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Supplementary Results

POM + LoDEX significantly improved ORR versus HiDEX in patients with baseline CrCl ≥ 30 - < 60 mL/min (28% vs 11%; P = .014) and in patients with baseline CrCl ≥ 60 mL/min (34% vs 12%; P < .001) (Table 2). Note, the percentages in Table 2 may not add to 100% due to rounding.
Supplemental Figure 1. Patient disposition and analysis populations as of September 1, 2013 data cutoff.

- Patients screened (N = 592)
  - Screen failures (n = 137)
  - Randomized 2:1 (n = 455)
    - Allocated to POM + LoDEX (n = 302)
      - Discontinued (n = 266)
        - Ongoing Tx (n = 36)
          - Excluded from analysis (n = 4)
            - Missing baseline CrCl (n = 2)
            - Baseline CrCl < 30 mL/min (n = 2)
          - Evaluable for CrCl analysis
            - Efficacy (n = 298)
              - CrCl ≥ 30 - < 60 mL/min (n = 93)
              - CrCl ≥ 60 mL/min (n = 205)
            - Safety (n = 296)
              - CrCl ≥ 30 - < 60 mL/min (n = 93)
              - CrCl ≥ 60 mL/min (n = 203)
    - Allocated to HiDEX (n = 153)
      - No crossover and discontinued (n = 142)
        - Received POM (n = 74)
          - Received POM after HiDEX (n = 85)
            - Evaluable for CrCl analysis
              - Efficacy (n = 149)
                - CrCl ≥ 30 - < 60 mL/min (n = 56)
                - CrCl ≥ 60 mL/min (n = 93)
              - Safety (n = 146)
                - CrCl ≥ 30 - < 60 mL/min (n = 56)
                - CrCl ≥ 60 mL/min (n = 90)
      - Crossover and Received POM (n = 11)
        - Crossover and ongoing Tx (n = 8)
          - Excluded from analysis (n = 4)
            - Missing baseline CrCl (n = 1)
            - Baseline CrCl < 30 mL/min (n = 3)
        - Discontinued (n = 3)
      - Did not receive POM (n = 68)

CrCl, creatinine clearance; HiDEX, high-dose dexamethasone; LoDEX, low-dose dexamethasone; POM, pomalidomide; Tx, treatment.