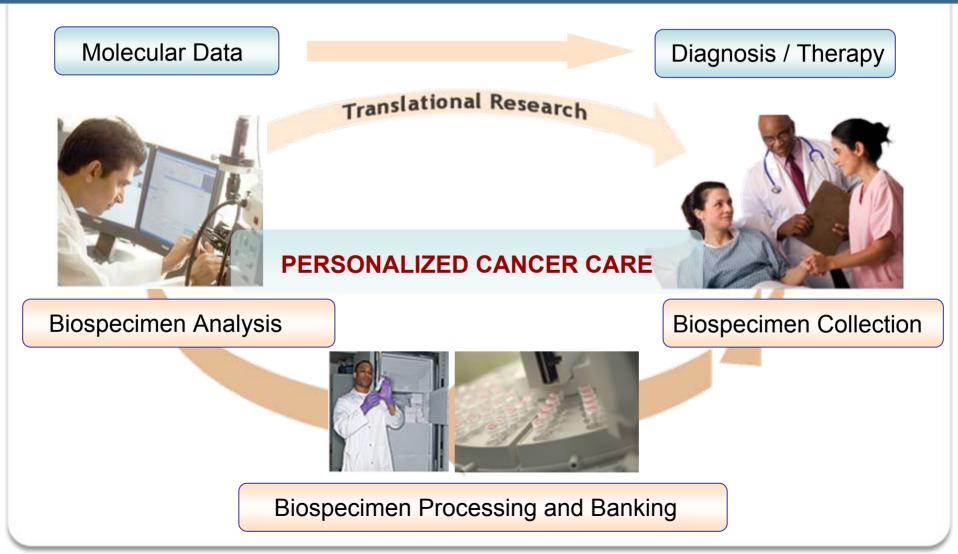
# OBBR Office of Biorepositories and Biospecimen Research



Carolyn C. Compton, M.D., Ph.D. Director, Office of Biorepositories and Biospecimen Research Acting Director, Office of Technology and Industrial Relations National Cancer Institute



#### **Translational Research Promises to Realize the Vision of Molecular Medicine**



**Biospecimen Resources Pave the Road to Personalized Medicine** 

- Biospecimens are the basis of:
  - Molecular characterization of the disease
    - Molecular classification
    - Tumor heterogeneity
    - Therapeutic targets
  - Molecular characterization of the host
    - Disease susceptibility
    - Adverse Rx outcome risk (pharmacogenomics)

#### **Molecular Research Using Human Analytes**

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#### The Cancer Genome Atlas (TCGA)

National Community Cancer Centers Program (NCCCP) Clinical Proteomic Technologies Assessment for Cancer (CPTAC)

Innovative Molecular Analysis Technologies (IMAT)

Alliance for Nanotechnology in Cancer

Cancer Genetic Markers of Susceptibility (CGEMS)

**Clinical trials correlative science** 

Molecular epidemiology programs

All Depend On High-Quality Human Biospecimens **SPORE** programs

**R01 Research** 

#### **Technology Development and Today's Unprecedented Potential for Progress**



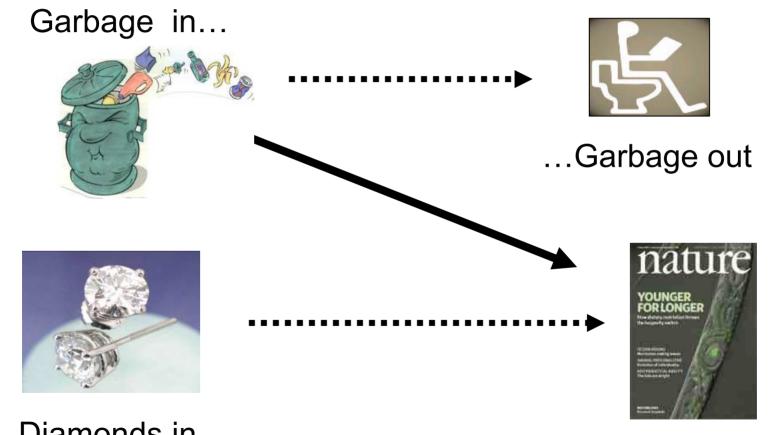
- Technological change is exponential, not linear
  - "We won't experience 100 years of progress in the 21<sup>st</sup> century it will be more like 20,000 years of progress (at today's rate)."
    - Ray Kurzweil, The Law of Accelerating Returns
- Technology accelerates data production → knowledge
- Scientific knowledge will double in the next 3 years
- Biologic knowledge will double in the next 5 years
- The sum of all human knowledge is just 1% of what it will be in the year 2050

#### **Powerful Tools: Powerful Risks**

- The technological capacity exists to produce low-quality data from low-quality analytes with unprecedented efficiency
- We now have the ability to get the wrong answers with unprecedented speed
- Unraveling the massive matrix of misleading data is compromising progress in unprecedented ways

### **An Inconvenient Truth.....**

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Diamonds in.....

**Courtesy of Gerry Thomas** 



#### **Molecular Analysis and Human Analytes**

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Challenge for the NCI: Lack of standardization of human biospecimens and the data associated with them compromises the quality and utility of molecular research dependent on them.





#### Addressing the Biospecimen Variation that Compromises Molecular Research

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The challenges: <u>All</u> must be met, because all affect quality

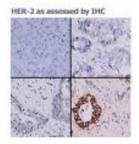
- Varying methods of collection, processing, and storage can alter the physical/biologic state of the specimen
- Varying associated specimen data elements alter what the scientist knows about the character/nature of the specimen
- Variable clinical information alters what the scientist knows about the patient (biologic context of the specimen)
- Variable restrictions (patient consent; other ethical, legal, and policy issues) alter what the scientist may do with the specimen and/or data

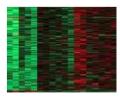
#### **Biospecimen Quality Variation Impacts Clinical and Research Outcomes**

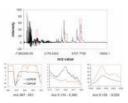
Effects on Clinical Outcomes

- Potential for incorrect diagnosis
  - Morphological/immunostaining artifact
  - Skewed clinical chemistry results
- Potential for incorrect treatment
  - Therapy linked to a diagnostic test on a biospecimen (e.g., HER2 in breast cancer)
- Effects on Research Outcomes
  - Irreproducible results
    - Variations in gene expression data
    - · Variations in post-translational modification data
  - Misinterpretation of artifacts as biomarkers









#### **OBBR's Strategic Efforts:** Taking Out the Garbage



- Optimize and standardize the quality of human specimens for research using a systematic, scientific approach
- Remove the barriers to research created by limited availability of high-quality, platform-appropriate human biospecimens
- Lay the foundation for tomorrow's standard of care

# Systematic, Comprehensive Approach to Improving Biospecimen Quality

- Develop state-of-the-science guidance for biobanking
  - NCI Best Practices for Biospecimen Resources
- Harmonize biobanking practices across NCI/NIH and stakeholder partners
  - Intramural: Biorepository Coordinating Committee, Trans-NIH Bioethics Committee, et al.
  - Extramural: Group Banking Committee, Translational Research Working Group, NCI Clinical Center, NCI Community Cancer Center Project, SPOREs, et a.
  - Coalitions: Interagency Oncology Task Force (FDA,CMS), NCI-FDA-AACR Cancer Biomarkers Collaborative, FNIH Biomarkers Consortium, et al.

# Systematic, Comprehensive Approach to Improving Biospecimen Quality



- Facilitate creation of a <u>scientific evidence base</u> for biospecimen procurement, processing, and stabilization
  - Biospecimen Research Database (http://biospecimens.cancer.gov)
  - Biospecimen research programs: RFP and BAA
- Partner with accreditation and professional bodies to insure implementation and integration into the medical enterprise
  - College of American Pathologists
  - American College of Surgeons
  - Commission on Cancer

#### NCI Best Practices for Biospecimen Resources OBBR Office of Biorepositories and Biospecimen Research



National Cancer Institute Best Practices for Biospecimen Resources

June 2007

Prepared by: National Cancer Institute National Institutes of Health U.S. Department of Health and Human Services

#### **Objectives**:

- Unify policies and procedures for NCI-supported biospecimen resources for cancer research
- Provide a baseline for operating standards on which to build as the state of the science evolves

#### http://biospecimens.cancer.gov

#### **The NCI Best Practices Overview**

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The NCI Best Practices include recommendations for:

- Common technical, operational and safety best practices
- Quality assurance and quality control programs
- Implementation of enabling informatics systems (caBIG silver)
- Establishing reporting mechanisms
- Providing administration and management structure
- Addressing ethical, legal, and policy issues: informed consent; access; privacy protection; custodianship; intellectual property
- Definitions of key terms

## **OBBR: Building Better Biospecimens**

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#### **Developing and implementing**

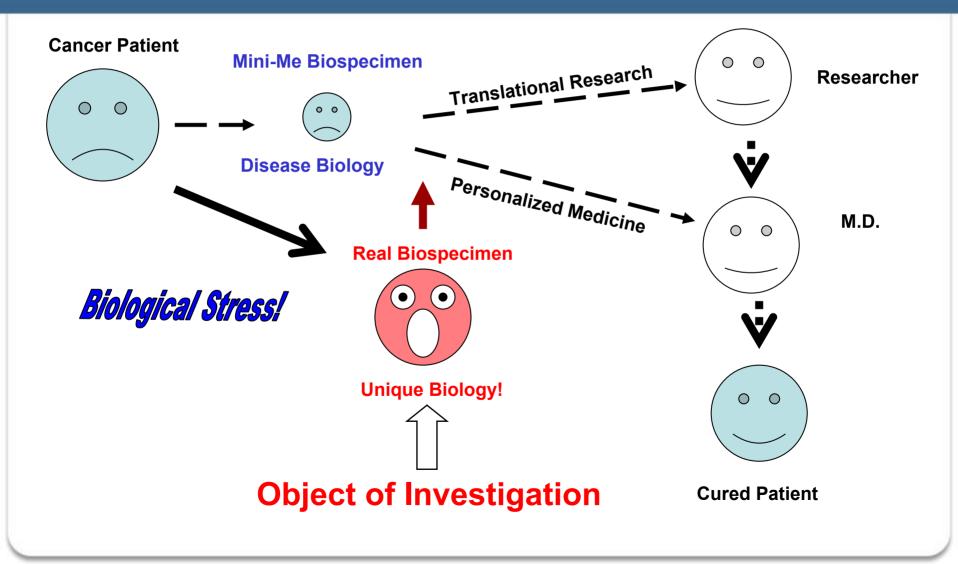
state-of-the-science, <u>data-driven</u> processes that insure

the molecular integrity and clinical relevance

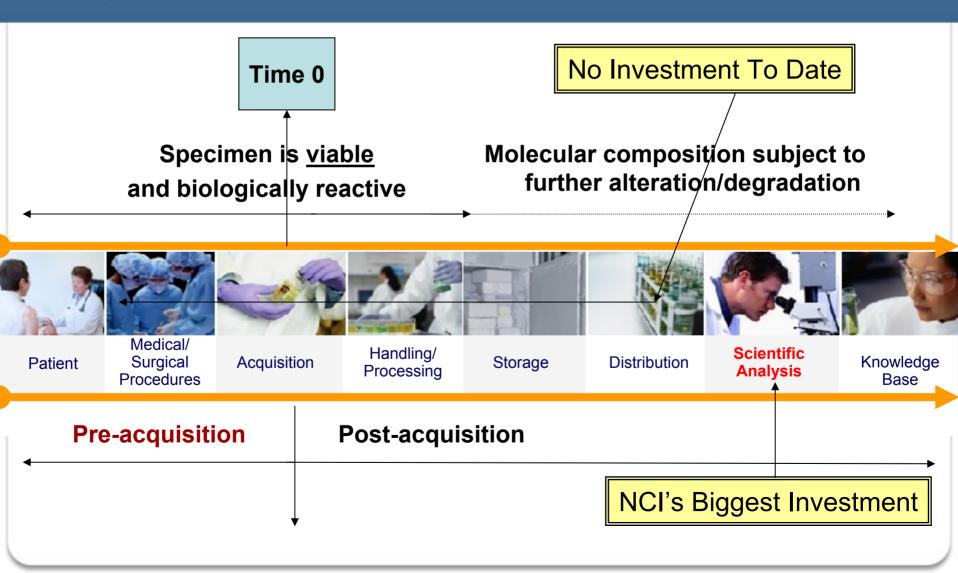
of human biospecimens

used in cancer research and clinical medicine

#### The Biospecimen as Object of Investigation



# **Biospecimen Science**



# **Variables for Study**

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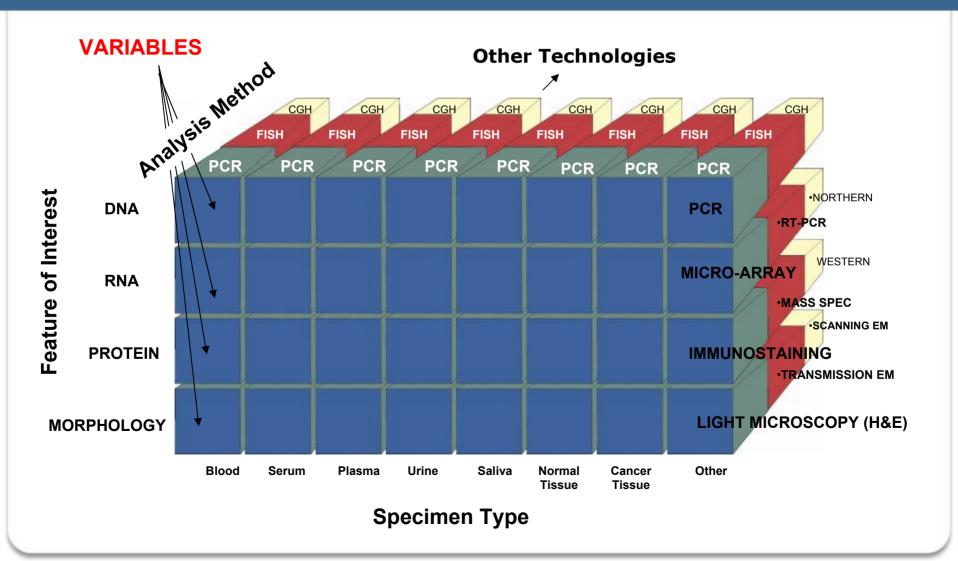
Pre-acquisition variables:

- Antibiotics
- Other drugs
- Type of anesthesia
- Duration of anesthesia
- Arterial clamp time
- Blood pressure variations
- Intra-op blood loss
- Intra-op blood administration
- Intra-op fluid administration
- Pre-existing medical conditions
- Patient gender

Post-acquisition variables:

- Time at room temperature
- Temperature of room
- Type of fixative
- Time in fixative
- Rate of freezing
- Size of aliquots
- Type of collection container
- Biomolecule extraction method
- Storage temperature
- Storage duration
- Storage in vacuum

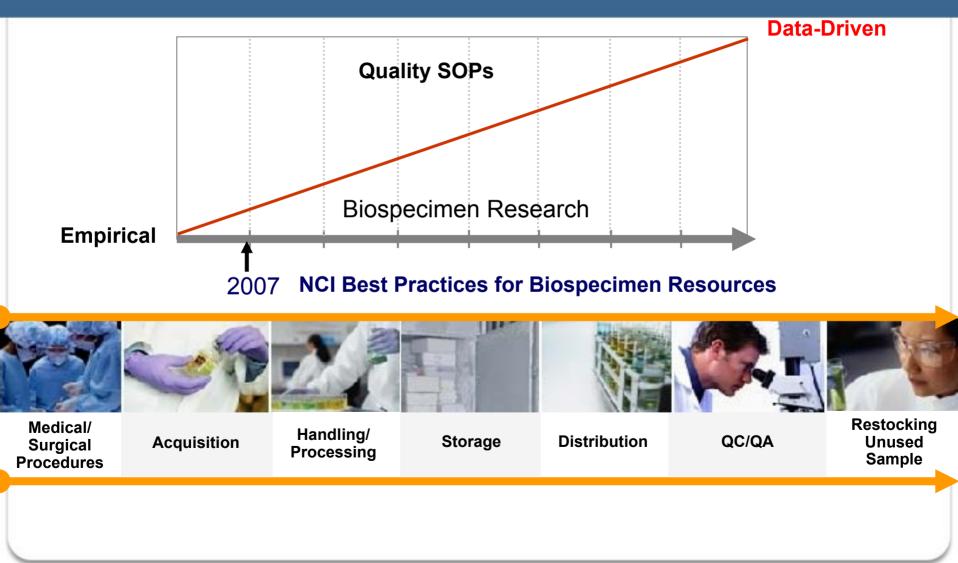
# The Potential Complexity of the Picture



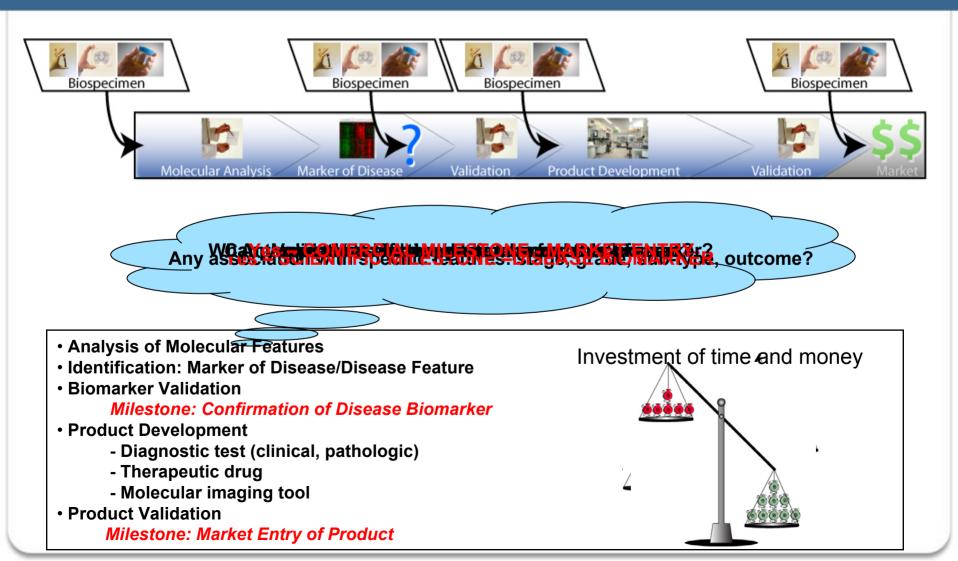
### The BRN: Supporting Collaborative Research OBBR Office of Biorepositories and Biospecimen Research

- Making accessible what we already know:
  - The Biospecimen Research Database: A web tool to make existing and emerging biospecimen research data more accessible
  - 1<sup>st</sup> Annual OBBR Symposium, March 2008: "Advancing Cancer Research through Biospecimen Science"
  - 2<sup>nd</sup> Annual OBBR Symposium, March 16-18, 2009
- Generating new research data on what we don't yet know:
  - New Extramural Programs to fill in the ice-cube tray: BAA out now (FedBizOpps); RFP coming soon (mid November)
  - Innovative Molecular Assessment Technologies (IMAT) Program innovative technologic solutions for biospecimens (IMAT Sample Preparation RFA)
  - OBBR Intramural Biospecimen Research Laboratory to support biospecimen research for NCI strategic initiatives (TCGA; CPTAC)

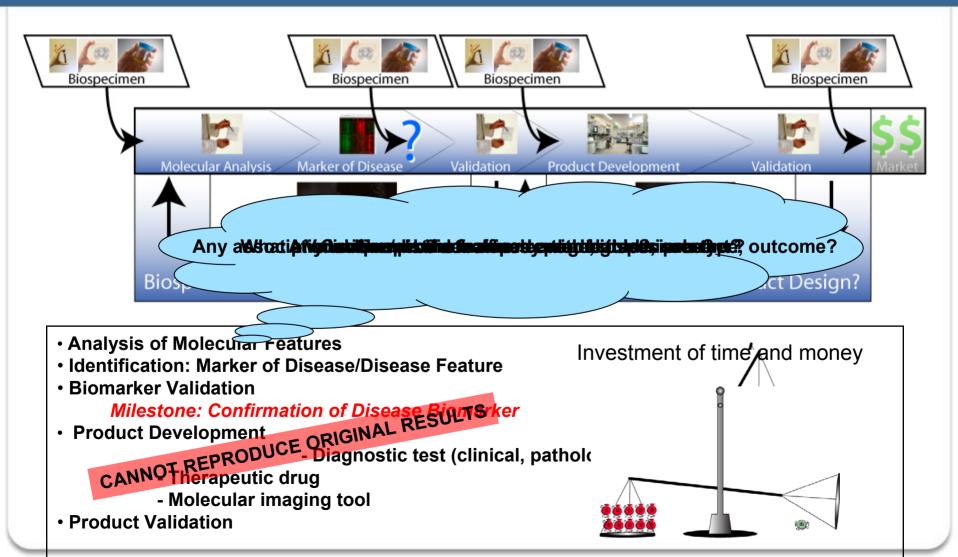
# Pathway to Scientifically Validated Specimen Handling Practices



# **Developing Cancer Solutions with High-Quality Biospecimens**



### **Developing Cancer Solutions with Biospecimens of Unknown Quality**



On the Road to Molecular Medicine.....

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# "If you don't have time\* to do it right, when will you have time\* to do it over?"

- UCLA Basketball Coach, John Wooden

\* money

\* resources

#### "Priorities for Personalized Medicine"

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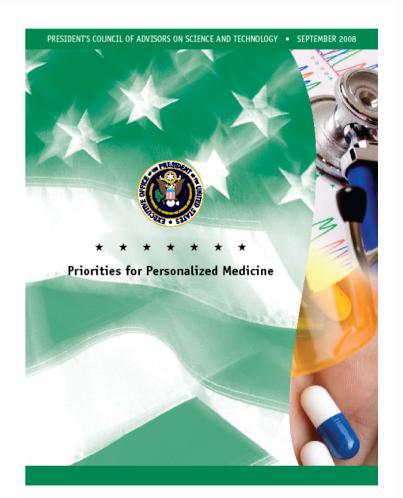
•"The Council believes that the convergence of scientific opportunity and public health need represented by personalized medicine warrants significant public and private sector action to realize the development of a promising class of new medical products."

•Genomics-based molecular diagnostics were determined to have the greatest potential for accelerating progress in personalized medicine; 3 areas of policy development needed:

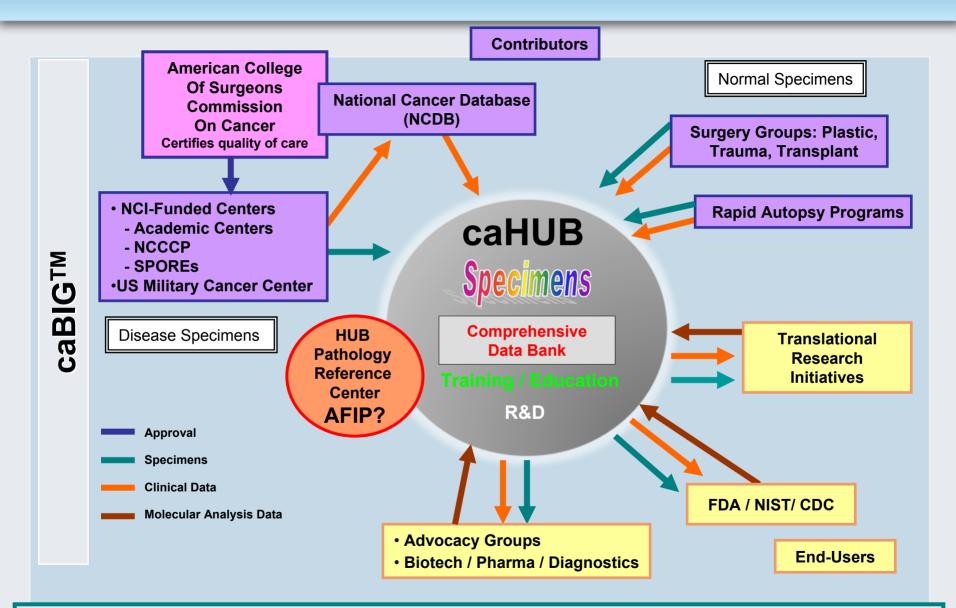
- Technology/tools
- Regulation
- Reimbursement

•<u>Key Translational Tools</u>, <u>Recommendation 2a</u>: Create a national network of standardized biospecimen repositories

> NCI efforts and OBBR guidelines (Best Practices) specifically cited



# caHUB (<u>Ca</u>ncer <u>HU</u>man <u>B</u>iobank)



caHUB: UNIQUE • HIGH QUALITY SPECIMENS • HIGH QUALITY DATA • FROM PTS WHO RECEIVED HIGH QUALITY CARE

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