

LUCENCE INSIGHT™

Multi-Cancer Early Detection

Early Detection Saves Lives

References:

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Always seek the advice of your physician or other qualified healthcare provider for information you may need regarding a medical condition.

Lucence Service Laboratory
211 Henderson Road #04-01/02,
Henderson Industrial Park, Singapore 159552

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Patient Information Leaflet

LucenceINSIGHT™ 12

covers 12 cancers for men

Turnaround Time:
(Working Days) **18**

LucenceINSIGHT™ 5

covers 5 cancers (in blue)

Nasopharyngeal cancer (EBV+)

Esophageal cancer

Thyroid cancer

Lung cancer

Liver cancer

Stomach cancer

Pancreatic cancer

Kidney cancer
(clear cell)

Gastrointestinal
stromal tumor (GIST)

Colorectal cancer

Bladder cancer

Prostate cancer

LucenceINSIGHT™ 12

covers 12 cancers for women

LucenceINSIGHT™ Women's 7

covers 7 cancers (in pink)

Nasopharyngeal cancer (EBV+)

Thyroid cancer

Breast cancer

Lung cancer

Liver cancer

Stomach cancer

Pancreatic cancer

Gastrointestinal
stromal tumor (GIST)

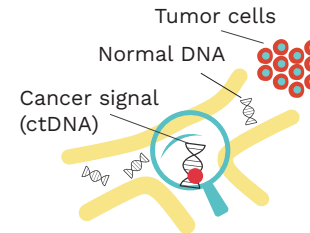
Colorectal cancer

Ovarian cancer

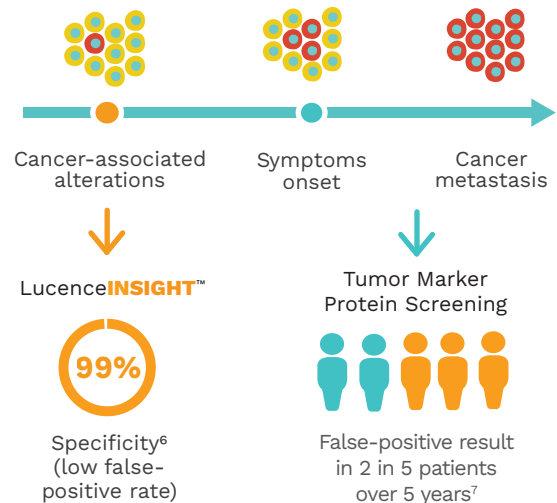
Cervical cancer
Endometrial cancer

What is LucenceINSIGHT™ ?

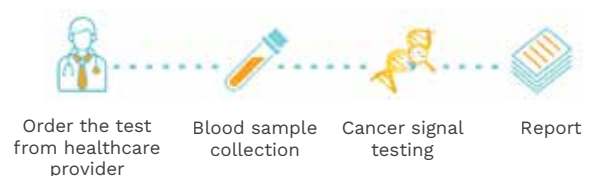
- LucenceINSIGHT™ is a multi-cancer early detection (MCED) tool that screens for the circulating tumor DNA (ctDNA) of up to 50 cancers in one simple blood draw.



- LucenceINSIGHT™ screens for cancer with low false positives compared to tumor marker proteins.

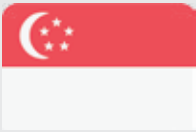


- A report is generated in 12 or 18 working days.



Why should we screen for cancer?

- Cancer is the number 1 killer.¹

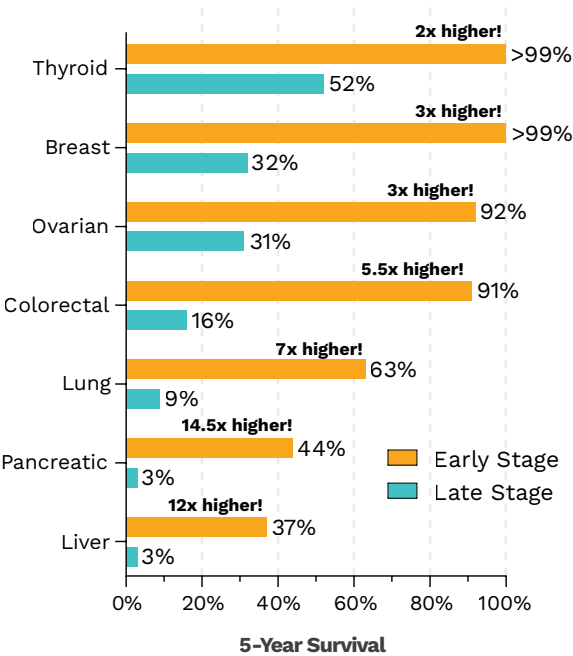


16 people die
of cancer everyday
in Singapore.²

- 4 in 5 cancer deaths are not covered by recommended screening.^{3,4}



- 5-year survival is higher with early detection.⁵



Who can benefit from LucenceINSIGHT™?

- LucenceINSIGHT™ is recommended for patients who:

- ✓ are aged 40+
- ✓ have elevated risk of cancer (family history, diet, lifestyle)

- The test is not recommended for patients who:

- ✗ are pregnant
- ✗ are in cancer remission for < 3 years
- ✗ had an allogenic bone transplant or a blood transfusion < 2 weeks prior to sample collection

- No fasting is needed. Refrain from heavy meals.

Case study⁸

EARLY DETECTION

A cancer signal was detected in a 60+ year-old asymptomatic patient.



ACTION TAKEN

PET-CT and colonoscopy confirmed early stage colorectal cancer.

The patient was treated and discharged.



Head & Neck

Nasopharyngeal cancer (EBV+)
Oropharyngeal cancer
(HPV-positive; HPV-negative)
Laryngeal cancer
Salivary gland cancer

Eye cancer
(Conjunctival melanoma;
Uveal melanoma)

Esophageal cancer

Thyroid cancer

Non-Hodgkin lymphoma
(Burkitt's lymphoma; Diffuse
large B-cell lymphoma;
Lymphoplasmacytic lymphoma)
Hairy cell leukemia

Acute myeloid leukemia (AML)
(AML, NPM1-mutated; AML, other
defined genetic alterations; AML,
myelodysplasia-related)
Mast cell tumor
Myeloproliferative neoplasm
Myeloma

Breast cancer

Bone cancer

Lung cancer
Lung neuroendocrine tumor

Liver cancer

Stomach cancer
**Stomach neuroendocrine
tumor**
**Gastrointestinal
stromal tumor (GIST)**

Biliary tract cancer
(Intrahepatic, Extrahepatic,
Gallbladder)

Kidney cancer (clear cell)
Adult Wilms tumor

Adrenal gland cancer

Small intestine cancer

Pancreatic cancer

Cervical cancer
Endometrial cancer
Ovarian cancer
**Ovarian germ cell &
stromal tumors**
Vulvar cancer

Colorectal cancer
**Colorectal neuroendocrine
tumor**

Bladder cancer

Penile cancer
Prostate cancer
Testicular cancer

Soft tissue cancer
(Angiosarcoma;
Smooth muscle sarcoma)

Skin cancer
(Melanoma; Non-melanoma)

