

A Personalized Risk Assessment for Prostate Cancer

MyOme's Integrated Polygenic Risk Score™ (iPRS™) Prostate Cancer test combines whole-genome insights with clinical risk assessment, delivering a more accurate risk prediction to better guide healthcare decisions and outcomes.



Personalized Risk Prediction Can Enable Tailored Care to Improve Health Outcomes

Broad Eligible Population

About

60%

of prostate cancer risk is caused by heritable factors, many of which can be detected as genetic markers by the iPRS test.1

Beyond Single-Gene Screening

Up to

of men* with prostate cancer do not carry a high-impact hereditary mutation, but may have inherited risk factors found by the iPRS test.²

Hidden Risk Detection

Our data shows



of men with no family history of prostate cancer were identified as high risk by iPRS, and had ~3X higher incidence compared to the non-increased risk group.3

iPRS Provides 10-year and Remaining Lifetime Risk for Developing Prostate Cancer**

Patients can receive an iPRS result if they:

- Are aged 30-75 years old
- Do not have a personal history of prostate cancer
- Do not have a pathogenic variant in prostate cancer-associated gene (e.g., BRCA2)

PRS Clinical Factors Includes clinical inputs Includes ~7M associated with risk genetic risk factors

Important Considerations: The iPRS Prostate Cancer test is intended as a screening tool and does not diagnose a person with prostate cancer. Some people with a high risk score will not develop prostate cancer and some with a low risk score will.

^{*}MyOme recognizes and respects the diversity of gender identities. For the purposes of this document, "men" is used to refer to individuals assigned male at birth.

^{**}Men aged <40 and >70 will only receive a remaining lifetime risk score.



The Power of Comprehensive Insights

The iPRS Prostate Cancer test produces a complete risk score and identifies patients at increased risk. Test results can guide healthcare decisions for all patients, especially those at increased risk, by helping to:

Enable Early Detection

Personalize Preventative Care

Optimize Health Outcomes

Key Features



Genome First

The iPRS Prostate Cancer test is run on a genome sequencing backbone, which allows for broad detection of clinically relevant variants. These variants were identified from genomewide studies that included more than 850K men with prostate cancer.3



Multi-Ancestry Applicability

The iPRS Prostate Cancer test was validated in >140K patients across ancestrally diverse cohorts, enabling more reliable cross-ancestry risk prediction.3



Actionable Reports

Reports provide actionable recommendations for addresing prostate cancer risk based on clinical guidelines⁴⁻⁸, with the option to consult a trained genetic counselor for personalized interpretation and support.

Get Started with Our Simple, Seamless Process

Order	Sample Collection	Sample Analysis	Receive Results
Submit an order via MyOme's secure portal	Follow the instructions provided in blood, saliva, or buccal swab collection kits	Return sample to MyOme for sequencing and data analysis	Reports are delivered through MyOme's secure portal



Interested in personalized prostate cancer risk prediction? Contact support@myome.com or visit our website to order now.

1 NCI. Genetics of Prostate Cancer—Health Professional Version. Web. Accessed Nov, 2025. www. cancer.gov. 2. Tuffaha, H., Edmunds, K., Fairbairn, D. et al. Guidelines for genetic testing in prostate cancer: a scoping review. Prostate Cancer Prostatic Dis 27, 594-603 (2024). https://doi.org/10.1038/s41391-023-00676-0. 3. Internal Data on File. 4. Wei JT, Barocas D, Carlsson S, et al. Early detection of prostate cancer. AUA/SUO guideline part I: prostate cancer screening. J Urol. 2023;210(1):45-53. PMID: 37096582. 5. Smith RA, Andrews KS, Brooks D, et al. Cancer screening in the United States, 2019: A review of current American Cancer Society guidelines and current issues in cancer screening. CA Cancer J Clin. 2019;69(3):184-210. PMID: 30875085. 6. Wolf A. Wender RC, Etzoni RB, et al. American Cancer Society guideline for the early detection of prostate cancer. Update 2010. Ca Cancer J Clin. 2010;60:70-98. PMID: 20200110. 7. USPSTF. Screening for Prostate Cancer: US Preventive Services Task Force Recommendation Statement. JAMA. 2018;319(18):1901-1913. PMID: 29801017.

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.