

## Weekly IR Round-Up

### **Defining our "Why"**

The physical, emotional, and financial costs are staggeringly high when a patient is faced with a re-excision procedure. A <u>recent study</u> published by researchers at MD Anderson Cancer Center quantifies some of these impacts.

Did you know that **40% of patients with DCIS** (an early form of breast cancer) have reoperations due to positive margins?

**10% to 36% of those patients will convert to mastectomy**, greatly increasing complication risks and healthcare costs.

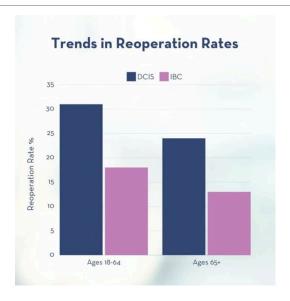


# What are Reoperations in Breast Surgery Costing Healthcare Systems?





Overall reoperation rates for breast-conserving surgery were 21% in females between 18–64 years old and 15% in females 65 years and older. Compared to women with invasive breast cancer (IBC), DCIS patients had even higher reoperation rates: 18% vs. 31% (age 18-64) and 13% vs. 24% (age 65+). Women aged 18-44 with DCIS and commercial insurance had the highest reoperation rate at 40%.



These reoperation realities, on top of the rising incidence of breast cancer in younger women, are the reasons why Perimeter is working diligently on developing innovative technology solutions. We are helping our surgeon customers gain better clarity on margin status in the OR - providing actionable, real-time insights to tailor clinical decisions to each patient - as they strive to reduce re-excisions.

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Perimeter S-Series OCT has 510(k) clearance under a general indication and has not been evaluated by the U.S. FDA specifically for use in breast tissue, breast cancer, other types of cancer, margin evaluation, and reducing re-excision rates. The safety and effectiveness of these uses has not been established. For more information, please visit <a href="https://www.perimetermed.com/disclosures">www.perimetermed.com/disclosures</a>.

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