

 Prenatal safe®



 eurofins

# NON-INVASIVE PRENATAL TESTING

## NIPT

Since the introduction of Non-invasive prenatal testing (NIPT) into clinical practice over 10 years ago, the clinical utility of prenatal screening has considerably improved. NIPT has become a safe alternative to invasive procedures such as amniocentesis and chorionic villus sampling in certain cases, while ensuring high sensitivity and specificity.

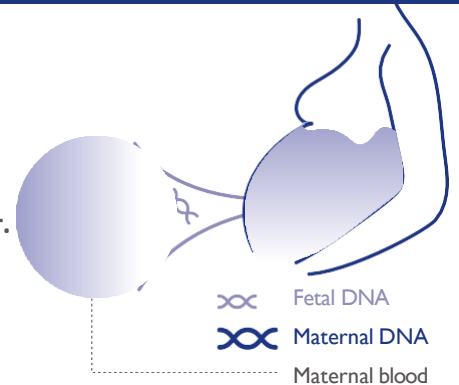


Recommended for **pregnant women with singleton and twin pregnancies**

## HOW DOES NIPT WORK?

NIPT is a non-invasive test that enables the analysis of fetal genetic material from a routine blood sample taken from the mother.

The test can detect the presence of certain chromosomal abnormalities and genetic diseases in the fetus.

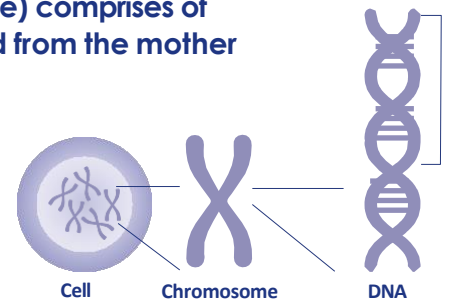


The amount of fetal DNA increases as pregnancy progresses and is adequate for screening from week 10 of gestation. If the quantity of fetal DNA is insufficient, a second sample may be required.

The chromosome set (called a karyotype) comprises of 23 pairs of chromosomes, half inherited from the mother and half from the father:

- 22 pairs of non-sex chromosomes
- 1 pair of sex chromosomes

Chromosomes are formed from DNA. Some DNA regions are classified as GENES that provide the cell with the information required perform its function.



Abnormalities in the delicate process that leads to the formation of a developing fetus can cause different types of alterations:

- Abnormalities in the number of chromosomes: ANEUPLOIDIES
- Abnormalities in the structure of chromosomes: DELETIONS/DUPLICATIONS



Variations in the DNA sequence called genetic mutations can occur. This kind of alteration may be inherited from parents, or occur for the first time in the fetus and cause:

- Genetic DISEASES

The frequency of these alterations increases mainly with maternal age, but advanced paternal age can also be a risk factor.



# WHAT CAN BE INVESTIGATED WITH NIPT?

## 1) Abnormalities in the number of chromosomes: ANEUPLOIDIES

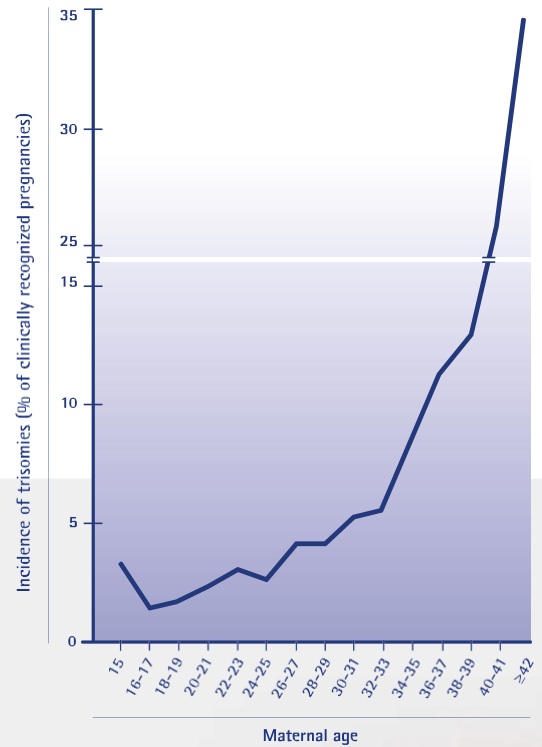
**TRISOMY:** three copies of a chromosome (instead of two)

**MONOSOMY:** single copy of a chromosome (instead of two)

### The most common trisomys<sup>1</sup>:

- Trisomy of chromosome 21 (Down Syndrome): 1 in 700 births
- Trisomy of chromosome 18 (Edwards Syndrome): 1 in 3000 births
- Trisomy of chromosome 13 (Patau Syndrome): 1 in 6000 births

Incidence increases with increasing maternal age<sup>2</sup>.



## 2) Abnormalities in the structure of CHROMOSOMES

**DELETION:** loss of a chromosome segment

**DUPLICATION:** doubling of a chromosome segment

If these rearrangements are very small, they are called microdeletions and microduplications.

Microdeletion 22q11.3 is the most frequent microdeletion and is linked to DiGeorge syndrome, which has an incidence of 1/2000–4000 people, regardless of maternal age<sup>3</sup>.

## 3) Genetic DISEASES

**DE NOVO:** caused by DNA mutations that occur for the first time in the fetus

**HEREDITARY:** caused by mutations inherited from parents

It is important to test if parents are **HEALTHY CARRIERS\*** of genetic diseases.

\***Healthy carrier**, a person who is not affected by a disease and does not have symptoms, but has genetic sequences that mean the disease may be passed on to the fetus

Over 20 years of experience in genetic testing.  
**Prenatalsafe®** can accurately test circulating fetal DNA to investigate the presence of:

- Aneuploidies in all the chromosomes of the fetus
- Deletions and duplications on all chromosomes (>7Mb)
- 9 microdeletion syndromes
- Inherited and *de novo* genetic diseases

## AN OFFER FOR EVERY NEED



	3 UK*	5 UK*	5DiGeorge	Plus	Karyo	Karyo Plus	Complete	Complete Plus	Full Risk
Fetal sex	●	●	●	●	●	●	●	●	●
Trisomy 21 Down Syndrome	●	●	●	●	●	●	●	●	●
Trisomy 18 Edwards Syndrome	●	●	●	●	●	●	●	●	●
Trisomy 13 Patau Syndrome	●	●	●	●	●	●	●	●	●
Sex Chromosome Aneuploidies		●	●	●	●	●	●	●	●
Rare Autosomal Aneuploidies				9 and 16	●	●	●	●	●
Deletions and Duplications					●	●	●	●	●
Microdeletions			22q11.2	●		●		●	●
Inherited genetic diseases							●	●	●
<i>De novo</i> genetic diseases							●	●	●
Carrier screening test									●

\*PrenatalsAFE 3 & 5 screens will be processed in the UK by Eurofins Clinical Diagnostics Lab, 8 Huxley Road, Guildford, GU2 7RE. All other screens will be referred to Genoma Labs, Italy.

- Free post-test genetic counselling if positive





**LATEST GENERATION CE-IVD TECHNOLOGY**

**PROPRIETARY CE-IVD NIPT FLOW™ ALGORITHM**
**Sensitivity and specificity > 99%**  
demonstrated on 71740 pregnancies

	Sensitivity (95% CI)	Specificity (95% CI)
<b>Main aneuploidies</b>		
Trisomy 21	<b>99.54%</b> (98.36% - 99.94%)	<b>100%</b> (96.11% - 100.00%)
Trisomy 18	<b>100%</b> (96.11% - 100.00%)	<b>100%</b> (99.99% - 100.00%)
Trisomy 13	<b>100%</b> (90.51% - 100.00%)	<b>99.99%</b> (99.98% - 100.00%)
<b>Sex chromosome aneuploidies</b>		
X0	<b>98.11%</b> (89.93% - 99.95%)	<b>99.98%</b> (99.97% - 99.99%)
XXX	<b>100%</b> (87.23% - 100.00%)	<b>100%</b> (99.99% - 100.00%)
XXY	<b>100%</b> (86.77% - 100.00%)	<b>99.99%</b> (99.99% - 100.00%)
XYY	<b>100%</b> (86.77% - 100.00%)	<b>99.99%</b> (99.99% - 100.00%)
<b>Rare Autosomal aneuploidies, deletions, duplications and microdeletions</b>		
Rare Autosomal Aneuploidies	<b>100%</b> (89.42% - 100.00%)	<b>99.92%</b> (99.89% - 99.95%)
Deletions and Duplications	<b>100%</b> (83.16% - 100.00%)	<b>99.97%</b> (99.96% - 99.99%)
Microdeletions	<b>83.33%</b> (35.88% - 99.58%)	<b>99.99%</b> (99.99% - 100.00%)

### Robust clinical validation

- Analysis of over **70000** samples for common trisomies
- Over **65000** samples for sex chromosome aneuploidies
- Over **40000** samples for other abnormalities

### Reliability on all abnormalities

**Internal data from samples analysed at Eurofins Genoma Italy.**

For data on Sensitivity and Specificity for PrenatalSafe 3 and 5 performed in the UK refer to Illumina's clinical validation:

[https://support.illumina.com/content/dam/illumina-support/documents/documentation/chemistry\\_documentation/veriseq-nipt-v2/veriseq-nipt-solution-v2-package-insert-canada-200006957-00.pdf](https://support.illumina.com/content/dam/illumina-support/documents/documentation/chemistry_documentation/veriseq-nipt-v2/veriseq-nipt-solution-v2-package-insert-canada-200006957-00.pdf)

**GENETICS AT THE SERVICE  
OF CLINICAL PRACTICE**

PrenatalSafe®, combined with an accurate ultrasound investigation, allows early identification of fetal abnormalities.



**Aligned with the SIGU<sup>5</sup> guidelines, of the Ministry of Health<sup>6</sup> and with the main gynaecological guidelines<sup>7</sup>**



**Geneticists available to couples for pre- and post-test genetic counselling**



**Customer care available from pre-test counselling to reporting**



**Logistics authorized for transporting biological material UN3373**



**Sample traceability**



**Comprehensive insurance protection**

#### Bibliography

1. Screening for Fetal Chromosomal Abnormalities. ACOG Practice Bulletin, Number 226. Obstetrics & Gynecology: October 2020 - Volume 136 - Issue 4 - p e48-e69
2. To err (meiotically) is human: the genesis of human aneuploidy. Nature Reviews Genetics volume 2, pages280–291 (2001)
3. Cell-free DNA screening for prenatal detection of 22q11.2 deletion syndrome. Maternal and Fetal Medicine, held virtually, January 25–30, 2021
4. Pre-test counselling checklist for non-invasive prenatal genetic testing on fetal DNA circulating in maternal blood (NIPT/cell-free DNA test). 2021
5. SIEOG 2021 guidelines for obstetric and gynaecological ultrasound scans



# YOUR PATIENTS IN SAFE HANDS

## 9 levels of investigation

- CE-IVD NIPT FLOW™ ALGORITHM
- Illumina CE-IVD technology
- Qualified logistics

### WHO IS IT FOR?

Any expectant mother, single or twin pregnancies, obtained with either natural conception or assisted reproductive technologies (ART)



\*Actual kit used may vary from the picture shown above

### Reporting times:

**3-7 days**

chromosome analysis

**10-15 days**

gene analysis

**15-20 days**

carrier testing on parents

 **eurofins**

Genoma

 **eurofins**

Clinical Diagnostics

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