

# Monitor your breast cancer patients using tumor-informed ctDNA testing

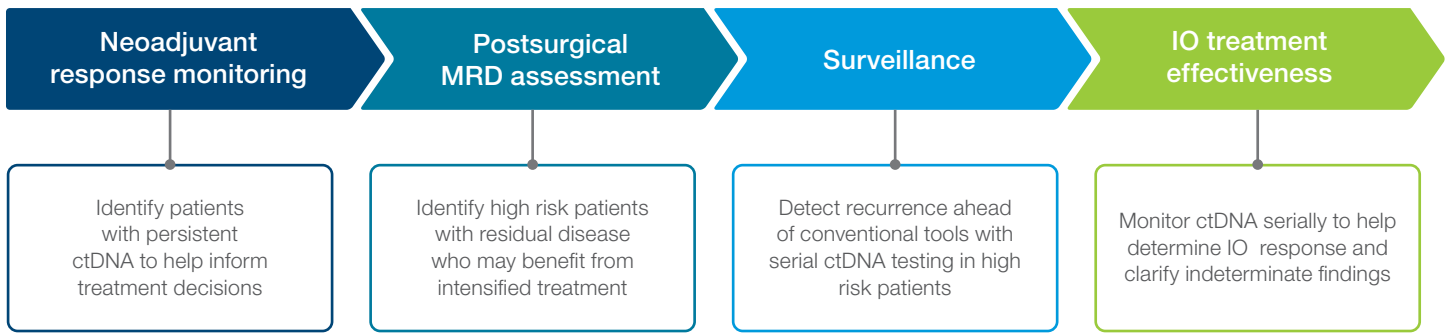
**Clinical application: Improve risk stratification and detect recurrence earlier**

**30%**

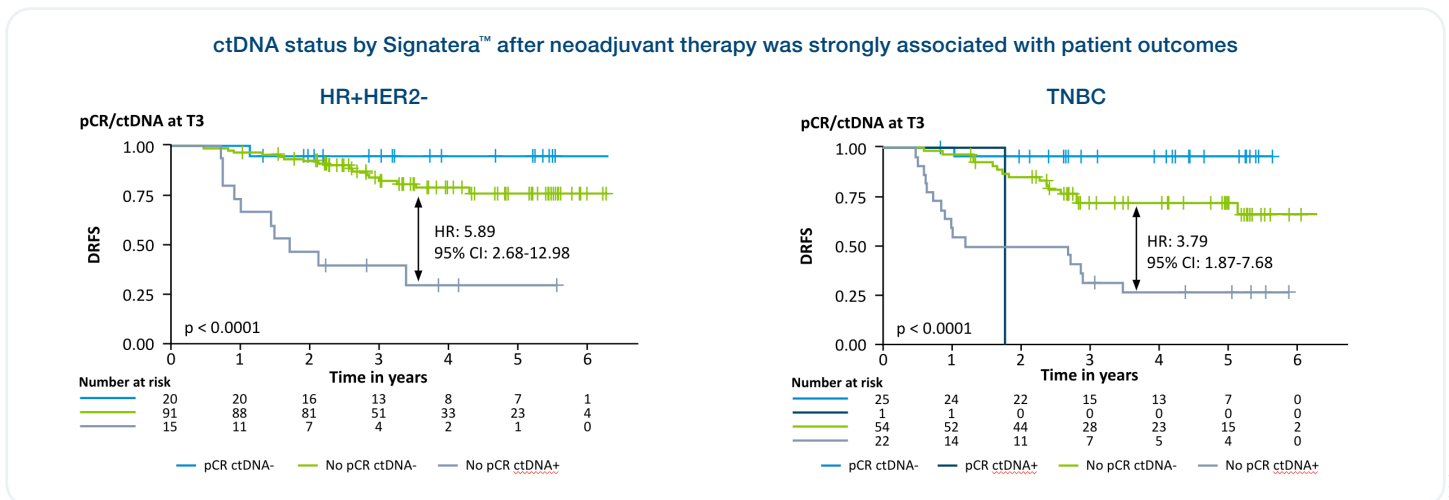
Up to 30% of women with no evidence of disease after curative intent treatment will eventually relapse and succumb to their disease<sup>1</sup>

Additionally, 10-15% of patients experience reduced performance status at recurrence, which limits treatment options.<sup>2</sup>

Existing tools fall short at identifying remaining residual disease and recurrence early, before the patient becomes symptomatic.

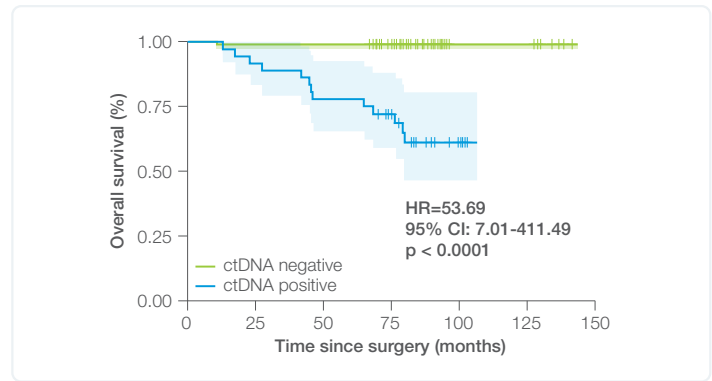
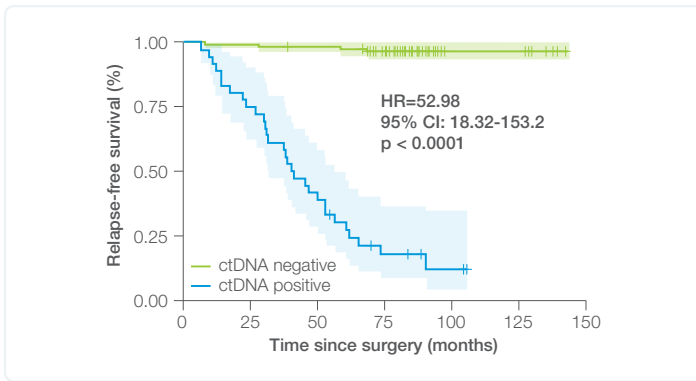


**Signatera™ can help monitor response to neoadjuvant therapy in real time and identify patients with persistent ctDNA, which may inform adjuvant treatment strategies<sup>3</sup>**



**ctDNA dynamics during neoadjuvant therapy were highly predictive of treatment response**

## Serial testing identified ctDNA positive patients with a higher risk of relapse compared to ctDNA negative patients<sup>4</sup>



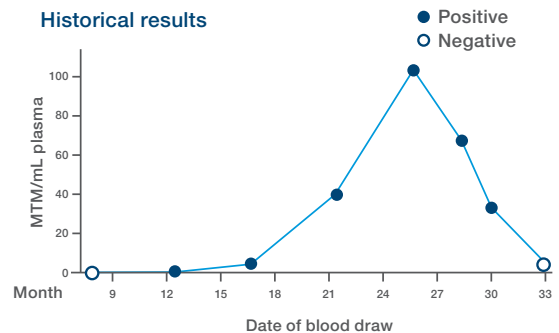
### Key takeaways:

- 156 patients (1136 plasma timepoints) followed over a period of 12 years including all breast cancer subtypes<sup>4</sup>
- 88% sensitivity: Signatera™ detected ctDNA in 30 out of 34 relapsed patients before clinical or radiologic relapse<sup>4</sup>
- 10.5 months median lead time over radiographic recurrence (range 0-38 months)<sup>4</sup>

### Case review: Using ctDNA monitoring to help detect local regional recurrence earlier

#### 60-year-old stage III TNBC patient\*

- NACT, R mastectomy with ALND; non-pCR 1 cm Grade 2 TNBC (Ki67-90%, HER2 1+).
- MRD monitoring: Signatera™ testing was initially negative but turned positive ~1 year after surgery
- PET scan identified locoregional recurrence within the mediastinum that was resected and tested HER2+.
- Anti-HER2 therapy was initiated
- Patient cleared their ctDNA and is now being monitored q3mos with Signatera™



\*Real-world Signatera™ patient case from study. Case features modified to protect patient confidentiality. No treatment recommendations are made or should be implied.

### Ordering Signatera™ for your breast cancer patients:

- Can be run at any time point from diagnosis through survivorship, using the core biopsy or surgical resection
- Medicare coverage for stage II-IV breast cancer across all subtypes receiving neoadjuvant therapy to support real-time assessment of tumor response to treatment, and stage IIb and higher breast cancer to inform treatment decisions in the adjuvant setting and for early detection of recurrence in the surveillance setting.

### Natera's Oncology Portfolio:

**Empower™**  
Hereditary cancer test

Empower™ for hereditary cancer testing which analyzes up to 81 genes across 12+ common hereditary cancers (panel can also be customizable, up to 190 genes) and more commonly known genes associated with breast cancer including *BRCA1*, *BRCA2*, *TP53*, *PALB2*, *ATM*, *CHEK2*, *STK11*, *PTEN* to help guide surgical and therapeutic decisions.

**Altera™**  
Tumor genomic profile

Add on Altera™ Genomic Profiling test which utilizes whole-exome and whole-transcriptome sequencing to identify clinically relevant biomarkers that may help guide treatment selection for advanced cancer patients—no additional sample needed.

### References:

1. Early Breast Cancer Trialists' Collaborative G. *Lancet*. 2005;365:1687-1717.
2. O'Connor T, et al. *Clin Adv Hematol Oncol*. 2013;11(6):341-347.
3. Magbanua et al. *Cancer Cell*. 2023; 41:1-12
4. Shaw et al., Serial Postoperative Circulating Tumor DNA Assessment Has Strong Prognostic Value During Long-Term Follow-Up in Patients With Breast Cancer. *JCO Precis Oncol* 8, e2300456(2024). DOI:10.1200/PO.23.00456

Learn more at: [natera.com/oncology](https://natera.com/oncology)



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Signatera™ has been developed and its performance characteristics determined by the CLIA-certified laboratory performing the test. The test has not been cleared or approved by the US Food and Drug Administration (FDA). CAP accredited, ISO 13485 certified, and CLIA certified.  
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