WHO) criteria. HER-2 status and PD-L1 combined positive score (CPS) should be evaluated in patients with metastatic GC to tailor first-line (1L) treatment in combination with chemotherapy (CT) [30].

Clinical symptoms and quality of life

Common presenting signs and symptoms of GC are signs of advanced disease and include dysphagia, abdominal pain, melena, vomiting and weight loss [30,31]. Health-related quality of life (HRQoL) is negatively impacted by GC [32,33]. Clinical symptoms of G/GEJ adenocarcinoma are debilitating and significantly impair patient's quality of life (QoL), as reported in several clinical studies. A study by Xiao et al. 2023 reported lower HRQoL compared to the general population in patients from France, China, Germany, Japan, the UK, and the US with unresectable advanced or metastatic G adenocarcinoma (61%), GEJ adenocarcinoma (27%), or oesophageal cancer (12%), as measured with the EuroQoL-5 dimensions-3 level (EQ-5D-3L) [33]. A study using patients from two global, placebo-controlled, phase III randomized clinical trials (RCT)(N = 1,019, 77.7% had G adenocarcinoma and 22.3% had GEJ adenocarcinoma) reported patient QoL using the QoL questionnaire-core 30 questionnaire (QLQ-C30), and performance status at baseline and over the course of the study. At baseline, the highest impairments in QoL were reported for global QoL, fatigue, pain, and appetite loss, and scores did not differ among patients based on disease measurability [34].

Staging: Usually, the Tumour Node Metastases (TNM) system (8th edition, 2017) developed by the American Joint Committee on Cancer (AJCC)/Union for International Cancer Control (UICC) is used to stage GC. The current National Comprehensive Cancer Network (NCCN) Guidelines for GC and ESMO Clinical Practice Guidelines for GC use the AJCC/UICC TNM system (8th edition) to stage GC [30,35]. Early GC is confined to the mucosa or submucosa, with or without lymph node involvement (T1, any N) [36].

Advanced GC affects deeper layers (T2-T4). Regional lymph node involvement is described with N1-N3. Distant lymph node involvement is considered a metastasis (M1). M1 can be distant adenopathy, non-direct extension into other organs, or peritoneal carcinomatosis [37].

Prognosis: GC is the fifth leading cause of cancer deaths worldwide [8]. Mortality rates are high because most patients with GC present with advanced disease [16]. The 5-year relative survival rate for GC in Central Europe is 33% [38]. According to the AJCC, the stage of GC at the time of diagnosis is the most important predictive factor for the prognosis [39,40]. Early GC (adenocarcinoma that is confined to the mucosa or submucosa, with or without lymph node involvement) has a significantly better prognosis (approximately 90% five-year survival rate) than invasive gastric cancer (less than 10% five-year survival rate) [41,42].

3.2 Patient population

In Denmark, approximately 900 individuals are diagnosed with esophageal and stomach cancers each year, making them collectively the 8th most common type of cancer in the country, with a median age of 70 at diagnosis. The incidence of GEJ adenocarcinomas has increased in recent years, now surpassing both esophageal squamous cell carcinomas and gastric adenocarcinomas. In 2020, 1,119 new patients were registered with adenocarcinoma of the esophagus, GEJ, or stomach [43]. HER-2 overexpression is found in 10-30% of adenocarcinomas, indicating that 70-90% of G/GEJ adenocarcinoma patients are HER-2-negative [13]. There is no available database information on patient PD-L1 expression in Danish G/GEJ adenocarcinoma patients. However, the clinical study on which this application is based showed that 55% of patients in both arms had a PD-L1 tumour area positivity (TAP) score ≥ 5% [44]. In table 1 the incidence and prevalence of gastric and GEJ (G/GEJ) cancers in Denmark are presented. Incidence numbers refer to the Danish EsophagoGastric Cancer Group (DEGC) report from 2022 while prevalence numbers are based on numbers for GC in Denmark from NORDCAN [43,45]. NORDCAN does not provide insight into histologic subtypes of gastric cancer, nor provides numbers for GEJ cancer. The incidence and prevalence were validated by a Danish clinical expert.

Table 1. Incidence and prevalence from 2018 to 2022

Year	2018	2019	2020	2021	2022
Incidence in Denmark [46,47]	GEJ: 635 G: 236 Total: 871	GEJ: 626 G: 221 Total: 848	GEJ: 626 G: 227 Total: 853	GEJ: 674 G: 234 Total: 908	GEJ: 589 G: 272 Total: 861
Prevalence in Denmark (G) [45]	G: 2,278	G: 2,391	G: 2,556	G: 2,824	G: 2,909
Global prevalence	N/A	N/A	N/A	N/A	N/A

It is expected that patients with G/GEJ adenocarcinoma treated with nivolumab in combination with platinum- and fluoropyrimidine-based CT, or pembrolizumab in combination with platinum- and fluoropyrimidine-based CT, are eligible candidates for

treatment with tislelizumab in combination with platinum-based CT. In Denmark, this population includes patients with locally advanced, non-resectable, or metastatic HER-2-negative G/GEJ adenocarcinoma with high PD-L1 expression. In the Danish Medicines Council (DMC) assessment of pembrolizumab plus CT in this population, it was estimated that approximately 230 patients with PD-L1 CPS ≥5 would be eligible for treatment. This was estimated based on DEGC reports, an assumption that 80% of patients are HER-2-negative, and the KEYNOTE-859 study in which approx. 60% of patients had PD-L1 CPS ≥5. It is, however, highlighted that this estimate is associated with some uncertainty as there are no reports on Danish patients with recurrence receiving 1L treatment. The estimated number of patients eligible for treatment with tislelizumab plus CT is presented in Table 2 [4]. Furthermore, it is important to acknowledge that the scoring of PD-L1 expression differentiates between the indications for pembrolizumab and tislelizumab. While the indications for nivolumab and pembrolizumab both utilize CPS, the indication for tislelizumab employs TAP. Despite this difference, the analytical concordance and clinical utility between TAP and CPS scores are high [48–50]. Consequently, the estimated eligible population with CPS ≥5 is assumed to be approximately equivalent to that of the tislelizumab indication using the TAP score (TAP ≥5%). The concordance of the PD-L1 scoring methods is described in section 7.1.1.

Table 2. Estimated number of patients eligible for treatment

Year	Year 1	Year 2	Year 3	Year 4	Year 5
Number of new patients in Denmark who are eligible for treatment in the coming years	230	230	230	230	230

3.3 Current treatment options

In 2025, treatment guidelines for "*Onkologisk behandling af ikke-kurabel cancer i esophagus og ventrikel*" were published by DEGC. In these guidelines, the treatment recommendations for non-curable adenocarcinoma in PD-L1-positive patients are:

- Treatment with pembrolizumab + platinum- and fluoropyrimidine-based CT is recommended in 1L for patients in performance score (PS) 0-1 with HER-2-negative G/GEJ adenocarcinoma, and PD-L1 CPS ≥5 [43].
- Treatment with nivolumab + platinum- and fluoropyrimidine-based CT is recommended in 1L for patients in PS 0-1 with HER-2-negative esophageal or G/GEJ adenocarcinoma, and PD-L1 CPS ≥5 [43].
- Treatment with tislelizumab + platinum- and fluoropyrimidine-based CT is recommended in 1L for patients in PS 0-1 with HER-2-negative G/GEJ adenocarcinoma, and PD-L1 TAP score ≥5%. It should however be noted that this treatment has not been assessed by the DMC but is recommended by European Medicines Agency (EMA) [43].

Treatment with pembrolizumab in combination with platinum- and fluoropyrimidine-based CT is recommended by the DMC as 1L treatment for patients with locally

advanced, unresectable, or metastatic HER-2-negative G/GEJ adenocarcinoma, with PD-L1 CPS ≥5 [4]. Similarly, treatment with nivolumab in combination with platinum- and fluoropyrimidine-based CT is recommended by the DMC as 1L treatment for patients with unresectable advanced, recurrent, or metastatic G/GEJ adenocarcinoma and PD-L1 expression CPS ≥5 [5]. No Danish data on the prognosis of patients with G/GEJ adenocarcinoma treated with nivolumab plus CT or pembrolizumab plus chemotherapy have been published since the treatments were recommended by the DMC in 2022 and 2024, respectively [4,5]. However, according to data from 2018-2022, the relative 1-year age-standardized survival rate for GC patients, expressed as percentage (95% CI) was 59.8 (57.7-61.9) for men and 61.2 (58.3-64.3) for women, while the 5-year age-standardized relative survival rates, were 29.9 (27.7-32.3) for men and 37.3 (34.2-40.8) for women [6]. If patients with good general health were to experience disease progression during 1L treatment with nivolumab or pembrolizumab, other systemic treatment options are offered [43]:

- Irinotecan monotherapy
- Docetaxel or paclitaxel monotherapy

It is not expected that second-line (2L) treatment will change if tislelizumab were to be implemented as 1L treatment of patients with HER-2-negative G/GEJ adenocarcinoma with PD-L1 TAP score ≥5%.

3.4 The intervention

Table 3. Overview of the intervention

Overview of intervention	Tevimbra®
Indication relevant for the assessment	Tevimbra® (tislelizumab) is used in combination with platinum- and fluoropyrimidine-based chemotherapy, indicated for treatment of 1L treatment of adult patients with G/GEJ adenocarcinomas who are HER-2-negative locally advanced unresectable or metastatic and express PD-L1 with TAP score ≥ 5%.
ATMP	N/A
Method of administration	Tevimbra® (tislelizumab) is for IV use only.
Dosing	The recommended dose of tislelizumab is 200 mg administered by IV infusion, Q3W.
Dosing in the health economic model (including relative dose intensity)	N/A
Should the medicine be administered with other medicines?	Yes, in combination with platinum- and fluoropyromidine-based chemotherapies.
Treatment duration / criteria for end of treatment	Treatment until disease progression or unacceptable toxicity.

Overview of intervention	Tevimbra®
Necessary monitoring, both during administration and during the treatment period	Patients should be monitored for signs and symptoms of infusion-related reactions.
Need for diagnostics or other tests (e.g. companion diagnostics). How are these included in the model?	The assessment of PD-L1 expression confirmed by a validated test is required for tislelizumab and pembrolizumab, however, these tests are not included as this application does not include any model.
Package size(s)	Tevimbra® (tislelizumab) is available as 100 mg concentrate for solution for infusion. Each milliliter of the concentrate for solution for infusion contains 10 mg of tislelizumab. Tevimbra® (tislelizumab) is available in single packs containing one vial.

Sources: **[1,3]**.

3.4.1 Description of ATMP

N/A

3.4.2 The intervention in relation to Danish clinical practice

Tislelizumab plus CT is expected to be equivalent to nivolumab plus CT and pembrolizumab plus CT, offering another treatment option for patients with HER-2-negative locally advanced, unresectable, or metastatic G/GEJ adenocarcinoma with PD-L1 expression. PD-L1 is expressed using different types of scores. The indications of nivolumab and pembrolizumab use CPS while the indication of tislelizumab uses TAP. The Danish clinical guidelines state that all patients eligible for treatment should have PD-L1 expression determined using CPS. As such, TAP is currently not mentioned in the clinical guidelines [43]. TAP, Tumor Area Positivity, is defined by visually aggregating/estimating the area covered by PD-L1-positive tumor cells and tumor-associated immune cells relative to the total tumor area. The TAP and CPS equations are very similar, with two main differences: 1. the TAP numerator includes all immune cells, while the immune cells in the CPS numerator include only lymphocytes and, 2. the TAP denominator is a visual estimation of the tumor area, while the CPS denominator is based on cell counting. The TAP score is as effective as the CPS method in detecting patients with positive PD-L1 expression in tumor and immune cells, but substantially less time-consuming while retaining a high concordance rate with CPS [50]. The concordance of the PD-L1 scoring methods is further described in section 7.1.1.

3.5 Choice of comparator(s)

Both pembrolizumab plus CT and nivolumab plus CT are relevant comparators for tislelizumab plus CT in a Danish setting. These treatments are assessed as equivalent by the DMC [4]. However as this submission concerns the PD-L1 ≥5 population specifically, and as nivolumab plus CT and pembrolizumab plus CT has already been evaluated as

being equivalent, only nivolumab plus CT is included as a comparator as described in Section 6.1.1. This approach was approved by the DMC.

Table 4. Overview of comparator

Overview of comparator	Opdivo (nivolumab)
Generic name	Nivolumab
ATC code	L01FF01
Mechanism of action	Nivolumab is a human immunoglobulin G4 (IgG4) monoclonal antibody (HuMAb), that by binding blocks the PD-1 receptor's interaction with PD-L1 and PD-L2.
Method of administration	Administered every 2-4 weeks intravenously over 30 minutes in combination with chemotherapy. The infusion must be administered through a sterile, non-pyrogenic, low protein binding in-line filter with a pore size of 0.2-1.2 µm.
Dosing	Nivolumab: 240mg every two weeks or 480mg every four weeks per EMA indication. However, the DMC recommends weight-based dosing of 4,5 mg/kg every three weeks. Chemotherapy: the EMA SmPC do not specify the dosing of the concomitant therapy. However, according to DMC oxaliplatin and capecitabin are preferred as platinum- and fluoropyrimidine-based chemotherapies in Danish clinical practice. Oxaliplatin: 130 mg/m^2 IV day 1 every three weeks for up to 6 -9 cycles. Capecitabine: 2.000 mg/m^2 oral day 1 to 14 every three weeks for up to 9 series.
Dosing in the health economic model (including relative dose intensity)	N/A
Should the medicine be administered with other medicines?	Yes, in combination with platinum and fluoropyrimidine-based chemotherapy.
Treatment duration/ criteria for end of treatment	Treatment should be continued until disease progression or unacceptable toxicity in up until 24 months without disease progression.
Need for diagnostics or other tests (i.e. companion diagnostics)	The tumour expression of PD-L1 should be confirmed by a validated test.

Overview of comparator	Opdivo (nivolumab)
Package size(s)	Concentrate for solution for infusion - vials available as: - 40 mg/4 mL - 100 mg/10 mL - 120 mg/12 mL - 240 mg/24 mL

Source: [5,52].

3.6 Cost-effectiveness of the comparators

Both pembrolizumab plus CT and nivolumab plus CT have previously been evaluated by the DMC [4,5] and are assessed to be cost-effective. The DMC has assessed these to be equivalent and has recommended them as 1L treatment of HER-2-negative, locally advanced G/GEJ adenocarcinoma, and the DMC recommends the regions that use the combination with the lowest costs [4].

3.7 Relevant efficacy outcomes

3.7.1 Definition of efficacy outcomes included in the application

The DMC has previously deemed the following outcome measures clinically relevant for patients with HER-2-negative, locally advanced G/GEJ adenocarcinoma: OS, PFS, HRQoL, and safety [4,5]. As such, the relevant outcomes to assess the efficacy of tislelizumab compared to nivolumab and pembrolizumab are OS, PFS, Grade ≥3 TRAEs and HRQoL. The efficacy outcomes deemed relevant for this submission are presented in Table 5.

Table 5. Efficacy outcome measures relevant for the application

Outcome measure	Time point	Definition	How was the measure investigated/method of data collection
OS RATIONALE-305 [44,53] Checkmate 649 [54,55]	**RATIONALE-305:** Median (range) time on follow-up was 11.8 (0.1-33.4) months in PD-L1-positive group and 13.2 (0.1-50.1) months on ITT analysis set. **Checkmate 649:** Up to 17 approximately months up to 42 months.	**RATIONALE-305:** OS was defined as the time from the date of randomization to the date of death due to any cause. **Checkmate 649**: OS was defined as the time from randomization to the time of death, in participants treated with either treatment drug	**RATIONALE-305: N/R** **Checkmate 649: N/R**

Outcome measure	Time point	Definition	How was the measure investigated/method of data collection
PFS RATIONALE-305 [44,53] Checkmate 649 [54,55]	**RATIONALE-305:** Until study completion up to 54 months. Median (range) time on follow-up was 13.2 (0.1-50.1) in PD-L1-positive group and was 13.2 (0.1-50.1) in ITT analysis set. **Checkmate 649:** PFS was assessed every 6 weeks up to 36 months.	**RATIONALE-305:** PFS was defined as the time from the date of randomization to the date of the first objectively documented tumor progression assessed by the investigator according to RECIST v1.1, or death, whichever occurred first. **Checkmate 649:** PFS was defined as the time from randomization to the date of first documented progression or death due to any cause.	**RATIONALE-305:** Assessed by investigator per RECIST v1.1 **Checkmate 649:** Assessed by BICR per RECIST v1.1
HRQoL RATIONALE-305 [44,53] Checkmate 649 [54,55,62]	**RATIONALE-305:** From baseline and at cycles 4 and 6. **Checkmate 649:** At baseline and every 6 weeks, at follow-up visit 1 and 2, and every 3 months thereafter at survival follow-up visits.	**RATIONALE-305:** HRQoL assessment of participant's overall health status. **Checkmate 649:** HRQoL assessment of the impact of treatment on the general health status of patients and impact of treatment on cancer-related QoL.	**RATIONALE-305:** EORTC-QLQ-30, EORTC-QLQ-STO22 and EQ-V**AS**. **Checkmate 649:** EQ-V**AS, EQ-5D-3L** and FACT-Ga.
Grade ≥3 TRAEs RATIONALE-305 [44,53] Checkmate 649 [54,55]	**RATIONALE-305:** From first dose of study drug to 30 days after last dose or the initiation of new oncologic treatment, whichever occurred first, up to the end of study. **Checkmate 649:** Duration of treatment was 6.8 (0.1-57.7) months for intervention	**RATIONALE-305:** Included TRAEs of grade ≥ 3 that were considered by the investigator to be related to the study drug or TRAEs with missing causality **Checkmate 649:** Safety was assessed by occurrence of TRAEs.	**RATIONALE-305:** Assessed by investigator per NCI CTCAE v5.0 **Checkmate 649:** Assessed by investigator per NCI CTCAE v4.0 and Medical Dictionary for Regulatory Activities v25.0.

Outcome measure	Time point	Definition	How was the measure investigated/method of data collection
	group and 4.9 (0.0-55.2) for placebo group.		

Validity of outcomes

As described above, all outcomes included in this submission (OS, PFS, safety and HRQoL) were deemed clinically relevant by the DMC in previous assessments of pembrolizumab and nivolumab [4,5]. PFS was assessed by Response evaluation criteria in solid tumours version 1.1 (RECIST v1.1), a guideline which is commonly used and highly acknowledged [64]. Safety was assessed using National cancer institute common terminology criteria for adverse events, version 5.0 (NCI CTCAE v5.0). HRQoL was measured using different tools including EORTC-QLQ-30, EORTC-QLQ-STO22, and EQ-5D-5L. This submission will focus on EORTC-QLQ-30, EORTC-QLQ-STO22, and EQ-5D-5L data, as the Network meta-analysis (NMA) includes comparison of EORTC-QLQ-30 and EORTC-QLQ-STO22 data between studies, while EQ-5D-5L is preferred by the DMC [65].

4. Health economic analysis (N/A)

4.1 Model structure

4.2 Model features

Table 6. Features of the economic model

Model features	Description	Justification
N/A		

5. Overview of literature

5.1 Literature used for the clinical assessment

A systematic literature review (SLR) was conducted on February 16th, 2024. Using the Ovid® search interface, the following electronic databases were searched: Embase, Ovid medical literature analysis and retrieval system online (MEDLINE®) (including Epub Ahead of Print and In-Process & other non-indexed citations), Ovid MEDLINE® Daily, Cochrane central register of controlled trials (CCRCT), and the Cochrane database of systematic reviews (CDSR). Additional searches of grey literature sources were conducted to maximize the inclusion of all relevant studies. The SLR was updated on September 4th, 2024. In total, the original and updated SLR identified 43 unique RCTs of which 5 were relevant to the Danish setting. The 5 relevant RCTs are presented in Table 7. The original and updated SLRs are described in detail in Appendix H.

Table 7. Relevant literature included in the assessment of efficacy and safety

Reference (Full citation incl. reference number)	Trial name	NCT identifier	Dates of study (Start and expected completion date, data cut-off and expected data cut-offs)	Used in comparison of
Full paper M. Z. Qiu et al. Tislelizumab plus chemotherapy versus placebo plus chemotherapy as first line treatment for advanced gastric or gastro-oesophageal junction adenocarcinoma: RATIONALE-305 randomised, double blind, phase 3 trial, BMJ. 2024 May 28:385:e078876. [44] Data on file: RATIONALE-305 Clinical Study Report [7]	RATIONALE-305	NCT03777657	Start: 31/12/2018 Completion: 27/08/2024 Interim analysis data cut-off (DCO): 08/10/2021 Final analysis DCO: 28/02/2023 Close-out DCO: 20/09/2024	Tislelizumab plus CT vs. CT
Full paper Kang Y, et al. Nivolumab plus chemotherapy versus placebo plus chemotherapy in patients with HER2-negative, untreated, unresectable advanced or recurrent gastric or gastro-oesophageal junction cancer (ATTRACTION-4): a randomised, multicentre, double-blind, placebo-controlled, phase 3 trial. Lancet Onc. 2022 Feb;23(2):234-247. [66]	ATTRACTION-4, Part 2	NCT02746796	Start: NR/03/2016 Completion: 17/11/2021 Interim analysis DCO: 31/10/2018 Final analysis DCO: 31/01/2020 3-year follow-up: 10/05/2021	Nivolumab plus CT vs. CT

Reference (Full citation incl. reference number)	Trial name	NCT identifier	Dates of study (Start and expected completion date, data cut-off and expected data cut-offs)	Used in comparison of
Boku N, et al. Nivolumab plus chemotherapy in patients with HER2-negative, previously untreated, unresectable, advanced, or recurrent gastric/gastroesophageal junction cancer: 3-year follow-up of the ATTRACTION-4 randomized, double-blind, placebo-controlled, phase 3 trial. Gastric Cancer. 2024 Nov;27(6):1287-1301. [60]				
Abstract Shitara K, Moehler MH, Ajani JA, Shen L, Garrido M et al. (2024) Nivolumab (NIVO) + chemotherapy (chemo) vs chemo as first-line (1L) treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): 4 year (yr) follow-up of CheckMate 649. Journal of Clinical Oncology 42 (3_suppl): 306-306[67] Full paper Janjigian Y, et al. First-Line Nivolumab Plus Chemotherapy for Advanced	CheckMate-649	NCT02872116	Start: 12/10/2016 Completion: 06/06/2024	Nivolumab plus CT vs. CT

Reference (Full citation incl. reference number)	Trial name	NCT identifier	Dates of study (Start and expected completion date, data cut-off and expected data cut-offs)	Used in comparison of
Gastric, Gastroesophageal Junction, and Esophageal Adenocarcinoma: 3-Year Follow-Up of the Phase III Checkmate 649 Trial. Journal of Clinical Oncology. 2024 Jun 10;42(17):2012-2020. [54] Full paper Moehler M, et al. Health-Related Quality of Life With Nivolumab Plus Chemotherapy Versus Chemotherapy in Patients With Advanced Gastric/Gastroesophageal Junction Cancer or Esophageal Adenocarcinoma From ChechMate 649. Journal of Clinical Oncology. 2023 Dec 10;41(35):5388-5399. [62]				
Full paper Shitara K, et al. Efficacy and Safety of Pembrolizumab or Pembrolizumab Plus Chemotherapy vs Chemotherapy Alone for Patients With First-line, Advanced Gastric Cancer: The KEYNOTE-062 Phase 3 Randomized Clinical Trial. JAMA	KEYNOTE-062	NCT02494583	Start: 31/07/2015 Completion: 06/06/2022	Pembrolizumab plus CT vs. CT

Reference (Full citation incl. reference number)	Trial name	NCT identifier	Dates of study (Start and expected completion date, data cut-off and expected data cut-offs)	Used in comparison of
Oncology. 2020 Oct 1;6(10):1571-1580. [56] Full paper Van Cutsem E, et al. Quality of life with first-line pembrolizumab for PD-L1-positive advanced gastric/gastroesophageal junction adenocarcinoma: results from the randomized phase III KEYNOTE-062 study. ESMO Open. 2021 Aug 7;6(4):100189. [63] Abstract Wainberg Z, et al. Pembrolizumab with or without chemotherapy versus chemotherapy alone for patients with PD-L1-positive advanced gastric or gastroesophageal junction adenocarcinoma: Update from the phase 3 KEYNOTE-062 trial. Journal of Clinical Oncology. 2022 Jan 40.4 suppl.243. [68]				
Full paper Rha S, et al. Pembrolizumab plus chemotherapy versus placebo plus chemotherapy for HER2-negative advanced gastric cancer	KEYNOTE-859	NCT03675737	Start: 08/11/2018 Completion: 03/03/2025	Pembrolizumab plus CT vs. CT

Reference (Full citation incl. reference number)	Trial name	NCT identifier	Dates of study (Start and expected completion date, data cut-off and expected data cut-offs)	Used in comparison of
(KEYNOTE-859): a multicentre, randomized, double-blinded, phase 3 trial. Lancet Oncology. 2023 Nov;24(11):1181-1195. [59]				

5.2 Literature used for the assessment of health-related quality of life

Literature regarding HRQoL data was identified through the clinical SLR, hence an SLR specific for HRQoL was not conducted.

Table 8. Relevant literature included for (documentation of) health-related quality of life (See section 10)

Reference (Full citation incl. reference number)	Health state/Disutility	Reference to where in the application the data is described/applied
N/A	N/A	N/A

5.3 Literature used for inputs for the health economic model

N/A

Table 9. Relevant literature used for input to the health economic model

Reference (Full citation incl. reference number)	Input/estimate	Method of identification	Reference to where in the application the data is described/applied
N/A	N/A	N/A	N/A

6. Efficacy

6.1 Efficacy of tislelizumab plus chemotherapy compared to nivolumab plus chemotherapy and pembrolizumab plus chemotherapy for 1L treatment of adult patients with HER-2-negative locally advanced unresectable or metastatic G/GEJ adenocarcinoma whose tumours express PD-L1 with a TAP score ≥ 5%

6.1.1 Relevant studies

For efficacy analysis in this submission, the population of interest was PD-L1 expression ≥5 (TAP/CPS) populations in the relevant studies RATIONALE-305 and CheckMate 649. All studies reporting on the efficacy of pembrolizumab were excluded from the analysis and application, as nivolumab studies were deemed sufficient for estimating the comparative efficacy of tislelizumab, as agreed upon with the DMC. The studies KEYNOTE-859 and KEYNOTE-062 reported on efficacy of pembrolizumab, and will not be discussed further. The ATTRACTION 4 Part 2 study did not report results for PD-L1 ≥5 populations and was therefore also excluded from the efficacy comparison. Pre-specified subgroup analyses for Rest of the World (ROW) (non-Asia) and ROW (non-Asia) with PD-L1 expression ≥5 subpopulations in RATIONALE-305 and CheckMate 649 are presented in Appendix L.

Table 10. Overview of study design for studies included in the comparison

Trial name, NCT-number (reference)	Study design	Study duration	Patient population	Intervention	Comparator	Outcomes and follow-up time
RATIONALE-305 NCT03777657 [44,53]	Global, randomized (1:1), double-blind, placebo-controlled, phase III study that assessed the efficacy and safety of 1L treatment with either tislelizumab plus standard ICC doublet or placebo plus ICC doublet	The trial was initiated on December 13, 2018, with final analysis (DCO February 28, 2023), and close-out analysis (DCO September 20, 2024).	Patients aged 18 years or older with HER-2-negative, locally advanced, unresectable or metastatic G/GEJ adenocarcinoma, regardless of PD-L1 status, who have not received prior systemic anticancer therapy for advanced disease.	**Initial cycles up to 6 treatment cycles:** Tislelizumab 200mg IV, Day 1, Q3W + ICC doublet. Doublet A: Oxaliplatin 130mg/m^2 IV, Day 1 + Capecitabine 1000 mg/m^2 orally b.i.d. for consecutive 14 days, repeated Q3W. Doublet B: Cisplatin 80 mg/m^2 IV, Day 1 + 5-FU 800 mg/m^2/day IV continuous infusion over 24 hours daily on Day 1-5, repeated Q3W. **Cycle 7 and beyond:**	Initial cycles up to 6 treatment cycles: Placebo + CT with ICC doublet. Doublet A: As described in intervention. Doublet B: As described in intervention. Cycle 7 and beyond: Placebo + Capecitabine 1000mg/m^2 orally b.i.d. for consecutive 14 days, repeat Q3W.	**Primary Outcomes:** OS in the PD-L1-positive and ITT analysis set defined as the time from the date of randomization to the date of death due to any cause (Time frame: up to 43 months). **Secondary Outcomes:** PFS in the PD-L1-positive and ITT analysis set assessed by investigators defined as the time from the date of randomization to the date of the first objectively documented tumour progression, assessed by investigators per RECIST v1.1, or death, whichever occurs first (Time frame: up to 27 months.) HRQoL assessed change from baseline in EORTC QLQ-STO22, EORTC QLQ-C30, and EQ-5D-5L scores (Time frame: up to 43 months). Safety and tolerability assessed based on the incidence and severity of AEs per NCI CTCAE v5.0 (Time frame: up to 43 months).

Trial name, NCT-number (reference)	Study design	Study duration	Patient population	Intervention	Comparator	Outcomes and follow-up time
				Tislelizumab 200mg IV Day 1 Q3W + capecitabine 1000mg/m^2 orally b.i.d. for consecutive 14 days repeated Q3W.		
CheckMate 649 NCT02872116 [54,55,67]	Randomized, open-label, multicenter, phase III trial that assessed the efficacy and safety of 1L treatment with nivolumab-plus-CT, nivolumab-plus-ipilimumab (not relevant for this submission), or CT.	The trial was initiated on October 12, 2016, with study completion on June 6, 2024.	Adults with previously untreated, unresectable, advanced, or metastatic GC/GEJC/EAC were enrolled, regardless of PD-L1 expression. HER-2-positive patients were excluded.	Nivolumab (360 mg Q3W or 240 mg every 2 weeks) + ICC. XELOX: capecitabine 1000 mg/m^2 b.i.d., days 1–14 and oxaliplatin 130 mg/m^2, day 1, Q3W. FOLFOX: leucovorin 400 mg/m^2, day 1, fluorouracil 400 mg/m^2, day 1 and 1200 mg/m^2, days 1–	ICC alone. XELOX: capecitabine 1000 mg/m^2 b.i.d., days 1–14 and oxaliplatin 130 mg/m^2, day 1, Q3W. FOLFOX: leucovorin 400 mg/m^2, day 1, fluorouracil 400 mg/m^2, day 1 and 1200 mg/m^2, days 1–2, and oxaliplatin 85 mg/m^2, day 1, every 2 weeks.	**Primary Outcomes:** OS by BICR per RECIST v1.1, evaluated in patients with PD-L1 CPS ≥5, defined as time from randomization to death (Time frame: From the date of randomization up to the date of death, up to approximately 17 month). PFS by BICR per RECIST v1.1, evaluated in patients with PD-L1 CPS ≥5, defined as time from randomization to the date of first documented tumour progression or death (Time frame: From randomization to the date of the first documented PD per BICR or death due to any cause (up to approximately 10 months)). **Secondary Outcomes:** OS in patients with PD-L1 CPS ≥1 and all randomized patients (Time frame: From the date of randomization up to the date of death, up to approximately 17 month).

Trial name, NCT-number (reference)	Study design	Study duration	Patient population	Intervention	Comparator	Outcomes and follow-up time
				2, and oxaliplatin 85 mg/m^2, day 1, every 2 weeks.		BICR-assessed PFS at different PD-L1 CPS cutoffs and in all randomized patients (Time frame: From randomization to the date of the first documented PD per BICR or death due to any cause (up to approximately 10 months)). HRQoL assessed by FACT-Ga (Time frame: From randomization to a clinically meaningful decline from baseline in GaCS score). Safety through incidence of TRAEs (Time frame: throughout treatment period and during follow-up).

6.1.2 Comparability of studies

Both trials were randomized, controlled, multicenter, phase III trials. RATIONALE-305, was a double-blind trial, while CheckMate 649 was open-label. Both trials included an immunotherapy treatment arm paired with CT. RATIONALE-305 included a placebo plus a CT arm, while CheckMate 649 included a CT-only arm. CT regimens varied across the trials, with differences noted in dose and dosing schedule. Crossover was not permitted in RATIONALE-305, while the other CheckMate 649 did not report whether crossover was allowed. The follow-up time for OS and PFS varied between studies, ranging from 34.25 months to 49.5 months for OS [44,67,69]. Despite minor differences in trial characteristics noted above, such as blinding, follow-up time, and reporting of crossover, the assessed trials were deemed sufficiently similar to derive reasonable estimates of comparative efficacy via an indirect treatment comparison (ITC), such as an NMA.

6.1.2.1 Comparability of patients across studies

Baseline characteristics for the PD-L1 ≥5 (CPS/TAP) populations in the RATIONALE-305 and CheckMate 649 trials are presented in Table 11. Baseline characteristics for the ITT population are presented in Appendix K.

Table 11. Baseline characteristics of patients in studies included for the comparative analysis of efficacy and safety, PD-L1 ≥5 population

	RATIONALE-305 [7]		CheckMate 649 [54]	
	TIS + CT (N=274), TAP ≥5%	PBO + CT (N=272), TAP ≥5%	NIV + CT (N=473), CPS ≥5	CT (N=473), CPS ≥5
Median Age (range)	61.0 (23.0-83.0)	62.0 (30.0-84.0)	63 (18-88)	62 (23-90)
Sex, n (%)				
Male	193 (70.4)	201 (73.9)	331 (70)	349 (72)
Female	81 (29.6)	71 (26.1)	142 (30)	133 (28)
Race/ethnicity (%)				
Asian	202 (73.7)	201 (73.9)	186 (24)	189 (24)
White	64 (23.4)	62 (22.8)	NR	NR
Other/unknown	1 (0.4)	1 (0.4)	354 (75)*	365 (76)*
Geographical region (%)				
Asia	202 (73.7)	201 (73.9)	117 (25)	111 (23)
North America/Europe	72 (26.3)	71 (26.1)	67 (14)**	70 (15)**
Other	NR	NR	289 (61)†	301 (62)†

	RATIONALE-305 [7]		CheckMate 649 [54]	
	TIS + CT (N=274), TAP ≥5%	PBO + CT (N=272), TAP ≥5%	NIV + CT (N=473), CPS ≥5	CT (N=473), CPS ≥5
ECOG PS (%)				
0	98 (35.8)	86 (31.6)	193 (41)	204 (42)
1	176 (64.2)	186 (68.4)	280 (59)	280 (59)
Disease status (%)				
Locally advanced	NR	NR	16 (3)	20 (4)
Locally recurrent	NR	NR	3 (<1)	1 (<1)
Metastatic	NR	NR	454 (96)	461 (96)
Primary tumor location (%)				
Stomach	NR	NR	333 (70)	334 (69)
Gastro-oesophageal junction	NR	NR	84 (18)	86 (18)
Esophageal adenocarcinoma	NR	NR	56 (12)	62 (13)
No. of metastatic sites (%)				
1	NR	NR	99 (21)	96 (20)

	RATIONALE-305 [7]		CheckMate 649 [54]	
	TIS + CT (N=274), TAP ≥5%	PBO + CT (N=272), TAP ≥5%	NIV + CT (N=473), CPS ≥5	CT (N=473), CPS ≥5
≥2	NR	NR	374 (79)	386 (80)
Site of metastases				
Liver	NR	NR	190 (40)	217 (45)
Peritoneum	NR	NR	102 (22)	96 (20)
CNS	NR	NR	1 (<1)	0
Microsatellite instability (MSI) status (%)				
MSI-high	NR	NR	18 (4)	16 (3)
Microsatellite stable (MSS)	NR	NR	424 (90)	423 (88)
Not reported or invalid	NR	NR	31 (7)	43 (9)
Investigator's choice of CT (%)				
Oxaliplatin and capecitabine	NR	NR	231 (49)	223 (48)
FU and leucovorin and oxaliplatin	NR	NR	237 (51)	242 (52)

*Defined as non-Asian **United States and Canada. †Rest of the world. ‡Western Europe, Israel, North America and Australia.

Patient eligibility criteria: Patient eligibility was similar in most respects. Both trials included adult patients with confirmed unresectable, locally advanced, or metastatic G/GEJ adenocarcinoma for 1L treatment, however, CheckMate 649 also included patients with esophageal adenocarcinoma in addition to GC/GEJ patients. Efficacy outcomes and baseline characteristics were reported for all randomized patients and PD-L1 subtypes in both studies. Exclusion criteria varied minimally between trials [44,54].

Baseline characteristics: Age and sex data were similar across trials included. Variation was observed in the proportion of Asian participants by geography. Both trials included patients based in Asia and provided data for both Asian and non-Asian subgroups as well as non-Asian patients with PD-L1 ≥5%. The proportion of Asian patients ranged from 24.5% to 73.9%. Metastatic disease at entry was also similar across trials ranging from 95% to 99% in the ITT population. There was a variation between studies in type of PD-L1 measurement and cut-offs (≥1%, ≥5%, or ≥10%) [44,54].

Type of PD-L1 measure: The threshold and method of reporting PD-1/PD-L1 status varied across trials. In CheckMate 649, PD-L1 was assessed by CPS [54]. RATIONALE-305 used TAP to assess PD-1/PD-L1 expression [44].

Table 12. Overview of PD-L1 expression thresholds and measurements

	RATIONALE-305 [44]	CheckMate 649 [54]
Type of PD-L1 measurement	TAP	CPS
Definition	The area occupied by tumor cells and immune cells that are PD-L1-positive, divided by the tumor area, multiplied by 100%.	The total number of tumor cells and immune cells that are PD-L1-positive, divided by the number of all viable tumor cells, multiplied by 100.
Primary trial PD-L1 cut-off	PD-L1 TAP ≥5%	CPS PD-L1 ≥1%, ≥5%, and ≥10%

6.1.3 Comparability of the study population(s) with Danish patients eligible for treatment

In 2022, the mean age in the Danish population was 72 years for both GEJ adenocarcinomas (range: 31–102) and gastric adenocarcinomas (range: 31–93), while the mean age in RATIONALE-305 was 59.3 years (range: 23.0–86.0). The proportion of male patients was 80.3% for GEJ adenocarcinomas and 59.2% for gastric adenocarcinomas in Denmark, compared to 69.4% in the RATIONALE-305 study population [44,46]. When comparing the study population of RATIONALE-305 with the Danish patient population, a difference is seen in ethnic distribution evaluated by geographical region. A Danish clinical expert has evaluated this difference and concludes that the ethnic difference is not expected to substantially influence the efficacy and safety in the Danish population compared to the population of RATIONALE-305. This conclusion is further supported by results presented in Appendix L.

Table 13. Characteristics in the relevant Danish population and in the health economic model

	Value in Danish population (reference)	Value used in health economic model (reference if relevant)
N/A		

6.1.4 Efficacy – results per RATIONALE-305

RATIONALE-305 was a randomized, double blind, global, phase III clinical trial that assessed the efficacy and safety of 1L treatment with either tislelizumab plus standard ICC doublet or placebo plus ICC doublet for advanced G/GEJ adenocarcinoma [44]. The DCO from February 28, 2023, constitutes the final analysis. Additionally, there was a DCO for an interim analysis on October 8, 2021, and the DCO for the close-out analysis was September 20, 2024. This section will include results from the final analysis (DCO February 28, 2023) and the close-out analysis (DCO September 20, 2024) [7,44]. Data retrieved from the ITT analysis set and the PD-L1-positive analysis set will be presented in the following. Additionally, data from the ITT population and European and North American subpopulation will be presented in Appendix A and Appendix L, respectively.

6.1.4.1 Final Analysis (DCO February 2023)

Minimum study follow-up time (defined as time from the date of the last patient randomized to the DCO) was 24.6 months at the final analysis (DCO February 2023). Median study follow-up duration (defined as time from randomization to DCO, death, or study discontinuation owing to other reasons, whichever came first for all patients) was 13.2 (IQR 7.1-24.6) months at the final analysis. The median duration of exposure to CT was 5.9 (IQR 3.3-11.9) months for tislelizumab (TIS) + CT and 5.7 (IQR 3.0-9.8) months for placebo (PBO) + CT; the median durations of exposure were similar between the two arms [44].

6.1.4.1.1 Overall survival

PD-L1 TAP ≥5% population: In the final analysis, the median OS was 16.4 months [95% CI: 13.6 to 19.1] for TIS + CT versus 12.8 months [95% CI: 12.0 to 14.5] for PBO + CT. In the PD-L1 TAP ≥5% population Cox regression models for both OS and PFS were stratified by region (East Asia versus Europe/North America) and presence of peritoneal metastasis. The stratified HR for mortality was 0.71 [95% CI: 0.58 to 0.86; P = 0.006] for TIS + CT. The TIS + CT arm led to a higher OS rate than the PBO + CT arm, indicating a sustained OS benefit of treatment with TIS + CT in patients with a PD-L1 TAP score ≥5%, as compared to PBO + CT [44]. The median follow-up times by reverse Kaplan-Meier methodology were 32.5 months [95% CI: 30.2 to 35.9] and 32.2 months [95% CI: 29.9 to 34.6] for the TIS + CT arm and the PBO + CT arm, respectively [7]. The Kaplan-Meier plot is presented in Appendix B.

6.1.4.1.2 Progression-free survival

PD-L1 TAP ≥5% population: As of the DCO date February 28, 2023, 162 (59.1%) patients progressed in the TIS + CT arm and 195 (71.7%) in the PBO + CT arm. The median PFS of TIS + CT was 7.2 months [95% CI: 5.8 to 8.4] and 5.9 months [95% CI: 5.6 to 7.0] for the PBO + CT arm (stratified HR = 0.68 [95% CI: 0.56 to 0.83]). The Kaplan-Meier curves began to separate at approximately 9 months in favor of TIS + CT [44], as presented in Appendix B.

6.1.4.2 Close-out data (DCO August 2024)

6.1.4.2.1 Overall survival

PD-L1 TAP ≥5% population: The improvements in OS for TIS + CT versus PBO + CT in patients with a PD-L1 score ≥ 5% were consistent with those reported in the final analysis. Results are presented in Table 14.

Table 14. Overall survival in the PD-L1 TAP ≥5% population (RATIONALE-305, DCO August 2024)

	TIS + CT (n = 274)	PBO + CT (n = 272)
Death, n (%)	[redacted]	[redacted]
Median OS, months (95% CI)	[redacted]	[redacted]
Stratified HR (95% CI) [a]	[redacted]	[redacted]
Survival rate at, % (95% CI)		
6 months	[redacted]	[redacted]
12 months	[redacted]	[redacted]
24 months	[redacted]	[redacted]
48 months	[redacted]	[redacted]
60 months	[redacted]	[redacted]
Median follow-up time, months (95% CI)	[redacted]	[redacted]

[redacted]

Source: All data in the table above has been sourced from an internal CSR[7].

6.1.4.2.2 Progression-free survival

At DCO August 2024, with an additional 18 months of follow-up after final analyses, TIS + CT continued to demonstrate clinical benefits observed across all secondary endpoints in

both the ITT population and the PD-L1 TAP ≥5% population. Results were consistent with those reported in the final analysis. The median PFS associated with TIS + CT was significantly better than with PBO + CT [redacted] and [redacted] respectively; stratified HR = [redacted]]), as seen in the internal, confidential EVD for RATIONALE-305 [7].

6.1.5 Efficacy – results per CheckMate 649

At DCO 27 May, 2021, NIV + CT demonstrated improved OS versus CT in patients with PD-L1 CPS ≥5; median OS was 14.4 months (95% CI: 13.1-16.2) versus 11.1 months (95% CI: 10.0-12.1), respectively. There was a 30% reduction in the risk of death (HR 0.70, 95% CI: 0.61-0.81). A PFS benefit was observed with NIV + CT versus CT in patients with PD-L1 CPS ≥5 (HR 0.70, 95% CI: 0.60–0.81). At 3-year follow-up, with 36.2 months minimum follow-up, for patients with PD-L1 CPS ≥5, the OS HR for NIV + CT versus CT was 0.70 (95% CI: 0.61 to 0.81); 21% versus 10% of patients were alive at 36 months, respectively; the PFS HR was 0.70 (95% CI: 0.60 to 0.81). [54]. At the 48 months minimum follow-up, NIV + CT continued to demonstrate OS and PFS benefit vs CT in patients with PD-L1 CPS ≥5 [67]. Results for the 48-month follow-up are presented in Table 15. No Kaplan-Meier data is available from the 48-month follow-up, hence Kaplan-Meier data for OS and PFS from the 3-year follow-up are presented in Figure 1 and Figure 2.

Table 15. 48-month follow-up results - CheckMate 649

	PD-L1 CPS ≥5	
	NIV + CT (n = 473)	CT (n = 482)
Median OS, months (95% CI)	14.4 (13.1–16.2)	11.1 (10.1–12.1)
HR (95% CI)	0.70 (0.61–0.81)	
48-month OS rate, % (95% CI)	17 (14–21)	8 (6–11)
Median PFS[a], months (95% CI)	8.3 (7.0–9.3)	6.1 (5.6–6.9)
HR (95% CI)	0.71 (0.61–0.82)	

Source: [67].

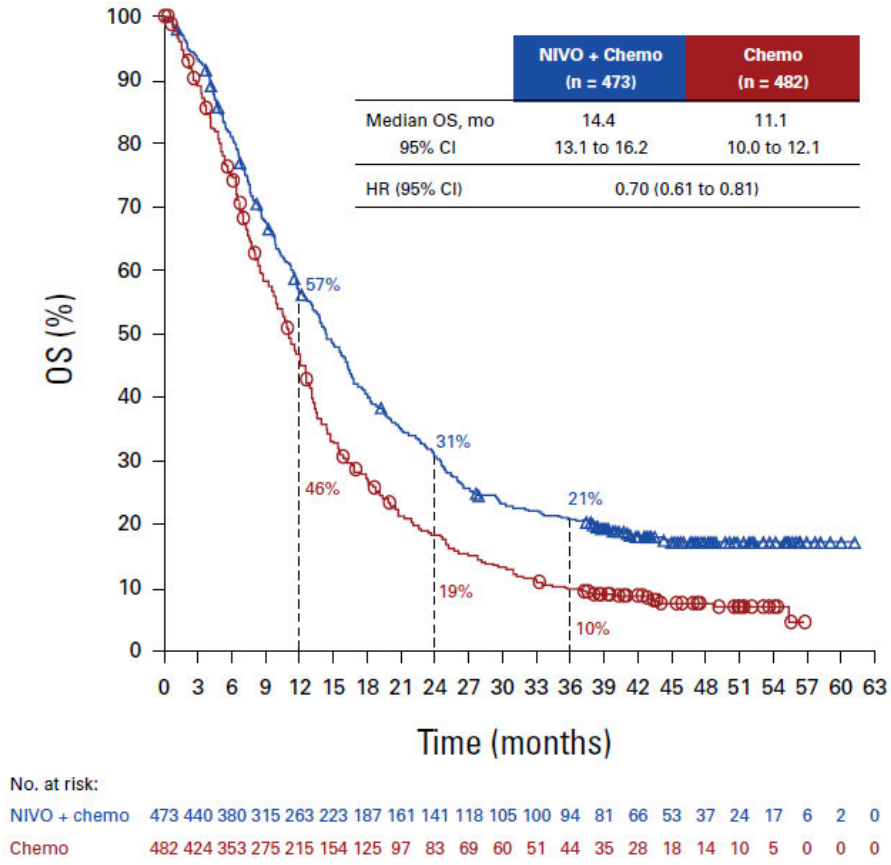


Figure 1. Kaplan-Meier plot for OS, CheckMate 649, 3-year follow-up

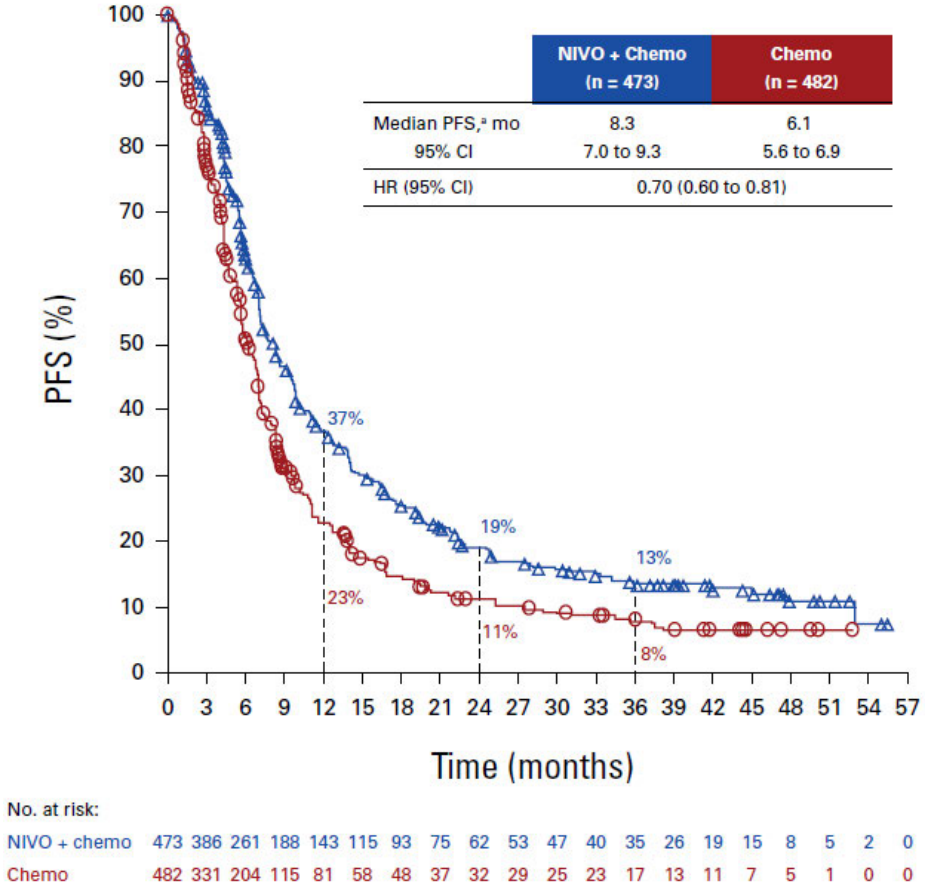


Figure 2. Kaplan-Meier plot for PFS, CheckMate 649, 3-year follow-up

7. Comparative analyses of efficacy

7.1.1 Differences in definitions of outcomes between studies

The outcomes used in this NMA are OS, PFS, and TRAE ≥ Grade 3. OS and PFS were reported in both trials identified in the SLR. For safety results, see section 9. The definition of OS was aligned across trials, where OS was defined as the time from randomization to death due to any cause. Of note, CheckMate 649 did not explicitly mention that death was from "any cause"; however, it was assumed that the definition of OS was equivalent to that of RATIONALE-305. The definition of PFS was similar across the trials, where PFS was defined as the time from randomization to disease progression or death, whichever occurred first. In RATIONALE-305, PFS was assessed via BICR per RECIST v1.1. In CheckMate 649, PFS was assessed by the investigator and a central review committee per RECIST v1.1 [44,69]. Hereby, the trials were considered sufficiently similar to obtain reasonable indirect estimates of efficacy.

PD-L1 measurement types: As previously mentioned in sections 3.2 and 3.4.2, a distinction exists between the trials concerning the type of measurement utilized to

report PD-L1 expression. In RATIONALE-305, PD-L1 status was measured in patients using the TAP score, additionally, exploratory biomarker analysis was performed to analyze the CPS score [44,71]. In the study and analysis conducted by Qiu et al. (2024) [44] and Moehler et al. (2024) [71], the concordance between TAP and CPS was examined for RATIONALE-305. Qiu et al. (2024) found a concordance between TAP scores of ≥5% and CPS of ≥5 in their exploratory biomarker analysis. The PD-L1 status by CPS and TAP in all randomized patients are presented in Table 16 [44]. These findings were corroborated by Moehler et al. (2024) and Liu et al. (2023) [50,71]. Moehler et al. (2024) reported substantial concordance in terms of overall percentage agreement (82%, 95% CI: 80-85) and Cohen's Kappa (0.64, 95% CI: 0.60-0.69) [71]. The study by Liu et al. (2023) concluded that the TAP scoring method is straightforward, significantly less time-consuming, and highly reproducible with a high concordance rate between TAP score and CPS [50].

Table 16. PD-L1 expression status by CPS and TAP score in all randomized patients in RATIONALE-305

Subgroup	TIS + CT arm (n=501)	PBO + CT arm (n=496)	Total (N=997)
PD-L1 status by CPS*†			
CPS ≥5	254 (51)	269 (54)	523 (54)
CPS <5	237 (47)	214 (43)	451 (45)
CPS unevaluable	10 (2)	13 (3)	23 (3)
PD-L1 status by TAP score			
TAP ≥5%	274 (55)	272 (55)	546 (55)
TAP <5%	227 (45)	224 (45)	451 (45)

Data are n (%). *PD-L1 CPS was assessed *post hoc* using the same slide the prespecified TAP score was assessed with (stained with the VENTANA PD-L1 (SP263) platform). †23 samples with evaluable TAP score were found not evaluable for CPS scoring mainly because of insufficient tumour cells, tissue fall off, and staining fading. Source: **[72]**.

The results presented in Table 16 indicate that the proportion of patients with TAP ≥5% is similar to the proportion of patients with CPS ≥5. As such, it is assumed that there is great overlap between patients with TAP ≥5% and CPS ≥5. Moreover, the analysis by Moehler et al. (2024) showed similar OS HRs. OS unstratified HR (95% CI) for TAP ≥5% and CPS ≥5 was 0.72 (0.59-0.88) and 0.73 (0.60-0.89), respectively [71]. These consistent TAP and CPS results indicate that both methods are suitable for clinical PD-L1 expression measurement in patients with G/GEJ adenocarcinoma. This is further supported by a recent study by Klempner et al. (2024) which measured an intraclass correlation coefficient ≥0.92, independently of the PD-L1 cut-off, and found substantial agreement in the PD-L1 expression ≥ 5 group in GC patients [49]. Based on clinical experience and the concordance studies presented in this section, the Danish clinical expert agreed that the TAP and CPS scoring methods are comparable and can be used interchangeably.

7.1.2 Method of synthesis

An NMA was conducted for the comparison of TIS + CT, PEM + CT, and NIV + CT. This section will briefly describe the choice of methods, methodology, and feasibility assessment. The trials included in the NMA (RATIONALE-305, ATTRACTION-4 Part 2, KEYNOTE-062, KEYNOTE-859, and CheckMate 649) were identified through the SLR presented in Section 5.1. The NMA is based on latest available data from the 5 clinical trials, including RATIONALE-305 DCO August 2024 [44], ATTRACTION-4 Part 2 DCO May 2021 [60], CheckMate 649 4-year follow-up [69], KEYNOTE-062 DCO 19 April 2021 [68], and KEYNOTE-859 DCO 3 October 2022 [59]. Trial design characteristics, patient eligibility criteria, baseline patient characteristics, and outcome characteristics were all sources of clinical heterogeneity explored in the feasibility assessment. Network connectivity for NMAs and anchored comparisons (i.e., the presence of a common comparator) were also assessed. A visual representation of the evidence network for all outcomes is provided in Figure 3. The common comparator to all trials is PBO plus CT [7]. As previously described only RATIONALE-305 and CheckMate 649 are relevant for this submission and therefore only results and feasibility assessments for TIS + CT (RATIONALE-305) and NIV + CT (CheckMate 649) will be presented in the following sections.

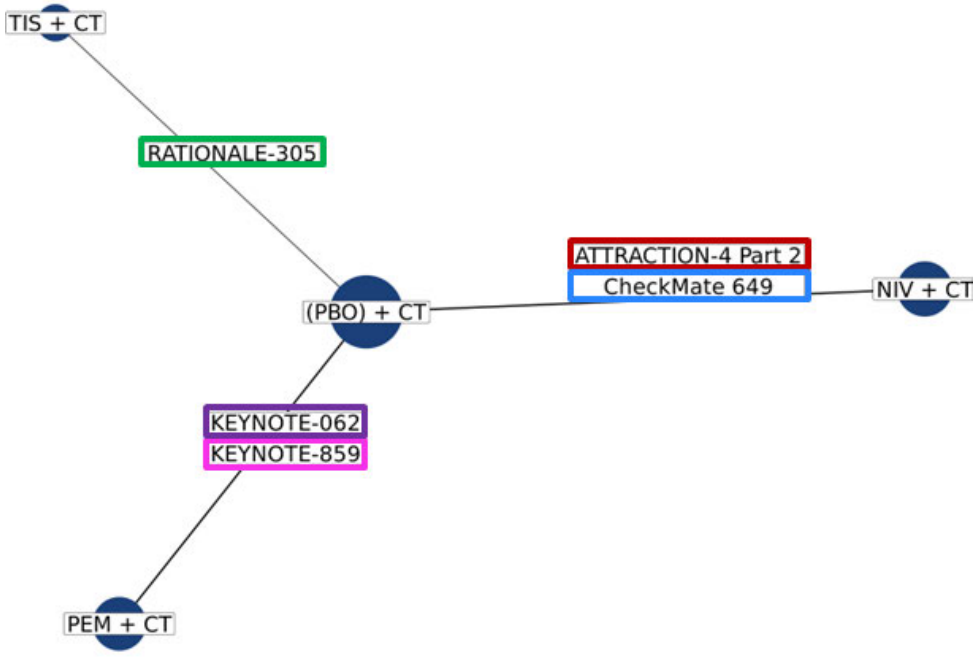


Figure 3. Evidence network for all outcomes
Source: [7].

Outcomes of interest for the feasibility assessment were OS, PFS, and safety outcome Grade ≥3 TRAEs. These were selected based on the key outcomes evaluated in the RATIONALE-305 trial. Following the qualitative assessment of heterogeneity and clinical opinion, it was considered feasible to conduct ITCs between the RATIONALE-305 trial and CheckMate 649. The recommended ITC was an NMA, as (a) the trials were sufficiently similar to be compared without requiring population-level adjustment, (b) there is precedent for conducting NMAs in this patient population, (c) the differences observed

between patient populations could be assessed via subgroup analyses, (d) NMAs allow for comparisons among all relevant treatments in a single analysis, and finally, (e) NMAs are reproducible and accepted by most Health technology assessment (HTA) bodies. NMAs were feasible for the following outcomes: OS, PFS, and grade ≥3 TRAEs. The NMAs were feasible for these outcomes under the assumption that all CT backbone treatments are comparable and can be pooled into a single node. NMAs were conducted for each of the outcomes using a Bayesian framework. Analyses were conducted using ITT populations for each trial, and subgroups analyses were conducted for patients with PD-L1 ≥5% (TAP ≥5% or CPS ≥5) status, and for OS in non-Asian patients with PD-L1 ≥5% (TAP ≥5% or CPS ≥5). For time-to-event outcomes (OS and PFS), fixed-effect contrast-based normal models with vague priors were used, transforming HRs and 95% CIs for analysis. Binomial outcomes (TRAEs) were analyzed using fixed-effect arm-based binomial models, where treatment effects were estimated on the log-odds scale and then transformed back to odds ratios (ORs) and 95% CIs for presentation. For continuous outcomes (HRQoL), fixed-effect contrast-based normal models were used, presenting the mean difference and 95% CIs between treatments. KM curves, estimated median survival, and estimated survival rates are not presented, as these have not been calculated in the NMA [7]. Proportional hazards (PH) assumption for OS and PFS between PD-L1 inhibitors included in the base case analysis was assessed via visual inspection of log-cumulative hazard plots, visual inspection of Schoenfeld residuals plots, and performance of the Grambsch-Therneau test. When considering data from the final DCO for RATIONALE-305, there were no clear violations of the PH assumption for OS among PD-L1 inhibitors. There were also no clear violations of the PH assumption for PFS among PD-L1 inhibitors, except in comparisons involving NIV + CT, where p-values for the Grambsch-Therneau test were <0.05 and patterns suggestive of violation were observed in the Schoenfeld residual plots. This indicates that the HR might not represent the true proportionality of hazard rates across time for PFS between the two treatments. Cumulative hazard log plots and Schoenfeld residual plots with Grambsch-Therneau p-values for OS are presented in Figure 8 and Figure 9, respectively, and for PFS in Figure 10 and Figure 11, respectively. As presented in Section 6.1.4, results for OS and PFS from the RATIONALE-305 close-out DCO are consistent with results from the final DCO. Thus, it was assumed that PH assumptions would not change between the primary and close-out DCOs, and the PH assumptions were not evaluated again for the ITT population based on the close-out DCO [7]. PH assumptions for OS and PFS between treatments were assessed between TIS + CT (RATIONALE-305) vs. NIV + CT (CheckMate 649) in the PD-L1 ≥5% subgroup. When considering data from the close-out DCO for RATIONALE-305, there was no evidence of PH violation (i.e., p-value > 0.05 and parallel series on the log-cumulative hazard plots). For PFS, there was some evidence of PH violation based on the p-value (<0.05) and crossing-over in the log-cumulative hazard plot, and thus, the PFS comparative results of TIS + CT vs. NIV + CT in this subgroup should be interpreted with caution. Cumulative hazard log plots and Schoenfeld residual plots with Grambsch-Therneau p values for OS are presented in Figure 12 and Figure 13, respectively, and for PFS in Figure 14 and Figure 15, respectively [7].

7.1.3 Results from the comparative analysis

ITT population: Results of the NMA are presented in Table 17 for the ITT population. As PEM + CT and NIV + CT were previously deemed equivalent by the DMC, results of the comparison of these are not presented in this submission [4]. Absolute results, estimated median survival, and survival rates were not calculated in the NMA. Therefore, these are not presented here.

Table 17. Results from the comparative analysis of TIS + CT vs. NIV + CT for ITT

Outcome measure	TIS + CT (N=501)	NIV + CT (N=1151)	Result
OS	[redacted]	[redacted]	[redacted]
PFS	[redacted]	[redacted]	[redacted]

Note: HR > 1 indicates TIS + CT has greater hazard than the comparator therapy. HR < 1 indicates TIS + CT has a lesser hazard than the comparator therapy. Bold font indicates statistical significance at the 0.05 level. All table data has been sourced from an internal NMA report [7].

PD-L1 ≥5 subgroup analysis: To support the indication of tislelizumab, subgroup analyses based on PD-L1 status were conducted for a cutoff of PD-L1 5% (TAP ≥5% or CPS ≥5). Based on concordance studies of TAP and CPS described in Section 7.1.1, it was assumed that TAP ≥5% was equivalent to CPS ≥5 [44,49,71]. Where more than one measure of PD-L1 was provided by a trial, the order of preference for selecting a measure for analysis was TAP > CPS, based on TAP as the primary PD-L1 measurement for the RATIONALE-305 trial. The results of the PD-L1 ≥5% subgroup analyses for OS and PFS are presented in Table 18 [7].

Table 18. Results from the comparative analysis of TIS + CT vs NIV + CT for PD-L1 ≥5%

Outcome measure	TIS + CT (N=274)	NIV + CT (N=473)	Result
OS	[redacted]	[redacted]	[redacted]
PFS	[redacted]	[redacted]	[redacted]

*Only utilized data from one of the listed comparator trials due to lack of data. This may account for differences in results. Note: HR > 1 indicates TIS + CT has greater hazard than the comparator therapy. HR < 1 indicates TIS + CT has a lesser hazard than the comparator therapy. Bold font indicates statistical significance at the 0.05 level. All table data has been sourced from an internal NMA report [7].

7.1.4 Efficacy – results per OS

ITT population: TIS + CT performed similarly to NIV + CT ([redacted]). No statistically significant differences were observed between active treatments. Surface Area Under the Cumulative Ranking Curve (SUCRA) values and probability best values are presented in Table 19. Aligned with the league table, TIS + CT was associated with a SUCRA value of [redacted] [7].

Table 19. Summary of SUCRA values from the fixed-effects NMA for OS in ITT

Treatment Arm	SUCRA (%)	Probability Best (%)
TIS + CT	[redacted]	[redacted]
NIV + CT	[redacted]	[redacted]

Source: All table data has been sourced from an internal NMA report [7].

PD-L1 ≥5% subgroup: TIS + CT performed similarly to NIV + CT ([redacted]) in the PD-L1 ≥5% subgroup. No statistically significant differences were observed between active treatments. SUCRA values and probability best values are presented in Table 20. Aligned with the league table, TIS + CT was associated with a SUCRA value of [redacted] [7].

Table 20. Summary of SUCRA values from the fixed-effects NMA for OS in PD-L1 ≥5% subgroup

Treatment Arm	SUCRA (%)	Probability Best (%)
NIV + CT	[redacted]	[redacted]
TIS + CT	[redacted]	[redacted]

Source: All table data has been sourced from an internal NMA report [7].

7.1.5 Efficacy – results per PFS

ITT population: TIS + CT performed similarly to NIV + CT ([redacted]). No statistically significant differences were observed between active treatments. SUCRA values and probability best values are presented in Table 21. Aligned with the league table, TIS + CT was associated with a SUCRA value of [redacted] [7].

Table 21. Summary of SUCRA values from the fixed-effects NMA for PFS in ITT

Treatment Arm	SUCRA (%)	Probability Best (%)
NIV + CT	[redacted]	[redacted]
TIS + CT	[redacted]	[redacted]

Source: All table data has been sourced from an internal NMA report [7].

PD-L1 ≥5 subgroup: TIS + CT performed similarly to NIV + CT ([redacted]). No statistically significant differences were observed between active treatments. SUCRA values and probability best values are presented in Table 20. Aligned with the league table, TIS + CT was associated with a SUCRA value of [redacted] [7].

Table 22. Summary of SUCRA values from the fixed-effects NMA for PFS in PD-L1 ≥5% subgroup

Treatment Arm	SUCRA (%)	Probability Best (%)
NIV + CT	[redacted]	[redacted]
TIS + CT	[redacted]	[redacted]

Source: All table data has been sourced from an internal NMA report [7].

8. Modelling of efficacy in the health economic analysis

Not applicable.

8.1 Presentation of efficacy data from the clinical documentation used in the model

8.1.1 Extrapolation of efficacy data

8.1.1.1 Extrapolation of [effect measure 1]

Table 23. Summary of assumptions associated with extrapolation of [effect measure]

Method/approach	Description/assumption
N/A	

8.1.1.2 Extrapolation of [effect measure 2]

8.1.2 Calculation of transition probabilities

Table 24. Transitions in the health economic model

Health state (from)	Health state (to)	Description of method	Reference
N/A			

8.2 Presentation of efficacy data from [additional documentation]

8.3 Modelling effects of subsequent treatments

8.4 Other assumptions regarding efficacy in the model

8.5 Overview of modelled average treatment length and time in model health state

Table 25. Estimates in the model

	Modelled average [effect measure] (reference in Excel)	Modelled median [effect measure] (reference in Excel)	Observed median from relevant study
N/A			

Table 26. Overview of modelled average treatment length and time in model health state, undiscounted and not adjusted for half cycle correction (adjust the table according to the model)

Treatment	Treatment length [months]	Health state 1 [months]	Health state 2 [months]
N/A			

9. Safety

9.1 Safety data from the clinical documentation

In RATIONALE-305, safety was assessed in the safety population, defined as all patients who received at least one dose of study treatment, and descriptive statistics were used to analyze all safety data in the safety population. All adverse events (AEs) were graded by NCI CTCAE v5.0. A Treatment-emergent adverse event (TEAE) was defined as an AE that had an onset date or a worsening in severity from baseline (pretreatment) on or after the date of the first dose of study drug, up to 30 days following study drug discontinuation or the initiation of a new anticancer therapy, whichever occurred first. TRAEs included TEAEs that were considered by the investigator to be related to a study drug or had a missing assessment of the causal relationship. A serious adverse event (SAE) is any untoward medical occurrence that results in death, is life-threatening, requires hospitalization or prolongation of existing hospitalization, results in disability/incapacity, is a congenital anomaly/birth defect, or is considered significant by the investigator [7,44]. Definitions of TRAEs and SAEs in CheckMate 649 was similar to RATIONALE-305 [44,54]. Table 27 provides an overview of safety events of the data cut-offs applied in the NMA of the treatments regarding Grade ≥3 TRAEs. These include DCO August 2024 for RATIONALE-305 [7] and 4-year follow-up for CheckMate 649 [54]. However, due to availability of data this section will also present safety data from DCO May 2022 for CheckMate 649 [54]. The median duration of exposure to tislelizumab or placebo was comparable between the two arms at the point of final analysis (DCO: February 28, 2023) (5.9 months [range: 0.1 to 47.0 months] versus 5.7 months [range:

0.3 to 46.9 months]). The median number of treatment cycles was 8.0 in both arms (range 1.0 to 67.0 cycles for tislelizumab and 1.0 to 68.0 cycles for placebo). More patients were exposed to tislelizumab for [redacted] than placebo [redacted] In the PD-L1 ≥5% Safety Analysis Set, the incidence of each AE category and the difference trends between arms were similar to those in the overall Safety Analysis Set**.** As of close-out analysis (DCO August 2024), the safety results after 18 months of follow-up are consistent with those reported at the final analysis (DCO February 2023). SAEs with frequency ≥1% from RATIONALE-305 are presented in Table 28 [7]. In CheckMate 649, at 4-year follow-up, no new safety signals were identified, consistent with the 3-year follow-up (DCO May 2022) [67]. [68]

Table 27. Overview of safety events.

	RATIONALE-305 (DCO August 2024) [7]			CheckMate 649, (DCO May 2022) [54]
	TIS + CT (N=498)	PBO + CT (N=494)	Difference %, (95 % CI)	NIV + CT (N= 782)
Number of adverse events, n	9062*	8211*	NR	NR
Number and proportion of patients with ≥1 adverse events, n (%)	495 (99.4)	486 (98.4)	NR	739 (95)†
Number of serious adverse events, n	343*	265*	NR	NR
Number and proportion of patients with ≥ 1 serious adverse events, n (%)	211 (42.4)	179 (36.2)	NR	176 (23)†
Number of CTCAE grade ≥ 3 events, n	934*	736*	NR	NR
Number and proportion of patients with ≥ 1 CTCAE grade ≥ 3 events, n (%)	347 (69.7)	324 (65.6)	NR	473 (60)†
Number of adverse reactions, n	6591*	6041*	NR	NR
Number and proportion of patients with ≥ 1 adverse reactions, n (%)	483 (97.0)	476 (96.4)	NR	739 (95)†

Number and proportion of patients who had a dose reduction, n (%)	381 (76.5)	375 (75.9)	NR	NR
Number and proportion of patients who discontinue treatment regardless of reason, n (%)	500 (99.8)‡	496 (100.0)‡	NR	NR
Number and proportion of patients who discontinue treatment due to adverse events, n (%)	117 (23.5)	68 (13.8)	NR	331 (42)

*Data from DCO February 2023, as these were not reported for close-out DCO August 2024. †Treatment-related adverse events. ‡It should be noted that this data was collected at last patient last visit with 169 (16.95%) of all patients discontinuing due to other reasons than death. All data for the RATIONALE-305 study in the table above was sourced from CSR's for the DCO of 2023 and 2024 [7].

Table 28. Serious adverse events with an incidence ≥1% by preferred term (RATIONALE-305, DCO August 2023)

Adverse events	Tislelizumab + CT (N=498) n (%)		Placebo + CT (N=494) n(%)	
	Number of patients with adverse events	Number of adverse events	Number of patients with adverse events	Number of adverse events
Adverse event, n (%)				
Patients with at Least One Serious TEAE	[redacted]	[redacted]	[redacted]	[redacted]
Platelet count decreased	[redacted]	[redacted]	[redacted]	[redacted]
Pneumonia	[redacted]	[redacted]	[redacted]	[redacted]
Death	[redacted]	[redacted]	[redacted]	[redacted]
Decreased appetite	[redacted]	[redacted]	[redacted]	[redacted]
Vomiting	[redacted]	[redacted]	[redacted]	[redacted]
Cholangitis	[redacted]	[redacted]	[redacted]	[redacted]
Diarrhoea	[redacted]	[redacted]	[redacted]	[redacted]
Gastric haemorrhage	[redacted]	[redacted]	[redacted]	[redacted]
Gastrointestinal haemorrhage	[redacted]	[redacted]	[redacted]	[redacted]
General physical health deterioration	[redacted]	[redacted]	[redacted]	[redacted]
Pyrexia	[redacted]	[redacted]	[redacted]	[redacted]
Sepsis	[redacted]	[redacted]	[redacted]	[redacted]
Acute kidney injury	[redacted]	[redacted]	[redacted]	[redacted]
Ascites	[redacted]	[redacted]	[redacted]	[redacted]

Adverse events	Tislelizumab + CT (N=498) n (%)		Placebo + CT (N=494) n(%)	
Aspartate aminotransferase increased	[redacted]	[redacted]	[redacted]	[redacted]
Ileus	[redacted]	[redacted]	[redacted]	[redacted]
Immune-mediated hepatitis	[redacted]	[redacted]	[redacted]	[redacted]
Pulmonary embolism	[redacted]	[redacted]	[redacted]	[redacted]
Anaemia	[redacted]	[redacted]	[redacted]	[redacted]
Nausea	[redacted]	[redacted]	[redacted]	[redacted]
Upper gastrointestinal haemorrhage	[redacted]	[redacted]	[redacted]	[redacted]
Obstruction gastric	[redacted]	[redacted]	[redacted]	[redacted]

Source: All data in the table above was sourced from the RATIONALE-305 CSR for the DCO of 2023 [7].

Table 29. Adverse events used in the health economic model

Adverse events	Intervention	Comparator
N/A		

Comparative safety analysis: In the absence of RCTs comparing TIS + CT to NIV + CT, an ITC was conducted for Grade ≥3 TRAEs. This analysis was based on the ITT populations from RATIONALE-305, ATTRACTION-4 Part 2, KEYNOTE-062, and KEYNOTE-859. For a detailed description of the ITC synthesis and method, see Section 7. The results from the comparative safety analysis are presented in Table 30 and showed a significantly lower incidence of grade ≥3 TRAEs was noted for TIS + CT compared to NIV + CT [7].

Table 30. Pairwise comparisons from the fixed-effects NMA for Grade ≥3 TRAE

Outcome measure	TIS + CT (N = 498)	NIV + CT (N = 1,141)	Results OR (95% CI)
Grade ≥3 TRAE	[redacted]	[redacted]	[redacted]

An OR > 1 indicates TIS + CT has a greater risk of Grade ≥3 TRAE than the comparator therapy. An OR < 1 indicates a lower risk of grade ≥3 TRAE in TIS + CT compared to the comparator therapy. Bold font indicates

statistical significance at the 0.05 level. Source: All table data has been sourced from an internal NMA report [7].

SUCRA values and probability best values are presented in Table 31. TIS + CT had the highest SUCRA value of [redacted]

Table 31. Summary of SUCRA values from the fixed-effects NMA for Grade ≥3 TRAE

Treatment Arm	SUCRA (%)	Probability Best (%)
TIS + CT	[redacted]	[redacted]
NIV + CT	[redacted]	[redacted]

Source: All table data has been sourced from an internal NMA report [7].

9.2 Safety data from external literature applied in the health economic model

N/A

Table 32. Adverse events that appear in more than X % of patients

Adverse events	Intervention (N=x)	Comparator (N=x)	Difference, % (95 % CI)
N/A			

10. Documentation of health-related quality of life (HRQoL)

In the following sections, HRQoL data from RATIONALE-305 and CheckMate 649 will be presented. HRQoL was measured by EORTC QLQ-C30 and EORTC QLQ-STO22 in RATIONALE-305 only, while EQ-VAS was measured both in RATIONALE-305 and CheckMate 649. HRQoL was also investigated in the NMA, however no comparison against NIV + CT was possible for the patient population with a TAP score ≥ 5% due to missing data, as EQ-VAS data was only collected in the ITT population of RATIONALE-305. Thus data presented in the following section is based on the ITT population of RATIONALE-305 and the CPS ≥ 5 population of CheckMate 649, as agreed upon with the DMC. [7]

Table 33. Overview of included HRQoL instruments

Measuring instrument	Source	Utilization
EQ-VAS	RATIONALE-305 and CheckMate 649	Clinical effectiveness

10.1 Presentation of the health-related quality of life

10.1.7 Study design and measuring instrument – RATIONALE-305

HRQoL was a secondary endpoint in the RATIONALE-305 study, measured by the three validated patient-reported outcome (PRO) questionnaires: EORTC QLQ-C30, EORTC QLQ-STO22, and EQ-VAS. In this section, HRQoL outcomes in the ITT analysis set at the time of final analysis are presented [7].

10.1.8 Study design and measuring instrument – CheckMate 649

In the CheckMate 649 study, HRQoL was measured by EQ-VAS and the Functional Assessment of Cancer Therapy-Gastric (FACT-Ga). In this submission, only the EQ-VAS results for CheckMate 649 will be presented. PROs were assessed in the overall PRO analysis population including all randomly assigned patients with an evaluable PRO assessment at baseline and at least one post-baseline assessment. Additionally, PROs were assessed in patients with a CPS of ≥5, an evaluable PRO assessment at baseline, and at least one post-baseline assessment (CPS ≥5 PRO analysis population) [62].

10.1.9 Data collection – RATIONALE-305

Patient HRQoL was measured using a validated patient-reported outcome questionnaire. Scores for the EQ-VAS were calculated and summarized for each assessment timepoint completed at baseline, at every cycle through Cycle 6, then every other cycle thereafter until PD, and at end of trial (EOT). Only patients who completed the questionnaire at baseline and had ≥1 post-baseline assessment were included in the analysis. All HRQoL measures were summarized in the ITT Analysis Set. The key clinical cycles were Cycle 4 and Cycle 6, which were selected to represent times to compare short-term and long-term treatment effects in both treatment arms, respectively. The pattern of missing data and completion for EQ-VAS is presented in Table 34. Completion rate is defined as the number of patients who completed the questionnaire divided by total number of patients in study at relevant visits in the relevant treatment arm [7].

Table 34. Pattern of missing data and completion for EQ-VAS – RATIONALE-305, ITT-population

	TIS + CT				PBO + CT			
Time point	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)
	Number of patients at randomization	Number of patients for whom data is missing (% of patients at randomization)	Number of patients "at risk" at time point X	Number of patients who completed (% of patients expected to complete)	Number of patients at randomization	Number of patients for whom data is missing (% of patients at randomization)	Number of patients "at risk" at time point X	Number of patients who completed (% of patients expected to complete)
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								

	TIS + CT				PBO + CT			
Time point	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								
[redacted]								

	TIS + CT				PBO + CT			
Time point	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)
[redacted]								

	TIS + CT				PBO + CT			
Time point	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]

Source: All data in the table above was sourced from the RATIONALE-305 CSR [7].

10.1.10 Data collection – CheckMate 649

HRQoL was assessed at baseline and every 6 weeks thereafter. EQ-5D-3L was also assessed during follow-up visits 1 and 2 and every 3 months thereafter at survival follow-up visits. The statistical analysis for the PRO endpoints was descriptive and did not include hypothesis testing. The pattern of missing data and completion for EuroQol visual analogue scale (EQ VAS) in the CPS ≥5 PRO population is presented in Table 35. Compliance in the overall PRO analysis population was comparable to that of the CPS ≥5 PRO population, as shown in Table 36 [62].

Table 35. Pattern of missing data and completion (CPS ≥5 PRO population)– CheckMate 649

	NIV + CT				PBO + CT			
Time point	**HRQoL population N**	**Missing N (%)**	**Expected to complete N**	**Completion N (%)**	**HRQoL population N**	**Missing N (%)**	**Expected to complete N**	**Completion N (%)**
	Number of patients at randomization	Number of patients for whom data is missing (% of patients at randomization)	Number of patients "at risk" at time point X	Number of patients who completed (% of patients expected to complete)	Number of patients at randomization	Number of patients for whom data is missing (% of patients at randomization)	Number of patients "at risk" at time point X	Number of patients who completed (% of patients expected to complete)
Baseline	422	5 (1.2)	422	417 (98.8)	400	6 (1.5)	400	394 (98.5)
Week 7	422	27 (6.7)	402	375 (93.3)	400	25 (6.7)	372	347 (93.3)
Week 13	422	35 (9.5)	369	334 (90.5)	400	40 (12.7)	314	274 (87.3)
Week 19	422	39 (12.1)	322	283 (87.9)	400	47 (19.1)	246	199 (80.9)
Week 25	422	32 (11.7)	273	241 (88.3)	400	25 (13.4)	186	161 (86.6)
Week 31	422	19 (8.3)	228	209 (91.7)	400	22 (15.1)	146	124 (84.9)
Week 37	422	20 (10.0)	201	181 (90.0)	400	22 (18.8)	117	95 (81.2)
Week 43	422	19 (11.12)	170	151 (88.8)	400	12 (13.3)	90	78 (86.7)
Week 49	422	18 (11.9)	151	133 (88.1)	400	8 (12.3)	65	57 (87.7)

	NIV + CT				PBO + CT			
Time point	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)
Week 55	422	20 (14.9)	134	114 (85.1)	400	6 (9.8)	61	55 (90.2)
Week 61	422	19 (15.4)	123	104 (84.6)	400	5 (10.2)	49	44 (89.8)
Week 67	422	12 (11.2)	107	95 (88.8)	400	6 (14.3)	42	36 (85.7)
Week 73	422	12 (12.8)	94	82 (87.2)	400	4 (11.1)	36	32 (88.9)
Week 79	422	18 (20.7)	87	69 (79.3)	400	3 (10.7)	28	25 (89.3)
Week 85	422	13 (16.5)	79	66 (83.5)	400	3 (11.5)	26	23 (88.5)
Week 91	422	10 (13.9)	72	62 (86.1)	400	3 (12.0)	25	22 (88.0)
Week 97	422	8 (11.8)	68	60 (88.2)	400	2 (9.5)	21	19 (90.5)
Week 103	422	7 (11.9)	59	52 (88.1)	400	2 (10.5)	19	17 (89.5)
Week 109	422	1 (5.3)	19	18 (94.7)	400	2 (11.8)	17	15 (88.2)
Week 115	422	2 (11.1)	18	16 (88.9)	400	1 (6.7)	15	14 (93.3)
Week 121	422	2 (13.3)	15	13 (86.7)	400	2 (14.3)	14	12 (85.7)
Week 127	422	2 (15.4)	13	11 (84.6)	400	1 (7.7)	13	12 (92.3)

	NIV + CT				PBO + CT			
Time point	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)
Week 133	422	2 (20.0)	10	8 (80.0)	400	2 (20.0)	10	8 (80.0)
Week 139	422	1 (12.5)	8	7 (87.5)	400	1 (12.5)	8	7 (87.5)
Week 145	422	0 (0.0)	5	5 (100.0)	400	0 (0.0)	8	8 (100.0)
Week 151	422	0 (0.0)	5	5 (100.0)	400	0 (0.0)	8	8 (100.0)
Week 157	422	0 (0.0)	5	5 (100.0)	400	2 (33.3)	6	4 (66.7)
Week 163	422	0 (0.0)	4	4 (100.0)	400	0 (0.0)	4	4 (100.0)
Week 169	422	0 (0.0)	4	4 (100.0)	400	2 (50.0)	4	2 (50.0)
Week 175	422	0 (0.0)	4	4 (100.0)	400	0 (0.0)	1	1 (100.0)
Week 181	422	0 (0.0)	4	4 (100.0)	400	0 (0.0)	1	1 (100.0)
Week 187	422	0 (0.0)	3	3 (100.0)	400	1 (100.0)	1	0 (0.0)
Week 193	422	0 (0.0)	1	1 (100.0)	400	-	-	-

Source: [62].

Table 36. Pattern of missing data and completion (ITT-population)– CheckMate 649

	NIV + CT				PBO + CT			
Time point	**HRQoL population N**	**Missing N (%)**	**Expected to complete N**	**Completion N (%)**	**HRQoL population N**	**Missing N (%)**	**Expected to complete N**	**Completion N (%)**
	Number of patients at randomization	Number of patients for whom data is missing (% of patients at randomization)	Number of patients "at risk" at time point X	Number of patients who completed (% of patients expected to complete)	Number of patients at randomization	Number of patients for whom data is missing (% of patients at randomization)	Number of patients "at risk" at time point X	Number of patients who completed (% of patients expected to complete)
Baseline	694	9 (1.3)	694	685 (98.7)	666	15 (2.3)	666	651 (97.7)
Week 7	694	46 (6.9)	667	621 (93.1)	666	45 (7.3)	617	572 (92.7)
Week 13	694	69 (11.4)	607	538 (88.6)	666	67 (12.8)	524	457 (87.2)
Week 19	694	63 (11.9)	530	467 (88.1)	666	71 (16.9)	419	348 (83.1)
Week 25	694	55 (12.5)	439	384 (87.5)	666	44 (13.5)	325	281 (86.5)
Week 31	694	38 (10.3)	368	330 (89.7)	666	39 (15.5)	251	212 (84.5)
Week 37	694	35 (11.2)	312	277 (88.8)	666	33 (16.4)	201	168 (83.6)
Week 43	694	34 (13.1)	260	226 (86.9)	666	17 (11.5)	148	131 (88.5)

	NIV + CT				PBO + CT			
Time point	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)
Week 49	694	38 (16.6)	229	191 (83.4)	666	14 (12.2)	112	98 (87.8)
Week 55	694	33 (16.3)	170	203 (83.7)	666	13 (13.5)	96	83 (86.5
Week 61	694	27 (15.0)	180	153 (85.0)	666	11 (14.3)	77	66 (85.7)
Week 67	694	22 (14.0)	157	135 (86.0)	666	6 (9.4)	64	58 (90.6)
Week 73	694	21 (15.2)	138	117 (84.8)	666	6 (10.5)	57	51 (89.5)
Week 79	694	27 (21.6)	125	98 (78.4)	666	3 (6.4)	47	44 (93.6)
Week 85	694	23 (20.7)	111	88 (79.3)	666	3 (7.1)	42	39 (92.9)
Week 91	694	21 (21.0)	100	79 (79.0)	666	3 (7.5)	40	37 (92.5)
Week 97	694	16 (18.2)	88	72 (81.8)	666	2 (5.6)	36	34 (94.4)
Week 103	694	11 (14.7)	75	64 (85.3)	666	4 (13.8)	29	25 (86.2)
Week 109	694	3 (11.1)	27	24 (88.9)	666	4 (15.4)	26	22 (84.6)
Week 115	694	5 (20.0)	25	20 (80.0)	666	1 (4.2)	24	23 (95.8)
Week 121	694	2 (10.5)	19	17 (89.5)	666	2 (10.0)	20	18 (90.0)

	NIV + CT				PBO + CT			
Time point	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)	HRQoL population N	Missing N (%)	Expected to complete N	Completion N (%)
Week 127	694	1 (6.7)	15	14 (93.3)	666	1 (5.6)	18	17 (94.4)
Week 133	694	2 (16.7)	12	10 (83.3)	666	2 (13.3)	15	13 (86.7)
Week 139	694	1 (11.1)	9	8 (88.9)	666	1 (9.1)	11	10 (90.9)
Week 145	694	0 (0.0)	6	6 (100.0)	666	0 (0.0)	10	10 (100.0)
Week 151	694	0 (0.0)	6	6 (100.0)	666	0 (0.0)	10	10 (100.0)
Week 157	694	0 (0.0)	6	6 (100.0)	666	2 (28.6)	7	5 (71.4)
Week 163	694	0 (0.0)	5	5 (100.0)	666	0 (0.0)	5	5 (100.0)
Week 169	694	0 (0.0)	5	5 (100.0)	666	2 (40.0)	5	3 (60.0)
Week 175	694	0 (0.0)	5	5 (100.0	666	0 (0.0)	2	2 (100.0)
Week 181	694	0 (0.0)	5	5 (100.0)	666	0 (0.0)	2	2 (100.0)
Week 187	694	0 (0.0)	4	4 (100.0)	666	1 (50.0)	2	1 (50.0)
Week 193	694	0 (0.0)	2	2 (100.0)	666	0 (0.0)	1	1 (100.0)

Source: [62].

10.1.11 HRQoL results – RATIONALE-305

EQ VAS: TIS + CT led to a smaller decrease in health status according to the VAS score of the EQ-5D compared to PBO + CT. The mean change from baseline in EQ VAS scores at [redacted] was [redacted] in the TIS + CT arm and [redacted] in the PBO + CT arm. At [redacted] the mean score change from baseline was [redacted] and [redacted] respectively. EQ VAS score results are presented in Table 37 and Appendix F [7].

Table 37. HRQoL EQ VAS summary statistics – RATIONALE-305

	Intervention		Comparator		Intervention vs. comparator
	N	Mean (SD)	N	Mean (SD)	Difference (95% CI) p-value
Baseline	465	[redacted]	467	[redacted]	NR
Cycle 4	388	[redacted]	380	[redacted]	NR
Cycle 6	359	[redacted]	339	[redacted]	NR
EOT	303	[redacted]	315	[redacted]	NR

Source: All table data has been sourced from an internal CSR [7].

10.1.12 HRQoL results – CheckMate 649

In the CPS ≥5 PRO analysis population, EQ VAS scores generally improved from baseline at most on-treatment assessments for both treatment arms. LSM changes from baseline favored NIV + CT over PBO + CT as seen in Figure 19. Similar results were observed for the overall PRO analysis population, as seen in Appendix F [62].

10.2 Health state utility values (HSUVs) used in the health economic model

N/A

10.2.1 HSUV calculation

10.2.1.1 Mapping

10.2.2 Disutility calculation

10.2.3 HSUV results

Table 38. Overview of health state utility values [and disutilities]

	Results [95% CI]	Instrument	Tariff (value set) used	Comments
N/A				

10.3 Health state utility values measured in other trials than the clinical trials forming the basis for relative efficacy

N/A

10.3.7 Study design

10.3.8 Data collection

10.3.9 HRQoL Results

10.3.10 HSUV and disutility results

Table 39. Overview of health state utility values [and disutilities]

	Results [95% CI]	Instrument	Tariff (value set) used	Comments
N/A				

Table 40. Overview of literature-based health state utility values

	Results [95% CI]	Instrument	Tariff (value set) used	Comments
N/A				

11. Resource use and associated costs (N/A)

11.1 Medicines - intervention and comparator

Table 41. Medicines used in the model

Medicine	Dose	Relative dose intensity	Frequency	Vial sharing
N/A				

11.2 Medicines– co-administration

11.3 Administration costs

Table 42. Administration costs used in the model

Administration type	Frequency	Unit cost [DKK]	DRG code	Reference
N/A				

11.4 Disease management costs

Table 43. Disease management costs used in the model

Activity	Frequency	Unit cost [DKK]	DRG code	Reference
N/A				

11.5 Costs associated with management of adverse events

Table 44. Cost associated with management of adverse events

	DRG code	Unit cost/DRG tariff
N/A		

11.6 Subsequent treatment costs

Table 45. Medicines of subsequent treatments

Medicine	Dose	Relative dose intensity	Frequency	Vial sharing
N/A				

11.7 Patient costs

Table 46. Patient costs used in the model

Activity	Time spent [minutes, hours, days]
N/A	

11.8 Other costs (e.g. costs for home care nurses, out-patient rehabilitation and palliative care cost)

12. Results (N/A)

12.1 Base case overview

Table 47. Base case overview

Feature	Description
N/A	

12.1.1 Base case results

Table 48. Base case results, discounted estimates

	[Intervention]	[Comparator]	Difference
N/A			

12.2 Sensitivity analyses

12.2.1 Deterministic sensitivity analyses

Table 49. One-way sensitivity analyses results

	Change	Reason / Rational / Source	Incremental cost (DKK)	Incremental benefit (QALYs)	ICER (DKK/QALY)
N/A					

12.2.2 Probabilistic sensitivity analyses

13. Budget impact analysis (N/A)

Number of patients (including assumptions of market share)

Table 50. Number of new patients expected to be treated over the next five-year period if the medicine is introduced (adjusted for market share)

	Year 1	Year 2	Year 3	Year 4	Year 5
N/A					

Budget impact

Table 51. Expected budget impact of recommending the medicine for the indication

	Year 1	Year 2	Year 3	Year 4	Year 5
N/A					

14. List of experts

[redacted]

15. References

1. European Medicines Agency (EMA). Tevimbra [Internet]. 2024. Available from: https://www.ema.europa.eu/en/medicines/human/EPAR/tevimbra

2. European Medicines Agency (EMA). Tevimbra - opinion on variation to marketing authorisation [Internet]. 2024. Available from: https://www.ema.europa.eu/en/medicines/human/variation/tevimbra

3. European Medicines Agency (EMA). SUMMARY OF PRODUCT CHARACTERISTICS (TEVIMBRA) [Internet]. 2025. Available from: https://www.ema.europa.eu/en/documents/product-information/tevimbra-epar-product-information_en.pdf

4. Medicinrådet. Medicinrådets anbefaling vedr. pembrolizumab i kombination med kemoterapi til behandling af HER2-negativ adenokarcinom i mavesæk eller mavemund, Patienter med PD-L1 CPS ≥ 1. 2024.

5. Medicinrådet. Medicinrådets anbefaling vedrørende nivolumab i kombination med kemoterapi til 1. linjebehandling af fremskredent HER2-negativ adenokarcinom i mavesæk, mavemund eller spiserør og PD-L1 CPS ≥ 5. https://filer.medicinraadet.dk/media/y5oatvan/medicinr%C3%A5dets-

anbefaling-vedr-nivo-kemo-til-adenokarcinom-i-maves%C3%A6k-mavemund-eller-spiser%C3%B8r-vers-1-0-x.pdf. 2022.

6. NORDCAN - Association of the Nordic Cancer Registries (Nordcan 2.0). Survival trends - Stomach (1-year and 5-year) [Internet]. 2024 [cited 2024 Feb 4]. Available from: https://nordcan.iarc.fr/en/dataviz/survival?cancers=70&set_scale=0&years_available=1943_2023&years=2018_2023&populations=208&survival=1&sexes=1_2

7. Beigene. Data on file. 2025.

8. Bray F, Laversanne M, Sung H, Ferlay J, Siegel RL, Soerjomataram I, et al. Global cancer statistics 2022: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. CA Cancer J Clin. 2024 May 4;74(3):229–63.

9. Morgan E, Arnold M, Camargo MC, Gini A, Kunzmann AT, Matsuda T, et al. The current and future incidence and mortality of gastric cancer in 185 countries, 2020–40: A population-based modelling study. EClinicalMedicine. 2022 May;47:101404.

10. Zhang Y. Epidemiology of esophageal cancer. World J Gastroenterol. 2013;19(34):5598.

11. Lagergren F, Xie S-H, Mattsson F, Lagergren J. Updated incidence trends in cardia and non-cardia gastric adenocarcinoma in Sweden. Acta Oncol (Madr). 2018 Sep 2;57(9):1173–8.

12. González CA, Sala N, Rokkas T. Gastric Cancer: Epidemiologic Aspects. Helicobacter. 2013 Sep 9;18(s1):34–8.

13. Iqbal N, Iqbal N. Human Epidermal Growth Factor Receptor 2 (HER2) in Cancers: Overexpression and Therapeutic Implications. Mol Biol Int. 2014 Sep 7;2014:1–9.

14. Jaroenlapnopparat A, Bhatia K, Coban S. Inflammation and Gastric Cancer. Diseases. 2022 Jun 22;10(3):35.

15. Satoshi I, Masayuki W, Hideo B. Chronic inflammation and gastrointestinal cancer. J Cancer Metastasis Treat. 2015;1(3):138.

16. Rawla P, Barsouk A. Epidemiology of gastric cancer: global trends, risk factors and prevention. Gastroenterology Review. 2019;14(1):26–38.

17. Nevo Y, Ferri L. Current management of gastric adenocarcinoma: a narrative review. J Gastrointest Oncol. 2023 Aug 31;14(4):1933–48.

18. Hong Y, Feng Y, Sun H, Zhang B, Wu H, Zhu Q, et al. Tislelizumab uniquely binds to the CC' loop of PD-1 with slow-dissociated rate and complete PD-L1 blockage. FEBS Open Bio. 2021 Mar 16;11(3):782–92.

19. Lee SH, Lee HT, Lim H, Kim Y, Park UB, Heo Y-S. Crystal structure of PD-1 in complex with an antibody-drug tislelizumab used in tumor immune checkpoint therapy. Biochem Biophys Res Commun. 2020 Jun;527(1):226–31.

20. Chang AH, Parsonnet J. Role of Bacteria in Oncogenesis. Clin Microbiol Rev. 2010 Oct;23(4):837–57.

21. de Martel C, Georges D, Bray F, Ferlay J, Clifford GM. Global burden of cancer attributable to infections in 2018: a worldwide incidence analysis. Lancet Glob Health. 2020 Feb;8(2):e180–90.

22. Poorolajal J, Moradi L, Mohammadi Y, Cheraghi Z, Gohari-Ensaf F. Risk factors for stomach cancer: a systematic review and meta-analysis. Epidemiol Health. 2020 Feb 2;42:e2020004.

23. Ahmed N. 23 years of the discovery of Helicobacter pylori: Is the debate over? Ann Clin Microbiol Antimicrob. 2005 Dec 31;4(1):17.

24. Tsugane S. Salt, salted food intake, and risk of gastric cancer: Epidemiologic evidence. Cancer Sci. 2005 Jan 13;96(1):1–6.

25. Yang L, Ying X, Liu S, Lyu G, Xu Z, Zhang X, et al. Gastric cancer: Epidemiology, risk factors and prevention strategies. Chinese Journal of Cancer Research. 2020;32(6):695–704.

26. Karimi P, Islami F, Anandasabapathy S, Freedman ND, Kamangar F. Gastric Cancer: Descriptive Epidemiology, Risk Factors, Screening, and Prevention. Cancer Epidemiology, Biomarkers & Prevention. 2014 May 1;23(5):700–13.

27. Uson PLS, Kunze KL, Golafshar MA, Botrus G, Riegert-Johnson D, Boardman L, et al. Germline Cancer Testing in Unselected Patients with Gastric and Esophageal Cancers: A Multi-center Prospective Study. Dig Dis Sci. 2022 Nov 5;67(11):5107–15.

28. Ku GY, Kemel Y, Maron SB, Chou JF, Ravichandran V, Shameer Z, et al. Prevalence of Germline Alterations on Targeted Tumor-Normal Sequencing of Esophagogastric Cancer. JAMA Netw Open. 2021 Jul 12;4(7):e2114753.

29. Hsu A, Zayac AS, Eturi A, Almhanna K. Treatment for metastatic adenocarcinoma of the stomach and gastroesophageal junction: 2020. Ann Transl Med. 2020 Sep;8(17):1109–1109.

30. Lordick F, Carneiro F, Cascinu S, Fleitas T, Haustermans K, Piessen G, et al. Gastric cancer: ESMO Clinical Practice Guideline for diagnosis, treatment and follow-up. Annals of Oncology. 2022 Oct;33(10):1005–20.

31. Maconi G, Manes G, Porro GB. Role of symptoms in diagnosis and outcome of gastric cancer. World J Gastroenterol. 2008;14(8):1149.

32. Bektas DK, Demir S. Anxiety, Depression Levels and Quality of Life in Patients with Gastrointestinal Cancer in Turkey. Asian Pacific Journal of Cancer Prevention. 2016 Mar 7;17(2):723–31.

33. Xiao H, Bertwistle D, Khela K, Middleton-Dalby C, Hall J. Global retrospective analysis of clinician- and patient-reported clinical characteristics and humanistic burden of patients with gastroesophageal cancers on first-line treatment. BMC Cancer. 2023 Feb 23;23(1):186.

34. Chau I, Fuchs CS, Ohtsu A, Barzi A, Liepa AM, Cui ZL, et al. Association of quality of life with disease characteristics and treatment outcomes in patients with advanced gastric cancer: Exploratory analysis of RAINBOW and REGARD phase III trials. Eur J Cancer. 2019 Jan;107:115–23.

35. Ajani JA, D'Amico TA, Bentrem DJ, Chao J, Cooke D, Corvera C, et al. Gastric Cancer, Version 2.2022, NCCN Clinical Practice Guidelines in Oncology. Journal of the National Comprehensive Cancer Network. 2022 Feb;20(2):167–92.

36. DE SOL A, TRASTULLI S, GRASSI V, CORSI A, BARILLARO I, BOCCOLINI A, et al. Requirement for a standardised definition of advanced gastric cancer. Oncol Lett. 2014 Jan;7(1):164–70.

37. López Sala P, Leturia Etxeberria M, Inchausti Iguíñiz E, Astiazaran Rodríguez A, Aguirre Oteiza MI, Zubizarreta Etxaniz M. Gastric adenocarcinoma: A review of the TNM classification system and ways of spreading. Radiología (English Edition). 2023 Jan;65(1):66–80.

38. Bernhardt M, Behrens H-M, Krüger S, Röcken C. Exploration of the Tumour Biological Significance of PCLO in Gastric Cancer: Results from a Large Central European Cohort. Pathobiology. 2024;91(3):187–95.

39. Ji X, Bu Z-D, Yan Y, Li Z-Y, Wu A-W, Zhang L-H, et al. The 8th edition of the American Joint Committee on Cancer tumor-node-metastasis staging system for gastric cancer is superior to the 7th edition: results from a Chinese mono-institutional study of 1663 patients. Gastric Cancer. 2018 Jul 22;21(4):643–52.

40. Kim SG, Seo HS, Lee HH, Song KY, Park CH. Comparison of the Differences in Survival Rates between the 7th and 8th Editions of the AJCC TNM Staging System for Gastric Adenocarcinoma: a Single-Institution Study of 5,507 Patients in Korea. J Gastric Cancer. 2017;17(3):212.

41. Orditura M. Treatment of gastric cancer. World J Gastroenterol. 2014;20(7):1635.

42. Waddingham W, Nieuwenburg SA V, Carlson S, Rodriguez-Justo M, Spaander M, Kuipers EJ, et al. Recent advances in the detection and management of early gastric cancer and its precursors. Frontline Gastroenterol. 2021 Jul;12(4):322–31.

43. Dansk EsophagoGastrisk Cancergruppe (DEGC). Onkologisk behandling af ikke-kurabel cancer i esophagus og ventrikel. 2025 [cited 2025 May 12]; Available

from: https://www.dmcg.dk/siteassets/kliniske-retningslinjer/opdelt-paa-dmcg/esopagus--cardia--og-ventrikelcancer/degc_onk_palliativ_v3.0_admgodk_090425.pdf

44. Qiu M-Z, Oh D-Y, Kato K, Arkenau T, Tabernero J, Correa MC, et al. Tislelizumab plus chemotherapy versus placebo plus chemotherapy as first line treatment for advanced gastric or gastro-oesophageal junction adenocarcinoma: RATIONALE-305 randomised, double blind, phase 3 trial. BMJ. 2024 May 28;e078876.

45. NORDCAN - Association of the Nordic Cancer Registries (Nordcan 2.0). Prevalence - Stomach [Internet]. 2024 [cited 2025 Feb 4]. Available from: https://nordcan.iarc.fr/en/dataviz/prevalence?cancers=70&years_available=1943_2023&surv_period=10&populations=208&sexes=0&years=2018_2023&group_years=0&survival=0&key=total

46. Dansk EsophagoGastrisk Cancer Gruppe database (DEGC). Årsrapport 2022 [Internet]. 2023 Jun [cited 2025 Apr 22]. Available from: https://www.sundk.dk/media/otlf520i/e0e9ab9446a44538bb496c6486fba747.pdf

47. Dansk EsophagoGastrisk Cancer Gruppe database (DEGC). Årsrapport 2021 [Internet]. 2022 Jun [cited 2025 Apr 22]. Available from: https://www.sundk.dk/media/ai0sdxbp/9daa56f09a51442ea2febb00d72da0b2.pdf

48. Shu Y, Wang J, Chen Z, Kim S-B, Lin C-Y, Kato K, et al. Concordance among three programmed death-ligand 1 (PD-L1) scoring methods and their association with clinical outcomes of tislelizumab (TIS) monotherapy in esophageal squamous cell carcinoma (ESCC). Journal of Clinical Oncology. 2024 Jan 20;42(3_suppl):390–390.

49. Klempner SJ, Cowden ES, Cytryn SL, Fassan M, Kawakami H, Shimada H, et al. PD-L1 Immunohistochemistry in Gastric Cancer: Comparison of Combined Positive Score and Tumor Area Positivity Across 28-8, 22C3, and SP263 Assays. JCO Precis Oncol. 2024 Jul;(8).

50. Liu C, Fang F, Kong Y, ElGabry EA. Tumor Area Positivity (TAP) score of programmed death-ligand 1 (PD-L1): a novel visual estimation method for combined tumor cell and immune cell scoring. Diagn Pathol. 2023 Apr 19;18(1):48.

51. European Medicines Agency (EMA). SUMMARY OF PRODUCT CHARACTERISTICS (KEYTRUDA) [Internet]. 2025 [cited 2025 Jul 3]. Available from: https://www.ema.europa.eu/en/documents/product-information/keytruda-epar-product-information_en.pdf

52. European Medicines Agency (EMA). SUMMARY OF PRODUCT CHARACTERISTICS (OPDIVO) [Internet]. 2025 [cited 2025 Jul 3]. Available from:

https://www.ema.europa.eu/en/documents/product-information/opdivo-epar-product-information_en.pdf

53. Clinicaltrials.gov. Tislelizumab in Combination With Chemotherapy as First-Line Treatment in Adults With Inoperable, Locally Advanced or Metastatic Gastric, or Gastroesophageal Junction Carcinoma [Internet]. 2025 [cited 2025 May 14]. Available from: https://clinicaltrials.gov/study/NCT03777657

54. Janjigian YY, Ajani JA, Moehler M, Shen L, Garrido M, Gallardo C, et al. First-Line Nivolumab Plus Chemotherapy for Advanced Gastric, Gastroesophageal Junction, and Esophageal Adenocarcinoma: 3-Year Follow-Up of the Phase III CheckMate 649 Trial. Journal of Clinical Oncology. 2024 Jun 10;42(17):2012–20.

55. Clinicaltrials.gov. Efficacy Study of Nivolumab Plus Ipilimumab or Nivolumab Plus Chemotherapy Against Chemotherapy in Stomach Cancer or Stomach/Esophagus Junction Cancer (CheckMate649). https://clinicaltrials.gov/study/NCT02872116?term=NCT02872116&rank=1. 2024.

56. Shitara K, Van Cutsem E, Bang Y-J, Fuchs C, Wyrwicz L, Lee K-W, et al. Efficacy and Safety of Pembrolizumab or Pembrolizumab Plus Chemotherapy vs Chemotherapy Alone for Patients With First-line, Advanced Gastric Cancer. JAMA Oncol. 2020 Oct 1;6(10):1571.

57. Clinicaltrials.gov. Study of Pembrolizumab (MK-3475) as First-Line Monotherapy and Combination Therapy for Treatment of Advanced Gastric or Gastroesophageal Junction Adenocarcinoma (MK-3475-062/KEYNOTE-062). https://clinicaltrials.gov/study/NCT02494583?term=NCT02494583&rank=1. 2023.

58. Clinicaltrials.gov. Pembrolizumab (MK-3475) Plus Chemotherapy Versus Placebo Plus Chemotherapy in Participants Gastric or Gastroesophageal Junction (GEJ) Adenocarcinoma (MK-3475-859/KEYNOTE-859). https://clinicaltrials.gov/study/NCT03675737?term=NCT03675737&rank=1. 2025.

59. Rha SY, Oh D-Y, Yañez P, Bai Y, Ryu M-H, Lee J, et al. Pembrolizumab plus chemotherapy versus placebo plus chemotherapy for HER2-negative advanced gastric cancer (KEYNOTE-859): a multicentre, randomised, double-blind, phase 3 trial. Lancet Oncol. 2023 Nov;24(11):1181–95.

60. Boku N, Omori T, Shitara K, Sakuramoto S, Yamaguchi K, Kato K, et al. Nivolumab plus chemotherapy in patients with HER2-negative, previously untreated, unresectable, advanced, or recurrent gastric/gastroesophageal junction cancer: 3-year follow-up of the ATTRACTION-4 randomized, double-blind, placebo-controlled, phase 3 trial. Gastric Cancer. 2024 Nov 20;27(6):1287–301.

61. Clinicaltrials.gov. Study of ONO-4538 in Gastric Cancer. https://clinicaltrials.gov/study/NCT02746796?term=NCT02746796&rank=1. 2024.

62. Moehler M, Xiao H, Blum SI, Elimova E, Cella D, Shitara K, et al. Health-Related Quality of Life With Nivolumab Plus Chemotherapy Versus Chemotherapy in Patients With Advanced Gastric/Gastroesophageal Junction Cancer or Esophageal Adenocarcinoma From CheckMate 649. Journal of Clinical Oncology. 2023 Dec 10;41(35):5388–99.

63. Van Cutsem E, Valderrama A, Bang Y-J, Fuchs CS, Shitara K, Janjigian YY, et al. Quality of life with first-line pembrolizumab for PD-L1–positive advanced gastric/gastroesophageal junction adenocarcinoma: results from the randomised phase III KEYNOTE-062 study. ESMO Open. 2021 Aug;6(4):100189.

64. Eisenhauer EA, Therasse P, Bogaerts J, Schwartz LH, Sargent D, Ford R, et al. New response evaluation criteria in solid tumours: Revised RECIST guideline (version 1.1). Eur J Cancer. 2009 Jan;45(2):228–47.

65. The Danish Medicines Council. The Danish Medicines Council methods guide for assessing new pharmaceuticals v1.3 [Internet]. 2023 [cited 2025 Apr 25]. Available from: https://filer.medicinraadet.dk/media/5eibukbr/the-danish-medicines-council-methods-guide-for-assessing-new-pharmaceuticals-version-1-3.pdf

66. Kang Y-K, Chen L-T, Ryu M-H, Oh D-Y, Oh SC, Chung HC, et al. Nivolumab plus chemotherapy versus placebo plus chemotherapy in patients with HER2-negative, untreated, unresectable advanced or recurrent gastric or gastro-oesophageal junction cancer (ATTRACTION-4): a randomised, multicentre, double-blind, placebo-controlled, phase 3 trial. Lancet Oncol. 2022 Feb;23(2):234–47.

67. Shitara K, Moehler MH, Ajani JA, Shen L, Garrido M, Gallardo C, et al. Nivolumab (NIVO) + chemotherapy (chemo) vs chemo as first-line (1L) treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): 4 year (yr) follow-up of CheckMate 649. Journal of Clinical Oncology. 2024 Jan 20;42(3_suppl):306–306.

68. Wainberg ZA, Shitara K, Van Cutsem E, Wyrwicz L, Lee KW, Kudaba I, et al. Pembrolizumab with or without chemotherapy versus chemotherapy alone for patients with PD-L1–positive advanced gastric or gastroesophageal junction adenocarcinoma: Update from the phase 3 KEYNOTE-062 trial. Journal of Clinical Oncology [Internet]. 2022 Apr 24;40(4_suppl):243. Available from: https://doi.org/10.1200/JCO.2022.40.4_suppl.243

69. Shitara K, Ajani JA, Moehler M, Garrido M, Gallardo C, Shen L, et al. Nivolumab plus chemotherapy or ipilimumab in gastro-oesophageal cancer. Nature. 2022 Mar 31;603(7903):942–8.

70. Food and Drug Administration. FDA Briefing Document - Immune checkpoint inhibitors in patients with metastatic or unresectable HER2-negative gastric adenocarcinoma [Internet]. 2024 [cited 2025 Jul 3]. Available from: https://www.fda.gov/media/182138/download

71. Moehler M, Oh D-Y, Kato K, Tabernero J, Cruz-Correa M, Wyrwicz LS, et al. 397MO Tislelizumab (TIS) plus chemotherapy (CT) vs placebo (PBO) plus CT in HER2-negative advanced or metastatic gastric or gastro-esophageal junction adenocarcinoma (GC/GEJC): PD-L1 biomarker analysis from RATIONALE-305. Annals of Oncology. 2024 Jun;35:S160–1.

72. Qiu M-Z, Oh D-Y, Kato K, Arkenau T, Tabernero J, Correa MC, et al. Supplementary appendix: Tislelizumab plus chemotherapy versus placebo plus chemotherapy as first line treatment for advanced gastric or gastro-oesophageal junction adenocarcinoma: RATIONALE-305 randomised, double blind, phase 3 trial. BMJ. 2024 May 28;e078876.

73. Cruz-Correa M, Xu R-H, Moehler MH, Oh D-Y, Kato K, Spigel DR, et al. Tislelizumab (TIS) plus chemotherapy (Chemo) vs placebo (PBO) plus chemo as first-line (1L) treatment of advanced gastric or gastroesophageal junction adenocarcinoma (GC/GEJC): Health-related quality of life (HRQoL) outcomes in the RATIONALE-305 study. Journal of Clinical Oncology. 2024 Jan 20;42(3_suppl):290–290.

74. Patel TH, Cecchini M. Targeted Therapies in Advanced Gastric Cancer. Curr Treat Options Oncol. 2020 Sep 28;21(9):70.

75. Shields A, Coon C, Hao Y, Krohe M, Yaworsky A, Mazar I, et al. Patient-reported outcomes for US oncology labeling: review and discussion of score interpretation and analysis methods. Expert Rev Pharmacoecon Outcomes Res. 2015 Nov 2;15(6):951–9.

76. Dueck AC, Sloan JA. Meeting on the FDA Draft Guidance on Patient-Reported Outcomes. Value in Health. 2007 Nov;10:S64–5.

77. McGowan J, Sampson M, Salzwedel DM, Cogo E, Foerster V, Lefebvre C. PRESS Peer Review of Electronic Search Strategies: 2015 Guideline Statement. J Clin Epidemiol. 2016 Jul;75:40–6.

78. Bormann I. DigitizeIt 2.3.3. Digitizer software—digitize a scanned graph or chart into (x, y) data. 2018.

Appendix A. Main characteristics of studies included

Table 52. Main characteristics of studies included

Trial name: RATIONALE-305	NCT number: NCT03777657
Objective	To evaluate the efficacy and safety of tislelizumab plus CT as 1L treatment for advanced G/GEJ adenocarcinoma compared with placebo plus CT.
Publications – title, author, journal, year	Tislelizumab plus chemotherapy versus placebo plus chemotherapy as first line treatment for advanced gastric or gastro-oesophageal junction adenocarcinoma: RATIONALE-305 randomised, double blind, phase 3 trial. Qiu et al. BMJ 2024
Study type and design	Global, randomized, double-blind, multi-centre Phase III study, patients were randomized in a 1:1 ratio into two treatment arms of either tislelizumab plus ICC or placebo plus ICC. Randomization was stratified according to region. The study was divided into a screening phase, a treatment phase, a safety follow-up phase, and a survival follow-up phase.
Sample size (n)	997
Main inclusion criteria	• Adult patients (≥18 years or according to local regulations, whichever is older) • Histologically confirmed adenocarcinoma • Locally advanced unresectable or metastatic G/GEJ adenocarcinoma • At least one measurable or non-measurable lesion per RECIST v1.1 as determined by investigator assessment • No previous systemic therapy for locally advanced, unresectable or metastatic G/GEJ cancer. NOTE: Patients could have received prior neoadjuvant or adjuvant therapy that was completed and had no recurrence or disease progression for at least 6 months • ECOG PS score of 0 or 1 • Patients were enrolled regardless of PD-L1 expression status
Main exclusion criteria	• Squamous cell or undifferentiated or other histological type G/GEJ adenocarcinoma • HER-2-positive G/GEJ adenocarcinoma • Active leptomeningeal disease or uncontrolled brain metastasis

Trial name: RATIONALE-305	NCT number: NCT03777657
	• Active autoimmune diseases or medical conditions requiring systemic corticosteroids or immunosuppressants • Prior therapy with an anti-PD-1, anti-PD-L1, anti-PD-L2, or any other antibody or drug especially targeting T cell co-stimulation or checkpoint pathways
Intervention	Initial cycles up to 6 treatment cycles: Tislelizumab 200mg IV, Day 1, Q3W + ICC doublet. Doublet A: Oxaliplatin 130mg/m^2 IV, Day 1 + Capecitabine 1000 mg/m2 orally b.i.d. for consecutive 14 days, repeated Q3W. Doublet B: Cisplatin 80 mg/m^2 IV, Day 1 + 5-FU 800 mg/m^2/day IV continuous infusion over 24 hours daily on Day 1-5, repeated Q3W. Cycle 7 and beyond: Tiselizumab 200mg IV Day 1 Q3W + Capecitabine 1000mg/m^2 orally b.i.d. for consecutive 14 days repeated Q3W.
Comparator(s)	Initial cycles up to 6 treatment cycles: Placebo + CT with ICC doublet. Doublet A: Oxaliplatin 130mg/m^2 IV, Day 1 + Capecitabine 1000 mg/m^2 orally b.i.d. for consecutive 14 days, repeated every Q3W. Doublet B: Cisplatin 80 mg/m^2 IV, Day 1 + 5-FU 800 mg/m^2/day IV continuous infusion over 24 hours daily on Day 1-5, repeated Q3W. Cycle 7 and beyond: Placebo + Capecitabine 1000mg/m^2 orally b.i.d. for consecutive 14 days, repeated Q3W.
Follow-up time	As of close-out DCO August 2024, the median follow-up time was 14.1 months (range: 0.1 to 62.2 months) for tislelizumab plus chemotherapy and 12.6 months (range: 0.3 to 59.1 months) for placebo plus CT.
Is the study used in the health economic model?	N/A
Primary, secondary and exploratory endpoints	Endpoints included in this application: The primary endpoint was OS, defined as the time from randomization to death due to any cause, assessed in patients with a PD-L1 TAP score of ≥5% and in all randomized patients (ITT population). Secondary endpoints (assessed by investigators) were PFS; safety and tolerability, assessed based on the incidence and severity of AEs; and HRQoL. Other endpoints: ORR, DoR, DCR, CBR, and TTR were included as secondary endpoints in this study, but was not included in this submission.
Method of analysis	Efficacy analyses were conducted in randomized patients with a PD-L1 TAP score of ≥5% and in all ITT patients; and in the European and North

Trial name: RATIONALE-305	NCT number: NCT03777657
	American subpopulation. All patients were included in the Safety Analysis Set. OS and PFS were analyzed using stratified log-rank test, stratified by region, PD-L1 expression and presence of peritoneal metastases. 95% CIs were calculated using Cox PH regression model. Median and cumulative probabilities of time-to-event endpoints were estimated using the Kaplan-Meier method.
Subgroup analyses	Pre-specified subgroup analyses for the primary endpoint, OS: • Region (Asia, North America/Europe) • Race (Asian, white, other) • Age (median) • Sex (female, male) • ECOG PS(0, 1) • Liver metastasis status (yes/no) • MSI-H/dMMR, MSI-L/MSS/pMMR, unknown • Presence of peritoneal metastasis (yes/no) • ICC () • Prior gastrectomy (yes/no) • Previous adjuvant or neoadjuvant therapy (yes/no) • Disease stage at screening • Number of metastatic sites (0-2, 3 or more) • PD-L1 expression status using TAP score (<5%, ≥5% (in all randomized patients))
Other relevant information	N/A

Source: [44].

[60,66]**Table 53. Main characteristics of CheckMate649**

Trial name: CheckMate649	NCT number: NCT02872116
Objective	To assess the efficacy and safety of 1L treatment with nivolumab-plus-CT, nivolumab-plus-ipilimumab, or CT in adults with previously untreated, unresectable advanced, or metastatic GC/GEJC/EAC were enrolled, regardless of PD-L1 expression. HER-2-positive patients were excluded.

Trial name: CheckMate649	NCT number: NCT02872116
Publications – title, author, journal, year	First-Line Nivolumab Plus Chemotherapy for Advanced Gastric, Gastroesophageal Junction, and Esophageal Adenocarcinoma: 3-Year Follow-Up of the Phase III CheckMate 649 Trial. Janjigian et al. J Clin Oncol 2024.
Study type and design	Randomized, phase III study Patients were randomly assigned 1:1:1 to nivolumab plus CT, nivolumab plus ipilimumab, or CT, and then 1:1 to nivolumab plus CT versus CT once the nivolumab plus ipilimumab arm was closed. Randomization was performed using interactive web response technology with a block size of six and was stratified according to tumour cell PD-L1 status (≥1% vs <1% or indeterminate), region (Asia vs United States and Canada vs ROW), ECOG PS (0 v 1), and type of CT XELOX vs leucovorin plus FOLFOX. Investigators were not blinded to treatment allocation.
Sample size (n)	1,581
Main inclusion criteria	• Patients aged at least 18 with unresectable advanced or metastatic G/GEJ cancer or oesophageal adenocarcinoma. • Patients were eligible regardless of PD-L1 expression. • Patients had ≥1 measurable lesion or evaluable disease per RECIST v1.1, and an ECOG PS of 0 or 1. • Additional eligibility criteria included patients with adequate organ function and ability to provide a fresh or archival tumour sample to determine PD-L1 status. • Previous adjuvant or neoadjuvant CT, radiotherapy, and/or chemoradiotherapy (administered at least 6 months before random assignment) were allowed.
Main exclusion criteria	• Patients with untreated CNS metastases or peripheral neuropathy (above grade 1); active, known, or suspected autoimmune disease; positive test result for hepatitis B or hepatitis C virus; and known history of positive test for HIV or known AIDS. • Previous systemic therapy for metastatic disease. • Patients with known human EGFR2–positive status.
Intervention	Nivolumab (360 mg Q3W or 240 mg Q2W) plus ICC. XELOX: capecitabine 1000 mg/m^2 b.i.d., days 1–14 and oxaliplatin 130 mg/m^2, day 1, Q3W. FOLFOX: leucovorin 400 mg/m^2, day 1, fluorouracil 400 mg/m^2, day 1 and 1200 mg/m^2, days 1–2, and oxaliplatin 85 mg/m^2, day 1, Q2W. (nivolumab plus ipilimumab arm was closed after enrolment)

Trial name: CheckMate649	NCT number: NCT02872116
Comparator(s)	ICC alone. XELOX: capecitabine 1000 mg/m^2 b.i.d., days 1–14 and oxaliplatin 130 mg/m^2, day 1, Q3W. FOLFOX: leucovorin 400 mg/m^2, day 1, fluorouracil 400 mg/m^2, day 1 and 1200 mg/m^2, days 1–2, and oxaliplatin 85 mg/m^2, day 1, Q2W.
Follow-up time	Median follow-up was 47.4 months (range, 36.2-61.5) in the nivolumab plus CT arm and 47.3 months (range, 36.6-61.3) in the CT arm.
Is the study used in the health economic model?	N/A
Primary, secondary and exploratory endpoints	Primary Outcomes: OS by BICR per RECIST v1.1, evaluated in patients with PD-L1 CPS ≥5, defined as time from randomization to death. PFS by BICR per RECIST v1.1, evaluated in patients with PD-L1 CPS ≥5, defined as time from randomization to the date of first documented tumour progression or death. Secondary Outcomes: OS in patients with PD-L1 CPS ≥1 and all randomized patients. BICR-assessed PFS and objective response rate at different PD-L1 CPS cutoffs and in all randomized patients. Secondary outcomes: Safety was assessed by any-grade TRAE. Any TRAE leading to discontinuation was reported.
Method of analysis	OS, PFS, and DoR were assessed using Kaplan-Meier method. Forest plot for OS was made to compare patient characteristics.
Subgroup analyses	Pre-specified subgroup analyses for the primary endpoint, OS • Age (<65, 65 or older) • Sex (female, male) • Region (Asia, United States/Canada, ROW) • ECOG PS (0, 1) • Primary tumour location (GC, GEJC, EAC) • Signet ring cell carcinoma (yes/no) • Liver metastases (yes/no) • Tumour cell PD-L1 Expression (<1%, 1% or greater) • MSI status (MSS, MSI-H) • CT regimen (FOLFOX, XELOX)
Other relevant information	N/A

Source: [54].

[56][59]

Appendix B. Efficacy results per study

Results per RATIONALE-305

Table 54. Results per RATIONALE-305 (DCO February 2023)

Results of RATIONALE-305 (NCT03777657)											
				Estimated absolute difference in effect			Estimated relative difference in effect			Description of methods used for estimation	References
Outcome	Study arm	N	Result (CI)	Difference	95% CI	*P* value	Difference	95% CI	*P* value		
Median OS ITT Set	TIS + CT	501	15.0 (13.6, 16.5) months	2.1	N/A	N/A	HR: 0.80	0.70, 0.92	0.0011	Medians and other quartiles were estimated by Kaplan–Meier method with 95% CIs estimated using the method of Brookmeyer and Crowley.	[7,44]
	PBO + CT	496	12.9 (12.1, 14.1) months								[7,44]
Median OS PD-L1 ≥5% Set	TIS + CT	274	17.2 (13.9, 21.3) months	4.6	N/A	N/A	HR: 0.74	0.59, 0.94	0.006	Same as above.	[7,44]
	PBO + CT	272	12.6 (12.0, 14.4) months								[7,44]

Results of RATIONALE-305 (NCT03777657)											
				Estimated absolute difference in effect			Estimated relative difference in effect			Description of methods used for estimation	References
Outcome	Study arm	N	Result (CI)	Difference	95% CI	*P* value	Difference	95% CI	*P* value		
Median PFS ITT Set	TIS + CT	501	6.9 (5.7, 7.2) months	0.7	N/A	N/A	HR: 0.78	0.67, 0.90	-	Medians and other quartiles were estimated by Kaplan–Meier method with 95% CIs estimated using the method of Brookmeyer and Crowley.	[7,44]
	PBO + CT	496	6.2 (5.6, 6.9) months		N/A	N/A					
Median PFS PD-L1 ≥5% Set	TIS + CT	274	7.2 (5.8 to 8.4) months	1.3	N/A	N/A	HR: 0.69	0.57 to 0.84	-	Same as above.	[7,44]
	PBO + CT	272	5.9 (5.6 to 7.0) months								[7,44]
grade ≥3 TRAEs	TIS + CT	498	268 events (53.8%)	22	N/A	N/A	N/A	N/A	N/A	Safety was assessed in the safety population, defined as all patients who received at least one dose of study drug. All	[7,44]

Results of RATIONALE-305 (NCT03777657)											
				Estimated absolute difference in effect			Estimated relative difference in effect			Description of methods used for estimation	References
Outcome	Study arm	N	Result (CI)	Difference	95% CI	*P* value	Difference	95% CI	*P* value		
										AEs were graded by NCI CTCAE v5.0. TRAEs were considered by the investigator to be related to a study drug or with missing assessment of the causal relationship.	
	PBO + CT	494	246 events (49.8%)								
TRAEs leading to death	TIS + CT	498	6 events (1%)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	[7,44]
	PBO + CT	494	2 events (<1%)								

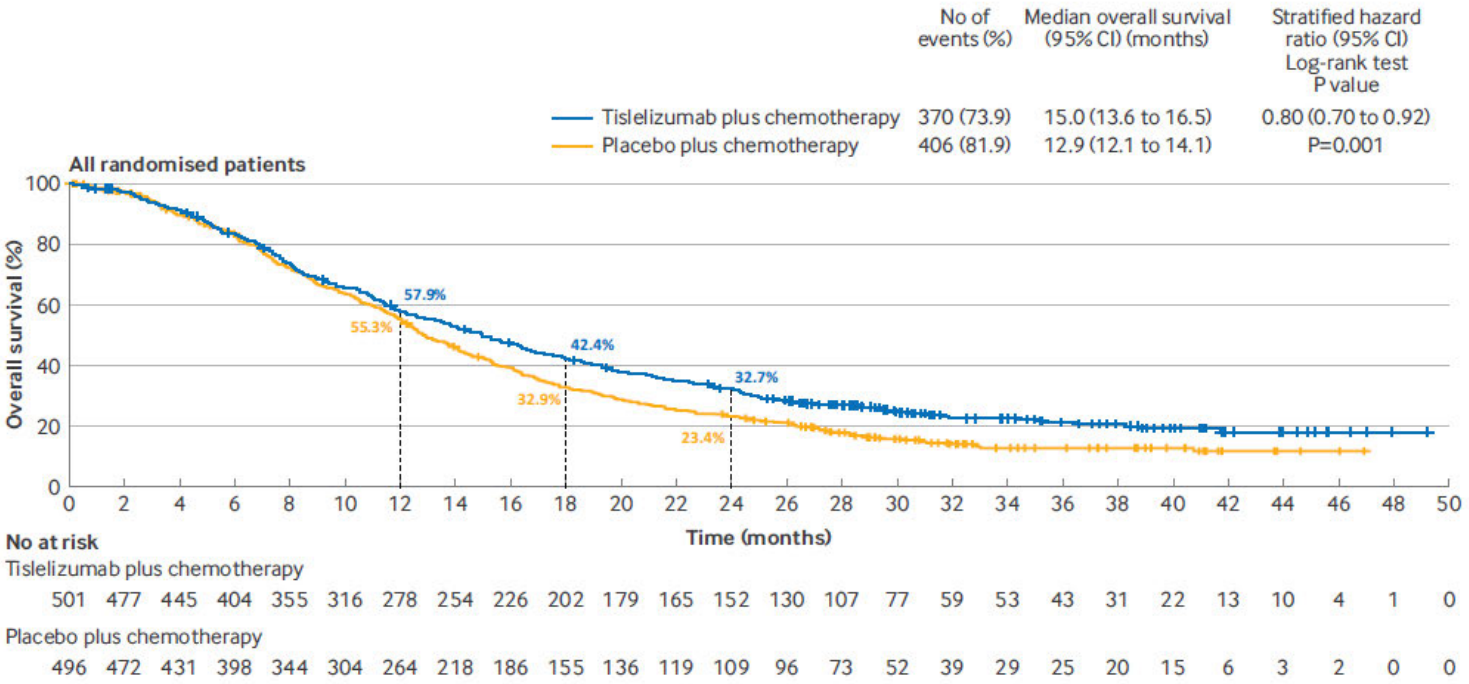


Figure 4. Kaplan-Meier plot of overall survival in ITT population (RATIONALE-305, DCO February 2023)

Log-rank and Cox regression models were stratified by region (Asia *v* other regions), PD-L1 expression (all randomised patients), and presence of peritoneal metastasis. P values are one sided and based on the stratified logrank test. Source: [44].

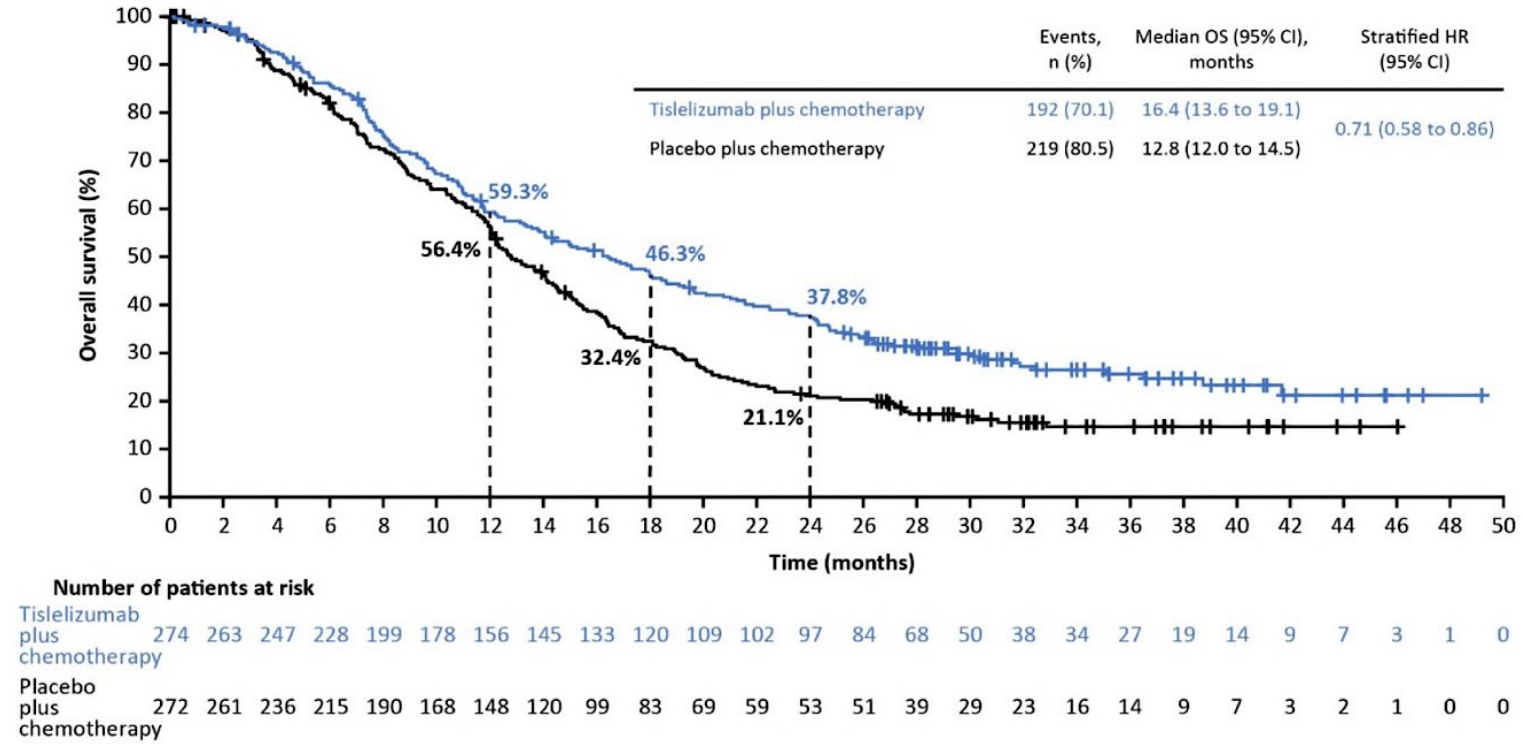


Figure 5. Kaplan–Meier plot of overall survival in the PD-L1 ≥5% population (RATIONALE-305, DCO February 2023)

Log-rank and Cox regression models were stratified by region (Asia *v* other regions) and presence of peritoneal metastasis. Source: [72].

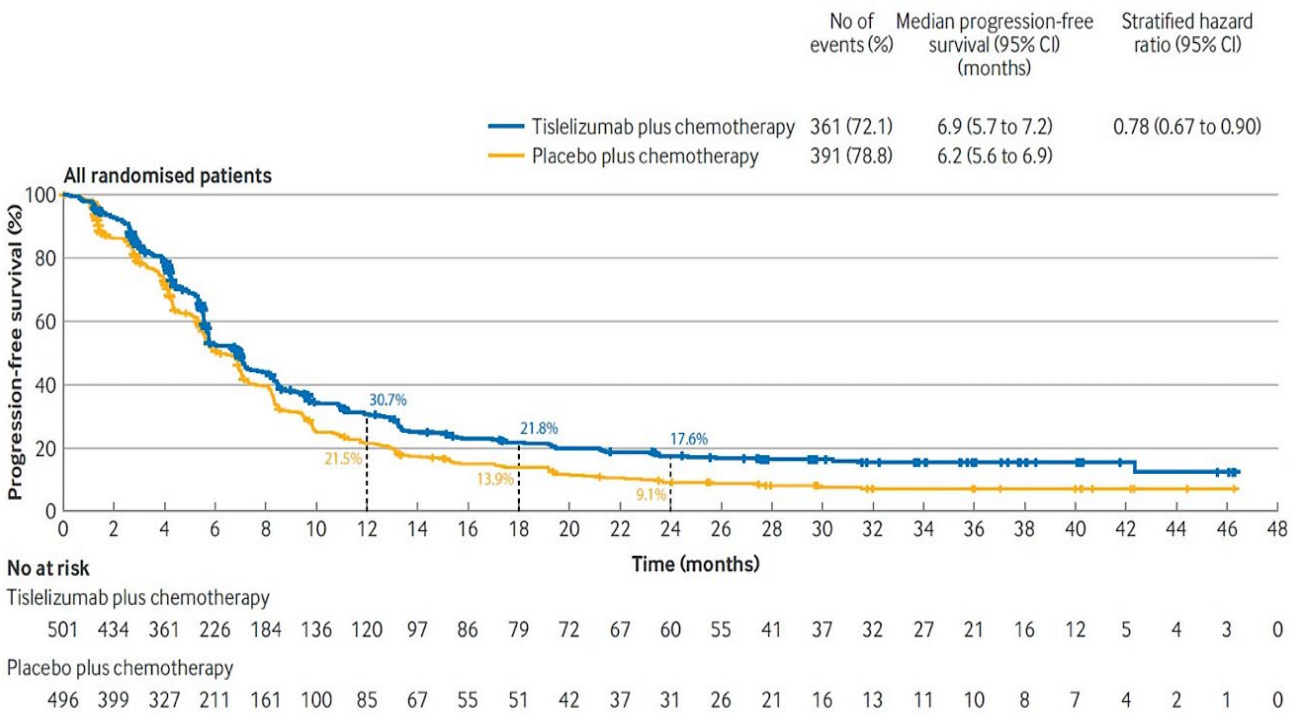


Figure 6. Kaplan-Meier Plot of Progression Free Survival in ITT population (RATIONALE-305, DCO February 2023)

Cox regression model was stratified by regions (East Asia versus others), PD-L1 expression (all randomized patients) and presence of peritoneal metastasis. Source: [72].

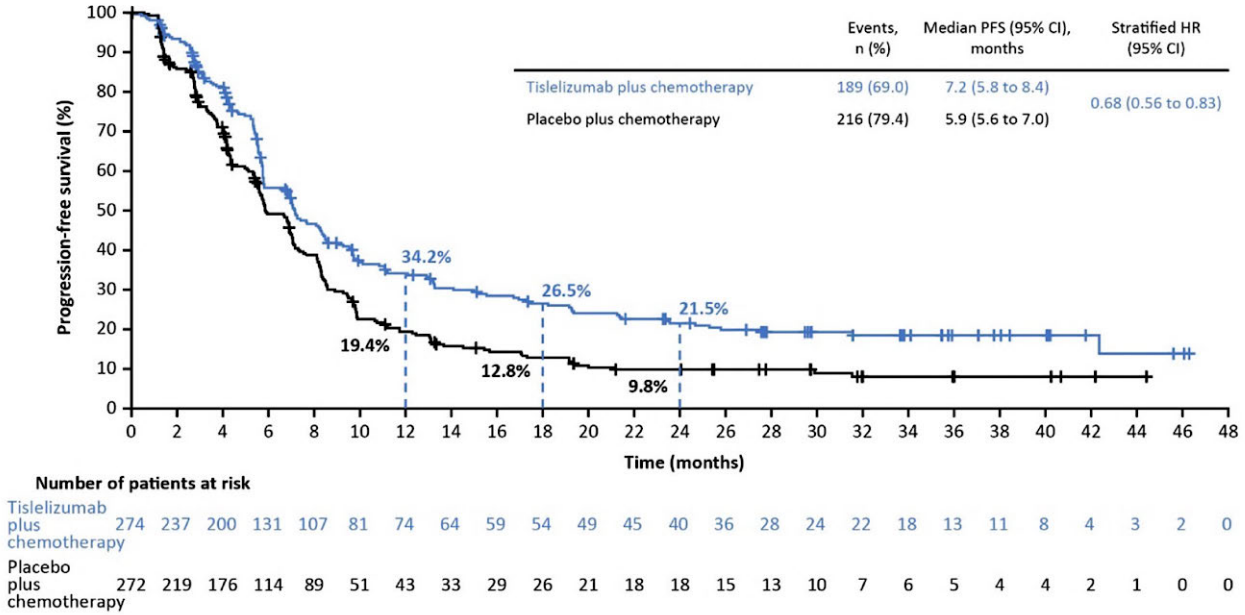


Figure 7. Kaplan-Meier Plot of Progression Free Survival in PD-L1 5% population (RATIONALE-305, DCO February 2023)

Cox regression model was stratified by regions (East Asia versus others) and presence of peritoneal metastasis. Source: [72].

Table 55. Results per RATIONALE-305 (DCO August 2024)

Results of RATIONALE-305 (NCT03777657)											
				Estimated absolute difference in effect			Estimated relative difference in effect			Description of methods used for estimation	References
Outcome	Study arm	N	Result (CI)	Difference	95% CI	*P* value	Difference	95% CI	*P* value		
Median OS ITT Set	TIS + CT	[redacted]	[redacted]	[redacted]	N/A	N/A	[redacted]	[redacted]	[redacted]	Medians and other quartiles were estimated by Kaplan–Meier method with 95% CIs estimated using the method of Brookmeyer and Crowley.	Internal CSR[7]
	PBO + CT	[redacted]	[redacted]								Internal CSR[7]
Median OS PD-L1 ≥5% Set	TIS + CT	[redacted]	[redacted]	[redacted]	N/A	N/A	[redacted]	[redacted]	[redacted]	Same as above.	Internal CSR [7]
	PBO + CT	[redacted]	[redacted]								
Median PFS ITT Set	TIS + CT	[redacted]	[redacted]	[redacted]	N/A	N/A	[redacted]	[redacted]	[redacted]	Medians and other quartiles were estimated by Kaplan–Meier method with 95% CIs estimated using the method of	Internal EVD [7]
	PBO + CT	[redacted]	[redacted]								

Results of RATIONALE-305 (NCT03777657)												
				Estimated absolute difference in effect			Estimated relative difference in effect			Description of methods used for estimation	References
Outcome	Study arm	N	Result (CI)	Difference	95% CI	*P* value	Difference	95% CI	*P* value		
										Brookmeyer and Crowley.	
Median PFS PD-L1 ≥5% Set	TIS + CT	[redacted]	[redacted]	[redacted]	N/A	N/A	[redacted]	[redacted]	[redacted]	Same as above.	Internal EVD [7]
	PBO + CT	[redacted]	[redacted]								
grade ≥3 TRAEs	TIS + CT	[redacted]	[redacted]	[redacted]	N/A	N/A	N/A	N/A	N/A	Safety was assessed in the safety population, defined as all patients who received at least one dose of study. All AEs were graded by NCI CTCAE v5.0. TRAEs were considered by the investigator to be related to a study drug or with missing assessment of the causal relationship.	Internal CSR [7]
	PBO + CT	[redacted]	[redacted]								

Results of RATIONALE-305 (NCT03777657)												
				Estimated absolute difference in effect			Estimated relative difference in effect			Description of methods used for estimation	References
Outcome	Study arm	N	Result (CI)	Difference	95% CI	*P* value	Difference	95% CI	*P* value		
TRAEs leading to death	TIS + CT	[redacted]	[redacted]	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Internal CSR [7]
	PBO + CT	[redacted]	[redacted]								

Abbreviations: CI, confidence interval; CT, chemotherapy; DCO, data cut-off; HR, hazard ratio; ITT, Intent-to-treat; N, number; N/A, not applicable; NR, not reported; NCI CTCAE v5.0, national cancer institute common terminology criteria for adverse events, version5.0; OS, overall survival; P, probability; PBO, placebo; PD-L1, programmed death-ligand 1; PFS, progression-free survival; TIS, tislelizumab; TRAE, treatment related adverse event.

Results per CheckMate 649

Table 56. Results per CheckMate 649 (DCO May 2022)

Results of CheckMate 649 (NCT02872116) DCO May 2022											
				Estimated absolute difference in effect			Estimated relative difference in effect			Description of methods used for estimation	References
Outcome	Study arm	N	Result (CI)	Difference	95% CI	*P* value	Difference	95% CI	*P* value		

Median OS ITT Set	NIV + CT	789	13.7 12.4 to 14.5 months	2.1	N/A	N/A	HR: 0.79	0.71 to 0.88	-	-	[54]
	CT	792	11.6 10.9 to 12.5 months								
Median OS PD-L1 CPS ≥5	NIV + CT	473	14.4 13.1 to 16.2 months	3.3	N/A	N/A	HR: 0.70	0.61 to 0.81	-	-	[54]
	CT	482	11.1 10.0 to 12.1 months								
Median PFS ITT Set	NIV + CT	789	7.7 7.1 to 8.6 months	0.8	N/A	N/A	HR: 0.79	0.71 to 0.89	-		[54]
	CT	792	6.9 6.7 to 7.2 months								
Median PFS	NIV + CT	473	8.3 7.0 to 9.3 months	2.2	N/A	N/A	HR: 0.70	0.60 to 0.81	-		[54]

PD-L1 CPS ≥5	CT	482	6.1 5.6 to 6.9 months								
grade ≥3 TRAEs	NIV + CT	782	473 events (60%)	127	N/A	N/A	N/A	N/A	N/A	N/A	[54]
	CT	767	346 events (45%)								

Appendix C. Comparative analysis of efficacy

Description of the NMA methodology and results are presented in Section 7. Cumulative hazard log plots and Schoenfeld residual plots with Grambsch-Therneau p-values for OS in ITT population and TAP ≥5% subgroup are presented below.

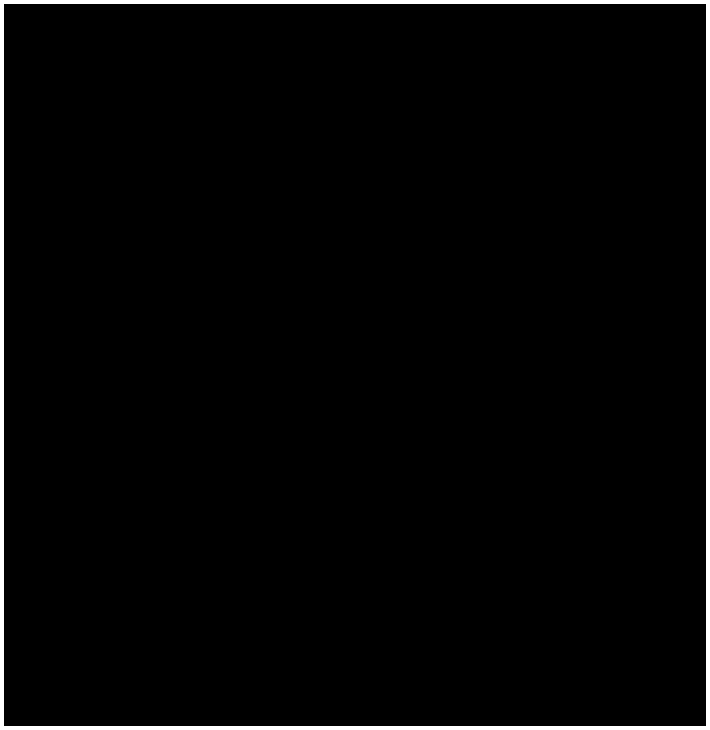


Figure 8. Cumulative hazard log plot for OS (ITT population)

Source: The hazard log plot above has been sourced from an internal NMA report [7].

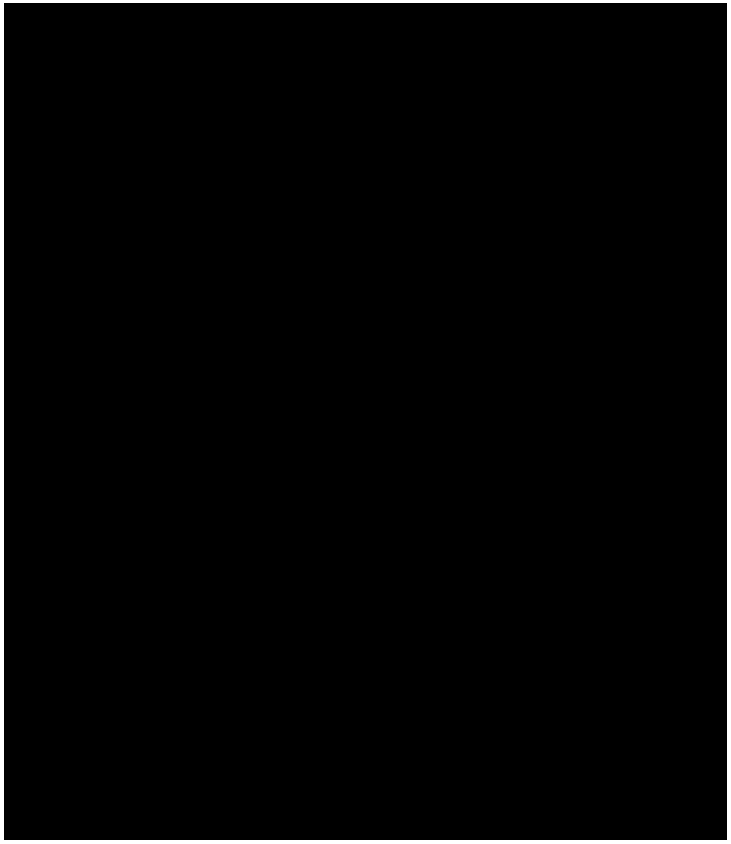


Figure 9. Schoenfeld residual plot with Grambsch-Therneau p-values for OS (ITT population)

Source: The Schoenfeld residual plot above has been sourced from an internal NMA report [7].

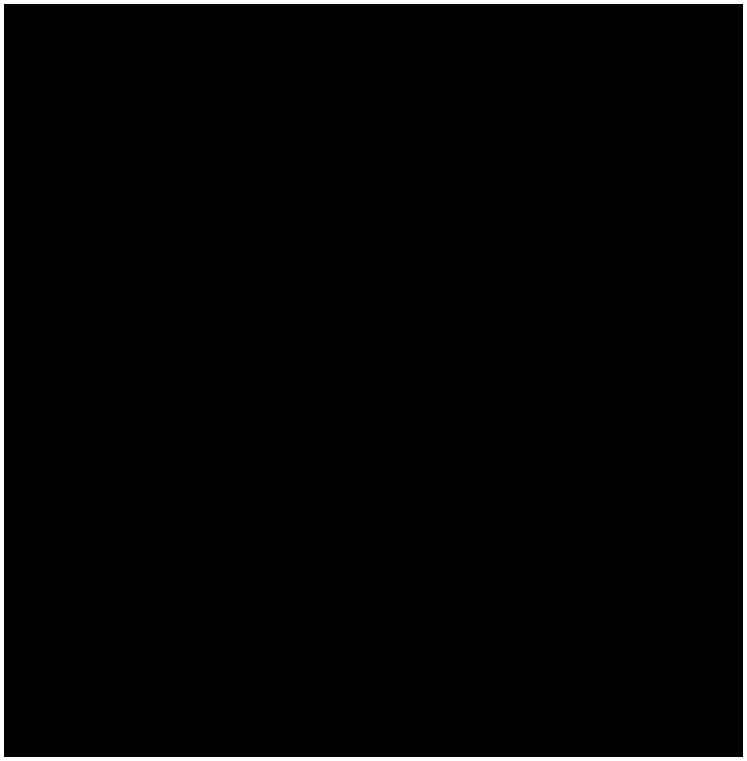


Figure 10. Cumulative hazard log plot for PFS (ITT population)

Source: The hazard log plot above has been sourced from an internal NMA report [7].

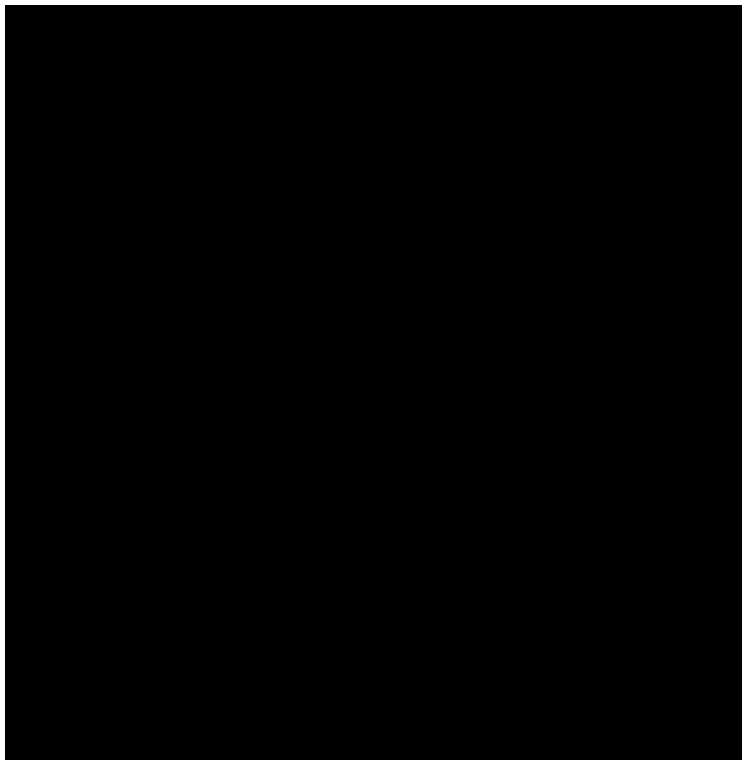


Figure 11. Schoenfeld residual plots with Grambsch-Therneau p-values for PFS (ITT population)

Source: The Schoenfeld residual plot above has been sourced from an internal NMA report [7].

Figure 12. Cumulative hazard log plot for OS (PD-L1 ≥5% subgroup)

Source: The hazard log plot above has been sourced from an internal NMA report [7].

Figure 13. Schoenfeld residual plots with Grambsch-Therneau p-values for OS (PD-L1 ≥5% subgroup)

TIS + CT (RATIONALE-305) vs NIV + CT (CheckMate 649)
Source: The Schoenfeld residual plot above has been sourced from an internal NMA report [7].

Figure 14. Cumulative hazard log plots for PFS (PD-L1 ≥5% subgroup)

Source: [7].

Figure 15. Shoenfeld residual plots with Grambsch-Therneau p-values for PFS (PD-L1 ≥5% subgroup)

TIS + CT (RATIONALE-305) vs NIV + CT (CheckMate 649)
Source: [7].

Table 57. Comparative analysis of studies comparing [intervention] to [comparator] for patients with [indication] (N/A)

Outcome		Absolute difference in effect			Relative difference in effect			Method used for quantitative synthesis	Result used in the health economic analysis?
	Studies included in the analysis	Difference	CI	P value	Difference	CI	P value		
N/A	-	-	-	-	-	-	-	-	-

Appendix D. Extrapolation (N/A)

Not applicable.

D.1 Extrapolation of [effect measure 1]

D.1.1 Data input

D.1.2 Model

D.1.3 Proportional hazards

D.1.4 Evaluation of statistical fit (AIC and BIC)

D.1.5 Evaluation of visual fit

D.1.6 Evaluation of hazard functions

D.1.7 Validation and discussion of extrapolated curves

D.1.8 Adjustment of background mortality

D.1.9 Adjustment for treatment switching/cross-over

D.1.10 Waning effect

D.1.11 Cure-point

D.2 Extrapolation of [effect measure 2]

[For each effect measure please, fill in this section using the same template as stated in section D.1]

Appendix E. Serious adverse events

Table 58. Serious TEAEs by System Organ Class and Preferred Term Safety population - RATIONALE-305

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		
[redacted]		

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

System Organ Class Preferred Term	TIS + CT (N=498) n (%)	PBO + CT (N=494) n (%)
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]

Abbreviations: CT, chemotherapy; n/N, number; PBO, placebo; TIS, tislelizumab; TEAE, treatment-emergent adverse event. Source: All data in the table above was sourced from an internal CSR with a full list of serious TEAEs [7].

Appendix F. Health-related quality of life

Figure 16. Summary of EQ VAS scores by visit for ITT population – RATIONALE-305

Source: All data in the figure above has been sourced from an internal CSR [7].

Figure 17. Summary of EORTC QLQ-C30 GHS/QoL scores by visit for ITT population – RATIONALE-305

Source: All data in the figure above has been sourced from an internal CSR [7].

Figure 18. Summary of EORTC QLQ-STO22 pain scores by visit in ITT population – RATIONALE-305

Source: All data in the figure above has been sourced from an internal CSR [7].

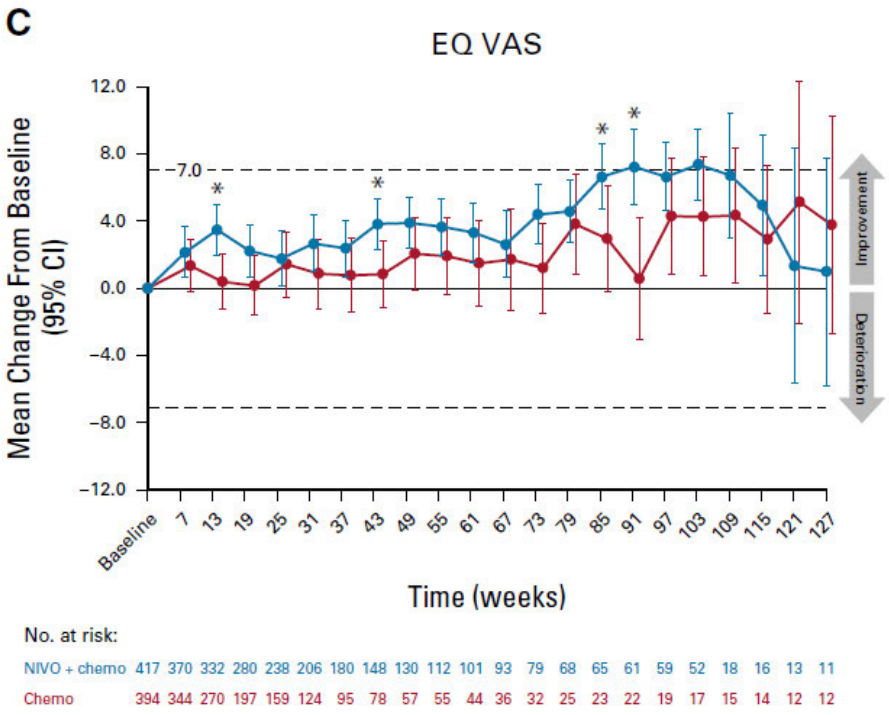


Figure 19. Summary of EQ VAS by visit in CPS ≥5 PRO population - CheckMate 649

Source: [62].

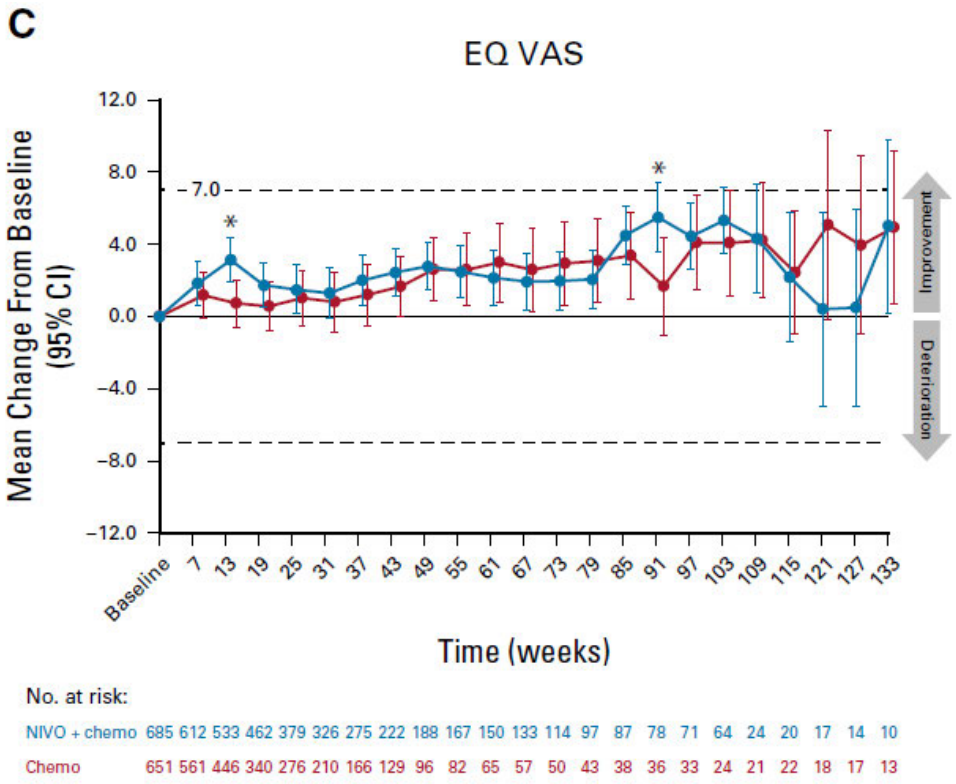


Figure 20. Summary of EQ VAS by visit in overall PRO population - CheckMate 649

Source: [62].

Appendix G. Probabilistic sensitivity analyses (N/A)

Not applicable.

Table 59. Overview of parameters in the PSA

Input parameter	Point estimate	Lower bound	Upper bound	Probability distribution
Probabilities				
Efficacy Outcome A	N/A	N/A	N/A	N/A
HSUV				
State A	N/A	N/A	N/A	N/A
Costs				
Hospitalization	N/A	N/A	N/A	N/A
	N/A	N/A	N/A	N/A

Appendix H. Literature searches for the clinical assessment

H.1 Efficacy and safety of the intervention and comparator(s)

A clinical SLR was conducted to support this submission. A comprehensive SLR was conducted on February 16, 2024, with an SLR update conducted on September 4, 2024.

H.1.1 Methods

The SLRs were performed in accordance with the Cochrane Handbook for Systematic Reviews of Interventions and reported in alignment with the Preferred Reporting Items for Systematic Literature Reviews and Meta-Analyses (PRISMA) statement. The Population, Intervention, Comparator, Outcome, Study design (PICOS) framework was used to develop the search strategy and structure the reporting of the eligibility criteria.

H.1.2 Original literature search

H.1.2.1 Objective

The objective was to conduct a SLR of clinical evidence to summarize the efficacy and safety data from RCTs for immune-oncology regimens in 1L, unresectable or metastatic, HER-2-negative G/GEJ adenocarcinoma in adult patients with PD-L1 TAP score of ≥5%.

H.1.2.2 Information sources

H.1.2.2.1 Bibliographic databases

Searches for RCTs were conducted with multiple databases using Ovid® Interface. The following databases were searched: Embase, Ovid MEDLINE (including, Epub Ahead of Print and In-Process & Other Non-Indexed Citations), Ovid MEDLINE Daily, CENTRAL, and the CDSR as per DMC guidelines. These original searches were performed on February 16, 2024, and are presented in Table 60.

Table 60. Bibliographic databases included in the Ovid literature search (original search)

Database	Platform/source	Relevant period for the search	Date of search completion
Embase	Ovid	1974 to February 14, 2024	16.02.2024
Ovid MEDLINE®	Ovid	1946 to February 14, 2024	16.02.2024
CENTRAL	Ovid	January 2024	16.02.2024

Database	Platform/source	Relevant period for the search	Date of search completion
CDSR	Cochrane Library	2005 to February 14, 2024	16.02.2024

H.1.2.2.2 Registry search and other sources

Additional searches of grey literature sources were conducted to maximize the inclusion of all relevant studies, including clinical registries, and reference lists of previously published reviews. The registry websites searched, presented in Table 61, were used to conduct the original SLR.

Table 61. Clinical trial registries and other sources included in the literature search (original search)

Source name	Location/source	Search strategy	Date of search
ClinicalTrials.gov	https://www.clinicaltrials.gov/	Grey literature search	16.02.2024
ANZCTR	https://www.anzctr.org.au/	Grey literature search	16.02.2024
ICTRP	https://www.who.int/clinical-trials-registry-platform	Grey literature search	16.02.2024
Bibliographic search of select relevant SLRs	NR	Grey literature search	16.02.2024
KMbase	http://en.medric.or.kr/	Grey literature search	16.02.2024
KoreaMed	https://koreamed.org/	Grey literature search	16.02.2024

H.1.2.2.3 HTA submissions

Key HTA agencies were also hand-searched for relevant technology appraisals, with the websites of HTA bodies searched presented in Table 62.

Table 62. HTA agencies included in the literature search (original search)

Source name	Location/source	Search strategy	Date of search
PBAC	https://pbac.pbs.gov.au	Grey literature search	16.02.2024
HIRA	https://hira.or.kr/eng/main.do	Grey literature search	16.02.2024
CADTH	https://www.cda-amc.ca	Grey literature search	16.02.2024
SMC	https://scottishmedicines.org.uk	Grey literature search	16.02.2024
HAS	https://www.has-sante.fr	Grey literature search	16.02.2024
IQWiG	https://www.iqwig.de/en/	Grey literature search	16.02.2024

H.1.2.2.4 Conference proceedings

Websites of key clinical conferences confirmed not to be indexed within Embase were hand searched for relevant abstracts published between 2022 to 2024 (i.e., within the last two years of the SLR search date) and are presented in Table 63.

Table 63 Conference material included in the literature search (original search)

Conference	Source of abstracts	Search strategy	Words/terms searched	Date of search
ASCO, 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
ASCO GI 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
AACR, 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024

Conference	Source of abstracts	Search strategy	Words/terms searched	Date of search
Blood 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
CSCO 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
ESMO 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
ESMO-IO 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
ESMO-Asia 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
ISPOR 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
ISPOR EU 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
JGCA 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
KSMO 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
SEOM 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024
WCGI 2022, 2023, 2024	NR	Skimming through abstract collection	NR	16.02.2024

H.1.3 Updated SLR

H.1.3.1 Objective

The updated SLR aimed to identify new literature published from the original search to September 4, 2024, concerning clinical evidence of efficacy and safety of immuno-oncology regimens for 1L treatment of unresectable, locally advanced, or metastatic G/GEJ adenocarcinoma in adults.

H.1.3.2 Information sources

H.1.3.2.1 Bibliographic databases

The bibliographic databases used to conduct the updated SLR were the same as those used for the original SLR and are presented in Table 64. The databases were searched on September 4, 2024, from database inception to ensure that all relevant data are captured.

Table 64 Overview of used databases included in literature search (updated search)

Database	Platform/source	Relevant period for the search	Date of search completion
Embase	Ovid	1974 to September 3, 2024	04.09.2024
Ovid MEDLINE®	Ovid	1946 to September 03, 2024	04.09.2024
CENTRAL	Ovid	July 2024	04.09.2024
CDSR	Cochrane Library	2005 to August 28, 2024	04.09.2024

H.1.3.2.2 Registry search and other sources

The registry websites searched presented in Table 61, were used to conduct the updated SLR.

Table 65 Clinical trial registries and other sources included in the literature search (updated search)

Source name	Location/source	Search strategy	Date of search
ClinicalTrials.gov	https://www.clinicaltrials.gov/	Grey literature search	04.09.2024
ANZCTR	https://www.anzctr.org.au/	Grey literature search	04.09.2024

Source name	Location/source	Search strategy	Date of search
ICTRP	https://www.who.int/clinical-trials-registry-platform	Grey literature search	04.09.2024
Bibliographic search of select relevant SLRs	NR	Grey literature search	04.09.2024
KMbase	http://en.medric.or.kr/	Grey literature search	04.09.2024
KoreaMed	https://koreamed.org/	Grey literature search	04.09.2024

H.1.3.2.3 HTA submissions

The HTA agencies' websites searched, presented in Table 66, were used to conduct the updated SLR.

Table 66. HTA agencies included in the literature search (updated search)

Source name	Location/source	Search strategy	Date of search
PBAC	https://pbac.pbs.gov.au	Grey literature search	04.09.2024
HIRA	https://hira.or.kr/eng/main.do	Grey literature search	04.09.2024
CADTH	https://www.cda-amc.ca	Grey literature search	04.09.2024
SMC	https://scottishmedicines.org.uk	Grey literature search	04.09.2024
HAS	https://www.has-sante.fr	Grey literature search	04.09.2024

Source name	Location/source	Search strategy	Date of search
IQWiG	https://www.iqwig.de/en/	Grey literature search	04.09.2024

H.1.3.2.4 Conference proceedings

Websites of key clinical conferences were manually searched for relevant abstracts published between 2022 to 2024, and are presented in Table 63.

Table 67 Conference material included in the literature search (updated search)

Conference	Source of abstracts	Search strategy	Words/terms searched	Date of search
ASCO, 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
ASCO GI 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
AACR, 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
Blood 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
CSCO 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
ESMO 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
ESMO-IO 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
ESMO-Asia 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
ISPOR 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024

Conference	Source of abstracts	Search strategy	Words/terms searched	Date of search
ISPOR EU 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
JGCA 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
KSMO 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
SEOM 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024
WCGI 2022, 2023, 2024	NR	Skimming through abstract collection	NR	04.09.2024

H.1.4 Search strategies

The search strategy was developed and tested through an iterative process by a team of medical specialists in consultation with the review team. The strategy was independently peer-reviewed by another senior medical information specialist before execution, using Peer Review of Electronic Search Strategies (PRESS) checklist [77]. The search strategy was developed based on the pre-defined PICOS criteria (Table 70). The search strategies utilized a combination of controlled vocabulary and keywords (e.g. “GC”, “GEJ”) to cover all relevant literature within the field. Modified versions of the Cochrane Highly Sensitive Seach Strategy filter for identifying RCTs in MEDLINE® and Embase were applied, in addition to filters for SLRs [77]. Vocabulary and syntax were adjusted across databases. The search strategy was not restricted by language. Animal-only and opinion pieces were removed from the results.

H.1.4.1 Original search

Table 68. Search strategy table for Ovid MEDLINE®, Ovid Embase, and Ovid EBM Reviews (including Cochrane Central Register of Controlled Trials & Cochrane Database of Systematic Reviews) (February 16, 2024)

No.	Query	Results
#1	Stomach Neoplasms/ or Gastroesophageal Junction Adenocarcinoma/ [Search design error: no MeSH for "Gastroesophageal Junction Adenocarcinoma"]	131891
#2	(adenocarcinoma-GEJ or "esophagogastric adenocarcinoma" or "esophagogastric junction adenocarcinoma").af.	1228
#3	(adenocarcinoma-GEJ or "esophagogastric adenocarcinoma" or "esophagogastric junction adenocarcinoma").ti,ab.	1012
#4	((gastric or stomach or gej) and (cancer* or carcinoma* or adenocarcinoma* or tumor* or tumour* or neoplasm* or malignan*)).af.	506246
#5	or/1-4	506597
#6	(advanc* or malignan* or metastat* or unopera* or (non adj5 resect*) or nonresect* or unresect* or inopera* or (late adj2 stage) or stage iii or stage 3 or stage-3 or stage-iii or stage iv or stage 4 or stage-4 or (stage adj3 (iii or (adenocarcinoma-GEJ or "esophagogastric adenocarcinoma" or "esophagogastric junction adenocarcinoma") or c or iv or ((gastric or stomach or gej) and (cancer* or carcinoma* or adenocarcinoma* or tumor* or tumour* or neoplasm* or malignan*))))).af.	6642925
#7	5 and 6	187828
#8	limit 7 to english language [Limit not valid in CDSR; records were retained]	163106

No.	Query	Results
#9	8 use medp,prem [Ovid MEDLINE® Segments: Epub Ahead of Print & In-Process & In-Data-Review Citations]	558
#10	exp stomach cancer/ or exp stomach carcinoma/ or (stomach cancer or stomach carcinoma).af.	281248
#11	Gastroesophageal Junction Adenocarcinoma/ or (adenocarcinoma-GEJ or "esophagogastric adenocarcinoma" or "esophagogastric junction adenocarcinoma").af. [Search design error: no MeSH for "Gastroesophageal Junction Adenocarcinoma"]	1611
#12	((exp neoplasm/ or exp adenocarcinoma/) and (gastric or stomach or gej or gastro-esophag* or gastro-oesophag* or gastro*esophageal junction).af.) or ((gastric or stomach or gej or gastro-esophag* or gastro-oesophag* or gastro*esophageal junction) and (cancer* or carcinoma* or adenocarcinoma* or tumor* or tumour* or neoplasm* or malignan*)).af.	527011
#13	or/10-12	527616
#14	(advanc* or malignan* or metastat* or unopera* or (non adj5 resect*) or nonresect* or unresect* or inopera* or (late adj2 stage) or stage iii or stage 3 or stage-3 or stage-iii or stage iv or stage 4 or stage-4 or (stage adj3 (iii or (adenocarcinoma-GEJ or "esophagogastric adenocarcinoma" or "esophagogastric junction adenocarcinoma") or c or iv or ((gastric or stomach or gej) and (cancer* or carcinoma* or adenocarcinoma* or tumor* or tumour* or neoplasm* or malignan*))))).af.	6642925
#15	13 and 14	190338
#16	nivolumab/ or (nivolumab or bms 936558 or bms936558 or cmab 819 or cmab819 or mdx 1106 or mdx1106 or ono 4538 or ono4538 or opdivo).af.	55452
#17	fluorouracil/ or (fluorouracil or 5-fluorouracil or 5 fluorouracil or 5fu or 5-fu or "5-fu lederle" or "5 fu lederle" or "5-fu medac" or "5 fu medac" or "5-hu hexal" or "5 hu hexal" or adrucil or carac or efudix or efudex or fluoroplex or flurodex or fluorouracile or dakota or fluracedyl or haemato-fu or "haemato fu" or neofluor or onkofluor or ribofluor).af.	314899
#18	capecitabine/ or (capecitabine or xeloda or 154361-50-9).af.	55820
#19	oxaliplatin/ or (oxaliplatin or oxaliplatine or eloxatine or eloxatin).af.	79550
#20	cisplatin/ or (cisplatin or "mpi 5010" or mpi5010 or neoplatin or niyaplat or "nk 801" or nk801 or noveldexis or "nsc 119875" or platamine or "platamine rtu" or platiblastin or platidiam or platimine or platinex or platinil or platinol or "platinol aq" or "platinol-aq" or platinoxan or platiran or platistil or platistin or platosin or "pronto platamine" or randa or romcis or sicatem or "spi 077" or "spi 77" or spi077 or spi77 or tecnoplatin or "tr 170" or tr170).af.	345803

No.	Query	Results
#21	docetaxel/ or (docetaxel or taxotere or docefrez or "rp 56976" or "rp-56976" or 114977-28-5).af.	107027
#22	tegafur/ or (tegafur or utefos or futraful or sunfural or uftoral or florafur or fluorofur or ftorafur).af.	23748
#23	exp folinic acid/ or ("folinic acid" or "citrovorum factor" or wellcovorin or leucovorin or leukovorum or leucovorin).af.	66157
#24	exp paclitaxel/ or (paclitaxel or abraxane or paxene or nsc-125973 or nsc125973 or anzatax or onxol or praxel or taxol or 33069-62-4).af.	207025
#25	zolbetuximab/ or (zolbetuximab or claudiximab or imab362 or "imab 362").af.	319
#26	bemarituzumab/ or (bemarituzumab or fpa144).af.	117
#27	exp cetuximab/ or (cetuximab or erbitux or "imc c225" or imc-c225).af.	47650
#28	(onartuzumab or oa-5d5 or metmab).af.	797
#29	(rilotumumab or "amg 102").af.	724
#30	pembrolizumab/ or (pembrolizumab or keytruda or lambrolizumab or "mk 3475" or mk3475 or "sch 900475" or sch900475).af.	54626
#31	andecaliximab/ or (andecaliximab or gs-5745).af.	186
#32	camrelizumab/ or (camrelizumab or carrelizumab or shr-1210 or "shr 1210" or shr1210 or hr-301210).af.	3433
#33	(apatinib or rivoceranib or yn968d1 or "yn 968d1").af.	5009
#34	avelumab/ or (avelumab or msb-0010682 or msb0010682 or bavencio or msb0010718c or msb-0010718c).af.	8403
#35	pazopanib/ or ramucirumab/ or sintilimab/ or epirubicin/ or regorafenib/ or (pazopanib or gw786034 or ramucirumab or sintilimab or epirubicin or regorafenib).af.	76875
#36	tislelizumab/ or (tislelizumab or bgb-a317).af.	2416
#37	toripalimab/ or (toripalimab or js001).af.	2166
#38	or/16-37	968351
#39	exp clinical trial/ or randomization/de or controlled study/de or comparative study/de or single blind procedure/de or double blind procedure/de or crossover procedure/de or placebo/de or prospective study/de or ("clinical trial" or "clinical trials" or "controlled clinical trial"	7342682

No.	Query	Results
	or "controlled clinical trials" or "randomised controlled trial" or "randomised controlled trials" or "randomisation" or "randomization" or rct or "random allocation" or "randomly allocated" or "allocated randomly" or placebo* or (allocated adj2 random) or (random* adj1 assign*) or random* or ((single or double or triple or treble) adj1 (blind* or mask*))).ti,ab,kw,kf.	
#40	15 and 38 and 39	14723
#41	(books or editorial or letter or note or "review" or short survey).pt. or (letter.pt. not randomized controlled trial/) or animal/ or case report/ or exp practice guideline/ or exp book/ [OPINION PIECES REMOVE - Embase]	22779338
#42	40 not 41	11771
#43	(conference abstract or conference paper or conference review).pt.	5831545
#44	42 and 43	2587
#45	limit 44 to yr="2019 -2022"	777
#46	42 not 43	9184
#47	45 or 46	9961
#48	limit 47 to english language [Limit not valid in CDSR; records were retained]	9034
#49	(systematic and review*).ti.	553839
#50	(meta and analys*).ti.	439028
#51	metaanalys*.ti.	4347
#52	exp meta analysis/	502590
#53	exp systematic review/	704804
#54	"systematic review (topic)"/	34000
#55	or/49-54	1104452
#56	40 and 55	762
#57	47 or 56	10384
#58	limit 57 to english language [Limit not valid in CDSR; records were retained]	9434
#59	58 use oemezd [Embase results]	4815

No.	Query	Results
#60	Stomach Neoplasms/ [Search design error: this MeSH does not have subtrees so no need to explode]	131489
#61	((gastric or stomach or gej or gastro-esophag* or gastro-oesophag* or gastro*esophageal junction) and (cancer* or carcinoma* or adenocarcinoma* or tumor* or tumour* or neoplasm* or malignan*)).ti,ab,kw.	389320
#62	(adenocarcinoma-GEJ or "esophagogastric adenocarcinoma" or "esophagogastric junction adenocarcinoma").ti,ab,kw.	1063
#63	or/60-62	417457
#64	(advanc* or malignan* or metastat* or unopera* or (non adj5 resect*) or nonresect* or unresect* or inopera* or (late adj2 stage) or stage iii or stage 3 or stage-3 or stage-iii or stage iv or stage 4 or stage-4 or (stage adj3 (iii or (adenocarcinoma-GEJ or "esophagogastric adenocarcinoma" or "esophagogastric junction adenocarcinoma") or c or iv or ((gastric or stomach or gej) and (cancer* or carcinoma* or adenocarcinoma* or tumor* or tumour* or neoplasm* or malignan*))))).ti,ab,kw.	5152802
#65	63 and 64	156618
#66	Nivolumab/ [Search design error: this MeSH does not have subtrees so no need to explode]	46817
#67	(nivolumab or bms 936558 or bms936558 or cmab 819 or cmab819 or mdx 1106 or mdx1106 or ono 4538 or ono4538 or opdivo).ti,ab,kw.	33905
#68	exp Fluorouracil/ [Search design error: this MeSH does not have subtrees so no need to explode]	221559
#69	(fluorouracil or 5-fluorouracil or 5 fluorouracil or 5fu or 5-fu or "5-fu lederle" or "5 fu lederle" or "5-fu medac" or "5 fu medac" or "5-hu hexal" or "5 hu hexal" or adrucil or carac or efudix or efudex or fluoroplex or flurodex or fluorouracile or dakota or fluracedyl or haemato-fu or "haemato fu" or neofluor or onkofluor or ribofluor).ti,ab,kw.	138362
#70	Capecitabine/	46180
#71	(capecitabine or xeloda).ti,ab,kw.	28803
#72	Oxaliplatin/	64907
#73	(oxaliplatin or oxaliplatine or eloxatine or eloxatin).ti,ab,kw.	44400
#74	Cisplatin/	290095
#75	(cisplatin or "mpi 5010" or mpi5010 or neoplatin or niyaplat or "nk 801" or nk801 or noveldexis or "nsc 119875" or platamine or "platamine rtu"	197179

No.	Query	Results
	or platiblastin or platidiam or platimine or platinex or platinil or platinol or "platinol aq" or "platinol-aq" or platinoxan or platiran or platistil or platistin or platosin or "pronto platamine" or randa or romcis or sicatem or "spi 077" or "spi 77" or spi077 or spi77 or tecnoplatin or "tr 170" or tr170).ti,ab,kw.	
#76	Docetaxel/	90732
#77	(docetaxel or taxotere or docefrez or "rp 56976" or "rp-56976" or 114977-28-5).ti,ab,kw.	61498
#78	Tegafur/	13972
#79	(tegafur or utefos or futraful or sunfural or uftoral or florafur or fluorofur or ftorafur).ti,ab,kw.	6576
#80	exp Leucovorin/	57772
#81	(leucovorin or leukovorum or leucovorin or "folinic acid" or "citrovorum factor" or wellcovorin).ti,ab,kw.	27979
#82	exp Paclitaxel/	175262
#83	(paclitaxel or abraxane or paxene or nsc-125973 or nsc125973 or anzatax or onxol or praxel or taxol).ti,ab,kw.	123080
#84	(zolbetuximab or claudiximab or imab362 or "imab 362").ti,ab,kw.	254
#85	(bemarituzumab or fpa144).ti,ab,kw.	82
#86	Cetuximab/	41047
#87	(cetuximab or erbitux or "imc c225" or imc-c225).ti,ab,kw.	26677
#88	(onartuzumab or oa-5d5 or metmab).ti,ab,kw.	349
#89	(rilotumumab or "amg 102").ti,ab,kw.	238
#90	(pembrolizumab or keytruda or lambrolizumab or "mk 3475" or mk3475 or "sch 900475" or sch900475).ti,ab,kw.	32722
#91	(andecaliximab or gs-5745).ti,ab,kw.	132
#92	(camrelizumab or carrelizumab or shr-1210 or "shr 1210" or shr1210 or hr-301210).ti,ab,kw.	1910
#93	(apatinib or rivoceranib or yn968d1 or "yn 968d1").ti,ab,kw.	3781
#94	(avelumab or msb-0010682 or msb0010682 or bavencio or msb0010718c or msb-0010718c).ti,ab,kw. [Search design error: missing MeSH]	3518

No.	Query	Results
#95	(pazopanib or gw786034).ti,ab,kw.	7422
#96	(tislelizumab or bgb-a317).ti,ab,kw.	1283
#97	(toripalimab or js001).ti,ab,kw.	1061
#98	Epirubicin/	40489
#99	(epirubicin or imi-28 or "imi 28" or epilem or epi-cell or farmorubicin).ti,ab,kw.	18613
#100	(ramucirumab or ly3009806 or cyramza or "imc 1121b" or imc1121b or imc-1121b or 1121b).ti,ab,kw. [Search design error: missing MeSH]	4342
#101	(sintilimab or ibi308 or ibi-308 or "ibi 308" or tyvyt).ti,ab,kw.	1605
#102	(regorafenib or stivarga or msb-0010718c or resihance).ti,ab,kw.	6459
#103	or/66-102	889648
#104	65 and 103	29675
#105	104 use cctr,coch	3102
#106	65 and 98 [Check for typo in the original Novartis Cochrane Reviews, Trials search (Line #40: #6 AND #39 which should be #6 AND #44)]	2215
#107	106 use cctr,coch [Proves that the Line #40: #6 AND #39 was a typo since the recall in the original Novaris search was 2903 hits]	97
#108	9 or 59 or 107	5470
#109	remove duplicates from 108	5301
#110	limit 9 to dt="20220701-20241231" [Limit not valid in CCTR,CDSR,Embase; records were retained]	402
#111	limit 59 to dc="20220701-20241231" [Limit not valid in CCTR,CDSR; records were retained]	681
#112	107 and (202207$ or 2202208$ or 202209$ or 202210$ or 202211$ or 202212$ or 2023$ or 2024$).up.	29
#113	110 or 111 or 112	1112
#114	limit 113 to yr="2022 -Current" [Isolate results set published within the date span Jul 2022 - Current - since the date Novartis search was run]	
#115	108 not 114	4407

No.	Query	Results
#116	Stomach Neoplasms/ or (Esophageal Neoplasms/ and exp Esophagogastric Junction/)	132993
#117	Neoplasm Metastasis/ or Neoplasm Recurrence, Local/	503214
#118	((((stomach? or gastric$ or cardia or cardiac or antrum? or antral$ or fundus$ or pyloric$ or pylorus$ or ventricul$ or linitis plastica or leather-bottle or ((stomach? or gastric$) and (GC or GEJ))) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$)) or ((stomach? or gastric$) adj3 SCC) or ((esophag$ or oesophag$ or esophagogastric$ or esophago-gastric$ or oesophagogastric$ or oesophago-gastric$ or gastroesophageal$ or gastro-esophageal$ or gastrooesophageal$ or gastro-oesophageal$ or cardio-esophageal$ or cardio-oesophageal$ or cardioesophageal$ or cardiooesophageal$ or EG or GE) adj3 (junction$ or sphincter$) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$))) adj4 ((meta adj sta$) or metastas$ or metastatic$ or recur$ or secondar$ or relaps$ or advance$ or inoperab$ or disseminat$ or spread or migration or lethal$ or incurable or noncurable or non-curable or uncurable or progressive or terminal or invasive$ or aggressive$ or (late? adj2 stage$) or ((stage? or grade? or type?) adj2 (3a$ or 3b$ or 3c$ or III$ or 4a$ or 4b$ or IV$)) or "stage 3" or "stage 4" or met or mets or N1? or N2? or N3? or pN1? or pN2? or pN3?)).ti,ab,kw,kf. [Metastatic GC/GEJ TERMS]	71738
#119	(116 and 117) or 118 [GC-GEJ TERMS]	76938
#120	(tislelizumab$2 or tirelizumab$2 or bgb-a317 or bgba317 or bgn-1 or bgn1 or jhl-2108 or jhl2108 or vdt-482 or vdt482 or 1858168-59-8 or 0kvo411b3n).ti,ab,kw,kf,ot,hw,rn,nm. [TISLELIZUMAB TERMS]	2437
#121	Immune Checkpoint Inhibitors/ or ((Programmed Cell Death 1 Receptor/ or Programmed Cell Death 1 Ligand 2 Protein/) and (inhibit$ or block?).ti,ab,kw,kf.) or ((immune$ adj3 checkpoint? adj3 (inhibit$ or block?)) or (((programmed adj3 death) or PD-1 or PD-1-PD-L1 or PDCD1) adj3 (ligand? or inhibit$ or block?)) or ((B7-H1 or B7H1 or "B7 homolog 1" or CD274 or CD273 or PDCD1LG1 or PDCD1LG2) adj3 (antigen? or protein?)) or ((Cytotoxic-T-Lymphocyte-Associated Protein-4 Inhibitor? or CTLA-4) adj3 (inhibit$ or block?)) or (ICI? and "Immun$ Checkpoint") or BMS-1 or EX-A947 or HY-19991 or J-690233 or MFCD28978741 or s7911 or D000082082 or SCHEMBL16555159 or ZINC230477930 or 1675201-83-8).ti,ab,kw,kf,ot,hw,rn,nm. [IMMUNE CHECKPOINT PROTEINS TERMS]	174996

No.	Query	Results
#122	Immunotherapy/ or Radioimmunotherapy/ or Antibodies, Monoclonal/ or (immunotherap$ or immuno-therap$ or (((biologic$ adj3 response? adj3 modifier?) or BRM or immunogenic$ or immunologic$ or immuno-genic$ or immuno-logic$ or radioimmunotherapy$ or radio-immunotherap$ or ((monoclonal$ or clonal$ or hybridoma$) adj2 antibod$)) adj3 (therap$ or intervention? or treat$))).ti,ab,kw,kf. [IMMUNOTHERAPY TERMS]	898956
#123	Molecular Targeted Therapy/ or ((molecular$ or neoplas$ or cancer$ or tumo?r$ or carcinoma$) adj3 (target$ adj3 therap$)).ti,ab,kw,kf. [TARGETED THERAPY TERMS]	189745
#124	(atezolizumab$2 or anti-PDL1 or MPDL-3280A or MPDL3280A or RG-7446 or RG7446 or ro-5541267 or ro5541267 or Tecentriq$2 or Tecntriq$2 or 1380723-44-3 or 0INE2SFD9E or 52CMI0WC3Y).ti,ab,kw,kf,ot,hw,rn,nm. [ATEZOLIZUMAB TERMS]	23649
#125	(avelumab$2 or bavencio$2 or msb-0010682 or msb-0010718c or msb0010682 or msb0010718c or msb-10682 or msb-10718c or msb10682 or msb10718c or pf-06834635 or pf-6834635 or pf06834635 or pf6834635 or KXG2PJ551I or 1537032-82-8).ti,ab,kw,kf,ot,hw,rn,nm. [AVELUMAB TERMS]	8386
#126	(camrelizumab$2 or "anti-pd-1 monoclonal antibody" or shr-1210 or shr1210 or carilizumab$2 or carrelizumab$2 or 73096E137E or 1798286-48-2).ti,ab,kw,kf,ot,hw,rn,nm. [CAMRELIZUMAB TERMS]	4464
#127	(1428935-60-7 or 28x28x9okv or anti-b7h1-monoclonal-antibody or durvalumab$2 or durvalumabum$2 or imfinzi$2 or l01xc28 or medi4736 or medi-4736).ti,ab,kw,kf,ot,hw,rn,nm. [DURVALUMAB TERMS]	14679
#128	Ipilimumab/ or (ipilimumab$2 or bms-734016 or bms734016 or cs-1002 or cs1002 or ibi-310 or ibi310 or mdx-ctla-4 or mdx-010 or mdx-101 or mdx010 or mdx101 or strentarga$2 or yervoy$2 or 6T8C155666 or 477202-00-9).ti,ab,kw,kf,ot,hw,rn,nm. [IPILIMUMAB TERMS]	34734
#129	Nivolumab/ or (nivolumab$2 or bms-936558 or bms-986213 or bms-986298 or cmab819 or bms936558 or bms986213 or bms986298 or cmab-819 or mdx-1106 or mdx1106 or ono-4538 or ono4538 or opdivo$2 or opdualag$2 or 31YO63LBSN or 946414-94-4).ti,ab,kw,kf,ot,hw,rn,nm. [NIVOLUMAB TERMS]	55423
#130	(pembrolizumab$2 or keytruda$2 or lambrolizumab$2 or mk3475 or mk-1308a or mk-3475 or mk7684a or sch-900475 or sch900475 or "keylynk-010 component" or DPT0O3T46P or 1422183-02-5 or 1374853-91-4).ti,ab,kw,kf,ot,hw,rn,nm. [PEMBROLIZUMAB TERMS]	54555
#131	(2072873-06-2 or 8fu7fq8upk or ibi308 or ibi-308 or sintilimab$2 or tyvyt$2 or who-10801).ti,ab,kw,kf,ot,hw,rn,nm. [SINTILIMAB TERMS]	3049

No.	Query	Results
#132	(1924598-82-2 or 8jxn261vva or js001 or js-001 or tab001 or tab-001 or teripalimab$2 or toripalimab$2 or treipril$2 or treprizumab$2 or tripleitriumab$2 or triprizumab$2 or tuoyi$2 or who-10820).ti,ab,kw,kf,ot,hw,rn,nm. [TORIPALIMAB TERMS]	2185
#133	(2079108-44-2 or 2226345-85-1 or 2y3t5if01z or aex1188 or aex-1188 or incmga00012 or incmga-00012 or incmga0012 or incmga-0012 or mga012 or mga-012 or retifanlimab$2 or zynyz$2).ti,ab,kw,kf,ot,hw,rn,nm. [RETIFANLIMAB TERMS]	239
#134	(2102192-68-5 or anti-pd-l1-monoclonal-antibody-kn035 or asc22 or asc-22 or envafolimab$2 or es1m06m6qh or kn035 or kn-035).ti,ab,kw,kf,ot,hw,rn,nm. [ENVAFOLIMAB TERMS]	199
#135	(2245725-04-4 or l62556gpxb or mgd013 or mgd-013 or tebotelimab$2).ti,ab,kw,kf,ot,hw,rn,nm. [TEBOTELIMAB TERMS]	99
#136	(2394841-59-7 or 6fyg1ds4nw or ak104 or ak-104 or cadonilimab$2 or who-11581).ti,ab,kw,kf,ot,hw,rn,nm. [CADONILIMAB TERMS]	155
#137	(2231029-82-4 or hlx10 or hlx-10 or s3gqz2k36v or serplulimab$2).ti,ab,kw,kf,ot,hw,rn,nm. [SERPLULIMAB TERMS]	186
#138	(2256084-03-2 or 90iqr2i6tr or cs1001 or cs-1001 or sugemalimab$2 or wbp315 or wbp-315 or wbp3155 or wbp-3155).ti,ab,kw,kf,ot,hw,rn,nm. [SUGEMALIMAB TERMS]	199
#139	(1496553-00-4 or claudiximab$2 or imab362 or imab-362 or tf5mpq8wgy or zolbetuximab$2).ti,ab,kw,kf,ot,hw,rn,nm. [ZOLBETUXIMAB TERMS]	318
#140	(1952272-74-0 or bemarituzumab$2 or fpa144 or fpa-144 or rjw23bq0kw).ti,ab,kw,kf,ot,hw,rn,nm. [BEMARITUZUMAB TERMS]	129
#141	Cetuximab/ or (205923-56-4 or abp494 or abp-494 or c225 or c-225 or c225-03 or c-22503 or c-225-03 or cdp1 or cdp-1 or cetuximab$2 or cetuximabum$2 or ch225 or ch-225 or chimeric-anti-egfr-monoclonal-antibody or cmab009 or cmab-009 or ctp15 or ct-p15 or dtxsid0040830 or erbitux$2 or hsdb-7454 or imc225 or imc-225 or imcc225 or imcc-225 or imc-c225 or kl140 or kl-140 or l01xc06 or ly2939777 or ly-2939777 or mab-c225 or moab-c225 or nsc714692 or pqx0d8j21j or sti001 or sti-001).ti,ab,kw,kf,ot,hw,rn,nm. [CETUXIMAB TERMS]	48593
#142	(1133766-06-9 or metmab$2 or metma-b or ms1j9720wc or onartuzumab$2 or pro143966 or pro-143966 or pro-143996 or pro143996 or ro5490258 or ro-5490258).ti,ab,kw,kf,ot,hw,rn,nm. [ONARTUZUMAB TERMS]	778
#143	(51wew898ij or 872514-65-3 or amg102 or amg-102 or rilotumumab$2).ti,ab,kw,kf,ot,hw,rn,nm. [RILOTUMUMAB TERMS]	725

No.	Query	Results
#144	(1518996-49-0 or 571045eim4 or andecaliximab$2 or gs5745 or gs-5745).ti,ab,kw,kf,ot,hw,rn,nm. [ANDECALIXIMAB TERMS]	186
#145	(444731-52-6 or 635702-64-6 or 790713-33-6 or 7rn5dr86ck or a19406 or a839572 or ab01273967-01 or ab01273967-02 or ab01273967-05 or ab01273967-06 or ac-8522 or akos005145819 or am20090659 or ar-270-43507999 or armala$2 or as-11066 or bcp01839 or bcp9001053 or bcpp000129 or bd164238 or bdbm26474 or brd-k74514084-003-02-7 or ccg-265010 or chebi-71219 or chembl477772 or cid-10113978 or cs-0269 or db06589 or dtxcid1028659 or dtxsid8048733 or en300-57325 or ex-a1241 or ft-0659928 or ft-0684794 or gtpl5698 or gw780604 or gw-780604 or gw-78603 or gw786034 or gw7-86034 or gw-786034 or gw786034b or gw-786034b or gw786034x or gw-786034x or hms3244c21 or hms3244c22 or hms3244d21 or hms3656l14 or hms3745g05 or hsdb-8210 or hy-10208 or indazolylpyrimidine-13 or jmc514632-compound-13 or kinome-3790 or mfcd11616589 or ncgc00188865-01 or ncgc00188865-02 or ncgc00188865-03 or ncgc00188865-10 or nsc752782 or nsc-752782 or nsc800839 or nsc-800839 or p-6706 or pazopanib$2 or pazopanibum$2 or q-101400 or q7157043 or s3012 or sb17290 or sb710468 or sb-710468 or sb710468a or sb-710468a or schembl588608 or sw218082-3 or tox21-113174 or tox21-113174-1 or votrient$2 or z1541638525).ti,ab,kw,kf,ot,hw,rn,nm. [PAZOPANIB TERMS]	14645
#146	(1218779-75-9 or 5s371k6132 or 811803-05-1 or ab01274807-01 or ab01274807-02 or ac-27461 or akos024464453 or amy21302 or apatinib$2 or ba175030 or bcp02840 or c76598 or ccg-268625 or chembl3186534 or cs-0003200 or d11288 or db14765 or ds-7455 or dtxsid601024366 or ex-a1794 or gtpl7648 or hy-13342a or mfcd21648511 or ncgc00249393-01 or ncgc00249393-08 or nsc772886 or nsc-772886 or nsc799333 or nsc-799333 or q27262801 or rivoceranib$2 or s5248 or sb16590 or schembl1814966 or yn968d1 or yn-968d1).ti,ab,kw,kf,ot,hw,rn,nm. [RIVOCERANIB/APATINIB TERMS]	5000
#147	Induction Chemotherapy/ or Consolidation Chemotherapy/ or Maintenance Chemotherapy/ or Antineoplastic Combined Chemotherapy Protocols/ or exp Chemotherapy, Adjuvant/ or Chemoradiotherapy/ or (chemotherap$ or chemo-therap$ or carcinochemotherap$ or chemoradiotherap$ or chemoradiation? or radiochemotherap$ or carcino-chemotherap$ or chemo-radiotherap$ or chemo-radiation? or radio-chemotherap$).ti,ab,kw,kf. [CHEMOTHERAPY TERMS]	1842747
#148	exp Leucovorin/ or (leucovorin$ or 6-s-leucovorin or 6s-leucovorin or acide folinique or akos015961207 or bdbm50039121 or bpbio1-000766 or bspbio-000696 or bspbio-002218 or brd-a75919782-238-01-8 or calcium folinate or chebi-15640 or chembl1679 or chembl69905 or citrovoeum-factor or citrovorum-factor or d93089 or divk1c-000222 or dtxsid0048216 or einecs-200-361-6 or en300-27068710 or folinate folinic-acid-sf or folinic acid or formyltetrahydrofolate or fusilev$2 or gtpl4816 or gtpl6690 or hsdb-6544 or hy-17556 or idi1-000222 or kbio1-000222 or kbio2-001339 or kbio2-003907 or kbio2-006475 or kbio3-001438 or kbiogr-000461 or kbioss-001339 or lencovorin$2 or leucal$2 or	68277

No.	Query	Results
	leukovorin$2 or leukovoran$2 or leucovorin$2 or levoleucovorin$2 or levo-leucovorin$2 or mfcd00867488 or ninds-000222 or nsc3590 or prestwick0-000738 or prestwick1-000738 or prestwick2-000738 or prestwick3-000738 or q45435667 or q573i9dvlp or s5790 or schembl10068238 or schembl8349 or sd-204098 or s-leucovorin$2 or sleucovorin$2 or spectrum2-000116 or spectrum3-000479 or spectrum4-000031 or spectrum5-000910 or spectrum-000859 or spbio-000132 or spbio-002635 or sbi-0051427-p003 or welcovorin$2 or "formyltetrahydropteroylglutamic acid" or Q573I9DVLP or 58-05-9).ti,ab,kw,kf,ot,hw,rn,nm. [LEUCOVORIN TERMS]	
#149	Carboplatin/ or (Carboplatin$2 or blastocarb$2 or boplatex$2 or carboplat$ or carbosin$2 or carbotec$2 or carplan$2 or CBDCA or (platinum adj3 (cis or diamin? or cyclobutanedicarboxylat? or dicarboxylatediammine)) or Dicarboxylatoplatinum or diamminecyclobutanedicarboxylatoplatinum or cycloplatin$ or erbakar$2 or ercar$2 or ifacap$2 or jm8 or jm-8 or kemocarb$2 or nsc-241240 or nsc241240 or nsc-201345 or nsc201345 or oncocarbin$2 or paraplatin$ or Platinwas$2 or Ribocarbo$2 or Neocarbo$2 or Nealorin$2 or HSDB-6957 or BG3F62OND5 or 41575-94-4).ti,ab,kw,kf,ot,hw,rn,nm. [CARBOPLATIN TERMS]	129374
#150	exp Paclitaxel/ or (paclitaxel$ or abraxane$2 or abraxus$2 or act02709 or act-02709 or acon1-002231 or anx-513 or anzatax$2 or apealea$2 or asotax$2 or bidd-pxr0046 or biotax$2 or bms-181339 or bms181339-01 or bms181339 or bms-181339-01 or bmy-45622 or bmy45622 or bspbio-000290 or capxol$2 or ccris-8143 or chembl428647 or chebi-45863 or coroflex-please$2 or coroxane$2 or cmap-000068 or cynviloq$2 or cypher-select$2 or dsstox-cid-3413 or dsstox-gsid-23413 or dsstox-rid-77016 or dhp107 or dhp-107 or dhp-208 or dhp208 or dts-301 or dts301 or ebetaxel$2 or empac$2 or endotag-1 or endotag1 or formoxol$2 or genaxol$2 or genetaxyl$2 or genexol$2 or gtpl2770 or hms2090d07 or hms2095o12 or hms2231a16 or hms3712o12 or hsdb-6839 or hunxol$2 or hy-b0015 or ifaxol$2 or ig-001 or ig001 or infinnium$2 or intaxel$2 or kbiogr-002509 or kbio2-002509 or kbio2-005077 or kbio2-007645 or kbio3-002987 or lep-etu$2 or lipopac$2 or liporaxel$2 or mbt-0206 or mbt0206 or medixel or mfcd00869953 or mitotax$2 or nanopac$2 or nanotax$2 or nanotaxel$2 or ncgc00164367-01 or nk-105 or nk105 or nsc-125973 or nsc-673089 or nsc125973 or nsc673089 or nscc-125973 or nova-12005 or oas-pac-100 or oaspac100 or oncogel$2 or onxal$2 or onxol$2 or p-ssmm-vip$2 or paclical$2 or pacitaxel$2 or paclical$2 or padexol$2 or pacligel$2 or paclitaxel$2 or pacliex$2 or paxceed$2 or paxene$2 or paxoral$2 or paxus$2 or pazenir$2 or plaxicel$2 or praxel$2 or qw-8184 or schembl3976 or sb-05 or sb05 or sdp-013 or sindaxel$2 or smr000857385 or sr-01000075350 or taycovit$2 or taxalbin$2 or taxane$ or taxocris$2 or taxol$2 or taxus$2 or tocosol$2 or xorane$2 or yewtaxan$2 or zinc96006020 or zisu$2 or P88XT4IS4D or 33069-62-4).ti,ab,kw,kf,ot,hw,rn,nm. [PACLITAXEL TERMS]	238687
#151	Docetaxel/ or (114915-20-7 or 114977-28-5 or 15h5577cqd or 699121phca or ab01273941-01 or ab01273941-02 or ac-383 or akos015960718 or akos024457953 or amy4356 or anx-514 or axtere$2 or	108006

No.	Query	Results
	bd164373 or bdbm36351 or bind014 or bind-014 or brd-k30577245-001-04-3 or brd-k30577245-341-01-9 or bs102 or bs-102 or chebi-4672 or chembl92 or cid148124 or ckd-810 or crlx301 or crlx-301 or cs-1144 or d07866 or d4102 or daxotel$2 or db01248 or dexotel$2 or docecad$2 or docefrez$2 or docetaxel$2 or docetaxelum$2 or docetaxol$2 or docetaxolum$2 or dtxcid8020464 or dtxsid0040464 or emdoc$2 or en300-123047 or ex-a1206 or gtpl6809 or hms2089k08 or hsdb-6965 or hy-b0011 or ks-1452 or l01cd02 or lit976 or lit-976 or mfcd00871399 or ncgc00181306-01 or ncgc00181306-02 or ncgc00181306-04 or ncgc00242509-01 or nsc628503 or nsc-628503 or nsc-759850 or oncodocel$2 or q-100074 or q420436 or rp56976 or rp-56976 or schembl4419 or sdp-014 or sid-530 or sr-01000003023 or sr-01000003023-5 or syp-0704a or taxanit$2 or taxespira$2 or taxoel$2 or taxoltere-metro or taxotel$2 or taxoter$2 or taxotere$2 or texot$2 or tox21-112781 or tox21-113088 or txl$2 or w-60384 or xrp6976 or xrp-6976 or xrp-6976l or z1546621742).ti,ab,kw,kf,ot,hw,rn,nm. [DOCETAXEL TERMS]	
#152	Cisplatin/ or (Cisplatin$ or platinum$ or Cismaplat$2 or (cis adj3 ($platinum or platinous)) or cis-platinum or cis-Platin or dichloroplatinum or diaminodichloroplatinum or diamminedichloroplatinum or dichlorodiammineplatinum or AI3-62048 or abiplatin or biocisplatinum or biocysplatinum or blastolem$2 or briplatin$2 or cddp-ti or cis-ddp or cisPt$ or CACP or CCRIS-221 or CDDP or DDPt or CP-Ethypharm or CPDC or CPDD or CPPD or (DDP and antitumor) or cisplatyl$2 or citoplatino$2 or cytoplatin$2 or cytosplat$2 or docistin$2 or elvecis$2 or kemoplat$2 or Fauldiscipla$2 or IA-call or LiPlaCis$2 or lederplatin$2 or lipoplatin$2 or "liposomal cisplatin" or mpi-5010 or mpi5010 or neoplatin$2 or niyaplat$2 or nk-801 or noveldexis$2 or nsc-119875 or nci-c55776 or platamine$2 or platamine-rtu or platiblastin$2 or platidiam$2 or platimine$2 or platinex$2 or platinil$2 or platino$2 or platinol$2 or platinolaq$2 or platinol-aq$2 or platinoxan$2 or platiran$2 or platistil$2 or platistin$2 or platosin$2 or "pronto platamine" or "Peyrone's chloride" or randa$2 or romcis$2 or sicatem$2 or spi-077 or tr-170 or tecnoplatin$2 or Q20Q21Q62J or 15663-27-1 or 26035-31-4 or 96081-74-2).ti,ab,kw,kf,ot,hw,rn,nm. [CISPLATIN TERMS]	471194
#153	Oxaliplatin/ or (oxaliplatin$2 or (Oxalat$ adj3 platin$) or axiplatin$2 or bendaplatin$2 or crisapla$2 or croloxat$2 or dacotin$2 or dacplat$2 or ebeoxal$2 or elatofen$2 or eloxatin$ or elplat$2 or euroxaliplatin$2 or geneplatin$2 or gessedil$2 or heloxatin$2 or lipoxal$2 or mbp-426 or mbp426 or medoxa$2 or oksaliplatin$ or oplat$2 or oxalatoplatin$ or oxalatplatin$2 or oxali$2 or oxalip$2 or oxaliplan$2 or oxaliprol$2 or oxaliquid$2 or oxalisan$2 or oxalisin$2 or oxalizor$2 or oxaltic$2 or oxaltin$2 or oxamed$2 or oxaplamyl$2 or oxaviatin$2 or platox$2 or plaxitin$2 or rectoxal$2 or riboxatin$2 or rp-54780 or rp54780 or sinoxal$2 or sr-96669 or sr96669 or transplastin$2 or velminox$2 or xaliplat$2 or xoplan$2 or L-OHP-Cpd or 1-OHP or ACT-078 or ACT078 or CCRIS-9143 or NSC-266046 or 04ZR38536J or 61825-94-3).ti,ab,kw,kf,ot,hw,rn,nm. [OXALIPLATIN TERMS]	104675

No.	Query	Results
#154	Capecitabine/ or (capecitabin$ or apecitab$2 or atubri$2 or bc164277 or bcpp000300 or bxeliri$2 or bs-1000 or cacit$2 or capcel$2 or capebina$2 or capecite$2 or capegard$2 or capezam$2 or capicet$2 or capiri$2 or capiibine$2 or captabin$2 or capnat$2 or capoda$2 or capostat$2 or capsy$2 or capxcel$2 or caxeta$2 or ccg-264841 or ccx-340 or cpecitabine$2 or cs-0768 or d01223 or db01101 or dsstox-cid-26451 or dsstox-gsid-46451 or dsstox-rid-81625 or dtxsid3046451 or ecansya$2 or ex-a835 or gtpl6799 or hsdb-7656 or hy-b0016 or j-700154 or k007 or m0297 or mfcd00930626 or mls003915642 or mls004774137 or ncgc00164569-01 or ncgc00164569-02 or ncgc00164569-05 or nsc-759853 or paxon$2 or q-200788 or q420207 or r-340 or rg-340 or r340 or rg340 or ro-09-1978 or ro-091978 or ro-09-1978 or ro-09-1978-000 or ro091978 or s1156 or s-1156 or sr-01000931255 or tox21-112198 or x-abine$2 or x-tabin$2 or xabine$2 or xecap$2 or xeliri$2 or xelocel$2 or xeloda$2 or xelox$2 or z1501480421 or zinc3806413 or 6804dj8z9u or 154361-50-9 or 958887-39-3).ti,ab,kw,kf,ot,hw,rn,nm. [CAPECITABINE TERMS]	57834
#155	(platinum adj1 (fluoropyrimidine or fluoro-pyrimidine) adj3 (doublet? or combin$ or chemotherap$ or chemo-therap$ or ((first or front) adj1 line?) or 1-LOT or 1L or therap$ or regimen? or expos$)).ti,ab,kw,kf,ot,hw,rn,nm. [PLATINUM-FLUOROPYRIMIDINE DOUBLET TERMS]	254
#156	(5-fluoropyrimidin$ or 5-fluoro-pyrimidine or pyrimidine-5-fluoro or (fluorinated adj1 pyrimidine) or a9048 or ac-453 or akos006346044 or am86123 or "bb 0260992" or c4h3fn2 or db-007051 or dtxsid80217851 or en300-6966105 or f14737 or ft-0601423 or mfcd06658278 or q42859845 or w-203496 or zinc1845840 or 675f218 or L36X4TD47C or 675-21-8).ti,ab,kw,kf,ot,hw,rn,nm. [FLUOROPYRIMIDINE TERMS]	5169
#157	Fluorouracil/ or (fluorouracil$ or fluroblastin$ or 1upf or 5-Faracil or 5-Fluoracil or 5-Fluoracyl or 5-fluoro-uracil or 5-fluoro-uracil or 5-Fluoroblastin or 5-fluorouacil or 5-Ftouracyl or 5-FU or 5FU or 5F-uracil or Adrucil$2 or AI3-25297 or Arumel$2 or BSPBio-002048 or Cancersil$2 or Carac$2 or Carzonal$2 or CHEBI-46345 or CHEMBL185 or Cinco-FU or CCRIS-2582 or DSSTox-CID-634 or DSSTox-GSID-20634 or DSSTox-RID-75705 or Efudex$2 or Efudix$2 or Efurix$2 or EINECS-200-085-6 or Effluderm$2 or Fluoroblastin$2 or Fluoro-Uracil$2 or Fluoro-uracile$2 or Fluoro-uracilo$2 or Fluoroplex$2 or Fluorouracile$2 or Fluorouracilo$2 or Fluorouracilum$2 or Fluorouracilum$2 or Fluracil$2 or Fluracilum$2 or Fluri$2 or Fluril$2 or Fluuro-Uracil$2 or Fluorouracilo$2 or Fluroblastin$2 or Fluro-Uracil$2 or Ftoruracil$2 or GTPL4789 or HSDB 3228 or IDI1-000054 or Kecimeton$2 or KBio1-000054 or KBio2-001321 or KBio2-003889 or KBio2-006457 or KBioGR-001253 or KBioSS-001321 or Lopac-F-6627 or Lopac0-000536 or MFCD00006018 or MLS000069498 or MLS002415705 or NCGC00015442-01 or NCGC00015442-02 or NCGC00015442-03 or NCGC00015442-04 or NCGC00015442-05 or NCGC00015442-06 or NCGC00015442-07 or NCGC00015442-08 or NCGC00015442-09 or NCGC00015442-10 or NCGC00015442-11 or NCGC00015442-12 or NCGC00015442-15 or NCGC00015442-16 or NSC-	250857

No.	Query	Results
	19893 or NSC757036 or NSC816997 or Phtoruracil$2 or Pharmakon1600-01500305 or Phthoruracil$2 or Queroplex$2 or Ro-2-9757 or S1209 or 191047-64-0 or 191047-65-1 or 191115-88-5 or U3P01618RT or 51-21-8).ti,ab,kw,kf,ot,hw,rn,nm. [FLUOROURACIL TERMS]	
#158	Irinotecan/ or (irinotecan$ or ab00698464-07 or ab00698464-09 or ab00698464-10 or ab00698464-11 or ab00698464-12 or ab00698464-13 or ab00698464-14 or ac-7469 or akos015894969 or amy4227 or as-14323 or bdbm50128267 or bcp02860 or bcp9000793 or biotecan$2 or brd-k08547377-003-02-4 or campto$2 or camptosar$2 or chebi-80630 or chembl481 or cs-1138 or cpt-11 or cpt11 or d08086 or db00762 or dq2805 or en300-708800 or gtpl6823 or hsdb-7607 or ihl-305 or ihl305 or irinophore-c$2 or irinotel$2 or mfcd00866307 or ncgc00178697-02 or ncgc00178697-05 or nsc-728073 or nsc728073 or nk012-compound or q412197 or s1198 or schembl4034 or sn38 or sn-38 or sn-38-11 or sn3811 or topotecin$2 or u-101440e or u101440e or zinc1612996 or "7673326042" or 100286-90-6 or 97682-44-5).ti,ab,kw,kf,ot,hw,rn,nm. [IRINOTECAN TERMS]	69035
#159	(teysuno$2 or (tegafur adj4 gimeracil adj4 oteracil) or ((S-1 or S1) adj3 combination) or TS-1-cpd or S-1-cpd or TS-1 or TS1 or BMS247616 or BMS-247616 or S1-tegafur-oxonate or S1-fluoropyrimidine-oxoonate).ti,ab,kw,kf,ot,hw,rn,nm. [S1 COMBINATION TERMS]	11045
#160	Tegafur/ or (1189456-27-6 or 1548r74nsz or 17902-23-7 or 82294-77-7 or a812417 or ab00572620-15 or ac-2112 or akos000121279 or as-13528 or atillon$2 or bcp22714 or bp-58663 or brn-0525766 or c8h9fn2o3 or ccg-100959 or ccg-50110 or ccris-2762 or chebi-32188 or chembl20883 or citofur$2 or coparogin$2 or cs-1128 or d01244 or db09256 or dtxsid001009966 or einecs-241-846-2 or en300-21668 or exonal$2 or f-5-fu or fental$2 or florafur$2 or fluorafur$2 or fluorofur$2 or franrose$2 or franroze$2 or ft-0653732 or ft-0654170 or ft-0674829 or ft-0693965 or ft207 or ft-207 or ftorafur$2 or fulaid$2 or fulfeel$2 or furafluor$2 or furflucil$2 or furofutran$2 or futraful$2 or gtpl10513 or hms1665i05 or hms2051b15 or hms2090k04 or hms2232e05 or hms3371h21 or hms3393b15 or hms3654p13 or hms3715d14 or hy-17400 or lamar$2 or lifril$2 or mfcd00012351 or mjf12264 or mjf-12264 or mls000069497 or mls000759414 or mls001076521 or mls001424119 or nc00209 or ncgc00159418-02 or ncgc00159418-04 or ncgc00159418-05 or neberk$2 or nitobanil$2 or nsc148958 or nsc-148958 or opera-id-1726 or phthorafur$2 or q-201784 or q413370 or racemic-ftorafur or riol$2 or schembl4552 or sfsp$2 or sf-sp or sinoflurol$2 or smr000059106 or sr-01000639511 or sr-01000639511-1 or sr-01000639511-4 or sunfral$2 or sunfural$2 or tefsiel-c or tegaful$2 or tegafur$2 or tegafurum$2 or ts-1 or uftoral$2 or upcmld-dp063 or utefos$2 or z104508106).ti,ab,kw,kf,ot,hw,rn,nm. [TEGAFUR TERMS]	28565
#161	Ramucirumab/ or (1121b or 947687-13-0 or 947687-13-0 or a168 or a-168 or cyramza$2 or d99yvk4l0x or hlx12 or hlx-12 or hsdb-8314 or imc1121b or imc1121-b or imc-1121b or imc-1121-b or l01xc21 or ly3009806 or ly-3009806 or nsc-749128 or pbp2001 or pbp-2001 or	8955

No.	Query	Results
	ramucirumab$2 or ramucirumabum$2 or ro7234952 or ro-7234952).ti,ab,kw,kf,ot,hw,rn,nm. [RAMUCIRUMAB TERMS]	
#162	Panitumumab/ or (339177-26-3 or 6a901e312a or abenix$2 or abx-egf or amg954 or amg-954 or e7-6-3 or l01xc08 or moab-abx-egf or moab-e7-6-3 or monoclonal-antibody-abx-egf or monoclonal-antibody-e7-6-3 or nsc-742319 or panitumab$2 or panitumumab$2 or panitumumabum$2 or panitunumab$2 or vectibex$2 or vectibix$2).ti,ab,kw,kf,ot,hw,rn,nm. [PANITUMUMAB TERMS]	13499
#163	(6ns400bxkh or 780758-10-3 or 828933-51-3 or biomab-egfr or diacim$2 or h-r3 or nimotuzumab$2 or osag-101 or radiotheracim$2 or theracim$2 or theraloc$2).ti,ab,kw,kf,ot,hw,rn,nm. [NIMOTUZUMAB TERMS]	2524
#164	(339186-68-4 or emd7200 or emd-7200 or emd72000 or emd-72000 or kgaa$2 or matuzumab$2 or merck-kgaa or mg4m3qb242).ti,ab,kw,kf,ot,hw,rn,nm. [MATUZUMAB TERMS]	51359
#165	Bevacizumab/ or (12-igg1 or 1438851-35-4 or 216974-75-3 or 2s9zzm9q9v or abevmy$2 or abp215 or abp-215 or ainex$2 or altuzan$2 or alymsys$2 or ankeda$2 or anti-vegf or askb1202 or ask-b1202 or avastin$2 or avegra$2 or aybintio$2 or ba1101 or ba-1101 or bambevi$2 or bat1706 or bat-1706 or bcd021 or bcd-021 or bevacizumab$2 or bevacizumabum$2 or bevagen$2 or bevatas$2 or bevax$2 or bevz92 or bevz-92 or bi695502 or bi-695502 or bow030 or bow-030 or boyounuo$2 or bp01 or bp-01 or bp102 or bp-102 or bryxta$2 or bs503a or bs-503a or bxt2316 or bxt-2316 or byvasda$2 or cbt124 or cbt-124 or chs305 or chs-305 or chs5217 or chs-5217 or cizumab$2 or ctp16 or ct-p16 or equidacent$2 or fkb238 or fkb-238 or gb222 or gb-222 or gbs004 or gbs-004 or hanbeitai$2 or hd204 or hd-204 or hlx04 or hlx-04 or hot1010 or hot-1010 or hsdb-8080 or ibi305 or ibi-305 or idb0072 or idb-0072 or intp24 or intp-24 or ipique$2 or jhl1149 or jhl-1149 or js501 or js-501 or jy028 or jy-028 or krabeva$2 or kyomarc$2 or l01xc07 or lextemy$2 or "lumiere-(drug)" or ly01008 or ly-01008 or mabionvegf$2 or mb02 or mb-02 or mil60 or mil-60 or mvasi$2 or myl14020 or myl-14020 or myl1402o or myl-1402o or nsc704865 or nsc-704865 or onbevzi$2 or ons1045 or ons-1045 or ons5010 or ons-5010 or oyavas$2 or pf06439535 or pf-06439535 or pf6439535 or pf-6439535 or pmc901 or pmc-901 or pobevcy$2 or pro169 or pro-169 or pusintin$2 or ql1101 or ql-1101 or r435 or r-435 or rg435 or rg-435 or rhumab$2 or ro4876646 or ro-4876646 or rph001 or rph-001 or rtpr023 or r-tpr-023 or sb8 or sb-8 or sct501 or sct-501 or sct510 or sct-510 or sibp04 or sibp-04 or stc103 or stc-103 or stivant$2 or tab008 or tab-008 or tab014 or tab-014 or tot102 or tot-102 or trs003 or trs-003 or tx16 or tx-16 or vegzelma$2 or versavo$2 or zirabev$2 or zrc113 or zrc-113 or zybev$2).ti,ab,kw,kf,ot,hw,rn,nm. [BEVACIZUMAB TERMS]	128124
#166	(2022215-59-2 or anb011 or anb-011 or dostarlimab$2 or gsk4057190 or gsk-4057190 or jemperli$2 or p0gvq9a4s5 or tsr042 or tsr-042 or wbp285 or wbp-285).ti,ab,kw,kf,ot,hw,rn,nm. [DOSTARLIMAB TERMS]	925

No.	Query	Results
#167	(chembl5095383 or retlirafusp-alfa or shr1701 or shr-1701).ti,ab,kw,kf,ot,hw,rn,nm. [SHR-1701 TERMS]	56
#168	(2368219-35-4 or 45x7ou8c4j or ab154 or ab-154 or domvanalimab$2 or who-11559).ti,ab,kw,kf,ot,hw,rn,nm. [DOMVANALIMAB TERMS]	101
#169	(2259860-24-5 or ab122 or ab-122 or gls010 or gls-010 or gs0122 or gs-0122 or wbp3055 or wbp-3055 or who-11413 or zbl7o904il or zimberelimab$2).ti,ab,kw,kf,ot,hw,rn,nm. [ZIMBERELIMAB TERMS]	225
#170	Lapatinib/ or (0vua21238f or 1092929-10-6 or 1210608-87-9 or 1xkk or 231277-92-2 or 388082-78-8 or 437755-78-7 or 913989-15-8 or a25184 or ab01273965-01 or ab01273965-02 or ab01273965-03 or ab01273965-04 or ab01273965-05 or ac-1314 or akos005145766 or am20090641 or as-14065 or bc164610 or bcp01874 or bcp9000837 or bcp9000838 or bcpp000188 or bcpp000189 or bdbm5445 or brd-k19687926-001-01-7 or brd-k19687926-379-02-5 or c29h26clfn4o4s or ccg-270133 or chebi-49603 or chembl554 or cid-208908 or d08108 or db01259 or dtxcid5026675 or dtxsid7046675 or en300-117254 or ex-a402 or fmm$2 or ft-0659650 or gsk572016 or gsk-572016 or gtpl5692 or gw2016 or gw-2016 or gw282974x or gw-282974x or gw572016 or gw-572016 or gw572016f or gw-572016f or gw-572016x or hms2089h10 or hms3244n06 or hms3244n10 or hms3244n14 or hms3744k11 or hsdb-8209 or hy-50898 or kinome-3684 or kinome-3685 or l0360 or lapatinib$2 or mfcd09264194 or ncgc00167507-01 or ncgc00167507-02 or ncgc00167507-03 or ncgc00167507-04 or ncgc00167507-09 or ns00003012 or nsc745750 or nsc-745750 or nsc800780 or nsc-800780 or q-101353 or q420323 or sb16918 or schembl8100 or sr-05000001472-1 or sw199101-5 or tox21-112505 or tykerb$2 or tyverb$2).ti,ab,kw,kf,ot,hw,rn,nm. [LAPATINIB TERMS]	21635
#171	(857890-39-2 or a825653 or ac-25047 or aiv007 or aiv-007 or akos025401742 or amy9240 or as-16203 or bcp01799 or bcp9000633 or bcpp000247 or bdbm50331094 or bl164616 or c21h19cln4o4 or ccg-264842 or chebi-85994 or chembl1289601 or cs-0109 or d09919 or db09078 or dtxcid50117096 or dtxsid50194605 or e7080 or e-7080 or ee083865g2 or en300-7418350 or er203492-00 or er-203492-00 or ex-a249 or ft-0700727 or gtpl7426 or hms3244a07 or hms3244a08 or hms3244b07 or hms3654a14 or hy-10981 or j-513372 or kisplyx$2 or l01xe29 or lenvatinib$2 or lenvatinibum$2 or lenvima$2 or lev$2 or mfcd16038644 or mk7902 or mk-7902 or mls006011239 or ncgc00263198-01 or ncgc00263198-04 or ncgc00263198-07 or ns00069283 or nsc755980 or nsc-755980 or nsc800781 or nsc-800781 or q6523413 or ro7071618 or ro-7071618 or s1164 or sb16580 or schembl864638 or smr004702999 or sw219259-1 or z2235801899).ti,ab,kw,kf,ot,hw,rn,nm. [LENVATINIB TERMS]	8193324
#172	(0rf or 1001264-89-6 or 524y3ib4hq or ac-28420 or akos025396463 or as-17027 or bcp0726000195 or bcp9000712 or bdbm50398379 or ccg-269312 or chebi-95089 or chembl2177390 or cs-0975 or d10641 or db11743 or dtxsid101025595 or ex-a2077 or gdc0068 or gdc-0068 or	1190

No.	Query	Results
	gdc0068-di-hcl or gdc-0068-di-hcl or gtpl7887 or hy-15186 or ipatasertib$2 or mfcd22124514 or ncgc00346714-01 or ns00072927 or nsc767898 or nsc-767898 or nsc781451 or nsc-781451 or nsc800986 or nsc-800986 or nsc832484 or nsc-832484 or q27078088 or rg7440 or rg-7440 or rg-7440-di-hcl or s2808 or schembl191659).ti,ab,kw,kf,ot,hw,rn,nm. [IPATASERTIB TERMS]	
#173	or/120-160 [INTERVENTION & COMPARATORS & CHEMO TERMS]	3286481
#174	(("randomized controlled trial" or "controlled clinical trial").pt. or (randomized or placebo or randomly).ti,ab. or "clinical trials as topic".sh. or trial.ti.) not (exp animals/ not humans.sh.) [RCTs Filter MEDLINE – Balanced, sensitive vs precise - Cochrane Handbook]	2886608
#175	119 and 173 and 174	4590
#176	(Adolescent/ or exp Child/ or exp Infant/) not (exp Adult/ and (Adolescent/ or exp Child/ or exp Infant/)) [CHILDREN <19 REMOVE]	4816395
#177	exp Animals/ not (exp Animals/ and Humans/) [ANIMAL STUDIES ONLY - REMOVE - MEDLINE]	16930785
#178	(address or autobiography or bibliography or biography or comment or dictionary or directory or editorial or "expression of concern" or festschrift or historical article or interactive tutorial or lecture or legal case or legislation or news or newspaper article or patient education handout or personal narrative or portrait or video-audio media or webcast or (letter not (letter and randomized controlled trial))).pt. [Opinion publications - Remove -MEDLINE]	5010919
#179	Clinical Trial Protocol.pt.	484683
#180	175 not (176 or 177 or 178 or 179) [CHILD <19, ANIMAL STUDIES, TRIAL PROTOCOLS and OPINION PUBLICATIONS - REMOVED - MEDLINE]	4022
#181	180 use ppez [MEDLINE results]	2029
#182	exp stomach carcinoma/ or stomach cancer/ or ((esophagus carcinoma/ or esophageal adenocarcinoma/) and exp gastroesophageal junction/)	269533
#183	local metastasis/ or metastasis/ or cancer recurrence/ or advanced cancer/	841798
#184	((((stomach? or gastric$ or cardia or cardiac or antrum? or antral$ or fundus$ or pyloric$ or pylorus$ or ventricul$ or linitis plastica or leather-bottle or ((stomach? or gastric$) and (GC or GEJ))) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or	71738

No.	Query	Results
	granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$)) or ((stomach? or gastric$) adj3 SCC) or ((esophag$ or oesophag$ or esophagogastric$ or esophago-gastric$ or oesophagogastric$ or oesophago-gastric$ or gastroesophageal$ or gastro-esophageal$ or gastrooesophageal$ or gastro-oesophageal$ or cardio-esophageal$ or cardio-oesophageal$ or cardioesophageal$ or cardiooesophageal$ or EG or GE) adj3 (junction$ or sphincter$) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$))) adj4 ((meta adj sta$) or metastas$ or metastatic$ or recur$ or secondar$ or relaps$ or advance$ or inoperab$ or disseminat$ or spread or migration or lethal$ or incurable or noncurable or non-curable or uncurable or progressive or terminal or invasive$ or aggressive$ or (late? adj2 stage$) or ((stage? or grade? or type?) adj2 (3a$ or 3b$ or 3c$ or III$ or 4a$ or 4b$ or IV$)) or "stage 3" or "stage 4" or met or mets or N1? or N2? or N3? or pN1? or pN2? or pN3?)).ti,ab,kw,kf. [Metastatic GC/GEJ TERMS]	
#185	(182 and 183) or 184 [GC-GEJ TERMS]	87902
#186	tislelizumab/ or (tislelizumab$2 or tirelizumab$2 or bgb-a317 or bgba317 or bgn-1 or bgn1 or jhl-2108 or jhl2108 or vdt-482 or vdt482 or 1858168-59-8 or 0kvo411b3n).ti,ab,kw,kf,ot,rn,dq. [TISLELIZUMAB TERMS]	2437
#187	immune checkpoint inhibitor/ or ((programmed death 1 receptor/ or programmed death 1 ligand 2/) and (inhibit$ or block?).ti,ab,kw,kf.) or ((immune$ adj3 checkpoint? adj3 (inhibit$ or block?)) or (((programmed adj3 death) or PD-1 or PD-1-PD-L1 or PDCD1) adj3 (ligand? or inhibit$ or block?)) or ((B7-H1 or B7H1 or "B7 homolog 1" or CD274 or CD273 or PDCD1LG1 or PDCD1LG2) adj3 (antigen? or protein?)) or ((Cytotoxic-T-Lymphocyte-Associated Protein-4 Inhibitor? or CTLA-4) adj3 (inhibit$ or block?)) or (ICI? and "Immun$ Checkpoint") or BMS-1 or EX-A947 or HY-19991 or J-690233 or MFCD28978741 or s7911 or D000082082 or SCHEMBL16555159 or ZINC230477930 or 1675201-83-8).ti,ab,kw,kf,ot,rn,dq. [IMMUNE CHECKPOINT PROTEINS TERMS]	139900
#188	cancer immunotherapy/ or monoclonal antibody/ or (immunotherap$ or immuno-therap$ or (((biologic$ adj3 response? adj3 modifier?) or BRM or immunogenic$ or immunologic$ or immuno-genic$ or immuno-logic$ or radioimmunotherapy$ or radio-immunotherap$ or ((monoclonal$ or clonal$ or hybridoma$) adj2 antibod$)) adj3 (therap$ or intervention? or treat$))).ti,ab,kw,kf. [IMMUNOTHERAPY TERMS]	885815
#189	molecularly targeted therapy/ or ((molecular$ or neoplas$ or cancer$ or tumo?r$ or carcinoma$) adj3 target$ adj3 therap$).ti,ab,kw,kf. [TARGETED THERAPY TERMS]	165564
#190	atezolizumab/ or (atezolizumab$2 or anti-PDL1 or MPDL-3280A or MPDL3280A or RG-7446 or RG7446 or ro-5541267 or ro5541267 or	23465

No.	Query	Results
	Tecentriq$2 or Tecntriq$2 or 1380723-44-3 or 0INE2SFD9E or 52CMI0WC3Y).ti,ab,kw,kf,ot,rn,dq. [ATEZOLIZUMAB TERMS]	
#191	avelumab/ or (avelumab$2 or bavencio$2 or msb-0010682 or msb-0010718c or msb0010682 or msb0010718c or msb-10682 or msb-10718c or msb10682 or msb10718c or pf-06834635 or pf-6834635 or pf06834635 or pf6834635 or KXG2PJ551I or 1537032-82-8).ti,ab,kw,kf,ot,rn,dq. [AVELUMAB TERMS]	8382
#192	camrelizumab/ or (camrelizumab$2 or "anti-pd-1 monoclonal antibody" or shr-1210 or shr1210 or carilizumab$2 or carrelizumab$2 or 73096E137E or 1798286-48-2).ti,ab,kw,kf,ot,rn,dq. [CAMRELIZUMAB TERMS]	4463
#193	durvalumab/ or (1428935-60-7 or 28x28x9okv or anti-b7h1-monoclonal-antibody or durvalumab$2 or durvalumabum$2 or imfinzi$2 or l01xc28 or medi4736 or medi-4736).tw,kw,kf,ot,rn,dq. [DURVALUMAB TERMS]	14684
#194	ipilimumab/ or (ipilimumab$2 or bms-734016 or bms734016 or cs-1002 or cs1002 or ibi-310 or ibi310 or mdx-ctla-4 or mdx-010 or mdx-101 or mdx010 or mdx101 or strentarga$2 or yervoy$2 or 6T8C155666 or 477202-00-9).ti,ab,kw,kf,ot,rn,dq. [IPILIMUMAB TERMS]	34719
#195	nivolumab/ or (nivolumab$2 or bms-936558 or bms-986213 or bms-986298 or cmab819 or bms936558 or bms986213 or bms986298 or cmab-819 or mdx-1106 or mdx1106 or ono-4538 or ono4538 or opdivo$2 or opdualag$2 or 31YO63LBSN or 946414-94-4).ti,ab,kw,kf,ot,rn,dq. [NIVOLUMAB TERMS]	55402
#197	sintilimab/ or (2072873-06-2 or 8fu7fq8upk or ibi308 or ibi-308 or sintilimab$2 or tyvyt$2 or who-10801).tw,kw,kf,ot,rn,dq. [SINTILIMAB TERMS]	3049
#198	toripalimab/ or (1924598-82-2 or 8jxn261vva or js001 or js-001 or tab001 or tab-001 or teripalimab$2 or toripalimab$2 or treipril$2 or treprizumab$2 or tripleitriumab$2 or triprizumab$2 or tuoyi$2 or who-10820).tw,kw,kf,ot,rn,dq. [TORIPALIMAB TERMS]	2186
#199	retifanlimab/ or (2079108-44-2 or 2226345-85-1 or 2y3t5if01z or aex1188 or aex-1188 or incmga00012 or incmga-00012 or incmga0012 or incmga-0012 or mga012 or mga-012 or retifanlimab$2 or zynyz$2).tw,kw,kf,ot,rn,dq. [RETIFANLIMAB TERMS]	239
#200	envafolimab/ or (2102192-68-5 or anti-pd-l1-monoclonal-antibody-kn035 or asc22 or asc-22 or envafolimab$2 or es1m06m6qh or kn035 or kn-035).tw,kw,kf,ot,rn,dq. [ENVAFOLIMAB TERMS]	200
#201	tebotelimab/ or (2245725-04-4 or l62556gpxb or mgd013 or mgd-013 or tebotelimab$2).tw,kw,kf,ot,rn,dq. [TEBOTELIMAB TERMS]	99

No.	Query	Results
#202	cadonilimab/ or (2394841-59-7 or 6fyg1ds4nw or ak104 or ak-104 or cadonilimab$2 or who-11581).tw,kw,kf,ot,rn,dq. [CADONILIMAB TERMS]	155
#203	serplulimab/ or (2231029-82-4 or hlx10 or hlx-10 or s3gqz2k36v or serplulimab$2).tw,kw,kf,ot,rn,dq. [SERPLULIMAB TERMS]	186
#204	sugemalimab/ or (2256084-03-2 or 90iqr2i6tr or cs1001 or cs-1001 or sugemalimab$2 or wbp315 or wbp-315 or wbp3155 or wbp-3155).tw,kw,kf,ot,rn,dq. [SUGEMALIMAB TERMS]	199
#205	zolbetuximab/ or (1496553-00-4 or claudiximab$2 or imab362 or imab-362 or tf5mpq8wgy or zolbetuximab$2).tw,kw,kf,ot,rn,dq. [ZOLBETUXIMAB TERMS]	317
#206	bemarituzumab/ or (1952272-74-0 or bemarituzumab$2 or fpa144 or fpa-144 or rjw23bq0kw).tw,kw,kf,ot,rn,dq. [BEMARITUZUMAB TERMS]	129
#207	cetuximab/ or (205923-56-4 or abp494 or abp-494 or c225 or c-225 or c225-03 or c-22503 or c-225-03 or cdp1 or cdp-1 or cetuximab$2 or cetuximabum$2 or ch225 or ch-225 or chimeric-anti-egfr-monoclonal-antibody or cmab009 or cmab-009 or ctp15 or ct-p15 or dtxsid0040830 or erbitux$2 or hsdb-7454 or imc225 or imc-225 or imcc225 or imcc-225 or imc-c225 or kl140 or kl-140 or l01xc06 or ly2939777 or ly-2939777 or mab-c225 or moab-c225 or nsc714692 or pqx0d8j21j or sti001 or sti-001).tw,kw,kf,ot,rn,dq. [CETUXIMAB TERMS]	48550
#208	onartuzumab/ or (1133766-06-9 or metmab$2 or metma-b or ms1j9720wc or onartuzumab$2 or pro143966 or pro-143966 or pro-143996 or pro143996 or ro5490258 or ro-5490258).tw,kw,kf,ot,rn,dq. [ONARTUZUMAB TERMS]	776
#209	rilotumumab/ or (51wew898ij or 872514-65-3 or amg102 or amg-102 or rilotumumab$2).tw,kw,kf,ot,rn,dq. [RILOTUMUMAB TERMS]	725
#210	andecaliximab/ or (1518996-49-0 or 571045eim4 or andecaliximab$2 or gs5745 or gs-5745).tw,kw,kf,ot,rn,dq. [ANDECALIXIMAB TERMS]	188
#211	pazopanib/ or (444731-52-6 or 635702-64-6 or 790713-33-6 or 7rn5dr86ck or a19406 or a839572 or ab01273967-01 or ab01273967-02 or ab01273967-05 or ab01273967-06 or ac-8522 or akos005145819 or am20090659 or ar-270-43507999 or armala$2 or as-11066 or bcp01839 or bcp9001053 or bcpp000129 or bd164238 or bdbm26474 or brd-k74514084-003-02-7 or ccg-265010 or chebi-71219 or chembl477772 or cid-10113978 or cs-0269 or db06589 or dtxcid1028659 or dtxsid8048733 or en300-57325 or ex-a1241 or ft-0659928 or ft-0684794 or gtpl5698 or gw780604 or gw-780604 or gw-78603 or gw786034 or gw7-86034 or gw-786034 or gw786034b or gw-786034b or gw786034x or gw-786034x or hms3244c21 or hms3244c22 or hms3244d21 or hms3656l14 or hms3745g05 or hsdb-8210 or hy-10208 or indazolylpyrimidine-13 or jmc514632-compound-13 or kinome-3790 or mfcd11616589 or ncgc00188865-01 or ncgc00188865-02 or ncgc00188865-03 or	14624

No.	Query	Results
	ncgc00188865-10 or nsc752782 or nsc-752782 or nsc800839 or nsc-800839 or p-6706 or pazopanib$2 or pazopanibum$2 or q-101400 or q7157043 or s3012 or sb17290 or sb710468 or sb-710468 or sb710468a or sb-710468a or schembl588608 or sw218082-3 or tox21-113174 or tox21-113174-1 or votrient$2 or z1541638525).tw,kw,kf,ot,rn,dq. [PAZOPANIB TERMS]	
#212	rivoceranib/ or (1218779-75-9 or 5s371k6132 or 811803-05-1 or ab01274807-01 or ab01274807-02 or ac-27461 or akos024464453 or amy21302 or apatinib$2 or ba175030 or bcp02840 or c76598 or ccg-268625 or chembl3186534 or cs-0003200 or d11288 or db14765 or ds-7455 or dtxsid601024366 or ex-a1794 or gtpl7648 or hy-13342a or mfcd21648511 or ncgc00249393-01 or ncgc00249393-08 or nsc772886 or nsc-772886 or nsc799333 or nsc-799333 or q27262801 or rivoceranib$2 or s5248 or sb16590 or schembl1814966 or yn968d1 or yn-968d1).tw,kw,kf,ot,rn,dq. [RIVOCERANIB/APATINIB TERMS]	4983
#213	exp cancer chemotherapy/ or (chemotherap$ or chemo-therap$ or carcinochemotherap$ or chemoradiotherap$ or chemoradiation? or radiochemotherap$ or carcino-chemotherap$ or chemo-radiotherap$ or chemo-radiation? or radio-chemotherap$).ti,ab,kw,kf. [CHEMOTHERAPY TERMS]	1743405
#214	folinic acid/ or (leucovorin$ or 6-s-leucovorin or 6s-leucovorin or acide folinique or akos015961207 or bdbm50039121 or bpbio1-000766 or bspbio-000696 or bspbio-002218 or brd-a75919782-238-01-8 or calcium folinate or chebi-15640 or chembl1679 or chembl69905 or citrovoeum-factor or citrovorum-factor or d93089 or divk1c-000222 or dtxsid0048216 or einecs-200-361-6 or en300-27068710 or folinate folinic-acid-sf or folinic acid or formyltetrahydrofolate or fusilev$2 or gtpl4816 or gtpl6690 or hsdb-6544 or hy-17556 or idi1-000222 or kbio1-000222 or kbio2-001339 or kbio2-003907 or kbio2-006475 or kbio3-001438 or kbiogr-000461 or kbioss-001339 or lencovorin$2 or leucal$2 or leukovorin$2 or leukovoran$2 or leucovorin$2 or levoleucovorin$2 or levo-leucovorin$2 or mfcd00867488 or ninds-000222 or nsc3590 or prestwick0-000738 or prestwick1-000738 or prestwick2-000738 or prestwick3-000738 or q45435667 or q573i9dvlp or s5790 or schembl10068238 or schembl8349 or sd-204098 or s-leucovorin$2 or sleucovorin$2 or spectrum2-000116 or spectrum3-000479 or spectrum4-000031 or spectrum5-000910 or spectrum-000859 or spbio-000132 or spbio-002635 or sbi-0051427-p003 or welcovorin$2 or "formyltetrahydropteroylglutamic acid" or Q573I9DVLP or 58-05-9).ti,ab,kw,kf,ot,rn,dq. [LEUCOVORIN TERMS]	68089
#215	carboplatin/ or (carboplatin$2 or blastocarb$2 or boplatex$2 or carboplat$ or carbosin$2 or carbotec$2 or carplan$2 or CBDCA or (platinum adj3 (cis or diamin? or cyclobutanedicarboxylat? or dicarboxylatediammine)) or Dicarboxylatoplatinum or diamminecyclobutanedicarboxylatoplatinum or cycloplatin$ or erbakar$2 or ercar$2 or ifacap$2 or jm8 or jm-8 or kemocarb$2 or nsc-241240 or nsc241240 or nsc-201345 or nsc201345 or oncocarbin$2 or paraplatin$ or Platinwas$2 or Ribocarbo$2 or Neocarbo$2 or Nealorin$2 or HSDB-	129154

No.	Query	Results
	6957 or BG3F62OND5 or 41575-94-4).ti,ab,kw,kf,ot,rn,dq. [CARBOPLATIN TERMS]	
#216	exp paclitaxel/ or (paclitaxel$ or abraxane$2 or abraxus$2 or act02709 or act-02709 or acon1-002231 or anx-513 or anzatax$2 or apealea$2 or asotax$2 or bidd-pxr0046 or biotax$2 or bms-181339 or bms181339-01 or bms181339 or bms-181339-01 or bmy-45622 or bmy45622 or bspbio-000290 or capxol$2 or ccris-8143 or chembl428647 or chebi-45863 or coroflex-please$2 or coroxane$2 or cmap-000068 or cynviloq$2 or cypher-select$2 or dsstox-cid-3413 or dsstox-gsid-23413 or dsstox-rid-77016 or dhp107 or dhp-107 or dhp-208 or dhp208 or dts-301 or dts301 or ebetaxel$2 or empac$2 or endotag-1 or endotag1 or formoxol$2 or genaxol$2 or genetaxyl$2 or genexol$2 or gtpl2770 or hms2090d07 or hms2095o12 or hms2231a16 or hms3712o12 or hsdb-6839 or hunxol$2 or hy-b0015 or ifaxol$2 or ig-001 or ig001 or infinnium$2 or intaxel$2 or kbiogr-002509 or kbio2-002509 or kbio2-005077 or kbio2-007645 or kbio3-002987 or lep-etu$2 or lipopac$2 or liporaxel$2 or mbt-0206 or mbt0206 or medixel or mfcd00869953 or mitotax$2 or nanopac$2 or nanotax$2 or nanotaxel$2 or ncgc00164367-01 or nk-105 or nk105 or nsc-125973 or nsc-673089 or nsc125973 or nsc673089 or nscc-125973 or nova-12005 or oas-pac-100 or oaspac100 or oncogel$2 or onxal$2 or onxol$2 or p-ssmm-vip$2 or paclical$2 or pacitaxel$2 or paclical$2 or padexol$2 or pacligel$2 or paclitaxel$2 or pacliex$2 or paxceed$2 or paxene$2 or paxoral$2 or paxus$2 or pazenir$2 or plaxicel$2 or praxel$2 or qw-8184 or schembl3976 or sb-05 or sb05 or sdp-013 or sindaxel$2 or smr000857385 or sr-01000075350 or taycovit$2 or taxalbin$2 or taxane$ or taxocris$2 or taxol$2 or taxus$2 or tocosol$2 or xorane$2 or yewtaxan$2 or zinc96006020 or zisu$2 or P88XT4IS4D or 33069-62-4).ti,ab,kw,kf,ot,rn,dq. [PACLITAXEL TERMS]	230999
#217	docetaxel/ or (114915-20-7 or 114977-28-5 or 15h5577cqd or 699121phca or ab01273941-01 or ab01273941-02 or ac-383 or akos015960718 or akos024457953 or amy4356 or anx-514 or axtere$2 or bd164373 or bdbm36351 or bind014 or bind-014 or brd-k30577245-001-04-3 or brd-k30577245-341-01-9 or bs102 or bs-102 or chebi-4672 or chembl92 or cid148124 or ckd-810 or crlx301 or crlx-301 or cs-1144 or d07866 or d4102 or daxotel$2 or db01248 or dexotel$2 or docecad$2 or docefrez$2 or docetaxel$2 or docetaxelum$2 or docetaxol$2 or docetaxolum$2 or dtxcid8020464 or dtxsid0040464 or emdoc$2 or en300-123047 or ex-a1206 or gtpl6809 or hms2089k08 or hsdb-6965 or hy-b0011 or ks-1452 or l01cd02 or lit976 or lit-976 or mfcd00871399 or ncgc00181306-01 or ncgc00181306-02 or ncgc00181306-04 or ncgc00242509-01 or nsc628503 or nsc-628503 or nsc-759850 or oncodocel$2 or q-100074 or q420436 or rp56976 or rp-56976 or schembl4419 or sdp-014 or sid-530 or sr-01000003023 or sr-01000003023-5 or syp-0704a or taxanit$2 or taxespira$2 or taxoel$2 or taxoltere-metro or taxotel$2 or taxoter$2 or taxotere$2 or texot$2 or tox21-112781 or tox21-113088 or txl$2 or w-60384 or xrp6976 or xrp-6976 or xrp-6976l or z1546621742).tw,kw,kf,ot,rn,dq. [DOCETAXEL TERMS]	107752

No.	Query	Results
#218	cisplatin/ or (cisplatin$ or platinum$ or cismaplat$2 or (cis adj3 ($platinum or platinous)) or cis-platinum or cis-Platin or dichloroplatinum or diaminodichloroplatinum or diamminedichloroplatinum or dichlorodiammineplatinum or AI3-62048 or abiplatin or biocisplatinum or biocysplatinum or blastolem$2 or briplatin$2 or cddp-ti or cis-ddp or cisPt$ or CACP or CCRIS-221 or CDDP or DDPt or CP-Ethypharm or CPDC or CPDD or CPPD or (DDP and antitumor) or cisplatyl$2 or citoplatino$2 or cytoplatin$2 or cytosplat$2 or docistin$2 or elvecis$2 or kemoplat$2 or Fauldiscipla$2 or IA-call or LiPlaCis$2 or lederplatin$2 or lipoplatin$2 or "liposomal cisplatin" or mpi-5010 or mpi5010 or neoplatin$2 or niyaplat$2 or nk-801 or noveldexis$2 or nsc-119875 or nci-c55776 or platamine$2 or platamine-rtu or platiblastin$2 or platidiam$2 or platimine$2 or platinex$2 or platinil$2 or platino$2 or platinol$2 or platinolaq$2 or platinol-aq$2 or platinoxan$2 or platiran$2 or platistil$2 or platistin$2 or platosin$2 or "pronto platamine" or "Peyrone's chloride" or randa$2 or romcis$2 or sicatem$2 or spi-077 or tr-170 or tecnoplatin$2 or Q20Q21Q62J or 15663-27-1 or 26035-31-4 or 96081-74-2).ti,ab,kw,kf,ot,rn,dq. [CISPLATIN TERMS]	462622
#219	oxaliplatin/ or (oxaliplatin$2 or (oxalat$ adj3 platin$) or axiplatin$2 or bendaplatin$2 or crisapla$2 or croloxat$2 or dacotin$2 or dacplat$2 or ebeoxal$2 or elatofen$2 or eloxatin$ or elplat$2 or euroxaliplatin$2 or geneplatin$2 or gessedil$2 or heloxatin$2 or lipoxal$2 or mbp-426 or mbp426 or medoxa$2 or oksaliplatin$ or oplat$2 or oxalatoplatin$ or oxalatplatin$2 or oxali$2 or oxalip$2 or oxaliplan$2 or oxaliprol$2 or oxaliquid$2 or oxalisan$2 or oxalisin$2 or oxalizor$2 or oxaltic$2 or oxaltin$2 or oxamed$2 or oxaplamyl$2 or oxaviatin$2 or platox$2 or plaxitin$2 or rectoxal$2 or riboxatin$2 or rp-54780 or rp54780 or sinoxal$2 or sr-96669 or sr96669 or transplastin$2 or velminox$2 or xaliplat$2 or xoplan$2 or L-OHP-Cpd or 1-OHP or ACT-078 or ACT078 or CCRIS-9143 or NSC-266046 or 04ZR38536J or 61825-94-3).ti,ab,kw,kf,ot,rn,dq. [OXALIPLATIN TERMS]	91248
#220	capecitabine/ or (capecitabin$ or apecitab$2 or atubri$2 or bc164277 or bcpp000300 or bxeliri$2 or bs-1000 or cacit$2 or capcel$2 or capebina$2 or capecite$2 or capegard$2 or capezam$2 or capicet$2 or capiri$2 or capiibine$2 or captabin$2 or capnat$2 or capoda$2 or capostat$2 or capsy$2 or capxcel$2 or caxeta$2 or ccg-264841 or ccx-340 or cpecitabine$2 or cs-0768 or d01223 or db01101 or dsstox-cid-26451 or dsstox-gsid-46451 or dsstox-rid-81625 or dtxsid3046451 or ecansya$2 or ex-a835 or gtpl6799 or hsdb-7656 or hy-b0016 or j-700154 or k007 or m0297 or mfcd00930626 or mls003915642 or mls004774137 or ncgc00164569-01 or ncgc00164569-02 or ncgc00164569-05 or nsc-759853 or paxon$2 or q-200788 or q420207 or r-340 or rg-340 or r340 or rg340 or ro-09-1978 or ro-091978 or ro-09-1978 or ro-09-1978-000 or ro091978 or s1156 or s-1156 or sr-01000931255 or tox21-112198 or x-abine$2 or x-tabin$2 or xabine$2 or xecap$2 or xeliri$2 or xelocel$2 or xeloda$2 or xelox$2 or z1501480421 or zinc3806413 or 6804dj8z9u or 154361-50-9 or 958887-39-3).ti,ab,kw,kf,ot,rn,dq. [CAPECITABINE TERMS]	56604

No.	Query	Results
#221	(platinum adj1 (fluoropyrimidine or fluoro-pyrimidine) adj3 (doublet? or combin$ or chemotherap$ or chemo-therap$ or ((first or front) adj1 line?) or 1-LOT or 1L or therap$ or regimen? or expos$)).ti,ab,kw,kf,ot,rn,dq. [PLATINUM-FLUOROPYRIMIDINE DOUBLET TERMS]	254
#222	fluoropyrimidine/ or fluoropyrimidine derivative/ or (5-fluoropyrimidin$ or 5-fluoro-pyrimidine or pyrimidine-5-fluoro or (fluorinated adj1 pyrimidine) or a9048 or ac-453 or akos006346044 or am86123 or "bb 0260992" or c4h3fn2 or db-007051 or dtxsid80217851 or en300-6966105 or f14737 or ft-0601423 or mfcd06658278 or q42859845 or w-203496 or zinc1845840 or 675f218 or L36X4TD47C or 675-21-8).ti,ab,kw,kf,ot,rn,dq. [FLUOROPYRIMIDINE TERMS]	8673
#223	fluorouracil/ or fluorouracil derivative/ or (fluorouracil$ or fluroblastin$ or 1upf or 5-Faracil or 5-Fluoracil or 5-Fluoracyl or 5-fluoro-uracil or 5-fluoro-uracil or 5-Fluoroblastin or 5-fluorouacil or 5-Ftouracyl or 5-FU or 5FU or 5F-uracil or Adrucil$2 or AI3-25297 or Arumel$2 or BSPBio-002048 or Cancersil$2 or Carac$2 or Carzonal$2 or CHEBI-46345 or CHEMBL185 or Cinco-FU or CCRIS-2582 or DSSTox-CID-634 or DSSTox-GSID-20634 or DSSTox-RID-75705 or Efudex$2 or Efudix$2 or Efurix$2 or EINECS-200-085-6 or Effluderm$2 or Fluoroblastin$2 or Fluoro-Uracil$2 or Fluoro-uracile$2 or Fluoro-uracilo$2 or Fluoroplex$2 or Fluorouracile$2 or Fluorouracilo$2 or Fluorouracilum$2 or Fluorouracilum$2 or Fluracil$2 or Fluracilum$2 or Fluri$2 or Fluril$2 or Fluuro-Uracil$2 or Fluorouracilo$2 or Fluroblastin$2 or Fluro-Uracil$2 or Ftoruracil$2 or GTPL4789 or HSDB 3228 or IDI1-000054 or Kecimeton$2 or KBio1-000054 or KBio2-001321 or KBio2-003889 or KBio2-006457 or KBioGR-001253 or KBioSS-001321 or Lopac-F-6627 or Lopac0-000536 or MFCD00006018 or MLS000069498 or MLS002415705 or NCGC00015442-01 or NCGC00015442-02 or NCGC00015442-03 or NCGC00015442-04 or NCGC00015442-05 or NCGC00015442-06 or NCGC00015442-07 or NCGC00015442-08 or NCGC00015442-09 or NCGC00015442-10 or NCGC00015442-11 or NCGC00015442-12 or NCGC00015442-15 or NCGC00015442-16 or NSC-19893 or NSC757036 or NSC816997 or Phtoruracil$2 or Pharmakon1600-01500305 or Phthoruracil$2 or Queroplex$2 or Ro-2-9757 or S1209 or 191047-64-0 or 191047-65-1 or 191115-88-5 or U3P01618RT or 51-21-8).ti,ab,kw,kf,ot,rn,dq. [FLUOROURACIL TERMS]	250449
#224	irinotecan/ or (irinotecan$ or ab00698464-07 or ab00698464-09 or ab00698464-10 or ab00698464-11 or ab00698464-12 or ab00698464-13 or ab00698464-14 or ac-7469 or akos015894969 or amy4227 or as-14323 or bdbm50128267 or bcp02860 or bcp9000793 or biotecan$2 or brd-k08547377-003-02-4 or campto$2 or camptosar$2 or chebi-80630 or chembl481 or cs-1138 or cpt-11 or cpt11 or d08086 or db00762 or dq2805 or en300-708800 or gtpl6823 or hsdb-7607 or ihl-305 or ihl305 or irinophore-c$2 or irinotel$2 or mfcd00866307 or ncgc00178697-02 or ncgc00178697-05 or nsc-728073 or nsc728073 or nk012-compound or q412197 or s1198 or schembl4034 or sn38 or sn-38 or sn-38-11 or sn3811 or topotecin$2 or u-101440e or u101440e or zinc1612996 or	68902

No.	Query	Results
	"7673326042" or 100286-90-6 or 97682-44-5).ti,ab,kw,kf,ot,rn,dq. [IRINOTECAN TERMS]	
#225	"gimeracil plus oteracil potassium plus tegafur"/ or (teysuno$2 or (tegafur adj4 gimeracil adj4 oteracil) or ((S-1 or S1) adj3 combination) or TS-1-cpd or S-1-cpd or TS-1 or TS1 or BMS247616 or BMS-247616 or S1-tegafur-oxonate or S1-fluoropyrimidine-oxoonate).ti,ab,kw,kf,ot,rn,dq. [S1 COMBINATION TERMS]	14745
#226	tegafur/ or (1189456-27-6 or 1548r74nsz or 17902-23-7 or 82294-77-7 or a812417 or ab00572620-15 or ac-2112 or akos000121279 or as-13528 or atillon$2 or bcp22714 or bp-58663 or brn-0525766 or c8h9fn2o3 or ccg-100959 or ccg-50110 or ccris-2762 or chebi-32188 or chembl20883 or citofur$2 or coparogin$2 or cs-1128 or d01244 or db09256 or dtxsid001009966 or einecs-241-846-2 or en300-21668 or exonal$2 or f-5-fu or fental$2 or florafur$2 or fluorafur$2 or fluorofur$2 or franrose$2 or franroze$2 or ft-0653732 or ft-0654170 or ft-0674829 or ft-0693965 or ft207 or ft-207 or ftorafur$2 or fulaid$2 or fulfeel$2 or furafluor$2 or furflucil$2 or furofutran$2 or futraful$2 or gtpl10513 or hms1665i05 or hms2051b15 or hms2090k04 or hms2232e05 or hms3371h21 or hms3393b15 or hms3654p13 or hms3715d14 or hy-17400 or lamar$2 or lifril$2 or mfcd00012351 or mjf12264 or mjf-12264 or mls000069497 or mls000759414 or mls001076521 or mls001424119 or nc00209 or ncgc00159418-02 or ncgc00159418-04 or ncgc00159418-05 or neberk$2 or nitobanil$2 or nsc148958 or nsc-148958 or opera-id-1726 or phthorafur$2 or q-201784 or q413370 or racemic-ftorafur or riol$2 or schembl4552 or sfsp$2 or sf-sp or sinoflurol$2 or smr000059106 or sr-01000639511 or sr-01000639511-1 or sr-01000639511-4 or sunfral$2 or sunfural$2 or tefsiel-c or tegaful$2 or tegafur$2 or tegafurum$2 or ts-1 or uftoral$2 or upcmld-dp063 or utefos$2 or z104508106).tw,kw,kf,ot,rn,dq. [TEGAFUR TERMS]	21633
#227	ramucirumab/ or (1121b or 947687-13-0 or 947687-13-0 or a168 or a-168 or cyramza$2 or d99yvk4l0x or hlx12 or hlx-12 or hsdb-8314 or imc1121b or imc1121-b or imc-1121b or imc-1121-b or l01xc21 or ly3009806 or ly-3009806 or nsc-749128 or pbp2001 or pbp-2001 or ramucirumab$2 or ramucirumabum$2 or ro7234952 or ro-7234952).ti,ab,kw,kf,ot,rn,dq. [RAMUCIRUMAB TERMS]	8951
#228	panitumumab/ or (339177-26-3 or 6a901e312a or abenix$2 or abx-egf or amg954 or amg-954 or e7-6-3 or l01xc08 or moab-abx-egf or moab-e7-6-3 or monoclonal-antibody-abx-egf or monoclonal-antibody-e7-6-3 or nsc-742319 or panitumab$2 or panitumumab$2 or panitumumabum$2 or panitunumab$2 or vectibex$2 or vectibix$2).ti,ab,kw,kf,ot,rn,dq. [PANITUMUMAB TERMS]	13491
#229	nimotuzumab/ or (6ns400bxkh or 780758-10-3 or 828933-51-3 or biomab-egfr or diacim$2 or h-r3 or nimotuzumab$2 or osag-101 or radiotheracim$2 or theracim$2 or theraloc$2).ti,ab,kw,kf,ot,rn,dq. [NIMOTUZUMAB TERMS]	2521

No.	Query	Results
#230	matuzumab/ or (339186-68-4 or emd7200 or emd-7200 or emd72000 or emd-72000 or kgaa$2 or matuzumab$2 or merck-kgaa or mg4m3qb242).ti,ab,kw,kf,ot,rn,dq. [MATUZUMAB TERMS]	51357
#231	bevacizumab/ or (12-igg1 or 1438851-35-4 or 216974-75-3 or 2s9zzm9q9v or abevmy$2 or abp215 or abp-215 or ainex$2 or altuzan$2 or alymsys$2 or ankeda$2 or anti-vegf or askb1202 or ask-b1202 or avastin$2 or avegra$2 or aybintio$2 or ba1101 or ba-1101 or bambevi$2 or bat1706 or bat-1706 or bcd021 or bcd-021 or bevacizumab$2 or bevacizumabum$2 or bevagen$2 or bevatas$2 or bevax$2 or bevz92 or bevz-92 or bi695502 or bi-695502 or bow030 or bow-030 or boyounuo$2 or bp01 or bp-01 or bp102 or bp-102 or bryxta$2 or bs503a or bs-503a or bxt2316 or bxt-2316 or byvasda$2 or cbt124 or cbt-124 or chs305 or chs-305 or chs5217 or chs-5217 or cizumab$2 or ctp16 or ct-p16 or equidacent$2 or fkb238 or fkb-238 or gb222 or gb-222 or gbs004 or gbs-004 or hanbeitai$2 or hd204 or hd-204 or hlx04 or hlx-04 or hot1010 or hot-1010 or hsdb-8080 or ibi305 or ibi-305 or idb0072 or idb-0072 or intp24 or intp-24 or ipique$2 or jhl1149 or jhl-1149 or js501 or js-501 or jy028 or jy-028 or krabeva$2 or kyomarc$2 or l01xc07 or lextemy$2 or "lumiere-(drug)" or ly01008 or ly-01008 or mabionvegf$2 or mb02 or mb-02 or mil60 or mil-60 or mvasi$2 or myl14020 or myl-14020 or myl1402o or myl-1402o or nsc704865 or nsc-704865 or onbevzi$2 or ons1045 or ons-1045 or ons5010 or ons-5010 or oyavas$2 or pf06439535 or pf-06439535 or pf6439535 or pf-6439535 or pmc901 or pmc-901 or pobevcy$2 or pro169 or pro-169 or pusintin$2 or ql1101 or ql-1101 or r435 or r-435 or rg435 or rg-435 or rhumab$2 or ro4876646 or ro-4876646 or rph001 or rph-001 or rtpr023 or r-tpr-023 or sb8 or sb-8 or sct501 or sct-501 or sct510 or sct-510 or sibp04 or sibp-04 or stc103 or stc-103 or stivant$2 or tab008 or tab-008 or tab014 or tab-014 or tot102 or tot-102 or trs003 or trs-003 or tx16 or tx-16 or vegzelma$2 or versavo$2 or zirabev$2 or zrc113 or zrc-113 or zybev$2).ti,ab,kw,kf,ot,rn,dq. [BEVACIZUMAB TERMS]	128013
#232	dostarlimab/ or (2022215-59-2 or anb011 or anb-011 or dostarlimab$2 or gsk4057190 or gsk-4057190 or jemperli$2 or p0gvq9a4s5 or tsr042 or tsr-042 or wbp285 or wbp-285).ti,ab,kw,kf,ot,rn,dq. [DOSTARLIMAB TERMS]	925
#233	(chembl5095383 or retlirafusp-alfa or shr1701 or shr-1701).ti,ab,kw,kf,ot,rn,dq. [SHR-1701 TERMS]	56
#234	domvanalimab/ or (2368219-35-4 or 45x7ou8c4j or ab154 or ab-154 or domvanalimab$2 or who-11559).ti,ab,kw,kf,ot,rn,dq. [DOMVANALIMAB TERMS]	101
#235	zimberelimab/ or (2259860-24-5 or ab122 or ab-122 or gls010 or gls-010 or gs0122 or gs-0122 or wbp3055 or wbp-3055 or who-11413 or zbl7o904il or zimberelimab$2).ti,ab,kw,kf,ot,rn,dq. [ZIMBERELIMAB TERMS]	225
#236	lapatinib/ or (0vua21238f or 1092929-10-6 or 1210608-87-9 or 1xkk or 231277-92-2 or 388082-78-8 or 437755-78-7 or 913989-15-8 or a25184	21624

No.	Query	Results
	or ab01273965-01 or ab01273965-02 or ab01273965-03 or ab01273965-04 or ab01273965-05 or ac-1314 or akos005145766 or am20090641 or as-14065 or bc164610 or bcp01874 or bcp9000837 or bcp9000838 or bcpp000188 or bcpp000189 or bdbm5445 or brd-k19687926-001-01-7 or brd-k19687926-379-02-5 or c29h26clfn4o4s or ccg-270133 or chebi-49603 or chembl554 or cid-208908 or d08108 or db01259 or dtxcid5026675 or dtxsid7046675 or en300-117254 or ex-a402 or fmm$2 or ft-0659650 or gsk572016 or gsk-572016 or gtpl5692 or gw2016 or gw-2016 or gw282974x or gw-282974x or gw572016 or gw-572016 or gw572016f or gw-572016f or gw-572016x or hms2089h10 or hms3244n06 or hms3244n10 or hms3244n14 or hms3744k11 or hsdb-8209 or hy-50898 or kinome-3684 or kinome-3685 or l0360 or lapatinib$2 or mfcd09264194 or ncgc00167507-01 or ncgc00167507-02 or ncgc00167507-03 or ncgc00167507-04 or ncgc00167507-09 or ns00003012 or nsc745750 or nsc-745750 or nsc800780 or nsc-800780 or q-101353 or q420323 or sb16918 or schembl8100 or sr-05000001472-1 or sw199101-5 or tox21-112505 or tykerb$2 or tyverb$2).ti,ab,kw,kf,ot,rn,dq. [LAPATINIB TERMS]	
#237	(857890-39-2 or a825653 or ac-25047 or aiv007 or aiv-007 or akos025401742 or amy9240 or as-16203 or bcp01799 or bcp9000633 or bcpp000247 or bdbm50331094 or bl164616 or c21h19cln4o4 or ccg-264842 or chebi-85994 or chembl1289601 or cs-0109 or d09919 or db09078 or dtxcid50117096 or dtxsid50194605 or e7080 or e-7080 or ee083865g2 or en300-7418350 or er203492-00 or er-203492-00 or ex-a249 or ft-0700727 or gtpl7426 or hms3244a07 or hms3244a08 or hms3244b07 or hms3654a14 or hy-10981 or j-513372 or kisplyx$2 or l01xe29 or lenvatinib$2 or lenvatinibum$2 or lenvima$2 or lev$2 or mfcd16038644 or mk7902 or mk-7902 or mls006011239 or ncgc00263198-01 or ncgc00263198-04 or ncgc00263198-07 or ns00069283 or nsc755980 or nsc-755980 or nsc800781 or nsc-800781 or q6523413 or ro7071618 or ro-7071618 or s1164 or sb16580 or schembl864638 or smr004702999 or sw219259-1 or z2235801899).ti,ab,kw,kf,ot,hw,rn,nm. [LENVATINIB TERMS]	8193324
#238	lenvatinib/ or (857890-39-2 or a825653 or ac-25047 or aiv007 or aiv-007 or akos025401742 or amy9240 or as-16203 or bcp01799 or bcp9000633 or bcpp000247 or bdbm50331094 or bl164616 or c21h19cln4o4 or ccg-264842 or chebi-85994 or chembl1289601 or cs-0109 or d09919 or db09078 or dtxcid50117096 or dtxsid50194605 or e7080 or e-7080 or ee083865g2 or en300-7418350 or er203492-00 or er-203492-00 or ex-a249 or ft-0700727 or gtpl7426 or hms3244a07 or hms3244a08 or hms3244b07 or hms3654a14 or hy-10981 or j-513372 or kisplyx$2 or l01xe29 or lenvatinib$2 or lenvatinibum$2 or lenvima$2 or lev$2 or mfcd16038644 or mk7902 or mk-7902 or mls006011239 or ncgc00263198-01 or ncgc00263198-04 or ncgc00263198-07 or ns00069283 or nsc755980 or nsc-755980 or nsc800781 or nsc-800781 or q6523413 or ro7071618 or ro-7071618 or s1164 or sb16580 or schembl864638 or smr004702999 or sw219259-1 or z2235801899).ti,ab,kw,kf,ot,rn,dq. [LENVATINIB TERMS]	6298339

No.	Query	Results
#239	ipatasertib/ or (0rf or 1001264-89-6 or 524y3ib4hq or ac-28420 or akos025396463 or as-17027 or bcp0726000195 or bcp9000712 or bdbm50398379 or ccg-269312 or chebi-95089 or chembl2177390 or cs-0975 or d10641 or db11743 or dtxsid101025595 or ex-a2077 or gdc0068 or gdc-0068 or gdc0068-di-hcl or gdc-0068-di-hcl or gtpl7887 or hy-15186 or ipatasertib$2 or mfcd22124514 or ncgc00346714-01 or ns00072927 or nsc767898 or nsc-767898 or nsc781451 or nsc-781451 or nsc800986 or nsc-800986 or nsc832484 or nsc-832484 or q27078088 or rg7440 or rg-7440 or rg-7440-di-hcl or s2808 or schembl191659).ti,ab,kw,kf,ot,rn,dq. [IPATASERTIB TERMS]	1189
#240	or/186-226 [INTERVENTION & COMPARATORS & CHEMO TERMS]	3121194
#241	Randomized controlled trial/ or Controlled clinical study/ or randomization/ or intermethod comparison/ or double blind procedure/ or human experiment/ or (compare or compared or comparison or trial).ti. or ((evaluated or evaluate or evaluating or assessed or assess) and (compare or compared or comparing or comparison)).ab. or (random$ or placebo or (open adj label) or ((double or single or doubly or singly) adj (blind or blinded or blindly)) or parallel group$1 or (crossover or cross over) or ((assign$ or match or matched or allocation) adj5 (alternate or group$1 or intervention$1 or patient$1 or subject$1 or participant$1)) or (assigned or allocated) or (controlled adj7 (study or design or trial)) or (volunteer or volunteers)).ti,ab.	12173464
#242	(Cross-sectional study/ not (randomized controlled trial/ or controlled clinical study/ or controlled study/ or randomi?ed controlled.ti,ab. or control group$1.ti,ab.)) or ((((case adj control$) and random$) not randomi?ed controlled) or (nonrandom$ not random$) or "Random field$" or (random cluster adj3 sampl$)).ti,ab. or (Systematic review not (trial or study)).ti. or ((review.ab. and review.pt.) not trial.ti.) or ("we searched".ab. and (review.ti. or review.pt.)) or ("update review" or (databases adj4 searched)).ab. or ((rat or rats or mouse or mice or swine or porcine or murine or sheep or lambs or pigs or piglets or rabbit or rabbits or cat or cats or dog or dogs or cattle or bovine or monkey or monkeys or trout or marmoset$1).ti. and animal experiment/) or (Animal experiment/ not (human experiment/ or human/))	6389733
#243	241 not 242 [RCTs – Embase sensitive Filter – Cochrane HSSS, 2019]	11058344
#244	185 and 240 and 243	12106
#245	(exp adolescent/ or exp child/ or exp fetus/) not (exp adult/ and (exp adolescent/ or exp child/ or exp fetus/)) [CHILDREN <18 REMOVE]	4551042
#246	(exp animal/ or exp animal experimentation/ or exp animal model/ or exp animal experiment/ or nonhuman/ or exp vertebrate/) not (exp human/ or exp human experimentation/ or exp human experiment/) [ANIMAL STUDIES ONLY - REMOVE - EMBASE]	12571890

No.	Query	Results
#247	(editorial or note or short survey or tombstone).pt. or (letter.pt. not randomized controlled trial/) [OPINION PIECES REMOVE - Embase]	5397947
#248	conference abstract.pt. [CONFERENCE ABSTRACTS]	5047017
#249	244 not (245 or 246 or 247) [CHILD <19, ANIMAL STUDIES and OPINION PUBLICATIONS - REMOVED - Embase]	11981
#250	248 and 249 [CONFERENCE ABSTRACTS ONLY]	2482
#251	limit 250 to yr="2022 -Current"	385
#252	249 not 248 [CONFERENCE ABSTRACTS REMOVED]	9499
#253	251 or 252 [LAST 2 YRS OF ABSTRACTS RETAINED - Embase]	9884
#254	253 use oemezd [Embase results]	4604
#255	Stomach Neoplasms/ or (Esophageal Neoplasms/ and exp Esophagogastric Junction/)	132993
#256	Neoplasm Metastasis/ or Neoplasm Recurrence, Local/	503214
#257	((((stomach? or gastric$ or cardia or cardiac or antrum? or antral$ or fundus$ or pyloric$ or pylorus$ or ventricul$ or linitis plastica or leather-bottle or ((stomach? or gastric$) and (GC or GEJ))) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$)) or ((stomach? or gastric$) adj3 SCC) or ((esophag$ or oesophag$ or esophagogastric$ or esophago-gastric$ or oesophagogastric$ or oesophago-gastric$ or gastroesophageal$ or gastro-esophageal$ or gastrooesophageal$ or gastro-oesophageal$ or cardio-esophageal$ or cardio-oesophageal$ or cardioesophageal$ or cardiooesophageal$ or EG or GE) adj3 (junction$ or sphincter$) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$))) adj4 ((meta adj sta$) or metastas$ or metastatic$ or recur$ or secondar$ or relaps$ or advance$ or inoperab$ or disseminat$ or spread or migration or lethal$ or incurable or noncurable or non-curable or uncurable or progressive or terminal or invasive$ or aggressive$ or (late? adj2 stage$) or ((stage? or grade? or type?) adj2 (3a$ or 3b$ or 3c$ or III$ or 4a$ or 4b$ or IV$)) or	71583

No.	Query	Results
	"stage 3" or "stage 4" or met or mets or N1? or N2? or N3? or pN1? or pN2? or pN3?)).ti,ab,kw. [Metastatic GC/GEJ TERMS]	
#258	(255 and 256) or 257 [GC-GEJ TERMS]	76784
#259	(tislelizumab$2 or tirelizumab$2 or bgb-a317 or bgba317 or bgn-1 or bgn1 or jhl-2108 or jhl2108 or vdt-482 or vdt482 or 1858168-59-8 or 0kvo411b3n).ti,ab,kw. [TISLELIZUMAB TERMS]	1319
#260	Immune Checkpoint Inhibitors/ or ((Programmed Cell Death 1 Receptor/ or Programmed Cell Death 1 Ligand 2 Protein/) and (inhibit$ or block?).ti,ab,kw,kf.) or ((immune$ adj3 checkpoint? adj3 (inhibit$ or block?)) or (((programmed adj3 death) or PD-1 or PD-1-PD-L1 or PDCD1) adj3 (ligand? or inhibit$ or block?)) or ((B7-H1 or B7H1 or "B7 homolog 1" or CD274 or CD273 or PDCD1LG1 or PDCD1LG2) adj3 (antigen? or protein?)) or ((Cytotoxic-T-Lymphocyte-Associated Protein-4 Inhibitor? or CTLA-4) adj3 (inhibit$ or block?)) or (ICI? and "Immun$ Checkpoint") or BMS-1 or EX-A947 or HY-19991 or J-690233 or MFCD28978741 or s7911 or D000082082 or SCHEMBL16555159 or ZINC230477930 or 1675201-83-8).ti,ab,kw. [IMMUNE CHECKPOINT PROTEINS TERMS]	136277
#261	Immunotherapy/ or Radioimmunotherapy/ or Antibodies, Monoclonal/ or (immunotherap$ or immuno-therap$ or (((biologic$ adj3 response? adj3 modifier?) or BRM or immunogenic$ or immunologic$ or immuno-genic$ or immuno-logic$ or radioimmunotherapy$ or radio-immunotherap$ or ((monoclonal$ or clonal$ or hybridoma$) adj2 antibod$)) adj3 (therap$ or intervention? or treat$))).ti,ab,kw. [IMMUNOTHERAPY TERMS]	894311
#262	Molecular Targeted Therapy/ or ((molecular$ or neoplas$ or cancer$ or tumo?r$ or carcinoma$) adj3 target$ adj3 therap$).ti,ab,kw. [TARGETED THERAPY TERMS]	187317
#263	(atezolizumab$2 or anti-PDL1 or MPDL-3280A or MPDL3280A or RG-7446 or RG7446 or ro-5541267 or ro5541267 or Tecentriq$2 or Tecntriq$2 or 1380723-44-3 or 0INE2SFD9E or 52CMI0WC3Y).ti,ab,kw. [ATEZOLIZUMAB TERMS]	12948
#264	(avelumab$2 or bavencio$2 or msb-0010682 or msb-0010718c or msb0010682 or msb0010718c or msb-10682 or msb-10718c or msb10682 or msb10718c or pf-06834635 or pf-6834635 or pf06834635 or pf6834635 or KXG2PJ551I or 1537032-82-8).ti,ab,kw. [AVELUMAB TERMS]	3518
#265	(camrelizumab$2 or "anti-pd-1 monoclonal antibody" or shr-1210 or shr1210 or carilizumab$2 or carrelizumab$2 or 73096E137E or 1798286-48-2).ti,ab,kw. [CAMRELIZUMAB TERMS]	2922
#266	(1428935-60-7 or 28x28x9okv or anti-b7h1-monoclonal-antibody or durvalumab$2 or durvalumabum$2 or imfinzi$2 or l01xc28 or medi4736 or medi-4736).ti,ab,kw. [DURVALUMAB TERMS]	7170

No.	Query	Results
#267	Ipilimumab/ or (ipilimumab$2 or bms-734016 or bms734016 or cs-1002 or cs1002 or ibi-310 or ibi310 or mdx-ctla-4 or mdx-010 or mdx-101 or mdx010 or mdx101 or strentarga$2 or yervoy$2 or 6T8C155666 or 477202-00-9).ti,ab,kw. [IPILIMUMAB TERMS]	34671
#268	Nivolumab/ or (nivolumab$2 or bms-936558 or bms-986213 or bms-986298 or cmab819 or bms936558 or bms986213 or bms986298 or cmab-819 or mdx-1106 or mdx1106 or ono-4538 or ono4538 or opdivo$2 or opdualag$2 or 31YO63LBSN or 946414-94-4).ti,ab,kw. [NIVOLUMAB TERMS]	55238
#269	(pembrolizumab$2 or keytruda$2 or lambrolizumab$2 or mk3475 or mk-1308a or mk-3475 or mk7684a or sch-900475 or sch900475 or "keylynk-010 component" or DPT0O3T46P or 1422183-02-5 or 1374853-91-4).ti,ab,kw. [PEMBROLIZUMAB TERMS]	32744
#270	(2072873-06-2 or 8fu7fq8upk or ibi308 or ibi-308 or sintilimab$2 or tyvyt$2 or who-10801).ti,ab,kw. [SINTILIMAB TERMS]	1605
#271	(1924598-82-2 or 8jxn261vva or js001 or js-001 or tab001 or tab-001 or teripalimab$2 or toripalimab$2 or treipril$2 or treprizumab$2 or tripleitriumab$2 or triprizumab$2 or tuoyi$2 or who-10820).ti,ab,kw. [TORIPALIMAB TERMS]	1078
#272	(2079108-44-2 or 2226345-85-1 or 2y3t5if01z or aex1188 or aex-1188 or incmga00012 or incmga-00012 or incmga0012 or incmga-0012 or mga012 or mga-012 or retifanlimab$2 or zynyz$2).ti,ab,kw. [RETIFANLIMAB TERMS]	120
#273	(2245725-04-4 or l62556gpxb or mgd013 or mgd-013 or tebotelimab$2).ti,ab,kw. [TEBOTELIMAB TERMS]	36
#274	(2394841-59-7 or 6fyg1ds4nw or ak104 or ak-104 or cadonilimab$2 or who-11581).ti,ab,kw. [CADONILIMAB TERMS]	86
#275	(2231029-82-4 or hlx10 or hlx-10 or s3gqz2k36v or serplulimab$2).ti,ab,kw. [SERPLULIMAB TERMS]	132
#276	(2256084-03-2 or 90iqr2i6tr or cs1001 or cs-1001 or sugemalimab$2 or wbp315 or wbp-315 or wbp3155 or wbp-3155).ti,ab,kw. [SUGEMALIMAB TERMS]	127
#277	(1496553-00-4 or claudiximab$2 or imab362 or imab-362 or tf5mpq8wgy or zolbetuximab$2).ti,ab,kw. [ZOLBETUXIMAB TERMS]	254
#278	(1952272-74-0 or bemarituzumab$2 or fpa144 or fpa-144 or rjw23bq0kw).ti,ab,kw. [BEMARITUZUMAB TERMS]	84
#279	Cetuximab/ or (205923-56-4 or abp494 or abp-494 or c225 or c-225 or c225-03 or c-22503 or c-225-03 or cdp1 or cdp-1 or cetuximab$2 or cetuximabum$2 or ch225 or ch-225 or chimeric-anti-egfr-monoclonal-	48474

No.	Query	Results
	antibody or cmab009 or cmab-009 or ctp15 or ct-p15 or dtxsid0040830 or erbitux$2 or hsdb-7454 or imc225 or imc-225 or imcc225 or imcc-225 or imc-c225 or kl140 or kl-140 or l01xc06 or ly2939777 or ly-2939777 or mab-c225 or moab-c225 or nsc714692 or pqx0d8j21j or sti001 or sti-001).ti,ab,kw. [CETUXIMAB TERMS]	
#280	(1133766-06-9 or metmab$2 or metma-b or ms1j9720wc or onartuzumab$2 or pro143966 or pro-143966 or pro-143996 or pro143996 or ro5490258 or ro-5490258).ti,ab,kw. [ONARTUZUMAB TERMS]	347
#281	(51wew898ij or 872514-65-3 or amg102 or amg-102 or rilotumumab$2).ti,ab,kw. [RILOTUMUMAB TERMS]	259
#282	(1518996-49-0 or 571045eim4 or andecaliximab$2 or gs5745 or gs-5745).ti,ab,kw. [ANDECALIXIMAB TERMS]	135
#283	(444731-52-6 or 635702-64-6 or 790713-33-6 or 7rn5dr86ck or a19406 or a839572 or ab01273967-01 or ab01273967-02 or ab01273967-05 or ab01273967-06 or ac-8522 or akos005145819 or am20090659 or ar-270-43507999 or armala$2 or as-11066 or bcp01839 or bcp9001053 or bcpp000129 or bd164238 or bdbm26474 or brd-k74514084-003-02-7 or ccg-265010 or chebi-71219 or chembl477772 or cid-10113978 or cs-0269 or db06589 or dtxcid1028659 or dtxsid8048733 or en300-57325 or ex-a1241 or ft-0659928 or ft-0684794 or gtpl5698 or gw780604 or gw-780604 or gw-78603 or gw786034 or gw7-86034 or gw-786034 or gw786034b or gw-786034b or gw786034x or gw-786034x or hms3244c21 or hms3244c22 or hms3244d21 or hms3656l14 or hms3745g05 or hsdb-8210 or hy-10208 or indazolylpyrimidine-13 or jmc514632-compound-13 or kinome-3790 or mfcd11616589 or ncgc00188865-01 or ncgc00188865-02 or ncgc00188865-03 or ncgc00188865-10 or nsc752782 or nsc-752782 or nsc800839 or nsc-800839 or p-6706 or pazopanib$2 or pazopanibum$2 or q-101400 or q7157043 or s3012 or sb17290 or sb710468 or sb-710468 or sb710468a or sb-710468a or schembl588608 or sw218082-3 or tox21-113174 or tox21-113174-1 or votrient$2 or z1541638525).ti,ab,kw. [PAZOPANIB TERMS]	7544
#284	(1218779-75-9 or 5s371k6132 or 811803-05-1 or ab01274807-01 or ab01274807-02 or ac-27461 or akos024464453 or amy21302 or apatinib$2 or ba175030 or bcp02840 or c76598 or ccg-268625 or chembl3186534 or cs-0003200 or d11288 or db14765 or ds-7455 or dtxsid601024366 or ex-a1794 or gtpl7648 or hy-13342a or mfcd21648511 or ncgc00249393-01 or ncgc00249393-08 or nsc772886 or nsc-772886 or nsc799333 or nsc-799333 or q27262801 or rivoceranib$2 or s5248 or sb16590 or schembl1814966 or yn968d1 or yn-968d1).ti,ab,kw. [RIVOCERANIB/APATINIB TERMS]	3781
#285	Induction Chemotherapy/ or Consolidation Chemotherapy/ or Maintenance Chemotherapy/ or Antineoplastic Combined Chemotherapy Protocols/ or exp Chemotherapy, Adjuvant/ or Chemoradiotherapy/ or (chemotherap$ or chemo-therap$ or carcinochemotherap$ or chemoradiotherap$ or chemoradiation? or radiochemotherap$ or	1837236

No.	Query	Results
	carcino-chemotherap$ or chemo-radiotherap$ or chemo-radiation? or radio-chemotherap$).ti,ab,kw. [CHEMOTHERAPY TERMS]	
#286	exp Leucovorin/ or (leucovorin$ or 6-s-leucovorin or 6s-leucovorin or acide folinique or akos015961207 or bdbm50039121 or bpbio1-000766 or bspbio-000696 or bspbio-002218 or brd-a75919782-238-01-8 or calcium folinate or chebi-15640 or chembl1679 or chembl69905 or citrovoeum-factor or citrovorum-factor or d93089 or divk1c-000222 or dtxsid0048216 or einecs-200-361-6 or en300-27068710 or folinate folinic-acid-sf or folinic acid or formyltetrahydrofolate or fusilev$2 or gtpl4816 or gtpl6690 or hsdb-6544 or hy-17556 or idi1-000222 or kbio1-000222 or kbio2-001339 or kbio2-003907 or kbio2-006475 or kbio3-001438 or kbiogr-000461 or kbioss-001339 or lencovorin$2 or leucal$2 or leukovorin$2 or leukovoran$2 or leucovorin$2 or levoleucovorin$2 or levo-leucovorin$2 or mfcd00867488 or ninds-000222 or nsc3590 or prestwick0-000738 or prestwick1-000738 or prestwick2-000738 or prestwick3-000738 or q45435667 or q573i9dvlp or s5790 or schembl10068238 or schembl8349 or sd-204098 or s-leucovorin$2 or sleucovorin$2 or spectrum2-000116 or spectrum3-000479 or spectrum4-000031 or spectrum5-000910 or spectrum-000859 or spbio-000132 or spbio-002635 or sbi-0051427-p003 or welcovorin$2 or "formyltetrahydropteroylglutamic acid" or Q573I9DVLP or 58-05-9).ti,ab,kw. [LEUCOVORIN TERMS]	67520
#287	Carboplatin/ or (Carboplatin$2 or blastocarb$2 or boplatex$2 or carboplat$ or carbosin$2 or carbotec$2 or carplan$2 or CBDCA or (platinum adj3 (cis or diamin? or cyclobutanedicarboxylat? or dicarboxylatediammine)) or Dicarboxylatoplatinum or diamminecyclobutanedicarboxylatoplatinum or cycloplatin$ or erbakar$2 or ercar$2 or ifacap$2 or jm8 or jm-8 or kemocarb$2 or nsc-241240 or nsc241240 or nsc-201345 or nsc201345 or oncocarbin$2 or paraplatin$ or Platinwas$2 or Ribocarbo$2 or Neocarbo$2 or Nealorin$2 or HSDB-6957 or BG3F62OND5 or 41575-94-4).ti,ab,kw. [CARBOPLATIN TERMS]	128900
#288	exp Paclitaxel/ or (paclitaxel$ or abraxane$2 or abraxus$2 or act02709 or act-02709 or acon1-002231 or anx-513 or anzatax$2 or apealea$2 or asotax$2 or bidd-pxr0046 or biotax$2 or bms-181339 or bms181339-01 or bms181339 or bms-181339-01 or bmy-45622 or bmy45622 or bspbio-000290 or capxol$2 or ccris-8143 or chembl428647 or chebi-45863 or coroflex-please$2 or coroxane$2 or cmap-000068 or cynviloq$2 or cypher-select$2 or dsstox-cid-3413 or dsstox-gsid-23413 or dsstox-rid-77016 or dhp107 or dhp-107 or dhp-208 or dhp208 or dts-301 or dts301 or ebetaxel$2 or empac$2 or endotag-1 or endotag1 or formoxol$2 or genaxol$2 or genetaxyl$2 or genexol$2 or gtpl2770 or hms2090d07 or hms2095o12 or hms2231a16 or hms3712o12 or hsdb-6839 or hunxol$2 or hy-b0015 or ifaxol$2 or ig-001 or ig001 or infinnium$2 or intaxel$2 or kbiogr-002509 or kbio2-002509 or kbio2-005077 or kbio2-007645 or kbio3-002987 or lep-etu$2 or lipopac$2 or liporaxel$2 or mbt-0206 or mbt0206 or medixel or mfcd00869953 or mitotax$2 or nanopac$2 or nanotax$2 or nanotaxel$2 or ncgc00164367-01 or nk-105 or nk105 or nsc-125973 or nsc-673089 or nsc125973 or nsc673089 or nscc-125973 or nova-12005 or oas-pac-100 or oaspac100 or oncogel$2 or onxal$2 or	230272

No.	Query	Results
	onxol$2 or p-ssmm-vip$2 or paclical$2 or pacitaxel$2 or paclical$2 or padexol$2 or pacligel$2 or paclitaxel$2 or pacliex$2 or paxceed$2 or paxene$2 or paxoral$2 or paxus$2 or pazenir$2 or plaxicel$2 or praxel$2 or qw-8184 or schembl3976 or sb-05 or sb05 or sdp-013 or sindaxel$2 or smr000857385 or sr-01000075350 or taycovit$2 or taxalbin$2 or taxane$ or taxocris$2 or taxol$2 or taxus$2 or tocosol$2 or xorane$2 or yewtaxan$2 or zinc96006020 or zisu$2 or P88XT4IS4D or 33069-62-4).ti,ab,kw. [PACLITAXEL TERMS]	
#289	Docetaxel/ or (114915-20-7 or 114977-28-5 or 15h5577cqd or 699121phca or ab01273941-01 or ab01273941-02 or ac-383 or akos015960718 or akos024457953 or amy4356 or anx-514 or axtere$2 or bd164373 or bdbm36351 or bind014 or bind-014 or brd-k30577245-001-04-3 or brd-k30577245-341-01-9 or bs102 or bs-102 or chebi-4672 or chembl92 or cid148124 or ckd-810 or crlx301 or crlx-301 or cs-1144 or d07866 or d4102 or daxotel$2 or db01248 or dexotel$2 or docecad$2 or docefrez$2 or docetaxel$2 or docetaxelum$2 or docetaxol$2 or docetaxolum$2 or dtxcid8020464 or dtxsid0040464 or emdoc$2 or en300-123047 or ex-a1206 or gtpl6809 or hms2089k08 or hsdb-6965 or hy-b0011 or ks-1452 or l01cd02 or lit976 or lit-976 or mfcd00871399 or ncgc00181306-01 or ncgc00181306-02 or ncgc00181306-04 or ncgc00242509-01 or nsc628503 or nsc-628503 or nsc-759850 or oncodocel$2 or q-100074 or q420436 or rp56976 or rp-56976 or schembl4419 or sdp-014 or sid-530 or sr-01000003023 or sr-01000003023-5 or syp-0704a or taxanit$2 or taxespira$2 or taxoel$2 or taxoltere-metro or taxotel$2 or taxoter$2 or taxotere$2 or texot$2 or tox21-112781 or tox21-113088 or txl$2 or w-60384 or xrp6976 or xrp-6976 or xrp-6976l or z1546621742).ti,ab,kw. [DOCETAXEL TERMS]	107602
#290	Cisplatin/ or (Cisplatin$ or platinum$ or Cismaplat$2 or (cis adj3 ($platinum or platinous)) or cis-platinum or cis-Platin or dichloroplatinum or diaminodichloroplatinum or diamminedichloroplatinum or dichlorodiammineplatinum or AI3-62048 or abiplatin or biocisplatinum or biocysplatinum or blastolem$2 or briplatin$2 or cddp-ti or cis-ddp or cisPt$ or CACP or CCRIS-221 or CDDP or DDPt or CP-Ethypharm or CPDC or CPDD or CPPD or (DDP and antitumor) or cisplatyl$2 or citoplatino$2 or cytoplatin$2 or cytosplat$2 or docistin$2 or elvecis$2 or kemoplat$2 or Fauldiscipla$2 or IA-call or LiPlaCis$2 or lederplatin$2 or lipoplatin$2 or "liposomal cisplatin" or mpi-5010 or mpi5010 or neoplatin$2 or niyaplat$2 or nk-801 or noveldexis$2 or nsc-119875 or nci-c55776 or platamine$2 or platamine-rtu or platiblastin$2 or platidiam$2 or platimine$2 or platinex$2 or platinil$2 or platino$2 or platinol$2 or platinolaq$2 or platinol-aq$2 or platinoxan$2 or platiran$2 or platistil$2 or platistin$2 or platosin$2 or "pronto platamine" or "Peyrone's chloride" or randa$2 or romcis$2 or sicatem$2 or spi-077 or tr-170 or tecnoplatin$2 or Q20Q21Q62J or 15663-27-1 or 26035-31-4 or 96081-74-2).ti,ab,kw. [CISPLATIN TERMS]	448473
#291	Oxaliplatin/ or (oxaliplatin$2 or (Oxalat$ adj3 platin$) or axiplatin$2 or bendaplatin$2 or crisapla$2 or croloxat$2 or dacotin$2 or dacplat$2 or ebeoxal$2 or elatofen$2 or eloxatin$ or elplat$2 or euroxaliplatin$2 or geneplatin$2 or gessedil$2 or heloxatin$2 or lipoxal$2 or mbp-426 or	90494

No.	Query	Results
	mbp426 or medoxa$2 or oksaliplatin$ or oplat$2 or oxalatoplatin$ or oxalatplatin$2 or oxali$2 or oxalip$2 or oxaliplan$2 or oxaliprol$2 or oxaliquid$2 or oxalisan$2 or oxalisin$2 or oxalizor$2 or oxaltic$2 or oxaltin$2 or oxamed$2 or oxaplamyl$2 or oxaviatin$2 or platox$2 or plaxitin$2 or rectoxal$2 or riboxatin$2 or rp-54780 or rp54780 or sinoxal$2 or sr-96669 or sr96669 or transplastin$2 or velminox$2 or xaliplat$2 or xoplan$2 or L-OHP-Cpd or 1-OHP or ACT-078 or ACT078 or CCRIS-9143 or NSC-266046 or 04ZR38536J or 61825-94-3).ti,ab,kw. [OXALIPLATIN TERMS]	
#292	Capecitabine/ or (capecitabin$ or apecitab$2 or atubri$2 or bc164277 or bcpp000300 or bxeliri$2 or bs-1000 or cacit$2 or capcel$2 or capebina$2 or capecite$2 or capegard$2 or capezam$2 or capicet$2 or capiri$2 or capiibine$2 or captabin$2 or capnat$2 or capoda$2 or capostat$2 or capsy$2 or capxcel$2 or caxeta$2 or ccg-264841 or ccx-340 or cpecitabine$2 or cs-0768 or d01223 or db01101 or dsstox-cid-26451 or dsstox-gsid-46451 or dsstox-rid-81625 or dtxsid3046451 or ecansya$2 or ex-a835 or gtpl6799 or hsdb-7656 or hy-b0016 or j-700154 or k007 or m0297 or mfcd00930626 or mls003915642 or mls004774137 or ncgc00164569-01 or ncgc00164569-02 or ncgc00164569-05 or nsc-759853 or paxon$2 or q-200788 or q420207 or r-340 or rg-340 or r340 or rg340 or ro-09-1978 or ro-091978 or ro-09-1978 or ro-09-1978-000 or ro091978 or s1156 or s-1156 or sr-01000931255 or tox21-112198 or x-abine$2 or x-tabin$2 or xabine$2 or xecap$2 or xeliri$2 or xelocel$2 or xeloda$2 or xelox$2 or z1501480421 or zinc3806413 or 6804dj8z9u or 154361-50-9 or 958887-39-3).ti,ab,kw. [CAPECITABINE TERMS]	56468
#293	(platinum adj1 (fluoropyrimidine or fluoro-pyrimidine) adj3 (doublet? or combin$ or chemotherap$ or chemo-therap$ or ((first or front) adj1 line?) or 1-LOT or 1L or therap$ or regimen? or expos$)).ti,ab,kw. [PLATINUM-FLUOROPYRIMIDINE DOUBLET TERMS]	253
#294	(5-fluoropyrimidin$ or 5-fluoro-pyrimidine or pyrimidine-5-fluoro or (fluorinated adj1 pyrimidine) or a9048 or ac-453 or akos006346044 or am86123 or "bb 0260992" or c4h3fn2 or db-007051 or dtxsid80217851 or en300-6966105 or f14737 or ft-0601423 or mfcd06658278 or q42859845 or w-203496 or zinc1845840 or 675f218 or L36X4TD47C or 675-21-8).ti,ab,kw,kf,ot,hw,rn,nm. [FLUOROPYRIMIDINE TERMS]	5169
#295	Fluorouracil/ or (fluorouracil$ or fluroblastin$ or 1upf or 5-Faracil or 5-Fluoracil or 5-Fluoracyl or 5-fluoro-uracil or 5-fluoro-uracil or 5-Fluoroblastin or 5-fluorouacil or 5-Ftouracyl or 5-FU or 5FU or 5F-uracil or Adrucil$2 or AI3-25297 or Arumel$2 or BSPBio-002048 or Cancersil$2 or Carac$2 or Carzonal$2 or CHEBI-46345 or CHEMBL185 or Cinco-FU or CCRIS-2582 or DSSTox-CID-634 or DSSTox-GSID-20634 or DSSTox-RID-75705 or Efudex$2 or Efudix$2 or Efurix$2 or EINECS-200-085-6 or Effluderm$2 or Fluoroblastin$2 or Fluoro-Uracil$2 or Fluoro-uracile$2 or Fluoro-uracilo$2 or Fluoroplex$2 or Fluorouracile$2 or Fluorouracilo$2 or Fluorouracilum$2 or Fluorouracilum$2 or Fluracil$2 or Fluracilum$2 or Fluri$2 or Fluril$2 or Fluuro-Uracil$2 or Fluorouracilo$2 or Fluroblastin$2 or Fluro-Uracil$2 or Ftoruracil$2 or GTPL4789 or HSDB 3228 or IDI1-000054 or Kecimeton$2 or KBio1-000054 or KBio2-001321 or KBio2-	249537

No.	Query	Results
	003889 or KBio2-006457 or KBioGR-001253 or KBioSS-001321 or Lopac-F-6627 or Lopac0-000536 or MFCD00006018 or MLS000069498 or MLS002415705 or NCGC00015442-01 or NCGC00015442-02 or NCGC00015442-03 or NCGC00015442-04 or NCGC00015442-05 or NCGC00015442-06 or NCGC00015442-07 or NCGC00015442-08 or NCGC00015442-09 or NCGC00015442-10 or NCGC00015442-11 or NCGC00015442-12 or NCGC00015442-15 or NCGC00015442-16 or NSC-19893 or NSC757036 or NSC816997 or Phtoruracil$2 or Pharmakon1600-01500305 or Phthoruracil$2 or Queroplex$2 or Ro-2-9757 or S1209 or 191047-64-0 or 191047-65-1 or 191115-88-5 or U3P01618RT or 51-21-8).ti,ab,kw. [FLUOROURACIL TERMS]	
#296	Irinotecan/ or (irinotecan$ or ab00698464-07 or ab00698464-09 or ab00698464-10 or ab00698464-11 or ab00698464-12 or ab00698464-13 or ab00698464-14 or ac-7469 or akos015894969 or amy4227 or as-14323 or bdbm50128267 or bcp02860 or bcp9000793 or biotecan$2 or brd-k08547377-003-02-4 or campto$2 or camptosar$2 or chebi-80630 or chembl481 or cs-1138 or cpt-11 or cpt11 or d08086 or db00762 or dq2805 or en300-708800 or gtpl6823 or hsdb-7607 or ihl-305 or ihl305 or irinophore-c$2 or irinotel$2 or mfcd00866307 or ncgc00178697-02 or ncgc00178697-05 or nsc-728073 or nsc728073 or nk012-compound or q412197 or s1198 or schembl4034 or sn38 or sn-38 or sn-38-11 or sn3811 or topotecin$2 or u-101440e or u101440e or zinc1612996 or "7673326042" or 100286-90-6 or 97682-44-5).ti,ab,kw. [IRINOTECAN TERMS]	68609
#297	(teysuno$2 or (tegafur adj4 gimeracil adj4 oteracil) or ((S-1 or S1) adj3 combination) or TS-1-cpd or S-1-cpd or TS-1 or TS1 or BMS247616 or BMS-247616 or S1-tegafur-oxonate or S1-fluoropyrimidine-oxoonate).ti,ab,kw. [S1 COMBINATION TERMS]	7916
#298	Tegafur/ or (1189456-27-6 or 1548r74nsz or 17902-23-7 or 82294-77-7 or a812417 or ab00572620-15 or ac-2112 or akos000121279 or as-13528 or atillon$2 or bcp22714 or bp-58663 or brn-0525766 or c8h9fn2o3 or ccg-100959 or ccg-50110 or ccris-2762 or chebi-32188 or chembl20883 or citofur$2 or coparogin$2 or cs-1128 or d01244 or db09256 or dtxsid001009966 or einecs-241-846-2 or en300-21668 or exonal$2 or f-5-fu or fental$2 or florafur$2 or fluorafur$2 or fluorofur$2 or franrose$2 or franroze$2 or ft-0653732 or ft-0654170 or ft-0674829 or ft-0693965 or ft207 or ft-207 or ftorafur$2 or fulaid$2 or fulfeel$2 or furafluor$2 or furflucil$2 or furofutran$2 or futraful$2 or gtpl10513 or hms1665i05 or hms2051b15 or hms2090k04 or hms2232e05 or hms3371h21 or hms3393b15 or hms3654p13 or hms3715d14 or hy-17400 or lamar$2 or lifril$2 or mfcd00012351 or mjf12264 or mjf-12264 or mls000069497 or mls000759414 or mls001076521 or mls001424119 or nc00209 or ncgc00159418-02 or ncgc00159418-04 or ncgc00159418-05 or neberk$2 or nitobanil$2 or nsc148958 or nsc-148958 or opera-id-1726 or phthorafur$2 or q-201784 or q413370 or racemic-ftorafur or riol$2 or schembl4552 or sfsp$2 or sf-sp or sinoflurol$2 or smr000059106 or sr-01000639511 or sr-01000639511-1 or sr-01000639511-4 or sunfral$2 or sunfural$2 or tefsiel-c or tegaful$2 or tegafur$2 or tegafurum$2 or ts-1 or	21276

No.	Query	Results
	uftoral$2 or upcmld-dp063 or utefos$2 or z104508106).ti,ab,kw. [TEGAFUR TERMS]	
#299	Ramucirumab/ or (1121b or 947687-13-0 or 947687-13-0 or a168 or a-168 or cyramza$2 or d99yvk4l0x or hlx12 or hlx-12 or hsdb-8314 or imc1121b or imc1121-b or imc-1121b or imc-1121-b or l01xc21 or ly3009806 or ly-3009806 or nsc-749128 or pbp2001 or pbp-2001 or ramucirumab$2 or ramucirumabum$2 or ro7234952 or ro-7234952).ti,ab,kw. [RAMUCIRUMAB TERMS]	8883
#300	Panitumumab/ or (339177-26-3 or 6a901e312a or abenix$2 or abx-egf or amg954 or amg-954 or e7-6-3 or l01xc08 or moab-abx-egf or moab-e7-6-3 or monoclonal-antibody-abx-egf or monoclonal-antibody-e7-6-3 or nsc-742319 or panitumab$2 or panitumumab$2 or panitumumabum$2 or panitunumab$2 or vectibex$2 or vectibix$2).ti,ab,kw. [PANITUMUMAB TERMS]	13461
#301	(6ns400bxkh or 780758-10-3 or 828933-51-3 or biomab-egfr or diacim$2 or h-r3 or nimotuzumab$2 or osag-101 or radiotheracim$2 or theracim$2 or theraloc$2).ti,ab,kw. [NIMOTUZUMAB TERMS]	1470
#302	(339186-68-4 or emd7200 or emd-7200 or emd72000 or emd-72000 or kgaa$2 or matuzumab$2 or merck-kgaa or mg4m3qb242).ti,ab,kw. [MATUZUMAB TERMS]	50610
#303	Bevacizumab/ or (12-igg1 or 1438851-35-4 or 216974-75-3 or 2s9zzm9q9v or abevmy$2 or abp215 or abp-215 or ainex$2 or altuzan$2 or alymsys$2 or ankeda$2 or anti-vegf or askb1202 or ask-b1202 or avastin$2 or avegra$2 or aybintio$2 or ba1101 or ba-1101 or bambevi$2 or bat1706 or bat-1706 or bcd021 or bcd-021 or bevacizumab$2 or bevacizumabum$2 or bevagen$2 or bevatas$2 or bevax$2 or bevz92 or bevz-92 or bi695502 or bi-695502 or bow030 or bow-030 or boyounuo$2 or bp01 or bp-01 or bp102 or bp-102 or bryxta$2 or bs503a or bs-503a or bxt2316 or bxt-2316 or byvasda$2 or cbt124 or cbt-124 or chs305 or chs-305 or chs5217 or chs-5217 or cizumab$2 or ctp16 or ct-p16 or equidacent$2 or fkb238 or fkb-238 or gb222 or gb-222 or gbs004 or gbs-004 or hanbeitai$2 or hd204 or hd-204 or hlx04 or hlx-04 or hot1010 or hot-1010 or hsdb-8080 or ibi305 or ibi-305 or idb0072 or idb-0072 or intp24 or intp-24 or ipique$2 or jhl1149 or jhl-1149 or js501 or js-501 or jy028 or jy-028 or krabeva$2 or kyomarc$2 or l01xc07 or lextemy$2 or "lumiere-(drug)" or ly01008 or ly-01008 or mabionvegf$2 or mb02 or mb-02 or mil60 or mil-60 or mvasi$2 or myl14020 or myl-14020 or myl1402o or myl-1402o or nsc704865 or nsc-704865 or onbevzi$2 or ons1045 or ons-1045 or ons5010 or ons-5010 or oyavas$2 or pf06439535 or pf-06439535 or pf6439535 or pf-6439535 or pmc901 or pmc-901 or pobevcy$2 or pro169 or pro-169 or pusintin$2 or ql1101 or ql-1101 or r435 or r-435 or rg435 or rg-435 or rhumab$2 or ro4876646 or ro-4876646 or rph001 or rph-001 or rtpr023 or r-tpr-023 or sb8 or sb-8 or sct501 or sct-501 or sct510 or sct-510 or sibp04 or sibp-04 or stc103 or stc-103 or stivant$2 or tab008 or tab-008 or tab014 or tab-014 or tot102 or tot-102 or trs003 or trs-003 or tx16 or tx-16 or vegzelma$2 or	127493

No.	Query	Results
	versavo$2 or zirabev$2 or zrc113 or zrc-113 or zybev$2).ti,ab,kw. [BEVACIZUMAB TERMS]	
#304	(2022215-59-2 or anb011 or anb-011 or dostarlimab$2 or gsk4057190 or gsk-4057190 or jemperli$2 or p0gvq9a4s5 or tsr042 or tsr-042 or wbp285 or wbp-285).ti,ab,kw. [DOSTARLIMAB TERMS]	493
#305	(chembl5095383 or retlirafusp-alfa or shr1701 or shr-1701).ti,ab,kw,kf,ot,hw,rn,nm. [SHR-1701 TERMS]	56
#306	(2368219-35-4 or 45x7ou8c4j or ab154 or ab-154 or domvanalimab$2 or who-11559).ti,ab,kw. [DOMVANALIMAB TERMS]	49
#307	(2259860-24-5 or ab122 or ab-122 or gls010 or gls-010 or gs0122 or gs-0122 or wbp3055 or wbp-3055 or who-11413 or zbl7o904il or zimberelimab$2).ti,ab,kw. [ZIMBERELIMAB TERMS]	126
#308	Lapatinib/ or (0vua21238f or 1092929-10-6 or 1210608-87-9 or 1xkk or 231277-92-2 or 388082-78-8 or 437755-78-7 or 913989-15-8 or a25184 or ab01273965-01 or ab01273965-02 or ab01273965-03 or ab01273965-04 or ab01273965-05 or ac-1314 or akos005145766 or am20090641 or as-14065 or bc164610 or bcp01874 or bcp9000837 or bcp9000838 or bcpp000188 or bcpp000189 or bdbm5445 or brd-k19687926-001-01-7 or brd-k19687926-379-02-5 or c29h26clfn4o4s or ccg-270133 or chebi-49603 or chembl554 or cid-208908 or d08108 or db01259 or dtxcid5026675 or dtxsid7046675 or en300-117254 or ex-a402 or fmm$2 or ft-0659650 or gsk572016 or gsk-572016 or gtpl5692 or gw2016 or gw-2016 or gw282974x or gw-282974x or gw572016 or gw-572016 or gw572016f or gw-572016f or gw-572016x or hms2089h10 or hms3244n06 or hms3244n10 or hms3244n14 or hms3744k11 or hsdb-8209 or hy-50898 or kinome-3684 or kinome-3685 or l0360 or lapatinib$2 or mfcd09264194 or ncgc00167507-01 or ncgc00167507-02 or ncgc00167507-03 or ncgc00167507-04 or ncgc00167507-09 or ns00003012 or nsc745750 or nsc-745750 or nsc800780 or nsc-800780 or q-101353 or q420323 or sb16918 or schembl8100 or sr-05000001472-1 or sw199101-5 or tox21-112505 or tykerb$2 or tyverb$2).ti,ab,kw. [LAPATINIB TERMS]	21569
#309	(857890-39-2 or a825653 or ac-25047 or aiv007 or aiv-007 or akos025401742 or amy9240 or as-16203 or bcp01799 or bcp9000633 or bcpp000247 or bdbm50331094 or bl164616 or c21h19cln4o4 or ccg-264842 or chebi-85994 or chembl1289601 or cs-0109 or d09919 or db09078 or dtxcid50117096 or dtxsid50194605 or e7080 or e-7080 or ee083865g2 or en300-7418350 or er203492-00 or er-203492-00 or ex-a249 or ft-0700727 or gtpl7426 or hms3244a07 or hms3244a08 or hms3244b07 or hms3654a14 or hy-10981 or j-513372 or kisplyx$2 or l01xe29 or lenvatinib$2 or lenvatinibum$2 or lenvima$2 or lev$2 or mfcd16038644 or mk7902 or mk-7902 or mls006011239 or ncgc00263198-01 or ncgc00263198-04 or ncgc00263198-07 or ns00069283 or nsc755980 or nsc-755980 or nsc800781 or nsc-800781 or q6523413 or ro7071618 or ro-7071618 or s1164 or sb16580 or	6247099

No.	Query	Results
	schembl864638 or smr004702999 or sw219259-1 or z2235801899).ti,ab,kw. [LENVATINIB TERMS]	
#310	(0rf or 1001264-89-6 or 524y3ib4hq or ac-28420 or akos025396463 or as-17027 or bcp0726000195 or bcp9000712 or bdbm50398379 or ccg-269312 or chebi-95089 or chembl2177390 or cs-0975 or d10641 or db11743 or dtxsid101025595 or ex-a2077 or gdc0068 or gdc-0068 or gdc0068-di-hcl or gdc-0068-di-hcl or gtpl7887 or hy-15186 or ipatasertib$2 or mfcd22124514 or ncgc00346714-01 or ns00072927 or nsc767898 or nsc-767898 or nsc781451 or nsc-781451 or nsc800986 or nsc-800986 or nsc832484 or nsc-832484 or q27078088 or rg7440 or rg-7440 or rg-7440-di-hcl or s2808 or schembl191659).ti,ab,kw. [IPATASERTIB TERMS]	724
#311	or/259-298 [INTERVENTION & COMPARATORS & CHEMO TERMS]	3228584
#312	258 and 311	35786
#313	(Adolescent/ or exp Child/ or exp Infant/) not (exp Adult/ and (Adolescent/ or exp Child/ or exp Infant/)) [CHILDREN <19 REMOVE]	4816395
#314	(editorial or note or comment or clinical trial protocol).pt. or (letter.pt. not randomized controlled trial/) [PROTOCOLS and OPINION PIECES REMOVE - CENTRAL]	5802227
#315	312 not (313 or 314) [PROTOCOLS and OPINION PIECES REMOVED - CENTRAL]	34194
#316	Conference proceeding.pt. [CONFERENCE ABSTRACTS/PROCEEDINGS]	233853
#317	315 and 316 [CONFERENCE ABSTRACTS ONLY]	718
#318	limit 317 to yr="2022 -Current"	89
#319	315 not 316 [CONFERENCE ABSTRACTS REMOVED]	33476
#320	318 or 319 [LAST 2 YRS OF ABSTRACTS RETAINED]	33565
#321	320 use cctr [CENTRAL results]	1778
#322	((((stomach? or gastric$ or cardia or cardiac or antrum? or antral$ or fundus$ or pyloric$ or pylorus$ or ventricul$ or linitis plastica or leather-bottle or ((stomach? or gastric$) and (GC or GEJ))) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$)) or ((stomach? or gastric$) adj3 SCC) or ((esophag$ or oesophag$ or esophagogastric$ or esophago-gastric$ or oesophagogastric$ or	71583

No.	Query	Results
	oesophago-gastric$ or gastroesophageal$ or gastro-esophageal$ or gastrooesophageal$ or gastro-oesophageal$ or cardio-esophageal$ or cardio-oesophageal$ or cardioesophageal$ or cardiooesophageal$ or EG or GE) adj3 (junction$ or sphincter$) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$))) adj4 ((meta adj sta$) or metastas$ or metastatic$ or recur$ or secondar$ or relaps$ or advance$ or inoperab$ or disseminat$ or spread or migration or lethal$ or incurable or noncurable or non-curable or uncurable or progressive or terminal or invasive$ or aggressive$ or (late? adj2 stage$) or ((stage? or grade? or type?) adj2 (3a$ or 3b$ or 3c$ or III$ or 4a$ or 4b$ or IV$)) or "stage 3" or "stage 4" or met or mets or N1? or N2? or N3? or pN1? or pN2? or pN3?)).ti,ab,kw. [Metastatic GC/GEJ TERMS]	
#323	(tislelizumab$2 or tirelizumab$2 or bgb-a317 or bgba317 or bgn-1 or bgn1 or jhl-2108 or jhl2108 or vdt-482 or vdt482 or 1858168-59-8 or 0kvo411b3n).ti,ab,kw. [TISLELIZUMAB TERMS]	1319
#324	((immune$ adj3 checkpoint? adj3 (inhibit$ or block?)) or (((programmed adj3 death) or PD-1 or PD-1-PD-L1 or PDCD1) adj3 (ligand? or inhibit$ or block?)) or ((B7-H1 or B7H1 or "B7 homolog 1" or CD274 or CD273 or PDCD1LG1 or PDCD1LG2) adj3 (antigen? or protein?)) or ((Cytotoxic-T-Lymphocyte-Associated Protein-4 Inhibitor? or CTLA-4) adj3 (inhibit$ or block?)) or (ICI? and "Immun$ Checkpoint") or BMS-1 or EX-A947 or HY-19991 or J-690233 or MFCD28978741 or s7911 or D000082082 or SCHEMBL16555159 or ZINC230477930 or 1675201-83-8).ti,ab,kw. [IMMUNE CHECKPOINT PROTEINS TERMS]	114376
#325	(immunotherap$ or immuno-therap$ or (((biologic$ adj3 response? adj3 modifier?) or BRM or immunogenic$ or immunologic$ or immuno-genic$ or immuno-logic$ or radioimmunotherapy$ or radio-immunotherap$ or ((monoclonal$ or clonal$ or hybridoma$) adj2 antibod$)) adj3 (therap$ or intervention? or treat$))).ti,ab,kw. [IMMUNOTHERAPY TERMS]	435716
#326	((molecular$ or neoplas$ or cancer$ or tumo?r$ or carcinoma$) adj3 (target$ adj3 therap$)).ti,ab,kw. [TARGETED THERAPY TERMS]	111847
#327	(atezolizumab$2 or anti-PDL1 or MPDL-3280A or MPDL3280A or RG-7446 or RG7446 or ro-5541267 or ro5541267 or Tecentriq$2 or Tecntriq$2 or 1380723-44-3 or 0INE2SFD9E or 52CMI0WC3Y).ti,ab,kw. [ATEZOLIZUMAB TERMS]	12948
#328	(avelumab$2 or bavencio$2 or msb-0010682 or msb-0010718c or msb0010682 or msb0010718c or msb-10682 or msb-10718c or msb10682 or msb10718c or pf-06834635 or pf-6834635 or pf06834635 or pf6834635 or KXG2PJ551I or 1537032-82-8).ti,ab,kw. [AVELUMAB TERMS]	3518

No.	Query	Results
#329	(camrelizumab$2 or "anti-pd-1 monoclonal antibody" or shr-1210 or shr1210 or carilizumab$2 or carrelizumab$2 or 73096E137E or 1798286-48-2).ti,ab,kw. [CAMRELIZUMAB TERMS]	2922
#330	(1428935-60-7 or 28x28x9okv or anti-b7h1-monoclonal-antibody or durvalumab$2 or durvalumabum$2 or imfinzi$2 or l01xc28 or medi4736 or medi-4736).ti,ab,kw. [DURVALUMAB TERMS]	7170
#331	(ipilimumab$2 or bms-734016 or bms734016 or cs-1002 or cs1002 or ibi-310 or ibi310 or mdx-ctla-4 or mdx-010 or mdx-101 or mdx010 or mdx101 or strentarga$2 or yervoy$2 or 6T8C155666 or 477202-00-9).ti,ab,kw. [IPILIMUMAB TERMS]	18680
#332	(nivolumab$2 or bms-936558 or bms-986213 or bms-986298 or cmab819 or bms936558 or bms986213 or bms986298 or cmab-819 or mdx-1106 or mdx1106 or ono-4538 or ono4538 or opdivo$2 or opdualag$2 or 31YO63LBSN or 946414-94-4).ti,ab,kw. [NIVOLUMAB TERMS]	33925
#333	(pembrolizumab$2 or keytruda$2 or lambrolizumab$2 or mk3475 or mk-1308a or mk-3475 or mk7684a or sch-900475 or sch900475 or "keylynk-010 component" or DPT0O3T46P or 1422183-02-5 or 1374853-91-4).ti,ab,kw. [PEMBROLIZUMAB TERMS]	32744
#334	(2072873-06-2 or 8fu7fq8upk or ibi308 or ibi-308 or sintilimab$2 or tyvyt$2 or who-10801).ti,ab,kw. [SINTILIMAB TERMS]	1605
#335	(1924598-82-2 or 8jxn261vva or js001 or js-001 or tab001 or tab-001 or teripalimab$2 or toripalimab$2 or treipril$2 or treprizumab$2 or tripleitriumab$2 or triprizumab$2 or tuoyi$2 or who-10820).ti,ab,kw. [TORIPALIMAB TERMS]	1078
#336	(2079108-44-2 or 2226345-85-1 or 2y3t5if01z or aex1188 or aex-1188 or incmga00012 or incmga-00012 or incmga0012 or incmga-0012 or mga012 or mga-012 or retifanlimab$2 or zynyz$2).ti,ab,kw. [RETIFANLIMAB TERMS]	120
#337	(2102192-68-5 or anti-pd-l1-monoclonal-antibody-kn035 or asc22 or asc-22 or envafolimab$2 or es1m06m6qh or kn035 or kn-035).ti,ab,kw. [ENVAFOLIMAB TERMS]	104
#338	(2245725-04-4 or l62556gpxb or mgd013 or mgd-013 or tebotelimab$2).ti,ab,kw. [TEBOTELIMAB TERMS]	36
#339	(2394841-59-7 or 6fyg1ds4nw or ak104 or ak-104 or cadonilimab$2 or who-11581).ti,ab,kw. [CADONILIMAB TERMS]	86
#340	(2231029-82-4 or hlx10 or hlx-10 or s3gqz2k36v or serplulimab$2).ti,ab,kw. [SERPLULIMAB TERMS]	132

No.	Query	Results
#341	(2256084-03-2 or 90iqr2i6tr or cs1001 or cs-1001 or sugemalimab$2 or wbp315 or wbp-315 or wbp3155 or wbp-3155).ti,ab,kw. [SUGEMALIMAB TERMS]	127
#342	(1496553-00-4 or claudiximab$2 or imab362 or imab-362 or tf5mpq8wgy or zolbetuximab$2).ti,ab,kw. [ZOLBETUXIMAB TERMS]	254
#343	(1952272-74-0 or bemarituzumab$2 or fpa144 or fpa-144 or rjw23bq0kw).ti,ab,kw. [BEMARITUZUMAB TERMS]	84
#344	(205923-56-4 or abp494 or abp-494 or c225 or c-225 or c225-03 or c-22503 or c-225-03 or cdp1 or cdp-1 or cetuximab$2 or cetuximabum$2 or ch225 or ch-225 or chimeric-anti-egfr-monoclonal-antibody or cmab009 or cmab-009 or ctp15 or ct-p15 or dtxsid0040830 or erbitux$2 or hsdb-7454 or imc225 or imc-225 or imcc225 or imcc-225 or imc-c225 or kl140 or kl-140 or l01xc06 or ly2939777 or ly-2939777 or mab-c225 or moab-c225 or nsc714692 or pqx0d8j21j or sti001 or sti-001).ti,ab,kw. [CETUXIMAB TERMS]	27851
#345	(1133766-06-9 or metmab$2 or metma-b or ms1j9720wc or onartuzumab$2 or pro143966 or pro-143966 or pro-143996 or pro143996 or ro5490258 or ro-5490258).ti,ab,kw. [ONARTUZUMAB TERMS]	347
#346	(51wew898ij or 872514-65-3 or amg102 or amg-102 or rilotumumab$2).ti,ab,kw. [RILOTUMUMAB TERMS]	259
#347	(1518996-49-0 or 571045eim4 or andecaliximab$2 or gs5745 or gs-5745).ti,ab,kw. [ANDECALIXIMAB TERMS]	135
#348	(444731-52-6 or 635702-64-6 or 790713-33-6 or 7rn5dr86ck or a19406 or a839572 or ab01273967-01 or ab01273967-02 or ab01273967-05 or ab01273967-06 or ac-8522 or akos005145819 or am20090659 or ar-270-43507999 or armala$2 or as-11066 or bcp01839 or bcp9001053 or bcpp000129 or bd164238 or bdbm26474 or brd-k74514084-003-02-7 or ccg-265010 or chebi-71219 or chembl477772 or cid-10113978 or cs-0269 or db06589 or dtxcid1028659 or dtxsid8048733 or en300-57325 or ex-a1241 or ft-0659928 or ft-0684794 or gtpl5698 or gw780604 or gw-780604 or gw-78603 or gw786034 or gw7-86034 or gw-786034 or gw786034b or gw-786034b or gw786034x or gw-786034x or hms3244c21 or hms3244c22 or hms3244d21 or hms3656l14 or hms3745g05 or hsdb-8210 or hy-10208 or indazolylpyrimidine-13 or jmc514632-compound-13 or kinome-3790 or mfcd11616589 or ncgc00188865-01 or ncgc00188865-02 or ncgc00188865-03 or ncgc00188865-10 or nsc752782 or nsc-752782 or nsc800839 or nsc-800839 or p-6706 or pazopanib$2 or pazopanibum$2 or q-101400 or q7157043 or s3012 or sb17290 or sb710468 or sb-710468 or sb710468a or sb-710468a or schembl588608 or sw218082-3 or tox21-113174 or tox21-113174-1 or votrient$2 or z1541638525).ti,ab,kw. [PAZOPANIB TERMS]	7544

No.	Query	Results
#349	(1218779-75-9 or 5s371k6132 or 811803-05-1 or ab01274807-01 or ab01274807-02 or ac-27461 or akos024464453 or amy21302 or apatinib$2 or ba175030 or bcp02840 or c76598 or ccg-268625 or chembl3186534 or cs-0003200 or d11288 or db14765 or ds-7455 or dtxsid601024366 or ex-a1794 or gtpl7648 or hy-13342a or mfcd21648511 or ncgc00249393-01 or ncgc00249393-08 or nsc772886 or nsc-772886 or nsc799333 or nsc-799333 or q27262801 or rivoceranib$2 or s5248 or sb16590 or schembl1814966 or yn968d1 or yn-968d1).ti,ab,kw. [RIVOCERANIB/APATINIB TERMS]	3781
#350	(chemotherap$ or chemo-therap$ or carcinochemotherap$ or chemoradiotherap$ or chemoradiation? or radiochemotherap$ or carcino-chemotherap$ or chemo-radiotherap$ or chemo-radiation? or radio-chemotherap$).ti,ab,kw. [CHEMOTHERAPY TERMS]	1491580
#351	(leucovorin$ or 6-s-leucovorin or 6s-leucovorin or acide folinique or akos015961207 or bdbm50039121 or bpbio1-000766 or bspbio-000696 or bspbio-002218 or brd-a75919782-238-01-8 or calcium folinate or chebi-15640 or chembl1679 or chembl69905 or citrovoeum-factor or citrovorum-factor or d93089 or divk1c-000222 or dtxsid0048216 or einecs-200-361-6 or en300-27068710 or folinate folinic-acid-sf or folinic acid or formyltetrahydrofolate or fusilev$2 or gtpl4816 or gtpl6690 or hsdb-6544 or hy-17556 or idi1-000222 or kbio1-000222 or kbio2-001339 or kbio2-003907 or kbio2-006475 or kbio3-001438 or kbiogr-000461 or kbioss-001339 or lencovorin$2 or leucal$2 or leukovorin$2 or leukovoran$2 or leucovorin$2 or levoleucovorin$2 or levo-leucovorin$2 or mfcd00867488 or ninds-000222 or nsc3590 or prestwick0-000738 or prestwick1-000738 or prestwick2-000738 or prestwick3-000738 or q45435667 or q573i9dvlp or s5790 or schembl10068238 or schembl8349 or sd-204098 or s-leucovorin$2 or sleucovorin$2 or spectrum2-000116 or spectrum3-000479 or spectrum4-000031 or spectrum5-000910 or spectrum-000859 or spbio-000132 or spbio-002635 or sbi-0051427-p003 or welcovorin$2 or "formyltetrahydropteroylglutamic acid" or Q573I9DVLP or 58-05-9).ti,ab,kw. [LEUCOVORIN TERMS]	30362
#352	(Carboplatin$2 or blastocarb$2 or boplatex$2 or carboplat$ or carbosin$2 or carbotec$2 or carplan$2 or CBDCA or (platinum adj3 (cis or diamin? or cyclobutanedicarboxylat? or dicarboxylatediammine)) or Dicarboxylatoplatinum or diamminecyclobutanedicarboxylatoplatinum or cycloplatin$ or erbakar$2 or ercar$2 or ifacap$2 or jm8 or jm-8 or kemocarb$2 or nsc-241240 or nsc241240 or nsc-201345 or nsc201345 or oncocarbin$2 or paraplatin$ or Platinwas$2 or Ribocarbo$2 or Neocarbo$2 or Nealorin$2 or HSDB-6957 or BG3F62OND5 or 41575-94-4).ti,ab,kw. [CARBOPLATIN TERMS]	67440
#353	(paclitaxel$ or abraxane$2 or abraxus$2 or act02709 or act-02709 or acon1-002231 or anx-513 or anzatax$2 or apealea$2 or asotax$2 or bidd-pxr0046 or biotax$2 or bms-181339 or bms181339-01 or bms181339 or bms-181339-01 or bmy-45622 or bmy45622 or bspbio-000290 or capxol$2 or ccris-8143 or chembl428647 or chebi-45863 or coroflex-please$2 or coroxane$2 or cmap-000068 or cynviloq$2 or cypher-	150988

No.	Query	Results
	select$2 or dsstox-cid-3413 or dsstox-gsid-23413 or dsstox-rid-77016 or dhp107 or dhp-107 or dhp-208 or dhp208 or dts-301 or dts301 or ebetaxel$2 or empac$2 or endotag-1 or endotag1 or formoxol$2 or genaxol$2 or genetaxyl$2 or genexol$2 or gtpl2770 or hms2090d07 or hms2095o12 or hms2231a16 or hms3712o12 or hsdb-6839 or hunxol$2 or hy-b0015 or ifaxol$2 or ig-001 or ig001 or infinnium$2 or intaxel$2 or kbiogr-002509 or kbio2-002509 or kbio2-005077 or kbio2-007645 or kbio3-002987 or lep-etu$2 or lipopac$2 or liporaxel$2 or mbt-0206 or mbt0206 or medixel or mfcd00869953 or mitotax$2 or nanopac$2 or nanotax$2 or nanotaxel$2 or ncgc00164367-01 or nk-105 or nk105 or nsc-125973 or nsc-673089 or nsc125973 or nsc673089 or nscc-125973 or nova-12005 or oas-pac-100 or oaspac100 or oncogel$2 or onxal$2 or onxol$2 or p-ssmm-vip$2 or paclical$2 or pacitaxel$2 or paclical$2 or padexol$2 or pacligel$2 or paclitaxel$2 or pacliex$2 or paxceed$2 or paxene$2 or paxoral$2 or paxus$2 or pazenir$2 or plaxicel$2 or praxel$2 or qw-8184 or schembl3976 or sb-05 or sb05 or sdp-013 or sindaxel$2 or smr000857385 or sr-01000075350 or taycovit$2 or taxalbin$2 or taxane$ or taxocris$2 or taxol$2 or taxus$2 or tocosol$2 or xorane$2 or yewtaxan$2 or zinc96006020 or zisu$2 or P88XT4IS4D or 33069-62-4).ti,ab,kw. [PACLITAXEL TERMS]	
#354	(114915-20-7 or 114977-28-5 or 15h5577cqd or 699121phca or ab01273941-01 or ab01273941-02 or ac-383 or akos015960718 or akos024457953 or amy4356 or anx-514 or axtere$2 or bd164373 or bdbm36351 or bind014 or bind-014 or brd-k30577245-001-04-3 or brd-k30577245-341-01-9 or bs102 or bs-102 or chebi-4672 or chembl92 or cid148124 or ckd-810 or crlx301 or crlx-301 or cs-1144 or d07866 or d4102 or daxotel$2 or db01248 or dexotel$2 or docecad$2 or docefrez$2 or docetaxel$2 or docetaxelum$2 or docetaxol$2 or docetaxolum$2 or dtxcid8020464 or dtxsid0040464 or emdoc$2 or en300-123047 or ex-a1206 or gtpl6809 or hms2089k08 or hsdb-6965 or hy-b0011 or ks-1452 or l01cd02 or lit976 or lit-976 or mfcd00871399 or ncgc00181306-01 or ncgc00181306-02 or ncgc00181306-04 or ncgc00242509-01 or nsc628503 or nsc-628503 or nsc-759850 or oncodocel$2 or q-100074 or q420436 or rp56976 or rp-56976 or schembl4419 or sdp-014 or sid-530 or sr-01000003023 or sr-01000003023-5 or syp-0704a or taxanit$2 or taxespira$2 or taxoel$2 or taxoltere-metro or taxotel$2 or taxoter$2 or taxotere$2 or texot$2 or tox21-112781 or tox21-113088 or txl$2 or w-60384 or xrp6976 or xrp-6976 or xrp-6976l or z1546621742).ti,ab,kw. [DOCETAXEL TERMS]	62503
#355	(Cisplatin$ or platinum$ or Cismaplat$2 or (cis adj3 ($platinum or platinous)) or cis-platinum or cis-Platin or dichloroplatinum or diaminodichloroplatinum or diamminedichloroplatinum or dichlorodiammineplatinum or AI3-62048 or abiplatin or biocisplatinum or biocysplatinum or blastolem$2 or briplatin$2 or cddp-ti or cis-ddp or cisPt$ or CACP or CCRIS-221 or CDDP or DDPt or CP-Ethypharm or CPDC or CPDD or CPPD or (DDP and antitumor) or cisplatyl$2 or citoplatino$2 or cytoplatin$2 or cytosplat$2 or docistin$2 or elvecis$2 or kemoplat$2 or Fauldiscipla$2 or IA-call or LiPlaCis$2 or lederplatin$2 or lipoplatin$2 or "liposomal cisplatin" or mpi-5010 or mpi5010 or neoplatin$2 or niyaplat$2 or nk-801 or noveldexis$2 or nsc-119875 or nci-c55776 or	328620

No.	Query	Results
	platamine$2 or platamine-rtu or platiblastin$2 or platidiam$2 or platimine$2 or platinex$2 or platinil$2 or platino$2 or platinol$2 or platinolaq$2 or platinol-aq$2 or platinoxan$2 or platiran$2 or platistil$2 or platistin$2 or platosin$2 or "pronto platamine" or "Peyrone's chloride" or randa$2 or romcis$2 or sicatem$2 or spi-077 or tr-170 or tecnoplatin$2 or Q20Q21Q62J or 15663-27-1 or 26035-31-4 or 96081-74-2).ti,ab,kw. [CISPLATIN TERMS]	
#356	(oxaliplatin$2 or (Oxalat$ adj3 platin$) or axiplatin$2 or bendaplatin$2 or crisapla$2 or croloxat$2 or dacotin$2 or dacplat$2 or ebeoxal$2 or elatofen$2 or eloxatin$ or elplat$2 or euroxaliplatin$2 or geneplatin$2 or gessedil$2 or heloxatin$2 or lipoxal$2 or mbp-426 or mbp426 or medoxa$2 or oksaliplatin$ or oplat$2 or oxalatoplatin$ or oxalatplatin$2 or oxali$2 or oxalip$2 or oxaliplan$2 or oxaliprol$2 or oxaliquid$2 or oxalisan$2 or oxalisin$2 or oxalizor$2 or oxaltic$2 or oxaltin$2 or oxamed$2 or oxaplamyl$2 or oxaviatin$2 or platox$2 or plaxitin$2 or rectoxal$2 or riboxatin$2 or rp-54780 or rp54780 or sinoxal$2 or sr-96669 or sr96669 or transplastin$2 or velminox$2 or xaliplat$2 or xoplan$2 or L-OHP-Cpd or 1-OHP or ACT-078 or ACT078 or CCRIS-9143 or NSC-266046 or 04ZR38536J or 61825-94-3).ti,ab,kw. [OXALIPLATIN TERMS]	56812
#357	(capecitabin$ or apecitab$2 or atubri$2 or bc164277 or bcpp000300 or bxeliri$2 or bs-1000 or cacit$2 or capcel$2 or capebina$2 or capecite$2 or capegard$2 or capezam$2 or capicet$2 or capiri$2 or capiibine$2 or captabin$2 or capnat$2 or capoda$2 or capostat$2 or capsy$2 or capxcel$2 or caxeta$2 or ccg-264841 or ccx-340 or cpecitabine$2 or cs-0768 or d01223 or db01101 or dsstox-cid-26451 or dsstox-gsid-46451 or dsstox-rid-81625 or dtxsid3046451 or ecansya$2 or ex-a835 or gtpl6799 or hsdb-7656 or hy-b0016 or j-700154 or k007 or m0297 or mfcd00930626 or mls003915642 or mls004774137 or ncgc00164569-01 or ncgc00164569-02 or ncgc00164569-05 or nsc-759853 or paxon$2 or q-200788 or q420207 or r-340 or rg-340 or r340 or rg340 or ro-09-1978 or ro-091978 or ro-09-1978 or ro-09-1978-000 or ro091978 or s1156 or s-1156 or sr-01000931255 or tox21-112198 or x-abine$2 or x-tabin$2 or xabine$2 or xecap$2 or xeliri$2 or xelocel$2 or xeloda$2 or xelox$2 or z1501480421 or zinc3806413 or 6804dj8z9u or 154361-50-9 or 958887-39-3).ti,ab,kw. [CAPECITABINE TERMS]	31460
#358	(platinum adj1 (fluoropyrimidine or fluoro-pyrimidine) adj3 (doublet? or combin$ or chemotherap$ or chemo-therap$ or ((first or front) adj1 line?) or 1-LOT or 1L or therap$ or regimen? or expos$)).ti,ab,kw. [PLATINUM-FLUOROPYRIMIDINE DOUBLET TERMS]	253
#359	(5-fluoropyrimidin$ or 5-fluoro-pyrimidine or pyrimidine-5-fluoro or (fluorinated adj1 pyrimidine) or a9048 or ac-453 or akos006346044 or am86123 or "bb 0260992" or c4h3fn2 or db-007051 or dtxsid80217851 or en300-6966105 or f14737 or ft-0601423 or mfcd06658278 or q42859845 or w-203496 or zinc1845840 or 675f218 or L36X4TD47C or 675-21-8).ti,ab,kw,kf,ot,hw,rn,nm. [FLUOROPYRIMIDINE TERMS]	5169
#360	(fluorouracil$ or fluroblastin$ or 1upf or 5-Faracil or 5-Fluoracil or 5-Fluoracyl or 5-fluoro-uracil or 5-fluoro-uracil or 5-Fluoroblastin or 5-	133662

No.	Query	Results
	fluorouacil or 5-Ftouracyl or 5-FU or 5FU or 5F-uracil or Adrucil$2 or AI3-25297 or Arumel$2 or BSPBio-002048 or Cancersil$2 or Carac$2 or Carzonal$2 or CHEBI-46345 or CHEMBL185 or Cinco-FU or CCRIS-2582 or DSSTox-CID-634 or DSSTox-GSID-20634 or DSSTox-RID-75705 or Efudex$2 or Efudix$2 or Efurix$2 or EINECS-200-085-6 or Effluderm$2 or Fluoroblastin$2 or Fluoro-Uracil$2 or Fluoro-uracile$2 or Fluoro-uracilo$2 or Fluoroplex$2 or Fluorouracile$2 or Fluorouracilo$2 or Fluorouracilum$2 or Fluorouracilum$2 or Fluracil$2 or Fluracilum$2 or Fluri$2 or Fluril$2 or Fluuro-Uracil$2 or Fluorouracilo$2 or Fluroblastin$2 or Fluro-Uracil$2 or Ftoruracil$2 or GTPL4789 or HSDB 3228 or IDI1-000054 or Kecimeton$2 or KBio1-000054 or KBio2-001321 or KBio2-003889 or KBio2-006457 or KBioGR-001253 or KBioSS-001321 or Lopac-F-6627 or Lopac0-000536 or MFCD00006018 or MLS000069498 or MLS002415705 or NCGC00015442-01 or NCGC00015442-02 or NCGC00015442-03 or NCGC00015442-04 or NCGC00015442-05 or NCGC00015442-06 or NCGC00015442-07 or NCGC00015442-08 or NCGC00015442-09 or NCGC00015442-10 or NCGC00015442-11 or NCGC00015442-12 or NCGC00015442-15 or NCGC00015442-16 or NSC-19893 or NSC757036 or NSC816997 or Phtoruracil$2 or Pharmakon1600-01500305 or Phthoruracil$2 or Queroplex$2 or Ro-2-9757 or S1209 or 191047-64-0 or 191047-65-1 or 191115-88-5 or U3P01618RT or 51-21-8).ti,ab,kw. [FLUOROURACIL TERMS]	
#361	(irinotecan$ or ab00698464-07 or ab00698464-09 or ab00698464-10 or ab00698464-11 or ab00698464-12 or ab00698464-13 or ab00698464-14 or ac-7469 or akos015894969 or amy4227 or as-14323 or bdbm50128267 or bcp02860 or bcp9000793 or biotecan$2 or brd-k08547377-003-02-4 or campto$2 or camptosar$2 or chebi-80630 or chembl481 or cs-1138 or cpt-11 or cpt11 or d08086 or db00762 or dq2805 or en300-708800 or gtpl6823 or hsdb-7607 or ihl-305 or ihl305 or irinophore-c$2 or irinotel$2 or mfcd00866307 or ncgc00178697-02 or ncgc00178697-05 or nsc-728073 or nsc728073 or nk012-compound or q412197 or s1198 or schembl4034 or sn38 or sn-38 or sn-38-11 or sn3811 or topotecin$2 or u-101440e or u101440e or zinc1612996 or "7673326042" or 100286-90-6 or 97682-44-5).ti,ab,kw. [IRINOTECAN TERMS]	38353
#362	(teysuno$2 or (tegafur adj4 gimeracil adj4 oteracil) or ((S-1 or S1) adj3 combination) or TS-1-cpd or S-1-cpd or TS-1 or TS1 or BMS247616 or BMS-247616 or S1-tegafur-oxonate or S1-fluoropyrimidine-oxoonate).ti,ab,kw. [S1 COMBINATION TERMS]	7916
#363	(1189456-27-6 or 1548r74nsz or 17902-23-7 or 82294-77-7 or a812417 or ab00572620-15 or ac-2112 or akos000121279 or as-13528 or atillon$2 or bcp22714 or bp-58663 or brn-0525766 or c8h9fn2o3 or ccg-100959 or ccg-50110 or ccris-2762 or chebi-32188 or chembl20883 or citofur$2 or coparogin$2 or cs-1128 or d01244 or db09256 or dtxsid001009966 or einecs-241-846-2 or en300-21668 or exonal$2 or f-5-fu or fental$2 or florafur$2 or fluorafur$2 or fluorofur$2 or franrose$2 or franroze$2 or ft-0653732 or ft-0654170 or ft-0674829 or ft-0693965 or ft207 or ft-207 or ftorafur$2 or fulaid$2 or fulfeel$2 or furafluor$2 or furflucil$2 or furofutran$2 or futraful$2 or gtpl10513 or hms1665i05 or hms2051b15 or hms2090k04 or hms2232e05 or hms3371h21 or hms3393b15 or	12581

No.	Query	Results
	hms3654p13 or hms3715d14 or hy-17400 or lamar$2 or lifril$2 or mfcd00012351 or mjf12264 or mjf-12264 or mls000069497 or mls000759414 or mls001076521 or mls001424119 or nc00209 or ncgc00159418-02 or ncgc00159418-04 or ncgc00159418-05 or neberk$2 or nitobanil$2 or nsc148958 or nsc-148958 or opera-id-1726 or phthorafur$2 or q-201784 or q413370 or racemic-ftorafur or riol$2 or schembl4552 or sfsp$2 or sf-sp or sinoflurol$2 or smr000059106 or sr-01000639511 or sr-01000639511-1 or sr-01000639511-4 or sunfral$2 or sunfural$2 or tefsiel-c or tegaful$2 or tegafur$2 or tegafurum$2 or ts-1 or uftoral$2 or upcmld-dp063 or utefos$2 or z104508106).ti,ab,kw. [TEGAFUR TERMS]	
#364	(1121b or 947687-13-0 or 947687-13-0 or a168 or a-168 or cyramza$2 or d99yvk4l0x or hlx12 or hlx-12 or hsdb-8314 or imc1121b or imc1121-b or imc-1121b or imc-1121-b or l01xc21 or ly3009806 or ly-3009806 or nsc-749128 or pbp2001 or pbp-2001 or ramucirumab$2 or ramucirumabum$2 or ro7234952 or ro-7234952).ti,ab,kw. [RAMUCIRUMAB TERMS]	6008
#365	(339177-26-3 or 6a901e312a or abenix$2 or abx-egf or amg954 or amg-954 or e7-6-3 or l01xc08 or moab-abx-egf or moab-e7-6-3 or monoclonal-antibody-abx-egf or monoclonal-antibody-e7-6-3 or nsc-742319 or panitumab$2 or panitumumab$2 or panitumumabum$2 or panitunumab$2 or vectibex$2 or vectibix$2).ti,ab,kw. [PANITUMUMAB TERMS]	6826
#366	(6ns400bxkh or 780758-10-3 or 828933-51-3 or biomab-egfr or diacim$2 or h-r3 or nimotuzumab$2 or osag-101 or radiotheracim$2 or theracim$2 or theraloc$2).ti,ab,kw. [NIMOTUZUMAB TERMS]	1470
#367	(339186-68-4 or emd7200 or emd-7200 or emd72000 or emd-72000 or kgaa$2 or matuzumab$2 or merck-kgaa or mg4m3qb242).ti,ab,kw. [MATUZUMAB TERMS]	50610
#368	(12-igg1 or 1438851-35-4 or 216974-75-3 or 2s9zzm9q9v or abevmy$2 or abp215 or abp-215 or ainex$2 or altuzan$2 or alymsys$2 or ankeda$2 or anti-vegf or askb1202 or ask-b1202 or avastin$2 or avegra$2 or aybintio$2 or ba1101 or ba-1101 or bambevi$2 or bat1706 or bat-1706 or bcd021 or bcd-021 or bevacizumab$2 or bevacizumabum$2 or bevagen$2 or bevatas$2 or bevax$2 or bevz92 or bevz-92 or bi695502 or bi-695502 or bow030 or bow-030 or boyounuo$2 or bp01 or bp-01 or bp102 or bp-102 or bryxta$2 or bs503a or bs-503a or bxt2316 or bxt-2316 or byvasda$2 or cbt124 or cbt-124 or chs305 or chs-305 or chs5217 or chs-5217 or cizumab$2 or ctp16 or ct-p16 or equidacent$2 or fkb238 or fkb-238 or gb222 or gb-222 or gbs004 or gbs-004 or hanbeitai$2 or hd204 or hd-204 or hlx04 or hlx-04 or hot1010 or hot-1010 or hsdb-8080 or ibi305 or ibi-305 or idb0072 or idb-0072 or intp24 or intp-24 or ipique$2 or jhl1149 or jhl-1149 or js501 or js-501 or jy028 or jy-028 or krabeva$2 or kyomarc$2 or l01xc07 or lextemy$2 or "lumiere-(drug)" or ly01008 or ly-01008 or mabionvegf$2 or mb02 or mb-02 or mil60 or mil-60 or mvasi$2 or myl14020 or myl-14020 or myl1402o or myl-1402o or nsc704865 or nsc-704865 or onbevzi$2 or ons1045 or ons-1045 or	87453

No.	Query	Results
	ons5010 or ons-5010 or oyavas$2 or pf06439535 or pf-06439535 or pf6439535 or pf-6439535 or pmc901 or pmc-901 or pobevcy$2 or pro169 or pro-169 or pusintin$2 or ql1101 or ql-1101 or r435 or r-435 or rg435 or rg-435 or rhumab$2 or ro4876646 or ro-4876646 or rph001 or rph-001 or rtpr023 or r-tpr-023 or sb8 or sb-8 or sct501 or sct-501 or sct510 or sct-510 or sibp04 or sibp-04 or stc103 or stc-103 or stivant$2 or tab008 or tab-008 or tab014 or tab-014 or tot102 or tot-102 or trs003 or trs-003 or tx16 or tx-16 or vegzelma$2 or versavo$2 or zirabev$2 or zrc113 or zrc-113 or zybev$2).ti,ab,kw. [BEVACIZUMAB TERMS]	
#369	(2022215-59-2 or anb011 or anb-011 or dostarlimab$2 or gsk4057190 or gsk-4057190 or jemperli$2 or p0gvq9a4s5 or tsr042 or tsr-042 or wbp285 or wbp-285).ti,ab,kw. [DOSTARLIMAB TERMS]	493
#370	(chembl5095383 or retlirafusp-alfa or shr1701 or shr-1701).ti,ab,kw,kf,ot,hw,rn,nm. [SHR-1701 TERMS]	56
#371	(2368219-35-4 or 45x7ou8c4j or ab154 or ab-154 or domvanalimab$2 or who-11559).ti,ab,kw. [DOMVANALIMAB TERMS]	49
#372	(2259860-24-5 or ab122 or ab-122 or gls010 or gls-010 or gs0122 or gs-0122 or wbp3055 or wbp-3055 or who-11413 or zbl7o904il or zimberelimab$2).ti,ab,kw. [ZIMBERELIMAB TERMS]	126
#373	(0vua21238f or 1092929-10-6 or 1210608-87-9 or 1xkk or 231277-92-2 or 388082-78-8 or 437755-78-7 or 913989-15-8 or a25184 or ab01273965-01 or ab01273965-02 or ab01273965-03 or ab01273965-04 or ab01273965-05 or ac-1314 or akos005145766 or am20090641 or as-14065 or bc164610 or bcp01874 or bcp9000837 or bcp9000838 or bcpp000188 or bcpp000189 or bdbm5445 or brd-k19687926-001-01-7 or brd-k19687926-379-02-5 or c29h26clfn4o4s or ccg-270133 or chebi-49603 or chembl554 or cid-208908 or d08108 or db01259 or dtxcid5026675 or dtxsid7046675 or en300-117254 or ex-a402 or fmm$2 or ft-0659650 or gsk572016 or gsk-572016 or gtpl5692 or gw2016 or gw-2016 or gw282974x or gw-282974x or gw572016 or gw-572016 or gw572016f or gw-572016f or gw-572016x or hms2089h10 or hms3244n06 or hms3244n10 or hms3244n14 or hms3744k11 or hsdb-8209 or hy-50898 or kinome-3684 or kinome-3685 or l0360 or lapatinib$2 or mfcd09264194 or ncgc00167507-01 or ncgc00167507-02 or ncgc00167507-03 or ncgc00167507-04 or ncgc00167507-09 or ns00003012 or nsc745750 or nsc-745750 or nsc800780 or nsc-800780 or q-101353 or q420323 or sb16918 or schembl8100 or sr-05000001472-1 or sw199101-5 or tox21-112505 or tykerb$2 or tyverb$2).ti,ab,kw. [LAPATINIB TERMS]	11804
#374	(857890-39-2 or a825653 or ac-25047 or aiv007 or aiv-007 or akos025401742 or amy9240 or as-16203 or bcp01799 or bcp9000633 or bcpp000247 or bdbm50331094 or bl164616 or c21h19cln4o4 or ccg-264842 or chebi-85994 or chembl1289601 or cs-0109 or d09919 or db09078 or dtxcid50117096 or dtxsid50194605 or e7080 or e-7080 or ee083865g2 or en300-7418350 or er203492-00 or er-203492-00 or ex-a249 or ft-0700727 or gtpl7426 or hms3244a07 or hms3244a08 or	6247099

No.	Query	Results
	hms3244b07 or hms3654a14 or hy-10981 or j-513372 or kisplyx$2 or l01xe29 or lenvatinib$2 or lenvatinibum$2 or lenvima$2 or lev$2 or mfcd16038644 or mk7902 or mk-7902 or mls006011239 or ncgc00263198-01 or ncgc00263198-04 or ncgc00263198-07 or ns00069283 or nsc755980 or nsc-755980 or nsc800781 or nsc-800781 or q6523413 or ro7071618 or ro-7071618 or s1164 or sb16580 or schembl864638 or smr004702999 or sw219259-1 or z2235801899).ti,ab,kw. [LENVATINIB TERMS]	
#375	(0rf or 1001264-89-6 or 524y3ib4hq or ac-28420 or akos025396463 or as-17027 or bcp0726000195 or bcp9000712 or bdbm50398379 or ccg-269312 or chebi-95089 or chembl2177390 or cs-0975 or d10641 or db11743 or dtxsid101025595 or ex-a2077 or gdc0068 or gdc-0068 or gdc0068-di-hcl or gdc-0068-di-hcl or gtpl7887 or hy-15186 or ipatasertib$2 or mfcd22124514 or ncgc00346714-01 or ns00072927 or nsc767898 or nsc-767898 or nsc781451 or nsc-781451 or nsc800986 or nsc-800986 or nsc832484 or nsc-832484 or q27078088 or rg7440 or rg-7440 or rg-7440-di-hcl or s2808 or schembl191659).ti,ab,kw. [IPATASERTIB TERMS]	724
#376	or/323-363 [INTERVENTION & COMPARATORS & CHEMO TERMS]	2345868
#377	322 and 376	32251
#378	377 use coch [CDSR results]	7
#379	181 or 254 or 321 or 378 [All results - no date limit]	8418

H.1.4.2 Updated SLR

The updated SLR was designed to align with the original SLR to identify new results. The search strategy is presented in Table 69.

Table 69. Search strategy table for Ovid MEDLINE®, Ovid Embase, and Ovid EBM Reviews (including Cochrane Central Register of Controlled Trials & Cochrane Database of Systematic Reviews) (September 4, 2024)

No.	Query	Results
#1	Stomach Neoplasms/ or (Esophageal Neoplasms/ and exp Esophagogastric Junction/)	136138
#2	Neoplasm Metastasis/ or Neoplasm Recurrence, Local/	520276
#3	((((stomach? or gastric$ or cardia or cardiac or antrum? or antral$ or fundus$ or pyloric$ or pylorus$ or ventricul$ or linitis plastica or leather-bottle or ((stomach? or gastric$) and (GC or GEJ))) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-	74428

No.	Query	Results
	sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$)) or ((stomach? or gastric$) adj3 SCC) or ((esophag$ or oesophag$ or esophagogastric$ or esophago-gastric$ or oesophagogastric$ or oesophago-gastric$ or gastroesophageal$ or gastro-esophageal$ or gastrooesophageal$ or gastro-oesophageal$ or cardio-esophageal$ or cardio-oesophageal$ or cardioesophageal$ or cardiooesophageal$ or EG or GE) adj3 (junction$ or sphincter$) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$))) adj4 ((meta adj sta$) or metastas$ or metastatic$ or recur$ or secondar$ or relaps$ or advance$ or inoperab$ or disseminat$ or spread or migration or lethal$ or incurable or noncurable or non-curable or uncurable or progressive or terminal or invasive$ or aggressive$ or (late? adj2 stage$) or ((stage? or grade? or type?) adj2 (3a$ or 3b$ or 3c$ or III$ or 4a$ or 4b$ or IV$)) or "stage 3" or "stage 4" or met or mets or N1? or N2? or N3? or pN1? or pN2? or pN3?)).ti,ab,kw,kf. [Metastatic GC/GEJ TERMS]	
#4	(1 and 2) or 3 [GC-GEJ TERMS]	79688
#5	(tislelizumab$2 or tirelizumab$2 or bgb-a317 or bgba317 or bgn-1 or bgn1 or jhl-2108 or jhl2108 or vdt-482 or vdt482 or 1858168-59-8 or 0kvo411b3n).ti,ab,kw,kf,ot,hw,rn,nm. [TISLELIZUMAB TERMS]	3191
#6	Immune Checkpoint Inhibitors/ or ((Programmed Cell Death 1 Receptor/ or Programmed Cell Death 1 Ligand 2 Protein/) and (inhibit$ or block?).ti,ab,kw,kf.) or ((immune$ adj3 checkpoint? adj3 (inhibit$ or block?)) or (((programmed adj3 death) or PD-1 or PD-1-PD-L1 or PDCD1) adj3 (ligand? or inhibit$ or block?)) or ((B7-H1 or B7H1 or "B7 homolog 1" or CD274 or CD273 or PDCD1LG1 or PDCD1LG2) adj3 (antigen? or protein?)) or ((Cytotoxic-T-Lymphocyte-Associated Protein-4 Inhibitor? or CTLA-4) adj3 (inhibit$ or block?)) or (ICI? and "Immun$ Checkpoint") or BMS-1 or EX-A947 or HY-19991 or J-690233 or MFCD28978741 or s7911 or D000082082 or SCHEMBL16555159 or ZINC230477930 or 1675201-83-8).ti,ab,kw,kf,ot,hw,rn,nm. [IMMUNE CHECKPOINT PROTEINS TERMS]	193093
#7	Immunotherapy/ or Radioimmunotherapy/ or Antibodies, Monoclonal/ or (immunotherap$ or immuno-therap$ or (((biologic$ adj3 response? adj3 modifier?) or BRM or immunogenic$ or immunologic$ or immuno-genic$ or immuno-logic$ or radioimmunotherapy$ or radio-immunotherap$ or ((monoclonal$ or clonal$ or hybridoma$) adj2 antibod$)) adj3 (therap$ or intervention? or treat$))).ti,ab,kw,kf. [IMMUNOTHERAPY TERMS]	938268

No.	Query	Results
#8	Molecular Targeted Therapy/ or ((molecular$ or neoplas$ or cancer$ or tumo?r$ or carcinoma$) adj3 (target$ adj3 therap$)).ti,ab,kw,kf. [TARGETED THERAPY TERMS]	198162
#9	(atezolizumab$2 or anti-PDL1 or MPDL-3280A or MPDL3280A or RG-7446 or RG7446 or ro-5541267 or ro5541267 or Tecentriq$2 or Tecntriq$2 or 1380723-44-3 or 0INE2SFD9E or 52CMI0WC3Y).ti,ab,kw,kf,ot,hw,rn,nm. [ATEZOLIZUMAB TERMS]	26406
#10	(avelumab$2 or bavencio$2 or msb-0010682 or msb-0010718c or msb0010682 or msb0010718c or msb-10682 or msb-10718c or msb10682 or msb10718c or pf-06834635 or pf-6834635 or pf06834635 or pf6834635 or KXG2PJ551I or 1537032-82-8).ti,ab,kw,kf,ot,hw,rn,nm. [AVELUMAB TERMS]	9237
#11	(camrelizumab$2 or "anti-pd-1 monoclonal antibody" or shr-1210 or shr1210 or carilizumab$2 or carrelizumab$2 or 73096E137E or 1798286-48-2).ti,ab,kw,kf,ot,hw,rn,nm. [CAMRELIZUMAB TERMS]	5271
#12	(1428935-60-7 or 28x28x9okv or anti-b7h1-monoclonal-antibody or durvalumab$2 or durvalumabum$2 or imfinzi$2 or l01xc28 or medi4736 or medi-4736).ti,ab,kw,kf,ot,hw,rn,nm. [DURVALUMAB TERMS]	16406
#13	Ipilimumab/ or (ipilimumab$2 or bms-734016 or bms734016 or cs-1002 or cs1002 or ibi-310 or ibi310 or mdx-ctla-4 or mdx-010 or mdx-101 or mdx010 or mdx101 or strentarga$2 or yervoy$2 or 6T8C155666 or 477202-00-9).ti,ab,kw,kf,ot,hw,rn,nm. [IPILIMUMAB TERMS]	36836
#14	Nivolumab/ or (nivolumab$2 or bms-936558 or bms-986213 or bms-986298 or cmab819 or bms936558 or bms986213 or bms986298 or cmab-819 or mdx-1106 or mdx1106 or ono-4538 or ono4538 or opdivo$2 or opdualag$2 or 31YO63LBSN or 946414-94-4).ti,ab,kw,kf,ot,hw,rn,nm. [NIVOLUMAB TERMS]	60030
#15	(pembrolizumab$2 or keytruda$2 or lambrolizumab$2 or mk3475 or mk-1308a or mk-3475 or mk7684a or sch-900475 or sch900475 or "keylynk-010 component" or DPT0O3T46P or 1422183-02-5 or 1374853-91-4).ti,ab,kw,kf,ot,hw,rn,nm. [PEMBROLIZUMAB TERMS]	60300
#16	(2072873-06-2 or 8fu7fq8upk or ibi308 or ibi-308 or sintilimab$2 or tyvyt$2 or who-10801).ti,ab,kw,kf,ot,hw,rn,nm. [SINTILIMAB TERMS]	3771
#17	(1924598-82-2 or 8jxn261vva or js001 or js-001 or tab001 or tab-001 or teripalimab$2 or toripalimab$2 or treipril$2 or treprizumab$2 or tripleitriumab$2 or triprizumab$2 or tuoyi$2 or who-10820).ti,ab,kw,kf,ot,hw,rn,nm. [TORIPALIMAB TERMS]	2672
#18	(2079108-44-2 or 2226345-85-1 or 2y3t5if01z or aex1188 or aex-1188 or incmga00012 or incmga-00012 or incmga0012 or incmga-0012 or	301

No.	Query	Results
	mga012 or mga-012 or retifanlimab$2 or zynyz$2).ti,ab,kw,kf,ot,hw,rn,nm. [RETIFANLIMAB TERMS]	
#19	(2102192-68-5 or anti-pd-l1-monoclonal-antibody-kn035 or asc22 or asc-22 or envafolimab$2 or es1m06m6qh or kn035 or kn-035).ti,ab,kw,kf,ot,hw,rn,nm. [ENVAFOLIMAB TERMS]	264
#20	(2245725-04-4 or l62556gpxb or mgd013 or mgd-013 or tebotelimab$2).ti,ab,kw,kf,ot,hw,rn,nm. [TEBOTELIMAB TERMS]	107
#21	(2394841-59-7 or 6fyg1ds4nw or ak104 or ak-104 or cadonilimab$2 or who-11581).ti,ab,kw,kf,ot,hw,rn,nm. [CADONILIMAB TERMS]	238
#22	(2231029-82-4 or hlx10 or hlx-10 or s3gqz2k36v or serplulimab$2).ti,ab,kw,kf,ot,hw,rn,nm. [SERPLULIMAB TERMS]	273
#23	(2256084-03-2 or 90iqr2i6tr or cs1001 or cs-1001 or sugemalimab$2 or wbp315 or wbp-315 or wbp3155 or wbp-3155).ti,ab,kw,kf,ot,hw,rn,nm. [SUGEMALIMAB TERMS]	230
#24	(1496553-00-4 or claudiximab$2 or imab362 or imab-362 or tf5mpq8wgy or zolbetuximab$2).ti,ab,kw,kf,ot,hw,rn,nm. [ZOLBETUXIMAB TERMS]	408
#25	(1952272-74-0 or bemarituzumab$2 or fpa144 or fpa-144 or rjw23bq0kw).ti,ab,kw,kf,ot,hw,rn,nm. [BEMARITUZUMAB TERMS]	152
#26	Cetuximab/ or (205923-56-4 or abp494 or abp-494 or c225 or c-225 or c225-03 or c-22503 or c-225-03 or cdp1 or cdp-1 or cetuximab$2 or cetuximabum$2 or ch225 or ch-225 or chimeric-anti-egfr-monoclonal-antibody or cmab009 or cmab-009 or ctp15 or ct-p15 or dtxsid0040830 or erbitux$2 or hsdb-7454 or imc225 or imc-225 or imcc225 or imcc-225 or imc-c225 or kl140 or kl-140 or l01xc06 or ly2939777 or ly-2939777 or mab-c225 or moab-c225 or nsc714692 or pqx0d8j21j or sti001 or sti-001).ti,ab,kw,kf,ot,hw,rn,nm. [CETUXIMAB TERMS]	49860
#27	(1133766-06-9 or metmab$2 or metma-b or ms1j9720wc or onartuzumab$2 or pro143966 or pro-143966 or pro-143996 or pro143996 or ro5490258 or ro-5490258).ti,ab,kw,kf,ot,hw,rn,nm. [ONARTUZUMAB TERMS]	788
#28	(51wew898ij or 872514-65-3 or amg102 or amg-102 or rilotumumab$2).ti,ab,kw,kf,ot,hw,rn,nm. [RILOTUMUMAB TERMS]	730
#29	(1518996-49-0 or 571045eim4 or andecaliximab$2 or gs5745 or gs-5745).ti,ab,kw,kf,ot,hw,rn,nm. [ANDECALIXIMAB TERMS]	194
#30	(444731-52-6 or 635702-64-6 or 790713-33-6 or 7rn5dr86ck or a19406 or a839572 or ab01273967-01 or ab01273967-02 or ab01273967-05 or ab01273967-06 or ac-8522 or akos005145819 or am20090659 or ar-270-43507999 or armala$2 or as-11066 or bcp01839 or bcp9001053 or bcpp000129 or bd164238 or bdbm26474 or brd-k74514084-003-02-7 or	15257

No.	Query	Results
	ccg-265010 or chebi-71219 or chembl477772 or cid-10113978 or cs-0269 or db06589 or dtxcid1028659 or dtxsid8048733 or en300-57325 or ex-a1241 or ft-0659928 or ft-0684794 or gtpl5698 or gw780604 or gw-780604 or gw-78603 or gw786034 or gw7-86034 or gw-786034 or gw786034b or gw-786034b or gw786034x or gw-786034x or hms3244c21 or hms3244c22 or hms3244d21 or hms3656l14 or hms3745g05 or hsdb-8210 or hy-10208 or indazolylpyrimidine-13 or jmc514632-compound-13 or kinome-3790 or mfcd11616589 or ncgc00188865-01 or ncgc00188865-02 or ncgc00188865-03 or ncgc00188865-10 or nsc752782 or nsc-752782 or nsc800839 or nsc-800839 or p-6706 or pazopanib$2 or pazopanibum$2 or q-101400 or q7157043 or s3012 or sb17290 or sb710468 or sb-710468 or sb710468a or sb-710468a or schembl588608 or sw218082-3 or tox21-113174 or tox21-113174-1 or votrient$2 or z1541638525).ti,ab,kw,kf,ot,hw,rn,nm. [PAZOPANIB TERMS]	
#31	(1218779-75-9 or 5s371k6132 or 811803-05-1 or ab01274807-01 or ab01274807-02 or ac-27461 or akos024464453 or amy21302 or apatinib$2 or ba175030 or bcp02840 or c76598 or ccg-268625 or chembl3186534 or cs-0003200 or d11288 or db14765 or ds-7455 or dtxsid601024366 or ex-a1794 or gtpl7648 or hy-13342a or mfcd21648511 or ncgc00249393-01 or ncgc00249393-08 or nsc772886 or nsc-772886 or nsc799333 or nsc-799333 or q27262801 or rivoceranib$2 or s5248 or sb16590 or schembl1814966 or yn968d1 or yn-968d1).ti,ab,kw,kf,ot,hw,rn,nm. [RIVOCERANIB/APATINIB TERMS]	5438
#32	Induction Chemotherapy/ or Consolidation Chemotherapy/ or Maintenance Chemotherapy/ or Antineoplastic Combined Chemotherapy Protocols/ or exp Chemotherapy, Adjuvant/ or Chemoradiotherapy/ or (chemotherap$ or chemo-therap$ or carcinochemotherap$ or chemoradiotherap$ or chemoradiation? or radiochemotherap$ or carcino-chemotherap$ or chemo-radiotherap$ or chemo-radiation? or radio-chemotherap$).ti,ab,kw,kf. [CHEMOTHERAPY TERMS]	1906893
#33	exp Leucovorin/ or (leucovorin$ or 6-s-leucovorin or 6s-leucovorin or acide folinique or akos015961207 or bdbm50039121 or bpbio1-000766 or bspbio-000696 or bspbio-002218 or brd-a75919782-238-01-8 or calcium folinate or chebi-15640 or chembl1679 or chembl69905 or citrovoeum-factor or citrovorum-factor or d93089 or divk1c-000222 or dtxsid0048216 or einecs-200-361-6 or en300-27068710 or folinate folinic-acid-sf or folinic acid or formyltetrahydrofolate or fusilev$2 or gtpl4816 or gtpl6690 or hsdb-6544 or hy-17556 or idi1-000222 or kbio1-000222 or kbio2-001339 or kbio2-003907 or kbio2-006475 or kbio3-001438 or kbiogr-000461 or kbioss-001339 or lencovorin$2 or leucal$2 or leukovorin$2 or leukovoran$2 or leucovorin$2 or levoleucovorin$2 or levo-leucovorin$2 or mfcd00867488 or ninds-000222 or nsc3590 or prestwick0-000738 or prestwick1-000738 or prestwick2-000738 or prestwick3-000738 or q45435667 or q573i9dvlp or s5790 or schembl10068238 or schembl8349 or sd-204098 or s-leucovorin$2 or sleucovorin$2 or spectrum2-000116 or spectrum3-000479 or spectrum4-000031 or spectrum5-000910 or spectrum-000859 or spbio-000132 or spbio-002635 or sbi-0051427-p003 or welcovorin$2 or	69840

No.	Query	Results
	"formyltetrahydropteroylglutamic acid" or Q573I9DVLP or 58-05-9).ti,ab,kw,kf,ot,hw,rn,nm. [LEUCOVORIN TERMS]	
#34	Carboplatin/ or (Carboplatin$2 or blastocarb$2 or boplatex$2 or carboplat$ or carbosin$2 or carbotec$2 or carplan$2 or CBDCA or (platinum adj3 (cis or diamin? or cyclobutanedicarboxylat? or dicarboxylatediammine)) or Dicarboxylatoplatinum or diamminecyclobutanedicarboxylatoplatinum or cycloplatin$ or erbakar$2 or ercar$2 or ifacap$2 or jm8 or jm-8 or kemocarb$2 or nsc-241240 or nsc241240 or nsc-201345 or nsc201345 or oncocarbin$2 or paraplatin$ or Platinwas$2 or Ribocarbo$2 or Neocarbo$2 or Nealorin$2 or HSDB-6957 or BG3F62OND5 or 41575-94-4).ti,ab,kw,kf,ot,hw,rn,nm. [CARBOPLATIN TERMS]	133729
#35	exp Paclitaxel/ or (paclitaxel$ or abraxane$2 or abraxus$2 or act02709 or act-02709 or acon1-002231 or anx-513 or anzatax$2 or apealea$2 or asotax$2 or bidd-pxr0046 or biotax$2 or bms-181339 or bms181339-01 or bms181339 or bms-181339-01 or bmy-45622 or bmy45622 or bspbio-000290 or capxol$2 or ccris-8143 or chembl428647 or chebi-45863 or coroflex-please$2 or coroxane$2 or cmap-000068 or cynviloq$2 or cypher-select$2 or dsstox-cid-3413 or dsstox-gsid-23413 or dsstox-rid-77016 or dhp107 or dhp-107 or dhp-208 or dhp208 or dts-301 or dts301 or ebetaxel$2 or empac$2 or endotag-1 or endotag1 or formoxol$2 or genaxol$2 or genetaxyl$2 or genexol$2 or gtpl2770 or hms2090d07 or hms2095o12 or hms2231a16 or hms3712o12 or hsdb-6839 or hunxol$2 or hy-b0015 or ifaxol$2 or ig-001 or ig001 or infinnium$2 or intaxel$2 or kbiogr-002509 or kbio2-002509 or kbio2-005077 or kbio2-007645 or kbio3-002987 or lep-etu$2 or lipopac$2 or liporaxel$2 or mbt-0206 or mbt0206 or medixel or mfcd00869953 or mitotax$2 or nanopac$2 or nanotax$2 or nanotaxel$2 or ncgc00164367-01 or nk-105 or nk105 or nsc-125973 or nsc-673089 or nsc125973 or nsc673089 or nscc-125973 or nova-12005 or oas-pac-100 or oaspac100 or oncogel$2 or onxal$2 or onxol$2 or p-ssmm-vip$2 or paclical$2 or pacitaxel$2 or paclical$2 or padexol$2 or pacligel$2 or paclitaxel$2 or pacliex$2 or paxceed$2 or paxene$2 or paxoral$2 or paxus$2 or pazenir$2 or plaxicel$2 or praxel$2 or qw-8184 or schembl3976 or sb-05 or sb05 or sdp-013 or sindaxel$2 or smr000857385 or sr-01000075350 or taycovit$2 or taxalbin$2 or taxane$ or taxocris$2 or taxol$2 or taxus$2 or tocosol$2 or xorane$2 or yewtaxan$2 or zinc96006020 or zisu$2 or P88XT4IS4D or 33069-62-4).ti,ab,kw,kf,ot,hw,rn,nm. [PACLITAXEL TERMS]	247113
#36	Docetaxel/ or (114915-20-7 or 114977-28-5 or 15h5577cqd or 699121phca or ab01273941-01 or ab01273941-02 or ac-383 or akos015960718 or akos024457953 or amy4356 or anx-514 or axtere$2 or bd164373 or bdbm36351 or bind014 or bind-014 or brd-k30577245-001-04-3 or brd-k30577245-341-01-9 or bs102 or bs-102 or chebi-4672 or chembl92 or cid148124 or ckd-810 or crlx301 or crlx-301 or cs-1144 or d07866 or d4102 or daxotel$2 or db01248 or dexotel$2 or docecad$2 or docefrez$2 or docetaxel$2 or docetaxelum$2 or docetaxol$2 or docetaxolum$2 or dtxcid8020464 or dtxsid0040464 or emdoc$2 or en300-123047 or ex-a1206 or gtpl6809 or hms2089k08 or hsdb-6965 or hy-b0011 or ks-1452 or l01cd02 or lit976 or lit-976 or mfcd00871399 or	111596

No.	Query	Results
	ncgc00181306-01 or ncgc00181306-02 or ncgc00181306-04 or ncgc00242509-01 or nsc628503 or nsc-628503 or nsc-759850 or oncodocel$2 or q-100074 or q420436 or rp56976 or rp-56976 or schembl4419 or sdp-014 or sid-530 or sr-01000003023 or sr-01000003023-5 or syp-0704a or taxanit$2 or taxespira$2 or taxoel$2 or taxoltere-metro or taxotel$2 or taxoter$2 or taxotere$2 or texot$2 or tox21-112781 or tox21-113088 or txl$2 or w-60384 or xrp6976 or xrp-6976 or xrp-6976l or z1546621742).ti,ab,kw,kf,ot,hw,rn,nm. [DOCETAXEL TERMS]	
#37	Cisplatin/ or (Cisplatin$ or platinum$ or Cismaplat$2 or (cis adj3 ($platinum or platinous)) or cis-platinum or cis-Platin or dichloroplatinum or diaminodichloroplatinum or diamminedichloroplatinum or dichlorodiammineplatinum or AI3-62048 or abiplatin or biocisplatinum or biocysplatinum or blastolem$2 or briplatin$2 or cddp-ti or cis-ddp or cisPt$ or CACP or CCRIS-221 or CDDP or DDPt or CP-Ethypharm or CPDC or CPDD or CPPD or (DDP and antitumor) or cisplatyl$2 or citoplatino$2 or cytoplatin$2 or cytosplat$2 or docistin$2 or elvecis$2 or kemoplat$2 or Fauldiscipla$2 or IA-call or LiPlaCis$2 or lederplatin$2 or lipoplatin$2 or "liposomal cisplatin" or mpi-5010 or mpi5010 or neoplatin$2 or niyaplat$2 or nk-801 or noveldexis$2 or nsc-119875 or nci-c55776 or platamine$2 or platamine-rtu or platiblastin$2 or platidiam$2 or platimine$2 or platinex$2 or platinil$2 or platino$2 or platinol$2 or platinolaq$2 or platinol-aq$2 or platinoxan$2 or platiran$2 or platistil$2 or platistin$2 or platosin$2 or "pronto platamine" or "Peyrone's chloride" or randa$2 or romcis$2 or sicatem$2 or spi-077 or tr-170 or tecnoplatin$2 or Q20Q21Q62J or 15663-27-1 or 26035-31-4 or 96081-74-2).ti,ab,kw,kf,ot,hw,rn,nm. [CISPLATIN TERMS]	485939
#38	Oxaliplatin/ or (oxaliplatin$2 or (Oxalat$ adj3 platin$) or axiplatin$2 or bendaplatin$2 or crisapla$2 or croloxat$2 or dacotin$2 or dacplat$2 or ebeoxal$2 or elatofen$2 or eloxatin$ or elplat$2 or euroxaliplatin$2 or geneplatin$2 or gessedil$2 or heloxatin$2 or lipoxal$2 or mbp-426 or mbp426 or medoxa$2 or oksaliplatin$ or oplat$2 or oxalatoplatin$ or oxalatplatin$2 or oxali$2 or oxalip$2 or oxaliplan$2 or oxaliprol$2 or oxaliquid$2 or oxalisan$2 or oxalisin$2 or oxalizor$2 or oxaltic$2 or oxaltin$2 or oxamed$2 or oxaplamyl$2 or oxaviatin$2 or platox$2 or plaxitin$2 or rectoxal$2 or riboxatin$2 or rp-54780 or rp54780 or sinoxal$2 or sr-96669 or sr96669 or transplastin$2 or velminox$2 or xaliplat$2 or xoplan$2 or L-OHP-Cpd or 1-OHP or ACT-078 or ACT078 or CCRIS-9143 or NSC-266046 or 04ZR38536J or 61825-94-3).ti,ab,kw,kf,ot,hw,rn,nm. [OXALIPLATIN TERMS]	109100
#39	Capecitabine/ or (capecitabin$ or apecitab$2 or atubri$2 or bc164277 or bcpp000300 or bxeliri$2 or bs-1000 or cacit$2 or capcel$2 or capebina$2 or capecite$2 or capegard$2 or capezam$2 or capicet$2 or capiri$2 or capiibine$2 or captabin$2 or capnat$2 or capoda$2 or capostat$2 or capsy$2 or capxcel$2 or caxeta$2 or ccg-264841 or ccx-340 or cpecitabine$2 or cs-0768 or d01223 or db01101 or dsstox-cid-26451 or dsstox-gsid-46451 or dsstox-rid-81625 or dtxsid3046451 or ecansya$2 or ex-a835 or gtpl6799 or hsdb-7656 or hy-b0016 or j-700154 or k007 or m0297 or mfcd00930626 or mls003915642 or mls004774137 or	60295

No.	Query	Results
	ncgc00164569-01 or ncgc00164569-02 or ncgc00164569-05 or nsc-759853 or paxon$2 or q-200788 or q420207 or r-340 or rg-340 or r340 or rg340 or ro-09-1978 or ro-091978 or ro-09-1978 or ro-09-1978-000 or ro091978 or s1156 or s-1156 or sr-01000931255 or tox21-112198 or x-abine$2 or x-tabin$2 or xabine$2 or xecap$2 or xeliri$2 or xelocel$2 or xeloda$2 or xelox$2 or z1501480421 or zinc3806413 or 6804dj8z9u or 154361-50-9 or 958887-39-3).ti,ab,kw,kf,ot,hw,rn,nm. [CAPECITABINE TERMS]	
#40	(platinum adj1 (fluoropyrimidine or fluoro-pyrimidine) adj3 (doublet? or combin$ or chemotherap$ or chemo-therap$ or ((first or front) adj1 line?) or 1-LOT or 1L or therap$ or regimen? or expos$)).ti,ab,kw,kf,ot,hw,rn,nm. [PLATINUM-FLUOROPYRIMIDINE DOUBLET TERMS]	262
#41	(5-fluoropyrimidin$ or 5-fluoro-pyrimidine or pyrimidine-5-fluoro or (fluorinated adj1 pyrimidine) or a9048 or ac-453 or akos006346044 or am86123 or "bb 0260992" or c4h3fn2 or db-007051 or dtxsid80217851 or en300-6966105 or f14737 or ft-0601423 or mfcd06658278 or q42859845 or w-203496 or zinc1845840 or 675f218 or L36X4TD47C or 675-21-8).ti,ab,kw,kf,ot,hw,rn,nm. [FLUOROPYRIMIDINE TERMS]	5397
#42	Fluorouracil/ or (fluorouracil$ or fluroblastin$ or 1upf or 5-Faracil or 5-Fluoracil or 5-Fluoracyl or 5-fluoro-uracil or 5-fluoro-uracil or 5-Fluoroblastin or 5-fluorouacil or 5-Ftouracyl or 5-FU or 5FU or 5F-uracil or Adrucil$2 or AI3-25297 or Arumel$2 or BSPBio-002048 or Cancersil$2 or Carac$2 or Carzonal$2 or CHEBI-46345 or CHEMBL185 or Cinco-FU or CCRIS-2582 or DSSTox-CID-634 or DSSTox-GSID-20634 or DSSTox-RID-75705 or Efudex$2 or Efudix$2 or Efurix$2 or EINECS-200-085-6 or Effluderm$2 or Fluoroblastin$2 or Fluoro-Uracil$2 or Fluoro-uracile$2 or Fluoro-uracilo$2 or Fluoroplex$2 or Fluorouracile$2 or Fluorouracilo$2 or Fluorouracilum$2 or Fluorouracilum$2 or Fluracil$2 or Fluracilum$2 or Fluri$2 or Fluril$2 or Fluuro-Uracil$2 or Fluorouracilo$2 or Fluroblastin$2 or Fluro-Uracil$2 or Ftoruracil$2 or GTPL4789 or HSDB 3228 or IDI1-000054 or Kecimeton$2 or KBio1-000054 or KBio2-001321 or KBio2-003889 or KBio2-006457 or KBioGR-001253 or KBioSS-001321 or Lopac-F-6627 or Lopac0-000536 or MFCD00006018 or MLS000069498 or MLS002415705 or NCGC00015442-01 or NCGC00015442-02 or NCGC00015442-03 or NCGC00015442-04 or NCGC00015442-05 or NCGC00015442-06 or NCGC00015442-07 or NCGC00015442-08 or NCGC00015442-09 or NCGC00015442-10 or NCGC00015442-11 or NCGC00015442-12 or NCGC00015442-15 or NCGC00015442-16 or NSC-19893 or NSC757036 or NSC816997 or Phtoruracil$2 or Pharmakon1600-01500305 or Phthoruracil$2 or Queroplex$2 or Ro-2-9757 or S1209 or 191047-64-0 or 191047-65-1 or 191115-88-5 or U3P01618RT or 51-21-8).ti,ab,kw,kf,ot,hw,rn,nm. [FLUOROURACIL TERMS]	256135
#43	Irinotecan/ or (irinotecan$ or ab00698464-07 or ab00698464-09 or ab00698464-10 or ab00698464-11 or ab00698464-12 or ab00698464-13 or ab00698464-14 or ac-7469 or akos015894969 or amy4227 or as-14323 or bdbm50128267 or bcp02860 or bcp9000793 or biotecan$2 or brd-k08547377-003-02-4 or campto$2 or camptosar$2 or chebi-80630 or	71220

No.	Query	Results
	chembl481 or cs-1138 or cpt-11 or cpt11 or d08086 or db00762 or dq2805 or en300-708800 or gtpl6823 or hsdb-7607 or ihl-305 or ihl305 or irinophore-c$2 or irinotel$2 or mfcd00866307 or ncgc00178697-02 or ncgc00178697-05 or nsc-728073 or nsc728073 or nk012-compound or q412197 or s1198 or schembl4034 or sn38 or sn-38 or sn-38-11 or sn3811 or topotecin$2 or u-101440e or u101440e or zinc1612996 or "7673326042" or 100286-90-6 or 97682-44-5).ti,ab,kw,kf,ot,hw,rn,nm. [IRINOTECAN TERMS]	
#44	(teysuno$2 or (tegafur adj4 gimeracil adj4 oteracil) or ((S-1 or S1) adj3 combination) or TS-1-cpd or S-1-cpd or TS-1 or TS1 or BMS247616 or BMS-247616 or S1-tegafur-oxonate or S1-fluoropyrimidine-oxoonate).ti,ab,kw,kf,ot,hw,rn,nm. [S1 COMBINATION TERMS]	11261
#45	Tegafur/ or (1189456-27-6 or 1548r74nsz or 17902-23-7 or 82294-77-7 or a812417 or ab00572620-15 or ac-2112 or akos000121279 or as-13528 or atillon$2 or bcp22714 or bp-58663 or brn-0525766 or c8h9fn2o3 or ccg-100959 or ccg-50110 or ccris-2762 or chebi-32188 or chembl20883 or citofur$2 or coparogin$2 or cs-1128 or d01244 or db09256 or dtxsid001009966 or einecs-241-846-2 or en300-21668 or exonal$2 or f-5-fu or fental$2 or florafur$2 or fluorafur$2 or fluorofur$2 or franrose$2 or franroze$2 or ft-0653732 or ft-0654170 or ft-0674829 or ft-0693965 or ft207 or ft-207 or ftorafur$2 or fulaid$2 or fulfeel$2 or furafluor$2 or furflucil$2 or furofutran$2 or futraful$2 or gtpl10513 or hms1665i05 or hms2051b15 or hms2090k04 or hms2232e05 or hms3371h21 or hms3393b15 or hms3654p13 or hms3715d14 or hy-17400 or lamar$2 or lifril$2 or mfcd00012351 or mjf12264 or mjf-12264 or mls000069497 or mls000759414 or mls001076521 or mls001424119 or nc00209 or ncgc00159418-02 or ncgc00159418-04 or ncgc00159418-05 or neberk$2 or nitobanil$2 or nsc148958 or nsc-148958 or opera-id-1726 or phthorafur$2 or q-201784 or q413370 or racemic-ftorafur or riol$2 or schembl4552 or sfsp$2 or sf-sp or sinoflurol$2 or smr000059106 or sr-01000639511 or sr-01000639511-1 or sr-01000639511-4 or sunfral$2 or sunfural$2 or tefsiel-c or tegaful$2 or tegafur$2 or tegafurum$2 or ts-1 or uftoral$2 or upcmld-dp063 or utefos$2 or z104508106).ti,ab,kw,kf,ot,hw,rn,nm. [TEGAFUR TERMS]	29139
#46	Ramucirumab/ or (1121b or 947687-13-0 or 947687-13-0 or a168 or a-168 or cyramza$2 or d99yvk4l0x or hlx12 or hlx-12 or hsdb-8314 or imc1121b or imc1121-b or imc-1121b or imc-1121-b or l01xc21 or ly3009806 or ly-3009806 or nsc-749128 or pbp2001 or pbp-2001 or ramucirumab$2 or ramucirumabum$2 or ro7234952 or ro-7234952).ti,ab,kw,kf,ot,hw,rn,nm. [RAMUCIRUMAB TERMS]	9421
#47	Panitumumab/ or (339177-26-3 or 6a901e312a or abenix$2 or abx-egf or amg954 or amg-954 or e7-6-3 or l01xc08 or moab-abx-egf or moab-e7-6-3 or monoclonal-antibody-abx-egf or monoclonal-antibody-e7-6-3 or nsc-742319 or panitumab$2 or panitumumab$2 or panitumumabum$2 or panitunumab$2 or vectibex$2 or vectibix$2).ti,ab,kw,kf,ot,hw,rn,nm. [PANITUMUMAB TERMS]	13837

No.	Query	Results
#48	(6ns400bxkh or 780758-10-3 or 828933-51-3 or biomab-egfr or diacim$2 or h-r3 or nimotuzumab$2 or osag-101 or radiotheracim$2 or theracim$2 or theraloc$2).ti,ab,kw,kf,ot,hw,rn,nm. [NIMOTUZUMAB TERMS]	2633
#49	(339186-68-4 or emd7200 or emd-7200 or emd72000 or emd-72000 or kgaa$2 or matuzumab$2 or merck-kgaa or mg4m3qb242).ti,ab,kw,kf,ot,hw,rn,nm. [MATUZUMAB TERMS]	51526
#50	Bevacizumab/ or (12-igg1 or 1438851-35-4 or 216974-75-3 or 2s9zzm9q9v or abevmy$2 or abp215 or abp-215 or ainex$2 or altuzan$2 or alymsys$2 or ankeda$2 or anti-vegf or askb1202 or ask-b1202 or avastin$2 or avegra$2 or aybintio$2 or ba1101 or ba-1101 or bambevi$2 or bat1706 or bat-1706 or bcd021 or bcd-021 or bevacizumab$2 or bevacizumabum$2 or bevagen$2 or bevatas$2 or bevax$2 or bevz92 or bevz-92 or bi695502 or bi-695502 or bow030 or bow-030 or boyounuo$2 or bp01 or bp-01 or bp102 or bp-102 or bryxta$2 or bs503a or bs-503a or bxt2316 or bxt-2316 or byvasda$2 or cbt124 or cbt-124 or chs305 or chs-305 or chs5217 or chs-5217 or cizumab$2 or ctp16 or ct-p16 or equidacent$2 or fkb238 or fkb-238 or gb222 or gb-222 or gbs004 or gbs-004 or hanbeitai$2 or hd204 or hd-204 or hlx04 or hlx-04 or hot1010 or hot-1010 or hsdb-8080 or ibi305 or ibi-305 or idb0072 or idb-0072 or intp24 or intp-24 or ipique$2 or jhl1149 or jhl-1149 or js501 or js-501 or jy028 or jy-028 or krabeva$2 or kyomarc$2 or l01xc07 or lextemy$2 or "lumiere-(drug)" or ly01008 or ly-01008 or mabionvegf$2 or mb02 or mb-02 or mil60 or mil-60 or mvasi$2 or myl14020 or myl-14020 or myl1402o or myl-1402o or nsc704865 or nsc-704865 or onbevzi$2 or ons1045 or ons-1045 or ons5010 or ons-5010 or oyavas$2 or pf06439535 or pf-06439535 or pf6439535 or pf-6439535 or pmc901 or pmc-901 or pobevcy$2 or pro169 or pro-169 or pusintin$2 or ql1101 or ql-1101 or r435 or r-435 or rg435 or rg-435 or rhumab$2 or ro4876646 or ro-4876646 or rph001 or rph-001 or rtpr023 or r-tpr-023 or sb8 or sb-8 or sct501 or sct-501 or sct510 or sct-510 or sibp04 or sibp-04 or stc103 or stc-103 or stivant$2 or tab008 or tab-008 or tab014 or tab-014 or tot102 or tot-102 or trs003 or trs-003 or tx16 or tx-16 or vegzelma$2 or versavo$2 or zirabev$2 or zrc113 or zrc-113 or zybev$2).ti,ab,kw,kf,ot,hw,rn,nm. [BEVACIZUMAB TERMS]	133224
#51	(2022215-59-2 or anb011 or anb-011 or dostarlimab$2 or gsk4057190 or gsk-4057190 or jemperli$2 or p0gvq9a4s5 or tsr042 or tsr-042 or wbp285 or wbp-285).ti,ab,kw,kf,ot,hw,rn,nm. [DOSTARLIMAB TERMS]	1138
#52	(chembl5095383 or retlirafusp-alfa or shr1701 or shr-1701).ti,ab,kw,kf,ot,hw,rn,nm. [SHR-1701 TERMS]	66
#53	(2368219-35-4 or 45x7ou8c4j or ab154 or ab-154 or domvanalimab$2 or who-11559).ti,ab,kw,kf,ot,hw,rn,nm. [DOMVANALIMAB TERMS]	109
#54	(2259860-24-5 or ab122 or ab-122 or gls010 or gls-010 or gs0122 or gs-0122 or wbp3055 or wbp-3055 or who-11413 or zbl7o904il or zimberelimab$2).ti,ab,kw,kf,ot,hw,rn,nm. [ZIMBERELIMAB TERMS]	268

No.	Query	Results
#55	Lapatinib/ or (0vua21238f or 1092929-10-6 or 1210608-87-9 or 1xkk or 231277-92-2 or 388082-78-8 or 437755-78-7 or 913989-15-8 or a25184 or ab01273965-01 or ab01273965-02 or ab01273965-03 or ab01273965-04 or ab01273965-05 or ac-1314 or akos005145766 or am20090641 or as-14065 or bc164610 or bcp01874 or bcp9000837 or bcp9000838 or bcpp000188 or bcpp000189 or bdbm5445 or brd-k19687926-001-01-7 or brd-k19687926-379-02-5 or c29h26clfn4o4s or ccg-270133 or chebi-49603 or chembl554 or cid-208908 or d08108 or db01259 or dtxcid5026675 or dtxsid7046675 or en300-117254 or ex-a402 or fmm$2 or ft-0659650 or gsk572016 or gsk-572016 or gtpl5692 or gw2016 or gw-2016 or gw282974x or gw-282974x or gw572016 or gw-572016 or gw572016f or gw-572016f or gw-572016x or hms2089h10 or hms3244n06 or hms3244n10 or hms3244n14 or hms3744k11 or hsdb-8209 or hy-50898 or kinome-3684 or kinome-3685 or l0360 or lapatinib$2 or mfcd09264194 or ncgc00167507-01 or ncgc00167507-02 or ncgc00167507-03 or ncgc00167507-04 or ncgc00167507-09 or ns00003012 or nsc745750 or nsc-745750 or nsc800780 or nsc-800780 or q-101353 or q420323 or sb16918 or schembl8100 or sr-05000001472-1 or sw199101-5 or tox21-112505 or tykerb$2 or tyverb$2).ti,ab,kw,kf,ot,hw,rn,nm. [LAPATINIB TERMS]	22387
#56	(857890-39-2 or a825653 or ac-25047 or aiv007 or aiv-007 or akos025401742 or amy9240 or as-16203 or bcp01799 or bcp9000633 or bcpp000247 or bdbm50331094 or bl164616 or c21h19cln4o4 or ccg-264842 or chebi-85994 or chembl1289601 or cs-0109 or d09919 or db09078 or dtxcid50117096 or dtxsid50194605 or e7080 or e-7080 or ee083865g2 or en300-7418350 or er203492-00 or er-203492-00 or ex-a249 or ft-0700727 or gtpl7426 or hms3244a07 or hms3244a08 or hms3244b07 or hms3654a14 or hy-10981 or j-513372 or kisplyx$2 or l01xe29 or lenvatinib$2 or lenvatinibum$2 or lenvima$2 or lev$2 or mfcd16038644 or mk7902 or mk-7902 or mls006011239 or ncgc00263198-01 or ncgc00263198-04 or ncgc00263198-07 or ns00069283 or nsc755980 or nsc-755980 or nsc800781 or nsc-800781 or q6523413 or ro7071618 or ro-7071618 or s1164 or sb16580 or schembl864638 or smr004702999 or sw219259-1 or z2235801899).ti,ab,kw,kf,ot,hw,rn,nm. [LENVATINIB TERMS]	8469062
#57	(0rf or 1001264-89-6 or 524y3ib4hq or ac-28420 or akos025396463 or as-17027 or bcp0726000195 or bcp9000712 or bdbm50398379 or ccg-269312 or chebi-95089 or chembl2177390 or cs-0975 or d10641 or db11743 or dtxsid101025595 or ex-a2077 or gdc0068 or gdc-0068 or gdc0068-di-hcl or gdc-0068-di-hcl or gtpl7887 or hy-15186 or ipatasertib$2 or mfcd22124514 or ncgc00346714-01 or ns00072927 or nsc767898 or nsc-767898 or nsc781451 or nsc-781451 or nsc800986 or nsc-800986 or nsc832484 or nsc-832484 or q27078088 or rg7440 or rg-7440 or rg-7440-di-hcl or s2808 or schembl191659).ti,ab,kw,kf,ot,hw,rn,nm. [IPATASERTIB TERMS]	1280
#58	or/5-45 [INTERVENTION & COMPARATORS & CHEMO TERMS]	3407620

No.	Query	Results
#59	(("randomized controlled trial" or "controlled clinical trial").pt. or (randomized or placebo or randomly).ti,ab. or "clinical trials as topic".sh. or trial.ti.) not (exp animals/ not humans.sh.) [RCTs Filter MEDLINE – Balanced, sensitive vs precise - Cochrane Handbook]	2985567
#60	4 and 58 and 59	4801
#61	(Adolescent/ or exp Child/ or exp Infant/) not (exp Adult/ and (Adolescent/ or exp Child/ or exp Infant/)) [CHILDREN <19 REMOVE]	4909840
#62	exp Animals/ not (exp Animals/ and Humans/) [ANIMAL STUDIES ONLY - REMOVE - MEDLINE]	17079943
#63	(address or autobiography or bibliography or biography or comment or dictionary or directory or editorial or "expression of concern" or festschrift or historical article or interactive tutorial or lecture or legal case or legislation or news or newspaper article or patient education handout or personal narrative or portrait or video-audio media or webcast or (letter not (letter and randomized controlled trial))).pt. [Opinion publications - Remove -MEDLINE]	5125551
#64	Clinical Trial Protocol.pt.	471948
#65	60 not (61 or 62 or 63 or 64) [CHILD <19, ANIMAL STUDIES, TRIAL PROTOCOLS and OPINION PUBLICATIONS - REMOVED - MEDLINE]	4242
#66	65 use ppezv [MEDLINE results]	2099
#67	exp stomach carcinoma/ or stomach cancer/ or ((esophagus carcinoma/ or esophageal adenocarcinoma/) and exp gastroesophageal junction/)	277741
#68	local metastasis/ or metastasis/ or cancer recurrence/ or advanced cancer/	861806
#69	((((stomach? or gastric$ or cardia or cardiac or antrum? or antral$ or fundus$ or pyloric$ or pylorus$ or ventricul$ or linitis plastica or leather-bottle or ((stomach? or gastric$) and (GC or GEJ))) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$)) or ((stomach? or gastric$) adj3 SCC) or ((esophag$ or oesophag$ or esophagogastric$ or esophago-gastric$ or oesophagogastric$ or oesophago-gastric$ or gastroesophageal$ or gastro-esophageal$ or gastrooesophageal$ or gastro-oesophageal$ or cardio-esophageal$ or cardio-oesophageal$ or cardioesophageal$ or cardiooesophageal$ or EG or GE) adj3 (junction$ or sphincter$) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$	74428

No.	Query	Results
	or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$))) adj4 ((meta adj sta$) or metastas$ or metastatic$ or recur$ or secondar$ or relaps$ or advance$ or inoperab$ or disseminat$ or spread or migration or lethal$ or incurable or noncurable or non-curable or uncurable or progressive or terminal or invasive$ or aggressive$ or (late? adj2 stage$) or ((stage? or grade? or type?) adj2 (3a$ or 3b$ or 3c$ or III$ or 4a$ or 4b$ or IV$)) or "stage 3" or "stage 4" or met or mets or N1? or N2? or N3? or pN1? or pN2? or pN3?)).ti,ab,kw,kf. [Metastatic GC/GEJ TERMS]	
#70	(67 and 68) or 69 [GC-GEJ TERMS]	91173
#71	tislelizumab/ or (tislelizumab$2 or tirelizumab$2 or bgb-a317 or bgba317 or bgn-1 or bgn1 or jhl-2108 or jhl2108 or vdt-482 or vdt482 or 1858168-59-8 or 0kvo411b3n).ti,ab,kw,kf,ot,rn,dq. [TISLELIZUMAB TERMS]	3191
#72	immune checkpoint inhibitor/ or ((programmed death 1 receptor/ or programmed death 1 ligand 2/) and (inhibit$ or block?).ti,ab,kw,kf.) or ((immune$ adj3 checkpoint? adj3 (inhibit$ or block?)) or (((programmed adj3 death) or PD-1 or PD-1-PD-L1 or PDCD1) adj3 (ligand? or inhibit$ or block?)) or ((B7-H1 or B7H1 or "B7 homolog 1" or CD274 or CD273 or PDCD1LG1 or PDCD1LG2) adj3 (antigen? or protein?)) or ((Cytotoxic-T-Lymphocyte-Associated Protein-4 Inhibitor? or CTLA-4) adj3 (inhibit$ or block?)) or (ICI? and "Immun$ Checkpoint") or BMS-1 or EX-A947 or HY-19991 or J-690233 or MFCD28978741 or s7911 or D000082082 or SCHEMBL16555159 or ZINC230477930 or 1675201-83-8).ti,ab,kw,kf,ot,rn,dq. [IMMUNE CHECKPOINT PROTEINS TERMS]	155277
#73	cancer immunotherapy/ or monoclonal antibody/ or (immunotherap$ or immuno-therap$ or (((biologic$ adj3 response? adj3 modifier?) or BRM or immunogenic$ or immunologic$ or immuno-genic$ or immuno-logic$ or radioimmunotherapy$ or radio-immunotherap$ or ((monoclonal$ or clonal$ or hybridoma$) adj2 antibod$)) adj3 (therap$ or intervention? or treat$))).ti,ab,kw,kf. [IMMUNOTHERAPY TERMS]	925098
#74	molecularly targeted therapy/ or ((molecular$ or neoplas$ or cancer$ or tumo?r$ or carcinoma$) adj3 target$ adj3 therap$).ti,ab,kw,kf. [TARGETED THERAPY TERMS]	173167
#75	atezolizumab/ or (atezolizumab$2 or anti-PDL1 or MPDL-3280A or MPDL3280A or RG-7446 or RG7446 or ro-5541267 or ro5541267 or Tecentriq$2 or Tecntriq$2 or 1380723-44-3 or 0INE2SFD9E or 52CMI0WC3Y).ti,ab,kw,kf,ot,rn,dq. [ATEZOLIZUMAB TERMS]	26222
#76	avelumab/ or (avelumab$2 or bavencio$2 or msb-0010682 or msb-0010718c or msb0010682 or msb0010718c or msb-10682 or msb-10718c or msb10682 or msb10718c or pf-06834635 or pf-6834635 or pf06834635 or pf6834635 or KXG2PJ551I or 1537032-82-8).ti,ab,kw,kf,ot,rn,dq. [AVELUMAB TERMS]	9233

No.	Query	Results
#77	camrelizumab/ or (camrelizumab$2 or "anti-pd-1 monoclonal antibody" or shr-1210 or shr1210 or carilizumab$2 or carrelizumab$2 or 73096E137E or 1798286-48-2).ti,ab,kw,kf,ot,rn,dq. [CAMRELIZUMAB TERMS]	5270
#78	durvalumab/ or (1428935-60-7 or 28x28x9okv or anti-b7h1-monoclonal-antibody or durvalumab$2 or durvalumabum$2 or imfinzi$2 or l01xc28 or medi4736 or medi-4736).tw,kw,kf,ot,rn,dq. [DURVALUMAB TERMS]	16411
#79	ipilimumab/ or (ipilimumab$2 or bms-734016 or bms734016 or cs-1002 or cs1002 or ibi-310 or ibi310 or mdx-ctla-4 or mdx-010 or mdx-101 or mdx010 or mdx101 or strentarga$2 or yervoy$2 or 6T8C155666 or 477202-00-9).ti,ab,kw,kf,ot,rn,dq. [IPILIMUMAB TERMS]	36821
#80	nivolumab/ or (nivolumab$2 or bms-936558 or bms-986213 or bms-986298 or cmab819 or bms936558 or bms986213 or bms986298 or cmab-819 or mdx-1106 or mdx1106 or ono-4538 or ono4538 or opdivo$2 or opdualag$2 or 31YO63LBSN or 946414-94-4).ti,ab,kw,kf,ot,rn,dq. [NIVOLUMAB TERMS]	60005
#81	pembrolizumab/ or (pembrolizumab$2 or keytruda$2 or lambrolizumab$2 or mk3475 or mk-1308a or mk-3475 or mk7684a or sch-900475 or sch900475 or "keylynk-010 component" or DPT0O3T46P or 1422183-02-5 or 1374853-91-4).ti,ab,kw,kf,ot,rn,dq. [PEMBROLIZUMAB TERMS]	60283
#82	sintilimab/ or (2072873-06-2 or 8fu7fq8upk or ibi308 or ibi-308 or sintilimab$2 or tyvyt$2 or who-10801).tw,kw,kf,ot,rn,dq. [SINTILIMAB TERMS]	3771
#83	toripalimab/ or (1924598-82-2 or 8jxn261vva or js001 or js-001 or tab001 or tab-001 or teripalimab$2 or toripalimab$2 or treipril$2 or treprizumab$2 or tripleitriumab$2 or triprizumab$2 or tuoyi$2 or who-10820).tw,kw,kf,ot,rn,dq. [TORIPALIMAB TERMS]	2673
#84	retifanlimab/ or (2079108-44-2 or 2226345-85-1 or 2y3t5if01z or aex1188 or aex-1188 or incmga00012 or incmga-00012 or incmga0012 or incmga-0012 or mga012 or mga-012 or retifanlimab$2 or zynyz$2).tw,kw,kf,ot,rn,dq. [RETIFANLIMAB TERMS]	301
#85	envafolimab/ or (2102192-68-5 or anti-pd-l1-monoclonal-antibody-kn035 or asc22 or asc-22 or envafolimab$2 or es1m06m6qh or kn035 or kn-035).tw,kw,kf,ot,rn,dq. [ENVAFOLIMAB TERMS]	265
#86	tebotelimab/ or (2245725-04-4 or l62556gpxb or mgd013 or mgd-013 or tebotelimab$2).tw,kw,kf,ot,rn,dq. [TEBOTELIMAB TERMS]	107
#87	cadonilimab/ or (2394841-59-7 or 6fyg1ds4nw or ak104 or ak-104 or cadonilimab$2 or who-11581).tw,kw,kf,ot,rn,dq. [CADONILIMAB TERMS]	238

No.	Query	Results
#88	serplulimab/ or (2231029-82-4 or hlx10 or hlx-10 or s3gqz2k36v or serplulimab$2).tw,kw,kf,ot,rn,dq. [SERPLULIMAB TERMS]	273
#89	sugemalimab/ or (2256084-03-2 or 90iqr2i6tr or cs1001 or cs-1001 or sugemalimab$2 or wbp315 or wbp-315 or wbp3155 or wbp-3155).tw,kw,kf,ot,rn,dq. [SUGEMALIMAB TERMS]	230
#90	zolbetuximab/ or (1496553-00-4 or claudiximab$2 or imab362 or imab-362 or tf5mpq8wgy or zolbetuximab$2).tw,kw,kf,ot,rn,dq. [ZOLBETUXIMAB TERMS]	407
#91	bemarituzumab/ or (1952272-74-0 or bemarituzumab$2 or fpa144 or fpa-144 or rjw23bq0kw).tw,kw,kf,ot,rn,dq. [BEMARITUZUMAB TERMS]	152
#92	cetuximab/ or (205923-56-4 or abp494 or abp-494 or c225 or c-225 or c225-03 or c-22503 or c-225-03 or cdp1 or cdp-1 or cetuximab$2 or cetuximabum$2 or ch225 or ch-225 or chimeric-anti-egfr-monoclonal-antibody or cmab009 or cmab-009 or ctp15 or ct-p15 or dtxsid0040830 or erbitux$2 or hsdb-7454 or imc225 or imc-225 or imcc225 or imcc-225 or imc-c225 or kl140 or kl-140 or l01xc06 or ly2939777 or ly-2939777 or mab-c225 or moab-c225 or nsc714692 or pqx0d8j21j or sti001 or sti-001).tw,kw,kf,ot,rn,dq. [CETUXIMAB TERMS]	49811
#93	onartuzumab/ or (1133766-06-9 or metmab$2 or metma-b or ms1j9720wc or onartuzumab$2 or pro143966 or pro-143966 or pro-143996 or pro143996 or ro5490258 or ro-5490258).tw,kw,kf,ot,rn,dq. [ONARTUZUMAB TERMS]	786
#94	rilotumumab/ or (51wew898ij or 872514-65-3 or amg102 or amg-102 or rilotumumab$2).tw,kw,kf,ot,rn,dq. [RILOTUMUMAB TERMS]	730
#95	andecaliximab/ or (1518996-49-0 or 571045eim4 or andecaliximab$2 or gs5745 or gs-5745).tw,kw,kf,ot,rn,dq. [ANDECALIXIMAB TERMS]	196
#96	pazopanib/ or (444731-52-6 or 635702-64-6 or 790713-33-6 or 7rn5dr86ck or a19406 or a839572 or ab01273967-01 or ab01273967-02 or ab01273967-05 or ab01273967-06 or ac-8522 or akos005145819 or am20090659 or ar-270-43507999 or armala$2 or as-11066 or bcp01839 or bcp9001053 or bcpp000129 or bd164238 or bdbm26474 or brd-k74514084-003-02-7 or ccg-265010 or chebi-71219 or chembl477772 or cid-10113978 or cs-0269 or db06589 or dtxcid1028659 or dtxsid8048733 or en300-57325 or ex-a1241 or ft-0659928 or ft-0684794 or gtpl5698 or gw780604 or gw-780604 or gw-78603 or gw786034 or gw7-86034 or gw-786034 or gw786034b or gw-786034b or gw786034x or gw-786034x or hms3244c21 or hms3244c22 or hms3244d21 or hms3656l14 or hms3745g05 or hsdb-8210 or hy-10208 or indazolylpyrimidine-13 or jmc514632-compound-13 or kinome-3790 or mfcd11616589 or ncgc00188865-01 or ncgc00188865-02 or ncgc00188865-03 or ncgc00188865-10 or nsc752782 or nsc-752782 or nsc800839 or nsc-800839 or p-6706 or pazopanib$2 or pazopanibum$2 or q-101400 or q7157043 or s3012 or sb17290 or sb710468 or sb-710468 or sb710468a	15236

No.	Query	Results
	or sb-710468a or schembl588608 or sw218082-3 or tox21-113174 or tox21-113174-1 or votrient$2 or z1541638525).tw,kw,kf,ot,rn,dq. [PAZOPANIB TERMS]	
#97	rivoceranib/ or (1218779-75-9 or 5s371k6132 or 811803-05-1 or ab01274807-01 or ab01274807-02 or ac-27461 or akos024464453 or amy21302 or apatinib$2 or ba175030 or bcp02840 or c76598 or ccg-268625 or chembl3186534 or cs-0003200 or d11288 or db14765 or ds-7455 or dtxsid601024366 or ex-a1794 or gtpl7648 or hy-13342a or mfcd21648511 or ncgc00249393-01 or ncgc00249393-08 or nsc772886 or nsc-772886 or nsc799333 or nsc-799333 or q27262801 or rivoceranib$2 or s5248 or sb16590 or schembl1814966 or yn968d1 or yn-968d1).tw,kw,kf,ot,rn,dq. [RIVOCERANIB/APATINIB TERMS]	5418
#98	exp cancer chemotherapy/ or (chemotherap$ or chemo-therap$ or carcinochemotherap$ or chemoradiotherap$ or chemoradiation? or radiochemotherap$ or carcino-chemotherap$ or chemo-radiotherap$ or chemo-radiation? or radio-chemotherap$).ti,ab,kw,kf. [CHEMOTHERAPY TERMS]	1804502
#99	folinic acid/ or (leucovorin$ or 6-s-leucovorin or 6s-leucovorin or acide folinique or akos015961207 or bdbm50039121 or bpbio1-000766 or bspbio-000696 or bspbio-002218 or brd-a75919782-238-01-8 or calcium folinate or chebi-15640 or chembl1679 or chembl69905 or citrovoeum-factor or citrovorum-factor or d93089 or divk1c-000222 or dtxsid0048216 or einecs-200-361-6 or en300-27068710 or folinate folinic-acid-sf or folinic acid or formyltetrahydrofolate or fusilev$2 or gtpl4816 or gtpl6690 or hsdb-6544 or hy-17556 or idi1-000222 or kbio1-000222 or kbio2-001339 or kbio2-003907 or kbio2-006475 or kbio3-001438 or kbiogr-000461 or kbioss-001339 or lencovorin$2 or leucal$2 or leukovorin$2 or leukovoran$2 or leucovorin$2 or levoleucovorin$2 or levo-leucovorin$2 or mfcd00867488 or ninds-000222 or nsc3590 or prestwick0-000738 or prestwick1-000738 or prestwick2-000738 or prestwick3-000738 or q45435667 or q573i9dvlp or s5790 or schembl10068238 or schembl8349 or sd-204098 or s-leucovorin$2 or sleucovorin$2 or spectrum2-000116 or spectrum3-000479 or spectrum4-000031 or spectrum5-000910 or spectrum-000859 or spbio-000132 or spbio-002635 or sbi-0051427-p003 or welcovorin$2 or "formyltetrahydropteroylglutamic acid" or Q573I9DVLP or 58-05-9).ti,ab,kw,kf,ot,rn,dq. [LEUCOVORIN TERMS]	69651
#100	carboplatin/ or (carboplatin$2 or blastocarb$2 or boplatex$2 or carboplat$ or carbosin$2 or carbotec$2 or carplan$2 or CBDCA or (platinum adj3 (cis or diamin? or cyclobutanedicarboxylat? or dicarboxylatediammine)) or Dicarboxylatoplatinum or diamminecyclobutanedicarboxylatoplatinum or cycloplatin$ or erbakar$2 or ercar$2 or ifacap$2 or jm8 or jm-8 or kemocarb$2 or nsc-241240 or nsc241240 or nsc-201345 or nsc201345 or oncocarbin$2 or paraplatin$ or Platinwas$2 or Ribocarbo$2 or Neocarbo$2 or Nealorin$2 or HSDB-6957 or BG3F62OND5 or 41575-94-4).ti,ab,kw,kf,ot,rn,dq. [CARBOPLATIN TERMS]	133509

No.	Query	Results
#101	exp paclitaxel/ or (paclitaxel$ or abraxane$2 or abraxus$2 or act02709 or act-02709 or acon1-002231 or anx-513 or anzatax$2 or apealea$2 or asotax$2 or bidd-pxr0046 or biotax$2 or bms-181339 or bms181339-01 or bms181339 or bms-181339-01 or bmy-45622 or bmy45622 or bspbio-000290 or capxol$2 or ccris-8143 or chembl428647 or chebi-45863 or coroflex-please$2 or coroxane$2 or cmap-000068 or cynviloq$2 or cypher-select$2 or dsstox-cid-3413 or dsstox-gsid-23413 or dsstox-rid-77016 or dhp107 or dhp-107 or dhp-208 or dhp208 or dts-301 or dts301 or ebetaxel$2 or empac$2 or endotag-1 or endotag1 or formoxol$2 or genaxol$2 or genetaxyl$2 or genexol$2 or gtpl2770 or hms2090d07 or hms2095o12 or hms2231a16 or hms3712o12 or hsdb-6839 or hunxol$2 or hy-b0015 or ifaxol$2 or ig-001 or ig001 or infinnium$2 or intaxel$2 or kbiogr-002509 or kbio2-002509 or kbio2-005077 or kbio2-007645 or kbio3-002987 or lep-etu$2 or lipopac$2 or liporaxel$2 or mbt-0206 or mbt0206 or medixel or mfcd00869953 or mitotax$2 or nanopac$2 or nanotax$2 or nanotaxel$2 or ncgc00164367-01 or nk-105 or nk105 or nsc-125973 or nsc-673089 or nsc125973 or nsc673089 or nscc-125973 or nova-12005 or oas-pac-100 or oaspac100 or oncogel$2 or onxal$2 or onxol$2 or p-ssmm-vip$2 or paclical$2 or pacitaxel$2 or paclical$2 or padexol$2 or pacligel$2 or paclitaxel$2 or pacliex$2 or paxceed$2 or paxene$2 or paxoral$2 or paxus$2 or pazenir$2 or plaxicel$2 or praxel$2 or qw-8184 or schembl3976 or sb-05 or sb05 or sdp-013 or sindaxel$2 or smr000857385 or sr-01000075350 or taycovit$2 or taxalbin$2 or taxane$ or taxocris$2 or taxol$2 or taxus$2 or tocosol$2 or xorane$2 or yewtaxan$2 or zinc96006020 or zisu$2 or P88XT4IS4D or 33069-62-4).ti,ab,kw,kf,ot,rn,dq. [PACLITAXEL TERMS]	239237
#102	docetaxel/ or (114915-20-7 or 114977-28-5 or 15h5577cqd or 699121phca or ab01273941-01 or ab01273941-02 or ac-383 or akos015960718 or akos024457953 or amy4356 or anx-514 or axtere$2 or bd164373 or bdbm36351 or bind014 or bind-014 or brd-k30577245-001-04-3 or brd-k30577245-341-01-9 or bs102 or bs-102 or chebi-4672 or chembl92 or cid148124 or ckd-810 or crlx301 or crlx-301 or cs-1144 or d07866 or d4102 or daxotel$2 or db01248 or dexotel$2 or docecad$2 or docefrez$2 or docetaxel$2 or docetaxelum$2 or docetaxol$2 or docetaxolum$2 or dtxcid8020464 or dtxsid0040464 or emdoc$2 or en300-123047 or ex-a1206 or gtpl6809 or hms2089k08 or hsdb-6965 or hy-b0011 or ks-1452 or l01cd02 or lit976 or lit-976 or mfcd00871399 or ncgc00181306-01 or ncgc00181306-02 or ncgc00181306-04 or ncgc00242509-01 or nsc628503 or nsc-628503 or nsc-759850 or oncodocel$2 or q-100074 or q420436 or rp56976 or rp-56976 or schembl4419 or sdp-014 or sid-530 or sr-01000003023 or sr-01000003023-5 or syp-0704a or taxanit$2 or taxespira$2 or taxoel$2 or taxoltere-metro or taxotel$2 or taxoter$2 or taxotere$2 or texot$2 or tox21-112781 or tox21-113088 or txl$2 or w-60384 or xrp6976 or xrp-6976 or xrp-6976l or z1546621742).tw,kw,kf,ot,rn,dq. [DOCETAXEL TERMS]	111343
#103	cisplatin/ or (cisplatin$ or platinum$ or cismaplat$2 or (cis adj3 ($platinum or platinous)) or cis-platinum or cis-Platin or dichloroplatinum or diaminodichloroplatinum or diamminedichloroplatinum or dichlorodiammineplatinum or AI3-62048 or abiplatin or biocisplatinum or	477059

No.	Query	Results
	biocysplatinum or blastolem$2 or briplatin$2 or cddp-ti or cis-ddp or cisPt$ or CACP or CCRIS-221 or CDDP or DDPt or CP-Ethypharm or CPDC or CPDD or CPPD or (DDP and antitumor) or cisplatyl$2 or citoplatino$2 or cytoplatin$2 or cytosplat$2 or docistin$2 or elvecis$2 or kemoplat$2 or Fauldiscipla$2 or IA-call or LiPlaCis$2 or lederplatin$2 or lipoplatin$2 or "liposomal cisplatin" or mpi-5010 or mpi5010 or neoplatin$2 or niyaplat$2 or nk-801 or noveldexis$2 or nsc-119875 or nci-c55776 or platamine$2 or platamine-rtu or platiblastin$2 or platidiam$2 or platimine$2 or platinex$2 or platinil$2 or platino$2 or platinol$2 or platinolaq$2 or platinol-aq$2 or platinoxan$2 or platiran$2 or platistil$2 or platistin$2 or platosin$2 or "pronto platamine" or "Peyrone's chloride" or randa$2 or romcis$2 or sicatem$2 or spi-077 or tr-170 or tecnoplatin$2 or Q20Q21Q62J or 15663-27-1 or 26035-31-4 or 96081-74-2).ti,ab,kw,kf,ot,rn,dq. [CISPLATIN TERMS]	
#104	oxaliplatin/ or (oxaliplatin$2 or (oxalat$ adj3 platin$) or axiplatin$2 or bendaplatin$2 or crisapla$2 or croloxat$2 or dacotin$2 or dacplat$2 or ebeoxal$2 or elatofen$2 or eloxatin$ or elplat$2 or euroxaliplatin$2 or geneplatin$2 or gessedil$2 or heloxatin$2 or lipoxal$2 or mbp-426 or mbp426 or medoxa$2 or oksaliplatin$ or oplat$2 or oxalatoplatin$ or oxalatplatin$2 or oxali$2 or oxalip$2 or oxaliplan$2 or oxaliprol$2 or oxaliquid$2 or oxalisan$2 or oxalisin$2 or oxalizor$2 or oxaltic$2 or oxaltin$2 or oxamed$2 or oxaplamyl$2 or oxaviatin$2 or platox$2 or plaxitin$2 or rectoxal$2 or riboxatin$2 or rp-54780 or rp54780 or sinoxal$2 or sr-96669 or sr96669 or transplastin$2 or velminox$2 or xaliplat$2 or xoplan$2 or L-OHP-Cpd or 1-OHP or ACT-078 or ACT078 or CCRIS-9143 or NSC-266046 or 04ZR38536J or 61825-94-3).ti,ab,kw,kf,ot,rn,dq. [OXALIPLATIN TERMS]	95221
#105	capecitabine/ or (capecitabin$ or apecitab$2 or atubri$2 or bc164277 or bcpp000300 or bxeliri$2 or bs-1000 or cacit$2 or capcel$2 or capebina$2 or capecite$2 or capegard$2 or capezam$2 or capicet$2 or capiri$2 or capiibine$2 or captabin$2 or capnat$2 or capoda$2 or capostat$2 or capsy$2 or capxcel$2 or caxeta$2 or ccg-264841 or ccx-340 or cpecitabine$2 or cs-0768 or d01223 or db01101 or dsstox-cid-26451 or dsstox-gsid-46451 or dsstox-rid-81625 or dtxsid3046451 or ecansya$2 or ex-a835 or gtpl6799 or hsdb-7656 or hy-b0016 or j-700154 or k007 or m0297 or mfcd00930626 or mls003915642 or mls004774137 or ncgc00164569-01 or ncgc00164569-02 or ncgc00164569-05 or nsc-759853 or paxon$2 or q-200788 or q420207 or r-340 or rg-340 or r340 or rg340 or ro-09-1978 or ro-091978 or ro-09-1978 or ro-09-1978-000 or ro091978 or s1156 or s-1156 or sr-01000931255 or tox21-112198 or x-abine$2 or x-tabin$2 or xabine$2 or xecap$2 or xeliri$2 or xelocel$2 or xeloda$2 or xelox$2 or z1501480421 or zinc3806413 or 6804dj8z9u or 154361-50-9 or 958887-39-3).ti,ab,kw,kf,ot,rn,dq. [CAPECITABINE TERMS]	58971
#106	(platinum adj1 (fluoropyrimidine or fluoro-pyrimidine) adj3 (doublet? or combin$ or chemotherap$ or chemo-therap$ or ((first or front) adj1 line?) or 1-LOT or 1L or therap$ or regimen? or	262

No.	Query	Results
	expos$)).ti,ab,kw,kf,ot,rn,dq. [PLATINUM-FLUOROPYRIMIDINE DOUBLET TERMS]	
#107	fluoropyrimidine/ or fluoropyrimidine derivative/ or (5-fluoropyrimidin$ or 5-fluoro-pyrimidine or pyrimidine-5-fluoro or (fluorinated adj1 pyrimidine) or a9048 or ac-453 or akos006346044 or am86123 or "bb 0260992" or c4h3fn2 or db-007051 or dtxsid80217851 or en300-6966105 or f14737 or ft-0601423 or mfcd06658278 or q42859845 or w-203496 or zinc1845840 or 675f218 or L36X4TD47C or 675-21-8).ti,ab,kw,kf,ot,rn,dq. [FLUOROPYRIMIDINE TERMS]	8918
#108	fluorouracil/ or fluorouracil derivative/ or (fluorouracil$ or fluroblastin$ or 1upf or 5-Faracil or 5-Fluoracil or 5-Fluoracyl or 5-fluoro-uracil or 5-fluoro-uracil or 5-Fluoroblastin or 5-fluorouacil or 5-Ftouracyl or 5-FU or 5FU or 5F-uracil or Adrucil$2 or AI3-25297 or Arumel$2 or BSPBio-002048 or Cancersil$2 or Carac$2 or Carzonal$2 or CHEBI-46345 or CHEMBL185 or Cinco-FU or CCRIS-2582 or DSSTox-CID-634 or DSSTox-GSID-20634 or DSSTox-RID-75705 or Efudex$2 or Efudix$2 or Efurix$2 or EINECS-200-085-6 or Effluderm$2 or Fluoroblastin$2 or Fluoro-Uracil$2 or Fluoro-uracile$2 or Fluoro-uracilo$2 or Fluoroplex$2 or Fluorouracile$2 or Fluorouracilo$2 or Fluorouracilum$2 or Fluorouracilum$2 or Fluracil$2 or Fluracilum$2 or Fluri$2 or Fluril$2 or Fluuro-Uracil$2 or Fluorouracilo$2 or Fluroblastin$2 or Fluro-Uracil$2 or Ftoruracil$2 or GTPL4789 or HSDB 3228 or IDI1-000054 or Kecimeton$2 or KBio1-000054 or KBio2-001321 or KBio2-003889 or KBio2-006457 or KBioGR-001253 or KBioSS-001321 or Lopac-F-6627 or Lopac0-000536 or MFCD00006018 or MLS000069498 or MLS002415705 or NCGC00015442-01 or NCGC00015442-02 or NCGC00015442-03 or NCGC00015442-04 or NCGC00015442-05 or NCGC00015442-06 or NCGC00015442-07 or NCGC00015442-08 or NCGC00015442-09 or NCGC00015442-10 or NCGC00015442-11 or NCGC00015442-12 or NCGC00015442-15 or NCGC00015442-16 or NSC-19893 or NSC757036 or NSC816997 or Phtoruracil$2 or Pharmakon1600-01500305 or Phthoruracil$2 or Queroplex$2 or Ro-2-9757 or S1209 or 191047-64-0 or 191047-65-1 or 191115-88-5 or U3P01618RT or 51-21-8).ti,ab,kw,kf,ot,rn,dq. [FLUOROURACIL TERMS]	255724
#109	irinotecan/ or (irinotecan$ or ab00698464-07 or ab00698464-09 or ab00698464-10 or ab00698464-11 or ab00698464-12 or ab00698464-13 or ab00698464-14 or ac-7469 or akos015894969 or amy4227 or as-14323 or bdbm50128267 or bcp02860 or bcp9000793 or biotecan$2 or brd-k08547377-003-02-4 or campto$2 or camptosar$2 or chebi-80630 or chembl481 or cs-1138 or cpt-11 or cpt11 or d08086 or db00762 or dq2805 or en300-708800 or gtpl6823 or hsdb-7607 or ihl-305 or ihl305 or irinophore-c$2 or irinotel$2 or mfcd00866307 or ncgc00178697-02 or ncgc00178697-05 or nsc-728073 or nsc728073 or nk012-compound or q412197 or s1198 or schembl4034 or sn38 or sn-38 or sn-38-11 or sn3811 or topotecin$2 or u-101440e or u101440e or zinc1612996 or "7673326042" or 100286-90-6 or 97682-44-5).ti,ab,kw,kf,ot,rn,dq. [IRINOTECAN TERMS]	71087

No.	Query	Results
#110	"gimeracil plus oteracil potassium plus tegafur"/ or (teysuno$2 or (tegafur adj4 gimeracil adj4 oteracil) or ((S-1 or S1) adj3 combination) or TS-1-cpd or S-1-cpd or TS-1 or TS1 or BMS247616 or BMS-247616 or S1-tegafur-oxonate or S1-fluoropyrimidine-oxoonate).ti,ab,kw,kf,ot,rn,dq. [S1 COMBINATION TERMS]	15180
#111	tegafur/ or (1189456-27-6 or 1548r74nsz or 17902-23-7 or 82294-77-7 or a812417 or ab00572620-15 or ac-2112 or akos000121279 or as-13528 or atillon$2 or bcp22714 or bp-58663 or brn-0525766 or c8h9fn2o3 or ccg-100959 or ccg-50110 or ccris-2762 or chebi-32188 or chembl20883 or citofur$2 or coparogin$2 or cs-1128 or d01244 or db09256 or dtxsid001009966 or einecs-241-846-2 or en300-21668 or exonal$2 or f-5-fu or fental$2 or florafur$2 or fluorafur$2 or fluorofur$2 or franrose$2 or franroze$2 or ft-0653732 or ft-0654170 or ft-0674829 or ft-0693965 or ft207 or ft-207 or ftorafur$2 or fulaid$2 or fulfeel$2 or furafluor$2 or furflucil$2 or furofutran$2 or futraful$2 or gtpl10513 or hms1665i05 or hms2051b15 or hms2090k04 or hms2232e05 or hms3371h21 or hms3393b15 or hms3654p13 or hms3715d14 or hy-17400 or lamar$2 or lifril$2 or mfcd00012351 or mjf12264 or mjf-12264 or mls000069497 or mls000759414 or mls001076521 or mls001424119 or nc00209 or ncgc00159418-02 or ncgc00159418-04 or ncgc00159418-05 or neberk$2 or nitobanil$2 or nsc148958 or nsc-148958 or opera-id-1726 or phthorafur$2 or q-201784 or q413370 or racemic-ftorafur or riol$2 or schembl4552 or sfsp$2 or sf-sp or sinoflurol$2 or smr000059106 or sr-01000639511 or sr-01000639511-1 or sr-01000639511-4 or sunfral$2 or sunfural$2 or tefsiel-c or tegaful$2 or tegafur$2 or tegafurum$2 or ts-1 or uftoral$2 or upcmld-dp063 or utefos$2 or z104508106).tw,kw,kf,ot,rn,dq. [TEGAFUR TERMS]	21956
#112	ramucirumab/ or (1121b or 947687-13-0 or 947687-13-0 or a168 or a-168 or cyramza$2 or d99yvk4l0x or hlx12 or hlx-12 or hsdb-8314 or imc1121b or imc1121-b or imc-1121b or imc-1121-b or l01xc21 or ly3009806 or ly-3009806 or nsc-749128 or pbp2001 or pbp-2001 or ramucirumab$2 or ramucirumabum$2 or ro7234952 or ro-7234952).ti,ab,kw,kf,ot,rn,dq. [RAMUCIRUMAB TERMS]	9417
#113	panitumumab/ or (339177-26-3 or 6a901e312a or abenix$2 or abx-egf or amg954 or amg-954 or e7-6-3 or l01xc08 or moab-abx-egf or moab-e7-6-3 or monoclonal-antibody-abx-egf or monoclonal-antibody-e7-6-3 or nsc-742319 or panitumab$2 or panitumumab$2 or panitumumabum$2 or panitunumab$2 or vectibex$2 or vectibix$2).ti,ab,kw,kf,ot,rn,dq. [PANITUMUMAB TERMS]	13829
#114	nimotuzumab/ or (6ns400bxkh or 780758-10-3 or 828933-51-3 or biomab-egfr or diacim$2 or h-r3 or nimotuzumab$2 or osag-101 or radiotheracim$2 or theracim$2 or theraloc$2).ti,ab,kw,kf,ot,rn,dq. [NIMOTUZUMAB TERMS]	2630
#115	matuzumab/ or (339186-68-4 or emd7200 or emd-7200 or emd72000 or emd-72000 or kgaa$2 or matuzumab$2 or merck-kgaa or mg4m3qb242).ti,ab,kw,kf,ot,rn,dq. [MATUZUMAB TERMS]	51524

No.	Query	Results
#116	bevacizumab/ or (12-igg1 or 1438851-35-4 or 216974-75-3 or 2s9zzm9q9v or abevmy$2 or abp215 or abp-215 or ainex$2 or altuzan$2 or alymsys$2 or ankeda$2 or anti-vegf or askb1202 or ask-b1202 or avastin$2 or avegra$2 or aybintio$2 or ba1101 or ba-1101 or bambevi$2 or bat1706 or bat-1706 or bcd021 or bcd-021 or bevacizumab$2 or bevacizumabum$2 or bevagen$2 or bevatas$2 or bevax$2 or bevz92 or bevz-92 or bi695502 or bi-695502 or bow030 or bow-030 or boyounuo$2 or bp01 or bp-01 or bp102 or bp-102 or bryxta$2 or bs503a or bs-503a or bxt2316 or bxt-2316 or byvasda$2 or cbt124 or cbt-124 or chs305 or chs-305 or chs5217 or chs-5217 or cizumab$2 or ctp16 or ct-p16 or equidacent$2 or fkb238 or fkb-238 or gb222 or gb-222 or gbs004 or gbs-004 or hanbeitai$2 or hd204 or hd-204 or hlx04 or hlx-04 or hot1010 or hot-1010 or hsdb-8080 or ibi305 or ibi-305 or idb0072 or idb-0072 or intp24 or intp-24 or ipique$2 or jhl1149 or jhl-1149 or js501 or js-501 or jy028 or jy-028 or krabeva$2 or kyomarc$2 or l01xc07 or lextemy$2 or "lumiere-(drug)" or ly01008 or ly-01008 or mabionvegf$2 or mb02 or mb-02 or mil60 or mil-60 or mvasi$2 or myl14020 or myl-14020 or myl1402o or myl-1402o or nsc704865 or nsc-704865 or onbevzi$2 or ons1045 or ons-1045 or ons5010 or ons-5010 or oyavas$2 or pf06439535 or pf-06439535 or pf6439535 or pf-6439535 or pmc901 or pmc-901 or pobevcy$2 or pro169 or pro-169 or pusintin$2 or ql1101 or ql-1101 or r435 or r-435 or rg435 or rg-435 or rhumab$2 or ro4876646 or ro-4876646 or rph001 or rph-001 or rtpr023 or r-tpr-023 or sb8 or sb-8 or sct501 or sct-501 or sct510 or sct-510 or sibp04 or sibp-04 or stc103 or stc-103 or stivant$2 or tab008 or tab-008 or tab014 or tab-014 or tot102 or tot-102 or trs003 or trs-003 or tx16 or tx-16 or vegzelma$2 or versavo$2 or zirabev$2 or zrc113 or zrc-113 or zybev$2).ti,ab,kw,kf,ot,rn,dq. [BEVACIZUMAB TERMS]	133113
#117	dostarlimab/ or (2022215-59-2 or anb011 or anb-011 or dostarlimab$2 or gsk4057190 or gsk-4057190 or jemperli$2 or p0gvq9a4s5 or tsr042 or tsr-042 or wbp285 or wbp-285).ti,ab,kw,kf,ot,rn,dq. [DOSTARLIMAB TERMS]	1138
#118	(chembl5095383 or retlirafusp-alfa or shr1701 or shr-1701).ti,ab,kw,kf,ot,rn,dq. [SHR-1701 TERMS]	66
#119	domvanalimab/ or (2368219-35-4 or 45x7ou8c4j or ab154 or ab-154 or domvanalimab$2 or who-11559).ti,ab,kw,kf,ot,rn,dq. [DOMVANALIMAB TERMS]	109
#120	zimberelimab/ or (2259860-24-5 or ab122 or ab-122 or gls010 or gls-010 or gs0122 or gs-0122 or wbp3055 or wbp-3055 or who-11413 or zbl7o904il or zimberelimab$2).ti,ab,kw,kf,ot,rn,dq. [ZIMBERELIMAB TERMS]	268
#121	lapatinib/ or (0vua21238f or 1092929-10-6 or 1210608-87-9 or 1xkk or 231277-92-2 or 388082-78-8 or 437755-78-7 or 913989-15-8 or a25184 or ab01273965-01 or ab01273965-02 or ab01273965-03 or ab01273965-04 or ab01273965-05 or ac-1314 or akos005145766 or am20090641 or as-14065 or bc164610 or bcp01874 or bcp9000837 or bcp9000838 or bcpp000188 or bcpp000189 or bdbm5445 or brd-k19687926-001-01-7 or	22375

No.	Query	Results
	brd-k19687926-379-02-5 or c29h26clfn4o4s or ccg-270133 or chebi-49603 or chembl554 or cid-208908 or d08108 or db01259 or dtxcid5026675 or dtxsid7046675 or en300-117254 or ex-a402 or fmm$2 or ft-0659650 or gsk572016 or gsk-572016 or gtpl5692 or gw2016 or gw-2016 or gw282974x or gw-282974x or gw572016 or gw-572016 or gw572016f or gw-572016f or gw-572016x or hms2089h10 or hms3244n06 or hms3244n10 or hms3244n14 or hms3744k11 or hsdb-8209 or hy-50898 or kinome-3684 or kinome-3685 or l0360 or lapatinib$2 or mfcd09264194 or ncgc00167507-01 or ncgc00167507-02 or ncgc00167507-03 or ncgc00167507-04 or ncgc00167507-09 or ns00003012 or nsc745750 or nsc-745750 or nsc800780 or nsc-800780 or q-101353 or q420323 or sb16918 or schembl8100 or sr-05000001472-1 or sw199101-5 or tox21-112505 or tykerb$2 or tyverb$2).ti,ab,kw,kf,ot,rn,dq. [LAPATINIB TERMS]	
#122	(857890-39-2 or a825653 or ac-25047 or aiv007 or aiv-007 or akos025401742 or amy9240 or as-16203 or bcp01799 or bcp9000633 or bcpp000247 or bdbm50331094 or bl164616 or c21h19cln4o4 or ccg-264842 or chebi-85994 or chembl1289601 or cs-0109 or d09919 or db09078 or dtxcid50117096 or dtxsid50194605 or e7080 or e-7080 or ee083865g2 or en300-7418350 or er203492-00 or er-203492-00 or ex-a249 or ft-0700727 or gtpl7426 or hms3244a07 or hms3244a08 or hms3244b07 or hms3654a14 or hy-10981 or j-513372 or kisplyx$2 or l01xe29 or lenvatinib$2 or lenvatinibum$2 or lenvima$2 or lev$2 or mfcd16038644 or mk7902 or mk-7902 or mls006011239 or ncgc00263198-01 or ncgc00263198-04 or ncgc00263198-07 or ns00069283 or nsc755980 or nsc-755980 or nsc800781 or nsc-800781 or q6523413 or ro7071618 or ro-7071618 or s1164 or sb16580 or schembl864638 or smr004702999 or sw219259-1 or z2235801899).ti,ab,kw,kf,ot,hw,rn,nm. [LENVATINIB TERMS]	8469062
#123	lenvatinib/ or (857890-39-2 or a825653 or ac-25047 or aiv007 or aiv-007 or akos025401742 or amy9240 or as-16203 or bcp01799 or bcp9000633 or bcpp000247 or bdbm50331094 or bl164616 or c21h19cln4o4 or ccg-264842 or chebi-85994 or chembl1289601 or cs-0109 or d09919 or db09078 or dtxcid50117096 or dtxsid50194605 or e7080 or e-7080 or ee083865g2 or en300-7418350 or er203492-00 or er-203492-00 or ex-a249 or ft-0700727 or gtpl7426 or hms3244a07 or hms3244a08 or hms3244b07 or hms3654a14 or hy-10981 or j-513372 or kisplyx$2 or l01xe29 or lenvatinib$2 or lenvatinibum$2 or lenvima$2 or lev$2 or mfcd16038644 or mk7902 or mk-7902 or mls006011239 or ncgc00263198-01 or ncgc00263198-04 or ncgc00263198-07 or ns00069283 or nsc755980 or nsc-755980 or nsc800781 or nsc-800781 or q6523413 or ro7071618 or ro-7071618 or s1164 or sb16580 or schembl864638 or smr004702999 or sw219259-1 or z2235801899).ti,ab,kw,kf,ot,rn,dq. [LENVATINIB TERMS]	6518523
#124	ipatasertib/ or (0rf or 1001264-89-6 or 524y3ib4hq or ac-28420 or akos025396463 or as-17027 or bcp0726000195 or bcp9000712 or bdbm50398379 or ccg-269312 or chebi-95089 or chembl2177390 or cs-0975 or d10641 or db11743 or dtxsid101025595 or ex-a2077 or gdc0068 or gdc-0068 or gdc0068-di-hcl or gdc-0068-di-hcl or gtpl7887 or hy-15186	1279

No.	Query	Results
	or ipatasertib$2 or mfcd22124514 or ncgc00346714-01 or ns00072927 or nsc767898 or nsc-767898 or nsc781451 or nsc-781451 or nsc800986 or nsc-800986 or nsc832484 or nsc-832484 or q27078088 or rg7440 or rg-7440 or rg-7440-di-hcl or s2808 or schembl191659).ti,ab,kw,kf,ot,rn,dq. [IPATASERTIB TERMS]	
#125	or/71-111 [INTERVENTION & COMPARATORS & CHEMO TERMS]	3236622
#126	Randomized controlled trial/ or Controlled clinical study/ or randomization/ or intermethod comparison/ or double blind procedure/ or human experiment/ or (compare or compared or comparison or trial).ti. or ((evaluated or evaluate or evaluating or assessed or assess) and (compare or compared or comparing or comparison)).ab. or (random$ or placebo or (open adj label) or ((double or single or doubly or singly) adj (blind or blinded or blindly)) or parallel group$1 or (crossover or cross over) or ((assign$ or match or matched or allocation) adj5 (alternate or group$1 or intervention$1 or patient$1 or subject$1 or participant$1)) or (assigned or allocated) or (controlled adj7 (study or design or trial)) or (volunteer or volunteers)).ti,ab.	12624194
#127	(Cross-sectional study/ not (randomized controlled trial/ or controlled clinical study/ or controlled study/ or randomi?ed controlled.ti,ab. or control group$1.ti,ab.)) or ((((case adj control$) and random$) not randomi?ed controlled) or (nonrandom$ not random$) or "Random field$" or (random cluster adj3 sampl$)).ti,ab. or (Systematic review not (trial or study)).ti. or ((review.ab. and review.pt.) not trial.ti.) or ("we searched".ab. and (review.ti. or review.pt.)) or ("update review" or (databases adj4 searched)).ab. or ((rat or rats or mouse or mice or swine or porcine or murine or sheep or lambs or pigs or piglets or rabbit or rabbits or cat or cats or dog or dogs or cattle or bovine or monkey or monkeys or trout or marmoset$1).ti. and animal experiment/) or (Animal experiment/ not (human experiment/ or human/))	6660716
#128	126 not 127 [RCTs – Embase sensitive Filter – Cochrane HSSS, 2019]	11451785
#129	70 and 125 and 128	12710
#130	(exp adolescent/ or exp child/ or exp fetus/) not (exp adult/ and (exp adolescent/ or exp child/ or exp fetus/)) [CHILDREN <18 REMOVE]	4640433
#131	(exp animal/ or exp animal experimentation/ or exp animal model/ or exp animal experiment/ or nonhuman/ or exp vertebrate/) not (exp human/ or exp human experimentation/ or exp human experiment/) [ANIMAL STUDIES ONLY - REMOVE - EMBASE]	12788595
#132	(editorial or note or short survey or tombstone).pt. or (letter.pt. not randomized controlled trial/) [OPINION PIECES REMOVE - Embase]	5530065
#133	conference abstract.pt. [CONFERENCE ABSTRACTS]	5227634

No.	Query	Results
#134	129 not (130 or 131 or 132) [CHILD <19, ANIMAL STUDIES and OPINION PUBLICATIONS - REMOVED - Embase]	12581
#135	133 and 134 [CONFERENCE ABSTRACTS ONLY]	2613
#136	limit 135 to yr="2023 -Current"	294
#137	134 not 133 [CONFERENCE ABSTRACTS REMOVED]	9968
#138	136 or 137 [LAST 2 YRS OF ABSTRACTS RETAINED - Embase]	10262
#139	138 use oemezd [Embase results]	4733
#140	Stomach Neoplasms/ or (Esophageal Neoplasms/ and exp Esophagogastric Junction/)	136138
#141	Neoplasm Metastasis/ or Neoplasm Recurrence, Local/	520276
#142	((((stomach? or gastric$ or cardia or cardiac or antrum? or antral$ or fundus$ or pyloric$ or pylorus$ or ventricul$ or linitis plastica or leather-bottle or ((stomach? or gastric$) and (GC or GEJ))) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$)) or ((stomach? or gastric$) adj3 SCC) or ((esophag$ or oesophag$ or esophagogastric$ or esophago-gastric$ or oesophagogastric$ or oesophago-gastric$ or gastroesophageal$ or gastro-esophageal$ or gastrooesophageal$ or gastro-oesophageal$ or cardio-esophageal$ or cardio-oesophageal$ or cardioesophageal$ or cardiooesophageal$ or EG or GE) adj3 (junction$ or sphincter$) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$))) adj4 ((meta adj sta$) or metastas$ or metastatic$ or recur$ or secondar$ or relaps$ or advance$ or inoperab$ or disseminat$ or spread or migration or lethal$ or incurable or noncurable or non-curable or uncurable or progressive or terminal or invasive$ or aggressive$ or (late? adj2 stage$) or ((stage? or grade? or type?) adj2 (3a$ or 3b$ or 3c$ or III$ or 4a$ or 4b$ or IV$)) or "stage 3" or "stage 4" or met or mets or N1? or N2? or N3? or pN1? or pN2? or pN3?)).ti,ab,kw. [Metastatic GC/GEJ TERMS]	74270
#143	(140 and 141) or 142 [GC-GEJ TERMS]	79531

No.	Query	Results
#144	(tislelizumab$2 or tirelizumab$2 or bgb-a317 or bgba317 or bgn-1 or bgn1 or jhl-2108 or jhl2108 or vdt-482 or vdt482 or 1858168-59-8 or 0kvo411b3n).ti,ab,kw. [TISLELIZUMAB TERMS]	1721
#145	Immune Checkpoint Inhibitors/ or ((Programmed Cell Death 1 Receptor/ or Programmed Cell Death 1 Ligand 2 Protein/) and (inhibit$ or block?).ti,ab,kw,kf.) or ((immune$ adj3 checkpoint? adj3 (inhibit$ or block?)) or (((programmed adj3 death) or PD-1 or PD-1-PD-L1 or PDCD1) adj3 (ligand? or inhibit$ or block?)) or ((B7-H1 or B7H1 or "B7 homolog 1" or CD274 or CD273 or PDCD1LG1 or PDCD1LG2) adj3 (antigen? or protein?)) or ((Cytotoxic-T-Lymphocyte-Associated Protein-4 Inhibitor? or CTLA-4) adj3 (inhibit$ or block?)) or (ICI? and "Immun$ Checkpoint") or BMS-1 or EX-A947 or HY-19991 or J-690233 or MFCD28978741 or s7911 or D000082082 or SCHEMBL16555159 or ZINC230477930 or 1675201-83-8).ti,ab,kw. [IMMUNE CHECKPOINT PROTEINS TERMS]	151191
#146	Immunotherapy/ or Radioimmunotherapy/ or Antibodies, Monoclonal/ or (immunotherap$ or immuno-therap$ or (((biologic$ adj3 response? adj3 modifier?) or BRM or immunogenic$ or immunologic$ or immuno-genic$ or immuno-logic$ or radioimmunotherapy$ or radio-immunotherap$ or ((monoclonal$ or clonal$ or hybridoma$) adj2 antibod$)) adj3 (therap$ or intervention? or treat$))).ti,ab,kw. [IMMUNOTHERAPY TERMS]	933222
#147	Molecular Targeted Therapy/ or ((molecular$ or neoplas$ or cancer$ or tumo?r$ or carcinoma$) adj3 target$ adj3 therap$).ti,ab,kw. [TARGETED THERAPY TERMS]	195601
#148	(atezolizumab$2 or anti-PDL1 or MPDL-3280A or MPDL3280A or RG-7446 or RG7446 or ro-5541267 or ro5541267 or Tecentriq$2 or Tecntriq$2 or 1380723-44-3 or 0INE2SFD9E or 52CMI0WC3Y).ti,ab,kw. [ATEZOLIZUMAB TERMS]	14447
#149	(avelumab$2 or bavencio$2 or msb-0010682 or msb-0010718c or msb0010682 or msb0010718c or msb-10682 or msb-10718c or msb10682 or msb10718c or pf-06834635 or pf-6834635 or pf06834635 or pf6834635 or KXG2PJ551I or 1537032-82-8).ti,ab,kw. [AVELUMAB TERMS]	3900
#150	(camrelizumab$2 or "anti-pd-1 monoclonal antibody" or shr-1210 or shr1210 or carilizumab$2 or carrelizumab$2 or 73096E137E or 1798286-48-2).ti,ab,kw. [CAMRELIZUMAB TERMS]	3347
#151	(1428935-60-7 or 28x28x9okv or anti-b7h1-monoclonal-antibody or durvalumab$2 or durvalumabum$2 or imfinzi$2 or l01xc28 or medi4736 or medi-4736).ti,ab,kw. [DURVALUMAB TERMS]	8102
#152	Ipilimumab/ or (ipilimumab$2 or bms-734016 or bms734016 or cs-1002 or cs1002 or ibi-310 or ibi310 or mdx-ctla-4 or mdx-010 or mdx-101 or	36766

No.	Query	Results
	mdx010 or mdx101 or strentarga$2 or yervoy$2 or 6T8C155666 or 477202-00-9).ti,ab,kw. [IPILIMUMAB TERMS]	
#153	Nivolumab/ or (nivolumab$2 or bms-936558 or bms-986213 or bms-986298 or cmab819 or bms936558 or bms986213 or bms986298 or cmab-819 or mdx-1106 or mdx1106 or ono-4538 or ono4538 or opdivo$2 or opdualag$2 or 31YO63LBSN or 946414-94-4).ti,ab,kw. [NIVOLUMAB TERMS]	59812
#154	(pembrolizumab$2 or keytruda$2 or lambrolizumab$2 or mk3475 or mk-1308a or mk-3475 or mk7684a or sch-900475 or sch900475 or "keylynk-010 component" or DPT0O3T46P or 1422183-02-5 or 1374853-91-4).ti,ab,kw. [PEMBROLIZUMAB TERMS]	36218
#155	(2072873-06-2 or 8fu7fq8upk or ibi308 or ibi-308 or sintilimab$2 or tyvyt$2 or who-10801).ti,ab,kw. [SINTILIMAB TERMS]	1965
#156	(1924598-82-2 or 8jxn261vva or js001 or js-001 or tab001 or tab-001 or teripalimab$2 or toripalimab$2 or treipril$2 or treprizumab$2 or tripleitriumab$2 or triprizumab$2 or tuoyi$2 or who-10820).ti,ab,kw. [TORIPALIMAB TERMS]	1304
#157	(2079108-44-2 or 2226345-85-1 or 2y3t5if01z or aex1188 or aex-1188 or incmga00012 or incmga-00012 or incmga0012 or incmga-0012 or mga012 or mga-012 or retifanlimab$2 or zynyz$2).ti,ab,kw. [RETIFANLIMAB TERMS]	157
#158	(2245725-04-4 or l62556gpxb or mgd013 or mgd-013 or tebotelimab$2).ti,ab,kw. [TEBOTELIMAB TERMS]	37
#159	(2394841-59-7 or 6fyg1ds4nw or ak104 or ak-104 or cadonilimab$2 or who-11581).ti,ab,kw. [CADONILIMAB TERMS]	147
#160	(2231029-82-4 or hlx10 or hlx-10 or s3gqz2k36v or serplulimab$2).ti,ab,kw. [SERPLULIMAB TERMS]	192
#161	(2256084-03-2 or 90iqr2i6tr or cs1001 or cs-1001 or sugemalimab$2 or wbp315 or wbp-315 or wbp3155 or wbp-3155).ti,ab,kw. [SUGEMALIMAB TERMS]	142
#162	(1496553-00-4 or claudiximab$2 or imab362 or imab-362 or tf5mpq8wgy or zolbetuximab$2).ti,ab,kw. [ZOLBETUXIMAB TERMS]	321
#163	(1952272-74-0 or bemarituzumab$2 or fpa144 or fpa-144 or rjw23bq0kw).ti,ab,kw. [BEMARITUZUMAB TERMS]	100
#164	Cetuximab/ or (205923-56-4 or abp494 or abp-494 or c225 or c-225 or c225-03 or c-22503 or c-225-03 or cdp1 or cdp-1 or cetuximab$2 or cetuximabum$2 or ch225 or ch-225 or chimeric-anti-egfr-monoclonal-antibody or cmab009 or cmab-009 or ctp15 or ct-p15 or dtxsid0040830 or erbitux$2 or hsdb-7454 or imc225 or imc-225 or imcc225 or imcc-225	49720

No.	Query	Results
	or imc-c225 or kl140 or kl-140 or l01xc06 or ly2939777 or ly-2939777 or mab-c225 or moab-c225 or nsc714692 or pqx0d8j21j or sti001 or sti-001).ti,ab,kw. [CETUXIMAB TERMS]	
#165	(1133766-06-9 or metmab$2 or metma-b or ms1j9720wc or onartuzumab$2 or pro143966 or pro-143966 or pro-143996 or pro143996 or ro5490258 or ro-5490258).ti,ab,kw. [ONARTUZUMAB TERMS]	353
#166	(51wew898ij or 872514-65-3 or amg102 or amg-102 or rilotumumab$2).ti,ab,kw. [RILOTUMUMAB TERMS]	261
#167	(1518996-49-0 or 571045eim4 or andecaliximab$2 or gs5745 or gs-5745).ti,ab,kw. [ANDECALIXIMAB TERMS]	139
#168	(444731-52-6 or 635702-64-6 or 790713-33-6 or 7rn5dr86ck or a19406 or a839572 or ab01273967-01 or ab01273967-02 or ab01273967-05 or ab01273967-06 or ac-8522 or akos005145819 or am20090659 or ar-270-43507999 or armala$2 or as-11066 or bcp01839 or bcp9001053 or bcpp000129 or bd164238 or bdbm26474 or brd-k74514084-003-02-7 or ccg-265010 or chebi-71219 or chembl477772 or cid-10113978 or cs-0269 or db06589 or dtxcid1028659 or dtxsid8048733 or en300-57325 or ex-a1241 or ft-0659928 or ft-0684794 or gtpl5698 or gw780604 or gw-780604 or gw-78603 or gw786034 or gw7-86034 or gw-786034 or gw786034b or gw-786034b or gw786034x or gw-786034x or hms3244c21 or hms3244c22 or hms3244d21 or hms3656l14 or hms3745g05 or hsdb-8210 or hy-10208 or indazolylpyrimidine-13 or jmc514632-compound-13 or kinome-3790 or mfcd11616589 or ncgc00188865-01 or ncgc00188865-02 or ncgc00188865-03 or ncgc00188865-10 or nsc752782 or nsc-752782 or nsc800839 or nsc-800839 or p-6706 or pazopanib$2 or pazopanibum$2 or q-101400 or q7157043 or s3012 or sb17290 or sb710468 or sb-710468 or sb710468a or sb-710468a or schembl588608 or sw218082-3 or tox21-113174 or tox21-113174-1 or votrient$2 or z1541638525).ti,ab,kw. [PAZOPANIB TERMS]	7842
#169	(1218779-75-9 or 5s371k6132 or 811803-05-1 or ab01274807-01 or ab01274807-02 or ac-27461 or akos024464453 or amy21302 or apatinib$2 or ba175030 or bcp02840 or c76598 or ccg-268625 or chembl3186534 or cs-0003200 or d11288 or db14765 or ds-7455 or dtxsid601024366 or ex-a1794 or gtpl7648 or hy-13342a or mfcd21648511 or ncgc00249393-01 or ncgc00249393-08 or nsc772886 or nsc-772886 or nsc799333 or nsc-799333 or q27262801 or rivoceranib$2 or s5248 or sb16590 or schembl1814966 or yn968d1 or yn-968d1).ti,ab,kw. [RIVOCERANIB/APATINIB TERMS]	4042
#170	Induction Chemotherapy/ or Consolidation Chemotherapy/ or Maintenance Chemotherapy/ or Antineoplastic Combined Chemotherapy Protocols/ or exp Chemotherapy, Adjuvant/ or Chemoradiotherapy/ or (chemotherap$ or chemo-therap$ or carcinochemotherap$ or chemoradiotherap$ or chemoradiation? or radiochemotherap$ or	1901184

No.	Query	Results
	carcino-chemotherap$ or chemo-radiotherap$ or chemo-radiation? or radio-chemotherap$).ti,ab,kw. [CHEMOTHERAPY TERMS]	
#171	exp Leucovorin/ or (leucovorin$ or 6-s-leucovorin or 6s-leucovorin or acide folinique or akos015961207 or bdbm50039121 or bpbio1-000766 or bspbio-000696 or bspbio-002218 or brd-a75919782-238-01-8 or calcium folinate or chebi-15640 or chembl1679 or chembl69905 or citrovoeum-factor or citrovorum-factor or d93089 or divk1c-000222 or dtxsid0048216 or einecs-200-361-6 or en300-27068710 or folinate folinic-acid-sf or folinic acid or formyltetrahydrofolate or fusilev$2 or gtpl4816 or gtpl6690 or hsdb-6544 or hy-17556 or idi1-000222 or kbio1-000222 or kbio2-001339 or kbio2-003907 or kbio2-006475 or kbio3-001438 or kbiogr-000461 or kbioss-001339 or lencovorin$2 or leucal$2 or leukovorin$2 or leukovoran$2 or leucovorin$2 or levoleucovorin$2 or levo-leucovorin$2 or mfcd00867488 or ninds-000222 or nsc3590 or prestwick0-000738 or prestwick1-000738 or prestwick2-000738 or prestwick3-000738 or q45435667 or q573i9dvlp or s5790 or schembl10068238 or schembl8349 or sd-204098 or s-leucovorin$2 or sleucovorin$2 or spectrum2-000116 or spectrum3-000479 or spectrum4-000031 or spectrum5-000910 or spectrum-000859 or spbio-000132 or spbio-002635 or sbi-0051427-p003 or welcovorin$2 or "formyltetrahydropteroylglutamic acid" or Q573I9DVLP or 58-05-9).ti,ab,kw. [LEUCOVORIN TERMS]	68999
#172	Carboplatin/ or (Carboplatin$2 or blastocarb$2 or boplatex$2 or carboplat$ or carbosin$2 or carbotec$2 or carplan$2 or CBDCA or (platinum adj3 (cis or diamin? or cyclobutanedicarboxylat? or dicarboxylatediammine)) or Dicarboxylatoplatinum or diamminecyclobutanedicarboxylatoplatinum or cycloplatin$ or erbakar$2 or ercar$2 or ifacap$2 or jm8 or jm-8 or kemocarb$2 or nsc-241240 or nsc241240 or nsc-201345 or nsc201345 or oncocarbin$2 or paraplatin$ or Platinwas$2 or Ribocarbo$2 or Neocarbo$2 or Nealorin$2 or HSDB-6957 or BG3F62OND5 or 41575-94-4).ti,ab,kw. [CARBOPLATIN TERMS]	133218
#173	exp Paclitaxel/ or (paclitaxel$ or abraxane$2 or abraxus$2 or act02709 or act-02709 or acon1-002231 or anx-513 or anzatax$2 or apealea$2 or asotax$2 or bidd-pxr0046 or biotax$2 or bms-181339 or bms181339-01 or bms181339 or bms-181339-01 or bmy-45622 or bmy45622 or bspbio-000290 or capxol$2 or ccris-8143 or chembl428647 or chebi-45863 or coroflex-please$2 or coroxane$2 or cmap-000068 or cynviloq$2 or cypher-select$2 or dsstox-cid-3413 or dsstox-gsid-23413 or dsstox-rid-77016 or dhp107 or dhp-107 or dhp-208 or dhp208 or dts-301 or dts301 or ebetaxel$2 or empac$2 or endotag-1 or endotag1 or formoxol$2 or genaxol$2 or genetaxyl$2 or genexol$2 or gtpl2770 or hms2090d07 or hms2095o12 or hms2231a16 or hms3712o12 or hsdb-6839 or hunxol$2 or hy-b0015 or ifaxol$2 or ig-001 or ig001 or infinnium$2 or intaxel$2 or kbiogr-002509 or kbio2-002509 or kbio2-005077 or kbio2-007645 or kbio3-002987 or lep-etu$2 or lipopac$2 or liporaxel$2 or mbt-0206 or mbt0206 or medixel or mfcd00869953 or mitotax$2 or nanopac$2 or nanotax$2 or nanotaxel$2 or ncgc00164367-01 or nk-105 or nk105 or nsc-125973 or nsc-673089 or nsc125973 or nsc673089 or nscc-125973 or nova-12005 or oas-pac-100 or oaspac100 or oncogel$2 or onxal$2 or	238447

No.	Query	Results
	onxol$2 or p-ssmm-vip$2 or paclical$2 or pacitaxel$2 or paclical$2 or padexol$2 or pacligel$2 or paclitaxel$2 or pacliex$2 or paxceed$2 or paxene$2 or paxoral$2 or paxus$2 or pazenir$2 or plaxicel$2 or praxel$2 or qw-8184 or schembl3976 or sb-05 or sb05 or sdp-013 or sindaxel$2 or smr000857385 or sr-01000075350 or taycovit$2 or taxalbin$2 or taxane$ or taxocris$2 or taxol$2 or taxus$2 or tocosol$2 or xorane$2 or yewtaxan$2 or zinc96006020 or zisu$2 or P88XT4IS4D or 33069-62-4).ti,ab,kw. [PACLITAXEL TERMS]	
#174	Docetaxel/ or (114915-20-7 or 114977-28-5 or 15h5577cqd or 699121phca or ab01273941-01 or ab01273941-02 or ac-383 or akos015960718 or akos024457953 or amy4356 or anx-514 or axtere$2 or bd164373 or bdbm36351 or bind014 or bind-014 or brd-k30577245-001-04-3 or brd-k30577245-341-01-9 or bs102 or bs-102 or chebi-4672 or chembl92 or cid148124 or ckd-810 or crlx301 or crlx-301 or cs-1144 or d07866 or d4102 or daxotel$2 or db01248 or dexotel$2 or docecad$2 or docefrez$2 or docetaxel$2 or docetaxelum$2 or docetaxol$2 or docetaxolum$2 or dtxcid8020464 or dtxsid0040464 or emdoc$2 or en300-123047 or ex-a1206 or gtpl6809 or hms2089k08 or hsdb-6965 or hy-b0011 or ks-1452 or l01cd02 or lit976 or lit-976 or mfcd00871399 or ncgc00181306-01 or ncgc00181306-02 or ncgc00181306-04 or ncgc00242509-01 or nsc628503 or nsc-628503 or nsc-759850 or oncodocel$2 or q-100074 or q420436 or rp56976 or rp-56976 or schembl4419 or sdp-014 or sid-530 or sr-01000003023 or sr-01000003023-5 or syp-0704a or taxanit$2 or taxespira$2 or taxoel$2 or taxoltere-metro or taxotel$2 or taxoter$2 or taxotere$2 or texot$2 or tox21-112781 or tox21-113088 or txl$2 or w-60384 or xrp6976 or xrp-6976 or xrp-6976l or z1546621742).ti,ab,kw. [DOCETAXEL TERMS]	111159
#175	Cisplatin/ or (Cisplatin$ or platinum$ or Cismaplat$2 or (cis adj3 ($platinum or platinous)) or cis-platinum or cis-Platin or dichloroplatinum or diaminodichloroplatinum or diamminedichloroplatinum or dichlorodiammineplatinum or AI3-62048 or abiplatin or biocisplatinum or biocysplatinum or blastolem$2 or briplatin$2 or cddp-ti or cis-ddp or cisPt$ or CACP or CCRIS-221 or CDDP or DDPt or CP-Ethypharm or CPDC or CPDD or CPPD or (DDP and antitumor) or cisplatyl$2 or citoplatino$2 or cytoplatin$2 or cytosplat$2 or docistin$2 or elvecis$2 or kemoplat$2 or Fauldiscipla$2 or IA-call or LiPlaCis$2 or lederplatin$2 or lipoplatin$2 or "liposomal cisplatin" or mpi-5010 or mpi5010 or neoplatin$2 or niyaplat$2 or nk-801 or noveldexis$2 or nsc-119875 or nci-c55776 or platamine$2 or platamine-rtu or platiblastin$2 or platidiam$2 or platimine$2 or platinex$2 or platinil$2 or platino$2 or platinol$2 or platinolaq$2 or platinol-aq$2 or platinoxan$2 or platiran$2 or platistil$2 or platistin$2 or platosin$2 or "pronto platamine" or "Peyrone's chloride" or randa$2 or romcis$2 or sicatem$2 or spi-077 or tr-170 or tecnoplatin$2 or Q20Q21Q62J or 15663-27-1 or 26035-31-4 or 96081-74-2).ti,ab,kw. [CISPLATIN TERMS]	462326
#176	Oxaliplatin/ or (oxaliplatin$2 or (Oxalat$ adj3 platin$) or axiplatin$2 or bendaplatin$2 or crisapla$2 or croloxat$2 or dacotin$2 or dacplat$2 or ebeoxal$2 or elatofen$2 or eloxatin$ or elplat$2 or euroxaliplatin$2 or geneplatin$2 or gessedil$2 or heloxatin$2 or lipoxal$2 or mbp-426 or	94372

No.	Query	Results
	mbp426 or medoxa$2 or oksaliplatin$ or oplat$2 or oxalatoplatin$ or oxalatplatin$2 or oxali$2 or oxalip$2 or oxaliplan$2 or oxaliprol$2 or oxaliquid$2 or oxalisan$2 or oxalisin$2 or oxalizor$2 or oxaltic$2 or oxaltin$2 or oxamed$2 or oxaplamyl$2 or oxaviatin$2 or platox$2 or plaxitin$2 or rectoxal$2 or riboxatin$2 or rp-54780 or rp54780 or sinoxal$2 or sr-96669 or sr96669 or transplastin$2 or velminox$2 or xaliplat$2 or xoplan$2 or L-OHP-Cpd or 1-OHP or ACT-078 or ACT078 or CCRIS-9143 or NSC-266046 or 04ZR38536J or 61825-94-3).ti,ab,kw. [OXALIPLATIN TERMS]	
#177	Capecitabine/ or (capecitabin$ or apecitab$2 or atubri$2 or bc164277 or bcpp000300 or bxeliri$2 or bs-1000 or cacit$2 or capcel$2 or capebina$2 or capecite$2 or capegard$2 or capezam$2 or capicet$2 or capiri$2 or capiibine$2 or captabin$2 or capnat$2 or capoda$2 or capostat$2 or capsy$2 or capxcel$2 or caxeta$2 or ccg-264841 or ccx-340 or cpecitabine$2 or cs-0768 or d01223 or db01101 or dsstox-cid-26451 or dsstox-gsid-46451 or dsstox-rid-81625 or dtxsid3046451 or ecansya$2 or ex-a835 or gtpl6799 or hsdb-7656 or hy-b0016 or j-700154 or k007 or m0297 or mfcd00930626 or mls003915642 or mls004774137 or ncgc00164569-01 or ncgc00164569-02 or ncgc00164569-05 or nsc-759853 or paxon$2 or q-200788 or q420207 or r-340 or rg-340 or r340 or rg340 or ro-09-1978 or ro-091978 or ro-09-1978 or ro-09-1978-000 or ro091978 or s1156 or s-1156 or sr-01000931255 or tox21-112198 or x-abine$2 or x-tabin$2 or xabine$2 or xecap$2 or xeliri$2 or xelocel$2 or xeloda$2 or xelox$2 or z1501480421 or zinc3806413 or 6804dj8z9u or 154361-50-9 or 958887-39-3).ti,ab,kw. [CAPECITABINE TERMS]	58807
#178	(platinum adj1 (fluoropyrimidine or fluoro-pyrimidine) adj3 (doublet? or combin$ or chemotherap$ or chemo-therap$ or ((first or front) adj1 line?) or 1-LOT or 1L or therap$ or regimen? or expos$)).ti,ab,kw. [PLATINUM-FLUOROPYRIMIDINE DOUBLET TERMS]	261
#179	(5-fluoropyrimidin$ or 5-fluoro-pyrimidine or pyrimidine-5-fluoro or (fluorinated adj1 pyrimidine) or a9048 or ac-453 or akos006346044 or am86123 or "bb 0260992" or c4h3fn2 or db-007051 or dtxsid80217851 or en300-6966105 or f14737 or ft-0601423 or mfcd06658278 or q42859845 or w-203496 or zinc1845840 or 675f218 or L36X4TD47C or 675-21-8).ti,ab,kw,kf,ot,hw,rn,nm. [FLUOROPYRIMIDINE TERMS]	5397
#180	Fluorouracil/ or (fluorouracil$ or fluroblastin$ or 1upf or 5-Faracil or 5-Fluoracil or 5-Fluoracyl or 5-fluoro-uracil or 5-fluoro-uracil or 5-Fluoroblastin or 5-fluorouacil or 5-Ftouracyl or 5-FU or 5FU or 5F-uracil or Adrucil$2 or AI3-25297 or Arumel$2 or BSPBio-002048 or Cancersil$2 or Carac$2 or Carzonal$2 or CHEBI-46345 or CHEMBL185 or Cinco-FU or CCRIS-2582 or DSSTox-CID-634 or DSSTox-GSID-20634 or DSSTox-RID-75705 or Efudex$2 or Efudix$2 or Efurix$2 or EINECS-200-085-6 or Effluderm$2 or Fluoroblastin$2 or Fluoro-Uracil$2 or Fluoro-uracile$2 or Fluoro-uracilo$2 or Fluoroplex$2 or Fluorouracile$2 or Fluorouracilo$2 or Fluorouracilum$2 or Fluorouracilum$2 or Fluracil$2 or Fluracilum$2 or Fluri$2 or Fluril$2 or Fluuro-Uracil$2 or Fluorouracilo$2 or Fluroblastin$2 or Fluro-Uracil$2 or Ftoruracil$2 or GTPL4789 or HSDB 3228 or IDI1-000054 or Kecimeton$2 or KBio1-000054 or KBio2-001321 or KBio2-	254701

No.	Query	Results
	003889 or KBio2-006457 or KBioGR-001253 or KBioSS-001321 or Lopac-F-6627 or Lopac0-000536 or MFCD00006018 or MLS000069498 or MLS002415705 or NCGC00015442-01 or NCGC00015442-02 or NCGC00015442-03 or NCGC00015442-04 or NCGC00015442-05 or NCGC00015442-06 or NCGC00015442-07 or NCGC00015442-08 or NCGC00015442-09 or NCGC00015442-10 or NCGC00015442-11 or NCGC00015442-12 or NCGC00015442-15 or NCGC00015442-16 or NSC-19893 or NSC757036 or NSC816997 or Phtoruracil$2 or Pharmakon1600-01500305 or Phthoruracil$2 or Queroplex$2 or Ro-2-9757 or S1209 or 191047-64-0 or 191047-65-1 or 191115-88-5 or U3P01618RT or 51-21-8).ti,ab,kw. [FLUOROURACIL TERMS]	
#181	Irinotecan/ or (irinotecan$ or ab00698464-07 or ab00698464-09 or ab00698464-10 or ab00698464-11 or ab00698464-12 or ab00698464-13 or ab00698464-14 or ac-7469 or akos015894969 or amy4227 or as-14323 or bdbm50128267 or bcp02860 or bcp9000793 or biotecan$2 or brd-k08547377-003-02-4 or campto$2 or camptosar$2 or chebi-80630 or chembl481 or cs-1138 or cpt-11 or cpt11 or d08086 or db00762 or dq2805 or en300-708800 or gtpl6823 or hsdb-7607 or ihl-305 or ihl305 or irinophore-c$2 or irinotel$2 or mfcd00866307 or ncgc00178697-02 or ncgc00178697-05 or nsc-728073 or nsc728073 or nk012-compound or q412197 or s1198 or schembl4034 or sn38 or sn-38 or sn-38-11 or sn3811 or topotecin$2 or u-101440e or u101440e or zinc1612996 or "7673326042" or 100286-90-6 or 97682-44-5).ti,ab,kw. [IRINOTECAN TERMS]	70722
#182	(teysuno$2 or (tegafur adj4 gimeracil adj4 oteracil) or ((S-1 or S1) adj3 combination) or TS-1-cpd or S-1-cpd or TS-1 or TS1 or BMS247616 or BMS-247616 or S1-tegafur-oxonate or S1-fluoropyrimidine-oxoonate).ti,ab,kw. [S1 COMBINATION TERMS]	8082
#183	Tegafur/ or (1189456-27-6 or 1548r74nsz or 17902-23-7 or 82294-77-7 or a812417 or ab00572620-15 or ac-2112 or akos000121279 or as-13528 or atillon$2 or bcp22714 or bp-58663 or brn-0525766 or c8h9fn2o3 or ccg-100959 or ccg-50110 or ccris-2762 or chebi-32188 or chembl20883 or citofur$2 or coparogin$2 or cs-1128 or d01244 or db09256 or dtxsid001009966 or einecs-241-846-2 or en300-21668 or exonal$2 or f-5-fu or fental$2 or florafur$2 or fluorafur$2 or fluorofur$2 or franrose$2 or franroze$2 or ft-0653732 or ft-0654170 or ft-0674829 or ft-0693965 or ft207 or ft-207 or ftorafur$2 or fulaid$2 or fulfeel$2 or furafluor$2 or furflucil$2 or furofutran$2 or futraful$2 or gtpl10513 or hms1665i05 or hms2051b15 or hms2090k04 or hms2232e05 or hms3371h21 or hms3393b15 or hms3654p13 or hms3715d14 or hy-17400 or lamar$2 or lifril$2 or mfcd00012351 or mjf12264 or mjf-12264 or mls000069497 or mls000759414 or mls001076521 or mls001424119 or nc00209 or ncgc00159418-02 or ncgc00159418-04 or ncgc00159418-05 or neberk$2 or nitobanil$2 or nsc148958 or nsc-148958 or opera-id-1726 or phthorafur$2 or q-201784 or q413370 or racemic-ftorafur or riol$2 or schembl4552 or sfsp$2 or sf-sp or sinoflurol$2 or smr000059106 or sr-01000639511 or sr-01000639511-1 or sr-01000639511-4 or sunfral$2 or sunfural$2 or tefsiel-c or tegaful$2 or tegafur$2 or tegafurum$2 or ts-1	21588

No.	Query	Results
	or uftoral$2 or upcmld-dp063 or utefos$2 or z104508106).ti,ab,kw. [TEGAFUR TERMS]	
#184	Ramucirumab/ or (1121b or 947687-13-0 or 947687-13-0 or a168 or a-168 or cyramza$2 or d99yvk4l0x or hlx12 or hlx-12 or hsdb-8314 or imc1121b or imc1121-b or imc-1121b or imc-1121-b or l01xc21 or ly3009806 or ly-3009806 or nsc-749128 or pbp2001 or pbp-2001 or ramucirumab$2 or ramucirumabum$2 or ro7234952 or ro-7234952).ti,ab,kw. [RAMUCIRUMAB TERMS]	9341
#185	Panitumumab/ or (339177-26-3 or 6a901e312a or abenix$2 or abx-egf or amg954 or amg-954 or e7-6-3 or l01xc08 or moab-abx-egf or moab-e7-6-3 or monoclonal-antibody-abx-egf or monoclonal-antibody-e7-6-3 or nsc-742319 or panitumab$2 or panitumumab$2 or panitumumabum$2 or panitunumab$2 or vectibex$2 or vectibix$2).ti,ab,kw. [PANITUMUMAB TERMS]	13785
#186	(6ns400bxkh or 780758-10-3 or 828933-51-3 or biomab-egfr or diacim$2 or h-r3 or nimotuzumab$2 or osag-101 or radiotheracim$2 or theracim$2 or theraloc$2).ti,ab,kw. [NIMOTUZUMAB TERMS]	1539
#187	(339186-68-4 or emd7200 or emd-7200 or emd72000 or emd-72000 or kgaa$2 or matuzumab$2 or merck-kgaa or mg4m3qb242).ti,ab,kw. [MATUZUMAB TERMS]	50772
#188	Bevacizumab/ or (12-igg1 or 1438851-35-4 or 216974-75-3 or 2s9zzm9q9v or abevmy$2 or abp215 or abp-215 or ainex$2 or altuzan$2 or alymsys$2 or ankeda$2 or anti-vegf or askb1202 or ask-b1202 or avastin$2 or avegra$2 or aybintio$2 or ba1101 or ba-1101 or bambevi$2 or bat1706 or bat-1706 or bcd021 or bcd-021 or bevacizumab$2 or bevacizumabum$2 or bevagen$2 or bevatas$2 or bevax$2 or bevz92 or bevz-92 or bi695502 or bi-695502 or bow030 or bow-030 or boyounuo$2 or bp01 or bp-01 or bp102 or bp-102 or bryxta$2 or bs503a or bs-503a or bxt2316 or bxt-2316 or byvasda$2 or cbt124 or cbt-124 or chs305 or chs-305 or chs5217 or chs-5217 or cizumab$2 or ctp16 or ct-p16 or equidacent$2 or fkb238 or fkb-238 or gb222 or gb-222 or gbs004 or gbs-004 or hanbeitai$2 or hd204 or hd-204 or hlx04 or hlx-04 or hot1010 or hot-1010 or hsdb-8080 or ibi305 or ibi-305 or idb0072 or idb-0072 or intp24 or intp-24 or ipique$2 or jhl1149 or jhl-1149 or js501 or js-501 or jy028 or jy-028 or krabeva$2 or kyomarc$2 or l01xc07 or lextemy$2 or "lumiere-(drug)" or ly01008 or ly-01008 or mabionvegf$2 or mb02 or mb-02 or mil60 or mil-60 or mvasi$2 or myl14020 or myl-14020 or myl1402o or myl-1402o or nsc704865 or nsc-704865 or onbevzi$2 or ons1045 or ons-1045 or ons5010 or ons-5010 or oyavas$2 or pf06439535 or pf-06439535 or pf6439535 or pf-6439535 or pmc901 or pmc-901 or pobevcy$2 or pro169 or pro-169 or pusintin$2 or ql1101 or ql-1101 or r435 or r-435 or rg435 or rg-435 or rhumab$2 or ro4876646 or ro-4876646 or rph001 or rph-001 or rtpr023 or r-tpr-023 or sb8 or sb-8 or sct501 or sct-501 or sct510 or sct-510 or sibp04 or sibp-04 or stc103 or stc-103 or stivant$2 or tab008 or tab-008 or tab014 or tab-014 or tot102 or tot-102 or trs003 or trs-003 or tx16 or tx-16 or vegzelma$2 or	132517

No.	Query	Results
	versavo$2 or zirabev$2 or zrc113 or zrc-113 or zybev$2).ti,ab,kw. [BEVACIZUMAB TERMS]	
#189	(2022215-59-2 or anb011 or anb-011 or dostarlimab$2 or gsk4057190 or gsk-4057190 or jemperli$2 or p0gvq9a4s5 or tsr042 or tsr-042 or wbp285 or wbp-285).ti,ab,kw. [DOSTARLIMAB TERMS]	595
#190	(chembl5095383 or retlirafusp-alfa or shr1701 or shr-1701).ti,ab,kw,kf,ot,hw,rn,nm. [SHR-1701 TERMS]	66
#191	(2368219-35-4 or 45x7ou8c4j or ab154 or ab-154 or domvanalimab$2 or who-11559).ti,ab,kw. [DOMVANALIMAB TERMS]	53
#192	(2259860-24-5 or ab122 or ab-122 or gls010 or gls-010 or gs0122 or gs-0122 or wbp3055 or wbp-3055 or who-11413 or zbl7o904il or zimberelimab$2).ti,ab,kw. [ZIMBERELIMAB TERMS]	152
#193	Lapatinib/ or (0vua21238f or 1092929-10-6 or 1210608-87-9 or 1xkk or 231277-92-2 or 388082-78-8 or 437755-78-7 or 913989-15-8 or a25184 or ab01273965-01 or ab01273965-02 or ab01273965-03 or ab01273965-04 or ab01273965-05 or ac-1314 or akos005145766 or am20090641 or as-14065 or bc164610 or bcp01874 or bcp9000837 or bcp9000838 or bcpp000188 or bcpp000189 or bdbm5445 or brd-k19687926-001-01-7 or brd-k19687926-379-02-5 or c29h26clfn4o4s or ccg-270133 or chebi-49603 or chembl554 or cid-208908 or d08108 or db01259 or dtxcid5026675 or dtxsid7046675 or en300-117254 or ex-a402 or fmm$2 or ft-0659650 or gsk572016 or gsk-572016 or gtpl5692 or gw2016 or gw-2016 or gw282974x or gw-282974x or gw572016 or gw-572016 or gw572016f or gw-572016f or gw-572016x or hms2089h10 or hms3244n06 or hms3244n10 or hms3244n14 or hms3744k11 or hsdb-8209 or hy-50898 or kinome-3684 or kinome-3685 or l0360 or lapatinib$2 or mfcd09264194 or ncgc00167507-01 or ncgc00167507-02 or ncgc00167507-03 or ncgc00167507-04 or ncgc00167507-09 or ns00003012 or nsc745750 or nsc-745750 or nsc800780 or nsc-800780 or q-101353 or q420323 or sb16918 or schembl8100 or sr-05000001472-1 or sw199101-5 or tox21-112505 or tykerb$2 or tyverb$2).ti,ab,kw. [LAPATINIB TERMS]	22315
#194	(857890-39-2 or a825653 or ac-25047 or aiv007 or aiv-007 or akos025401742 or amy9240 or as-16203 or bcp01799 or bcp9000633 or bcpp000247 or bdbm50331094 or bl164616 or c21h19cln4o4 or ccg-264842 or chebi-85994 or chembl1289601 or cs-0109 or d09919 or db09078 or dtxcid50117096 or dtxsid50194605 or e7080 or e-7080 or ee083865g2 or en300-7418350 or er203492-00 or er-203492-00 or ex-a249 or ft-0700727 or gtpl7426 or hms3244a07 or hms3244a08 or hms3244b07 or hms3654a14 or hy-10981 or j-513372 or kisplyx$2 or l01xe29 or lenvatinib$2 or lenvatinibum$2 or lenvima$2 or lev$2 or mfcd16038644 or mk7902 or mk-7902 or mls006011239 or ncgc00263198-01 or ncgc00263198-04 or ncgc00263198-07 or ns00069283 or nsc755980 or nsc-755980 or nsc800781 or nsc-800781 or q6523413 or ro7071618 or ro-7071618 or s1164 or sb16580 or	6465082

No.	Query	Results
	schembl864638 or smr004702999 or sw219259-1 or z2235801899).ti,ab,kw. [LENVATINIB TERMS]	
#195	(0rf or 1001264-89-6 or 524y3ib4hq or ac-28420 or akos025396463 or as-17027 or bcp0726000195 or bcp9000712 or bdbm50398379 or ccg-269312 or chebi-95089 or chembl2177390 or cs-0975 or d10641 or db11743 or dtxsid101025595 or ex-a2077 or gdc0068 or gdc-0068 or gdc0068-di-hcl or gdc-0068-di-hcl or gtpl7887 or hy-15186 or ipatasertib$2 or mfcd22124514 or ncgc00346714-01 or ns00072927 or nsc767898 or nsc-767898 or nsc781451 or nsc-781451 or nsc800986 or nsc-800986 or nsc832484 or nsc-832484 or q27078088 or rg7440 or rg-7440 or rg-7440-di-hcl or s2808 or schembl191659).ti,ab,kw. [IPATASERTIB TERMS]	765
#196	or/144-183 [INTERVENTION & COMPARATORS & CHEMO TERMS]	3346574
#197	143 and 196	37342
#198	(Adolescent/ or exp Child/ or exp Infant/) not (exp Adult/ and (Adolescent/ or exp Child/ or exp Infant/)) [CHILDREN <19 REMOVE]	4909840
#199	(editorial or note or comment or clinical trial protocol).pt. or (letter.pt. not randomized controlled trial/) [PROTOCOLS and OPINION PIECES REMOVE - CENTRAL]	5920659
#200	197 not (198 or 199) [PROTOCOLS and OPINION PIECES REMOVED - CENTRAL]	35736
#201	Conference proceeding.pt. [CONFERENCE ABSTRACTS/PROCEEDINGS]	243939
#202	200 and 201 [CONFERENCE ABSTRACTS ONLY]	776
#203	limit 202 to yr="2023 -Current"	87
#204	200 not 201 [CONFERENCE ABSTRACTS REMOVED]	34960
#205	203 or 204 [LAST 2 YRS OF ABSTRACTS RETAINED]	35047
#206	205 use cctr [CENTRAL results]	1887
#207	((((stomach? or gastric$ or cardia or cardiac or antrum? or antral$ or fundus$ or pyloric$ or pylorus$ or ventricul$ or linitis plastica or leather-bottle or ((stomach? or gastric$) and (GC or GEJ))) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$)) or ((stomach? or gastric$) adj3 SCC) or ((esophag$ or oesophag$ or esophagogastric$ or esophago-gastric$ or oesophagogastric$ or	74270

No.	Query	Results
	oesophago-gastric$ or gastroesophageal$ or gastro-esophageal$ or gastrooesophageal$ or gastro-oesophageal$ or cardio-esophageal$ or cardio-oesophageal$ or cardioesophageal$ or cardiooesophageal$ or EG or GE) adj3 (junction$ or sphincter$) adj3 (neoplas$ or cancer$ or tumo?r$ or carcinoma$ or malignan$ or oncolog$ or adenocancer$ or adeno-cancer$ or adenoma$ or adenocarcinoma$ or adeno-carcinoma$ or blastoma$ or carcinosarcoma$ or carcino-sarcoma$ or adenoacanthoma$ or adeno-acanthoma$ or epithelioma$ or melanoma$ or mesenchymoma$ or sarcoma$ or thymoma$ or granuloma$ or choriocarcinoma$ or cancerogenes?s or carcinoid$))) adj4 ((meta adj sta$) or metastas$ or metastatic$ or recur$ or secondar$ or relaps$ or advance$ or inoperab$ or disseminat$ or spread or migration or lethal$ or incurable or noncurable or non-curable or uncurable or progressive or terminal or invasive$ or aggressive$ or (late? adj2 stage$) or ((stage? or grade? or type?) adj2 (3a$ or 3b$ or 3c$ or III$ or 4a$ or 4b$ or IV$)) or "stage 3" or "stage 4" or met or mets or N1? or N2? or N3? or pN1? or pN2? or pN3?)).ti,ab,kw. [Metastatic GC/GEJ TERMS]	
#208	(tislelizumab$2 or tirelizumab$2 or bgb-a317 or bgba317 or bgn-1 or bgn1 or jhl-2108 or jhl2108 or vdt-482 or vdt482 or 1858168-59-8 or 0kvo411b3n).ti,ab,kw. [TISLELIZUMAB TERMS]	1721
#209	((immune$ adj3 checkpoint? adj3 (inhibit$ or block?)) or (((programmed adj3 death) or PD-1 or PD-1-PD-L1 or PDCD1) adj3 (ligand? or inhibit$ or block?)) or ((B7-H1 or B7H1 or "B7 homolog 1" or CD274 or CD273 or PDCD1LG1 or PDCD1LG2) adj3 (antigen? or protein?)) or ((Cytotoxic-T-Lymphocyte-Associated Protein-4 Inhibitor? or CTLA-4) adj3 (inhibit$ or block?)) or (ICI? and "Immun$ Checkpoint") or BMS-1 or EX-A947 or HY-19991 or J-690233 or MFCD28978741 or s7911 or D000082082 or SCHEMBL16555159 or ZINC230477930 or 1675201-83-8).ti,ab,kw. [IMMUNE CHECKPOINT PROTEINS TERMS]	126659
#210	(immunotherap$ or immuno-therap$ or (((biologic$ adj3 response? adj3 modifier?) or BRM or immunogenic$ or immunologic$ or immuno-genic$ or immuno-logic$ or radioimmunotherapy$ or radio-immunotherap$ or ((monoclonal$ or clonal$ or hybridoma$) adj2 antibod$)) adj3 (therap$ or intervention? or treat$))).ti,ab,kw. [IMMUNOTHERAPY TERMS]	466968
#211	((molecular$ or neoplas$ or cancer$ or tumo?r$ or carcinoma$) adj3 (target$ adj3 therap$)).ti,ab,kw. [TARGETED THERAPY TERMS]	117346
#212	(atezolizumab$2 or anti-PDL1 or MPDL-3280A or MPDL3280A or RG-7446 or RG7446 or ro-5541267 or ro5541267 or Tecentriq$2 or Tecntriq$2 or 1380723-44-3 or 0INE2SFD9E or 52CMI0WC3Y).ti,ab,kw. [ATEZOLIZUMAB TERMS]	14447
#213	(avelumab$2 or bavencio$2 or msb-0010682 or msb-0010718c or msb0010682 or msb0010718c or msb-10682 or msb-10718c or msb10682 or msb10718c or pf-06834635 or pf-6834635 or pf06834635 or pf6834635 or KXG2PJ551I or 1537032-82-8).ti,ab,kw. [AVELUMAB TERMS]	3900

No.	Query	Results
#214	(camrelizumab$2 or "anti-pd-1 monoclonal antibody" or shr-1210 or shr1210 or carilizumab$2 or carrelizumab$2 or 73096E137E or 1798286-48-2).ti,ab,kw. [CAMRELIZUMAB TERMS]	3347
#215	(1428935-60-7 or 28x28x9okv or anti-b7h1-monoclonal-antibody or durvalumab$2 or durvalumabum$2 or imfinzi$2 or l01xc28 or medi4736 or medi-4736).ti,ab,kw. [DURVALUMAB TERMS]	8102
#216	(ipilimumab$2 or bms-734016 or bms734016 or cs-1002 or cs1002 or ibi-310 or ibi310 or mdx-ctla-4 or mdx-010 or mdx-101 or mdx010 or mdx101 or strentarga$2 or yervoy$2 or 6T8C155666 or 477202-00-9).ti,ab,kw. [IPILIMUMAB TERMS]	19754
#217	(nivolumab$2 or bms-936558 or bms-986213 or bms-986298 or cmab819 or bms936558 or bms986213 or bms986298 or cmab-819 or mdx-1106 or mdx1106 or ono-4538 or ono4538 or opdivo$2 or opdualag$2 or 31YO63LBSN or 946414-94-4).ti,ab,kw. [NIVOLUMAB TERMS]	36604
#218	(pembrolizumab$2 or keytruda$2 or lambrolizumab$2 or mk3475 or mk-1308a or mk-3475 or mk7684a or sch-900475 or sch900475 or "keylynk-010 component" or DPT0O3T46P or 1422183-02-5 or 1374853-91-4).ti,ab,kw. [PEMBROLIZUMAB TERMS]	36218
#219	(2072873-06-2 or 8fu7fq8upk or ibi308 or ibi-308 or sintilimab$2 or tyvyt$2 or who-10801).ti,ab,kw. [SINTILIMAB TERMS]	1965
#220	(1924598-82-2 or 8jxn261vva or js001 or js-001 or tab001 or tab-001 or teripalimab$2 or toripalimab$2 or treipril$2 or treprizumab$2 or tripleitriumab$2 or triprizumab$2 or tuoyi$2 or who-10820).ti,ab,kw. [TORIPALIMAB TERMS]	1304
#221	(2079108-44-2 or 2226345-85-1 or 2y3t5if01z or aex1188 or aex-1188 or incmga00012 or incmga-00012 or incmga0012 or incmga-0012 or mga012 or mga-012 or retifanlimab$2 or zynyz$2).ti,ab,kw. [RETIFANLIMAB TERMS]	157
#222	(2102192-68-5 or anti-pd-l1-monoclonal-antibody-kn035 or asc22 or asc-22 or envafolimab$2 or es1m06m6qh or kn035 or kn-035).ti,ab,kw. [ENVAFOLIMAB TERMS]	142
#223	(2245725-04-4 or l62556gpxb or mgd013 or mgd-013 or tebotelimab$2).ti,ab,kw. [TEBOTELIMAB TERMS]	37
#224	(2394841-59-7 or 6fyg1ds4nw or ak104 or ak-104 or cadonilimab$2 or who-11581).ti,ab,kw. [CADONILIMAB TERMS]	147
#225	(2231029-82-4 or hlx10 or hlx-10 or s3gqz2k36v or serplulimab$2).ti,ab,kw. [SERPLULIMAB TERMS]	192

No.	Query	Results
#226	(2256084-03-2 or 90iqr2i6tr or cs1001 or cs-1001 or sugemalimab$2 or wbp315 or wbp-315 or wbp3155 or wbp-3155).ti,ab,kw. [SUGEMALIMAB TERMS]	142
#227	(1496553-00-4 or claudiximab$2 or imab362 or imab-362 or tf5mpq8wgy or zolbetuximab$2).ti,ab,kw. [ZOLBETUXIMAB TERMS]	321
#228	(1952272-74-0 or bemarituzumab$2 or fpa144 or fpa-144 or rjw23bq0kw).ti,ab,kw. [BEMARITUZUMAB TERMS]	100
#229	(205923-56-4 or abp494 or abp-494 or c225 or c-225 or c225-03 or c-22503 or c-225-03 or cdp1 or cdp-1 or cetuximab$2 or cetuximabum$2 or ch225 or ch-225 or chimeric-anti-egfr-monoclonal-antibody or cmab009 or cmab-009 or ctp15 or ct-p15 or dtxsid0040830 or erbitux$2 or hsdb-7454 or imc225 or imc-225 or imcc225 or imcc-225 or imc-c225 or kl140 or kl-140 or l01xc06 or ly2939777 or ly-2939777 or mab-c225 or moab-c225 or nsc714692 or pqx0d8j21j or sti001 or sti-001).ti,ab,kw. [CETUXIMAB TERMS]	28592
#230	(1133766-06-9 or metmab$2 or metma-b or ms1j9720wc or onartuzumab$2 or pro143966 or pro-143966 or pro-143996 or pro143996 or ro5490258 or ro-5490258).ti,ab,kw. [ONARTUZUMAB TERMS]	353
#231	(51wew898ij or 872514-65-3 or amg102 or amg-102 or rilotumumab$2).ti,ab,kw. [RILOTUMUMAB TERMS]	261
#232	(1518996-49-0 or 571045eim4 or andecaliximab$2 or gs5745 or gs-5745).ti,ab,kw. [ANDECALIXIMAB TERMS]	139
#233	(444731-52-6 or 635702-64-6 or 790713-33-6 or 7rn5dr86ck or a19406 or a839572 or ab01273967-01 or ab01273967-02 or ab01273967-05 or ab01273967-06 or ac-8522 or akos005145819 or am20090659 or ar-270-43507999 or armala$2 or as-11066 or bcp01839 or bcp9001053 or bcpp000129 or bd164238 or bdbm26474 or brd-k74514084-003-02-7 or ccg-265010 or chebi-71219 or chembl477772 or cid-10113978 or cs-0269 or db06589 or dtxcid1028659 or dtxsid8048733 or en300-57325 or ex-a1241 or ft-0659928 or ft-0684794 or gtpl5698 or gw780604 or gw-780604 or gw-78603 or gw786034 or gw7-86034 or gw-786034 or gw786034b or gw-786034b or gw786034x or gw-786034x or hms3244c21 or hms3244c22 or hms3244d21 or hms3656l14 or hms3745g05 or hsdb-8210 or hy-10208 or indazolylpyrimidine-13 or jmc514632-compound-13 or kinome-3790 or mfcd11616589 or ncgc00188865-01 or ncgc00188865-02 or ncgc00188865-03 or ncgc00188865-10 or nsc752782 or nsc-752782 or nsc800839 or nsc-800839 or p-6706 or pazopanib$2 or pazopanibum$2 or q-101400 or q7157043 or s3012 or sb17290 or sb710468 or sb-710468 or sb710468a or sb-710468a or schembl588608 or sw218082-3 or tox21-113174 or tox21-113174-1 or votrient$2 or z1541638525).ti,ab,kw. [PAZOPANIB TERMS]	7842

No.	Query	Results
#234	(1218779-75-9 or 5s371k6132 or 811803-05-1 or ab01274807-01 or ab01274807-02 or ac-27461 or akos024464453 or amy21302 or apatinib$2 or ba175030 or bcp02840 or c76598 or ccg-268625 or chembl3186534 or cs-0003200 or d11288 or db14765 or ds-7455 or dtxsid601024366 or ex-a1794 or gtpl7648 or hy-13342a or mfcd21648511 or ncgc00249393-01 or ncgc00249393-08 or nsc772886 or nsc-772886 or nsc799333 or nsc-799333 or q27262801 or rivoceranib$2 or s5248 or sb16590 or schembl1814966 or yn968d1 or yn-968d1).ti,ab,kw. [RIVOCERANIB/APATINIB TERMS]	4042
#235	(chemotherap$ or chemo-therap$ or carcinochemotherap$ or chemoradiotherap$ or chemoradiation? or radiochemotherap$ or carcino-chemotherap$ or chemo-radiotherap$ or chemo-radiation? or radio-chemotherap$).ti,ab,kw. [CHEMOTHERAPY TERMS]	1544867
#236	(leucovorin$ or 6-s-leucovorin or 6s-leucovorin or acide folinique or akos015961207 or bdbm50039121 or bpbio1-000766 or bspbio-000696 or bspbio-002218 or brd-a75919782-238-01-8 or calcium folinate or chebi-15640 or chembl1679 or chembl69905 or citrovoeum-factor or citrovorum-factor or d93089 or divk1c-000222 or dtxsid0048216 or einecs-200-361-6 or en300-27068710 or folinate folinic-acid-sf or folinic acid or formyltetrahydrofolate or fusilev$2 or gtpl4816 or gtpl6690 or hsdb-6544 or hy-17556 or idi1-000222 or kbio1-000222 or kbio2-001339 or kbio2-003907 or kbio2-006475 or kbio3-001438 or kbiogr-000461 or kbioss-001339 or lencovorin$2 or leucal$2 or leukovorin$2 or leukovoran$2 or leucovorin$2 or levoleucovorin$2 or levo-leucovorin$2 or mfcd00867488 or ninds-000222 or nsc3590 or prestwick0-000738 or prestwick1-000738 or prestwick2-000738 or prestwick3-000738 or q45435667 or q573i9dvlp or s5790 or schembl10068238 or schembl8349 or sd-204098 or s-leucovorin$2 or sleucovorin$2 or spectrum2-000116 or spectrum3-000479 or spectrum4-000031 or spectrum5-000910 or spectrum-000859 or spbio-000132 or spbio-002635 or sbi-0051427-p003 or welcovorin$2 or "formyltetrahydropteroylglutamic acid" or Q573I9DVLP or 58-05-9).ti,ab,kw. [LEUCOVORIN TERMS]	30984
#237	(Carboplatin$2 or blastocarb$2 or boplatex$2 or carboplat$ or carbosin$2 or carbotec$2 or carplan$2 or CBDCA or (platinum adj3 (cis or diamin? or cyclobutanedicarboxylat? or dicarboxylatediammine)) or Dicarboxylatoplatinum or diamminecyclobutanedicarboxylatoplatinum or cycloplatin$ or erbakar$2 or ercar$2 or ifacap$2 or jm8 or jm-8 or kemocarb$2 or nsc-241240 or nsc241240 or nsc-201345 or nsc201345 or oncocarbin$2 or paraplatin$ or Platinwas$2 or Ribocarbo$2 or Neocarbo$2 or Nealorin$2 or HSDB-6957 or BG3F62OND5 or 41575-94-4).ti,ab,kw. [CARBOPLATIN TERMS]	69663
#238	(paclitaxel$ or abraxane$2 or abraxus$2 or act02709 or act-02709 or acon1-002231 or anx-513 or anzatax$2 or apealea$2 or asotax$2 or bidd-pxr0046 or biotax$2 or bms-181339 or bms181339-01 or bms181339 or bms-181339-01 or bmy-45622 or bmy45622 or bspbio-000290 or capxol$2 or ccris-8143 or chembl428647 or chebi-45863 or coroflex-please$2 or coroxane$2 or cmap-000068 or cynviloq$2 or cypher-	156315

No.	Query	Results
	select$2 or dsstox-cid-3413 or dsstox-gsid-23413 or dsstox-rid-77016 or dhp107 or dhp-107 or dhp-208 or dhp208 or dts-301 or dts301 or ebetaxel$2 or empac$2 or endotag-1 or endotag1 or formoxol$2 or genaxol$2 or genetaxyl$2 or genexol$2 or gtpl2770 or hms2090d07 or hms2095o12 or hms2231a16 or hms3712o12 or hsdb-6839 or hunxol$2 or hy-b0015 or ifaxol$2 or ig-001 or ig001 or infinnium$2 or intaxel$2 or kbiogr-002509 or kbio2-002509 or kbio2-005077 or kbio2-007645 or kbio3-002987 or lep-etu$2 or lipopac$2 or liporaxel$2 or mbt-0206 or mbt0206 or medixel or mfcd00869953 or mitotax$2 or nanopac$2 or nanotax$2 or nanotaxel$2 or ncgc00164367-01 or nk-105 or nk105 or nsc-125973 or nsc-673089 or nsc125973 or nsc673089 or nscc-125973 or nova-12005 or oas-pac-100 or oaspac100 or oncogel$2 or onxal$2 or onxol$2 or p-ssmm-vip$2 or paclical$2 or pacitaxel$2 or paclical$2 or padexol$2 or pacligel$2 or paclitaxel$2 or pacliex$2 or paxceed$2 or paxene$2 or paxoral$2 or paxus$2 or pazenir$2 or plaxicel$2 or praxel$2 or qw-8184 or schembl3976 or sb-05 or sb05 or sdp-013 or sindaxel$2 or smr000857385 or sr-01000075350 or taycovit$2 or taxalbin$2 or taxane$ or taxocris$2 or taxol$2 or taxus$2 or tocosol$2 or xorane$2 or yewtaxan$2 or zinc96006020 or zisu$2 or P88XT4IS4D or 33069-62-4).ti,ab,kw. [PACLITAXEL TERMS]	
#239	(114915-20-7 or 114977-28-5 or 15h5577cqd or 699121phca or ab01273941-01 or ab01273941-02 or ac-383 or akos015960718 or akos024457953 or amy4356 or anx-514 or axtere$2 or bd164373 or bdbm36351 or bind014 or bind-014 or brd-k30577245-001-04-3 or brd-k30577245-341-01-9 or bs102 or bs-102 or chebi-4672 or chembl92 or cid148124 or ckd-810 or crlx301 or crlx-301 or cs-1144 or d07866 or d4102 or daxotel$2 or db01248 or dexotel$2 or docecad$2 or docefrez$2 or docetaxel$2 or docetaxelum$2 or docetaxol$2 or docetaxolum$2 or dtxcid8020464 or dtxsid0040464 or emdoc$2 or en300-123047 or ex-a1206 or gtpl6809 or hms2089k08 or hsdb-6965 or hy-b0011 or ks-1452 or l01cd02 or lit976 or lit-976 or mfcd00871399 or ncgc00181306-01 or ncgc00181306-02 or ncgc00181306-04 or ncgc00242509-01 or nsc628503 or nsc-628503 or nsc-759850 or oncodocel$2 or q-100074 or q420436 or rp56976 or rp-56976 or schembl4419 or sdp-014 or sid-530 or sr-01000003023 or sr-01000003023-5 or syp-0704a or taxanit$2 or taxespira$2 or taxoel$2 or taxoltere-metro or taxotel$2 or taxoter$2 or taxotere$2 or texot$2 or tox21-112781 or tox21-113088 or txl$2 or w-60384 or xrp6976 or xrp-6976 or xrp-6976l or z1546621742).ti,ab,kw. [DOCETAXEL TERMS]	64519
#240	(Cisplatin$ or platinum$ or Cismaplat$2 or (cis adj3 ($platinum or platinous)) or cis-platinum or cis-Platin or dichloroplatinum or diaminodichloroplatinum or diamminedichloroplatinum or dichlorodiammineplatinum or AI3-62048 or abiplatin or biocisplatinum or biocysplatinum or blastolem$2 or briplatin$2 or cddp-ti or cis-ddp or cisPt$ or CACP or CCRIS-221 or CDDP or DDPt or CP-Ethypharm or CPDC or CPDD or CPPD or (DDP and antitumor) or cisplatyl$2 or citoplatino$2 or cytoplatin$2 or cytosplat$2 or docistin$2 or elvecis$2 or kemoplat$2 or Fauldiscipla$2 or IA-call or LiPlaCis$2 or lederplatin$2 or lipoplatin$2 or "liposomal cisplatin" or mpi-5010 or mpi5010 or neoplatin$2 or niyaplat$2 or nk-801 or noveldexis$2 or nsc-119875 or nci-c55776 or	339375

No.	Query	Results
	platamine$2 or platamine-rtu or platiblastin$2 or platidiam$2 or platimine$2 or platinex$2 or platinil$2 or platino$2 or platinol$2 or platinolaq$2 or platinol-aq$2 or platinoxan$2 or platiran$2 or platistil$2 or platistin$2 or platosin$2 or "pronto platamine" or "Peyrone's chloride" or randa$2 or romcis$2 or sicatem$2 or spi-077 or tr-170 or tecnoplatin$2 or Q20Q21Q62J or 15663-27-1 or 26035-31-4 or 96081-74-2).ti,ab,kw. [CISPLATIN TERMS]	
#241	(oxaliplatin$2 or (Oxalat$ adj3 platin$) or axiplatin$2 or bendaplatin$2 or crisapla$2 or croloxat$2 or dacotin$2 or dacplat$2 or ebeoxal$2 or elatofen$2 or eloxatin$ or elplat$2 or euroxaliplatin$2 or geneplatin$2 or gessedil$2 or heloxatin$2 or lipoxal$2 or mbp-426 or mbp426 or medoxa$2 or oksaliplatin$ or oplat$2 or oxalatoplatin$ or oxalatplatin$2 or oxali$2 or oxalip$2 or oxaliplan$2 or oxaliprol$2 or oxaliquid$2 or oxalisan$2 or oxalisin$2 or oxalizor$2 or oxaltic$2 or oxaltin$2 or oxamed$2 or oxaplamyl$2 or oxaviatin$2 or platox$2 or plaxitin$2 or rectoxal$2 or riboxatin$2 or rp-54780 or rp54780 or sinoxal$2 or sr-96669 or sr96669 or transplastin$2 or velminox$2 or xaliplat$2 or xoplan$2 or L-OHP-Cpd or 1-OHP or ACT-078 or ACT078 or CCRIS-9143 or NSC-266046 or 04ZR38536J or 61825-94-3).ti,ab,kw. [OXALIPLATIN TERMS]	59129
#242	(capecitabin$ or apecitab$2 or atubri$2 or bc164277 or bcpp000300 or bxeliri$2 or bs-1000 or cacit$2 or capcel$2 or capebina$2 or capecite$2 or capegard$2 or capezam$2 or capicet$2 or capiri$2 or capiibine$2 or captabin$2 or capnat$2 or capoda$2 or capostat$2 or capsy$2 or capxcel$2 or caxeta$2 or ccg-264841 or ccx-340 or cpecitabine$2 or cs-0768 or d01223 or db01101 or dsstox-cid-26451 or dsstox-gsid-46451 or dsstox-rid-81625 or dtxsid3046451 or ecansya$2 or ex-a835 or gtpl6799 or hsdb-7656 or hy-b0016 or j-700154 or k007 or m0297 or mfcd00930626 or mls003915642 or mls004774137 or ncgc00164569-01 or ncgc00164569-02 or ncgc00164569-05 or nsc-759853 or paxon$2 or q-200788 or q420207 or r-340 or rg-340 or r340 or rg340 or ro-09-1978 or ro-091978 or ro-09-1978 or ro-09-1978-000 or ro091978 or s1156 or s-1156 or sr-01000931255 or tox21-112198 or x-abine$2 or x-tabin$2 or xabine$2 or xecap$2 or xeliri$2 or xelocel$2 or xeloda$2 or xelox$2 or z1501480421 or zinc3806413 or 6804dj8z9u or 154361-50-9 or 958887-39-3).ti,ab,kw. [CAPECITABINE TERMS]	32779
#243	(platinum adj1 (fluoropyrimidine or fluoro-pyrimidine) adj3 (doublet? or combin$ or chemotherap$ or chemo-therap$ or ((first or front) adj1 line?) or 1-LOT or 1L or therap$ or regimen? or expos$)).ti,ab,kw. [PLATINUM-FLUOROPYRIMIDINE DOUBLET TERMS]	261
#244	(5-fluoropyrimidin$ or 5-fluoro-pyrimidine or pyrimidine-5-fluoro or (fluorinated adj1 pyrimidine) or a9048 or ac-453 or akos006346044 or am86123 or "bb 0260992" or c4h3fn2 or db-007051 or dtxsid80217851 or en300-6966105 or f14737 or ft-0601423 or mfcd06658278 or q42859845 or w-203496 or zinc1845840 or 675f218 or L36X4TD47C or 675-21-8).ti,ab,kw,kf,ot,hw,rn,nm. [FLUOROPYRIMIDINE TERMS]	5397

No.	Query	Results
#245	(fluorouracil$ or fluroblastin$ or 1upf or 5-Faracil or 5-Fluoracil or 5-Fluoracyl or 5-fluoro-uracil or 5-fluoro-uracil or 5-Fluoroblastin or 5-fluorouacil or 5-Ftouracyl or 5-FU or 5FU or 5F-uracil or Adrucil$2 or AI3-25297 or Arumel$2 or BSPBio-002048 or Cancersil$2 or Carac$2 or Carzonal$2 or CHEBI-46345 or CHEMBL185 or Cinco-FU or CCRIS-2582 or DSSTox-CID-634 or DSSTox-GSID-20634 or DSSTox-RID-75705 or Efudex$2 or Efudix$2 or Efurix$2 or EINECS-200-085-6 or Effluderm$2 or Fluoroblastin$2 or Fluoro-Uracil$2 or Fluoro-uracile$2 or Fluoro-uracilo$2 or Fluoroplex$2 or Fluorouracile$2 or Fluorouracilo$2 or Fluorouracilum$2 or Fluorouracilum$2 or Fluracil$2 or Fluracilum$2 or Fluri$2 or Fluril$2 or Fluuro-Uracil$2 or Fluorouracilo$2 or Fluroblastin$2 or Fluro-Uracil$2 or Ftoruracil$2 or GTPL4789 or HSDB 3228 or IDI1-000054 or Kecimeton$2 or KBio1-000054 or KBio2-001321 or KBio2-003889 or KBio2-006457 or KBioGR-001253 or KBioSS-001321 or Lopac-F-6627 or Lopac0-000536 or MFCD00006018 or MLS000069498 or MLS002415705 or NCGC00015442-01 or NCGC00015442-02 or NCGC00015442-03 or NCGC00015442-04 or NCGC00015442-05 or NCGC00015442-06 or NCGC00015442-07 or NCGC00015442-08 or NCGC00015442-09 or NCGC00015442-10 or NCGC00015442-11 or NCGC00015442-12 or NCGC00015442-15 or NCGC00015442-16 or NSC-19893 or NSC757036 or NSC816997 or Phtoruracil$2 or Pharmakon1600-01500305 or Phthoruracil$2 or Queroplex$2 or Ro-2-9757 or S1209 or 191047-64-0 or 191047-65-1 or 191115-88-5 or U3P01618RT or 51-21-8).ti,ab,kw. [FLUOROURACIL TERMS]	136606
#246	(irinotecan$ or ab00698464-07 or ab00698464-09 or ab00698464-10 or ab00698464-11 or ab00698464-12 or ab00698464-13 or ab00698464-14 or ac-7469 or akos015894969 or amy4227 or as-14323 or bdbm50128267 or bcp02860 or bcp9000793 or biotecan$2 or brd-k08547377-003-02-4 or campto$2 or camptosar$2 or chebi-80630 or chembl481 or cs-1138 or cpt-11 or cpt11 or d08086 or db00762 or dq2805 or en300-708800 or gtpl6823 or hsdb-7607 or ihl-305 or ihl305 or irinophore-c$2 or irinotel$2 or mfcd00866307 or ncgc00178697-02 or ncgc00178697-05 or nsc-728073 or nsc728073 or nk012-compound or q412197 or s1198 or schembl4034 or sn38 or sn-38 or sn-38-11 or sn3811 or topotecin$2 or u-101440e or u101440e or zinc1612996 or "7673326042" or 100286-90-6 or 97682-44-5).ti,ab,kw. [IRINOTECAN TERMS]	39477
#247	(teysuno$2 or (tegafur adj4 gimeracil adj4 oteracil) or ((S-1 or S1) adj3 combination) or TS-1-cpd or S-1-cpd or TS-1 or TS1 or BMS247616 or BMS-247616 or S1-tegafur-oxonate or S1-fluoropyrimidine-oxoonate).ti,ab,kw. [S1 COMBINATION TERMS]	8082
#248	(1189456-27-6 or 1548r74nsz or 17902-23-7 or 82294-77-7 or a812417 or ab00572620-15 or ac-2112 or akos000121279 or as-13528 or atillon$2 or bcp22714 or bp-58663 or brn-0525766 or c8h9fn2o3 or ccg-100959 or ccg-50110 or ccris-2762 or chebi-32188 or chembl20883 or citofur$2 or coparogin$2 or cs-1128 or d01244 or db09256 or dtxsid001009966 or einecs-241-846-2 or en300-21668 or exonal$2 or f-5-fu or fental$2 or florafur$2 or fluorafur$2 or fluorofur$2 or franrose$2 or franroze$2 or ft-	12779

No.	Query	Results
	0653732 or ft-0654170 or ft-0674829 or ft-0693965 or ft207 or ft-207 or ftorafur$2 or fulaid$2 or fulfeel$2 or furafluor$2 or furflucil$2 or furofutran$2 or futraful$2 or gtpl10513 or hms1665i05 or hms2051b15 or hms2090k04 or hms2232e05 or hms3371h21 or hms3393b15 or hms3654p13 or hms3715d14 or hy-17400 or lamar$2 or lifril$2 or mfcd00012351 or mjf12264 or mjf-12264 or mls000069497 or mls000759414 or mls001076521 or mls001424119 or nc00209 or ncgc00159418-02 or ncgc00159418-04 or ncgc00159418-05 or neberk$2 or nitobanil$2 or nsc148958 or nsc-148958 or opera-id-1726 or phthorafur$2 or q-201784 or q413370 or racemic-ftorafur or riol$2 or schembl4552 or sfsp$2 or sf-sp or sinoflurol$2 or smr000059106 or sr-01000639511 or sr-01000639511-1 or sr-01000639511-4 or sunfral$2 or sunfural$2 or tefsiel-c or tegaful$2 or tegafur$2 or tegafurum$2 or ts-1 or uftoral$2 or upcmld-dp063 or utefos$2 or z104508106).ti,ab,kw. [TEGAFUR TERMS]	
#249	(1121b or 947687-13-0 or 947687-13-0 or a168 or a-168 or cyramza$2 or d99yvk4l0x or hlx12 or hlx-12 or hsdb-8314 or imc1121b or imc1121-b or imc-1121b or imc-1121-b or l01xc21 or ly3009806 or ly-3009806 or nsc-749128 or pbp2001 or pbp-2001 or ramucirumab$2 or ramucirumabum$2 or ro7234952 or ro-7234952).ti,ab,kw. [RAMUCIRUMAB TERMS]	6290
#250	(339177-26-3 or 6a901e312a or abenix$2 or abx-egf or amg954 or amg-954 or e7-6-3 or l01xc08 or moab-abx-egf or moab-e7-6-3 or monoclonal-antibody-abx-egf or monoclonal-antibody-e7-6-3 or nsc-742319 or panitumab$2 or panitumumab$2 or panitumumabum$2 or panitunumab$2 or vectibex$2 or vectibix$2).ti,ab,kw. [PANITUMUMAB TERMS]	7005
#251	(6ns400bxkh or 780758-10-3 or 828933-51-3 or biomab-egfr or diacim$2 or h-r3 or nimotuzumab$2 or osag-101 or radiotheracim$2 or theracim$2 or theraloc$2).ti,ab,kw. [NIMOTUZUMAB TERMS]	1539
#252	(339186-68-4 or emd7200 or emd-7200 or emd72000 or emd-72000 or kgaa$2 or matuzumab$2 or merck-kgaa or mg4m3qb242).ti,ab,kw. [MATUZUMAB TERMS]	50772
#253	(12-igg1 or 1438851-35-4 or 216974-75-3 or 2s9zzm9q9v or abevmy$2 or abp215 or abp-215 or ainex$2 or altuzan$2 or alymsys$2 or ankeda$2 or anti-vegf or askb1202 or ask-b1202 or avastin$2 or avegra$2 or aybintio$2 or ba1101 or ba-1101 or bambevi$2 or bat1706 or bat-1706 or bcd021 or bcd-021 or bevacizumab$2 or bevacizumabum$2 or bevagen$2 or bevatas$2 or bevax$2 or bevz92 or bevz-92 or bi695502 or bi-695502 or bow030 or bow-030 or boyounuo$2 or bp01 or bp-01 or bp102 or bp-102 or bryxta$2 or bs503a or bs-503a or bxt2316 or bxt-2316 or byvasda$2 or cbt124 or cbt-124 or chs305 or chs-305 or chs5217 or chs-5217 or cizumab$2 or ctp16 or ct-p16 or equidacent$2 or fkb238 or fkb-238 or gb222 or gb-222 or gbs004 or gbs-004 or hanbeitai$2 or hd204 or hd-204 or hlx04 or hlx-04 or hot1010 or hot-1010 or hsdb-8080 or ibi305 or ibi-305 or idb0072 or idb-0072 or intp24 or intp-24 or ipique$2 or jhl1149 or jhl-1149 or js501 or js-501 or jy028 or jy-028 or	90973

No.	Query	Results
	krabeva$2 or kyomarc$2 or l01xc07 or lextemy$2 or "lumiere-(drug)" or ly01008 or ly-01008 or mabionvegf$2 or mb02 or mb-02 or mil60 or mil-60 or mvasi$2 or myl14020 or myl-14020 or myl1402o or myl-1402o or nsc704865 or nsc-704865 or onbevzi$2 or ons1045 or ons-1045 or ons5010 or ons-5010 or oyavas$2 or pf06439535 or pf-06439535 or pf6439535 or pf-6439535 or pmc901 or pmc-901 or pobevcy$2 or pro169 or pro-169 or pusintin$2 or ql1101 or ql-1101 or r435 or r-435 or rg435 or rg-435 or rhumab$2 or ro4876646 or ro-4876646 or rph001 or rph-001 or rtpr023 or r-tpr-023 or sb8 or sb-8 or sct501 or sct-501 or sct510 or sct-510 or sibp04 or sibp-04 or stc103 or stc-103 or stivant$2 or tab008 or tab-008 or tab014 or tab-014 or tot102 or tot-102 or trs003 or trs-003 or tx16 or tx-16 or vegzelma$2 or versavo$2 or zirabev$2 or zrc113 or zrc-113 or zybev$2).ti,ab,kw. [BEVACIZUMAB TERMS]	
#254	(2022215-59-2 or anb011 or anb-011 or dostarlimab$2 or gsk4057190 or gsk-4057190 or jemperli$2 or p0gvq9a4s5 or tsr042 or tsr-042 or wbp285 or wbp-285).ti,ab,kw. [DOSTARLIMAB TERMS]	595
#255	(chembl5095383 or retlirafusp-alfa or shr1701 or shr-1701).ti,ab,kw,kf,ot,hw,rn,nm. [SHR-1701 TERMS]	66
#256	(2368219-35-4 or 45x7ou8c4j or ab154 or ab-154 or domvanalimab$2 or who-11559).ti,ab,kw. [DOMVANALIMAB TERMS]	53
#257	(2259860-24-5 or ab122 or ab-122 or gls010 or gls-010 or gs0122 or gs-0122 or wbp3055 or wbp-3055 or who-11413 or zbl7o904il or zimberelimab$2).ti,ab,kw. [ZIMBERELIMAB TERMS]	152
#258	(0vua21238f or 1092929-10-6 or 1210608-87-9 or 1xkk or 231277-92-2 or 388082-78-8 or 437755-78-7 or 913989-15-8 or a25184 or ab01273965-01 or ab01273965-02 or ab01273965-03 or ab01273965-04 or ab01273965-05 or ac-1314 or akos005145766 or am20090641 or as-14065 or bc164610 or bcp01874 or bcp9000837 or bcp9000838 or bcpp000188 or bcpp000189 or bdbm5445 or brd-k19687926-001-01-7 or brd-k19687926-379-02-5 or c29h26clfn4o4s or ccg-270133 or chebi-49603 or chembl554 or cid-208908 or d08108 or db01259 or dtxcid5026675 or dtxsid7046675 or en300-117254 or ex-a402 or fmm$2 or ft-0659650 or gsk572016 or gsk-572016 or gtpl5692 or gw2016 or gw-2016 or gw282974x or gw-282974x or gw572016 or gw-572016 or gw572016f or gw-572016f or gw-572016x or hms2089h10 or hms3244n06 or hms3244n10 or hms3244n14 or hms3744k11 or hsdb-8209 or hy-50898 or kinome-3684 or kinome-3685 or l0360 or lapatinib$2 or mfcd09264194 or ncgc00167507-01 or ncgc00167507-02 or ncgc00167507-03 or ncgc00167507-04 or ncgc00167507-09 or ns00003012 or nsc745750 or nsc-745750 or nsc800780 or nsc-800780 or q-101353 or q420323 or sb16918 or schembl8100 or sr-05000001472-1 or sw199101-5 or tox21-112505 or tykerb$2 or tyverb$2).ti,ab,kw. [LAPATINIB TERMS]	12203
#259	(857890-39-2 or a825653 or ac-25047 or aiv007 or aiv-007 or akos025401742 or amy9240 or as-16203 or bcp01799 or bcp9000633 or bcpp000247 or bdbm50331094 or bl164616 or c21h19cln4o4 or ccg-	6465082

No.	Query	Results
	264842 or chebi-85994 or chembl1289601 or cs-0109 or d09919 or db09078 or dtxcid50117096 or dtxsid50194605 or e7080 or e-7080 or ee083865g2 or en300-7418350 or er203492-00 or er-203492-00 or ex-a249 or ft-0700727 or gtpl7426 or hms3244a07 or hms3244a08 or hms3244b07 or hms3654a14 or hy-10981 or j-513372 or kisplyx$2 or l01xe29 or lenvatinib$2 or lenvatinibum$2 or lenvima$2 or lev$2 or mfcd16038644 or mk7902 or mk-7902 or mls006011239 or ncgc00263198-01 or ncgc00263198-04 or ncgc00263198-07 or ns00069283 or nsc755980 or nsc-755980 or nsc800781 or nsc-800781 or q6523413 or ro7071618 or ro-7071618 or s1164 or sb16580 or schembl864638 or smr004702999 or sw219259-1 or z2235801899).ti,ab,kw. [LENVATINIB TERMS]	
#260	(0rf or 1001264-89-6 or 524y3ib4hq or ac-28420 or akos025396463 or as-17027 or bcp0726000195 or bcp9000712 or bdbm50398379 or ccg-269312 or chebi-95089 or chembl2177390 or cs-0975 or d10641 or db11743 or dtxsid101025595 or ex-a2077 or gdc0068 or gdc-0068 or gdc0068-di-hcl or gdc-0068-di-hcl or gtpl7887 or hy-15186 or ipatasertib$2 or mfcd22124514 or ncgc00346714-01 or ns00072927 or nsc767898 or nsc-767898 or nsc781451 or nsc-781451 or nsc800986 or nsc-800986 or nsc832484 or nsc-832484 or q27078088 or rg7440 or rg-7440 or rg-7440-di-hcl or s2808 or schembl191659).ti,ab,kw. [IPATASERTIB TERMS]	765
#261	or/208-248 [INTERVENTION & COMPARATORS & CHEMO TERMS]	2443493
#262	207 and 261	33694
#263	262 use coch [CDSR results]	7
#264	66 or 139 or 206 or 263 [All results - no date limit]	8726
#265	limit 66 to dt="20240201-20241231" [MEDLINE update: Feb 2024 - Current]	80
#266	limit 139 to dc="20240201-20241231" [Embase update: Feb 2024 - Current]	340
#267	206 and 2024$.up. [CENTRAL update: Jan 2024 - Current]	708
#268	263 and (2024$ not 202401$).up. [CDSR update: Feb 2024 - Current]	0
#269	or/265-268	1128
#270	limit 269 to yr="2024 -Current" [Only select publication records for 2024 - Current]	
#271	remove duplicates from 270	429

H.1.5 Systematic selection of studies

H.1.5.1 Eligibility criteria

Specific inclusion and exclusion criteria were applied to the SLR to ensure the relevance and quality of identified evidence. Only RCTs were included, utilizing a balanced RCT filter specifically tailored for Ovid MEDLINE. The search was restricted to studies conducted in humans and involving adult populations (18 years and older). To ensure inclusion of the most recent evidence, only abstracts published within the last two years were retained from Embase and CENTRAL. Additionally, trial protocols and opinion-based publications, such as commentaries or editorials, were removed.

Study eligibility was assessed according to pre-specified PICOS criteria, identical for the original and updated SLR, as specified in Table 70. Articles that met all the inclusion criteria and did not include any exclusion criteria were included.

Table 70. Inclusion and exclusion criteria used for assessment of studies

Clinical effectiveness	Inclusion criteria	Exclusion criteria	Changes, local adaption
Population	1L unresectable, locally advanced, or metastatic HER-2-negative G/GEJ adenocarcinoma Adult patients	2L or later GC/GEJ adenocarcinoma HER-2-positive patients Other Cancers Pediatric patients (< 18 years)	All criteria applied
Intervention	Immuno-oncology treatments (PD-L1 inhibitors, immune checkpoint inhibitors, etc.) Other targeted therapies (TKIs, EGFR inhibitors, VEGFR-2 inhibitors, CLDN12.2 inhibitors, FGFR2b inhibitors, etc.) Chemotherapy	Those not listed	All criteria applied
Comparators	Any interventions above (alone or in combination with chemotherapy/targeted therapy/any other immunotherapy) Placebo	Those not listed	All criteria applied
Outcomes	OS, PFS, ORR, DoR, HRQoL, AE, ToT	Any study not including at least	All criteria applied

		one eligible outcome	
Study design/publication type	Phase II and phase III RCTs	Phase I and IV RCTs Non-randomized studies	All criteria applied
Date	Full text articles from database inception to present Conference abstracts (2022 to 2024)	Conference abstracts prior to 2022 Those not listed	
Language restrictions	English language articles	Non-English articles	All criteria applied

H.1.5.2 Systematic review process

Records were identified and imported into EndNote X9, and duplicates were removed prior to exporting to the systematic review software for study selection. Study selection was conducted by two reviewers who independently reviewed the study records, citation titles, and abstracts to assess eligibility based on the pre-defined PICOS criteria. Duplicates were quarantined from the final screening list prior to study selection. Reviewers documented their reasons for exclusion, and any discrepancies between the two reviewers were resolved by consensus or were referred to and resolved by a third independent reviewer not involved in the study selection process.

Records considered to describe potentially eligible studies were independently reviewed by two reviewers in full-text form for formal inclusion in the review. Records that did not meet the inclusion criteria were excluded, and the reason for exclusion was recorded at the full-text screening. Any discrepancies between the two reviewers were resolved by consensus or were referred to and resolved by a third independent reviewer not involved in the study selection process. Included full-text articles were further validated for inclusion during the data extraction phase. This involved reviewing the study design details, baseline population characteristics, and efficacy and safety endpoints.

H.1.5.3 Data extraction

Data from the publications identified in this review were extracted into a standardized form in Microsoft® Excel (Microsoft Corporation, Seattle, US). Extracted data was based on the pre-defined PICOS criteria (Table 70) and was performed in the following steps:

1. Written instructions on outcomes to be extracted from articles, pilot testing of the extraction form, resolution of potential ambiguities, and differences in interpretation of findings were performed.
2. Information from the full-text articles of the studies accepted for inclusion was extracted independently by one investigator into the data extraction forms. Secondary references and conference material related to a given study were reviewed to see if there was any additional data to extract.
3. Data extraction was independently validated by a second investigator. A third investigator was consulted to resolve any disagreements if necessary.
4. For added quality assurance, there was a final data check once all relevant information was extracted.

If relevant survival endpoint data (i.e., OS or PFS were not available as hazard ratios from the text or tables of the article, then manual calculations of this information from the publication's Kaplan–Meier graphs were performed by digitalizing the relevant curves using DigitizeIt [78].

The specific data elements that were captured from included studies are summarized below:

- Publication characteristics (citation data, trial identifying information, year, study sponsor, objective)
- Study setting (countries, centers/hospitals)
- Study methods (design [parallel-group, crossover, etc.], duration, follow-up length, patient enrollment criteria, interventions administered, dosing regimens, randomization details, blinding details, concomitant therapies allowed, outcomes assessed, approach to statistical analysis [intention to treat, per protocol, etc.])
- Study participant characteristics (age, sex, ethnicity, geographic region, weight, body mass index [BMI], primary cancer diagnosis, histology, mutation status, microsatellite instability (MSI) status, Eastern Cooperative Oncology Group [ECOG] performance status, disease status at trial entry [metastatic, recurrent, unresectable advanced], HER-2 status, metastatic site, number of metastatic sites, PD-1/PD-L1 expression/status, Lauren classification status, smoking status, comorbidities, and prior therapy)
- Efficacy outcomes (i.e., OS, PFS, objective response rate (ORR); including CR and partial response [PR]), duration of response (DoR), time on treatment (ToT), and HRQoL)
- Safety outcomes including aggregate safety outcomes (i.e., any AE, SAE, withdrawals due to AEs), and individual AEs of interest (i.e., anemia, nausea, neutropenia, and neutrophil count decreases). For each safety outcome, data fotreatment-related and TEAEs was captured, as reported.

For any single outcome, data were extracted for the longest available follow-up time point using the latest available data cut for that outcome. Extraction of the following key subgroups was performed:

- PD-1/PD-L1 expression
  - PD-1/PD-L1 positive subgroups were defined as: TAP ≥5%, CPS ≥1, 5 or 10, tumour proportion score (TPS) ≥1%, 5% or 10%.
  - PD-1/PD-L1 negative subgroups were defined as: TAP <5%, CPS < 1, 5 or 10, TPS < 1%, 5% or 10%).
- Race (e.g., Asian patients)
- Geography/region (e.g., Asia)
- Histology based on Lauren classification (diffused vs intestinal)
- MSI status
- GC vs GEJ site

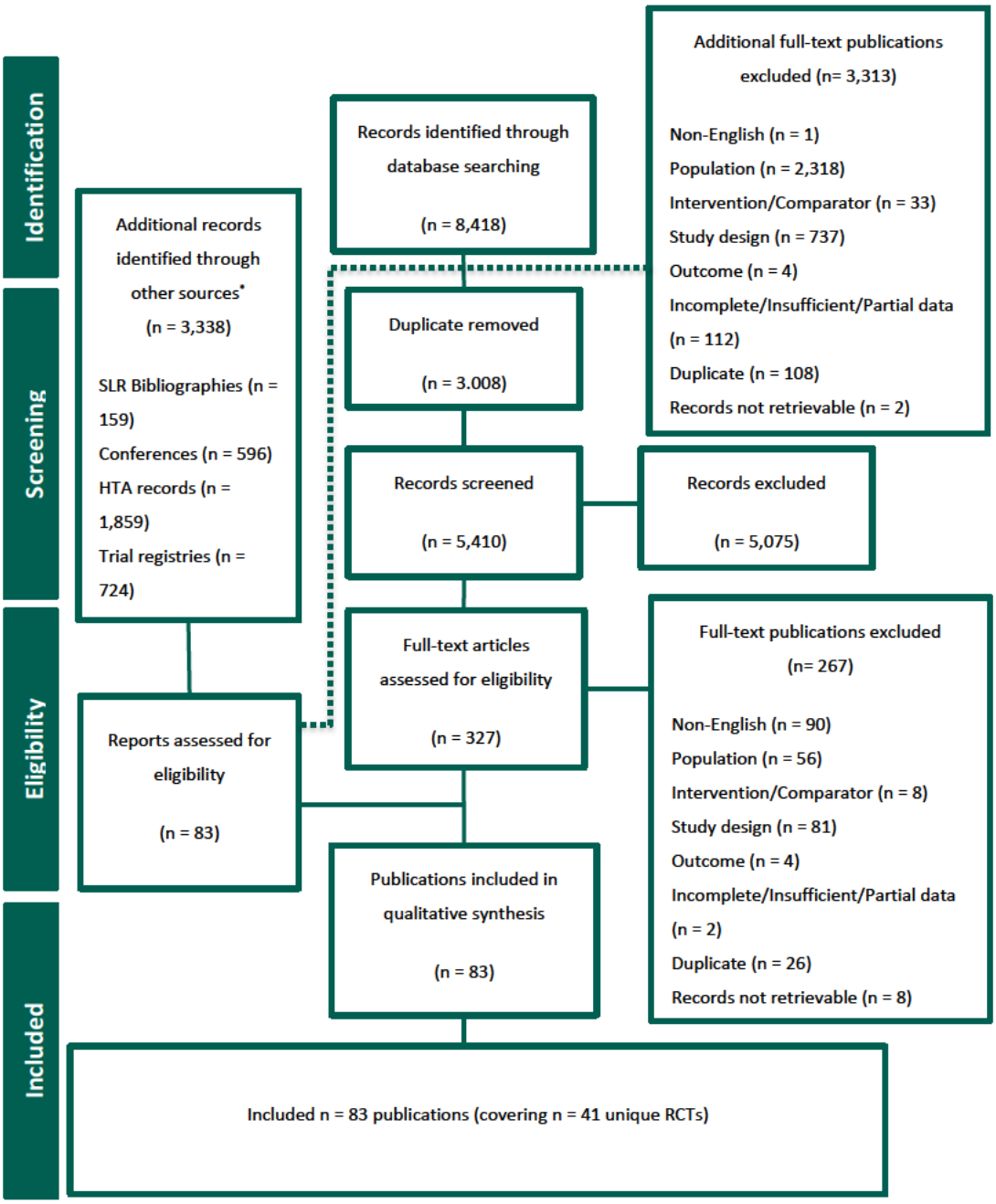
H.1.5.4 Study selection process

H.1.5.4.1 Original SLR

The original SLR electronic database search conducted on February 16, 2024, identified 8,418 records. After removing 3,008 duplicates, the resulting 5,410 records were screened and 5,075 were excluded. The remaining 335 full-text records were sought for retrieval; of these, 8 records were not retrievable. Of the 327 remaining reports assessed for eligibility, 267 were removed for various reasons as shown in the PRISMA flow diagram (Figure 21).

A search of grey literature sources identified an additional 3,338 records. Searches of key clinical conferences identified 596 records and searches of clinical trial registries identified 724 records. An additional 1,859 records were identified through searching of key HTA agencies. Finally, a search of bibliographies of key relevant SLRs identified 159 records. Of the 3,338 records identified, two were not retrievable. The remaining 3,336 reports were then assessed for further eligibility. After assessment, 3,313 reports were then excluded for reasons shown in the PRISMA flow diagram (Figure 21).

Figure 21. PRISMA flow diagram of clinical evidence identified from the original SLR (February 16, 2024)

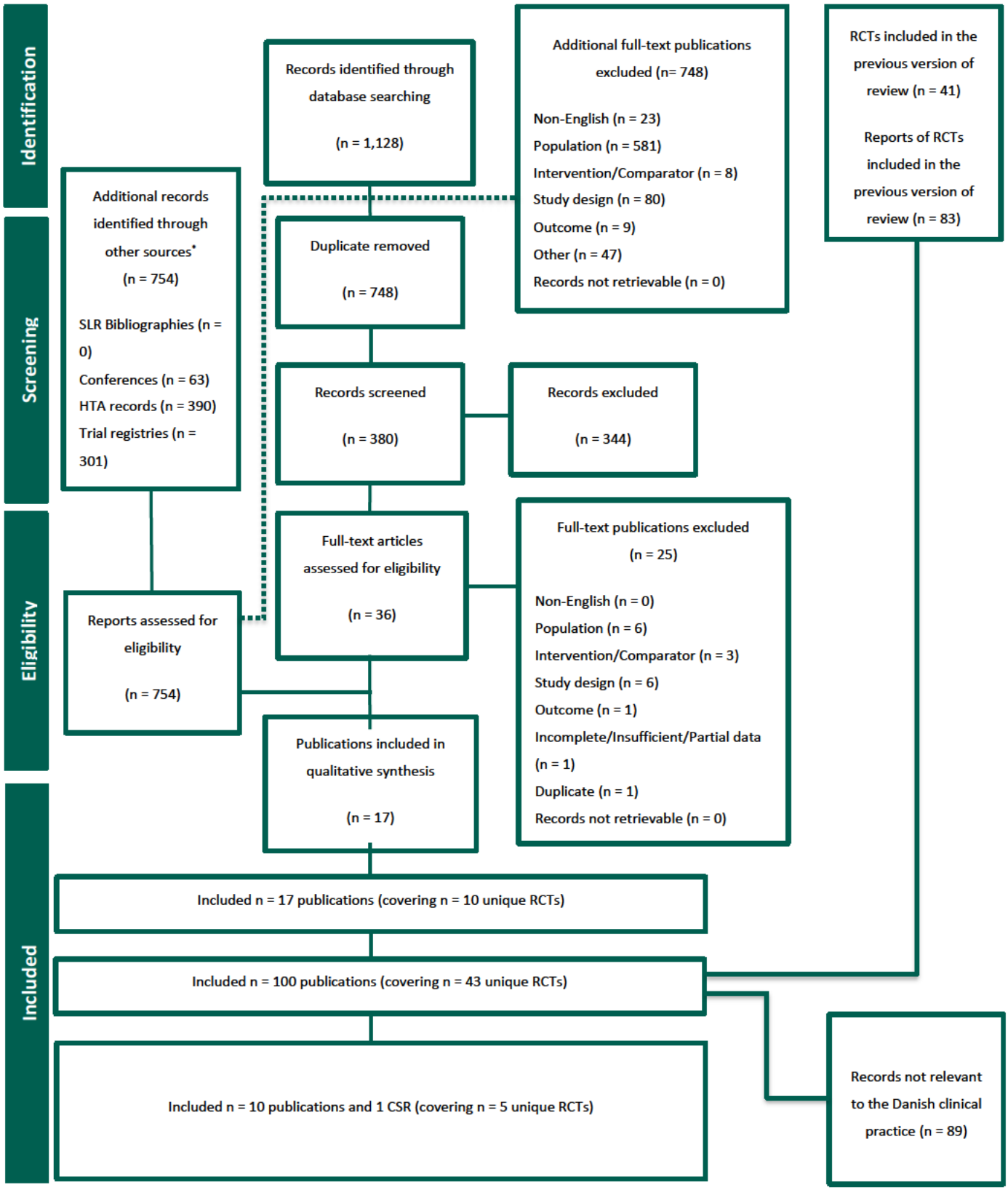


H.1.5.4.2 Updated SLR

The updated SLR conducted on September 4, 2024, identified 1,128 records from databases and registers (i.e., MEDLINE, Embase, CENTRAL, and Cochrane), and 748 duplicate records were removed prior to screening. After de-duplication, 380 records were screened. Of these, 344 were excluded at the title and abstract stage. Thirty-six full-text records were retrieved and assessed for eligibility, and 25 were removed for various reasons as shown in the PRISMA flow diagram (Figure 22).

Furthermore, the updated search of grey literature sources identified a total of 754 records. Searches of key clinical conferences identified 63 records and searches of clinical trial registries identified 301 records. An additional 390 records were identified through searching of key HTA agencies. No eligible SLRs were identified for bibliography screening. After assessment of the 754 identified records, 748 reports were excluded for the reasons shown in the PRISMA flow diagram (Figure 22).

Figure 22. PRISMA flow diagram of clinical evidence identified from the updated SLR (September 4, 2024) and overall SLR



H.1.5.4.3 Overall SLR

In total, the original and updated searches identified 100 records reporting on 43 unique RCTs. The updated search identified 17 new reports pertaining to 10 unique RCTs. Of these, two reports pertained to two newly identified RCTs (RELATIVITY-060 and CTRI/2020/03/023944), while the remaining fifteen records represented additional or updated analyses pertaining to RCTs identified in the original review. The study selection process is reported in a PRISMA flow diagram and presented in Figure 22.

Relevance to Danish clinical practice:
To support this submission, it was essential to identify evidence specifically relevant to Danish clinical practice and the treatment regimen for unresectable, locally advanced or metastatic G/GEJ adenocarcinoma. As a result, 90 records were excluded from the overall SLR due to lack of relevance to the Danish treatment context. Following this refinement, a total of 10 records were identified and included as final evidence. The study selection process is reported in a PRISMA flow diagram and presented in Figure 22. While not explicitly identified through the SLR process, and thereby not presented in the PRISMA flow diagram, data from the Tables, Figures, and Listings (TFL), and the clinical study report (CSR) of the RATIONALE-305 trial (provided by BeiGene) were used to supplement published data for this trial.

A list of all records selected for inclusion in the SLR is provided in Table 71, and a list of all records excluded at the full-text stage with reasons for exclusion is provided in Table 72 and Table 73 for the original SLR and updated SLR respectively. Additionally, a list of all records excluded following assessment of relevance to the Danish treatment context is provided in Table 74.

H.1.5.5 Summary of included studies

Table 71 Overview of study design for studies included in the analyses

Study/ID	Aim	Study design	Patient population	Intervention and comparator (sample size (n))	Primary outcome and follow-up period	Secondary outcome and follow-up period
RATIONALE-305 [44] NCT03777657	Comparison of efficacy and safety of tislelizumab plus CT vs placebo plus CT as 1L treatment of advanced G/GEJ adenocarcinoma	Double-blinded phase III, RCT	Patients with HER-2 -negative, locally advanced, unresectable, or metastatic G/GEJ adenocarcinoma, regardless of PD-L1 expression, who had not received systemic anticancer therapy for advanced disease.	TIS + CT (n=501) PBO + CT (n=496)	OS (Time frame: 42.5 months)	PFS, ORR, disease control rate, clinical benefit rate, TTR, DoR (Time frame: 42.5 months)
ATTRACTION-4 [60,66] NCT02746796	Comparison of efficacy and safety of nivolumab plus CT vs placebo plus CT in HER-2-negative, previously untreated,	Double-blinded, phase III, RCT	Patient with previously untreated HER-2 -negative, unresectable, advanced or	NIV + CT (n=362)	PFS and OS (Time frame: 36 months)	Tumour response, ORR, DCR, best overall response, DOR, TTR (Time frame: 36 months)

Study/ID	Aim	Study design	Patient population	Intervention and comparator (sample size (n))	Primary outcome and follow-up period	Secondary outcome and follow-up period
	unresectable, advanced, or recurrent G/GEJ cancer		recurrent G/GEJ cancer	PBO + CT (n=362)		
CheckMate 649 [54,62,69] NCT02872116	Comparison of nivolumab plus CT vs CT as 1L treatment of advanced G/GEJ cancer/gastroesophageal adenocarcinoma	Open label, phase III, RCT	Patients with previously untreated HER-2-negative, advanced or metastatic G/GEJ cancer/gastroesophageal adenocarcinoma regardless of PD-L1 expression	NIV + CT (n=789) CT (n=792) NIV + ipilimumab(n=409) CT (n=404)	OS and PFS (Time frame: 47.4 months) HRQoL by EQ-5D-5L, EQ VAS and the FACT-Ga (timeframe: follow-up after 30 days of last dose, 84 days after initial follow-up and every 3 months after)	ORR, DoR, TTSD (Time frame: 47.4 months)
KEYNOTE-062 [56,68]	Comparison of efficacy and safety of pembrolizumab vs	Partially blinded, phase III, RCT	Patients with previously untreated G/GEJ cancer,	PEM (n=256)	OS and PFS in patients with PD-L1 CPS of 1 or greater or	ORR, DoR, GHS/QoL, EORTC QLQ-C30, EORTC QLQ-STO22

Study/ID	Aim	Study design	Patient population	Intervention and comparator (sample size (n))	Primary outcome and follow-up period	Secondary outcome and follow-up period
NCT02494583	pembrolizumab plus CT vs CT alone in 1L treatment of untreated, advanced, G/GEJ cancer		advanced disease with PD-L1 CPS of 1 or greater	PEM + CT (n=257) PBO + CT (n=250)	10 or greater (Time frame: 54.3 months)	(Time frame: 54.3 months)
KEYNOTE-859 [59] NCT03675737	Comparison of efficacy and safety of pembrolizumab plus CT vs placebo plus CT in HER-2 negative, advanced GC patients	Double-blinded, phase III, RCT	Patients with previously untreated, locally advanced, unresectable or metastatic HER-2-negative G/GEJ adenocarcinoma	PEM + CT (n=790) PBO + CT (n=789)	OS (Time frame: 31.0 months)	PFS, ORR, DoR (Time frame: 31.0 months)

H.1.6 Excluded full-text references

H.1.6.1 Original SLR

Table 72 Studies excluded following full-text review from the clinical SLR (original search)

No.	Reference	Reason for exclusion
1	(1983). Chemotherapy for advanced stomach cancer -- a controlled study of AF and MF Gan to kagaku ryoho. Cancer & chemotherapy, 10(10), 2171	NON-ENGLISH
2	(1988). Mitomycin C-ftorafur versus mitomycin C alone as complementary chemotherapy in locally advanced gastric cancer Neoplasia (New York, N.Y.), 5(5), 179	NON-ENGLISH
3	Akazawa, S., Nakajima, T., Kitagawa, H., Nakagawa, T., Kanda, Y., Futatsuki, K., Suda, Y., Yoshida, S., Honda, T. (1985). Therapeutic effect of sequential doses of methotrexate (MTX) and 5-fluorouracil (5-FU) in advanced gastric cancer: comparison of intermediate-dose MTX with high-dose MTX Gan to kagaku ryoho. Cancer & chemotherapy, 12(1), 91-98	NON-ENGLISH
4	Andric, Z., Randjelovic, T., Kovcin, V., Gutovic, J., Crevar, S., Murtezani, Z., Kostic, S. (2012). [Evaluation of the efficacy and toxicity of protocol cisplatin, 5-fluorouracil, leucovorin compared to protocol fluorouracil, doxorubicin and mitomycin C in locally advanced and metastatic gastric cancer] Srpski arhiv za celokupno lekarstvo, 140(5-6), 305-312	NON-ENGLISH
5	Aoyama, M., Hirose, H., Adachi, N. (1981). Comparison of combination therapy of 5-fluorouracil, mitomycin C, and adriamycin (FAM) and mitomycin C, 5-fluorouracil and cytosine arabinoside (MFC) for advanced gastric cancer Japanese Journal of Cancer and Chemotherapy, 8(5), 757-762	NON-ENGLISH
6	Bin, Y. H., Zheng, H. P., Lan, D., Hu, X. H. (2016). Oxaliplatin and S-1 plus intraperitoneal infusion of docetaxel Versus DOS for the first-line treatment of patients with advanced gastric cancer accompanied by malignant ascites Chinese Journal of Cancer Prevention and Treatment, 23(16), 1085-1089	NON-ENGLISH

No.	Reference	Reason for exclusion
7	Chen, J. H., Shen, W. X., Xia, J. X., Xu, R. L., Zhu, M. Q., Xu, M. (2015). Comparative study between docetaxel, oxaliplatin plus S-1 and DCF regimen as first-line therapy in patients with advanced gastric cancer Chinese Journal of Cancer Prevention and Treatment, 22(2), 134-137	NON-ENGLISH
8	Chen, S., Liu, F., Liu, Z., Zhang, X., Wei, L. (2019). Therapeutic Effects of Thymopentin on Advanced Gastric Cancer Patients Combined with Severe Pneumonia Anti-Tumor Pharmacy, 9(1), 56-59	NON-ENGLISH
9	Cirera, L., Cardona, T., Batiste, E., Arcusa, A., Tusquets, I., Saigi, E., Balil, A., Jolis, L., Guasch, I., Badia, A., Boleda, M., Esbri, R. (1993). Complementary chemotherapy for gastric cancer - stage III: preliminary findings Quimioterapia complementaria en el estadio III de cáncer gástrico: resultados preliminares, 14(2), 78	NON-ENGLISH
10	Cirera, L., Cardona, T. Batiste E., Balil, A. (1993). Efficacy of complementary chemotherapy (QC) in stage III gastric cancer (GC): preliminary results Eficacia de la quimioterapia complementaria (QC) en el estadía III de cáncer gástrico (CG): resultados preliminares, 16(6), 71	NON-ENGLISH
11	Cui, Y., Bai, B., Wen, Y., Kuang, S. (2014). Clinical study of autologous cytokine-induced killer cells combined with XELOX regimen in the treatment of senile advanced gastric cancer Zhonghua wei chang wai ke za zhi = Chinese journal of gastrointestinal surgery, 17(7), 698-701	NON-ENGLISH
12	Fang, F. Q., Liu, M. Z., Tong, Y., Liu, T. T., Zhang, J. (2014). A clinical study of DOF regimen vs SOX regimen as first-line treatment in patients with advanced gastric carcinoma World Chinese Journal of Digestology, 22(31), 4830-4834	NON-ENGLISH
13	Gao, F., Huang, X. Z., Ren, D. Q., Shen, W., Guo, X. C., Bao, K. H. (2013). Combination of chemotherapy and interventional management for the treatment of advanced gastric cancer: Comparison study of different chemotherapy routes Journal of Interventional Radiology (China), 22(10), 857-859	NON-ENGLISH
14	Gao, S., Lu, D., Liu, M., Wang, C., Wei, L., Xu, P., Liu, Y., Tang, Z., Hu, Z. (2018). Short term efficacy and toxicity of apatinib and docetaxel combined with cisplatin chemotherapy for advanced gastric cancer Chinese Journal of Cancer Biotherapy, 25(11), 1131-1134	NON-ENGLISH

No.	Reference	Reason for exclusion
15	Goto, Y., Toyota, T., Asaki, S., Satoh, J., Kikuchi, T., Koizumi, M., Ohkubo, T., Nomura, N., Mochizuki, F., Taima, T. (1989). Randomized-controlled study of treatment with UFT-MMC or UFT-ACR in advanced gastric cancer. Tohoku Study Group of Cancer Treatment for the Digestive Organs Gan to kagaku ryoho. Cancer & chemotherapy, 16(6), 2227	NON-ENGLISH
16	Grau, J. J., Estap, eacute, Alcobendas, F., Grac, iacute, a, J., Ant, oacute, n, A., Cruz, J. J., Tarrag, oacute, Daniels, M. (1988). motmycin C-ftorafur versus mitomycin C alone as complementary chemoterapy in locally advanced gastric cancer Mitomicina C-ftorafur frente a mitomicina C sola en quimioterapia complementaria del cáncer gástrico localmente avanzado, 5(5), 179	NON-ENGLISH
17	Guo, W., Zhao, M., Zhao, L., Liu, X., Fu, W., Ju, Z., Chen, X., Wang, L. (2021). Evaluation of clinical efficacy of SOX regimen combined with apatinib mesylate in the treatment of patients with advanced inoperable gastric cancer Anti-Tumor Pharmacy, 11(5), 601-606	NON-ENGLISH
18	He, S., Liu, Z., Su, X., Huo, C., Li, Y. (2018). Efficacy of Apatinib and its Effect on Quality of Life of Elderly Patients with Advanced Gastric Cancer Anti-Tumor Pharmacy, 8(5), 740-747	NON-ENGLISH
19	Hou, A. J., Hu, Y., Zhou, W., Zhang, H. W., Huang, Y. L., Shen, X. Y., Zhou, L., Gu, W. F. (2009). Weekly docetaxel, cisplatin and low dose of fluorouracil for advanced gastric carcinoma: A randomized clinical trial Tumor, 29(2), 160-163	NON-ENGLISH
20	Hu, P., Xu, J., Bao, B. (2021). Short-term and long-term effects of docetaxel on patients with advanced gastric cancer and effects on soluble intercellular adhesion factor-1 and e-cadherin Pharmaceutical Care and Research, 21(1), 37-40	NON-ENGLISH
21	Huang, D. Z., Xiong, J. P., Xu, N., Yan, Z., Zhuang, Z. X., Yu, Z., Wan, H. P., Zhang, Y., Deng, T., Zheng, R. S., Guo, Z. Q., Hu, C. H., Wang, M. L., Yu, Z. H., Yao, Y., Meng, J. C., Ba, Y. (2012). A phase II prospective randomized controlled trial of weekly paclitaxel combined with S-1 or fluorouracil for advanced gastric carcinoma Chinese Journal of Oncology, 34(11), 865-868	NON-ENGLISH
22	Inoue, Y., Nasu, H., Nakamura, J., Arakawa, H., Masamune, O., Yamada, N., Furuya, M., Ookubo, M., Mukojima, T., Koizumi, R. (1989). Efficacy of UFT in advanced gastric carcinoma under comparative study of MMC + UFT and MMC + tegafur therapies Gan to kagaku ryoho. Cancer & chemotherapy, 16(11), 3567	NON-ENGLISH

No.	Reference	Reason for exclusion
23	Jiang, H. L., Xu, H. L., Wang, W. Q. (2007). Clinical observation on the effect of ELF regimen combined with intra-arterial infusion of carboplatin on advanced gastric carcinoma Tumor, 27(8), 658	NON-ENGLISH
24	Jimenez Lacave, A., Buesa, J. M., Gracia Marco, M., Brugarolas, A. (1978). Flourouracile, adriamycin and flourouracile + adriamycin in advanced gastric carcinoma: results of a random study Oncologia 80, 3(4), 120-121	NON-ENGLISH
25	Jin, H., Tang, Y. (2013). Clinical outcomes of patients with advanced gastric cancer receiving chemotherapy with docetaxel in combination with S-1 or 5-fluorouracil Tumor, 33(7), 640-644	NON-ENGLISH
26	Kanabe, S., Tamakuma, S., Mimura, K., Hiraide, H., Mochizuki, H., Tamaki, K., Kurokawa, T., Kadota, T., Hatsuse, K., Kawano, M. (1985). Comparison of immunochemotherapy and chemotherapy of stage IV gastric carcinoma Gan no rinsho. Japan journal of cancer clinics, 31(14), 1805-1809	NON-ENGLISH
27	Kitamura, S., Ohtani, T., Kurihara, M., Kosaki, G., Akazawa, S., Sasaki, T., Takahashi, H., Nakano, S., Tokunaga, K. (1995). A controlled study of AO-90, a methionine-free intravenous amino acid solution, in combination with 5-fluorouracil and mitomycin C in advanced gastric cancer patients (internal medicine group evaluation) Japanese Journal of Cancer and Chemotherapy, 22(6), 765-775	NON-ENGLISH
28	Kong, Y., Zhao, D., Li, M., Miao, Y., Yi, Q., Ma, L., Li, K., Liu, H. (2022). Efficacy observation of continuous dosing or alternate - day dosing of apatinib combined with SOX regimen as first-line treatment for advanced gastric cancer Cancer Research and Clinic, 34(8), 601-605	NON-ENGLISH
29	Kono, K., Takahashi, A., Sugai, H., Ichihara, F., Fujii, H., Sekikawa, T., Matsumoto, Y. (2003). Prognostic significance of adoptive immunotherapy in patients with advanced gastric cancer: A randomized trial Biotherapy, 17(1), 15-19	NON-ENGLISH
30	Li, J., Li, B., Zhong, M. (2009). The efficacy of different combined chemotherapy regimens for advanced gastric carcinoma Chinese Journal of Clinical Oncology, 36(8), 205-207	NON-ENGLISH
31	Li, J. W., Huang, C. Z., Yuan, J. H., Chen, Q. H. (2016). Comparison of efficacy of modified EOX and FOLFIRI regimens in treatment of metastatic gastric cancer World Chinese Journal of Digestology, 24(12), 1866-1873	NON-ENGLISH

No.	Reference	Reason for exclusion
32	Li, Y., Zhuo, D. (2014). Comparison between the effect of SOX regimen and FOLFOX4 regimen for advanced gastric cancer Cancer Research and Clinic, 26(1), 42	NON-ENGLISH
33	Liu, H. D., Zhu, Z. Y., Yang, F. (2010). Treatment of advanced gastric cancer with regimen of thalidomide, oxaliplatin, leucovorin, fluorouracil and hydroxycamptothecin Chinese Journal of Cancer Prevention and Treatment, 17(21), 1768-1770	NON-ENGLISH
34	Liu, J., Zhang, S. Z., Yang, M. D., Gao, J., Liu, X. L. (2013). S-1 combined with intrathoracic and intraperitoneal injection chemotherapy in the treatment of advanced gastric cancer of aged patients Cancer Research and Clinic, 25(11), 766-768	NON-ENGLISH
35	Ma, H., Liu, L., Li, J., Zhang, F., Yang, H. (2014). The clinical curative efficacy of docetaxel plus S-1 in the treatment of advanced gastric cancer Anti-Tumor Pharmacy, 4(4), 298-301	NON-ENGLISH
36	Ma, L., Zhao, X., Qian, Q., Zhu, Z., Chen, P. (2018). Efficacy Observation of Apatinib plus S1 for the Treatment of Advanced Gastric Cancer Anti-Tumor Pharmacy, 8(2), 174-178	NON-ENGLISH
37	Ma, Q., Qu, Y., Tang, Y. (2014). Clinical outcomes of advanced gastric cancer patients treated with chemotherapy of paclitaxel liposome combined with S-I or oxaliplatin Chinese Journal of Clinical Oncology, 41(3), 200-203	NON-ENGLISH
38	Nishikawa, Kazuo, Watanabe, Koichiro, Shirao, Kuniaki (2015). [S-1 plus cisplatin(SP) for advanced gastric cancer] Nihon rinsho. Japanese journal of clinical medicine, 73 Suppl 2(#issue#), 572-6	NON-ENGLISH
39	Pozzo, C., Astone, A., Cassano, A., Corsi, D. C., Torino, F., Martin, S., Barone, C. (1993). EEP-L vs AF + 5FU in advanced gastric cancer: a randomized trial Tumori, 79 Suppl(Abstr. 186), 63	NON-ENGLISH
40	Qiao, J., Liu, D., Wang, S., Shi, G., Wei, H. (2020). Efficacy of transcatheter arterial infusion chemotherapy for advanced gastric cancer Chinese Journal of Interventional Imaging and Therapy, 17(4), 198-201	NON-ENGLISH
41	Qiuoling, X., Hong, Z. (2020). Prognostic analysis of irinotecan combined with apatinib in treatment of advanced gastric cancer Cancer Research and Clinic, 32(6), 419-423	NON-ENGLISH

No.	Reference	Reason for exclusion
42	Queisser, W., Schnitzler, G., Heim, M. E., Konig, H., Katz, R., Fritze, D., Herrmann, R., Arnold, H., Henss, H., Trux, F. (1984). Prospective randomized study in advanced gastric carcinoma: A comparison of combined 5-fluorouracil and carmustin, with and without adriamycin Deutsche Medizinische Wochenschrift, 109(25), 976-980	NON-ENGLISH
43	Ren, D. Q., Gao, F., Huang, X. Z., Shen, W., Bao, K. H. (2012). Interventional chemotherapy combined with oral administration of tegafur for the treatment of advanced gastric cancer: A comparative study Journal of Interventional Radiology (China), 21(10), 854-857	NON-ENGLISH
44	Sakata, Y., Yoshida, Y., Komatsu, Y. (1982). Studies on MQF-OK therapy against inoperable gastric cancer - comparison with MFC therapy Japanese Journal of Cancer and Chemotherapy, 9(1), 109-115	NON-ENGLISH
45	Sasagawa, T., Ho, N., Endo, T., Sekine, T., Sugiyama, K., Tomidokoro, T., Hatakeyama, S., Togashi, M., Onuki, K., Katagiri, J., Kojima, T., Sekine, A. (1994). Randomized controlled trial of MMC + UFT and MMC + 5-FU therapy in advanced gastric cancer Japanese Journal of Cancer and Chemotherapy, 21(8), 1179-1185	NON-ENGLISH
46	Sasaki, T. (1995). Clinical evaluation of leucovorin and 5-fluorouracil Japanese Journal of Cancer and Chemotherapy, 22(8), 1001-1008	NON-ENGLISH
47	Sasaki, T., Ota, K., Ibayashi, J., Sakata, Y., Matsuoka, T., Ishikawa, M., Wakui, A., Ogoshi, K., Akazawa, S., Sakai, Y. (1989). Randomized multicenter trial of sequential methotrexate and 5-fluorouracil versus 5-fluorouracil alone in advanced gastric cancer Gan to kagaku ryoho. Cancer & chemotherapy, 16(8 Pt 1), 2545	NON-ENGLISH
48	Sato, A., Shimada, K., Nakamachi, M., Wada, M., Koda, T., Matsukawa, M. (2001). [Chemotherapy of irinotecan (CPT-11) combined with cisplatin in patients with advanced gastric cancer] Nihon rinsho. Japanese journal of clinical medicine, 59 Suppl 4(#issue#), 375-80	NON-ENGLISH
49	Sato, H., Wakui, A., Hoshi, M., Kurihara, M., Yokoyama, M., Shimizu, H. (1991). Randomized controlled trial of induced hypertension chemotherapy (IHC) using angiotensin II human (TY-10721) in advanced gastric carcinoma (TY-10721 IHC Study Group Report) Gan to kagaku ryoho. Cancer & chemotherapy, 18(3), 451	NON-ENGLISH

No.	Reference	Reason for exclusion
50	Schnitzler, G., Queiszer, W., Heim, M. E. (1983). Comparison of fluorouracil plus carmustine with fluorouracil plus doxorubicin and carmustine in advanced gastric cancer Verhandlungen der Deutschen Gesellschaft fur Innere Medizin, VOL. 89(#issue#), 1051-1054	NON-ENGLISH
51	Shinoda, M., Morise, K., Kusugami, K., Iwase, H., Ina, K., Kaneko, H., Horiuchi, Y., Kuroiwa, A., Suga, S., Oka, Y. (1995). Combination chemotherapy with FP versus FEP in patients with advanced gastric cancer. Research group of gastric cancer chemotherapy Gan to kagaku ryoho. Cancer & chemotherapy, 22(4), 515	NON-ENGLISH
52	Shinoda, M., Morise, K., Kusugami, K., Iwase, H., Ina, K., Kaneko, H., Horiuchi, Y., Kuroiwa, A., Suga, S., Oka, Y., Suzuki, T., Nagura, E., Hayakawa, M., Umemura, K., Kaneshiro, K., Hayashi, N., Iizuka, A., Inagaki, T., Sugie, M. (1995). Combination chemotherapy with FP versus FEP in patients with advanced gastric cancer Japanese Journal of Cancer and Chemotherapy, 22(4), 515-520	NON-ENGLISH
53	Song, J. C., Zhang, X., Zhang, Y. (2013). Clinical analysis of paclitaxel or oxaliplatin combined with fluorouracil regimens in the treatment of advanced gastric cancer Journal of Dalian Medical University, 35(1), 54	NON-ENGLISH
54	Sun, H., Yin, J., Ying, J. (2005). Clinical study of sunpla as first-line treatment for inoperable gastric cancer Chinese Journal of Clinical Oncology, 32(17), 1012-1015	NON-ENGLISH
55	Tong, L. M., Xu, H. L., Jiang, H. L. (2015). A randomized trial of S-1-oxaliplatin versus capecitabine-oxaliplatin for advanced gastric cancer Journal of Practical Oncology, 30(1), 56-59	NON-ENGLISH
56	Vidili, M. G., Guglielmi, A., Aschele, C., Mori, A., Tonetti, M., So brero, A., Rosso, R., Nobile, M. T. (1989). A methotrexate, 5-Fluorouracil and epidoxorubicin phase II Trial in patients with advanced gastric cancer Folia Oncologica, 12(2), 131-134	NON-ENGLISH
57	Wakui, A., Kasai, M., Konno, K., Abe, R., Kanamaru, R., Takahashi, K., Nakai, Y., Yoshida, Y., Koie, H., Masuda, H. (1986). Randomized study of lentinan on patients with advanced gastric and colorectal cancer. Tohoku Lentinan Study Group Gan to kagaku ryoho. Cancer & chemotherapy, 13(4 Pt 1), 1050	NON-ENGLISH

No.	Reference	Reason for exclusion
58	Wan, Y., Hui, H., Wang, X., Wu, J., Sun, S. (2016). Comparison of the efficacy and safety of capecitabine or tegafur, gimeracil and oteracil potassium capsules combined with oxaliplatin chemotherapy regimens in the treatment of advanced gastric cancer Zhonghua zhong liu za zhi [Chinese journal of oncology], 38(1), 28-34	NON-ENGLISH
59	Wang, J., Xie, Z., Li, H. (2016). Short-term efficacy of DC-CIK biotherapy combined with chemotherapy for patients with advanced gastric cancer Journal of Practical Oncology, 31(1), 38-42	NON-ENGLISH
60	Wang, K., Dong, Y., Li, Q., Liu, S., Ge, Y. (2016). S-1 combined with Nedaplatin as the first-line treatment for advanced gastric cancer Anti-Tumor Pharmacy, 6(5), 379-383	NON-ENGLISH
61	Wang, Q., Wang, Y., Zhang, Y., Huang, T., Xiao, J. (2013). Clinical study on the effect of monotherapy of tegafer gimeracil oteracil porassium capsules on elderly advanced gastric cancer Anti-Tumor Pharmacy, 3(5), 378-381	NON-ENGLISH
62	Wu, F., Chen, S. C., Lu, Z. H., Xiong, J. P. (2010). [Comparison of the therapeutic effects of paclitaxel liposome-5-Fu versus paclitaxel-5-Fu on 67 patients with advanced gastric cancer] Zhonghua zhong liu za zhi [Chinese journal of oncology], 32(3), 234-236	NON-ENGLISH
63	Wu, F., Zhang, H. G., Ran, F. W., Zhang, X. R., Shi, Y. K. (2008). FOLFOX4 regimen versus DP(O)F regimen for advanced gastric cancer Aizheng, 27(4), 413	NON-ENGLISH
64	Wu Yong, Fang (1982). Clinical trial of 5-Fu capsule in the treatment of advanced gastric carcinoma Zhongliuxue Fukan, 9(3), 145-147	NON-ENGLISH
65	Xiao, S., Li, D., Zhang, D. (1996). ACNU and methyl-CCNU in combination chemotherapy for advanced gastric cancer: A randomized comparative study Chinese Journal of Oncology, 18(1), 30-33	NON-ENGLISH
66	Xiao, S., Li, D., Zhang, D. (1996). ACNU and methyl-CCNU in combination chemotherapy for advanced gastric cancer: a randomized comparative study. Shanghai ACNU Collaborative Study Group Zhonghua zhong liu za zhi [Chinese journal of oncology], 18(1), 30	NON-ENGLISH

No.	Reference	Reason for exclusion
67	Xie, X. D., Zheng, Z. D., Li, J. N., Liu, D. W., Liu, Y. Y. (2004). Effects of xeloda combined with carmofur in the improvement of quality of life in patients with advanced carcinoma of stomach: A randomized controlled observation Chinese Journal of Clinical Rehabilitation, 8(14), 2608-2609	NON-ENGLISH
68	Xiong, X., Zhu, Z., Wen, Z. (2000). Preliminary clinical comparison of HLF and ELF regimen in the treatment of advanced gastric carcinoma in middle-aged and elderly patients Zhonghua zhong liu za zhi [Chinese journal of oncology], 22(5), 411-413	NON-ENGLISH
69	Xu, H., Shi, X., Liu, K., Tong, S., Dong, J. (2018). The Clinical Effect of Docetaxel or Oxaliplatin Combined with 5-fluorouracil in the Treatment of Advanced Gastric Cancer and the Analysis of Safety Anti-Tumor Pharmacy, 8(5), 735-739	NON-ENGLISH
70	Xu, J. J., Gan, N. (2014). Efficacy of oxaliplatin in combination with three different fuoropyrimidine regimens for patients with advanced gastric carcinoma World Chinese Journal of Digestology, 22(6), 853-857	NON-ENGLISH
71	Yamada, Y., Tsushima, K., Sakata, Y., Saito, S., Ito, T., Sugimoto, N., Ogasawara, H., Tamura, Y., Moriya, N., Komatsu, y, Kimura, T., Suzuki, H., Kimura, M., Mizushiri, S., Chiba, Y., Sato, T., Matsukawa, M., Kawata, K., Kawabe, H. (1994). Randomized controlled study of sequential methothrexate and 5-fluorouracil therapy with or without 5'-deoxy-5-fluorouridine against advanced gastric cancer Hirosaki Medical Journal, 46(1), 44-49	NON-ENGLISH
72	Yamamura, Y., Miyazaki, I., Ogawa, M., Yonemura, Y., Tanemura, H., Kito, T., Hamajima, N., Saji, S., Kosaka, T. (1998). A randomized controlled trial with methotrexate (MTX), 5-fluorouracil (5-FU) and pirarubicin (THP) vs 5-FU alone in advanced or recurrent gastric carcinoma. Tokai Hokuriku THP Study Group Gan to kagaku ryoho. Cancer & chemotherapy, 25(10), 1543-1548	NON-ENGLISH
73	Yang, J., Jiao, S., Dai, G., Li, F., Zhao, H., Li, Y. (2008). A phase II multicentric trial of FTQ combined with cisplatin for treatment of advanced gastric cancer Chinese Journal of Clinical Oncology, 35(1), 8-11	NON-ENGLISH
74	Yang, J. L., Jiao, S. C., Dai, G. H., Li, F., Zhao, H., Li, Y., Xu, J. M., Liu, W., Zhang, Y., Niu, R. G., Xie, X. D., Song, S. P., Zhang, F. C., Lu, H. S., Wang, J. (2008). Curative effects of FTQ combined with cisplatin in treatment of advanced gastric cancer: A multicenter study National Medical Journal of China, 88(20), 1412-1414	NON-ENGLISH

No.	Reference	Reason for exclusion
75	Yang, J. W., Chen, Y. G., Chen, Q., Fan, N. F., Guo, Z. Q., Cai, X. C., Wu, X. A., Xu, S., Lu, X., Zhang, Y. H., Ouyang, X. N. (2005). A randomized controlled trail of taxol-based combination regimens for advanced gastric cancer Ai zheng = Aizheng = Chinese journal of cancer, 24(12), 1531-1536	NON-ENGLISH
76	Ye, Z., Li, S., Bao, Z. (2015). Clinical observation of irinotecan or oxaliplatin combined with fluorouracil as first-line treatment for advanced gastric cancer Anti-Tumor Pharmacy, 5(1), 55-58	NON-ENGLISH
77	Yin, J. L., Ji, X. Y. (2001). A Comparison Between LFP Regimen and HLFP Regimen for Treatment of Advanced Gastric Carcinoma The practical journal of cancer, 16(5), 534	NON-ENGLISH
78	Yoshikawa, T., Tsuburaya, A., Saze, Z., Aoyama, T., Hasegawa, S., Kanemoto, A., Terashima, M., Tahara, H. (2011). [Randomized phase II trial to compare S-1 and S-1/PSK for advanced or recurrent gastric cancer-lessons from the results] Gan to kagaku ryoho. Cancer & chemotherapy, 38(12), 1909-1911	NON-ENGLISH
79	Zhang, C. H., Zhang, J. W., Li, M., Li, C. S. (2010). Clinical research of advanced gastric cancer treated with epirubicin combined with FOLFOX4 regimen Chinese Journal of Cancer Prevention and Treatment, 17(15), 1217-1219	NON-ENGLISH
80	Zhang, Q., Xu, Y. P., Bao, J. (2015). Clinical efficacy of S-1 combined with nedaplatin for elderly patients with advanced gastric cancer World Chinese Journal of Digestology, 23(10), 1632-1636	NON-ENGLISH
81	Zhang, Q., Zhao, H., Yu, Q. (2021). Efficacy of first-line chemotherapeutic regimens in the treatment of elderly advanced gastric cancer Anti-Tumor Pharmacy, 11(6), 743-747	NON-ENGLISH
82	Zhang, S., Yang, J., Liao, X., Liu, X., Dong, X. (2018). Clinical Effects of Bevacizumab Combined with Docetaxel, 5-Fuand Cisplatinin Treatment of Advanced Gastric Cancer Anti-Tumor Pharmacy, 8(6), 976-1005	NON-ENGLISH
83	Zhao, K., Xiao, L., Zhang, J., Liu, X., Jiang, D., Su, L. (2018). Clinical Effect Analysis on Advanced Gastric Cancer Treated by S-1 Anti-Tumor Pharmacy, 8(5), 732-734	NON-ENGLISH

No.	Reference	Reason for exclusion
84	Zhao, W., Ji, Z. (2009). Comparison of XELOX (oxaliplatin plus capecitabine) and FOLFOX4 (oxaliplatin plus 5-fluorouracil/calcium folinate) in the treatment of advanced gastric cancer Chinese Journal of Clinical Oncology, 36(18), 1044-1046	NON-ENGLISH
85	Zhao, W. Y., Chen, D. Y., Qi, Q. (2011). Comparison between the effects of irinotecan or oxaliplatin combined with capecitabine in the treatment of advanced gastric cancer Chinese Journal of Oncology, 33(4), 295-298	NON-ENGLISH
86	Zheng, Y. B., Cao, F. Y., Liu, K. J., Gan, H. F., He, X. B., Tong, S. L. (2012). [Value of normalization window of tumor vasculature in neoadjuvant chemotherapy for patients with unresectable gastric cancer] Zhonghua wei chang wai ke za zhi = Chinese journal of gastrointestinal surgery, 15(1), 55-58	NON-ENGLISH
87	Zhou, D., Cao, G., Cheng, Z., Ji, H., Fu, W. (2015). The clinical efficacy of docetaxel combined with modified FOLFOX regimen in the treatment of advanced gastric cancer Anti-Tumor Pharmacy, 5(1), 38-41	NON-ENGLISH
88	Zhou, F. J., Peng, Y., Wang, N., Li, J. H., Xie, N., Li, J., Wang, B., Li, C. (2011). Irinotecan combined with capecitabine in first line treatment of advanced gastric cancer Chinese Journal of Cancer Prevention and Treatment, 18(9), 710-712	NON-ENGLISH
89	Zhou, N., Wang, W., Tang, Y. (2015). Clinical effects of bevacizumab plus liposomal paclitaxel chemotherapy in patients with advanced gastric cancer World Chinese Journal of Digestology, 23(18), 2957-2960	NON-ENGLISH
90	Zhu, J. P., Yu, L. J., Chen, Y., Hong, M. S., Miao, W. E. (2005). Clinical study of weekly low dosage of chemotherapy in the treatment of old patients with advanced gastric cancer Pharmaceutical Care and Research, 5(4), 379-380	NON-ENGLISH
91	(1982). A comparative clinical assessment of combination chemotherapy in the management of advanced gastric carcinoma: the Gastrointestinal Tumor study Group Cancer, 49(7), 1362	POPULATION
92	(1988). Triazinate and platinum efficacy in combination with 5-fluorouracil and doxorubicin: results of a three-arm randomized trial in metastatic gastric cancer. Gastrointestinal Tumor Study Group Journal of the National Cancer Institute, 80(13), 1011	POPULATION
93	(1990). The concept of locally advanced gastric cancer. Effect of treatment on outcome. The Gastrointestinal Tumor Study Group Cancer, 66(11), 2324	POPULATION

No.	Reference	Reason for exclusion
94	Ajani, J. A. (2002). Docetaxel in combination for advanced gastric cancer Gastric Cancer, 5(SUPPL. 1), 31-34	POPULATION
95	Akagi, J., Baba, H. (2010). PSK may suppress CD57(+) T cells to improve survival of advanced gastric cancer patients International journal of clinical oncology, 15(2), 145	POPULATION
96	Anonymous (1979). Phase II-III chemotherapy studies in advanced gastric cancer. The Gastrointestinal Tumor Study Group Cancer treatment reports, 63(11-12), 1871-6	POPULATION
97	Anonymous (1992). A randomized, comparative study of combination chemotherapies in advanced gastric cancer: 5-fluorouracil and cisplatin (FP) versus 5-fluorouracil, cisplatin, and 4'-epirubicin (FPEPIR). Kyoto Research Group for Chemotherapy of Gastric Cancer (KRGCGC) Anticancer research, 12(6B), 1983-8	POPULATION
98	Bodoky, G., Scheulen, M. E., Rivera, F., Jassem, J., Carrato, A., Moiseyenko, V., Vynnychenko, I., Prausova, J., van Laethem, J. L., Cascinu, S., Ajani, J. A. (2015). Clinical Benefit and Health-Related Quality of Life Assessment in Patients Treated with Cisplatin/S-1 Versus Cisplatin/5-FU: Secondary End Point Results From the First-Line Advanced Gastric Cancer Study (FLAGS) Journal of Gastrointestinal Cancer, #volume#(#issue#), #Pages#	POPULATION
99	Bouche, O., Raoul, J. L., Bonnetain, F., Giovannini, M., Etienne, P. L., Lledo, G., et al. (2004). Randomized multicenter phase II trial of biweekly regime of fluorouracil and leucovorin (LV5FU2), LV5FU2 plus cisplatinum, or LV5FU2 plus irinotecan in patients with previously untreated metastatic gastric cancer. Final results of study FFCD 9803 Journal of clinical oncology, 22(#issue#), 4319	POPULATION
100	Colucci, G., Giotta, F., Maiello, E., Cifarelli, R. A., Leo, S., Giuliani, F., Pezzella, G., Pedicini, A., Valori, V. (1995). Efficacy of the association of folinic acid and 5-fluorouracil alone versus folinic acid and 5-fluorouracil plus 4-epidoxorubicin in the treatment of advanced gastric carcinoma American Journal of Clinical Oncology: Cancer Clinical Trials, 18(6), 519-524	POPULATION
101	DeSimone, P. A., Gams, R., Birch, R. (1986). Phase II evaluation of mitoxantrone in advanced carcinoma of the stomach: A Southeastern Cancer Study Group Trial Cancer Treatment Reports, 70(8), 1043-1044	POPULATION
102	Dong, L., Li, J., Lou, X. P., Miao, J. H., Lu, P., Chang, Z. W., Han, Z. F. (2014). Comparison of short-term efficacy and safety of TIROX and DCF regimens for advanced gastric cancer Journal of International Medical Research, 42(3), 737-743	POPULATION

No.	Reference	Reason for exclusion
103	du Rusquec, P., Guimbaud, R., Le Malicot, K., Gornet, J. M., Nguyen, S., Lecomte, T., Khemissa-Akouz, F., Perrier, H., Bouche, O., Paoletti, X., Le Tourneau, C. (2023). Evaluation of the relevance of the growth modulation index (GMI) from the FFCD 0307 randomized phase III trial comparing the sequence of two chemotherapeutic regimens ESMO Open, 8(4), 101616	POPULATION
104	Falk, R. E., MacGregor, A. B., Ambus, U., Landi, S., Miller, A. B., Samuel, E. S., Langer, B. (1977). Combined treatment with BCG and chemotherapy for metastatic gastrointestinal cancer Diseases of the colon and rectum, 20(3), 215	POPULATION
105	Gao, S., Li, X., Shi, W., Huo, L., Liu, H. (2022). Efficacy of the Low Dose Apatinib plus Chemotherapy on Advanced Gastric Carcinoma Journal of Oncology, 2022(#issue#), 3009494	POPULATION
106	Guo, M., Yu, Y., Wang, Y., Cui, Y., Li, Q., Feng, Y., Li, W., Zhuang, R., Liu, T. (2015). Low-dosed docetaxel showed equivalent efficacy but improved tolerability compared with oxaliplatin in the S-1-based first-line chemotherapy regimen for metastatic or recurrent gastric adenocarcinoma Medical oncology (Northwood, London, England), 32(9), 230	POPULATION
107	Huang, D., Ba, Y., Xiong, J., Xu, N., Yan, Z., Zhuang, Z., Wan, H., Zhang, Y., Deng, T., Zheng, R., Guo, Z., Hu, C., Wang, M., Yu, Z., Yao, Y., Meng, J. (2013). A multicentre randomised trial comparing weekly paclitaxel + S-1 with weekly paclitaxel + 5-fluorouracil for patients with advanced gastric cancer European Journal of Cancer, 49(14), 2995-3002	POPULATION
108	Ishigami, H., Fujiwara, Y., Fukushima, R., Nashimoto, A., Yabusaki, H., Imano, M., Imamoto, H., Kodera, Y., Uenosono, Y., Amagai, K., Kadowaki, S., Miwa, H., Yamaguchi, H., Yamaguchi, T., Miyaji, T., Kitayama, J. (2018). Phase III trial comparing intraperitoneal and intravenous paclitaxel Plus S-1 versus cisplatin plus S-1 in patients with gastric cancer with peritoneal metastasis: PHOENIXGC trial Journal of Clinical Oncology, 36(19), 1922-1929	POPULATION
109	Jordan, K., Kellner, O., Kegel, T., Schmoll, H. J., Grothey, A. (2004). Phase II trial of capecitabine/irinotecan and capecitabine/oxaliplatin in advanced gastrointestinal cancers Clinical Colorectal Cancer, 4(1), 46-50	POPULATION
110	Kelsen, D., Atiq, O. T., Saltz, L., Niedzwiecki, D., Ginn, D., Chapman, D., Heelan, R., Lightdale, C., Vinciguerra, V., Brennan, M. (1992). FAMTX versus etoposide, doxorubicin, and cisplatin: A random assignment trial in gastric cancer Journal of Clinical Oncology, 10(4), 541-548	POPULATION

No.	Reference	Reason for exclusion
111	Kim, G. M., Jeung, H. C., Rha, S. Y., Kim, H. S., Jung, I., Nam, B. H., Lee, K. H., Chung, H. C. (2012). A randomized phase II trial of S-1-oxaliplatin versus capecitabine-oxaliplatin in advanced gastric cancer European journal of cancer (Oxford, England :, 48(4), 518	POPULATION
112	Kim, N. K., Park, Y. S., Heo, D. S., Suh, C., Kim, S. Y., Park, K. C., Kang, Y. K., Shin, D. B., Kim, H. T., Kim, H. J. (1993). A phase III randomized study of 5-fluorouracil and cisplatin versus 5-fluorouracil, doxorubicin, and mitomycin C versus 5-fluorouracil alone in the treatment of advanced gastric cancer Cancer, 71(12), 3813	POPULATION
113	Kn, ouml, dler, M., ouml, rfer, J., Kunzmann, V., Trojan, J., Daum, S., Schenk, M., Kullmann, F., Schroll, S., Behringer, D., Stahl, M., Al-Batran, S. E., Hacker, U., Ibach, S., Lindhofer, H., Lordick, F. (2018). Randomised phase II trial to investigate catumaxomab (anti-EpCAM × anti-CD3) for treatment of peritoneal carcinomatosis in patients with gastric cancer British journal of cancer, 119(3), 296	POPULATION
114	Kojima, T., Hara, H., Tsuji, A., Yasui, H., Muro, K., Satoh, T., Ogata, T., Ishihara, R., Goto, M., Baba, H., Nishina, T., Han, S., Sakata, T., Yatsuzuka, N., Doi, T., Kato, K. (2022). First-line pembrolizumab + chemotherapy in Japanese patients with advanced/metastatic esophageal cancer from KEYNOTE-590 Esophagus, 19(4), 683-692	POPULATION
115	Kolaric, K., Potrebica, V., Stanovnik, M. (1986). Controlled phase III clinical study of 4-epi-doxorubicin + 5-fluorouracil versus 5-fluorouracil alone in metastatic gastric and rectosigmoid cancer Oncology, 43(2), 73-77	POPULATION
116	Kovach, J. S., Moertel, C. G., Schutt, A. J., Hahn, R. G., Reitemeier, R. J. (1974). Proceedings: A controlled study of combined 1,3-bis-(2-chloroethyl)-1-nitrosourea and 5-fluorouracil therapy for advanced gastric and pancreatic cancer Cancer, 33(2), 563-567	POPULATION
117	Kyoto Research Group for Chemotherapy of Gastric, Cancer (1992). A randomized, comparative study of combination chemotherapies in advanced gastric cancer: 5-fluorouracil and cisplatin (FP) versus 5-fluorouracil, cisplatin, and 4-epirubicin (FPEPIR) Anticancer research, 12(#issue#), 1983	POPULATION
118	Lee, K. H., Hyun, M. S., Kim, H. K., Jin, H. M., Yang, J., Song, H. S., et al. (2009). Randomized, Multicenter, Phase III Trial of Heptaplatin 1-hour Infusion and 5-Fluorouracil Combination Chemotherapy Comparing with Cisplatin and 5-Fluorouracil Combination Chemotherapy in Patients with Advanced Gastric Cancer Cancer research and treatment, 41(1), 12	POPULATION

No.	Reference	Reason for exclusion
119	Li, N., Li, Y., Gong, P., Li, J., Wang, Y. L. (2015). Clinical effects of hyperthermia combined with S-1 chemotherapy in elderly patients with advanced gastric cancer World Chinese Journal of Digestology, 23(3), 445-450	POPULATION
120	Li, W. W., Jiao, J., Wang, Z. Y., Wei, Y. N., Zhang, Y. F. (2021). Clinical efficacy of immunotherapy combined with chemotherapy in patients with advanced gastric cancer, its effect on nutritional status and changes of peripheral blood t lymphocyte subsets nt Pakistan Journal of Medical Sciences, 37(7), 1-6	POPULATION
121	Liu, Y. P., Li, G. Q., Chen, H. H., Xie, J., Qu, X. Y., Wang, Z. G., Zhu, L. H., Feng, Y. J., Zhang, L. (2015). Capecitabine for treatment of patients with advanced gastric cancer: Curative efficacy and effect on serum levels of MMP-2 and MMP-9 World Chinese Journal of Digestology, 23(7), 1136-1140	POPULATION
122	Lustberg, M. B., Bekaii-Saab, T., Young, D., Otterson, G., Burak, W., Abbas, A., McCracken-Bussa, B., Lustberg, M. E., Villalona-Calero, M. A. (2010). Phase II randomized study of two regimens of sequentially administered mitomycin C and irinotecan in patients with unresectable esophageal and gastroesophageal adenocarcinoma Journal of Thoracic Oncology, 5(5), 713-718	POPULATION
123	Noronha, V., Patil, V. M., Menon, N. S., Singh, A., Chopade, S. R., Janu, A., Purandare, N., Kumar, R., Goud, S., More, S., Shah, S., Vairage, R., Yadav, A., Nakti, D., Mudliya, C., Kamble, S., Chavan, S., Sonawane, S., Banavali, S. D., Prabhash, K. (2022). Phase III randomized controlled trial comparing chemotherapy to best supportive care in advanced esophageal and gastroesophageal junction cancer Journal of Clinical Oncology, 40(16 Supplement 1), #Pages#	POPULATION
124	Novik, Y., Ryan, L. M., Haller, D. G., Asbury, R., Dutcher, J. P., Schutt, A. (1999). Phase ii protocol for the evaluation of new treatments in patients with advanced gastric carcinoma: Results of ECOG 5282 Medical Oncology, 16(4), 261-266	POPULATION
125	Ocean, A. J., Christos, P., Sparano, J. A., Shah, M. A., Yantiss, R. K., Cheng, J., Lin, J., Papetti, M., Matulich, D., Schnoll-Sussman, F., Besanceney-Webler, C., Xiang, J., Ward, M., Dilts, K. T., Keresztes, R., Holloway, S., Chen, E. X., Wright, J. J., Lane, M. E. (2014). Phase II trial of bortezomib alone or in combination with irinotecan in patients with adenocarcinoma of the gastroesophageal junction or stomach Investigational New Drugs, 32(3), 542-548	POPULATION

No.	Reference	Reason for exclusion
126	Ogata, T., Narita, Y., Wainberg, Z. A., Van Cutsem, E., Yamaguchi, K., Piao, Y., Zhao, Y., Peterson, P. M., Wijayawardana, S. R., Abada, P., Chatterjee, A., Muro, K. (2023). Exploratory Analysis of Patients With Gastric/Gastroesophageal Junction Adenocarcinoma With or Without Liver Metastasis From the Phase 3 RAINBOW Study Journal of Gastric Cancer, 23(2), 289-302	POPULATION
127	Park, S. H., Lee, W. K., Chung, M., Lee, Y., Han, S. H., Bang, S. M., Cho, E. K., Shin, D. B., Lee, J. H. (2006). Paclitaxel versus docetaxel for advanced gastric cancer: a randomized phase II trial in combination with infusional 5-fluorouracil Anti-cancer drugs, 17(2), 225	POPULATION
128	Popov, I., Radosevic-Jelic, L., Jezdic, S., Milovic, M., Borojevic, N., Stojanovic, S., Stankovic, V., Josifovski, T., Kezic, I. (2008). Biweekly oxaliplatin, fluorouracil and leucovorin versus cisplatin, fluorouracil and leucovorin in patients with advanced gastric cancer Journal of b u on, 13(4), 505	POPULATION
129	Ryu, M. H., Lee, K. H., Shen, L., Yeh, K. H., Yoo, C., Hong, Y. S., Park, Y. I., Yang, S. H., Shin, D. B., Zang, D. Y., Kang, W. K., Chung, I. J., Kim, Y., Ryoo, B. Y., Nam, B. H., Park, Y. S., Kang, Y. K. (2023). Randomized phase II study of capecitabine plus cisplatin with or without sorafenib in patients with metastatic gastric cancer (STARGATE) Cancer Medicine, 12(7), 7784-7794	POPULATION
130	Stein, A., Paschold, L., Tintelnot, J., Goekkurt, E., Henkes, S. S., Simnica, D., Schultheiss, C., Willscher, E., Bauer, M., Wickenhauser, C., Thuss-Patience, P., Lorenzen, S., Ettrich, T., Riera-Knorrenschild, J., Jacobasch, L., Kretzschmar, A., Kubicka, S., Al-Batran, S. E., Reinacher-Schick, A., Pink, D., Sinn, M., Lindig, U., Hiegl, W., Hinke, A., Hegewisch-Becker, S., Binder, M. (2022). Efficacy of Ipilimumab vs FOLFOX in Combination with Nivolumab and Trastuzumab in Patients with Previously Untreated ERBB2-Positive Esophagogastric Adenocarcinoma: The AIO INTEGA Randomized Clinical Trial JAMA Oncology, 8(8), 1150-1158	POPULATION
131	Stolinsky, D. C., Pugh, R. P., Bohannon, R. A., Bogdon, D. L., Bateman, J. R. (1974). Clinical trial of BCNU (NSC 409962) combined with vincristine (NSC 67574) in disseminated gastrointestinal cancer and other neoplasms CANCER CHEMOTHER.REP., 58(6), 947-950	POPULATION
132	Sumpter, K., Harper-Wynne, C., Cunningham, D., Rao, S., Tebbutt, N., Norman, A. R., Ward, C., Iveson, T., Nicolson, M., Hickish, T., Hill, M., Oates, J. (2005). Report of two protocol planned interim analyses in a randomised multicentre phase III study comparing capecitabine with fluorouracil and oxaliplatin with cisplatin in patients with advanced oesophagogastric cancer receiving ECF British Journal of Cancer, 92(11), 1976-1983	POPULATION

No.	Reference	Reason for exclusion
133	Tebbutt, N. C., Norman, A., Cunningham, D., Iveson, T., Seymour, M., Hickish, T., Harper, P., Maisey, N., Mochlinski, K., Prior, Y., Hill, M. (2002). A multicentre, randomised phase III trial comparing protracted venous infusion (PVI) 5-fluorouracil (5-FU) with PVI 5-FU plus mitomycin C in patients with inoperable oesophago-gastric cancer Annals of oncology : official journal of the european society for medical oncology, 13(10), 1568	POPULATION
134	Tucker, W. G., Talley, R. W., Lane, M., Bonnet, J. D. (1975). Treatment of adenocarcinoma with combinations of cyclopjosphamide (NSC-26271), vincristine (NSC-67574), and 5-fluorouracil (NSC-19893) Cancer chemotherapy reports, 59(2 Pt 1), 425-7	POPULATION
135	Van Cutsem, E. (2004). Docetaxel in gastric cancer European Journal of Cancer, Supplement, 2(7), 52-58	POPULATION
136	Vestlev, P. M., Pedersen, H. (1990). Doxorubicin and 5-fluorouracil versus doxorubicin and oral ftorafur in in the treatment of advanced gastric cancer--a phase II and III trial Acta oncologica (Stockholm, Sweden), 29(7), 945	POPULATION
137	Villar, A., Asensio, F., Candel, M., Delgado, F., Garcia, J., Lled, oacute, Red, oacute, n, J., Roig, J. V., Sanchez, A., Sanchis, C. (1987). Chemotherapy of advanced gastric carcinoma (stage IV): a randomized study of FAM versus 5-FU plus BCNU Chemioterapia, 6(1), 57	POPULATION
138	Wang, S., Luan, J., Zhang, G. (2020). Apatinib combined with three-dimensional conformal radiotherapy can prolong advanced gastric cancer patients' survival times and improve their quality of life International Journal of Clinical and Experimental Medicine, 13(8), 5950-5958	POPULATION
139	Wang, Z., He, T., Yu, D., Qin, X., Geng, A., Yang, H. (2022). Neoadjuvant apatinib plus tegafur/gimeracil/oteracil potassium (S-1)/oxaliplatin chemotherapy vs. chemotherapy alone in patients with locally advanced gastric carcinoma Experimental and Therapeutic Medicine, 24(4), 625	POPULATION
140	Wei, F. (2022). Clinical Efficacy and Adverse Reactions of Bevacizumab plus Radiochemotherapy in the Treatment of Advanced Gastric Cancer Journal of oncology, 2022(#issue#), #Pages#	POPULATION

No.	Reference	Reason for exclusion
141	Xiao, S. D., Li, D. H., Zhang, D. Z., Shen, M. J., Zhu, X. T., He, G. F., Zhao, T. P., Li, L. P., Deng, X. C., Wang, M., Wang, X. L., Chen, Q., Zhang, Y. P., Yao, C. L., Bao, J. G., Tong, G. W., Zhu, L. F., Jiang, H., Minoru, K. (1997). Multicenter randomized study on Me-CCNU, 5-FU and ADM vs ACNU, 5-FU and ADM for treatment of advanced gastric cancer World journal of gastroenterology, 3(4), 238	POPULATION
142	Xu, T., Cheng, Y., Wu, Y., Gong, R., Hu, J., Duan, Q. (2023). Effect of anlotinib combined with camrelizumab on clinical efficacy and short-term prognosis in male patients with advanced gastric cancer Journal of Men's Health, 19(5), 52-57	POPULATION
143	Zhang, C., Li, G., Fan, C., Xu, J., Cao, J., Liu, S., Li, N. (2012). Comparison of efficacy of different route of administration of chemotherapy on unresectable, advanced gastric cancer World Journal of Surgical Oncology, 10(#issue#), 162	POPULATION
144	Zhang, Z. D., Kong, Y., Yang, W., Zhang, B., Zhang, Y. L., Ma, E. M., Liu, H. X., Chen, X. B., Hua, Y. W. (2014). Clinical evaluation of cetuximab combined with an S-1 and oxaliplatin regimen for Chinese patients with advanced gastric cancer World journal of surgical oncology, 12(1), 115	POPULATION
145	Zhao, X. Y., Liu, X., Li, W. H., Qiu, L. X., Huang, M. Z., Wang, C. C., Chen, Z. Y., Zhang, W., Feng, W. J., Guo, W. J., Zhu, X. (2022). Randomized phase II study of TX followed by XELOX versus the reverse sequence for chemo-naive patients with metastatic gastric cancer Frontiers in Oncology, 12(#issue#), 911160	POPULATION
146	Zheng, L., Gan, L. H., Yao, L., Li, B., Huang, Y. Q., Zhang, F. B., Kuang, M. Q., Fang, N. (2023). Serum basic fibroblast growth factor and interleukin-1beta predict the effect of first-line chemotherapy in patients with advanced gastric cancer World Journal of Clinical Cases, 11(26), 6083-6090	POPULATION
147	(2007). Phase 2 Study of AMG 386 (20060439) in Combination With Cisplatin & Capecitabine in Subjects With Metastatic Gastric, Gastroesophageal Junction, or Distal Esophageal Adenocarcinoma A Randomized, Double Blind, Multi-Center, Phase 2 Study to Estimate the Efficacy and Evaluate the Safety and Tolerability of Cisplatin & Capecitabine (CX) in Combination With AMG 386 or Placebo in Subjects With Metastatic Gastric, Gastroesophageal Junction, or Distal Esophageal Adenocarcinoma, #volume#(#issue#), #Pages#	INTERVENTION/COMPARATOR
148	Cascinu, S., Cordella, L., Catalano, G. (1994). Neuroprotective effect of reduced glutathione (GSH) on cisplatin based chemotherapy in advanced gastric cancer: a double blind randomized trial Proc-annu-meet-am-soc-clin-oncol, 13(#issue#), ABS	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
149	Chen, Y., Chen, Y., Wang, Z., Li, H., Wang, Y. (2022). Clinical value of propranolol combined with oxaliplatin and tigio in concurrent chemoradiotherapy for locally advanced gastric cancer Pakistan journal of medical sciences, 38(5), #Pages#	INTERVENTION/COMPARATOR
150	Jafa, E., Charles, L., Nisha, Y., Kate, V., Kayal, S., Ganesh, R. N., V.C, S., Ganesan, P., Penumadu, P., Dubashi, B. (2023). Comparison of Efficacy of Aspirin Plus EOX vs. EOX Alone in Patients with Locally Advanced and Metastatic Gastric Cancer: a Randomized Clinical Trial Journal of Gastrointestinal Cancer, 54(2), 642-650	INTERVENTION/COMPARATOR
151	Kim, Y. I., Kim, M. J., Park, S. R., Kim, H. K., Cho, S. J., Lee, J. Y., Kim, C. G., Kim, G. H., Park, M. I., Nam, B. H., Park, Y. I., Choi, I. J. (2017). Effect of a proton pump inhibitor on tumor bleeding prevention in unresectable gastric cancer patients: A double-blind, randomized, placebo-controlled trial Journal of Gastric Cancer, 17(2), 120-131	INTERVENTION/COMPARATOR
152	Lu, Zhihao, Fang, Yu, Liu, Chang, Zhang, Xiaotian, Xin, Xiaowei, He, Yi, Cao, Yanshuo, Jiao, Xi, Sun, Tianqi, Pang, Ying, Wang, Yanli, Zhou, Jun, Qi, Changsong, Gong, Jifang, Wang, Xicheng, Li, Jian, Tang, Lili, Shen, Lin (2021). Early Interdisciplinary Supportive Care in Patients With Previously Untreated Metastatic Esophagogastric Cancer: A Phase III Randomized Controlled Trial Journal of clinical oncology : official journal of the American Society of Clinical Oncology, 39(7), 748-756	INTERVENTION/COMPARATOR
153	Sandhya, L., Devi Sreenivasan, N., Goenka, L., Dubashi, B., Kayal, S., Solaiappan, M., Govindarajalou, R., Kt, H., Ganesan, P. (2023). Randomized Double-Blind Placebo-Controlled Study of Olanzapine for Chemotherapy-Related Anorexia in Patients With Locally Advanced or Metastatic Gastric, Hepatopancreaticobiliary, and Lung Cancer Journal of Clinical Oncology, 41(14), 2617-2627	INTERVENTION/COMPARATOR
154	Su, A., Pan, Z. H., Wang, X., Lv, X., Cai, Q. Q., Gao, Y. (2013). Cyclooxygenase-2 inhibitor combined with capecitabine and oxaliplatin (XELOX) as a first-line therapy for advanced gastric cancer: An analysis of 24 cases World Chinese Journal of Digestology, 21(3), 261-265	INTERVENTION/COMPARATOR
155	(1999). Comparison of Combination Chemotherapy Regimens in Treating Patients With Advanced Stomach Cancer Randomized Phase II Trial of Either 5-Fluorouracil, Recombinant Alfa-2a-Interferon and Intravenous Hydroxyurea With Filgrastim Support (FHIG) or Doxorubicin/Docetaxel (Dd) in Patients With Advanced Gastric Cancer, #volume#(#issue#), #Pages#	STUDY DESIGN
156	(2008). Study of TS-1 or TS-1 + PSK for Gastric Cancer Patients Phase III Randomized Controlled Study of Postoperative Adjuvant Therapy Using TS-1 or TS-1+PSK for Stage II or III Gastric Cancer Patients, #volume#(#issue#), #Pages#	STUDY DESIGN

No.	Reference	Reason for exclusion
157	Ajani, J., Rodriquez, W., Bodoky, G., Moiseyenko, V., Lichinitser, M., Gurbunova, V., Vynnychenko, I., Garin, A., Lang, I., Falcon, S. (2009). Multicenter phase III comparison of cisplatin/S-1 (CS) with cisplatin/5-FU (CF) as first-line therapy in patients with advanced gastric cancer (FLAGS): secondary and subset analyses Journal of clinical oncology, 27(15S Part I), 204	STUDY DESIGN
158	Ajani, J. A., Fodor, M., Van Cutsem, E., Tjulandin, S., Moiseyenko, V., Cabral, F., Majlis, A., Chao, Y., Zuber, E., Blattmann, A., et al. (2000). Multinational randomized phase II trial of docetaxel (T) and cisplatin (C) with or without 5-fluorouracil (FU) in patients (PTS) with advanced gastric or GE junction adenocarcinoma (AGC-AGEJC) Proceedings of the american society of clinical oncology, 19(#issue#), 247a	STUDY DESIGN
159	Ajani, J. A., Van Cutsem, E., Moiseyenko, V., Tjulandin, S., Fodor, M., Majlis, A., Boni, C., Zuber, E., Blattmann, A. (2003). Docetaxel (D), cisplatin, 5-fluorouracil compare to cisplatin (C) and 5-fluorouracil (F) for chemotherapy-naive patients with metastatic or locally recurrent, unresectable gastric carcinoma (MGC): interim results of a randomized phase III trial (V325) Proceedings of the american society of clinical oncology, #volume#(#issue#), 249	STUDY DESIGN
160	Al Batran, S., Hartmann, J. T., Probst, S., Hofheinz, R., Stoehlmacher, J., Schmalenberg, H., Hollerbach, S., Schuch, G., Homann, N., Jager, E. (2006). A randomized phase III trial in patients with advanced adenocarcinoma of the stomach receiving first-line chemotherapy with fluorouracil, leucovorin and oxaliplatin (FLO) versus fluorouracil, leucovorin and cisplatin (FLP) Journal of clinical oncology: ASCO annual meeting proceedings, 24(18S), LBA4016	STUDY DESIGN
161	Al-Batran, S. E., Hartmann, J. T., Probst, S., Hofheinz, R., Stoehlmacher, J., Homann, N., Seipelt, G., Fritz, M., Rethwisch, V., Pauligk, C., Hollerbach, S., Schuch, G., Schmalenberg, H., Grossmann, J., Gorner, M., Derigs, G., Bokemeyer, C., Knuth, A., Jager, E., on behalf of the, A. I. O. Colorectal Study Group (2007). Final results of a randomized phase III trial in patients with advanced adenocarcinoma of the stomach receiving first line chemotherapy with fluorouracil, leucovorin and oxaliplatin versus fluorouracil, leucovorin and cisplatin Onkologie, 30(Suppl 3), 34	STUDY DESIGN
162	Al-Batran, S. E., St, Ntilde, dagger, hlmacher, J., Probst, S., Hollerbach, S., Wilhelm, G., Derigs, H. G., Seipelt, G., Kojouharoff, G., Graubner, M., Hinke, A., Eth, acute, ger, E. (2005). Fluorouracil, leucovorin and oxaliplatin (FLO) versus fluorouracil, leucovorin and cisplatin (FLP) as a first line therapy for patients with advanced gastric cancer; first interim analysis of a randomised multicenter phase II study Annual meeting proceedings of the american society of clinical oncology, 23(#issue#), 311	STUDY DESIGN

No.	Reference	Reason for exclusion
163	Anonymous (2016). Antibody Improves Survival in Gastric Cancer Cancer discovery, 6(8), OF8	STUDY DESIGN
164	Balana, C., Camps, C., Diaz-Rubio, E., Jimeno, J., Dorta, J., Massuti (1990). Treatment of advanced gastric cancer (GC) with a fluorouracil (F) or a cisplatin (P) based chemotherapy. A study of the spanish cooperative group for gastrointestinal tumor therapy (TTD) Ann-oncol, 1(Suppl), 43	STUDY DESIGN
165	Bazin, I., Garin, A. (1999). Control of symptoms by chemotherapy in patients with advanced gastric cancer Supportive care in cancer, 7 Suppl(#issue#), 209	STUDY DESIGN
166	Berenberg, J. L., Goodman, P. J., Oishi, N., Fleming, T., Natale, R. B., Hutchins, L. H., Guy, G. T., MacDonald, J. (1989). 5-Fluorouracil and Folinic acid: for the treatment of metastatic gastric cancer Proc-annu-meet-am-soc-clin-oncol, #volume#(#issue#), #Pages#	STUDY DESIGN
167	Bodoky, G., Carrato, A., Ravaioli, A., Ajani, J. A. (2012). Quality of life in flags trial a randomized, comparative, open label, multicenter, phase 3 of S-1 + cisplatin (CS) compared to 5-fu + cisplatin (CF) in untreated advanced gastric cancer (AGC) patients Annals of oncology, 23 (Supplement 9)(#issue#), ix232	STUDY DESIGN
168	Bonnetain, F., Bouch, eacute, Raoul, J. L., Giovannini, M., Etienne, P. L., Bedenne, L., Seitz, J. F., Lledo, G., Conroy, T., Arveux, P. (2004). Longitudinal quality of life (QoL) study in a randomized phase II trial (FFCD 9803) assessing LV5FU2, LV5FU2-cisplatin or LV5FU2-irinitecan in patients (pts) with metastatic gastric adenocarcinoma (MGA) Annual meeting proceedings of the american society of clinical oncology, #volume#(#issue#), 349	STUDY DESIGN
169	Boukovinas, I., Androulakis, N., Polyzos, A., Vardakis, N., Amarantidis, K., Bozionelou, V., Kouroussis, C., Giassas, S., Christophyllakis, C., Mavroudis, D. (2009). A randomized phase II trial of irinotecan plus oxaliplatin versus oxaliplatin, fluorouracil (5 FU), leukovorin (LV) as first-line treatment in advanced gastric cancer Journal of clinical oncology, 27(15S Part I), 210	STUDY DESIGN
170	Bruckner, H. W., Srablein, D. M. (1986). A randomized study of 5-luorouracil (F) and Doxorubicin (A) with Semustine (Me), Cis-platinum (P), or Triazinate (T) for treatment of advanced gastric cancer Proc-annu-meet-am-soc-clin-oncol, #volume#(#issue#), #Pages#	STUDY DESIGN

No.	Reference	Reason for exclusion
171	Cascinu, S., Labianca, R., Catalano, V., Ferrau, F., Pucci, F., Silva, R., Luppi, G., Berardi, R., Berretta, G. D. (2008). Pegylated liposomal doxorubicin, 5-fluorouracil and cisplatin versus mitomycin-C, 5-fluorouracil and cisplatin for advanced gastric cancer: a randomised phase II trial Journal of clinical oncology, 26(15S part I), 622	STUDY DESIGN
172	Cirera, L. (1993). Adjuvant chemotherapy in stage III gastric cancer: preliminary results European journal of cancer, 29A(Suppl 6), S102	STUDY DESIGN
173	Cirera, L., Cardona, T., Batiste, E., Arcusa, A., Tusquets, I., Saigi, E., Balil, A., Jolis, L., Guasch, I., Badia, A., Boleda, M. (1992). Randomized trial of adjuvant chemotherapy vs. control in stage III gastric cancer Proc-annu-meet-am-soc-clin-oncol, #volume#(#issue#), #Pages#	STUDY DESIGN
174	Cirera, L., Esbri, A. Balil E Batiste I Tusquets T Cardona A Arcusa L Jolis E Saigi I Guasch A Badia M Boleda R (1997). Efficacy of adjuvant mitomycin C plus tegafur in stage III gastric cancer Proc-annu-meet-am-soc-clin-oncol, #volume#(986 Tuesday May 20, 1997 Oral Session: Gastrointestinal Cancer (Hall A), #Pages#	STUDY DESIGN
175	Colucci, G., Maiello, E., Argese, V., Contillo, A., Galetta, D., Pezzella, G., Daniele, N., Carotenuto, M. (1990). Folinic acid at high dosage and fluorouracil vs epidoxorubicin in advanced gastric carcinoma Tumori, 76 Suppl(Abstr. 321), 129	STUDY DESIGN
176	Colucci, G., Maiello, E., Lacatena, M., Giuliani, F., Pezzella, G., Giotta, F. (1990). Folinic acid (FA) + FU alone or with 4-epidoxorubicin in advanced gastric carcinoma Ann-oncol, 1(supplement), 45	STUDY DESIGN
177	Colucci, G., Maiello, E., Valori, V., Pezzella, G., Giuliani, F. (1991). A randomized study with 5-FU + Folinic acid (FA) alone or with Epirubicin (E) in advanced gastric carcinoma European journal of cancer, 27(Supp. 2), S81	STUDY DESIGN
178	Cullinan, S., Moertel, C., Wieand, H., Poon, M. (1993). A randomized comparison of fluorouracil + Adriamycin + cisplatin (FAP), fluorouracil + Adriamycin + semustine (FAMe), FAMe alternating with triazinate (T), and fluorouracil alone in advanced gastric carcinoma. A North Central Cancer Treatment Group study Proceedings of the american society of clinical oncology, 12(#issue#), 200	STUDY DESIGN

No.	Reference	Reason for exclusion
179	Ducreux, M., Rougier, P., Lasser, P., Pignon, J. P., Mahjoubi, M., Elias, D., Fabri, M. C., Bellefqih, S., Cvitkovic, E. Armand J. P., et al. (1993). Neoadjuvant chemotherapy (NCT) in locally advanced gastric carcinoma (LAGC): does it increase long-term survival? Proc-annu-meet-am-soc-clin-oncol, 12(#issue#), ABS	STUDY DESIGN
180	Fujiwara, Y., Ishigami, H., Fukushima, R., Nashimoto, A., Yabusaki, H., Imamoto, H., Imano, M., Kodera, Y., Uenosono, Y., Amagai, K., Kadowaki, S., Miwa, H., Yamaguchi, H., Yamaguchi, T., Kitayama, J. (2016). Phase III study comparing intraperitoneal paclitaxel plus S-1/paclitaxel with S-1/cisplatin in gastric cancer patients with peritoneal metastasis: PHOENIX-GC trial Annals of Oncology, 27(Supplement 6), vi209	STUDY DESIGN
181	Galvez, C. A., Bonamassa, M., Pire, P. (1991). 5-Fluorouracil (F) + 4'Epiadriamycin (E) + Cisplatin (C) vs. Cisplatin (C) + Etoposide (E) + 5-Fluorouracil (F) in patients with advanced gastric cancer European journal of cancer, 27(Supp. 2), S79	STUDY DESIGN
182	Garc, iacute, a, J., Blanes, F., Roig, J. V., Viciano, V., Aguilo, J., Llopis, F., Asencio, F., Sanch, iacute, s, C., Mart, iacute, nez, M., Candel, T., Redon, J., Lledo, S., Delgado, F., Villar, A. (1988). 5-FU in perfusion and adriamycin (FA ad) vs. 5-FU in perfusion and BCNU (FUB ad) in the treatment of advanced gastric adenocarcinoma Oncología, #volume#(Suppl.10), 32	STUDY DESIGN
183	Huang, X., He, D., Lai, L., Chen, J., Zhang, Y., Mao, H. (2023). Evaluation of clinical efficacy, adverse reactions, and safety of PD-1 inhibitors combined with chemotherapy when treating advanced gastric cancer BMC Gastroenterology, 23(1), 374	STUDY DESIGN
184	Janjigian, Y. Y., Shitara, K., Moehler, M., Garrido, M., Salman, P., Wyrwicz, L., Yamaguchi, K., Skoczylas, T., Bragagnoli, A. C., Liu, T., Schenker, M., Yanez, P., Tehfe, M., Kowalyszyn, R., Karamouzis, M. V., Bruges, R., Zander, T., Pazo-Cid, R., Hitre, E., Feeney, K., Cleary, J. M., Poulart, V., Cullen, D., Lei, M., Xiao, H., Kondo, K., Li, M., Ajani, J. A. (2023). A plain language summary of the CheckMate 649 study: nivolumab in combination with chemotherapy compared to chemotherapy alone for untreated advanced or metastatic cancer of the stomach or esophagus Future Oncology, 19(11), 739-752	STUDY DESIGN
185	Jiang, J., Zheng, X., Xu, X., Zhou, Q., Yan, H., Zhang, X., Lu, B., Wu, C., Ju, J. (2011). Prognostic significance of miR-181b and miR-21 in gastric cancer patients treated with S-1/Oxaliplatin or Doxifluridine/Oxaliplatin PLoS ONE, 6(8), e23271	STUDY DESIGN
186	Jieyun, W., Weihao, L., Zhongxu, W. (2019). Relationship between TP and DPD expressions in gastric cancer and the efficacy of capecitabine or S-1 combined with oxaliplatin Acta Medica Mediterranea, 35(4), 2271-2275	STUDY DESIGN

No.	Reference	Reason for exclusion
187	Kato, K., Shah, M. A., Enzinger, P. C., Bennouna, J., Shen, L., Adenis, A., Sun, J. M., Cho, B. C., Ozguroglu, M., Kojima, T., Kostorov, V., Hierro, C., Zhu, Y., Shah, S., Bhagia, P., Doi, T. (2018). Phase III KEYNOTE-590 study of chemotherapy + pembrolizumab versus chemotherapy + placebo as first-line therapy for patients (Pts) with advanced esophageal or esophagogastric junction (E/EGJ) cancer Annals of oncology : official journal of the european society for medical oncology, 29(#issue#), viii268	STUDY DESIGN
188	Kilickap, S., Yalcin, S., Ates, O., Tekuzman, G. (2011). The First line systemic chemotherapy in metastatic gastric carcinoma: A comparison of Docetaxel, Cisplatin and Fluorouracil (DCF) versus Cisplatin and Fluorouracil (Cf); versus Epirubicin, Cisplatin and Fluorouracil (ECF) regimens in clinical setting Hepato-Gastroenterology, 58(105), 208-212	STUDY DESIGN
189	Kim, N. K., Park, Y. S., Suh, C. I., Kang, W. K., Kim, H. T., Heo, D. S., Bang, Y. J. (1991). Phase III randomized comparison of 5-FU vs. FAM(5-FU/ADRIA/MMC) vs. FP(5-FU/Cisplatin) in patients with advanced gastric carcinoma Proc-annu-meet-am-soc-clin-oncol, #volume#(#issue#), #Pages#	STUDY DESIGN
190	Klempner, S. J., Lee, K. W., Shitara, K., Metges, J. P., Lonardi, S., Ilson, D. H., Fazio, N., Kim, T. Y., Bai, L. Y., Moran, D., Yang, J., Arozullah, A., Park, J. W., Raizer, J. J., Bang, Y. J., Shah, M. A. (2023). ILUSTRO: Phase II Multicohort Trial of Zolbetuximab in Patients with Advanced or Metastatic Claudin 18.2-Positive Gastric or Gastroesophageal Junction Adenocarcinoma Clinical Cancer Research, 29(19), 3882-3891	STUDY DESIGN
191	Koizumi, W. (2009). Clinical development of S-1 plus cisplatin therapy as first-line treatment for advanced gastric cancer Gastric Cancer, 12(SUPPL. 1), 50-54	STUDY DESIGN
192	Kurihara, M., Yoshida, S., Ohkubo, T., Takahashi, H., Suga, S., Izumi, T., Akazawa, S., Yaosaka, T., Betsuyaku, T., Kiyohashi, A., et al. (1989). Tegafur + MMC vs. UFT + MMC therapy in advanced gastric cancer Proceedings of the american society of clinical oncology, 8(#issue#), 125	STUDY DESIGN
193	Kurokawa, Y., Boku, N., Yamaguchi, T., Ohtsu, A., Mizusawa, J., Nakamura, K., Fukuda, H. (2016). Inter-institutional heterogeneity in outcomes of chemotherapy for metastatic gastric cancer: correlative study in the JCOG9912 phase III trial ESMO open, 1(1), e000031	STUDY DESIGN

No.	Reference	Reason for exclusion
194	Lacave, A., Dalesio, O., Bleiberg, H., Wils, J., Diaz Rubio, E., Vendrik, C., Duez, N. (1985). A randomized trial of MeFA (MethylCCNU (Me), 5-Fluorouracil (F), Adriamycin (A)) vs FA in advanced gastric cancer Proc-annu-meet-am-soc-clin-oncol, #volume#(#issue#), #Pages#	STUDY DESIGN
195	Ma, X., Peng, L., Wang, J., Gao, L., Zhang, W., Lu, X., Liu, J., Yang, L. (2023). Autologous CIK cells combined with chemotherapy as the first-line treatment for locally advanced or metastatic gastric cancer is safe and feasible Frontiers in Immunology, 14(#issue#), 1267369	STUDY DESIGN
196	Massuti, B., Cervantes, A., Anton, A., Aranda, E., Diaz-Rubio, E., Abad, A., Jara, C., Rivera, A., Garcia-Paredes, M. L. (1994). A phase III multicenter randomized study in advanced gastric cancer (GC): fluorouracil + leucovorin + epirubicin + cisplatin (FLEP) versus fluorouracil + adriamycin + methotrexate + leucovorin (FAMTX): toxicity report Annals of oncology, 5(Suppl 8), 76	STUDY DESIGN
197	O'Connell, M. J., Moertel, C. G., Lavin, P. T. (1978). Adriamycin, 5-Fluorouracil + Mitomycin C + Cytosine arabinoside, and 5-Fluorouracil + Adriamycin + Methyl CCNU in advanced gastric carcinoma Proc-annu-meet-am-soc-clin-oncol, #volume#(#issue#), #Pages#	STUDY DESIGN
198	O'Connell, M. O'Fallon J. Lavin P. Moertel C. Bruckner H. Douglass Jr H. Livstone E. Lokich J. Mitchell M. (1980). A comparative assessment of combination chemotherapy in advanced gastric cancer Proc-annu-meet-am-soc-clin-oncol, #volume#(#issue#), #Pages#	STUDY DESIGN
199	Ohta, K., Nakajima, T., Ohyama, S., Kokudo, N., Matsubara, T., Yamaguchi, T., Takahashi, T., Muto, T. (2001). [Neoadjuvant chemotherapy for advanced gastric cancer] Nihon rinsho. Japanese journal of clinical medicine, 59 Suppl 4(#issue#), 456-62	STUDY DESIGN
200	Ohtsu, A., Van Cutsem, E., Shah, M., Rha, S. Y., Sawaki, A., Park, S. R., Lim, H. Y., Wu, J., Langer, B., Kang, Y. K. (2010). Avagast: randomized, double-blind, placebo-controlled, multicentre phase III study of capecitabine/cisplatin + bevacizumab or placebo as 1st-line therapy in patients with advanced gastric cancer Annals of oncology, 21(Suppl 6), 14	STUDY DESIGN
201	Qiao, G., Wang, X., Zhou, L., Zhou, X., Song, Y., Wang, S., Zhao, L., Morse, M. A., Hobeika, A., Song, J., Yi, X., Xia, X., Ren, J., Lyerly, H. K. (2019). Autologous dendritic cell-cytokine induced kille cell immunotherapy combined with S-1 plus cisplatin in patients with advanced gastric cancer: A prospective study Clinical Cancer Research, 25(5), 1494-1504	STUDY DESIGN

No.	Reference	Reason for exclusion
202	Ross, P., Cunningham, D., Scarffe, H., Nicolson, M., Seymour, M., Harper, P., Price, T., Hill, A., erson, H., Iveson, T., Hickish, T., Lofts, F., Norman, A. (1999). Results of a randomised trial comparing ECF with MCF in advanced oesophago-gastric cancer European journal of cancer, 35(Suppl 4), 137	STUDY DESIGN
203	Roth, A., Kolaric, K., Zupanc, D. (1996). Does the addition of cisplatin to high doses of 5-fluor-ouracil and epirubicin in advanced gastric cancer results in better response to therapy Ann-oncol, 7(Suppl 1), 136	STUDY DESIGN
204	Roth, A., Kolaric, K., Zupanc, D. (1996). Does the Addition of Cisplatin to High Doses of 5-Fluorouracile and Epirubicin in Advanced Gastric Cancer Results in Better Response to Therapy Gut, 39 Suppl 3(#issue#), A94	STUDY DESIGN
205	Roth, A. D., Maibach, R., Falk, S., Stupp, R., Saletti, P., Eth, berle, D., Borner, M. M., Honegger, H. P., Leslie, M., Fazio, N. (2004). Docetaxel-cisplatin-5FU (TCF) versus docetaxel-cisplatin (TC) versus epirubicin-cisplatin-5FU (ECF) as systemic treatment for advanced gastric carcinoma (AGC): a randomized phase II trial of the Swiss Group for Clinical Cancer Research (SAKK) Journal of clinical oncology : ASCO annual meeting proceedings, 22(14S), 317	STUDY DESIGN
206	Roth, A. Zd (1997). Randomised clinical study (phase III) FE vs. FEP in advanced gastric cancer Proc-eur-cancer-conf (ECCO), #volume#(#issue#), #Pages#	STUDY DESIGN
207	Rougier, P., Droz, J. P., Theodore, C., Piot, G., Herait, P., Ruffie, P., Carde, P., Cvitkovic, E. (1987). Phase II trial of combined 5-fluorouracil plus doxorubicin plus cisplatin (FAP regimen) in advanced gastric carcinoma Cancer treatment reports, 71(12), 1301-1302	STUDY DESIGN
208	Sakata, Y., Sugawara, K., Komatsu, Y. (1979). The effectiveness of MQF-OK treatment for inoperable gastric cancer - especially, in comparison with MFC treatment Journal of Japan Society for Cancer Therapy, 17 th Congr.(#issue#), 6	STUDY DESIGN
209	Scheithauer, W., Kornek, G., Hejna, M., Depisch, D., Raderer, M., Huber, H. (1996). Palliative chemotherapy versus best supportive care in patients with metastatic gastric cancer: a randomized trial Annals of hematology, 73(Suppl 2), A181	STUDY DESIGN
210	Schenk, T., Kornek, G., Schulz, F., Depisch, D., Rosen, H., Sebesta, Ch, Scheithauer, W. (1992). Phase I/II study of epirubicin, fluorouracil and leucovorin in advanced adenocarcinoma of the stomach: final results Annals of hematology, 65(Suppl), A2	STUDY DESIGN

No.	Reference	Reason for exclusion
211	Schnitzler, G., Queisser, W., Heim, M. E., Konig, H., Katz, R., Fritze, D., Herrmann, R., Arnold, H., Henss, H., Trux, F. A., Bloch, R., Keymling, M., Wolkewitz, K. D., Fritsch, H., Hanisch, I., Brumen, L., Edler, L. (1984). Randomized trial of 5-fluorouracil plus carmustin (FB) versus 5-fluorouracil, carmustin, and adriamycin (FAB) in advanced gastric cancer patients Journal of cancer research and clinical oncology, 107(Suppl), S53	STUDY DESIGN
212	Shirao, K., Boku, N., Yamada, Y., Yamaguchi, K., Doi, T., Takiuchi, H., Nasu, J., Nakamura, K., Fukuda, H., Ohtsu, A. (2009). Randomized phase III study of 5-fluorouracil continuous infusion (5FUci) versus methotrexate and 5-FU sequential therapy (MF) in gastric cancer with peritoneal metastasis (JCOG0106) Journal of clinical oncology, 27(15S Part I), 213	STUDY DESIGN
213	Stohlmacher, J., Al-Batran, S., Bokemeyer, C., Probst, S., Seipelt, G., Hegewisch-Becker, S., Hollerbach, H., Derigs, H., Hartmann, J., Schuch, G., Hoffken, K., Jager, E. (2005). Multicenter, randomized phase II trial comparing fluorouracil, leucovorin and oxaliplatin (FLO) versus fluorouracil, leucovorin and cisplatin (FLP) as a first line therapy in patients with advanced gastric cancer - results of an interim analysis Onkologie, 28(Suppl 3), 146	STUDY DESIGN
214	Sugarman, R., Botteman, M., Rusibamayila, N. (2022). A quality-adjusted time without symptoms or toxicity (Q-TWiST) analysis of patients in CheckMate 649: nivolumab plus chemotherapy versus chemotherapy as first-line treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC) Journal of clinical oncology, 40(4 SUPPL), #Pages#	STUDY DESIGN
215	Sugarman, R., Nunna, S., Betts, K. A., Nie, X., Nguyen, H. (2022). Number needed to treat (NNT) analysis of patients in CheckMate 649 (CM 649): nivolumab plus chemotherapy versus chemotherapy as first-line (1L) treatment for advanced gastric cancer, gastroesophageal junction cancer, and esophageal adenocarcinoma (GC/GEJ/EAC) Journal of clinical oncology, 40(4 SUPPL), #Pages#	STUDY DESIGN
216	Tebbutt, N., Norman, A., Cunningham, D., Iveson, T., Nicholson, M., Hickish, T., Durrant, C., Oates, J., Hill, M. (2002). Randomised, multicentre phase III study comparing capecitabine with fluorouracil and oxaliplatin with cisplatin in patients with advanced oesophago-gastric cancer; interim analysis Onkologie, 25(Suppl 3), 27	STUDY DESIGN

No.	Reference	Reason for exclusion
217	Thuss Patience, P., Kretzschmar, A., Vielhaber, A., Repp, M., Junkers, R., Tiling, N., Hennesser, D., Micheel, S., ouml, rken, B., Reichardt, P. (2001). Docetaxel and 5-FU continuous infusion (DF) versus epirubicin, cisplatin and 5-FU (ECF) for advanced gastric adenocarcinoma; a randomized phase II study European journal of cancer, 37(Suppl 6), 315	STUDY DESIGN
218	Tsuburaya, A., Morita, S., Kodera, Y., Kobayashi, M., Shitara, K., Yamaguchi, K., Yoshikawa, T., Yoshida, K., Yoshino, S., Sakamoto, J. I. (2012). A randomized phase II trial to elucidate the efficacy of capecitabine plus cisplatin (XP) and S-1 plus cisplatin (SP) as a first-line treatment for advanced gastric cancer: XP ascertainment vs. SP randomized PII trial (XParTS II) BMC Cancer, 12(#issue#), 307	STUDY DESIGN
219	Tsuburaya, A., Narahara, H., Imamura, H., Hatake, K., Imamoto, H., Esaki, T., Kato, M., Furukawa, H., Hamada, C., Sakata, Y. (2009). Updated result on the 2.5-year follow-up of GC0301/TOP-002: randomized phase III study of irinotecan plus S-1 (IRI-S) versus S-1 alone as first-line treatment for advanced gastric cancer (AGC) Journal of clinical oncology, 27(15S Part I), 212	STUDY DESIGN
220	Uboha, N. V., Graham, N., Rajdev, L., Gibson, M. K., Fisher, G. A., Lin, S. H., Chakravarthy, B., O'Dwyer, P. J. (2022). EA2183: A phase III study of consolidative radiotherapy in patients with oligometastatic HER2-negative esophageal and gastric adenocarcinoma Journal of Clinical Oncology, 40(16 Supplement 1), #Pages#	STUDY DESIGN
221	Vanhoefer, U., Wilke, H., Fink, U., Kohne Wompner, C., Preusser, P., Korn, W. M., Stahl, M., Achterrath, W., Harstrick, A., Klaassen, U. (1995). Weekly 24-hr infusion of high-dose FU (HD-FU) plus folinic acid (FA) plus biweekly cisplatin (C) = (group A) or HD-FU/FA/C plus epirubicin (E) = (group B) in locally advanced (LAD) or metastatic (M1) advanced gastric cancer (GC) Proc-annu-meet-am-soc-clin-oncol, 14(#issue#), ABS	STUDY DESIGN
222	Waitzberg, D. L., Bresciani, C., Gama-Rodrigues, J., Souza, J. M. P., Matsuda, M., Pinotti, H. W. (1986). Clinical trial of fluorouracil-adriamycin-mitomycin (FAM) in advanced gastric cancer (ABSTRACT) Digestive surgery, 3(1-2), 74	STUDY DESIGN
223	Wilke, H., Vanhoefer, U., Fink, U., Kohne-Wompner, C. H., Stahl, M., Klaassen, U., Strumberg, D., Eberhardt, W., Schmoll, H. J., Seeber, S. (1994). Pilot study with weekly high-dose FU/folinic acid (HD-FU/FA) plus biweekly cisplatin (C) = (Group A) or HD-FU/FA plus alternating C/epidoxorubicin (E) = (Group B) for advanced gastric cancer (GC) Onkologie, 17(Suppl 2), 167	STUDY DESIGN
224	Wilke, H., Wils, J., Rougier, P., Lacave, A., Van Cutsem, E., Vanhoeferi, U., Sahmoud, T., Curran, D., Marinus, A. (1995). Preliminary analysis of a randomized phase III trial of FAMTX versus ELF versus cisplatin/FU in advanced gastric cancer (GC). A trial of the	STUDY DESIGN

No.	Reference	Reason for exclusion
	EORTC Gastrointestinal Tract Cancer Cooperative Group and the AIO (Arbeitsgemeinschaft Internistische Onkologie) Proc-annu-meet-am-soc-clin-oncol, 14(#issue#), ABS	
225	Wils, J., Klein, H., Bleiburg, H., Buyse, M., Wagener, DTh, Diaz-Rubio, E., Kleeberg, U., Reis, H., Duez, N. (1987). EORTC 40851: a Gastrointestinal Group randomized evaluation of the toxicity of sequential high dose methothrexate (MTX) and 5-fluorouracil (F) combined with Adriamycin (A) (FAMTX) versus F, A and mitomycin C (M) (FAM) in advanced gastric cancer Proceedings of the american society of clinical oncology, 6(#issue#), 73	STUDY DESIGN
226	Wils, J., Klein, H., Bleiburg, H., Buyse, M., Wagener, D. T. H., Diaz-Rubio, E., Kleeberg, U., Reis, H., Duez, N. (1987). Eortc 40951: a gastrointestinal (GI) group randomized evaluation of the toxicity of sequential high dose Methothrexate (MTX) and 5-Fluorouracil (F) combined with Adriamycin (A) (FAMTX) versus F, A and Mitomycin C (M) (FAM) in advanced gastric cancer Proc-annu-meet-am-soc-clin-oncol, #volume#(#issue#), #Pages#	STUDY DESIGN
227	Wils, J., Klein, H. O., Bleiberg, H., Buyse, M., Wagener, D. J., Conroy, T., Diaz Rubio, E., Fickers, M., Korsten, F., Leyvraz, S., et al. (1990). Famtx (5-fu [f], adriamycin [a] and methotrexate [mtx]): a step ahead in the treatment of advanced gastric cancer (meeting abstract) Proc-annu-meet-am-soc-clin-oncol, 9(#issue#), 102	STUDY DESIGN
228	Wils, J., Klein, H. O., Bleiberg, H., Buyse, M., Wagener, D. T. H. Conroy T., Diaz-Rubio, E., Hillen, H., Korsten, F. W., Reis, H., Duez, N. (1989). EORTC 40851: sequential high dose Methotrexate and 5-Fluoro-uracil (F) combined with Adriamycin (A) versus F, A, and Mitomycin C in advanced gastric cancer Proc-annu-meet-am-soc-clin-oncol, #volume#(#issue#), #Pages#	STUDY DESIGN
229	Wils, J. A., Wagener, DJTh, Coombes, R. C., Fountzilas, G., Bliss, Jm Lm, Monaghan, H., Woods, E. (1994). Phase III trial of fluorouracil, methotrexate and epirubicin (FEMTX) versus FEMTX plus cisplatin (FEMTX-P) in advanced gastric cancer Annals of oncology, 5(Suppl 8), 79	STUDY DESIGN
230	Woolley, P., Smith, F., Estevez, R. (1981). A phase II trial of 5-FU, adriamycin and cisplatin (FAP) in advanced gastric cancer Proceedings of the American Association for Cancer Research, Vol. 22(#issue#), C-481	STUDY DESIGN
231	Yamada, Y. (2022). First-line treatment with nivolumab and chemotherapy for metastatic gastric cancer in East Asia is not supported by results of the ATTRACTION-4 trial Chinese clinical oncology, 11(5), 36	STUDY DESIGN

No.	Reference	Reason for exclusion
232	Yamaguchi, K., Minashi, K., Sakai, D., Nishina, T., Omuro, Y., Tsuda, M., Iwagami, S., Kawakami, H., Esaki, T., Sugimoto, N., Oshima, T., Kato, K., Amagai, K., Hosaka, H., Komine, K., Yasui, H., Negoro, Y., Ishido, K., Tsushima, T., Han, S., Shiratori, S., Takami, T., Shitara, K. (2022). Phase IIb study of pembrolizumab combined with S-1 + oxaliplatin or S-1 + cisplatin as first-line chemotherapy for gastric cancer Cancer Science, 113(8), 2814-2827	STUDY DESIGN
233	Yun, Jina, Kim, Kyoung-Mee, Kim, Seung Tae, Kim, Jung-Hoon, Kim, Jung A., Kong, Jee Hyun, Lee, Soo Hyeon, Won, Young-Woong, Sun, Jong-Mu, Lee, Jeeyun, Park, Se Hoon, Park, Joon Oh, Park, Young Suk, Lim, Ho Yeong, Kang, Won Ki (2010). Predictive value of the ERCC1 expression for treatment response and survival in advanced gastric cancer patients receiving cisplatin-based first-line chemotherapy Cancer research and treatment, 42(2), 101-6	STUDY DESIGN
234	Zhou, T., Wang, X. T., Zhang, S., Hu, H. F., Li, Y. X., Qiu, Y. J., Sun, H. K., Cao, Y., Ma, A. X., Li, H. C. (2022). CO1 The Health Outcome Analysis of Sintilimab for the First-Line Treatment of Advanced Gastric or Gastroesophageal Junction Adenocarcinoma: According to the Eq-5D-5L Value in Health, 25(12 Supplement), S17	STUDY DESIGN
235	Zhu, M., Tang, R., Doshi, S., Oliner, K. S., Dubey, S., Jiang, Y., Donehower, R. C., Iveson, T., Loh, E. Y., Zhang, Y. (2015). Exposure-response analysis of rilotumumab in gastric cancer: The role of tumour MET expression British Journal of Cancer, 112(3), 429-437	STUDY DESIGN
236	Ajani (2007). Clinical benefit with docetaxel plus fluorouracil and cisplatin compared with cisplatin and fluorouracil in a phase III trial of advanced gastric or gastroesophageal cancer adenocarcinoma: The V-325 Study Group (Journal of Clinical Oncology (2007) 25, (3205-3209)) Journal of Clinical Oncology, 25(35), 5678	OUTCOME
237	Lei, M., Janjigian, Y. Y., Ajani, J. A., Moehler, M., Wang, X., Shen, L., Garrido, M., Gallardo, C., Yamaguchi, K., Wyrwicz, L., Skoczylas, T., Bragagnoli, A., Liu, T., Tehfe, M., Elimova, E., Li, M., Poulart, V., Wang, Y., Doshi, P., Shitara, K. (2022). Nivolumab (NIVO) plus chemotherapy (chemo) vs chemo as first-line (1L) treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): CheckMate 649 biomarker analyses Cancer Research, 82(12 Supplement), #Pages#	OUTCOME
238	Lin, D., Nguyen, H., Shah, R., Qiao, Y., Hartman, J., Sugarman, R. (2023). Quality-adjusted time without symptoms or toxicity analysis of nivolumab plus chemotherapy versus chemotherapy alone for the management of previously untreated patients with advanced gastric cancer, gastroesophageal junction cancer, or esophageal adenocarcinoma Gastric Cancer, 26(3), 415-424	OUTCOME

No.	Reference	Reason for exclusion
239	Luo, Y., Li, Z., Cui, S., Shen, C., Zhao, J., Wu, M., Li, Y., Wang, M., Chen, R., Liu, Z., Ri-Li, G. (2014). Joint detection of ERCC1, TUBB3, and TYMS guidance selection of docetaxel, 5-fluorouracil and cisplatin (DDP) individual chemotherapy in advanced gastric cancer patients European journal of medical research, 19(1), #Pages#	OUTCOME
240	(1982). A comparison of combination chemotherapy and combined modality therapy for locally advanced gastric carcinoma. Gastrointestinal Tumor Study Group Cancer, 49(9), 1771	INCOMPLETE/INSUFFICIENT/PARTIAL DATA
241	Janjigian, Y. Y., Shitara, K., Ajani, J., Moehler, M., Yao, J., Shen, L., Garrido, M., Gallardo, C., Wyrwicz, L., Yamaguchi, K., Skoczylas, T., Bragagnoli, A., Liu, T., Schenker, M., Yanez, P., Kowalyszyn, R., Karamouzis, M., Zander, T., Feeney, K., Elimova, E., Nathani, R., Novosiadly, R., Lei, M. (2023). Nivolumab plus ipilimumab vs chemotherapy as first-line treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma: CheckMate 649 biomarker analyses Cancer Research, 83(8 Supplement), #Pages#	INCOMPLETE/INSUFFICIENT/PARTIAL DATA
242	Anonymous (1982). A comparative clinical assessment of combination chemotherapy in the management of advanced gastric carcinoma: The Gastrointestinal Tumor study Group Cancer, 49(7), 1362-6	DUPLICATE
243	Anonymous (1982). A comparison of combination chemotherapy and combined modality therapy for locally advanced gastric carcinoma. Gastrointestinal Tumor Study Group Cancer, 49(9), 1771-7	DUPLICATE
244	Anonymous (1983). Chemotherapy for advanced stomach cancer -- a controlled study of AF and MF Gan to kagaku ryoho. Cancer & chemotherapy, 10(10), 2171-2178	DUPLICATE
245	Anonymous (1988). Triazinate and platinum efficacy in combination with 5-fluorouracil and doxorubicin: results of a three-arm randomized trial in metastatic gastric cancer. Gastrointestinal Tumor Study Group Journal of the National Cancer Institute, 80(13), 1011-5	DUPLICATE
246	Anonymous (1990). The concept of locally advanced gastric cancer. Effect of treatment on outcome. The Gastrointestinal Tumor Study Group Cancer, 66(11), 2324-30	DUPLICATE
247	Bruckner, H. W., Gaynor, E. R., Levin, B., Weaver, D. W., Leichman, L. P., Douglass Jr, H. O., Nara, H. R., Penetrante, R., Goodwin, P., Kasler, M. H., Barkin, J. S., Benedetto, P., Reiner, D., Marsh, J. C., Livstone, E. M., Muggia, F. M., Green, M. D., Greenwald, E. S.	DUPLICATE

No.	Reference	Reason for exclusion
	(1988). Triazinate and platinum efficacy in combination with 5-fluorouracil and doxorubicin: results of a three-arm randomized trial in metastatic gastric cancer. Gastrointestinal Tumor Study Group Journal of the National Cancer Institute, 80(13), 1011	
248	Dai, Y., Yu, X., Xu, H., Zhuang, L., Zhang, M., Zou, Y., Fu, Q., Qiu, H., Yuan, X. (2022). A multicenter randomized phase III study of albumin-bound paclitaxel combined with S-1 (AS) versus oxaliplatin combined with S-1 (SOX) for first-line treatment of advanced gastric cancer (GAPSO study) Journal of clinical oncology, 40(4 SUPPL), #Pages#	DUPLICATE
249	Dai, Y. H., Yu, X. J., Xu, H. T., Zhuang, L., Zhang, M. S., Zou, Y. M., Fu, Q., Qiu, H., Yuan, X. L. (2022). Nab-paclitaxel plus S-1 versus oxaliplatin plus S-1 as first-line treatment in advanced gastric cancer: results of a multicenter, randomized, phase III trial (GAPSO study) Therapeutic Advances in Medical Oncology, 14(#issue#), #Pages#	DUPLICATE
250	Gastrointestinal Tumor Study, Group (1988). Triazinate and platinum efficacy in combination with 5-fluorouracil and doxorubicin: results of a three-arm randomized trial in metastatic gastric cancer Journal of the National Cancer Institute, 80(13), 1011	DUPLICATE
251	Guo, M., Yu, Y., Wang, Y., Cui, Y., Li, Q., Feng, Y., Li, W., Zhuang, R. Y., Liu, T. (2015). Low-dosed docetaxel showed equivalent efficacy but improved tolerability compared with oxaliplatin in the S-1-based first-line chemotherapy regimen for metastatic or recurrent gastric adenocarcinoma Medical Oncology, 32(9), 230	DUPLICATE
252	Hogner, A., Al-Batran, S. E., Siveke, J. T., Lorenz, M., Bartels, P., Breithaupt, K., Malfertheiner, P., Homann, N., Stein, A., Glaser, D., Tamm, I., Hinke, A., Vogel, A., Thuss-Patience, P. (2022). Pazopanib with 5-FU and oxaliplatin as first line therapy in advanced gastric cancer: A randomized phase-II study-The PaFLO trial. A study of the Arbeitsgemeinschaft Internistische Onkologie AIO-STO-0510 International Journal of Cancer, 150(6), 1007-1017	DUPLICATE
253	Janjigian, Y. Y., Shitara, K., Moehler, M. H., Garrido, M., Gallardo, C., Shen, L., Yamaguchi, K., Wyrwicz, L., Skoczylas, T., Bragagnoli, A. S. C., Liu, T., Tehfe, M., Elimova, E., Maya, R. E. B., Cleary, J. M., Karamouzis, M., Soleymani, S., Lei, M., Amaya-Chanaga, C., Ajani, J. A. (2023). Nivolumab (NIVO) plus chemotherapy (chemo) vs chemo as first-line (1L) treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): 3-year follow-up from CheckMate 649 Journal of Clinical Oncology, 41(4 Supplement), 291	DUPLICATE
254	Kang, Y. K., Chen, L. T., Ryu, M. H., Oh, D. Y., Oh, S. C., Chung, H. C., Lee, K. W., Omori, T., Shitara, K., Sakuramoto, S., Chung, I. J., Yamaguchi, K., Kato, K., Sym, S. J., Kadowaki, S., Tsuji, K., Chen, J. S., Bai, L. Y., Oh, S. Y., Choda, Y., Yasui, H., Takeuchi, K.,	DUPLICATE

No.	Reference	Reason for exclusion
	Hirashima, Y., Hagihara, S., Boku, N. (2022). Nivolumab plus chemotherapy versus placebo plus chemotherapy in patients with HER2-negative, untreated, unresectable advanced or recurrent gastric or gastro-oesophageal junction cancer (ATTRACTION-4): a randomised, multicentre, double-blind, placebo-controlled, phase 3 trial The Lancet Oncology, 23(2), 234-247	
255	Kojima, T., Hara, H., Tsuji, A., Yasui, H., Muro, K., Satoh, T., Ogata, T., Ishihara, R., Goto, M., Baba, H., Nishina, T., Han, S., Sakata, T., Yatsuzuka, N., Doi, T., Kato, K. (2022). First-line pembrolizumab + chemotherapy in Japanese patients with advanced/metastatic esophageal cancer from KEYNOTE-590 Esophagus, 19(4), 683	DUPLICATE
256	Lee, K. W., Van Cutsem, E., Bang, Y. J., Fuchs, C. S., Kudaba, I., Garrido, M., Chung, H. C., Lee, J., Castro, H. R., Chao, J., Wainberg, Z. A., Cao, Z. A., Aurora-Garg, D., Kobie, J., Cristescu, R., Bhagia, P., Shah, S., Tabernero, J., Shitara, K., Wyrwicz, L. (2022). Association of Tumor Mutational Burden with Efficacy of Pembrolizumab+/-Chemotherapy as First-Line Therapy for Gastric Cancer in the Phase III KEYNOTE-062 Study Clinical Cancer Research, 28(16), 3489-3498	DUPLICATE
257	Lordick, F., Shitara, K., Bang, Y. J., Enzinger, P., Ilson, D., Shah, M. A., Van Cutsem, E., Xu, R. H., Aprile, G., Xu, J., Chao, J., Pazo-Cid, R., Kang, Y. K., Yang, J., Moran, D., Bhattacharya, P., Arozullah, A., Park, J. W., Ajani, J. (2023). Zolbetuximab + mFOLFOX6 as First-Line (1L) treatment for patients (Pts) with Claudin-18.2+ (CLDN18.2+) / HER2- Locally Advanced (LA) unresectable or metastatic Gastric or Gastroesophageal Junction (mG/GEJ) adenocarcinoma: Primary results from Phase 3 SPOTLIGHT Study Oncology Research and Treatment, 46(Supplement 5), 115-116	DUPLICATE
258	Lorenzen, S., Thuss-Patience, P. C., Folprecht, G., Riera Knorrenschild, J., Heinemann, V., Goekkurt, E., Dechow, T. N., Ettrich, T. J., Luley, K. B., Moulin, J. C., Lindig, U., Angermeier, S., Waidmann, O., Pink, D., Bolling, C., Junge, S., Pauligk, C., Gaiser, T., Gotze, T. O., Al-Batran, S. E. (2022). 1203O FOLFOX plus nivolumab and ipilimumab versus FOLFOX induction followed by nivolumab and ipilimumab in patients with previously untreated advanced or metastatic adenocarcinoma of the stomach or gastroesophageal junction: Results from the randomized phase II Moonlight trial of the AIO Annals of Oncology, 33(Supplement 7), S1099	DUPLICATE
259	Lorenzen, S., Thuss-Patience, P. C., Knorrenschild, J. R., Goekkurt, E., Dechow, T. N., Hofheinz, R. D., Luley, K. B., Ettrich, T. J., Pink, D., Lindig, U., Folprecht, G., Schuch, G., Bitzer, M., Bolling, C., Homann, N., Junge, S., Pauligk, C., Gaiser, T., Goetze, T. O., Al-Batran, S. E. (2022). FOLFOX versus FOLFOX plus nivolumab and ipilimumab administered in parallel or sequentially versus FLOT plus nivolumab administered in parallel in patients with previously untreated advanced or metastatic adenocarcinoma of the stomach or gastroesophageal junction: A randomized phase 2 trial of the AIO Journal of Clinical Oncology, 40(16 Supplement 1), #Pages#	DUPLICATE

No.	Reference	Reason for exclusion
260	Nishikawa, K., Tsuburaya, A., Yoshikawa, T., Kobayashi, M., Kawada, J., Fukushima, R., Matsui, T., Tanabe, K., Yamaguchi, K., Yoshino, S., Takahashi, M., Hirabayashi, N., Sato, S., Nemoto, H., Rino, Y., Nakajima, J., Aoyama, T., Miyagi, Y., Oriuchi, N., Yamaguchi, K., Miyashita, Y., Morita, S., Sakamoto, J. (2018). A randomised phase II trial of capecitabine plus cisplatin versus S-1 plus cisplatin as a first-line treatment for advanced gastric cancer: capecitabine plus cisplatin ascertainment versus S-1 plus cisplatin randomised PII trial (XParTS II) European journal of cancer (Oxford, England :, 101(#issue#), 220	DUPLICATE
261	ouml, gner, A., Al-Batran, S. E., Siveke, J. T., Lorenz, M., Bartels, P., Breithaupt, K., Malfertheiner, P., Homann, N., Stein, A., Gl, auml, ser, D., Tamm, I., Hinke, A., Vogel, A., Thuss-Patience, P., Pa, F. L. O. investigators (2022). Pazopanib with 5-FU and oxaliplatin as first line therapy in advanced gastric cancer: a randomized phase-II study-The PaFLO trial. A study of the Arbeitsgemeinschaft Internistische Onkologie AIO-STO-0510 International journal of cancer, 150(6), 1007	DUPLICATE
262	Queisser, W., Schnitzler, G., Heim, M. E., ouml, nig, H., Katz, R., Fritze, D., Herrmann, R., Arnold, H., Henss, H., Trux, F. (1984). Prospective randomized study in advanced stomach cancer. Comparison between combinations of 5-fluorouracil and carmustine without and with adriamycin Prospektive randomisierte Studie beim fortgeschrittenen Magenkarzinom. Vergleich der Kombination von 5-Fluorouracil und Carmustin ohne und mit Adriamycin, 109(25), 976	DUPLICATE
263	Rosati, G., Cella, C. A., Cavanna, L., Codeca, C., Prisciandaro, M., Mosconi, S., Luchena, G., Silvestris, N., Bernardini, I., Casaretti, R., Zoratto, F., Amoroso, D., Ciarlo, A., Barni, S., Cascinu, S., Davite, C., Di Sanzo, A., Casolaro, A., Bilancia, D., Labianca, R. (2022). A randomized phase III study of fractionated docetaxel, oxaliplatin, capecitabine (low-tox) vs epirubicin, oxaliplatin and capecitabine (eox) in patients with locally advanced unresectable or metastatic gastric cancer: the lega trial Gastric Cancer, 25(4), 783-793	DUPLICATE
264	Shen, L., Bai, Y., Lin, X., Li, W., Wang, J., Zhang, X., Pan, H., Bai, C., Bai, L., Cheng, Y., Zhang, J., Zhong, H., Ba, Y., Hu, W., Xu, R., Guo, W., Qin, S., Yang, N., Lu, J., Amaya Chanaga, C., Soleymani, S., Liu, T. (2022). P-86 First-line nivolumab (NIVO) plus chemotherapy (chemo) vs chemo in patients with advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): CheckMate 649 Chinese subgroup analysis 2-year follow-up Annals of Oncology, 33(Supplement 4), S279	DUPLICATE
265	Wainberg, Z. A., Enzinger, P. C., Qin, S., Yamaguchi, K., Gnanasakthy, A., Jamotte, A., Majer, I., Kang, Y. K. (2022). 1221P Health-related quality of life (HRQoL) in FGFR2b-overexpressing, advanced gastric or gastroesophageal junction cancer (G/GEJC): Results from the FIGHT trial comparing bemarituzumab (BEMA) + modified FOLFOX6 (mFOLFOX6) to placebo (PBO) + mFOLFOX6 Annals of Oncology, 33(Supplement 7), S1107	DUPLICATE

No.	Reference	Reason for exclusion
266	Wainberg, Z. A., Shitara, K., Van Cutsem, E., Wyrwicz, L., Wook Lee, K., Kudaba, I., Garrido, M., Chung, H. C. C., Lee, J., Salguero, H. R. C., Mansoor, W., Braghiroli, M. I., Karaseva, N., Goekkurt, E., Satake, H., Chao, J., Kher, U., Shah, S., Bhagia, P., Tabernero, J. (2022). Pembrolizumab with or without chemotherapy versus chemotherapy alone for patients with PD-L1-positive advanced gastric or gastroesophageal junction adenocarcinoma: Update from the phase 3 KEYNOTE-062 trial Journal of Clinical Oncology, 40(4 SUPPL), #Pages#	DUPLICATE
267	Yamada, Y., Boku, N., Mizusawa, J., Iwasa, S., Kadowaki, S., Nakayama, N., Azuma, M., Sakamoto, T., Shitara, K., Tamura, T., Chin, K., Hata, H., Nakamori, M., Hara, H., Yasui, H., Katayama, H., Fukuda, H., Yoshikawa, T., Sasako, M., Terashima, M. (2019). Docetaxel plus cisplatin and S-1 versus cisplatin and S-1 in patients with advanced gastric cancer (JCOG1013): an open-label, phase 3, randomised controlled trial The Lancet Gastroenterology and Hepatology, 4(7), 501-510	DUPLICATE

H.1.6.2 Updated SLR

Table 73 Studies excluded following full-text review from the clinical SLR (updated search)

No.	Reference	Reason for exclusion
1	Al-Batran, S. E., Shitara, K., Folprecht, G., Moehler, M. H., Goekkurt, E., Ben-Aharon, I., Lonardi, S., Stein, S., Hubert, A., Chau, I., Mishaeli, M., Villanueva, L., Kavan, P., Fang, X., Shih, C. S., Bhagia, P., Wyrwicz, L. S. (2024). Pembrolizumab plus FLOT vs FLOT as neoadjuvant and adjuvant therapy in locally advanced gastric and gastroesophageal junction cancer: Interim analysis of the phase 3 KEYNOTE-585 study Journal of Clinical Oncology, 42(3 Supplement), #Pages#	POPULATION
2	Kang, Y. K., Terashima, M., Kim, Y. W., Boku, N., Chung, H. C., Chen, J. S., Ji, J., Yeh, T. S., Chen, L. T., Ryu, M. H., Kim, J. G., Omori, T., Rha, S. Y., Kim, T. Y., Ryu, K. W., Sakuramoto, S., Nishida, Y., Fukushima, N., Yamada, T., Bai, L. Y., Hirashima, Y., Hagihara, S., Nakada, T., Sasako, M. (2024). Adjuvant nivolumab plus chemotherapy versus placebo plus chemotherapy for stage III gastric or gastro-oesophageal junction cancer after gastrectomy with D2 or more extensive lymph-node dissection (ATTRACTION-5): a randomised, multicentre, double-blind, placebo-controlled, phase 3 trial The Lancet Gastroenterology and Hepatology, 9(8), 705-717	POPULATION

No.	Reference	Reason for exclusion
3	Lin, J. X., Tang, Y. H., Zheng, H. L., Ye, K., Cai, J. C., Cai, L. S., Lin, W., Xie, J. W., Wang, J. B., Lu, J., Chen, Q. Y., Cao, L. L., Zheng, C. H., Li, P., Huang, C. M. (2024). Neoadjuvant camrelizumab and apatinib combined with chemotherapy versus chemotherapy alone for locally advanced gastric cancer: a multicenter randomized phase 2 trial Nature communications, 15(1), 41	POPULATION
4	Qian, Y., Zhai, E., Ye, J., Chen, S., Yuan, K., Wang, Z., Xu, J., Zhang, X., Ma, J., Chen, C., Peng, J., Chen, J., Cai, S. (2024). Efficacy and safety of cadonilimab and COX-2 inhibitor combined with oxaliplatin and capecitabine (XELOX) in perioperative treatment for locally advanced resectable gastric adenocarcinoma: A prospective, single-center, randomized, phase II trial Annals of Oncology, 35(Supplement 1), S196	POPULATION
5	Shitara, K., Rha, S. Y., Wyrwicz, L. S., Oshima, T., Karaseva, N., Osipov, M., Yasui, H., Yabusaki, H., Afanasyev, S., Park, Y. K., Al-Batran, S. E., Yoshikawa, T., Yanez Weber, P. E., Di Bartolomeo, M., Lonardi, S., Fang, X., Shih, C. S., Bhagia, P., Bang, Y. J. (2024). Final analysis of the phase III KEYNOTE-585 study of pembrolizumab plus chemotherapy vs chemotherapy as perioperative therapy in locally-advanced gastric and gastroesophageal junction cancer Annals of Oncology, 35(Supplement 1), S213	POPULATION
6	Verschoor, Y. L., van de Haar, J., van den Berg, J. G., van Sandick, J. W., Kodach, L. L., van Dieren, J. M., Balduzzi, S., Grootscholten, C., M.E, I. Jsselsteijn, Veenhof, A. A. F. A., Hartemink, K. J., Vollebergh, M. A., Jurdi, A., Sharma, S., Spickard, E., Owers, E. C., Bartels-Rutten, A., den Hartog, P., de Miranda, N. F. C. C., van Leerdam, M. E., Haanen, J. B. A. G., Schumacher, T. N., Voest, E. E., Chalabi, M. (2024). Neoadjuvant atezolizumab plus chemotherapy in gastric and gastroesophageal junction adenocarcinoma: the phase 2 PANDA trial Nature Medicine, 30(2), 519-530	POPULATION
7	Chang, L., Zhang, X., Ma, Q., Kong, L., Yu, Y., Tao, J., Li, Q. (2024). Safety and efficacy of apatinib in combination with chemotherapy with or without immunotherapy versus chemotherapy alone as first-line treatment for advanced gastric cancer Investigational New Drugs, 42(2), 161-170	INTERVENTION/COMPARATOR
8	Jiang, Z., Xie, Y., Zhang, W., Du, C., Zhong, Y., Zhu, Y., Jiang, L., Dou, L., Shao, K., Sun, Y., Xue, Q., Tian, Y., Gao, S., Zhao, D., Zhou, A. (2024). Perioperative chemotherapy with docetaxel plus oxaliplatin and S-1 (DOS) versus oxaliplatin plus S-1 (SOX) for the treatment of locally advanced gastric or gastro-esophageal junction adenocarcinoma (MATCH): an open-label, randomized, phase 2 clinical trial Gastric Cancer, 27(3), 571-579	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
9	Wang, Teng, Zhang, Li-Yun (2024). Evaluation of oxaliplatin and tigio combination therapy in locally advanced gastric cancer World journal of gastrointestinal surgery, 16(6), 1709-1716	INTERVENTION/COMPARATOR
10	Botsen, D., Chabaud, S., Perrier, H., Ammarguellat, H., Jestin-Le-Tallec, V., Olesinski, J., Toullec, C., Aparicio, T., Ben Abdelghani, M., Borg, C., Bouche, O., Coutzac, C., Devaud, H., Di Fiore, F., Dubreuil, O., Evesque, L., Huguenin, B., Muller, M., Poureau, P. G., Oularue, E., Tougeron, D., Zaanan, A., Ammari, S., De Sousa Carvalho, N., Decazes, P., De La Fouchardiere, C. (2024). Trifluridine/tipiracil + oxaliplatin ± nivolumab vs FOLFOX ± nivolumab in HER2 negative advanced oesogastric adenocarcinoma: the PRODIGE73-UCGI40-LOGICAN trial Digestive and liver disease, #volume#(#issue#), #Pages#	STUDY DESIGN
11	Cai, L., Qu, L., Cheng, Y., Zhang, J., Li, S., Wu, S. (2024). Study on the therapeutic effect of sintilimab combined with modified DCF regimen on advanced gastric cancer and its impact on Th1/Th2 immune balance Anti-Cancer Drugs, 35(8), 780-788	STUDY DESIGN
12	de la Fouchardiere, C., Chabaud, S., Perrier, H., Ammarguellat, H., Jestin, V., Olesinski, J., Toullec, C., Aparicio, T., Ben Abdelghani, M., Bouche, O., Coutzac, C., Dubreuil, O., Evesque, L., Muller, M., Poureau, P. G., Soularue, E., Tougeron, D., Zaanan, A., De Sousa Carvalho, N., Botsen, D. (2024). Randomised phase II study evaluating trifluridine/tipiracil (FTD/TPI) plus oxaliplatin +/- nivolumab versus FOLFOX +/- nivolumab in patients with HER2-negative locally advanced, recurrent or metastatic gastric, oesophageal or junctional adenocarcinoma (aGA/GEJA) (PRODIGE 73 - LOGICAN) Annals of Oncology, 35(Supplement 1), S197-S198	STUDY DESIGN
13	Kim, H. D., Shin, J., Song, I. H., Hyung, J., Lee, H., Ryu, M. H., Park, Y. S. (2024). Discordant PD-L1 results between 28-8 and 22C3 assays are associated with outcomes of gastric cancer patients treated with nivolumab plus chemotherapy Gastric Cancer, 27(4), 819-826	STUDY DESIGN
14	Shen, L., Shitara, K., Chen, J. S., Oh, D. Y., Jiang, A., Liu, S., Dong, Z., Zhu, Q., Kumar, R., Rha, S. Y. (2024). GEMINI-Gastric: A phase 2 study of novel treatment combinations in patients with locally advanced unresectable or metastatic gastric cancers Journal of Clinical Oncology, 42(16 Supplement), #Pages#	STUDY DESIGN
15	Utsumi, M., Yukami, H., Okemoto, D., Kadono, T., Yamaguchi, T., Goto, M., Nishikawa, H. (2024). Impact of adding nivolumab to first-line chemotherapy in patients with advanced gastric cancer Journal of Clinical Oncology, 42(3 Supplement), #Pages#	STUDY DESIGN
16	Hirano, H., Yamada, Y., Nagashima, K., Hiraoka, N., Sekine, S., Takahashi, N., Azuma, M., Iwasa, S., Kanato, K., Machida, N., Kinoshita, T., Hata, H., Kawakami, H., Takahari, D., Ojima, T., Kadowaki, S., Boku, N., Kurokawa, Y., Terashima, M., Yoshikawa, T.	OUTCOME

No.	Reference	Reason for exclusion
	(2024). Impact of PD-L1 expression on survival in patients with unresectable/recurrent gastric cancer receiving first-line chemotherapy without immune checkpoint inhibitors Journal of Clinical Oncology, 42(3 Supplement), #Pages#	
17	ClinicalTrials.gov. (2024). A Study to Investigate the Efficacy and Safety of ONO-4578 in Combination With Nivolumab and Chemotherapy in Chemotherapy-naïve Participants With HER2-negative Unresectable Advanced or Recurrent Gastric Cancer (Including Esophagogastric Junction Cancer) A Randomized, Multicenter, Double-blind, Phase II Study to Compare the Efficacy and Safety of the Treatment With ONO-4578 in Combination With Nivolumab, Fluoropyrimidine-based and Platinum- Based Chemotherapy (Hereinafter Referred to as Chemotherapy) With Those of the Treatment With Placebo in Combination With Nivolumab and Chemotherapy in Chemotherapy-naïve Participants With Human Epidermal Growth Factor Receptor 2 (HER2)-Negative Unresectable Advanced or Recurrent Gastric Cancer (Including Esophagogastric Junction Cancer), #volume#(#issue#), #Pages#	INCOMPLETE/INSUFFICIENT/PARTIAL DATA
18	Arkenau, H. T., Tabernero, J., Cruz-Correa, M., Zimina, A. V., Poddubskaya, E., Moiseenko, F. V., Spigel, D. R., Wyrwicz, L. S., Disel, U., Cid, R. P., Gracian, A. C., Ales Diaz, I., Fornaro, L., Evesque, L., Xu, Y., Sheng, T., Yang, S., Li, L., Moehler, M. H., Xu, R. H. (2024). Tislelizumab plus chemotherapy (chemo) versus placebo plus chemo as first-line treatment for locally advanced unresectable or metastatic gastric or gastroesophageal junction adenocarcinoma: RATIONALE-305 European/North American patient subgroup Journal of Clinical Oncology, 42(3 Supplement), #Pages#	DUPLICATE
19	Botsen, D., Chabaud, S., Perrier, H., Ammarguellat, H., Jestin-Le-Tallec, V., Olesinski, J., Toullec, C., Aparicio, T., Ben Abdelghani, M., Borg, C., Bouche, O., Coutzac, C., Devaud, H., Di Fiore, F., Dubreuil, O., Evesque, L., Huguenin, B., Muller, M., Poureau, P. G., Oularue, E., Tougeron, D., Zaanan, A., Ammari, S., De Sousa Carvalho, N., Decazes, P., De La Fouchardiere, C. (2024). Trifluridine/tipiracil + oxaliplatin +/- nivolumab vs FOLFOX +/- nivolumab in HER2 negative advanced oesogastric adenocarcinoma: The PRODIGE73-UCGI40-LOGICAN trial Digestive and Liver Disease, 56(8), 1281-1287	DUPLICATE
20	Cruz-Correa, M., Xu, R. H., Moehler, M. H., Oh, D. Y., Kato, K., Spigel, D. R., Arkenau, H. T., Tabernero, J., Zimina, A. V., Bai, Y., Shi, J., Lee, K. W., Hirano, H., Wyrwicz, L. S., Cid, R. P., Xu, H., Sheng, T., Barnes, G. (2024). Tislelizumab (TIS) plus chemotherapy (Chemo) vs placebo (PBO) plus chemo as first-line (1L) treatment of advanced gastric or gastroesophageal junction adenocarcinoma (GC/GEJC): Health-related quality of life (HRQoL) outcomes in the RATIONALE-305 study Journal of Clinical Oncology, 42(3 Supplement), #Pages#	DUPLICATE

No.	Reference	Reason for exclusion
21	Lin, D., Quan, W., Garretson, M., Chirikov, V. V., Chen, C., Singh, P., Davis, C., Sugarman, R. (2024). Q-TWiST analysis of nivolumab + chemotherapy versus chemotherapy as first-line (1L) treatment for advanced gastric cancer, gastroesophageal junction cancer, or esophageal adenocarcinoma (GC/GEJC/EAC) in patients with PD-L1 CPS>=1 and CPS>=5: 4-year follow-up from CheckMate 649 (CM 649) Annals of Oncology, 35(Supplement 1), S170	DUPLICATE
22	Shen, L., Bai, Y., Lin, X., Li, W., Wang, J., Zhang, X., Pan, H., Bai, C., Bai, L., Cheng, Y., Zhang, J., Zhong, H., Ba, Y., Hu, W., Xu, R. H., Guo, W., Qin, S., Wang, R., McCraith, S., Liu, T. (2024). First-line (1L) nivolumab (NIVO) plus chemotherapy (chemo) vs chemo in patients (pts) with advanced gastric cancer, gastroesophageal junction cancer, and esophageal adenocarcinoma (GC/GEJC/EAC): CheckMate 649 Chinese subgroup analysis 4-year (yr) follow-up Journal of Clinical Oncology, 42(3 Supplement), #Pages#	DUPLICATE
23	Shitara, K., Moehler, M. H., Ajani, J. A., Shen, L., Garrido, M., Gallardo, C., Wyrwicz, L. S., Yamaguchi, K., Cleary, J. M., Elimova, E., Maya, R. E. B., Karamouzis, M., Skoczylas, T., Bragagnoli, A., Liu, T., Tehfe, M., Feeney, K., Wang, R., Nathani, R., Janjigian, Y. Y. (2024). Nivolumab (NIVO) + chemotherapy (chemo) vs chemo as first-line (1L) treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): 4 year (yr) follow-up of CheckMate 649 Journal of Clinical Oncology, 42(3 Supplement), #Pages#	DUPLICATE
24	Wainberg, Z. A., Kang, Y. K., Lee, K. W., Qin, S., Yamaguchi, K., Kim, I. H., Saeed, A., Oh, S. C., Li, J., Turk, H. M., Teixeira, A., Hitre, E., Udrea, A. A., Cardellino, G. G., Sanchez, R. G., Zahlten-Kumeli, A., Taylor, K., Enzinger, P. C. (2024). Bemarituzumab as first-line treatment for locally advanced or metastatic gastric/gastroesophageal junction adenocarcinoma: final analysis of the randomized phase 2 FIGHT trial Gastric Cancer, 27(3), 558-570	DUPLICATE
25	Wainberg, Z. A., Shiu, K. K., Rivera, F., Medley, L. C., Aghmesheh, M., Dunne, R. F., Roy, R., Wyrwicz, L. S., Larson, T., Metges, J. P., Mansoor, W., Goekkurt, E., Antunes, L. C. M., Oliden, V. C., Jensen, E., Shah, S., Bordia, S., Bhagia, P., Lowery, M. A. (2024). First-line pembrolizumab (pembro) plus chemotherapy (chemo) for advanced gastroesophageal junction cancer (GEJC) and esophageal adenocarcinoma (EAC): Analysis of KEYNOTE-590 and KEYNOTE-859 by tumor type Journal of Clinical Oncology, 42(3 Supplement), #Pages#	DUPLICATE

H.1.6.3 Local adaptation

Table 74 Studies excluded from the clinical SLR following assessment of relevance to the Danish treatment context (overall search)

No.	Reference	Reason for exclusion
1	Rosati G, Cella CA, Cavanna L, Codeca C, Prisciandaro M et al. (2022) A randomized phase III study of fractionated docetaxel, oxaliplatin, capecitabine (low-tox) vs epirubicin, oxaliplatin and capecitabine (eox) in patients with locally advanced unresectable or metastatic gastric cancer: the lega trial. *Gastric Cancer* 25 (4): 783-793	INTERVENTION/COMPARATOR
2	Zhu XD, Huang MZ, Wang YS, Feng WJ, Chen ZY et al. (2022) XELOX doublet regimen versus EOX triplet regimen as first-line treatment for advanced gastric cancer: An open-labeled, multicenter, randomized, prospective phase III trial (EXELOX). *Cancer Commun (Lond)* 42 (4): 314-326	INTERVENTION/COMPARATOR
3	Hogner A, Al-Batran SE, Siveke JT, Lorenz M, Bartels P et al. (2022) Pazopanib with 5-FU and oxaliplatin as first line therapy in advanced gastric cancer: A randomized phase-II study-The PaFLO trial. A study of the Arbeitsgemeinschaft Internistische Onkologie AIO-STO-0510. *Int J Cancer* 150 (6): 1007-1017	INTERVENTION/COMPARATOR
4	Bin Y, Lan D, Bao W, Yang H, Zhou S et al. (2022) SOX combined with intraperitoneal perfusion of docetaxel compared with DOS regimen in the first-line therapy for advanced gastric cancer with malignant ascites: a prospective observation. *Trials* 23 (1): 211	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
5	Dai Y-H, Yu X-J, Xu H-T, Zhuang L, Zhang M-S et al. (2022) Nab-paclitaxel plus S-1 versus oxaliplatin plus S-1 as first-line treatment in advanced gastric cancer: results of a multicenter, randomized, phase III trial (GAPSO study). *Therapeutic advances in medical oncology* 14 17588359221118020	INTERVENTION/COMPARATOR
6	Sahin U, Tureci O, Manikhas G, Lordick F, Rusyn A et al. (2021) FAST: a randomised phase II study of zolbetuximab (IMAB362) plus EOX versus EOX alone for first-line treatment of advanced CLDN18.2-positive gastric and gastro-oesophageal adenocarcinoma. *Ann Oncol* 32 (5): 609-619	INTERVENTION/COMPARATOR
7	Shah MA, Bodoky G, Starodub A, Cunningham D, Yip D et al. (2021) Phase III Study to Evaluate Efficacy and Safety of Andecaliximab With mFOLFOX6 as First-Line Treatment in Patients With Advanced Gastric or GEJ Adenocarcinoma (GAMMA-1). *J Clin Oncol* 39 (9): 990-1000	INTERVENTION/COMPARATOR
8	Kawakami H, Fujitani K, Matsuyama J, Akamaru Y, Tamura S et al. (2020) Comparison of S-1-cisplatin every 5 weeks with capecitabine-cisplatin every 3 weeks for HER2-negative gastric cancer (recurrent after S-1 adjuvant therapy or chemotherapy-naive advanced): pooled analysis of HERBIS-2 (OGSG 1103) and HERBIS-4A (OGSG 1105) trials. *Int J Clin Oncol* 25 (9): 1635-1643	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
9	Kang YK, Chin K, Chung HC, Kadowaki S, Oh SC et al. (2020) S-1 plus leucovorin and oxaliplatin versus S-1 plus cisplatin as first-line therapy in patients with advanced gastric cancer (SOLAR): a randomised, open-label, phase 3 trial. *Lancet Oncol* 21 (8): 1045-1056	INTERVENTION/COMPARATOR
10	Nakajima TE, Yamaguchi K, Boku N, Hyodo I, Mizusawa J et al. (2020) Randomized phase II/III study of 5-fluorouracil/l-leucovorin versus 5-fluorouracil/l-leucovorin plus paclitaxel administered to patients with severe peritoneal metastases of gastric cancer (JCOG1108/WJOG7312G). *Gastric Cancer* 23 (4): 677-688	INTERVENTION/COMPARATOR
11	Lee KW, Zang DY, Ryu MH, Han HS, Kim KH et al. (2023) A Phase 3 Randomized Clinical Trial to Compare Efficacy and Safety between Combination Therapy and Monotherapy in Elderly Patients with Advanced Gastric Cancer (KCSG ST13-10). Cancer Research and Treatment 55 (4): 1250-1260	INTERVENTION/COMPARATOR
12	Yoshikawa T, Muro K, Shitara K, Oh DY, Kang YK et al. (2019) Effect of First-line S-1 Plus Oxaliplatin With or Without Ramucirumab Followed by Paclitaxel Plus Ramucirumab on Advanced Gastric Cancer in East Asia: The Phase 2 RAINSTORM Randomized Clinical Trial. JAMA Netw Open 2 (8): e198243	INTERVENTION/COMPARATOR
13	Kim C, Chon HJ, Kim JH, Jung M, Nam CM et al. (2019) Randomised phase II trial comparing four	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
	front-line doublets in Asian patients with metastatic gastric cancer. Eur J Cancer 112 20-28	
14	Makiyama A, Shoji H, Kawakami H, Tamura T, Sugiyama K et al. (2023) O14-1 A randomized phase II study comparing S-1 plus oxaliplatin with S-1 monotherapy for elderly patients with advanced gastric cancer: WJOG8315G. Annals of Oncology 34 (Supplement 3): S1390	INTERVENTION/COMPARATOR
15	Fuchs CS, Shitara K, Di Bartolomeo M, Lonardi S, Al-Batran SE et al. (2019) Ramucirumab with cisplatin and fluoropyrimidine as first-line therapy in patients with metastatic gastric or junctional adenocarcinoma (RAINFALL): a double-blind, randomised, placebo-controlled, phase 3 trial. Lancet Oncol 20 (3): 420-435	INTERVENTION/COMPARATOR
16	Xu RH, Oh DY, Kato K, Arkenau HT, Tabernero J et al. (2023) 139MO Tislelizumab (TIS) plus chemotherapy (Chemo) vs placebo (PBO) plus chemo as first-line (1L) treatment of advanced gastric or gastroesophageal junction adenocarcinoma (GC/GEJC): Final analysis results of the RATIONALE-305 study. *Annals of Oncology* 34 (Supplement 4): S1526-S1527	NEWER DCO AVAILABLE
17	Kawakami H, Takeno A, Endo S, Makari Y, Kawada J et al. (2018) Randomized, Open-Label Phase II Study Comparing Capecitabine-Cisplatin Every 3 Weeks with S-1-Cisplatin Every 5 Weeks in Chemotherapy-	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
	Naive Patients with HER2-Negative Advanced Gastric Cancer: OGSG1105, HERBIS-4A Trial. Oncologist 23 (12): 1411-e1147	
18	Nishikawa K, Tsuburaya A, Yoshikawa T, Kobayashi M, Kawada J et al. (2018) A randomised phase II trial of capecitabine plus cisplatin versus S-1 plus cisplatin as a first-line treatment for advanced gastric cancer: Capecitabine plus cisplatin ascertainment versus S-1 plus cisplatin randomised PII trial (XParTS II). Eur J Cancer 101 220-228	INTERVENTION/COMPARATOR
19	Catenacci DVT, Tebbutt NC, Davidenko I, Murad AM, Al-Batran SE et al. (2017) Rilotumumab plus epirubicin, cisplatin, and capecitabine as first-line therapy in advanced MET-positive gastric or gastro-oesophageal junction cancer (RILOMET-1): a randomised, double-blind, placebo-controlled, phase 3 trial. Lancet Oncol 18 (11): 1467-1482	INTERVENTION/COMPARATOR
20	Shah MA, Shitara K, Ajani JA, Bang Y-J, Enzinger P et al. (2023) Zolbetuximab plus CAPOX in CLDN18.2-positive gastric or gastroesophageal junction adenocarcinoma: the randomized, phase 3 GLOW trial. Nature Medicine 29 (8): 2133-2141	INTERVENTION/COMPARATOR
21	Shah MA, Bang YJ, Lordick F, Alsina M, Chen M et al. (2017) Effect of Fluorouracil, Leucovorin, and Oxaliplatin With or Without Onartuzumab in HER2-Negative, MET-Positive Gastroesophageal	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
	Adenocarcinoma: The METGastric Randomized Clinical Trial. JAMA Oncol 3 (5): 620-627	
22	Shitara K, Lordick F, Bang YJ, Enzinger P, Ilson D et al. (2023) Zolbetuximab plus mFOLFOX6 in patients with CLDN18.2-positive, HER2-negative, untreated, locally advanced unresectable or metastatic gastric or gastro-oesophageal junction adenocarcinoma (SPOTLIGHT): a multicentre, randomised, double-blind, phase 3 trial. The Lancet 401 (10389): 1655-1668	INTERVENTION/COMPARATOR
23	Shah MA, Cho JY, Tan IB, Tebbutt NC, Yen CJ et al. (2016) A Randomized Phase II Study of FOLFOX With or Without the MET Inhibitor Onartuzumab in Advanced Adenocarcinoma of the Stomach and Gastroesophageal Junction. Oncologist 21 (9): 1085-1090	INTERVENTION/COMPARATOR
24	Hironaka S, Sugimoto N, Yamaguchi K, Moriwaki T, Komatsu Y et al. (2016) S-1 plus leucovorin versus S-1 plus leucovorin and oxaliplatin versus S-1 plus cisplatin in patients with advanced gastric cancer: a randomised, multicentre, open-label, phase 2 trial. Lancet Oncol 17 (1): 99-108	INTERVENTION/COMPARATOR
25	Ochenduszko S, Puskulluoglu M, Konopka K, Fijorek K, Urbanczyk K et al. (2015) Comparison of efficacy and safety of first-line palliative chemotherapy with EOX and mDCF regimens in patients with locally advanced inoperable or metastatic HER2-negative	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
	gastric or gastroesophageal junction adenocarcinoma: a randomized phase 3 trial. Med Oncol 32 (10): 242.	
26	Wainberg ZA, Enzinger PC, Kang YK, Qin S, Yamaguchi K et al. (2022) Bemarituzumab in patients with FGFR2b-selected gastric or gastro-oesophageal junction adenocarcinoma (FIGHT): a randomised, double-blind, placebo-controlled, phase 2 study. The Lancet Oncology 23 (11): 1430-1440	INTERVENTION/COMPARATOR
27	Xu J, Jiang H, Pan Y, Gu K, Cang S et al. (2023) Sintilimab Plus Chemotherapy for Unresectable Gastric or Gastroesophageal Junction Cancer: The ORIENT-16 Randomized Clinical Trial. JAMA 330 (21): 2064-2074	INTERVENTION/COMPARATOR
28	Iveson T, Donehower RC, Davidenko I, Tjulandin S, Deptala A et al. (2014) Rilotumumab in combination with epirubicin, cisplatin, and capecitabine as first-line treatment for gastric or oesophagogastric junction adenocarcinoma: an open-label, dose de-escalation phase 1b study and a double-blind, randomised phase 2 study. Lancet Oncol 15 (9): 1007-1018	INTERVENTION/COMPARATOR
29	Zaanan A, Bouche O, e la Fouchardiere C, Samalin-Scalzi E, Le Malicot K et al. (2023) LBA77 5-fluorouracil and oxaliplatin with or without docetaxel in the first-line treatment of HER2 negative locally advanced (LA) unresectable or metastatic gastric or	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
	gastro-esophageal junction (GEJ) adenocarcinoma (GASTFOX-PRODIGE 51): A randomized phase III trial sponsored by the FFCD. Annals of Oncology 34 (Supplement 2): S1318	
30	Zhang X, Wang J, Wang G, Zhang Y, Fan Q et al. (2023) LBA79 GEMSTONE-303: Prespecified progression-free survival (PFS) and overall survival (OS) final analyses of a phase III study of sugemalimab plus chemotherapy vs placebo plus chemotherapy in treatment-naive advanced gastric or gastroesophageal junction (G/GEJ) adenocarcinoma. Annals of Oncology 34 (Supplement 2): S1319	INTERVENTION/COMPARATOR
31	Zhao S, Su L, Chen Y, Li X, Lin P et al. (2022) Phase 2 randomized controlled trial of intravenous or intraperitoneal paclitaxel plus mFOLFOX6 vs. mFOLFOX6 as first-line treatment of advanced gastric cancer. Frontiers in Oncology 12 850242	INTERVENTION/COMPARATOR
32	Lordick F, Kang YK, Chung HC, Salman P, Oh SC et al. (2013) Capecitabine and cisplatin with or without cetuximab for patients with previously untreated advanced gastric cancer (EXPAND): a randomised, open-label phase 3 trial. Lancet Oncol 14 (6): 490-499	INTERVENTION/COMPARATOR
33	Yamada Y, Boku N, Mizusawa J, Iwasa S, Kadowaki S et al. (2019) Docetaxel plus cisplatin and S-1 versus cisplatin and S-1 in patients with advanced gastric	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
	cancer (JCOG1013): an open-label, phase 3, randomised controlled trial. Lancet Gastroenterol Hepatol 4 (7): 501-510	
34	(Web Page) A Study of SHR-1210 in Combination With Capecitabine + Oxaliplatin or Apatinib in Treatment of Advanced Gastric Cancer. Updated Available online at: https://clinicaltrials.gov/study/NCT03472365. Accessed: 2024	INTERVENTION/COMPARATOR
35	Bang YJ, Kang YK, Ng M, Chung HC, Wainberg ZA et al. (2019) A phase II, randomised study of mFOLFOX6 with or without the Akt inhibitor ipatasertib in patients with locally advanced or metastatic gastric or gastroesophageal junction cancer. Eur J Cancer 108 17-24	INTERVENTION/COMPARATOR
36	Lorenzen S, Thuss-Patience PC, Riera Knorrenschild J, Goekkurt E, Dechow TN et al. (2022) FOLFOX versus FOLFOX plus nivolumab and ipilimumab administered in parallel or sequentially versus FLOT plus nivolumab administered in parallel in patients with previously untreated advanced or metastatic adenocarcinoma of the stomach or gastroesophageal junction: A randomized phase 2 trial of the AIO. Journal of Clinical Oncology 40 (16_suppl): 4043-4043	INTERVENTION/COMPARATOR
37	Ramaswamy A, Bhargava P, Dubashi B, Gupta A, Kapoor A et al. (2024) Docetaxel-oxaliplatin-	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
	capecitabine/5-fluorouracil (DOX/F) followed by docetaxel versus oxaliplatin-capecitabine/ 5-fluorouracil (CAPOX/FOLFOX) in HER2-negative advanced gastric cancers. JNCI Cancer Spectrum 8 (4): pkae054	
38	Hegewisch-Becker S, Mendez G, Chao J, Nemecek R, Feeney K et al. (2024) First-Line Nivolumab and Relatlimab Plus Chemotherapy for Gastric or Gastroesophageal Junction Adenocarcinoma: The Phase II RELATIVITY-060 Study. Journal of Clinical Oncology 42 (17): 2080-2093	INTERVENTION/COMPARATOR
39	Ajani JA, Lordick F, Bang YJ, Enzinger PC, Ilson DH et al. (2023) 135MO Updated efficacy and safety results from phase III SPOTLIGHT study evaluating zolbetuximab + mFOLFOX6 as first-line (1L) treatment for patients with claudin-18 isoform 2-positive (CLDN18.2+), HER2-, locally advanced (LA) unresectable or metastatic gastric or gastroesophageal junction (mG/GEJ) adenocarcinoma. Annals of Oncology 34 (Supplement 4): S1524-S1525	INTERVENTION/COMPARATOR
40	Lordick F, Shah MA, Shitara K, Ajani JA, Bang YJ et al. (2023) 134MO Updated efficacy and safety results from phase III GLOW study evaluating zolbetuximab + CAPOX as first-line (1L) treatment for patients with claudin-18 isoform 2-positive (CLDN18.2+), HER2–, locally advanced (LA) unresectable or metastatic	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
	gastric or gastroesophageal junction (mG/GEJ) adenocarcinoma. Annals of Oncology 34 S1524	
41	Boku N, Ryu MH, Kato K, Chung HC, Minashi K et al. (2019) Safety and efficacy of nivolumab in combination with S-1/capecitabine plus oxaliplatin in patients with previously untreated, unresectable, advanced, or recurrent gastric/gastroesophageal junction cancer: interim results of a randomized, phase II trial (ATTRACTION-4). *Ann Oncol* 30 (2): 250-258.	NEWER DCO AVAILABLE
42	Xu J, Jiang H, Pan Y, Gu K, Cang S et al. (2023) Abstract CT078: First-line treatment with sintilimab (sin) vs placebo in combination with chemotherapy (chemo) in patients (pts) with unresectable gastric or gastroesophageal junction (G/GEJ) cancer: Final overall survival (OS) results from the randomized, phase III ORIENT-16 trial. Cancer Research 83 (8_Supplement): CT078-CT078	INTERVENTION/COMPARATOR
43	Arkenau H-T, Tabernero J, Cruz-Correa M, Zimina AV, Poddubskaya E et al. (2024) Tislelizumab plus chemotherapy (chemo) versus placebo plus chemo as first-line treatment for locally advanced unresectable or metastatic gastric or gastroesophageal junction adenocarcinoma: RATIONALE-305 European/North American patient subgroup. Journal of Clinical Oncology 42 (3_suppl): 330-330	NEWER DCO AVAILABLE

No.	Reference	Reason for exclusion
44	CADTH (2022) CADTH Reimbursement Review: Nivolumab (Opdivo). In: Canadian Journal of Health Technologies	NOT PRIMARY SOURCE
45	Chao J, Fuchs CS, Shitara K, Tabernero J, Muro K et al. (2021) Assessment of Pembrolizumab Therapy for the Treatment of Microsatellite Instability-High Gastric or Gastroesophageal Junction Cancer Among Patients in the KEYNOTE-059, KEYNOTE-061, and KEYNOTE-062 Clinical Trials. JAMA Oncol 7 (6): 895-902	POPULATION
46	Cruz-Correa M, Xu R-H, Moehler MH, Oh D-Y, Kato K et al. (2024) Tislelizumab (TIS) plus chemotherapy (Chemo) vs placebo (PBO) plus chemo as first-line (1L) treatment of advanced gastric or gastroesophageal junction adenocarcinoma (GC/GEJC): Health-related quality of life (HRQoL) outcomes in the RATIONALE-305 study . Journal of Clinical Oncology 42 (3_suppl): 290-290	NEWER DCO AVAILABLE
47	Janjigian YY, Shitara K, Moehler M, Garrido M, Salman P et al. (2021) First-line nivolumab plus chemotherapy versus chemotherapy alone for advanced gastric, gastro-oesophageal junction, and oesophageal adenocarcinoma (CheckMate 649): a randomised, open-label, phase 3 trial. Lancet 398 (10294): 27-40	NEWER DCO AVAILABLE

No.	Reference	Reason for exclusion
48	Kang YK, Qin S, Lee KW, Oh SC, Kim IH et al. (2023) 136MO Bemarituzumab (bema)+FOLFOX6 as first-line treatment in patients with FGFR2b overexpressing locally advanced or metastatic gastric/gastroesophageal junction cancer (G/GEJC): East Asia subgroup of FIGHT final analysis. Annals of Oncology 34 (Supplement 4): S1525	INTERVENTION/COMPARATOR
49	Lee KW, Van Cutsem E, Bang YJ, Fuchs CS, Kudaba I et al. (2022) Association of Tumor Mutational Burden with Efficacy of Pembrolizumab+/-Chemotherapy as First-Line Therapy for Gastric Cancer in the Phase III KEYNOTE-062 Study. Clin Cancer Res 28 (16): 3489-3498	POPULATION
50	Liu T, Bai Y, Lin X, Li W, Wang J et al. (2023) First-line nivolumab plus chemotherapy vs chemotherapy in patients with advanced gastric, gastroesophageal junction and esophageal adenocarcinoma: CheckMate 649 Chinese subgroup analysis. International Journal of Cancer 152 (4): 749-760	POPULATION
51	Lordick F, Al-Batran SE, Ganguli A, Morlock R, Sahin U et al. (2021) Patient-reported outcomes from the phase II FAST trial of zolbetuximab plus EOX compared to EOX alone as first-line treatment of patients with metastatic CLDN18.2+ gastroesophageal adenocarcinoma. Gastric Cancer 24 (3): 721-730	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
52	Lordick F, Van Cutsem E, Shitara K, Xu RH, Ajani JA et al. (2023) 1530P Health-related quality of life (hrqol) in patients with claudin-18 isoform 2-positive (CLDN18.2+) locally advanced (LA) unresectable or metastatic gastric or gastroesophageal junction (mg/GEJ) adenocarcinoma: Results from SPOTLIGHT and GLOW. Annals of Oncology 34 S860-S861	INTERVENTION/COMPARATOR
53	Moehler M, Janjigian YY, Shitara K, Garrido M, Gallardo C et al. (2023) Nivolumab (NIVO) plus chemotherapy (chemo) vs chemo as first-line (1L) treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): 3-year follow-up from CheckMate 649. Oncology Research and Treatment 46 (Supplement 5): 114-115	NEWER DCO AVAILABLE
54	78Moehler M, Wyrwicz L, Chen C, Davenport E, Wang J et al. (2023) O-10 Health-related quality of life (HRQOL) in patients with advanced gastric, gastroesophageal junction, or esophageal adenocarcinoma cancer (GC/GEJC/EAC): 36-month results of CheckMate 649 nivolumab plus chemotherapy (N+C) versus chemo (C). Annals of Oncology 34 (Supplement 1): S185	OUTCOME
55	Moehler MH, Kato K, Arkenau HT, Oh DY, Tabernero J et al. (2023) Rationale 305: Phase 3 study of tislelizumab plus chemotherapy vs placebo plus chemotherapy as first-line treatment (1L) of advanced gastric or gastroesophageal junction	NEWER DCO AVAILABLE

No.	Reference	Reason for exclusion
	adenocarcinoma (GC/GEJC). Journal of Clinical Oncology 41 (4 Supplement): 286	
56	NICE (2023) Technology appraisal guidance: Nivolumab with platinum- and fluoropyrimidinebased chemotherapy for untreated HER2-negative advanced gastric, gastrooesophageal junction or oesophageal adenocarcinoma In	NOT PRIMARY SOURCE
57	NICE (2024) Pembrolizumab with chemotherapy for treating HER2-negative advanced gastric or gastro-oesophageal junction adenocarcinoma [ID4030]	NOT PRIMARY SOURCE
58	Oh DY, Bai Y, Ryu MH, Lee J, Li J et al. (2023) 138MO Pembrolizumab (Pembro) or placebo (Pbo) plus chemotherapy (Chemo) for advanced HER2-negative gastric/gastroesophageal junction (G/GEJ) adenocarcinoma (KEYNOTE-859): Asia subgroup analysis. Annals of Oncology 34 (Supplement 4): S1526	POPULATION
59	PBAC (2021) Public Summary Document: Nivolumab.	NOT PRIMARY SOURCE
60	Shitara K, Ajani JA, Moehler M, Garrido M, Gallardo C et al. (2022) Nivolumab plus chemotherapy or ipilimumab in gastro-oesophageal cancer. *Nature* 603 (7903): 942-948	NEWER DCO AVAILABLE
61	Ryu M-H, Kang Y-K, Oh D-Y, Oh SC, Rha SY et al. (2023) PP213 Three-year follow-up of the ATTRACTION-4 Korean subgroup analysis: First-line	POPULATION

No.	Reference	Reason for exclusion
	(1L) nivolumab plus chemotherapy versus placebo plus chemotherapy in patients with previously untreated, advanced, or recurrent gastric/gastro-esophageal junction (G/GEJ) cancer. In: ESMO Open: Elsevier	
62	S L, Thuss-Patience PC, Folprecht G, Knorrenschild JR, Heinemann V et al. (2022) 1203O - FOLFOX plus nivolumab and ipilimumab versus FOLFOX induction followed by nivolumab and ipilimumab in patients with previously untreated advanced or metastatic adenocarcinoma of the stomach or gastroesophageal junction: Results from the randomized phase II Moonlight trial of the AIO. Annals of Oncology 33 (suppl_7): S555-S580	INTERVENTIN/COMPARATOR
63	Satake H, Lee KW, Chung HC, Lee J, Yamaguchi K et al. (2023) Pembrolizumab or pembrolizumab plus chemotherapy versus standard of care chemotherapy in patients with advanced gastric or gastroesophageal junction adenocarcinoma: Asian subgroup analysis of KEYNOTE-062. Japanese Journal of Clinical Oncology 53 (3): 221-229	POPULATION
64	Shen L, Bai Y, Lin X, Li W, Wang J et al. (2022) P-86 First-line nivolumab (NIVO) plus chemotherapy (chemo) vs chemo in patients with advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): CheckMate 649 Chinese subgroup analysis 2-year follow-up. Annals of Oncology 33 S279	POPULATION

No.	Reference	Reason for exclusion
65	Shen L, Bai Y, Lin X, Li W, Wang J et al. (2024) First-line (1L) nivolumab (NIVO) plus chemotherapy (chemo) vs chemo in patients (pts) with advanced gastric cancer, gastroesophageal junction cancer, and esophageal adenocarcinoma (GC/GEJC/EAC): CheckMate 649 Chinese subgroup analysis 4-year (yr) follow-up. Journal of Clinical Oncology 42 (3_suppl): 318-318	POPULATION
66	Shen L, Bai Y, Lin X, Li W, Wang J et al. (2023) First-line (1L) nivolumab (NIVO) plus chemotherapy (chemo) vs chemo in patients (pts) with advanced gastric cancer, gastroesophageal junction cancer, and esophageal adenocarcinoma (GC/GEJC/EAC): CheckMate 649 Chinese subgroup analysis with 3-year follow-up. Journal of Clinical Oncology 41 (4 Supplement): 353	POPULATION
67	Shitara K, Janjigian YY, Moehler MH, Garrido M, Gallardo C et al. (2022) Nivolumab (NIVO) plus chemotherapy (chemo) versus chemo as first-line (1L) treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): expanded efficacy, safety, and subgroup analyses from CheckMate 649. Journal of Clinical Oncology 40 (4 SUPPL)	NEWER DCO AVAILABLE
68	Moehler M, Janjigian YY, Shitara K, Garrido M, Gallardo C et al. (2023) Nivolumab (NIVO) plus chemotherapy (chemo) vs chemo as first-line (1L)	NEWER DCO AVAILABLE

No.	Reference	Reason for exclusion
	treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): 3-year follow-up from CheckMate 649. Oncology Research and Treatment 46 (Supplement 5): 114-115.	
69	SMC (2022) Nivolumab 10mg/mL concentrate for solution for infusion (Opdivo®)	NOT PRIMARY SOURCE
70	Wainberg Z, Kang Y, Lee K, Qin S, Yamaguchi K et al. (2023) Bemarituzumab for treatment of previously untreated advanced and/or metastatic gastric and gastroesophageal cancer (GC): Final analysis of a randomized phase 2 trial (FIGHT). Annals of Oncology 34 (Supplement 1): S166	INTERVENTION/COMPARATOR
71	Wainberg ZA, Enzinger PC, Qin S, Yamaguchi K, Gnanasakthy A et al. (2022) 1221P Health-related quality of life (HRQoL) in FGFR2b-overexpressing, advanced gastric or gastroesophageal junction cancer (G/GEJC): Results from the FIGHT trial comparing bemarituzumab (BEMA) + modified FOLFOX6 (mFOLFOX6) to placebo (PBO) + mFOLFOX6. In: Annals of Oncology, p S1107: Elsevier	INTERVENTION/COMPARATOR
72	Wainberg ZA, Fuchs CS, Tabernero J, Shitara K, Muro K et al. (2021) Efficacy of Pembrolizumab Monotherapy for Advanced Gastric/Gastroesophageal Junction Cancer with	NEWER DCO AVAILABLE

No.	Reference	Reason for exclusion
	Programmed Death Ligand 1 Combined Positive Score ≥10. Clin Cancer Res 27 (7): 1923-1931	
73	Wainberg ZA, Shiu K-K, Rivera F, Medley LC, Aghmesheh M et al. (2024) First-line pembrolizumab (pembro) plus chemotherapy (chemo) for advanced gastroesophageal junction cancer (GEJC) and esophageal adenocarcinoma (EAC): Analysis of KEYNOTE-590 and KEYNOTE-859 by tumor type. In: Journal of Clinical Oncology, pp 345-345: Wolters Kluwer	NEWER DCO AVAILABLE
74	(Web Page) A Study of Ipatasertib (GDC-0068) in Combination With Fluoropyrimidine Plus Oxaliplatin in Participants With Advanced or Metastatic Gastric or Gastroesophageal Junction Cancer. Updated Available online at: https://clinicaltrials.gov/study/NCT01896531. Accessed: 2024.	INTERVENTION/COMPARATOR
75	Shitara K, Pophale R, Matsangou M, Park JW, Oh M et al. (2024) Management of nausea and vomiting (N/V) following first-line (1L) zolbetuximab + chemotherapy treatment in claudin-18.2 (CLDN18.2)+, HER22, locally advanced (LA) unresectable or metastatic gastric or gastroesophageal junction (mG/GEJ) adenocarcinoma: Analysis from the phase 3 SPOTLIGHT and GLOW studies. Journal of Clinical Oncology 42 (3 Supplement)	INTERVENTION/COMPARATOR

No.	Reference	Reason for exclusion
76	NICE (2024) Pembrolizumab with platinum- and fluoropyrimidine-based chemotherapy for untreated advanced HER2-negative gastric or gastro-oesophageal junction adenocarcinoma. In.	NOT PRIMARY SOURCE
77	Lordick F, Van Cutsem E, Shitara K, Xu RH, Ajani JA et al. (2024) Health-related quality of life in patients with CLDN18.2-positive, locally advanced unresectable or metastatic gastric or gastroesophageal junction adenocarcinoma: results from the SPOTLIGHT and GLOW clinical trials. ESMO Open 9 (8): 103663	INTERVENTINO/COMPARATOR
78	Kang YK, Qin S, Lee KW, Oh SC, Kim IH et al. (2024) Bemarituzumab plus mFOLFOX6 as first-line treatment in East Asian patients with FGFR2b-overexpressing locally advanced or metastatic gastric/gastroesophageal junction cancer: subgroup of FIGHT final analysis. Gastric Cancer 27 (5): 1046-1057	INTERVENTINO/COMPARATOR
79	HAS (2024) Pembrolizumab KEYTRUDA 25 mg/ml concentrate for solution for infusion Indication extension. In	NOT PRIMARY SOURCE
80	HAS (2022) TRANSPARENCY COMMITTEE SUMMARY 23 MARCH 2022 In, p 4	NOT PRIMARY SOURCE
81	IQWiG (2022) IQWiG Reports – Commission No. A22-37: Pembrolizumab (oesophageal or	NOT PRIMARY SOURCE

No.	Reference	Reason for exclusion
	gastroesophageal junction carcinoma) – Addendum to Commission A21-144. In, p 122	
82	IQWiG (2022) IQWiG Reports – Commission No. A22-44: Nivolumab (gastric, gastro-oesophageal junction or oesophageal adenocarcinoma) – Addendum to Commission A21-146. In, p 52	NOT PRIMARY SOURCE
83	SMC (2024) Pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®). In	NOT PRIMARY SOURCE
84	Moehler M, Oh DY, Kato K, Tabernero J, Cruz-Correa M et al. (2024) Tislelizumab (TIS) plus chemotherapy (CT) vs placebo (PBO) plus CT in HER2-negative advanced or metastatic gastric or gastro-esophageal junction adenocarcinoma (GC/GEJC): PD-L1 biomarker analysis from RATIONALE-305. Annals of Oncology 35 (Supplement 1): S160-S161	OUTCOME
85	Wyrwicz LS, Shitara K, Moehler M, Ajani JA, Shen L et al. (2024) Nivolumab (NIVO) + chemotherapy (chemo) vs chemo as first-line (1L) treatment for advanced gastric cancer/gastroesophageal junction cancer/esophageal adenocarcinoma (GC/GEJC/EAC): Additional analyses from 4-year (y) follow-up (FU) of CheckMate 649. Annals of Oncology 35 (Supplement 1): S169-S170.	NO NEW RESULTS OF INTEREST
86	Rha SY, Wyrwicz LS, Weber PEY, Bai Y, Ryu MH et al. (2023) VP1-2023: Pembrolizumab (pembro) plus chemotherapy (chemo) as first-line therapy for	FULL TEXT AVAILABLE

No.	Reference	Reason for exclusion
	advanced HER2-negative gastric or gastroesophageal junction (G/GEJ) cancer: Phase III KEYNOTE-859 study. Annals of Oncology 34 (3): 319-320.	
87	Peng Z, Wei J, Wang F, Ying J, Deng Y et al. (2021) Camrelizumab Combined with Chemotherapy Followed by Camrelizumab plus Apatinib as First-line Therapy for Advanced Gastric or Gastroesophageal Junction Adenocarcinoma. In: Clin Cancer Res, 20210325 Edition, pp 3069-3078.	INTERVENTION/COMPARATOR
88	Wainberg ZA, Kang YK, Lee KW, Qin S, Yamaguchi K et al. (2024) Bemarituzumab as first-line treatment for locally advanced or metastatic gastric/gastroesophageal junction adenocarcinoma: final analysis of the randomized phase 2 FIGHT trial. Gastric Cancer	INTERVENTION/COMPARATOR
89	Wainberg ZA, Enzinger PC, Qin S, Yamaguchi K, Gnanasakthy A et al. (2022) 75MO Health-related quality of life (HRQoL) in FGFR2b-overexpressing, advanced gastric or gastroesophageal junction cancer (G/GEJC): Results from the FIGHT trial comparing bemarituzumab (BEMA) + modified FOLFOX6 (mFOLFOX6) to placebo (PBO) + mFOLFOX6. Annals of Oncology 33 (Supplement 9): S1460-S1461.	INTERVENTION/COMPARATOR

H.1.7 Quality assessment

A key strength of this SLR was its adherence to best practices for the conduct and reporting of systematic reviews. Notably, all searches were performed by an experienced medical information specialist and peer-reviewed by a second information specialist. As per the PRISMA statement, the current review reports detailed search strategies, PICOS, a PRISMA flow diagram and full included/excluded study lists.

A limitation of this SLR was that the language was restricted to include English-only articles at the study selection stage. Given that most of the key studies identified were published in English journals, it is likely that this was a minor limitation. However, it should be noted that this restriction was not applied to the search strategy.

H.1.8 Unpublished data

N/A

Appendix I. Literature searches for health-related quality of life

I.1 Health-related quality-of-life search

N/A

Table 75 Bibliographic databases included in the literature search

Database	Platform	Relevant period for the search	Date of search completion
N/A			

Table 76 Other sources included in the literature search

Source name	Location/source	Search strategy	Date of search
N/A			

Table 77 Conference material included in the literature search

Conference	Source of abstracts	Search strategy	Words/terms searched	Date of search
N/A				

I.1.1 Search strategies

Table 78 Search strategy for [name of database]

No.	Query	Results
#1		88244
#2		85778
#3		115048
#4		7011
#5		10053
#6		12332
#7		206348
#8		211070
#9	#7 OR #8	272517
#10	#3 AND #6 AND #9	37

I.1.2 Quality assessment and generalizability of estimates

I.1.3 Unpublished data

Appendix J. Literature searches for input to the health economic model (N/A)

J.1 External literature for input to the health economic model

Not applicable.

J.1.1 Example: Systematic search for [...]

Not applicable.

Table 51 Sources included in the search

Database	Platform/source	Relevant period for the search	Date of search completion
Embase	N/A	N/A	N/A

J.1.2 Example: Targeted literature search for [estimates]

Not applicable.

Table 52 Sources included in the targeted literature search

Source name/ database	Location/source	Search strategy	Date of search
N/A	N/A	N/A	N/A

Appendix K. Intention-to-treat population analyses

K.1 Baseline characteristics

Table 79. Baseline characteristics of patients in ITT populations in studies included for the comparative analysis of efficacy and safety

	RATIONALE-305 [54,71]		CheckMate 649 [54]	
	TIS + CT (N=501)	PBO + CT (N=496)	NIV + CT (N=789)	CT (N=792)
Median Age (range)	60.0 (23.0-86.0)	61.0 (25.0-86.0)	62.0 (18.0-88.0)	61.0 (21.0-90.0)
Sex, n (%)				
Male	346 (69)	346 (70)	540 (68)	560 (71)
Female	155 (31)	150 (30)	249 (32)	232 (29)
Race/ethnicity (%)				
Asian	376 (75)	372 (75)	186 (24)	189 (24)
White	116 (23)	107 (22)	NR	NR
Other	9 (2)	17 (3)	603 (76)*	602 (76)*
Geographical region (%)				
Asia	376 (75)	372 (75)	178 (23)	178 (22)

	RATIONALE-305 [54,71]		CheckMate 649 [54]	
	TIS + CT (N=501)	PBO + CT (N=496)	NIV + CT (N=789)	CT (N=792)
North America/Europe	125 (25)	124 (25)	NR	NR
Other	NR	NR	611 (77)	614 (78)
ECOG PS (%)				
0	169 (34)	154 (31)	327 (41)	337 (43)
1	332 (66)	342 (69)	461 (58)	452 (57)
Disease status (%)				
Advanced	NR	NR	NR	NR
Recurrent	NR	NR	NR	NR
Locally advanced	7 (1)	4 (<1)	27 (3)	34 (4)
Locally recurrent	0 (0)	1 (<1)	5 (<1)	2 (<1)
Metastatic	494 (99)	490 (99)	757 (96)	756 (95)
Missing	NR	NR	NR	NR
Primary tumor location (%)				
Stomach	405 (81)	395 (80)	554 (70)	556 (70)

	RATIONALE-305 [54,71]		CheckMate 649 [54]	
	TIS + CT (N=501)	PBO + CT (N=496)	NIV + CT (N=789)	CT (N=792)
Gastro-oesophageal junction	96 (19)	100 (20)	132 (17)	128 (16)
Esophageal adenocarcinoma	0 (0)	0 (0)	103 (13)	108 (14)
Missing	0 (0)	0 (0)	0 (0)	0 (0)
Number of metastatic sites (%)				
≤1	NR	NR	NR	NR
1	NR	NR	165 (21)	179 (23)
≥2	NR	NR	NR	NR
0-2	335 (67)	335 (68)	165 (21)	179 (23)
>2	NR	NR	634 (79)	613 (77)
≥3	166 (33)	160 (32)	NR	NR
Missing	0 (0)	1 (<1)	NR	NR

	RATIONALE-305 [54,71]		CheckMate 649 [54]	
	TIS + CT (N=501)	PBO + CT (N=496)	NIV + CT (N=789)	CT (N=792)
Liver metastases (%)	190 (38)	188 (38)	301 (38)	313 (40)
Peritoneal metastases (%)	220 (44)	214 (43)	188 (24)	189 (24)
Previous adjuvant/neoadjuvant treatment (%)	107 (21)	100 (20)	NR	NR
Previous gastrectomy/oesophagectomy (%)	133 (27)	139 (28)	NR	NR
Microsatellite intability (MSI) or mismatch repair (MMR) status (%)				
MSI-high/deficient MMR	16 (3)	24 (5)	23 (3)	21 (3)
MSI-low/microsatellite stable (MSS)/ proficient MMR	448 (89)	439 (89)	696 (88)	682 (86)
Unknown	37 (7)	33 (7)	70 (9)	89 (11)
PD-L1 expression TAP score (%)				
<5%	227 (45)	224 (45)	NR	NR

	RATIONALE-305 [54,71]		CheckMate 649 [54]	
	TIS + CT (N=501)	PBO + CT (N=496)	NIV + CT (N=789)	CT (N=792)
≥5%	274 (55)	272 (55)	NR	NR
PD-L1 expression CPS score (%)				
≥1	NR	NR	NR	NR
<5	237 (47)**	214 (43)**	316 (40)	310 (39)
≥5	254 (51)**	269 (54)**	473 (60)	482 (61)
≥10	NR	NR	NR	NR
Unevaluable	10 (2)**	13 (3)**	NR	NR
Tumor cell PD-L1 Expression (%)				
< 1%	NR	NR	663 (84)	661 (83)
≥1%	NR	NR	126 (16)	127 (16)
Histological subtype (Lauren classification) (%)				
Diffuse	NR	NR	254 (32)	273 (34)
Intestinal	NR	NR	272 (34)	267 (34)

	RATIONALE-305 [54,71]		CheckMate 649 [54]	
	TIS + CT (N=501)	PBO + CT (N=496)	NIV + CT (N=789)	CT (N=792)
Indeterminate (mixed)	NR	NR	58 (7)	48 (6)
Other	NR	NR	NR	NR
Unknown	NR	NR	205 (26)	204 (26)
Missing	NR	NR	0 (0)	0 (0)
Investigator's choice of CT (%)				
Oxaliplatin and capecitabine	466 (93)	465 (94)	360 (46)	361 (47)
Cisplatin and 5-FU	35 (7)	31 (6)	0 (0)	0 (0)
Tegafur-gimeracil-oteracil potassium (S-1) and oxaliplatin	0 (0)	0 (0)	0 (0)	0 (0)
FU and leucovorin and oxaliplatin	0 (0)	0 (0)	422 (54)	406 (53)
FU	NR	NR	NR	NR
Capecitabine	NR	NR	NR	NR

K.2 RATIONALE-305

K.2.1 Final analysis (DCO February 2023)

K.2.1.1 Overall survival

ITT population: TIS + CT was associated with a median OS of 15.0 months [95% CI: 13.6 to 16.5] versus 12.9 months [95% CI: 12.1 to 14.1] for PBO + CT in the final analysis. In the ITT population Cox regression models were stratified by region (East Asia versus Europe/North America), PD-L1 expression (all randomized patients only), and presence of peritoneal metastasis. The stratified hazard ratio (HR) for mortality was 0.80 [95% CI: 0.70 to 0.92; P = 0.001] in favor of TIS + CT. The TIS + CT arm yielded a higher OS rate than the PBO + CT arm, indicating a sustained OS benefit associated with TIS + CT in the ITT population [44]. The median follow-up times by reverse Kaplan-Meier methodology were 32.9 months [95% CI: 30.5 to 35.2] and 32.5 months [95% CI: 31.2 to 35.0] for the TIS + CT arm and the PBO + CT arm, respectively, as seen in a confidential internal CSR [7]. The Kaplan-Meier plot is presented in Appendix B.

K.2.1.2 Progression-free survival

ITT population: As of the DCO in February 2023, 311 (62%) patients progressed in the TIS + CT arm and 354 (71.4%) in the PBO + CT arm. The median PFS for TIS + CT was 6.9 months [95% CI: 5.7 to 7.2] and 6.2 months [95% CI: 5.6 to 6.9] for the PBO + CT arm (stratified HR = 0.78 [95% CI: 0.67 to 0.90]). The Kaplan-Meier curves began to separate at approximately 9 months in favor of TIS + CT [44]. PFS results in the ITT population at the final analysis are presented in Appendix B.

K.2.2 Close-out data (DCO August 2024)

K.2.2.1 Overall survival

ITT population: The updated OS results in this data-cutoff were consistent with the final analysis results and continued to show clinically meaningful OS improvement with TIS + CT versus PBO + CT in the ITT population. Results are presented in Table 80.

Table 80. Overall survival in the ITT population (RATIONALE-305, DCO August 2024)

	TIS + CT (n = 501)	PBO + CT (n = 496)
Death, n (%)	[redacted]	[redacted]
Median OS, months (95% CI)	[redacted]	[redacted]
Stratified HR (95% CI) [a]	[redacted]	[redacted]

One-sided stratified log-rank test P-value [a]	[redacted]	[redacted]
Survival rate at, % (95% CI)		
6 months	[redacted]	[redacted]
12 months	[redacted]	[redacted]
18 months	[redacted]	[redacted]
24 months	[redacted]	[redacted]
36 months	[redacted]	[redacted]
48 months	[redacted]	[redacted]
60 months	[redacted]	[redacted]
Median follow-up time, months (95% CI)	[redacted]	[redacted]

Notes: Medians and other quartiles were estimated by Kaplan-Meier method with 95% CIs estimated using the method of Brookmeyer and Crowley. OS rates were estimated by Kaplan-Meier method with 95% CIs estimated using the Greenwood's formula. Median follow-up time was estimated by the reverse Kaplan-Meier method. [a]Stratified by regions (east Asia versus Europe/North America), PD-L1 expression and presence of peritoneal metastasis. Source: All data in the table above was sourced from an internal CSR [7].

K.2.2.2 Progression-free survival

K.3 CheckMate 649

At DCO 27 May, 2021, OS with NIV + CT versus CT was observed in all randomized patients; median OS was 13.8 months (95% CI: 12.4-14.5) versus 11.6 months (95% CI: 10.9-12.5), respectively, with a 21% reduction in the risk of death versus CT (HR 0.79; 95% CI: 0.71-0.88). A PFS benefit was observed with NIV + CT versus CT in all randomized patients (HR 0.79; 95% CI: 0.70–0.89). At 3-year follow-up, with 36.2 months minimum follow-up, results in the overall population were consistent with those in the PD-L1 CPS ≥5 in which NIV + CT showed improvement in OS and PFS versus CT [54]. At the 48 months minimum follow-up, NIV + CT continued to demonstrate OS and PFS benefit vs CT in all randomized patients (Table 81) [67].

Table 81. 48-month follow-up results in ITT population - CheckMate 649

	ITT population	
	NIV + CT	CT
	(n = 789)	(n = 792)

Median OS, months (95% CI)	13.7 (12.4–14.5)	11.6 (10.9–12.5)
HR (95% CI)	0.79 (0.71–0.88)	
48-month OS rate, % (95% CI)	13 (11–16)	8 (6–10)
Median PFS[a], months (95% CI)	7.7 (7.1–8.6)	6.9 (6.7–7.2)
HR (95% CI)	0.80 (0.71–0.89)	

Source: [67].

Appendix L. Rest of World (non-Asia) subgroup analyses

L.1 RATIONALE-305

L.1.1 Overall survival

Tislelizumab plus CT improved OS in the European and North American subpopulation in the PD-L1 ≥5% population.

The unstratified HR favored Tislelizumab plus CT in the European and North American subpopulation in the PD-L1 ≥5% population (HR = 0.75 [95% CI: 0.52 to 1.07]) and the ITT Set (HR = 0.71 [95% CI: 0.54 to 0.94]) (Table 82) [71].

Table 82. Overall survival in the European and North American subpopulation at final analysis, RATIONALE-305

	TIS + CT	PBO + CT
Overall survival in the European and North American subpopulation		
PD-L1 ≥5% Set		
OS events/Patients (n)	57/72	62/71
Median OS (95% CI), months	10.2 (7.5 to 15.0)	10.7 (7.9 to 12.8)
Unstratified OS HR (95% CI) [a]	0.75 (0.52 to 1.07)	
ITT Set		
OS events/Patients (n)	96/125	108/124
Median OS (95% CI), months	11.0 (8.4 to 13.9)	10.5 (8.1 to 12.1)
Unstratified OS HR (95% CI) [a]	0.71 (0.54 to 0.94)	

[a] Hazard Ratio and its 95% CI were estimated from unstratified Cox regression model including treatment as covariate. Source: **[71]**.

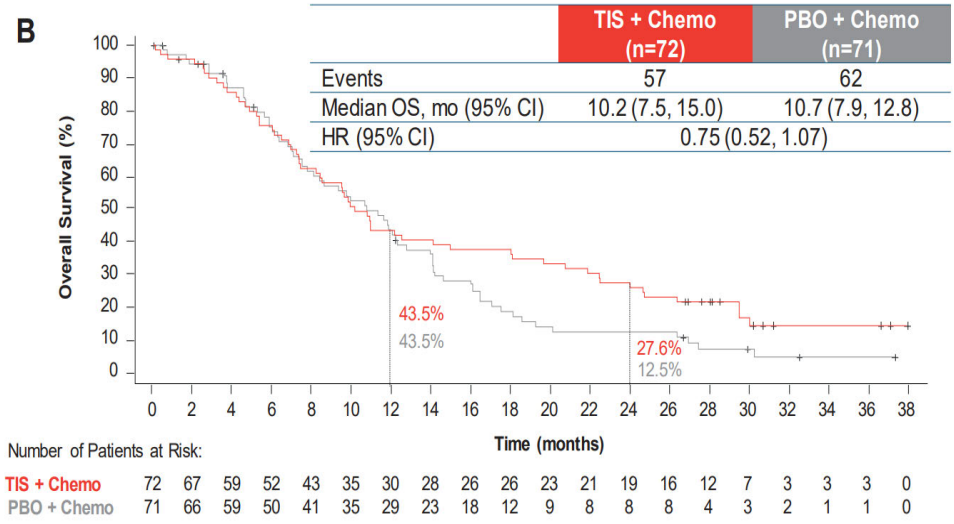


Figure 23. Kaplan-Meier data for overall survival in the European and North American PD-L1 ≥5% subpopulation at DCO February 2023, RATIONALE-305

*Log-rank and Cox regression models were stratified by regions (Asia versus Europe/North America), PD-L1 expression (ITT population analysis only), and presence of peritoneal metastasis. P-values are one-sided and based on the stratified log-rank test. P-value boundary at final analysis is 0.0226. Medians were estimated by the Kaplan-Meier method with 95% CIs estimated using the method of Brookmeyer and Crowley. OS rates were estimated by the Kaplan-Meier method. Source: The Kaplan-Meier data was sourced from an internal EVD [7].

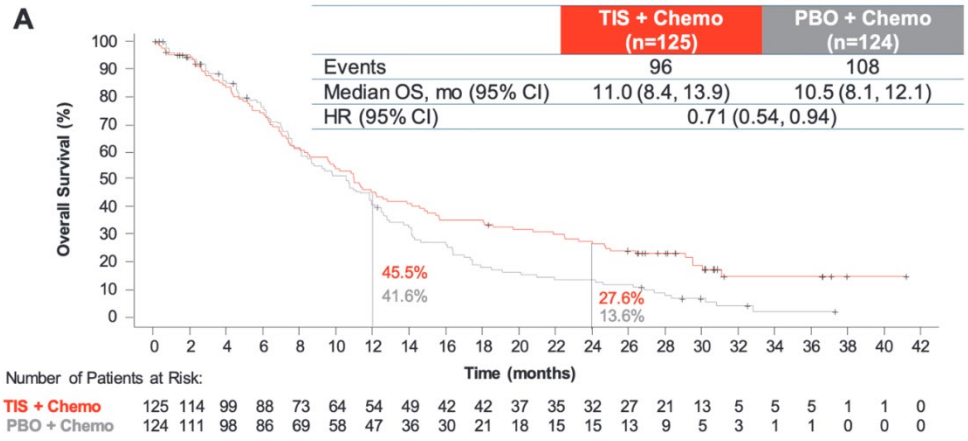


Figure 24. Kaplan-Meier data for overall survival in the European and North American ITT analysis set at DCO February 2023, RATIONALE-305

*Log-rank and Cox regression models were stratified by regions (Asia versus Europe/North America), PD-L1 expression (ITT population analysis only), and presence of peritoneal metastasis. P-values are one-sided and based on the stratified log-rank test. P-value boundary at final analysis is 0.0226. Medians were estimated by the Kaplan-Meier method with 95% CIs estimated using the method of Brookmeyer and Crowley. OS rates were estimated by the Kaplan-Meier method. Source: The Kaplan-Meier data was sourced from an internal EVD [7].

L.1.2 Progression-free survival

The unstratified HR of tislelizumab plus CT versus placebo plus CT in the European and North American subpopulation in the PD-L1 ≥5% population was [redacted] (Table 83 and Figure 25) and in the ITT Set 0.84 [95% CI: 0.63 to 1.11] at the time of the final DCO (Table 83). The small patient population in this subgroup is likely the reason for the large CIs, which cross the line of no effect [7].

Table 83. Progression-free survival in the European and North American subpopulation at final analysis, RATIONALE-305

	PD-L1 ≥5% Set		ITT Set	
	TIS + CT (n =72)	PBO + CT (n =71)	TIS + CT (n =125)	PBO + CT (n =124)
Progressive Disease, n (%)	[redacted]	[redacted]	[redacted]	[redacted]
Death, n (%)	[redacted]	[redacted]	[redacted]	[redacted]
Median PFS, months (95% CI)	[redacted]	[redacted]	5.6 (4.4, 7.0)	5.4 (4.3, 5.9)
Unstratified HR (95% CI)[a]	[redacted]		0.84 (0.63,1.11)	

Source: All data in the table above was sourced from an internal EVD [7].

Figure 25. Kaplan-Meier curve of progression-free survival in the European and North American subpopulation with PD-L1 ≥5% at final analysis, RATIONALE-305

Notes: Arm A = Tislelizumab + Chemotherapy, Arm B = Placebo + Chemotherapy. Hazard Ratio was based on unstratified Cox regression model. '+' = censored. Source: The Kaplan-Meier data was sourced from an internal EVD [7].

L.2 CheckMate 649

L.2.1 Overall survival

At 3-year follow-up (DCO May 2022) in CheckMate 649, the HRs for OS favored nivolumab plus CT over CT in the prespecified subgroup ROW in patients with PD-L1 CPS ≥5 (n=590) and in the overall population (n=962). The unstratified HR for OS with nivolumab plus CT vs CT in the PD-L1 CPS ≥5 population was 0.74 [95% CI: 0.62 to 0.88].

In the ITT population the unstratified HR for OS with NIV + CT vs CT was 0.83 [95% CI: 0.72 to 0.95] [54].

Medicinrådet

Danish Medicines Council
Secretariat
Dampfærgevej 21-23, 3rd floor
DK-2100 Copenhagen Ø

+ 45 70 10 36 00
medicinraadet@medicinraadet.dk

www.medicinraadet.dk