



*Non-invasive blood tests for early detection
and accurate management of cancer*



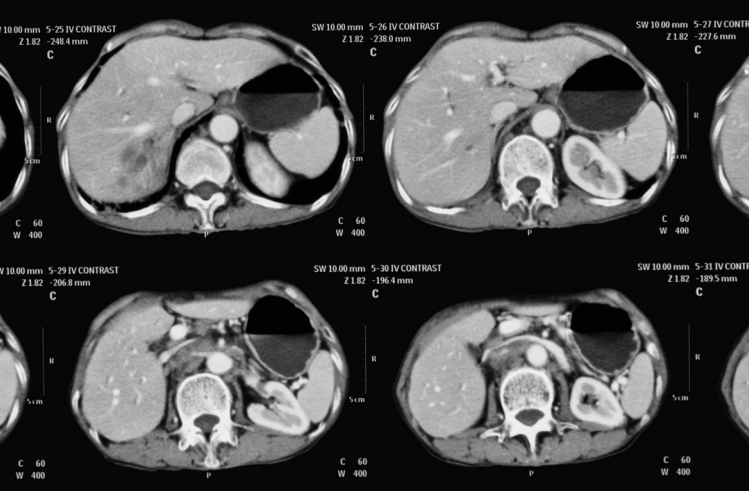
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OncoCUP Dx

Non-invasive blood and urine test to help
in differential diagnosis of patients with
one or more metastatic sites, but without
the primary site identified, reducing
inappropriate diagnostic tests, days of
hospitalization and morbidity.



CANCER OF UNKNOWN PRIMARY PROGNOSIS

The prognosis for patients with Cancer of Unknown Primary (also known as CUP) is very poor. As a group, the median survival is approximately 3 months with less than 25% and 10% of patients alive at 1 and 5 years, respectively.

CUP is represented by a heterogeneous group of diseases all of which have presented with metastasis as the primary manifestation. Although most diseases are relatively refractory to systemic treatments, certain clinical presentations of CUP carry a much better prognosis. In each instance, distinct clinical and pathologic details require consideration for appropriate, potentially curative, management.

Although only a minority of patients will have curable disease or a disease for which there is substantial palliative benefit, the appropriate use of special diagnostic pathology and selected radiologic studies will identify patients for whom directed therapy will provide the best possible chance for response.

Current studies argue that to define a carcinoma as CUP requires the patient to present a histologically documented metastatic cancer, that is, a detailed health record with a thorough physical examination including: pelvic and rectal exams; a blood test with complete bio-chemistry; an urinalysis; a test for fecal occult blood; a review of the biopsy using immunohistochemistry; a chest Radiography; and an abdominal CT Scan and/or a Mammography, as appropriate.

All these diagnostic tests and complementary examinations to which will be submitted to the patient, are intended to determine the primary tumor to be treated in the most suitable way, something that unfortunately won't be achieved in most cases, which results in high stress levels, as well as a very substantial economic cost.

For this reason, in most cases the number of scans is limited to those that can provide a clinical benefit to the patient because, currently, the treatment of patients with CUP has a very poor prognosis and provides meagre profits, what recommends focusing all efforts in determine which chemotherapy scheme can provide the maximum benefit with minimal toxicity.

WHAT IS ONCOCUP DX?

- ✓ Innovative: Multiple Biomarkers Disease Activity Algorithm (MBDAA) developed with an Artificial Intelligence (AI) software.
- ✓ Non-invasive: First test based on a simple blood and urine test that analyses a panel consisting of several serum tumor markers with other general biochemistry values.
- ✓ Accurate: Very high capabilities to confirm or discard previous suspicious findings.
- ✓ Effective: Solution to help in Differential Diagnosis for Cancer of Unknown Primary —as an adjunct to metastatic findings—, in order to reduce turnaround time (TAT) for diagnosis confirmation as well as the number of unnecessary tissue biopsies.
- ✓ More complete: it can also determinate the primary site between more than 30 types of different solid tumors such as Breast Cancer, Gastrointestinal Cancers, Gynaecological Cancers, Endocrine Tumors, Lung Cancer, Lymphoma, Malignant Melanoma, Sarcoma and Urologic Cancers, among others.
- ✓ Already validated: CE Declaration of Conformity reached (According to Annex VII of Medical Device Directive 93/42/EEC).

USES AND PURPOSES

- ✓ Confirm the primary site in patients with cancer found in one or more metastatic sites, but the primary site cannot be determined.

FOR WHOM IS IT INTENDED?

- ✓ Patients with a histologically documented metastatic cancer without the primary site identified.

LEARN MORE

- ✓ Ask more information to your doctor or visit our website to learn all about OncoCUP Dx.

