

## Supplemental Online Content

Yajima S, Hirose K, Masuda H. Enfortumab vedotin with or without pembrolizumab in metastatic urothelial carcinoma: a meta-analysis. *JAMA Netw Open*. 2025;8(3):e250250.  
doi:10.1001/jamanetworkopen.2025.0250

**eAppendix.** Search Strategy for Meta-analysis

**eTable 1.** Clinical Parameters and Results of the Trials Incorporated in This Analysis

**eFigure 1.** The RoB2 Assessment (A) and the ROBINS-I Assessment (B) of the Included Studies

**eFigure 2.** Forest Plots of EV Efficacy (Monotherapy or Combination) in mUC Patients: DCR, ORR, and 1-Year Survival

**eFigure 3.** Forest Plots of AEs Incidence for EV (Monotherapy or Combination) in mUC Patients: All-Grade and High-Grade AEs

**eFigure 4.** Forest Plots of Specific AEs for EV (Monotherapy or Combination) in mUC Patients: All-Grade and High-Grade AEs

**eFigure 5.** Forest Plots of Specific AEs and All-Grade AEs (Overall) for EV (Monotherapy) in mUC Patients

**eFigure 6.** Forest Plots of Specific AEs and All-Grade AEs (Overall) for EV+Pembro in mUC Patients

**eFigure 7.** Network Diagram of Studies Comparing EV, EV Plus Pembrolizumab, and Chemotherapy in mUC

**eTable 2.** CINeMA Assessment of Evidence Certainty for NMA Across Multiple Outcomes (DCR, ORR, and 1-Year Survival)

**eFigure 8.** SUCRA Rankings of Treatment Efficacy (A: DCR, B: ORR, C: 1-Year Survival Rate) for mUC: Comparison of EV Plus Pembrolizumab, EV Monotherapy, and Chemotherapy

**eFigure 9.** Forest Plots of High-Grade AEs for mUC: Comparison of EV Plus Pembrolizumab, EV Monotherapy, and Chemotherapy

**eFigure 10.** SUCRA Rankings of High-Grade AEs for mUC: Comparison of EV Plus Pembrolizumab, EV Monotherapy, and Chemotherapy

**eFigure 11.** Forest Plots of All-Grade AEs for mUC: Comparison of EV Plus Pembrolizumab, EV Monotherapy, and Chemotherapy

This supplemental material has been provided by the authors to give readers additional information about their work.

## eAppendix: Search strategy for meta-analysis

Electronic searches were performed in the following databases to identify eligible studies: There were no language or publication period limitations.

PubMed (n = 105)

((("Carcinoma, Transitional Cell"[Mesh] OR "Urinary Bladder Neoplasms"[Mesh] OR "Urethral Neoplasms"[Mesh] OR "Ureteral Neoplasms"[Mesh] OR "urothelial carcinoma"[tiab] OR "bladder cancer"[tiab]) AND ("Neoplasm Metastasis"[Mesh] OR metasta\*[tiab] OR advanced[tiab])) AND ("enfortumab vedotin"[Supplementary Concept] OR "enfortumab vedotin"[tiab] OR "ASG-22CE"[tiab] OR "ASG-22ME"[tiab]) AND (randomized[tiab] OR randomised[tiab] OR "Randomized Controlled Trial"[pt] OR "Clinical Trial"[pt] OR "Controlled Clinical Trial"[pt] OR trial[tiab] OR "Clinical Study"[pt] OR cohort[tiab] OR "Cohort Studies"[Mesh] OR "Observational Study"[pt]))

Cochrane Library (n = 61)

#1 ("urothelial carcinoma" OR "bladder cancer" OR "transitional cell carcinoma" OR "urinary bladder neoplasm\*" OR "urethral neoplasm\*" OR "ureteral neoplasm\*"):ti,ab,kw  
#2 (metasta\* OR advanced):ti,ab,kw  
#3 ("enfortumab vedotin" OR "ASG-22CE" OR "ASG-22ME"):ti,ab,kw  
#4 (random\* OR trial OR "clinical study" OR cohort OR "observational study"):ti,ab,kw  
#5 #1 AND #2 AND #3 AND #4

Web of science (n = 156)

TS=("urothelial carcinoma" OR "bladder cancer" OR "transitional cell carcinoma" OR "urinary bladder neoplasm\*" OR "urethral neoplasm\*" OR "ureteral neoplasm\*")  
AND  
TS=(metasta\* OR advanced)  
AND  
TS=("enfortumab vedotin" OR "ASG-22CE" OR "ASG-22ME")  
AND  
TS=(randomized OR randomised OR trial OR "clinical study" OR cohort OR "observational study")

Google scholar (n = 479)

("urothelial carcinoma" OR "bladder cancer" OR "transitional cell carcinoma")  
(metastatic OR advanced)  
"enfortumab vedotin"  
("randomized controlled trial" OR "prospective study" OR "phase II" OR "phase III")  
-retrospective -"case report" -review

**eTable 1.** Clinical parameters and results of the trials incorporated in this analysis

Study name	Age (year), median (range)	Follow- up duration (months)	Line of therapy	Dosage of treatment	Schedule of treatment	Proportion of males, No. (%)	ECOG- PS 0, No. (%)	ECOG- PS 1, No. (%)	Primary tumor site	Metastatic sites	Prior treatment history
EV-302 <sup>11</sup>	69 (37- 87)	17.2	First- line	EV 1.25 mg/kg (max 125 mg per dose), pembro 200 mg	3-week cycles, EV on days 1 and 8, pembro on day 1	344 (77.8)	223 (50.5)	204 (46.2)	Lower tract 72.7%, Upper tract 27.0%	Visceral 71.8%, Lymph node only 23.4%, Liver 22.5%, Lung 37.0%, Bone 20.7%	No previous systemic therapy except neoadjuvant or adjuvant chemotherapy with recurrence >12 months after completion
EV-301 <sup>29</sup>	68 (34- 85)	23.75	Second- line or later	1.25 mg/kg (maximum weight, 100 kg)	Days 1, 8, and 15 of each 28-day cycle	238 (79.1)	120 (39.9)	181 (60.1)	Upper tract 33.2%, Bladder/other 66.3%	Liver 30.9%, No liver metastasis 69.1%	Prior platinum-containing chemotherapy and disease progression during or after PD-1/L1 inhibitor treatment
EV-103 Cohort K <sup>30</sup>	71 (51- 91)	14.8	First- line	EV 1.25 mg/kg (maximum 125 mg), pembro 200 mg	EV on days 1 and 8, pembro on day 1 of 3-week cycles	54 (71.1)	33 (43.4)	33 (43.4)	Lower tract 60.5%, Upper tract 39.5%	Visceral 84.2%, Liver 17.1%, Lung 48.7%, Bone	No previous systemic treatment for locally advanced or metastatic disease

										25.0%	
EV-101 <sup>31</sup>	67 (24-86)	16.4	Second-line or later	1.25 mg/kg	Days 1, 8, and 15 of 28-day cycles	111 (71.6)	46 (29.7)	109 (70.3) <sup>a</sup>	Bladder 71%, Upper tract 25%	Visceral 77%, Lung 51%, Liver 39%	96% prior platinum-based chemotherapy, 72% prior anti-PD-(L)1 treatment, 35% prior taxane therapy
EV-201 Cohort 1 <sup>32</sup>	69 (40-84)	10.2	Second-line or later	1.25 mg/kg	Days 1, 8, and 15 of 28-day cycles	88 (70.4)	40 (32.0)	85 (68.0)	Bladder/other 64.8%, Upper tract 35.2%	Visceral 89.6%, Liver 40%, Lung 42.4%, Bone 40.8%	Median 3 prior systemic therapies (range 1-6), 100% prior platinum-based chemotherapy, 100% prior PD-1/L1 inhibitor
EV-201 Cohort 2 <sup>33</sup>	75 (49-90)	13.4	Second-line	1.25 mg/kg	Days 1, 8, and 15 of 28-day cycles	66 (74.2)	37 (41.6)	41 (46.1)	Bladder/other 57.30%, Upper tract 42.70%	Visceral 78.65%, Lymph nodes only 20.22%, Liver 23.60%, Lung 46.07%, Bone 24.72%	100% prior PD-1/PD-L1 inhibitor
DAD <sup>34</sup>	70 (41-88)	14	Second-line or later	Sacituzumab govitecan 8 mg/kg and EV 1.25 mg/kg (recommended phase II dose)	Days 1 and 8 of 21-day cycle	18 (78.3)	14 (60.9)	9 (39.1)	Bladder 69.57%, Upper tract 26.09%, Urethra 4.35%	Lymph nodes 73.91%, Liver 26.09%, Bone 26.09%, Lung 21.74%, Kidney 13.04%	96% prior immunotherapy, 78% prior cisplatin-based chemotherapy, 26% prior carboplatin-based chemotherapy
NA	71	8.6	Third-	1.25 mg/kg	Days 1, 8, and 15	25 (73.5)	29	NA	Bladder 47.06%,	NA	100% prior platinum-

(Permission number: 2021-214)  35	(NA)		line		of 28-day cycle		(85.3) <sup>b</sup>		Upper urinary tract 52.94%		containing chemotherapy and PD-1/PD-L1 inhibitor
EV-102 <sup>36</sup>	67 (57- 82)	NA	Second- line or later	EV 1.0 mg/kg (Arm A, n=9) and 1.25 mg/kg (Arm B, n=8)	Days 1, 8, and 15 of each 28-day cycle	15 (88.2)	13 (76.5)	4 (23.5)	Bladder (70.6%), Renal pelvis (17.6%), Ureter (11.8%)	Bone (35.3%), Liver (11.8%), Lung (35.3%), Adrenal gland (11.8%), Brain (5.9%)	All patients had prior cisplatin-based treatment; one patient previously treated with immune checkpoint inhibitor
EV-103 Cohort A <sup>37</sup>	69 (51- 90)	47	First- line	EV 1.25 mg/kg	EV on Days 1, 8 and pembrolizumab on Day 1 of 3-week cycles	NA	NA	NA	NA	NA	No previous systemic treatment, cisplatin- ineligible patients
EV-203 <sup>38</sup>	NA	6.5	Second- line or later	1.25 mg/kg	Days 1, 8, and 15 of each 28-day cycle	NA	NA	NA	NA	NA	Previously treated with platinum-based chemotherapy and PD- 1/L1 inhibitor therapy

ECOG-PS = Eastern Cooperative Oncology Group Performance Status, EV = Enfortumab Vedotin, Pembro = Pembrolizumab








































Annotation: The numerical values in the RCT study are reported exclusively for the treatment group. a: The data is consolidated and presented as PS1 or higher,  
b: The data is consolidated and presented as PS1 or lower

**eFigure 1.** The RoB2 assessment (A) and the ROBINS-I assessment (B) of the included studies

(A) RoB2 assessment

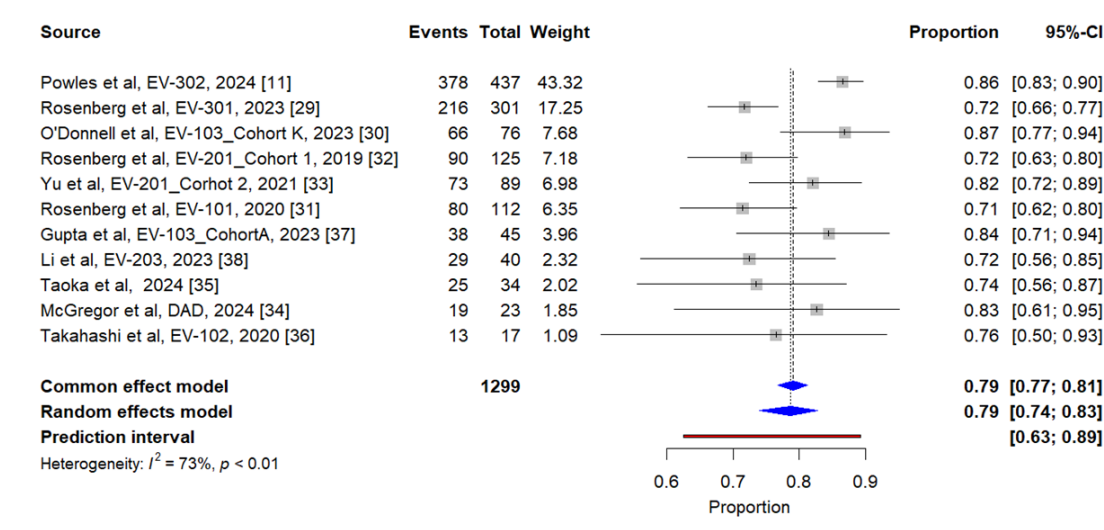
Risk of Bias Assessment (RoB2)						
Study	Risk of bias domains					Overall
	D1	D2	D3	D4	D5	
	Powles et al., 2024 [11]					
	Rosenberg et al., 2023 [29]					
	O'Donnell et al., 2023 [30]					
	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
<div>Domains:</div> <div>D1: Bias due to randomisation.</div> <div>D2: Bias due to deviations from intended intervention.</div> <div>D3: Bias due to missing data.</div> <div>D4: Bias due to outcome measurement.</div> <div>D5: Bias due to selection of reported result.</div> <div>Judgement</div> <div><div></div> Low</div> <div><div></div> Some concerns</div>						

(B) ROBINS-I assessment

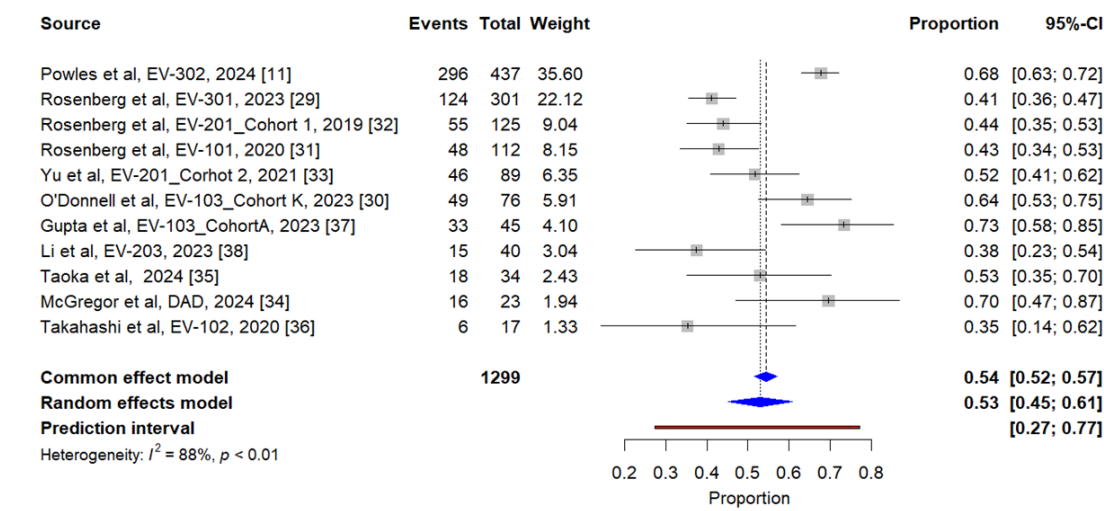
Risk of Bias Assessment (ROBINS-I)							
Study	Risk of bias domains						
	D1	D2	D3	D4	D5	D6	Overall
	Rosenberg et al., 2020 [31]						
	Rosenberg et al., 2019 [32]						
	Yu et al., 2021 [33]						
	McGregor et al., 2024 [34]						
	Taoka et al., 2024 [35]						
Takahashi et al., 2020 [36]							
<div>Domains: D1: Bias due to confounding. D2: Bias due to selection of participants. D3: Bias in classification of interventions. D4: Bias due to deviations from intended interventions. D5: Bias due to missing data. D6: Bias in measurement of outcomes. D7: Bias in selection of the reported result.</div> <div>Judgement  Low  Moderate</div>							

**eFigure 2.** Forest plots of EV efficacy (Monotherapy or Combination) in mUC patients: DCR (A), ORR (B), and 1-Year Survival (C)

(A)DCR

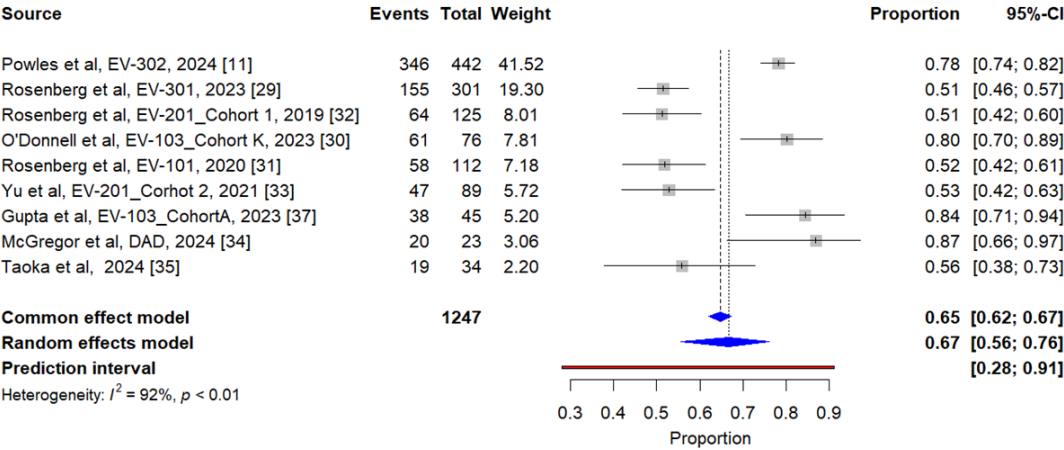


(B) ORR



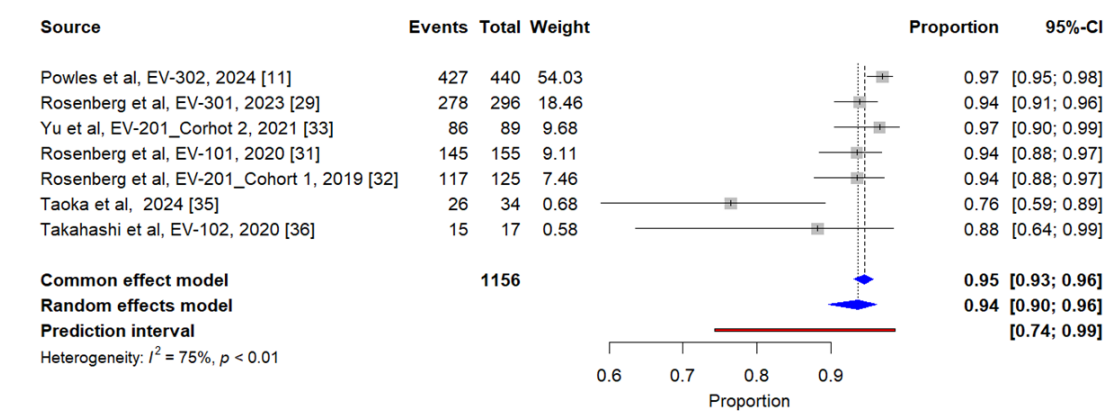
(C) 1-year survival



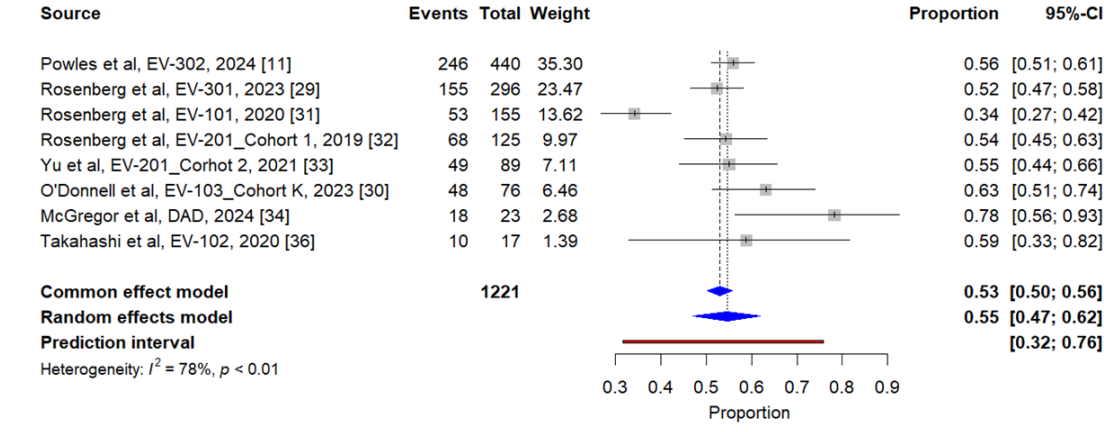


**eFigure 3.** Forest plots of AEs incidence for EV (Monotherapy or Combination) in mUC patients: All-Grade (A) and High-Grade (B) AEs

(A) All-Grade

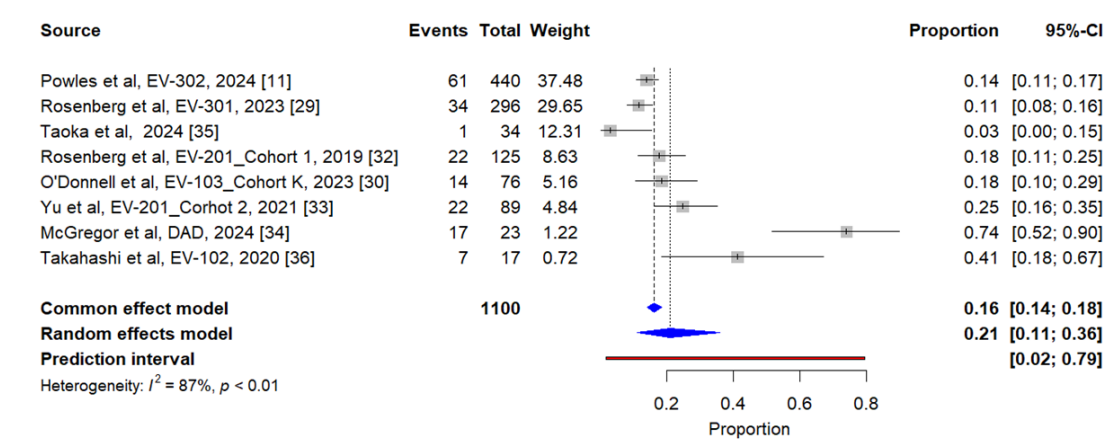


(B) High-Grade

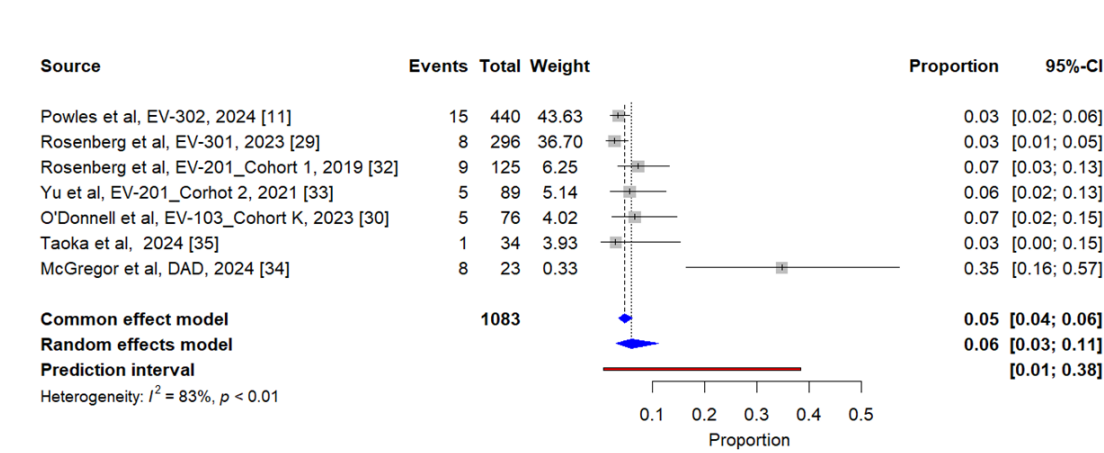


**eFigure 4.** Forest plots of specific AEs for EV (Monotherapy or Combination) in mUC patients: All-Grade and High-Grade AEs

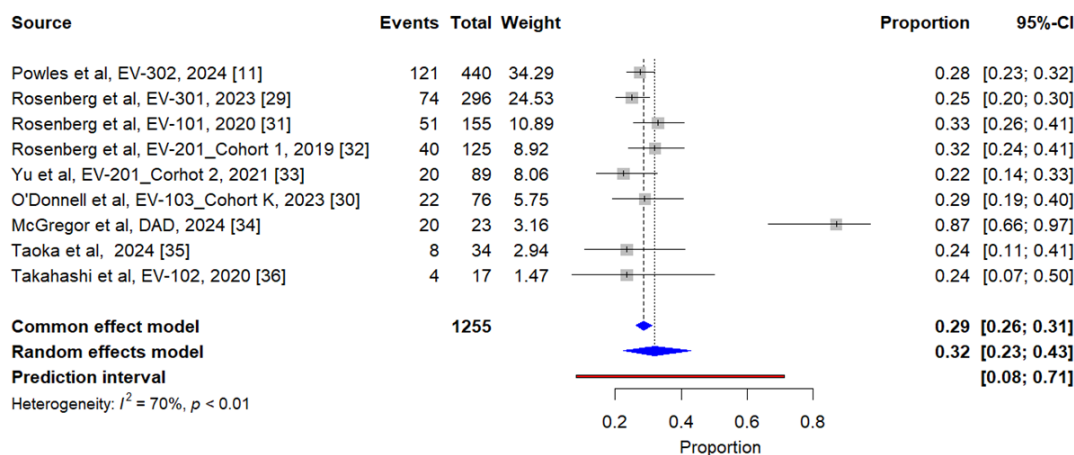
(A) Anemia (All-Grade)



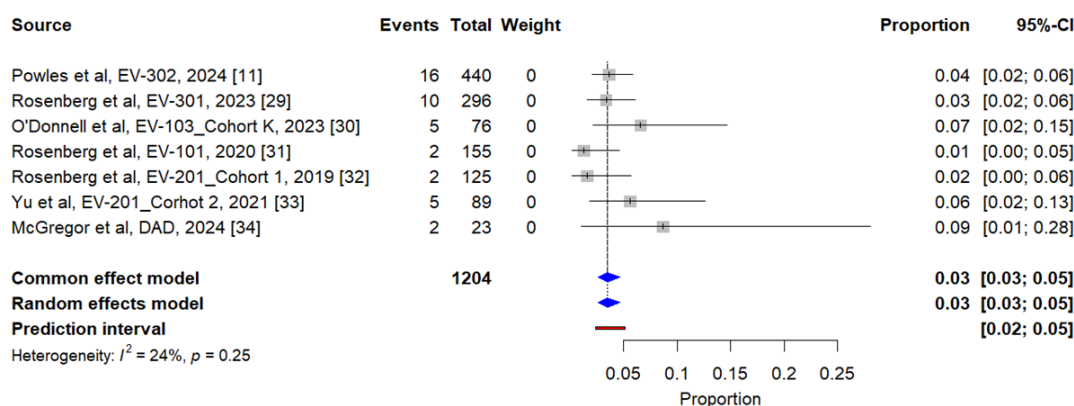
(B) Anemia (High-Grade)



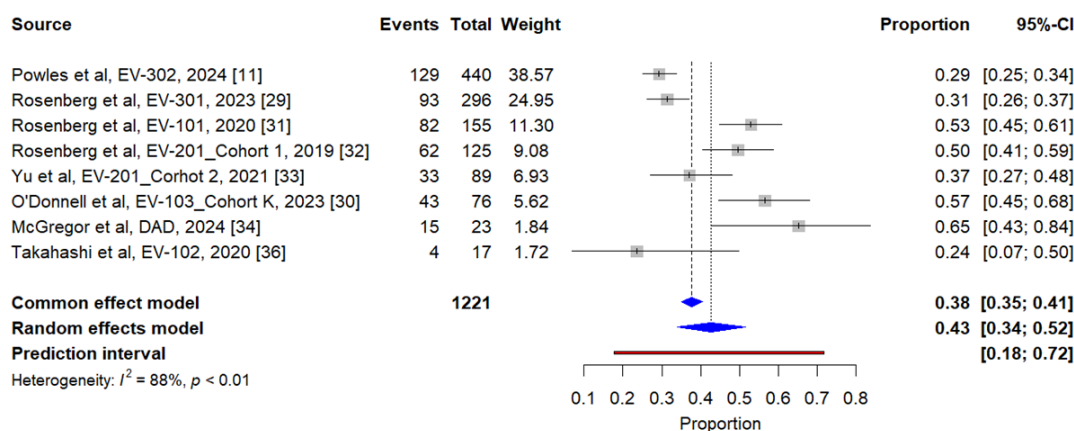
(C) Diarrhea (All-Grade)



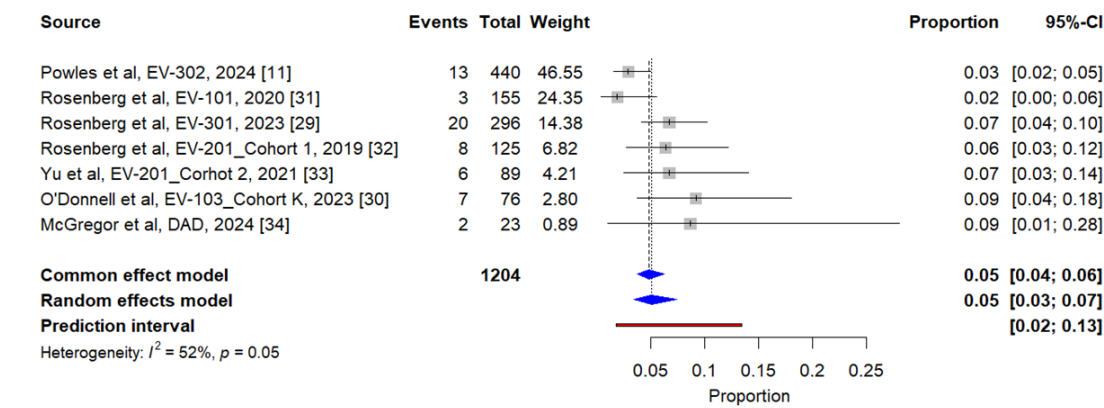
## (D) Diarrhea (High-Grade)



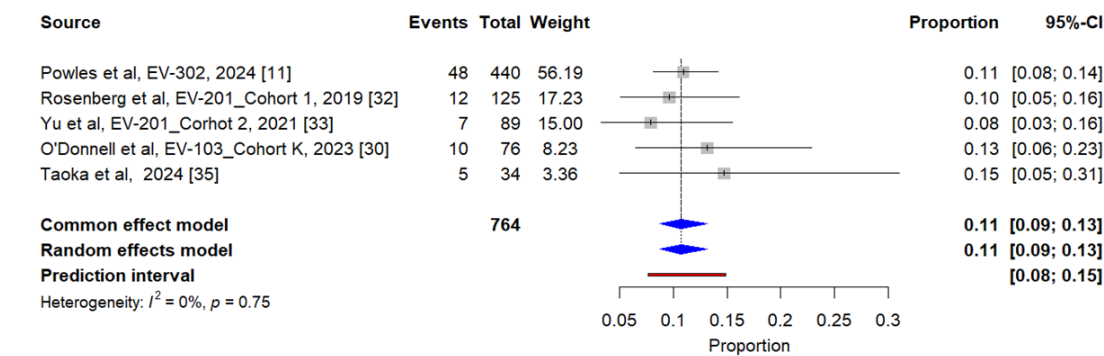
## (E) Fatigue (All-Grade)



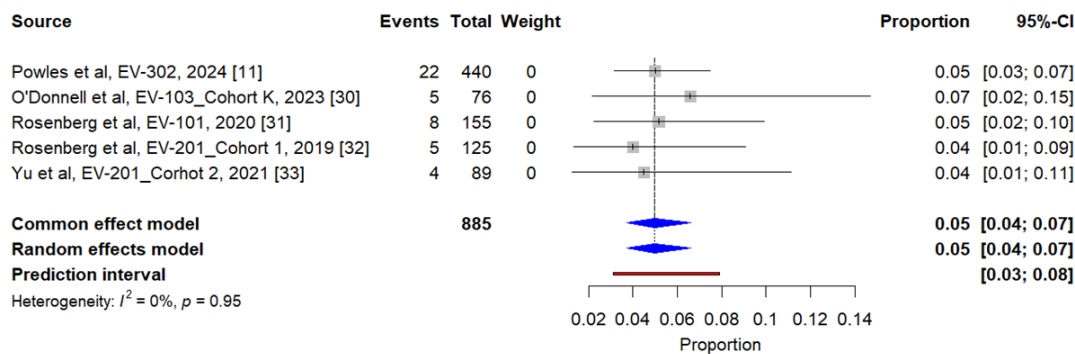
(F) Fatigue (High-Grade)



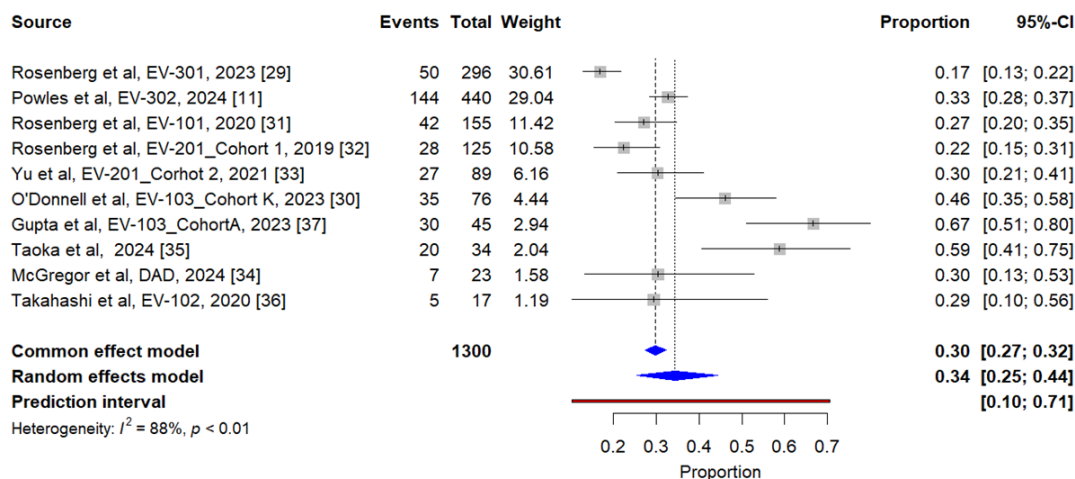
(G) Hyperglycemia (All-Grade)



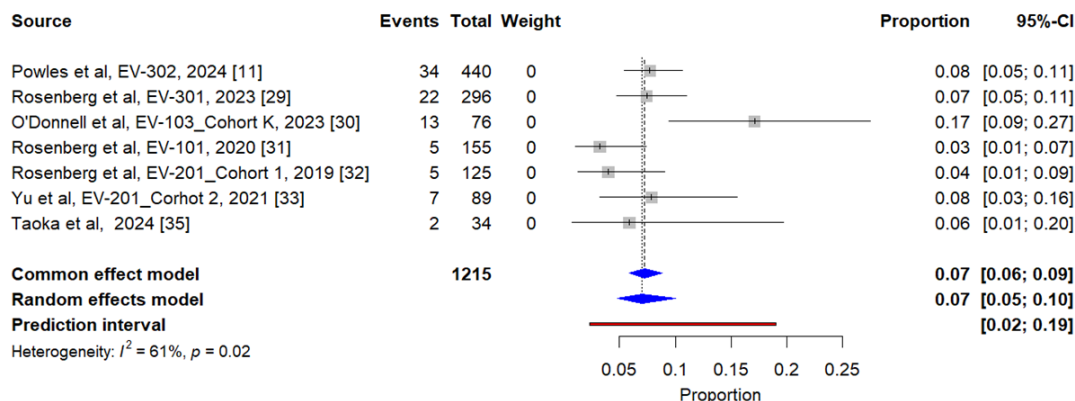
(H) Hyperglycemia (High-Grade)



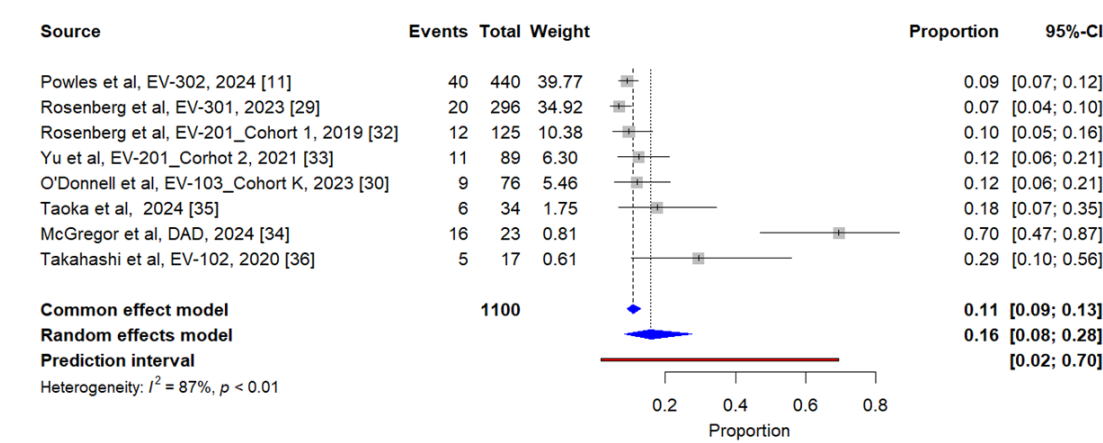
## (I) Maculopapular rash (All-Grade)



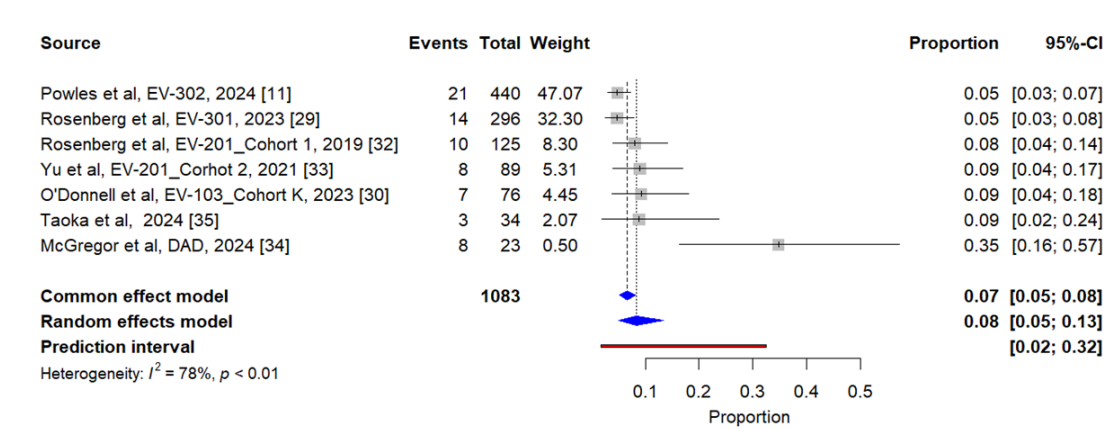
## (J) Maculopapular rash (High-Grade)



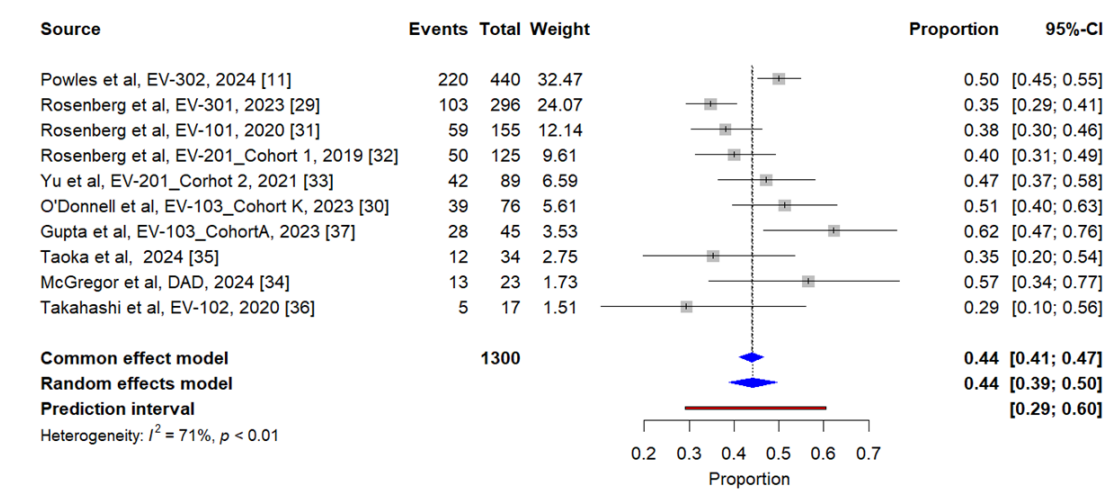
(K) Neutropenia (All-Grade)



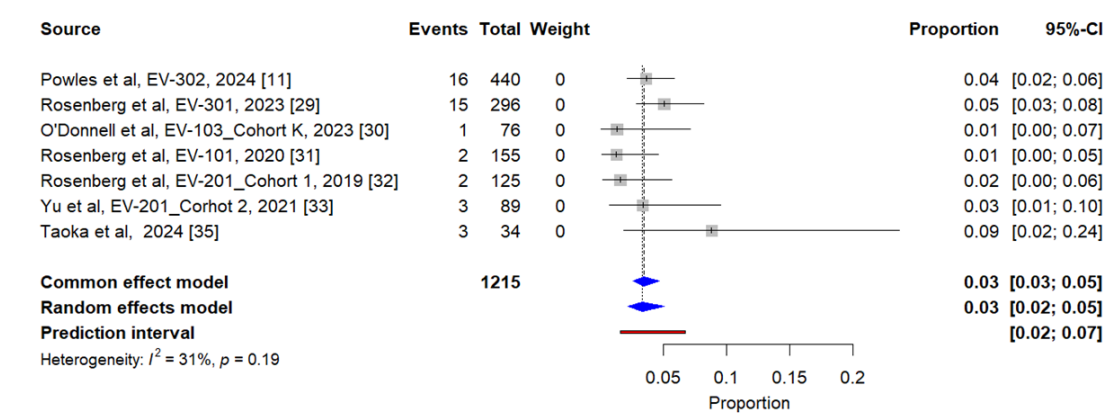
(L) Neutropenia (High-Grade)



(M) Peripheral neuropathy (All-Grade)



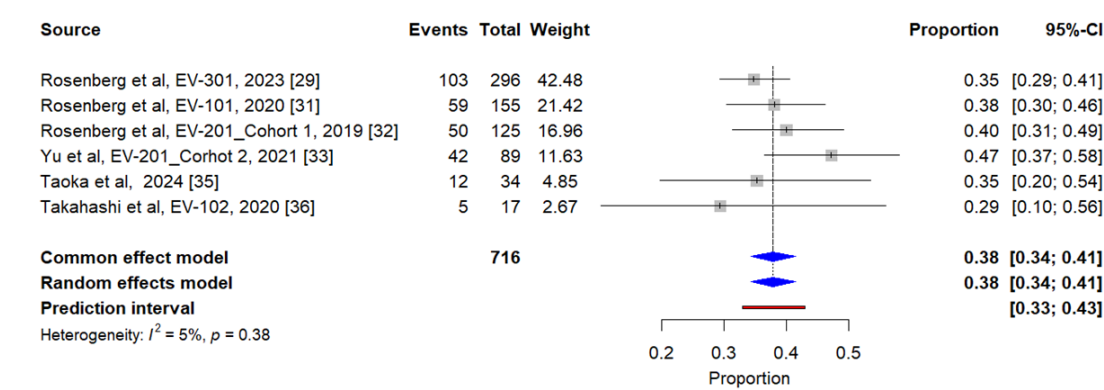
(N) Peripheral neuropathy (High-Grade)



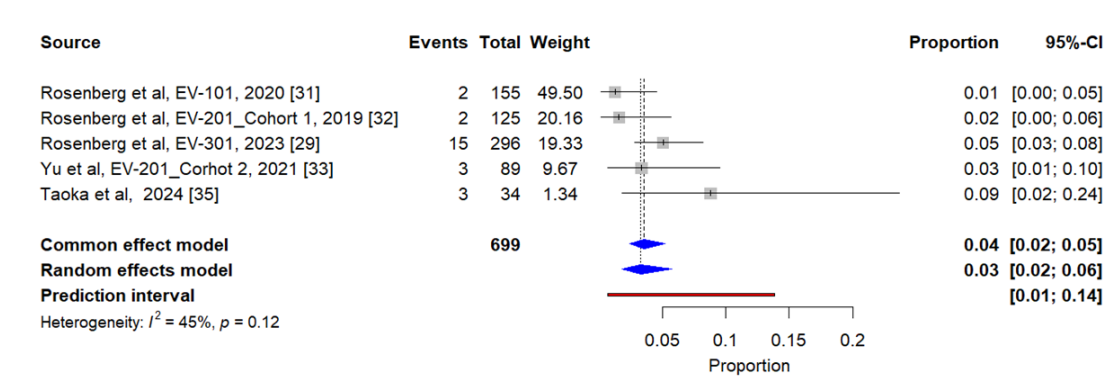


**eFigure 5.** Forest plots of specific AEs and all-grade AEs (overall) for EV (Monotherapy) in mUC patients

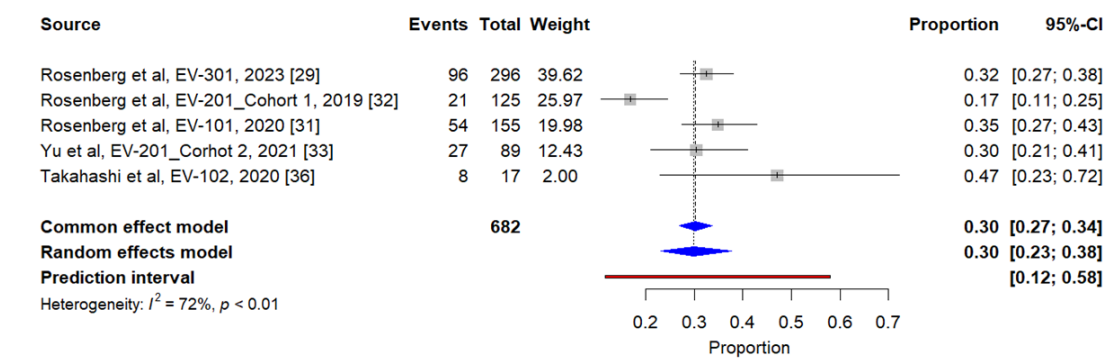
(A) Peripheral neuropathy (All-Grade)



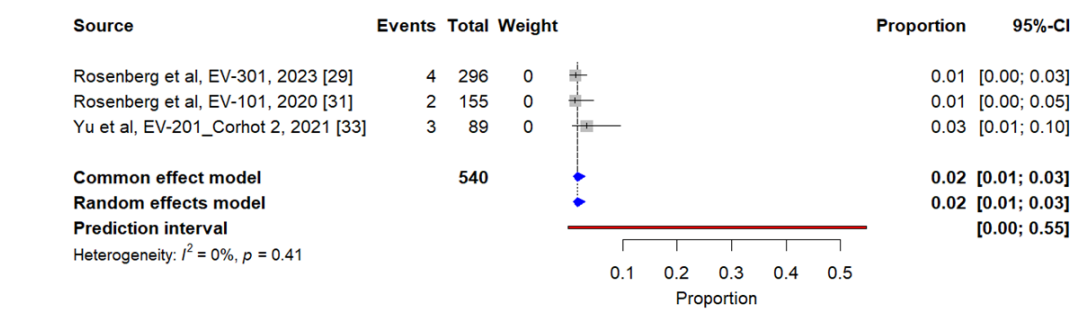
(B) Peripheral neuropathy (High-Grade)



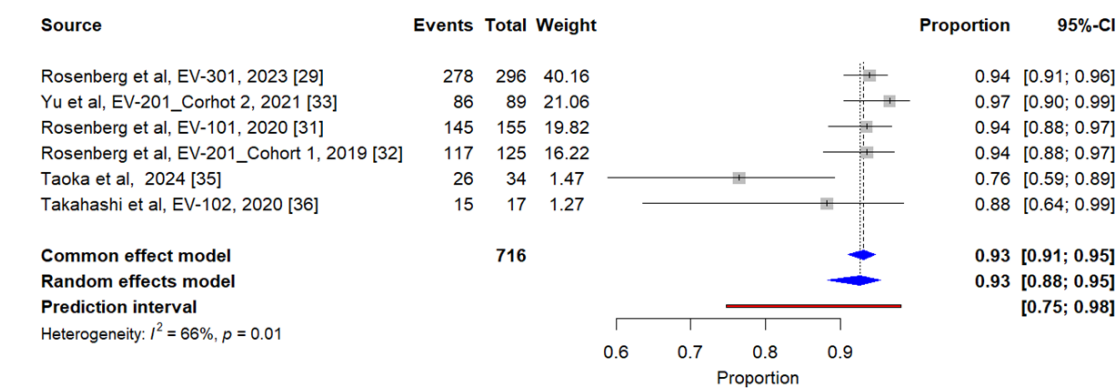
(C) Pruritus (All-Grade)



(D) Pruritus (High-Grade)

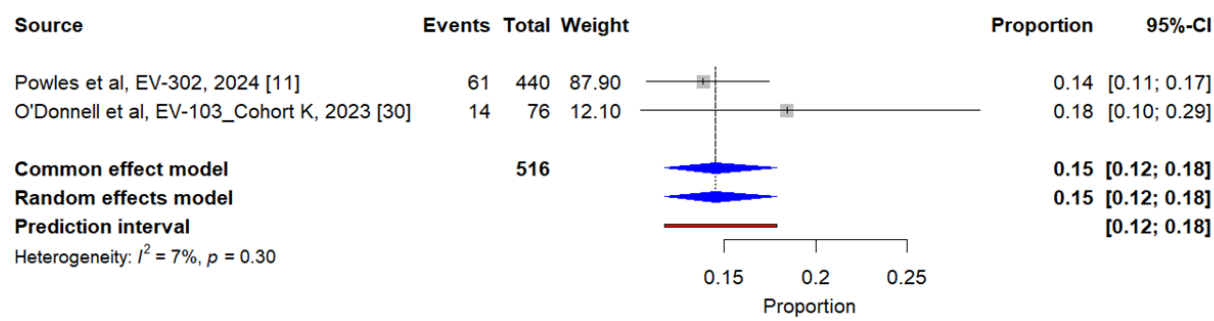


(E) All-grade AEs (overall)

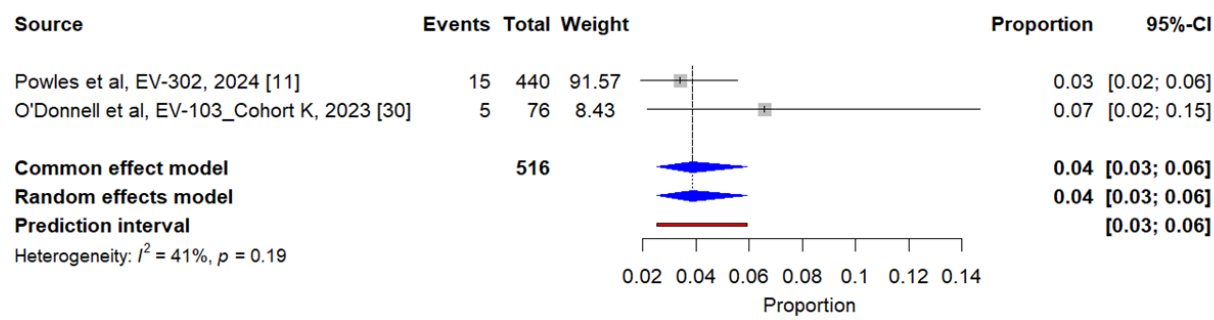


**eFigure 6.** Forest plots of specific AEs and all-grade AEs (overall) for EV+Pembro in mUC patients

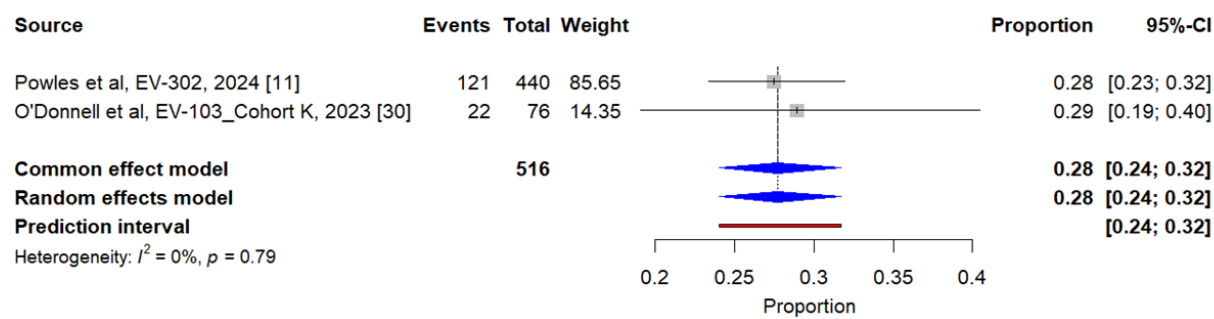
(A) Anemia (All-Grade)



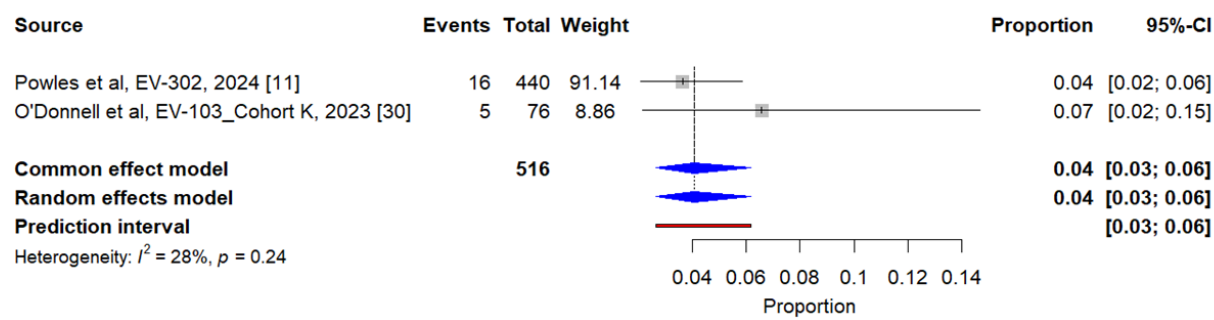
(B) Anemia (High-Grade)



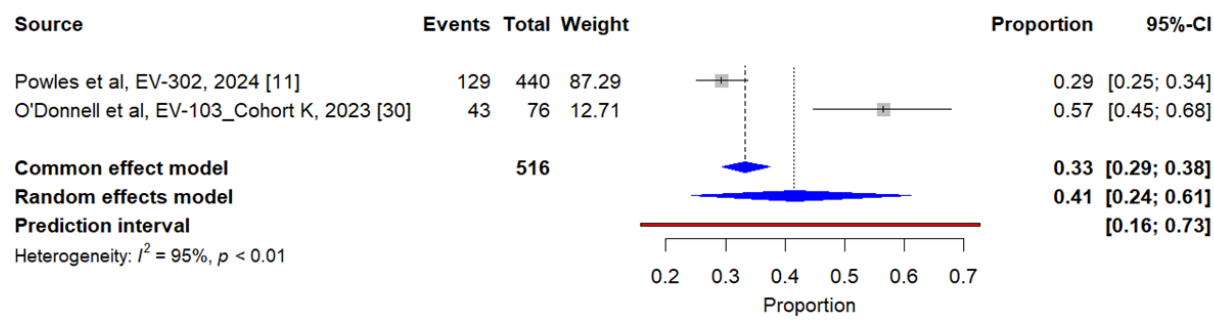
(C) Diarrhea (All-Grade)



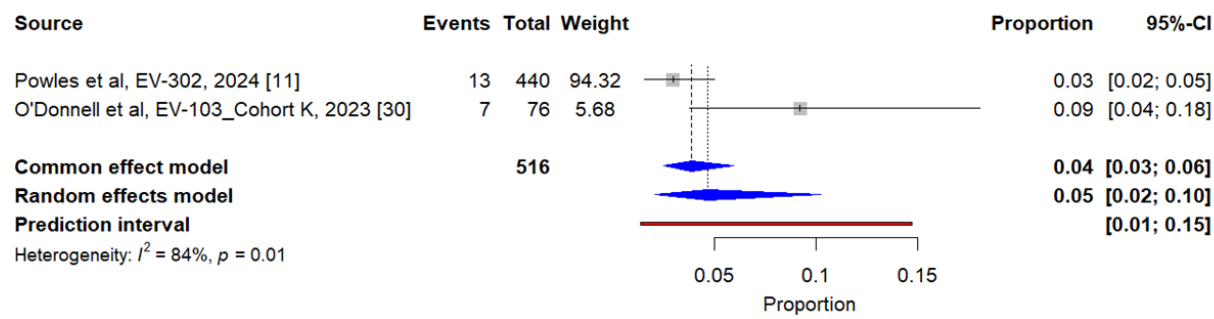
(D) Diarrhea (High-Grade)



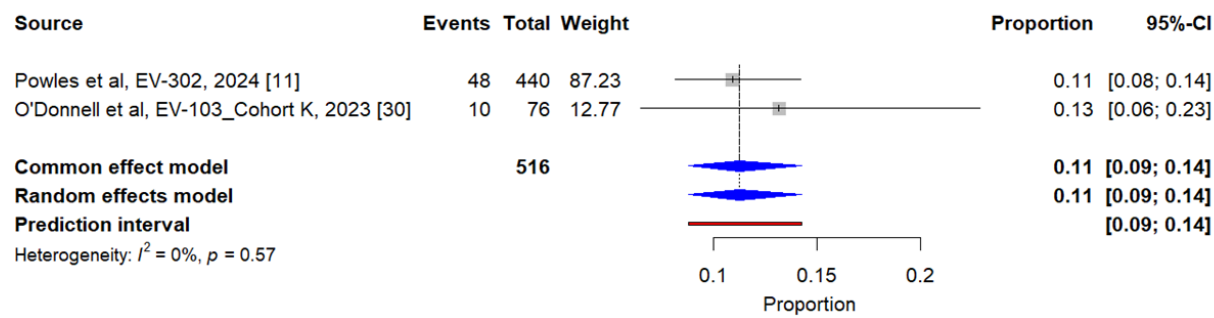
(E) Fatigue (All-Grade)



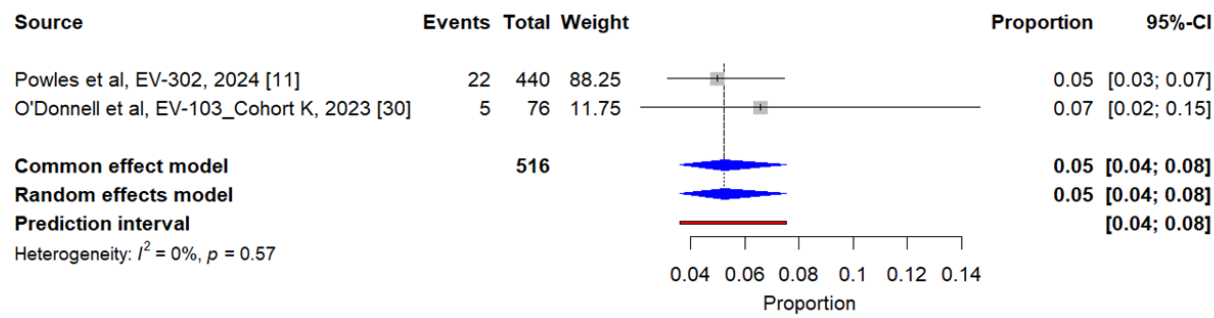
(F) Fatigue (High-Grade)



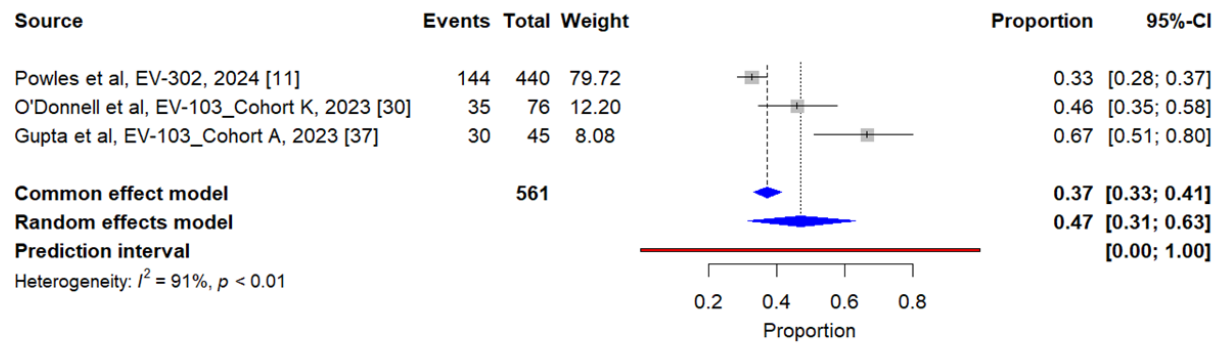
(G) Hyperglycemia (All-Grade)



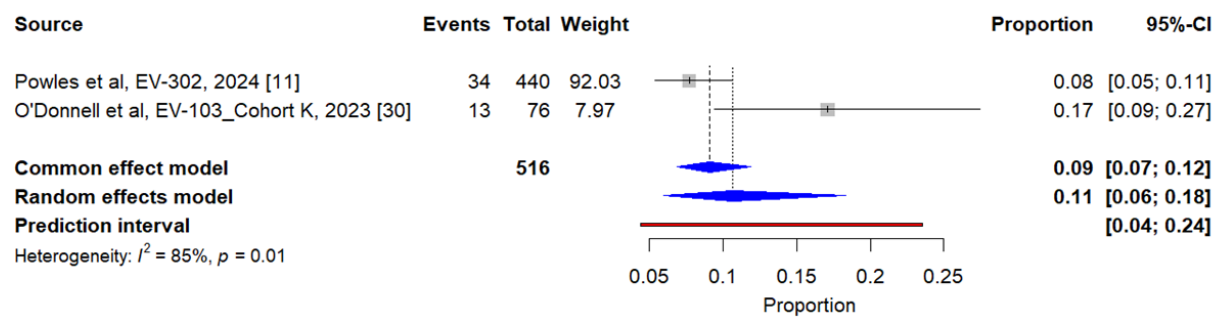
(H) Hyperglycemia (High-Grade)



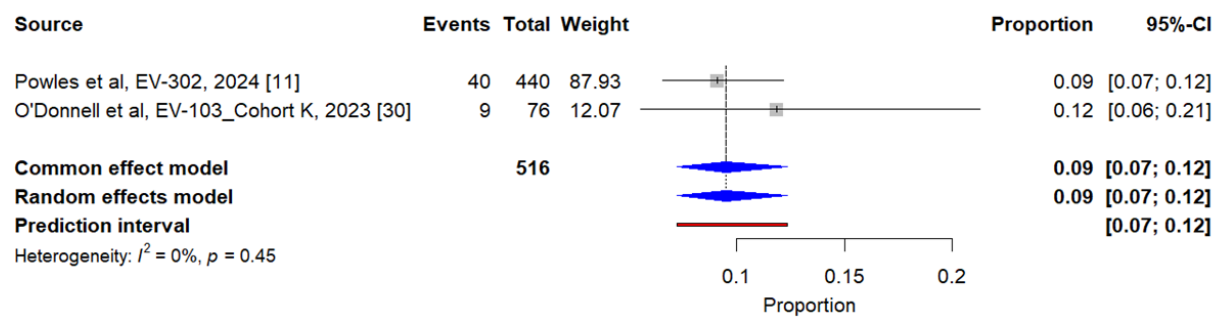
(I) Maculopapular rash (All-Grade)



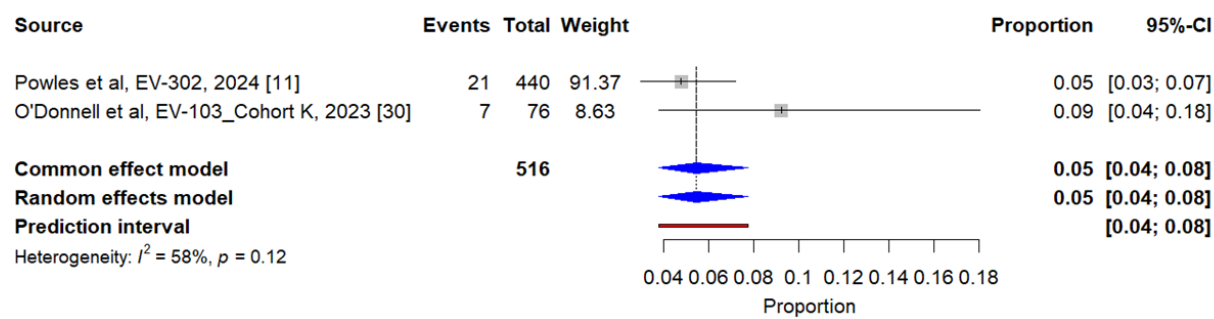
(J) Maculopapular rash (High-Grade)



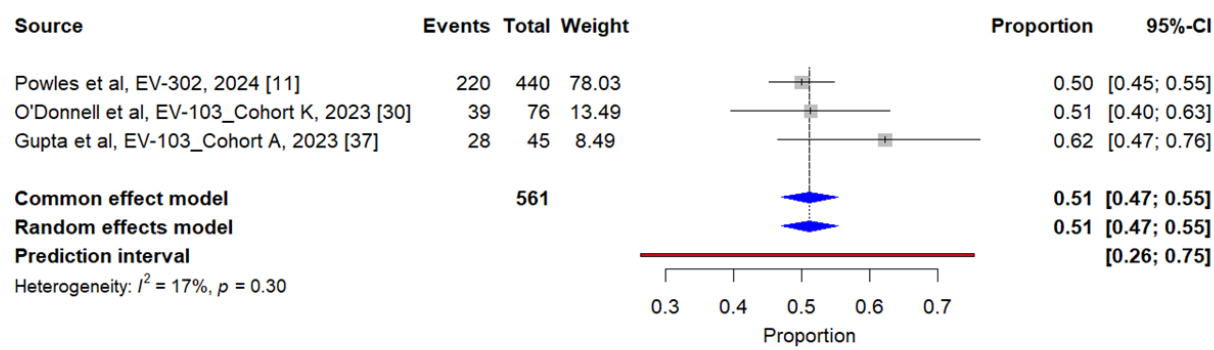
(K) Neutropenia (All-Grade)



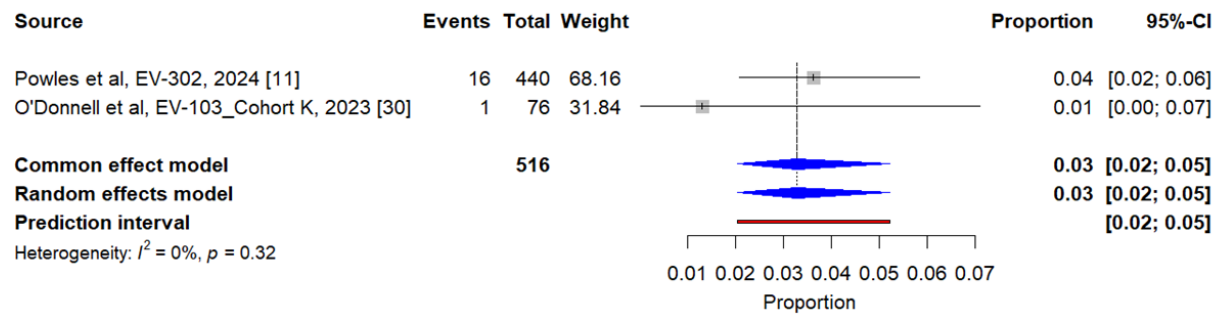
(L) Neutropenia (High-Grade)



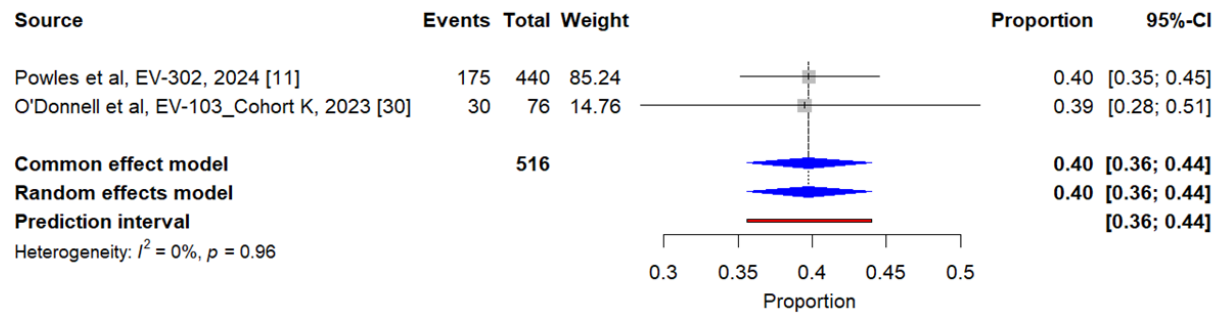
(M) Peripheral neuropathy (All-Grade)



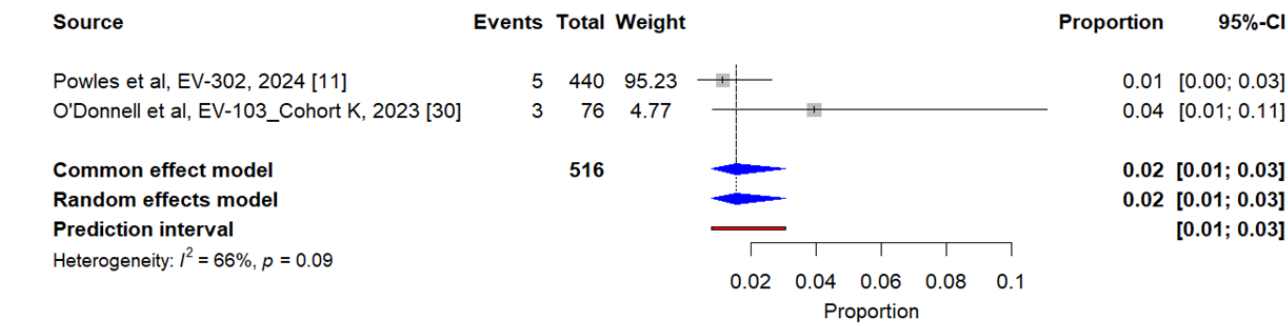
(N) Peripheral neuropathy (High-Grade)



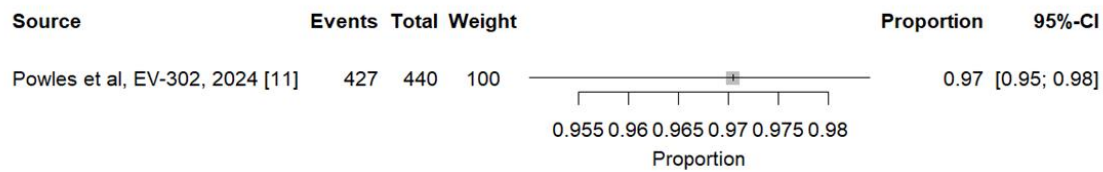
(O) Pruritus (All-Grade)



(P) Pruritus (High-Grade)

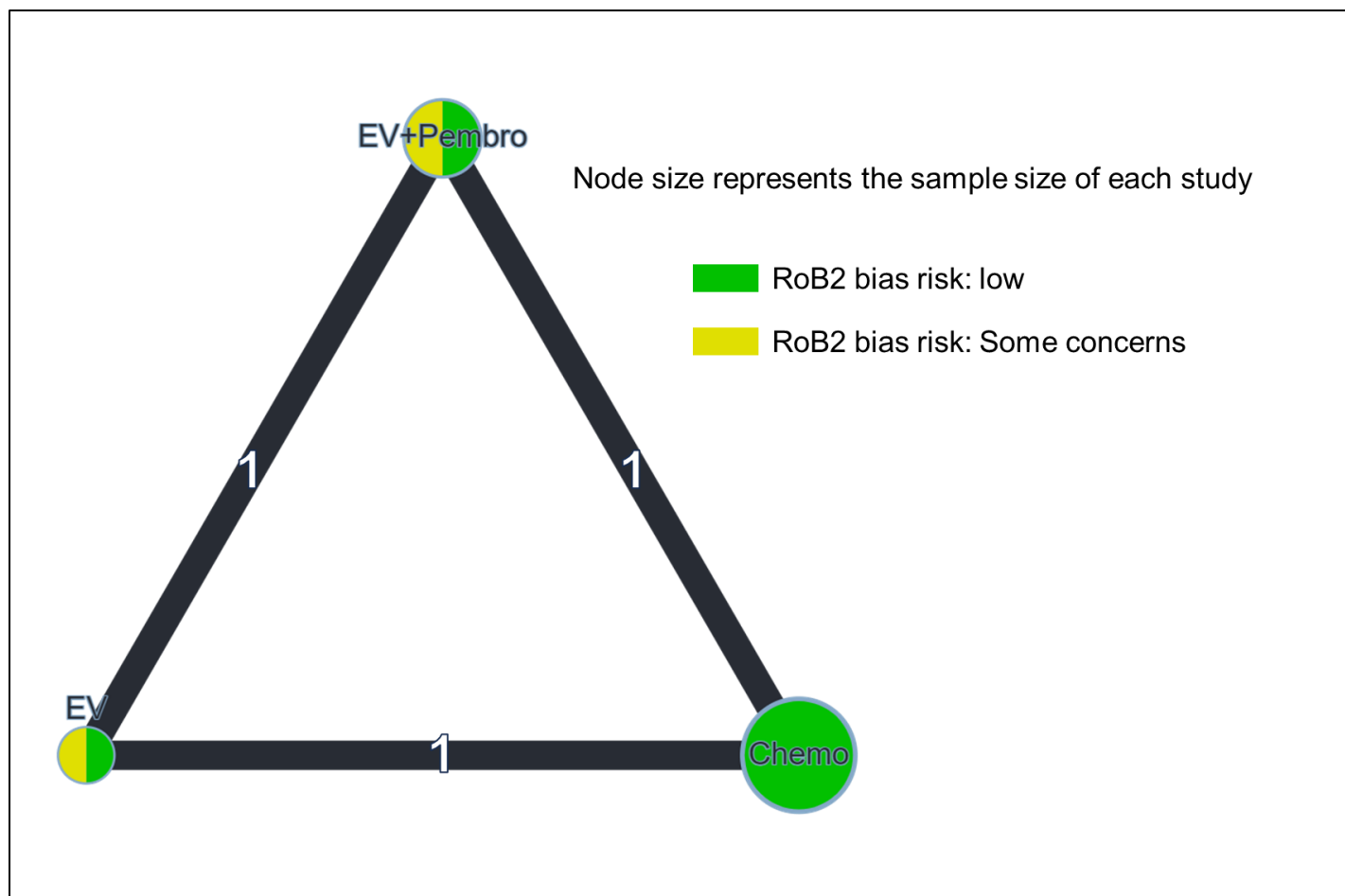


(Q) All-grade AEs (overall)





**eFigure 7.** Network diagram of studies Comparing EV, EV plus Pembrolizumab, and Chemotherapy in mUC



**eTable 2.** CINeMA assessment of evidence certainty for NMA across multiple outcomes (DCR, ORR, and 1-year survival)

(A) DCR

Comparison	No. of studies	Within-study bias	Reporting bias	Indirectness	Imprecision	Heterogeneity	Incoherence	Confidence rating
Chemo:EV	1	No concerns	No concerns	No concerns	No concerns	Major concerns	No concerns	Low
Chemo:EV+Pembro	1	No concerns	No concerns	No concerns	No concerns	Major concerns	No concerns	Low
EV:EV+Pembro	1	No concerns	No concerns	No concerns	Some concerns	Some concerns	No concerns	Moderate

(B) ORR

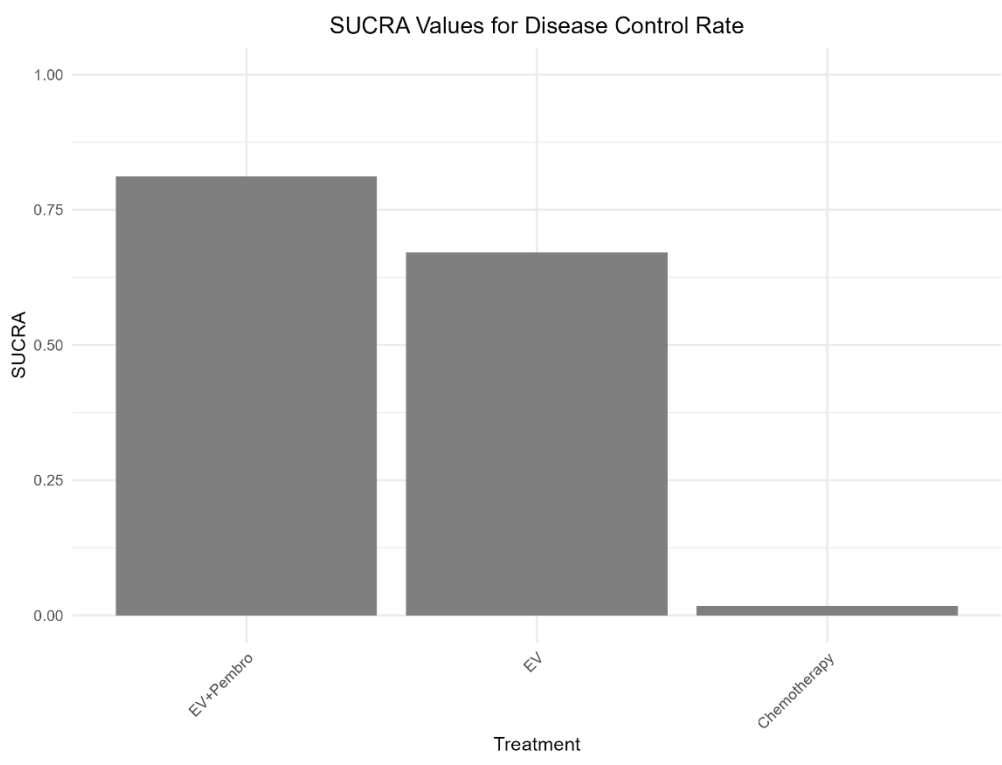
Comparison	No. of studies	Within-study bias	Reporting bias	Indirectness	Imprecision	Heterogeneity	Incoherence	Confidence rating
Chemo:EV	1	No concerns	No concerns	No concerns	Some concerns	Some concerns	No concerns	Moderate
Chemo:EV+Pembro	1	No concerns	No concerns	No concerns	No concerns	Major concerns	No concerns	Low
EV:EV+Pembro	1	No concerns	No concerns	No concerns	Some concerns	Some concerns	No concerns	Moderate

(C) 1-year survival

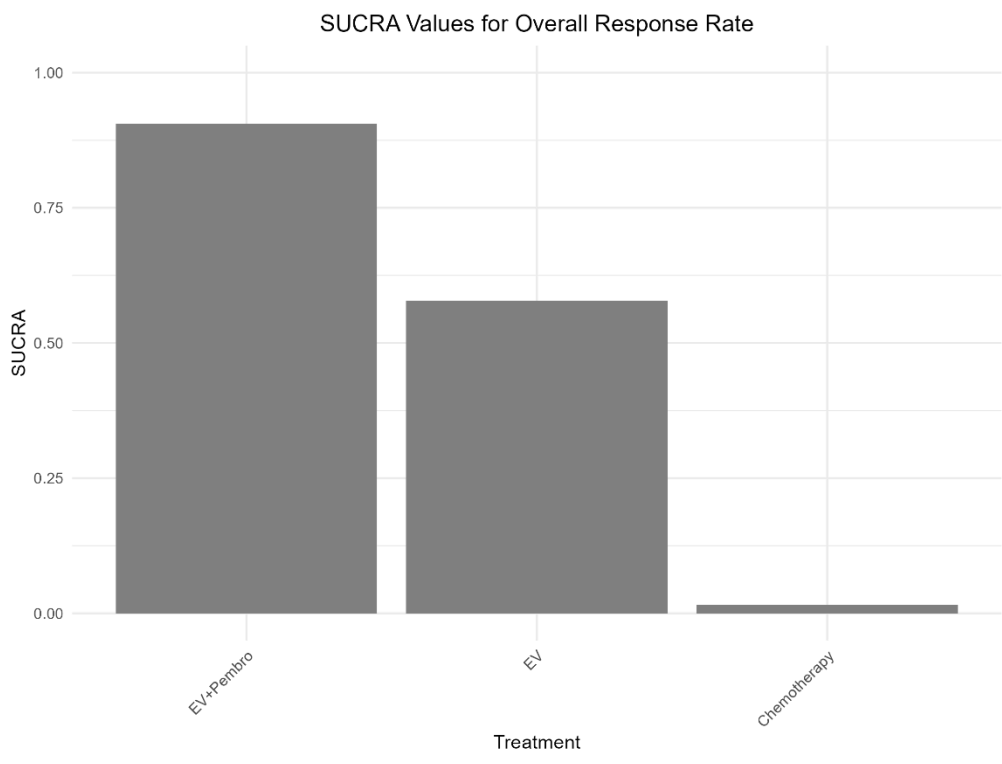
Comparison	No. of studies	Within-study bias	Reporting bias	Indirectness	Imprecision	Heterogeneity	Incoherence	Confidence rating
Chemo:EV	1	No concerns	No concerns	No concerns	No concerns	Major concerns	No concerns	Low
Chemo:EV+Pembro	1	No concerns	No concerns	No concerns	No concerns	Major concerns	No concerns	Low
EV:EV+Pembro	1	No concerns	No concerns	No concerns	Some concerns	Some concerns	No concerns	Moderate

**eFigure 8.** SUCRA rankings of treatment efficacy (A: DCR, B: ORR, C: 1-year survival rate) for mUC: comparison of EV plus Pembrolizumab, EV monotherapy, and Chemotherapy

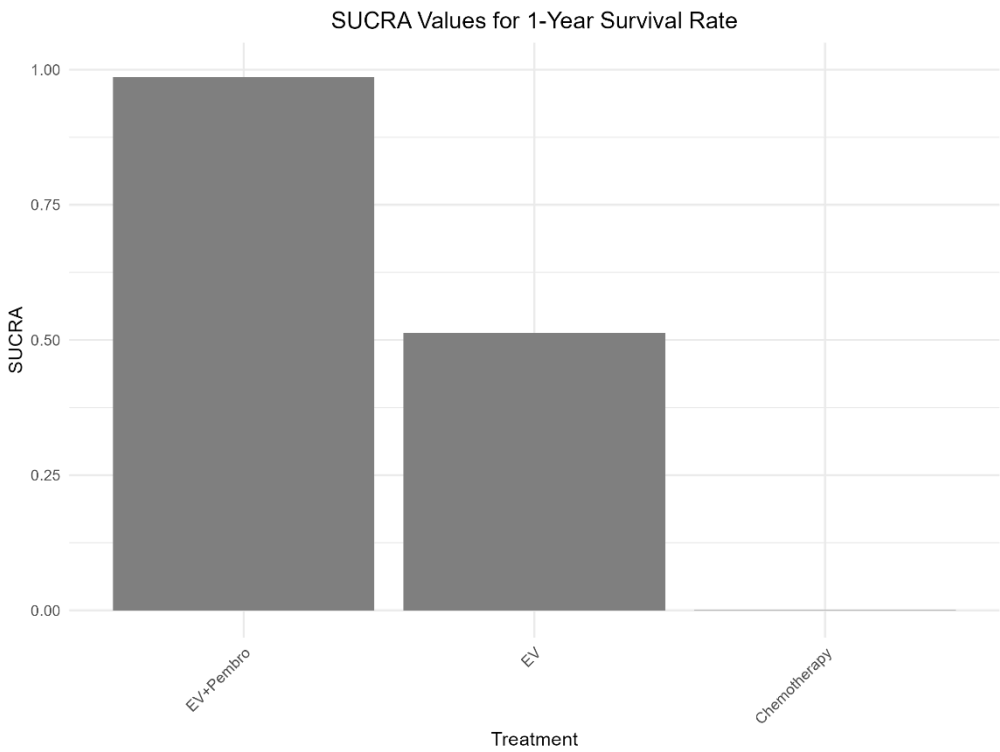
(A) DCR



(B) ORR



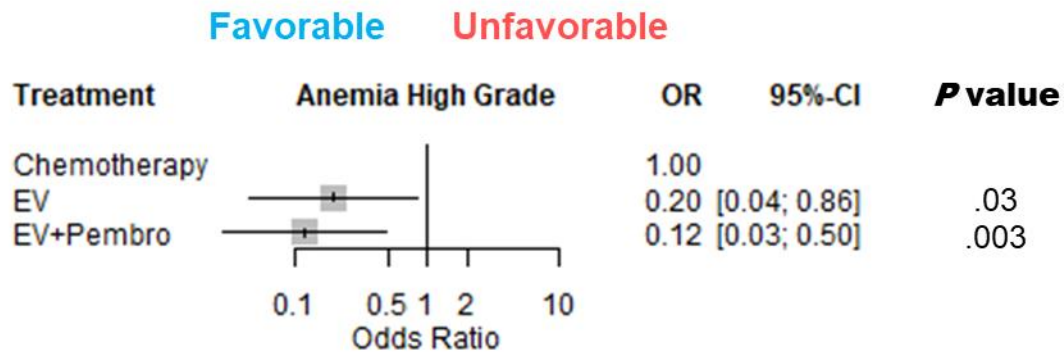
(C) 1-year survival rate



**eFigure 9.** Forest Plots of High-Grade AEs for mUC: Comparison of EV plus Pembrolizumab, EV monotherapy, and Chemotherapy

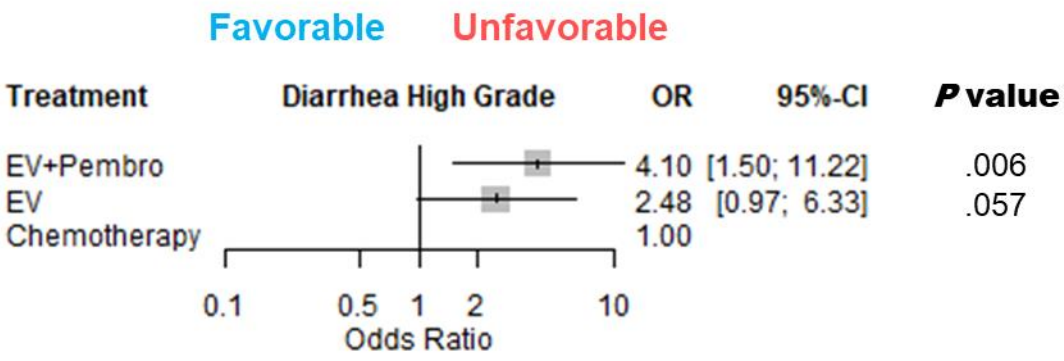
(A) Anemia

**Anemia (High-Grade): others vs ‘Chemotherapy’**



(B) Diarrhea

**Diarrhea (High-Grade): others vs ‘Chemotherapy’**



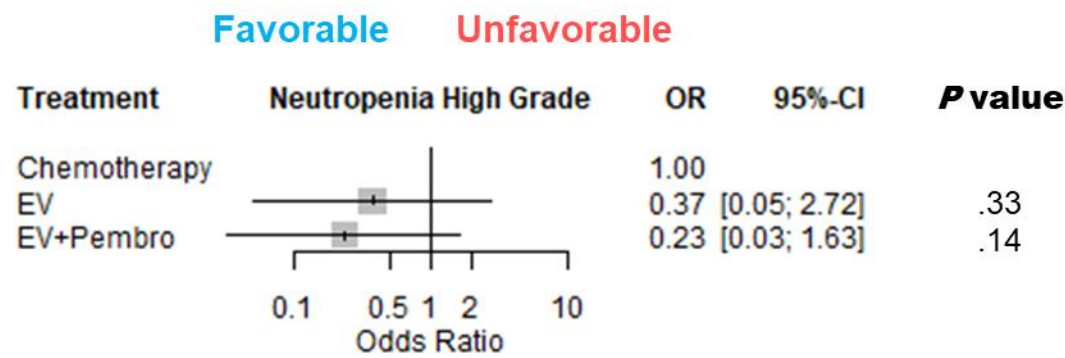
(C) Fatigue

Fatigue (High-Grade): others vs ‘Chemotherapy’

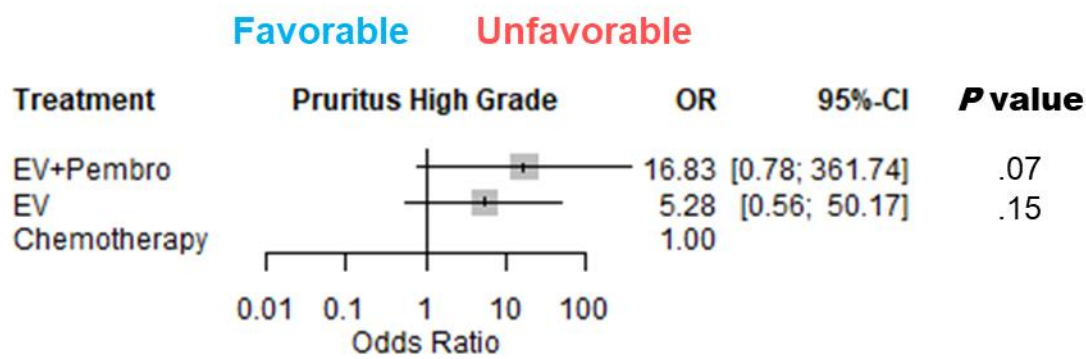


(D) Neutropenia

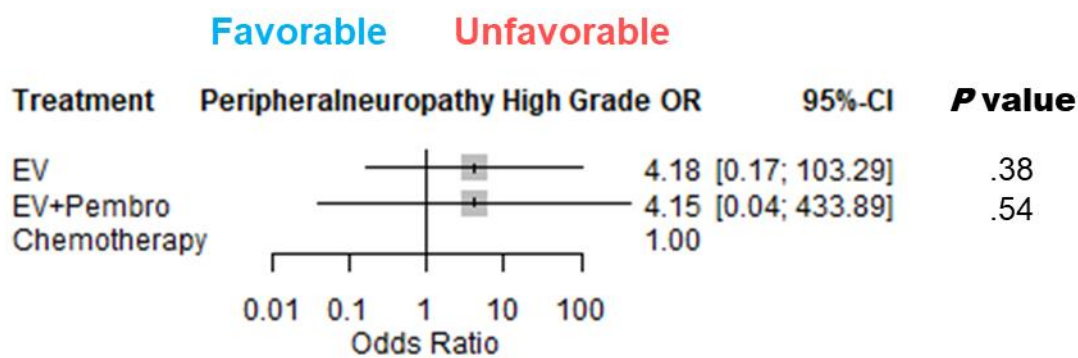
Neutropenia (High-Grade): others vs ‘Chemotherapy’



Pruritus (High-Grade): others vs ‘Chemotherapy’

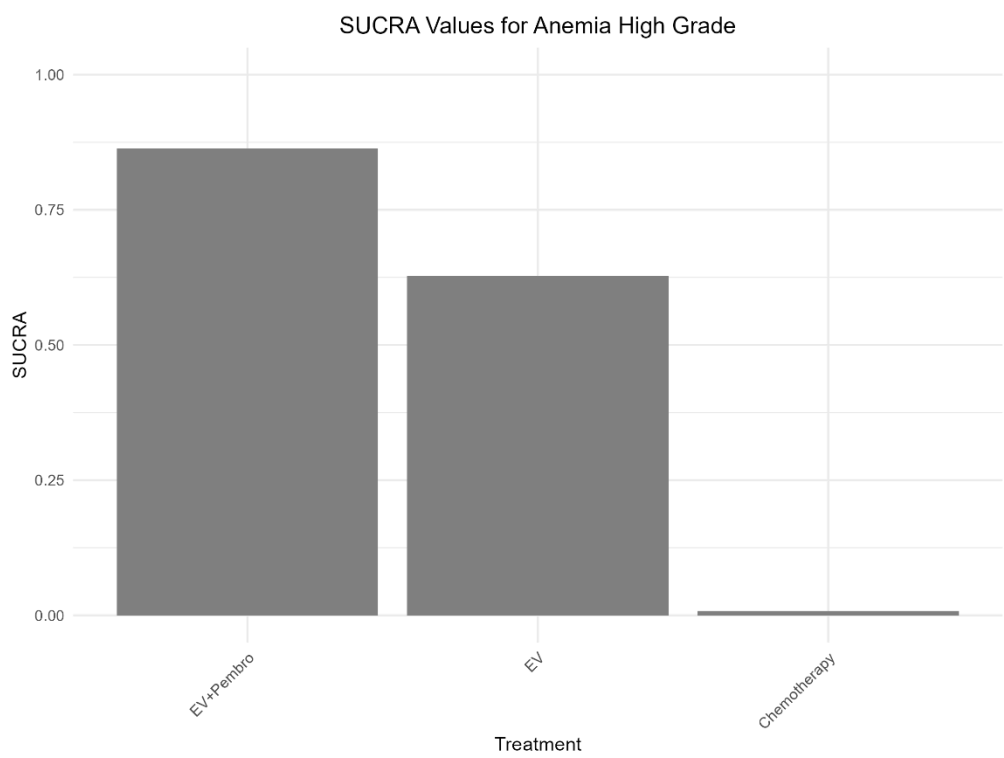


Peripheral neuropathy (High-Grade): others vs ‘Chemotherapy’

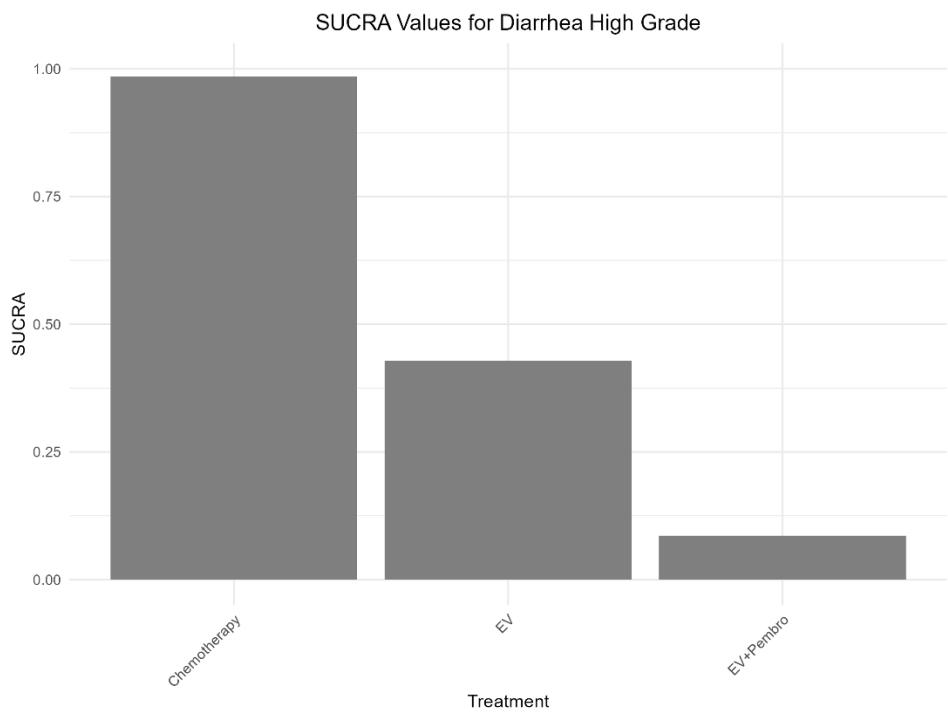


**eFigure 10.** SUCRA rankings of High-Grade AEs for mUC: comparison of EV plus Pembrolizumab, EV monotherapy, and Chemotherapy

(A) Anemia

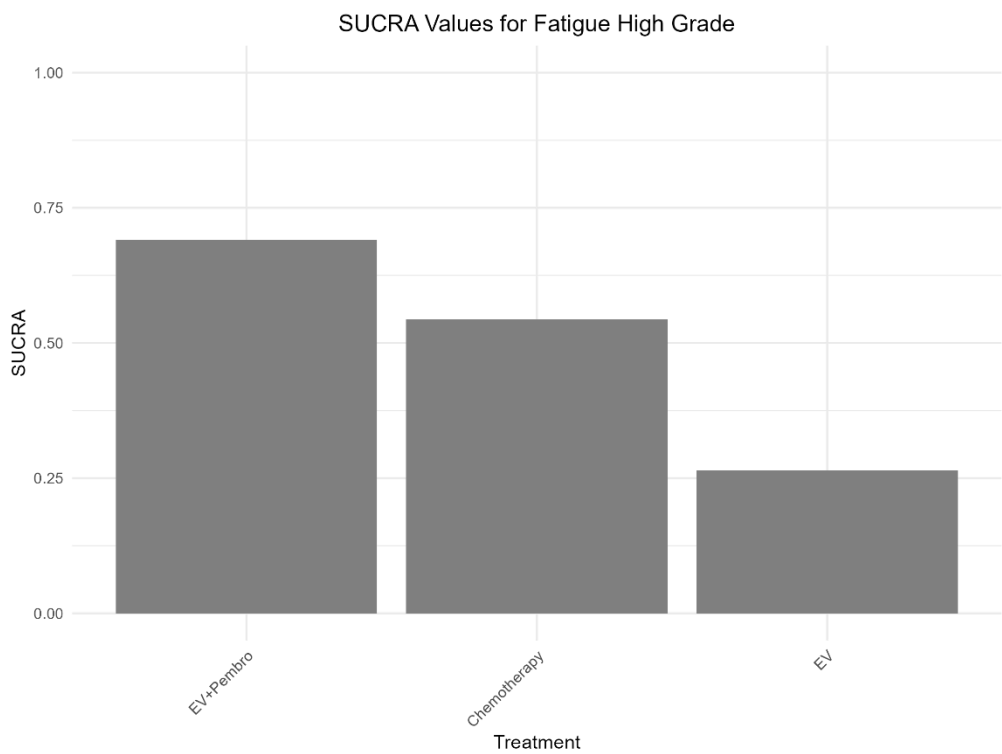


(B) Diarrhea

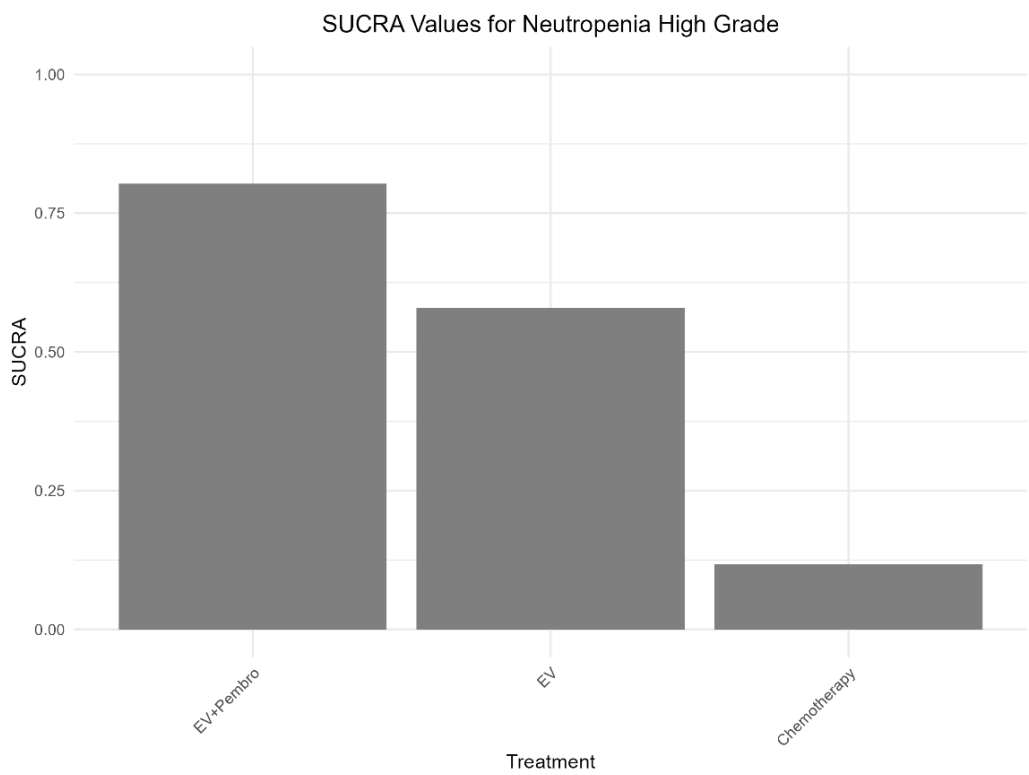




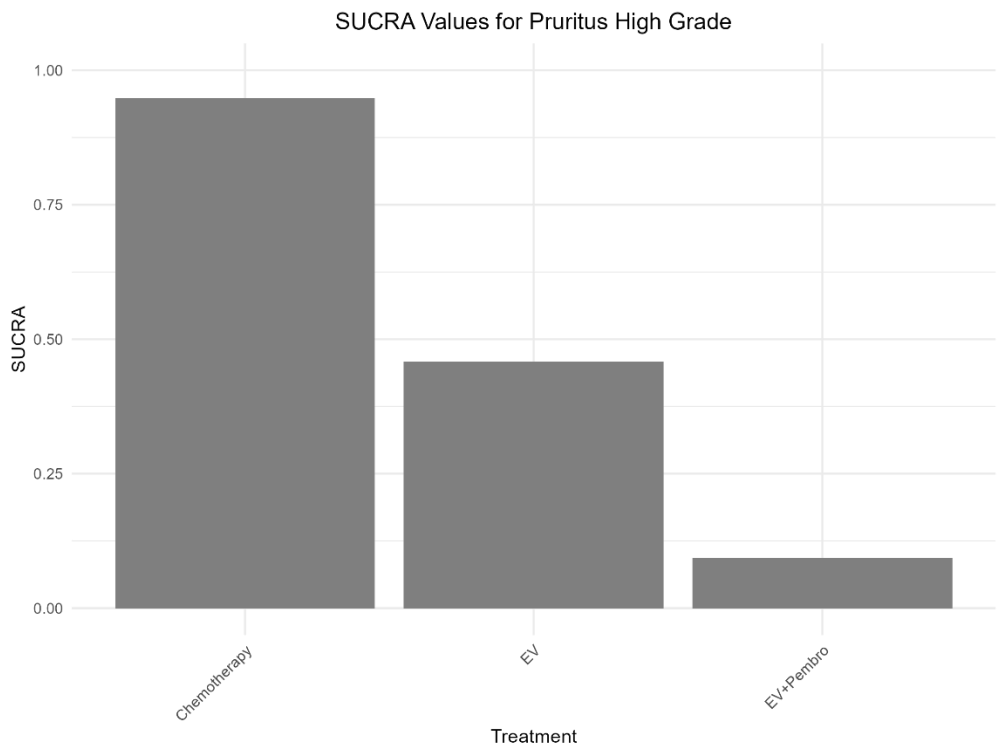
(C) Fatigue



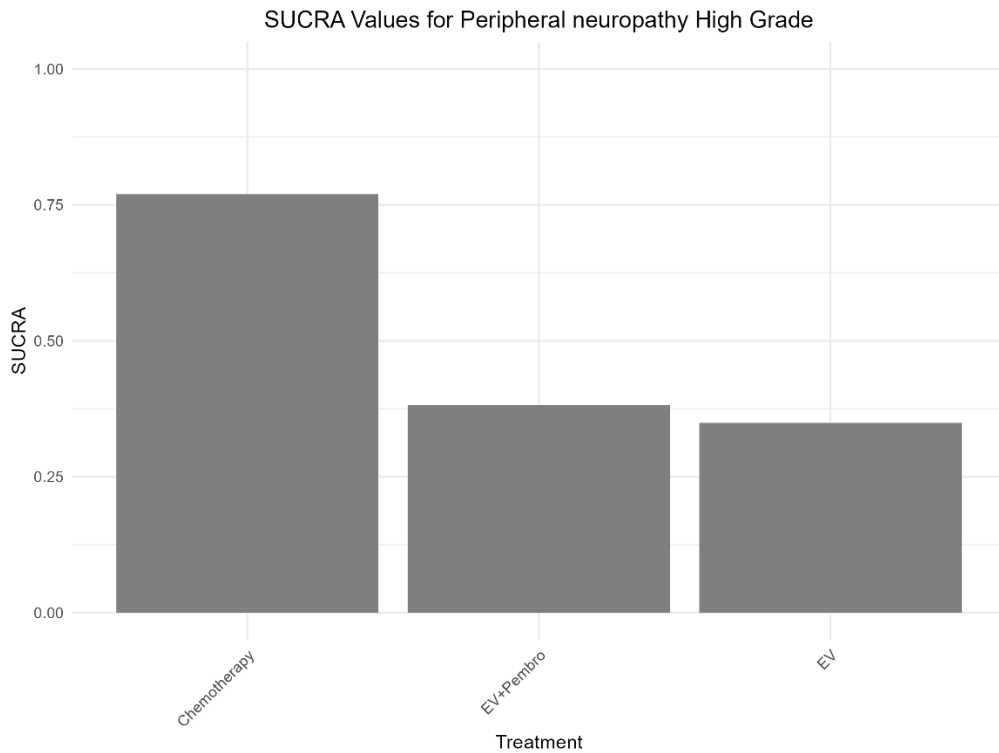
(D) Neutropenia



(E) Pruritus



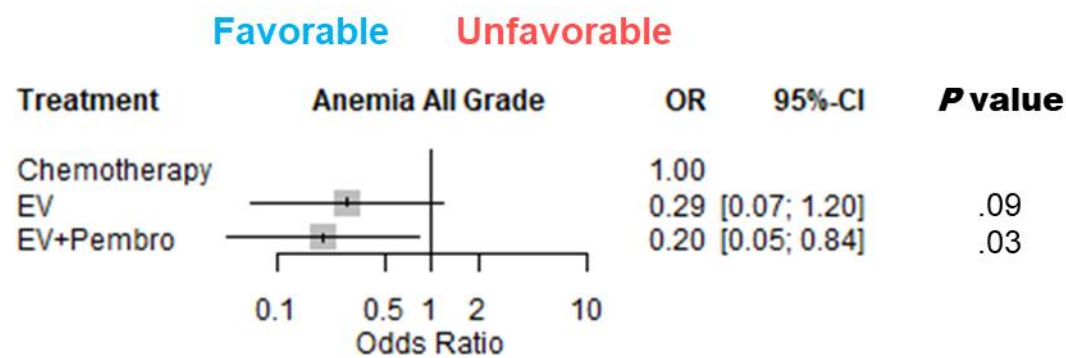
(F) Peripheral neuropathy



**eFigure 11.** Forest Plots of All-Grade AEs for mUC: Comparison of EV plus Pembrolizumab, EV monotherapy, and Chemotherapy

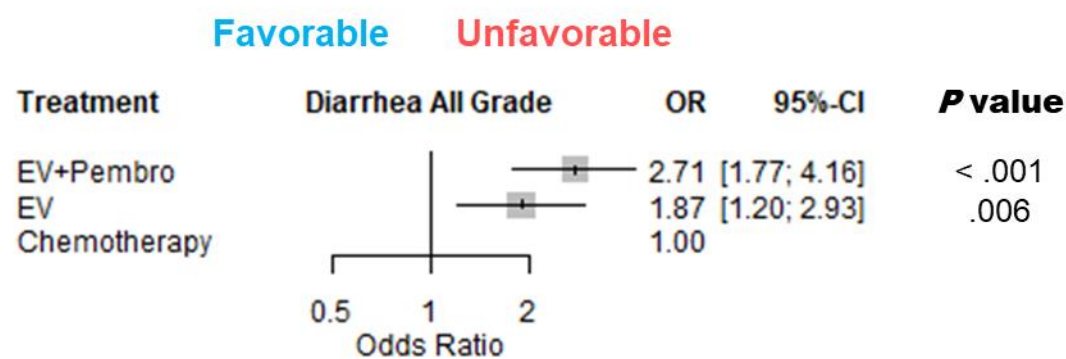
(A) Anemia

**Anemia (All-Grade): others vs ‘Chemotherapy’**



(B) Diarrhea

**Diarrhea (All-Grade): others vs ‘Chemotherapy’**



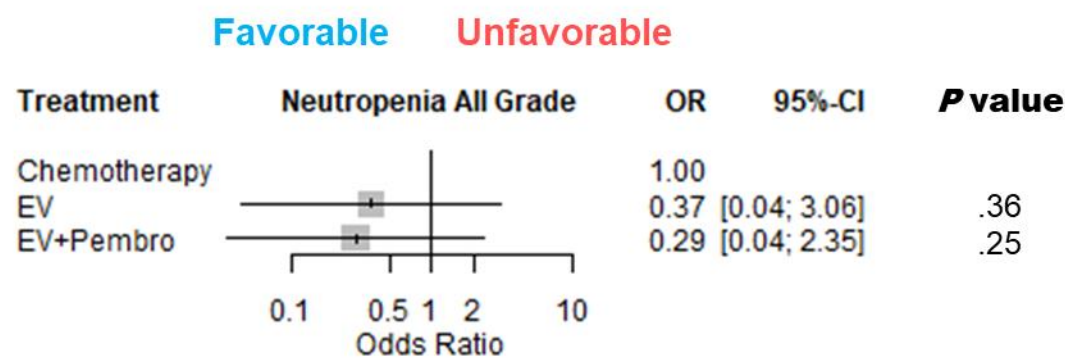
(C) Fatigue

Fatigue (All-Grade): others vs ‘Chemotherapy’

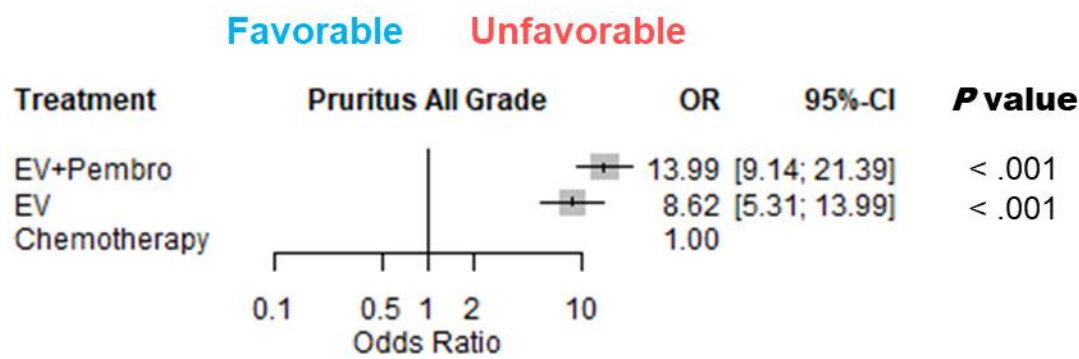


(D) Neutropenia

Neutropenia (All-Grade): others vs ‘Chemotherapy’



Pruritus (All-Grade): others vs ‘Chemotherapy’



Peripheral neuropathy (All-Grade): others vs ‘Chemotherapy’

