

FOR PATIENTS DIAGNOSED WITH
EARLY-STAGE PROSTATE CANCER

Learn more about
a test that can help
inform your next step
in treatment



Genomic Health®

oncotypeDX®
Genomic Prostate Score

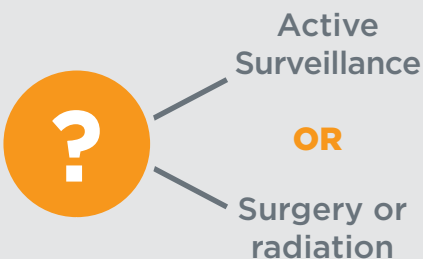
Prostate cancer is as individual as you are

Being diagnosed with prostate cancer can be overwhelming. At this stage in your journey, give yourself time to understand what this diagnosis means and what treatment may be best for you.

To begin, it is important to understand that not all prostate cancers act in the same way. Some are high risk and likely to grow or spread, but **many are not aggressive** and are considered lower risk.

About half of people newly diagnosed with prostate cancer may be low risk and candidates for Active Surveillance^{1,2}

With a clear understanding of your level of risk, you and your doctor can decide if long-term monitoring with Active Surveillance is a good option, or if immediate treatment with surgery or radiation is needed.



Understand your options

Choosing Active Surveillance

Depending on your prostate cancer risk factors, you and your doctor may decide that Active Surveillance is the right choice for you.

Through Active Surveillance, you will be closely followed to monitor the tumor and any changes in your level of risk.

Therefore, you may not ever need surgery or radiation, avoiding the chance of side effects such as long-term urinary or bowel problems, or erectile dysfunction.

Active Surveillance is a treatment plan for patients whose tumor is not likely to be aggressive. It involves regular check-ups and ongoing testing, which may include²:

- PSA* testings
- Regular exams (DREs)[†]
- Repeat biopsy as your doctor recommends

It is important to be aware that despite close monitoring with Active Surveillance, prostate cancer may eventually progress; however, it remains curable in most cases^{3,4}

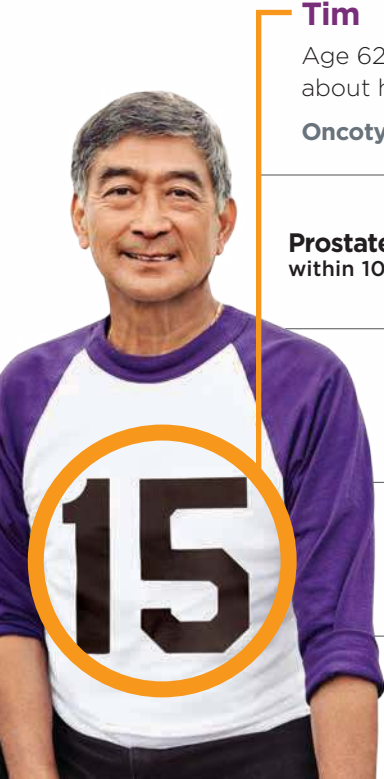
*Prostate-Specific Antigen

†Digital Rectal Exams

Know if Active Surveillance is right for you

The Oncotype DX® Genomic Prostate Score (GPS) test provides a clearer understanding of whether your cancer is low or high risk

The National Comprehensive Cancer Network® (NCCN®) is a leading authority in the treatment of cancer and has created guidelines that are used to understand your clinical risk. Your clinical risk is based on your PSA score, your Gleason score, the stage of your cancer and other factors your doctor may consider.



Tim

Age 62, star hitter, father, unsure about his first step in treatment*

Oncotype DX GPS: 15

Prostate Cancer Death
within 10 years

<1%

Metastasis
within 10 years

1%

Adverse Pathology

18%

The Oncotype DX GPS test gives you and your doctor more information for treatment conversations and decisions

The Oncotype DX GPS test is called a genomic test. It measures the activity (also referred to as expression) of genes responsible for the growth and survival of tumor cells.

This information allows the Oncotype DX GPS test to clarify how the tumor may act and whether it is likely to be aggressive (adverse pathology).

The test also predicts whether you are likely to die from your cancer or have it spread to other parts of your body (metastasis) within 10 years after surgery.

In addition to your clinical factors, the Oncotype DX GPS test will provide information for you and your doctor to discuss your next steps.

*Actual patient case data; patient names, images, and photos are illustrative.

oncotypeDX[®]
Genomic Prostate Score

Have a clear path forward

Results of the Oncotype DX[®] test are reported as a Genomic Prostate Score (GPS) result, which can help you better understand your individualized risk

The **LOWER YOUR GPS**, the lower your risk. In this case, the cancer is not likely to have what is called “adverse pathology” and be aggressive.

It also means that the risk of dying from your cancer or having it spread within 10 years (after surgery) is also quite low. Active Surveillance may be the preferred approach.

The **HIGHER YOUR GPS**, the more likely it is that the cancer will be aggressive, and the more likely it is that your doctor will recommend immediate treatment.

Adverse pathology means that the cancer is aggressive and is more likely to grow and spread



Greg

Oncotype DX

Genomic Prostate

Score: **40**

Oncotype DX® Genomic Prostate Score test—studied in over 4,000 patients⁵⁻¹¹

In addition to your clinical factors, the Oncotype DX GPS test will provide information for you and your doctor to discuss your next steps.

Take these simple steps for the Oncotype DX GPS test

TEST: The Oncotype DX GPS test is conducted on a small tissue sample already taken from your most recent biopsy.

RECEIVE: In approximately 2 weeks, your doctor will receive your **GPS result**, which includes your **level of risk** for prostate cancer death and metastasis within 10 years after surgery, as well as your risk for adverse pathology.

If your result suggests that your tumor is probably not aggressive and your 10-year risk is favorable, Active Surveillance may be appropriate for you.

DISCUSS: You and your doctor can use your results to better understand your options and discuss what's next for you.

The GPS report provides individualized information on your prostate cancer to inform conversations between you and your physician.

GPS result

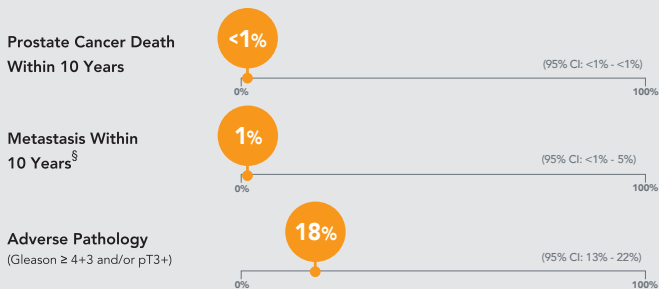
Your risk category



Your individualized level of risk

Clinical Endpoints[†]

Individualized Risk (95% Confidence Interval [CI])



Be confident in your treatment decision

Reviewing your Oncotype DX[®] GPS report

Your doctor will receive a report that shows your results and what they mean. Your doctor may share this report with you during your discussions.

- 1** The Oncotype DX GPS test measures activity (expression) of certain genes within the tumor to calculate the GPS result. In this sample report, the patient has an individualized risk consistent with NCCN very-low-risk cancer. He is likely a good candidate for Active Surveillance.
- 2** In the sample report, the risk of prostate cancer death within 10 years is <1%, and the risk of metastasis within 10 years after surgery is also <1%.
- 3** The risk of the aggressive disease (adverse pathology) is 18%. Since this risk is low, the disease will probably not progress quickly.

Information, like that found in the sample report, helps inform discussions between you and your doctor about next steps.

Ask your doctor what your Oncotype DX Genomic Prostate Score test results could mean for you

Tim's sample GPS report*

Genomic Prostate Score (GPS) Report

oncotypeDX®
Genomic Prostate Score

TIM

Date of Birth: 01-Jan-1950 Gender: Male Report Number: OR000123456-01 Report Date: 22-May-2017

Ordering Physician: Dr. First-Name I. Ordering-Physician-Last-Name

GPS + NCCN®¹ : Very Low Risk

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Clinical Interpretation

The combination of GPS and clinical features predicts that this patient's risk is consistent with **NCCN Very Low Risk disease.**¹

In a clinical validation study including patients with NCCN Very Low, Low, and Intermediate Risk, **no patient with a GPS result <20 had metastasis or died** from prostate cancer within 10 years.²

Clinical Endpoints¹

Prostate Cancer Death Within 10 Years <1% (95% CI: <1% - <1%)

Metastasis Within 10 Years³ 1% (95% CI: <1% - 5%)

Adverse Pathology (Gleason ≥ 4+3 and/or pT3+) 18% (95% CI: 13% - 22%)

Individualized Risk (95% Confidence Interval [CI])

NCCN Risk Group¹¹ : Low

Physician-Provided Information¹² :

| | |
|---|--------------------------------------|
| Gleason Score: 3+3 | Prostate Volume (cc): 20 |
| PSA (ng/mL): 6.0 | PSA Density (ng/mL/cc): 0.30 |
| Clinical Stage: T2a | Number of cores positive: 1 |
| Max. % of tumor involvement in any core: ≤ 50% | Number of cores collected: 12 |

* The NCCN Guidelines identify a subset of Favorable Intermediate Risk patients: predominant Gleason grade 3 (Gleason score 3+4=7), percentage of positive biopsy cores <50%, and no more than one NCCN Intermediate Risk factor.

¹ In the clinical validation study, all patients received radical prostatectomy. The risk estimates provided are based on the patient's GPS result and NCCN risk group.

² The GPS + NCCN risk group is defined by the likelihood of adverse pathology and/or the risk of metastasis within 10 years and was derived from the clinical validation studies using the clinically relevant endpoints for each risk group. Additional detail on file and available upon request.

³ In the clinical validation study, metastasis was determined by imaging or biopsy.

¹¹ Calculated or reported from physician-provided clinical information.

¹² N/A (not available) indicates data has not been provided to Genomic Health.

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*Actual patient case data; patient names, images, and photos are illustrative.

References: **1.** Herget et al. *Cancer Med.* 2016. **2.** Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) (Version 1.2017). © National Comprehensive Cancer Network, Inc. 2017. All rights reserved. Accessed January 10, 2017. To view the most recent and complete version of the guidelines, go online to www.nccn.org. NATIONAL COMPREHENSIVE CANCER NETWORK®, NCCN®, NCCN GUIDELINES®, and all other NCCN Content are trademarks owned by the National Comprehensive Cancer Network, Inc. **3.** Welty et al. *J Urol.* 2015. **4.** Tosoian et al. *J Clin Oncol.* 2015. **5.** Klein et al. *Eur Urol.* 2014. **6.** Van Den Eeden et al. AUA 2017. Abstract 17-6551. **7.** Cullen et al. *Eur Urol.* 2014. **8.** Knezevic et al. *BMC Genomics.* 2013. **9.** Badani et al. *Urol Pract.* 2015. **10.** Dall'Era et al. *Urol Pract.* 2015. **11.** Data on file. Genomic Health, Inc.

Understand your cancer, understand your options

Ask your doctor for your Oncotype DX® Genomic Prostate Score™ to better understand if Active Surveillance is right for you, or if immediate treatment is needed.

Once the Oncotype DX Genomic Prostate Score test has been ordered for you:

The Genomic Access Program helps make sure your test is affordable, available, and accessible.

To learn more about the program and insurance coverage for the Oncotype DX GPS test, please visit OncotypeDX.com.

You can also reach us by telephone in the United States. Call **+1 (888) ONCOTYPE (888-662-6897)** for assistance in English, **+1 877-444-9876** for Spanish.

For more information about genomic testing and the Oncotype DX GPS test, visit myprostatecancertreatment.org

