CONTENT

EndoPredict®
One Test – Three Clinical Answers

Clear, Individual and Fast Results

EndoPredict is a prognostic and predictive second generation gene expression test to determine the risk of distant recurrence up to 15 years and the 10 year absolute chemotherapy benefit for patients with ER+/ HER2- primary breast cancer. EndoPredict is the only test that answers three important clinical questions.

EndoPredict provides the **individual** risk of distant recurrence at **10 years**

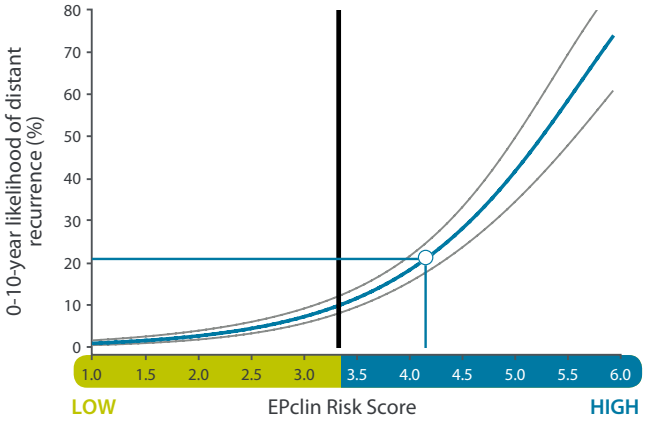
1

Can chemotherapy be avoided?

(Risk at 10 years[1])

LIKELIHOOD OF DISTANT RECURRENCE WITHIN YEARS 0-10

EndoPredict provides the risk of distant recurrence at 10 years



LIKELIHOOD OF DISTANT RECURRENCE WITHIN 10 YEARS
21%

EndoPredict indicates the patient's risk of recurrence within years 0-10 after diagnosis.[1]
Validated in four prospective-retrospective studies with more than 3,200 patients providing level 1 evidence[1,2,3,4]

EndoPredict predicts **individual** chemotherapy benefit at **10 years**

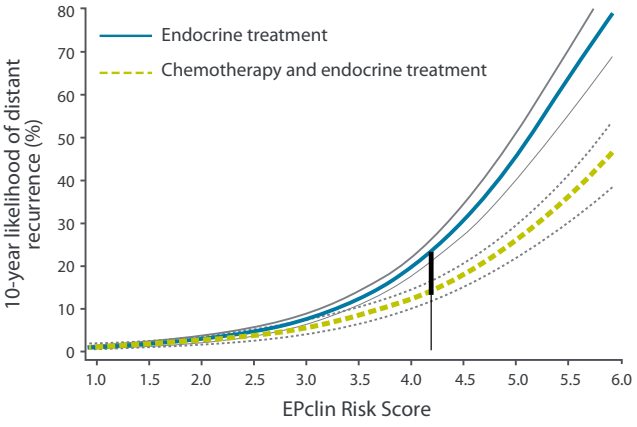
2

What is the absolute benefit from chemotherapy?

(Chemotherapy benefit[5])

ABSOLUTE CHEMOTHERAPY BENEFIT AT 10 YEARS

5 years endocrine therapy alone versus chemotherapy plus 5 years endocrine therapy



ABSOLUTE BENEFIT OF CHEMOTHERAPY AT 10 YEARS
9%

EndoPredict provides an estimate of the patient's absolute benefit of chemotherapy in 10 years.[5]
As shown in a study with 3,746 patients with ER+, HER2- breast cancer and with current (taxane-anthracycline containing) treatment regimens.

EndoPredict is the only prognostic test that provides **individual** recurrence risk up to **15 years**

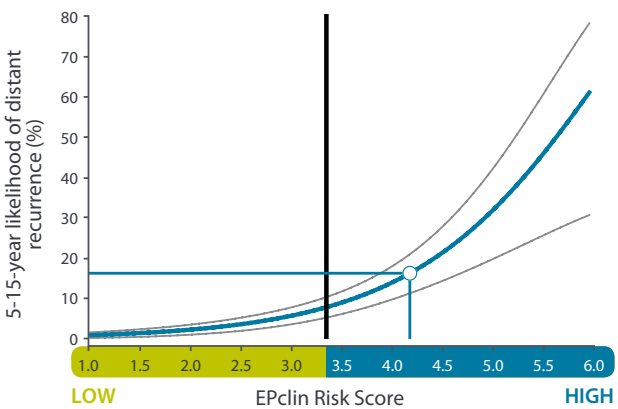
3

Can endocrine therapy be stopped after 5 years?

(Risk between 5 and 15 years[6])

LIKELIHOOD OF LATE DISTANT RECURRENCE WITHIN YEARS 5-15

For patients with no recurrence after 5 years of endocrine therapy alone



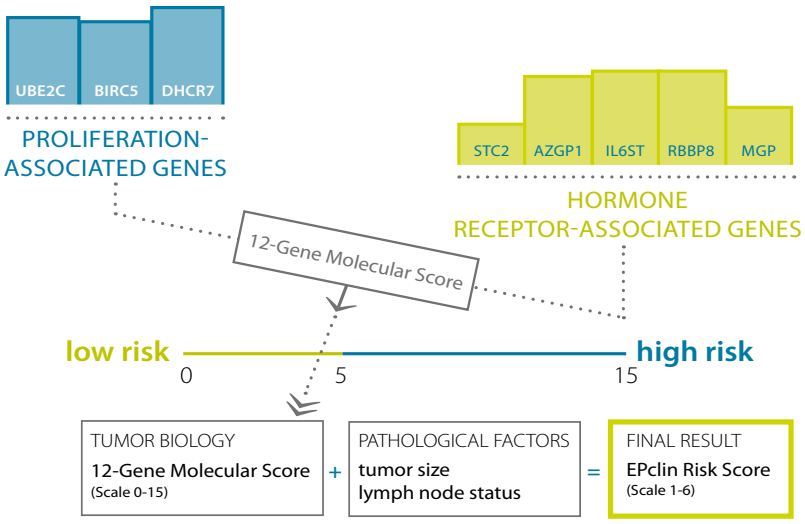
LIKELIHOOD OF DISTANT RECURRENCE WITHIN YEARS 5-15
16%

EndoPredict provides the patient's recurrence risk up to 15 years.[6] Validated in 1,386 ER+, HER2- node negative and node positive patients.

EndoPredict Combines Gene Expression and Clinical-Pathological Factors

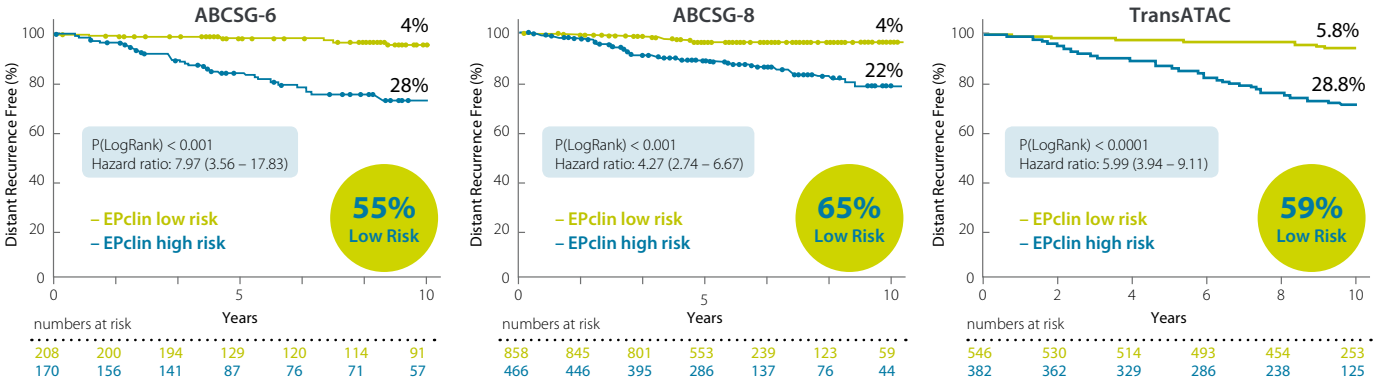
EndoPredict measures the activity of **eight genes** (proliferation-associated genes and hormone receptor-related genes for accurate assessment of early and late recurrence risk).[1,7] These genes are compared against three normalization and one control gene and the **12-Gene Molecular Score** is calculated.

The final EndoPredict result **(EPclin Risk Score)** is calculated combining the Molecular Score with **tumor size and lymph node status**. This makes EndoPredict a second generation gene expression test and a more powerful predictor of prognosis.



Second generation gene expression test

EndoPredict Consistently Identifies a Large Group of Low Risk Patients that Can Avoid Chemotherapy



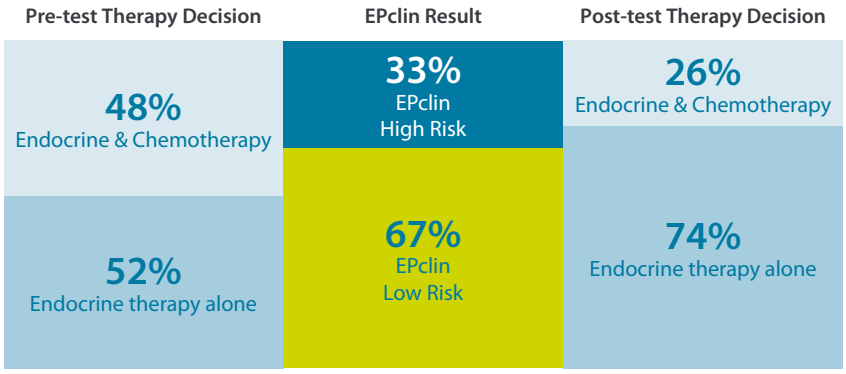
Analysis of ER+, HER2–, N+ and N0 patients from ABCSG-6, ABCSG-8 and TransATAC[1,3]

EndoPredict Leads to Substantial Reduction of Chemotherapy

Decision impact studies documented how EndoPredict results affect the treatment decision in clinical practice.

In the ADENDOM Study EndoPredict changed therapy decision in 35.8% of cases. EndoPredict led to a 20.9% net reduction of chemotherapy.

With EndoPredict more patients can safely avoid chemotherapy.



Decision Impact Study ADENDOM[8]

REFERENCES: **1.** Filipits M. et al.: Clin. Cancer Res. 2011, **2.** Martin M. et al.: BCR 2014, **3.** Buus et al.: J Natl Cancer Inst. 2016, **4.** Sestak I. et al.: JAMA Oncol. 2018, **5.** Sestak I. et al.: Breast Cancer Res Treat. 2019, **6.** Filipits M. et al.: Clin Cancer Res. 2019, **7.** Dubsky P. et al. BJC 2013, **8.** Penault-Llorca F. et al.: The Breast 2019

myriad®
WHEN DECISIONS MATTER

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MYRIAD myChoice® CDx PLUS

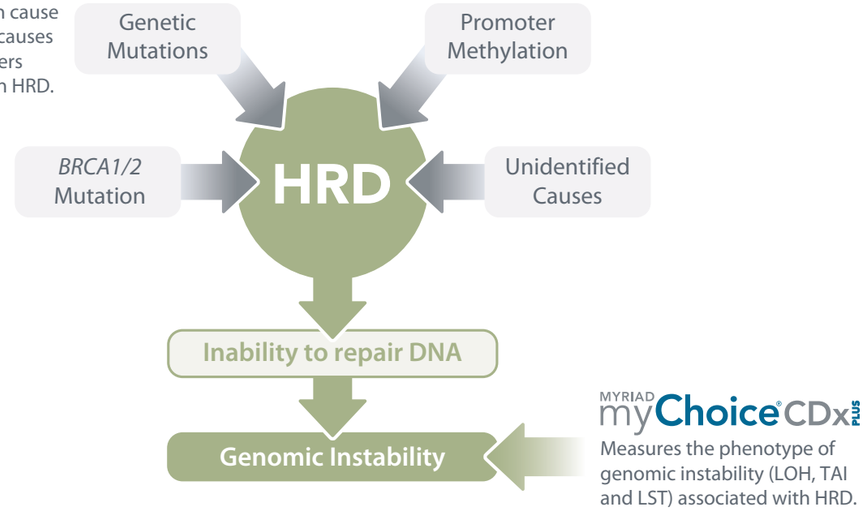
The most comprehensive HRD tumor test to guide PARP inhibitor treatment decisions

myriad®
WHEN DECISIONS MATTER

Not for distribution in the US.

There are limitations to determining homologous recombination deficiency (HRD) status by assessing each cause[1,2]

Challenge: testing each cause is limited, as unknown causes will be missed, and others may not always result in HRD.



MYRIAD myChoice® CDx PLUS
Measures the phenotype of genomic instability (LOH, TAI and LST) associated with HRD.

myChoice® CDx PLUS is a tumor test that determines HRD status by measuring *BRCA1* and *BRCA2* mutation status and Genomic Instability Status through proprietary methods

1 ***BRCA1 & BRCA2* Status** | Sequence Variants + Large Rearrangements

- Detection and classification of sequence variants and large rearrangements
- Identification of somatic and germline variants present in the tumor

2 **Genomic Instability Status** | LOH (Loss of Heterozygosity) + TAI (Telomeric Allelic Imbalance) + LST (Large-Scale State Transitions)

- Comprehensive assessment of LOH, TAI and LST across the entire genome

myChoice® CDx PLUS provides mutation information for an additional 13 HRR genes

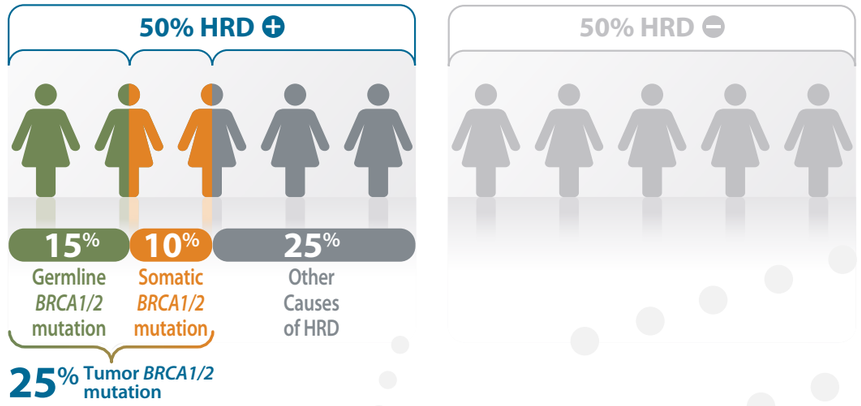
+ **Additional HRR Status** | ***ATM, BARD1, BRIP1, CDK12, CHEK1, CHEK2, FANCL, PALB2, PPP2R2A, RAD51B, RAD51C, RAD51D,* and *RAD54L*.**

- Detection and classification of sequence variants and large rearrangements
- Identification of somatic and germline variants present in the tumor

Results from these genes are provided for informational purposes only and have not been clinically validated for use with Poly-ADP Ribose Polymerase (PARP) inhibitors. Follow-up germline testing may be appropriate for mutations in genes associated with hereditary cancer risk.

myChoice® CDx PLUS identifies more ovarian cancer tumors with HRD than other testing methods[3,4,5]

All High-Grade Serous Ovarian Cancer

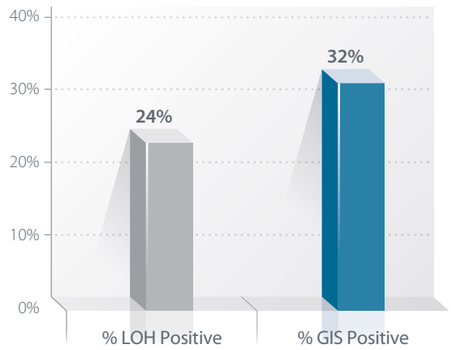


myChoice® CDx PLUS testing identifies 2x as many patients as tumor BRCA testing and 3.5x as many as germline BRCA testing.

Other methods of evaluating HRD are not equivalent to myChoice® CDx PLUS[6]

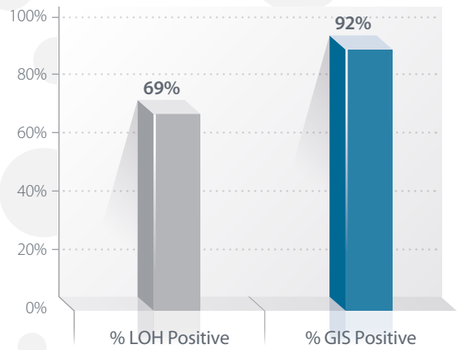
A study on 3,278 ovarian tumors compares Myriad's proprietary Genomic Instability Status (GIS) and %LOH.[6]

All Tumors (n=3,278)[7]



myChoice® Genomic Instability Status identifies ~34% more tumors with HRD than %LOH alone.

Tumor BRCA Mutations (n=278)[7]



myChoice® Genomic Instability Status identifies 92% of BRCA mutated samples compared to 69% identified by %LOH.

MYRIAD myChoice® CDx PLUS

Prospectively Validated[8,9,10,11]

Trusted assay for multiple clinical trials by pharmaceutical partners

Clinically Actionable Results

Identifies patients eligible for treatment with PARP inhibitors

International Guidelines

Include recommendations for myChoice® testing for ovarian cancer[12,13]

Fast TAT

myChoice® CDx PLUS delivers accurate results in approx. 14 working days after sample receipt

myChoice® CDx PLUS can inform treatment decisions

myChoice® CDx PLUS Intended Use

Myriad myChoice® CDx PLUS is used to detect Homologous Recombination Deficiency (HRD) by assessing the Genomic Instability Status and the Tumor Mutation *BRCA1/BRCA2* Status in genomic DNA extracted from tumor specimens. Results are used as an aid to determine the eligibility of patients with ovarian cancer for treatment with certain Poly-ADP Ribose Polymerase (PARP) inhibitors in accordance with the approved therapeutic product labeling.

REFERENCES:
1. Watkins et al.: Breast Ca Res 2014, **2.** Norquist et al.: JAMA Oncol 2016, **3.** Miller et al.: Ann Oncol 2020, **4.** Tew et al.: JCO 2020, **5.** Moore et al.: NEJM 2018, **6.** Mills et al.: SGO Annual Meeting 2020 on Women's Cancer (Abstract), **7.** Adapted from Mills et al.: SGO Annual Meeting 2020 on Women's Cancer (Abstract), **8.** Mirza et al.: NEJM 2016, **9.** Moore et al.: NEJM 2018, **10.** Ray-Coquard et al.: NEJM 2019, **11.** Gonzales-Martin et al.: NEJM 2019 , **12.** Miller et al. Ann. Oncol.: 2020 , **13.** Tew et al.: JCO 2020

myriad® WHEN DECISIONS MATTER

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