



Quince Therapeutics Appoints Recognized Leaders in Pulmonary Medicine to Scientific Advisory Board

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SOUTH SAN FRANCISCO, Calif., June 30, 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 the formation of a Scientific Advisory Board (SAB) of leading clinicians to support the advancement of LAM-001, an inhaled formulation of rapamycin (mTOR inhibitor) designed to enhance pulmonary delivery and reduce systemic exposure.

Comprised of internationally recognized experts in pulmonary medicine, the SAB will be instrumental in progressing the development of LAM-001 across multiple pulmonary indications including pulmonary hypertension associated with interstitial lung disease (PH-ILD), bronchiolitis obliterans syndrome post lung transplant (BOS), and sarcoidosis associated pulmonary hypertension (SAPH).

"I am honored to serve as the Chairman of Quince's Scientific Advisory Board to help guide the development of LAM-001 across a range of pulmonary conditions where evidence strongly suggests it has a direct effect on the underlying disease pathophysiology," commented Paul Yu, M.D., Ph.D., Director, Cardiovascular Research Center, Massachusetts General Hospital. "On behalf of the SAB, we are encouraged by the clinically relevant improvement seen in measures of lung function in patients with functional class III pulmonary hypertension treated with LAM-001. With continued development, we believe LAM-001 has the potential to provide patients with a much needed treatment option that, importantly, may be utilized in conjunction with currently available therapies to achieve better health outcomes."

Scientific Advisory Board members:

Paul Yu, M.D., Ph.D. (Chairman of SAB)

Dr. Paul Yu 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 BMP and TGF- β 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 (FOP). He has published over 120 peer-reviewed studies and has been elected to the American Society for Clinical Investigation.

Aaron Waxman, M.D., Ph.D.

Dr. Aaron Waxman is Director of the Pulmonary Vascular Disease Program at Brigham and Women's Hospital and Associate 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.

Steven Nathan, M.D., F.C.C.P.

Dr. Steven Nathan is Schar Chair of the Advanced Lung Disease and Lung Transplant Program, Inova Health System and Professor of Education at the University of Virginia. The author of more than 500 publications and co-editor of two books on idiopathic pulmonary fibrosis, Dr. Nathan is internationally recognized for his expertise in advanced lung diseases. Dr. Nathan is a reviewer for multiple journals and is on the editorial board for the journal, Thorax. He has served on multiple committees, including U.S. Food and Drug Administration advisory boards as well as steering committees for clinical trials in IPF and pulmonary hypertension, where he has also served as chair. Dr. Nathan is the recipient of the 2023 American College of Chest Physicians' 2023 College Medalist Award, and is a member of several professional medical associations, including the American Thoracic Society, the American College of Chest Physicians, and the International Society for Heart and Lung Transplantation.

Steve Hays, M.D.

Dr. Steven R. Hays 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 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 and a member of the prestigious UCSF Council of Master Clinicians.

Robert Baughman, M.D.

Dr. Baughman is Professor Emeritus at the University of Cincinnati. Along with his longtime collaborator Dr. Elyse Lower, he has performed numerous investigator initiated trials of novel treatments for sarcoidosis, including methotrexate, thalidomide, leflunomide, infliximab, rituximab, repository corticotropin injection, pirfenidone, roflumilast, and armodafinil. For sarcoidosis associated pulmonary hypertension, he has conducted trials on bosentan, iloprost, riociguat, tadalafil, selexipag, and inhaled nitric oxide. His publications include over 350 original papers and over 70 review articles and/or book chapters. Additionally, Dr. Baughman has edited multiple books on sarcoidosis and interstitial lung disease. A recognized leader in his field, Dr. Baughman led a multi-national registry of sarcoidosis associated pulmonary hypertension (ReSAPH) and is past president of the World Association of Sarcoidosis and Other Granulomatous Disorders (WASOG).

About LAM-001

LAM-001 is a proprietary, investigational, once-daily inhaled formulation of sirolimus, also known as rapamycin. LAM-001's potential as a disease-modifying agent in pulmonary hypertension stems from its ability to inhibit mTOR-mediated pulmonary arterial smooth muscle cell proliferation. The mTOR pathway has been shown to be activated in the pulmonary arterial smooth muscle cells of patients with pulmonary hypertension, and mTOR inhibition with rapamycin has been shown to reverse smooth muscle cell hyperproliferation and attenuate pulmonary vascular remodeling and cardiopulmonary dysfunction in multiple nonclinical models. Additionally, mTOR signaling promotes fibroblast activation, myofibroblast differentiation, and extracellular matrix deposition in injured or inflamed lung tissue, and mTOR inhibition has been shown to exert direct anti-fibrotic activity, reducing collagen accumulation, suppressing profibrotic cytokine signaling, 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 reduce systemic exposure, offering a promising potential disease-modifying therapy for pulmonary disease.

LAM-001 is currently being studied in multiple indications including PH-ILD, a serious and progressive condition affecting an estimated ~86K patients in the U.S. and ~120K in Europe. Based on compelling Phase 2a data presented at the American Thoracic Society (ATS) in May 2026, the company is advancing LAM-001 into a Phase 2b trial in PH-ILD, with initiation planned for mid-2026 and data anticipated in the first quarter of 2028. LAM-001 is also being evaluated in a Phase 2 study in BOS, a serious complication following lung transplantation affecting an estimated ~17K patients in the U.S. and ~11K in Europe. The trial is fully enrolled, with data anticipated in the first quarter of 2027. In late 2026, the company also plans to initiate a Phase 2 study of LAM-001 in SAPH, a severe complication of sarcoidosis with no approved therapy affecting 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 anticipated to begin in mid-2026, 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," "aim," "anticipate," "plan," "believe," "estimated," "potential," "intend," "will," "can," "seek," or other similar words. Examples of forward-looking statements include, among others, statements relating to expectations that the SAB will be instrumental in progressing the development of LAM-001 across multiple pulmonary indications; the design and potential benefits of LAM-001, including as a disease-modifying therapy for pulmonary disease and as a treatment option that may be utilized in conjunction with currently available therapies to achieve better health outcomes; anticipated regulatory and development processes and timelines, including the expected timing to initiate the planned Phase 2b trial of LAM-001 in PH-ILD and 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 planned 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. 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 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 Annual Report on Form 10-K, filed with the Securities and Exchange Commission (SEC) on April 10, 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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