



Published data from clinical studies demonstrates

Blood test for cervical cancer screening is more accurate than other methods and preferred by 99% of women ¹⁻²

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Cervical cancer can be eradicated, it can be preventable nearly 100% if tests are sensitive, accessible and less invasive

Routine screening and HPV vaccines have proven **not to be enough to eliminate cervical cancer** in the near future, this is because the current screening tests have several barriers:

1 Low sensibility

Citology test has 35% sensibility for LSIL and 43% for HSIL women 25+ yrs.³

2 Lack of resources

Current tests require special infrastructure not available to many vulnerable communities.

3 Highly invasive

Every test in the market (citology or HPV) requires cervical or vaginal sample.

These deficiencies translate into a lack of care and an increase in cervical cancer worldwide. **Despite the fact that this is one of the only cancers that could be eliminated**, we are faced with this reality:⁴⁻⁵

3 in every 5

Women worldwide are **not up to date** on their screening

662.3 k

Women **are living** with cervical cancer

348 k

Women **will die this year** from cervical cancer

80%

Women are diagnosed in **late stages and have less than 15% of survival rate** in 5 years.

56.8%

New cases of cervical cancer are projected to increase by ~ **56.8%** by 2050, and **deaths** by **80.7%**

85%

Cases and deaths occur in 3rd world countries due to **lack of access to timely screening**.





Current screening methods

The Pap smear, introduced over 80 years ago and performed with the use of a speculum, has historically led to a dramatic decline in cervical cancer rates. However, in the past decade, participation in screening **has fallen by about 10%**⁶⁻⁷, and worryingly, **younger women are now facing rising rates of cervical cancer**—an urgent trend that must be addressed.⁸

HPV testing offers higher sensitivity than Pap smears⁹ (over 90% vs. ~60%) but suffers from **lower specificity**, particularly in women under 30, where transient infections are common.¹⁰ As a result, up to half of HPV-positive women may undergo **unnecessary follow-up or colposcopy**, **increasing costs and anxiety**. The test also requires laboratory infrastructure, **remains invasive and is more expensive than cytology**, limiting adoption in low- and middle-income countries where 90% of cervical cancer deaths occur.¹¹⁻¹²



PREVENTIX is the world's **only patent-protected blood test** using proprietary protein biomarkers to close the cervical cancer screening gap—**bringing life-saving, early detection** and timely treatment within reach for all women. **PREVENTIX complements HPV testing** by detecting biomarker expression linked to cervical lesions, closing the gap between viral presence and disease

PREVENTIX: Accurate. Accessible. Transformative.

It will be available in two formats: a **rapid test that delivers immediate results** in isolated or resource-limited communities, and an **IVD ELISA kit for laboratory settings** to support large-scale screening programs.



Our products



Lateral Flow - Rapid test



IVD ELISA Kit

PREVENTIX transcends geographic, cultural, and religious barriers, offering accurate, non-invasive, and dignified testing that empowers women everywhere.



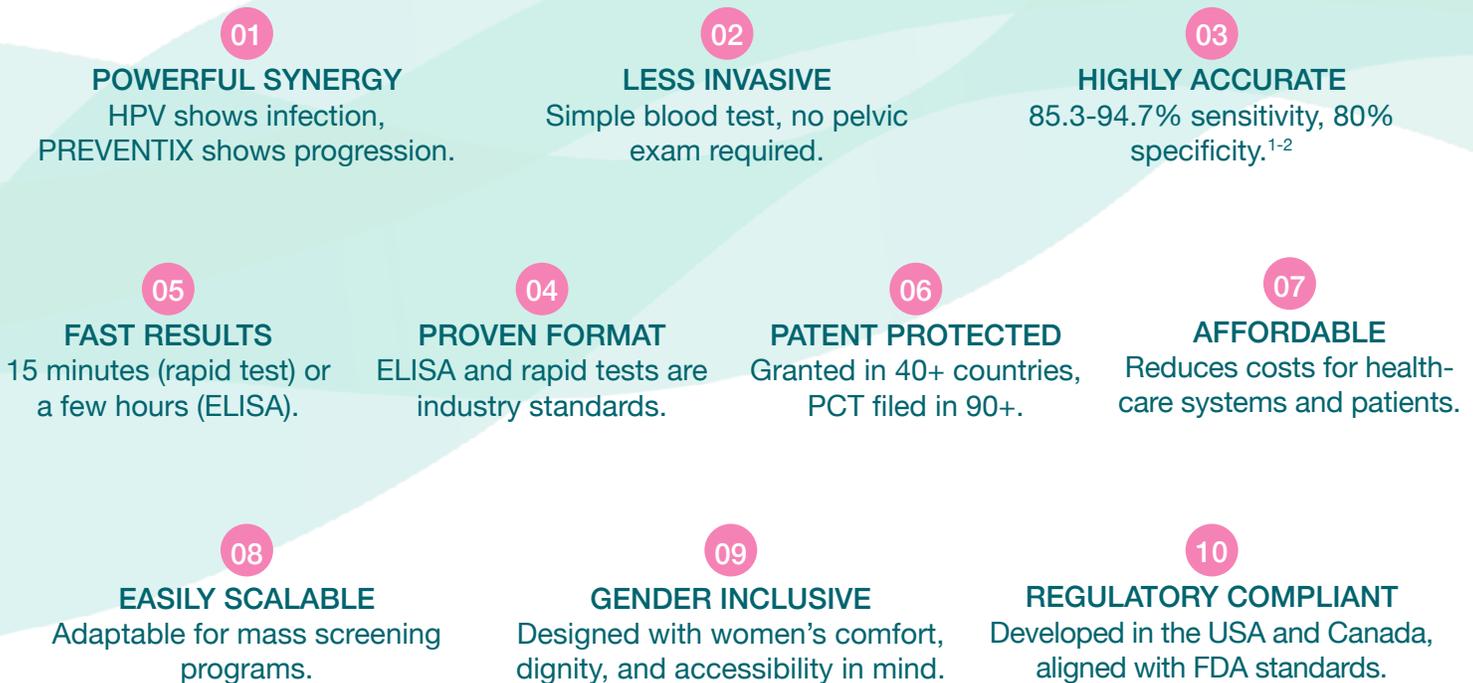
PREVENTIX is engineered to deliver maximum sensitivity in a format that is simple, affordable, and accessible.

In the ELISA format, a simple sandwich assay measures biomarker concentration in serum; if levels exceed the defined threshold, the test is considered positive.

The lateral flow format is a multiplex device integrating all three biomarkers into a single test, requiring just one drop of blood and delivering results in 15 minutes.

Both devices were developed in the USA and Canada, ensuring compliance with FDA standards.

PREVENTIX HIGHLIGHTS



PREVENTIX biomarkers and their clinical validation have been published and recognized worldwide as one of the most significant advances toward eliminating cervical cancer and democratizing health access for women.

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Patents and Trademarks

The PREVENTIX biomarkers are protected by 10 granted patents covering over 44 countries, with an additional 14 patents pending in 62 countries. PREVENTIX is also a registered trademark in the USA and Mexico.

★ Patents Awarded

1. Mexico- Mx/a/2019/005940
2. Mexico- MX/a/2021/001522
3. USA - 11, 160845B2
4. USA - 11, 160844B2
5. USA - US 18/454,391
6. South Africa - PA177014/ZA
7. Turkey - 2021/013977
8. OAPI - PA515286/OA
9. ARIPO - AP/P/2021/013593
10. Japan - 2021- 556203

★ Patents Pending

- | | |
|--------------------------------------|--------------------------------|
| 1. Europe - EP3884.4 | 11. India - 52008 |
| 2. Chile - C/2023/12667 | 12. Colombia - NC2021/001564 |
| 3. Singapore - 11202110101P | 13. China - Z210908CPCN |
| 4. Indonesia - P00202108785 | 14. Hong Kong - Z210908HK - CN |
| 5. Saudi Arabia - 522431606 | |
| 6. Canada - 1393-1 | |
| 7. Brazil - BR 11 2021 023247 8 | |
| 8. Malaysia - PI2021005472 | |
| 9. Thailand - 2101006845 | |
| 10. Philippines - 8PZIIV71971202129P | |

HONORS AND AWARDS (NATIONAL & INTERNATIONAL)



PARTICIPATION IN SCIENTIFIC AND HEALTHCARE LEADERSHIP CONGRESSES (NATIONAL & INTERNATIONAL)



FEATURED IN NATIONAL AND INTERNATIONAL MEDIA OUTLETS



Clinical studies - Report

Two clinical trials evaluating the efficacy of the PREVENTIX biomarkers have already been published.

This document summarizes the results, including the demographic profile of more than 450 participants, usability findings, patient preferences, and—most importantly—the sensitivity and specificity of the test.

Our data show not only that women overwhelmingly prefer a less invasive option, but also that **PREVENTIX is the most effective test on the market for detecting precancerous lesions and cervical cancer**—even in cases where both HPV testing and cytology return negative results.

Key Takeaways

- Our studies enrolled **454 women across three states and five sites**, closely reflecting the national population.
- The results demonstrated that PREVENTIX biomarkers are up to three times more effective at detecting precancerous lesions (LSIL-HSIL) and cervical cancer, including adenocarcinoma, compared with liquid-based cytology (LBC) or HPV PCR testing.
- Thanks to its accuracy and the fact that it requires no cervical or vaginal swab, 99% of participants preferred this method of sample collection. Furthermore, when asked, 100% stated they would undergo this test regularly instead of traditional swab-based methods, ensuring they would not fall behind in their screening.
- This is the first time we have a test that can truly reach every woman, everywhere—without infrastructure or cultural barriers.

With PREVENTIX, we can, and we will, eliminate cervical cancer in this generation.

National 450+ Women Clinical Study Design

In 2018, we conducted a nationwide clinical trial across four health centers: General Hospital Siglo XXI, Gynecology and Obstetrics Hospital #4, General Hospital of Morelos, and Family Medical Unit #1. In this first study, more than 355 women were enrolled and stratified into four groups—negative control, LSIL, HSIL, and cervical cancer—based on their cytology, colposcopy, or biopsy results. All participants were also tested for HPV, Hepatitis, and HIV infections.

In 2024, we carried out a second clinical study in Monterrey, Nuevo León, analyzing data from 99 women. Each participant underwent liquid-based cytology, HPV testing, colposcopy, and, when indicated, biopsy. In randomly selected cases, additional testing for p16 was performed.

All women signed informed consent forms, and a blood sample for the PREVENTIX test was collected from each participant.

PREVENTIX STUDY 1 - 2018

4 Study sites
355 Enrolled
3 National research institutes involved

94.7%
sensitivity for CC



PREVENTIX STUDY 2 - 2024

1 Study sites
99 Enrolled

85.3%
sensitivity for LSIL & HSIL

Study Design

01 TESTS

All women received cytology, HPV, blood, and colposcopy tests; biopsies confirmed positive cases.*

02 COLLECTION AND PROCESS

Samples were collected and sent to specialized laboratories for processing and interpretation.*

03 QUESTIONNAIRES AND CLINICAL HISTORY

All participants completed a questionnaire capturing demographic, clinical, and experience-related information

Study Demographics

Cervical cancer is affecting younger women, yet screening still starts at 25. PREVENTIX reaches women from their first sexual activity, casting a wider net to detect risk earlier. Our studies presented the following age distribution of participants:

23%
20-29 years

27%
30-39 years

34%
40-49 years

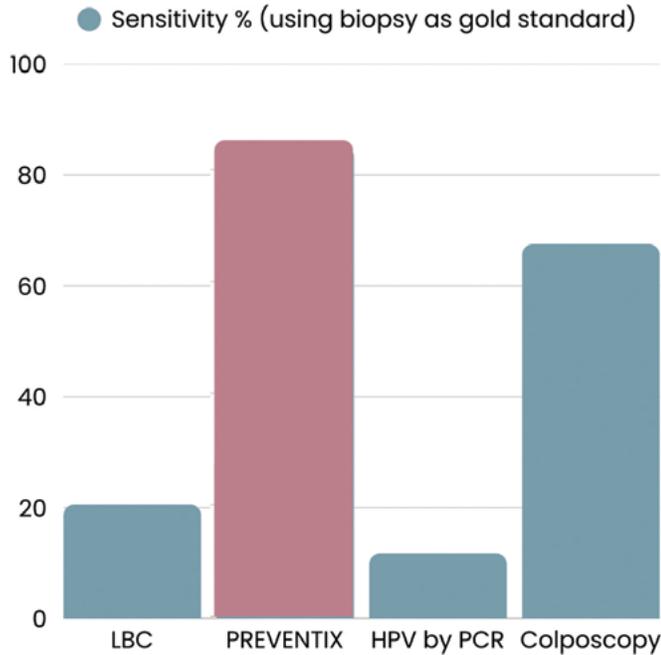
16%
50-75 years



- LBC – Laboratorios de Especialidades Inmunológicas (LEI), Monterrey
- HPV – Roche Cobas® Primary HPV Assay
- Colposcopy – Reports issued by each participating center
- Biopsy – Performed and reported by each participating center and Monterrey
- PREVENTIX – TIMSER Laboratories, UNAM, and Instituto Nacional de Ciencias Médicas y Nutrición Salvador Zubirán
- No serious adverse events were reported.

Clinical outcomes

SENSITIVITY



Miranda-Falconi P, et al. (2024) Pioneering molecular screening for cervical precursor lesions and cervical cancer in sera

The primary endpoint in both studies was the sensitivity of PREVENTIX biomarkers—their ability to correctly identify women with cervical lesions (LSIL–HSIL) or cervical cancer.

True positive cases were defined as any confirmed finding (LSIL to CC) on colposcopy or biopsy. To minimize false negatives, we optimized the cut-off point for protein quantification, ensuring that no woman goes home with undetected disease.

PREVENTIX outperformed all existing tests, achieving 94.7% sensitivity in the first study and, in the second, 100% sensitivity for cervical cancer and 82% for LSIL–HSIL. By comparison, HPV PCR reached only 11% and liquid-based cytology just 21%.

A non-invasive, highly sensitive blood test as the first-line screen guarantees that women truly at risk are identified early and receive timely treatment.

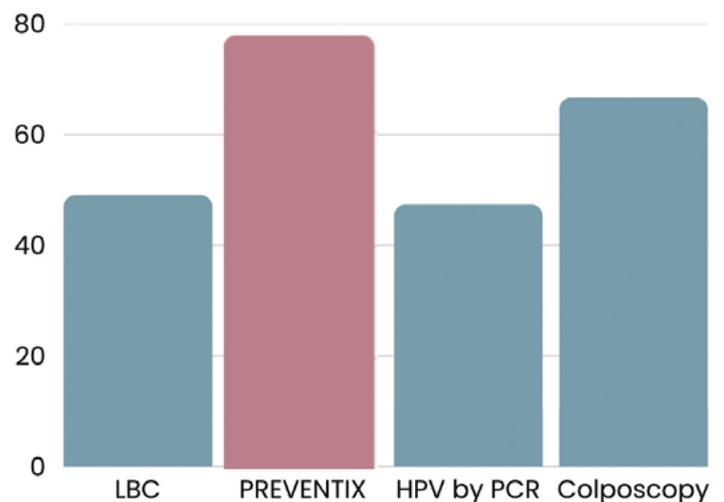
NEGATIVE PREDICTIVE VALUE (NPV)

Negative Predictive Value (NPV%) in screening is the probability that a person who tests negative truly does not have the disease. It is essential in screening because it ensures that women who are told they are disease-free can truly trust that result. PREVENTIX had the highest result among the tests:

SPECIFICITY

Specificity is the ability of a test to correctly identify women who do not have the disease (true negatives). High specificity prevents unnecessary treatments and costs. While it is somewhat less critical in screening—where extra checkups are acceptable—it must still be high enough to be clinically meaningful. In our first study, PREVENTIX achieved a specificity ranging from 94% to 100% for independent biomarkers.²

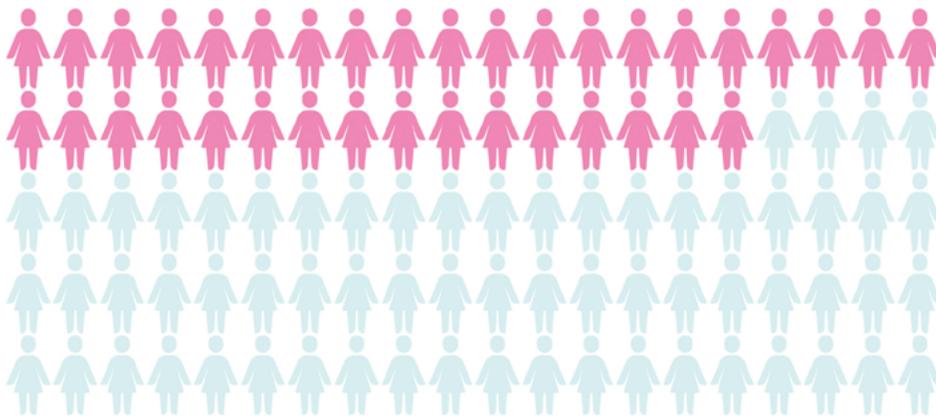
NPV % (using biopsy as gold standard)



Miranda-Falconi P, et al. (2024) Pioneering molecular screening for cervical precursor lesions and cervical cancer in sera

Barriers for cervical cancer screening

It's well documented that many women avoid invasive screening tests like speculum exams, even when no other risk besides age or gender is present. For example, studies show that the discomfort and embarrassment of speculum use are significant barriers to screening adherence, especially in older or under-screened women.¹³ As a result, large global gaps persist—about 64% of women aged 30–49 worldwide have never been screened for cervical cancer.¹⁴ The outcome is that in low-income or developing settings, fewer women stay up to date on screening, driven by geographic, cultural, economic, religious, or psychological factors.¹⁵



36%
Have not delayed their screening

64%
Have delayed their screening¹⁶

Reasons why women delay cervical cancer screening

Most women skip cervical cancer screening due to lack of information, fear, embarrassment, stigma, and negative clinic experiences—combined with cost, distance, and limited access. These barriers leave over 60% of women worldwide unscreened.¹⁷⁻¹⁸



We must take women's experiences seriously if we aim to eradicate cervical cancer. Screening should not invade intimacy or perpetuate stigma. It is imperative to move forward with innovative technologies like molecular—delivering accurate, non-invasive, and stigma-free solutions.

PREVENTIX represents this shift: just a simple blood test, as routine as any other, yet powerful enough to save lives every day.

Upcoming trials

To strengthen the evidence base and secure IVD kit validation by Q1 2026, we are conducting multiple clinical trials. Regulatory processes are underway—we are awaiting COFEPRIS approval and have already received feedback from the FDA during a presubmission meeting. Clinical trials outside of Mexico will start 1Q 2026.

4
Countries

7
Study sites

6,500
Participants



TIMSER
group

IQVIA **SaludDigna**
La salud es para todos

CYTODIAGNOSTICS

GILABIOSCIENCE **REINA MADRE**
CLINICAS DE LA MUJER

Study Design - one visit study

To minimize participant drop-out, all samples are drawn during the initial enrollment visit, with results sent if the follow-up appointment is missed. Our current enrollment rate is 50 participants per day at one site, and we aim to recruit 1,500 patients by year-end. A 5,000-participant multinational trial is planned for Q1 2026, with initial studies supporting registration in Mexico and product launch in summer 2026.

01 VISIT

All women will receive cytology, HPV detection, molecular (PRE-VENTIX), and colposcopy tests; biopsies confirmed positive cases*

02 COLLECTION AND PROCESS

Samples will be collected and sent to specialized laboratories for processing and interpretation*

03 QUESTIONNAIRES AND CLINICAL HISTORY

All participants will complete a questionnaire on demographic, clinical, and experiential information during their physician interview.

*
 • LBC – Salud Digna Laboratories
 • HPV – Roche Cobas® Primary HPV Assay in Salud Digna Laboratories
 • Colposcopy – Reports issued by each participating center using ILUMIGIN technology
 • Biopsy – Analyzed by a panel of three certified pathologists
 • PREVENTIX – TIMSER Laboratories, GILA bioscience and Cyto Diagnostics

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PREVENTIX delivers what the world has been waiting for: a clinically validated, non-invasive, highly sensitive test that can change the standard of care in women's health.

PREVENTIX is not just innovation, it's a scalable solution with global impact

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