



Backgrounder: FDA-Approved Guardant360® CDx

Guardant360® CDx liquid biopsy is helping to bring the promise of precision oncology to more advanced cancer patients

Comprehensive genomic profiling (CGP), also known as biomarker testing, genotyping, or tumor profiling, is a test that looks at the DNA of a patient's tumor to identify its genomic alterations. Knowing these alterations, for example an EGFR mutation in a lung cancer patient, enables doctors to match a patient with the right precision medicine, which can significantly extend survival compared to chemotherapy alone.¹⁻⁷ However, due to the challenges of traditional tissue biopsy, many patients today are not receiving CGP before starting treatment.

Reliance on traditional tissue biopsy has created a state of emergency when it comes to CGP

Doctors want the best treatment fast for their patients, and waiting for tissue biopsy results, which may take many weeks or longer, can delay treatment. Doctors also may not be informed of the latest guidelines and treatment options. As a result, CGP is tragically underperformed for advanced cancer patients today:

- 80% of patients with advanced non-small cell lung cancer⁸ and 60% of patients with advanced colon cancer do not receive guideline-recommended CGP⁹
- 50% of patients with prostate cancer and 33% with breast cancer have bone-only metastases, making tissue biopsies difficult¹⁰

Guardant360® liquid biopsy overcomes the challenges of tissue biopsy to help widen adoption of CGP

Many doctors forgo CGP and rush to prescribe chemotherapy or immunotherapy, which is not always right, due to the inherent challenges that tissue biopsies present:

- Requires significant tissue, more than may be available
- Repeated biopsies can expose patients to potential adverse events¹¹
- Results can take many weeks or longer, and can be incomplete
- Staff burden requires coordination with multiple care team members

Guardant360® liquid biopsy overcomes these challenges across all advanced solid cancers:

- Non-invasive and faster results in only 7 days (instead of many weeks or longer)
- Enables complete genomic profiling for 3x more patients than tissue*
- Trusted by 9,000+ oncologists in more than 150,000 tests to date
- Clinically validated with more than 200 peer-reviewed publications
- Broadly covered by Medicare and many private payers, representing 200 million+ lives

With FDA approval, Guardant360 CDx liquid biopsy presents a potential new standard for CGP

Guardant360 CDx is now FDA approved for tumor mutation profiling, or CGP, in advanced cancer patients across all solid cancers, and for use as a companion diagnostic to identify non-small cell lung cancer (NSCLC) patients who may benefit from Tagrisso® (osimertinib), RYBREVANT™ (amivantamab-vmjw), and LUMAKRAS™ (sotorasib). The test is also being pursued as a companion diagnostic for investigational products in development by other collaborators in addition to AstraZeneca, Janssen, and Amgen, including Daiichi Sankyo, Inc. and Radius Health, Inc.

The FDA approval of Guardant360 CDx is an important milestone, demonstrating the value liquid biopsy brings to oncologists and, more importantly, the patients they treat. The ease of the Guardant360 CDx blood test together with approval of the FDA is expected to help widen adoption of CGP and enable more patients to receive potentially life-changing precision medicines. FDA approval also marks a milestone for Guardant Health in our mission to conquer cancer with data. Since our inception, we've been dedicated to unlocking the potential of liquid biopsy to transform cancer care at all stages of the disease.

Guardant360 CDx helps inform the rapidly growing number of targeted therapies for patients

Targeted therapies that can be informed by the Guardant360 CDx test are already approved for use in many cancers including lung, breast, colorectal, and prostate. This growing number of approved targeted therapies and those in development demonstrates the increasing importance of CGP and precision oncology for advanced cancer patients:

Cancer Guideline-recommended FDA-approved matched Opportunities in clinical practice
biomarkers targeted therapy

Non-small cell lung	EGFR, ROS1, ALK, BRAF, NTRK1, MET, RET, ERBB2, KRAS	EGFR, ROS1, ALK, BRAF, NTRK1, KRAS G12C	21% of advanced NSCLC patients have alterations associated with currently FDA-approved drugs ¹² and now with additional approvals this number is even higher
Breast	PIK3CA, ERBB2 (HER2), BRCA1/2	PIK3CA, ERBB2 (HER2), BRCA1/2, NTRK1, MSI	40% of HER2 negative patients have PIK3CA mutation ¹³
Colorectal	MSI, KRAS, NRAS, BRAF, NTRK1, ERBB2	MSI, BRAF, NTRK1	72% of patients who receive anti-EGFR therapy did not have guideline-aligned RAS and BRAF testing to determine eligibility for that treatment ⁹
Prostate	MSI, BRCA1/2	MSI, BRCA1/2, NTRK1	Emerging data suggests 15-25% of patients with advanced prostate cancer have BRCA1/2 alterations and may benefit from PARP inhibitors ¹⁴

Guardant Health is leading the way for liquid biopsy to help patients across the cancer care continuum

In 2014, we introduced the Guardant360 test for advanced cancer patients. It was the first-in-kind liquid biopsy to comprehensively sequence a patient's cancer to reveal actionable mutations. Our test overcame the challenges of tissue biopsy to allow for faster, easier CGP. In 2019, a landmark head-to-head prospective study demonstrated Guardant360's high concordance with tissue testing and consistent results with numerous other studies.

Advanced cancer, and our work with Guardant360, is the foundation of our efforts so far, and we are now poised to transform cancer management in earlier stage cancers. Each Guardant360 blood sample we sequence contributes to real-world data that fuels this progress. For cancer survivors, our Guardant Reveal™ blood test detects residual and recurrent disease in early-stage cancer patients, starting with colorectal cancer, to help inform adjuvant treatment decisions and monitor recurrence. For asymptomatic people, our LUNAR-2 blood test aims to realize our vision of detecting cancer early, starting with early-stage colorectal cancer where an unmet medical need exists. Studies are underway to validate the clinical utility of our LUNAR-2 assays in clinical practice.

References:

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*For alterations with FDA-approved therapies