

# GynTect



**Early detection of cervical cancer**

*For your peace of mind*

# Diagnosing cervical cancer - the challenge

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## *Study of epigenetic biomarkers in cervical smears is revolutionising cervical cancer screening*

Cervical cancer screening currently includes:

1. Pap test, with limited sensitivity (50 - 80%) <sup>(1-2)</sup>.
2. HPV (human papillomavirus) test with high sensitivity but limited specificity due to the high frequency of transient infections (SEOM 2017).

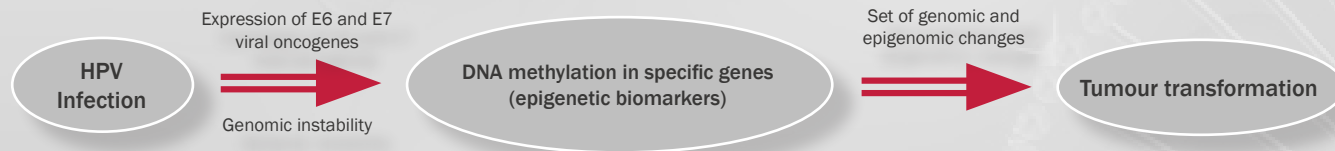
The low sensitivity and specificity of these tests makes it necessary to include molecular studies that increase their reliability and facilitate therapeutic decisions.

**The analysis of the state of methylation** of selected gene assemblies (*epigenetic biomarkers*) provides molecular information on the risk of malignancy of pre-tumour lesions, and therefore the study of epigenetic biomarkers:

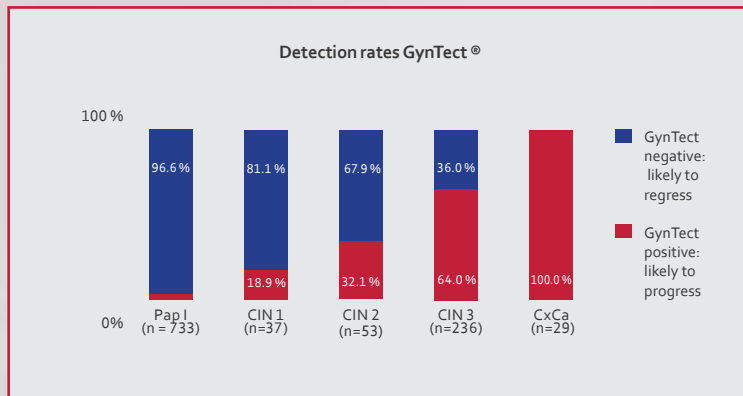
- **Helps with therapeutic decisions and early diagnosis.**
- **Complements colposcopy and cervical biopsy results in HR-HPV (high-risk HPV) positive patients.**

**Non-invasive, fast, and reliable triage that complements HPV typing for early detection of cervical cancer**

GynTect® is based on the epigenetic signature composed by six hypermethylation markers, making it possible to rule out the presence of the tumour in patients with a positive HPV test as early as the cervical smear



**Sensitivity > 99.9 % for cervical cancer caused by HPV infection**



**GynTect® detects tumour transformation, not infection**

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Using specific methylation PCR (MSP), it studies six epigenetic markers (ASTN1, ZNF671, DLX1, ITGA4, RXFP3, SOX17) for cervical tumorigenesis.

GynTect® detection capability based on clinical status.  
 Data of 1,088 cervical smears from various clinical trials:  
<https://www.oncgnostics.com/gyntect-cervical-cancer/information-for-physicians/trial-data/?lang=en>

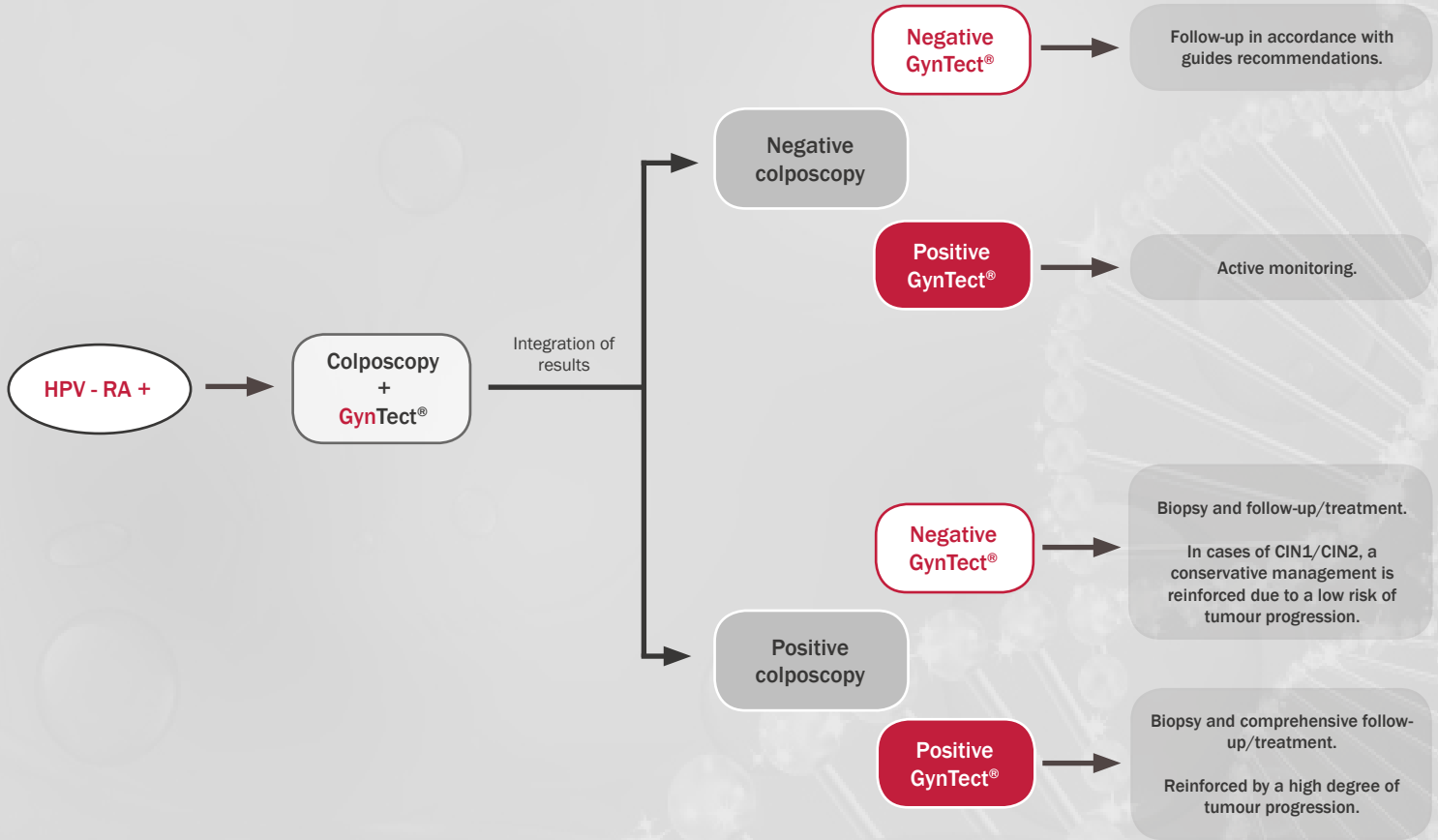
## Key aspects of early cervical cancer detection

### *Risk of tumour progression is a key factor in preventing cervical cancer*

- The progression rate of a cancerous lesion increases in proportion to the severity of the lesion. While the likelihood of CIN1 (Cervical Intraepithelial Neoplasia) progression is very low, women with CIN3 are at high risk of developing cervical cancer in the absence of treatment <sup>(1-5)</sup>.
- A negative colposcopy can mask an incipient lesion.
- The treatment decision depends, among other factors, on:
  - The degree of lesion
  - The patient's age
  - The affected woman's child-bearing desires
- The risk of lesion progression is a key piece of information in clinical management.

### *Alterations in the pattern of DNA methylation correlate with a high risk of malignancy <sup>(6-8)</sup>*

# Interpretation of GynTect® results



## Gynaecological consultation

The specialist requests a GynTect® test to be performed on their patient by following these steps:

1. **Patient orientation who, together with her physician,** must sign the informed consent.
2. **Sampling:** GynTect® is performed from the conventional cervical smear, which must be transferred to the specific transport medium (ThinPrep PreserveCyt® (Hologic)).
3. **Sample collection:** NIMGenetics will collect the sample for analysis.

## GynTect® analysis and report issue

After the sample has been analysed using GynTect®, the results report will be issued, which will be received by the specialist within an average of 5 business days by means of an encrypted e-mail.



GynTect®

## Interpretation of results

### A negative GynTect® test result

- Reinforces the result for absence of lesions in the context of a negative colposcopy.
- Supports a conservative attitude in cases of CIN1/CIN2 (biopsy).

### A positive GynTect® test result

- In the absence of lesions, a positive result justifies an intensified follow-up of the patient.
- In the presence of lesions, this result indicates an increased risk of progression, and therefore supports interventional therapy.

The GynTect® result can be modified over time, depending on the evolution of the lesion.

- **Provides peace of mind and confidence for the specialist and the patient**

A positive hrHPV result may cause concern for the patient, despite a low-risk cytology. In this situation, a negative GynTect® result may rule out the presence of cervical cancer. Likewise, it indicates a low risk of tumour progression, without the need for special therapeutic or follow-up measures.

- **Facilitates therapeutic decisions**

The risk of tumour progression is a factor that complements the biopsy result and helps the specialist decide between monitoring and treatment.

- **High reliability of results**

Studies have shown a sensitivity of over 99.9% in cervical carcinoma.

- **NIMGenetics and Oncnostics, working together in oncological genetic diagnosis**

Oncnostics has its origin in the public-private partnership at Jena, where the work of Prof. Dr. Matthias Dürst, co-founder of this company, contributed greatly to the discovery of the human papillomavirus as the cause of cervical cancer. For this finding, Dr. Harald zur Hausen was awarded the Nobel prize in Medicine (2008).

# NIMGenetics

New Integrated Medical Genetics

## SPAIN

Parque Científico de Madrid  
Faraday, 7 (Campus de Cantoblanco)  
28049 Madrid  
Ph. +34 91 037 83 54  
M. +4 672 060 393

## BRASIL

Rua Elvira Ferraz, nº 250, Cj. 211  
Itaim - Sao Paulo, SP.  
CEP: 04552-040  
Ph. +55 11 3044 1813

## MEXICO

World Trade Center  
Montecito, 38 - Piso 35 - Oficina 10  
Col. Nápoles - 03810 Ciudad de México  
Ph. +52 55 68232076

## PORTUGAL

Complexo Interdisciplinar da Universidade de Lisboa  
Salas 2.12 e 2.14  
Avenida Prof. Gama Pinto nº 2,  
1649-003 Lisboa  
Ph. +351 932 34 80 32



Comunidad de Madrid

NIMGenetics is a Genetic Diagnosis centre authorised by the Department of Health and Consumption of the Community of Madrid, registered in the corresponding Register under number CS 10673

CAT-20; Rev 05; 24/01/2022

[www.nimgenetics.com](http://www.nimgenetics.com)

