myome®

Proactive Health
INTEGRATED RISK™
CORONARY ARTERY DISEASE

A Personalized Risk Score for Coronary Artery Disease

MyOme's Integrated Polygenic Risk Score™ (iPRS™) Coronary Artery Disease (CAD) 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

Comprehensive Analysis

Approximately

50%

of CAD risk is due to heritable factors, many of which can be detected as genetic markers by the iPRS test.[1]

Reliable Risk Stratification

Nearly

10%

of patients with uncertain* 10-year risk of CAD (as determined by traditional methods) were reclassified as high-risk by iPRS.[2]

Hidden Risk Detection

Cases reclassified by iPRS had

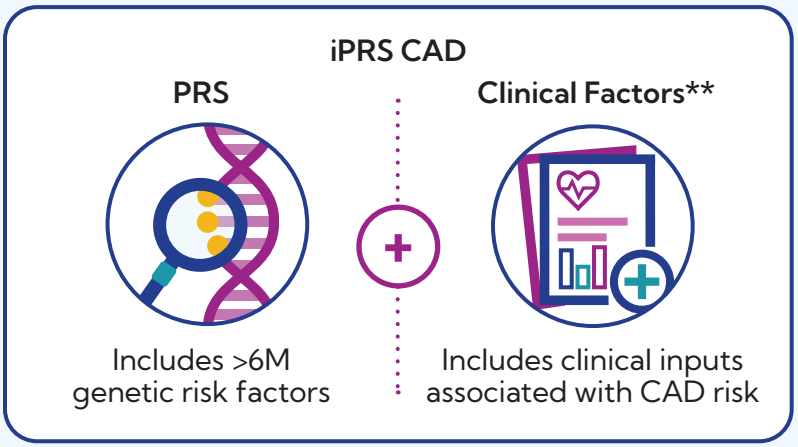
3X

higher 10-year risk of CAD incidence, underscoring the value of accurate risk stratification.[2]

The iPRS CAD Test Provides a 10-year Integrated Risk of Developing CAD

Patients can receive an iPRS result if they:

- Are aged 40-79 years old
- Do not have a personal history of CAD
- Have all clinical measurements required to calculate risk



*Uncertain risk is defined as having borderline or intermediate risk scores

**Clinical risk factors are incorporated using the Atherosclerotic Cardiovascular Disease (ASCVD) Pooled Cohort Equation (PCE) model[3]

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The Power of Comprehensive Insights

The iPRS CAD test produces an absolute 10-year risk score and classifies patients as either "high", "intermediate", "borderline", or "low" risk for having a CAD-related event. 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 CAD test is run on a genome sequencing backbone, which allows for broad detection of clinically relevant variants. Variants were identified from genome-wide studies that included more than 150,000 people with CAD.[2]

Multi-Ancestry Applicability

The iPRS CAD test was validated in ~150K patients across ancestrally diverse cohorts, enabling more reliable cross-ancestry risk prediction.

Actionable Reports

Reports provide actionable recommendations for lowering CAD risk based on clinical guidelines[4-6], 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	Use 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 CAD risk prediction?
Contact support@myome.com or visit our website to order now.

1. McPherson R and Tybjaerg-Hansen A. Genetics of CAD. Circulation Research. 19 Feb 2016; 118 (4). doi: 10.1161/CIRCRESAHA.115.306566.**2**. Ratman D, Tshiaba P, Levin M, et al. PRS Improves 10-year Risk Prediction of Coronary Artery Disease in Individuals at Uncertain Clinical Risk. JAMA (in revision). 2024. **3.** 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. **4.** American Heart Association. Life's Essential 8. Web. Accessed 2025 Feb. heart.org. **5.** US Preventative Services Task Force. Aspirin Use to Prevent Cardiovascular Disease: Preventative Medication. 2022 Apr. Web. Accessed 2025 Jan. **6.** US Preventative Services Task Force. Statin Use or the Primary Prevention of Cardiovascular Disease in Adults: Preventive Medication. 2022 Aug. Web. Accessed 2025 Jan.