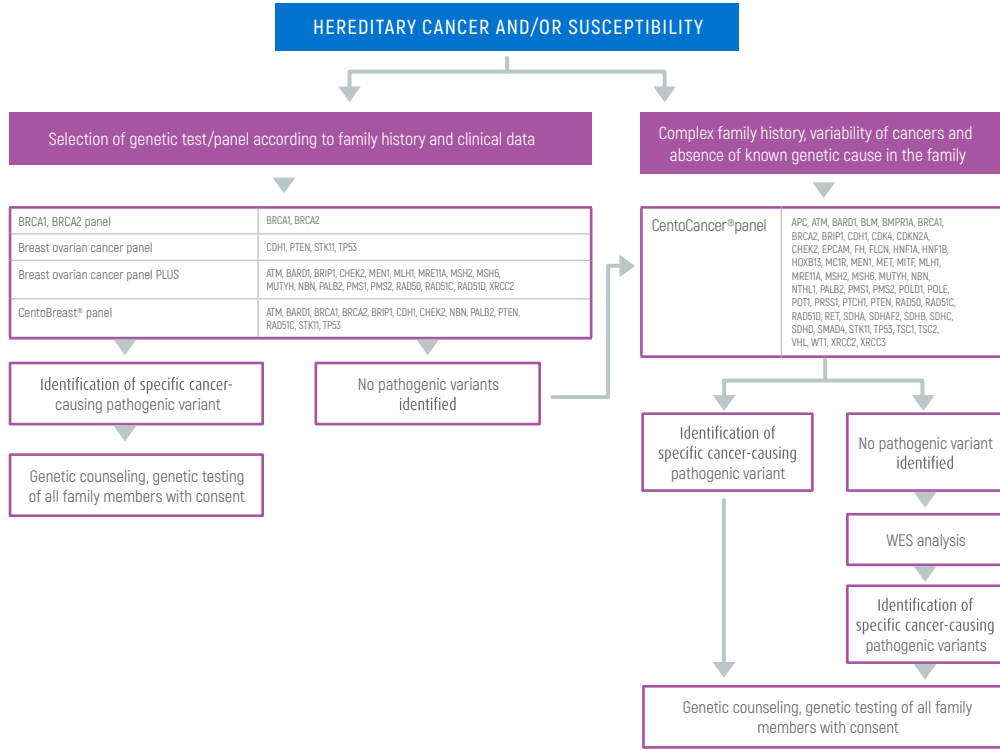




GENETiKS®
THE CODE OF LIFE

Teşvikiye Mah. Hakkı Yeten Cad.
Terrace Fulya Center 2 No:13 Kat 4,
Şişli, 34365 İstanbul / Türkiye

☎ +90 (212) 275 70 20

☎ +90 (212) 275 70 08

✉ bilgi@genetiks.com.tr

CALL CENTER ☎ 09:00 - 18:30

0(850)2104973

www.genetiks.com.tr

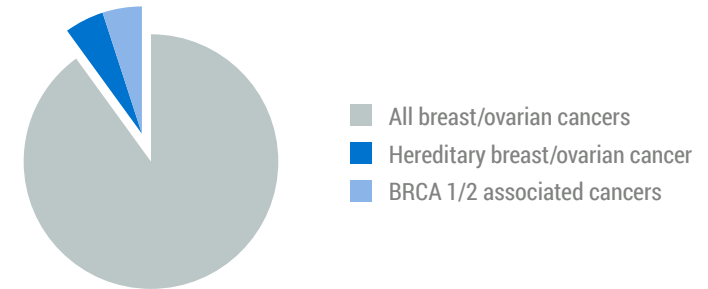
Hereditary Breast and Ovarian Cancer tests

Think about tomorrow, today

GENETiKS®
THE CODE OF LIFE

BRCA1 and BRCA2 are the key factors in breast and ovarian cancer development

Breast and ovary cancers are the most frequently seen cancer types in women and within all cancer types they rank as the 1st and 5th most common ones, respectively. Hereditary forms of breast and ovarian cancer account for 5-10% of all cases diagnosed and this is found to be clearly associated with the mutations in BRCA1/2 genes.



When to perform BRCA1/2 testing

BRCA1 and BRCA2 testing is especially recommended when a patient's personal or family history includes any of the following:

- › Women diagnosed with breast cancer at the age of 50 or younger*
- › Ovarian cancer at any age
- › Cancer progression within the same breast twice
- › Cancer detection in both breasts
- › Triple-negative breast cancer (estrogen receptor, progesterone receptor and HER2 negative)
- › History of pancreatic cancer with breast or ovarian cancer in the same individual or on the same side of the family
- › History of breast cancer in two or more relatives
- › A previously identified BRCA1 or BRCA2 mutation in the family
- › Male breast cancer
- › Individuals with a male relative who is diagnosed with breast cancer

Genetiks recommends all genetic tests to be requested after consultancy that is provided by a medical geneticist and interpretation of the test results together with a qualified geneticist. For unaffected individuals with a strong family history, analysis of an affected family member is also recommended.

1. Edlich et al. Breast cancer and ovarian cancer genetics. J Long Term Eff Med Implants. 2005;15(5):533-45. Review. <http://www.ncbi.nlm.nih.gov/pubmed/16218901>
2. Easton DF, et al. Breast and ovarian cancer incidence in BRCA1- mutation carriers. Breast Cancer Linkage Consortium. Am J Hum Genet. 1995 56:265-71. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1801337/>

* According to the Evidence-Based Cancer Guidelines, National Comprehensive Cancer Network (NCCN)

What are the possible outcomes of the test?



A) POSITIVE RESULT

If the test indicates a disease mutation, then only a predisposition to breast and/or ovarian cancer is confirmed. This does not necessarily mean that the patient has cancer or will develop it. Additionally, depending on the mutation, the patient will have an increased likelihood of developing cancer 46-87% over the lifetime.



B) NEGATIVE RESULT

If the genetic test does not indicate a predisposing BRCA mutation, then the patient's individual risk of developing breast and ovarian cancer is low (in the general population the risk of developing breast cancer is 12%).

A negative test result should be discussed to determine which individual cancer screening and prevention programs might be suitable for the patient.



C) INCONCLUSIVE RESULT

Not all mutations in BRCA are disease causing. Many disease-causing mutations have been identified, but not all of them are confirmed yet.

In some cases, the test may identify a mutation in BRCA which cannot be conclusively characterized as disease causing. In such cases, the classification of the mutation might change the clinical consequence in future. For more information, please examine the chart of the hereditary breast and ovarian cancer tests (see back page).