

Abbott Presents New ESMO Data Showing 30-Percent Absolute Improvement In Sensitivity With The Whole-Genome Sequencing Oncodetect® Test In Colorectal Cancer

- *Beta-CORRECT study shows a 10.6-fold higher risk of recurrence, reinforcing the prognostic value of molecular residual disease (MRD) testing¹*
- *Building on its leadership in colorectal cancer screening with the Cologuard® test, Abbott is connecting innovations across the cancer care continuum, from early detection to post-treatment monitoring*

ABBOTT PARK, Ill., Oct. 23, 2026 /PRNewswire/ -- For patients with colorectal cancer, surgery can remove visible cancer, but it can be difficult to know whether minute traces of the disease remain. Abbott (NYSE: ABT) today announced new Beta-CORRECT data presented at the European Society for Medical Oncology (ESMO) Congress showing that the whole-genome sequencing (WGS)-based Oncodetect® molecular residual disease (MRD) test achieved a 30-percent absolute improvement in sensitivity for colorectal cancer recurrence within two years of surgery, compared with the whole-exome sequencing (WES) Oncodetect test, using a single post-surgery blood draw.¹

For more than 12 years, Abbott's cancer diagnostics business has helped expand access to colorectal cancer screening through Cologuard®. Together with Oncodetect, these innovations reflect Abbott's connected approach to cancer care, from early detection to monitoring for recurrence after treatment.

Conducted in collaboration with Dr. Takayuki Yoshino, MD, PhD, National Cancer Center Hospital East in Japan, Beta-CORRECT is the first clinical validation study of the WGS Oncodetect test in patients with stage II, III and resectable stage IV colorectal cancer. The test tracks up to 5,000 DNA variants unique to each patient's tumor, expanding opportunities to detect residual disease when very little cancer DNA is present.¹ The study analyzed post-surgical samples from 279 patients, predominantly with stage II and III colorectal cancer.¹

Key findings from Beta-CORRECT:

- **Improved sensitivity:** A single blood test taken approximately one month after surgery using the WGS test achieved 72.2% sensitivity for recurrence within two years, compared with 42.2% for the WES test, a 30-percent absolute improvement.¹
- **Additional ctDNA detection:** Among 157 patients tested post-surgery with both tests, the WGS test detected ctDNA in all 29 patients in whom the WES test identified, plus 15 additional patients. All additional detections were at levels below 20 parts per million (ppm), including 14 that were below 10 ppm.¹
- **Strong prognostic value:** Patients with detectable ctDNA after surgery had a 10.6-fold higher risk of recurrence than ctDNA-negative patients. Two-year disease-free survival rates were 36.2% versus 92.3%, respectively.¹
- **Stage II findings:** Patients with detectable post-surgical ctDNA had approximately 31-fold higher recurrence risk compared to those who were ctDNA negative. Only 2.8% of stage II patients with undetectable ctDNA experienced recurrence within two years.²

"Beta-CORRECT adds important clinical evidence supporting the prognostic value of highly sensitive MRD testing in colorectal cancer," said Dr. Takayuki Yoshino, MD, PhD, National Cancer Center Hospital East and principal investigator of the Beta-CORRECT study. "The ability to identify additional patients with detectable ctDNA after surgery may help refine recurrence risk assessment beyond traditional clinical factors. Continued research will help determine how these findings can best inform patient management."

"These findings reinforce why sensitivity matters in MRD testing, particularly after surgery when ctDNA can be difficult to detect," said Dr. Rick Baehner, divisional vice president, chief medical officer, precision oncology, Abbott's cancer diagnostics business. "By identifying additional patients with residual disease, we can provide physicians with important molecular information about recurrence risk at a critical point in care."

Detecting ctDNA after surgery was the strongest predictor of cancer recurrence among the factors studied, providing important information about a patient's risk beyond traditional clinical measures. Additional patient follow-up and longitudinal data from subsequent testing time points are expected to provide further insights into the relationship between MRD, adjuvant therapy and recurrence risk over time.

The findings were presented at ESMO 2026 in poster 4426P, *Validation of the ultrasensitive tumor-informed WGS MAESTRO MRD assay in β -CORRECT*.

About the Oncodetect® test

The next-generation Oncodetect® test is a whole-genome sequencing-based, tumor-informed molecular residual disease (MRD) test designed to provide a personalized approach to detecting and monitoring residual cancer in patients with solid tumors. The test analyzes circulating tumor DNA (ctDNA) shed into the bloodstream by tumors, offering insights into changes in ctDNA levels over time. This quantitative assessment of ctDNA (measured as MTM/mL) helps healthcare providers better understand a

patient's MRD status and make informed treatment decisions.

The Oncodetect® test was developed, and its performance characteristics determined by Genomic Health, Inc. Performance characteristics may not apply in tumor types not included in this test's clinical validation. The test has not been cleared or approved by the US Food and Drug Administration. The test is performed at Genomic Health Inc. The Genomic Health Inc. lab performing this test is certified under CLIA regulations and qualified to perform high-complexity clinical laboratory testing.

About Abbott:

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- 1. Hashimoto, T. et al. Validation of the ultrasensitive tumor-informed WGS MAESTRO MRD assay in β-CORRECT. Poster 4426P presented at ESMO 2026; October 23-27, 2026; Madrid, Spain.
- 2. Data on File – Additional Beta-CORRECT WGS analysis performed. October 2026.

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