

Outcomes of an NIH-CDC Workshop on Personal Genomics (Dec. 2008)

W. Gregory Feero, M.D., Ph.D. Senior Advisor to the Director for Genomic Medicine NHGRI, NIH

Context:

- Personal genome-wide scans have become very inexpensive, and directly available to the public.
- Research discoveries from genome-wide association studies are being leveraged to provide consumers with interpretations of their genotypes within days of publication.

Context:

• There is vigorous debate about how (and when) to translate research discoveries from genome-wide association studies to health applications.



Informed consent?

The Spectrum of Genetic Testing



Rare disorders: Huntington's disease



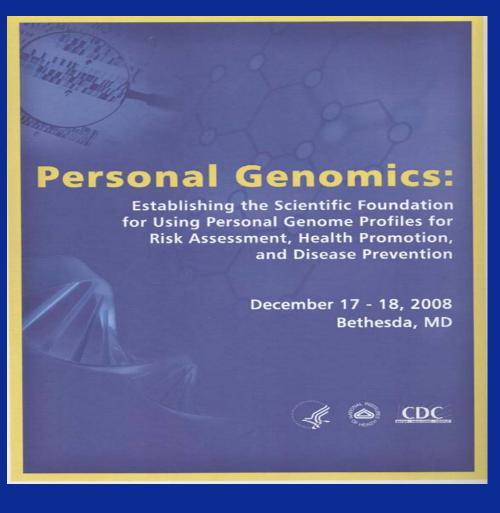
Prenatal screening:Expression profiling:Cystic fibrosisBreast cancer

Genome scans: Complex disease risk

Cancer syndromes:
BRCA1Pgx:
Abacavir
hypersensitivityPgx:
Warfarin
metabolismTreatment selection:

EGFR/breast cancer





Sponsors:

NIH – National Cancer Institute, National Heart, Lung and Blood Institute, National Human Genome Research Institute CDC – National Office of Public Health Genomics

Meeting:

- 2 day event approximately 100 attendees
- About 40 speakers/panelists
- Diverse perspectives government, academia, industry
- Presentations and mediated "discussion"

Day 1

 I. Genome Profiles, Risk Assessment, and Personalized Health: The Basics (Downing, HHS)
 II. The Scientific Foundation For Which Genetic Variants Should be Included in Genome Profiles: The Credibility of Genetic Associations (Manolio, NHGRI) Personal Genomics: Establishing the Scientific Foundation (cont.) Day 1 (con't) III/ IV. The Scientific Foundation for Establishing Clinical Validity and Utility of Genome Profiles (Wanke, OBSSR; Greene, NCI)

Day 2

V. Case Studies and General Discussion of Clinical Validity and Utility (Lauer, NHLBI)
VI. Models for Conduction Translational Research on Genome Profiles (Feero, NHGRI)
VII. Panel Discussions and Next Steps for Research and Practice Agenda

Consensus paper in preparation with key recommendations:

 Develop and implement industry-wide scientific standards for personal genomics More later from A. Miller.

2. Develop and implement a multidisciplinary research agenda

A variety of perspectives/expertise including genetic epi., clinical, behavioral, public health must be brought to bear to study complex research, clinical, and public health issues. Consider novel public/private partnerships (e.g. GappNet)

3. Enhance credible knowledge synthesis and dissemination of information to providers and consumers

Public, health care providers, and policy makers require unbiased sources of information that are updated and made fully accessible (cost, literacy).

4. Link scientific research on validity and utility to evidence-based recommendations for use of personal genomic tests
Public, health care providers, and policy makers need unbiased recommendations on when and how to act on proposed health applications of genomics (EGAPP).

5. Consider the value of personal utility

Personal genomic information may have value to individuals beyond reducing morbidity and mortality. Objective measures are needed to incorporate into research to better understand personal utility.

Agenda and slides are available at:

http://cancercontrol.cancer.gov/od/phg/works hop.html#agenda