



**MEDICOVER**  
GENETICS

**VERACITY**<sup>®</sup>  
new generation NIPT



**VERACITY, new  
generation NIPT**

Delivering results  
you can trust

## WHAT DOES PRENATAL DIAGNOSIS INVOLVE?

Maternity guidelines suggest a number of examinations for an expectant mother. In addition, further prenatal tests are available to identify developmental disorders in the fetus early in pregnancy.

### TRADITIONAL PRENATAL TESTS

#### First Trimester Screening:

Blood test and nuchal translucency ultrasound

- **Timing:** 11 - 13 weeks of pregnancy
- **Purpose:** Screens for trisomy 21 (Down syndrome), other chromosomal aneuploidies, and physical defects
- **Accuracy:** Within a range of 80–95%

#### Second Trimester Anomaly Scan:

Ultrasound examination

- **Timing:** 18 - 22 weeks of pregnancy
- **Purpose:** Screens for chromosomal abnormalities (e.g. trisomy 21) and checks for major physical defects in various organs and limbs
- **Accuracy:** Within a range of 75-90% for trisomy 21

If the prenatal screening indicates that the fetus has a high risk of having a genetic condition, your doctor will recommend an **invasive test such as amniocentesis or chorionic villus sampling**. These invasive tests are highly accurate (>99%) with a low risk of miscarriage (approximately 1 in 1000).

### NON-INVASIVE PRENATAL TEST (NIPT)

A screening test during pregnancy to assess the risk of chromosomal disorders, including trisomy 21, 18 and 13. It also reveals the gender of the fetus.

## WHY SHOULD I CONSIDER NIPT?

According to Fetal Medicine Foundation (FMF) Germany, combined first trimester screening and NIPT are reliable and non-invasive ways to check for common chromosomal abnormalities in the first trimester.

In combination with prenatal ultrasound examination, NIPT allows a thorough pregnancy evaluation and improves prenatal care.

By using NIPT, an invasive test such as amniocentesis or chorionic villus sampling may be avoided.

### VERACITY, NEW GENERATION NIPT

VERACITY is a non-invasive prenatal test (NIPT) that can accurately detect the presence of certain fetal genetic disorders as early as the 10<sup>th</sup> week of pregnancy, through a blood sample from the mother.

Validated for singleton and twin pregnancies

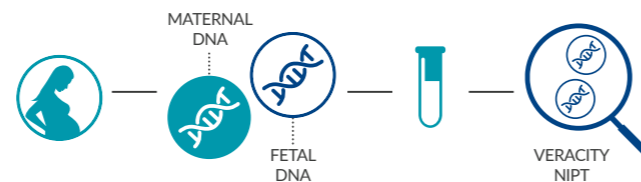
Applicable for IVF pregnancies

Applicable for women of all ages

Preferred for its accuracy and robustness

### HOW DOES VERACITY WORK?

During pregnancy, fetal DNA travels from the placenta to the maternal bloodstream and circulates along with the mother's DNA. Our proprietary technology analyzes the fetal DNA and detects certain genetic disorders with high accuracy and precision.



## WHAT DOES VERACITY TEST FOR?

The conditions tested by VERACITY occur with varying frequency in the population and have a serious effect on life or quality of life of the affected individual.

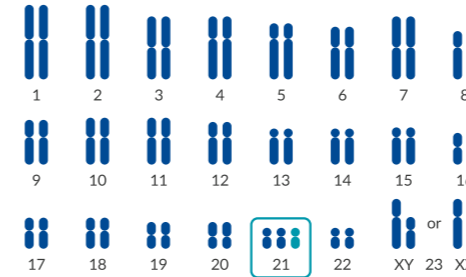


Illustration of a cell's genetic make-up with 22 chromosomal pairs plus a pair of sex chromosomes. Trisomy 21 - three copies of chromosome 21 instead of two.

### AUTOSOMAL ANEUPLOIDIES

A change in one of the chromosomal pairs 1-22

- Trisomy 21 (Down syndrome)
- Trisomy 18 (Edwards syndrome)
- Trisomy 13 (Patau syndrome)

Down, Edwards and Patau syndromes are the most common autosomal fetal aneuploidies. The incidence of these conditions increases with maternal age.

### SEX CHROMOSOME ANEUPLOIDIES

A change in the 23<sup>rd</sup> chromosomal pair, which determines gender

- Monosomy X (Turner syndrome)
- Trisomy X (Triple X syndrome)
- XXY (Klinefelter syndrome)
- XYY (Jacobs syndrome)
- XXYY

Sex chromosome aneuploidies also occur. The incidence of these conditions is not associated with maternal age.

### MICRODELETIONS (SELECTED)

A small part of a chromosome is missing

- del22q11.2 (e.g. DiGeorge syndrome)
- del1p36
- del17p11.2 (Smith Magenis syndrome)
- del4p16.3 (Wolf Hirschhorn syndrome)

Microdeletions are rare. Of these, DiGeorge syndrome is the most likely to occur.



## HOW ACCURATE AND SAFE IS VERACITY?

VERACITY detects the most common fetal aneuploidies with high accuracy (>99%). VERACITY is safe for your baby as it only requires a simple blood sample from the mother, which is not associated with the risk of miscarriage unlike invasive methods like CVS and amniocentesis.

## HOW TO TAKE THE TEST?



1. Visit your doctor for a consultation on NIPT and genetic counseling



4. A medical report is delivered to your doctor



2. Provide blood sample



5. Speak with your doctor about the results and next step

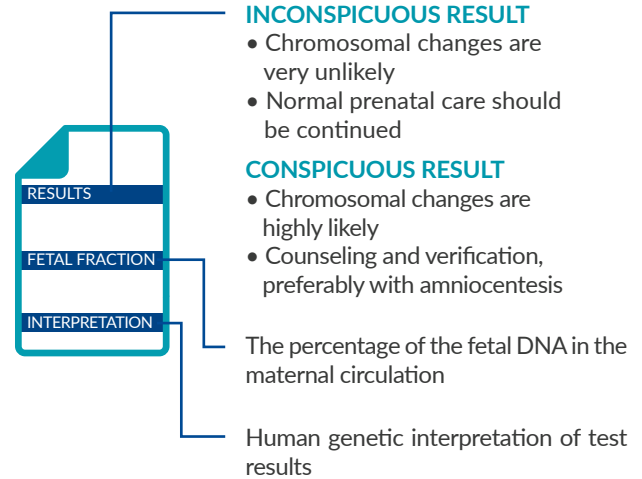


3. Sample shipment and test performance in our laboratory

Results will reach your physician in 5 working days following sample receipt. In rare cases, a repetition of the analysis may be necessary, prolonging the time of results delivery.

## WHAT WILL THE REPORT SAY?

The VERACITY report will be sent to your healthcare provider. It will include a detailed explanation of the results:



In rare cases, a result is not possible due to the low amount of fetal DNA (under 3%) and the test must be repeated with a new blood sample. Very rarely, a result cannot be achieved.

An inconspicuous result does not guarantee a healthy newborn. The test only detects the listed chromosomal disorders, and other genetic and non-genetic diseases are not detected.



## HOW MUCH DOES VERACITY COST?

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### CORE OPTION

Trisomy 21, 18 and 13 169,03 €

The core option is usually covered by your statutory health insurance.

### ADDITIONAL OPTIONS

You may choose from these additional options (not covered by statutory health insurance):

- Gender information +14,55 €
- Sex chromosome aneuploidies (singleton pregnancy only) +49,25 €
- Microdeletion 22q11.2 (DiGeorge) +49,25 €
- Microdeletions 1p36, 17p11.2, 4p16 +49,25 €

## CONTACT

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