**Supplemental Information**

Definitions of study endpoints and relevant details

*Primary Endpoint*

Progression-free survival (PFS) by independent imaging review (IIR) is defined as the time from the date of randomization to the date of the first documentation of progressive disease (PD) or death (whichever occurs first) as determined by IIR using RECIST (Response Evaluation Criteria in Solid Tumors) v1.1.

*Secondary Endpoints*

PFS rate at 4 months by IIR is defined as the percentage of patients who are alive and without PD at 4 months from the randomization date as determined by IIR of radiological imaging using RECIST v1.1.

PFS rate at 1 year by IIR is defined as the percentage of patients who are alive and without PD at 1 year from the randomization date as determined by IIR of radiological imaging using RECIST v1.1.

Overall survival is defined as the time from the date of randomization to the date of death from any cause.

Objective response rate (ORR) by IIR is defined as the proportion of subjects who have best overall response of complete response (CR) or partial response (PR) as determined by IIR using RECIST v1.1.

ORR at 4 months is defined as the proportion of patients who have best overall response of CR or PR as determined by IIR using RECIST v1.1 within the first 4 months.

*Exploratory Endpoints*

Duration of response by IIR and investigator assessment is defined as the time from the date a response was first documented until the date of the first documentation of PD or date of death from any cause.

Disease control rate by IIR and investigator assessment is the proportion of patients who have a best overall response of CR or PR or stable disease (SD). In this context, a best overall response of SD is defined as SD at ≥ 7 weeks after randomization.

Clinical benefit rate by IIR and investigator assessment is the proportion of patients who have best overall response of CR or PR or durable SD (duration of SD ≥ 23 weeks after randomization).

*Safety*

A treatment-emergent adverse event is defined as an adverse event that emerges during treatment (and within 30 days of the last study treatment); was absent at pretreatment (baseline) or re-emerges during treatment; was present at pretreatment (baseline) but stopped before treatment; or worsens in severity during treatment relative to the pretreatment state, when the adverse event is continuous.