

# CIHR and Precision Medicine: Personalized Health



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Canada 

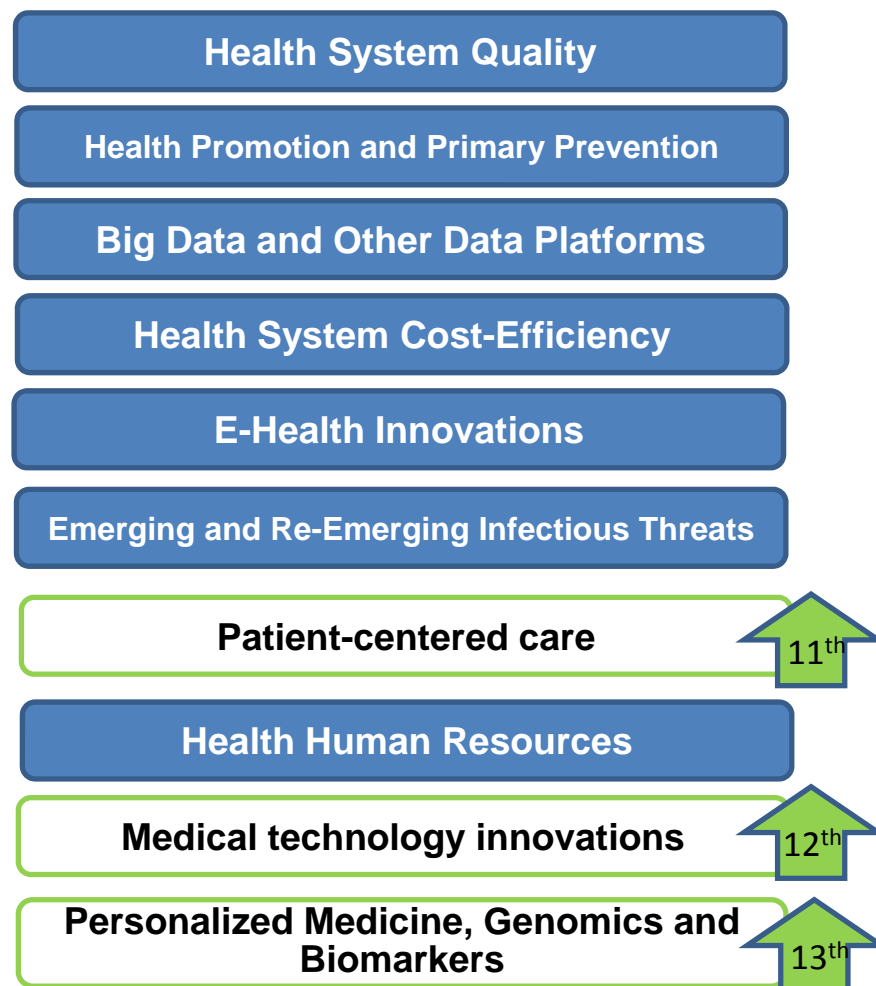
# Health and Health Research Priorities

## Top 10 Global Trends

### Baseline 2010-13



### 2014



Enhance health outcomes through patient stratification approaches by integrating evidence-based medicine & precision diagnostics into clinical practice

Develop & translate discoveries

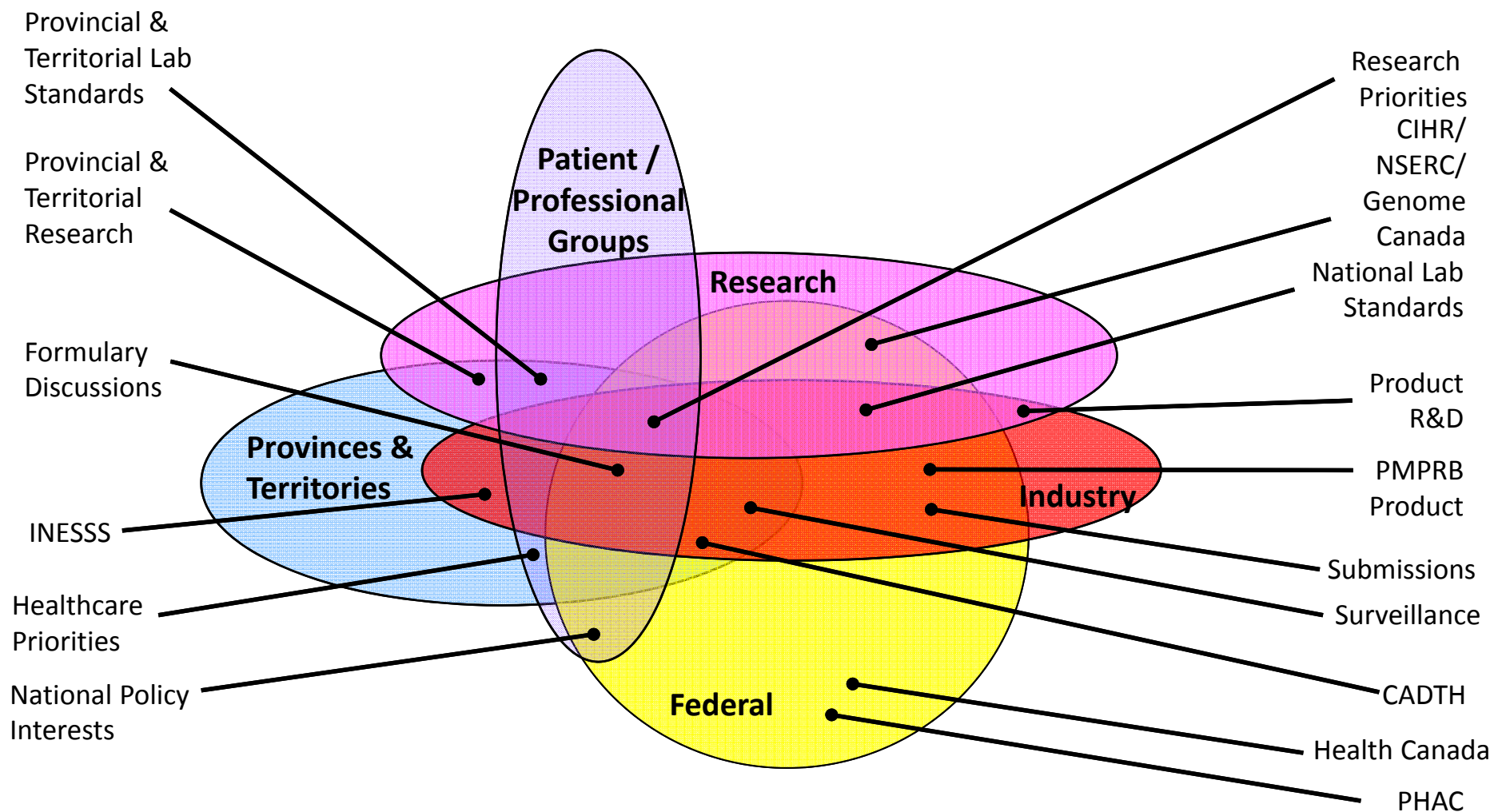
Support policy & practice

Biomarkers, targets & genomic signatures

Diagnostics & innovative devices for clinical use

Improve the evidence base on how to assess & integrate innovative diagnostics & therapeutic approaches into practice

# Canadian Personalized Medicine Stakeholder and Variable Map



# CIHR's Personalized Medicine Signature Initiative: Investment and Partnership Summary

Initial business case  
\$100,100,000  
(2010-2011 – 2018-2019)

Current total and planned  
\$242,875,777  
(2010-2011 – 2018-2019)

## Partnerships

# of External Competition Partners: 39  
# of External Applicant Partners: 76  
# of Partnership Events: 5

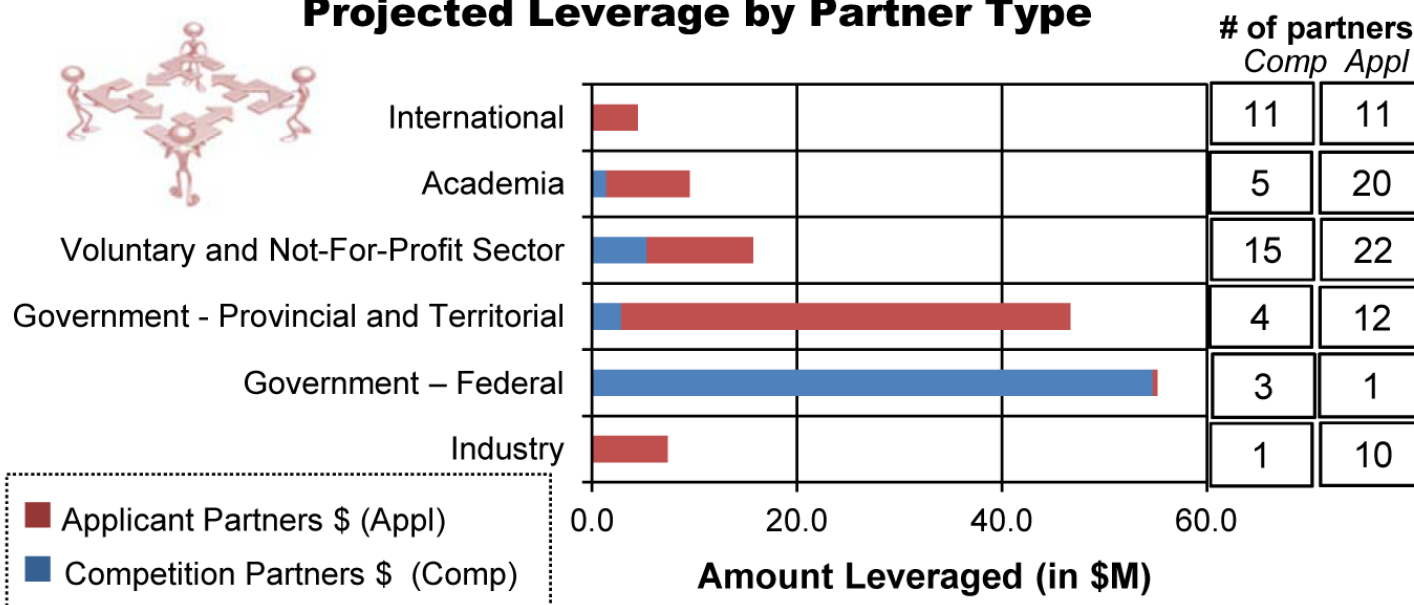
Projected Commitments: \$ 156,715,055  
Projected Leverage Ratio: 1 : 1.82

**Firm Partner Commitments:** \$ 147,215,05

**Current Partner Leverage Ratio:** 1: 1.78

*(From funded opportunities only, incl. Applicant Partners)*

### Projected Leverage by Partner Type



# Genomics and Personalized Health: 2012 Large-Scale Applied Research Project Competition



CIHR IRSC

**CIHR/Genome Canada partnership:** One of the most significant public sector investments in Personalized Medicine

- Research projects span various areas including cancer, rare diseases, epilepsy, inflammation, HIV, cardiovascular disease and autism



GenomeCanada

**Investment:** over \$165M

- \$68.8M CIHR (IG, ICR, INMHA, III, INMD, IHSPR, and initiatives) /GC investment with more than 1:1 match from outside sources

**Projects funded:** 17

- 15 large-scale applied research projects with integrated GE3LS
- 2 large-scale GE3LS research projects
- E.g., Rioux, John D - IBD Genomic Medicine Consortium (iGenoMed): translating genetic discoveries into a personalized approach to treating the inflammatory bowel diseases

## Foster international collaboration in rare diseases research

- ✓ Deliver 200 new therapies for rare diseases and
  - 155 as of September 18<sup>th</sup>
- ✓ Means to diagnose most rare diseases by the year 2020
  - About 3500 as of September 18<sup>th</sup>



**IRDiRC**

INTERNATIONAL  
**RARE  
DISEASES  
RESEARCH**  
CONSORTIUM

- 43 funding members (including E-Rare) & 3 invited patient advocacy groups
- Minimal commitment: US\$10 million over five years in research projects contributing towards the goals of IRDiRC
- CIHR & Genome Canada joint commitment of \$25 million to IRDiRC while the
- Total pledges of the consortium nearly \$2 billion



CIHR IRSC



**Genome**Canada

## Mission

- To provide the community at large with a comprehensive set of information to contribute to the improvement of the diagnosis, care and treatment of patients with rare diseases.

## National objectives are to

- Create a national entry site to communicate at the national level on activities of the national Orphanet team, rare disease events, and rare disease policies in the country
- Comprehensively document resources available in Canada: expert centers, medical laboratories, patient organisation, research projects, clinical trials, and registries and biobanks
- Outreach to all stakeholders of the Orphanet-Canada project and facilitate exchanges between group of stakeholders

Resource	Completed	Expected
Clinics	47	-
Diagnostic tests	487	25
Patient Organizations	78	135
Clinical Trials	27	34+
Registries	8	16
Research Projects	148	155



CIHR IRSC

orphanet

<http://www.orpha.net>



# Rare Diseases Research Catalyst Network



## Creation of a national network organized to:

- Identify Canadian model expertise relevant to newly discovered human disease genes
  - Funded research projects focus on functional validation
- Enhance clinical translation
  - Develop and implement innovative knowledge translation strategies/activities to link clinical genetics & model research communities

**Investment:** \$2.3 M CIHR-IG in partnership with GC

Principal Investigators	Title of Project
Philip A. Hieter (UBC) Kym Boycott (CHEO) Janet Rossant (SickKids)	Canadian "Rare Diseases: Models & Mechanisms" Network (RDMM)

[http://webapps.cihr-irsc.gc.ca/cfdd/db\\_search?p\\_language=E&p\\_competition=201404RCN](http://webapps.cihr-irsc.gc.ca/cfdd/db_search?p_language=E&p_competition=201404RCN)



## Repurposing Research in Rare Diseases: Cures Within Reach/CIHR Collaborative Funding Program

- **Goal:** to support efforts on proof of concept clinical trials repurposing human approved drugs for new disease indications
- **Proposal requirements:**
  - generate clear deliverables with immediate applications, including off-label use, for rare diseases management;
  - propose novel (evaluation criteria to lower projects that have been done) proof of concept clinical trials involving, multiple clinical sites in Canada and the United States of America, and;
  - propose an adequate development plan to ensure the realization of the expected benefits.
- **Budget:** \$1.5M USD (CIHR and CWR)/3 years

# Personalized Medicine cuts across Roadmap II's Four Strategic Research Priorities

Strategy for Patient-Oriented Research (SPOR)

Big Data-Health Data initiatives

Canadian Epigenetics, Environment and Health Research Consortium (CEEHRC)

**\*Personalized Medicine**

Environments and Health

**RESEARCH PRIORITY A:**  
*Enhanced patient experiences and outcomes through health innovation*

**RESEARCH PRIORITY B:**  
*Health and wellness for Aboriginal peoples*

**RESEARCH PRIORITY C:**  
*A healthier future through preventive action*

**RESEARCH PRIORITY D:**  
*Improved quality of life for persons living with chronic conditions*

Pathways to Health Equity for Aboriginal Peoples

Canadian HeLTI cohort – Indigenous Peoples

\*\*Targeted indigenous peoples' health research funding pools in many other initiatives

e-Health Innovations

## Enablers for Precision Medicine: Strategy for Patient-Oriented Research (SPOR)

- Coalition of federal, provincial and territorial partners (patients, researchers, health care providers, provincial health authorities, academic health centres, charities, pharmaceutical sector, etc) dedicated to the integration of research into care
- Fostering evidence-informed health care by bringing innovative diagnostic and therapeutic approaches to the point-of-care
- Effecting changes to health care policies and practices



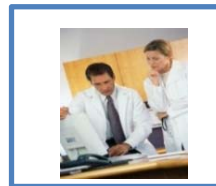
# SPOR - Critical Elements to enhance Integration of Research and Care



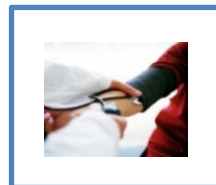
*Patient-Oriented Research and Knowledge Translation Networks*



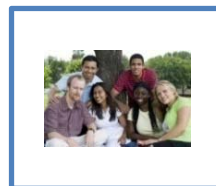
*Support for People and Patient-Oriented Research and Trials (SUPPORT) Units*



*Training and Career Development*



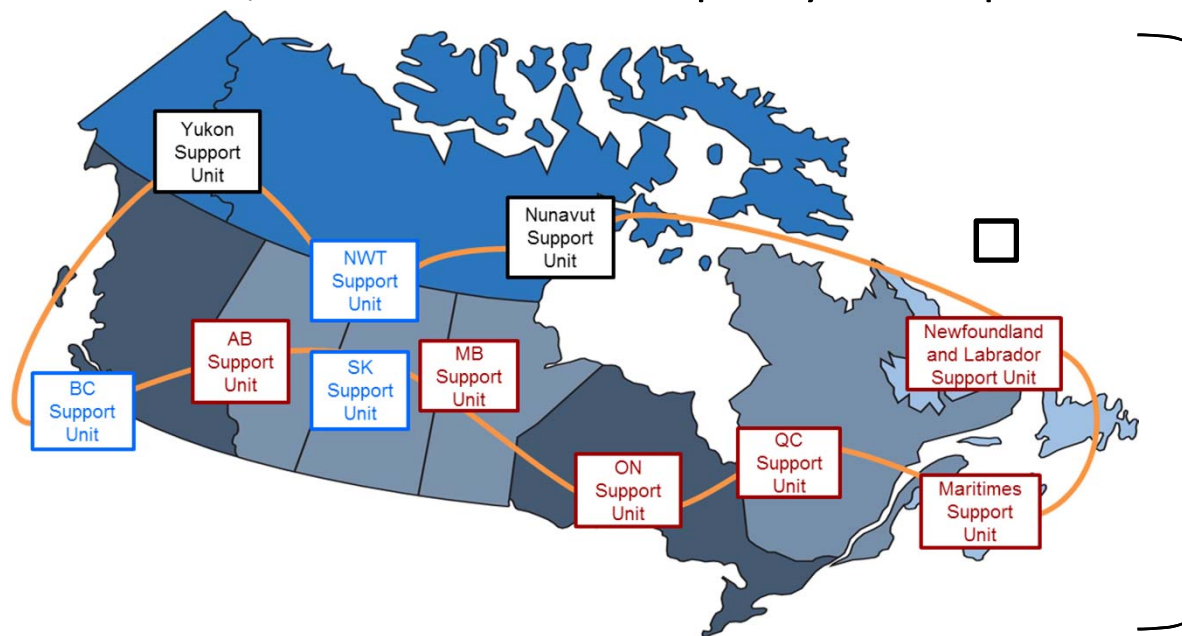
*Improving the Environment for Clinical Research*



*Patient / Consumer Involvement and Engagement*

# SPOR: SUPPORT Units and Networks

**SUPPORT Units:** provincial, territorial or regional centres providing support and expertise on data access, methodological and research services, knowledge translation, clinical trials and capacity development

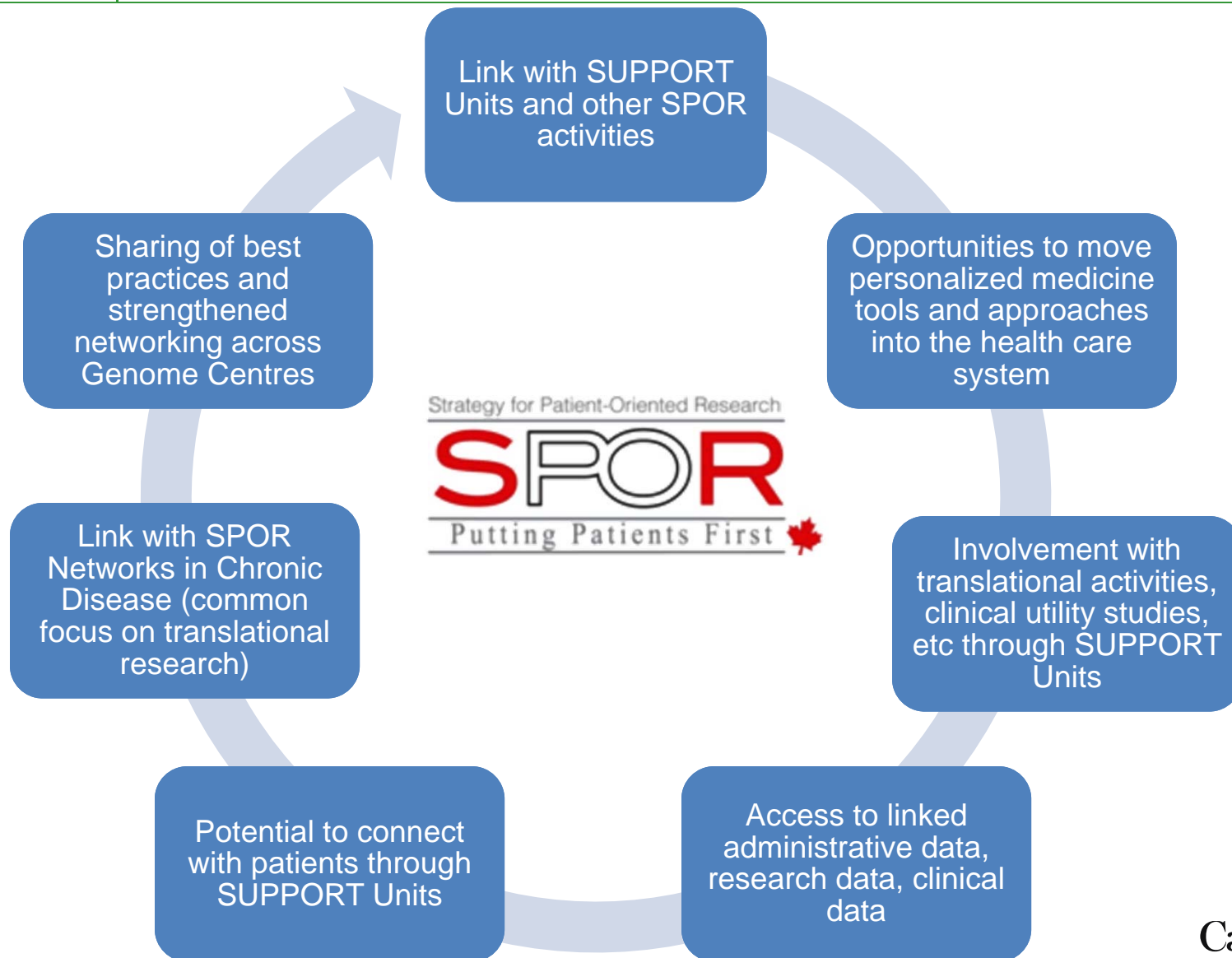


- specialized and multidisciplinary methodological expertise
- biostatistical analyses
- linked administrative databases, patient and treatment registries, drug information systems, electronic health records, and other data

## SPOR Networks

- 1) Youth and Adolescent Mental Health
- 2) Primary and Integrated Health Care Innovations
- 3) Chronic Disease (5 awarded in February 2016)

# SPOR: Enabling Personalized Medicine



# Data Strategies and Policies: Enabling Personalized Medicine

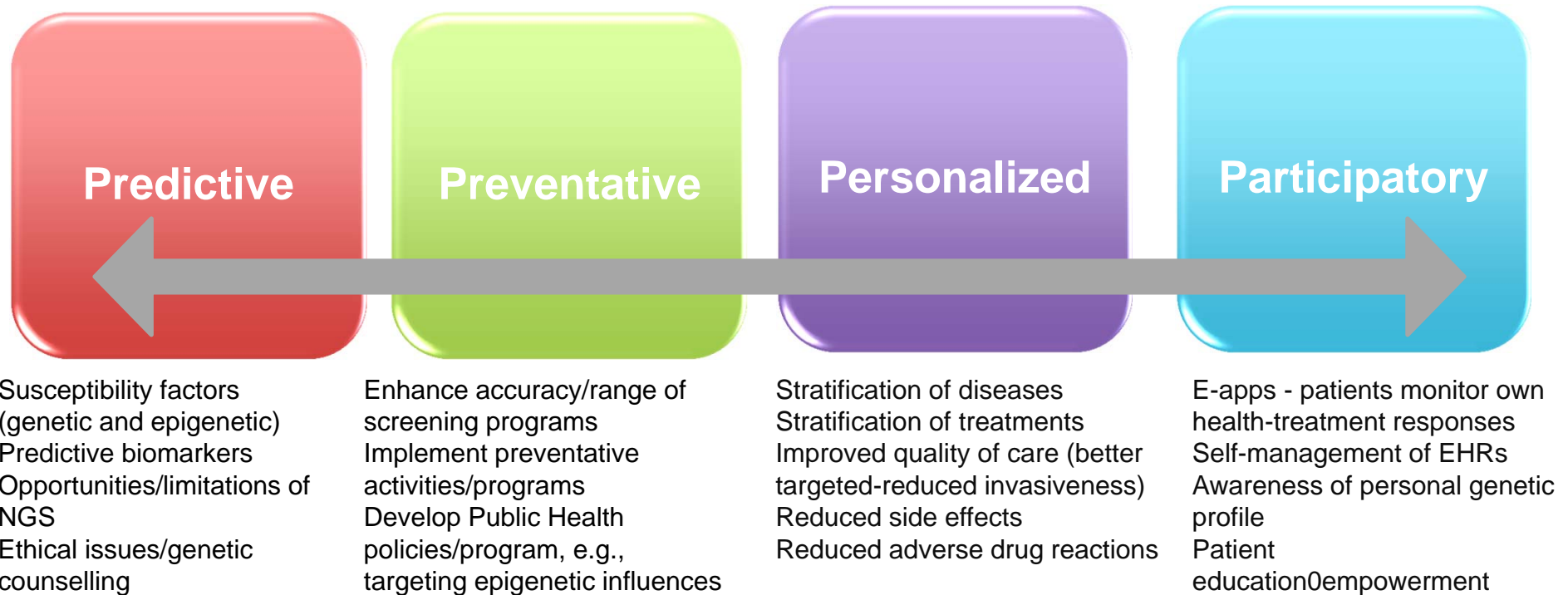
## CIHR is leading and contributing to many open science/open data activities...

Examples	Strategic Opportunities
<ul style="list-style-type: none"> <li>- Open Government / Open Science</li> <li>- National Strategy for Bioinformatics &amp; Computational Biology</li> </ul>	<p>Focus on increasing and enhancing:</p>
<ul style="list-style-type: none"> <li>- Tri-Agency Open Access Policy on Publications</li> <li>- Tri-Agency Statement of Principles on Digital Data Management</li> <li>- Acting upon the CCA report on Timely Access to Health Data</li> </ul>	<p>Better data attributes</p> <p>Data management</p> <p>Data access</p>
<ul style="list-style-type: none"> <li>- Data components within CIHR Signature Initiatives (e.g., eHealth, Environments &amp; Health, CLSA, CCNA, SPOR SUPPORT Units, Epigenetics, Personalized Medicine)</li> </ul>	<p>Data linkage</p> <p>Infrastructure and tools</p>
<ul style="list-style-type: none"> <li>- Canadian Research Data Centre Network</li> <li>- Global Alliance for Genomics and Health</li> <li>- Advancing Big Data Science in Genomics Research</li> <li>- Cancer Genome Collaboratory</li> <li>- Sharing Big Data for Biomedical Discovery</li> </ul>	<p>Digital skills</p> <p>Collaborations and partnerships</p>

**However, translational bioinformatics requires a cohesive, consistent and coordinated approach**



# Transition from Reactive Medicine to P4 Medicine or Precision Health



- Shifting emphasis from reaction to prevention, and from disease to wellness
- Personalized medicine – focus on stratified treatment, but also prevention, prediction and care
- Integrative, interdisciplinary, cross-sectoral approaches

