

Health economics study published – Prostatype® can provide 800 MSEK in annual health economic benefit in Sweden according to complementary analysis

Prostatype Genomics AB announces that the results from the health economics study with the company's prognostic genomic test Prostatype® now has been published in the renown scientific journal *PharmacoEconomics*. The study and a complementary analysis, both conducted by the Institute for Health and Healthcare Economics (IHE), show that Prostatype® can contribute with just over 800 MSEK in annual health economic benefit just in Sweden compared to the method for risk classification of established prostate cancer that is currently being used in Sweden's healthcare system.

As previously communicated by the company, the study has calculated the health economic benefit of using Prostatype® for risk classification of established prostate cancer compared to the scientifically and internationally recognized D'Amico risk classification system. IHE has now also conducted a complementary analysis where Prostatype® is compared to the method for risk classification of established prostate cancer that the Swedish healthcare system is actually using today. The results show that the health economic benefit of Prostatype® is even higher, just over 800 MSEK annually, in Sweden if the comparison is made with the methodology of the Swedish healthcare system. The health economic benefit compared to the D'Amico risk classification system amounts to just over 600 MSEK per year.

“It is encouraging that the results from this health economics study now have been published in what is considered to be the leading scientific reference journal for the practical application of health economics. Furthermore, the complementary analysis based on the methodology used in Sweden today provides additional weight to the conclusion of the study: using Prostatype® broadly for risk classification of established prostate cancer would lead to a substantial health economic benefit for the Swedish society. Thousands of Swedish men each year could be offered active monitoring instead of radical treatment with severe life-long side effects such as incontinence and impotence as a consequence,” says Prostatype Genomics' CEO Fredrik Rickman.

“It is of course also interesting in itself that the methodology used in Sweden today is obviously not particularly effective from a health economic perspective, and this applies regardless of whether you compare it to Prostatype® or internationally recognized risk classification systems such as D'Amico. This should lead to reflection within the Swedish healthcare system,” Fredrik Rickman continues.

“Several urology centres in Sweden are offering Prostatype® to their patients, but the use is hindered by the fact that prognostic genomic tests for established prostate cancer are not yet included in national guidelines or reimbursed by the healthcare system, despite very strong scientific evidence. This means that Sweden is far behind for example the United States, where this type of modern prognostic genomic tests has been used with good results for many years to the benefit of patients, their relatives and the healthcare system,” Fredrik Rickman concludes.

IHE and Prostatype Genomics are now working on a corresponding health economics report for Spain, which is expected to be completed in the beginning of Q2 2025. In Spain, the number of annual new diagnosed patients with established prostate cancer is several times as large as in Sweden, combined with a higher share of radical treatment.

The full scientific journal with the results from the health economics study [can be read here](#).

About the health economics study

IHE's health economics study is titled "Prognostic testing for prostate cancer – A cost-effectiveness analysis comparing the Prostatype risk score (P-score) to standard clinical practice". The study compares the health economic outcome when using Prostatype® during the selection of the form of treatment for established prostate cancer in relation to the D'Amico risk classification system, a commonly used and internationally recognized scientific benchmark that is often referenced in many publications in urology. The outcome is reported as quality-adjusted life years (QALYs), a standard measure for quantifying improvements in quality of life, as well as cost savings at the societal level. The main author is Adam Fridhammar, Master of Philosophy in Health Economics, who has more than ten years of experience in health economic analysis with nearly twenty scientific publications in clinical and financial journals.

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About Prostatype Genomics AB

Prostatype® is a genomic test that is available to patients and treating urologists as a complementary decision basis for the question of treatment or no-treatment of prostate cancer. The test was developed by a leading research group at Karolinska Institute and is provided by Prostatype Genomics AB.