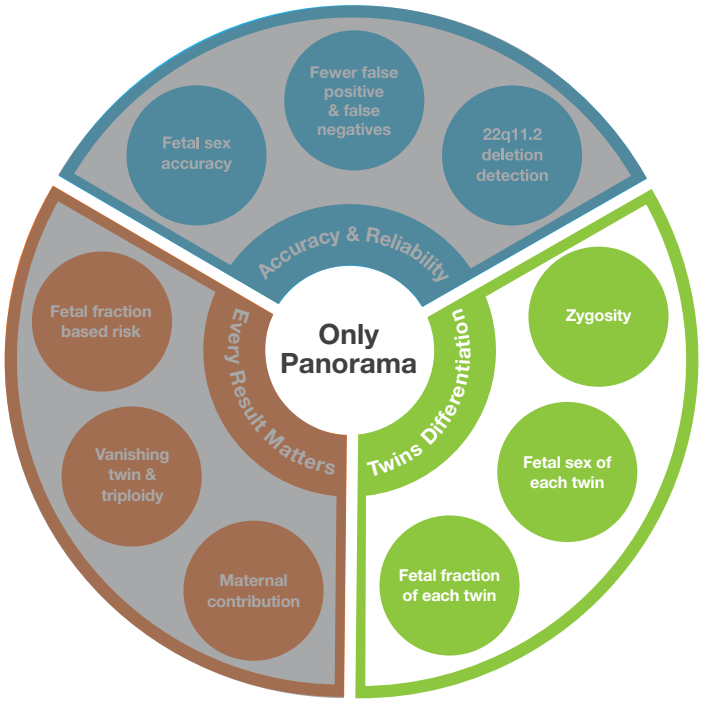
natera | Panorama®
Next-generation NIPT

With over 2 million tests performed, **“Only Panorama”** gives you more accuracy, **unique twins differentiation**, and makes every result matter



Only Panorama reports zygosity, individual fetal fractions for dizygotic twins, and fetal sex for each twin[1]

As you know, the rate of twin births is increasing, and with it, the increased risk of unique twin complications like twin-twin transfusion syndrome (TTTS)[2]. In a recent clinical study published by Norwitz et al, cell-free DNA samples from 126 twin pregnancies were prospectively analyzed to validate the ability of Natera’s unique single nucleotide polymorphism (SNP)-based method to determine zygosity, fetal sex and aneuploidy status.[1]

Highlights of the twins clinical validation study results:

N = 93
0
Zygosity call errors[1]

Only Panorama
NIPT can determine zygosity, and with 100% accuracy[1*]

N = 102
0
Fetal sex error for each twin[1]

Only Panorama
can genetically distinguish female/female, male/female & male/male pairs with 100% accuracy[1*]

N = 107
>99.9%
Combined sensitivity & specificity[1*†]

Only Panorama
has the highest accuracy in the detection of aneuploidies for both singleton and twin pregnancies[1,3-13]

A case study that shows what "Only Panorama" can do for your patients**

Background
35 year old patient w/BMI 47
Presents at 15wk w/twin pregnancy
U/S visualization limited by patient obesity
U/S showed potentially dichorionic twins

Findings
Panorama demonstrated monozygotic females
Referred to MFM for probable monochorionicity
U/S 2 wks later showed Stage II Quintero TTTS

Clinical implications
Chorionicity is not always discernible
Only Panorama can determine zygosity by NIPT
Obtain the most accurate information to make well-informed clinical decisions

If you have other interesting twins cases, please contact us at med_cases@natera.com

Panorama is powered by SNP-based technology that provides unique capabilities as regards both singleton & twins, capabilities that all other NIPTs lack.

References
1. Norwitz et al. J Clin Med. 2019 Jun; 8:937; doi:10.3390/jcm8070937. 2. Fosler et al, Ultrasound Obstet Gynecol 2017;49:470-477. 3. Nicolaides, et al. Prenatal Diagnosis 2013; DOI: 10.1002/pd.4103. 4. Pergament et al. Obstetrics & Gynecology, July 2014 (online). 5. Ryan, et al. Fetal DiagnTher 2016; DOI: 10.1159/000442931. 6. Stokowski et al. Prenat Diagn. 2015 Oct; DOI: 10.1002/pd.4686. 7. Palomaki, et al. Genet Med. 2011 Nov;13(11):913-20. 8. Palomaki, et al. Genet Med. 2012 Mar;14(3):296-305. 9. Porreco et al. Am J Obstet Gynecol 2014;210. 10. Mazloom et al. Prenat Diagn 2013;33:591-7. 11. Sehnert et al. MolecularDiagn and Gene 2011. 12. Bianchi, et al. Obstet Gynecol. 2012 May;119(5):890-901. 13. Bianchi et al. N Engl J Med 2014;370:799-808. *Based on published validation study. **Composite case. †Across T21, 18 and 13 for each twin

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natera®
Conceive. Deliver. Thrive.