

Investigator-Initiated Research on Genetic Counseling Processes and Practices

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Reasons for Genetic Counseling

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Family planning



Risk assessment



Understanding phenotype



Health management



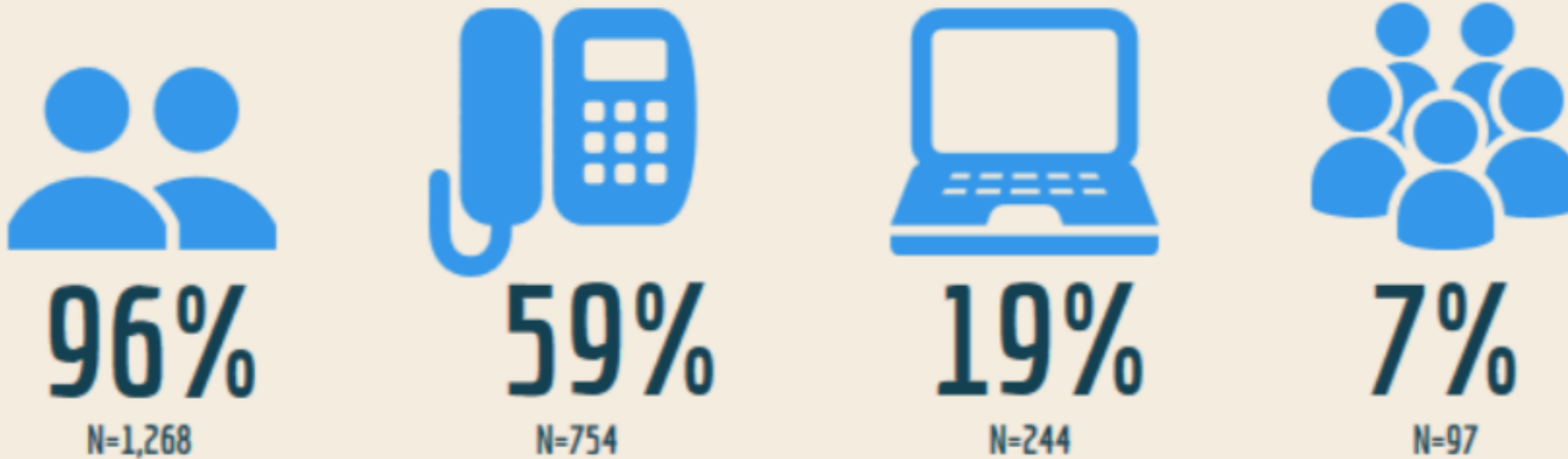
Era of Genomic Counseling



- ▶ Genetic test results have moved from single gene tests to include small risk changes for common diseases and pharmacogenetics
- ▶ American College of Medical Genetics and Genomics (ACMG) recommends that genetics experts be made available for patient test result consultations
- ▶ Only ~4,200 genetic counselors and ~1,300 clinical geneticists currently employed in the US
- ▶ Insufficient to meet current and potential future demand

McGrath, S.P., Walton, N., Williams, M.S. *et al.* Are providers prepared for genomic medicine: interpretation of Direct-to-Consumer genetic testing (DTC-GT) results and genetic self-efficacy by medical professionals. *BMC Health Serv Res* **19**, 844 (2019).

Service Delivery Models Used for Direct Patient Care



Taken from 2018 NSGC professional status survey

- ▶ **Need more efficient strategies for genetic counseling to provide genomic tests results**
- ▶ **Predicted growth in telemedicine post-COVID**
- ▶ **Continue to provide emotional support as genetic information is translated into healthcare decisions**

Concept: Investigator-Initiated Research on Genetic Counseling Processes and Practices

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Purpose:

- ▶ Assess, innovate, scale, and/or research the implementation of novel genetic counseling practices for genomic medicine
- ▶ Support investigator-initiated research (R01, R21, R41 & R43) on how to optimize the genetic counseling processes including, but not limited to, the communication of genomic results in the context of limited resources

Research topics on various approaches to genetic counseling in genomic medicine could include:

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- ▶ Developing and evaluating processes to triage communication of clinical genomes
- ▶ Assessing alternatives to in-person genetic counseling, including IT solutions
- ▶ Developing and assessing methods to increase capacity for genetic counseling in underserved areas
- ▶ Evaluating and improving strategies to communicate genomic findings and update variant reclassifications
- ▶ Understanding needs of patients and stakeholders and the impact of genetic counseling processes on patient outcomes
- ▶ Evaluating strategies for including genetic counseling processes in clinical and research workflows

Current Activities

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- ▶ NHGRI's genomic medicine consortia (ClinGen, CSER, eMERGE, UDN) have Working Groups which are relevant to genetic counseling practices.
- ▶ *All of Us* Research Program recently funded a Genetic Counseling Resource to provide genetic counseling services to enrolled study participants.
- ▶ NCI* supports research related to genetic counseling, cancer risk communication and testing strategies to improve inherited cancer syndrome case ascertainment (RFA-CA-17-041, RFA-CA-19-017 and RFA-CA-20-006)

*Collaborating

Mechanism & Funds Anticipated

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- ▶ R01s up to \$500,000 direct costs/year; project period up to 4 years
- ▶ R21s up to \$200,000 direct costs/year; maximum of \$400,000 for grant; project period up to 3 years
- ▶ R41s and R43s up to \$200,000 direct costs for up to 1 year
- ▶ Two receipt dates to allow chance for resubmissions
- ▶ Planning for 7 – 9 awards across all mechanisms
- ▶ Total cost: up to \$5 M per year

Proposed Timeline

- ▶ Applications due: November 2020
- ▶ Council review: May 2021
- ▶ Second round/resubmissions due July 2021
- ▶ Second Round Council February 2022

Thank You

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Questions? Suggestions?