Supplementary Tables and Figures

Supplementary Table 1. Hospital Site Characteristics

Characteristic	Total (N = 290)
Primary medical specialty, n (%)	
Medical/clinical oncology	195 (67.2)
Pulmonology	77 (26.6)
Radiation oncology	10 (3.4)
Other	5 (1.7)
Missing	3 (1.0)
Site treats unresectable stage III NSCLC patients suitable for definitive CRT, n (%)	
Yes	285 (98.3)
No	2 (0.7)
Missing	3 (1.0)
Location where radiotherapy is performed, n (%)	
In-house	163 (56.2)
External - Private	41 (14.1)
External - Public	79 (27.2)
Missing	7 (2.4)
Estimated number of patients treated for lung cancer in the last 12 months, median (range)	n = 271[a] 150.0 (0–999)
Estimated number of Stage III NSCLC patients suitable for CRT, median (range)	n = 264[a] 25.0 (0–743)

[a]Medians and associated ranges calculated based on sites with available data.

CRT, chemoradiotherapy; NSCLC, non-small-cell lung cancer.

Supplementary Table 2. TNM Classification at Initial NSCLC Diagnosis

Extent of Disease/Site	Full Analysis Set (N = 1,399)
Locally advanced – primary tumor, n (%)	n = 1,390[a]
Tis	0
TX	77 (5.5)
T1	46 (3.3)
T1a	38 (2.7)
T1b	61 (4.4)
T1c	46 (3.3)
T2	123 (8.8)
T2a	122 (8.8)
T2b	75 (5.4)
T2c	0
T3	299 (21.5)
T4	503 (36.2)
Locally advanced – regional lymph nodes, n (%)	n = 1,356[b]
N0	148 (10.9)
N1	117 (8.6)
N2	746 (55.0)
N3	315 (23.2)
NX	30 (2.2)
Locally advanced – distant metastasis, n (%)	n = 1,383[c]
M0	1,365 (98.7)
MX	18 (1.3)

Patients were classified under various editions of the American Joint Committee on Cancer Staging Manual. All percentages reported in the table are calculated using the number of

patients with available data as the denominator.

[a]T category data were missing for nine patients.

[b]N category data were missing for 43 patients.

[c]M category data were missing for 16 patients.

NSCLC, non-small cell lung cancer; TNM, tumor-node-metastasis.

Supplementary Table 3. Patient Demographics and Disease Characteristics by PD-L1 Status

Characteristic	PD-L1 ≥1% (N = 700)	PD-L1 <1% (N = 174)	PD-L1 inconsistent[a] (N = 93)
Median age at EAP inclusion, years (range)	65.0 (26–86)	66.0 (36–86)	65.0 (43–80)
Age category at EAP inclusion, n (%)			
<70 years	492 (70.3)	115 (66.1)	64 (68.8)
70–75 years	142 (20.3)	39 (22.4)	24 (25.8)
>75 years	66 (9.4)	20 (11.5)	5 (5.4)
Sex, n (%)			
Male	466 (66.6)	129 (74.1)	61 (65.6)
Female	234 (33.4)	45 (25.9)	32 (34.4)
Smoking status at EAP inclusion, n (%)			
Never	60 (8.6)	14 (8.0)	9 (9.7)
Current	214 (30.6)	64 (36.8)	45 (48.4)
Former	426 (60.9)	96 (55.2)	39 (41.9)
ECOG/WHO PS at EAP inclusion, n (%)	n = 488[b]	n = 125[b]	n = 62[b]
0	249 (51.0)	65 (52.0)	30 (48.4)
1	228 (46.7)	57 (45.6)	30 (48.4)
2 or 3	11 (2.3)	3 (2.4)	2 (3.2)
Disease stage at initial NSCLC diagnosis, n (%)	n = 697[b]	n = 173[b]	n = 91[b]
IA to IIB	36 (5.2)	8 (4.6)	5 (5.5)
IIIA	296 (42.5)	81 (46.8)	32 (35.2)
IIIB/C	365 (52.4)	84 (48.6)	54 (59.3)
Histological subtype at stage III diagnosis, n (%)	n = 691[b]	n = 174[b]	n = 91[b]
Squamous	232 (33.6)	74 (42.5)	33 (36.3)

Non-squamous	459 (66.4)	100 (57.5)	58 (63.7)

[a]The PD-L1 inconsistent subgroup represents patients who were tested for PD-L1 but whose test results were not clearly reported due to misalignment of three different variables in their case report forms (that precluded classification of the PD-L1 expression level as ≥1% or <1%); the variables were tumor cell %, PD-L1 status (positive or negative), and the threshold level used for classifying PD-L1 status.

[b]Percentages reported in the table are calculated using the number of patients with available data (for each variable) as the denominator.

EAP, early access program; ECOG/WHO PS, Eastern Cooperative Oncology Group/World Health Organization performance status; NSCLC, non-small-cell lung cancer; PD-L1, programmed cell death-ligand 1.

Supplementary Table 4. Prevalence of Specific Oncogenic Aberrations as Reported the Time of Stage III Diagnosis

Oncogene	Full Analysis Set (N = 1,399)
***EGFR*, n (%)**	
Not tested	817 (58.4)
Tested	582 (41.6)
Mutated[a]	46 (7.9)
Wild-type[a]	517 (88.8)
Inconclusive/unknown[a]	19 (3.3)
***ALK/ROS1*, n (%)[b]**	
Not tested	830 (59.5)
Tested	566 (40.5)
Rearranged[a]	11 (1.9)
Non-rearranged[a]	526 (92.9)
Inconclusive/unknown[a]	29 (5.1)
***BRAF*, n (%)[c]**	
Not tested	1091 (78.2)
Tested	304 (21.8)
Mutated[a]	22 (7.2)
Non-mutated[a]	272 (89.5)
Inconclusive/unknown[a]	10 (3.3)
***KRAS*, n (%)[d]**	
Not tested	1051 (75.3)
Tested	344 (24.7)
Mutated[a]	113 (32.8)
Non-mutated[a]	219 (63.7)

Inconclusive/unknown[a]	12 (3.5)

[a]Percentages calculated using the number of patients tested as the denominator.

[b]Data on *ALK/ROS1* testing status missing for three patients.

[c]Data on *BRAF* testing status missing for four patients.

[d]Data on *KRAS* testing status missing for four patients.

Supplementary Table 5. Details of Prior Chemoradiotherapy

Prior CRT	Full Analysis Set (N = 1,399)
Concurrent CRT, n (%)[a]	1071 (76.6)
With induction CT[b]	518 (48.4)
With consolidation CT[b]	69 (6.4)
Sequential CRT, n (%)[a]	201 (14.4)
No overlap between RT and CT[b]	123 (61.2)
One cycle of overlap between RT and CT[b]	78 (38.8)
With consolidation CT[b]	5 (2.5)
Other therapy, n (%)[a]	127 (9.1)

[a]Percentages calculated using the full analysis set as the denominator.
[b]Percentages calculated using the number of patients who received concurrent CRT or sequential CRT as the denominator (as appropriate).

Concurrent CRT is defined as platinum-based CT administered during the same time period as RT for a minimum of two overlapping cycles (or 5 weeks, if delivered on a weekly platinum regimen). A patient may complete RT before, during, or after the last dose of platinum-based CT.

Induction CT is defined as CT administered prior to the start of concurrent CRT. A patient was considered to have received induction CT if they had received concurrent CRT and they had received any platinum-based chemotherapy at least 10 days prior to the start of RT.

Consolidation chemotherapy is defined as CT administered after the end of RT. A patient was considered to have received consolidation CT if they had received any dose of platinum-based CT more than 10 days after the last dose of RT.

Sequential CRT is defined as CT (minimum of two cycles) administered prior to the start of RT, such that the last dose of CT is delivered either before the first dose of RT, or there is a maximum of one overlapping cycle of CT and RT.

CRT, chemoradiotherapy; CT, chemotherapy; RT, radiotherapy.

Supplementary Table 6. Patient Demographics and Disease Characteristics by Prior CRT Type

Characteristic	Concurrent CRT (N = 1,071)	Sequential CRT (N = 201)
Median age at EAP inclusion, years (range)	65.0 (26–88)	67.0 (35–86)
Age category at EAP inclusion, n (%)		
<70 years	760 (71.0)	119 (59.2)
70–75 years	218 (20.4)	50 (24.9)
>75 years	93 (8.7)	32 (15.9)
Sex, n (%)		
Male	713 (66.6)	141 (70.1)
Female	358 (33.4)	60 (29.9)
Smoking status at EAP inclusion, n (%)		
Never	81 (7.6)	19 (9.5)
Current	348 (32.5)	64 (31.8)
Former	642 (59.9)	118 (58.7)
ECOG/WHO PS at EAP inclusion, n (%)	n = 721[a]	n = 148[a]
0	365 (50.6)	86 (58.1)
1	342 (47.4)	60 (40.5)
2 or 3	14 (1.9)	2 (1.4)
Disease stage at initial NSCLC diagnosis, n (%)	n = 1,064[a]	n = 201[a]
IA to IIB	55 (5.2)	9 (4.5)
IIIA	470 (44.2)	68 (33.8)
IIIB/C	539 (50.7)	124 (61.7)
Histological subtype at stage III diagnosis, n (%)	n = 1,057[a]	n = 195[a]
Squamous	371 (35.1)	80 (41.0)
Non-squamous	686 (64.9)	115 (59.0)

[a]Percentages reported in the table are calculated using the number of patients with available data (for each variable) as the denominator.

CRT, chemoradiotherapy; EAP, early access program; ECOG/WHO PS, Eastern Cooperative Oncology Group/World Health Organization performance status; NSCLC non-small-cell lung cancer.

Supplementary Table 7. Previous Chemotherapy Received as a Component of Concurrent or Sequential CRT

Prior Chemotherapy Regimen	n (%)[a]
Any concurrent CRT regimen (N = 1,071)	
Patient received both Carboplatin and Cisplatin-based CT	124 (11.6)
Patient received Cisplatin-based CT only	548 (51.2)
Patient received Carboplatin-based CT only	399 (37.3)
Platin (Carboplatin or Cisplatin) + Vinorelbine	355 (33.1)
Platin (Carboplatin or Cisplatin) + Paclitaxel	296 (27.6)
Carboplatin + Paclitaxel	290 (27.1)
Cisplatin + Vinorelbine	283 (26.4)
Platin (Carboplatin or Cisplatin) + Etoposide	219 (20.4)
Cisplatin + Etoposide	191 (17.8)
Platin (Carboplatin or Cisplatin) + Pemetrexed	115 10.7)
Carboplatin + Vinorelbine	100 (9.3)
Cisplatin + Pemetrexed	66 (6.2)
Carboplatin + Pemetrexed	56 (5.2)
Carboplatin + Etoposide	41 (3.8)
Platin (Carboplatin or Cisplatin) + Docetaxel	40 (3.7)
Cisplatin alone	38 (3.5)
Cisplatin + Docetaxel	30 (2.8)
Carboplatin + Docetaxel	13 (1.2)
Cisplatin + Paclitaxel	12 (1.1)
Carboplatin alone	5 (0.5)
Other combination therapy	3 (0.3)
Any sequential CRT regimen (N = 201)	
Platin (Carboplatin or Cisplatin) + Pemetrexed	55 (27.4)

Platin (Carboplatin or Cisplatin) + Vinorelbine	47 (23.4)
Platin (Carboplatin or Cisplatin) + Paclitaxel	45 (22.4)
Carboplatin + Paclitaxel	40 (19.9)
Other combination therapy	40 (19.9)
Cisplatin + Pemetrexed	39 (19.4)
Cisplatin + Vinorelbine	37 (18.4)
Carboplatin + Pemetrexed	23 (11.4)
Carboplatin + Vinorelbine	18 (9.0)
Platin (Carboplatin or Cisplatin) + Docetaxel	14 (7.0)
Platin (Carboplatin or Cisplatin) + Etoposide	11 (5.5)
Carboplatin + Docetaxel	7 (3.5)
Cisplatin + Docetaxel	7 (3.5)
Cisplatin + Etoposide	7 (3.5)
Cisplatin + Paclitaxel	7 (3.5)
Carboplatin + Etoposide	5 (2.5)
Cisplatin alone	2 (1.0)

[a]Percentages reported in the table are calculated using the number of patients who received concurrent CRT or sequential CRT as the denominator (as appropriate). Patients may appear under more than one previous chemotherapy type.

Concurrent CRT is defined as platinum-based CT administered during the same period as RT for a minimum of two overlapping cycles (or 5 weeks, if delivered on a weekly platinum regimen). A patient may complete RT before, during, or after the last dose of platinum-based CT.

Sequential CRT is defined as CT (minimum of two cycles) administered prior to the start of RT, such that the last dose of CT is delivered either before the first dose of RT, or there is a maximum of one overlapping cycle of CT and RT.

CRT; chemoradiotherapy; CT, chemotherapy; RT, radiotherapy.

Supplementary Table 8. Real-world PFS in Subgroups of Interest

		Median RwPFS		RwPFS rate, %		
		Months	95% CI	12 Months	18 Months	24 Months
Full analysis set	N = 1,399	21.7	19.1–24.5	62.2	54.1	48.2
Age (at EAP inclusion)						
<70 years	n = 958	22.8	19.4–25.7	62.1	54.6	49.2
70–75 years	n = 296	22.4	16.3–28.4	63.3	53.0	49.0
>75 years	n = 145	19.2	13.3–24.0	60.4	52.7	40.5
Smoking status (at EAP inclusion)						
Current smoker	n = 456	21.6	17.7–26.9	62.9	53.8	49.0
Former smoker	n = 832	23.0	19.4–25.5	62.5	55.0	49.1
Never smoker	n = 111	17.4	11.7–22.6	56.6	48.0	37.4
Tumor histologic type (reported at Stage III diagnosis)						
Squamous	n = 496	14.6	12.6–19.0	56.6	47.1	40.4
Non-squamous	n = 882	25.3	22.0–26.9	65.0	57.5	52.1

Disease stage (reported at initial NSCLC diagnosis)						
Stage IIIA	n = 604	23.7	20.2–26.4	64.9	56.5	49.3
Stage IIIB/C	n = 714	19.2	15.6–24.2	59.1	51.5	46.6
Medical condition/history of another cancer (comorbidities)						
Yes	n = 1,000	21.0	18.6–24.2	62.5	54.1	47.2
No	n = 399	25.5	16.4–NE	61.2	54.1	50.9
Prior CRT type						
Concurrent	n = 1,071	23.7	20.1–25.8	63.4	55.3	49.7
Sequential	n = 201	19.3	13.9–25.3	58.6	51.0	45.0
Prior platinum chemotherapy agent						
Cisplatin	n = 686	24.4	20.7–26.5	63.0	56.2	51.0
Carboplatin	n = 549	18.8	15.0–22.6	60.4	51.3	43.7
Cisplatin + carboplatin	n = 156	24.1	16.4–NE	64.7	54.2	51.1

Receipt of induction chemotherapy						
Yes	n = 518	20.7	17.4–25.8	61.6	52.6	48.1
No	n = 881	22.4	19.3–24.5	62.5	54.9	48.2
Imaging after completion of CRT						
Yes	n = 891	21.3	18.3–24.7	61.9	53.4	47.9
No	n = 474	22.5	18.8–26.9	62.8	55.9	49.4
Timing of durvalumab initiation relative to the end of radiotherapy						
≤42 days	n = 411	25.7	18.4–NE	62.0	55.5	51.5
>42 days	n = 954	20.8	18.6–24.2	62.3	53.8	47.1
>3 months	n = 197	22.6	16.7–26.5	67.9	55.3	48.3
>6 months	n = 13	NE	5.0–NE	61.5	53.8	53.8
Prior total radiotherapy dose						
≤60 Gy	n = 556	21.9	17.8–24.4	62.6	53.8	46.9
>60 Gy	n = 788	21.9	18.7–26.4	62.0	54.3	49.3

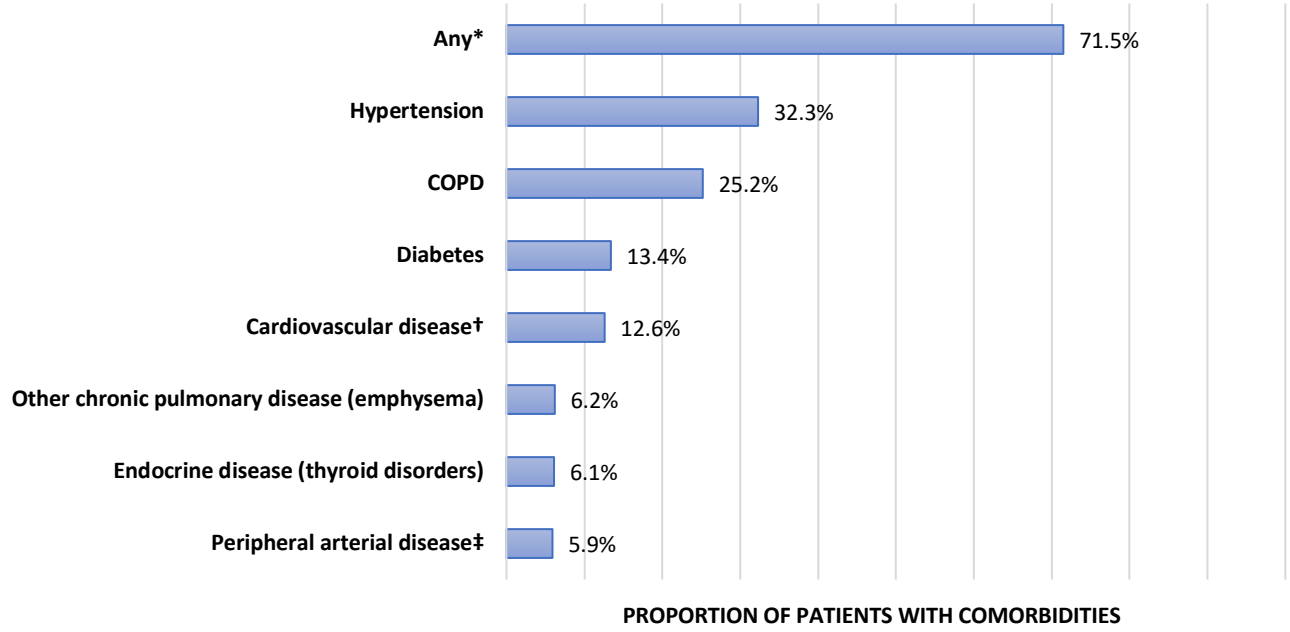
PD-L1 status						
PD-L1 ≥1%	n = 700	22.4	18.4–25.5	62.4	54.4	48.9
PD-L1 <1%	n = 174	15.6	12.2–23.2	57.5	46.4	40.9
PD-L1 inconsistent[a]	n = 93	25.2	14.0–27.3	64.5	55.9	52.0
Oncogenic aberration status (reported at Stage III diagnosis)						
Any known aberration[b]	n = 185	20.9	13.9–25.8	60.8	52.0	44.7
KRAS mutated	n = 113	24.2	17.8–NE	66.3	59.1	50.8
EGFR mutated	n = 46	11.1	8.8–24.0	47.8	41.3	35.5

[a]The PD-L1 inconsistent subgroup represents patients who were tested for PD-L1 but whose test results were not clearly reported due to misalignment of three different variables in their case report forms (that precluded classification of the PD-L1 expression level as ≥1% or <1%); the variables were tumor cell %, PD-L1 status (positive or negative), and the threshold level used for classifying PD-L1 status.

[b]Includes patients with known aberrations in *KRAS*, *EGFR*, *BRAF*, and/or *ALK/ROS1*.

CI, confidence interval; CRT, chemoradiotherapy; Gy, units of gray; NE, not estimable; PD-L1, programmed cell death-ligand 1; PFS, progression-free survival; rwPFS, real-world progression-free survival.

Supplementary Figure 1. Disease-related medical history.



Only comorbidities reported by at least 5% of the full analysis set are shown.

*Includes all patients with at least one record. †Includes myocardial infarction, chronic heart failure, angina pectoris, and coronary artery bypass graft. ‡Includes intermittent claudication, abdominal aneurysm, and surgical intervention for bypass or stent.

COPD, chronic obstructive pulmonary disease.