



# Multigene NGS analysis on products of conception (POC) tissue



*Identifies genetic determinants associated with non-chromosomal recurrent spontaneous pregnancy loss*

[www.pocadvance.it](http://www.pocadvance.it)



**POCADVANCE**

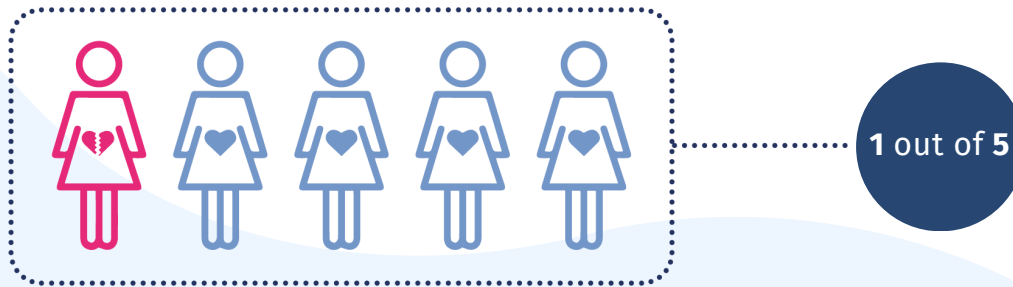
Tissue Genetics



## CLINICAL BACKGROUND

**Spontaneous miscarriage** is the most common complication in early pregnancy, with an estimated incidence of **15–25%** clinically recognized pregnancies. In the vast majority of cases, the event is attributable to **chromosomal abnormalities<sup>1-2</sup> of the products of conception (POC)**—and in these contexts, cytogenetic or cytogenomic analysis of the POC often provides a clinically conclusive answer.

But what happens when that answer does not come? Approximately **40%** of miscarriage events remain without an identified cause. Yet, in many cases, a cause does exist: **pathogenic variants** in genes involved in **embryo implantation, placental formation and function, maternal–fetal immune tolerance, and early embryonic development** may represent genetic determinants predisposing to recurrent pregnancy loss that are not captured by conventional investigations.



<sup>1</sup> D'Ippolito S. et al., 2017

<sup>2</sup> Rosenfeld J.A. et al., 2015



# POCADVANCE

Tissue Genetics

## THE POCADVANCE TISSUE GENETICS TEST

**POCADVANCE TISSUE GENETICS** is a multigene **Next-Generation Sequencing (NGS)**-based test that investigates genetic determinants associated with **non-chromosomal recurrent spontaneous pregnancy loss**.

### Main objectives

**POCADVANCE TISSUE GENETICS** enables targeted molecular evaluation of **genetic factors** predisposing to recurrent pregnancy loss. The test is designed to:

- investigate **genetic causes** associated with **recurrent miscarriages** and/or **implantation failures** (IVF/ICSI);
- provide clinically relevant information for **reproductive risk assessment** and **couple counseling**;
- further evaluate cases in which cytogenetic/cytogenomic analysis of the POC **has excluded a chromosomal cause** of pregnancy loss.



## TWO LEVELS OF ANALYSIS

### FOCUS

Targeted analysis of **19 genes** in which pathogenic variants have been associated with **non-chromosomal recurrent spontaneous pregnancy loss**.

Genes Analyzed			
NLRP7 (NALP7)	KHDC3L	SYCP3	HLA-G
WNT6	CEP250	CGB	NLRP10
PROKR1	FOXP3	OSBPL5	C4BPA
ANXA5	CD46	REC114	FOXD1
NLRP5	PADI6	TLE6	

### EXOME

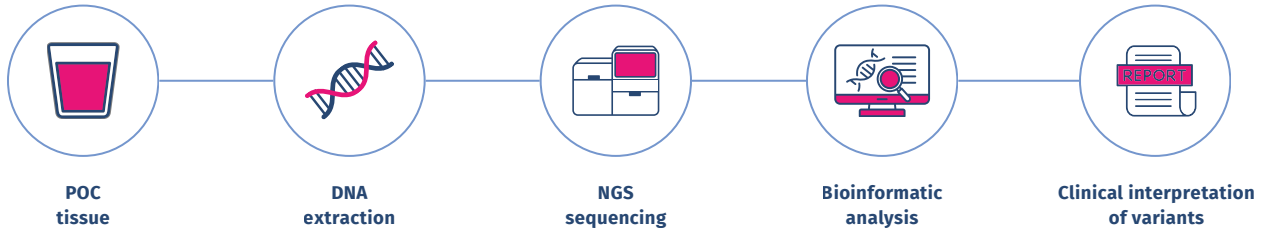
**Clinical Exome Sequencing:** sequencing of the coding regions of approximately **7,000 genes**, including genes known to be associated with pregnancy loss and related phenotypes.

#### Clinical relevance

Identification of a **pathogenic variant** in one of the analyzed genes suggests a possible genetic determinant associated with **recurrent spontaneous pregnancy loss** and may support more informed reproductive planning and **personalized counseling**.



## TECHNOLOGY: HIGH RESOLUTION AND ADVANCED BIOINFORMATICS



### Key analytical features:

- ➔ **FOCUS**: full exon sequencing (whole-exon sequencing) of the panel genes
- ➔ **EXOME**: Clinical Exome Sequencing (~7.000 genes)
- ➔ Advanced pipeline for **variant detection, annotation, and prioritization**



## TEST RESULTS



### POSITIVE

#### **Pathogenic variant detected.**

Clinical significance should be interpreted in the context of:

- ➔ reproductive and clinical history
- ➔ laboratory/instrumental findings
- ➔ cytogenetic/cytogenomic results



### NEGATIVE

#### **No pathogenic variant detected.**

This does not exclude a genetic basis, as the cause may involve:

- ➔ genes not included in the panel (FOCUS level)
- ➔ variants in regions not investigated or not fully assessable
- ➔ non-genetic multifactorial determinants





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## INDICATIONS FOR TESTING

**POCADVANCE cfDNA GENETICS** is particularly indicated in the following clinical settings:

- ✓ **spontaneous miscarriage** (anembryonic gestational sac, absence of cardiac activity, miscarriage in progress) when a timely, non-invasive investigation is desired;
- ✓ history of **recurrent miscarriage** with no identified chromosomal cause;
- ✓ **repeated pregnancy losses** in the absence of an exhaustive clinical explanation.



## HOW TO ORDER THE TEST



Kit  
request



Documentation  
completion



Sample  
collection



Sample  
shipment



Report  
delivery

### Samples required:

- 1 POC Tissue
- 2 Maternal buccal swab

**Sample handling notes:** the tissue must be placed in the provided tube and stored in saline solution. If shipment is delayed, refrigeration at +4°C is recommended.

Turnaround time



15 days

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## LABORATORIES

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