



GRAIL to Present New Data From NHS-Galleri and PATHFINDER 2 at EDCC and ESMO Congress 2026

October 5, 2026

GRAIL to Present Six Abstracts at the Early Detection of Cancer Conference (EDCC) Spanning Clinical Performance, Health Equity, and Real-World Implementation of Multi-Cancer Early Detection

GRAIL to Present Two Abstracts at the European Society for Medical Oncology (ESMO) Congress, Across the Cancer Diagnostic Journey and Real-World Evidence

SUNNYVALE, Calif., Oct. 5, 2026 /PRNewswire/ -- GRAIL, Inc. (Nasdaq: GRAL), a healthcare company whose mission is to detect cancer early when it can be cured, will present additional data from both the NHS-Galleri trial and the PATHFINDER 2 study further evaluating the Galleri® multi-cancer early detection (MCED) test at the Early Detection of Cancer Conference (EDCC) in Edinburgh, the United Kingdom, taking place Oct. 6-8, 2026, and at the European Society for Medical Oncology (ESMO) Congress 2026 in Madrid, Spain taking place Oct. 23-27, 2026.

Data across both meetings will include:

- A rapid oral presentation highlighting the efficiency and safety of Cancer Signal Origin (CSO) guided diagnostic workups.
- A poster showing Galleri cancer detection of more than 200 cancers across histologically distinct cancer types, including rare cancers.
- A poster showing Galleri cancer detection performance and accuracy across self-reported racial and ethnic groups.
- A poster presenting new NHS-Galleri data on the preclinical window for cancer detection with findings compatible with annual MCED screening.
- A poster showing a reduction of cancer diagnoses in emergency presentations associated with annual Galleri screenings.

"Ongoing analyses of PATHFINDER 2 and NHS-Galleri trial data continue to strengthen the evidence for integrating multi-cancer early detection into routine care," said Josh Ofman, MD, MSHS, CEO at GRAIL. "Across large, diverse populations, these data continue to demonstrate Galleri's strong performance and favorable safety profile, and reinforce its potential to fundamentally improve how we screen for cancer by finding more cancers, before symptoms are present, in early stages, when there is the greatest opportunity for curative intent treatment."

EDCC Data Presentations

Title: Estimating Preclinical Detection Window, Multi-Cancer Early Detection (MCED) Test Sensitivity, and Episode Sensitivity in the NHS-Galleri Trial Using the Incidence Method

Presentation Type: Poster

Date: Oct. 6

Title: Spectrum of Histologically Distinct Cancer Types Detected by a Methylation-Based Multi-Cancer Early Detection (MCED) Test

Presentation Type: Poster

Date: Oct. 7

Title: Performance of a multi-cancer early detection (MCED) test across racial and ethnic groups: Descriptive report from PATHFINDER 2

Presentation Type: Poster

Date: Oct. 7

Title: Loss of Life Expectancy by Stage at Diagnosis and Cancer Type in England: Illustrating the Burden of Premature Mortality From Late-Stage Cancer

Presentation Type: Poster

Date: Oct. 6

Title: High adherence to mammography screening before and after MCED testing

Presentation Type: Poster

Date: Oct. 7

Title: Population Impact of MCED Screening by Reducing the Diagnosis of Cancer in Emergency Settings in England

Presentation Type: Poster

Date: Oct. 7

More information about timing of the EDCC presentations can be found [here](#).

ESMO Data Presentations

Title: Efficiency and Safety of Cancer Signal Origin (CSO)-Guided Diagnostic Workups Following Multi-Cancer Early Detection (MCED) Testing: Results from PATHFINDER 2 (PF2)

Abstract Number: 1151

Presentation Type: Rapid Oral

Date/Time: Oct. 26, 2:45 p.m.-4:15 p.m.

Location: Salamanca Auditorium, Hall 10

Title: Diagnostic Workups Following a Positive Multi-Cancer Early Detection (MCED) Blood Test in Clinical Practice

Presentation Number: 1164P

Presentation Type: Poster

Date/Time: Oct. 25, 12 p.m.-12:45 p.m.

More information about timing of the ESMO presentations can be found [here](#).

About GRAIL

GRAIL is a healthcare company whose mission is to detect cancer early, when it can be cured. GRAIL is focused on alleviating the global burden of cancer by using the power of next-generation sequencing, population-scale clinical studies, and state-of-the-art machine learning, software, and automation to detect and identify multiple deadly cancer types in earlier stages. GRAIL's targeted methylation-based platform can support the continuum of care for screening and precision oncology, including multi-cancer early detection in symptomatic patients, risk stratification, minimal residual disease detection, biomarker subtyping, treatment and recurrence monitoring. GRAIL is headquartered in Sunnyvale, Calif. with locations in Washington, D.C., North Carolina, and the United Kingdom.

For more information, visit grail.com.

About Galleri®

The Galleri® multi-cancer early detection (MCED) test screens for more than 50 cancer types, including many deadly cancers that currently lack screening options, such as pancreatic, ovarian, and liver/bile duct cancers¹. The Galleri test is the only MCED test clinically proven through a randomized controlled trial to increase earlier cancer detection (Stage I-III) and reduce Stage IV diagnoses - enabling more patients to have access to potentially curative treatment options². When added to standard-of-care screening, the Galleri test reduced Stage IV diagnosis by more than 20% after the first year of screening across all stageable cancers^{2,*}. The Galleri test increased cancer detection by screening four times versus standard of care screening alone². The Galleri test has the lowest false positive rate among MCED tests** and the ability to predict the Cancer Signal Origin with greater than 90% accuracy, helping guide efficient diagnostic evaluation¹⁻³. The Galleri test is backed by a robust clinical evidence program, with more than 380,000 participants across multiple studies, including the NHS-Galleri trial, the first and only randomized controlled trial for an MCED test. The Galleri test has delivered consistent performance across these studies. The Galleri test requires a prescription from a licensed healthcare provider and should be used in addition to recommended cancer screenings, such as mammography, colonoscopy, prostate-specific antigen (PSA) test, cervical or lung cancer screening. The Galleri test is recommended for adults with an elevated risk for cancer, such as those aged 50 years or older.

For more information, visit galleri.com.

*A statistically significant reduction was not observed in combined stage III-IV diagnoses across three screening rounds for 12 cancer types responsible for around two-thirds of cancer mortality in the US and UK.

**Test performance metrics do not represent results of a head-to-head comparative study. Separate studies have different designs, objectives, and participant populations, which limits the ability to draw conclusions about comparative performance.

Important Galleri Safety Information

The Galleri test is recommended for use in adults with an elevated risk for cancer, such as those age 50 years or older. The test does not detect all cancers and should be used in addition to routine cancer screening tests recommended by a healthcare provider. The Galleri test is intended to detect cancer signals and predict where in the body the cancer signal is located. Use of the test is not recommended in individuals who are pregnant, 21 years old or younger, or undergoing active cancer treatment. Results should be interpreted by a healthcare provider in the context of medical history, clinical signs, and symptoms. A test result of No Cancer Signal Detected does not rule out cancer. A test result of Cancer Signal Detected requires confirmatory diagnostic evaluation by medically established procedures (e.g., imaging) to confirm cancer. If cancer is not confirmed with further testing, it could mean that cancer is not present or testing was insufficient to detect cancer, including due to the cancer being located in a different part of the body. False positive (a cancer signal detected when cancer is not present) and false negative (a cancer signal not detected when cancer is present) test results do occur. **Rx only.**

Laboratory/Test Information

The GRAIL clinical laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) and accredited by the College of American Pathologists. The Galleri test was developed — and its performance characteristics were determined — by GRAIL. The Galleri test has not been cleared or approved by the Food and Drug Administration. The GRAIL clinical laboratory is regulated under CLIA to perform high-complexity testing. The Galleri test is intended for clinical purposes.

GRAIL Forward Looking Statements

This press release contains forward-looking statements. In some cases, you can identify these statements by forward-looking words such as "aim," "anticipate," "believe," "continue," "could," "estimate," "expect," "intend," "may," "might," "plan," "potential," "predict," "should," "would," or "will," the negative of these terms, and other comparable terminology. These forward-looking statements, which are subject to risks, uncertainties, and assumptions about us, may include statements related to the potential benefits, uses and impacts of the Galleri test, comparability of clinical study results to a real world setting, benefits of population screening with existing or future versions of Galleri, the substance, format and scope of the clinical data to be presented at the EDCC and ESMO Congress, and the evidentiary effect and clinical implications of additional clinical data and analyses on the potential benefits, uses and impacts of the Galleri test, among others.

These statements are only predictions based on our current expectations and projections about future events and trends. There are important factors that could cause our actual results, level of activity, performance, or achievements to differ materially and adversely from those expressed or implied by the forward-looking statements, including those factors and numerous associated risks discussed under the sections entitled "Risk Factors" in our Annual Report on Form 10-K for the period ended December 31, 2025 and our subsequent Quarterly Reports on Form 10-Q. Moreover, we operate in a dynamic and rapidly changing environment. New risks emerge from time to time. It is not possible for our management to predict all risks, nor can we assess the impact of all factors on our business or the extent to which any factor, or combination of factors, may cause actual results, level of activity, performance, or achievements to differ materially and adversely from those contained in any forward-looking statements we may make.

Forward-looking statements relate to the future and, accordingly, are subject to inherent uncertainties, risks, and changes in circumstances that are difficult to predict and many of which are outside of our control. Although we believe the expectations and projections expressed or implied by the forward-looking statements are reasonable, we cannot guarantee future results, level of activity, performance, or achievements. Our actual results, financial condition and success in our business strategies and operations may differ materially from those indicated in the forward-looking statements. Except to the extent required by law, we undertake no obligation to update any of these forward-looking statements after the date of this press release to conform our prior statements to actual results or revised expectations or to reflect new information or the occurrence of unanticipated events.

¹ Klein EA, Richards D, Cohn A, et al. Clinical validation of a targeted methylation-based multi-cancer early detection test using an independent validation set. *Ann Oncol.* 2021 Sep;32(9):1167-77. doi: [10.1016/j.annonc.2021.05.806](https://doi.org/10.1016/j.annonc.2021.05.806)

² Swanton C. NHS-Galleri: Primary Results From a Randomised Controlled Trial to Assess the Clinical Utility of a Multi-Cancer Early Detection (MCED) Test in Population Screening [presentation]. American Society of Clinical Oncology (ASCO) Annual Meeting; 2026 May 29-June 2.

³ GRAIL, Inc. False positive rate. [Data on file: GR-2025-0256]

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