

GLOBAL LEADERS IN GENOMIC MEDICINE

January 8-9, 2014

National Academy of Sciences Building

2101 Constitution Avenue, NW

Washington, DC 20001

New initiative for the implementation of Genomic Medicine in Japan

- 1) Office of Healthcare Policy, Cabinet Secretariat
- 2) Center for Integrative Medical Science, RIKEN
- 3) The Institute of Medical Science, The University of Tokyo

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Structure of the Headquarters of Healthcare Policy

provisional translation

Advice of Policy Issues

Advisors on Health and Medical Strategy
consist of superior expertise belonging to pharmaceutical and medical equipment industry, and medical institution, etc.
advise the HHP on :
• Promotion of implementation of the Health and Medical Strategy
• Promotion of industrialization , etc.

Advisors on Health and Medical Strategy

Headquarters of Healthcare Policy (HHP)

Director-General of HHP : Prime Minister
Vice Director-General of HHP : Chief Cabinet Secretary
Members of HHP : Ministers of State other than Prime Minister and Chief Cabinet Secretary

< functions >

- Promotion of the implementation of the Health and Medical Strategy
- The headquarters of medical R&D (“Japanese version of NIH”)
The HHP shall
 - develop a comprehensive plan for promotion of medical R&D.
 - integrate medical R&D budget requests of relevant ministries.

Technical Advice

Special Committee on Medical Research and Development
consists of superior researchers in a medical field.
advises the HHP on scientific matters required for development of a comprehensive plan for promotion of medical R&D.

Promotion Council for Health and Medical Strategy

Chairperson : Chief Cabinet Secretary
Acting Chairpersons : Deputy Chief Cabinet Secretaries
(belonging to the House of Representatives and the House of Councilors)
Deputy Chairperson : Director-General of the Office of Healthcare Policy
Members : Director-Generals of relevant ministries

Task Force for Global Reach of Japanese-style Medical Technology and Services
Chairperson : Director-General of the Office of Healthcare Policy
Members: Director-Generals of relevant ministries
Officer of Organization concerned

Committee of the Academia-Industry-Government Network for Drug Discovery Research
Chairperson : Director-General of the Office of Healthcare Policy
Members: Director-Generals of relevant ministries
Officer of Organization concerned

Secretariat
Office of Healthcare Policy,
Cabinet Secretariat

1. Functions of Headquarters (HQ) of Healthcare Policy

- Strategically integrating medical R&D budget requests of the government to allocate the budget upon priority projects, and developing a comprehensive plan for promotion of medical R&D early next year, the HQ shall determine prioritizing research fields and targets.
- The HQ shall establish two panels for the above purposes;
 - The panel of advisors, superior researchers in a medical field, to the HQ
The panel of advisors, superior researchers in a medical field, to the HQ is responsible for submitting an opinion about the HQ's comprehensive plan for promotion of medical R&D.
 - The panel of advisors, eminent persons from industry, government, and academia, to the HQ
The panel of advisors, eminent persons from industry, government, and academia, to the HQ is responsible for submitting an opinion about the promotion of implementation of the Health and Medical Strategy and the promotion of industrialization, etc..

2. The HQ's integration of medical R&D budget requests of the government

- The HQ shall integrate medical R&D budget requests in order strategically to concentrate the budget upon priority projects under a strong leadership of State Ministers from each ministry's budget demand forward.
- The following measures shall be taken to integrate medical R&D budget requests of relevant ministries prior to budget demands:
 - The HQ shall formulate a basic policy for the medical R&D budget demands.
 - Each ministry shall submit total rough estimate of their medical R&D budget to the cabinet secretariat in accordance with the basic policy.
 - Each ministry shall obtain consent of the cabinet secretariat to their rough estimate
- Specifically;
 - The cabinet secretariat shall adjust each ministry's estimate to a comprehensive plan for promotion of medical R&D and if necessarily require each ministry to make an amendment to their estimate.
 - Each ministry shall make an amendment to their estimate in accordance with a requirement of the cabinet secretariat and report details of amendment to the cabinet secretariat.
 - Each ministry shall submit their budget demands obtained cabinet secretariat's consent to the ministry of finance in collaboration with the cabinet secretariat.

3. The new independent administrative agency's functions; Grants and funding for medical R&D in an integrated fashion

- Instead each ministry implements, the new independent administrative agency shall centrally allocate grants to researchers/institutions in order to continue nation's R&D projects that cover phases from basic research to development of practical use without an interval.
- Promoting medical R&D more efficiently and effectively, the agency shall also implement the budget for infrastructure development (ex. a subsidiary for development of core hospital for clinical research/trial) in an integrated fashion.

4. Allocation on Special Coordination funds for the promotion of Medical R&D

- The HQ shall allocate on special coordination funds for the promotion of medical R&D across the ministries in order flexibly and efficiently to respond to advance in medical R&D projects and adoption of application for medical R&D subsidies etc..
- Special Coordination funds shall be appropriated from a part of scientific and technological innovation promotion funds (tentative name) entered in the budget of the Cabinet Office.

The new system of implementation of the Health and Medical Strategy

Headquarters of Healthcare Policy(HHP)

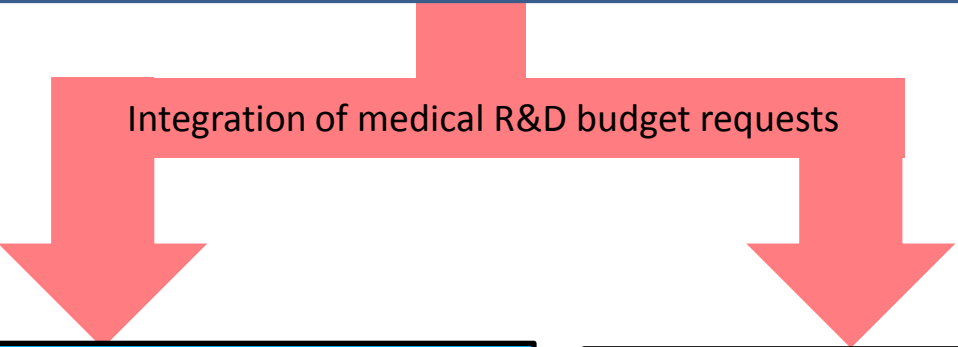
The HQ shall

- develop a comprehensive plan for promotion of medical R&D.
- integrate medical R&D budget requests of relevant ministries.
- strategically and intensively decide allocating promotional adjustment funds .

Adopt agenda based on the comprehensive plan for promotion of medical R&D

Manage and integrate both allocated grants to researchers/scientists and institutions, and funding

- ※ Integrate the budget for infrastructure development into a new agency



Researchers' bottom-up Scientific Research
Grant-in-Aid for Scientific Research (KAKENHI)

Nation's top-down scientific/clinical R&D

- The government will allocate about \100 billion for grant and funding into a new agency.
- management nation's top-down projects by Program Directors and Program Officers belonging the new agency

Intramural research
National Institutions

Smoothly transit discovered seeds

Infrastructure development

Core hospital for clinical research/trial etc.

Steadily implement the clinical research/trial based on the extra-international standard

Funds for individual Research

- ※ Universities, Institutions, Researchers/ Scientists

Measure on source of revenue for Institutions

- ※ National Center for Global Health and Medicine, RIKEN, National Institute of Advanced Industrial Science and Technology, National Institute of Infectious Diseases etc.

Implement researches based on the comprehensive plan for promotion of medical R&D

Budget Bill for Medical Research in FY 2014

1\$ = 100yen

	FY 2014	FY 2013
New Agency	121.5 billion yen (MEXT57.0、MHLW47.6、METI16.9)	101.2 billion yen (MEXT44.7、MHLW40.2、METI16.3)
		+20.3 billion yen +20.1%
Related Research Institutes	74.0 billion yen (MEXT20.0、MHLW45.5、METI8.5)	71.3 billion yen (MEXT15.5、MHLW47.6、METI8.1)
		+ 2.7 billion yen + 3.7%

MEXT: Ministry of Education, Culture, Sports, Science and Technology
 MHLW: Ministry of Health, Labor and Welfare
 METI: Ministry of Economy, Trade and Industry

Cooperation Project among Related Ministries

- For Development of New Medicine and Medical Devices**
- Medicine 25.4 billion yen
 - Medical Devices 11.2 billion yen

- For Novel Medical Technologies**
- Regenerative Medicine (iPS cells, ES cells etc.,) 15.1 billion yen
 - Genomic Medicine 7.0 billion yen

- For Clinical Study and Clinical Trial**
- 12.1 billion yen

- For Specific Diseases**
- Cancer 17.2 billion yen
 - Mental Diseases and Neurologic Diseases 7.1 billion yen
 - Emerging and Re-emerging Infectious Diseases 5.3 billion yen
 - Rare Diseases 9.3 billion yen

5. Implementation of Genomic Medicine Project

Nation's top-down funds
 FY2014 budget : \ 5,5B
 (FY2013 supplementary budget : \ 3,0 B)

Intramural funds
 FY2014 budget : \ 1,6 B
 (FY2013 supplementary budget : \ 0,8 B)

To improve medical care and health care for common diseases including cancer and lifestyle-related diseases, MEXT and MHLW cooperate for the implementation of Genomic Medicine project.
 Base on the "Health and Medical Strategy" by Japanese government in June 2013, this project promotes clinical application of genomic research findings for aiming at the return to the public quickly, in parallel with the strengthening of genomic research infrastructure.

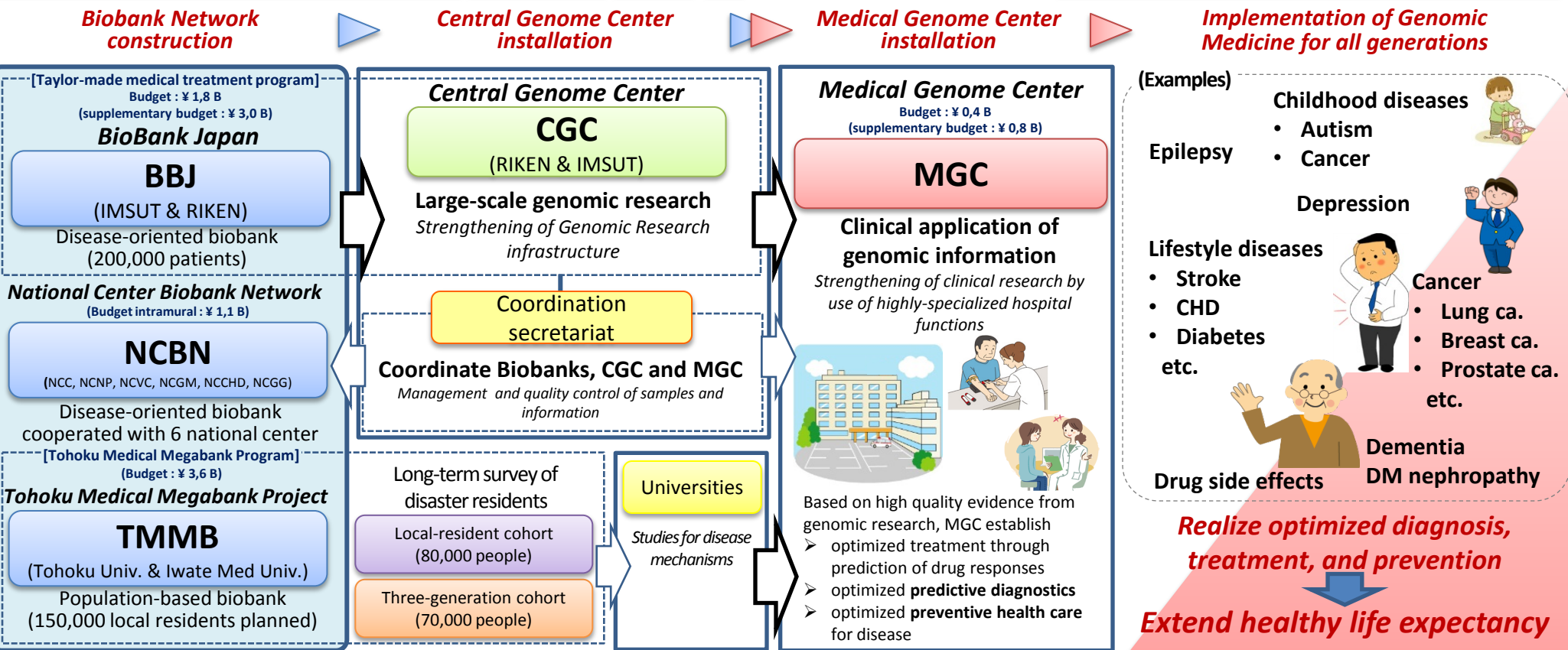
[Goals to be achieved by 2015]

- Construct biobank network
- Establish Central Genome Center (CGC) and Medical Genome Center (MGC)
- Construct Japanese reference genome sequence (Japanese RefSeq)
- Build comprehensive genomic variation DB linked to clinical phenotypes

[Goals to be achieved by 2020–30]

- Improvements for the medical and health care of lifestyle diseases
- Establish predictive diagnostics for cancer incidence and severe ADR
- Start clinical genomic research for depression and dementia
- Clarify the pathogenesis of neurological diseases, etc.

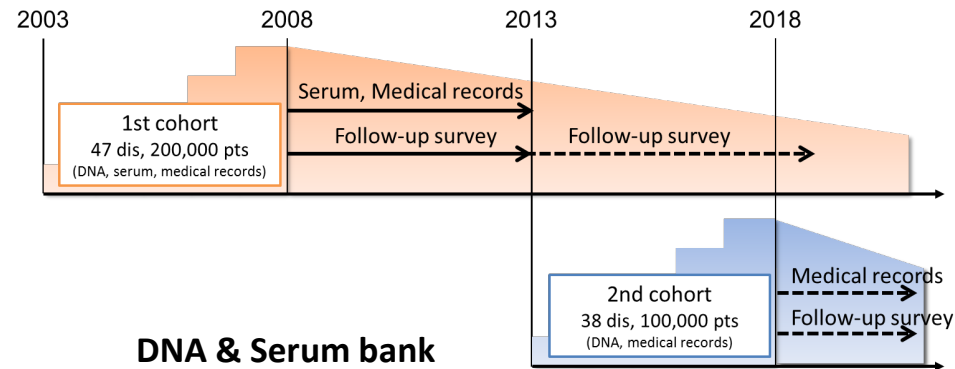
Development of research infrastructure Clinical application



Overview

- Taylor-made medical treatment program was started in 2003 as a Leading Project of MEXT for the implementation of personalized medicine
- In the 1st period (2003-2007), this program constructed a large disease-oriented biobank (BioBank Japan) in collaboration with 66 hospitals in all areas of Japan.
- In the 2nd period (2008-2012), this program performed large-scale GWAS using the samples collected in the BioBank Japan and identified >260 novel susceptibility genes or loci for various diseases and drug responses.
- In the 3rd period (2013-2017), this program expands biobank infrastructure, further promote genomic research and move forward to apply findings into clinical research in collaboration with other national projects.

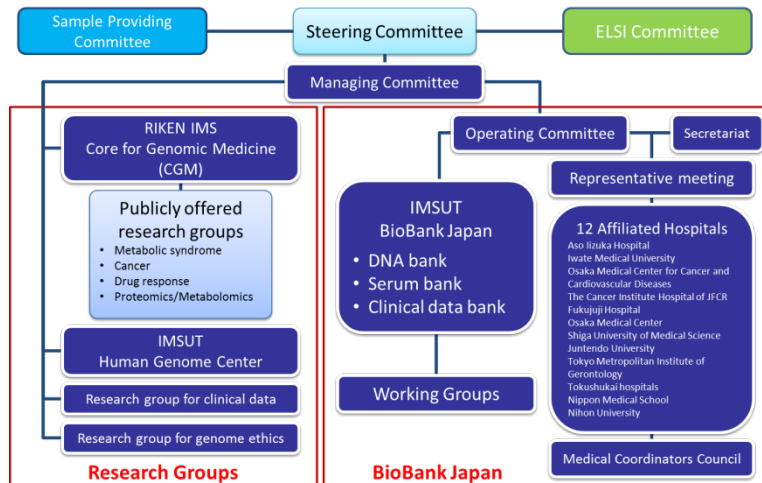
Research infrastructure of the BioBank Japan



DNA & Serum bank



Organization

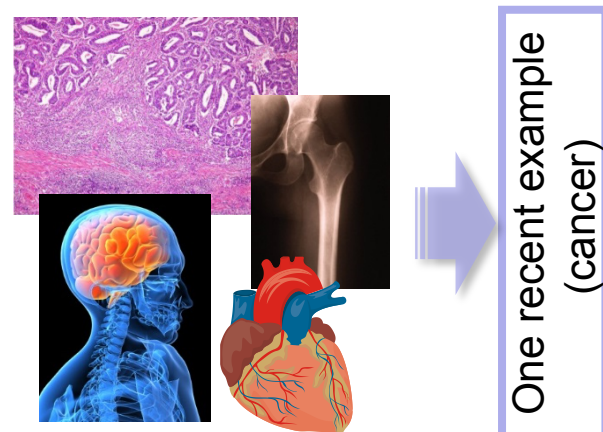
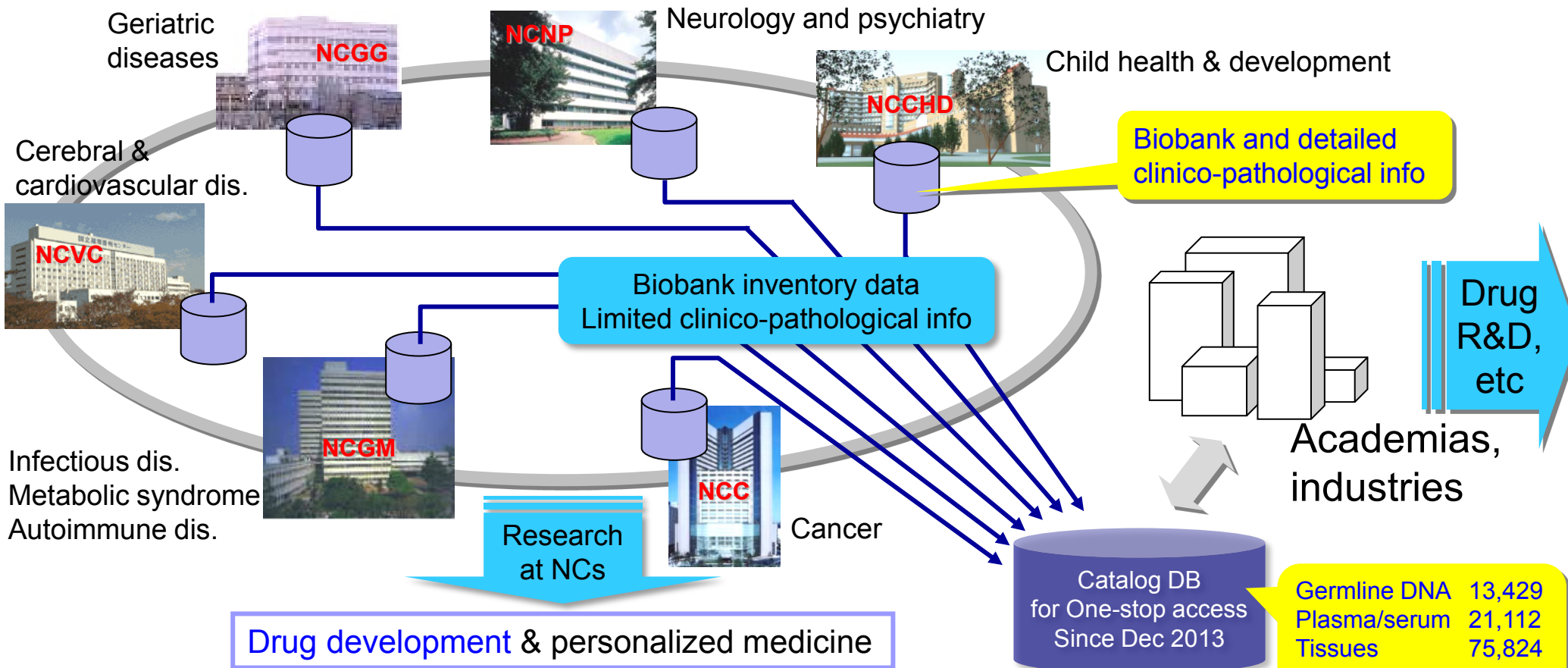


BioBank Japan samples in the 1st cohort (199,998 patients, 340,298 cases)

Disease	N	Disease	N	Disease	N
Hyperlipidemia	53,863	Hay fever	6,282	Hepatitis B	1,508
Diabetes	44,346	Glaucoma	6,135	Hematological cancer	1,478
Cataract	26,067	Prostate cancer	5,694	Esophageal cancer	1,453
Brain infarction	18,862	Unstable angina	5,286	Uterine cervical cancer	1,258
Arrhythmia	19,037	Rheumatoid arthritis	4,449	Nephrotic synd.	1,180
Stable angina	17,655	Lung cancer	4,396	ILD	1,158
Myocardial infarction	13,988	Periodontitis	3,958	Uterine corpus cancer	1,087
Heart failure	10,063	ASO	3,824	Pulmonary tbc	1,011
Bronchial asthma	9,561	COPD	3,504	Ovarian cancer	928
Osteoporosis	8,376	Liver cirrhosis	3,348	Keloid	896
Colorectal cancer	7,638	Atopic dermatitis	3,002	ALS	785
Gastric cancer	7,166	Brain aneurysm	2,999	Drug eruption	740
Urolithiasis	7,028	Epilepsy	2,727	Pancreas cancer	569
Breast cancer	6,629	Basedow disease	2,494	Gallbladder cancer	504
Hepatitis C	6,392	Liver cancer	2,509	Febrile seizure	341
Uterine fibroid	6,217	Endometriosis	1,907		

(as of Oct. 2013)

NCBN: National Center Biobank Network by Integrated Research Institutes & Hospitals for Specific Diseases

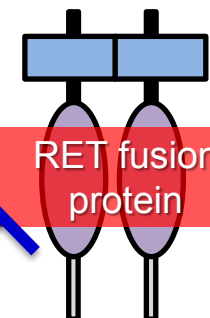


One recent example
(cancer)

RNA sequencing of lung cancer tissues



RET kinase inhibitors



RET fusion protein

Novel driver mutation

(Kohno T, et al. Nat Med 2012)



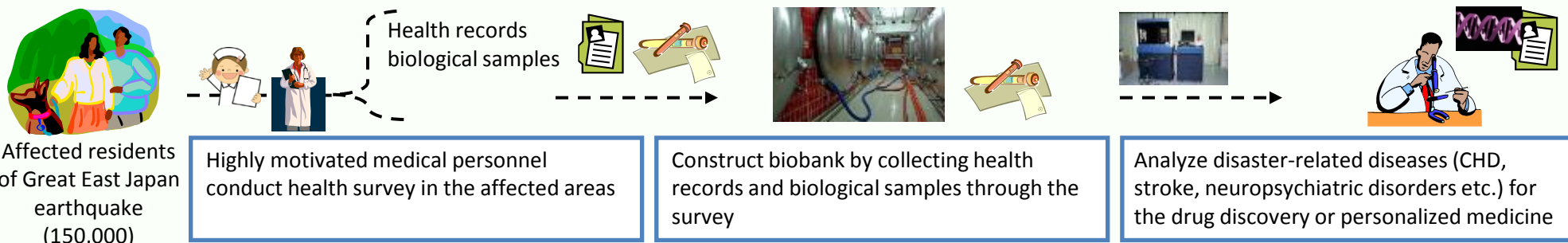
Multi-center IIT for rare subtypes



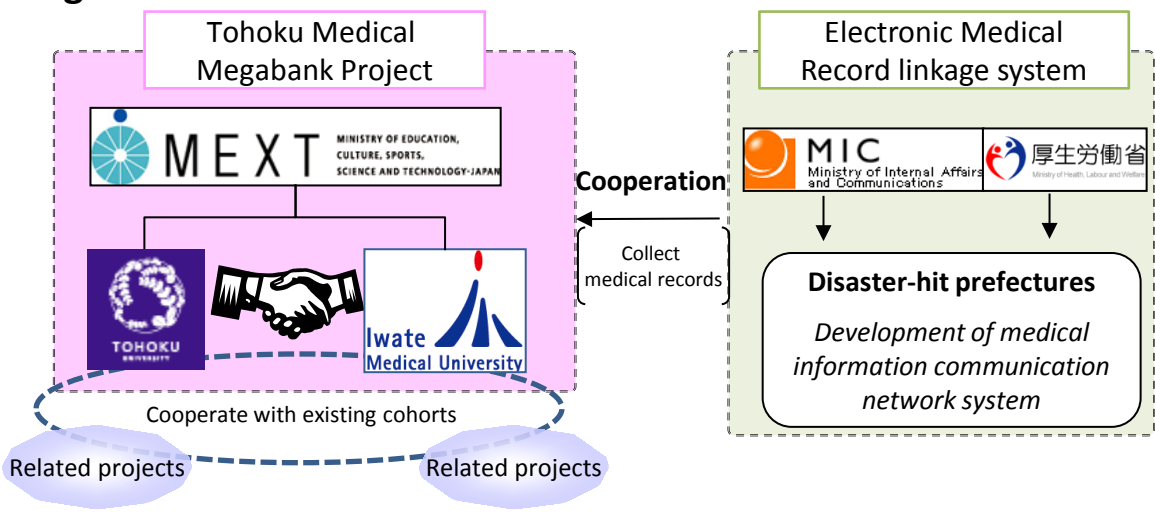
Objective: Revitalization of medical care in disaster-hit area of massive quake and tsunami of March 11, 2011 (Great East Japan earthquake) and develop infrastructure for next-generation medicine through a large-scale cohort study in the disaster-hit areas.

- Revitalization of local medicine through health check-up and medical services to eliminate health concerns of the affected residents
- Construct biobank for next-generation medicine through a large cohort study with genomic information

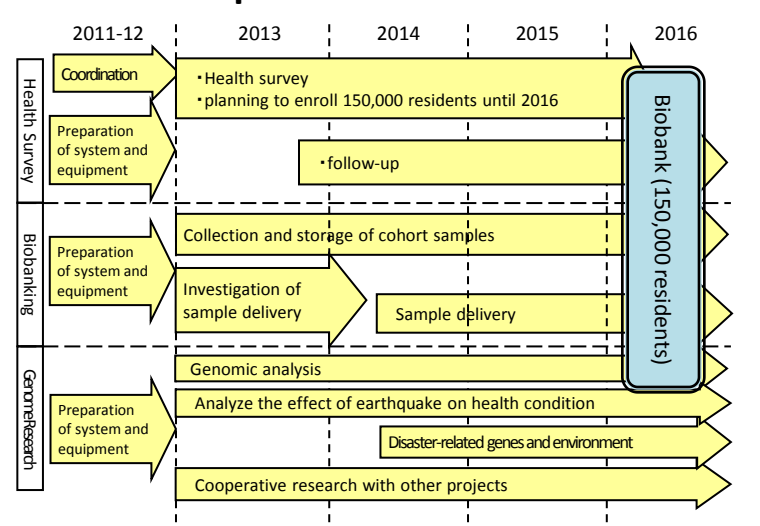
Concept: To create new innovative industries such as drug discovery and genomic medicine, this plan conducts genomic research through construction of biobank of 150,000 residents by the health survey in Miyagi and Iwate prefecture where massive earthquake and tsunami suffered many people.



Organization



Roadmap



Practice of Genomic Medicine @ The Institute of Medical Science, The University of Tokyo (IMSUT) - From Supercomputer to Research Hospital -

1000 people are working in this campus



Genomic Medicine @ IMSUT

Organization

Departments

- Department of Microbiology and Immunology
- Department of Cancer Biology
- Department of Basic Medical Sciences

Research Centers

- ← • [Human Genome Center](#)
- Center for Experimental Medicine
- ← • [Advanced Clinical Research Center](#)
- Center for Stem Cell and Regenerative Medicine
- International Research Center for Infectious Diseases

← [Research Hospital \(135 beds\)](#)

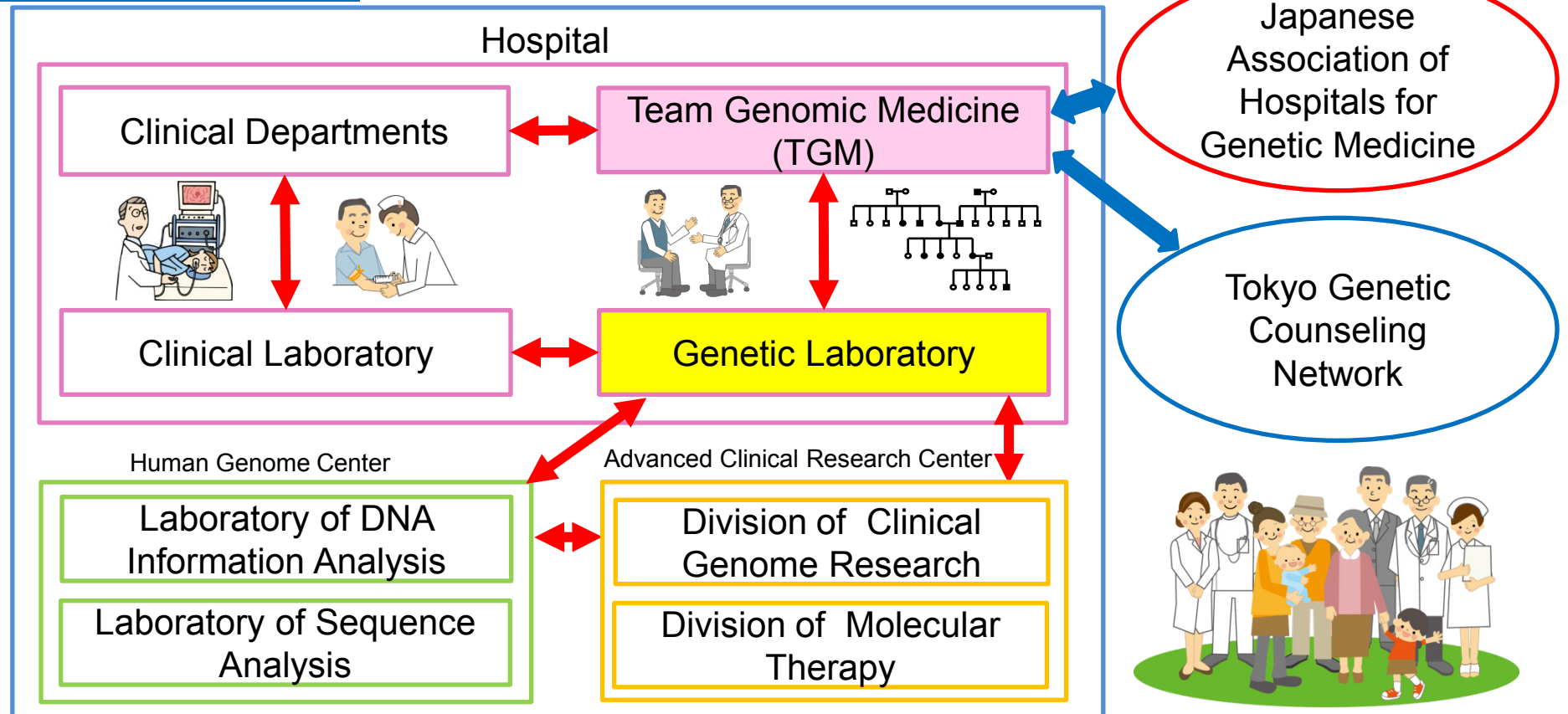
← [Supercomputer System](#)

- Budget: \$10M/Year
- Performance: 225 TFLOPS
- Storage: 3 PB (Lustre) + 2 PB (Nearline)

Genomic Medicine @ IMSUT Research Hospital

Since 2001

GM Organization



Staff Members

- Doctors and Nurses
- Genetic counselors
- Clinical psychologists
- Genome scientists

Patients and Clients

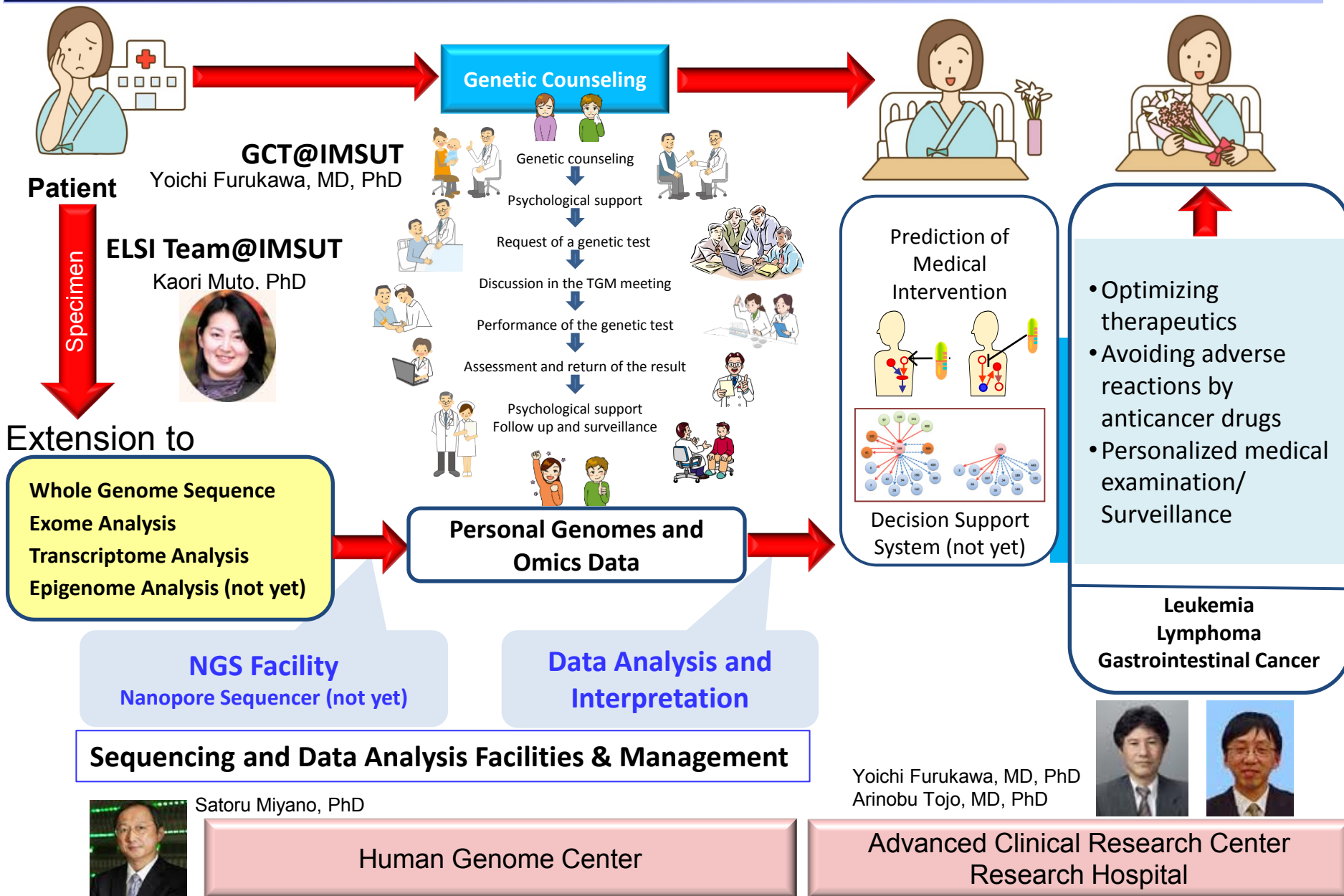
- Cancer
- Hereditary diseases
- Common diseases
- Genetic issues

Businesses and Studies

- Genetic test for neoplasms: ~ 400 /year
- Genetic counseling: 30-40 cases/year
- Genetic Dx of hereditary tumors: ~10 /year
- Development of personalized medicine

Extension to Whole Genome Sequencing, and More@IMSUT

Since 2013



Sequencing and Data Analysis Facilities & Management @ IMSUT

Closed Network

Separated from medical record

Highly Secured Supercomputer System for Clinical Sequence

Computation nodes: 3,840 CPU cores
Storage: Lustre file system (642TB)



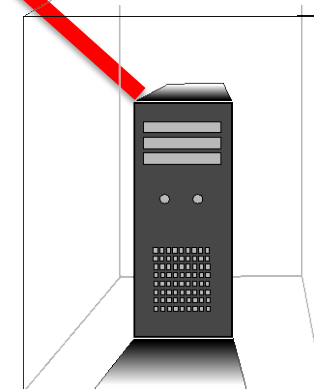
All logs from input to output are automatically recorded with software versions, parameters, who did, etc.

Data Analysis Rooms



VPN connected to Clinician's office

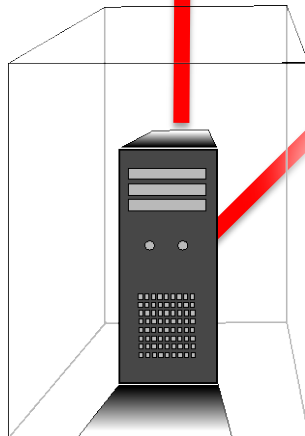
Control Room



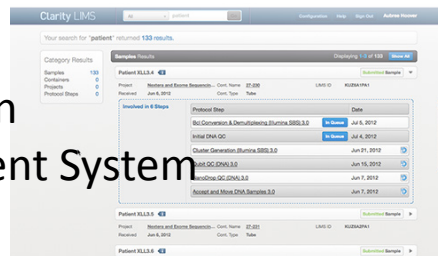
Being expanded



Clinical Sequence Laboratory



Laboratory Information Management System (LIMS)

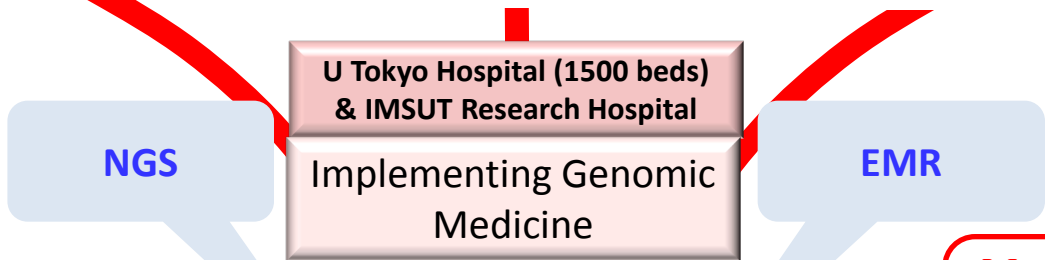


U TOKYO is founding "Int'l Genomic Medicine Research Organization" (IMSUT, Graduate School of Medicine, RCAST, Graduate School of Frontier Science)



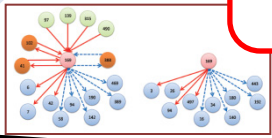
Innovation for therapy and prevention

- Optimizing therapeutics
- Avoiding adverse reactions
- Personalized medical examination/ Surveillance
- Personalized Prevention



Medical Informatics for Genomic Medicine

Research Center for Advanced Science and Technology

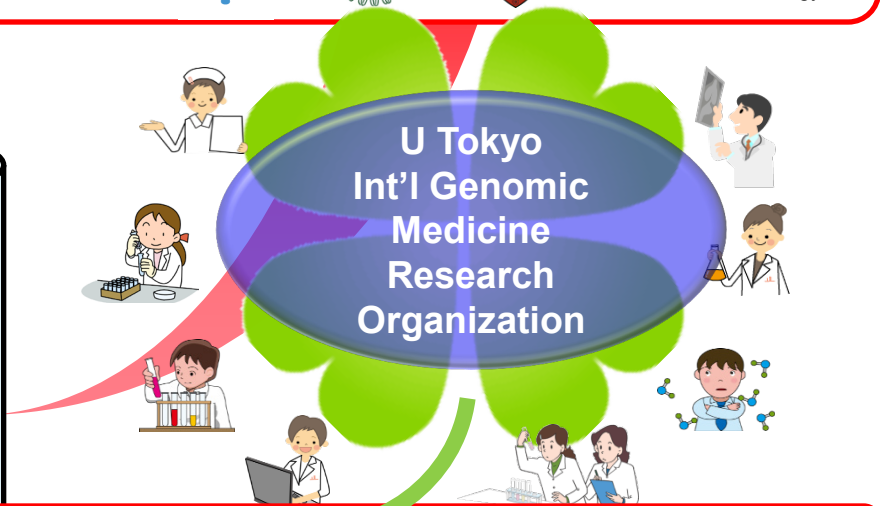


Biomedical Big Data

Human Genome Center
Institute of Medical Science, University of Tokyo

Supercomputer System with Large Storage

Whole Genome	+	Familial/lifestyle data
Transcriptome		Diagnosis/therapy data
Epigenome		Progress after treatment



Foster specialists in genomic medicine