At ASCO and EHA 2026, New Data Reinforce the Pivotal Role of clonoSEQ® MRD Testing Across Hematology Clinical Practice and Research

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Over 30 scientific presentations leverage clonoSEQ MRD testing to assess novel therapies and support MRD-guided patient care across blood cancers

SEATTLE, May 29, 2026 (GLOBE NEWSWIRE) -- Adaptive Biotechnologies Corporation (Nasdaq: ADPT), a commercial stage biotechnology company that aims to translate the genetics of the adaptive immune system into clinical products to diagnose and treat disease, today announced that its next-generation sequencing (NGS)-based clonoSEQ® test for measurable residual disease (MRD) assessment will be included in 33 presentations, including one plenary session and 14 oral presentations, across the American Society of Clinical Oncology (ASCO) Annual Meeting, taking place May 29-June 3 in Chicago, and the European Hematology Association (EHA) Congress, taking place June 11-14 in Stockholm.

Data at ASCO and EHA this year continue to reinforce clonoSEQ's role in modern hematologic oncology care — as the gold standard for assessing depth of response, longitudinal disease monitoring, and MRD-guided treatment decision-making. Across hematologic malignancies, these studies highlight how MRD measured by clonoSEQ continues to be broadly incorporated into both research and clinical practice:

- Multiple myeloma: Highly sensitive MRD testing continues to demonstrate depth and durability of response across novel therapies, including follow-up data from the inMMyCAR trial of CAR T-cell therapy and bispecific antibody data from MONUMENTAL-3. In addition, a final analysis from the CEPHEUS trial, the basis for the first-ever FDA approval based on an MRD endpoint, showed higher rates of sustained MRD negativity in patients treated with quadruplet regimen daratumumab plus VRd (bortezomib, lenalidomide, and dexamethasone).
- Chronic lymphocytic leukemia (CLL): MRD is being incorporated into decisions around therapy duration and discontinuation in studies including BOVen-ΔMRD400 and venetoSTOP, the latter demonstrating that personalized venetoclax treatment duration based on uMRD5 status leads to durable treatment-free remissions.
- Acute lymphoblastic leukemia (ALL): In a Phase 2 study evaluating dose-adjusted EPOCH with rituximab and tafasitamab, MRD assessment with clonoSEQ continues to outperform flow cytometry in detecting residual disease and predicting patient outcomes and can be used to assess disease burden in cerebrospinal fluid.
- Lymphoma: clonoSEQ leverages sensitivity and specificity to support MRD testing in real-world and clinical trial settings across multiple major lymphoma subtypes, including diffuse large B-cell lymphoma (DLBCL), mantle cell lymphoma (MCL), and follicular lymphoma (FL).

At EHA this year, new data further expand the evidence base for highly sensitive, next-generation sequencing–based MRD assessment and underscore the increasingly global nature of clonoSEQ's reach and impact. Across Europe, growing momentum behind MRD-guided care is being driven, in part, by increasing biopharmaceutical industry investment in interventional studies that incorporate MRD into treatment decisions.

"The range of data presentations leveraging clonoSEQ testing at ASCO and EHA this year reflects the maturation of the hematologic MRD field, with key studies highlighting how MRD can define deep responses to new therapies or regimens, including as a primary endpoint, and guide adaptive treatment approaches based on MRD status," said Susan Bobulsky, Chief Commercial Officer, MRD, Adaptive Biotechnologies. "As MRD testing becomes standard practice in hematologic malignancies, the need for clonoSEQ—the only technology specifically designed for the unique biology of blood cancers and capable of delivering highly sensitive and specific MRD assessment throughout the patient treatment journey—has never been greater."

The full list of abstracts can be viewed here.

About clonoSEQ

clonoSEQ® is the first and only FDA-cleared in vitro diagnostic (IVD) test for detecting and tracking minimal (or measurable) residual disease (MRD) in patients with multiple myeloma (MM) or B-cell acute lymphoblastic leukemia (B-ALL) using bone marrow, and in patients with chronic lymphocytic leukemia (CLL) using blood or bone marrow. clonoSEQ is also available in diffuse large B-cell lymphoma (DLBCL), mantle cell lymphoma (MCL) and other lymphoid cancers and specimen types as a CLIA-validated laboratory developed test (LDT). clonoSEQ is covered by Medicare for MM, CLL, ALL, DLBCL and MCL.

clonoSEQ identifies and quantifies DNA sequences in malignant cells—detecting one cancer cell in one million healthy cells—to help clinicians and researchers assess and monitor MRD with precision over time. It delivers standardized, sensitive results that inform treatment decisions, predict outcomes, and detect relapses earlier.

clonoSEQ is CE-marked under the EU In Vitro Diagnostic Regulation (IVDR). For intended use details in the EU, see the instructions for use, available on request.

To review the FDA-cleared uses of clonoSEQ, visit clonoSEQ.com/technical-summary.

About Adaptive Biotechnologies
Adaptive Biotechnologies (“we” or “our”) is a commercial-stage biotechnology company focused on harnessing the inherent biology of the adaptive immune system to transform the diagnosis and treatment of disease. We believe the adaptive immune system is nature’s most finely tuned diagnostic and therapeutic for most diseases, but the inability to decode it has prevented the medical community from fully leveraging its capabilities. Our proprietary immune medicine platform reveals and translates the massive genetics of the adaptive immune system with scale, precision and speed. We apply our platform to partner with biopharmaceutical companies, inform drug development, and develop clinical diagnostics across our two business areas: Minimal Residual Disease (MRD) and Immune Medicine. Our commercial products and clinical pipeline enable the diagnosis, monitoring, and treatment of diseases such as cancer, autoimmune disorders, and infectious diseases. Our goal is to develop and commercialize immune-driven clinical products tailored to each individual patient.

Forward Looking Statements
This press release contains forward-looking statements that are based on management’s beliefs and assumptions and on information currently available to management. All statements contained in this release other than statements of historical fact are forward-looking statements, including statements regarding our ability to develop, commercialize and achieve market acceptance of our current and planned products and services, our research and development efforts, and other matters regarding our business strategies, use of capital, results of operations and financial position, and plans and objectives for future operations.

In some cases, you can identify forward-looking statements by the words “may,” “will,” “could,” “would,” “should,” “expect,” “intend,” “plan,” “anticipate,” “believe,” “estimate,” “predict,” “project,” “potential,” “continue,” “ongoing” or the negative of these terms or other comparable terminology, although not all forward-looking statements contain these words. These statements involve risks, uncertainties and other factors that may cause actual results, levels of activity, performance or achievements to be materially different from the information expressed or implied by these forward-looking statements. These risks, uncertainties and other factors are described under "Risk Factors," "Management's Discussion and Analysis of Financial Condition and Results of Operations" and elsewhere in the documents we file with the Securities and Exchange Commission from time to time. We caution you that forward-looking statements are based on a combination of facts and factors currently known by us and our projections regarding the future, about which we cannot be certain. As a result, the forward-looking statements may not prove to be accurate. The forward-looking statements in this press release represent our views as of the date hereof. We undertake no obligation to update any forward-looking statements for any reason, except as required by law.

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