

Medizinische Labordiagnostika AG

GynTect[®]

Epigenetic markers for cervical cancer diagnostics



- CE-IVD approved diagnostic test^{*} identifying patients with malignant changes of the cervix
- Performance possible in one working day
- Performed on cobas® z 480 Analyzer
- Evaluation using common calculation software



GynTect[®] – reliable and fast diagnostics

If the cervical cancer screening result is **abnormal** with the **Pap test** and/or **positive** with the **HPV test**, patients suddenly find themselves in an exceptional situation. Even though both tests indicate a possible cancer, **in many cases** there is **no malignant disease** and the positive test result was a false alarm. Further examinations are necessary for reliable clarification, such as a colposcopy with biopsy, if required. If abnormalities are detected, the presumably affected tissue is often removed.

GynTect[®] is a fast and non-invasive test for clarification of abnormalities in cervical cancer screening. Just one further smear allows for a reliable result to be obtained within a few days.



An existing infection with **HPV** may lead to **genetic instability of the infected cells** and eventually cervical cancer. In the course of **carcinogenesis**, **changes (methylations)** occur **in the DNA**.

GynTect[®] recognises six areas of the human genome, which only exist methylated during the development of cancer cells. **GynTect**[®] thus identifies patients with malignant cervical cell changes.

Decision-making based on reliable results

With a **negative GynTect**[®] result, a **cancer diagnosis** could be **excluded** at the time of testing. If there was an abnormal Pap test result or HPV infection present prior to the test, it is recommended to observe them further.

If there is a **positive GynTect**[®] result, a **malignant precursor or** even **cancer** is **very likely**. Further steps such as diagnostics assisted by colposcopy and surgical therapies are recommended.

Based on available study data, **GynTect**[®] provides a clear indication of malignancy status in patients with abnormal Pap smear: In all previous studies, **GynTect**[®] was able to detect all cases of cervical cancer (sensitivity = 100%).

GynTect[®] is rarely positive in patients with inconspicuous cytological findings (specificity = 96.6%). Cancer develops via the histopathologically defined dysplasias CIN1, CIN2 and CIN3. **GynTect**[®] detection rates for these dysplasias increase continuously. This indicates a prognostic value of the **GynTect**[®] cancer markers.



CIN1

(n = 37)

CIN2

(n = 53)

CIN3

(n = 236)

Cancer

(n = 29)

NILM

(n = 733)

Assay principle and workflow

The **GynTect**[®] assay principle is based on the detection of **DNA methylation** in human gene regions that occurs **specifically during carcinogenesis**. In the process of DNA methylation, methyl groups are added to the DNA. These are always cytosines located next to guanines (**CpG dinucleotides**).

The analysis of a patient sample comprises two steps:

- 1. First, methylation is fixed by **bisulphite treatment**.
- 2. Subsequently, specific regions of the genome are analysed by **PCR** and an **evaluation** is carried out using common spreadsheet software.



Only originally methylated DNA regions are amplified in the PCR. Therefore, this procedure is also called **methylation-specific PCR (MSP)**.

The **GynTect**[®] assay includes **several internal controls** to ensure a highly reliable and robust workflow. Moreover, positive and negative controls are included.