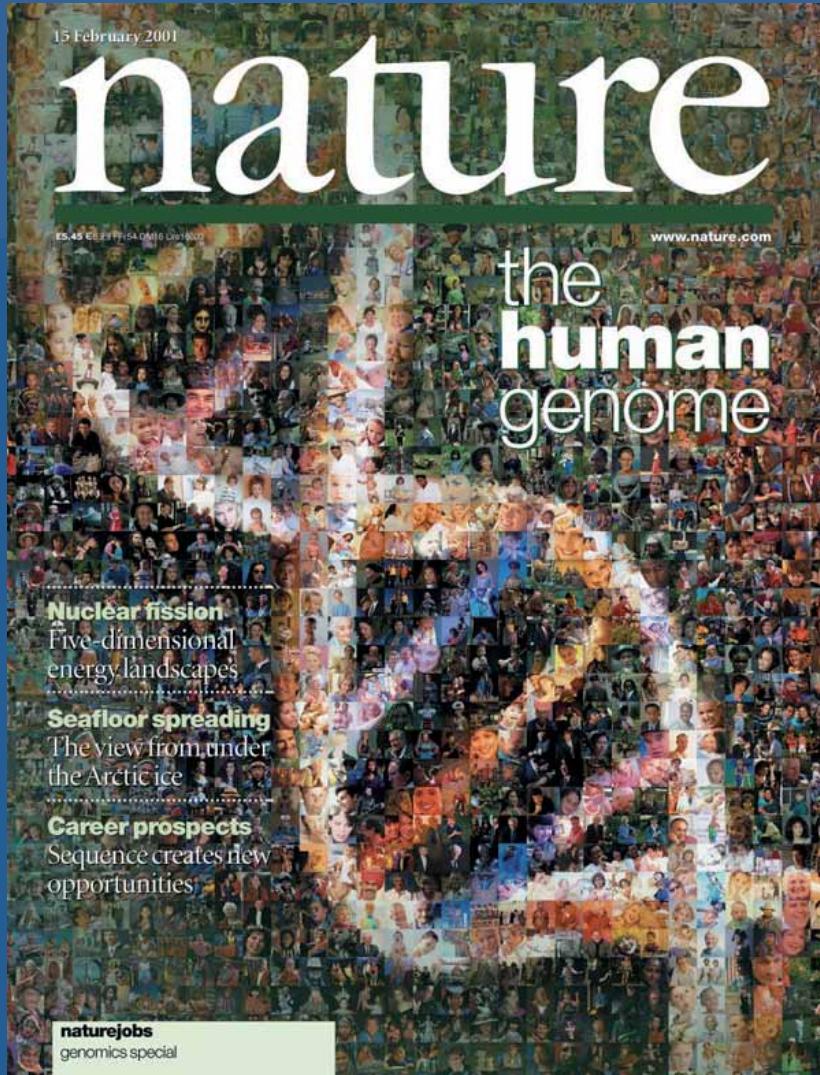


From the Genome Project to –omics Medicine: a key Component in personalising Therapy

Hans Lehrach

Max Planck Institute für Molekulare Genetik, Berlin
Dahlem Zentrum für Genomforschung und
medizinische Systembiologie
Alacris Theranostics GmbH

2001: Eine "Arbeitsversion" des menschlichen Genoms wurde im Juni 2000 fertiggestellt



Erste Analyse publiziert in 2001

2006: Technischer Fortschritt in der Sequenziertechnologie “short read” Sequenzen

Ein Lauf auf den neuen Sequenziermaschinen generiert ungefähr so viel Information wie eine Million Läufe auf den Maschinen, die wir vor etwas mehr als zehn Jahren verwendeten, um das erste menschliche Genom zu sequenzieren



1 menschliches Genom/ 13 Jahre

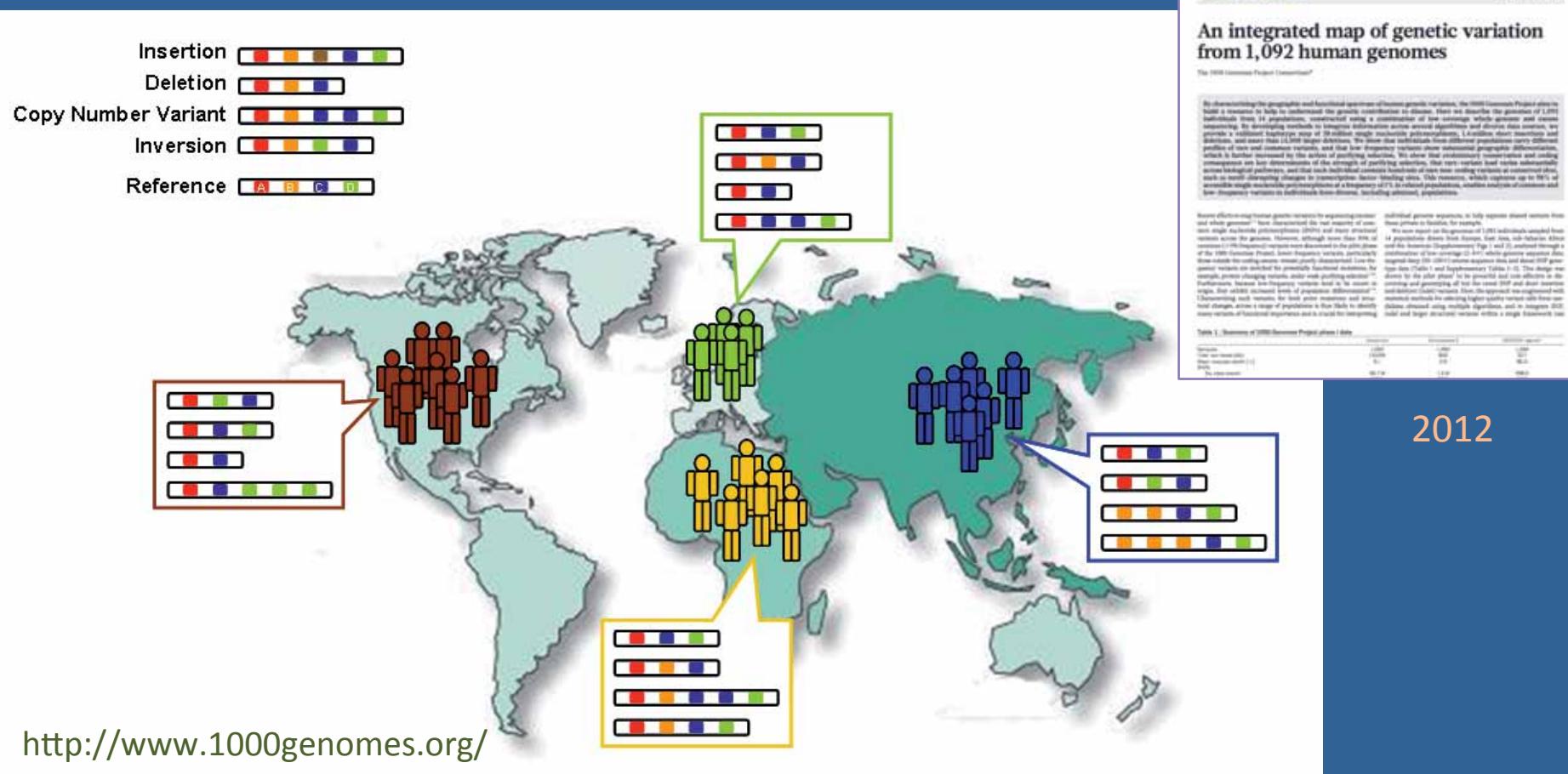


1 menschliches Genom/ Tag

Internationales 1,000 Genomprojekt

Das Ziel: die genetische Variation zwischen Menschen zu vergleichen

Die DNA Sequenzen zweier Menschen sind sehr ähnlich- sie unterscheiden sich nur durch eine Base in 1000



ICGC Cancer Genome Projects

Committed projects to date: [64](#)

Sort by: Project

Bladder Cancer

United States

Bladder cancer

China

Blood Cancer

United States

Blood cancer

China

Blood cancer

South Korea

Bone Cancer

United Kingdom

Brain Cancer

Canada

Brain Cancer

United States

Brain cancer

China

Malignant Lymphoma

Germany

Pediatric Brain Tumors

Germany

Prostate Cancer

Germany

Breast Cancer

United Kingdom

Breast Cancer

United States

Breast cancer

China

Breast cancer

South Korea

Cervical Cancer

United States

Chronic Lymphocytic Leukemia

Spain

Chronic Myeloid Disorders

United Kingdom

Colon Cancer

United States

Colorectal cancer

China

ICGC Goal: To obtain a comprehensive description of genomic, transcriptomic and epigenomic changes in 50 different tumor types and/or subtypes which are of clinical and societal importance across the globe.

[Read more »](#)

[Launch Data Portal »](#)

[Apply for Access to Controlled Data »](#)

Announcements

27/March/2013 - The ICGC Data Coordination Center (DCC) is pleased to announce the ICGC data portal data release 12 (<http://dcc.icgc.org>).

ICGC data release 12 in total comprises data from 7,774 cancer genomes.

Updates

Currently, the ICGC has received commitments from funding organizations in Asia, Australia, Europe, North America and South America for 53 project teams in 15 jurisdictions to study over 25,000 tumor genomes. Projects that are currently funded are examining tumors affecting the bladder, blood, bone, brain, breast, cervix, colon, head and neck, kidney, liver, lung, oral cavity, ovary, pancreas, prostate, rectum, skin, soft tissues, stomach, thyroid and

Personal Genome Projekt

- George Church von der Harvard Medical School plant, das Genom von 100,000 Freiwilligen zu sequenzieren.
- Zusammen mit der persönlichen und medizinischen Information wird das die Kenntnisse über die genetischen Grundlagen menschlicher Krankheiten und Eigenschaftenvergrößern



<http://www.personalgenomes.org/>



Medizin sollte jeden Patienten individuell optimal behandeln

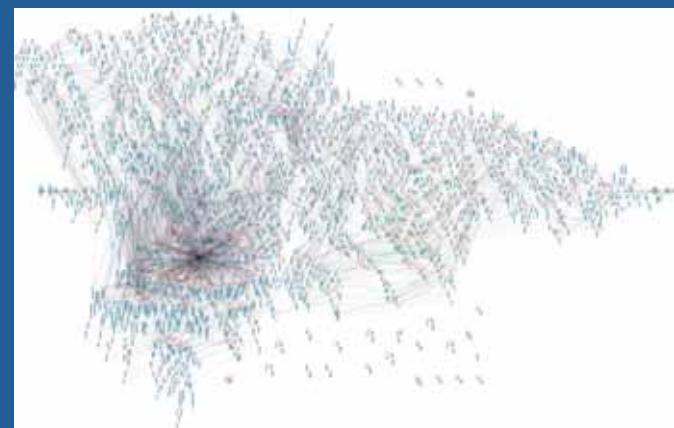
Surgery: individual

Millions of data points
Direct consequences



Drug therapy: at best stratified

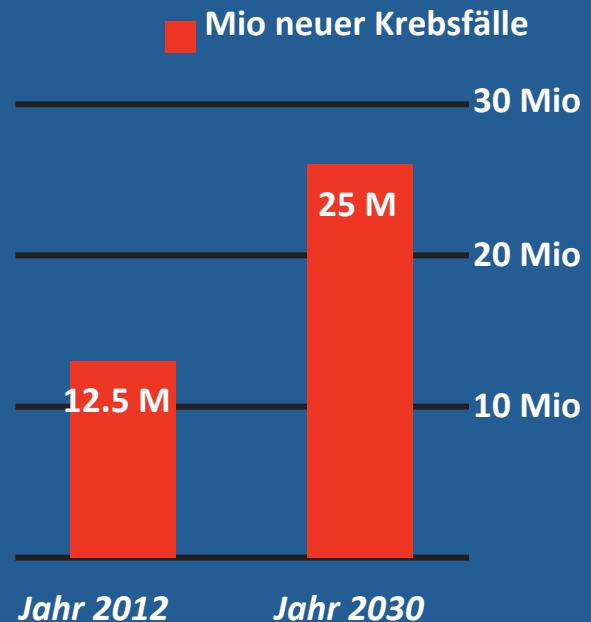
One or few Biomarkers Prediction
based on statistics



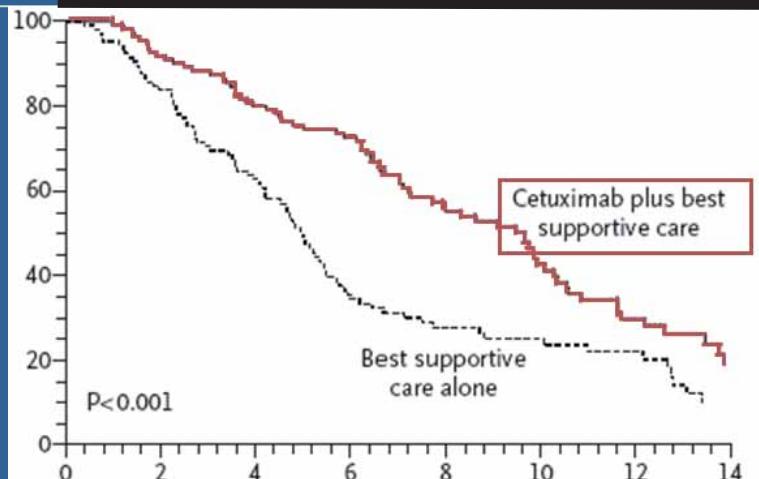


Krebs ein kritisches Problem für die individualisierte Medizin

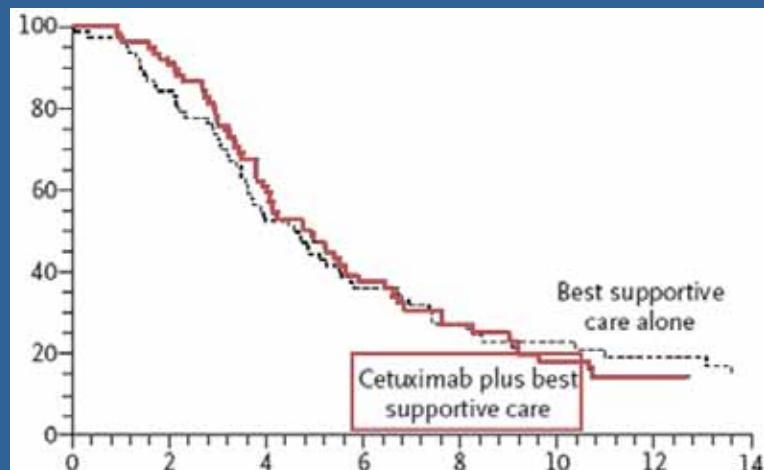
- Die Heilungsraten für viele Krebsformen sind nur wenig verändert
- Viele Patienten sprechen nicht auf die Therapie, die sie bekommen, an



Anti-tumor Medikamente wirken oft nur bei einem (kleinen) Teil der Patienten



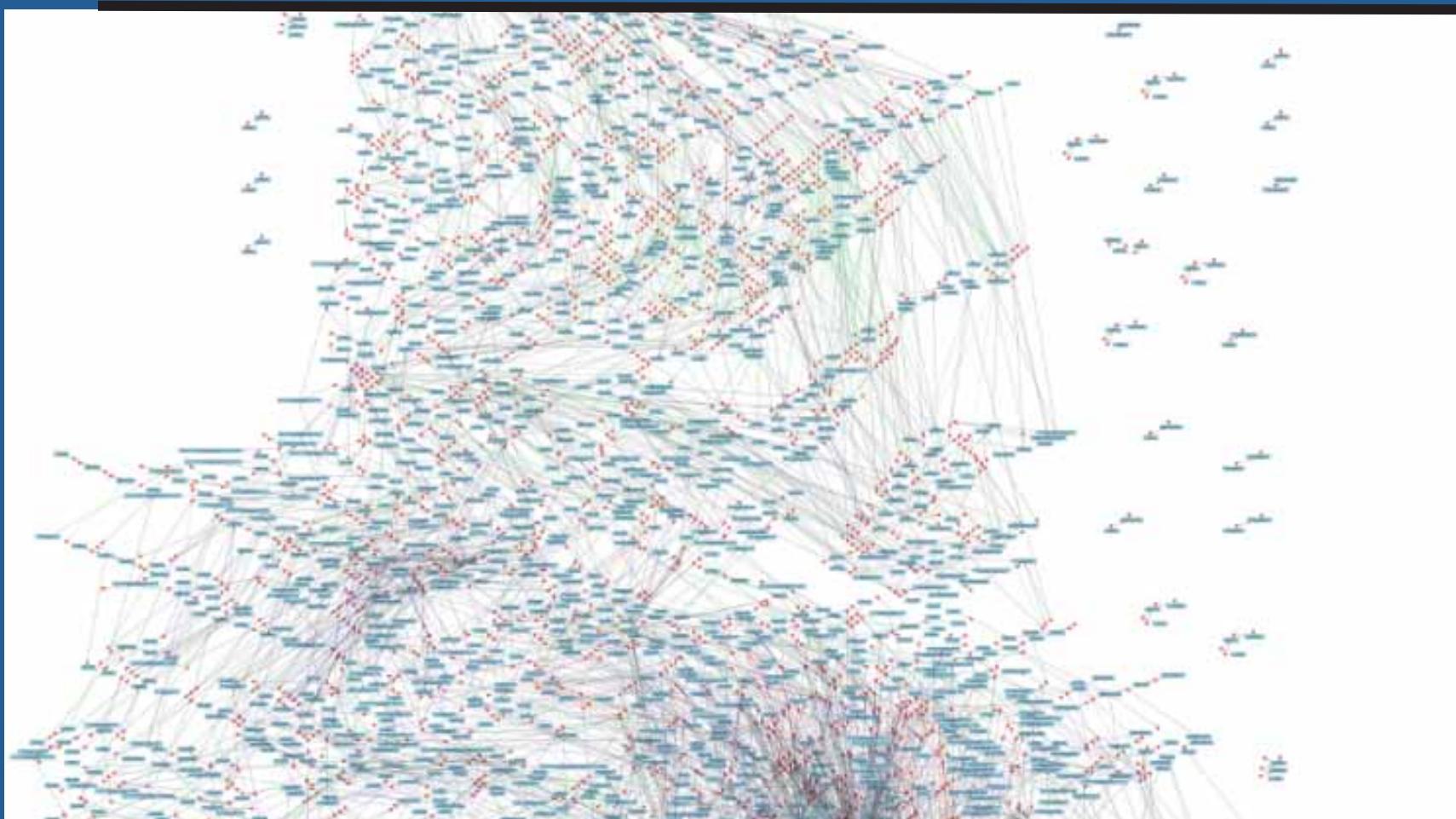
Many colon cancer patients with tumors with K-ras wild type will respond positively to treatment with EGFR receptor antagonists e.g. Cetuximab



Patients with tumors with K-ras mutations do not: a 30000 Euro treatment will show no effect on the tumor but will cause significant side effects on the patient

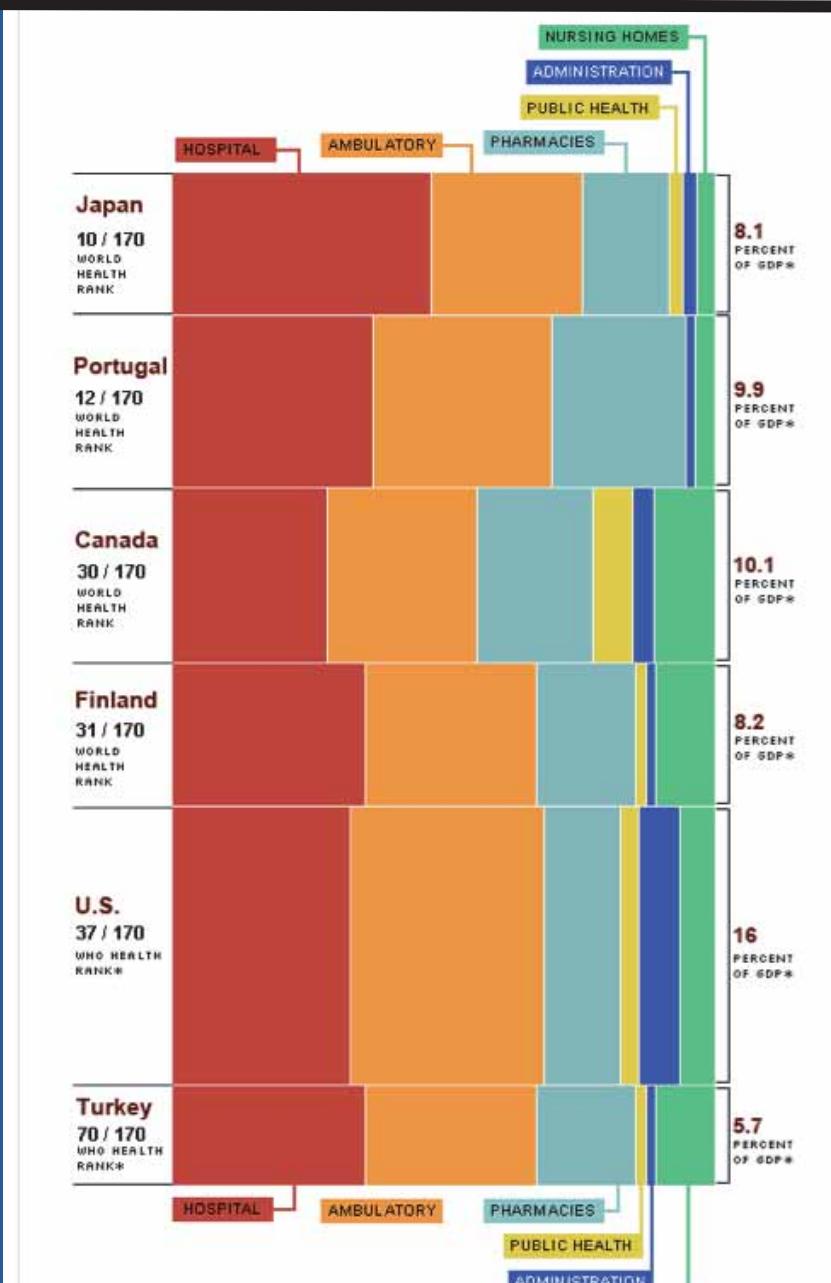
Zalcberg et al., NEJM 2008

Medizin ist komplex (selbst die Prozesse in einer einzelnen Zelle sind komplex)



Und jeder Mensch besteht aus ungefähr 100 Billionen interagierenden Zellen

teuer



... und gefährlich

Medical Errors - Third Leading Cause of Death in the US in 2000

The report apparently showed there were

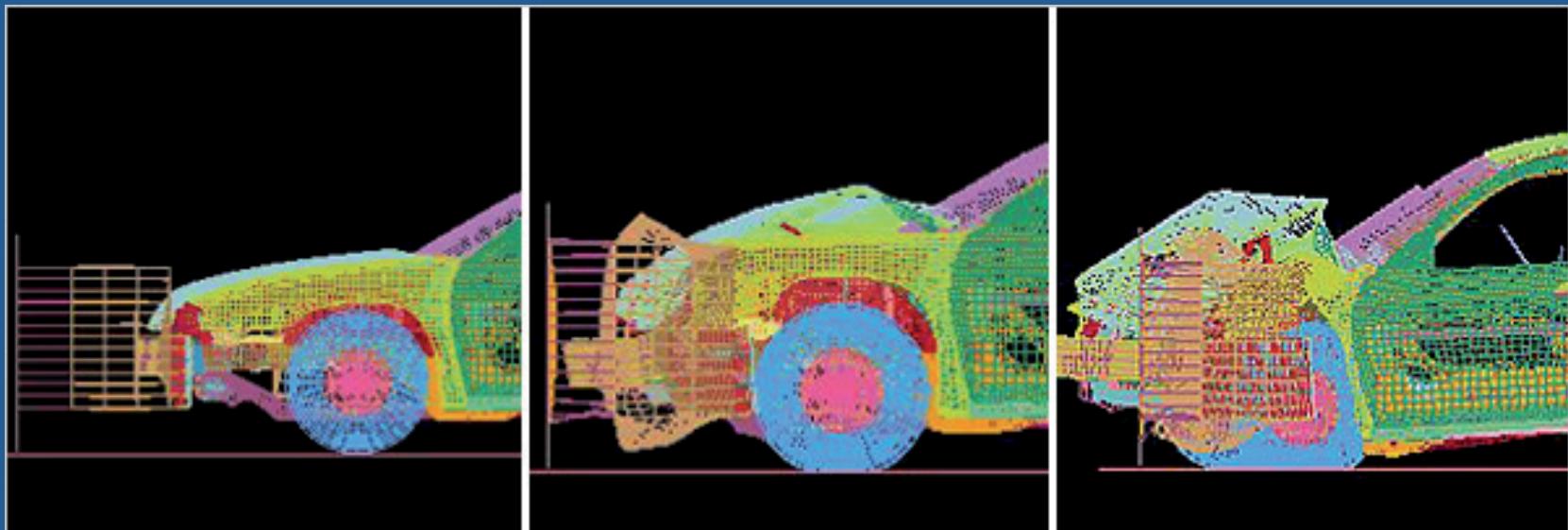
- 2,000 deaths/year from unnecessary surgery;
- 7000 deaths/year from medication errors in hospitals;
- 20,000 deaths/year from other errors in hospitals;
- 80,000 deaths/year from infections in hospitals;
- 106,000 deaths/year from non-error, adverse effects of medications.
- 225,000 (total) deaths per year in the US

=> drug reactions were the most common cause !

Barbara Starfield - JAMA Vol 284, No 4, July 26th 2000

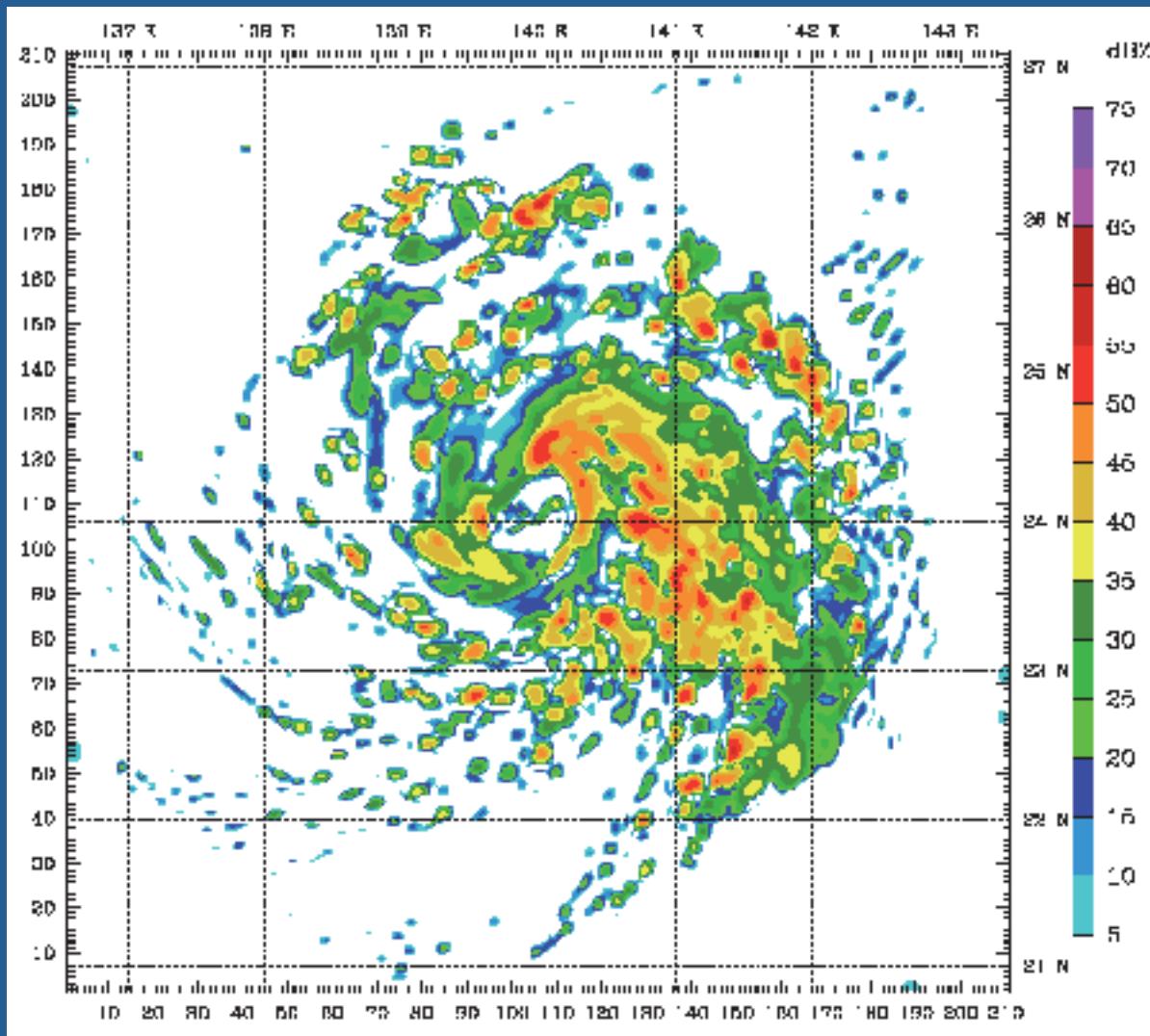
Wenn wir sonst komplexe, teure und/oder gefährliche Probleme zu lösen haben, sammeln wir möglichst viele Daten, und modellieren das Problem (und mögliche Lösungsmöglichkeiten) im Computer, um die im Einzelfall optimale Problemlösung zu identifizieren

Wir verwenden Computermodelle, um neue Autos zu entwickeln



- automobile crash tests entirely by computer simulation.
- These days >> at least 3 to 5 million equations.
- Computer simulations to be safer than actual prototype car crash tests, because actual crash tests cannot simulate every possible situation. Robert Lange, General Motors executive director for vehicle structure and safety integration
- (from : Car crash tests and Computer Simulations, Michael Pines,
- <http://seriousaccidents.com/blog/car-technology-accident-blog/car-crash-tests-and-computer-simulation/>)

Bei der Wettervorhersage



Typhoon Mawar 2005

WRF: The weather research forecasting model

Und in der Pilotenausbildung



Während wir in der Medizin noch immer ausschliesslich statistische Korrelationen verwenden, ähnlich dem Stand der Wettervorhersage vor 150 Jahren

Though barometers were increasingly in circulation since 1670, it wasn't until about 1860 that a famous English sea captain, Admiral Fitzroy, former Captain of Darwin's exploration ship "the Beagle", provided a detailed weather forecasting script that he attached to his several barometer inventions. Fitzroy is credited with the beginning of the first published weather forecasting in the world and detailing the meaning behind the rise and fall of air pressure.

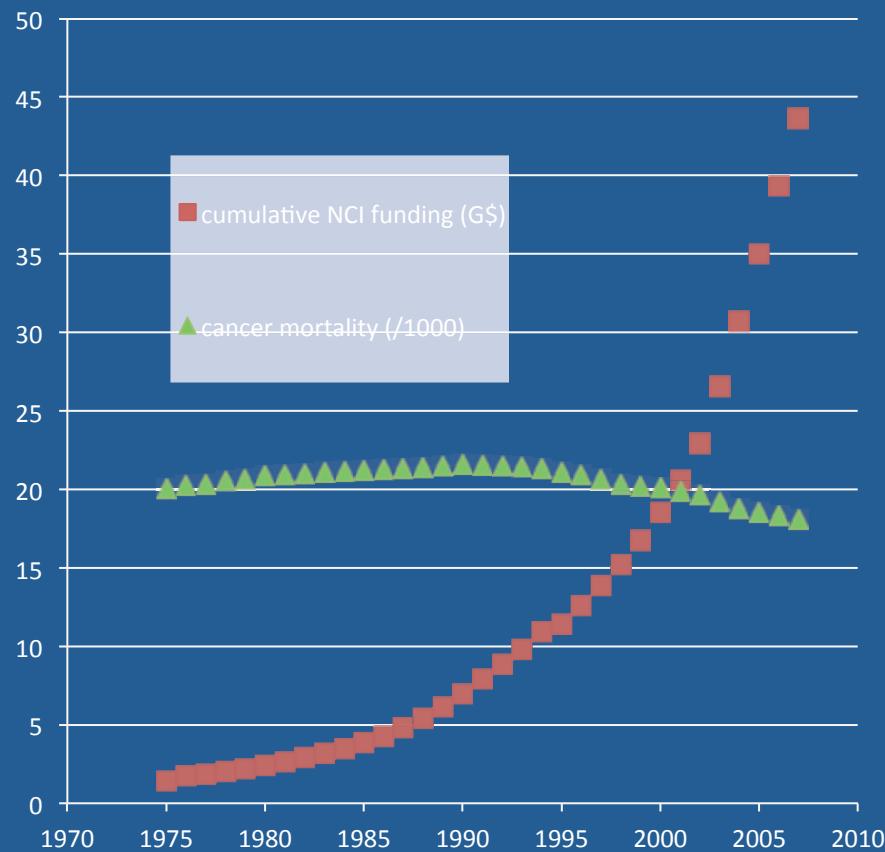
Als die Verfahren, die wir jetzt in der Medizin verwenden, in der ‚cutting edge‘ Wettervorhersage verwendet wurden, war DAS die Karte von Berlin



Berlin Karte Stahlstich 1860

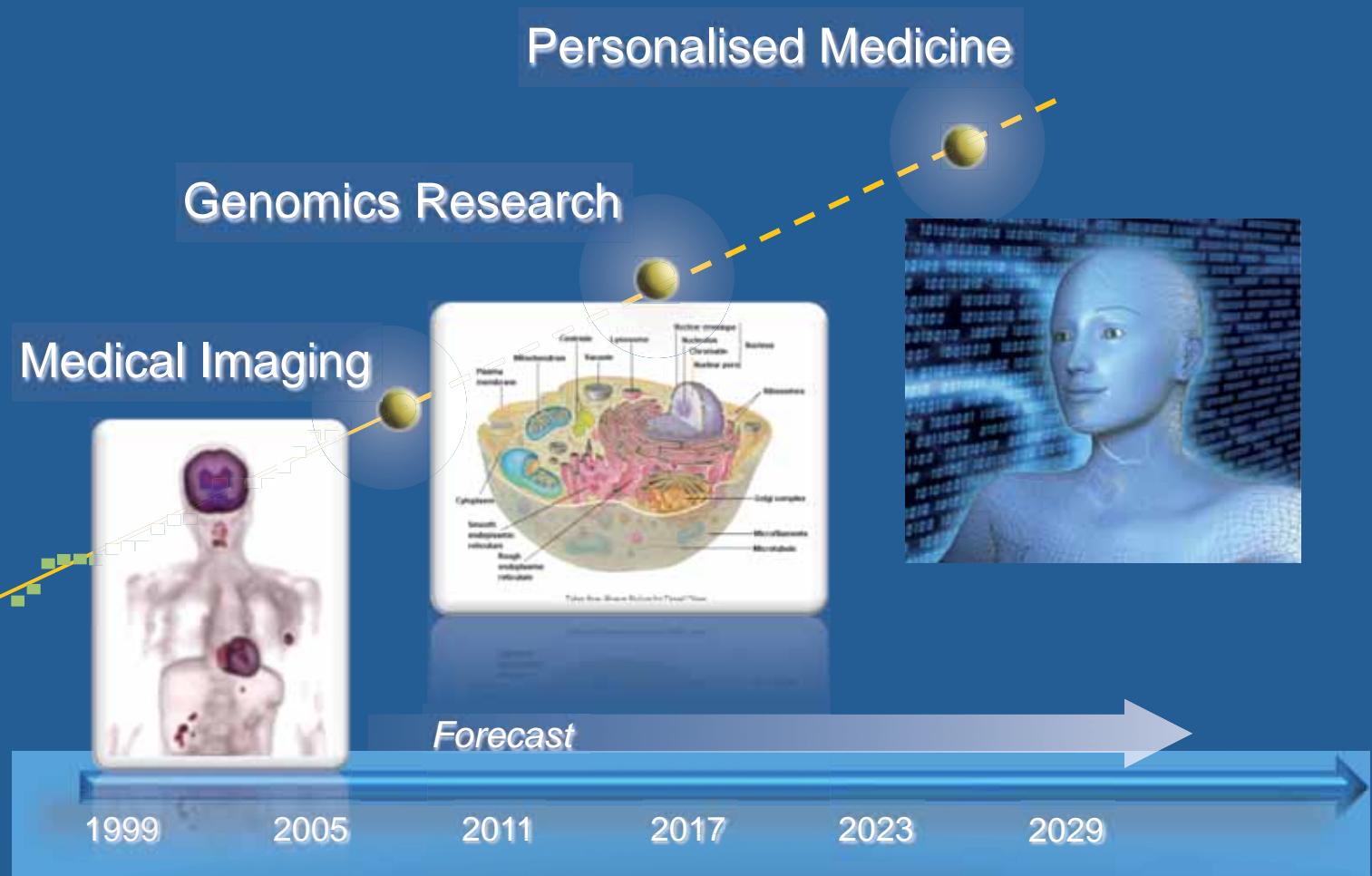
Wir wissen viel über die grundlegenden Mechanismen der Zellen

(sollten wir auch, nach Billionenausgaben allein für die Krebsforschung in den letzten 40 Jahren)



Wir haben die Rechenkapazitäten

1 ZFlops
100 EFlops
10 EFlops
1 EFlops
100 PFlops
10 PFlops
1 PFlops
100 TFlops
10 TFlops
1 TFlops
100 GFlops
10 GFlops
1 GFlops
100 MFlops



*PetaFlop systems of today are
the client and handheld systems 10 years later*

Source: www.top500.org

Was hat gefehlt?



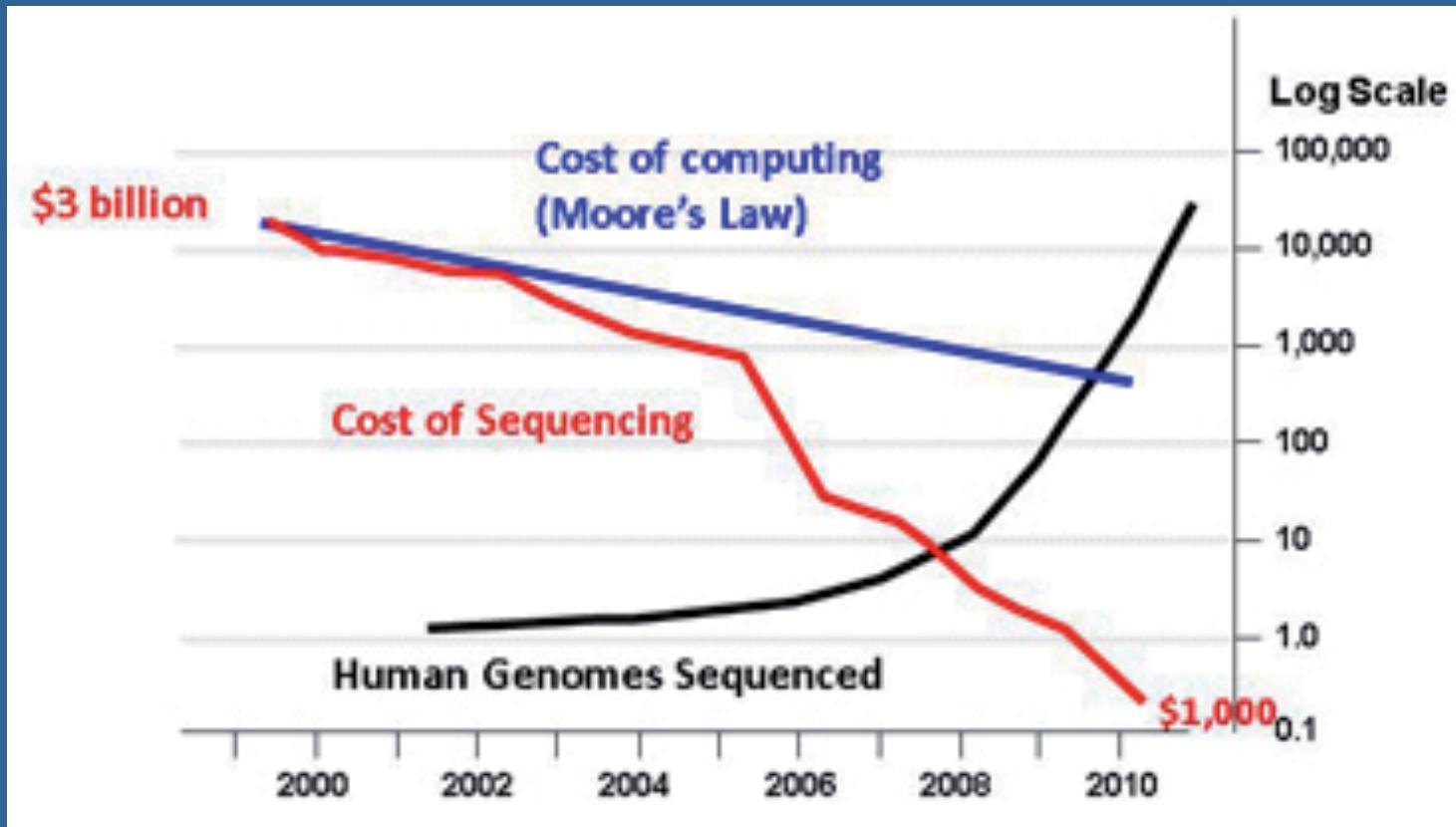
(Illumina Hiseq etc)



(Sciex 5600 etc)

(ohne Millionen von Datenpunkten würde man auch keine vernünftige Wettervorhersage durch Wettermodelle bekommen)

Die Sequenziertechnologie entwickelt sich weit rascher als die Rechenleistung



Das Modellierungssystem

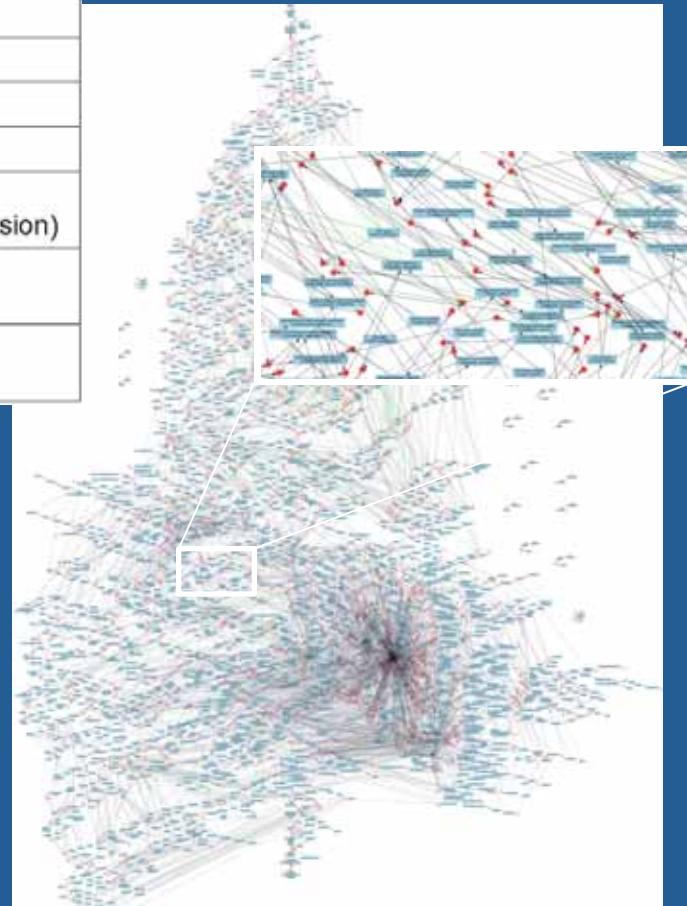


Network components	
Reactions	4439
Kinetic parameters	4853
Components	2839
Genes	572
Mutated genes	64 (5 LoF, 58 GoF, 1 fusion)
External activators (growth factors, hormones etc.)	87
Inhibitors	56 (41 drugs)

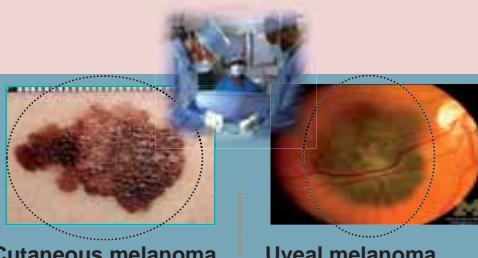
Hanahan&Weinberg, 2011

Over 40 different signaling pathways are integrated:

Cytokine signaling (e.g. CSF, IFNA, IL8), Death receptor signaling (e.g. Fas, TNFa, TRAIL), DNA repair / cell cycle, Ephrin signaling, GPCR/Hormone signaling (e.g. Glucagon, Insulin, Testosterone), Hedgehog signaling, Notch signaling, several RTK signaling (e.g. bNGF, EGF, FGF, IGF, PDGF, VEGF), TGFb signaling (e.g. BMP, TGFb) and Wnt signaling.



Series of metastatic melanomas of various origins:
(cutaneous, acral, mucosal, uveal)



Cancer specimens from CCCC - Berlin
(Charité Comprehensive Cancer Center)

MPIMG
Berlin

Next Generation Sequencing

Transcriptome & Genome Alterations



Charité-Universitätsmedizin

Cell culture

Xenografts

Experimental Pharmacology Oncology GmbH

Validations

Treatment

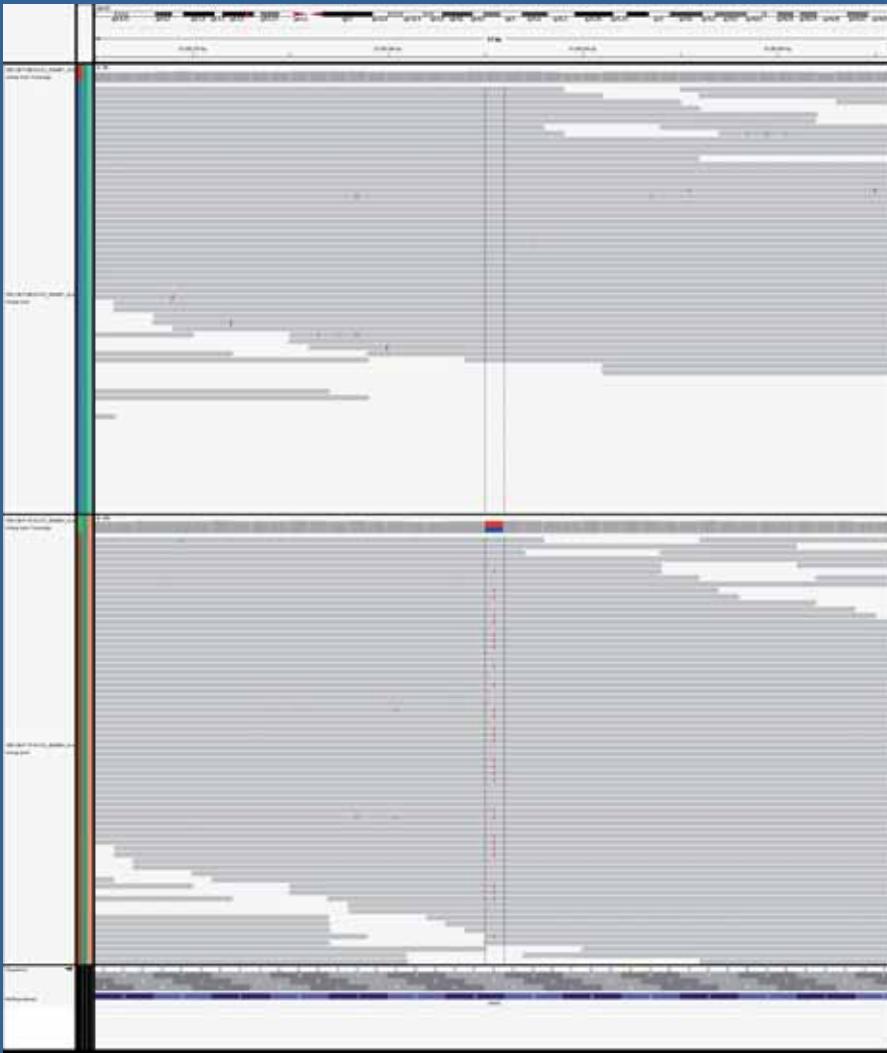
Proteome

Tumor Modeling

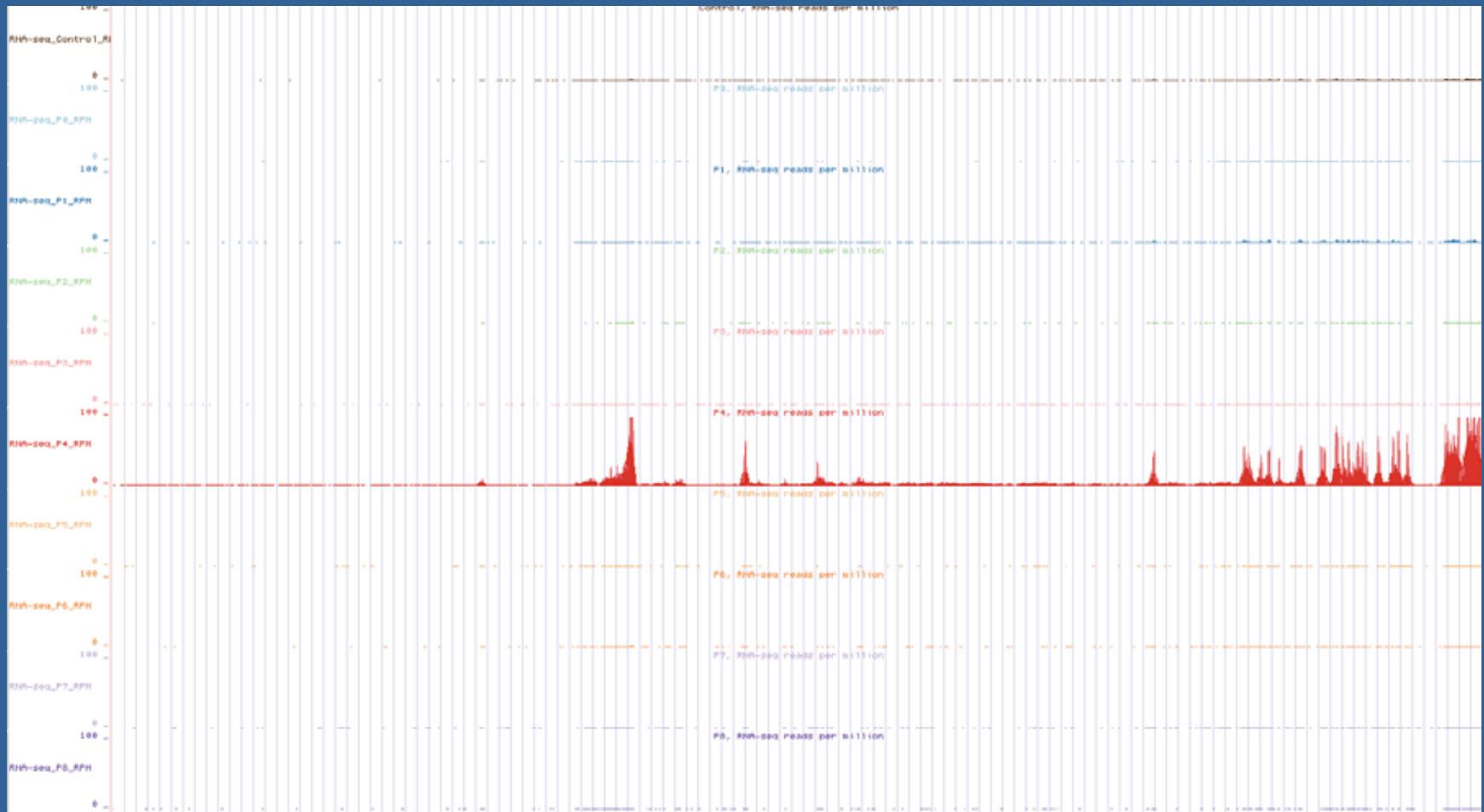


Drug optimization

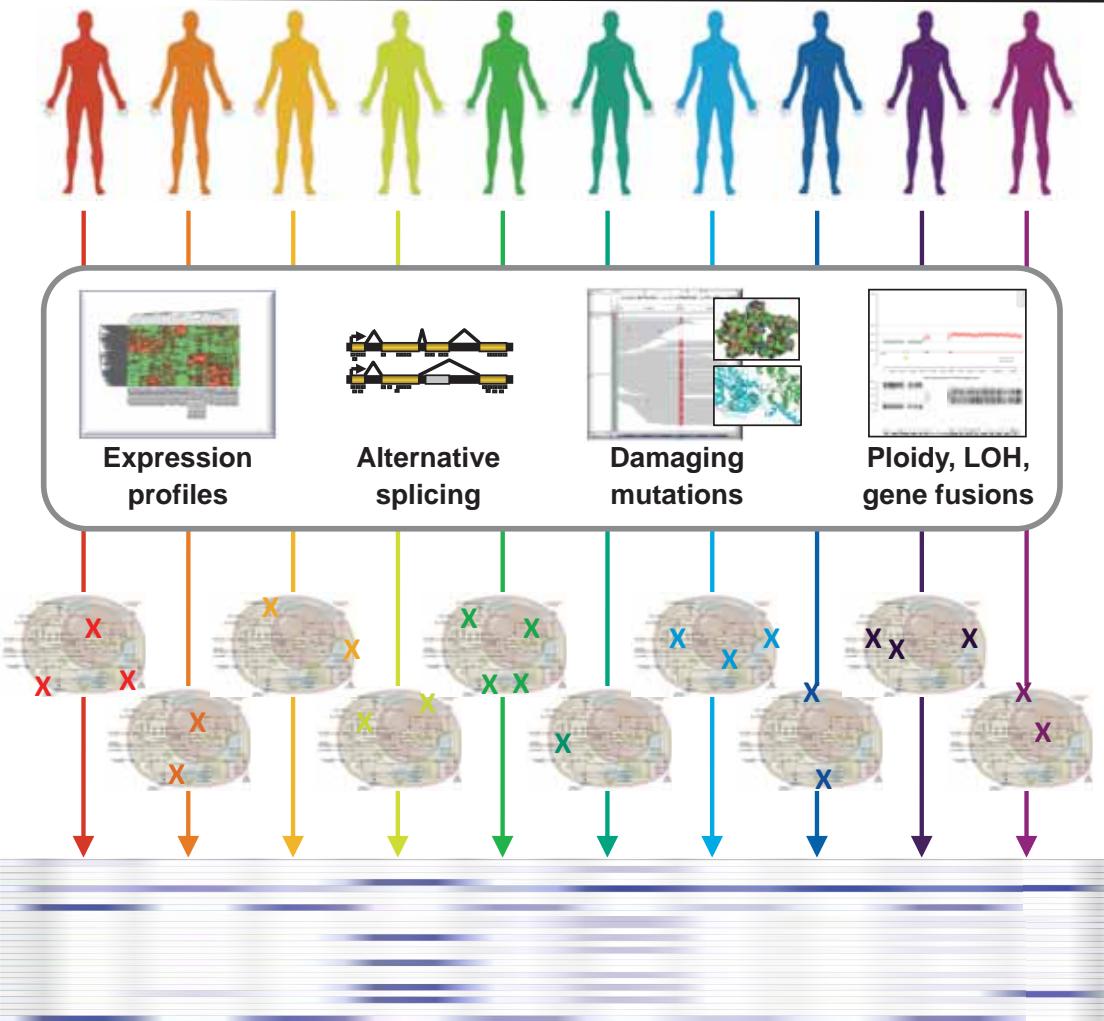
Beispiel Mutation



Abnormale Genexpression



From patient specific –omics data to patient specific drug response prediction



Patients tumors and controls

High-throughput NGS data

- 20,120 genes monitored for each patient by RNA-seq
- Mutations and gene fusions monitored for each patient by exome sequencing and WGS
- 3D protein modeling of damaging mutations

Patient-specific cancer models

(currently 2,982 components, steadily updated with new genes, new mutations, new gene fusions, new reactions and new drugs)

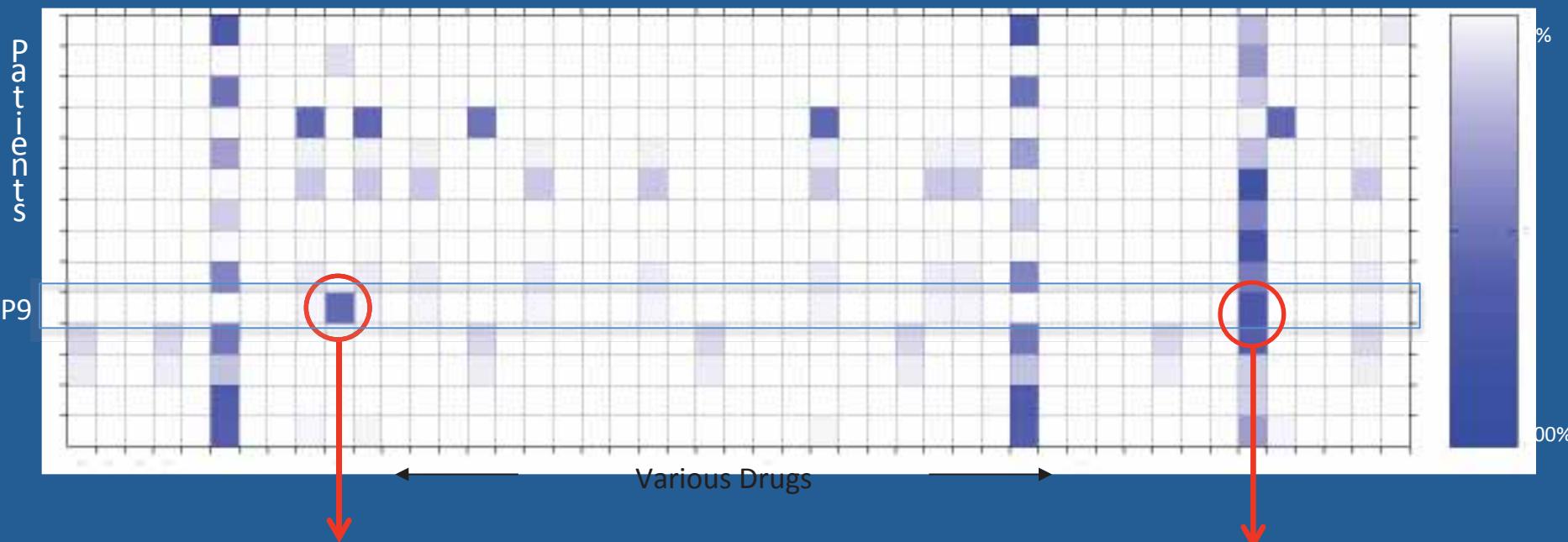
- activated oncogenes (e.g. RTKs, MYC)
- inactivated tumor suppressors (e.g. p53, CDKN2A)
- altered components of metabolic or signaling pathways

Patient-specific drug responses → treatment options

Klinische Validierung

metastatic malignant melanoma patients
primarily received SOC (Fotemustin, ILP, SIRT)

Predicted effect on
tumor growth

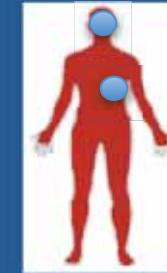
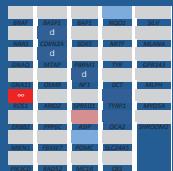


Drug used to treat rheumatoid arthritis
has been used for cancer patient
treatment: patient is stable since
4/2012!!!

Prediction of effective but
non-approved drug

Anpassung der Therapie nach einem Rückfall

Deep analysis of relapse after treatment

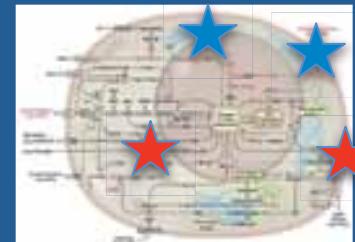


Analysis new metastasis

Induction of new events
Tumor evolved

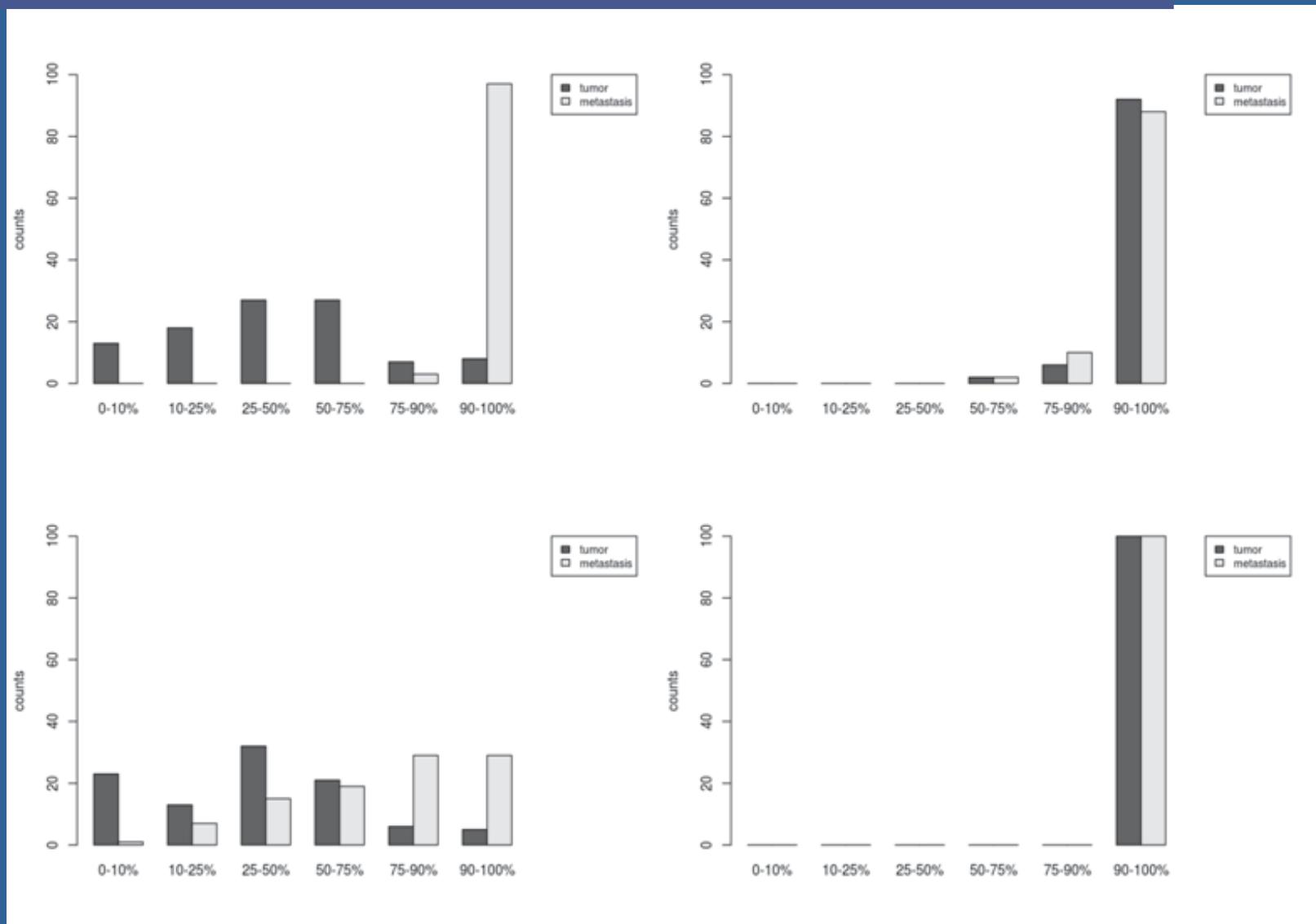


POSTN metastatic



SGK3 kinase
Tumor growth

Korrekte Voraussage : Sensitive Lebermetastase/insensitive Brustmetastase



Proof of concept project for (pre-)clinical application

primary tumor, metastasis, normal tissue
from 60 patients are characterised

- RNASeq
- whole genome
- Exome
- methylome
- mouse xenograft
- CTC, cancer cell lines
- serum free DNA



Systems Biology Modelling
of Colon Cancer and
Biomarker Discovery

Members

Pharmaceutical Industry
AstraZeneca
Bayer Pharma
Boehringer-Ingelheim
Eli Lilly
Janssen Pharmaceutica
Merck
Pfizer
Roche

Academia & Clinics
MPI Molecular Genetics
Uppsala University
Universite Paris-Sud
Charite Berlin
Medical Univers. of Graz
Technical Univers. Dresden
Vall d'Hebron Inst. Oncology,
Barcelona

SME's

Alacris Theranostics GmbH
Experim. Pharmakologie
& Onkologie Berlin
International Prevention
Research Institute
GABO:mi

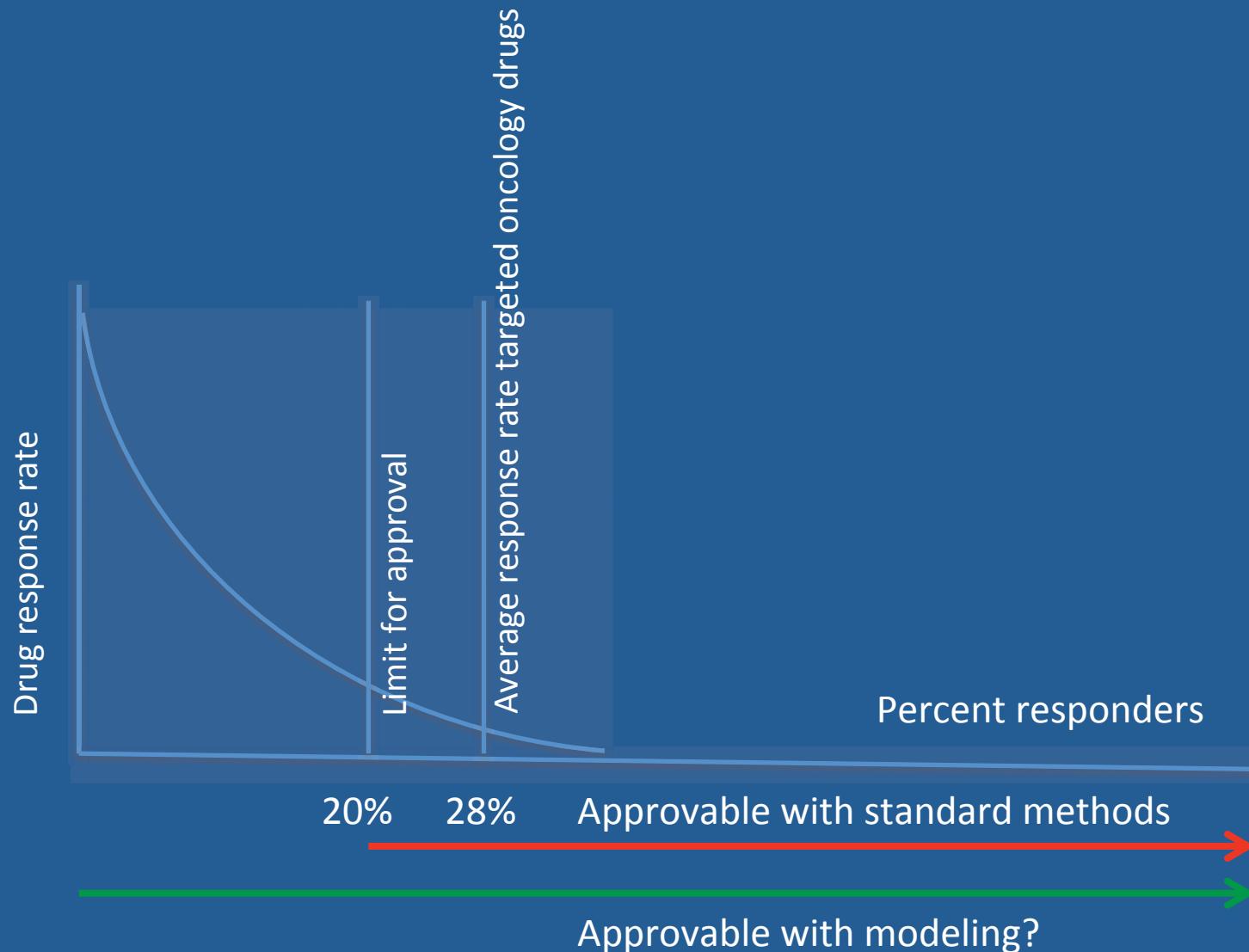
The Truly Staggering Cost Of Inventing New Drugs

Research Spending per New Drug

Company	Number of drugs approved	R&D Spending Per Drug (\$Mil)	Total R&D Spending 1997-2011 (\$Mil)
AstraZeneca	5	\$11,791	\$58,955
GlaxoSmithKline	10	\$8,171	\$81,708
Sanofi	8	\$7,909	\$63,274
Roche Holding AG	11	\$7,804	\$85,841
Pfizer Inc.	14	\$7,727	\$108,178
Johnson & Johnson	15	\$5,886	\$88,285
Eli Lilly & Co.	11	\$4,577	\$50,347
Abbott Laboratories	8	\$4,496	\$35,970
Merck & Co Inc	16	\$4,210	\$67,360
Bristol-Myers Squibb Co.	11	\$4,152	\$45,675
Novartis AG	21	\$3,983	\$83,646
Amgen Inc.	9	\$3,692	\$33,229

10? Facher Anstieg der Medikamente in der Onkologie

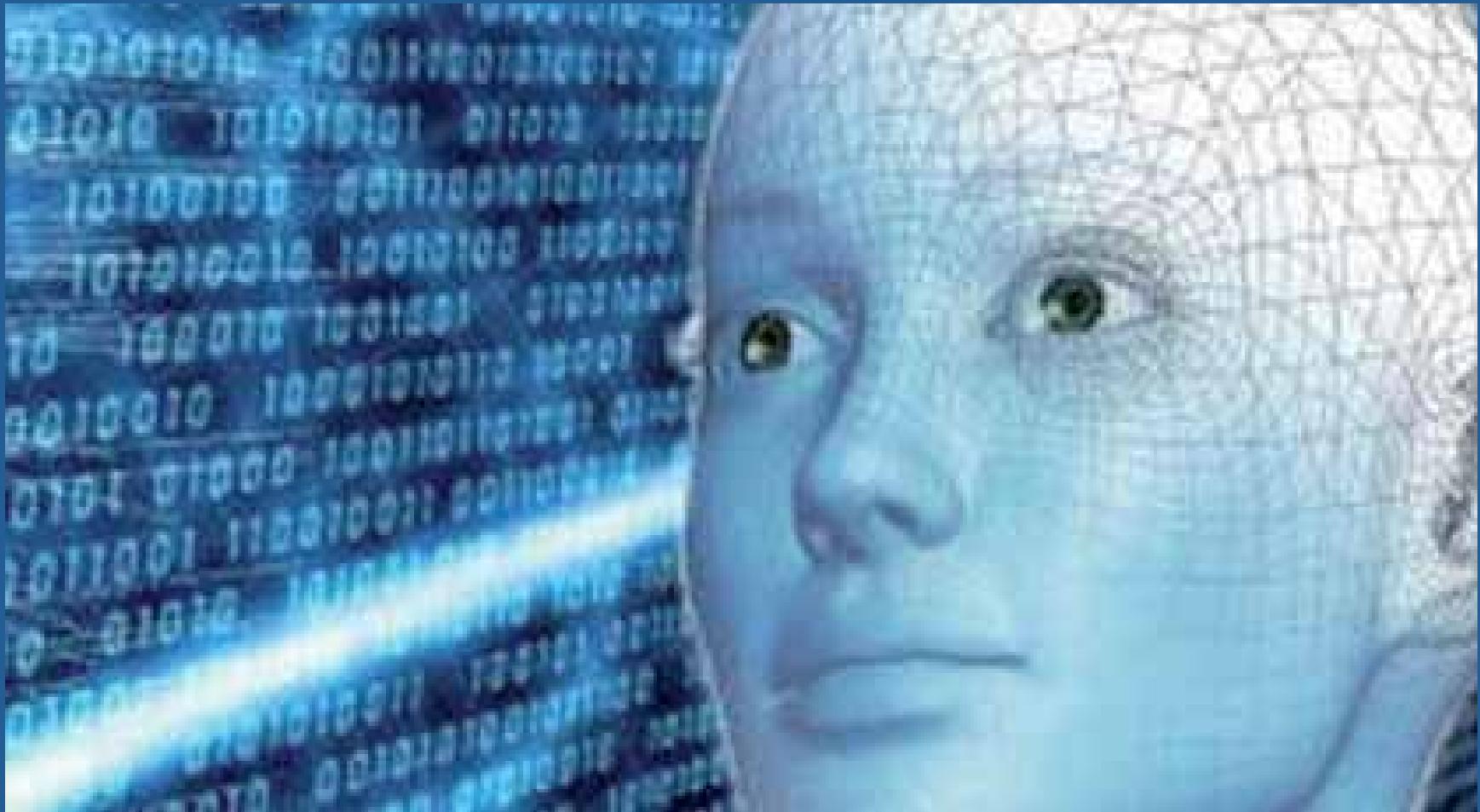
- Response rate



Ziele einer Virtualisierung der Medikamentenentwicklung

- Ten fold increase in drugs to market/reduction in risk per drug
- Ten to hundred fold decrease in the size of clinical trials (10x fold responders, 10x statistical power?)
- Ten to hundred fold decrease in costs per drug with similar market potential (molecular definition instead of disease area)
- 2/3 decrease in development times (car industry): doubling of patent protected sales period?

Der virtuelle Patient

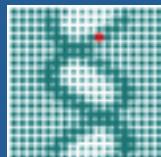


„Computermodelle des individuellen Patienten helfen dem Arzt, die optimale Therapie für jeden einzelnen Patienten zu identifizieren

und ermöglichen der pharmazeutische Industrie, weit mehr neue Medikamente in einem Bruchteil der Zeit und zu einem Bruchteil der Kosten zu entwickeln

- Revolutionen können genau so leicht in Dahlem wie in Silicon Valley beginnen
 - (aber es scheint VIEL leichter, sie in Silicon Valley, Shanghai etc finanziert zu bekommen)

Acknowledgements-



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www.molgen.mpg.de

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Dr. Christoph Wierling



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und Forschung



www.alacris.de

Dr. Bodo Lange
D. Alexander Kühn



www.charite.de

Prof. Dr. Peter Schlag
Prof. Dr. Ulrich Keilholz
Prof Dr. Reinhold Schäfer



www.itfom.eu