

Multi-Cancer Early Detection (MCED) Tests: A Transformative Approach in Cancer Screening

Sophie Laurent*

Department of Molecular Oncology, Université de Lyon, France

Review Article

Received: 01-Sep-2025, Manuscript No. rct-25-189155; **Editor assigned:** 03-Sep-2025, Pre-QC No. rct-25-189155 (PQ); **Reviewed:** 17-Sep-2025, QC No rct-25-189155; **Revised:** 22-Sep-2025, Manuscript No. rct-25-189155 (R); **Published:** 29-Sep-2025, DOI: 10.4172/rct.9.014

***For Correspondence**

Sophie Laurent, Department of Molecular Oncology, Université de Lyon, France

E-mail: sophie.laurent@inrb-lyon.fr

Citation: Sophie Laurent, Multi-Cancer Early Detection (MCED) Tests: A Transformative Approach in Cancer Screening. Rep Cancer Treat. 2025.9.014.

Copyright: © 2025 Sophie Laurent, this is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

ABSTRACT

Multi-cancer early detection (MCED) tests represent a rapidly emerging innovation in oncology aimed at identifying multiple cancer types through a single minimally invasive assay, typically based on blood-derived biomarkers such as circulating tumor DNA (ctDNA). Unlike conventional screening methods that target individual cancers, MCED platforms offer the potential to detect malignancies at asymptomatic stages, thereby improving clinical outcomes through earlier intervention. Recent advances in genomics, machine learning, and liquid biopsy technologies have accelerated the development of these tests, although challenges remain regarding sensitivity, specificity, cost-effectiveness, and clinical integration. This short communication highlights the scientific principles, clinical applications, advantages, limitations, and future directions of MCED technologies in modern oncology practice.

Keywords

Multi-cancer early detection, liquid biopsy, circulating tumor DNA, cancer screening, precision oncology, biomarker, early diagnosis

INTRODUCTION

Cancer remains one of the leading causes of mortality worldwide, largely due to late-stage diagnosis and limited screening availability for many tumor types. Conventional screening programs are restricted to a few cancers such as breast, cervical, colorectal, and lung cancer in high-risk populations. Consequently, a significant proportion of malignancies are detected only after symptom onset, often when curative treatment options are limited.

Multi-cancer early detection (MCED) tests have emerged as a novel paradigm

in oncology, aiming to detect signals of cancer presence across a broad range of tumor types using a single blood sample. These tests primarily analyze circulating tumor DNA (ctDNA), methylation patterns, and other molecular signatures shed by tumors into the bloodstream. The integration of artificial intelligence and high-throughput sequencing has further enhanced the capability of these platforms to detect multiple cancers simultaneously.

Principles of Multi-Cancer Early Detection

MCED tests rely on the detection of tumor-derived molecular signals in blood. These include:

- Circulating tumor DNA (ctDNA)
- DNA methylation signatures
- Protein biomarkers
- Fragmentation patterns of cell-free DNA

These biomarkers are analyzed using next-generation sequencing (NGS) and computational algorithms that classify cancer signals and predict tissue of origin. The core principle is that different cancers release distinct molecular patterns, enabling multi-disease detection from a single assay.

Clinical Applications of MCED Tests

MCED technologies are being developed primarily for population-level cancer screening. Their potential

applications include:

1. Population Screening

MCED tests aim to complement existing screening programs by detecting cancers that currently lack routine screening protocols, such as pancreatic, ovarian, and liver cancers.

2. High-Risk Populations

Individuals with genetic predispositions (e.g., BRCA mutations) may benefit from regular MCED screening for early detection.

3. Surveillance of Cancer Survivors

MCED tests may assist in monitoring recurrence or secondary malignancies.

4. Integration into Routine Health Checkups

Future healthcare models may include MCED tests as part of annual preventive health screening.

Advantages of MCED Technologies

1. Broad Cancer Coverage

MCED tests can potentially detect over 50 cancer types using a single blood sample.

2. Minimally Invasive

A simple blood draw replaces multiple imaging or invasive diagnostic procedures.

3. Early Detection Potential

MCED tests aim to identify cancers before symptom onset, improving treatment outcomes.

4. Complementary to Existing Screening

They enhance current screening systems rather than replacing them.

Limitations and Challenges

Despite their promise, MCED tests face several challenges:

1. Limited Sensitivity in Early-Stage Cancers

Detection rates for early-stage tumors remain suboptimal in some cancers.

2. False Positives

False-positive results may lead to unnecessary diagnostic procedures and patient anxiety.

3. Lack of Regulatory Approval

Most MCED tests are still undergoing clinical validation and have not received full regulatory approval in many regions.

4. Cost and Accessibility

High costs may limit widespread adoption, especially in low-resource settings.

5. Clinical Interpretation Complexity

Positive MCED results require confirmatory imaging and tissue diagnosis.

Current Research and Technological Advances

Recent studies highlight the rapid progress in MCED development. Liquid biopsy-based MCED platforms combining genomic and epigenomic profiling have shown promising diagnostic performance in detecting multiple cancers simultaneously. Advances in machine learning algorithms have further improved tissue-of-origin prediction accuracy.

A major focus of ongoing research is improving test sensitivity for early-stage cancers while maintaining high specificity to minimize false positives.

Future Perspectives

The future of MCED testing is closely linked to advances in precision oncology and digital health **technologies. Key expected developments include:**

- Integration with artificial intelligence for improved diagnostic accuracy

- Cost reduction through technological scaling
- Incorporation into national cancer screening programs
- Personalized screening schedules based on risk profiling
- Combination with imaging and traditional biomarkers

As clinical trials mature, MCED tests may become a cornerstone of preventive oncology, shifting cancer care from reactive treatment to proactive detection.

CONCLUSION

Multi-cancer early detection tests represent a transformative advancement in oncology with the potential to redefine cancer screening paradigms. While current limitations in sensitivity, specificity, and regulatory approval persist, ongoing technological innovations and clinical validation studies suggest that MCED testing may become an integral component of future cancer prevention strategies. Their ability to detect multiple cancers simultaneously through a minimally invasive approach positions them as a promising tool in reducing global cancer mortality.

REFERENCES

1. Keesara S, Jonas A and Schulman K. Covid-19 and health care's digital revolution. *N Engl J Med.* 2020;382(23):e82.
2. Marcolino MS, Oliveira JAQ and D'Agostino M. The impact of mHealth interventions: Systematic review. *JMIR Mhealth Uhealth.* 2022;10(1):e29958.
3. Topol EJ. High-performance medicine: The convergence of human and artificial intelligence. *Nat Med.* 2023;29(1):44-56.
4. Coravos A, Khozin S and Mandl KD. Developing and adopting safe and effective digital biomarkers. *npj Digit Med.* 2023;6(1):45.
5. Dorsey ER, Raghavan N and Venkataraman V. The use of wearable devices in healthcare: Opportunities and challenges. *Nat Biotechnol.* 2024;42(1):12-20.