Prognosight

Dynamic Oncology Decision Support (Applied to Triple Negative Breast Cancer)

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Breast Cancer Survivor Learns the Art of Healing

A Difficult Diagnosis

Unlike most breast cancer types, triple-negative breast cancer cells for the estrogen and progesterone hormones or the HER2 protein the spread and that breast cancer therapies usually target. That makes historically challenging to treat and more likely to return.

Cancer runs very strongly on one side of my family. Several members have had either breast cancer or ovarian cancer. Two tested positive for the BRCA1 genetic mutation. So, I knew the odds were pretty high that I carried it, too.

After finding out about the mutation, I put off getting genetic testing for about two years. I didn't want to know yet.

But I became the first person of my generation in my family to take the plunge. The testing confirmed my fears: I had the BRCA1 mutation. That substantially increased my risk of developing both breast and ovarian cancers. I started getting high-risk breast cancer screenings every six months.

So, I was shocked when I was diagnosed with triple-negative breast cancer at age 34.

My triple-negative breast cancer diagnosis

I'd been told that I had until I was about 40 to start making decisions about whether to have my breasts or ovaries removed to reduce my risk. I was glad, because I wanted to wait until I was finished having children to do so.

But when I had my last check-up about two months after I weaned my

Úrsula Jessee

> Where you go first is pretty important.
>
> **Úrsula Jessee**
> Survivor

The Problem

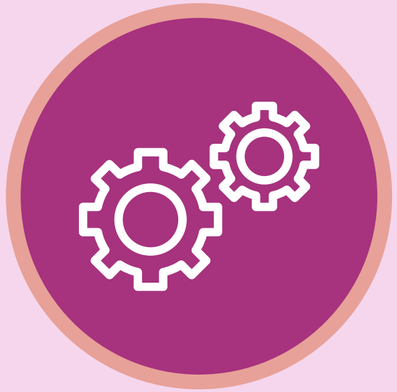
Fragmented Trial Landscape

Patient Uncertainty & Burden

Enrolment Inefficiency

The Solution

Quantitative Comparison



Intelligence Engine

Patient Access

Doctor

Patient

Quantitative Comparison

- Uses **patient-specific data** to **quantify projected benefit, biological fit and toxicity tradeoffs**
- Centralized database of **up-to-date therapeutics, enrolling trials, and results**
- **Side-by-side outcome projections** to **guide decision making**

Intelligence Engine

- **Real-time recalibration** as patient's tumor stage, treatment response, and disease status evolve
- Re-match and re-ranks options to ensure most **optimal strategy** is always suggested

Patient Access

Empowers patients with explanations about:

1. Their condition
2. Treatment options
3. Trial eligibility

Prognosight

Care team | Patient

TNBC treatment simulator

Enter patient profile, compare treatment pathways, run the simulation, and find clinical trials. Use this view to guide shared decision-making.

Patient profile & history

Document patient demographics and history from clinical workup.

Patient ID (optional): demo-001

Age (years): 55

BMI (optional): —

Menopausal status: Unknown

ECOG performance status: 0 — Fully active

Smoking status: Unknown

- [ ] Diabetes
- [ ] Cardiac disease
- [ ] Chronic kidney disease
- [ ] Autoimmune disease
- [ ] Prior chemotherapy
- [ ] Prior breast radiation
- [ ] Family history breast/ovarian cancer

Clinical findings & routine labs

From standard staging, pathology, and routine blood work (no in-depth tests).

Clinical T stage: T2

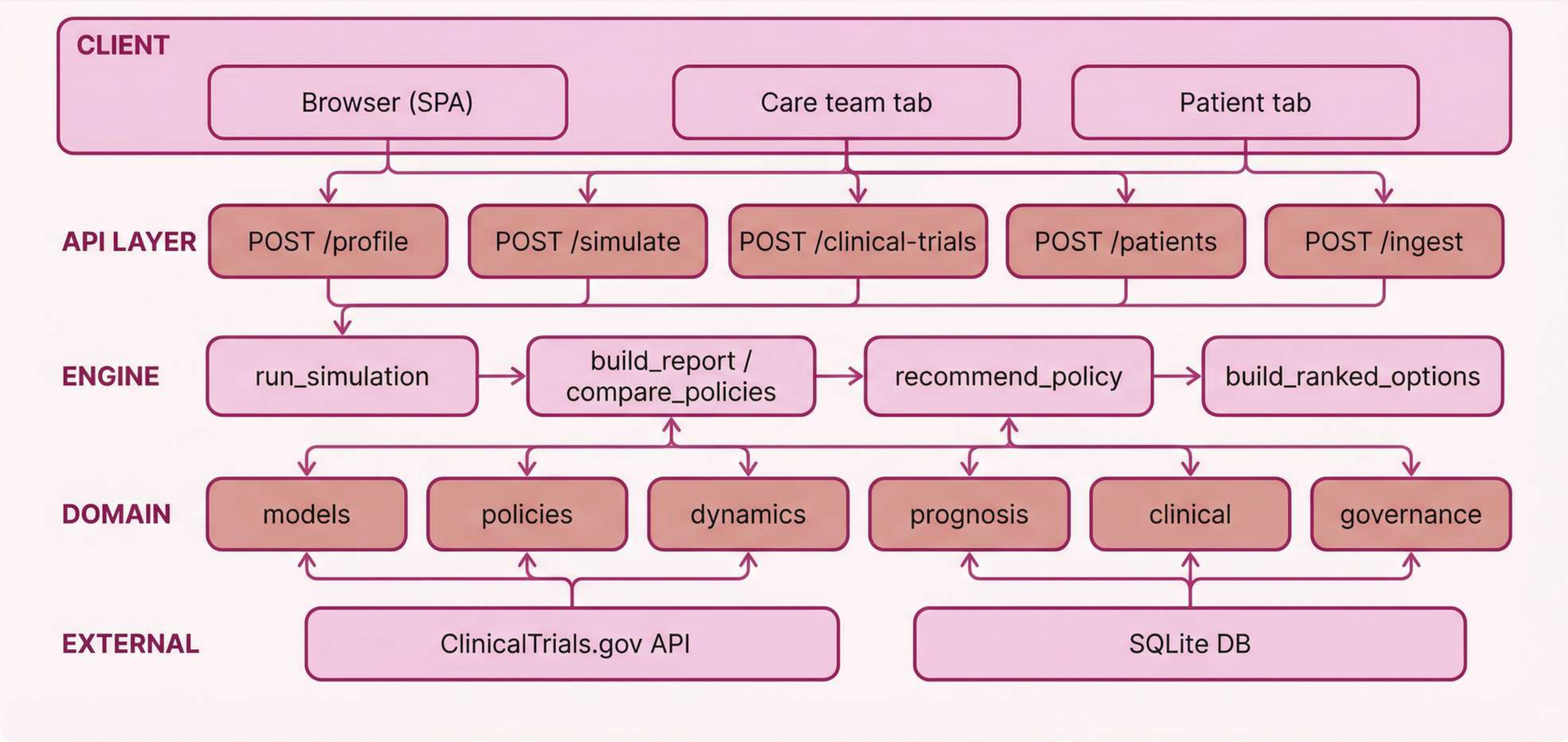
Clinical N stage: N0

Tumor size (cm): 3

Grade: 3

Ki-67 % (optional, if reported)

System Architecture



Legal

- No FDA clearance needed
- EHR integration & automation
- Pharma/academia partnership

Business model

Oncologists & Pharma

Time & money saved

Publicly available data