



Supplementary Fig. 1. Study design of LUCENT-1 and LUCENT-2. Responders to induction mirikizumab therapy at week 12 of LUCENT-1, defined as achieving ≥ 2 -point and $\geq 30\%$ decrease in the modified Mayo score from baseline with rectal bleeding score=0 or 1, or ≥ 1 -point decrease from baseline, were randomized to receive maintenance mirikizumab therapy or placebo in LUCENT-2. Non-responders to induction mirikizumab therapy in LUCENT-1 received additional induction mirikizumab therapy for the first 12 weeks of LUCENT-2, followed by maintenance mirikizumab therapy to week 40 in patients who achieved delayed clinical response at LUCENT-2 week 12. All patients who were expected to receive clinical benefit from ongoing access to mirikizumab (by investigator opinion) could roll over into the long-term extension study LUCENT-3. Blue boxes indicate the treatment arms used for efficacy and safety analyses in this manuscript. IV, intravenous; Miri, mirikizumab; NR, non-responder; PBO, placebo; Q4W, every 4 weeks; R, responder; SC, subcutaneous; W, week.