

Director's Update

Francis S. Collins, M.D., Ph.D.
Director, National Institutes of Health
Council of Councils Meeting
September 7, 2018



Changes in Leadership

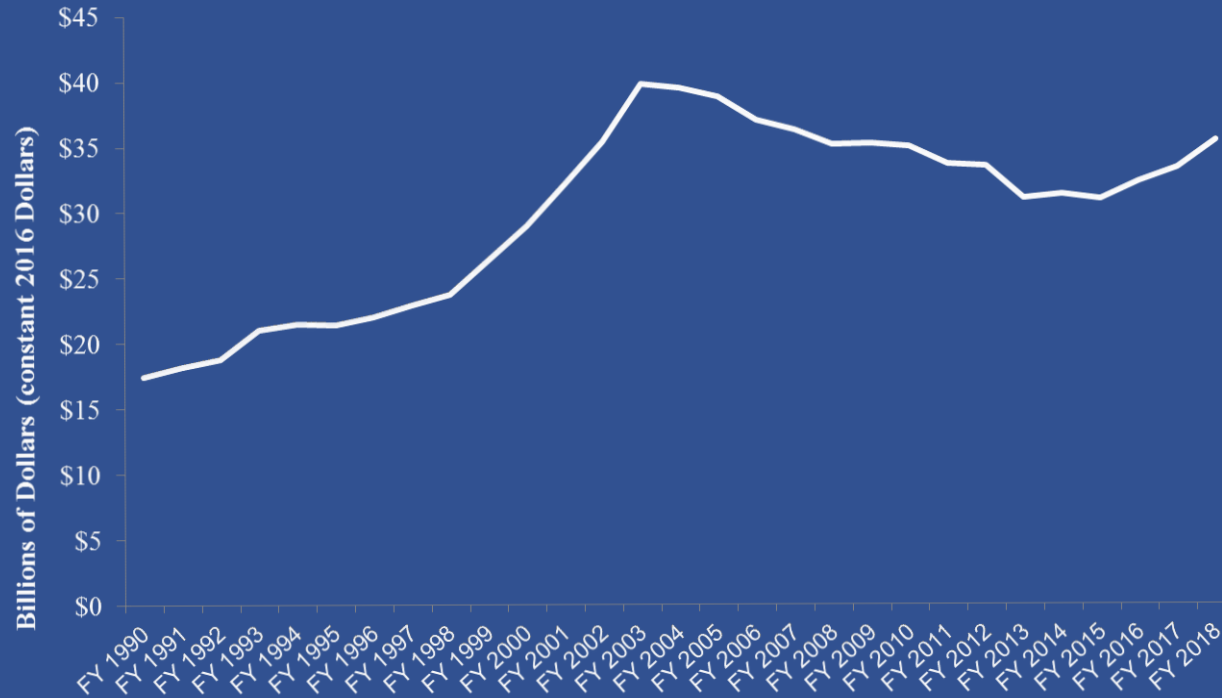
■ Retirements

- Patricia Grady, Ph.D., R.N., FAAN, Director of the National Institute of Nursing Research (August 31, 2018)
- James Battey, Jr., M.D., Ph.D., Director of the National Institute on Deafness and Other Communication Disorders (June 1, 2018)

■ New Hires

- Helene M. Langevin, M.D., C.M., Director of the National Center for Complementary and Integrative Health (November 2018)
- Bruce Tromberg, Ph.D., Director of the National Institute of Biomedical Imaging and Bioengineering (January 2019)

National Institutes of Health Funding 1990-2018

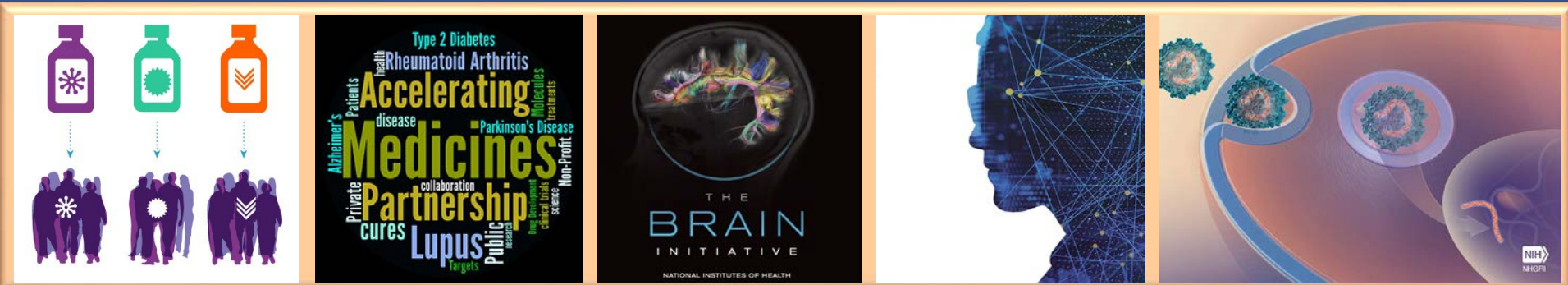


Note: Dollar values are adjusted to 2016 dollars using the Biomedical Research and Development Price Index (BRDPI), <http://officeofbudget.od.nih.gov/gbiPriceIndexes.html>.

Source: NIH Office of Extramural Research and Office of Budget source data (February 2, 2018).

Topics for Today

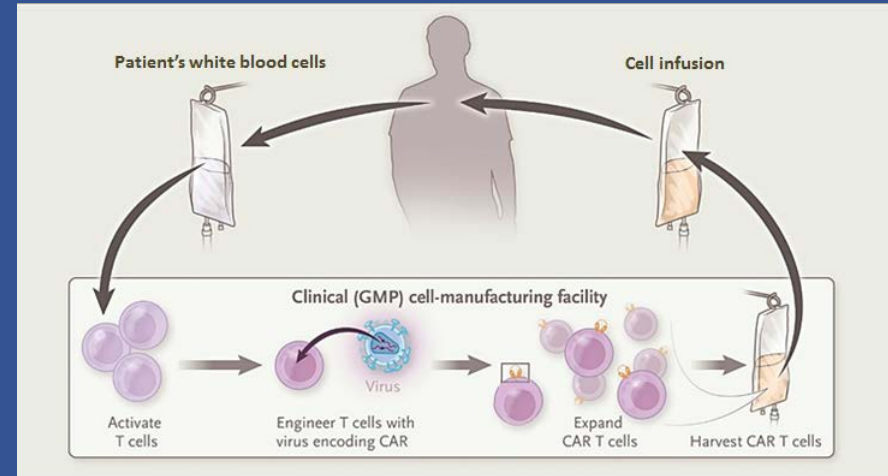
- Precision Medicine and Cancer
- Accelerating Medicines Partnership
- NIH BRAIN Initiative
- Artificial Intelligence
- Gene Therapy



Cancer Genomics: Advancing Precision Medicine

- NCI's Molecular Analysis for Therapy Choice (NCI-MATCH) trial:
 - Are targeted therapies effective, regardless of cancer type?
 - Multiple treatment arms target specific mutations
 - Tumors sequenced; patient matched to study arm
 - Milestone: results from three study arms published
- Cancer immunotherapy

NATIONAL CANCER INSTITUTE
PRECISION MEDICINE
IN CANCER TREATMENT



Cancer Moonshot: PACT

REVIEW ARTICLE

The Cancer Journal • Volume 24, Number 3, May/June 2018

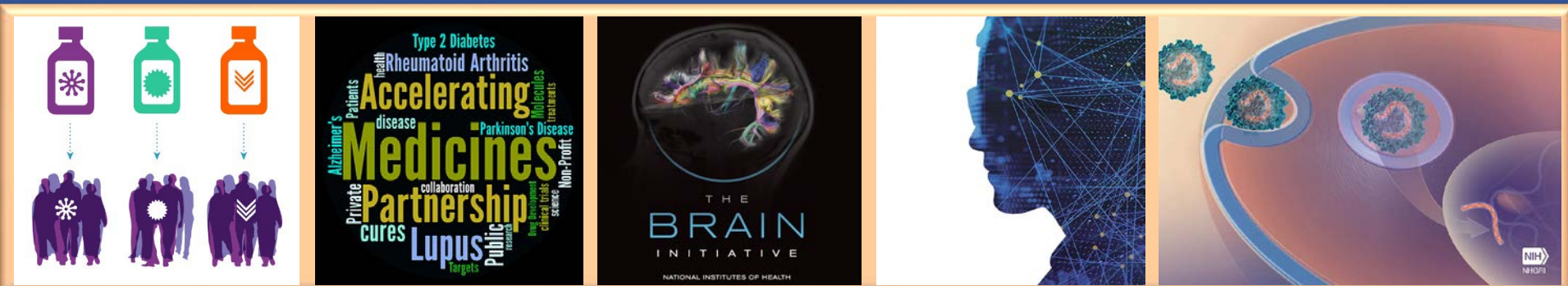
The Partnership for Accelerating Cancer Therapies

Rebecca G. Baker, PhD, Axel X. Hoos, MD, PhD,† Stacey J. Adam, PhD,‡ David Wholley, M.Phil,‡
James H. Doroshow, MD,§ Douglas R. Lowy, MD,§
Lawrence A. Tabak, DDS, PhD,* and Francis S. Collins, MD, PhD**

- 5-year, \$220M precompetitive public-private research partnership between NIH, FDA, FNIH, 12 companies
- Aims to speed development of immunotherapies for more types of cancer and more cancer patients

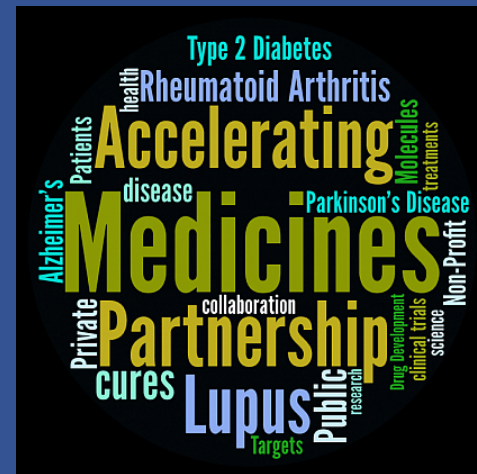
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AMP: Overview

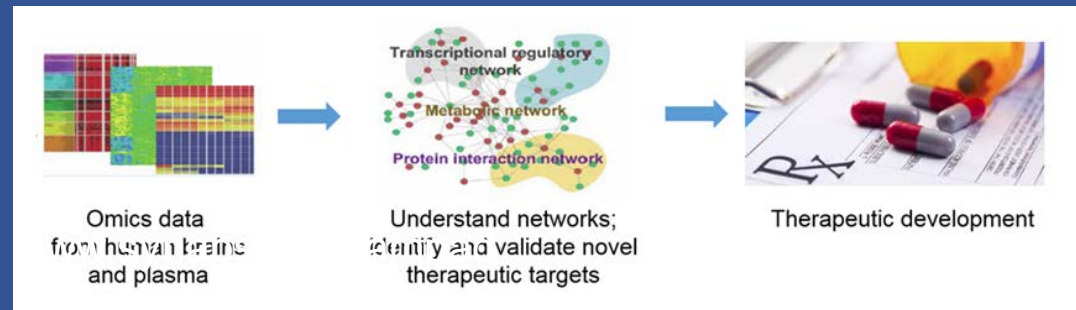
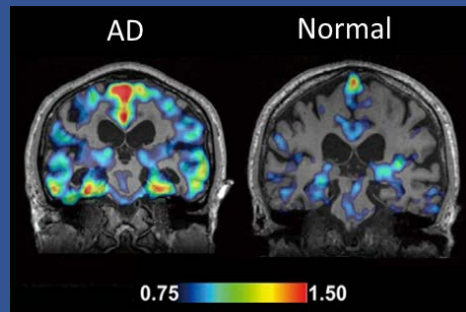
- NIH partnering with FNIH, FDA, 12 biopharmaceutical firms, multiple non-profits (including patient advocacy groups), to:
 - Increase the number of new diagnostics, therapies
 - Reduce time, cost of developing them
- Investing >\$350M over five years on four projects:
 - Alzheimer's disease
 - Type 2 diabetes
 - Rheumatoid arthritis/Lupus
 - Parkinson's Disease
- Project management provided by FNIH



AMP: Alzheimer's Disease (AMP-AD)

\$225M program aiming to shorten the time between discovery of potential drug targets and development of new AD drugs

- Projects:
 - Biomarkers
 - Target Discovery and Preclinical Validation
- Data available on AMP-AD Knowledge Portal



AMP: Type 2 Diabetes (AMP-T2D)

\$59M+ program to link human genetic and phenotypic data to identify novel drug targets for T2D and its complications

- Knowledge Portal – online library and discovery engine – launched 2015
 - Integrates diverse genomic, clinical, molecular data – all confidential
 - Anyone with Google account can query
 - 38 datasets; 68 traits*
- Knowledge Portal Network provides genetic data on complex diseases



www.type2diabetesgenetics.org

AMP: Rheumatoid Arthritis and Systemic Lupus Erythematosus (AMP-RA/SLE)

\$42M+ program for single cell analyses of kidney and synovial biopsies from patients with SLE or RA

- Prioritized single-cell RNA profiling of as many tissue samples as possible
 - Existing funds provide for collection, not analysis
- Proposal: “Year 6” for additional high-priority analyses for discovery and biomarkers for patient stratification (~\$8M)
 - Discovery: additional analyses of tissue cells
 - Biomarkers: analyses of paired blood, urine, skin (SLE)

SLE Kidney: scRNAseq reveals comprehensive clusters of tissue resident and disease-specific immune cells

RA Synovium: Integration of histology and scRNAseq data identifies three disease subtypes



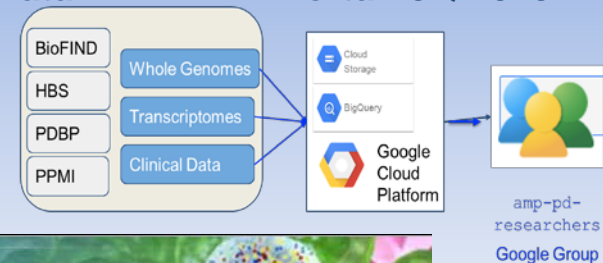
AMP: Parkinson's Disease (AMP-PD)

Launched January 2018

\$24M program to identify and validate diagnostic, prognostic, progression biomarkers

- Establish framework; develop knowledge portal
 - Gather, incorporate wealth of extant data; add new data
- Use portal to identify most promising biomarkers for new treatments
- Validate biomarkers – incorporating additional data as needed
- *Goal:* make long-needed progress in developing effective PD treatments

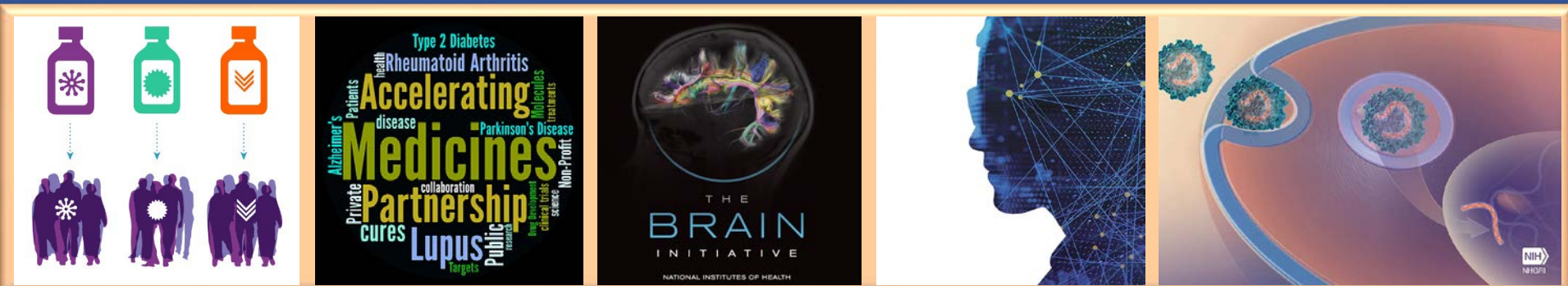
Data in AMP PD Portal: 3Q 2019



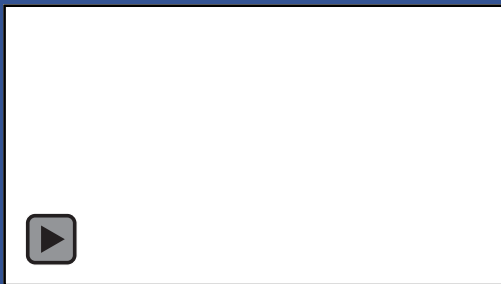
ACCELERATING MEDICINES PARTNERSHIP (AMP)

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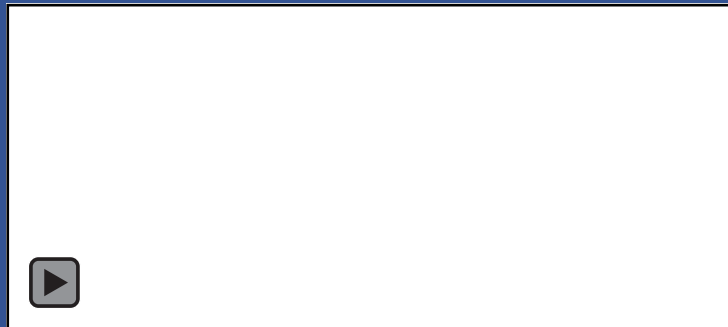


Recent BRAIN Advances



*Zebrafish larva's brain wiring –
reconstructed from 16,000 slices*

PIs: F. Engert, J. Lichtman; Harvard



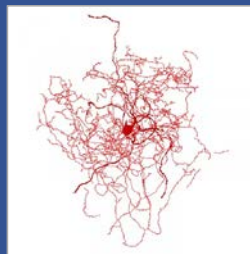
*Non-toxic cellular imaging method developed –
enables long-term study of neural circuits in mice.*

PI: I. Wickersham, MIT



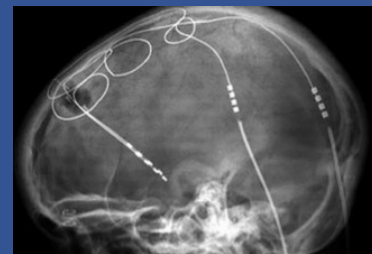
*Nanoscale neural probes created to avoid
immune response from body.*

PI: C. Chestek, U. Michigan



*New kind of brain cell
discovered: rosehip neuron.*

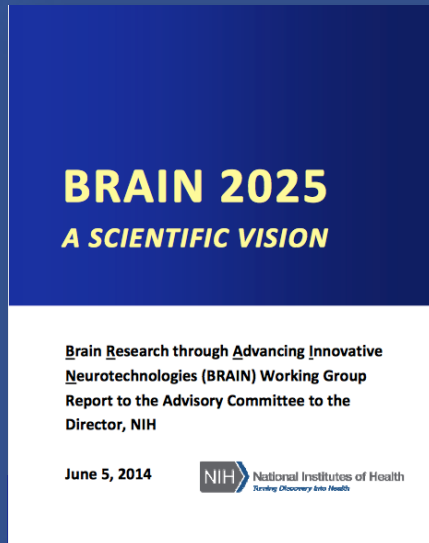
PI: E. Lein, Allen Institute



*Deep brain stimulation improved to
incorporate feedback, adjust
stimulation from pacemaker.*

PI: P. Starr, UCSF

NIH and the U.S. BRAIN Initiative



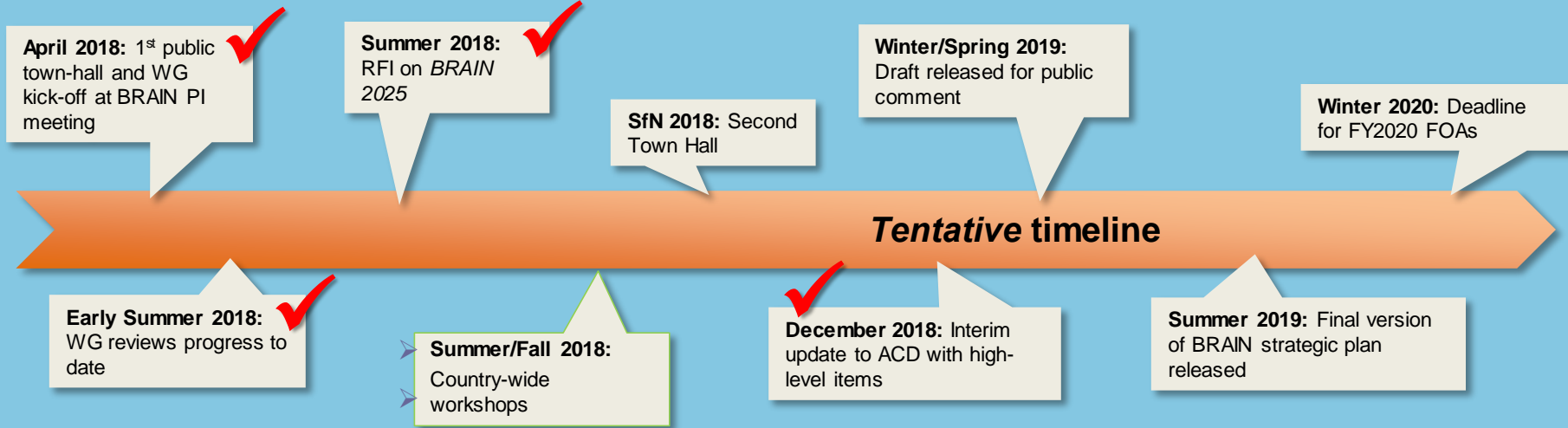
- A focus on circuits, networks
- Measure fluctuating electrical, chemical patterns within circuits
- Understand how all of this
 - Helps generate our thoughts, actions
 - Improves diagnosis, treatment of disorders

www.braininitiative.nih.gov

Rapid scientific progress →
New NIH ACD BRAIN Initiative Working Group “2.0”

ACD WG 2.0 Timeline and Deliverables

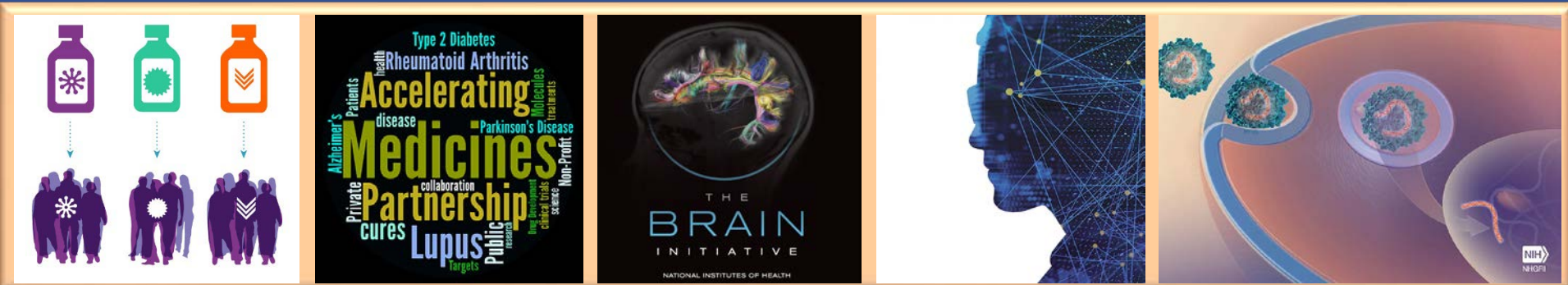
Estimated Timeline for ACD BRAIN WG effort:



- **Goals for new WG:**
 - Update scientific vision laid out in BRAIN 2025 to guide 2nd half of Initiative
 - Identify valuable areas of new and continued technology development
 - Consider the Initiative's unique contributions

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ARTIFICIAL INTELLIGENCE

A program that can sense, reason,
act, and adapt

MACHINE LEARNING

Algorithms whose performance improve
as they are exposed to more data over time

DEEP LEARNING

Subset of machine learning in
which multilayered neural
networks learn from
vast amounts of data



NIH WORKSHOP

Harnessing Artificial Intelligence and Machine Learning to Advance Biomedical Research

JULY 23, 2018



National Institutes of Health
Turning Discovery Into Health

#2018biomedAI

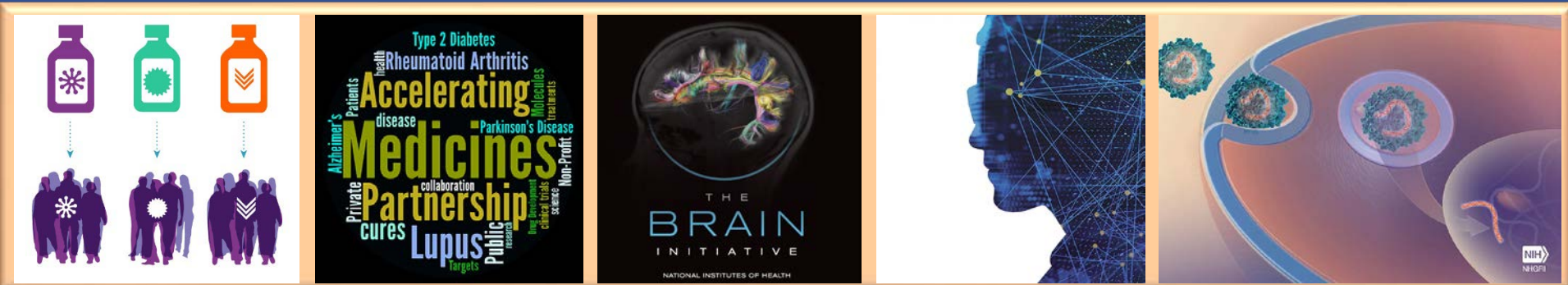


NIH @NIH · Jul 23

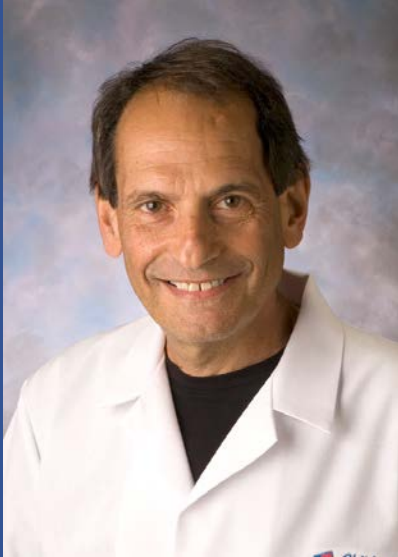
We don't want #2018biomedAI to end here. We want it to have legs, and aim to build an advisory committee working group to keep the momentum going. - @NIHDirector

Topics for Today

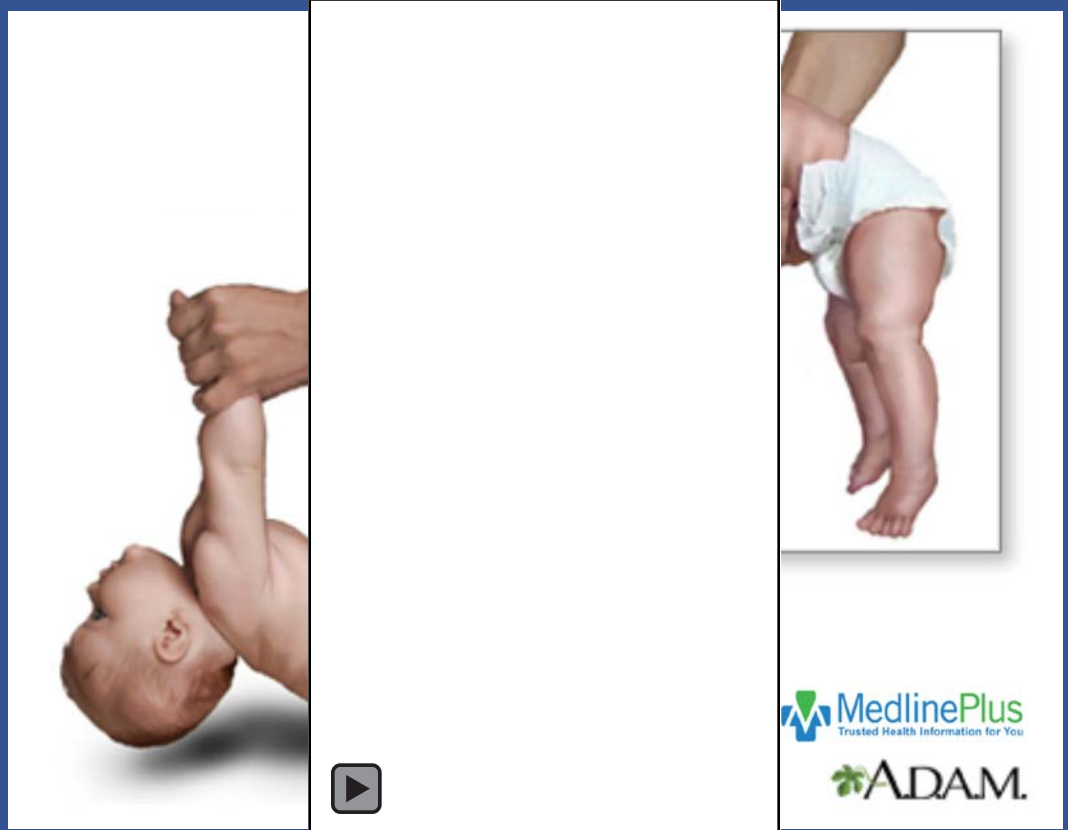
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Gene Therapy for Spinal Muscular Atrophy



Jerry Mendell/Nationwide
Children's Hospital,
Columbus, OH

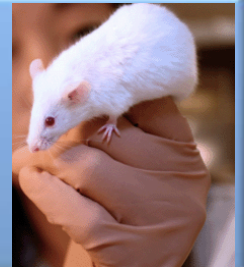
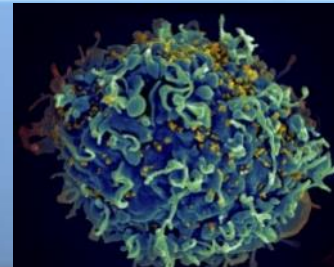
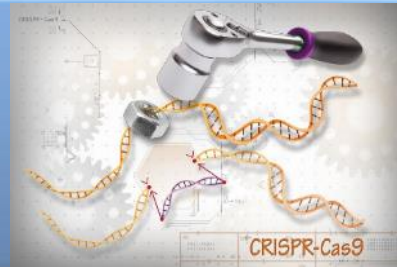


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Trusted Health Information for You

 **ADAM**

CRISPR-Cas9 and Gene Editing

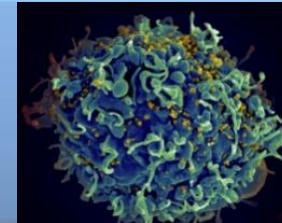
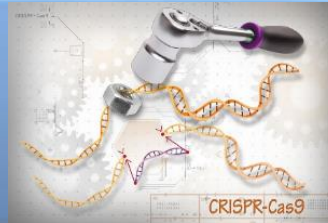
- Basic science advance: from studies of yogurt, bacteria viruses
- Achieves targeted editing of genomes with enzyme (cas9) + guide RNA
 - Initial approaches created knockouts
 - Newer technologies can correct point mutations
- Producing mouse models has been greatly accelerated
- Has revolutionized basic molecular biology



Toward the 1st Cure for the 1st Molecular Disease?

Sickle Cell Disease (SCD)

- 1910: Disease described
- 1949: Inheritance shown to be recessive
- 1957: Genetic basis determined
- 1980: Hemoglobin genes cloned
- 1998: Hydroxyurea, first approved SCD drug
- *Recently*: Bone marrow transplants, but few patients have match
- *Today*: Gene transfer via viral vectors
- *Today*: CRISPR-Cas gene editing



First CRISPR Clinical Trial Backed by U.S. Companies Launched

NIH U.S. National Library of Medicine

ClinicalTrials.gov

A Safety and Efficacy Study Evaluating CTX001 in Subjects With Transfusion-Dependent β -Thalassemia

Study Description

Brief Summary:

This is a single-arm, open-label, multi-site, single-dose Phase 1/2 study in up to 12 subjects 18 to 35 years of age with transfusion-dependent β -thalassemia (TDT), non- β^0/β^0 . The study will evaluate the safety and efficacy of autologous CRISPR-Cas9 Modified CD34+ Human Hematopoietic Stem and Progenitor Cells (hHSPCs) using CTX001.

Condition or disease ⓘ	Intervention/treatment ⓘ	Phase ⓘ
Beta-Thalassemia	Biological: CTX001	Phase 1
Thalassemia		Phase 2
Genetic Diseases, Inborn		
Hematologic Diseases		
Hemoglobinopathies		

New NIH Program: Somatic Cell Genome Editing

Program will:

- Speed development of safe, effective editing tools for human patients
- Make tools widely available to researchers
- Reduce time, cost to develop new therapies



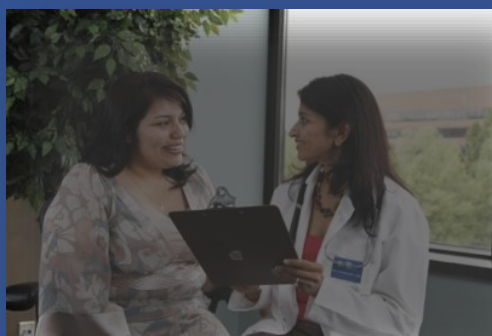
Francis S. Collins @NIHDirector · 8:03 AM · 25 Jan 2018
I just announced this at #wef18: #NIH's Somatic Cell Genome Editing research program will focus on accelerating dramatically the translation of technologies like CRISPR/Cas9 for treatment of as many genetic diseases as possible.
bit.ly/2F78HBI #CFGenomeEditing



NIH to launch genome editing research program

Somatic Cell Genome Editing aims to develop tools for safe and effective genome editing in humans.

nih.gov



NIH... *Turning Discovery Into Health*

www.nih.gov/hope

directorsblog.nih.gov

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