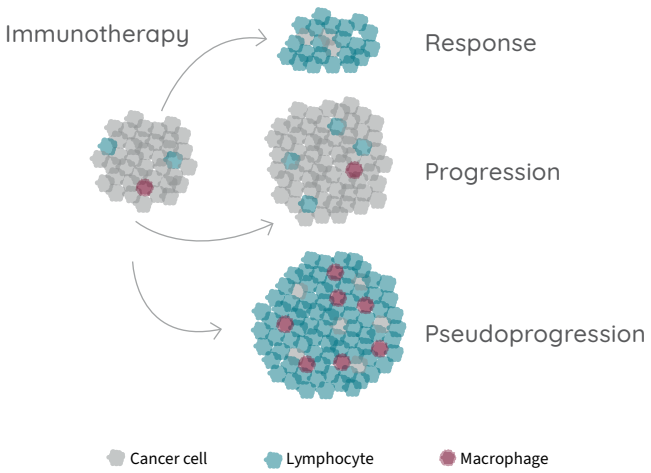
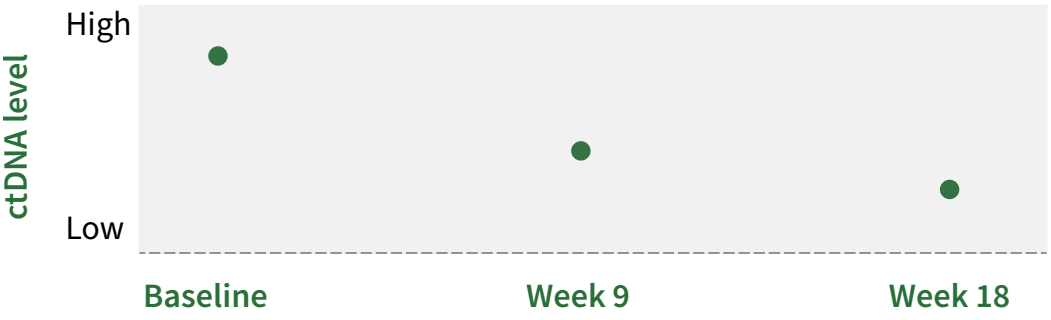
When imaging alone doesn't tell the whole story

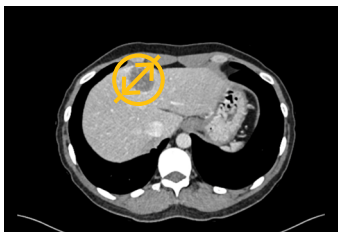
Immunotherapy response assessment presents unique clinical challenges such as pseudoprogression, delayed response, and mixed response, that can make conventional imaging difficult to interpret and may complicate clinical decision-making.

Patients may derive meaningful clinical benefit from immunotherapy despite delayed or mixed radiographic response or even perceived radiographic progression.

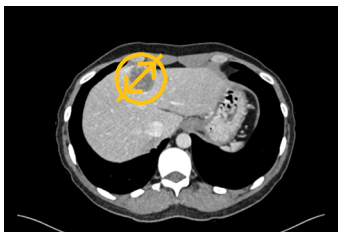


Serial ctDNA monitoring with RaDaR ST may provide earlier molecular insight into response dynamics, complementing imaging and clinical evaluation.

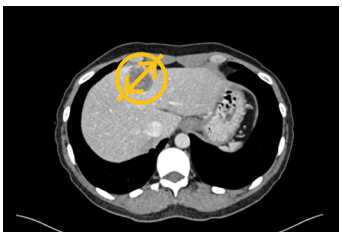




Tumor size: 2.3 cm



Tumor size: 2.4 cm



Tumor size: 2.2 cm

Earlier molecular insight

A decline in ctDNA may indicate molecular response before changes are visible on imaging.[1,2]

Prognostic value

Early ctDNA decline has been associated with improved PFS and OS compared with no molecular response.[1]

Complement to imaging and clinical evaluation

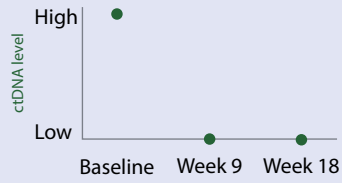
Serial ctDNA monitoring may provide an additional molecular view of treatment response over time.[1,2]

From imaging uncertainty to molecular insight

Longitudinal ctDNA monitoring with RaDaR ST may help characterize responders and non-responders across solid tumor cancers[1,2]

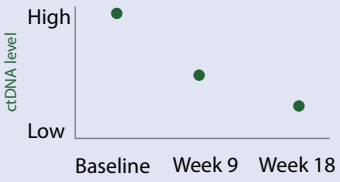
ctDNA clearance and decreasing ctDNA may identify patients benefiting from immunotherapy, while persistent or increasing ctDNA may indicate an early sign of a lack of molecular response to immunotherapy.

ctDNA clearance



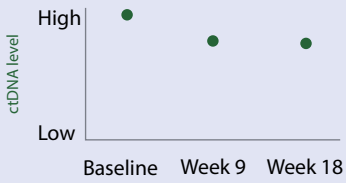
- The trend indicates a molecular response.
- Associated with improved outcomes in multiple studies.

Decreasing ctDNA



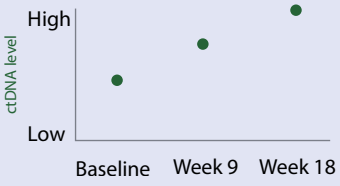
- The trend may indicate treatment benefit.
- Provides insight into response trajectory.

Persistent ctDNA



- The trend suggests ongoing molecular disease.
- May indicate limited molecular response.

Increasing ctDNA



- The trend indicates molecular progression.
- May precede radiographic progression

RaDaR ST is designed for accurate and efficient MRD testing

Ultra-sensitive detection*

RaDaR ST can detect up to 37% more patients compared to assays with a 100 ppm limit of detection.[3-6]

Low Sample Requirements

Less tissue and blood for baseline testing compared with another tumor-informed MRD assay.

Fast Turnaround Time

RaDaR ST results are available in as little as 28 days for baseline and 7 days for follow-up timepoints.

If you need additional assistance, please contact us at Client.Services@NeoGenomics.com or call 866.776.5907, option 3. For more information, please visit the **RaDaR ST test information website**.

Scan QR code to access additional RaDaR ST citations

1. Ruiz-Torres, D.A., et al. "Personalized Circulating Tumor DNA Dynamics Inform Survival and Response to Immune Checkpoint Blockade in Recurrent/Metastatic Head and Neck Cancer." npj Precision Oncology, vol. 9, no. 298, 2025.
2. van Dorp, Jeroen, et al. "High- or Low-Dose Preoperative Ipilimumab plus Nivolumab in Stage III Urothelial Cancer: The Phase 1B NABUCCO Trial." Nature Medicine, vol. 29, no. 3, 2023, pp. 588–592.
3. Elliott, Mitchell J., et al. "Longitudinal Evaluation of Circulating Tumor DNA in Patients Undergoing Neoadjuvant Therapy for Early Breast Cancer Using a Tumor-Informed Assay." Nature Communications, vol. 16, no. 1, 2025, article 1837.
4. Flach, Susanne, et al. "Personalized ctDNA Analysis for Detection of Residual Disease and Recurrence in Surgically Treated HNSCC Patients." NPJ Precision Oncology, vol. 10, no. 1, 2026, p. 103.
5. Flach, Sabrina, et al. "Liquid BIOpsy for MiNimal RESidual DiSease Detection in Head and Neck Squamous Cell Carcinoma (LIONESS)-A Personalised Circulating Tumour DNA Analysis in Head and Neck Squamous Cell Carcinoma." British Journal of Cancer, vol. 126, 2022, pp. 1186–1195.
6. NeoGenomics data on file. Sensitivity demonstrated across four independent analytic and clinical validation studies down to 1 part per million (ppm) under study-specific conditions. LOD95 is 11 ppm.

NeoGenomics, Inc. is a premier cancer diagnostics company specializing in cancer genetics testing and information services. We offer one of the most comprehensive oncology-focused testing menus across the cancer continuum, serving oncologists, pathologists, hospital systems, academic centers, and pharmaceutical firms with innovative diagnostic and predictive testing to deliver timely, actionable insights that guide personalized care decisions. Headquartered in Fort Myers, FL, NeoGenomics operates a network of CAP-accredited and CLIA-certified laboratories for full-service sample processing and analysis services throughout the US and a CAP-accredited full-service sample-processing laboratory in Cambridge, England.

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