

Uncover hidden risk for heart attack and stroke



PLAC Facts

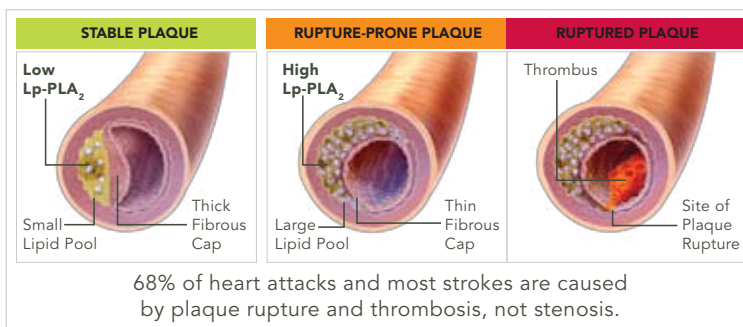
Can a simple blood test aid me in predicting which patients are at greater risk for heart attack or stroke?

Yes. The PLAC Test can.

The PLAC Test is the **only blood test cleared by the FDA** to aid in assessing risk of **both coronary heart disease and ischemic stroke** associated with atherosclerosis.

WHAT IS THE PLAC[®] TEST?

The PLAC Test is a blood test that measures the level of Lp-PLA₂, an enzyme highly specific to vascular inflammation and implicated in the formation of rupture-prone plaque.



WHY IS THE PLAC TEST DIFFERENT FROM OTHER TESTS?

Lp-PLA₂ is independent of traditional cardiovascular risk factors.

- Lp-PLA₂ is produced in the plaque itself making it a more specific test than other inflammatory markers that measure systemic inflammation such as hsCRP.
- Because elevations in Lp-PLA₂ are independent of traditional risk factors, including obesity, the results of the PLAC Test provide valuable additive information to help determine the appropriate care for your patients

WHO SHOULD BE TESTED?

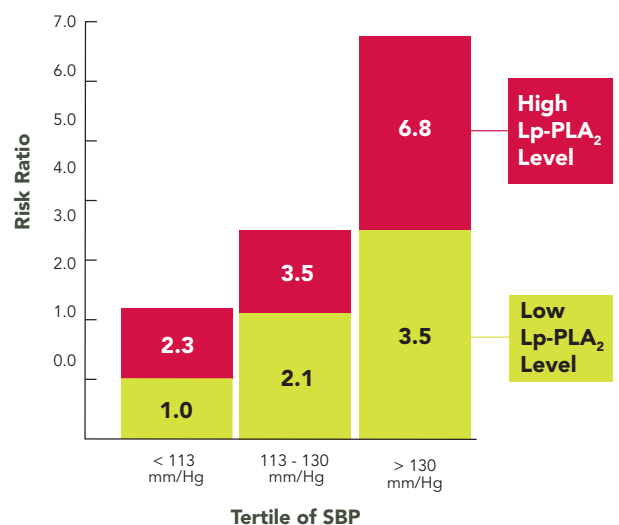
The PLAC Test may be used as a management tool in patients at intermediate to high risk for coronary heart disease or ischemic stroke events. Suitable patients may include patients with two or more risk factors, such as family history of cardiovascular disease or hypertension, even if their overall lipid profile looks normal.

HOW CAN I TELL WHICH OF MY PATIENTS ARE AT INCREASED RISK FOR STROKE?

Stroke is the number 3 killer in the United States and cholesterol is NOT a reliable predictor for stroke. Now there is a simple blood test that can help you uncover hidden risk for both heart attack and stroke.

A patient with normal systolic blood pressure and elevated Lp-PLA₂ levels is over two times more likely to have a stroke while a patient with both elevated systolic blood pressure and elevated Lp-PLA₂ levels is almost seven times more likely to have a stroke.

ARIC STUDY: Lp-PLA₂ INCREASES RISK OF ISCHEMIC STROKE AT ALL LEVELS OF BLOOD PRESSURE¹

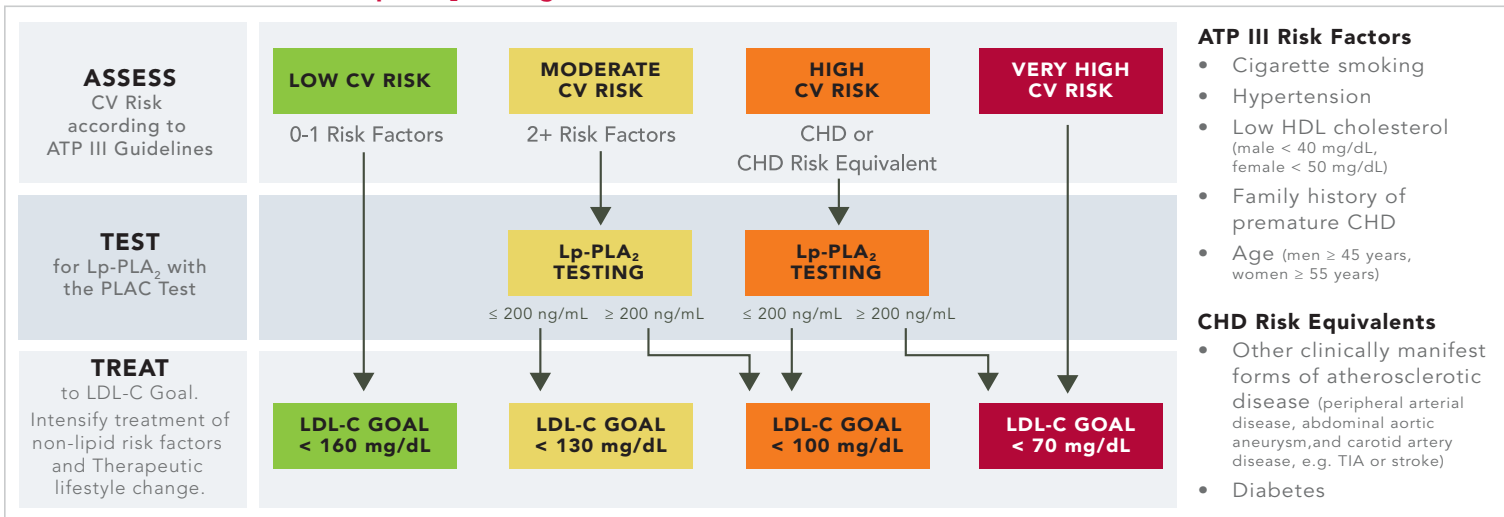


¹ Gorelick PB, et al. Am J Card Suppl 2008.

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Recommendation for use of Lp-PLA₂ Testing¹



HOW WILL THE PLAC TEST HELP IMPROVE PATIENT MANAGEMENT?

The PLAC Test helps identify patients who have “hidden” cardiovascular risk due to the formation of rupture-prone plaque.

- 1/2 of all heart attacks occur in patients with low to moderate cholesterol levels.
- While cholesterol is a useful tool in coronary heart disease, it is not a reliable predictor of stroke.
- 1/3 of all strokes affect individuals between 45 and 65 years of age.
- In the ARIC study, patients with elevated Lp-PLA₂ and high blood pressure were over 6 times the risk for ischemic stroke. Gain additional information to better evaluate patients in need of more aggressive treatment or more frequent monitoring. High Lp-PLA₂ can be a wake-up call to your patients to help improve compliance to therapy.

HOW DOES THE PATIENT PREPARE FOR THE PLAC TEST?

There is no preparation required; this is a simple venous blood draw. The patient does not have to be fasting and can be on medications. The test results are highly specific for inflammation associated with atherosclerosis, and are not likely to be falsely elevated from infections, rheumatologic disorders or obesity.

PAYMENT FOR THE PLAC TEST.

- Medicare currently reimburses \$49.56 for the PLAC Test when medically necessary.
- CPT Code: 83698.
- Many health plans reimburse for the PLAC Test. However, even with FDA clearance, Medicare reimbursement and over 60 peer-reviewed publications, some insurance companies may deny payment because the test is fairly new. diaDexus has worked with many laboratories to offer the test at affordable prices in the event patients have to pay out-of-pocket, a small investment in their future health.

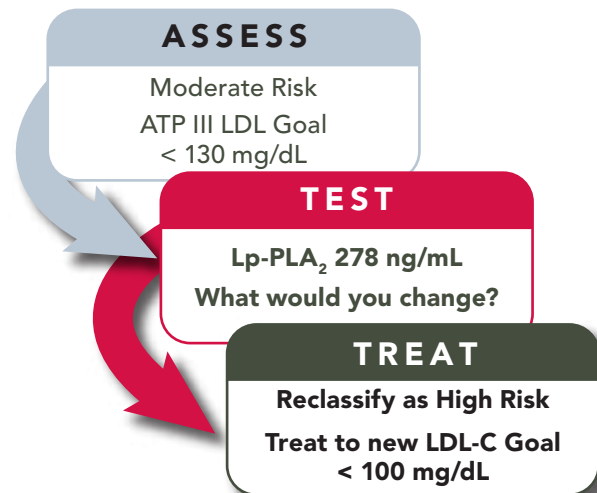
CONSIDER THIS CASE STUDY

Miranda
Age 45



CLINICAL INFORMATION

Smoker
Total Cholesterol 200 mg/dL
HDL Cholesterol 49 mg/dL
Systolic BP 138 mm/Hg
On blood pressure medications
Family history of premature CVD
LDL 121 mg/dL
BMI 31 kg/m², waist 40 in.
Triglycerides 150 mg/dL
Fasting Blood Glucose 98 mg/dL



¹ Davidson, MH, et al. *Am J Card Suppl* 2008

References on file at diaDexus.

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