

## cfDNA screening for skeletal, cardiac, and neurological disorders

- Noonan syndrome
- Achondroplasia
- Osteogenesis imperfecta
- Rett syndrome
- And 21 other conditions across 30 genes



Conditions screened by Vistara have a combined incidence of

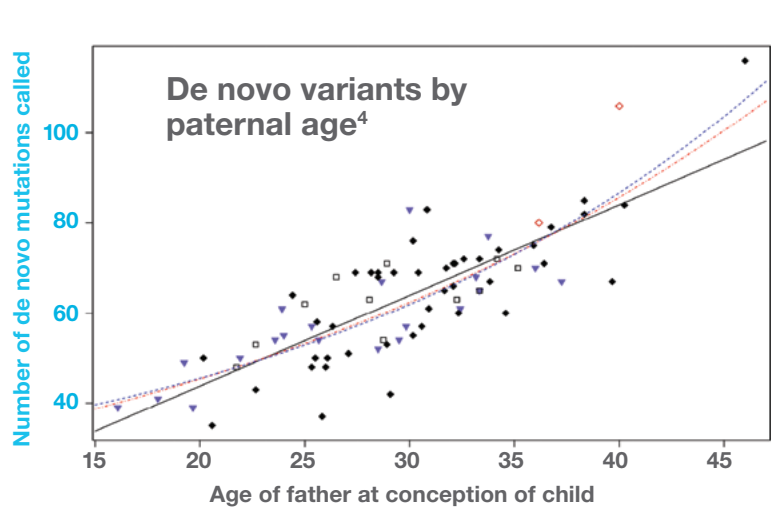
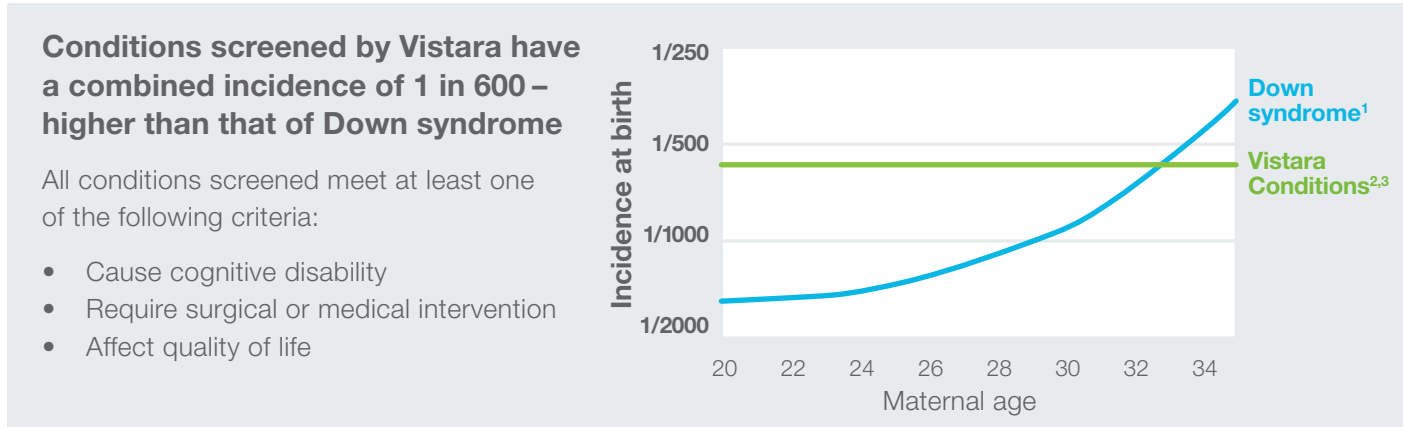
**1 in 600**

higher than that of Down syndrome<sup>1,2,3</sup>

### Vistara identifies risk for single-gene disorders that may have otherwise gone undetected prenatally

- Ultrasound findings are not a reliable indicator
- Conditions are not detected with standard microarray analysis
- Family history is typically not a good indicator of risk
- Early identification of these conditions is clinically actionable

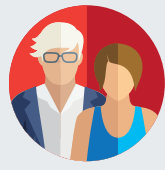
Screen non-invasively for Noonan syndrome, osteogenesis imperfecta, Rett syndrome, and other serious genetic conditions caused by single-gene mutations across 30 genes



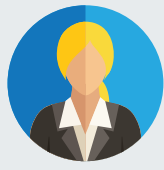
**The single-gene disorders screened by Vistara are usually not inherited or related to family history**

- Typically caused by new, or “de novo,” genetic changes (variants)
- May occur more frequently as the age of the father increases<sup>5</sup>
- Are not related to the age of the mother
- Are autosomal or X-linked dominant – if the variant is present, the child is expected to be affected by the condition and experience related symptoms


**Consider Vistara for the following indications:**




**Advanced paternal age**



**Women who want to know “everything”**



**Ultrasound anomalies, such as shortened long bones and increased NT**



**Adjunct to CVS and amniocentesis**

**“We have been offering Vistara when the father of the pregnancy is age 40 or over, and also when a couple opts to pursue CVS or amniocentesis. Our thought is that if a couple wants as much information as possible, then Vistara is a reasonable screen to offer.”**

– Dr. Sheri Hamersley, M.D., Maternal-Fetal Medicine Associates of Maryland

# Vistara results may help direct prenatal and neonatal care

**Vistara results will show whether a pathogenic or likely pathogenic single-gene variant has been identified**



Result:  
**SCREEN POSITIVE**

Genetic counseling and confirmatory diagnostic testing are recommended.

Diagnostic samples must be sent to a laboratory that provides testing for the genetic variant identified.



Result:  
**SCREEN NEGATIVE**

No pathogenic or likely-pathogenic variants were identified in the 30 genes screened.

*Vistara is not a diagnostic test and does not provide a definitive diagnosis of any conditions screened.*

## Demonstrated accuracy in validation studies, with no known false positives in commercial experience

### Analytical validation<sup>6</sup>

Vistara's analytical validation involved the analysis of >8 million DNA base pairs across the 30 genes screened.

**Sensitivity: >99% (554/554)**

**Specificity: >99% (8,038,792/8,038,792)**

- Correctly detected 3 affected cases and classified them as pathogenic/likely pathogenic (*COL1A1*, *FGFR3*, *RIT1*)
- Pathogenic *de novo* variants were confirmed by analysis of invasive or postnatal specimens
- No false negatives and no false positives across >8 million base pairs in validation

### Commercial experience in 2017<sup>7</sup>

No known false positives across 23 fetal screen-positive cases

- Four fetal diagnostic confirmations
- Nineteen positives with consistent ultrasound findings or paternal family history

#### Skeletal disorders

*COL1A1*, *COL1A2*, *FGFR3*

**13 positives**

#### Noonan syndrome

*PTPN11*, *RIT1*, *KRAS*

**5 positives**

#### Syndromic disorders

*JAG1*, *TSC2*, *NIPBL*

**3 positives**


#### Craniosynostosis syndromes

*FGFR2*

**2 positives**


# Prenatal screening with Vistara can lead to improved delivery management and targeted neonatal care

Disorder	Clinical actions
<b>Osteogenesis imperfecta</b>	<ul style="list-style-type: none"><li>• Labor and delivery management to avoid fractures</li><li>• Neonatal care</li><li>• Early recognition and treatment of fractures</li></ul>
<b>Achondroplasia</b>	<ul style="list-style-type: none"><li>• Labor and delivery management</li><li>• Monitor for spinal stenosis</li><li>• Early sleep studies to reduce risk of SIDS</li></ul>
<b>Noonan syndrome</b>	<ul style="list-style-type: none"><li>• Fetal echocardiogram</li><li>• Labor and delivery management</li><li>• Early assessment for learning differences</li></ul>
<b>Craniosynostosis</b>	<ul style="list-style-type: none"><li>• Fetal MRI</li><li>• Avoid instrumented delivery</li><li>• Corrective surgery</li><li>• Early medical and behavioral interventions</li></ul>



## Provider

- **Proactive billing outreach and price transparency**
- **Complimentary mobile phlebotomy services and in-office phlebotomist for our testing\***
- **Support from board-certified genetic counselors**
- **Provider portal to help you manage testing**



## Patients

- **Patient portal and educational resources**
- **Convenient mobile phlebotomy services\***
- **Complimentary pre- and post-test genetic information sessions**
- **Flexible payment plans**

\*Where permitted by state law

### References

1. Snijders et al. Ultrasound Obstet Gynecol. 1999 Mar; 13(3):167-70.
2. GeneReviews. [www.ncbi.nlm.nih.gov/books/NBK11116](http://www.ncbi.nlm.nih.gov/books/NBK11116).
3. Genetics Home Reference. [www.ghr.nlm.nih.gov](http://www.ghr.nlm.nih.gov).
4. Kong et al. Nature. 2012 Aug; 488(7412): 471-5.
5. American College of Medical Genetics (ACMG), Practice Guideline, June 2008.
6. Vistara validation white paper, 2017.
7. Commercial data, Natera, 2017.



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The test described has been developed and its performance characteristics determined by the CLIA-certified laboratory performing the test. This test has not been cleared or approved by the U.S. Food and Drug Administration (FDA). Although FDA does not currently clear or approve laboratory-developed tests in the U.S., certification of the laboratory is required under CLIA to ensure the quality and validity of the tests. © 2018 Natera, Inc. All Rights Reserved.