STATISTICAL ANALYSIS PLAN

A Multi-Center, Double-Blind, Randomized, Vehicle-Controlled, Parallel-Group Study Comparing Tazarotene Cream 0.1% to TAZORAC® (Tazarotene) Cream 0.1% and Both Active Treatments to a Vehicle Control in the Treatment of Acne Vulgaris

Protocol Number: 0454-01-01 / NCT02886715
[redacted]

Sponsor:
Fougera Pharmaceuticals Inc.
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Contract Research Organization:
[redacted]

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STATISTICAL ANALYSIS PLAN

Tazarotene Cream 0.1% **Protocol / [redacted] 0454-01-01/[redacted]**

SAP FINAL VERSION APPROVALS

A Multi-Center, Double-Blind, Randomized, Vehicle-Controlled, Parallel-Group Study Comparing Tazarotene Cream 0.1% to TAZORAC® (Tazarotene) Cream 0.1% and Both Active Treatments to a Vehicle Control in the Treatment of Acne Vulgaris

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[redacted]

STATISTICAL ANALYSIS PLAN

Tazarotene Cream 0.1% **Protocol / [redacted] 0454-01-01/[redacted]**

Revision History

VERSION	DATE	DESCRIPTION OF REVISIONS	REVISED BY
[redacted]			

List of Abbreviations and Definition of Terms

ADaM	Analysis Data Model
AE	Adverse Event
ANOVA	Analysis of Variance
C	Celsius
CDISC	Clinical Data Interchange Standards Consortium
CI	Confidence Interval
CRF	Case Report Form
CRO	Contract Research Organization
eCRF	Electronic Case Report Form
EOS	End of Study
F	Fahrenheit
FDA	Food and Drug Administration
GLM	Generalized Linear Model
Hg	Mercury
ICF	Informed Consent Form
ICH	International Conference on Harmonisation
IGA	Investigator Global Assessment
IP	Investigational Product
LOCF	Last Observation Carried Forward
MedDRA	Medical Dictionary for Regulatory Activities
mITT	modified Intent-to-Treat Population
OGD	Office of Generic Drugs
PD	Protocol Deviation
PP	Per-Protocol
PROC	Procedure
RLD	Reference Listed Drug
SAE	Serious Adverse Event
SAP	Statistical Analysis Plan
SAS	Statistical Analysis System
SD	Standard Deviation
SDTM	Study Data Tabulation Model

[redacted]

STATISTICAL ANALYSIS PLAN

Tazarotene Cream 0.1% **Protocol / [redacted] 0454-01-01/[redacted]**

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1. INTRODUCTION

This Statistical Analysis Plan (SAP) is based on the final Clinical Study Protocol 0454-01-01 Rev. 2 dated 12/22/2016. The SAP provides details on the planned statistical methodology for the analysis of the study data. The SAP also outlines the statistical programming specifications for the tables, listings and figures.

This SAP describes the study endpoints, derived variables, anticipated data transformations and manipulations, and other details of the analyses not provided in the study protocol. This SAP therefore outlines in detail all other aspects pertaining to the planned analyses and presentations for this study.

The following documents were reviewed in preparation of this SAP:

- Final Clinical Study Protocol 0454-01-01 Rev. 2 dated 12/22/2016
- Final eCRF Version 1.0 for [redacted]

The reader of this SAP is encouraged to also read the clinical protocol for details on the conduct of this study, and the operational aspects of clinical assessments and timing for completing a patient in this study.

2. OBJECTIVES

The objectives of this study are to:

1. Evaluate the therapeutic equivalence of the Test product, Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.) to the Reference product, TAZORAC® (tazarotene) Cream 0.1% (Allergan, Inc.) in the treatment of acne vulgaris.

2. Demonstrate the superiority of the efficacy of the Test and Reference (active) products over that of the Placebo in the treatment of acne vulgaris.

3. Compare the safety of the Test, Reference and Placebo products in the treatment of acne vulgaris.

3. OVERALL STUDY DESIGN

This multi-center, double-blind, randomized, vehicle-controlled, parallel-group bioequivalence clinical study has been designed to evaluate the efficacy and safety of a generic tazarotene cream

0.1% (Fougera Pharmaceuticals Inc.) compared to the FDA Reference Listed Drug (RLD) TAZORAC® (tazarotene) Cream, 0.1% (Allergan) in subjects with a clinical diagnosis of acne vulgaris. Additionally, both the Test product and Reference (i.e., the RLD) product will be tested for superiority to a Placebo. Subjects with confirmed facial acne vulgaris will apply the investigational product (IP) once daily, in the evening, for 84 days ± 4 days (12 weeks).

Before any study-specific procedures are performed, all subjects will read and sign the IRB-approved ICF. For a subject considered to be a minor in the state he/she is screened, the parent or legal guardian will be required to sign the ICF and the subject will sign an IRB-approved "assent to participate" form, as applicable.

Each site will develop an individualized recruitment plan to collectively enroll approximately 1110 eligible subjects, ≥ 12 to ≤ 40 years of age, with a clinical diagnosis of acne vulgaris and meeting the inclusion/exclusion criteria. Subjects will be randomized to one of the three IPs as follows:

- Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
- Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
- Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

Subjects will attend the following scheduled clinic visits:

- Visit 1 - Screening/Baseline: Day -14 to 1
- Visit 2 - Interim Visit: Day 28 ± 4 days
- Visit 3 - Interim Visit: Day 56 ± 4 days
- Visit 4 - End of Study: Day 85 ± 4 days

Subjects may attend unscheduled clinic visits:

- Visit 9999 – Unscheduled visit

At Visit 1, eligible subjects will be randomized to the Test, Reference or Placebo product in a 2:2:1 ratio using [redacted], which is an interactive response technology (IRT) system provided by the IRT provider. Study subjects will be provided with [redacted] of IP. At Visit 2 and/or Visit 3, subjects who continue to be eligible for continuation in the study can be dispensed another [redacted] of investigational product, as needed, based on the amount of IP remaining from the tube previously dispensed. Further, any empty tubes will be collect at these visits. At Visit 4, all tubes will be collected (used and unused). A subject may return for an Unscheduled Visit at any time, should they require a resupply of IP (i.e., tube lost; all IP used between visits). It is estimated that up to [redacted] will be needed to dose the subject for the treatment period. Additional tubes beyond the initial [redacted] will only be dispensed if the initial supply is lost and/or significantly damaged (i.e., becomes punctured) and warrants replacement.

The day that the subject administers their first dose of IP will be considered Day 1. [redacted] For all other subjects, the first dose (Day 1) of IP will be applied on the evening of Visit 1.

The subject will be instructed to apply a thin layer (2 mg/cm^2) of the product once daily, in the evening, through the evening before Visit 4 (Day 85 ± 4). There will be no application of the product on the day of the End of Study visit.

Efficacy evaluations will be based on dermatological assessments in the clinic. The two co-primary statistical analyses of interest are (1) the percent change from Baseline to Week 12 in the inflammatory (papules/pustules) lesion counts and (2) the percent change from Baseline to Week 12 in the non-inflammatory (open and closed comedones) lesion counts. The secondary analysis is the proportion of subjects who are considered a Clinical Success at Week 12, as defined by an IGA score that is at least 2 grades less than the Baseline assessment. A Clinical Failure is defined as an IGA score that is the same, higher or one grade lower than the Baseline IGA at Week 12 (Appendix A).

Study Schematic

PROCEDURE	VISIT 1 (Day -14 to 1) Screening/ Baseline	VISIT 2 (Day 28 ± 4 Days) Interim Visit	VISIT 3 (Day 56 ± 4 Days) Interim Visit	VISIT 4 (Day 85 ± 4 Days)* End of Study/ Early Termination
Informed Consent/Assent	X‡			
Medical History/ Demographics	X‡			
Pregnancy Test†	X‡	X	X	X
Vital Signs	X‡			X
Lesion Counts	X‡	X	X	X
Investigator's Global Assessment	X‡	X	X	X
Application Site Reactions	X	X	X	X
Inclusion/Exclusion Criteria Review	X‡			
Concomitant Medication	X‡	X	X	X
Randomization	X			
Dispense IP	X	X**	X**	
Return of IP		X**	X**	X
Dispense Subject Diary /Supplies	X	X	X	
Collect/Review Subject Diary		X	X	X
Adverse Events		X	X	X
Discharge from Study				X

* Dosing regimen is once daily in the evening through the evening for 84 days (Day 1 to Day 84) before Visit 4 (Day 85 ± 4)

** If applicable, based on use of previously dispensed product.

† For females of childbearing potential

‡ Procedures performed as part of the screening assessment, before randomization

4. RANDOMIZATION AND BLINDING

The IP will be randomized, packaged and blinded by an [redacted]. The randomization code will be generated using a validated computer program. [redacted] Each site will receive multiple, full blocks of IP in each delivery. The quantity received may vary.

Randomization will be pre-planned according to a computer-generated randomization scheme. The randomization code will be retained within [redacted] which is maintained by [redacted]. [redacted] will also retain the kit boxes numbers supplied to each site and the kit boxes numbers that have been selected for retention and are therefore unavailable for dispensing to subjects.

Upon confirmation of subject eligibility, the subject's information (i.e., subject's initials, date of birth, etc.) will be entered into [redacted], and the system will assign a [redacted] randomization number to the subject based upon [redacted]. [redacted] will then assign the subject a [redacted] kit box number in a blinded fashion at Visit 1. This kit box number will correspond to a specific treatment group within [redacted]; however the treatment group will be unknown to the Investigator, the CRO, the sponsor and the subject. The site will record the randomization number and the kit box number in the subject's source documentation and drug dispensing log. The [redacted] will then dispense [redacted] from the kit box. The [redacted] will record the tube number of the [redacted] dispensed to the subject in the subject's source documentation and drug dispensing log. At Visits 2, 3 and/or Unscheduled Visit, additional IP may be dispensed to the subject, as needed. The [redacted] will select an additional unused tube from the subject's previously assigned kit box, dispense it to the subject and record the tube number. [redacted] Each subject will maintain the same treatment assignment throughout the study.

5. SAMPLE SIZE

Sample size calculations were performed using [redacted]. For the primary endpoint analysis (percent change from Baseline at Week 12 (Study Day 85 ± 4 days) in inflammatory and non- inflammatory lesion counts), the sample size is estimated for therapeutic equivalence of the Test to the Reference product and superiority of each of the active treatments groups over Placebo. As no variability data were available for TAZORAC® Cream, 0.1%, the sample size estimations are based on data reported in the [redacted]

In the PP population, the mean percent reduction in inflammatory lesion count in the Reference treatment group at Week 12 is expected to be approximately [redacted], with a SD of [redacted] (coefficient of variation of [redacted]). The mean percent reduction in non-inflammatory lesion count in the Reference treatment group at Week 12 is expected to be approximately [redacted], with a SD of [redacted] (coefficient of variation of [redacted]). Based on these numbers, a sample size of [redacted] subjects per active treatment group in the PP population will provide approximately [redacted] power to demonstrate that the adjusted 90% confidence interval for the T/R ratio of least-squares treatment means for the primary endpoint is contained within the pre-defined equivalence limits [80%, 125%], if the true ratio is [redacted] and assuming [redacted] correlation between inflamed and non-inflamed lesion counts.

In the mITT population, the mean percent reduction in inflammatory and non-inflammatory lesion counts in the Placebo group is expected to be approximately [redacted] ([redacted], SD) and [redacted] ([redacted], SD), respectively. With a conversion rate of [redacted] from the mITT to the PP population, [redacted] subjects in each active group and [redacted] subjects in the Placebo group are required in the mITT population for the superiority analyses. This sample size will ensure sufficient power [redacted] to show a difference at $p < 0.05$ (two-sided) between each active treatment group and the Placebo group for each endpoint, assuming 0% correlation between the inflamed and non-inflamed lesion counts and [redacted] correlation between the two superiority tests for each endpoint. Under the above assumptions, the overall study power to demonstrate therapeutic equivalence and superiority for the primary endpoint is estimated to be at least [redacted]. To allow for approximately [redacted] subjects who may drop out from the study or are otherwise non-evaluable, up to 1110 subjects will be enrolled (444 in each active group and 222 in the Placebo group).

6. ANALYSIS POPULATION

Per-Protocol Population

The PP population will include subjects that comply with the protocol as follows:

- All randomized subjects who meet all inclusion and exclusion criteria.
- Make the final study visit (Visit 4) within the protocol window of Day 85 ± 4 days with no PDs that would affect the integrity of the data.
- Comply with study restrictions including concomitant medications.
- Apply the IP appropriately and are within [redacted] compliant with dosing during the 12 weeks (Day 85 ± 4) of treatment.
- Do not miss the scheduled applications for more than [redacted]

[redacted]

[redacted]

Modified Intent-to-Treat Population (mITT)

The mITT population will include all subjects in the PP population plus all randomized subjects who meet all inclusion/exclusion criteria, apply at least one dose of assigned product, and return for at least one post-Baseline evaluation.

[redacted]

Safety Population

All subjects who are randomized and received IP will be included in the analysis of safety.

7. STUDY EFFICACY VARIABLES

Primary Efficacy Endpoints

The two co-primary efficacy endpoints are (1) the percent change from Baseline to Week 12 in the inflammatory (papules/pustules) lesion counts and (2) the percent change from Baseline to Week 12 in the non-inflammatory (open and closed comedones) lesion counts.

Secondary Efficacy Endpoint

The secondary efficacy endpoint is the proportion of subjects who are considered a Clinical Success at Week 12, as defined by an IGA score that is at least 2 grades less than the Baseline assessment. That is, at Week 12, subjects with an IGA score of 4 at Baseline must achieve a score of 0, 1 or 2, subjects with an IGA score of 3 at Baseline must achieve a score of 0 or 1, and subjects with an IGA score of 2 at Baseline must achieve a score of 0 to be considered a Clinical Success.

A Clinical Failure is defined as an IGA score at Week 12 that is the same, higher or one grade lower than the Baseline IGA. Subjects who are discontinued due to lack of treatment effect or worsening condition will be considered Clinical Failures.

8. STATISTICAL ANALYSIS METHODS

If not otherwise specified, statistical significance is defined as $p<0.05$ and is two-tailed. Data will be summarized with respect to demographic and baseline characteristics, efficacy variables and safety variables.

For categorical variables, the number and percent of each category within a parameter will be calculated for non-missing data. For continuous variables with non-missing values, statistics will include number of observations, mean, standard deviation, median, minimum and maximum values.

All statistical analyses will be conducted using SAS®, Version 9.4 or higher. Datasets will be prepared using headings from Clinical Data Interchange Consortium (CDISC) Study Data Tabulation Model (SDTM) implementation for human clinical trials and ADaM (Analysis Dataset Model).

8.1 Baseline Characteristics

8.1.1 Demographics Comparability of Treatment Groups

Baseline characteristics will be evaluated separately for the PP, mITT and Safety populations.

Demographic information collected at baseline includes the following:

- Age (years)
- Sex (Male/Female)
- Ethnicity (Hispanic/non Hispanic)
- Race (White, Black/African American, Native Hawaiian or Other Pacific Islander, Asian, American Indian or Alaska Native, Other)
- Baseline number of inflammatory lesions (i.e., papules and pustules)
- Baseline number of non-inflammatory lesions (i.e., open and closed comedones)
- Baseline number of nodulocystic lesions (i.e., nodules and cysts)
- Baseline IGA score

Summary tables by treatment group will be presented. Continuous variables will be summarized using descriptive statistics (number of observations, median, minimum, maximum, mean and standard deviation). Categorical variables will be summarized using frequencies and percentage. Baseline treatment comparisons will be presented using Chi-Square test for the categorical variables, and Analysis of Variance (ANOVA) for the continuous variables.

All data will be listed by treatment and patient.

8.1.2 Medical History

At Visit 1 subjects will be questioned about personal medical history including acne history. The medical history will include a complete review of all current diseases and their respective durations and treatments.

Medical history data will be listed by treatment and patient.

8.1.3 Concomitant Medications

At Visit 1, subjects will be questioned about current and prior concomitant medication use over the previous 6 months. At Visit 2, Visit 3 and Visit 4 subjects will be questioned about ongoing or new concomitant medication use.

All prior and concomitant medications taken since screening until the end of the study will be listed by treatment and patient.

8.1.4 Pregnancy Test

All females of childbearing potential will have a urine pregnancy test performed at each Scheduled visit. All females of childbearing potential will have a urine pregnancy test performed at Visit 1 (Baseline), Visit 2, Visit 3, and Visit 4 (or early termination).

Pregnancy test results will be listed by treatment and patient.

8.2 Efficacy Analyses

8.2.1 Primary Efficacy Analysis

Therapeutic Bioequivalence Analysis

The primary measure of therapeutic equivalence will be evaluated using the PP population, with results in the mITT population being supportive.

The following Statistical Analysis Method is recommended by OGD for equivalence testing for a continuous variable:

The compound hypothesis to be tested is:

H_0: $\mu T/\mu R < \theta 1 \ or \ \mu T/\mu R > \theta 2$ versus

$$H_A\colon\ \theta 1 \le \mu T/\mu R \le \theta 2$$

where μT = mean percent change from baseline of test treatment, and
μR = mean percent change from baseline of reference treatment

Under the assumptions of normally distributed data, the adjusted 90% confidence interval will be calculated for the Test/Reference ratio of the mean percent change from Baseline in inflammatory and non-inflammatory lesion counts using an iterative procedure similar to Fieller's method. ANOVA with treatment and site as fixed effects in the model will be conducted on the mean percent change from Baseline to Week 12 in the inflammatory (papules/pustules) lesion counts and non-inflammatory (open and closed comedones) lesion counts. If the adjusted 90% confidence intervals for the least-squares mean Test/Reference ratios are within 80-125% for both co-primary endpoints, then therapeutic equivalence of the Test to Reference product will be considered to have been demonstrated.

To declare therapeutic equivalence of the Test product to the Reference product, therapeutic equivalence must be demonstrated for only the primary endpoints in the PP population.

Superiority to Placebo Analysis

The primary measure of superiority will be evaluated using the mITT population, using LOCF for missing efficacy values. The results in the PP population will be considered supportive.

The superiority of the Test and Reference products over Placebo is concluded if these treatments' mean percent changes from Baseline in inflamed and non-inflamed lesion counts at Week 12 are statistically superior to that of the Placebo at the 5% significance level ($p < 0.05$, two-sided). The superiority of Test and Reference treatments over the Placebo will be evaluated in the same ANOVA model for Test vs. Placebo and Reference vs. Placebo.

To declare superiority of the Test and Reference products over Placebo, their superiority must be demonstrated for only the primary endpoint in the mITT population.

8.2.2 Secondary Efficacy Analyses

The PP population will be used for analysis of therapeutic equivalence and the mITT population will be used for analyses of superiority.

Therapeutic Bioequivalence Analysis

Based on the usual method used in OGD for binary outcomes, the 90% confidence interval for the difference in success proportions between test and reference treatment should be contained within [-0.20, +0.20] in order to establish equivalence.

The compound hypothesis to be tested is:

$H_0: \ P_T - P_R < -.20 \ or \ P_T - P_R > .20$ versus

$H_A: -.20 \leq P_T - P_R \leq .20$

where P_T = success rate of test treatment
P_R = success rate of reference treatment.

Let

n_T = sample size of test treatment group
cn_T= number of subjects considered as clinical success in test treatment group
n_R = sample size of reference treatment group
cn_R= number of subjects considered as clinical success in reference treatment group
$\hat{P}_T = cn_T/n_T$ $\hat{P}_R = cn_R/n_R$, and

$$se = (\hat{P}_T(1-\hat{P}_T)/n_T + (\hat{P}_R(1-\hat{P}_R)/n_R)^{1/2}$$

The 90% confidence interval for the difference in proportions between test and reference will be calculated as follows, using Yates' correction:

$$L = (\hat{P}_T - \hat{P}_R) - 1.645\, se - (1/n_T + 1/n_R)/2$$

$$U = (\hat{P}_T - \hat{P}_R) + 1.645\, se + (1/n_T + 1/n_R)/2$$

For the proportion of Clinical Success, if the 90% confidence interval (with Yates' Correction factor) of the difference between the proportion of subjects considered a Clinical Success in the Test and the Reference product groups at Week 12 is contained within -20% to +20%, then therapeutic equivalence of the Test to Reference product will be considered supported for the secondary endpoint.

Superiority to Placebo Analysis

The analyses for superiority will be conducted using the mITT population and LOCF.

For the determination of superiority, the proportion of subjects considered a Clinical Success at Week 12 in the Test and Reference product groups will each be compared to the proportion of

subjects considered as Clinical Success in the Placebo group.

If the proportion of subjects showing Clinical Success in the Test and Reference groups is statistically significantly greater ($p < 0.05$; using Cochran-Mantel-Haenszel exact test stratified by clinical site)) than the Clinical Success seen in the Placebo group then superiority will be concluded.

A summary table with frequency and percentage of the proportion of Clinical Success by treatment group will be presented.

8.2.3 Treatment-by-Site Interaction and Pooling of Clinical Sites

As this is a multiple-site study, the interaction of treatment-by-site may be evaluated in the ANOVA model for evaluations involving the primary efficacy endpoint. [redacted] If no treatment-by-site interaction is identified with the primary endpoint then no adjustment will be made to any efficacy analysis and treatment-by site interaction will not be included as a term in the statistical models for evaluating therapeutic equivalence and superiority.

8.3 Safety Analysis

All safety analyses will be based on the Safety Population.

8.3.1 Adverse Events

All the adverse events (AEs) reported throughout the study will be coded and classified according to the MedDRA (Medical Dictionary for Regulatory Activities) coding dictionary (Version 18.1 or higher). Each adverse event is to be evaluated for date of start and end, seriousness, severity, relationship to the IP, action taken and outcome.

In each of the following categories, the total number and percentage of subjects with 1) at least one AE, 2) discontinued study drug due to AEs, 3) AE severity and AEs related to the IP, 4) serious AEs and death will be summarized separately by treatment groups.

A summary table of the number and percent of subjects with AEs by system organ class, preferred term, and treatment group will be presented. Each patient will be counted only once within each preferred term.

A frequency summary table of the number of AEs by system organ class, preferred term, severity, and treatment group will be presented. Severity will be classified as "Mild", "Moderate", or "Severe".

Similarly, a frequency summary table of the number of AEs by system organ class, preferred term, and relationship to the IP, and treatment group will be presented. Relationship to a study drug will be classified as "Suspected" or "Not Suspected".

Should sufficient data exist, adverse event frequencies will be compared between treatments using Fisher's exact test.

8.3.2 Application Site Reactions

At Visits 1, 2, 3 and 4 the Investigator will evaluate the patient for local application site reactions based on the scale provided in Appendix B:

Signs and Symptoms recorded at each visit will be compared between treatment groups. Descriptive summaries (number of observations, mean, standard deviation, minimum, median and maximum) comparing the application site reactions for each treatment group will be presented by visit.

A frequency summary table comparing the application site reactions for each treatment group will be presented by visit.

8.3.3 Vital Signs

The patient's vital signs (pulse, blood pressure, temperature and respiration rate) will be recorded at Visit 1 and Visit 4.

Descriptive summaries (number of observations, mean, standard deviation, minimum, median and maximum) will be provided by treatment and visit for non-missing values.

All data will be listed by treatment and patient.

8.4 Multiple Comparisons

No multiple comparison adjustment will be made in this study.

8.5 Methods for Handling Missing Data

For demographic and baseline characteristics, each variable will be analyzed using all available

data. Subjects with missing data will be excluded only from analyses for which data are not available, including denominators.

Subjects discontinued early for reasons other than lack of treatment effect or worsening condition will be excluded from the PP population and included in the mITT population using Last Observation Carried Forward (LOCF), provided they administered at least one dose of randomized IP and completed at least one post-dose evaluation..

8.6 Interim Analyses

There is no interim analysis planned in this study.

9. TABLE, LISTING AND FIGURE SHELLS

The following shells are provided in order to provide a framework for the display of data from this study. These shells may not be reflective of every aspect of this study but are intended to show the general layout of the Tables, Listings and Figures that will be included in the final clinical study report. Tables, Listings and Figures are numbered following the ICH structure. Table headers, variables names and footnotes will be modified as needed following data analyses. All descriptive and inferential statistical analyses will be performed using SAS® statistical software Version 9.4 or higher, unless otherwise noted.

TABLE, LISTING AND FIGURE SHELLS

T16.1.9.1 Summary of Discontinued Subjects
(Safety Population)

Subjects	Test	Reference	Placebo	Total
Randomized	xxx	xxx	xxx	xxx
Completed Study	xxx	xxx	xxx	xxx
Terminated Early	xxx	xxx	xxx	xxx
Early Termination Reason				
Administrative reasons	xxx	xxx	xxx	xxx
Lack of efficacy	xxx	xxx	xxx	xxx
Lost to Follow-Up	xxx	xxx	xxx	xxx
etc.				

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.2 Summary of Protocol Deviations (Safety Population)

	Test	Reference	Placebo	Total
Total Subjects with Protocol Deviations	xxx	xxx	xxx	xxx
Total Deviations	xxx	xxx	xxx	xxx
Lost to follow up	xxx	xxx	xxx	xxx
Outside visit window	xxx	xxx	xxx	xxx
Missed Visit	xxx	xxx	xxx	xxx
Restricted Medication	xxx	xxx	xxx	xxx
etc	xxx	xxx	xxx	xxx
Other	xxx	xxx	xxx	xxx

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.3.1 Summary of Subjects Excluded from Efficacy Analysis (Population Determination)

		Test	Reference	Placebo	Total
Randomized	Total	xxx	xxx	xxx	xxx
Safety Population	Total	xxx	xxx	xxx	xxx
Excluded from Safety	Did not received study product	xxx	xxx	xxx	xxx
	etc.				
mITT Population	Total	xxx	xxx	xxx	xxx
Excluded from mITT	Did not received study product	xxx	xxx	xxx	xxx
	etc.				
PP Population	Total	xxx	xxx	xxx	xxx
Excluded from Excluded from PP	Restricted Medication	xxx	xxx	xxx	xxx
	etc.				

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.3.2 Summary of Subjects Included in Analysis Population by Study Center

Site No.	Name	Total Randomized	PP				mITT				Safety			
			Test	Ref	Placebo	Total	Test	Ref	Placebo	Total	Test	Ref	Placebo	Total
xx	xxxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx
xx	xxxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.4.1 Summary of Demographic Data (Safety Population)

		Test (N = xxx)	Reference (N = xxx)	Placebo (N = xxx)	P-value
Age (years)	n	xxx	xxx	xxx	x.xxxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	
	Median	xx.x	xx.x	xx.x	
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
Race	White	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	x.xxxx
	Black/African American	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	
	Native Hawaiian or other Pacific Islander	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	
	Asian	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	
	American Indian or Alaska Native	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	
	Other	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	
Sex	Female	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	x.xxxx
	Male	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	
Ethnicity	Hispanic or Latino	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	x.xxxx
	Not Hispanic or Latino	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	

N= number of subjects in the treatment group; n= number of subjects with data available; % is based on N

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

T16.1.9.4.2 Summary of Baseline Parameters (Safety Population)

		Test (N = xxx)	Reference (N = xxx)	Placebo (N = xxx)	P-value
Total Inflammatory Lesion Count	n	xxx	xxx	xxx	x.xxxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	
	Median	xx.x	xx.x	xx.x	
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
Total Non-Inflammatory Lesion Count	n	xxx	xxx	xxx	x.xxxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	
	Median	xx.x	xx.x	xx.x	
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
Total Nodulocystic Lesion Count	n	xxx	xxx	xxx	x.xxxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	
	Median	xx.x	xx.x	xx.x	
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	
Investigator Global Assessment	Clear	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	x.xxxx
	Mild	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	
	Moderate	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	
	Severe	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)	

Note: N= number of subjects in the treatment group; n= number of subjects with data available; % is based on N

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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Similar tables will be created for T16.1.9.5.1, T16.1.9.5.2, T16.1.9.6.1 and T16.1.9.6.2

T16.1.9.5.1 Summary of Demographic Data
(modified Intent-to-Treat Population)

T16.1.9.5.2 Summary of Baseline Parameters
(modified Intent-to-Treat Population)

T16.1.9.6.1 Summary of Demographic Data
(Per-Protocol Population)

T16.1.9.6.2 Summary of Baseline Parameters
(Per-Protocol Population)

T16.1.9.7.1 Descriptive Summary of Co-Primary Efficacy Endpoint
(Percent Change from Baseline in Inflammatory Lesion Count)
(Per-Protocol Population)

	Statistic	Test (N = xxx)	Reference (N = xxx)	Placebo (N = xxx)	Overall (N = xxx)
Baseline	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
Week 12	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
Percent Change from Baseline	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x

N= number of subjects in the treatment group; n= number of subjects with data available;

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.7.2 Descriptive Summary of Co-Primary Efficacy Endpoint (Percent Change from Baseline in Inflammatory Lesion Count) (modified Intent-to-Treat Population)

	Statistic	Test (N = xxx)	Reference (N = xxx)	Placebo (N = xxx)	Overall (N = xxx)
Baseline	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
Week 12	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
Percent Change from Baseline	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x

N= number of subjects in the treatment group; n= number of subjects with data available;

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.8.1 Summary of Analysis Results of Co-Primary Efficacy Endpoint (Percent Change from Baseline in Inflammatory Lesion Count between Treatment Groups)

Equivalence: Per-Protocol Population

Treatment Group	Number of Subjects (N)	Difference Between Treatments		
		LSMeans	Test-to-Reference Ratio	90% CI Evaluation
Test	xxx	xxx.x		
Reference	xxx	xxx.x	xx.x	xx.x – xx.x

Superiority: modified Intent-to-Treat Population

Treatment Group	Number of Subjects (N)	LSMeans	Std Err LSMeans	Treatment vs. Placebo			
				LSMeans Difference	Std Err LSMeans Difference	95% CI	P-value
Placebo	xxx	xxx.x	xxx.x				
Test	xxx	xxx.x	xxx.x	xxx.x	xxx.x	xx.x – xx.x	x.xxxx
Reference	xxx	xxx.x	xxx.x	xxx.x	xxx.x	xx.x – xx.x	x.xxxx

The 90% confidence interval for the test-to-reference ratio was calculated using a procedure similar to Fieller's method.

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.8.2 Summary of Supportive Analysis Results of Co-Primary Efficacy Endpoint (Percent Change from Baseline in Inflammatory Lesion Count between Treatment Groups)

Equivalence: modified Intent-to-Treat Population

Treatment Group	Number of Subjects (N)	Difference Between Treatments		
		LSMeans	Test-to-Reference Ratio	90% CI Evaluation
Test	xxx	xxx.x		
Reference	xxx	xxx.x	xx.x	xx.x – xx.x

Superiority: Per-Protocol Population

Treatment Group	Number of Subjects (N)		Std Err LSMeans	Treatment vs. Placebo			
		LSMeans		LSMeans Difference	Std Err LSMeans Difference	95% CI	P-value
Placebo	xxx	xxx.x	xxx.x				
Test	xxx	xxx.x	xxx.x	xxx.x	xxx.x	xx.x – xx.x	x.xxxx
Reference	xxx	xxx.x	xxx.x	xxx.x	xxx.x	xx.x – xx.x	x.xxxx

The 90% confidence interval for the test-to-reference ratio was calculated using a procedure similar to Fieller's method.

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.9.1 Descriptive Summary of Co-Primary Efficacy Endpoint (Percent Change from Baseline in Non-Inflammatory Lesion Count) (Per-Protocol Population)

	Statistic	Test (N = xxx)	Reference (N = xxx)	Placebo (N = xxx)	Overall (N = xxx)
Baseline	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
Week 12	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
Percent Change from Baseline	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x

N= number of subjects in the treatment group; n= number of subjects with data available;

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.9.2 Descriptive Summary of Co-Primary Efficacy Endpoint (Percent Change from Baseline in Non-Inflammatory Lesion Count) (modified Intent-to-Treat Population)

	Statistic	Test (N = xxx)	Reference (N = xxx)	Placebo (N = xxx)	Overall (N = xxx)
Baseline	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
Week 12	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x
Percent Change from Baseline	n	xxx	xxx	xxx	xxx
	Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
	Median	xx.x	xx.x	xx.x	xx.x
	Range	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x	xx.x - xx.x

N= number of subjects in the treatment group; n= number of subjects with data available;

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.10.1 Summary of Analysis Results of Co-Primary Efficacy Endpoint (Percent Change from Baseline in Non-Inflammatory Lesion Count between Treatment Groups)

Equivalence: Per-Protocol Population

Treatment Group	Number of Subjects (N)	Difference Between Treatments		
		LSMeans	Test-to-Reference Ratio	90% CI Evaluation
Test	xxx	xxx.x		
Reference	xxx	xxx.x	xx.x	xx.x – xx.x

Superiority: modified Intent-to-Treat Population

Treatment Group	Number of Subjects (N)	LSMeans	Std Err LSMeans	Treatment vs. Placebo			
				LSMeans Difference	Std Err LSMeans Difference	95% CI	P-value
Placebo	xxx	xxx.x	xxx.x				
Test	xxx	xxx.x	xxx.x	xxx.x	xxx.x	xx.x – xx.x	x.xxxx
Reference	xxx	xxx.x	xxx.x	xxx.x	xxx.x	xx.x – xx.x	x.xxxx

The 90% confidence interval for the test-to-reference ratio was calculated using a procedure similar to Fieller's method.

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.10.2 Summary of Supportive Analysis Results of Co-Primary Efficacy Endpoint (Percent Change from Baseline in Non-Inflammatory Lesion Count between Treatment Groups)

Equivalence: modified Intent-to-Treat Population

Treatment Group	Number of Subjects (N)	Difference Between Treatments		
		LSMeans	Test-to-Reference Ratio	90% CI Evaluation
Test	xxx	xxx.x		
Reference	xxx	xxx.x	xx.x	xx.x – xx.x

Superiority: Per-Protocol Population

Treatment Group	Number of Subjects (N)		Std Err LSMeans	Treatment vs. Placebo			
		LSMeans		LSMeans Difference	Std Err LSMeans Difference	95% CI	P-value
Placebo	xxx	xxx.x	xxx.x				
Test	xxx	xxx.x	xxx.x	xxx.x	xxx.x	xx.x – xx.x	x.xxxx
Reference	xxx	xxx.x	xxx.x	xxx.x	xxx.x	xx.x – xx.x	x.xxxx

The 90% confidence interval for the test-to-reference ratio was calculated using a procedure similar to Fieller's method.

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.11 Summary of Analysis Results of Secondary Efficacy Endpoint (Proportion of Clinical Successes Between Treatment Groups)

Equivalence: Per-Protocol Population

Treatment Group	Number of Subjects (N)	Number of Treatment Successes (n)	Proportion of Treatment Successes (%)	Difference Between Treatments	
				Difference	90% CI Evaluation
Test	xxx	xxx	xx.x%		
Reference	xxx	xxx	xx.x%	xx.x%	xx.x – xx.x

Superiority: modified Intent-to-Treat Population

Treatment Group	Number of Subjects (N)	Number of Treatment Successes (n)	Proportion of Treatment Successes (%)	P-value
Placebo	xxx	xxx	xx.x%	
Test	xxx	xxx	xx.x%	x.xxxx
Reference	xxx	xxx	xx.x%	x.xxxx

The 90% confidence interval for the difference in proportions between test and reference was calculated using Yates' correction.

Superiority of Active treatments over Placebo were tested using a two-sided Cochran-Mantel-Haenszel (CMH) exact test, stratified by clinical site, at the 5% significance level using last observation carried forward (LOCF).

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

T16.1.9.12 Overall Summary of Adverse Events (Safety Population)

Description	Test N (%)	Reference N (%)	Placebo N (%)	Total N (%)
Subjects Randomized	xxx	xxx	xxx	xxx
Subjects with at least one AE	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Discontinued study drug due to above AE	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
AEs reported	xxx	xxx	xxx	xxx
Mild	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Moderate	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Severe	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Not Suspected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Suspected	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Death	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Serious AE	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.13 Summary of Frequency of All Adverse Events by Body System (Safety Population)

		Test (N = xxx)		Reference (N = xxx)		Placebo (N = xxx)		Fisher's
Body System	**MedDRA Term**	**Events**	**Subjects**	**Events**	**Subjects**	**Events**	**Subjects**	**P-value**
Patient with at least one AE	Total	Xx	xx (xx.x%)	xx	xx (xx.x%)	xx	xx (xx.x%)	x.xxxx
Ear and labyrinth disorders	Ear pain	Xx	xx (xx.x%)	xx	xx (xx.x%)	xx	xx (xx.x%)	x.xxxx
	etc.							
etc.								

Comparison of treatment groups is with respect to the number of subjects with at least one occurrence of the AE.

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.14 Summary of Frequency for AEs Occurring in at Least 5% of Subjects by Body System (Safety Population)

T16.1.9.15 Summary of Frequency of All Adverse Events by Severity (Safety Population)

		Test # Events (N=xx)			Reference # Events (N=xx)			Placebo # Events (N=xx)		
Body System	**MedDRA Term**	**Mild**	**Moderate**	**Severe**	**Mild**	**Moderate**	**Severe**	**Mild**	**Moderate**	**Severe**
Total AEs	Total AEs	xx(xx.x%)	xx(xx.x%)	xx (xx.x%)	xx(xx.x%)	xx(xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Ear and labyrinth disorders	Ear pain	xx(xx.x%)	xx(xx.x%)	xx (xx.x%)	xx(xx.x%)	xx(xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
	Hypoacusis	xx(xx.x%)	xx(xx.x%)	xx (xx.x%)	xx(xx.x%)	xx(xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)

etc.

N = Total number of events in each treatment group; Percentage is based on total number of events.

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.16 Summary of Frequency of All Adverse Events by Relationship (Safety Population)

		Test # Events (N=xx)		Reference # Events (N=xx)		Placebo # Events (N=xx)	
Body System	**MedDRA Term**	**Suspected**	**Not Suspected**	**Suspected**	**Not Suspected**	**Suspected**	**Not Suspected**
Total AEs	Total AEs	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
Ear and labyrinth disorders	Ear pain	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
	Hypoacusis	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)	xx (xx.x%)
	etc.						
etc.							

N = Total number of events in each treatment group; Percentage is based on total number of events.

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.17 Summary of Frequency of Serious Adverse Events (Safety Population)

Body System	MedDRA Term	Test # Events	Reference # Events	Placebo # Events
Injury, poisoning and procedural complications	Alcohol poisoning	xx	xx	xx

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.18 Summary of Application Site Reaction (Safety Population)

Signs and Symptoms	Visit	Statistic	Test (N = xxx)	Reference (N = xxx)	Placebo (N = xxx)
Erythema	1	n	xxx	xxx	xxx
		Mean ± SD	xx.x ± xx.x	xx.x ± xx.x	xx.x ± xx.x
		Median	xx.x	xx.x	xx.x
		Range	xx.x – xx.x	xx.x – xx.x	xx.x – xx.x
	2				
	3				
	4/ET				
Dryness					
Burning/Stinging					
Erosion					
Edema					
Pain					
Itching					

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.19 Summary of Frequency of Application Site Reaction (Safety Population)

Signs and Symptoms	Visit	Statistic	Test (N = xxx)	Reference (N = xxx)	Placebo (N = xxx)
Erythema	1	Absent	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)
		Mild	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)
		Moderate	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)
		Severe	xxx (xx.x%)	xxx (xx.x%)	xxx (xx.x%)
	2				
	3				
	4/ET				
Dryness					
Burning/Stinging					
Erosion					
Edema					
Pain					
Itching					

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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T16.1.9.20 Summary of Vital Signs
(Safety Population)

Vital Signs	Visit	Statistic	Test (N = xxx)	Reference (N = xxx)	Placebo (N = xxx)
Systolic Blood Pressure (mmHg)	1	n	xxx	xxx	xxx
		Mean ± SD	xxx.x ± xx.x	xxx.x ± xx.x	xxx.x ± xx.x
		Median	xxx.x	xxx.x	xxx.x
		Range	xx.x – xx.x	xx.x – xx.x	xx.x – xx.x
	4/ET				
Diastolic Blood Pressure (mmHg)					
Pulse Rate (beats/min)					
Respiration Rate (breaths/min)					
Temperature (F)					

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.1 Listing of Discontinued Subjects

Treatment Group	Patient Number	Discontinuation Reason	Population
Test	xx - xxxx	Withdrew Consent	Safety
	xx - xxxx	Lost to Follow-up	Safety
Reference			
Placebo			

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.2 Listing of Protocol Deviations

Treatment Group	Patient Number	Protocol Deviation Summary	Population
Test	xx - xxxx	Outside Visit Window	Safety

Reference

Placebo

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.3.1 Subjects Excluded from the Per-Protocol Population Data Set

Treatment Group	Patient Number	Exclusion Reason
Test	xx - xxxx	Patient did not meet IE criterion.
	xx - xxxx	Patient took prohibited medications
Reference		
Placebo		

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.3.2 Subjects Excluded from the Modified Intent-to-Treat Data Set

Treatment Group	Patient Number	Exclusion Reason
Test	xx - xxxx	Patient did not have at least one post-randomization evaluation
	xx - xxxx	Patient did not have at least one post-randomization evaluation
Reference		
Placebo		

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.4.1 Listing of Demographic Data

Treatment Group	Patient Number	Age	Sex	Ethnicity	Race
Test	xx - xxxx	30	Female	Not Hispanic or Latino	Black or African American
Reference					
Placebo					

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.4.2 Listing of Medical History

Treatment Group	Patient Number	Category	Reported Term	Onset Date	End Date	Ongoing
Test	xx - xxxx	Gynecologic	Menopause	2003	2003	

Reference

Placebo

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.4.3 Listing of Concomitant Medications

Test: Tazarotene Cream 0.1%

Patient Number	Medication/ Therapy Name	Dosage	Frequency	Route	Start/End Date	Indication
xx - xxxx	LISINOPRIL	20 MG	QD	PO	yyyy-mm-dd/	HYPERTENSION

Note to programmer: table will continue for reference and placebo group

L16.2.5.1 Listing of Visit Date Information

Treatment Group	Patient Number	Inform Consent Date	Visit 1	Visit 2	Visit 3	Visit 4 or Early Termination
Test	xx - xxxx	yyyy-mm-dd	yyyy-mm-dd	yyyy-mm-dd	yyyy-mm-dd	yyyy-mm-dd

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.5.2 Listing of Drug Administration

Treatment Group	Patient Number	Date of First Dose	Date of Last Dose	Total Doses Applied	Dosing Compliance (%)
Test	xx - xxxx	yyyy-mm-dd	yyyy-mm-dd	xx	xx.x
Reference					
Placebo					

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.6.1 Listing of Lesion Count

Treatment Group	Patient Number	Visit	Total Inflammatory Lesion Count	Total Non-Inflammatory Lesion Count	Total Nodulocystic Lesion Count	Percent Change from Baseline in Total Inflammatory Lesion Count	Percent Change from Baseline in Total Non-Inflammatory Lesion Count
Test	xx - xxxx	1	xx	xx	xx	xx	0.00
		2	xx	xx	xx	xx	x.xx
		3	xx	xx	xx	xx	x.xx
		4/ET	xx	xx	xx	xx	x.xx
	etc						
Reference							
Placebo							

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.6.2 Listing of Investigator Global Assessment

Treatment Group	Patient Number	Visit	IGA	Change from Baseline	Success/ Failure
Test	xx - xxxx	1	xx	0	
		2	xx	xx	
		3	xx	xx	
		4/ET	xx	xx	Success
	xx - xxxx	1	xx	0	
		2	xx	xx	
		3	xx	xx	
		4/ET	xx	xx	Failure
	etc				
Reference					
Placebo					

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.7.1 Listing of Adverse Events by Treatment Group

Test: Tazarotene Cream 0.1%

Patient Number	Body System/ MedDRA Term/ AE Term	TX Area	Start /End Date	Severity	Relationship to Investigational Drug	Outcome	Action Taken with Investigational Drug / Other Action Taken	SAE?
xx - xxxx	Nervous system disorders/ headache/ Headache	No	yyyy-mm-dd / yyyy-mm-dd	Mild	Not Suspected	Recovered	Drug withdrawn/ None	No

Note to programmer: table will continue for reference and placebo group

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L16.2.7.2 Listing of Application Site Reactions

Treatment Group	Visit	Erythema	Dryness	Burning /Stinging	Erosion	Edema	Pain	Itching
Test	**1**	0	0	0	1	0	0	0
	2	0	1	0	0	0	0	0
	3	0	0	0	1	0	0	0
	4/ET	0	0	0	1	0	0	2
Reference								
Placebo								

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.8.1 Listing of Pregnancy Test Results

Treatment Group	Patient Number	Visit 1	Visit 2	Visit 3	Visit 4 or Early Termination
Test	xx - xxxx	Negative	Negative	Negative	Negative
Reference					
Placebo					

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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L16.2.8.2 Listing of Vital Signs

Treatment Group	Patient Number	Visit	Systolic BP (mmHg)	Diastolic BP (mmHg)	Pulse Rate (beats/min)	Respiration Rate (breaths/min)	Temperature (F)
Test	xx - xxxx	1	120	70	84	18	98.6
		4/ET	140	80	74	18	97
	xx - xxxx						
Reference							
Placebo							

Test: Tazarotene Cream 0.1% (Fougera Pharmaceuticals Inc.)
Reference: TAZORAC® (tazarotene) Cream, 0.1% (Allergan, Inc.)
Placebo: Placebo (vehicle) Cream (Fougera Pharmaceuticals Inc.)

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APPENDIX A: Investigator's Global Assessment for Acne Vulgaris

To be eligible for participation in the study a subject must have a Baseline IGA score of 2, 3 or 4.

Grade	Description
0	Clear skin with no inflammatory or non-inflammatory lesions
1	Almost clear; rare non-inflammatory lesions with no more than one small inflammatory lesion
2	Mild severity; greater than Grade 1; some non-inflammatory lesions with no more than a few inflammatory lesions (papules/pustules only, no nodular lesions)
3	Moderate severity; greater than Grade 2; up to many non-inflammatory lesions and may have some inflammatory lesions, but no more than one small nodular lesion
4	Severe; greater than Grade 3; up to many non-inflammatory lesions and may have some inflammatory lesions, but no more than a few nodular lesions
5	Greater than Grade 4

APPENDIX B: Application Site Reactions

The following application site reactions will be evaluated at each visit based on the scale provided below:

Signs and Symptoms:

Erythema

Dryness

Burning/Stinging

Erosion

Edema

Pain

Itching

Grading Scale:

Severity	**Grade**
Absent	0
Mild	1 (slight, barely perceptible)
Moderate	2 (distinct presence)
Severe	3 (marked, intense)

[redacted]

[redacted]