Study published on VeriStrat proteomic test, 7/15

July 2015—The journal Lung Cancer published a paper demonstrating the economic implications to the U.S. health care system of using VeriStrat in guiding treatment of patients with advanced non-small cell lung cancer (Hornberger J, et al. 2015;88:223–230). The paper's authors conclude that using Biodesix's VeriStrat improves overall survival and decreases medical costs in the U.S. payer system.

John Hornberger, MD, a clinical investigator who is among the study's authors, said, "Systems of care are gearing up for bundled payment models in oncology. With the evolving changes in payment incentives, this state-of-the-art test analysis was designed to address the questions that administrators have to be aligned with new incentives."

The study, an extended analysis of the phase three, prospective VeriStrat stratified PROSE trial, assessed the outcome and economic implications of the use of a clinically validated serum proteomic test to guide treatment decisions in NSCLC. By shifting patients away from ineffective therapy, the use of VeriStrat resulted in improvement in overall survival as well as a total lifetime direct medical cost decrease of \$135 per patient.

The study evaluated clinical outcomes over the lifetime of a patient with advanced NSCLC, using data from randomized trials and clinical studies. Based on the test results from the Veri-Strat proteomic test, treatment recommendations for 27.3 percent of the patient population changed from erlotinib to chemotherapy, resulting in a reduction of use of ineffective therapy. The five-year survival of advanced NSCLC patients is one to five percent, the implication of which is an average increase in overall survival per patient of slightly more than one month. Biodesix, 303-417-0500

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