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Australian Clinical Utility Study demonstrates PromarkerD test offers improved treatment options for Doctors in the fight against diabetic kidney disease

- Peer-reviewed study published in the Internal Medicine Journal demonstrates that PromarkerD risk scores significantly change clinical decision-making among Australian doctors
- For type 2 diabetes patients at risk of diabetic kidney disease (DKD) PromarkerD results prompted earlier initiation of renoprotective therapies and reduced prescribing of potentially nephrotoxic drugs
 - ➤ High-risk patients saw a 20-30% increase in prescribing intentions for SGLT2 inhibitors, ACE inhibitors, ARBs and statins
 - Moderate-risk patients also had significant treatment adjustments
- 89% of physicians believed the use of PromarkerD would improve clinical outcomes
- Study supports the clinical utility of PromarkerD in Australia which is home to 1.5 million adults with type 2 diabetes

Proteomics International Laboratories Ltd (Proteomics International; ASX: PIQ) is pleased to announce that a study demonstrating the clinical utility of the PromarkerD test in predicting diabetes-related chronic kidney disease (DKD) in Australia has been published in the Internal Medicine Journal (IMJ).

PromarkerD is a validated blood test that can predict DKD up to four years before clinical symptoms appear, supporting doctors in making earlier, informed treatment decisions to improve outcomes for patients with type 2 diabetes.

The web-based clinical utility study surveyed 178 general practitioners and clinical specialists presenting them with multiple real-life scenarios for patients with type 2 diabetes, and PromarkerD referred to as "Test X" to blind respondents as to its commercial identity. When asked about DKD, 89% of physicians believed the use of PromarkerD would improve clinical outcomes.

Proteomics International Managing Director Dr Richard Lipscombe said, "This new Australian study reinforces the growing body of evidence demonstrating that PromarkerD provides actionable information that can meaningfully change how clinicians manage patients with type 2 diabetes."

Senior author of the study Professor Merlin Thomas, a nephrologist and Professor of Medicine at Monash University, said PromarkerD provides an opportunity to identify those at risk of chronic kidney disease much earlier before clinical signs of decline are evident.

"When presented with moderate or high-risk PromarkerD results, clinicians in the study were significantly more likely to initiate renoprotective therapies such as SGLT2 inhibitors, increase monitoring frequency, and avoid nephrotoxic medications like ibuprofen than if they did not have the PromarkerD test results. These changes can help prevent or delay progression to kidney failure and reduce the need for interventions such as dialysis or kidney transplant. In contrast, when presented with low-risk PromarkerD results, clinicians

appropriately reduced unnecessary treatment escalation and healthcare utilisation."

The results for PromarkerD in the Australian healthcare setting closely align with the positive results previously reported in the United States [ASX: 2 August 2022]. IMJ is a peer-reviewed, open access journal published by the Royal Australasian College of Physicians, the leading internal medicine publication in the region, covering laboratory and clinical research relating to human disease.

Summary of Study

The clinical utility study, conducted in collaboration with TKW Research Group and Illuminate Health Consulting, surveyed 178 Australian clinicians including primary care physicians and specialists (endocrinologists, nephrologists and diabetologists) to evaluate how PromarkerD risk scores could influence treatment decisions in people with type 2 diabetes-related chronic kidney disease (DKD) (normal eGFR ≥60 mL/min/1.73m² and normal or moderately increased albuminuria).

Key findings:

- Early intervention: 97% of clinicians agreed that early intervention before clinical DKD symptoms is ideal and that there is a significant unmet need for tests to detect early DKD, quantify risk and predict disease progression. PromarkerD addressed this gap by prompting earlier treatment in patients often missed by standard screening.
- Increased use of renoprotective therapies: High-risk patients saw a 20–30% increase in prescribing intentions for sodium-glucose co-transporter 2 (SGLT2) inhibitors, angiotensin-converting enzyme (ACE) inhibitors, angiotensin receptor blockers (ARBs), and statins. Moderate-risk patients also had significant treatment adjustments.
- Medication optimisation: Clinicians increased dosages of renoprotective drugs and reduced exposure to potentially nephrotoxic medications, including ibuprofen.
- Enhanced monitoring and referral: High-risk scores led to more frequent kidney monitoring (every 3-6 months) and higher specialist referrals. Low-risk scores allowed safe reduction in monitoring intensity.
- Clinical acceptance: Over 85% of clinicians considered PromarkerD useful for guiding treatment decisions; up to 89% saw potential benefits for patient outcomes and healthcare cost reduction.

Conclusion: PromarkerD could enable earlier, more targeted intervention in Australia for type 2 diabetes patients, complementing existing DKD screening methods and supporting improved patient outcomes.

The full paper, titled 'Evaluating the potential clinical practice impact of the PromarkerD blood test in people with type 2 diabetes in Australia', is available from IMJ¹.

Authorised by the Board of Proteomics International Laboratories Ltd (ASX.PIQ).

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About Promarker®D (www.PromarkerD.com)

Diabetes-related chronic kidney disease (DKD) is a serious complication arising from diabetes which if unchecked can lead to dialysis or kidney transplant. PromarkerD is a prognostic test that can predict future kidney function decline in patients with type 2 diabetes and no existing DKD. The patented PromarkerD test system uses a blood test to detect a unique 'fingerprint' of the early onset of the disease. The multivariate test measures a select panel of protein and clinical biomarkers, before a cloud-based algorithm integrates the results into a patient risk report. In clinical studies published in leading journals PromarkerD correctly predicted up to 86% of otherwise healthy diabetics who went on to develop diabetic kidney disease within four years. Country specific use of this product is subject to the relevant regulatory approvals.

Proteomics International recommends that patients concerned about DKD seek advice from their doctors.

Further information on DKD is available through the www.mytest.health web portal.

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¹ onlinelibrary.wiley.com/doi/10.1111/imj.70294

About Proteomics International Laboratories (PILL) (www.proteomicsinternational.com)

Proteomics International (Perth, Western Australia) is a wholly owned subsidiary and trading name of PILL (ASX: PIQ), a medical technology company at the forefront of precision diagnostics and bio-analytical services. The Company specialises in the area of proteomics – the industrial scale study of the structure and function of proteins. Proteomics International's mission is to improve the quality of lives by the creation and application of innovative tools that enable the improved treatment of disease.

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