

# Quanterix

## Quanterix Announces Commercial Availability of its Simoa Single Molecule Array Technology

*Ultra-sensitive diagnostic platform capable of measuring individual proteins at concentrations 1,000 times lower than the best immunoassays is now commercially available for biomedical research*

**Lexington, Mass. - July 30, 2013** - [Quanterix Corporation](#), a leader in high definition diagnostics, delivering ultrasensitive single molecule measurement for the benefit of human health, today unveiled its [Single Molecule Array](#) (Simoa) technology at the [2013 AACC Annual Meeting](#) in Houston, Texas, making it commercially available for the first time on a fully automated platform for research use only. With Simoa, life science researchers will be empowered to explore biomarkers and pathways with greater sensitivity and precision, paving the way for the development of new diagnostic tests and improved treatment of diseases in oncology, neurology, cardiology, and other fields of medicine.

“Simoa is poised to transform the diagnostic world for both research and clinical applications. The ultra-sensitive diagnostic platform is capable of measuring individual proteins at concentrations 1,000 times lower than the best immunoassays available today,” said Paul Chapman, President and Chief Executive Officer of Quanterix. “We firmly believe that this technology will provide deeper insights into human health that will allow diagnosing, treating, and monitoring conditions more effectively than ever before. Furthermore, through Quanterix’ exclusive partnership with bioMérieux, the Simoa platform will be available for clinical and industrial diagnostic applications. The ambition is to rapidly translate new discoveries made in research today into potentially life-saving diagnostic tests benefiting patients. This ability to conduct research with the confidence that the platform will be available clinically is truly unique for a disruptive technology like ours.”

Simoa provides the ability to detect, measure and validate both new and existing biomarkers easily and cost effectively at concentrations previously unattainable. As a result of studies conducted while the technology was in beta testing, Simoa has already fueled promising discoveries in the following studies:

- **Prostate Cancer** – Simoa’s sensitivity to minute PSA levels after radical prostatectomy provides a reliable predictor of disease recurrence with important implications for PSA testing frequency and selection of candidates for adjuvant therapy<sup>1</sup>.
- **Crohn’s Disease** – Simoa provides the first quantitative measurements of TNF- and IL-6 concentrations in the plasma of all patients with Crohn’s disease, which offers promise in helping to monitor therapeutic efficacy<sup>2</sup>.
- **Alzheimer’s Disease** – Using Simoa, researchers were able for the first time to demonstrate that Amyloid-beta 42 levels in blood acutely rise after an ischemic episode, and that the concentration levels were reliable predictors of outcome as it relates to neurological function<sup>3</sup>.

“At the University of Gothenburg, we’re currently working on a pilot study that looks at blood biomarkers for sports-related brain concussion in collaboration with the Swedish Hockey League. Traditionally, the only way to truly understand the extent of brain damage is by doing a spinal tap to measure the brain fluid. Simoa opened up a whole new dimension of possibilities with the ability to get

the same or better results through a simple blood test,” said Henrik Zetterberg, Head of the Department of Psychiatry and Neurochemistry and Senior Consultant in Clinical Chemistry at the University of Gothenburg. “Simoa provides the analytical sensitivity needed to capture an accurate biomarker profile as we study assays one hour after a concussion and every morning after that up to six days. This will reveal how the concussion has affected the brain and its function almost immediately after the injury and track any additional changes over time. This insight can dramatically change the course of treatment for patients.”

Simoa’s remarkable sensitivity and fully automated productivity advantage are competitively priced to fit into today’s laboratory environment. Features include:

- **Ultrasensitivity** – 1,000-fold improvement over today’s state-of-the-art immunoassays.
- **Precision** – Exceptional robustness and repeatability at ultra-low concentrations of target proteins.
- **Full Automation** – With an intuitive touchscreen interface to program a few basic parameters, users receive complete results in as soon as 30 minutes.
- **Wide Dynamic Range** – Proprietary combination of both digital and analog signal measurements provides >4 logs of dynamic range.
- **Easy and Cost-Effective Implementation** – Using low cost immunoassay reagents and consumables, the analyzer can be economically deployed and quickly integrated into an existing laboratory.
- **Multiplexing Capability** – Up to 10 different analyses can be tested in a single assay.
- **Throughput** – The instrument has a processing speed of 80 samples/hour, yielding up to 800 results/hour for a 10-plex.

Quanterix has received a total of \$47M in funding from leading life science investors and has strategic partnerships with bioMérieux, Sony DADC, and Stratec Biomedical. To learn more about Simoa, please visit: [www.quanterix.com/simoa-is-here](http://www.quanterix.com/simoa-is-here).

### About Quanterix

Quanterix is a developer of ground-breaking tools in high definition diagnostics. Its Simoa platform uses single molecule measurements to access previously undetectable proteins. With this unprecedented sensitivity and full automation, Simoa offers significant benefits to both research and clinical testing applications. Quanterix was established in 2007 and is located in Lexington, Massachusetts. To learn more about Quanterix and Simoa, please visit: [www.quanterix.com](http://www.quanterix.com)

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<sup>1</sup> Leporet. *al.*, *British Journal of Urology*, October 2011

<sup>2</sup> Song *et. al.*, *Journal of Immunological Methods*, September 2011

<sup>3</sup> Zetterberg *et. al.*, *PLoS ONE*, December 2011