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APPENDIX S1

Efficacy outcomes: PASI score <5 and <1 using the observed case approach

The proportion (95% CI) of TIL-treated patients aged <65 years versus ≥65 years achieving an absolute PASI<5 for TIL 100 mg at week 28 was 78.4% (74.6-81.9%) versus 65.4% (50.9-78.0%). At week 244, it was 91.0% (86.4-94.4%) versus 100.0% (75.3-100.0%). The proportion (95% CI) of TIL-treated patients aged <65 years versus ≥65 years achieving an absolute PASI<5 for TIL 200 mg at week 28 was 82.1% (78.7-85.3%) versus 68.8% (53.8-81.4%). At week 244, it was 91.4% (86.0-95.2%) and 100.0% (75.3-100.0%) (comparison by age groups [combining TIL doses] at week 244: $P = .113$).

The proportion (95% CI) of TIL-treated patients aged <65 years versus ≥65 years achieving an absolute PASI<1 for TIL 100 mg at week 28 was 41.1% (36.9-45.5%) versus 26.9% (15.6-41.0%). At week 244, it was 51.4% (44.6-58.1%) versus 61.5% (31.6-86.1%). The proportion (95% CI) of TIL-treated patients aged <65 years versus ≥65 years achieving an absolute PASI<1 for TIL 200 mg at week 28 was 44.5% (40.2-48.8%) versus 37.5% (24.0-52.7%). At week 244, it was 58.3% (50.3-65.9%) versus and 92.3% (64.0-99.8%) (comparison by age groups [combining TIL doses] at week 244: $P = .025$).

APPENDIX S2

Efficacy outcomes: PASI score <3, <5 and <1 using the multiple imputation approach

The proportion (95% CI) of TIL-treated patients aged <65 years versus \geq 65 years achieving an absolute PASI<3 for TIL 100 mg at week 28 was 65.9% (61.8-69.9%) versus 51.9% (37.6-66.0%). At week 244, it was 75.7% (70.5-80.5%) versus 71.5% (50.9-87.0%). The proportion (95% CI) of TIL-treated patients aged <65 years versus \geq 65 years achieving an absolute PASI<3 for TIL 200 mg at week 28 was 69.4% (65.4-73.3%) versus 57.2% (42.4-71.1%). At week 244, it was 77.8% (71.6-83.2%) versus 93.1% (69.7-99.1%) (comparison by age groups [combining TIL doses] at week 244: $P= .39$).

The proportion (95% CI) of TIL-treated patients aged <65 years versus \geq 65 years achieving an absolute PASI<5 at week 28 for TIL 100 mg was 78.2% (74.5-81.6%) versus 65.4% (50.9-78.0%). At week 244, it was 87.0% (82.7-90.6%) versus 88.1% (69.6-97.1%). The proportion (95% CI) of TIL-treated patients aged <65 years versus \geq 65 years achieving an absolute PASI<5 for TIL 200 mg at week 28 was 81.4% (77.9-84.6%) versus 67.6% (52.9-80.1%). At week 244, it was 88.5% (83.5-92.5%) versus 96.3% (73.8-99.8%) (comparison by age groups [combining TIL doses] at week 244: $P= .49$).

The proportion (95% CI) of TIL-treated patients aged <65 years versus \geq 65 years achieving an absolute PASI<1 for TIL 100 mg at week 28 was 40.9% (36.8-45.2%) versus 26.9% (15.6-41.0%). At week 244, it was 45.6% (39.9-51.4%) versus 46.5% (27.1-66.9%). The proportion (95% CI) of TIL-treated patients aged <65 years versus \geq 65 years achieving an absolute PASI<1 for TIL 200 mg at week 28 was 43.8% (39.6-48.1%) versus 36.2% (23.1-51.0%). At week 244, it was 52.7% (45.7-59.6%) versus 83.1% (56.7-96.5%) (comparison by age groups [combining TIL doses] at week 244: $P= .23$).

APPENDIX S3

DLQI and DLQI-R using the observed case approach

The absolute mean (standard deviation, SD) DLQI in TIL-treated patients aged <65 years versus ≥65 years for TIL 100 mg at week 28 was 3.0 (3.9) versus 3.4 (4.3). At week 52, it was 2.1 (3.4) versus 1.5 (2.9).

The absolute mean (SD) DLQI in TIL-treated patients aged <65 years versus ≥65 years for TIL 200 mg at week 28 was 2.3 (3.5) versus 2.7 (4.3). At week 52, it was 1.5 (2.9) versus 1.1 (2.0).

The mean change from baseline (SD) in DLQI in TIL-treated patients aged <65 years versus ≥65 years for TIL 100 mg at week 28 was -11.5 (7.0) versus -9.4 (6.1). At week 52, it was -12.7 (7.0) versus -10.6 (5.6).

The mean change from baseline (SD) in DLQI in TIL-treated patients aged <65 years versus ≥65 years for TIL 200 mg at week 28 was -11.2 (7.0) versus -7.6 (6.7). At week 52, it was -11.6 (6.5) versus -10.3 (6.5).

The proportion (95% CI) of TIL-treated patients aged <65 years versus ≥65 years achieving a DLQI-R 0/1 for TIL 100 mg at week 28 was 49.1% (42.9-55.35%) versus 36.0% (18.0-57.5%). At week 52, it was 65.0% (57.8-71.6%) versus 54.6% (23.4-83.3%). The proportion (95% CI) of TIL-treated patients aged <65 years versus ≥65 years achieving a DLQI-R 0/1 for TIL 200 mg at week 28 was 60.44% (54.3-66.2%) versus 54.66% (32.2-75.6%). At week 52, it was 66.7% (56.3-76.0%) versus 87.5% (47.4-99.7%) (comparison by age groups [combining TIL doses] at week 52: $P = .80$).

The mean absolute (SD) DLQI-R in TIL-treated patients aged <65 years versus ≥65 years at week 28 for TIL 100 mg was 3.2 (4.4) versus 4.5 (5.2). At week 52, it was 1.9 (3.0) versus 2.3 (4.1). The mean absolute (SD) DLQI-R in TIL-treated patients aged <65 years versus ≥65 years at week 28 for TIL 200 mg was 2.3 (3.6) versus 2.4 (4.5). At week 52, it was 1.4 (2.3) versus 0.6 (1.1). The mean change from baseline (SD) in DLQI-R in TIL-treated patients aged <65 years versus ≥65 years at week 28 for TIL 100 mg was -12.5 (7.4) versus -9.5 (6.8). At week 52, it was -13.9 (7.0) versus -12.4 (6.4). The mean change from baseline (SD) in DLQI-R in TIL-treated patients aged <65 years versus ≥65 years at week 28 for TIL 200 mg was -12.0 (7.3) versus -7.5 (5.5). At week 52, it was -12.0 (6.5) versus -9.4 (5.2).

The mean (SD) DLQI NRRs in TIL-treated patients aged <65 years versus ≥65 years for TIL 100 mg at week 28 was 0.4 (1.0) versus 0.6 (0.9). At week 52, it was 0.4 (1.0) versus 0.9 (0.8). The mean (SD) DLQI NRRs in TIL-treated patients aged <65 years versus ≥65 years for TIL 200 mg at week 28 was 0.4 (1.2) versus 0.8 (1.2). At week 52, it was 0.4 (0.9) versus 0.3 (0.5).