Appendix G

Table S3. Treatment-emergent serious adverse events, no (%)

	CT-P13 5 mg/kg (N=128)	INX 5 mg/kg (N=122)	Total (N=250)
Atrial fibrillation	1 (0.8)	0	1 (0.4)
Myocardial infarction	0	1 (0.8)	1 (0.4)
Oesophageal perforation	1 (0.8)*	0	1 (0.4)
Infusion-related reaction	0	2 (1.6)*	2 (0.8)
Appendicitis	0	1 (0.8)	1 (0.4)
Cellulitis	0	1 (0.8)*	1 (0.4)
Disseminated tuberculosis[#]	1 (0.8)*	0	1 (0.4)
Pulmonary tuberculosis	0	1 (0.8)*	1 (0.4)
Tuberculosis	1 (0.8)*	0	1 (0.4)
Wound infection	0	1 (0.8)*	1 (0.4)
Vascular pseudoaneurysm	0	1 (0.8)	1 (0.4)
Basal cell carcinoma	1 (0.8)	0	1 (0.4)
Dyspnoea	1 (0.8)*	0	1 (0.4)

* indicate SAEs considered by the investigator to be related to the study treatment
[#] the baseline chest x-ray at screening of this patient showed “pneumofibrosis”. The patient had been registered with a TB centre during childhood following a positive tuberculin-skin-test, but without further details. Furthermore, the patient failed to disclose relevant previous TB history during recruitment.

Regardless of relationship with study drug, 6 cases and 8 cases were reported from the CT-P13 and INX group, respectively. Among them, 4 cases were related to study drug in the CT-P13 group; Tuberculosis, Disseminated tuberculosis, Oesophageal perforation and Dyspnoea and 5 cases were related to study drug in the INX group; 2 Infusion related reaction, Pulmonary tuberculosis, Cellulitis and Wound infection.