

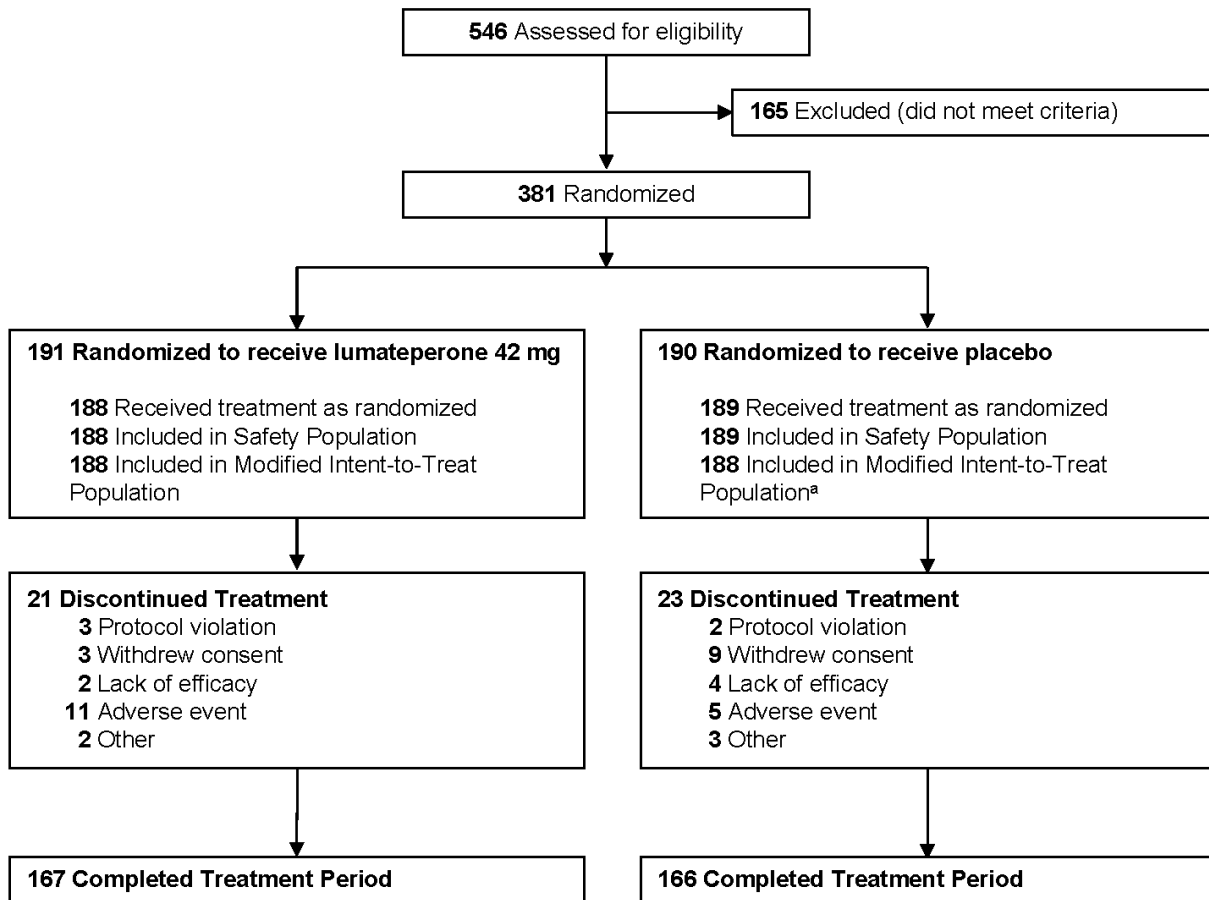
Data supplement for Calabrese et al., Efficacy and Safety of Lumateperone for Major Depressive Episodes Associated With Bipolar I or Bipolar II Disorder: A Phase 3 Randomized Placebo-Controlled Trial. *Am J Psychiatry* (doi: 10.1176/appi.ajp.2021.20091339)

Additional Inclusion and Exclusion Criteria

For inclusion, patients must have had a body mass index (BMI) of 19–35, inclusive, and be willing and able to comply with study requirements. Patients of childbearing potential were required to use highly effective birth control for at least 2 weeks prior to randomization through the end-of-study follow-up. A lifetime history of at least 1 bipolar manic or mixed episode (for bipolar I) or hypomanic episode (for bipolar II) were required for inclusion.

Patients meeting any of the following criteria were excluded from the study: significant risk for suicidal behavior defined as answering “yes” on items 4 or 5 (suicidal ideation) of the C-SSRS within 6 months prior to screening or at baseline, 1 or more suicide attempts within 2 years prior to screening, a score of ≥ 4 on item 10 (suicidal thoughts) on the MADRS, or who is considered an imminent danger to themselves or others; pregnant or breastfeeding; history within 12 months of screening of a psychiatric diagnosis other than bipolar disorder including schizophrenia, anxiety disorders, feeding or eating disorder, primary diagnosis of obsessive-compulsive disorder, personality disorder, and moderate or severe substance use disorder (excluding nicotine); hallucinations, delusions, or other psychotic symptomatology attributable to a DSM-5 diagnosis other than bipolar disorder; hospitalization for mania within 30 days of screening; electroconvulsive therapy, vagal nerve stimulation, or repetitive trans-cranial magnetic stimulation within the last 5 years or >1 course of electroconvulsive therapy; a rapid cyler, defined as ≥ 6 major depressive, manic, hypomanic, or mixed episodes in the previous year; history of treatment resistance, defined as a lifetime history of treatment resistance without remission to ≥ 2 treatments approved for bipolar depression; current or planned treatment with cognitive or behavioral therapy or systematic psychotherapy; lifetime history of epilepsy, seizure, or convulsion; indication of drug or alcohol abuse at screening; prior participation in a study with lumateperone or exposure to any investigational product within 3 months of baseline; recent use of cytochrome P450 3A4 inhibitor or inducers, anxiolytic medications, drugs with psychotropic properties or significant central nervous system effects; clinically significant abnormalities in laboratory values or clinical findings at screening; recent history of cardiovascular, endocrine, hepatic, renal, pulmonary, gastrointestinal, neurological, metabolic, pheochromocytoma or malignancy that may be detrimental to the patient if participating in the study; or history of or current evidence of HIV, hepatitis B, or hepatitis C infection.

FIGURE S1. Patient disposition (CONSORT diagram)



^a One patient who received placebo treatment did not have a valid pre-dose baseline assessment and at least one valid postbaseline assessment with the Montgomery-Åsberg Depression Rating Scale and was not included in the modified intent-to-treat population.