

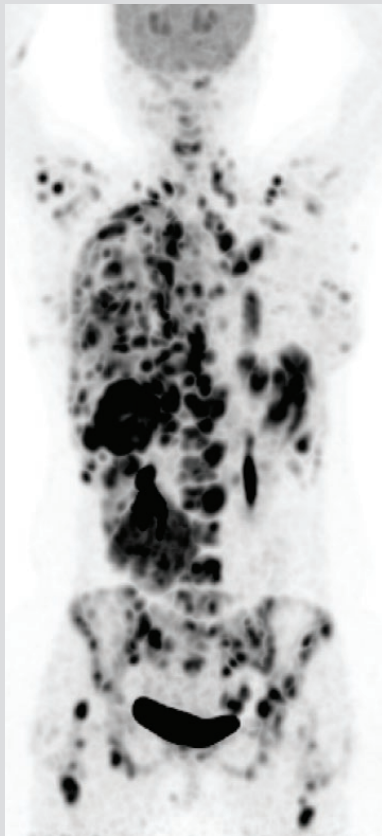
Case Study – II

Stage IV Invasive Ductal Carcinoma of Breast (TNBC*) 22 year old female patient

| Clinical History | |
|------------------|---|
| Aug '16 | Diagnosis: IDC Left Breast |
| Aug – Jan '16 | Cyclophosphamide + Doxorubicin + Docetaxel |
| Nov '16 | Left Mastectomy |
| Feb – Mar '17 | Radiotherapy |
| May – Jun '17 | Methotrexate + Cyclophosphamide |
| Jun – Jul '17 | Everolimus |
| Jul '17 | PET-CT: Progression |

| exacta® rationale for therapy selection | | |
|---|--------------|----------------------------|
| Gene / Pathway / Analysis | Feature | Therapeutic Implication |
| PDGFRA, KIT, KDR | Gain of Copy | Axitinib |
| Chemosensitivity | Cytotoxicity | Carboplatin Gemcitabine |

Benefit from exacta® – recommended therapy

| | | |
|---|---|--|
| <p>before</p> <p>Cancer had progressed following 5 lines of therapy.</p> |  | <p>after</p> <p>Administration of exacta®: recommended therapy led to regression of cancer.</p> |
| day 0 | day 34 | |

*TNBC: Triple negative breast cancer