

Understanding Test Results

Incorporate MyOme’s Integrated Polygenic Risk Score™ (iPRS™) Coronary Artery Disease (CAD) test into your patient’s risk assessment for a more personalized approach to CAD screening and risk reduction.



MyOme Integrated Risk Coronary Artery Disease

The iPRS CAD test combines a person’s genetic information (PRS*) with their clinical risk factors (estimated by the Atherosclerotic Cardiovascular Disease Pooled Cohort Equations– ASCVD PCE**) to provide a risk estimate for developing coronary artery disease (CAD).^{1,2}



Genetic analysis considers

>6M

genetic markers
linked to CAD risk

Clinical risk factor analysis includes

- Age
- Sex
- Race
- Blood pressure
- Cholesterol levels
- Diabetes status
- Smoking status
- Hypertension treatment

Test Result Overview

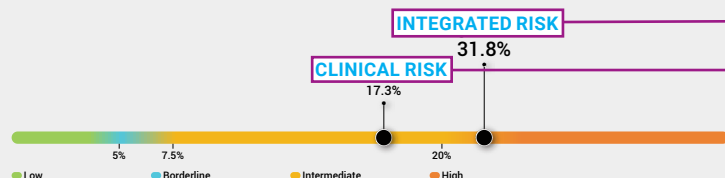
Results

Your patient’s CAD risk will be presented as a 10-year absolute risk based on combining their PRS with their ASCVD PCE.

High Risk

Based on the integrated risk score, this patient has a 31.8% chance of experiencing a coronary artery disease (CAD) event in the next 10 years.

10-YEAR ABSOLUTE RISK OF CAD



RESULTS SUMMARY

Integrated 10-year risk of having a CAD-related event will be reported as high (≥20%), intermediate (≥7.5% to <20%), borderline (5% to <7.5%), or low (<5%).

INTEGRATED RISK

The probability of having a CAD-related event within the next 10 years based on the combination of genetic and clinical risk factors.

CLINICAL RISK

The probability of having a first ASCVD-related event within the next 10 years estimated by the ASCVD PCE analysis of clinical risk factors.

*A PRS estimates an individual’s genetic predisposition to a health condition, calculated by summing many disease-associated genetic risk markers detected across the genome.¹

**The ASCVD PCE risk calculation, based on large population-based cohorts, is widely used to predict 10-year risk of CAD and guide treatment decisions.²



Proactive Health

INTEGRATED PRS™

CORONARY ARTERY DISEASE

Implications for CAD Risk Reduction



Lifestyle Modifications

Guidelines recommend all patients adopt habits of a heart-healthy lifestyle, including smoking cessation, regular physical activity, and a balanced diet.³



Cholesterol-lowering Medications

Guidelines support the use of medications, such as statins, to help reduce the risk of CAD based on an individual's 10-year ASCVD risk estimation. Treatment decisions should be tailored to each patient's overall risk profile, considering additional risk-enhancing factors and clinical judgment.³⁻⁵



Further Testing

Additional testing, such as coronary artery calcium (CAC) scoring, may help guide decision-making, especially for patients with borderline or intermediate risk.³



PUBLISHED GUIDELINES

- The American Heart Association³
- The United States Preventative Services Task Force^{4,5}

MyOme Support

We are committed to supporting providers with a customizable, end-to-end solution that easily integrates with your workflow and resources to improve the patient and provider experience.



MYOME PROVIDER PORTAL

Access test results, schedule genetic counseling sessions, and connect with MyOme resources in one convenient place.



GENETIC COUNSELING

Genetic counseling sessions tailored to your patients' needs are available to address any concerns and questions regarding testing and results.



CLINICAL CONSULT SUPPORT

Rely on support for any aspect of our testing services from the MyOme Clinical Affairs team and our clinical support partner.



Make MyOme Proactive Health part of your clinical care.
Contact support@myome.com to get started.

This test was developed, and its performance characteristics were determined, by MyOme, Inc., a clinical laboratory certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) and College of American Pathologist (CAP) accredited to perform high complexity clinical laboratory testing. This test has not been cleared or approved by the U.S. Food and Drug Administration (FDA). Test results should always be interpreted by a clinician in the context of clinical and familial data with the availability of genetic counseling when appropriate. MyOme is not responsible for the content or accuracy of third-party websites.

1. National Cancer Institute. NCI Dictionary of Genetics Terms, PRS. Web. Accessed 2025 Jan. 2. Medina-Inojosa J, Somers V, Garcia M, et al. Performance of the ACC/AHA Pooled Cohort Equations in Clinical Practice. *J Am Coll Cardiol.* 2023 Oct 10; 82(15):1499-1508. doi: 10.1016/j.jacc.2023.07.018. 3. American Heart Association. Life's Essential 8. Web. Accessed 2025 Feb. heart.org. 4. US Preventative Services Task Force. Aspirin Use to Prevent Cardiovascular Disease: Preventative Medication. 2022 Apr. Web. Accessed 2025 Jan. 5. US Preventative Services Task Force. Statin Use or the Primary Prevention of Cardiovascular Disease in Adults: Preventive Medication. 2022 Aug. Web. Accessed 2025 Jan.