

At the most vulnerable time
in her life, when she asks if
chemotherapy is appropriate,
will you have the answer?

ONLY
ONCOTYPE DX[®]
BREAST
RECURRENCE
SCORE
GIVES YOU
THE ANSWER

Prospective outcomes
in **50,000+** patients

*oncotype***DX[®]**
Breast Recurrence Score



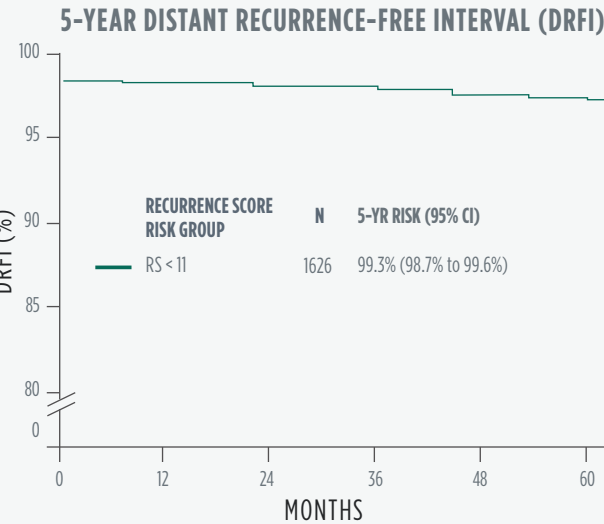
Power in numbers: Only Oncotype DX® Breast Recurrence Score has prospective and consistent outcomes data in over 50,000 patients

TAILORx¹

WSG PlanB⁴

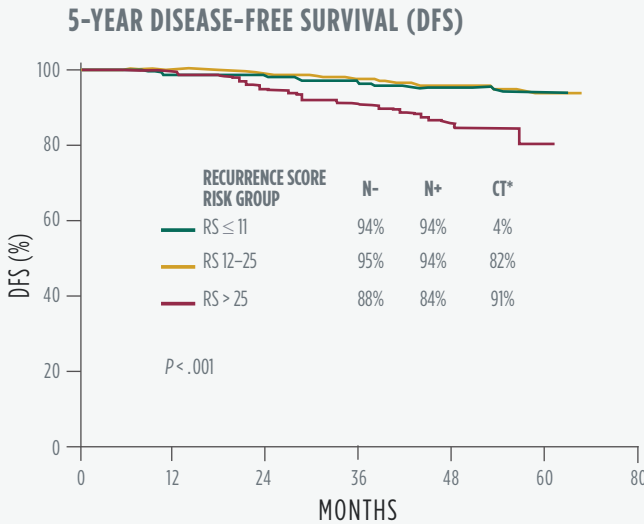
Clalit Registry^{5,†}

SEER⁶



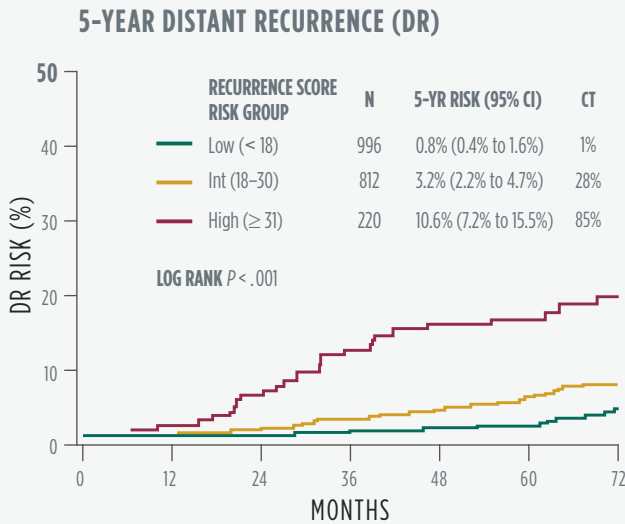
Less than 1% risk of distant recurrence at 5 years in patients with Recurrence Score® results < 11 who were treated with hormonal therapy alone

- TAILORx prospective outcomes data showing > 99% free of distant recurrence at 5 years in patients with Recurrence Score® results < 11 are consistent with validation studies¹⁻³
- Patient population: Node-negative, ER-positive, HER2-negative disease (Arm A)



94% of high-risk node-negative and node-positive patients with Recurrence Score results ≤ 11 who were treated with hormonal therapy alone were still alive and disease-free at 5 years

- Level 1A evidence shows that patients with low Recurrence Score results (RS ≤ 11) can be safely spared chemotherapy
- Patient population: Node-positive or clinically high-risk node-negative disease



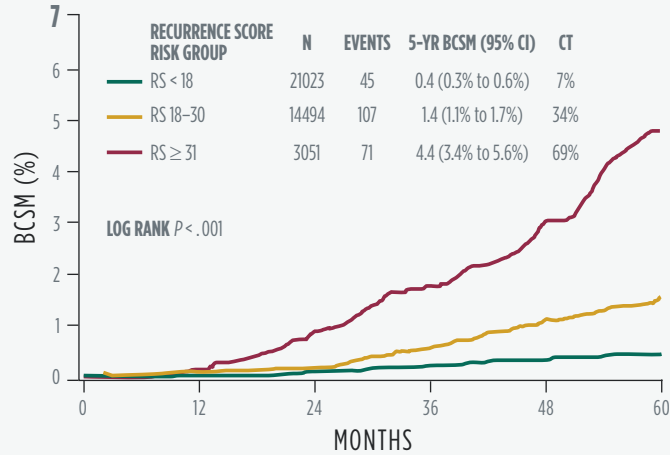
Less than 1% distant recurrence rate at 5 years in patients with Recurrence Score results < 18

- Registry study outcomes show that the Recurrence Score result identifies patients who can safely be spared the addition of chemotherapy
- Patient population: Node-negative or micrometastatic disease



5-YEAR BREAST CANCER-SPECIFIC MORTALITY (BCSM) BY RECURRENCE SCORE GROUP

Primary analysis in node-negative patients 40-84 years old (N = 38,568)



Less than 1% BCSM at 5 years in > 21,000 patients who received Recurrence Score results < 18

- Outcomes from a large, real-world observational study show the Recurrence Score result accurately identifies patients who do well with hormonal therapy alone
- Patient population: Node-negative, ER-positive, HER2-negative disease

Multiple studies confirm that Recurrence Score results identify patients who can safely and effectively be spared chemotherapy.

[†]Clalit Registry is the largest health provider in Israel and mandates physicians use the Recurrence Score result for treatment decisions.

SEER node-positive⁶



Real-life
observational
study



5-year outcomes



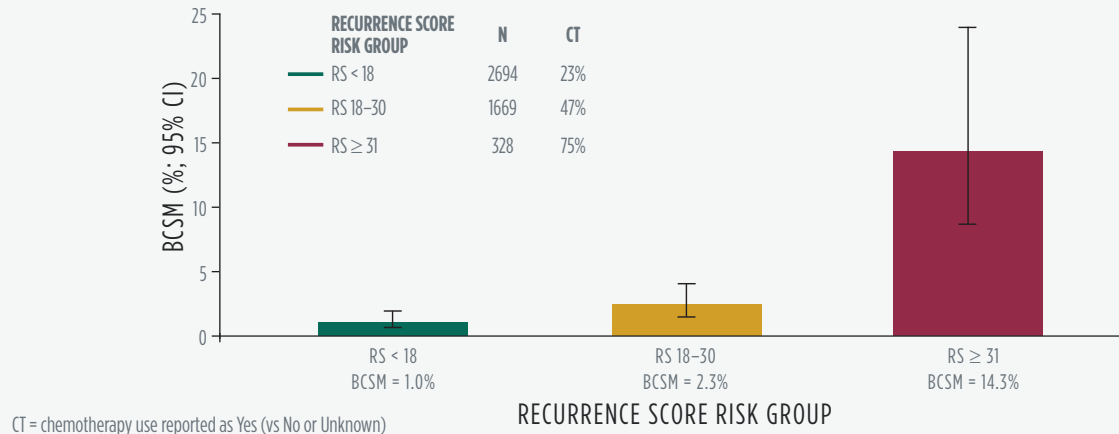
N+ (mic, 1-3)



4,691 patients

5-YEAR BREAST CANCER-SPECIFIC MORTALITY (BCSM) BY RECURRENCE SCORE® GROUP

Analysis in patients with node-positive (mic, 1-3) disease



**For node-positive patients with Recurrence Score results < 18,
it is unlikely that adding chemotherapy will improve clinical outcomes**

Oncotype DX® Breast Recurrence Score: Predictive and prognostic results you can count on

STANDARD OF CARE

with **prospective** outcomes in over 50,000 patients^{1,4-6} and incorporation into major clinical practice guidelines worldwide⁷⁻¹¹

PROVEN

to be both predictive of chemotherapy benefit and prognostic in node-negative and node-positive patients^{2,3,12,13}

VALIDATED

in multiple studies with consistent results (Level 1 evidence for risk of distant recurrence and prediction of chemotherapy benefit)^{2,3,12-14}

BENEFITED 600,000+

Oncotype DX® tests for breast, colon, and prostate cancers have helped over half a million patients make more informed treatment choices¹⁵

ORDER

FOR EVERY ELIGIBLE
ER[+], HER2[-]
PATIENT.

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References

1. Sparano et al. *N Engl J Med*. 2015. **2.** Paik et al. *J Clin Oncol*. 2006. **3.** Paik et al. *N Engl J Med*. 2004. **4.** Gluz et al. EBCC 2016. **5.** Stemmer et al. SABCS 2015. **6.** Petkov et al. *NPJ Breast Cancer*. 2016. **7.** NCCN® Clinical Practice Guidelines in Oncology. V.2.2016. **8.** Harris et al. *J Clin Oncol*. 2016. **9.** Senkus et al. *Ann Oncol*. 2015. **10.** Coates et al. *Ann Oncol*. 2015. **11.** NICE diagnostics guidance 10. 2013. **12.** Albain et al. *Lancet Oncol*. 2010. **13.** Dowsett et al. *J Clin Oncol*. 2010. **14.** Habel et al. *Breast Cancer Res*. 2006. **15.** Data on file, Genomic Health, Inc.

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Making cancer care smarter.

oncotypeIQ
Genomic Intelligence Platform

Genomic Health
LIFE. CHANGING.