Quince Therapeutics to Host Virtual KOL Event to Discuss the Current Treatment Landscape for PH-ILD and BOS and the Role for LAM-001 as a Potential Therapeutic Option on September 28, 2026

September 17, 2026

SOUTH SAN FRANCISCO, Calif., Sept. 17, 2026 (GLOBE NEWSWIRE) -- Quince Therapeutics, Inc. (Nasdaq: QNCX), a clinical stage biopharmaceutical company focused on the development of novel, disease modifying therapies for serious, underserved diseases, today announced that it will host a virtual key opinion leader (KOL) event on Monday, September 28, 2026 from 12:30-2:00 PM ET. The event will feature PH-ILD experts Aaron B. Waxman, MD, PhD (Brigham and Women's Hospital) and Paul Yu, MD, PhD (Massachusetts General Hospital), as well as BOS expert Steven Hays, MD (UCSF Health) to discuss the current treatment landscape and unmet need for PH-ILD and BOS as well as the role for LAM-001 as a potential new therapeutic option. To register, click here.

The event will provide an overview of LAM-001, the Company's proprietary investigational once-daily inhaled DPI formulation of rapamycin (mTOR inhibitor), currently in Phase 2 clinical trials for pulmonary hypertension associated with interstitial lung disease (PH-ILD) and bronchiolitis obliterans syndrome post lung transplant (BOS). The KOLs will discuss mTOR inhibition as a potentially disease modifying mechanism of action across these conditions, focusing on its potential role in suppressing pulmonary smooth muscle hyperproliferation, limiting fibroblast driven vascular and interstitial remodeling, and modulating inflammatory signaling, along with the unique potential advantages of delivering therapy through an inhaled route. The KOLs will review current treatment options as well as the emerging treatment landscape for each condition. Data from the recently presented Phase 2a trial of LAM-001 in pulmonary hypertension will be reviewed as well as the design and objectives of the ongoing Phase 2 BOS and Phase 2b PH-ILD studies.

A live question and answer session will follow the formal presentations.

About Aaron B. Waxman, MD, PhD
Aaron B. Waxman, MD, PhD, is Director of the Pulmonary Vascular Disease Program at Brigham and Women's Hospital and Professor of Medicine at Harvard Medical School. Dr. Waxman's clinical practice and research programs center on pulmonary arterial hypertension (PAH), right heart failure, thromboembolic disease, and the broader spectrum of pulmonary vascular disease. Across local and national efforts, Dr. Waxman has served as Principal Investigator on more than 15 clinical trials in pulmonary hypertension. These include the Phase 2 SPECTRA trial of sotatercept, which helped establish activin signaling inhibition as a novel therapeutic pathway in PAH, and the INCREASE trial of inhaled treprostinil in pulmonary hypertension associated with interstitial lung disease—a study that defined a new treatment standard for a previously underserved patient population. He has authored more than 180 peer-reviewed publications, and his research has been supported by the National Institutes of Health, including the National Heart, Lung, and Blood Institute.

About Paul Yu, MD, PhD
Paul Yu, MD, PhD is Director of the Cardiovascular Research Center at Massachusetts General Hospital and Associate Professor of Medicine at Harvard Medical School, where he holds the Charles and Elizabeth Sanders Endowed Chair. A physician-scientist trained in immunology and cardiovascular medicine, Dr. Yu's research focuses on bone morphogenetic protein and transforming growth factor-beta signaling in cardiovascular homeostasis, repair, and disease. His work spans pulmonary vascular disease, cardiovascular rheumatology, and rare disorders such as fibrodysplasia ossificans progressiva. Dr. Yu has translated several scientific discoveries into therapeutics, including contributions to sotatercept for pulmonary arterial hypertension and the clinical repositioning of saracatinib for fibrodysplasia ossificans progressiva. He has published over 120 peer-reviewed studies and has been elected to the American Society for Clinical Investigation.

About Steven Hays, MD
Steven Hays, MD, is Medical Director of the UCSF Advanced Lung Disease and Lung Transplant Program and Professor of Medicine at the University of California, San Francisco. Under his leadership, the program has grown to be one of the nation's largest transplant centers while consistently achieving superior outcomes, receiving INTERLINK's Chairman's Award for Transplant Excellence for three consecutive years. Dr. Hays brings deep clinical expertise across the full spectrum of advanced lung disease, including cystic fibrosis, alpha-1 antitrypsin deficiency, interstitial lung disease, and emphysema. A dedicated clinical investigator, Dr. Hays has served as principal investigator on NIH-funded, industry-sponsored, and investigator-initiated trials. His research portfolio spans lung transplant immunology, chronic lung allograft dysfunction, infectious disease, and transplant digital health. He has authored more than 110 peer-reviewed publications and has been an invited speaker at the American Thoracic Society, the International Society of Heart and Lung Transplantation, and the American Society of Transplantation, among others. He is a Fellow of the American College of Chest Physicians, and a member of the American Thoracic Society and the International Society of Heart and Lung Transplantation, where he serves on the Pulmonary and Infectious Disease Councils. He is a recipient of the American Thoracic Society's Outstanding Clinician Award (California Chapter) and a member of the prestigious UCSF Council of Master Clinicians.

About LAM-001

LAM-001 is a proprietary, investigational, once-daily inhaled formulation of rapamycin, also known as sirolimus. LAM-001's potential as a disease-modifying agent in PH stems from its ability to inhibit mTOR-mediated pulmonary arterial smooth muscle cell proliferation, to limit endothelial cell dysfunction, and to suppress inflammatory signaling, leading to improvement in pulmonary vascular remodeling. The mTOR pathway has been shown to be activated in pulmonary arteries of patients with PH, and mTOR inhibition with rapamycin has been shown to reverse smooth muscle cell hyperproliferation and to attenuate pulmonary vascular remodeling and cardiopulmonary dysfunction in multiple published nonclinical models. Additionally, in published non-clinical studies, hyperactive mTOR signaling has been shown to promote fibroblast activation, myofibroblast differentiation, and extracellular matrix deposition in injured or inflamed lung tissue, and mTOR inhibition has been shown to exert direct antifibrotic

activity, suppressing profibrotic cytokine signaling, reducing collagen accumulation, and attenuating parenchymal fibrosis. These effects are particularly relevant in PH-ILD, where vascular remodeling and progressive fibrosis evolve in parallel and amplify pulmonary vascular load. LAM-001 is designed to enhance pulmonary delivery and to reduce systemic exposure of rapamycin, offering a promising, potentially disease-modifying, therapy for multiple pulmonary diseases.

LAM-001 is currently being studied in multiple indications including PH-ILD, a serious and progressive condition affecting an estimated 200,000 patients between the U.S. and Europe. Based on compelling Phase 2a data presented at the American Thoracic Society (ATS) in May 2026, the company has advanced LAM-001 into a Phase 2b PH-ILD trial and data is anticipated in the first quarter of 2028. LAM-001 is also being evaluated in a Phase 2 study in bronchiolitis obliterans syndrome post lung transplant (BOS), a serious complication with an estimated prevalence of ~30K patients between the U.S. and Europe by 2032. The trial is fully enrolled, and data is anticipated in the first quarter of 2027. In late 2026, the company also plans to initiate a Phase 2 study of LAM-001 in sarcoidosis-associated pulmonary hypertension (SAPH), a severe complication of pulmonary sarcoidosis with no approved therapy, that affects an estimated ~60K patients in the U.S. and Europe.

About Quince Therapeutics, Inc.

Quince Therapeutics, Inc. is committed to transforming the lives of patients facing serious, underserved diseases by developing disease-modifying therapies to treat their conditions. The company is currently developing LAM-001 for the treatment of PH-ILD, BOS, and SAPH. A Phase 2a study in PH patients has been completed, a Phase 2 clinical study in BOS patients is ongoing, a Phase 2b study in PH-ILD is ongoing, and a Phase 2 study in SAPH is anticipated to begin in late 2026. By pioneering innovative approaches, the company aims to offer new hope and improved quality of life to patients worldwide.

Forward-Looking Statements

Statements in this news release contain “forward-looking statements” within the meaning of the Private Securities Litigation Reform Act of 1995 as contained in Section 27A of the Securities Act of 1933, as amended, and Section 21E of the Securities Exchange Act of 1934, as amended, which are subject to the “safe harbor” created by those sections. All statements, other than statements of historical facts, may be forward-looking statements. Forward-looking statements contained in this news release may be identified by the use of words such as “believe,” “may,” “should,” “expect,” “anticipate,” “plan,” “estimated,” “potential,” “intend,” “will,” “can,” “seek,” “designed,” “aims,” or other similar words. Examples of forward-looking statements include, among others, statements relating to the design and potential benefits of LAM-001, including as a disease-modifying therapy for pulmonary disease; anticipated regulatory and development processes and timelines, including the expected timing to initiate the planned Phase 2 trial of LAM-001 in SAPH, the expected timing for data readouts from the ongoing Phase 2 trial of LAM-001 in BOS and the ongoing Phase 2b trial of LAM-001 in PH-ILD; the Phase 2a data of LAM-001 in PAH and PH-ILD supporting continued development of LAM-001 in PH-ILD and the potential benefit across exercise capacity, pulmonary hemodynamics, cardiac stress and lung function; observed improvements in 6MWD and PVR in the Phase 2a trial potentially suggesting broader effects on cardiopulmonary physiology; the estimated patient populations in the U.S. and Europe for PH-ILD, BOS and SAPH; and the potential advantages of mTOR inhibitors in PH-ILD, BOS and SAPH. Forward-looking statements are based on Quince’s current expectations and are subject to inherent uncertainties, risks, and assumptions that are difficult to predict and could cause actual results to differ materially from what the company expects. Further, certain forward-looking statements are based on assumptions as to future events that may not prove to be accurate. Factors that could cause actual results to differ include, but are not limited to: clinical results may not be indicative of results that may be observed in the future, including in larger populations; potential safety and other complications related to LAM-001; the ability to obtain and maintain regulatory approval; competition in the company’s industry; the scope, progress and expansion of developing LAM-001; the size and growth of the market(s) therefor and the rate and degree of market acceptance thereof vis-à-vis alternative therapies; the company’s ability to attract or retain key management, members of the board of directors and other personnel; the company’s ability to fund its operations and clinical development plans, including its anticipated cash runway; the impacts of general macroeconomic and geopolitical conditions on the company’s business and financial position; and other risks and uncertainties described in the section titled “Risk Factors” in the company’s Quarterly Report on Form 10-Q, filed with the Securities and Exchange Commission (SEC) on August 14, 2026 and other reports as filed with the SEC. Forward-looking statements contained in this news release are made as of this date, and Quince undertakes no duty to update such information except as required under applicable law.

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