

SmartGenomics™ Breast Profile

Oncology Services

Clinical to Genomic

→ Advanced Standard of Care

PathGroup SmartGenomics: Breast is designed for *use at diagnosis, relapse or refractory disease* in suspected or proven metastatic breast cancer to uncover therapeutic options and aid in treatment planning to improve patient outcomes

- Clinically actionable genomic information for 44 gene mutations, immunohistochemistry (IHC), cytogenetic abnormalities (FISH), and whole genome copy number changes (CMA)
- Clinical indications, prognostic data and potential therapies presented in a comprehensive report
- Full results in 7 to 10 days

→ Tailored Genomic Breast Profile

Next Generation Sequencing (NGS)

AKT1	Seen in invasive breast cancer and predictive of responsiveness to PI3K inhibition in vitro and on outcome after adjuvant tamoxifen
APC	Altered in up to 70% of sporadic breast cancers, known to mediate chemotherapeutic resistance
AR	Mutation implicated in resistance to antiandrogen therapy
BRAF	Predictive of response to the mTOR inhibitor everolimus in conjunction with analysis of KRAS, PIK3CA and PTEN
BRCA1/2	Somatic mutations predictive of response to PARP inhibitors
CCND1	Mutation implicated in predisposition to ductal carcinoma in situ of the breast
CDH1	Identified in both lobular and ductal carcinomas
CDK4/6	Targetable mutation through CD4/6 inhibition
CHEK2	Acts as a tumor-suppressor gene in breast cancer
CTNNB1	Implicated in activation of the Wnt signaling pathway in invasive breast cancer
EGFR	Potentially targetable, documented in TNBC
ERBB2/4	Response to HER2-targeted therapy reported
ESR1	Mutation recently implicated in endocrine resistance
FGFR1/2/3	Activated signaling recently reported as driver, potentially targetable
FLT3	Can be downregulated through CDK6 inhibition
GATA3	Mutations define a unique subtype of luminal-like breast cancer with improved survival
HRAS	Ras pathway activation in breast cancer functions as a tumor and metastasis suppressor
JAK3	Deregulation by activating mutations shown to confer invasive growth advantage
KDR	Thought to correlate with increased lymph node metastasis
KIT	Potential target in TNBC
KMT2D	Commonly mutated in HER2+, contribute to breast cancer initiation and progression
KRAS	Breast tumors with KRAS codon 12 mutations seem to present a worse prognosis
MET	De-regulation plays critical role in resistance to target-agents, such as anti-HER2 strategies

(profile components listing continued on back)

MLH1	Thought to contribute to breast cancer initiation
NPM1	Potential driver in TNBC
NRAS	May play a role in breast cancer metastasis
PDGFRA	Potential target in TNBC
PIK3CA	May predict resistance to trastuzumab, potentially targetable
PTCH1	Potentially targetable through hedgehog pathway inhibition
PTEN	Mutation associated with high risk of recurrence and axillary lymph node metastasis
PTPN11	Thought to play a role in intrinsic and acquired resistance to targeted cancer drugs
RB1	Associated with resistance to anthracyclines/mitomycin in primary breast cancer
SETD2	Mutations make cancer cells vulnerable to drug inhibiting the protein WEE1
SMAD4	Contributes to the formation of osteolytic bone metastases and invasive ductal carcinoma
SMO	Potentially targetable through hedgehog pathway inhibition
SRC	Targetable, important in the growth of breast cancer independent of hormonal receptor or HER2 status
TP53	Associated with more aggressive disease and worse overall survival
TSC1/2	Potential prediction of response to mTOR inhibition

Immunohistochemistry (IHC)

ER	Response to hormonal therapy
PR	Response to hormonal therapy
HER2	Predictive of possible response to trastuzumab

Fluorescence In Situ Hybridization (FISH)

HER2(ERBB2)	Predictive of possible response to trastuzumab
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Cytogenomic Microarray (CMA)

Genome wide copy number changes for therapeutic and prognostic guidance