

The Wellness

The genome, and the years
ahead



The Wellness Genome

The most personal information in medicine

Three billion letters, unique to one person. Read once, a genome keeps giving answers for life.

Medicine has always been at its best with what it can see. The genome shows what is coming, years in advance.

Today the genes that matter most for health can be read from a simple blood test. They show inherited risks for the heart and for cancer years before anything shows, while there is time to act.

The science behind it is well established, and it is moving fast.



“It will revolutionize the diagnosis, prevention and treatment of most, if not all, human diseases.”



Knowing a genetic risk turns luck into a plan

People at high genetic risk who kept healthy habits had 46% fewer heart events. Knowing the genes turns those habits into a plan.

Researchers scored the genetic heart risk of 55,685 people and followed their everyday habits, including exercise, diet and weight.

None of them knew their genetic risk. Those who happened to live well were protected against heart events anyway. Knowing the risk turns this from luck into a decision, aimed at the risks a person actually carries.

10.7%

ten-year risk of a heart event, high genetic risk, few healthy habits

5.1%

the same genetic risk, with healthy habits

The evidence at scale

What the largest genome programmes have taught medicine

The largest health systems in the world now read genomes in healthy people. What they found is consistent, and it is why we built this service.

1 in 30

carried a finding a doctor could act on, among 175,500 people whose DNA was read by Geisinger in Pennsylvania. Most were heart and cancer genes with proven care.

88%

of them had no idea. Nothing in their history or their check-ups had pointed to it.

1 in 2

of those told of a finding went on to see a genetics specialist in a follow-up study. A result is most helpful when it is acted on.

That is why every result at The Wellness is returned by a doctor, and why a specialist is booked for you whenever a finding calls for one.



Cliff Weitzman, interview reported by BigGo Finance, 2026. Smedley D et al. 100,000 Genomes pilot on rare-disease diagnosis in health care. N Engl J Med 2021;385:1868–80.

How a genome is read

The methods of leading genomic medicine, brought together in one service.



The first conversation

A complimentary consultation with one of our expert doctors about a person's family history and what they want to know. A doctor reviews every request before a sample is taken.

The sample

A blood sample, drawn in our Marylebone clinic. Blood gives the clearest reading. A saliva kit for home-use is available to those who prefer it.

The laboratory

The sample is sequenced in the United States by a laboratory accredited to CLIA, CAP and ISO 15189 standards, already trusted by leading London hospitals and laboratories.

The doctor

A doctor reviews every result and writes a clear plan into the record. A registered genetic counsellor joins whenever a finding calls for one.

As the science moves

If a finding is reclassified as the evidence grows, the report is updated and we get in touch. In The Legacy, the whole genome is also read again in full within two years, and checked every year against newly published research.

Lee K et al. ACMG SF v3.1. Genet Med 2025;27:10454.

What the 84 genes tell us

Each gene points to a condition where knowing early changes the recommended measures.

Inherited high cholesterol

LDLR, APOB, PCSK9

Treatment from diagnosis brings heart risk close to that of the general population.

Heart muscle conditions

MYH7, MYBPC3, TTN, LMNA, PLN

Regular heart scans, and care that keeps the heart strong over the years.

Heart rhythm conditions

KCNQ1, KCNH2, SCN5A, RYR2

ECG checks, and medicines chosen to keep the heart rhythm steady.

Conditions of the aorta

FBN1, TGFBRI, TGFBRII, ACTA2

Scans that follow the aorta, so any change is managed early and simply.

Breast and ovarian cancer risk

BRCA1, BRCA2, PALB2

Earlier and closer breast screening, and choices that lower ovarian cancer risk.

Lynch syndrome

MLH1, MSH2, MSH6, PMS2

Regular colonoscopy, which finds and removes growths before they become cancer.

Other cancer syndromes

APC, TP53, RET, VHL, MEN1

Screening designed around the gene, so cancer is found early or prevented.

Iron overload

HFE

Simple treatment that protects the liver, heart and joints.

Reactions to anaesthesia

RYR1, CACNA1S

A safe plan for every future operation.

Rare conditions of metabolism

ABCD1, CYP27A1, OTC, GAA, BTBD

Treatment started early that keeps the body well.



Beyond the 84 genes

The Sentinel reads the 84 genes that matter most. The Vantage and The Legacy go further, with The Legacy reading everything.

Around 200 genes

The Vantage widens the reading across inherited cancer, heart muscle, heart rhythm, the aorta and cholesterol, including genes that change when screening should start.

Medicines

In The Legacy, how the body handles common medicines, from statins and blood thinners to antidepressants, read against international prescribing guidelines.

Carrier status

In The Legacy, conditions that could pass to children, known before a family is planned.

Two inherited heart markers

The Vantage and The Legacy include Lp(a) and ApoB, two markers that add to a standard cholesterol test. European guidance advises measuring Lp(a) once in every adult.

Heart score

In The Legacy, a regulated genetic heart score, combined with clinical risk. In the middle of the risk range, it guides what a cardiologist recommends next.

A reference for life

In The Legacy, the complete genome on record, the Longevity+ panel of over 100 blood markers, and a doctor review every year for three years.

What knowing makes possible

Once a risk is known, it can be treated, watched or prevented, years before it would have shown.

76%

lower heart risk

in people with inherited high cholesterol treated with statins. Their risk of a heart attack became similar to everyone else's.

62%

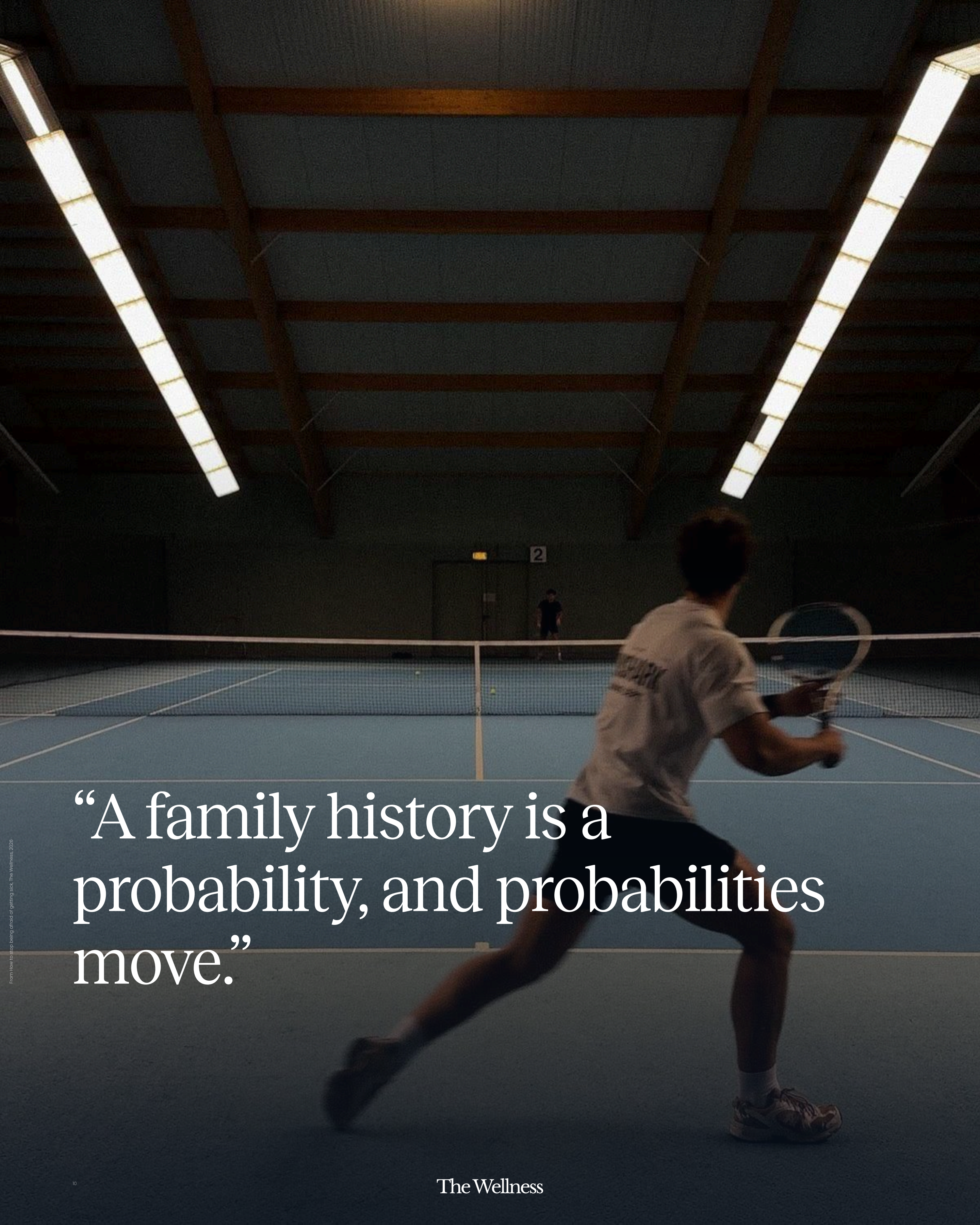
fewer bowel cancers

in families with Lynch syndrome who had a colonoscopy every three years.

100%

caught early

Every bowel cancer found through regular screening in that study was found at an early stage, when it is most treatable.



“A family history is a probability, and probabilities move.”

A doctor and a counsellor at every step

Every result comes with people who act on it, from the first conversation to the plan.

The results

A doctor explains the report in a conversation, then writes the plan. Where a finding appears, a registered genetic counsellor explains it first.

The specialist

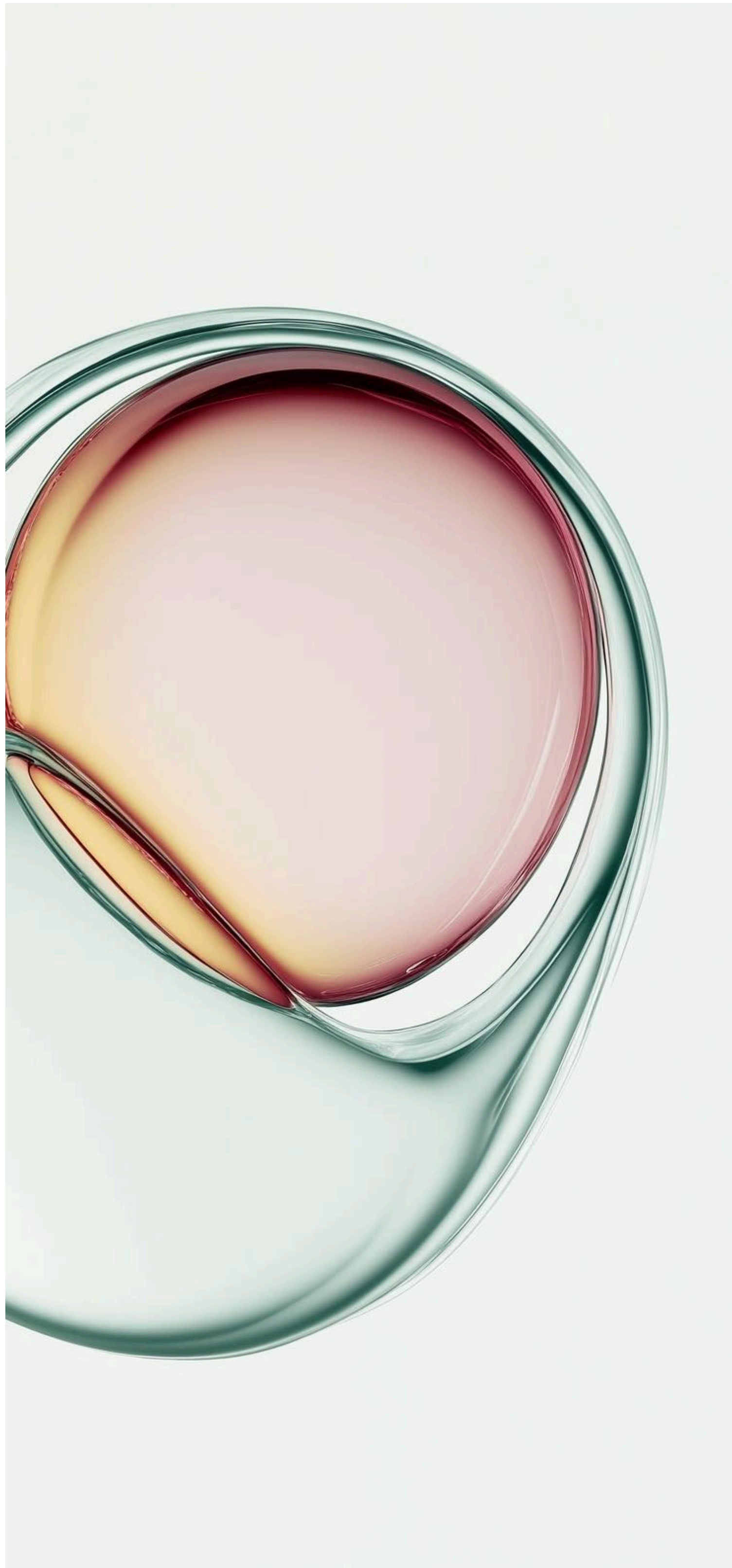
When a finding calls for a specialist, the appointment is booked, and the first consultation with one of our partner specialists is included.

The family

When a finding runs in families, the counsellor helps decide which relatives should know, and they can be tested for that one change.

Across borders

For people who live abroad, the report can also go to their own doctor at home.



The era of personal medicine

Medicines chosen for how one body handles them.

Doses set right from the first prescription.

Medicines that work from the start, with fewer side effects.

This is DNA turned into a plan for better health.

99.5%

of people are likely to respond atypically to at least one common medicine because of their genes.

30%

fewer clinically relevant side effects when prescribing followed a gene report, across 6,944 patients.

1 day

to read a whole genome today.
The first human genome took 13
years.

What comes next

The next decade of the genome

The science moves every year. A genome on record is ready for each new step.

62%

lower LDL cholesterol

the largest reduction after one infusion of a gene-editing medicine, still lower a year later, in an early trial published in 2026.

71M

genetic variants

every possible single-letter change in human proteins, assessed by an AI model, with 89% given a likely meaning.

1st

CRISPR medicine

approved anywhere in the world was approved in the UK in 2023, for inherited blood disorders.

© Lilly, Verve, 102, Heart2, phase 1b results, N Engl J Med, May 2026; Cheng J et al. Alphasense, Science, 2023;381:eabg7192; MHA, approval of Casgevy, November 2023.

Every result in one place

Each result is kept in the Profile, next to blood tests, scans and notes from the clinical team.

The report

The full report appears as soon as it is signed, with each finding explained in plain words.

The plan

The plan sets out what to do next, and when to measure again.

The raw data

The raw data files can be downloaded at any time. In The Legacy, this is the complete genome. They are never sold, and are deleted on request.

Every year

In The Legacy, each yearly check against new research is added to the Profile, with a note whenever something new is found.



Four ways to begin

The Legacy is our recommendation for most people. It is the only option that reads the whole genome.

For four people

The Legacy Family

£32,500

The Legacy for four people, a named family physician for the year, and a family results meeting with the counsellor. Further members £7,950 each.

Our recommendation

The Legacy

£8,500

The whole genome, a medicines report, a genetic heart score, carrier status, the Longevity+ blood panel, and a doctor review every year for three years.

For one person

The Vantage

£2,850

Around 200 heart and cancer genes, Lp(a) and ApoB, a results session with a genetic counsellor, and the full raw data files.

For one person

The Sentinel

£1,695

The 84 genes where a finding changes what a doctor does, with a results consultation with a doctor and the full raw data files.

For family offices, up to six people across three generations, from £47,500. Nothing is charged at booking.

What each one includes

Every option is led by a doctor, from the first call to the plan.

	The Sentinel	The Vantage	Our recommendation The Legacy	For four people The Legacy Family
A free first call with a doctor	✓	✓	✓	✓
Complimentary blood draw in Marylebone	✓	✓	✓	✓
Genes reported	84	Around 200	Whole genome, over 500 genes	Whole genome for each person
Lp(a) and ApoB heart markers	–	✓	✓	✓
Longevity+ panel, over 100 blood markers	–	–	✓	✓
Medicines report and one-page summary	–	–	✓	✓
Regulated genetic heart risk score	–	–	✓	✓
Carrier status	–	–	✓	✓
Results consultation with a doctor	✓	✓	✓	✓
Registered genetic counsellor	Where a finding appears	Results session	Before and after	Dedicated to the family
First specialist consultation, where a finding calls for one	✓	✓	✓	✓
Relatives tested for a family finding	At a family rate	At a family rate	Included for two	Included
Report updated if a finding is reclassified	✓	✓	✓	✓
Full re-reading within two years, and a yearly check against new research	–	–	✓	✓
Doctor review every year for three years	–	–	✓	✓
Named family physician for the year	–	–	–	✓
Raw data	✓	✓	Complete genome	Complete genome
Price	£1,695	£2,850	£8,500	£32,500

Further members of The Legacy Family £7,950 each. The included specialist consultation is the first appointment with one of our partner specialists.

The next chapter begins with a conversation

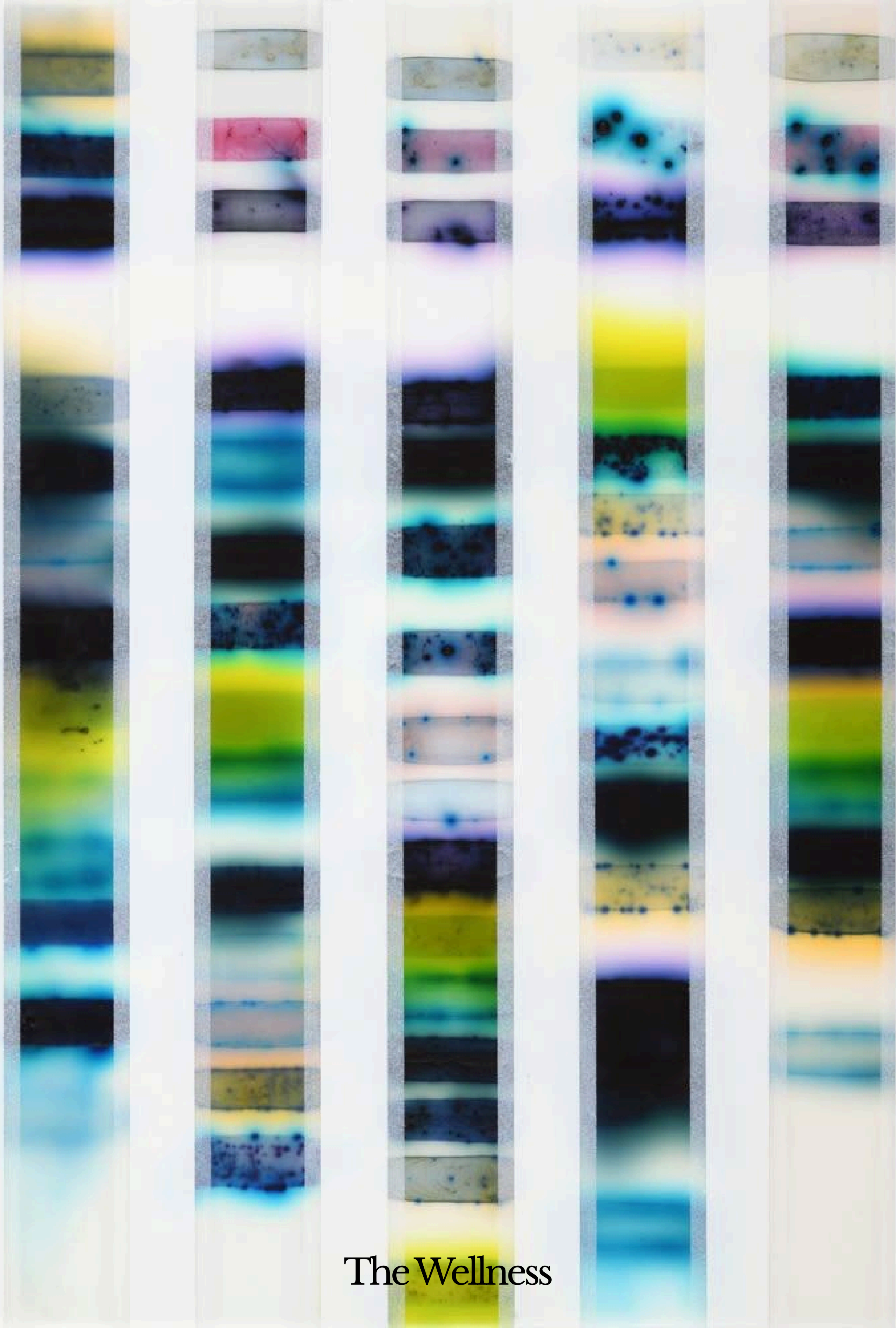
It begins with a free call with one of our doctors. When a genome is the right step, a blood sample is taken in Marylebone, or a saliva kit is sent home. The results are explained by a doctor and written into a plan.

Reach out to our team

Online
thewellnesslondon.com/genome

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The Wellness