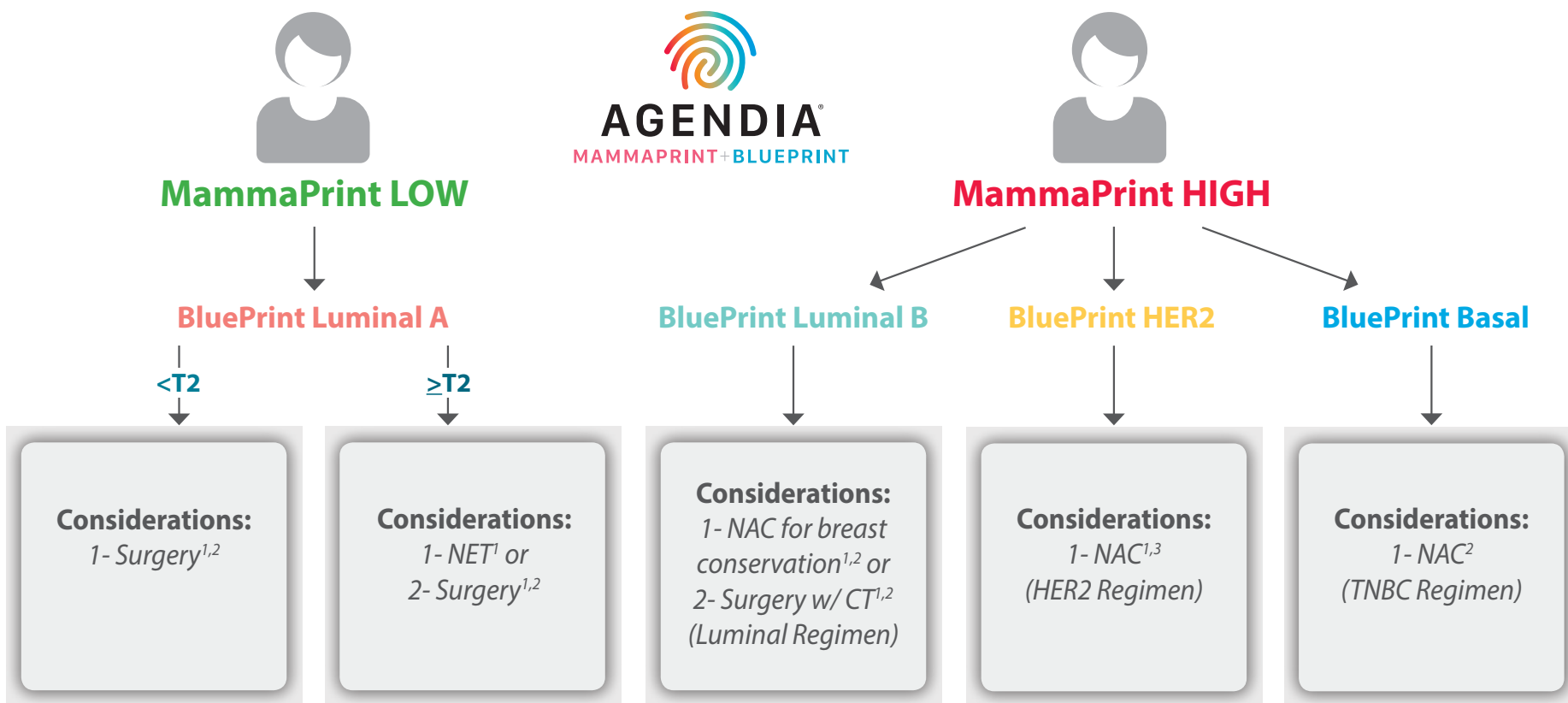


Get Rapid Genomic Profiling Results with MammaPrint + BluePrint

A comprehensive 150 gene profile for timely, informed treatment planning

Pre-operative Treatment Algorithm Utilizing Agendia Results

For ER+ Early Stage Breast Cancer Patients



Abbreviations: NET- Neoadjuvant Endocrine Therapy; NAC= Neoadjuvant Chemotherapy; CT= Chemotherapy; TNBC= Triple Negative Breast Cancer

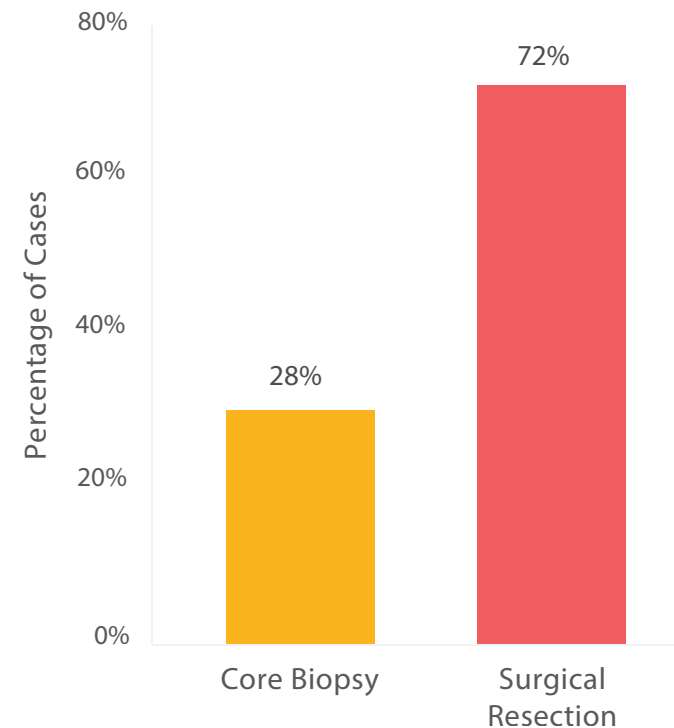
Testing on core biopsies is established standard of care for diagnosis and treatment planning

- Standard pre-operative treatment planning relies on IHC/FISH results from core biopsy
- Pathology data show that concordance between ER/PR status is ~90% (concordance is lower for HER2)¹

Use core biopsy genomic testing for pre- and post-operative treatment planning

- Analytical validity studies demonstrate a 95% concordance rate between MammaPrint results within surgical resection material and similarly a 100% concordance rate for BluePrint results^{2,3}
- MammaPrint and BluePrint data has been collected from core biopsies across several prospective trials.⁴⁻⁶ In fact, treatment selection for the ISPY-2 clinical trial is based upon results generated from core biopsy tissue
- Agendia has a >95% success rate performing MammaPrint and BluePrint from a core biopsy⁷
- Agendia provides rapid results from a core biopsy⁷

Already up to 28% of samples from core biopsy, carried out at Agendia laboratory⁸



¹ You, et al. J Breast Cancer. 2017 Sep; 20(3): 297–303; ² Delahaye, et al. Personalized Medicine. (2013) 10(8), 801–811; ³ Mittemperger, et al. Transl Oncol. 2020 Apr; 13(4): 100756; ⁴ Whitworth, et al. Ann Surg Oncol (2017) 24: 669–675; ⁵ Groenendijk, et al. npj Breast Cancer 5, 15 (2019); ⁶ van 't Veer L, et al. 30th EORTC-NCI-AACR Symposium, November 13-16, 2018; ⁷ Data on file; ⁸ Data on file, all (global) samples between 2017- March 2020.