

KNOW THE RISK. GET TO KNOW TUTIVIA.™



Can you tell which one of these patients is at high risk for **acute rejection** after their kidney transplant?

Tutivia™ is a blood-based proactive risk assessment tool for acute rejection in your kidney transplant patients. Tutivia™ uses RNA sequencing technology that helps answer your questions to deliver a **more patient-centric care plan**.

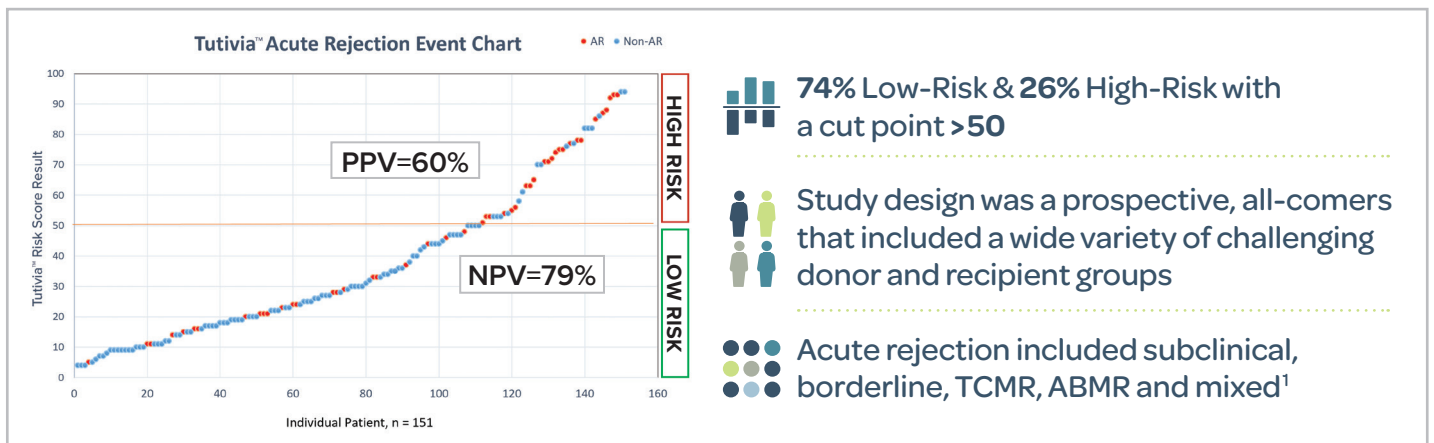


- ◇ Which of my patients is at high risk for acute rejection?
- ◇ How do I know if a patient has Acute Rejection (AR) or BK Nephropathy (BKN)?
- ◇ How do I manage patients with Delayed Graft Function (DGF)?

why tutivia™?

When a patient receives a high-risk Tutivia™ result, the hazard ratio of that patient having AR is **5.74** over a low-risk result.

The high hazard ratio increases confidence in making informed treatment decisions.



¹ Loupy A, Haas M, Roufosse C, et al. *The Banff 2019 Kidney Meeting Report (I): Updates on and clarification of criteria for T cell- and antibody-mediated rejection. Am J Transplant. 2020;20:2318-2331.*
<https://doi.org/10.1111/ajt.15898>

when tutivia™?

151 TOTAL PATIENT BIOPSIES (INDICATION BIOPSIES N=44 ♦ PROTOCOL BIOPSIES N=107)

44 PATIENTS IN THE VALIDATION SET UNDERWENT INDICATION BIOPSY

- 80% of indication biopsies were performed in the **first 60 days**
- 69% of these early biopsies showed **AR**
- 83% of early biopsies showing AR had a **high Tutivia™ risk score**



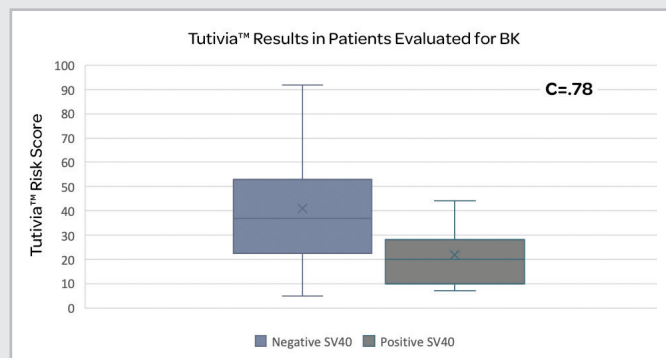
In our supplemental data, time to AR in indication biopsies was mean 34.5 days and median 21 days.²

HIGH SENSITIVITY IN INDICATION BIOPSIES EVEN WITHIN 60 DAYS POST TRANSPLANT

- RNA signatures offer precision as early as first week post-transplant as they are not markers of injury that may be confounded by the initial surgery.
- Offering an early ability to risk stratify your patients offers you an opportunity to manage your patients proactively.



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- Of the 151 patients in the validation set, 6 biopsies were determined to be BK positive through central and/or local pathology, **all had a Tutivia™ score <50**
- Patients with BKN (SV40+) were highly correlated with lower Tutivia™ results than those with negative SV40; **C=.78**

CLARITY WITH BKN AND DGF PATIENTS

BKN

- BK can be difficult to differentiate from rejection.
- In the clinical validation study, the BKN patients returned a low risk for AR result.
- This differentiation may be important in your clinical decision making.

DGF

- DGF presents clinically challenging complications post transplant.
- Scan the QR code to learn the role of Tutivia™ in patients where DGF may be suspected.

