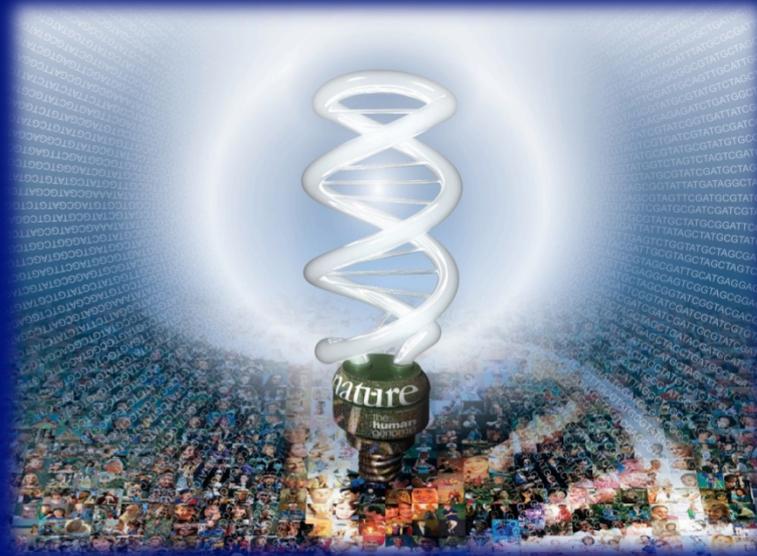


# Integrating Genomic Sequencing into Clinical Care: CSER and Beyond



## Setting the Context

**Eric Green, M.D., Ph.D.**  
**Director, NHGRI**



# GOVERNMENT SHUTDOWN

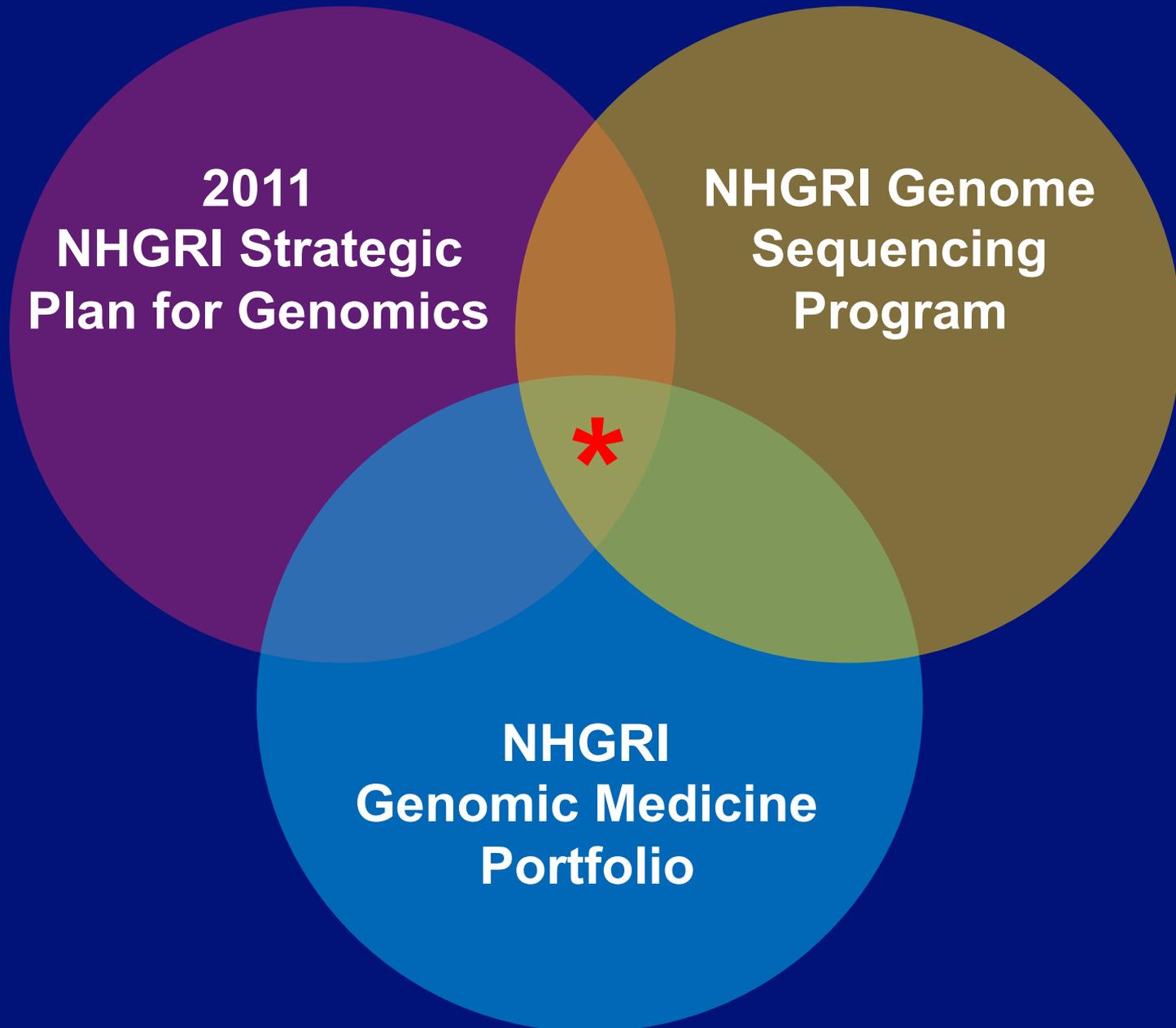


*Dodged the Bullet...  
(for now)!*

# 25<sup>th</sup> Anniversary of the Launch of the Human Genome Project



# Getting Oriented





## PERSPECTIVE

doi:10.1038/nature09764

# Charting a course for genomic medicine from base pairs to bedside

Eric D. Green<sup>1</sup>, Mark S. Guyer<sup>1</sup> & National Human Genome Research Institute<sup>1</sup>

There has been much progress in genomics in the ten years since a draft sequence of the human genome was published. Opportunities for understanding health and disease are now unprecedented, as advances in genomics are harnessed to obtain robust foundational knowledge about the structure and function of the human genome and about the genetic contributions to human health and disease. Here we articulate a 2011 vision for the future of genomics research and describe the path towards an era of genomic medicine.

Since the end of the Human Genome Project (HGP) in 2003 and the publication of a reference human genome sequence<sup>1</sup>, genomics has become a mainstay of biomedical research. The scientific community's insight in launching this ambitious project<sup>2</sup> is evident in the broad range of scientific advances that the HGP has enabled, as shown in Fig. 1 (see eRef<sup>3</sup>). Optimism about the potential contributions of genomics for improving human health has been fuelled by new insights about cancer<sup>4</sup>, the molecular basis of inherited diseases (http://www.ncbi.nlm.nih.gov/omim/http://www.genome.gov/WAStudy) and the hereditary structural variants in disease<sup>5</sup>, some of which have already led to new therapies<sup>6,7</sup>. Other advances are already changing medical practice (for example, microarrays are now used for clinical detection of genetic imbalances<sup>8,9</sup> and pharmacogenomic testing is routinely performed before administration of certain medications<sup>10</sup>). Together, these achievements (see accompanying paper<sup>3</sup>) document that genomics is contributing to a better understanding of human biology and to improving human health.

As it did eight years ago<sup>11</sup>, the National Human Genome Research Institute (NHGRI) has engaged the scientific community (http://www.genome.gov/Planning) to reflect on the key attributes of genomics (Box 1) and explore future directions and challenges for the field. These discussions have led to an updated division that focuses on understanding human biology and the diagnosis, prevention and treatment of human disease, including consideration of the impact and use of these advances for society (but these discussions, intentionally did not address the role of genomics in agriculture, energy and other areas). Like the HGP, achieving the vision is broader than what any single organization or country can achieve—realizing the full benefits of genomics will be a global effort.

The 2011 vision for genomics is organized around five domains extending from basic research to health applications (Fig. 2). It reflects the view that, over time, the most effective way to improve human health is to understand normal biology (in that case, genome biology) as a basis for understanding disease biology, which then becomes the basis for improving health. At the same time, there are other connections among these domains. Genomics offers opportunities for improving health without a thorough understanding of disease (for example, cancer therapies can be selected based on genomic profiles that identify tumour subtypes<sup>12</sup>), and clinical discoveries can lead back to understanding disease or even basic biology.

The past decade has seen genomics contribute fundamental knowledge about biology and its perturbation in disease. Further deepening this understanding will accelerate the transition to genomic medicine (clinical care based on genomic information). But significant change rarely comes

quickly. Although genomics has already begun to improve diagnosis and treatment in a few circumstances, profound improvements in the effectiveness of the able are cannot realistically be expected for many years (Fig. 2). Achieving such progress will depend not only on research, but also on new policies, practices and other developments. We have identified the kinds of achievements that can be anticipated with a few examples (Box 2) where a confluence of need and opportunities should lead to major accomplishments in genomic medicine in the coming decade. Similarly, we note three cross-cutting areas that are broadly relevant and fundamental across the entire spectrum of genomics and genomic medicine: bioinformatics and computational biology (Box 3), education and training (Box 4), and genomics and society (Box 5).

### Understanding the biology of genomes

Substantial progress in understanding the structure of genomes has revealed much about the complexity of genome biology. Continued acquisition of basic knowledge about genome structure and function will be needed to illuminate further those complexities (Fig. 2). The contribution of genomics will include more comprehensive sets (catalogues) of data and new research tools, which will enhance the capabilities of all researchers to reveal fundamental principles of biology.

### Comprehensive catalogues of genomic data

Comprehensive genomic catalogues have been uniquely valuable and widely used. There is a compelling need to improve existing catalogues and to generate new ones, such as complete collections of genetic variants, functional genomic elements, RNAs, proteins, and other biological molecules, for both human and model organisms.

Genomic studies of the genes and pathways associated with disease-related traits require comprehensive catalogues of genetic variation, which provide both genetic markers for association studies and variants for identifying candidate genes. Developing a detailed catalogue of variation in the human genome has been an international effort that began with the SNP Consortium<sup>13</sup> and the International HapMap Project<sup>14</sup> (http://www.ncbi.nlm.nih.gov), and is ongoing with the 1000 Genomes Project<sup>15</sup> (http://www.1000genomes.org).

Over the past decade, these catalogues have been critical in the discovery of the specific genes for roughly 3,000 Mendelian (monogenic) diseases

Figure 1 | Genomic achievements since the Human Genome Project (see accompanying eRef<sup>3</sup>).

<sup>1</sup>National Human Genome Research Institute, National Institutes of Health, 31 Center Dr., Bethesda, Maryland 20892-2152, USA.

<sup>2</sup>http://www.genome.gov/2001/01/010101.htm

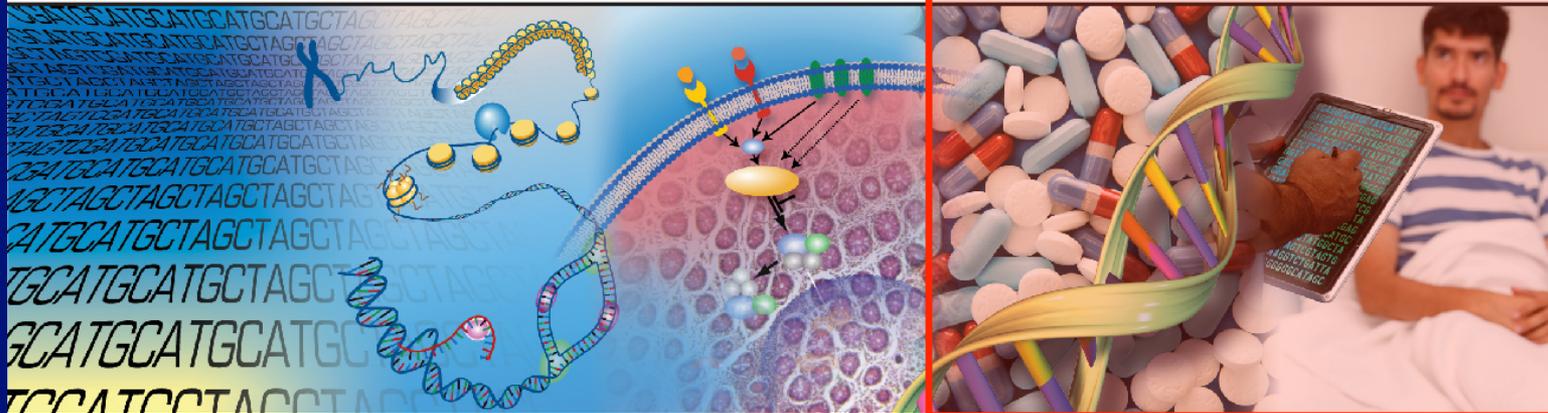
Understanding the Structure of Genomes

Understanding the Biology of Genomes

Understanding the Biology of Disease

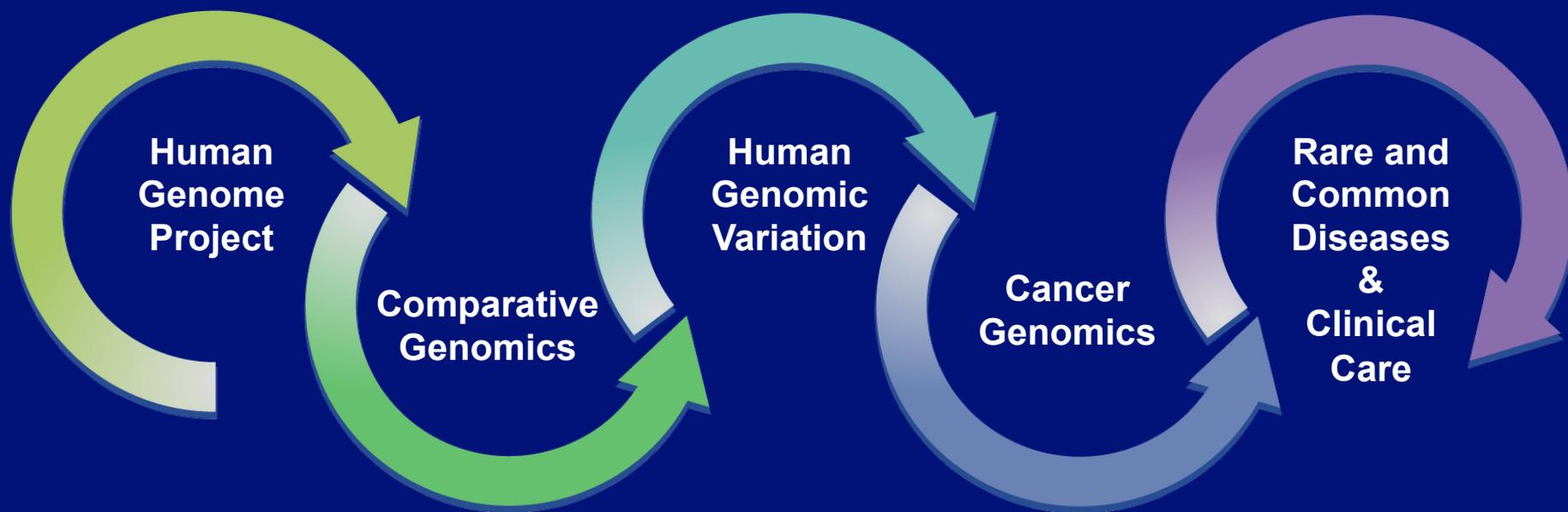
Advancing the Science of Medicine

Improving the Effectiveness of Healthcare



# NHGRI Genome Sequencing Program

*At the cutting edge of genome analysis*



# NHGRI Genome Sequencing Program

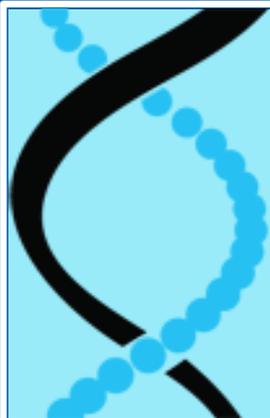
## *Circa 2012-2015*



**Large-Scale  
Genome  
Sequencing and  
Analysis Centers**

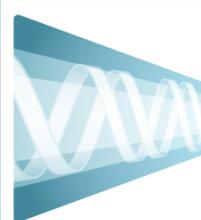


Centers for Mendelian Genomics



**cs<sub>e</sub>r**

Clinical Sequencing  
Exploratory Research



**ISeqTools**



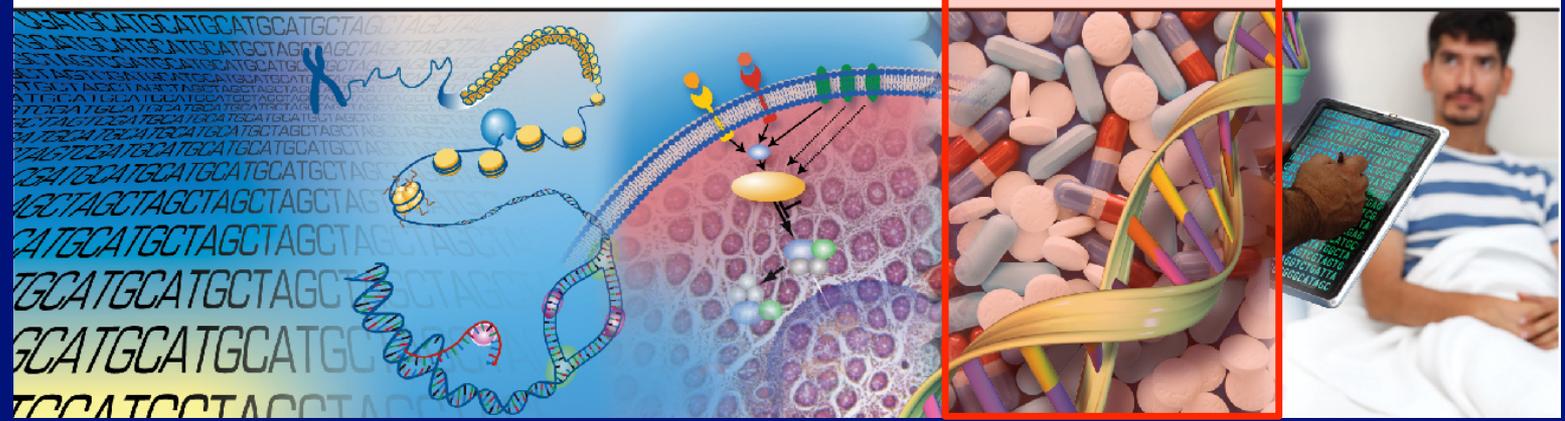
**Understanding  
the Structure of  
Genomes**

**Understanding  
the Biology of  
Genomes**

**Understanding  
the Biology of  
Disease**

**Advancing  
the Science of  
Medicine**

**Improving the  
Effectiveness of  
Healthcare**



# **NHGRI Genome Sequencing Program**

## ***Circa 2016-2019***

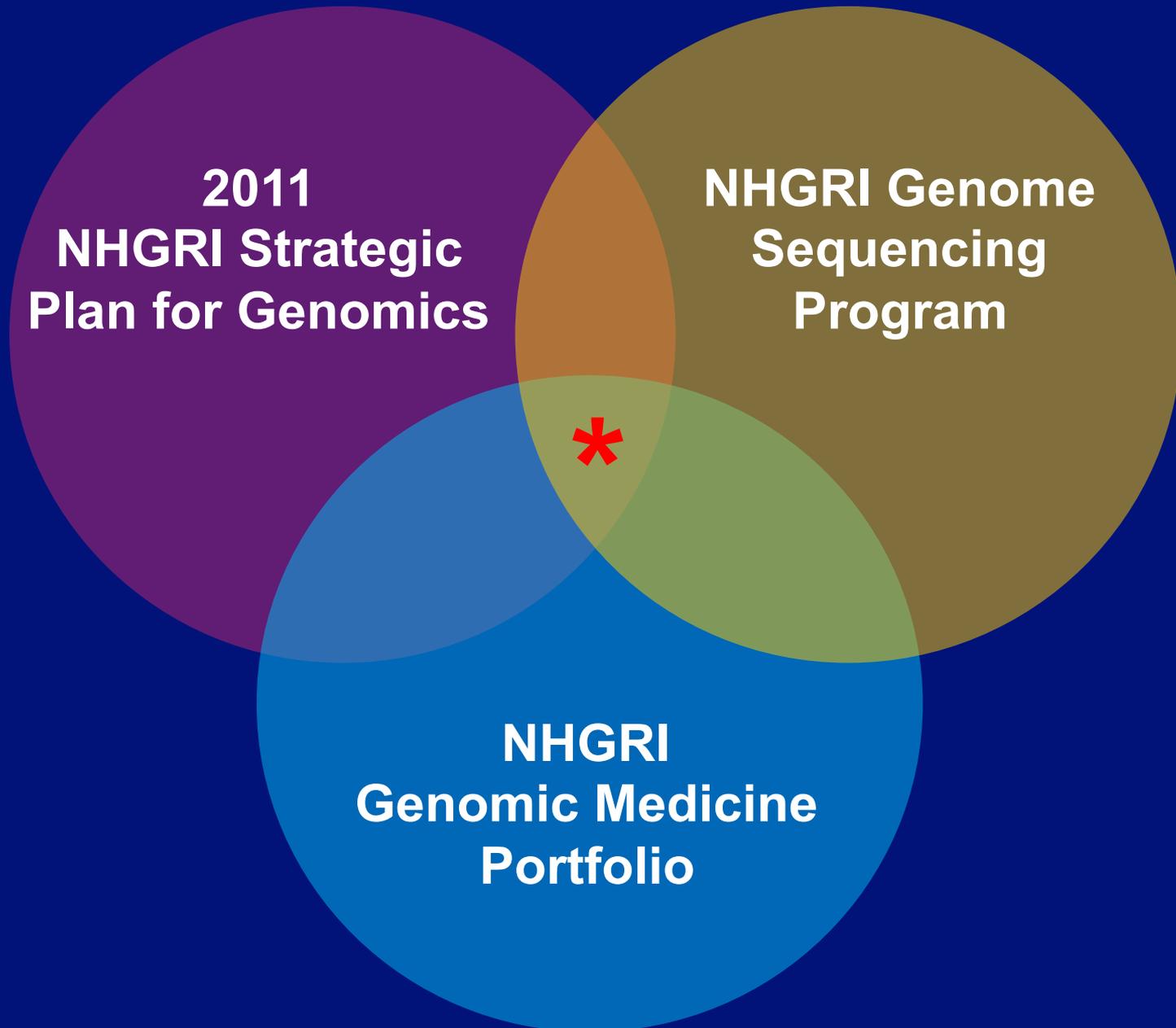


**Centers for Common Disease Genomics**  
**Centers for Mendelian Genomics**

**Coordinating Center**

**Genome Sequencing Program Analysis Centers**  
**Human & Non-Human Primate Genome Sequences**

# Getting Oriented







**“...[the] new Precision Medicine Initiative [will bring] America closer to curing diseases like cancer and diabetes, and gives all of us access, potentially, to the personalized information that we need to keep ourselves and our families healthier.”**

**President Barack Obama  
January 30, 2015**



# The NEW ENGLAND JOURNAL of MEDICINE

January 30, 2015

## Perspective

### A New Initiative on Precision Medicine

Francis S. Collins, M.D., Ph.D., and Harold Varmus, M.D.

“Tonight, I’m launching a new Precision Medicine Initiative to bring us closer to curing diseases like cancer and diabetes — and to give all of us access to the personalized information we need to keep ourselves and our families healthier.”

— President Barack Obama, State of the Union Address, January 20, 2015

The proposed initiative has two main components: a near-term focus on cancers and a longer-term aim to generate knowledge applicable to the whole range of health and disease. Both components are now within our reach because of advances in basic research, including molecular biology, genomics, and bioinformatics. Furthermore, the initiative



**THE PRECISION MEDICINE INITIATIVE**

# Precision Medicine Initiative

Health Information

Grants & Funding

News & Events

Research & Training

Institutes at NIH

About NIH

NIH Home > Research & Training

## PRECISION MEDICINE INITIATIVE

### Precision Medicine Initiative

Near-term Goals

Longer-term Goals

Scale and Scope

Participation

PMI Working Group

Events

Announcements

PMI in the News

Multimedia



Faces of the Precision Medicine Initiative – Dr. Russ Altman



NIH Director's blog: Read precision medicine-related blogs by the NIH Director.

### ABOUT THE PRECISION MEDICINE INITIATIVE

Far too many diseases do not have a proven means of prevention or effective treatments. We must gain better insights into the biology of these diseases to make a difference for the millions of Americans who suffer from them. Precision medicine is an emerging approach for disease treatment and prevention that takes into account individual variability in genes, environment, and lifestyle for each person. While significant advances in precision medicine have been made for select cancers, the practice is not currently in use for most diseases. Many efforts are underway to help make precision medicine the norm rather than the exception. To accelerate the pace, President Obama unveiled the Precision Medicine Initiative (PMI) – a bold new enterprise to revolutionize medicine and generate the scientific evidence needed to move the concept of precision medicine into every day clinical practice.

### Email Updates

To sign up for updates please enter your e-mail address.

### Related Links

[NEJM Perspective: A New Initiative on Precision Medicine](#)

[White House Precision Medicine Web Page](#)

[White House Fact Sheet: President Obama's Precision Medicine Initiative](#)

[Precision Medicine Initiative and Cancer Research](#)

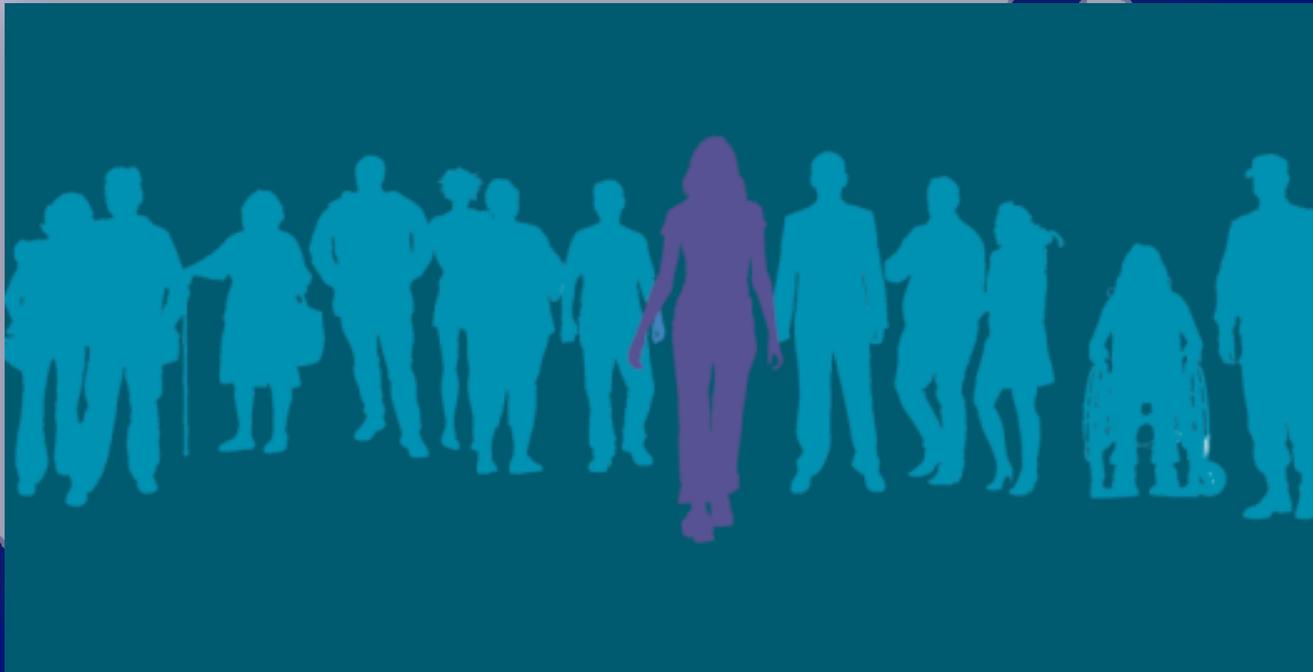
[Storify: #PMINetwork Twitter Chat](#)

[Storify: The Precision Medicine Initiative Announcement](#)

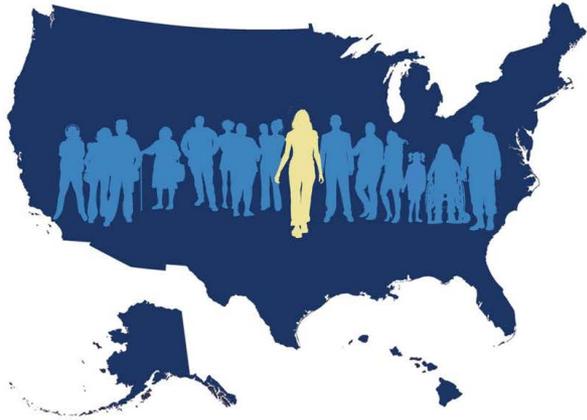
[Precision Medicine Initiative YouTube Channel](#)

[www.nih.gov/precisionmedicine](http://www.nih.gov/precisionmedicine)

# National Research Cohort



# Report on Precision Medicine Initiative Cohort Program



## The Precision Medicine Initiative Cohort Program – Building a Research Foundation for 21<sup>st</sup> Century Medicine

Precision Medicine Initiative (PMI) Working Group Report to the Advisory Committee to the Director, NIH

September 17, 2015

For Immediate Release: Thursday, September 17, 2015

## NIH framework points the way forward for building national, large-scale research cohort, a key component of the President's Precision Medicine Initiative



The National Institutes of Health Advisory Committee to the Director (ACD) today presented to NIH Director Francis S. Collins, M.D., Ph.D., a detailed design framework for building a national research participant group, called a cohort, of 1 million or more Americans to expand our knowledge and practice of precision medicine. Dr. Collins embraced the design recommendations made by the ACD, noting the need to remain nimble and adaptable as the Initiative progresses. He also thanked the Committee for their recommendations on policy issues and welcomed the opportunity to review them. NIH plans to move quickly to build the infrastructure so that participants can begin enrolling in the cohort in 2016, with a goal of enrolling at least 1 million participants in three to four years.



## **Program Review Meeting: Objectives**

- **To summarize and evaluate key scientific contributions of the CSER Program**
- **To identify and prioritize scientific opportunities and questions for the next 5-10 years that would address informed integration of genomic sequencing into clinical care**
- **To identify optimal organizational features of a potential follow-up program**

# NHGRI is Listening to Your Input



- **Workshop Participants**
- **Members of the National Advisory Council for Human Genome Research**
- **Other NIH Institutes**
- **Broader Research Community (via live webcast)**



# NATIONAL HUMAN GENOME RESEARCH INSTITUTE



*Advancing human health  
through genomics research*

