## Natera's Comprehensive DNA-based Prenatal Screening Solution

**Pregnancy loss is difficult. Anora's answers can help. For patients considering another pregnancy, Natera also offers:**

- Horizon™ carrier screening, which can tell her and her partner if they might be at risk to pass on specific genetic disorders to their children. The Horizon test can be done prior to the pregnancy or early on in the pregnancy.
- Panorama™, a Non-Invasive Prenatal Screening Test (NIPT), which screens for multiple chromosomal aneuploidies and specific microdeletions. This can be done through a simple blood draw from the mother as early as 9 weeks gestation.

## Anora Can Help You Provide Your Patients With Peace of Mind

anora™
*miscarriage test (POC)*

**Anora allows you to:**

- Determine the cause of the loss
- Detect partial and full molar pregnancies
- Guide treatment decisions
- Test paraffin samples
- Obtain a result for your patients (<1% failure rate)

**ANORA'S PROCESS IS SIMPLE.** A fresh POC sample is collected with a parental blood draw and is shipped to Natera's lab with a completed Anora test referral form. Since Anora requires no cell culturing, results can be provided in 5 days.

## Ordering Information

Collection kits are provided directly to the clinic at no charge and can be stored on site.

To order an Anora POC Collection Kit

SIMPLY CALL: 877.476.4743

OR EMAIL: support@natera.com

natera™
Conceive. Deliver.

natera | 201 Industrial Road, Suite 410 | San Carlos, CA 94070 | 1-650-249-9090 | Fax 1-650-249-2272

*These tests were developed by Natera, Inc., a laboratory certified under the Clinical Laboratory Improvement Amendments (CLIA). These tests have not been cleared or approved by the U.S. Food and Drug Administration (FDA).*

ANORA-MD-FACT-REV1-(07/01/2014)

panorama™ prenatal screen
horizon™ carrier screen
spectrum™ preimplantation genetics (PGS/PGD)
anora™ miscarriage test (POC)

ANORA-MD-FACT-REV1-(07/01/2014)
NAT-800810

anora™
*miscarriage test (POC)*

# Miscarriage Test for Products of Conception (POC)

**In a recent study, 95% of patients who had chromosome analysis for miscarriage were glad they did; two-thirds who did not wished they had.** *(Lathi et al. ASRM. 2011)*

natera™
Conceive. Deliver.

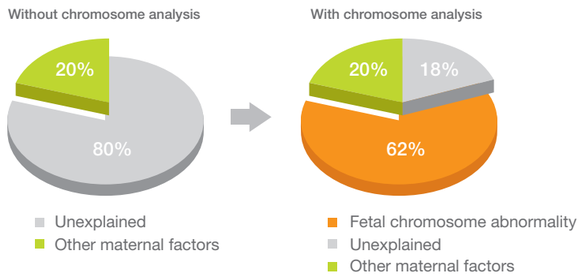
## Anora™ Miscarriage Test

**All chromosome testing is not created equal. In fact, only Anora™ utilizes Molecular Chromosome Analysis featuring Natera's patented SNP technology. Applying this, Anora can:**

- **Detect aneuploidies, uniparental disomy (UPD), all deletions and duplications 5 Mb or larger with select deletions and duplications down to 1 Mb**
- **Determine parental origin of an abnormality**
- **Rule out Maternal Cell Contamination (MCC) in a single test**
- **Detect paternal UPD and triploidy of paternal origin, the main causes of full and molar pregnancies**

**Many patients who have experienced a miscarriage want to know the reason for the loss. Anora provides the most accurate and comprehensive results, which you and your patients deserve.**

### Identification of miscarriage etiology

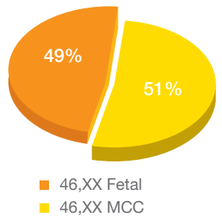



With chromosome analysis, the etiology was identified in 62% of miscarriages that would otherwise have been unexplained

* Results are from women with recurrent pregnancy loss who are 35 years or older. (Marquard et al. Fertil Steril. 2010 Sep;94(4):1473-7.)

### Detection of Maternal Cell Contamination (MCC)

The ability to distinguish 46,XX results as maternal vs. fetal can eliminate the need for additional costly workup and wrong conclusions regarding test results.




51% of POC 46,XX results are maternal in origin*

* 7,549 POC samples analyzed using Anora. 2,469 results were 46,XX (MCC = 1,268 and Fetal = 1,201). These results are consistent with published data of 58%. (Bell et al. Fertil Steril. 1999 Feb;71(2):334-41.)

### Testing of prior losses

Anora can be performed on a paraffin-preserved tissue sample from a prior miscarriage. This can be especially beneficial to patients with recurrent pregnancy loss. Chromosome analysis after a loss can help you avoid an extensive maternal workup and has been found to be cost effective. (Foyouzi et al., ASRM 2010)

## Detection of Chromosomal Cause for Molar Pregnancies

**Molar pregnancies carry serious risks for the mother. A molar pregnancy with complete paternal uniparental disomy (UPD) carries a 20% risk for Gestational Troploblastic Disease (GTD), and a partial molar pregnancy with triploidy of paternal origin carries a 5% chance of GTD. Because of this, all women with molar pregnancies should be monitored by blood hCG levels and receive follow-up care post pregnancy. If found, GTD can be treated with chemotherapy.**

### What causes a molar pregnancy?

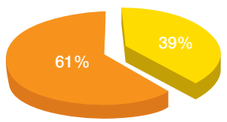
Most complete molar pregnancies occur when an empty egg is fertilized by a sperm that duplicates or is fertilized by two sperm. The result is complete paternal UPD and is clinically referred to as complete or full molar pregnancy. Another form of molar pregnancy can happen when a normal egg is fertilized by two sperm. The result is triploidy of paternal origin and is a common cause of partial molar pregnancy. Partial molar pregnancy is the most prevalent form of molar pregnancy. Rarely, there are other causes of molar pregnancy.

The risk factors for molar pregnancy include: maternal age >40, a previous miscarriage, a prior molar pregnancy, and a diet low in beta-carotene.

### How often do molar pregnancies occur?

| ETHNICITY | FREQUENCY IN PREGNANCY |
|---|---|
| Caucasian | 1/1,000 |
| Southeast Asian | 1/125 |
| Annual Molar Pregnancies in the US | 6,000 per year |

### Parental origin of triploidy allows for guidance of management for GTD




**412 total triploidy cases**

- 253 Maternal (61%)
- 159 Paternal (39%)

Without the ability to determine the parental origin of triploidy, 61% of cases will unnecessarily be managed for the risk of GTD. Triploidy of maternal origin is not associated with molar pregnancy.

* 7,549 POC samples analyzed using Anora