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New Evidence Demonstrates that FerriScan® Results Are Not Impacted by Fatty Liver

Resonance Health (ASX:RHT) is pleased to announce that the results of a study demonstrating a further scientific and clinical advantage of FerriScan is to be presented at the International Liver Congress run by the European Association for the Study of the Liver (EASL) in April. The study results demonstrate that unlike alternative magnetic resonance imaging (MRI) techniques for assessing liver iron concentration (LIC), FerriScan is not confounded by the presence of liver fat (steatosis). FerriScan is globally recognised as the gold standard for the measurement of LIC for the diagnosis, monitoring, and management of patients with iron overload due to its clinical advantages over alternative tests. This further evidence of the scientific rigour of FerriScan reinforces its competitive advantage and will assist with marketing efforts.

The renowned EASL International Liver Congress is being held in Amsterdam, The Netherlands, between 19th and 23rd April 2017 and will be attended by approximately 10,000 scientific and medical experts from across the globe. The study will be presented as an abstract by Resonance Health's Chief Scientific Officer, Prof. Tim St Pierre, on 22nd April 2017 - Abstract SAT-500: The effect of liver steatosis on non-invasive measurement of liver iron concentration by spin-density projection assisted R2-MRI (FerriScan®).

As the gold standard for assessing body iron stores, FerriScan R2-MRI, has recognised competitive advantages over the alternative tests including serum ferritin, liver needle biopsy, and other MRI techniques such as liver T2*. FerriScan provides a direct quantitative measurement of liver iron concentration and has superior accuracy over serum ferritin, which can be elevated in the absence of iron overload as a result of various other factors such as infection, inflammation, fever, cancer, or liver damage. Conversely, liver biopsy, although accurate, is invasive, painful, and expensive. Alternative techniques, such as liver T2* MRI, have inferior accuracy, are not standardised, and due to the inherent nature of the technique results can be confounded by the presence of fat.

The abstract demonstrates a significant competitive advantage of FerriScan as an accurate result is provided even in the presence of liver fat. FerriScan may be particularly suited to assessing transfusional iron overload in cancer survivors, where both iron overload and increased liver fat are common as a result of cancer treatments. Additionally, with the global obesity epidemic and fatty liver becoming increasingly prevalent, the impact of inferior alternative MRI techniques is magnified. Resonance Health is delighted with the continuing scientific evidence of the benefits of FerriScan.

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