



## Initiating Coverage Report

# MDxHealth

Leader in Molecular Diagnostic Solutions  
for Urologic Cancers

**MDxHealth**

Chief Research Analyst

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Date: 6 January 2016

<b>Name:</b>	<b>MDxHealth SA</b>
<b>Country:</b>	<b>Belgium</b>
<b>Price:</b>	<b>EUR 3.88</b>
<b>ISIN Code:</b>	<b>BE0003844611</b>
<b>Reuters Code:</b>	<b>MDXH.BR</b>
<b>Market Cap (EUR m):</b>	<b>170.7</b>
<b>EV (EUR m):</b>	<b>135.6</b>
<b>Cash &amp; cash eq. (EUR m):</b>	<b>35.1</b>
<b>Shares outstanding (m):</b>	<b>45.2</b>
<b>Volume:</b>	<b>105,277</b>
<b>Free float:</b>	<b>73%</b>
<b>52-week Range:</b>	<b>3.21-5.88</b>

	<b>2014A</b>	<b>2015E</b>	<b>2016E</b>
<b>Total Revenues</b>	11.671	18.000	32.000
<b>Net (Loss)/Profit</b>	(15.256)	(14.900)	(12.800)
<b>Net loss per share (cents)</b>	(0.44)	(0.33)	(0.28)
<b>R&amp;D costs</b>	2.376	4.200	3.800
<b>Cash increase/(decrease)</b>	(5.786)	12.000	(18.500)
<b>Cash and marketable sec.</b>	18.897	30.897	12.397



## Executive Summary

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- MDxHealth is a molecular diagnostics company that develops and commercializes advanced, accurate and scalable molecular diagnostic products to improve the diagnosis of urological cancers. The Company is a market leader in the fast growing field of molecular testing focused on the identification of DNA or RNA imprints, which can turn a healthy cell into a cancer cell. MDxHealth has a proven track record of developing and delivering molecular diagnostic assays in the field of urologic oncology and a proprietary portfolio of molecular biomarkers and know-how, validated by leading partners.
- MDxHealth's proprietary technology platform is called MSP (Methylation-Specific-PCR), which is a DNA-based technology that functions on standard commercial PCR equipment. MSP is extremely powerful and accurate with the ability to detect a single cancer cell among 10,000 healthy cells in any type of bodily fluid or tissue sample.
- The main commercial focus of the Company is on urologic cancers, including prostate and bladder cancer, and it currently commercializes its proprietary ConfirmMDx® for Prostate Cancer test on the U.S. market, and SelectMDx™ for Prostate Cancer on the European market. To date, over 35,000 ConfirmMDx® tests have been ordered by approximately 2,500 US urologists since its launch in mid-2012. MDxHealth markets the ConfirmMDx® test in the US via its direct sales force, which has grown to 33 representatives, and via co-marketing agreements with national urology-focused laboratories including Bostwick and Miraca.
- For other cancer types, the Company has established licensing agreements to commercialize its molecular diagnostic technologies, e.g. with the launches of Cologuard® for colon cancer by licensee Exact Sciences and PredictMDx® for



Glioblastoma by licensee Laboratory Corporation of America (Labcorp). We believe that these license agreements offer rather low risk cash flow streams for MDxHealth, and that the market considers the prospect for successful commercialization of Cologuard® to be very high. Exact Sciences in its 10Q statement of October 30 2015, estimates its US market at USD 2 billion and its global market opportunity to be greater than USD 3 billion, well above the USD 1 billion considered by analysts. As it represents a rather low risk cash flow stream for MDxHealth, the market may underestimate the true value of the Cologuard® royalty stream for MDxHealth.

- Last year, the company acquired the privately held Dutch molecular diagnostics company NovioGendix for a price of USD 8.8 million. The acquisition strengthened MDxHealth's position in uro-oncology and provides access to the fast growing market for liquid biopsies, with a CE-marked non-invasive urine test for prostate cancer. In November 2015, the test was launched as SelectMDx™ for Prostate Cancer in the Benelux region, and it will be launched as an IVD kit on the European market in early 2016. MDxHealth also plans to launch SelectMDx™ as a laboratory developed test (LDT) on the US market in 2016. Moreover, NovioGendix brings a range of diagnostic tests for prostate, bladder, kidney and other urologic cancers in various stages of development to MDxHealth.
- The Company's cash position as of 30 September 2015 was EUR 35 million, after it raised USD 31 million in June 2015. Revenues for the first nine months of 2015 grew 44% to USD 11.9 million, primarily due to an increase in ConfirmMDx® test sales. Based on the company's guidance for 2015 projected revenues of USD16-20 million, we estimate full year revenues of USD 17 million, including increasing royalty amounts from Exact Sciences on its Cologuard® test. Our forecasts reflect an outlook for a strong increase in sales volume and an ongoing high reimbursement rate for





Cologuard for 2016 (USD 484). We expect ongoing strong sales if Cologuard® is included in the finalized screening guidelines.

- Based on NPV based valuation, we believe that MDxHealth is substantially undervalued at the current share price of EUR 3.88. Using our valuation model and taking into account the future revenues of ConfirmMDx®, SelectMDx™, AssureMDx™ for Bladder Cancer, and the growing income from royalties derived from its out-licensed products, we believe the company's current total value should be EUR 395 million, or EUR 8.72 per share. This represents a substantial upside from the current share price.



## Company Profile & Technology

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MDxHealth is a multinational healthcare company that provides actionable epigenetic and molecular information to personalize the diagnosis and treatment of cancer. The company's tests are based on proprietary gene methylation (epigenetic) technology and assist physicians with the diagnosis of cancer, prognosis of recurrence risk, and prediction of response to a specific therapy. The term epigenetics refers to heritable changes in gene expression (active versus inactive genes) that does not involve changes to the underlying DNA sequence; a change in phenotype without a change in genotype. Epigenetic change is a regular and natural occurrence but can also be influenced by several factors including age, the environment/lifestyle, and disease state. Epigenetic modifications can manifest as commonly as the manner in which cells terminally differentiate to end up as skin cells, liver cells, brain cells, etc. Or, epigenetic change can have more damaging effects that can result in diseases like cancer. At least three systems including DNA methylation, histone modification and non-coding RNA (ncRNA)-associated gene silencing are currently considered to initiate and sustain epigenetic change.

MDxHealth's ConfirmMDx® for Prostate Cancer was launched mid-2012 and has enjoyed increasing commercial uptake. ConfirmMDx® has been shown to help distinguish patients who have a true negative biopsy from those who may have undetected cancer, thereby helping to reduce unnecessary repeat biopsies. To date, over 35,000 ConfirmMDx® tests have been ordered by approximately 2,500 urologists since launch. The final Medicare LCD for coverage of ConfirmMDx® became effective in November 2014 with a reimbursement price of USD 2,030.

### *Technology Platform: Methylation Specific PCR*

MDxHealth's technology platform is called MSP (Methylation-Specific-PCR), which is a proprietary DNA-based technology that functions on standard commercial PCR equipment. **DNA methylation** is an epigenetic mechanism that occurs by the addition of a methyl (CH<sub>3</sub>) group to DNA, thereby often modifying the function of the genes.



MDxHealth uses a molecular (gene-based) technology to improve cancer diagnosis and treatment. Individual genes (DNA biomarkers) in the human body can become modified in the presence of cancer. MDxHealth has the ability to identify these modifications at the genetic level providing the physicians with a tool to aid in the diagnosis of cancer, assess the risk of recurrence (metastasis) of the cancer, and predict an individual patient's likely response to cancer treatment.

DNA methylation is a valuable tool for assessing cancer because methylated DNA biomarkers occur in almost all malignancies. The importance of DNA methylation in cancer was discovered in the 1990s. Gene methylation is a control mechanism that regulates gene expression in DNA and occurs when a methyl group is added to one of the four building blocks of DNA, a cytosine. In several diseases, however, the promoter regions that carry the instructions to produce an essential protein can be over- or hypermethylated, effectively inhibiting protein production. Hypermethylation of genes, such as tumor suppressor genes, is associated with the presence and development of most cancers. And while changes in DNA methylation were initially thought to be the result of cancerous transformations, it is increasingly believed that it plays an active, causative role. MDxHealth is built on the exclusive worldwide diagnostic rights on Johns Hopkins' methylation technology.

The pattern of gene hypermethylation in tumor cells is often specific to the tissue of origin and can be used to improve cancer detection, assess risk of recurrence, and predict a tumor's response to therapy.

### *Business Strategy: Focus on Urologic Cancers, successfully out-licensing others*

Over the past several years, MDxHealth has built a proprietary portfolio of hundreds of epigenetic biomarkers and related expertise. Its focus is on urologic cancers, namely prostate, bladder, and kidney. The Company's lead product is the ConfirmMDx® for Prostate Cancer test



which has been validated to help prevent unnecessary invasive repeat prostate biopsies on prostate cancer-free men, while also helping to identify men at increased risk for an aggressive form of the disease who may benefit from early detection and treatment. The Company's second marketed product is its non-invasive liquid biopsy SelectMDx™ for Prostate Cancer test, which the company obtained via its acquisition of NovioGendix in 2015. On page 21 we elaborate further on the liquid biopsy test. In bladder cancer, MDxHealth has developed an epigenetic assay named AssureMDx™ for Bladder Cancer that helps identify patients at risk for bladder cancer. MDxHealth will offer the AssureMDx™ test, a urine-based liquid based biopsy test, as a Laboratory Developed Test (LDT) on the US market, and as a CE-marked IVD kit in Europe. The Company plans to launch the AssureMDx™ LDT service test in the US in the second half of 2016.

MDxHealth currently has 33 direct sales representatives. The co-marketing partnerships with Bostwick and Miraca add an additional 40 partner sales reps, though these should not be considered as being devoted full-time to ConfirmMDx®. Rather, their key role is to introduce the MDxHealth sales rep to the client who will then take over the account management. The current sales team covers over 2,500 urologists who have placed an order, representing around 25% of the 10,000 urologists in the US.

For cancer outside of its urologic focus, the Company's strategy is to partner or out-license the commercialization of biomarkers and technologies. So far, MDxHealth has addressed the following key cancer types:

- **Colon:** In 2010, MDxHealth entered into an exclusive licensing agreement with Exact Sciences Corporation for stool-based screening of colorectal cancer. Under the terms of the agreement, Exact Sciences obtained exclusive, worldwide rights to use MDxHealth's NDRG biomarker in stool-based detection of colorectal cancer, as well as non-exclusive access to MDxHealth's MSP platform technology for use with those biomarkers. It is the



- first non-invasive screening test for colorectal cancer that analyzes both stool DNA and blood biomarkers. The test incorporates one of MDxHealth's epigenetic biomarkers and was FDA-approved August 2014. According to the latest investor presentation of Exact Sciences, a total of more than 108,000 Cologuard tests are sold in 2015 with more than 25,000 ordering physicians. For the next few years, a strong increase of the number of Cologuard tests are expected. The total addressable market is estimated to be 80 million tests. Exact Sciences has the capacity to process more than 1 million Cologuard tests per year. Exact Sciences has obtained FDA approval and CMS coverage, and launched its Cologuard® test in 2014H2. With the 2015Q3 figures, Exact Sciences published that it has sold for around USD 25 million in 2015 year-to-date. We expect a strong fourth quarter, with total revenues USD 45-50 million. MDxHealth receives a low to mid single digit royalty on sales of Cologuard.
- **Brain:** MDxHealth holds exclusive rights to the MGMT biomarker, which has been extensively studied in glioblastoma and related brain cancers. Studies on thousands of clinical trial patients have demonstrated that methylation of MGMT can help oncologists identify newly diagnosed glioblastoma patients that are likely to respond to the most commonly used class of brain cancer drugs (alkylating agents). MDxHealth's PredictMDx® for Glioblastoma (MGMT) test was included in the 2013 National Comprehensive Cancer Network (NCCN) Senior Adult Oncology Guidelines and has been awarded a Tier 1 reimbursement code, 81287, by American Medical Association (AMA), which provides a clear basis for comprehensive reimbursement. MDxHealth's strategy has been to partner with leading pathology service providers, such as the Laboratory Corporation of America (LabCorp) in the US, Teva Pharmaceutical Industries in Israel, and HistoGeneX in Belgium, to distribute the MGMT test to clinicians.



- **Cervical:** In 2014, MDxHealth granted oncgnostics GmbH of Jena, Germany, a limited, non-transferable, non-exclusive, worldwide license for its patented methylation specific PCR (MSP) technology for diagnostic applications in cervical cancer. In return, MDxHealth will receive upfront and milestone payments, and royalties on net sales. oncgnostics will utilize MDxHealth's epigenetic technology for the accurate and sensitive assessment of DNA methylation markers included in its GynTect® test, which is intended for the early detection of cervical neoplasias that may progress to cancer.





## ConfirmMDx® for Prostate Cancer

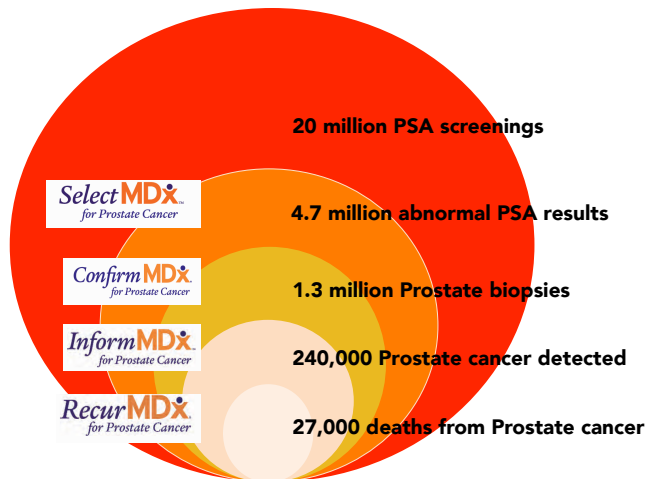
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Prostate cancer is globally recognised among the greatest unmet clinical needs for men over 40. A number of compelling clinical factors make it imperative to improve the diagnostic toolset. Prostate cancer is now viewed as not one disease, but a spectrum of diseases. It presents in many different forms, its onset controlled by small genetic changes, which may vary from male to male. The disease spectrum ranges from non-life threatening (indolent) forms to life threatening illnesses, with variations occurring because genetic differences between individuals make for differences in their cancers. Since 1990 treatment has relied on the Prostate-Specific Antigen (PSA) test, biopsies and Gleason scores to diagnose and stage prostate cancers. However, the PSA screening test has been roundly criticized by medical opinion leaders as flawed, inconclusive and even dangerous. Approximately 70-75% of men diagnosed with prostate cancer through PSA screening have an indolent form of prostate cancer, which may not require treatment, and 25-30% have life-threatening illnesses, which require treatment.

Annually, there are approximately 20 million men screened by the PSA test, resulting in approximately 4.7 million abnormal PSA test results ( $>4.0$ ), leading to over 1.3 million biopsy procedures. Of these, 240,000 are diagnosed with prostate cancer, with 27,000 annual deaths.<sup>1</sup> Approximately USD 4.4 billion is spent annually on screening, diagnosing and staging, and an additional USD 9.9 billion is spent annually on treatment of these patients, totaling nearly USD 15 billion being spent annually on prostate cancer in the US alone. Annually, over USD 4 billion is spent on pharmaceuticals for prostate cancer, which is expected to increase to USD 8.7 billion by 2019.<sup>1</sup>

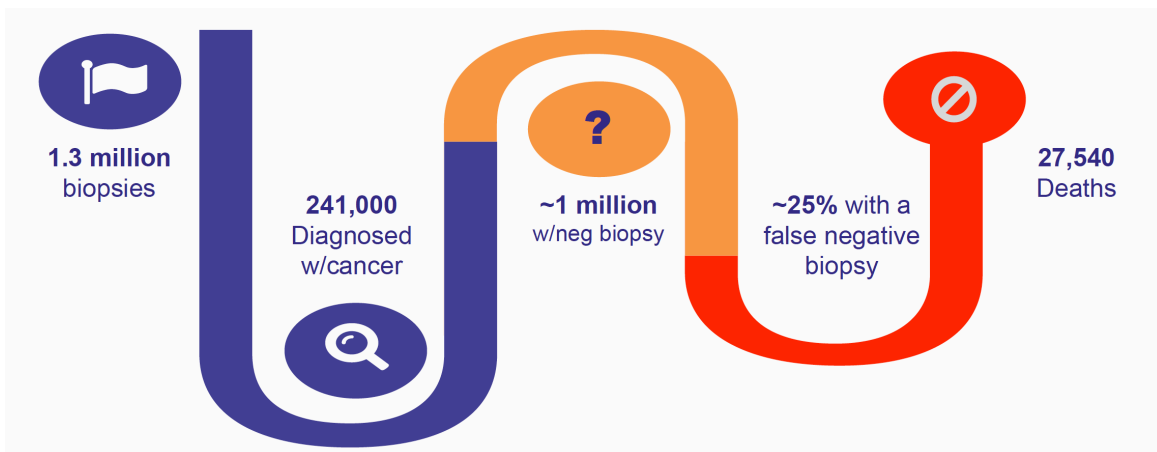
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<sup>1</sup>Aubry et al; Budget Impact Model-Epigenetic Assay Can Help Avoid Unnecessary Repeated Prostate Biopsies and Reduce Healthcare Spending, American Health and Drug Benefits 2013



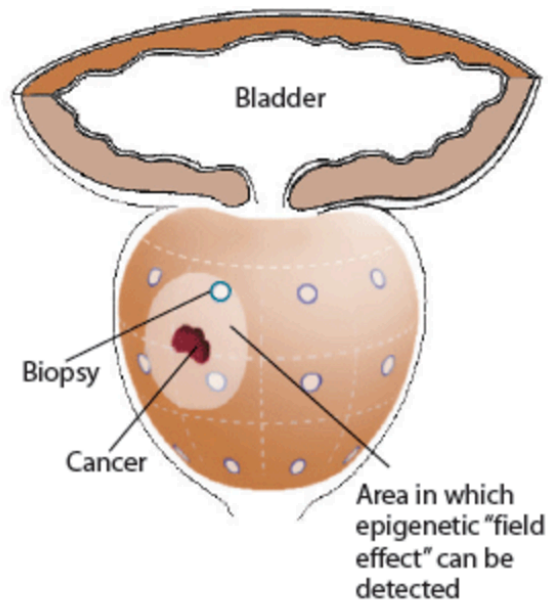
Source: Van Leeuwenhoek, MDxHealth

Over 975,000 American men are diagnosed with a negative prostate biopsy each year; however approximately 25% of those men receive false-negative results.





Under the current standard of care, prostate biopsy procedures consisting of 10-12 needle biopsy cores only sample approximately 1% of a man's prostate. This approach leaves men at risk of undetected cancer, leading to a high rate of repeat biopsies, even on cancer-free men. There is an unmet medical need for a clinically effective diagnostic test to address this dilemma. ConfirmMDx® for Prostate Cancer is able to detect an epigenetic field effect or "halo" associated with the cancerization process at the DNA level. This "halo" around a cancer lesion can be present despite cells having a normal appearance under the microscope. Thus, ConfirmMDx® aids urologists in identifying truly negative men who may forego an unnecessary repeat biopsy procedure. Performance of the proprietary ConfirmMDx® genes and technology has been published in 45 studies on over 5,000 patients tested.



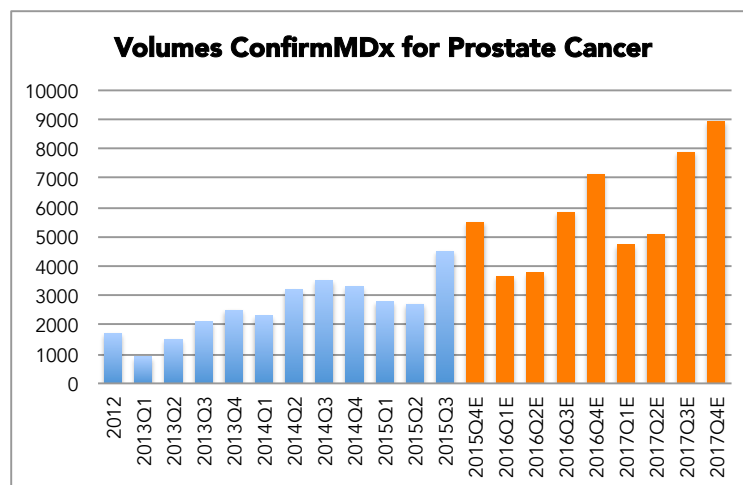
Source: *Oncology Journal*, May 15 2013



Currently there are several prostate cancer tests available on the market that are used in the decision making process of a urologist:

- When to perform a biopsy: SelectMDx™, Phi, ProgenSA PCA3, 4Kscore
- When to re-biopsy: ConfirmMDx, ProgenSA PCA3, 4Kscore, Phi
- To treat or not to treat: InformMDx, Oncotype DX, Prolaris, Decipher

The ConfirmMDx® test has qualified for Medicare reimbursement as of November 3, 2014 and is also available to more than 152 million insured lives via private health insurance plans. To date over 35,000 ConfirmMDx® tests have been ordered by approximately 2,500 urologists since launch in 2012. In our view, ConfirmMDx® has clearly proven itself, by distinguishing patients who have a real negative biopsy from men that showed to have undetected. For the coming quarters we expect a further increase in volumes rising to more than 30,000 sold tests per year after 2017.



Source: MDxHealth, Van Leeuwenhoek Institute

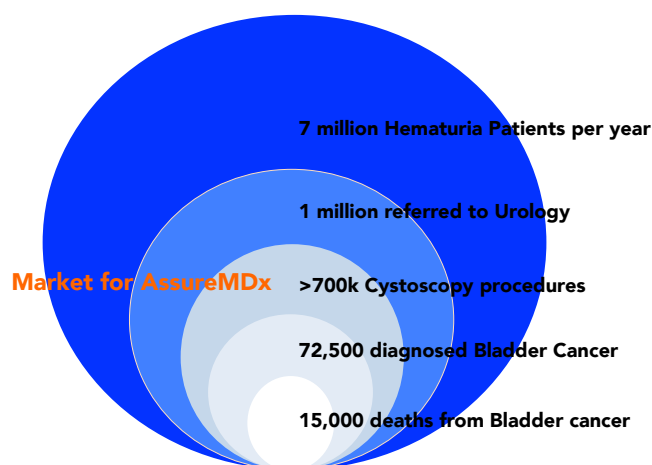


ConfirmMDx<sup>®</sup> for Prostate Cancer is instrumental to distinguish men with a true negative biopsy from those men that may have undetected cancer missed in a previous biopsy. It provides urologists with actionable information firstly by ruling out prostate-cancer-free men from undergoing unnecessary repeat biopsies and screening procedures and secondly ruling in high risk men with a previous negative biopsy result who may be harboring undetected cancer. These men would benefit from a repeat biopsy and treatment. ConfirmMDx<sup>®</sup> is an assay that consists of three biomarkers that detects the level of methylation in three separate genes (GSTP1, APC and RASSF1) that are associated with the presence of prostate cancer cells. GSTP1 is the most studied epigenetic biomarker associated with prostate cancer diagnosis due to its high sensitivity and specificity. Methylation of APC and RASSF1 genes are often found in prostate cancer and have demonstrated a field effect, aiding in the identification of biopsies with false negative histopathological results.



## Bladder Cancer: Second target market

Bladder cancer is the sixth most common cancer worldwide and has the highest per patient medical costs of any cancer. There will be an estimated 75,000 new cases diagnosed in the US in 2014 at an incidence rate of approximately 3%. Over 90% of bladder cancers are transitional cell carcinomas. Hematuria can be continuous or intermittent and either visible (gross) or microscopic. Screening studies have shown that in up to 20% of cases of gross hematuria, patients go on to be diagnosed with Urothelial Cancers, while only 5% of cases of microscopic hematuria turn out to be UCs such that the 2001 American Urological Association (AUA) Best Practice Policy on Asymptomatic Microscopic Hematuria recommends that all patients presenting with gross hematuria, particularly those without evidence of infections, should undergo full urologic work-up. This procedure includes provision of a urine sample for testing with cytology (manual examination under a microscope) in conjunction with cystoscopy (insertion of a flexible scope into the urinary tract). Some patients are also examined by means of upper tract imaging, typically with a CT scan or ultrasound imaging. Cytology tends to have low sensitivity (true positives), particularly at the earlier stages of cancer, and is subject to user variability. Importantly, bladder cancer is one of the most expensive cancers to treat, given more than half of all early stage bladder cancer patients will recur in the three years following treatment.





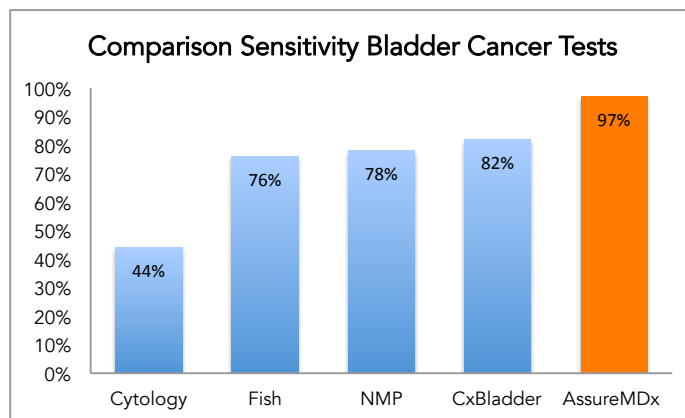


The market for hematuria testing and monitoring represents a noteworthy commercial opportunity. In the US, an estimated USD 1 billion is spent investigating hematuria each year, with approximately one million people referred to an urologist annually. For patients treated for early stage bladder cancer, a high recurrence rate means continual monitoring at an estimated extra cost of USD 1-2 billion for those requiring regular follow-on testing.

Concurrent to its liquid biopsy test SelectMDx™ for Prostate Cancer, MDxHealth is developing a urine based liquid biopsy test AssureMDx™ for Bladder Cancer. It has entered into a license and collaboration agreement with Erasmus University Medical Center Rotterdam (Erasmus MC) in The Netherlands. AssureMDx is being validated in a, multi-center, two-arm, prospective randomized clinical trial financed by three organisations, including Erasmus MC. A total 435 patients will be enrolled into this trial (2,000 urine samples). The study is designed to assess the test's ability to safely reduce the number of invasive cystoscopies performed during follow-up of patients with NMIBC with a low/intermediate risk of recurrence or progression. The study will also examine whether the addition of urine tests to follow-up of patients with higher risk of recurrence and progression leads to earlier detection of potentially dangerous recurrences. All urine samples will be tested using AssureMDx™ assay. Earlier in 2015, MDxHealth announced positive topline data on its biopsy test for bladder cancer. In a cohort of 154 patients with hematuria, the company's liquid biopsy urine test for bladder cancer showed a negative predictive value (NPV) of 98.3%. The test will be offered as an LDT service on the US market and a CE-marked IVD kit in Europe.

Van Leeuwenhoek's analysis shows AssureMDx™ comparing favourably against Abbott's Urovysion in separate large-scale clinical trials, each with over 400 patients as well as to Pacific Edge's CxBladder. Urovysion was launched 2001 as an aid in monitoring bladder cancer and in 2005 to aid diagnosis. The test uses Abbott's FISH fluorescence technology to detect chromosomal abnormalities. In a trial conducted by Abbott, Urovysion showed an overall

sensitivity of 68.6% and specificity of 77.7% in the detection of bladder cancer in 479 patients presenting with hematuria. CxBladder showed an overall sensitivity of 82% and specificity of 85%. This compared with a sensitivity of 97% and specificity of 91% for AssureMDx™. We note some caution must be used with the comparisons, given tests were not compared head to head.



Source: Company Reports, MDxHealth

There are a number of commercially available IVD tests to detect bladder cancer in hematuria patients, although the specificity and sensitivity of such tests is variable. NMP22 has been widely adopted as an adjunct to cytology. However, no other test is being used as standard, as none has been shown to be more accurate than the existing benchmark.



Test/distributor	Methodology	Advantages	Limitations
<b>UroVysion/Abbott</b>	FISH fluorescence in situ hybridisation assay; detects chromosomal abnormalities	Higher sensitivity than cytology across all stages and grades	Requires a large specimen sample. Poor positive predictive value
<b>NMP22 ELISA</b>	Measures levels of protein NMP22, which is elevated in bladder cancer patients	Higher sensitivity than cytology for grade I/II	Low specificity; interference from benign urinary tract conditions
<b>NMP22 BladderChek</b>	Point of care test with 30 minute turnaround.	Improves detection vs cytology in cases of recurrent cancer.	Relatively high rate of false positives
<b>BTA Stat/Polymedco</b>	POC, detects human complement factor H related protein	Immediate result	High rate of false positive results in cases of co-existing genitourinary conditions
<b>BTA Trak/Polymedco</b>	Lab based immunoassay	Higher sensitivity than cytology for low grade tumors	High rate of false positive results in cases of genitourinary conditions
<b>ImmunoCyt</b>	Lab based immunofluorescence assay	Relatively high sensitivity in some patient groups	High rate of false positive results in cases of genitourinary conditions
<b>UBC/IDL Biotech</b>	Measures soluble fragments of cytokeratins 8 and 18. Cytokeratins are characteristic of epithelial cells	More accurate at detecting CIS than cytology	Overall performance not superior to cytology. Ongoing testing

Source: Company Reports, Van Leeuwenhoek Institute



Comparable with the liquid biopsy test SelectMDx™ for Prostate Cancer, the AssureMDx test for Bladder Cancer is being developed for the US market as a laboratory-developed test (LDT). LDTs are a class of in vitro diagnostic test manufactured, developed and validated for use in a single laboratory. The CMS (Centers for Medicare and Medicaid Services) regulates clinical laboratories that carry out diagnostic testing through the authority of CLIA (Clinical Laboratory Improvement Amendments), which establishes quality standards for clinical lab testing and a certification programme for labs that perform testing using IVD devices. Under CLIA requirements, the analytical validity of the LDT is evaluated, whereas the FDA's PMA requirements assess the clinical validity of a test. The distinction is that analytical validity defines the ability of the test to detect or measure the analytes in question, whereas clinical validity is the ability to accurately diagnose or predict the risk of a particular clinical outcome. In 2011 MDxHealth received CLIA regulatory approval for its Irvine, CA laboratory as well as its lab in Liege, Belgium. The company has also received the CAP (College of American Pathologists) signification accreditation in the US.



## Liquid Biopsy: The new “holy grail” in diagnostics

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Liquid biopsy tests are gaining traction within the industry as a viable alternative to traditional screening methods for cancer. Although liquid biopsy applications are still in their early days, the potential uses for the technology is expected to grow quickly in the next few years. The SelectMDx™ test was designed to address an unmet need in the identification of men at risk for prostate cancer and importantly, the stratification of patients at risk for potentially lethal high-grade prostate cancer compared to those with low-grade cancer. In clinical studies, SelectMDx™ has been shown to outperform the existing PCA3 assay, improving the information available to urologists seeking to further reduce unnecessary invasive biopsy procedures.

Liquid biopsy technology has a lot of potential applications and study results have shown promise for these new testing options. A urine-based test could provide a less-expensive and less-invasive way to monitor patients throughout treatment, help individuals avoid additional surgeries and help clinicians make better decisions about which procedures or drugs are the best fit for patients. The total market for liquid biopsies is estimated to be more than USD 32 billion, with oncology applications taking more than USD 28 billion. Within oncology, early cancer detection would be the largest opportunity with a expected market size of USD 15 billion based on USD 300 per test and 50 million people eligible for testing yearly. Oncologists would then employ such liquid biopsy tests to patients with clinical risk factors for cancer and could potentially expand utilisation with lower risk populations over time.

Liquid biopsies are already commercially available for therapy selection and treatment monitoring with an increasing number of laboratories launching cancer recurrence monitoring tests in the near future. To date, MDxHealth has entered into an agreement with Dutch based DDL Diagnostic Laboratory for the manufacturing of the SelectMDx™ IVD kits. DDL was the largest service provider of the existing prostate cancer PCA3 test in the Netherlands, and recently announced its decision to discontinue processing of the PCA3 assay.



As a result, through its state-of-the-art laboratory in Nijmegen, The Netherlands, MDxHealth anticipates that it will be the principal provider of urine-based prostate cancer testing for patients with elevated PSA levels. The novel biomarkers that make up SelectMDx™ were discovered by Prof. Dr. Jack Schalken, original developer of the PCA3 assay.

Assay Characteristics	SelectMDx	ProgenSA PCA3
Company	MDxHealth	Hologic
Specimen	Urine	Urine
Characteristics	qPCR assay 2 mRNA biomarkers DLX1, HOXC6	mRNA PCR 1 biomarker PCA3
Regulatory	LDT/CLIA/CE	FDA/CE
PCR Instrument	All open PCR instruments	Only of DTS from Hologic
List price (USD)	500	500
Assay Performance (AUC)	AUC 0.90	AUC 0.65
Comments	Indicates risk for high grade cancer	Indicates risk for cancer (any grade)

Source: MDxHealth

In clinical studies, SelectMDx™ has been shown to outperform PCA3 in the identification of men at increased risk for aggressive prostate cancer, thereby improving the information available to urologists deciding on the need for a prostate biopsy while also aiding to identify men a sufficiently low risk for prostate cancer who may avoid unnecessary invasive biopsy procedures. See also the table above.

As mentioned before, MDxHealth is also developing a urine-based, liquid biopsy test called AssureMDx™ for Bladder Cancer. The test will be offered as an LDT service on the US market and a CE-marked IVD kit in Europe and is expected to be on the market early 2016 in Europe and 2016H2 in the US.





## SWOT

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### Strengths

Strong management with extensive relevant technical, commercial and financial

Focus on urological cancers with increasing revenues from marketed tests

Covered by many health plans, as well as Medicare

Well positioned in “next generation” market of non-invasive liquid biopsy tests

### Weaknesses

Operating losses accumulating year-on-year

Current and future revenues still largely dependent on sales of one test: ConfirmMDx for Prostate Cancer

MDxHealth relies on limited number of parties for manufacture and supply of its laboratory instruments

### Opportunities

With the ageing population, cancer incidence will rise substantially

Personalized medicine important driver for diagnostics

Increasing low risk income from successful sales of Cologuard (Exact Sciences)

### Threats

Increased competition from competitors developing novel or improved methods for detecting prostate cancer

Failure to convince majority of urologists to use ConfirmMDx® and SelectMDx™



## Patent Position

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With its elaborate patent portfolio, we believe that MDxHealth has a competitive position in molecular cancer diagnostics. MDxHealth holds exclusive rights to a broad array of issued and pending patents in multiple countries worldwide covering the methylation technology platform, next-gen epigenetics technology platforms and multiple methylation genetic markers. Many of its epigenetic technology patents are in-licensed from academic and commercial collaborators, including Johns Hopkins University, City of Hope, Epigenomics AG, Vrije Universiteit Medisch Centrum, Lovelace Respiratory Research Institute. Through the company's internal R&D programs, together with its NXTGNT (Epi)genomics research joint-venture with University of Gent and other academic and commercial collaborations, MDxHealth continues to be at the forefront of researching and understanding the link between cancer and methylation (epigenetics), and how this link can be translated into meaningful clinical and pharmaco molecular diagnostic products and services.

The table below shows a selected summary of MDxHealth's patent portfolio, broken into two groups of patents. The first group includes foundational molecular technology patents certain of which have issued in the U.S., Japan, Canada, Israel and the major European countries. The second group includes cancer specific biomarker panels for tumor detection and profiling and includes over 10 granted patents and over 20 international pending patents.

MDxHealth's methylation (epigenetic) detection patents are exclusively in-licensed from Johns Hopkins University and from the Lovelace Respiratory Research Institute. Patents on the MSP technology, which have been granted in key markets such as Europe, United States, Canada, and Japan, will begin to expire over the next years, including expirations in the US in 2016 and in Europe in 2017. The MDxHealth methylation technology portfolio also comprises patent families on various improvements on MSP technology (\*non-exclusive license from third parties). There are various patents covering methylation detection technologies and their duration varies per



region and per patent. The patents of the Company have a life of 20 years and the expiry date may vary by region in the world.

### *Patent Overview Epigenetic Detection Technology MSP*

	Title	Patent Reference No
<b>MSP Technology</b>	Method of detection of methylated nucleic acid using agents which modify unmethylated cytosine and distinguish modified methylated and non methylated nucleic acids	WO97/46705
	Nested Methylation Specific Polymerase Chain Reaction Cancer Detection Method	WO 02/18649
<b>Amplifluor Technology</b>	Nucleic acid amplification oligonucleotides with molecular energy transfer labels and methods based thereon	WO98/02449
<b>MethyLight* technology</b>	Process for high throughput DNA methylation analysis	WO 00/70090
<b>Heavy Methyl* technology</b>	Highly sensitive method for the detection of cytosine methylation patterns	WO 02/072880
<b>Microarray* technology</b>	Method for determining the degree of methylation of defined cytosines in genomic DNA in the sequence context 5'-CpG-3	WO 02/18632
	Method for producing complex DNA methylation fingerprints	WO99/28498
<b>Scorpion* patent rights</b>	Method for detection of cytosine methylations in DNA	EP 1654388

***\*) non-exclusive license from third parties***



## Financials

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For the nine months ended 30 September 2015, revenue from continuing operations was up 44% to USD 11.9 million (2014 9M: USD 8.3 million) with strong sales from ConfirmMDx<sup>®</sup>, that comprised 85% of the third quarter revenue. Volumes of ConfirmMDx<sup>®</sup> in 2015Q3 rose 30% to over 4,500 tests compared to 3,500 tests in 2014Q3 and increased 67% over 2015Q2 volume of 2,700 tests. In total, more than 35,000 ConfirmMDx<sup>®</sup> tests have been ordered by over 2,500 urologists since its launch in 2012. Net loss for the first nine months of 2015 decreased by USD 1.9 million to USD 10.3 million. The higher sales revenues were offset by higher cost of sales due to increasing volumes for ConfirmMDx<sup>®</sup> for Prostate Cancer.

MDxHealth also was successful in adding six additional health plan organizations including UPMC Health Plans, Tufts Health Plan, BCBS of Massachusetts and BCBS of Illinois. Furthermore, the Company acquired Netherlands based Novigendix, strengthening its uro-oncology product portfolio with a validated non-invasive liquid biopsy test for prostate cancer, to be marketed as SelectMDx<sup>™</sup>, that is ready for commercialization in the US and Europe.

The company's cash position was USD 35.1 million as of September 2015. The average cash burn in the first nine months of 2015 was USD 1.5 million per month. In June 2015, MDxHealth successfully completed a USD 30.1 million capital raise. Combined with the increasing sales from ConfirmMDx<sup>®</sup> for Prostate Cancer, increasing royalty income from Cologuard and the near-term revenue potential from its novel non invasive tests SelectMDx<sup>™</sup> for Prostate Cancer and AssureMDx<sup>™</sup> for Bladder Cancer, we believe that the company has enough cash to further increase its sales and marketing efforts, and finance the further development costs of its product portfolio.

Since its IPO in 2006, the Company has raised up to EUR 130.6 million.



For 2015FY we expect revenues to amount to USD 18 million, which is within the range of USD 16-20 million that MDxHealth has provided as guidance. In the last few years, Cost of goods sold (COGS) that includes laboratory labor, material and overhead has decreased substantially from 77% in 2013 to Cost of goods sold is expected to gradually reduce from 55% last year to 31-35% in the next few years. For the longer term, we expect the gross margin to improve further to 75%. Most important costs are associated with selling and marketing, which we expect to exceed total revenues in 2015. In 2016, we expect SG&A as a percentage of revenues will decrease substantially, and to be below 80% after 2017. We expect the company to reach near break even in 2017. For the longer term we estimate the company will reach an EBIT margin of 50-55%.

#### *Financial Summary (USD million)*

Profit&Loss Statement	2014A	2015H1A	2015E	2016E	2017E
Revenues	11.671	7.860	18.000	32.000	54.000
COGS	(6.453)	(2.836)	(6.700)	(10.000)	(13.500)
Gross Profit	5.218	5.024	11.300	22.000	40.500
R&D Costs	(2.376)	(1.209)	(4.200)	(3.800)	(3.500)
SG&A	(18.321)	(9.714)	(22.000)	(31.000)	(41.000)
Operating Profit/(Loss)	(15.342)	(5.475)	(14.900)	(12.800)	(4.000)
Financial Income/(Loss)	0.086	(0.009)	-	-	-
Income Taxes	0	0	0	0	0
Net Profit/(Loss)	(15.256)	(5.484)	(14.900)	(12.800)	(4.000)



### *Consolidated Statement of Cash Flows*

	2014A	2015H1A	2015E	2016E	2017E
<b>Cash flow from operating activities</b>	(18.513)	(7.681)	(16.900)	(17.500)	(10.000)
<b>Cash flow from investing activities</b>	(1.256)	(0.727)	(1.000)	(1.000)	(0.800)
<b>Cash flow from financing activities</b>	14.666	30.102	30.100	0.000	0.000
<b>Cash and cash equivalents at beginning of the period</b>	24.683	18.897	18.897	30.897	12.397
<b>Net change in cash and cash equivalents</b>	(5.786)	21.694	12.000	(18.500)	(10.800)
<b>Cash and cash equivalents at end of the period</b>	18.897	40.444	30.897	12.397	1.597





## Valuation

We arrive at a value of EUR 395 million for MDxHealth using a risk adjusted Net present value based on existing and future income from ConfirmMDx®, the liquid biopsy tests in Prostate Cancer and Bladder Cancer (SelectMDx™ and AssureMDx™) and the expected royalty income from Cologuard (Exact Sciences). We model sales and cash flow up until 2025. Our forecast includes sales of ConfirmMDx® for Prostate Cancer, SelectMDx™ and AssureMDx™ reaching revenues by 2025 of USD 260 million, USD 130 million and USD 40 million respectively, and reaching market shares in the subsequent markets of 8-12%.

### *Sales forecast and valuation ConfirmMDx® (USD)*

Year	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Price	1300	1333	1366	1400	1435	1471	1508	1545	1584	1624
Number of tests	20400	26700	37500	47578	62090	84028	102346	122638	139122	160532
Market share	1.6%	2.0%	2.8%	3.5%	4.5%	6.0%	7.2%	9%	10%	11%
Tests US (million)	1.30	1.32	1.34	1.36	1.38	1.40	1.42	1.44	1.46	1.49
Revenues (million)	26.52	35.58	51.22	66.61	89.10	123.59	154.30	189.51	220.36	260.63
Net Margin 40%	10.61	14.23	20.49	26.64	35.64	49.44	61.72	75.80	88.14	104.25
WACC 11%	1.00	0.90	0.81	0.73	0.66	0.59	0.53	0.48	0.43	0.39
NPV (million)	10.61	12.82	16.63	19.48	23.48	29.34	33.00	36.51	38.25	40.75
<b>Total NPV (million)</b>										<b>261</b>
<b>Value per share (EUR)</b>										<b>5.25</b>



### Sales forecast and valuation SelectMDx™ (USD)

Year	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Price	350	358	367	377	386	365	406	416	426	437
Number of tests	1800	11500	28000	44800	75200	105200	131200	188000	244000	300000
Market share	0.04%	0.2%	0.6%	1.0%	1.6%	2.2%	2.8%	4.0%	5.2%	6.4%
Tests US (million)	4.7	4.7	4.7	4.7	4.7	4.7	4.7	4.7	4.7	4.7
Revenues (million)	0.63	4.13	10.30	16.89	29.05	41.66	53.25	78.22	104.05	131.13
Net Margin 35%	0.22	1.44	3.60	5.91	10.17	14.58	18.64	27.38	36.42	45.90
WACC 11%	1.00	0.90	0.81	0.73	0.66	0.59	0.53	0.48	0.43	0.39
NPV (million)	0.22	1.30	2.92	4.32	6.70	8.65	9.96	13.19	15.80	17.94
Total NPV (million)										81
Value per share (EUR)										1.63

### Sales forecast and valuation AssureMDx™ (USD)

Year	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Price	500	500	500	500	500	500	500	500	500	500
Number of tests	-	8500	14566	20800	26520	34006	43357	53069	65613	75291
Market share	0.0%	1.2%	2.0%	2.8%	3.5%	4.4%	5.5%	6.6%	8.0%	9.0%
Tests US (million)	0.7	0.714	0.728	0.743	0.758	0.773	0.788	0.804	0.820	0.837
Revenues (million)	4.25	7.28	10.40	13.26	17.00	21.68	26.53	32.81	37.65	4.25
Net Margin 35%		4.25	7.28	10.40	13.26	17.00	21.68	26.53	32.81	37.65
WACC 11%		2.13	3.64	5.20	6.63	8.50	10.84	13.27	16.40	18.82
NPV (million)		4.25	7.28	10.40	13.26	17.00	21.68	26.53	32.81	37.65
Total NPV (million)										52
Value per share										1.05



We also factor in royalty income estimates for Cologuard (Exact Sciences) of up to USD 20 million, based on potential total revenues for Cologuard in 2025 of USD 1.2-1.5 billion and an estimated royalty percentage of 4%.

### *Sales forecast and valuation: Cologuard Royalty Stream*

Year	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Price per test	483	493	503	513	523	533	544	555	566	577
Number of tests	154000	215600	301840	422576	591606	798669	1078203	1455574	1965024	2652783
Market share	0.19%	0.27%	0.38%	0.53%	0.74%	1.00%	1.35%	1.82%	2.46%	3.32%
addressable market in tests	80	80	80	80	80	80	80	80	80	80
Revenues (million)	77.00	107.80	150.92	211.29	295.80	399.33	539.10	727.79	982.51	1326.39
Margin 50%	26.95	37.73	52.82	73.95	103.53	139.77	188.69	254.73	343.88	464.24
royalty and milestones 4%	1.00	1.00	2.11	2.96	4.14	5.59	7.55	10.19	13.76	18.57
WACC 10%	1.00	0.91	0.83	0.75	0.68	0.62	0.56	0.51	0.47	0.42
	1.00	0.91	1.75	2.22	2.83	3.47	4.26	5.23	6.42	7.88
<b>Total NPV (million)</b>										<b>39</b>
<b>Value per share</b>										<b>0.79</b>

In our valuation model for MDxHealth, we do not include additional pipeline products as well as potential revenues outside of the US. Additional revenues from new test and other geographical areas offer additional upside potential. **Applying a WACC of 11%, we value MDxHealth at EUR 8.72 per share (based on a EUR/USD exchange rate of 1.10).**



## Management Capabilities

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Seasoned innovators of molecular diagnostics in urological cancers with a vast experience in the commercialization of CLIA-based tests in the US are building and managing MDxHealth. The company is led by an experienced board and management team, which has been responsible for the commercialization of the first test in prostate cancer (ConfirmMDx®) and the subsequent increase of revenues from marketed molecular tests in urological cancers.

### Management Team

#### Jan Groen, PhD, President and Chief Executive Officer

Dr. Jan Groen joined MDxHealth in 2010 and has more than 30 years of experience in the clinical diagnostics industry, with a particular focus on emerging technologies, product development and commercialization. Dr. Groen was previously the President of Agendia, Inc. and COO of Agendia B.V., responsible for their United States and European diagnostic operations, respectively. Prior to this, he served as VP of Research & Development at Focus Diagnostics, Inc., a subsidiary of Quest Diagnostics, in California. Dr. Groen has held numerous management and scientific positions at ViroClinics B.V., the Erasmus Medical Center, and Akzo-Nobel. Dr. Jan Groen is a supervisory board member of IBL International B.V. Dr. Groen holds a Ph.D. degree in Medical Microbiology from the Erasmus University Rotterdam, a BSc in Clinical Laboratory Studies and has published more than 125 papers in international scientific journals in the field of clinical diagnostics.

#### Christopher Thibodeau, Executive Vice President and Chief Commercial Officer

Mr. Thibodeau brings over 20 years of commercial leadership experience, principally in the life sciences and cancer diagnostics industry. As Chief Commercial Officer, he is responsible for developing and executing MDxHealth's key strategic sales & marketing and business development initiatives. Prior to joining MDxHealth, Mr. Thibodeau served as Senior Director of



Marketing at Agendia Inc., Vice President of Sales and Marketing for Numira Biosciences, National Director of Sales US LABS (an industry leader in cancer diagnostic and genomic testing services); and sales and marketing management roles at Ventana Medical. Mr. Thibodeau holds a BA degree from the East Stroudsburg University in Pennsylvania and studied at the Faculté des Lettres in Nancy, France.

### **Joseph Sollee, Vice President Corporate Development and General Counsel**

Mr. Sollee has provided legal counsel to MDxHealth since its inception in 2003, and in April 2008 joined the management team. Prior to joining the Company, Mr. Sollee served as Special Counsel with the law firm of Kennedy Covington (now K&LGates), where he led the Life Sciences Practice Group. Mr. Sollee has more than 10 years of experience in the biotech industry, and has held senior legal and management positions at Triangle Pharmaceuticals and TherapyEdge. In addition, he has practiced as a corporate attorney in the Washington D.C. legal firm Swidler & Berlin and as an investment banker at Smith Barney in New York. Mr. Sollee received a Juris Doctorate in Law and a Masters degree in International Law from Duke University, a BA degree from Harvard University, and has been awarded New York, Washington D.C. and North Carolina legal bar certifications.

### **Francis Ota, Executive Vice President of Finance**

Mr. Ota served as a Senior Finance Executive with a number of leading healthcare companies in the U.S. He recently served as CFO of Captek Holdings, a specialty pharmaceutical company. Prior to that, he was Senior Director of Finance at Focus Diagnostics, Inc. a CLIA service laboratory acquired by Quest Diagnostics in 2006. Mr. Ota also held senior finance roles with Medtronic and Hewlett Packard. Francis earned a Master in Business Administration (MBA) from the Haas School of Business, University of California, Berkeley, and a Bachelor of Science in Finance and International Business from Leeds School of Business, University of Colorado.



## **Philip Ginsburg MD, Executive Vice President and Chief Medical Officer**

Dr. Ginsburg has over 20 years of commercial medical laboratory and urology experience. As Chief Medical Officer, he has overall responsibility for clinical strategy, including scientific and clinical affairs. Before joining the Company, Dr. Ginsburg was CMO at Toma Biosciences, Iris International, Inc. and President of Arista, a Personalized Medicine division of Iris acquired by Beckman Coulter, a subsidiary of Danaher Corporation. Prior to Iris International, he was CEO, Co-founder, and CMO of AlliedPath Inc., a CLIA certified molecular diagnostic laboratory, which was ultimately acquired by Iris International in 2010. Dr. Ginsburg also served as Senior Medical Director at Gen-Probe, Inc., where he was involved with the clinical development program for their PCA3 test for prostate cancer detection, and formerly served as a Medical Director at Quest Diagnostics. Dr. Ginsburg earned his medical degree at the University of Pretoria School of Medicine, South Africa, later specializing in clinical pathology at the University of Witwatersrand and the South African Institute of Medical Research.

## **Miriam Reyes CGMBS, CLSp, MBA, Senior Vice President of Laboratory Operations**

Ms. Reyes has over 20 years of experience in molecular diagnostics, specifically focused on R&D and lab operations. As Senior Vice President of Laboratory Operations, she is responsible for directing and managing all aspects of the California CLIA lab operations. Prior to joining MDxHealth, Ms. Reyes served as Director of Lab Operations at Agendia Inc. Ms. Reyes is a Certified Laboratory Specialist in Molecular Biology. She holds a Bachelor degree in Science as well as an MBA degree in Healthcare from the University of California in Irvine.





## Competitive Landscape

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During examination of comparable companies we looked at companies that are developing diagnostic tests in cancer, preferably urological cancers. Next to that we specifically looked for companies that are developing or already commercializing liquid biopsy tests. With evidence building that monitoring a tumor's mutational landscape can be done by evaluating circulating tumor DNA or circulating tumor cells, companies are increasingly looking to move into the liquid biopsy market. Companies like Biocept, Chronix Biomedical, Genomic Health, Trovagene and Myriad Genetics.

### *Peer Group Company Profiles*

#### *Biocept (NASDAQ:BIOC)*

Biocept develops and commercializes circulating tumor cell (CTC) and circulating tumor DNA (ctDNA), tests utilizing a standard blood sample. The Company's marketed tests are OncoCEE-BR for breast cancer CTC enumeration and analysis, OncoCEE-GA for gastric cancer CTC enumeration and analysis and OncoCEE-LU for non-small cell lung cancer, or NSCLC, CTC enumeration and analysis. Its marketed test and the tests under development for the enumeration and analysis of CTCs utilize its Cell Enrichment and Extraction, or CEE, technology, and the tests under development for the detection and analysis of ctDNA utilize the Company's CEE-Selector technology, each performed on a standard blood sample. The CEE technology is an internally developed, microfluidics-based CTC capture and analysis platform, with enabling features that change how CTC testing can be used by clinicians by providing real-time biomarker monitoring with a standard blood sample. The CEE-Selector technology enables mutation detection with enhanced sensitivity and specificity and is applicable to nucleic acid from CTCs or other sample types, such as blood plasma for ctDNA. The Company is also conducting research and development for additional OncoCEE CTC tests for other cancer types with a focus on large population solid tumor types, or cancers for which there are approved therapies that rely on





biomarker tests developed previously. The tests under development are OncoCEE-CR for Colorectal Cancer, OncoCEE-PR for Prostate Cancer, OncoCEE-ME for Melanoma, OncoCEE-DTC for Breast and Prostate Cancer and CEE-Selector, which is sequencing application for multiple cancer types.

### *Genomic Health (NASDAQ: GHDX).*

Genomic Health offers its Oncotype DX tests as a clinical laboratory service, where it analyzes the expression levels of genes in tumor tissue samples and provides physicians with a quantitative gene expression profile expressed as a single quantitative score, which it calls a Recurrence Score for invasive breast cancer and colon cancer, a DCIS Score for ductal carcinoma in situ (DCIS) and a Genomic Prostate Score (GPS) for prostate cancer. The Company's Oncotype DX platform utilizes quantitative genomic analysis known as reverse transcription polymerase chain reaction (RT-PCR), in standard tumor pathology specimens to provide tumor-specific information, or the oncotype of a tumor. The Company's Oncotype DX prostate cancer test measures the level of expression of 17 genes across four biological pathways to predict prostate cancer aggressiveness in men with low risk disease. Its offerings also include Oncotype DX Breast Cancer Test, Oncotype DX Colon Cancer Test and Oncotype DX Prostate Cancer Test. The Company's Oncotype DX platform utilizes quantitative genomic analysis known as reverse transcription polymerase chain reaction, or RT-PCR, in standard tumor pathology specimens to provide tumor-specific information, or the oncotype of a tumor. Its diagnostic approach correlates gene expression to clinical outcomes and provides an individualized analysis of each patient's tumor. The Company has built a diagnostic infrastructure that allows it to move from research into development through to processing actual patient samples in its clinical reference laboratory. The Company's technologies allow it to analyze tumor tissue samples in its clinical reference laboratory and provide physicians with genomic information specific to the patient's tumor. The Company analyzes tissues that are handled, processed and stored under routine clinical



pathology laboratory practices. The Company offers its Oncotype DX tests as a clinical laboratory service, where it analyzes the expression levels of genes in tumor tissue samples and provides physicians with a quantitative gene expression profile expressed as a single quantitative score. Its Oncotype DX prostate cancer test measures the level of expression of 17 genes across 4 biological pathways to predict prostate cancer aggressiveness in men with low risk disease. All of The Company's testing services are made available through its clinical reference laboratory located in Redwood City, California, which is accredited under the Clinical Laboratory Improvement Amendments of 1988, or CLIA, and by the College of American Pathologists. As of December 31, 2014, approximately 19,000 physicians in approximately 70 countries had ordered approximately 500,000 Oncotype DX tests. The Company has a direct commercial presence with employees and consultants in the United States and certain other countries, and its Oncotype DX breast and colon cancer tests are also available outside of the United States through a network of distributors.

#### *Chronix Biomedical (Private, Germany)*

Chronix Biomedical is a molecular diagnostics company developing blood tests primarily for cancer, including companion diagnostics and tests for detecting minimal residual disease. Chronix is scaling up to offer its pioneering tests through its own laboratories under CLIA certification in North America and the CE mark in Europe. The Company's initial product is a test to be used by cancer treatment centers and oncologists in the treatment of breast cancer patients. The Company has two issued patents on the detection of cell-free DNA and RNA, and four patents pending using next-generation sequencing technology for the detection of breast cancer, prostate cancer and colorectal cancer. Chronix is privately held with headquarters in San Jose, California, and laboratories in Göttingen, Germany and Brookings, South Dakota.



### *Exosome Diagnostics*

Exosome Diagnostics is a privately held company focused on developing and commercializing biofluid-based diagnostics. Exosome Diagnostics' non-invasive urine-based ExoIntelliScore™ Prostate test in development analyzes exosomal RNA for three biomarkers known to be expressed in men with high-grade prostate cancer. Using a proprietary algorithm that integrates this three-gene signature, ExoIntelliscore Prostate assigns an individualized risk score for patients that predicts the presence of high-grade (Gleason Score  $\geq 7$ ) prostate cancer. Exosome Diagnostics plans to proceed with a commercial launch of a laboratory developed test in the United States in 2016. The company also plans future submissions in Europe for a CE Mark, as well as for approval of an in vitro diagnostic version of the test with the U.S. Food and Drug Administration.

### *Myriad Genetics*

Myriad Genetics is engaged in the discovery, development and marketing of transformative molecular diagnostic tests. The Company operates through two segments: diagnostics and other. The diagnostics segment provides testing and collaborative development of testing that is designed to assess an individual's risk for developing disease later in life, identify a patient's likelihood of responding to drug therapy and guide a patient's dosing to enable optimal treatment, or assess a patient's risk of disease progression and disease recurrence. The other segment provides testing products and services to the pharmaceutical, biotechnology and medical research industries, research and development, and clinical services for patients, and also includes corporate services, such as finance, human resources, legal and information technology. Myriad offers diagnostic tests for a range of diseases, such as Myriad myRisk Hereditary Cancer test for hereditary breast cancer, hereditary ovarian cancer, hereditary pancreatic cancer, hereditary uterine (endometrial) cancer and hereditary colon cancer; Myriad myPlan Lung Cancer test for lung cancer; Myriad myPath Melanoma test for melanoma; Prolaris



test for prostate cancer, and Vectra DA for rheumatoid arthritis (RA). Prolaris® is a genomic test developed to aid healthcare professionals in predicting prostate cancer aggressiveness, in conjunction with clinical parameters such as Gleason score and PSA.

### *OncoCyte (part of BioTime: NYSE: BTX)*

OncoCyte Corporation, is developing PanC-Dx™, a novel non-invasive blood-based cancer screening test designed to detect the presence of various human cancers, including cancers of the breast, lung, bladder, uterus, stomach, and colon, during routine check -ups. OncoCyte has determined that the initial diagnostic tests that it plans to develop and commercialize will be laboratory developed tests (“LDTs”) that will be performed at a diagnostic laboratory that OncoCyte plans to operate. OncoCyte will need to receive certification for its planned diagnostic laboratory under the Clinical Laboratory Improvements Amendment (“CLIA”). The company intends to initially seek regulatory approval to market PanC-Dx™ in Europe before seeking regulatory approvals required to market the product in the U.S. and other countries. OncoCyte is a subsidiary of BioTime, a company in regenerative medicine and a clinical-stage biotechnology company.

### *Pacific Edge (NSX: PEB)*

Pacific Edge Limited) is a New Zealand based cancer diagnostic company that develops and sells molecular diagnostic tests based on biomarkers for the early detection and management of cancer. The company is developing and commercialising its range of Cxbladder bladder cancer tests. Its first commercial product, Cxbladder Detect, is now being actively marketed to physicians and clinicians in New Zealand, Australia, and the USA through the company’s wholly owned subsidiaries and selected commercial partners.



### *Trovogene (NASDAQ: TROV)*

Trovogene is a development-stage molecular diagnostic company that focuses on the development and commercialization of urine-based cell-free molecular diagnostic technology for use in disease detection and monitoring across a variety of medical disciplines. The Company's primary internal focus is to leverage its urine-based molecular diagnostic platform to facilitate improvements in the field of oncology, while the Company's external focus includes entering into collaborations to develop the Company's technology in areas, such as infectious disease, transplant medicine and prenatal genetics. The Company's fundamental cell-free molecular diagnostic platform is also known as 'Precision Cancer Monitoring' (PCM) platform. The Company's cell-free BRAF test is a laboratory developed test (LDT), designed to detect and monitor this mutation in metastatic cancer patients with biopsy-proven V600E BRAF mutation in their tumor. It is a commercial assay within the Company's cancer monitoring portfolio, which is performed using a droplet digital polymerase chain reaction (ddPCR) platform. BRAF is a human gene encoding a cellular growth signaling protein, which has been shown to be mutated in certain cancers. This test confirms the presence of a BRAF V600E mutation in urine DNA at levels of greater than or equal to 0.03% in comparison to the wild-type BRAF genes. The Company's KRAS mutation assay detects and monitors the seven commonly encountered mutations of the KRAS oncogene, and is a multiplexed oncogene mutation assay utilizing sequencing as a mutation detection platform. This mutation commonly occurs in patients diagnosed with either colorectal cancer, pancreatic cancer, or lung cancer. The Company has a range of programs to evaluate the detection and monitoring of EGFR mutational status in lung cancer patients. A focus of these studies is the emergence of the resistant mutation EGFR T790M in lung cancer patients. The Company's collaborators for this program include Memorial Sloan Kettering Cancer Center, City of Hope Comprehensive Cancer Center, UC San Diego Moores Cancer Center, and Genomac Research Institute



## Glossary

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<i>Alkylating agents</i>	<i>A class of oncology therapeutic drugs. Alkylating agents stop tumor growth by making DNA strands unable to uncoil and separate, a necessary step in DNA replication and tumor growth.</i>
<i>Assay</i>	<i>A term for a single experiment or a diagnostic test incorporating the required markers to analyze a clinical specimen.</i>
<i>Bioinformatics</i>	<i>The use of techniques from applied mathematics, informatics, statistics, and computer science to solve biological problems and identify significant correlations.</i>
<i>Biopsy</i>	<i>A procedure where a tumor tissue sample is removed from the body for laboratory examination to determine whether or not cancer or some other disease is present. A biopsy can be performed using a needle to extract a small amount of cells or as a surgical procedure to remove a larger piece of tissue.</i>
<i>Biotechnology</i>	<i>Biotechnology is a technology based on or influencing biological processes, especially when used in agriculture, food science, and medicine.</i>
<i>Cancer</i>	<i>Cancer is a type of disease caused by genetic instability and characterized by uncontrolled division of cells and the ability of these cells to invade other organs.</i>
<i>Cell</i>	<i>The basic unit of a living organism. Each cell is surrounded by a membrane and has a nucleus containing a set of genes that provide it with the information necessary to operate and divide.</i>
<i>cGMP certification</i>	<i>Current Good Manufacturing Practices- quality systems requirements for manufacture, testing and development of medical products to ensure manufacturing practices , designs and controls provide safe, accurate, reliable and repeatable</i>





results. cGMP's are enforced by the FDA Food and Drug Administration. GMP compliance is recognized worldwide as an international standard of manufacture.

*Chemotherapy*

*Drug treatment that destroys cancer cells. Chemotherapy may be used in addition to surgery and is sometimes used in combination with other therapies such as radiation.*

*CLIA*

*The U.S. Clinical Laboratory Improvement Amendments (CLIA) establishes quality standards for all laboratory testing to ensure the accuracy, reliability and timeliness of patient test results.*

*Clinical sample*

*A sample taken from the body (ex. blood, urine, tissue) and analyzed in order to gain information about a person's medical state.*

*Clinical trial*

*A research study, usually in diseased patients, to test drugs, procedures, or testing technologies to determine how well they work compared to other practices or the natural course of the disease.*

*Clinical verification*

*A product development stage that consists of testing a product prototype on a set of clinical samples.*

*Commercial Implementation Trial*

*A phase within the product development process that supports the acceptance of the newly developed assay in the market.*

*Commercial Pivotal Trial*

*A phase within the product development process to evaluate the clinical validation of the assay in collaboration with a clinical facility*

*CPT codes*

*Current Procedural Terminology Codes- numbers assigned to every medical task used by physicians and or laboratories to determine amount of reimbursement that practitioner will receive from insurer. CPT codes are assigned by AMA American Medical Association to provide uniform definition for services and reimbursement.*





Cytosine	<i>Cytosine is one of the 5 main nucleotides of DNA and RNA used in storing and transporting genetic information.</i>
Development Validation	<i>A phase within the product development process to evaluate the performance of the newly developed assay using a defined sample set.</i>
Development Verification	<i>A phase within the product development process to define the performance characteristics of the assay</i>
Diagnosis	<i>Identification of a condition or disease (ex. breast cancer), by its signs, symptoms, and the results of laboratory or histopathological tests.</i>
DNA (Deoxyribonucleic Acid)	<i>DNA is a nucleic acid polymer, usually in the form of a double helix, of which the genes are made and code for life processes.</i>
Freedom to operate (FTO)	<i>FTO, within an intellectual property setting, refers to the ability of a company to commercially produce, market and use a new product, process or service without infringing the intellectual property rights of others.</i>
Gene	<i>A unit of genetic information. Genes are encoded in a cell's DNA and the proteins they express control the physical development and behavior of the cell or the whole organism.</i>
Gene expression	<i>Gene expression is a multi-step process by which a gene's DNA sequence is converted into proteins.</i>
In-Vitro Diagnostics (IVD)	<i>IVDs are tests performed outside the human body on clinical samples such as blood, urine, or biopsy tissue.</i>
Kit (diagnostic kit)	<i>In-vitro diagnostic test that is packaged in a box which that can be shipped to end-user laboratories.</i>



LDT	<i>Laboratory Developed Test-refer to assays developed in a laboratory for use within that laboratory. While these tests are not currently regulated by FDA Food and Drug Administration, the lab must validate all aspects of the test to ensure patient safety, reliability, repeatability, accuracy as well as validating all instruments, reagents and or supplies used in the test.</i>
Marker	<i>A substance native to the organism, whose presence is indicative of a particular medical condition. Marker ID A product development stage that consists of identifying and prioritizing promising markers.</i>
Marker & Assay Development	<i>A product development stage that consists of testing promising markers on clinical samples (to establish initial sensitivity and specificity for a defined clinical indication), and consequently developing a robust and reproducible assay for the marker in question.</i>
Methylation	<i>Control mechanism that regulates gene expression in DNA without causing a permanent genetic alteration.</i>
Methylation-Specific PCR (MSP)	<i>A technology for detecting gene methylation.</i>
MGMT	<i>The O6-methylguanine DNA-methyltransferase (MGMT) gene has been widely studied and shown to be able to predict glioblastoma cancer patient response to alkylating agents</i>
PCR	<i>The polymerase chain reaction is a technique for the in vitro amplification of specific DNA sequences by the simultaneous primer extension of complementary strands of DNA.</i>
Pharmacogenomics	<i>The study and application of DNA and RNA based biomarkers to predict how an individual's genes affect the body's response to a therapeutic drug.</i>
PSA	<i>Prostate-Specific-Antigen, a widely used but widely criticized blood-based screening test for prostate cancer.</i>
Recurrence	<i>A return of cancer after treatment.</i>



<i>Research Discovery</i>	<i>Research phase of the product development process that consists primarily of discovering new biomarkers in clinical samples from patients with and without cancer or between samples from patients responding or not responding to a certain drug.</i>
<i>Research Feasibility</i>	<i>A phase within the product development process to optimize the biomarker performance for the development of the diagnostic assay.</i>
<i>Screening</i>	<i>The testing of a population for disease.</i>
<i>Sensitivity</i>	<i>A measure of a diagnostic test's accuracy. Sensitivity measures the percentage of people with a certain medical condition that produces a positive test result. Tests with good sensitivity produce few false negative results.</i>
<i>Service laboratory</i>	<i>Laboratory that provides medical testing services.</i>
<i>Service lab and kit development</i>	<i>The final stages of product development that are specific to the underlying product's intended distribution channel (service laboratories or diagnostic kit companies).</i>
<i>Specificity</i>	<i>A measure of a diagnostic test's accuracy. Specificity measures what percentage of people without a medical condition the test result is negative. Tests with good specificity produce few false positive results.</i>
<i>Temozolomide</i>	<i>An approved alkylating chemotherapeutic drug marketed by Schering-Plough corporation.</i>
<i>Tumor</i>	<i>Tissue growth where the cells that make up the tissue have multiplied uncontrollably. A tumor can be benign (non-cancerous) or malignant (cancerous).</i>



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*Marcel Wijma, Chief Research Officer and managing partner, has a longstanding history in financial biotech research. After selling Van Leeuwenhoek Research (VLR) to SNS Securities in 2006, he established an award winning analyst team in biotech/life sciences at SNS Securities. In 2009, Marcel was awarded by Financial Times/Starmine as being one of the Top-3 biotech analysts in Europe. Later that year, Marcel purchased VLR from SNS Securities after which the company was reconstituted. At VLR, he leads the professional VLR research organisation, which is augmented by selected external financial researchers with a specialisation in Life Sciences. Mr. Wijma has a Masters degree in Financial Economics from Erasmus University in Rotterdam.*

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