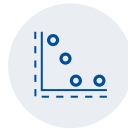


Tumor informed ctDNA analysis to predict adjuvant chemotherapy benefit and improve long term survival in resectable CRC



A continuation of the data published Jan 2023 in Nature Medicine analyzing >2,240 patients with stage II-IV CRC patients from GALAXY



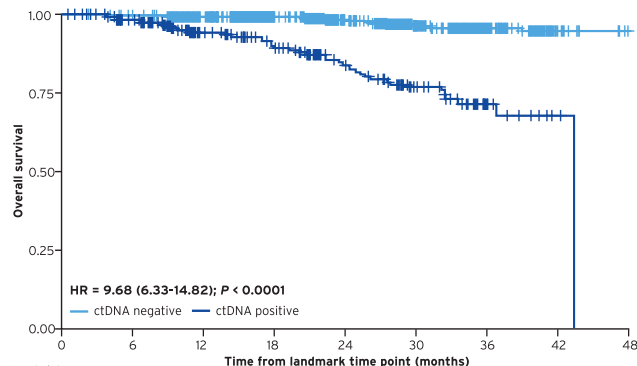
Includes 36M-DFS and 24M-OS data demonstrating the importance of post-surgical ctDNA analysis and its association with long term survival using Signatera™ MRD assay

Key findings

- **Signatera™ MRD status is predictive of overall survival:** Signatera™-positivity in the post-op MRD window was found to be significantly associated with worse OS compared to Signatera™-negative patients
- **Signatera™ MRD status is predictive of an overall survival benefit from adjuvant chemotherapy:** High-risk stage II and stage III-IV patients who were Signatera™-positive after surgery and received ACT demonstrated superior OS
- **Signatera™ status remains the most significant predictor of recurrence:** Signatera™-positivity after surgery was the single most significant prognostic factor associated with inferior DFS
- **Sustained Signatera™ clearance after ACT is associated with improved survival:** Patients who clear their ctDNA and remain Signatera™-negative have superior DFS and OS, compared to those with transient clearance and those with no ctDNA clearance

Signatera™-positivity at the MRD time point and during surveillance was predictive of inferior OS

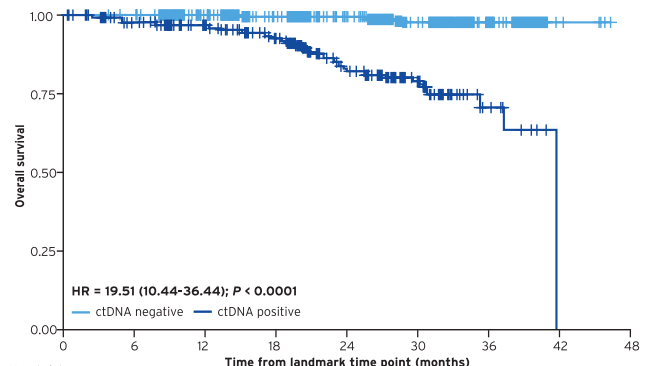
All stages MRD window



ctDNA status	ctDNA negative	ctDNA positive
24M-OS %*	98.5 (97.7-99.1)	83.65 (77.84-88.06)
36M-OS %*	96 (94.3-97.2)	71.8 (63.4-78.6)

*MRD window: 2-10 weeks post surgery, prior to start of any adjuvant therapy - Landmark from MRD timepoint date

All stages surveillance



ctDNA status	ctDNA negative	ctDNA positive
24M-OS %*	99.3 (98.4-99.7)	83.2 (76.5-88.1)
36M-OS %*	97.9 (96.3-98.9)	70.5 (57.7-80.1)

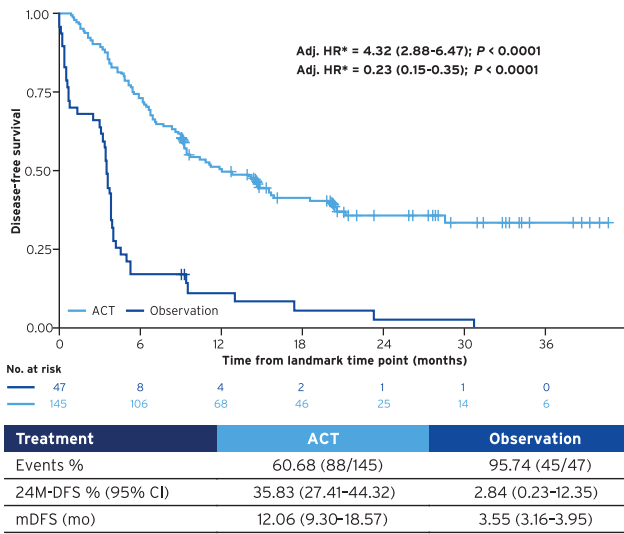
*Surveillance window: from 4 weeks post-ACT or at the end of MRD window if patient had no ACT, until the last follow up or relapse/death.



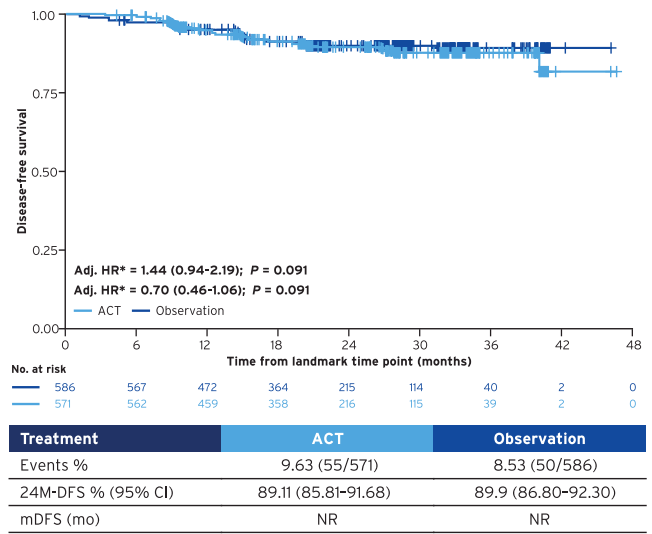
Signatera™ negative patients experienced a 10x advantage in overall survival

Signatera™-positive patients who received ACT experienced superior DFS

MRD-positive - High risk Stage II/III



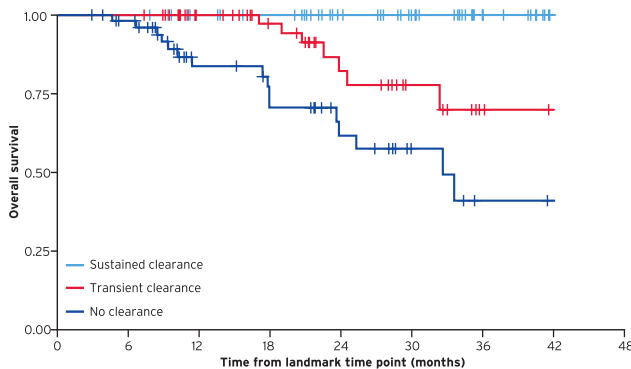
MRD-negative - High risk Stage II/III



- High-risk stage II and stage III-IV patients who were Signatera™-positive after surgery and received ACT demonstrated superior DFS
- Signatera™ can predict patients most likely to benefit from adjuvant chemotherapy (ACT) and aid in de-escalation strategies for those that are more likely to have been cured by surgery alone

OS according to ctDNA clearance in patients who were ctDNA positive in the MRD window

Landmark from MRD timepoint date



- When monitored with Signatera™ after ACT, the OS for patients with sustained ctDNA clearance was superior compared to patients with transient or no clearance
- Findings show how Signatera™ can predict post-treatment outcomes more precisely, enabling personalized surveillance strategies that may enable earlier detection of local recurrent disease in CRC

ctDNA status	Sustained clearance	Transient clearance	No clearance
24M-OS %*	100	82.3 (61.5-92.5)	61.7 (41.9-76.5)
HR	Reference	25.51	75.62
95% CI	Not applicable	3.1-3314.73	10.22-9650.93
P	Not applicable	0.0007	<0.0001



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References: 1. Kotani D, et al., Molecular residual disease and efficacy of adjuvant chemotherapy in patients with colorectal cancer, Nature Medicine v29 Issue 1 Jan 2023
2. Nakamura, Y., Watanabe, J., Akazawa, N, et al., ctDNA-based molecular residual disease and survival in resectable colorectal cancer: Nat Med (2024)



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Residual disease test (MRD)