

Personal Genomics

CDC Genomics Translation Agenda

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Outline

Context for the Translation Agenda

Clinical Utility of Family History

Extramural Translation Research

Extramural Translation Program

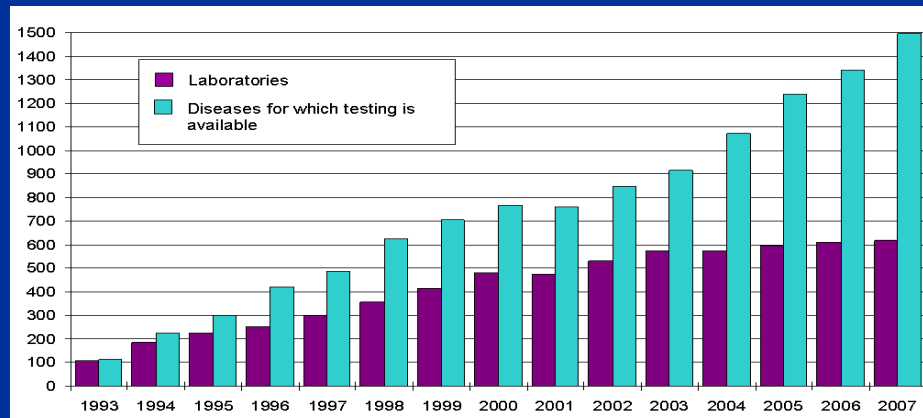
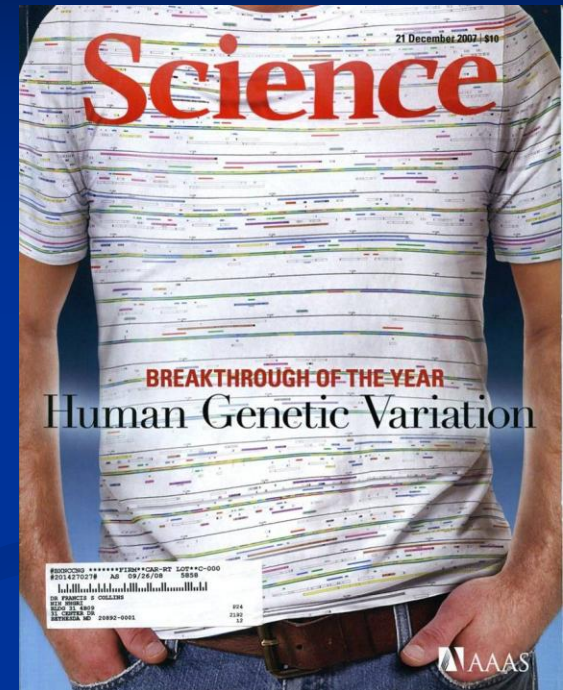
GAPPNet Initiative



Current translation to practice

Rapid advances in research

→ Rapid translation into practice



Genetests.org; Primarily for single gene disorders

Translation of genetic testing in context of other health services in US

Healthcare Spending High, Exceeded Record \$2 Trillion in 2006. ~16% of GDP

U.S. behind many advanced countries in health

~55% of Americans receive recommended care for acute or chronic conditions, 50% receive recommended preventive care

~20%-30% receive contraindicated care

~30- 40% of dollars spent on overuse, underuse, misuse of services, etc.

Where does personal genomics fit?

U.S. Institute of Medicine: Building a Better Delivery System, 2005; NY Times, 1/8/2008; McGlynn NEJM 2003;248:2635; Shuster

Milbank Quarterly 2005; 83:243; Schroeder NEJM 2007;357:1221



What Consequences of Increasing Easy Availability of Genetic Testing?



The NEW ENGLAND JOURNAL of MEDICINE

Perspective
JANUARY 10, 2008

Letting the Genome out of the Bottle — Will We Get Our Wish?

David J. Hunter, M.B., B.S., Sc.D., M.P.H., Muin J. Khoury, M.D., Ph.D., and Jeffrey M. Drazen, M.D.

It may happen soon. A patient, perhaps one you have known for years, who is overweight and

The test undergone by the patient described above is one of the products of this new knowledge

nature

www.nature.com/nature

Vol 456 | Issue no. 7218 | 6 November 2008

My genome. So what?

Research is needed into the way individuals use their genomic information, and into protection from its abuse by others.

Human genome research has proved itself predictably unpredictable. As widely anticipated, the speed of sequencing has escalated, the pace of linking genes to disease has quickened, and practically anyone can have their genome investigated and fed back to them in electronic format to do with it what they will. In this issue, two groups reveal individual genome sequences of a Yoruba man from Ibadan, Nigeria (see page 53), and of a Han Chinese individual (see page 60) for a cost of less than US\$500,000 each — a fraction of that of the human genome's first drafts or subsequently published editions.

The age of personal genomes is here. What many promoters of genomics did not predict are the challenges that individuals face in using this information. One is the limited extent

EDITORIAL

1 My genome.
So what?



NEWS

11 How to get the most
from a gene test
Erika Check Hayden

12 Genomics takes hold in Asia
David Cyranoski

NEWS FEATURES

18 The case of the missing
heritability
Brendan Maher

23 Standard and pores

Unanswered Questions about Genetic Tests in Translation

How valid and reliable are the genetic tests & how well do they predict outcomes?

What are the benefits and harms (utility)?

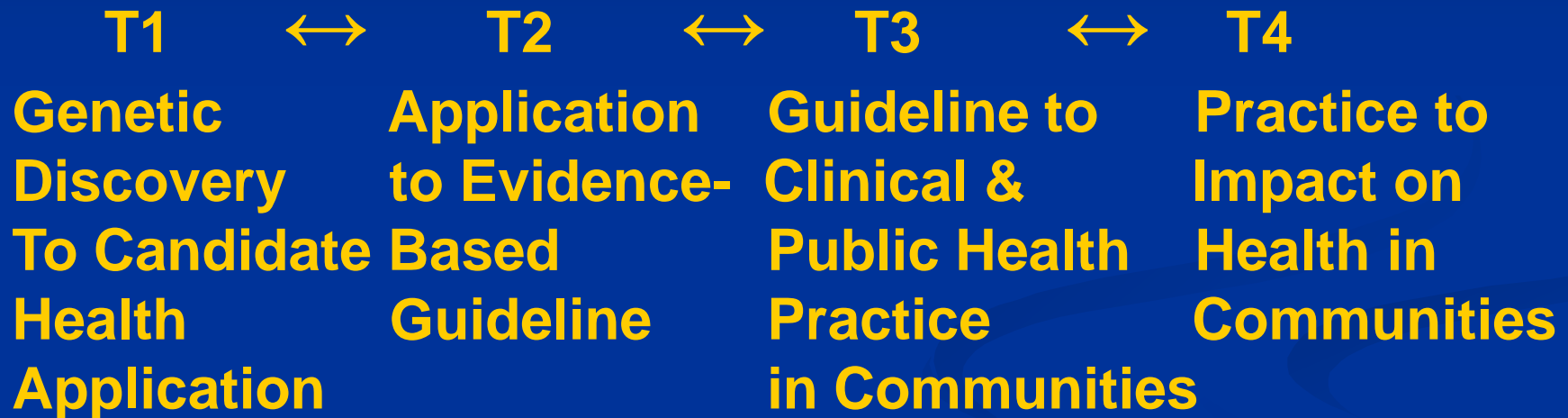
What actions should be taken based on results?

How should the medical community, public health, policy makers respond?



CDC-Proposed Translation Research Continuum in Genetics

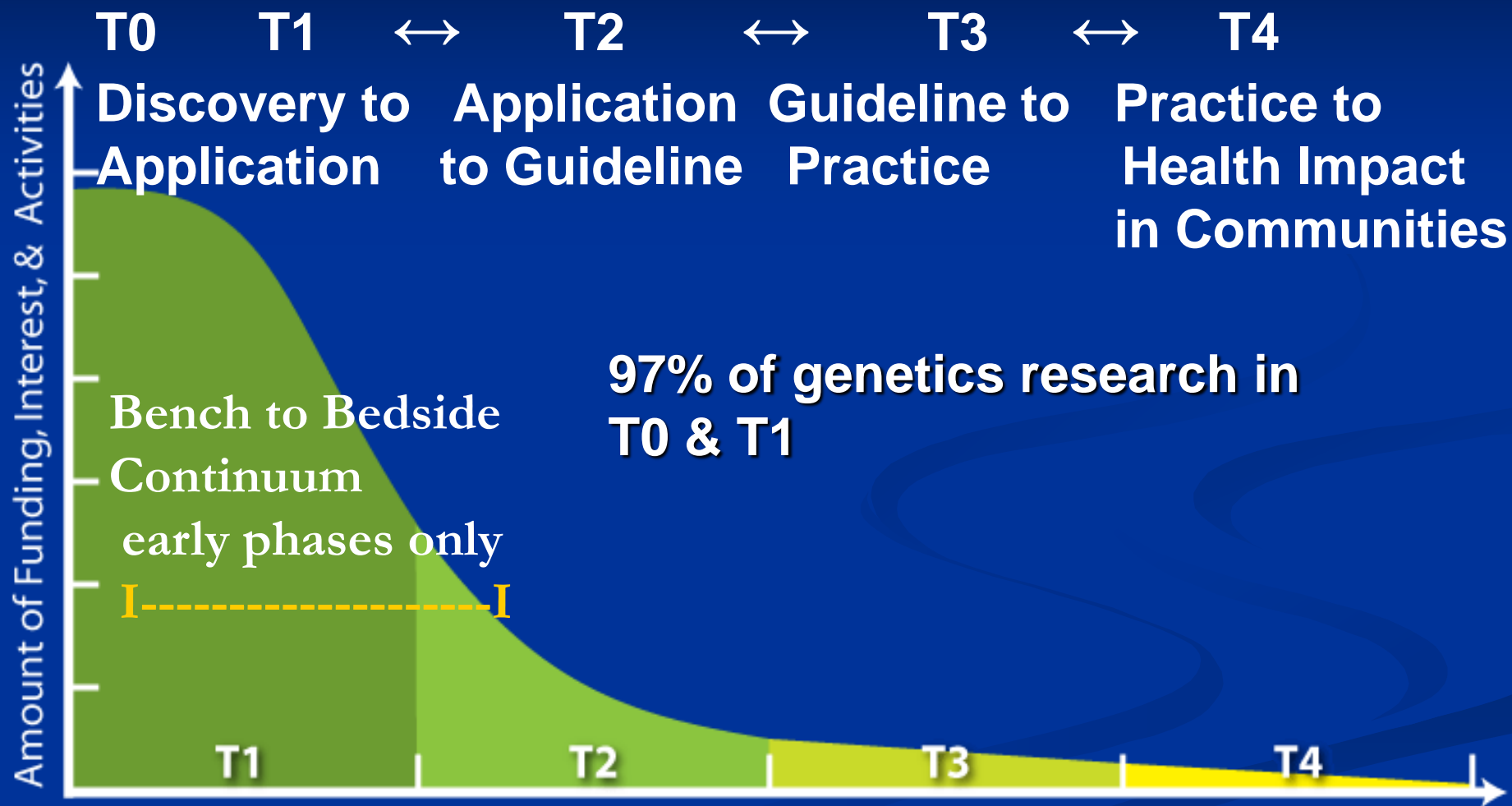
T0 = gene discovery



Continuum Adapted from Khoury Genet Med 2007;9:665; for related see: Woolf JAMA 2008;299:211; IOM Clinical Research Roundtable, Sung 2005



Currently, Limited Research for Evaluation & Implementation



Khoury Genet Med 2007;9:665



Need for More Translation Research & Programs

“The past decade has seen a torrent of funding for basic research that dwarfs the funding for translational research and oversight of genetics and genomics. Consequently there is no capacity or infrastructure to meet the tsunami of basic research discoveries and move these discoveries rationally into clinical application.”

Hudson K. Health Affairs 2008;27(6)1612-5.



Genomic tests ready for use?

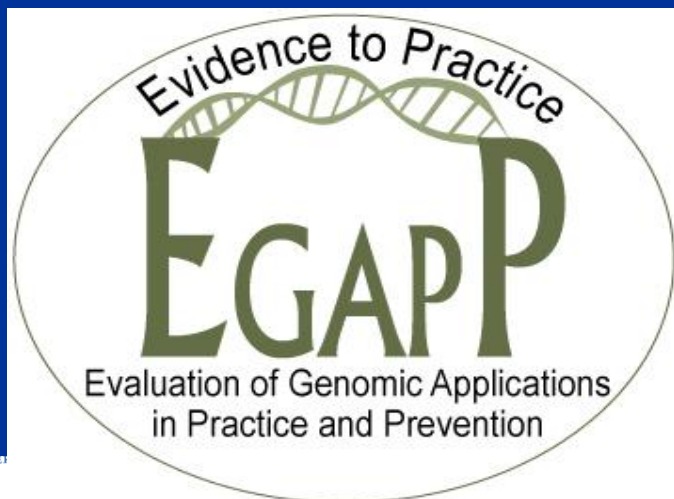
**Evaluation of
Genomic
Applications in
Practice and
Prevention**

Purpose:

Establish and test a systematic, evidence-based process for evaluating genetic tests and other applications of genomic technology in transition from research to practice

www.egappreviews.org/

cdc.gov/genomics/gtesting/



EGAPP Products Help Guide Translation Research Agenda

Systematic evidence reviews evaluating
analytic & clinical validity & clinical
utility

Recommendations on appropriate use of
genetic tests & other applications

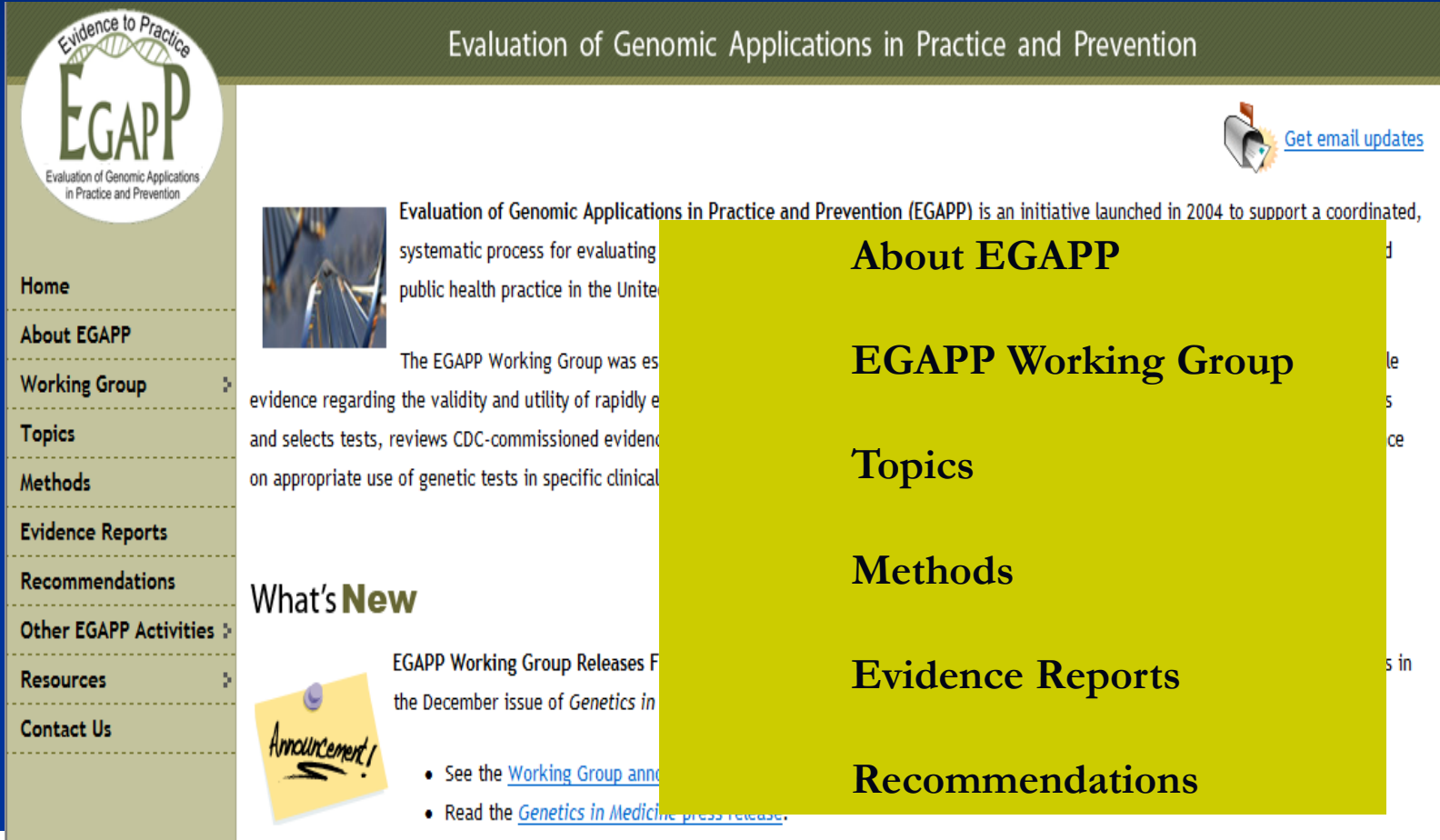
Recommendations for research to fill
specific evidence gaps

www.egappreviews.org/

cdc.gov/genomics/gtesting/



Information at www.egappreviews.org



The screenshot shows the EGAPP website homepage. At the top left is the EGAPP logo, which includes a DNA double helix and the text "Evidence to Practice EGAPP Evaluation of Genomic Applications in Practice and Prevention". To the right of the logo is the site title "Evaluation of Genomic Applications in Practice and Prevention". In the top right corner, there is an icon of an envelope and the text "Get email updates". On the left side, there is a vertical navigation menu with the following items: Home, About EGAPP, Working Group, Topics, Methods, Evidence Reports, Recommendations, Other EGAPP Activities, Resources, and Contact Us. The main content area features a large yellow box with the following text: "About EGAPP", "EGAPP Working Group", "Topics", "Methods", "Evidence Reports", and "Recommendations". Below this box, there is a section titled "What's New" with a yellow sticky note icon that says "Announcement!". The text in this section reads: "EGAPP Working Group Releases Findings from the December issue of *Genetics in Medicine*". Below this text is a list of two items: "See the [Working Group announcement](#)" and "Read the [Genetics in Medicine press release](#)".

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Context for the Research Agenda

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Family History & Genomics Contribute to Personalized Medicine

Components of Personalized Medicine

Quality clinician-patient relationships

Informed patients, shared decisions

Personal medical & **family health histories**

Health habits evaluation, Preventive services

Current diagnostic, treatment technologies

Genomics, Health Information Technology

Combination → personalized health care



Research Needed to Evaluate Clinical Utility of Family History & Genomics

Everyone has family history (FH)

FH risk factor for most diseases

FH risk ratios $\sim =$ or $>$ genetic variants

FH combines information on gene combinations, environment, behaviors

FH low cost “omics” tool ($< \$1,000$ s)

Randomized clinical trials needed to evaluate clinical utility of both



CDC Supported Study Evaluating Clinical Utility of Family History

**Will the risk notification and tailored
messages using a family history tool
change behaviors?**

use of clinical services

lifestyle changes

family communication



Family History Stratification & Intervention

Data Collection

Risk stratification

Intervention

Family History Tool

Strong

Personalized prevention recommendations & referral for further evaluation

Moderate

Personalized prevention recommendations

Weak

Reinforce standard prevention recommendations

Randomized Trial in Primary Care

INTERVENTION
n=23 practices

Pretest

**FH-risk assessment
and messages**



Posttest

6 months

CONTROL
n=18 practices

Pretest

**Generic
messages**



Posttest

**FH-risk assessment
and messages**



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CDC Translation Research

Goal: Support research needed for evidence-based clinical and public health practice in genomics

Focus: Fill Evidence Gaps identified by EGAPP & USPSTF reviews & recommendations



Research Objectives

Evaluations of validity, utility, ELSI
tests identified by EGAPP Working Group

egappreviews.org/workinggrp/topics.htm

Effectiveness of interventions to increase use
clinical practices recommended by the USPSTF
for *BRCA* testing (use of family history &
counseling & testing)

ahrq.gov/clinic/uspstf/uspsbrgen.htm



Research Objectives

Effectiveness of interventions to educate the public or providers about gaps in existing knowledge for tests and potential harms & benefits of tests for which an EGAPP review found insufficient evidence to support a recommendation

egappreviews.org/workinggrp/reports.htm

Clinical utility of family medical history tools



Funded Project

D. Veenstra, U. WA.

Evaluate the clinical utility (improved health outcomes, value in clinical decision making) of:

Warfarin pharmacogenomics

Gene expression profiling for treatment of early stage breast cancer

Factor V Leiden testing for pregnant women with clotting or adverse pregnancy outcomes

Collaborative process with stakeholders



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CDC Translation Program

Goal: Promote evidence-based clinical and public health practice in genomics

Focus: EGAPP, USPSTF reviews, recommendations

Supported activities: education, policy, surveillance, evaluation



Funded Project: MI Public Health

J. Bach, Michigan Department of Community Health

Multi-faceted, state-wide comprehensive program

Surveillance, health education, & policy

Translation of USPSTF *BRCA* recommendations into practice

Translation of EGAPP recommendations on hereditary colorectal cancer into practice

Evaluate effectiveness in changing knowledge, test use, insurance coverage



Funded Project: Los Angeles, VA

M. Scheuner, Sepulveda Research

**Implement multi-component for primary care
clinicians within Department of Veterans
Affairs Greater Los Angeles Healthcare System**

**For hereditary breast-ovarian cancer &
hereditary nonpolyposis colorectal cancer**

Following USPSTF & EGAPP recommendations

**Evaluate: family history documentation, referral
of patients for counseling & testing**



Funded Projects: Pharmacists

G Kuo, University of California, San Diego

Educational program with the American Pharmacists Association, the American Society of Health-System Pharmacists, & the American Association of Colleges of Pharmacy

Increase pharmacists' awareness of current knowledge of validity & utility of pharmacogenomic tests, potential benefits & harms

Focus EGAPP-evaluated tests

Evaluate: education coverage, delivery, & cost



Funded Projects: Oregon

K Bradley, Oregon Public Health Division

Cancer genomics surveillance program of State's adult population & healthcare providers

Monitor use of cancer-specific genomic tests & family history

Focus on tests identified by EGAPP & USPSTF related to breast, colorectal, & ovarian cancers

Evaluate: information completeness, quality & usefulness of information to others



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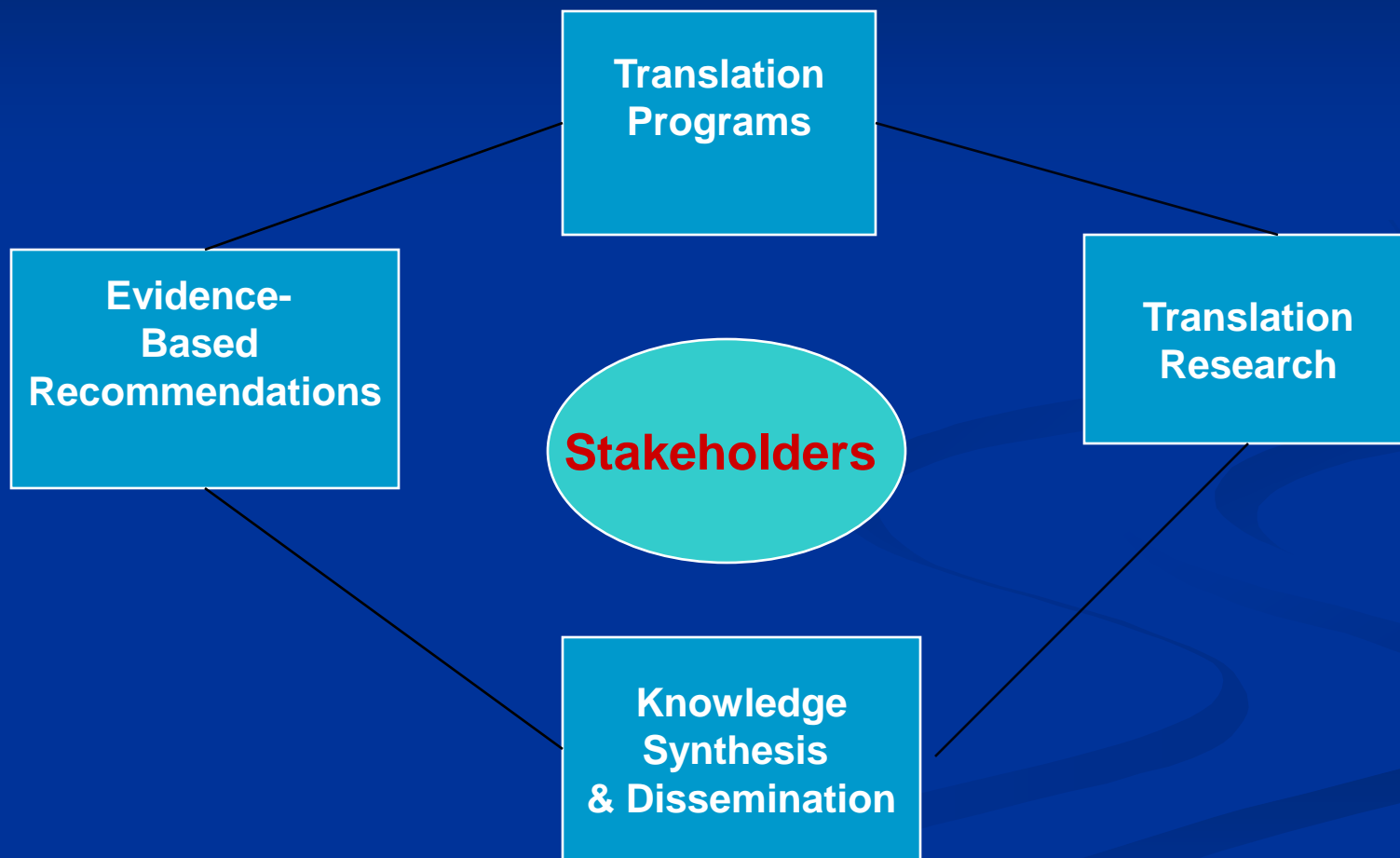
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Genomic Applications in Practice and Prevention Network (GAPPNet)



Need for More Translation Research, Evaluation & Programs in Genomics

**Little or no research to guide translation to
practice – 97% now in T0, T1**

**Almost no infrastructure to implement
newest genomic services**

**Research, evidence reviews, & programs
can benefit from information exchange
(GAPPNet)**

Khoury Genet Med 2007;9:665

Hudson K. Health Affairs 2008;27(6)1612-5.



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More information : Public Health Genomics
cdc.gov/genomics

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The findings and conclusions in this presentation are those of the author and do not necessarily represent the views of the Centers for Disease Control and Prevention.

