



For the patients that don't get screened-

Reaching the 1 in 3 non-adherent patients will reduce adverse health outcomes and transform lives. 1-3



of new colorectal cancer cases are attributed to the unscreened. ²



of colorectal cancer deaths occur in people who are not up-to-date with screening. $\!\!^{3}$

The blood test that addresses colorectal cancer screening non-adherence.

In a twice non-adherent patient cohort:

- 99.5% completed the blood test
- Of the patients with positive results,
 59% had actionable findings in their follow-up colonoscopy.





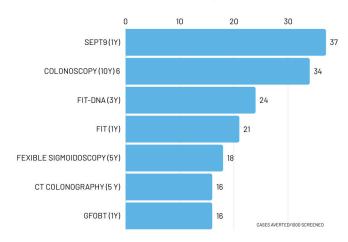


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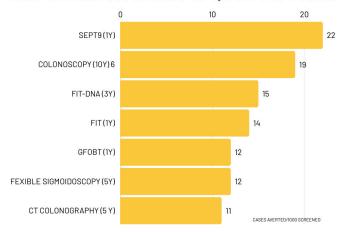
A new way to look at clinical effectiveness

Current colorectal cancer screening strategies are based on models that assume 100% adherence. Because adherence can have a large effect on screening outcomes, a 2020 study published in Cancer Medicine compared the effectiveness of CRC screening strategies under reported adherence rates at the population level. The figures below illustrate the cases of CRC cases and deaths averted. ⁵

CRC Cases Averted Per 1,000 Screened



CRC Deaths Averted Per 1,000 Screened



The ColoHealthTM test has been developed, and the performance characteristics determined, by the New Day Diagnostics CLIA-certified laboratory performing the test. The test currently labeled as ColoHealthTM has not been cleared or approved by the US Food and Drug Administration (FDA). ColoHealthTM is a Real-Time PCR test for the detection of methylated Septin9 (mSEPT9) DNA from blood plasma specimens. It is derived from and is substantially equivalent* to the FDA-approved Epi proColon test formerly marketed by Epigenomics AG, and is the first and only FDA-approved blood test for CRC screening. ISO 13485:2016 certified, and CLIA certified. © 2024 New Day Diagnostics, LLC. All Rights Reserved. *Data on file

