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Bone Marrow Iron Assessment Launches in Europe, Australia, and NZ

Resonance Health (ASX:RHT) is pleased to announce that its new technology, Bone Marrow R2-MRI, for the assessment of iron levels in bone marrow, is now available for clinical application in Europe, Australia, and New Zealand. This will allow expansion from the research setting to marketing to the clinical community in these jurisdictions, in line with the targets announced on 23 September 2016.

The new technology has application in bone marrow transplants¹, where quantitative assessment of bone marrow iron levels prior to transplant is thought to assist with the prediction of complications and the prognosis of patients post-transplant. Elevated iron levels are associated with a range of poorer health outcomes, including an increased likelihood of death. Knowledge of bone marrow iron levels allows interventions to be administered that are aimed at improving patient outcomes. It is estimated that over 50,000 bone marrow transplants are performed globally each year.

The current gold standard for assessing bone marrow iron is from bone marrow biopsy, which is subjective, non-standardised, and subject to large error between pathologists. Conversely, Bone Marrow R2-MRI is non-invasive, standardised, and correlates significantly with iron in bone marrow; positioning it favourably as an affordable, safe, and pain-free alternative to biopsy.

Dr Josu de la Fuente is a Consultant Paediatric Haematologist and Senior Lecturer at Imperial College London and Director of the Paediatric Blood and Marrow Transplant Programme. Dr de la Fuente, together with clinicians at other leading institutions, currently use FerriScan[®], the Company's regulatory cleared and globally recognised gold standard for the measurement of liver iron concentration, to assess body iron stores prior to bone marrow transplant. The new bone marrow specific test expands on this capability and is targeted to further assist clinical decisions for patients being considered for bone marrow transplantation.

Dr de la Fuente commented:

"A non-invasive, standardised method for assessing bone marrow iron may provide important additional clinical information to assist in managing patients being considered for bone marrow transplant, as severe complications such as graft versus host disease can, in some cases, become more severe and costly to manage than the original disease of the patient."

Bone Marrow R2-MRI uses the same magnetic resonance imaging (MRI) data as FerriScan[®] and as such can be performed either as a standalone assessment or combined with FerriScan to provide a more complete picture of a patient's overall iron status. Resonance Health also provides a regulatory authority cleared Cardiac T2* measurement for heart iron assessment. This 'triple test' will allow better informed decisions for the management of patients at risk of complications from iron overload.

The Bone Marrow R2-MRI technology will be officially launched to the European and Australian markets at the European Haematology Association (EHA) 22nd Congress from the 22nd - 25th June 2017 in Madrid, Spain. Resonance Health is pleased to have met the targeted launch date for the marketing of Bone Marrow R2-MRI to the clinical community in Europe, Australia, and New Zealand, and looks forward to providing an update on FDA clearance which remains on target for the end of 2017.

For further information please contact:

Sander Bangma

General Manager, Resonance Health

E: SanderB@resonancehealth.com P: +61 (0)8 9286 5300

i Bone Marrow Transplant

The Worldwide Network for Blood and Marrow Transplantation estimates that more than 50,000 patients undergo bone marrow transplant annually for certain cancers, such as leukaemia, lymphoma, myelodysplasia, or for diseases that affect the production of bone marrow cells, such as aplastic anaemia, severe immune system illnesses, sickle cell disease, and thalassaemia. Some patients also require bone marrow transplantation because chemotherapy for other diseases has destroyed their bone marrow. Bone marrow transplantation has the potential to cure or greatly alleviate disease, but carries a risk of severe complications, that in some cases can be more severe and more costly to manage than the original disease. Mechanisms to decrease complications, such as improved monitoring and management of iron prior to transplant, would have profound health and economic benefits.