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# Cohort invitation

# Meet the future of personal health monitoring

**FIT INC** hello@rens.com

Dear Rens,

Your latest results show heightened ApoB and Ip(c) in your blood test, suggesting an elevated cardiovascular risk. Data from your genetic test support increased cardiovascular risk (ARP, CRP, F5 genes), as does your microbiome test (TMAO). This risk area is worth looking into.

### Health Areas (4/10)

Health Area	Blood	Gut	Genes	Surveys	Scans	Overall Risk
Cardiovascular Disease	High Risk	Medium Risk	Low Risk	High Risk	High Risk	High risk
Autoimmune Diseases	High Risk	Medium Risk	Low Risk	High Risk	High Risk	Medium Risk
Hormonal Disorders	High Risk	Medium Risk	Low Risk	High Risk	High Risk	Medium Risk
Metabolic Disorders	High Risk	Medium Risk	Low Risk	High Risk	High Risk	Medium Risk

### Health Indicators (4/100)

Indicator	Value	Range
ApoB	120 mg/dL	Risk zone
Homocysteine	12 µmol/L	Optimal range
Hs-CRP	0.5 mg/L	Optimal range
Ferritin	12 µmol/L	Optimal range

## What is Fit?

Fit is a comprehensive personal health platform visualizing your health data from multiple sources, such as blood tests, microbiome tests, genetic tests, assessments and health scans. The data are analyzed in clinical labs in The Netherlands and made available in our dashboard.

## What are the benefits of a Fit membership?

A membership provides early warning signals for high-impact diseases—cardiovascular, metabolic, neurodegenerative, autoimmune, and certain cancers—along with AI-driven actionable steps to prevent their early onset and regular expert calls to explain the results. Taking the right steps now can add years to your life.

## What does it cost?

We aim to make the platform highly accessible. The platform, including the health tests (1x genetic, 2x blood, 2x microbiome) and access to explanatory expert calls, costs 100 EUR/month for a period of 12 months.

## Can I share my data with experts?

Of course! We invite medical experts to explain the results per cohort once the data comes in, typically in 60min calls on weekday evenings. You can download, delete, or share the data with relevant trainers, physicians, or family members as you desire.

## What do I have to do to join?

Let us know that you want to join a cohort, and we'll plan an introductory call.



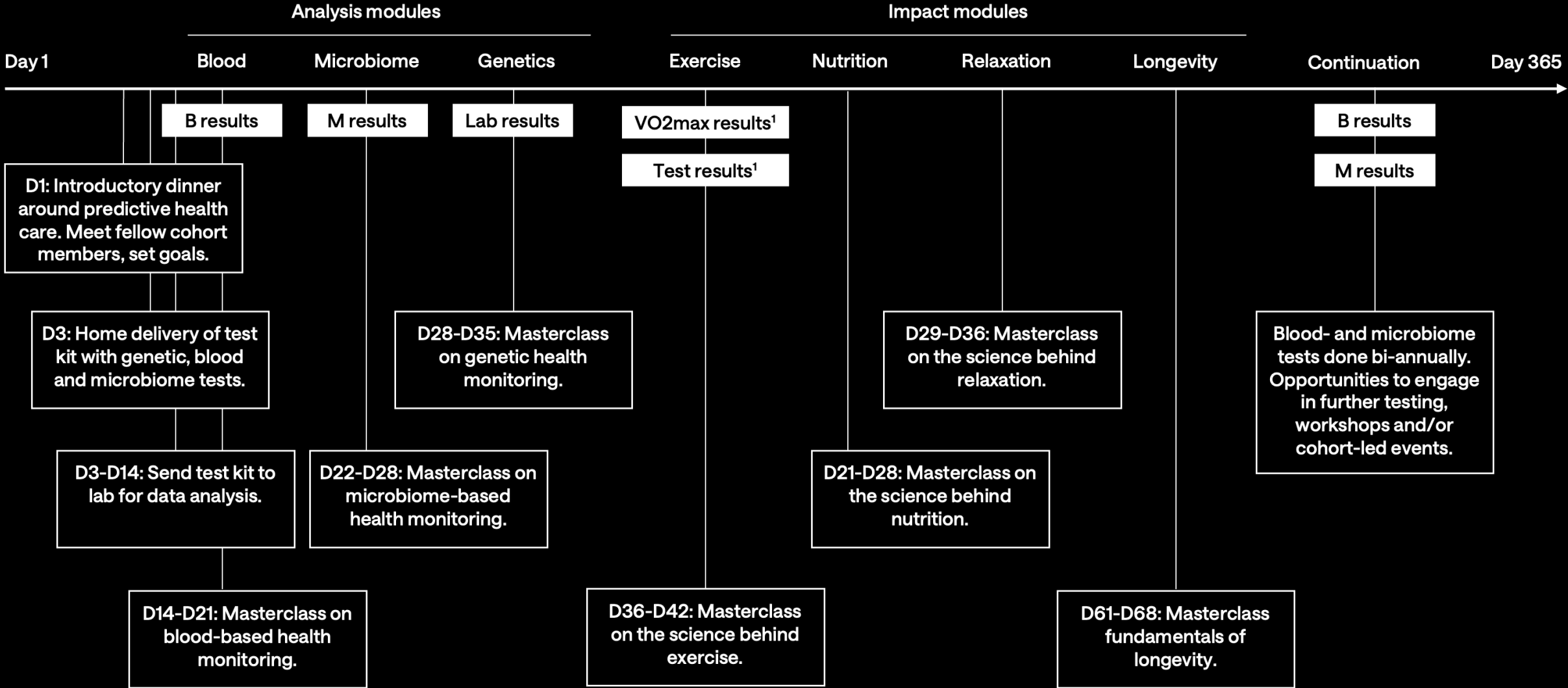
# Early detection makes a difference

<u>Health conditions</u>	<u>Examples of predictive biomarkers<sup>1</sup></u>	<u>Reliability of prediction<sup>2</sup></u>	<u>Lifespan impact<sup>3</sup></u>
Cardiovascular diseases	LDL-C/ApoB, hs-CRP, Lp(a), CAC, HOMA-IR	● ● ● ●	7-10 years
Type-2 Diabetes	Fasting insulin, HbA1c, TG/HDL ratio, Microbiome div., Genetic risk	● ● ● ●	5-8 years
Neurodegenerative diseases	APOE ε4, p-Tau 217, Amyloid Beta, Homocysteine, Microbiome	● ● ● ◐	2-4 years
Colorectal cancer	ctDNA, IL-6, hs-CRP, Microbiome, APC gene mutations, cfDNA	● ● ● ●	3-5 years
Breast cancer	BRCA1/BRCA2 mutations, Mammographic density, HER2/ER status, Circulating tumor DNA (ctDNA), cfDNA methylation	● ● ● ●	5-10 years
Prostate cancer	PSA levels, PCA3 gene expression, Free vs. Total PSA ratio, HOXB13 mutations, MRI-based risk scoring	● ● ● ◐	3-6 years
Lung cancer	Low-dose CT findings, Circulating tumor DNA (ctDNA), EGFR/KRAS mutations, Smoking history, Airway epigenetic markers	● ● ●	2-5 years
Ovarian cancer	CA-125 levels, BRCA1/BRCA2 mutations, HE4 protein, TP53 mutations, cfDNA methylation	● ● ●	3-7 years
Pancreatic cancer	CA 19-9 biomarker, KRAS mutations, Circulating exosomal RNA, cfDNA methylation, Gut microbiome changes	● ● ◐	1-3 years
Chronic kidney disease	eGFR, ACR, Cystatin C, Uric Acid, UMOD gene	● ● ● ●	4-6 years
Autoimmune diseases	ANA, RF, hs-CRP, Vitamin D, Microbiome	● ● ●	2-4 years

<sup>1</sup> Non-exhaustive subset of biomarkers – not all of the biomarkers mentioned will be in the basic packages; <sup>2</sup> Relationship between biomarkers and disease onset are highly complex and non-linear in reality. For example, the relationship can be causal or correlational, single factor or multi-factor, linked to genetic predispositions or not, and mediated by lifestyle or not; <sup>3</sup> Estimate based on current research (e.g., cancer survival in early-stage diagnosis vs late-stage diagnosis). In practice, the benefit for an individual will always depend on the effectiveness of the intervention and averages are no guarantee.



# Join us for a data-led, expert-guided journey



<sup>1</sup> Optional tests providing information about physical health vs benchmarks.



Interested? Schedule an introduction call [here](#).

