

CooperSurgical®

Transformational technologies drive the next generation of PGT-A



Christopher Weier, PhD

CooperSurgical Research and Development
Senior Scientist



Preimplantation Genetic Testing – PGT

Laboratory tests to look at the health of the developing embryo



CooperSurgical®

PREIMPLANTATION GENETIC TESTING

ANEUPLOIDY



Patient population

All IVF patients

Goal

Increase chances of achieving a successful pregnancy

MONOGENIC DISORDERS



Patients at high-risk of having a child with a specific genetic disorder

Reduce risk of passing on an inherited condition

STRUCTURAL REARRANGEMENT

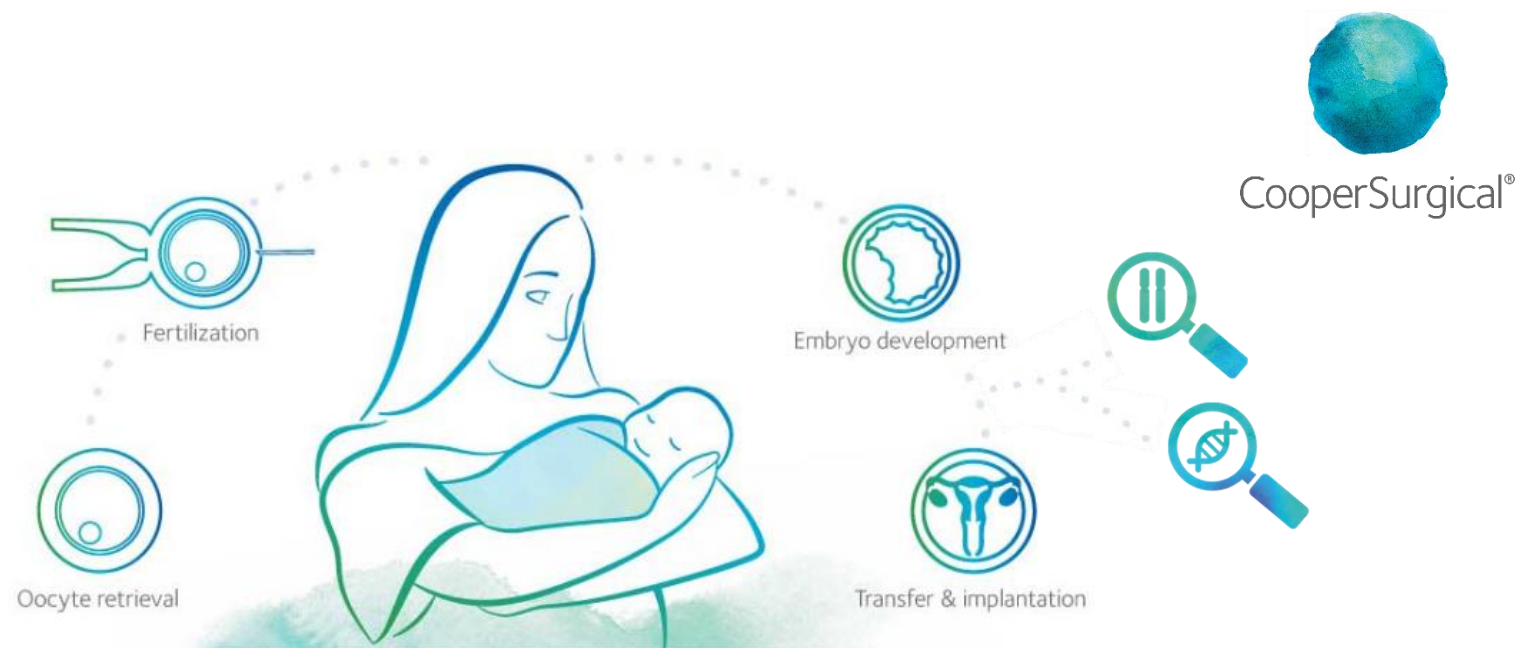


Patients with a chromosome rearrangement

Increase chances of achieving a successful pregnancy with a normal/balanced chromosome constitution



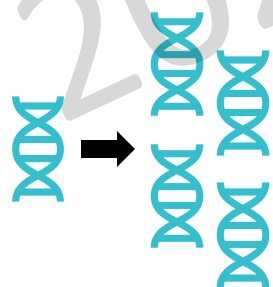
PGT during IVF



Biopsy



Genomic
Amplification



Library
Prep.



Sequencing



Data
Analysis



Report





Amplification is the first (*and most important*) step



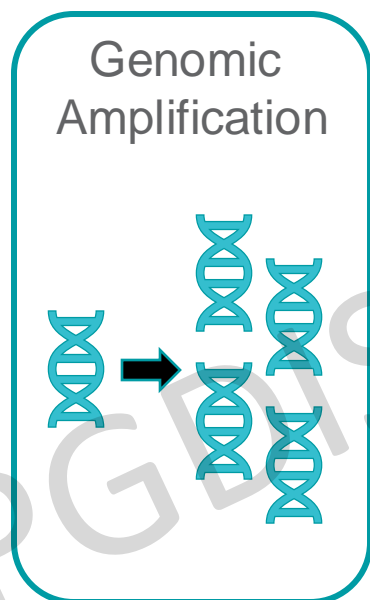
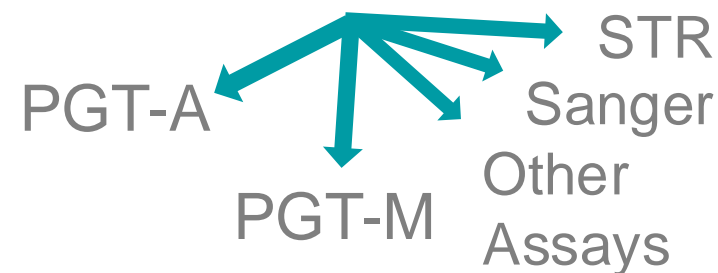
CooperSurgical®

5-6 Trophectoderm Cells
~50 picograms genomic DNA

20,000 X



~1000 ng Amplified Product



✓ **Robust**

high consistency of producing results

✓ **Accurate**

high fidelity = very few errors

✓ **Complete**

low bias = nearly whole genome & both alleles

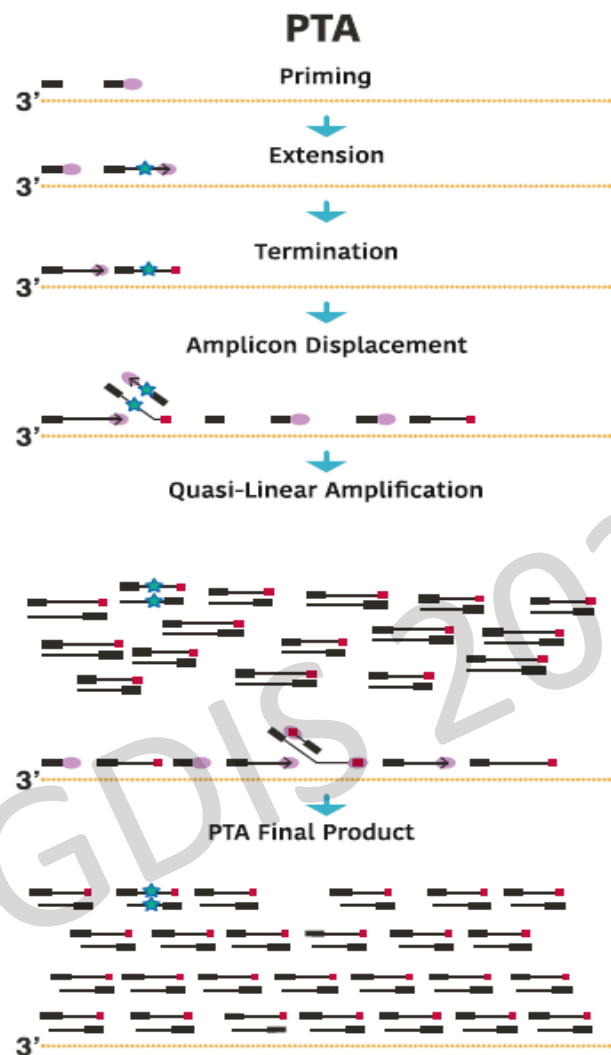


True whole genome amplification

Accurate, unbiased distribution of data across the entire genome

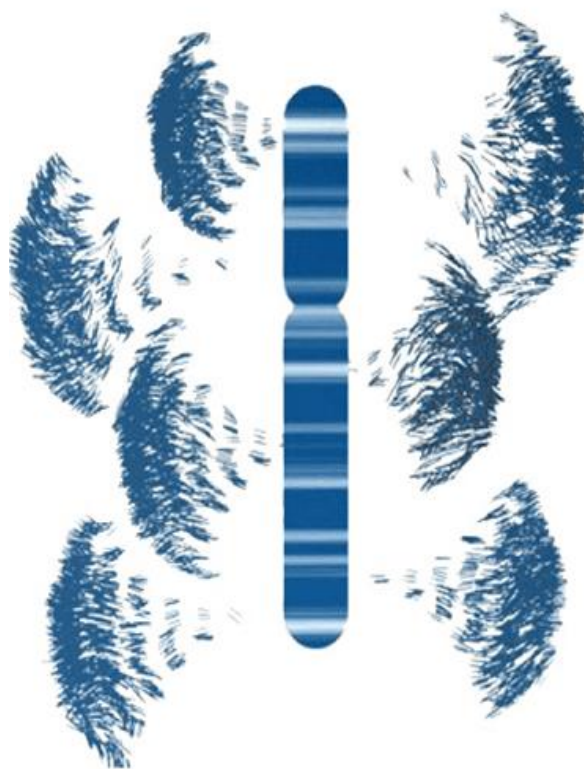


CooperSurgical®



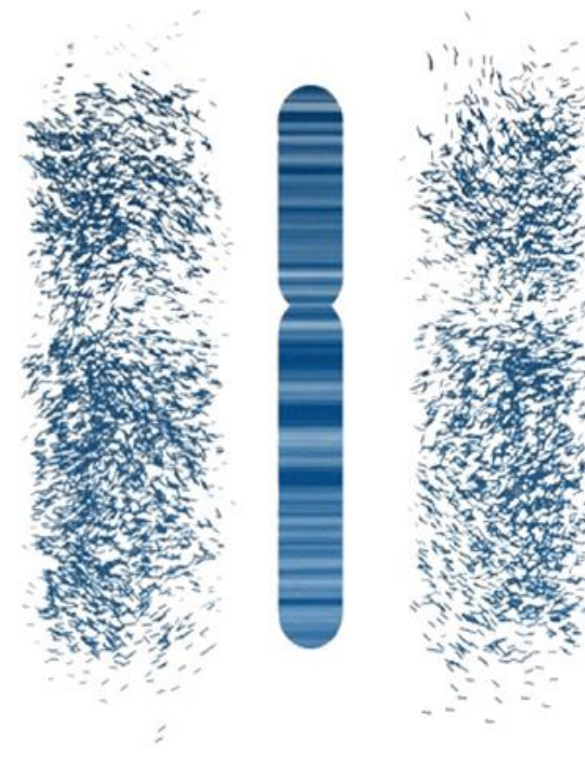
Non-PTA

Random Priming
Amplification Methods



PTA

Primary Template
Directed Amplification





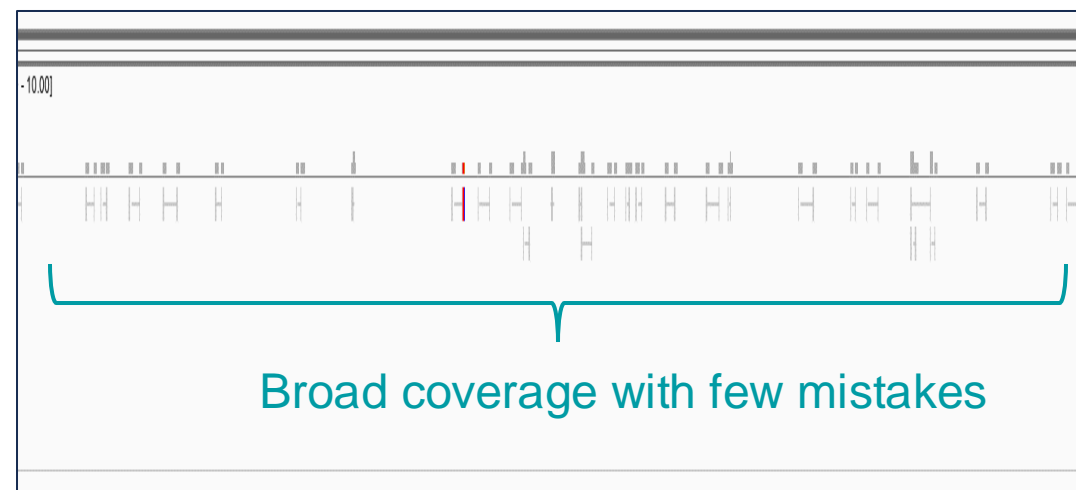
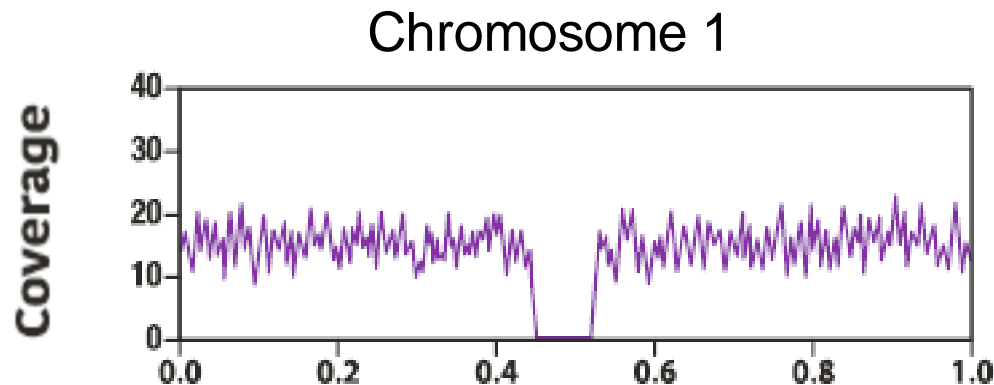
True whole genome amplification

Accurate, unbiased distribution of data across the entire genome

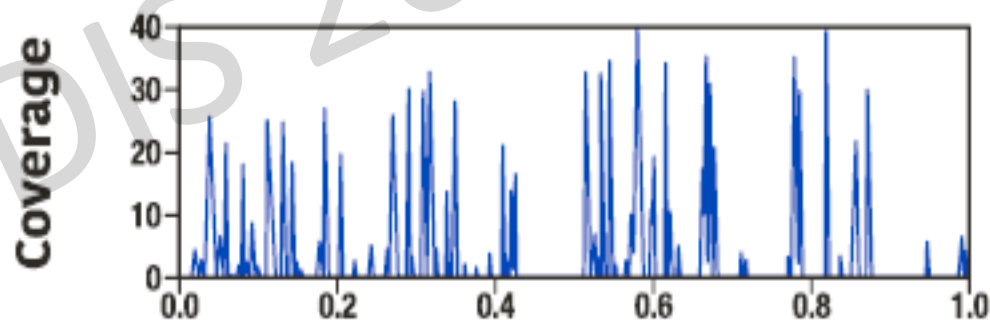


CooperSurgical®

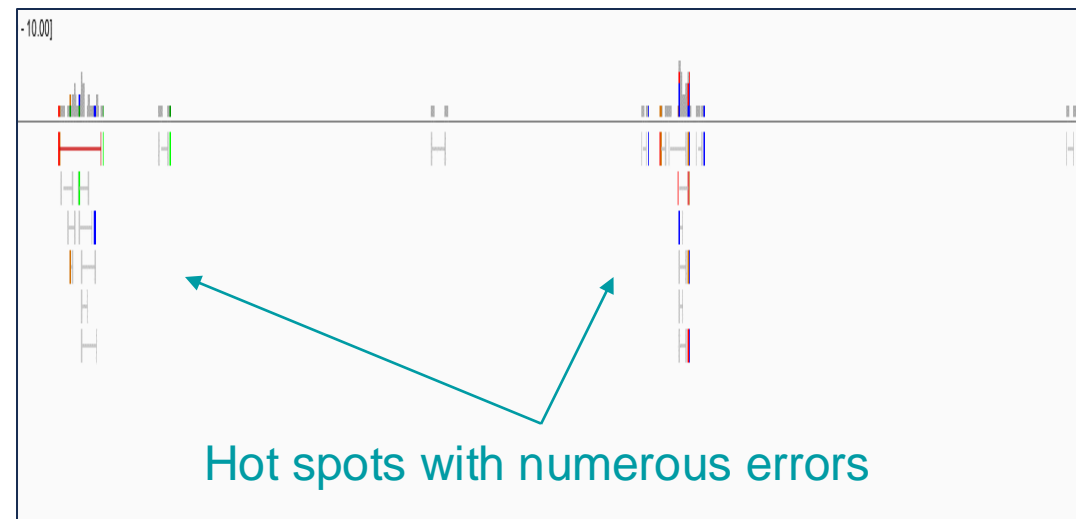
PTA



Non-PTA



- ✓ 97% of the genome
- ✓ ADO < 1 %
- ✓ Error Rates < 0.1%



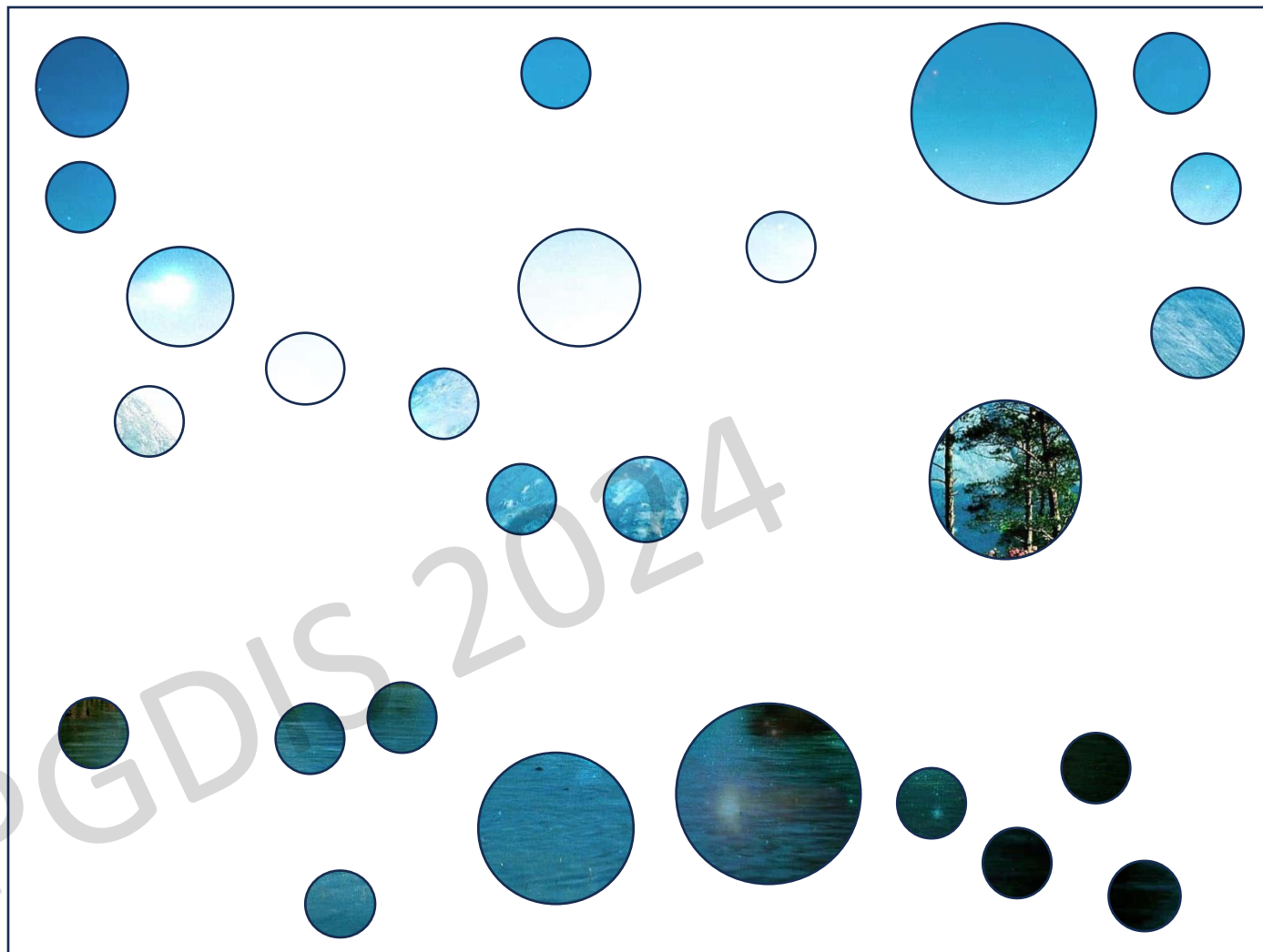


Filling in the gaps with PTA

Our most complete and accurate basis for PGT



CooperSurgical®

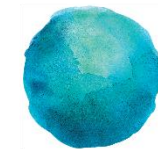


How do we
most responsibly
use this technology
to the benefit of
patients?

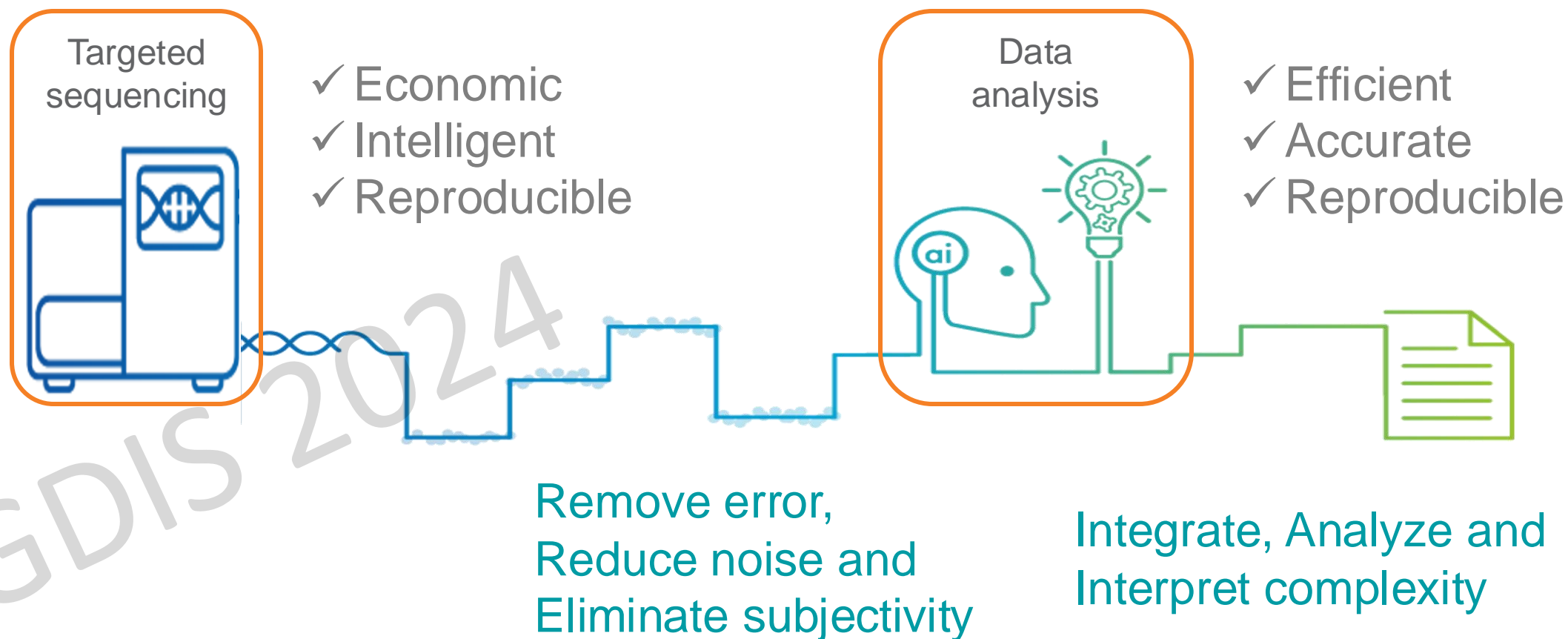


Accurate and actionable testing

Precision-based approaches deliver utility and confidence



CooperSurgical®



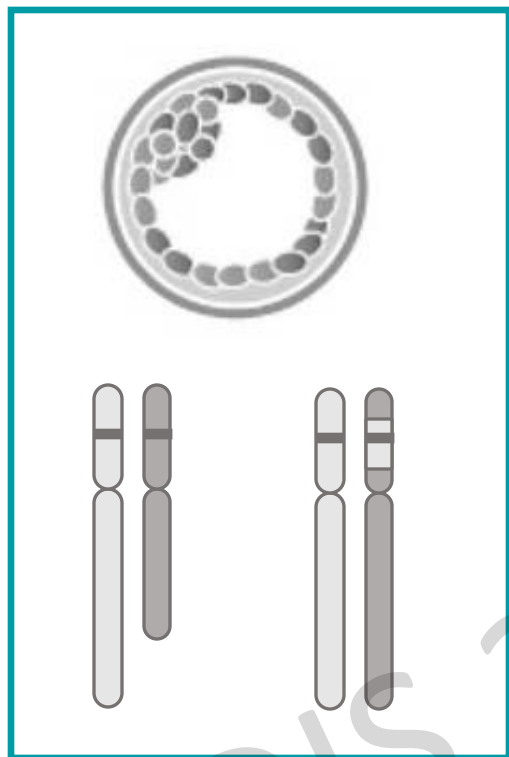


Accurate and actionable testing

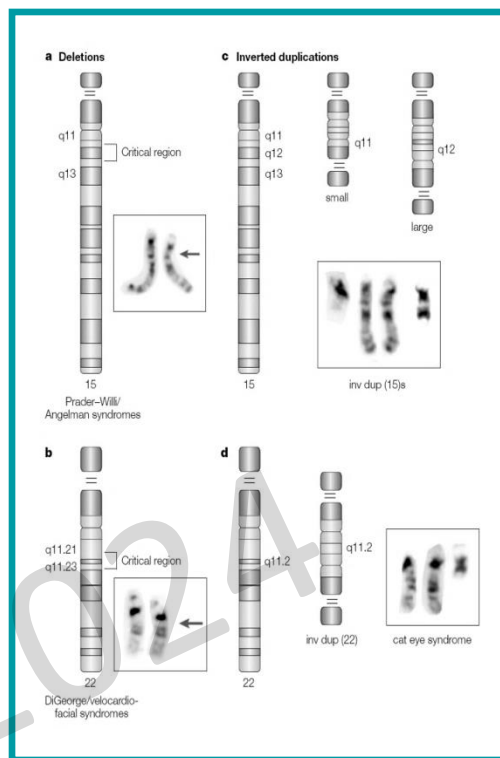
Precision-based approaches deliver utility and confidence



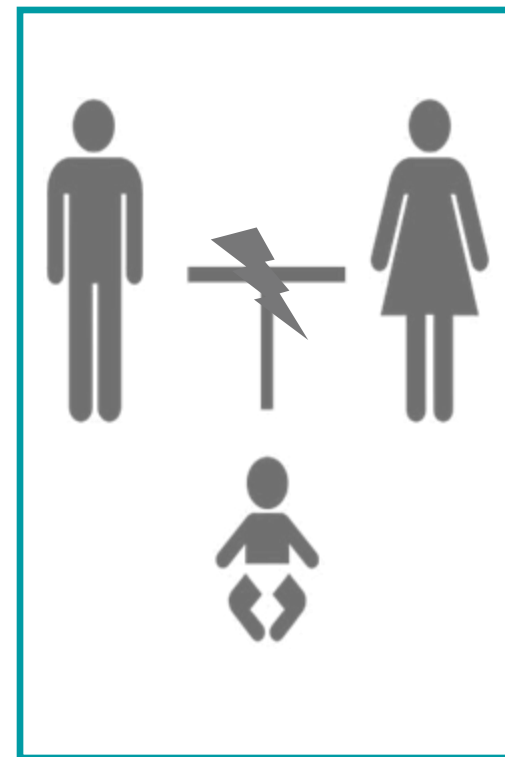
CooperSurgical®



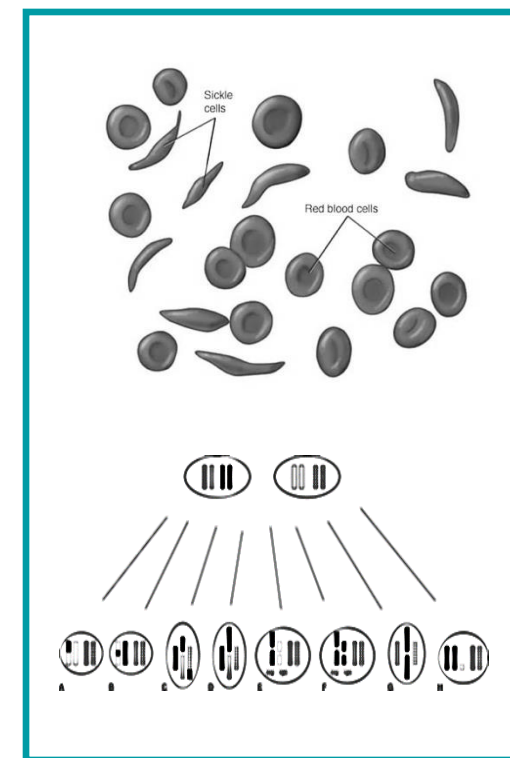
Segmental resolution,
Mosaicism, and Loss
of Heterozygosity
(LoH)



Deletion and
Duplication
Syndromes



Screening for *de novo*
mutations and
predisposition genes



Precision testing for
common disorders
and rare conditions

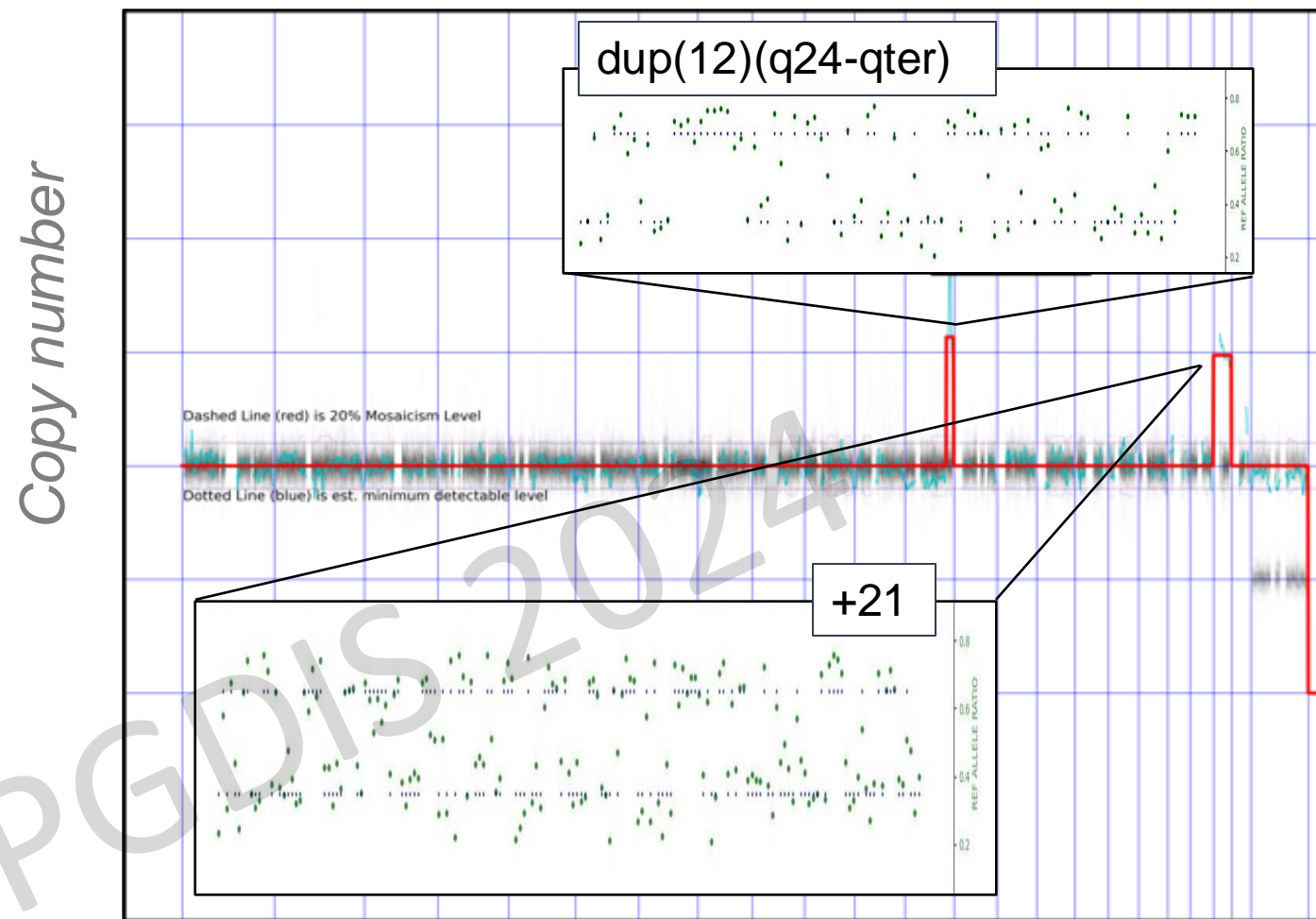


Whole chromosome and segmental CNV

High resolution copy number variation + allele analysis



CooperSurgical®



TWO-FACTOR “AUTHENTICATION”

Tiered copy number and SNPs –
High confidence reporting through new
levels of data analysis

- Locus specific,
high depth sequencing
- 10x reduction in noise
- Up to 150,000 SNPs



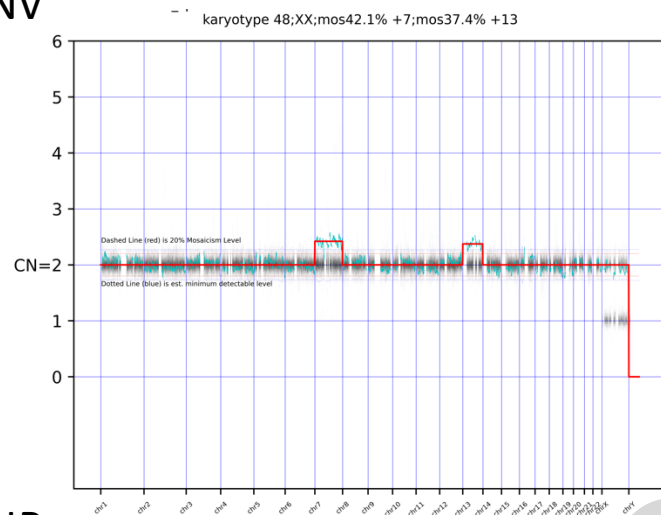
Clarifying mosaic embryos

CNV + SNP + Analysis

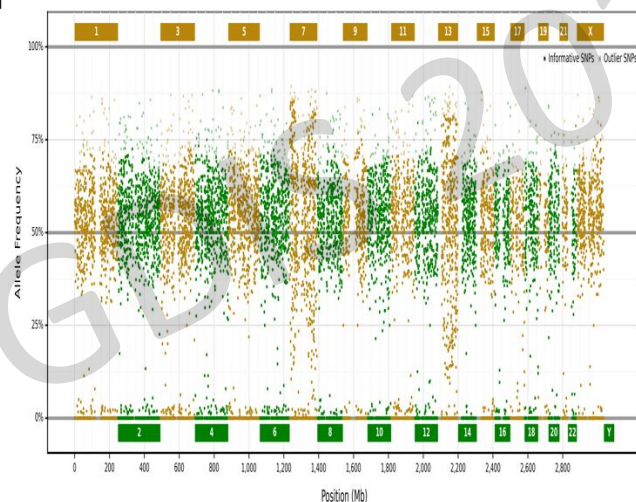


CooperSurgical®

CNV

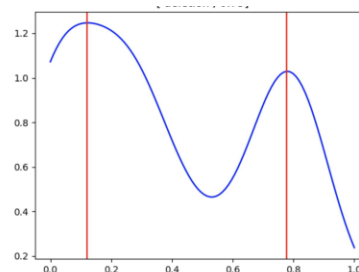


SNP

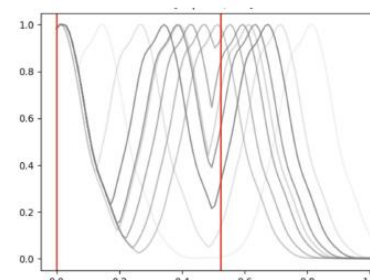
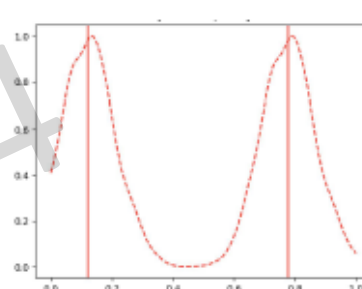


CooperSurgical internal data

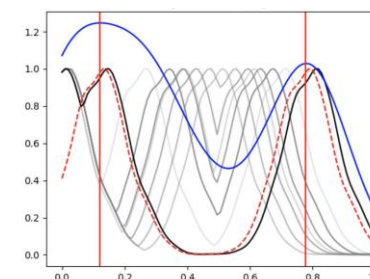
Mosaic Resolution by Decomposition



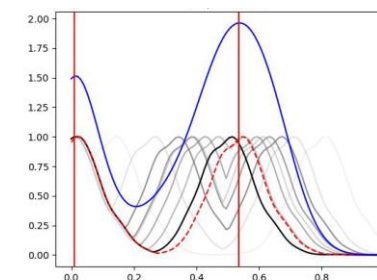
Allele Clusters
estimated from
SNP density



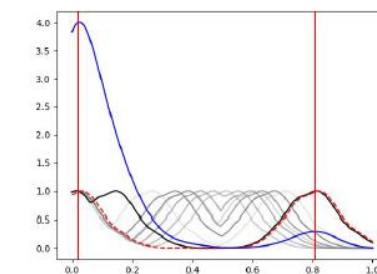
Clinical and
Theoretical
Decomposition to
estimate mosaicism



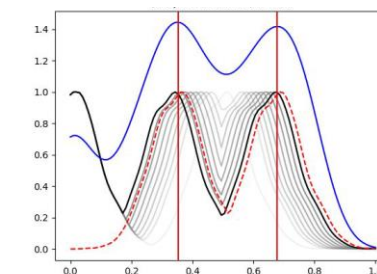
Diploid



Haploid



Triploid





Clarifying mosaic embryos

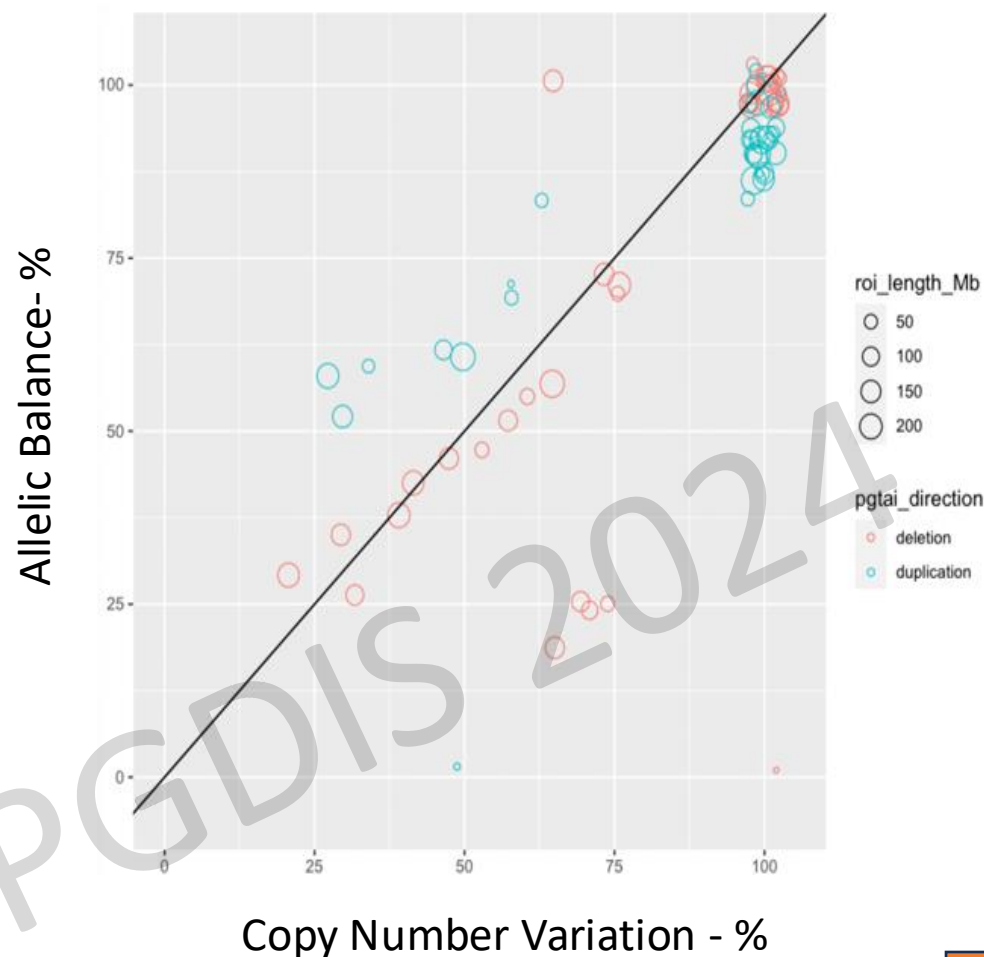
CNV + SNP + Analysis



CooperSurgical®

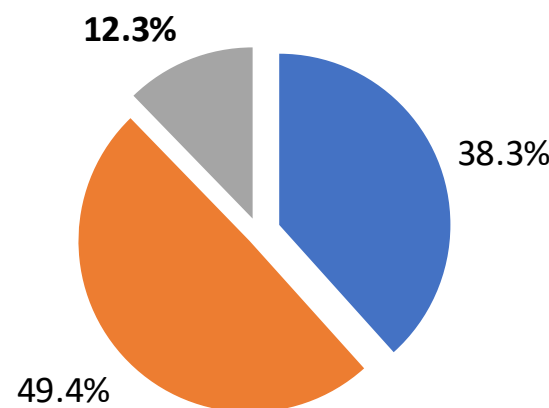
Integrated CNV/SNV analysis of 327 mosaics:

- ✓ 67.6% mosaics are confirmed
- ✓ 19% of low-level mosaics revert to euploid
- ✓ 13% of high-level mosaics are aneuploid

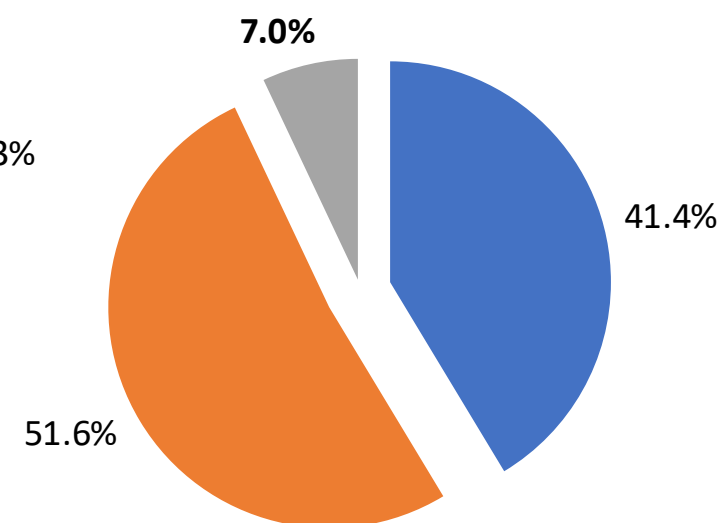


CooperSurgical internal data

CNV-ONLY



PTA + CNV/SNV + Analysis



EUPLOID ANEUPLOID MOSAIC

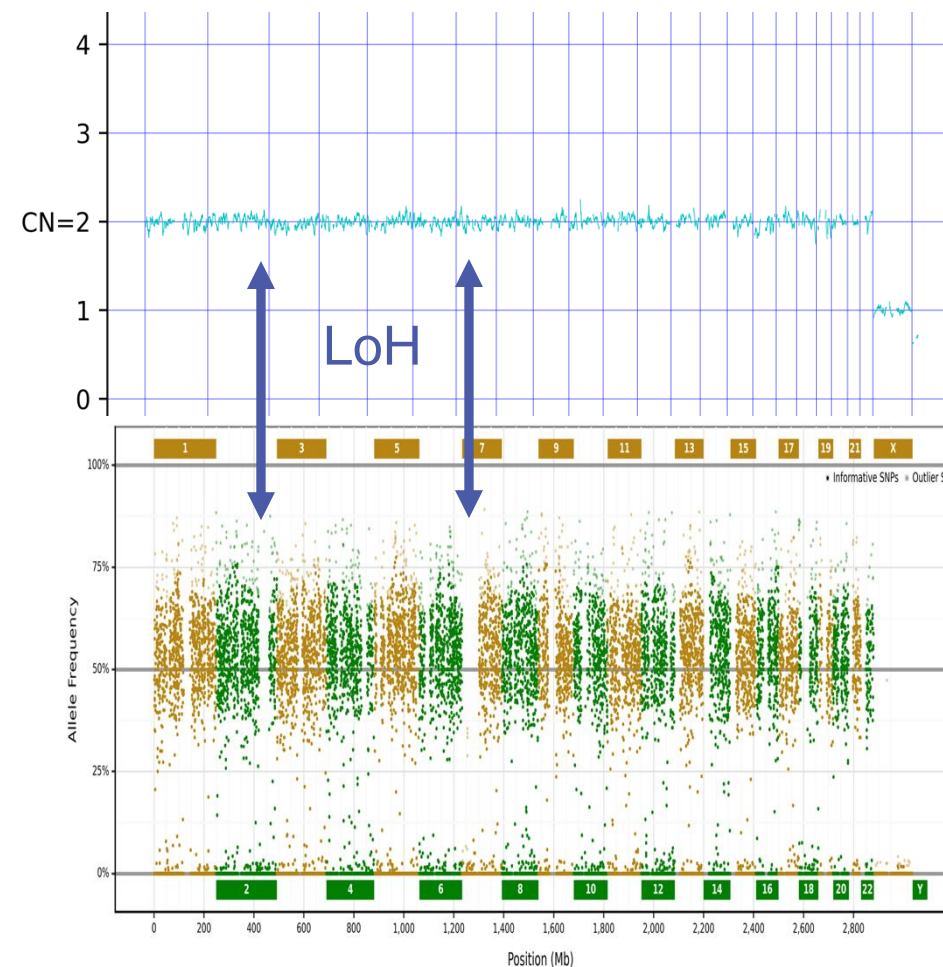
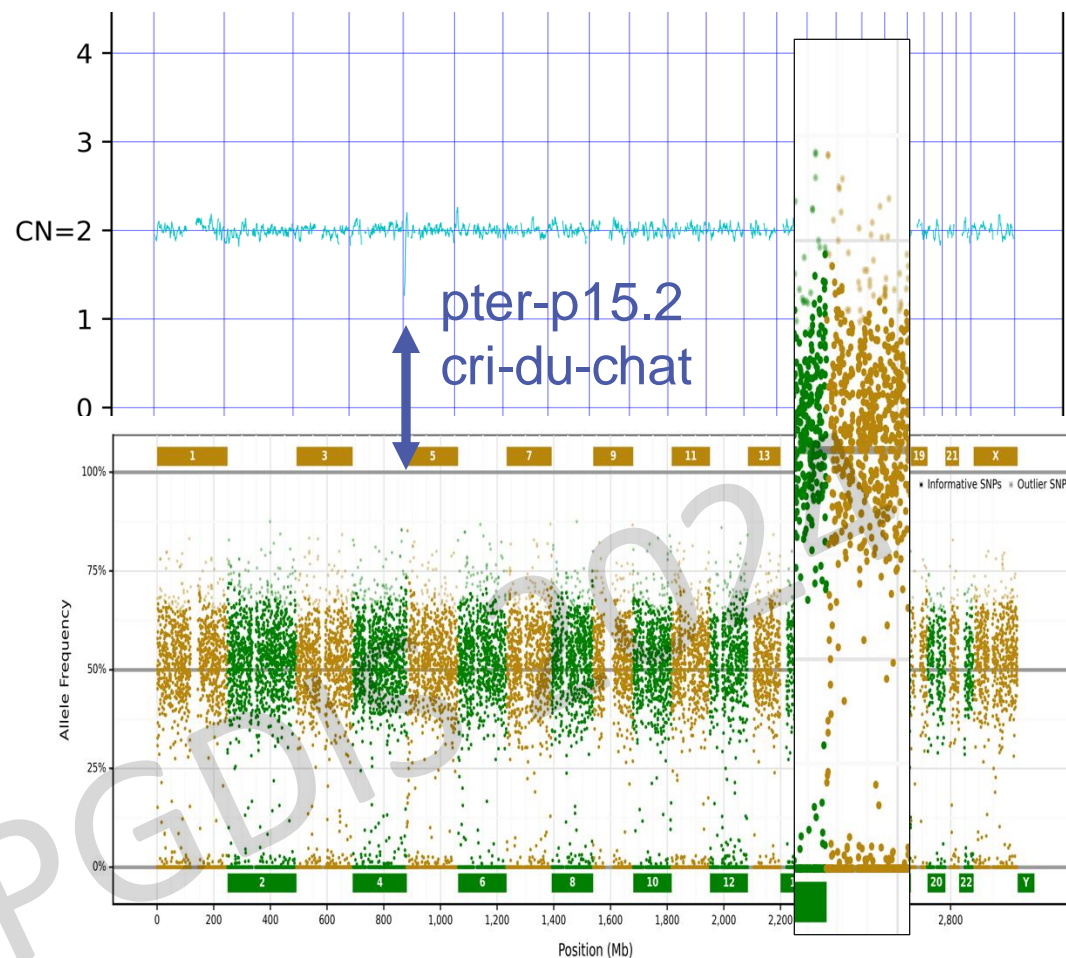


Minor variation with major clinical impact

Deletions/Duplication syndromes and Loss of Heterozygosity



CooperSurgical®





Direct mutation analysis

Screening embryos for *de novo* and inherited mutations

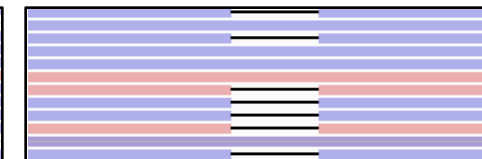
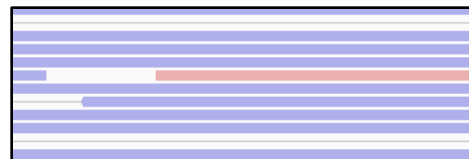


CooperSurgical®

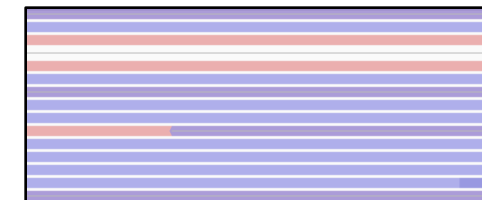
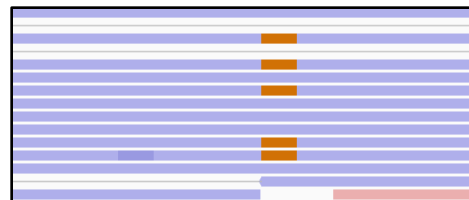
Gene	Condition	Concordant / Embryos Tested
<i>BRCA 1/2</i>	Hereditary Breast and Ovarian Cancer	44 / 44
<i>CFTR</i>	Cystic Fibrosis	21 / 21 →
<i>GJB2</i>	Non-Syndromic Hearing Loss	21 / 21
<i>HBB</i>	Sickle Cell Anemia	16 / 16
<i>SDHB</i>	Her. Paraganglioma-Pheochromocytoma	12 / 12
<i>APC</i>	Familial Adenomatous Polyposis	9 / 9
<i>TP53</i>	Li-Fraumeni syndrome	6 / 6
<i>PMM2</i>	Congenital Disorder of Glycosylation, T1a	6 / 6
<i>MEFV</i>	Familial Mediterranean Fever	6 / 6
<i>GALC</i>	Krabbe Disease	6 / 6
<i>ATM</i>	ATM-Associated Cancer Susceptibility	6 / 6
<i>GAA</i>	Glycogen Storage Disease, Type 2	5 / 5
<i>HBA1/HBA2</i>	Alpha-Thalassemia	5 / 5

Total Concordant 200 / 200

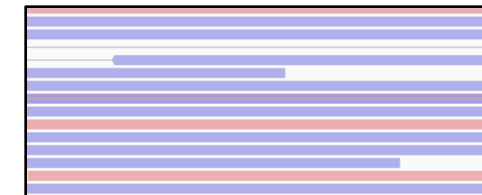
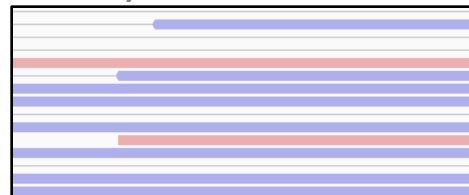
Embryo 1 – Paternal Carrier



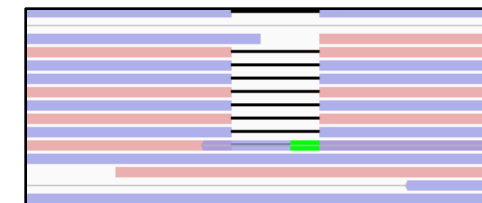
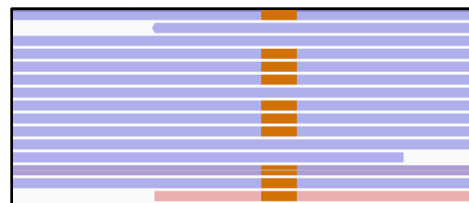
Embryo 2 – Maternal Carrier



Embryo 3 – Unaffected



Embryo 3 – Affected



c.3041 A > G

c.1521_1523 del CTT



CooperSurgical®

Thank you!

Christopher Weier, PhD

CooperSurgical Research and Development
Senior Scientist