

Table 1. Overview of TEAEs and most common TEAEs (occurring in $\geq 4\%$ of patients in any subgroup) by baseline seizure type (Safety Analysis Set [N=1703])

	POS only (n=545)	Generalized only^a (n=440)	Myoclonic (n=328)	Absence (n=301)
TEAEs, n (%)	231 (42.4)	185 (42.0)	117 (35.7)	154 (51.2)
Serious TEAEs, n (%)	25 (4.6)	19 (4.3)	11 (3.4)	10 (3.3)
Deaths	7 (1.3)	3 (0.7)	3 (0.9)	0 (0.0)
TEAEs leading to perampanel discontinuation, n (%)	133 (24.4)	108 (24.5)	65 (19.8)	85 (28.2)
Most common ($\geq 4\%$ of patients) TEAEs^b, n (%)				
Dizziness	59 (10.8)	28 (6.4)	17 (5.2)	23 (7.6)
Aggression	22 (4.0)	35 (8.0)	15 (4.6)	24 (8.0)
Fatigue	22 (4.0)	13 (3.0)	11 (3.4)	12 (4.0)
Irritability	25 (4.6)	13 (3.0)	9 (2.7)	12 (4.0)
Somnolence	19 (3.5)	18 (4.1)	13 (4.0)	10 (3.3)
Depression	14 (2.6)	10 (2.3)	5 (1.5)	12 (4.0)

Seizure types were assigned by the investigator without independent review or verification

For each row category, a patient with ≥ 2 TEAEs in that category is counted only once; a

TEAE is defined as an adverse event that 1) emerges during treatment, having been absent at pretreatment or; 2) re-emerges during perampanel treatment, having been present at

pretreatment, but ceased prior to treatment initiation

^aIncludes generalized tonic-clonic seizures

^bPreferred term based on MedDRA version 21.1

MedDRA, Medical Dictionary for Regulatory Activities; POS, partial-onset seizures; TEAE, treatment-emergent adverse event