

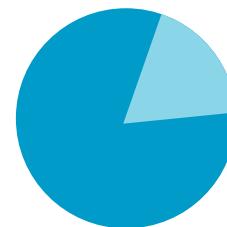
Lynch Syndrome (HNPCC) Myths versus Facts

MYTH: "I do not see these patients."

FACT: One study showed that approximately one in five patients with colorectal cancer were at risk for Lynch Syndrome.

Grover S, et al. *Clin Gastroenterol Hepatol* 2004;2:813-819

Newly Diagnosed Colorectal Cancer Patients



20% at-risk for
Lynch Syndrome

MYTH: "Only patients with young onset CRC are at-risk for Lynch Syndrome."

FACT: Limiting molecular studies to patients with an early age of diagnosis will miss many cases.

Hampel H, et al. *Gastroenterology* 2005;129(2): 415-421.

Average Age of Onset of Colorectal Cancer Among Relatives of Lynch Syndrome Patients

Group Analyzed	Average Age at Onset (years)
Women	55.1
Men	60.3
Combined	58.1

MYTH: "I wouldn't do anything different for my patient based on this information."

FACT: Screening and surgical management are different for patients with Lynch Syndrome versus those with sporadic colorectal cancer. These patients have also shown better compliance with their high risk medical management recommendations.

Winawer S, et al. *Gastroenterology* 2003;124(2):544-560. Church J, et al. *Dis Colon Rectum* 2003;46(8):1001-12.
Halbert CH, et al. *Archives of Internal Medicine* 2004;164:1881-1887.

Surgery

Patient Type	Recommended Surgery
Patient with sporadic CRC	<ul style="list-style-type: none"> Most often, segmental colectomy
Lynch Syndrome patient with CRC	<ul style="list-style-type: none"> Colectomy with IRA or hemicolectomy with yearly colonoscopy Consider hysterectomy/salpingo-oophorectomy at time of surgery (females)

CRC Surveillance

Indication	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Subsequent
Sporadic CRC	Colonoscopy		Colonoscopy					Colonoscopy	Every 5 years
Lynch Syndrome (pt>40 years of age)	Colonoscopy	Annual							

Conclusion:

Patients at-risk for Lynch Syndrome are common and are not always young when they are diagnosed with colorectal cancer. It is essential to identify these patients because individualized medical management can save the lives of them and their family members.

COLARIS®

A predictive medicine product for hereditary uterine and colorectal cancer.

A predictive medicine product for Lynch syndrome.

COLARIS® testing assesses a person's risk of developing hereditary colorectal cancer and a woman's risk of developing hereditary uterine cancer. COLARIS detects disease-causing mutations in the *MLH1*, *MSH2*, *MSH6*, *PMS2* and *EPCAM* genes which are responsible for the majority of Lynch syndrome.

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