

Participant Adherence to Standard-of-Care (SOC) Cancer Screening After Multi-Cancer Early Detection (MCED) Testing: Results From PATHFINDER 2

Gretchen Stipek, MD; Charles H. McDonnell III, MD, FACR; Dax Kurbegov, MD; Karthik V. Giridhar, MD; Marc R. Matrana, MD; Nima Nabavizadeh, MD; Benjamin Rybicki, PhD; Jennifer Tran, MD; Natalia Colocci, MD, PhD; Rebecca D. Kaltman, MD; Sami Tahhan, MD; Alan R. Roth, DO, FAAFP, FAAHPM; Carlos A. Taboada, MD; Vijayakrishna Gadi, MD, PhD; Dongjing Guo, MPH; Smit A. Shah, MS; Celine Marquez, MD; Kevin C. Oeffinger, MD

Presentation #674

Rapid Oral presented at American Society for Clinical Oncology (ASCO) Quality Care Symposium; October 16-17, 2026; Boston, MA

MCED Testing and SOC Cancer Screening: Key Takeaways From PATHFINDER 2

SOC cancer screening adherence remained **stable** over 12 months of follow-up after MCED testing

The MCED test detected **breast and colorectal cancers** in participants who were up to date with respective SOC screening at diagnosis

The MCED test detected lung cancers in participants who **did not** meet USPSTF lung cancer screening eligibility criteria

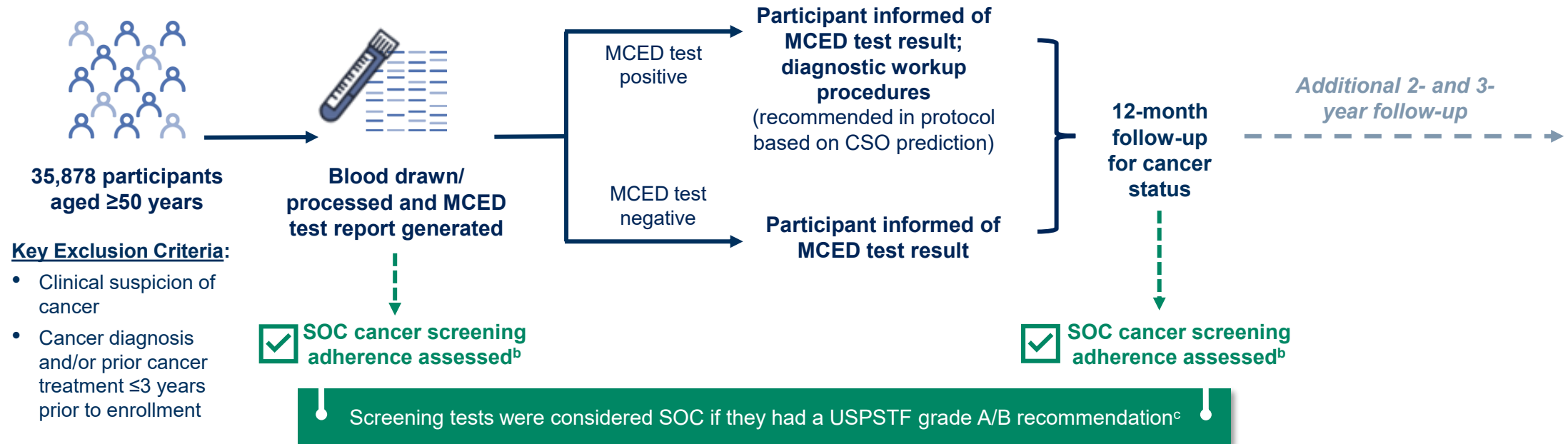
MCED testing may be an adjunct to guideline-recommended screening by detecting cancers that arise between routine screens and cancers outside current screening eligibility criteria

MCED, multi-cancer early detection; SOC, standard of care; USPSTF, US Preventive Services Task Force.

Presented by: Gretchen Stipec, MD

The copyright for the presentation slides remains with the authors/presenter. Permission must be obtained for reuse.

PATHFINDER 2^a: Determination of SOC Cancer Screening Adherence



Objective: Assess adherence to SOC cancer screening during the 12 months following MCED testing and evaluate the detection of interval cancers^d in study participants up to date^e with SOC screening recommendations

CSO, cancer signal origin; MCED, multi-cancer early detection; SOC, standard of care; USPSTF, US Preventive Services Task Force.

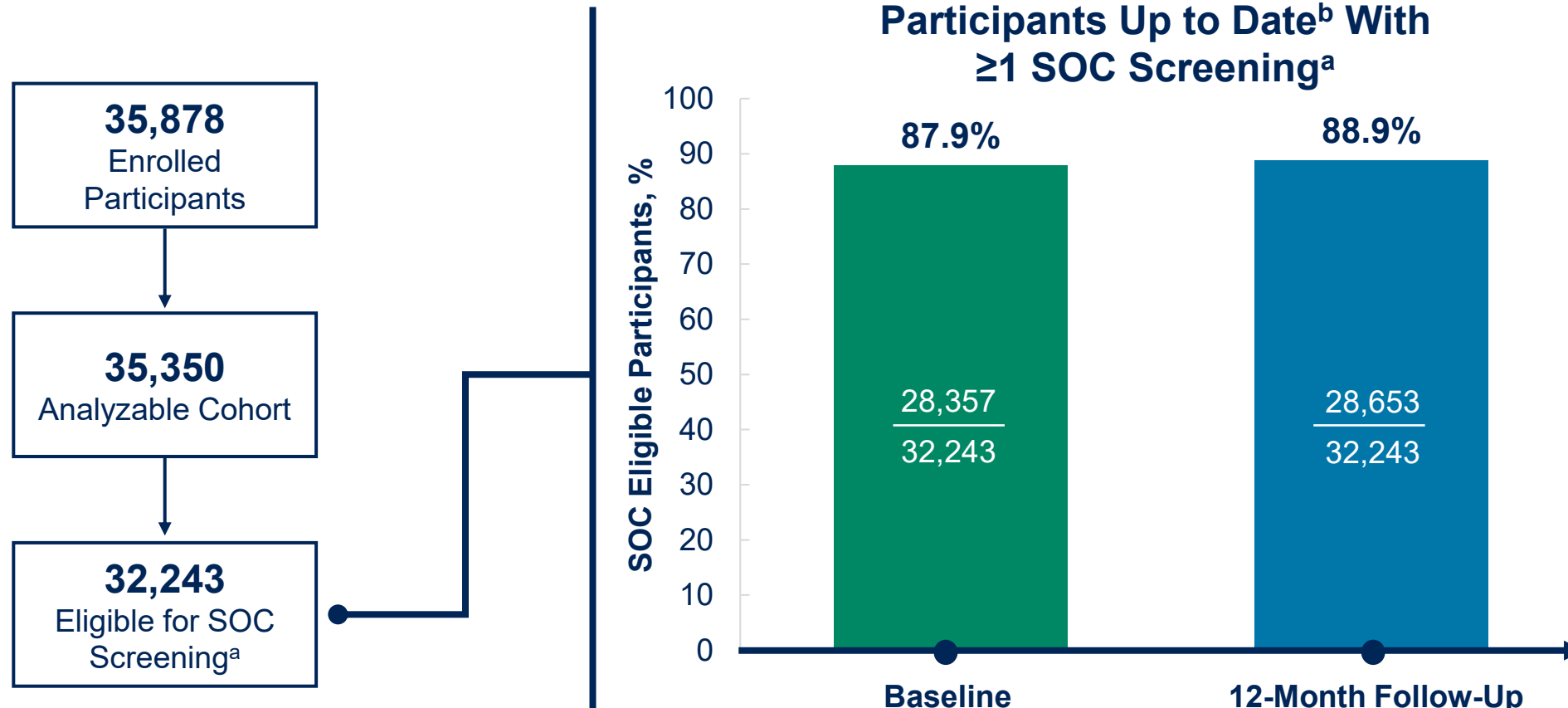
^aNCT05155605. ^bSOC cancer screening adherence assessed by medical record or patient report. ^cUSPSTF grade A/B screening recommendations have defined screening intervals for breast, cervical, and colorectal cancers, and lung cancer for high-risk individuals; prostate cancer screening was not included, as it has a grade C recommendation with no defined screening interval. ^dInterval cancers were defined as cancers detected by MCED testing among participants who were up to date with the respective SOC screening at the time of cancer diagnosis. ^eBeing up to date with a particular screening recommendation was defined as being within a recommended screening interval +90 days from date of the last reported cancer screening.

Adapted from: Giridhar KV, et al. Poster 4784. Presented at: AACR Annual Meeting; April 5-10, 2024; San Diego, CA.

Presented by: Gretchen Stipec, MD

The copyright for the presentation slides remains with the authors/presenter. Permission must be obtained for reuse.

SOC Screening Adherence Remained High Over 12 Months After MCED Testing



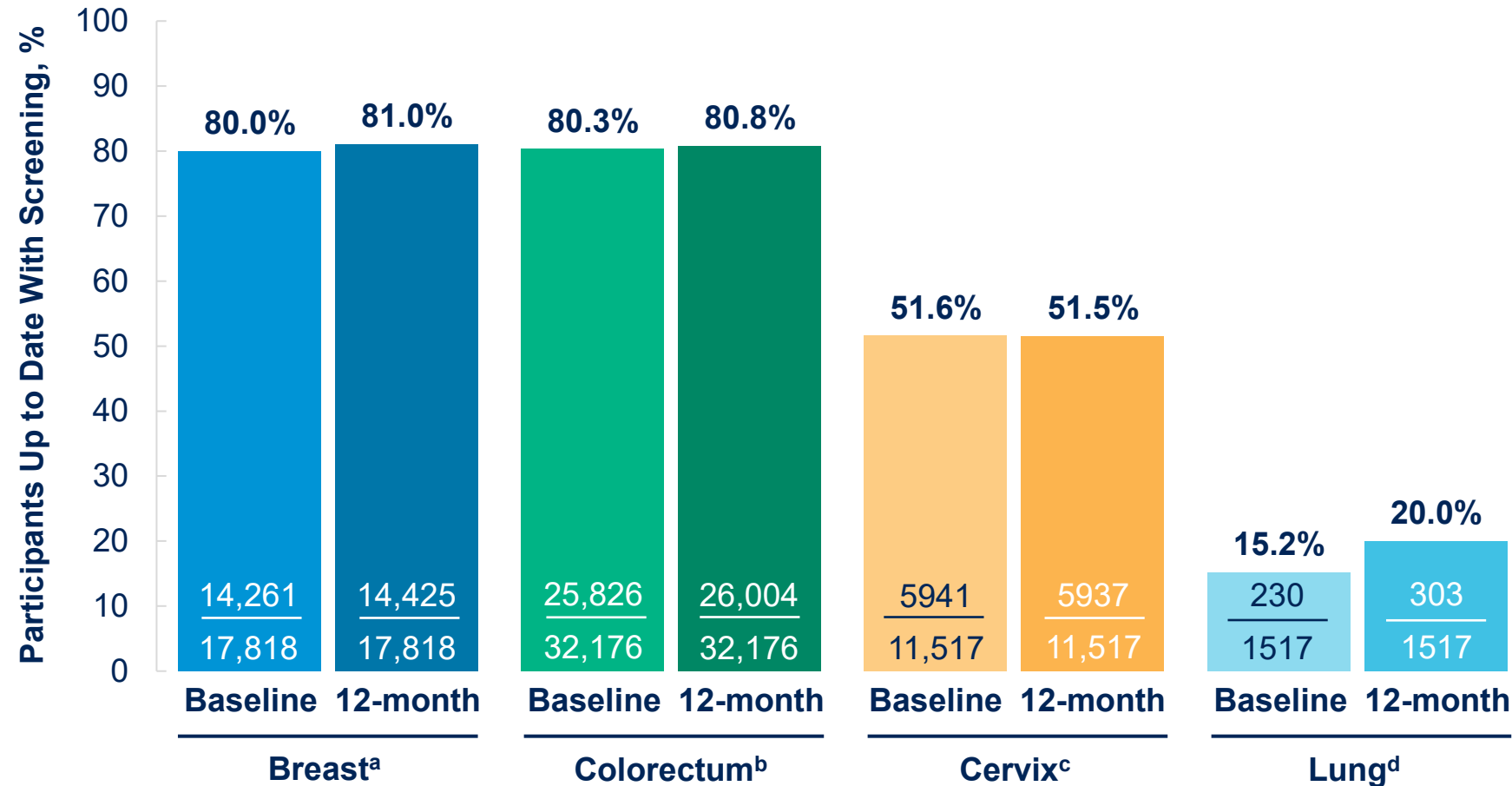
MCED, multi-cancer early detection; SOC, standard of care; USPSTF, US Preventive Services Task Force.

^aUSPSTF grade A or B recommendations. ^bBeing up to date with a particular screening recommendation was defined as being within a recommended screening interval +90 days from date of the last reported cancer screening.

Presented by: Gretchen Stipec, MD

The copyright for the presentation slides remains with the authors/presenter. Permission must be obtained for reuse.

Early Look: SOC Screening Adherence 12 Months After MCED Testing Was Similar To Baseline



- Adherence remained similar for breast, colorectal, and cervical cancer screening
- Modest increase for lung cancer screening among eligible participants

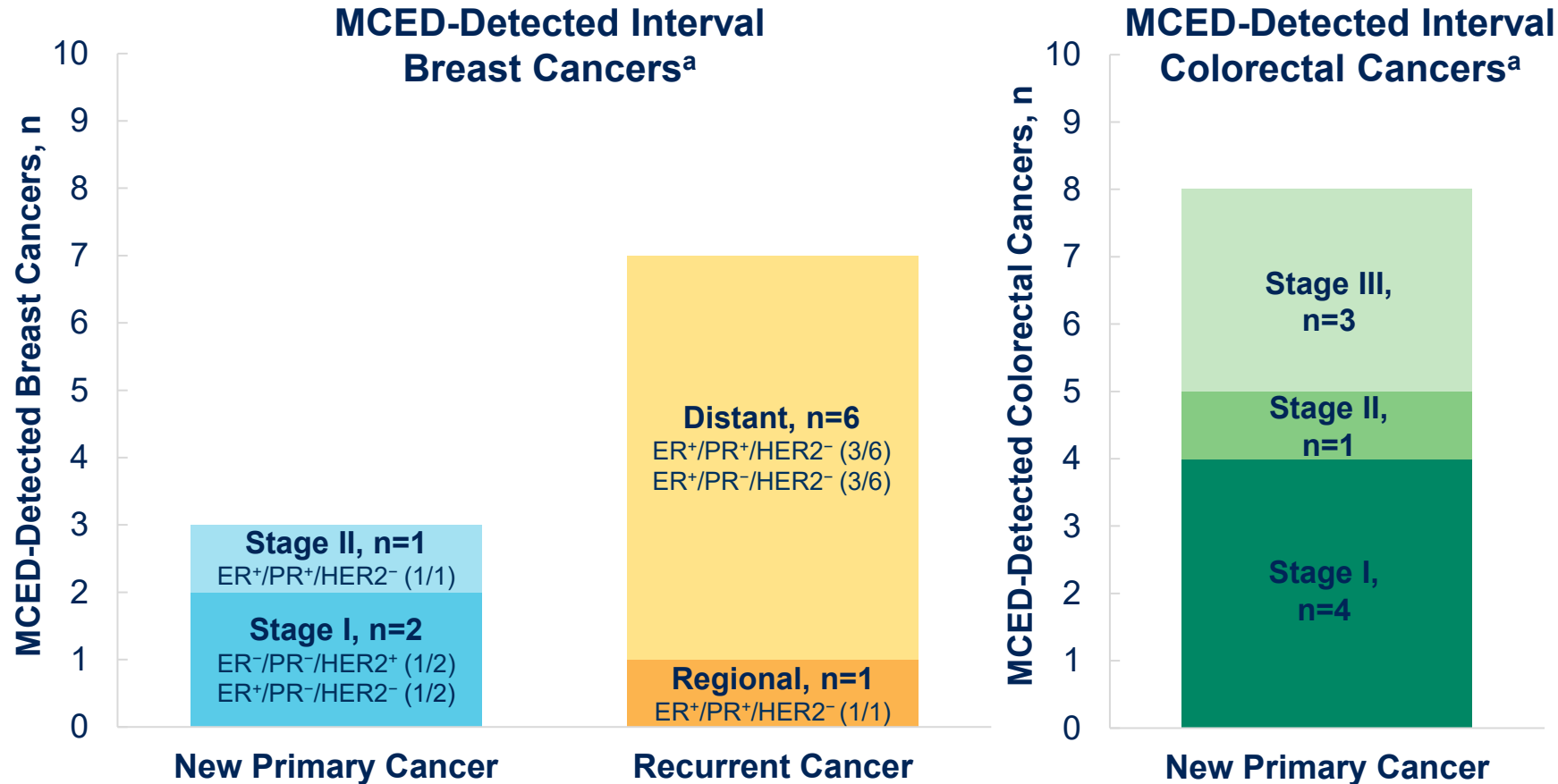
MCED, multi-cancer early detection; SOC, standard of care; USPSTF, US Preventive Services Task Force.

^aAmong women aged 40-74 years. ^bAmong participants aged ≤75 years. ^cAmong women ≤65 years. ^dAmong participants who satisfy USPSTF criteria for lung cancer screening.

Presented by: Gretchen Stipec, MD

The copyright for the presentation slides remains with the authors/presenter. Permission must be obtained for reuse.

MCED Test Detected Breast and Colorectal Cancers in Participants Up to Date With SOC Screening



Over the 12-month follow-up period^b:

- The MCED test detected
 - **10** interval breast cancers^c and
 - **8** interval colorectal cancers^d
- No interval lung cancers detected
- No cervical cancers (interval or otherwise) were detected

CSO, cancer signal origin; ER, estrogen receptor; HER2, human epidermal growth factor 2; MCED, multi-cancer early detection; PR, progesterone receptor; SOC, standard of care.

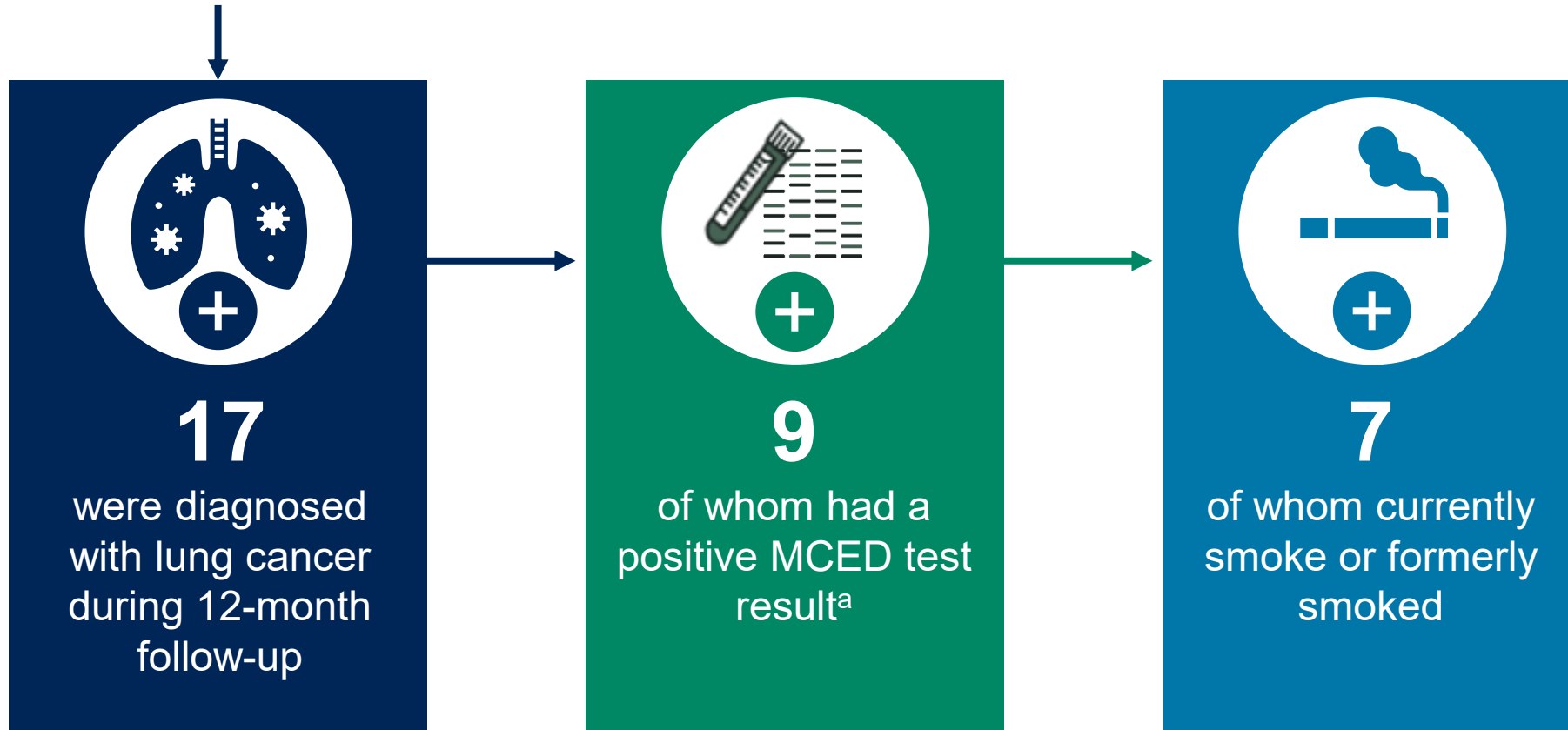
^aInterval cancers were defined as cancers detected by MCED testing among participants who were up to date with the respective SOC screening at the time of cancer diagnosis. ^bAmong participants who were up to date with respective SOC cancer screenings at diagnosis. ^c9 of 10 had accurate CSO predictions of breast. ^d7 of 8 had accurate CSO predictions of colorectum.

Presented by: Gretchen Stipec, MD

The copyright for the presentation slides remains with the authors/presenter. Permission must be obtained for reuse.

The MCED Test May Add to Detection of Lung Cancers Outside of Current Screening Eligibility Criteria

Of participants who **did not** meet the USPSTF lung cancer screening eligibility criteria



MCED, multi-cancer early detection; USPSTF, US Preventive Services Task Force.

^a9 of 9 had accurate CSO predictions of lung.

Presented by: Gretchen Stipec, MD

The copyright for the presentation slides remains with the authors/presenter. Permission must be obtained for reuse.

Early Evidence Suggests MCED Testing Does Not Negatively Impact Adherence to SOC Screening

SOC cancer screening adherence remained **stable** over 12 months of follow-up after MCED testing

The MCED test detected **breast** and **colorectal cancers** in participants who were up to date with respective SOC screening at diagnosis

The MCED test detected lung cancers in participants who **did not** meet current USPSTF lung cancer screening eligibility criteria

These findings support the use of MCED testing as an addition to, not a replacement for, recommended SOC cancer screening

MCED, multi-cancer early detection; SOC, standard of care; USPSTF, US Preventive Services Task Force.

Presented by: Gretchen Stipec, MD

The copyright for the presentation slides remains with the authors/presenter. Permission must be obtained for reuse.

Acknowledgments

- We acknowledge the contributions to this effort of the participants of the study and their families, the clinical site staff, and investigators

Lay Summary

WHAT IS THE MCED TEST?



It is a blood test that screens for many types of cancer from a single blood sample and points doctors to where to look

WHAT DID THIS RESEARCH TELL US?



In over 32,000 eligible participants in this study, people who used the MCED test stayed on track with their recommended routine cancer screening

WHO DOES THIS RESEARCH IMPACT?



Patients, clinicians, and researchers evaluating how MCED testing could affect existing cancer screening strategies

WHY IT MATTERS



MCED testing detected some breast and colorectal cancers in people who were up to date with recommended screening

MCED testing detected lung cancers in people who would not normally qualify for routine lung cancer screening

WHAT DOES THIS MEAN FOR PATIENTS RIGHT NOW?



Stick to recommended cancer screening schedules

MCED tests are designed to work alongside routine cancer screening strategies, not to replace them

MCED, multi-cancer early detection.

Presented by: Gretchen Stipec, MD

The copyright for the presentation slides remains with the authors/presenter. Permission must be obtained for reuse.