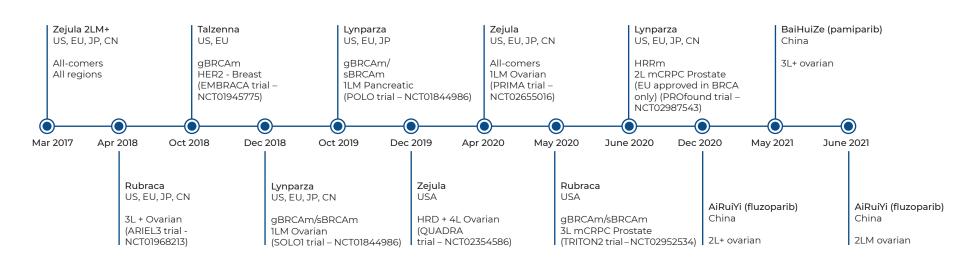
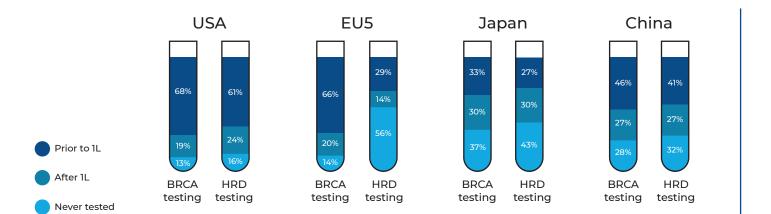
Better testing, better outcomes in Rare Cancer: BRCA mutation and PARP inhibitors

Patients whose tumors have mutations to homologous recombination repair genes, which include BRCAI and BRCA2, may be homologous recombination repair deficient (HRD) due to genomic instability. Ovarian tumors that are HRD and/or have BRCAI or BRCA2 mutations may be sensitive to a class of drugs called PARP inhibitors.



*Timeline has been simplified with dates shown for initial US approvals, with the exception of AiRuiYi and BaiHuiZe, which are only approved in China

BRCA mutation testing in ovarian cancer is becoming more common, since PARP inhibitors are approved globally for ovarian cancer; but HRD testing occurs less often.



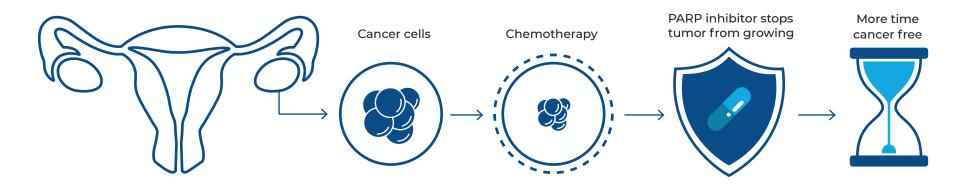
5-7% somatic BRCA1/2 in ovarian cancer patients¹

50%

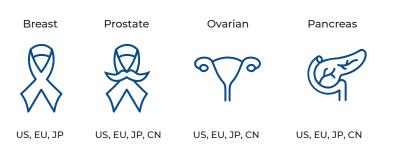
HRD+ in high grade serous ovarian cancer patients²

BRCA¹; Moschetta, Ann Oncol, 2016. HRD²: The Cancer Genome Atlas Research Network, Nature, 2011

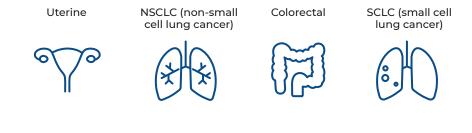
Patients who have BRCA mutations or are HRD positive usually receive 1st line chemotherapy and then a PARP inhibitor as maintenance therapy which can keep tumors at bay for many months.



Ovarian cancer patients were the first to benefit from treatment with PARP inhibitors based on the genetic abnormalities in their tumors, but many cancers have BRCA mutations or are HRD. Some patients with other solid tumors already have PARP inhibitors available to help treat their cancers; and there is opportunity in others.



| Phase 3 development





Tumors with PARP approvals

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