

# Need for public-private collaboration



- Translational research (TR) is a cornerstone of the IMI mission
- TR is essential to provide new insights into disease progression, biomarker discovery, patient stratification, safety interpretation (etc) leading to reduced attrition and timelines for drug R&D.
- Yet:
  - There is no **stable, open, community led** KM platform or service to support TR
  - The **standards** for translational data integration and analysis are **weak**
- The effect of this is:
  - Increased costs and inefficiencies for each study (lack of core services)
  - Increased complexity in data interpretation (poor standards & methods)
  - Increased risk of loss of data post project (no long term repository)
  - A weak bio-medical informatics community enabling innovation in TR KM
- There is an immediate need to establish TR KM infrastructure and the delivery of services for existing and future IMI calls, as well as other PPPs.

# Objectives of the full project

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- Step change efficiency gains in cross-organisation TR study project execution through standardised, quality TR KM services
- Single access point to standardised TR study information
- Sustainable, interoperable, collaborative, open TR platform, based on open, agreed standards
- Development of an active TR analytics & informatics community leading to innovation in TR data interpretation.



# Objectives of the full project

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- Create a TR KM consortium to support TR projects:
  - **Infrastructure:** KM Research & development building on Johnson & Johnson's TranSMART system to create the required open platform
  - **Content:** Populate with existing and active TR Study Data
    - Clinical Study Data
    - Pre-Clinical Study Data (e.g. in vivo)
    - Biomarker data associated with Studies: 'omics, genetic, etc.
    - Background knowledge (e.g. molecular pathway data, literature)
  - **Standards:** Development and adoption of TR information standards
  - **Services:** Support for IMI (& other EU) TR Studies re KM data services
    - TR project KM consultation, curation support, historic data curation
    - Platform maintenance, enhancements & code control
    - Administration, exploitation support, training, awareness
  - **Research:** Research & Development of new analytics methods and tools



# Pre-competitive nature

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- TR KM is an enabler of EFPIA R&D, not a core deliverable.
- Lack of an open TR infrastructure, services and innovation in analytics is limiting competitive and pre-competitive TR: recognised cross-EFPIA gap.
- Proven pre-competitive opportunity: tranSMART platform built on open architecture (i2b2) and already providing pre-competitive support for TR collaboration, KM and analytics:
  - 3 IMI projects (U-BIOPRED, OncoTrack & SAFE-T) with adoption planned for 4 others
  - Multiple US Academic Medical Centres (e.g. CINJ, U. Minn. Cancer Center)
  - Sage Bionetworks/Genetic Alliance CTCAP initiative
- Need for eTRIKS consortia to coordinate with community investments:
  - ESFRI, notably EATRIS, BBMRI, ELIXIR and ECRIN
  - Other IMI KM calls re standards, especially EMIF wrt functionality.

# Expected impact on the R&D process

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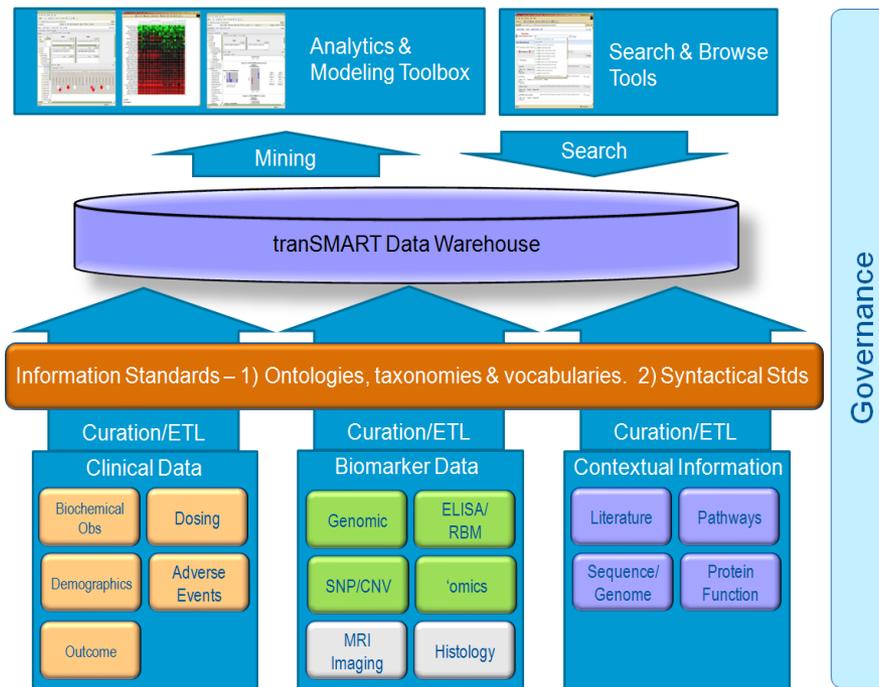


- Improved efficiencies for TR study set up and execution
  - No more re-inventing the wheel
- Improved TR data sharing and interpretation, through:
  - Promotion and support of data standards
  - Common access and analytics layer, lower threshold for use
  - Agreed security and publishing protocols
  - Stable repository of curated and annotated historic TR studies, enabling cross-study analytics.
  - Improved analytics & visualisation: accessible data driving innovation
  - Strengthened community of TR informatics professionals
- Will lead to enabled (quality, cost and speed) internal TR programmes as well as PPP (e.g. IMI) TR programmes.

# Suggested architecture of the project



- Presumption that the project will initiate from a proven platform: **tranSMART**, enabling TR study service support from day 1.



- WP1: TR Study KM Services
- WP2: KM Platform Research
- WP3: Standards Research/ Coordination
- WP4: TR Analytics Research
- WP5: Governance & Business Models
- WP6: Community Engagement & Outreach

# Expected contributions of the applicants

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- Co-located group of 12-15 FTEs for 5 years, typically 3-5 member organisations.
- Focus and priority on service provision and TR impact (not technology)
- Vision & know-how to develop into a NFP sustainable public service
- Key skills and experience
  - TR KM **service** delivery – proven record in supporting TR projects.
  - TR KM research - data management and analytics
  - Collaborative software engineering
  - Information management, including security models & cloud computing
  - TR information standards & standards bodies.
  - Curation, QA/QC and data handling experience: Clinical, 'omic, imaging, etc
  - Clinical KM regulatory policies to ensure compliance and promote sharing
  - Community engagement and outreach, including TR funding community.

# Expected (in kind) contributions of EFPIA members

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- Technology:
  - Transfer of tranSMART code and associated processes
  - Some tools, methods, standards
- Training on tranSMART system and processes:
  - installation/maintenance,
  - software engineering,
  - ETL / Curation
  - end-user trainings
- Expertise in:
  - Professional information services delivery
  - Database/Software engineering
  - Curation and ETL
  - Informatics (clinical & pre-clinical)
  - Translational / Clinical Science
  - Data governance
  - Legal, compliance and regulatory policies

# What's in it for you?



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- **Chance to establish a 'game changing' service set to transform Translational Research in the EU.**
  - Potential to show significant impact in the TR community in less than 6mths of project initiation: quick read out.
  - In depth awareness and influence of tranSMART architecture and design over the next 5 years.
  - Unparalleled access to multiple TR projects, and potentially associated data sets, as part of service provision.
  - Opportunity to lead the definition and implementation of standards and ontologies to represent translational data.
  - Chance to work with Pharma KM/ix professionals with years of TR information experience, *but never collectively shared till now...*
  - Prospect to create a new community of information professionals..



# Key deliverables of full project

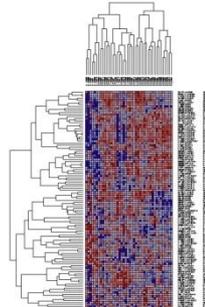
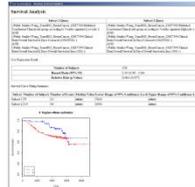
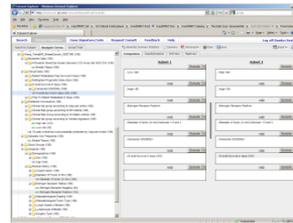
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- Open, hosted TR KM & analysis platform
- TR KM & analysis research & development
- TR KM services to EU TR studies :
  - Curation support for active and historic data
  - Guidelines and best practices for data curation
  - Quality control processes and services.
- Stable repository of curated and annotated translational studies
- Platform support: mirroring and data export facilities
- Training
- Standards: Independent, published and adopted
- Governance: data, security, standards
- Active community of translational informaticians & KM professionals.

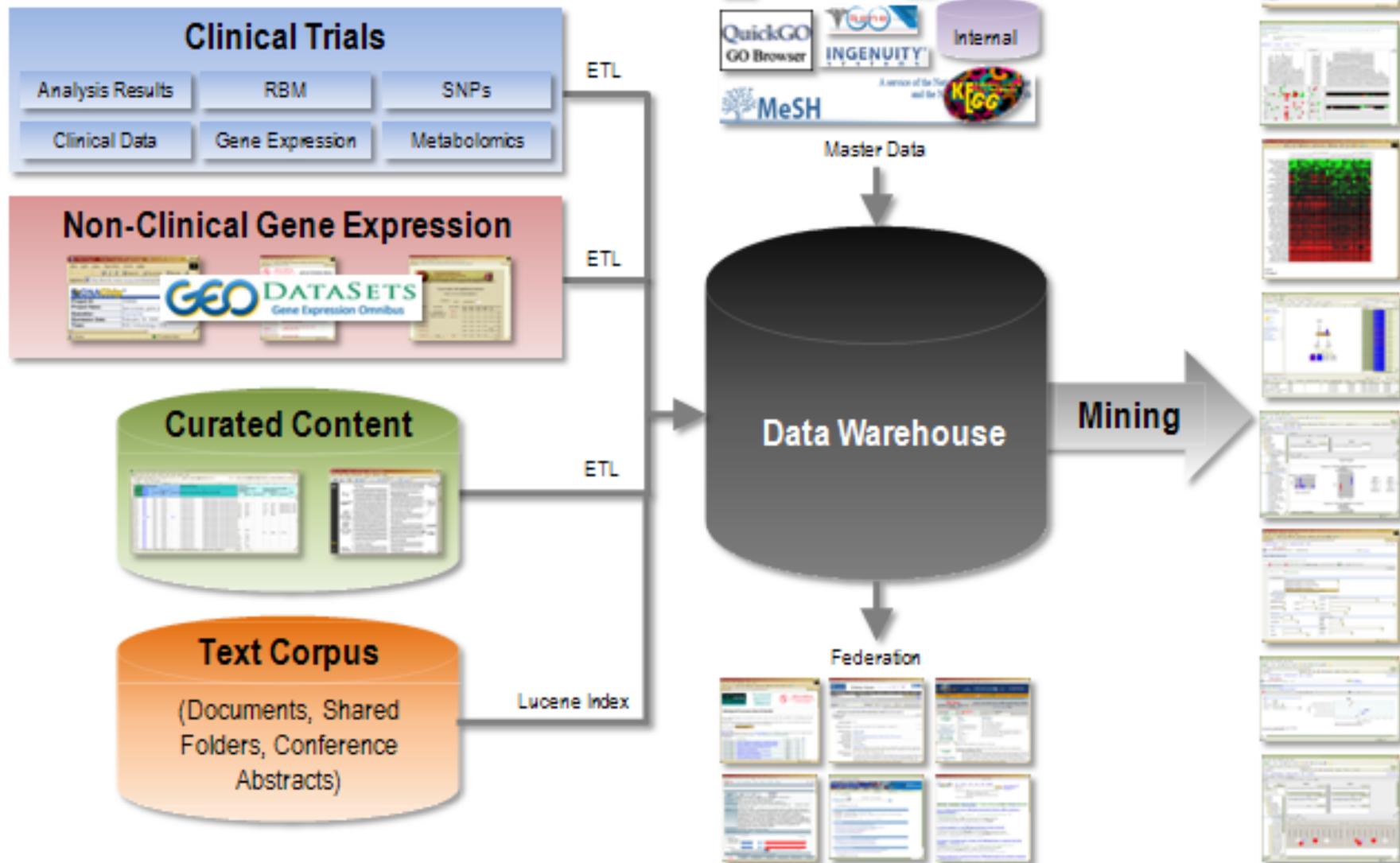
# tranSMART Overview



- J&J implemented award-winning industry-proven TR platform
  - Portable Software Based on Open Source & Academic Partnerships
- Use Cases
  - what is the correlation between animal models and human data
  - what is the best biomarker strategy for a given compound
  - what is the best indication for a given compound
  - how can a disease stratified based on clinical data
  - is there support for a target of interest based on clinical data
- Data
  - Clinical data, clinical and pre-clinical gene expression, protein profiling, SNP, PD markers, omics
  - In-house – immunology, oncology, CV, psychiatry, neuroscience
  - Public and commercial
  - Curated text & Text indexing
  - Master data, ontologies, vocabularies and metadata
- User Interfaces
  - Search: Gene, pathway, disease, compound, trial, and combinations
  - Hypothesis testing: Cohort selection and comparison/analysis
  - Hypothesis generation: Gene signatures



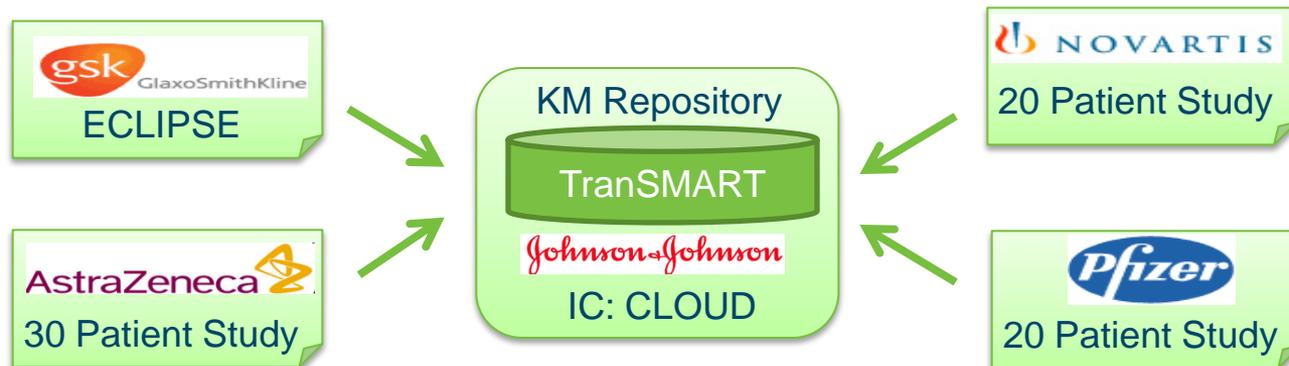
# tranSMART



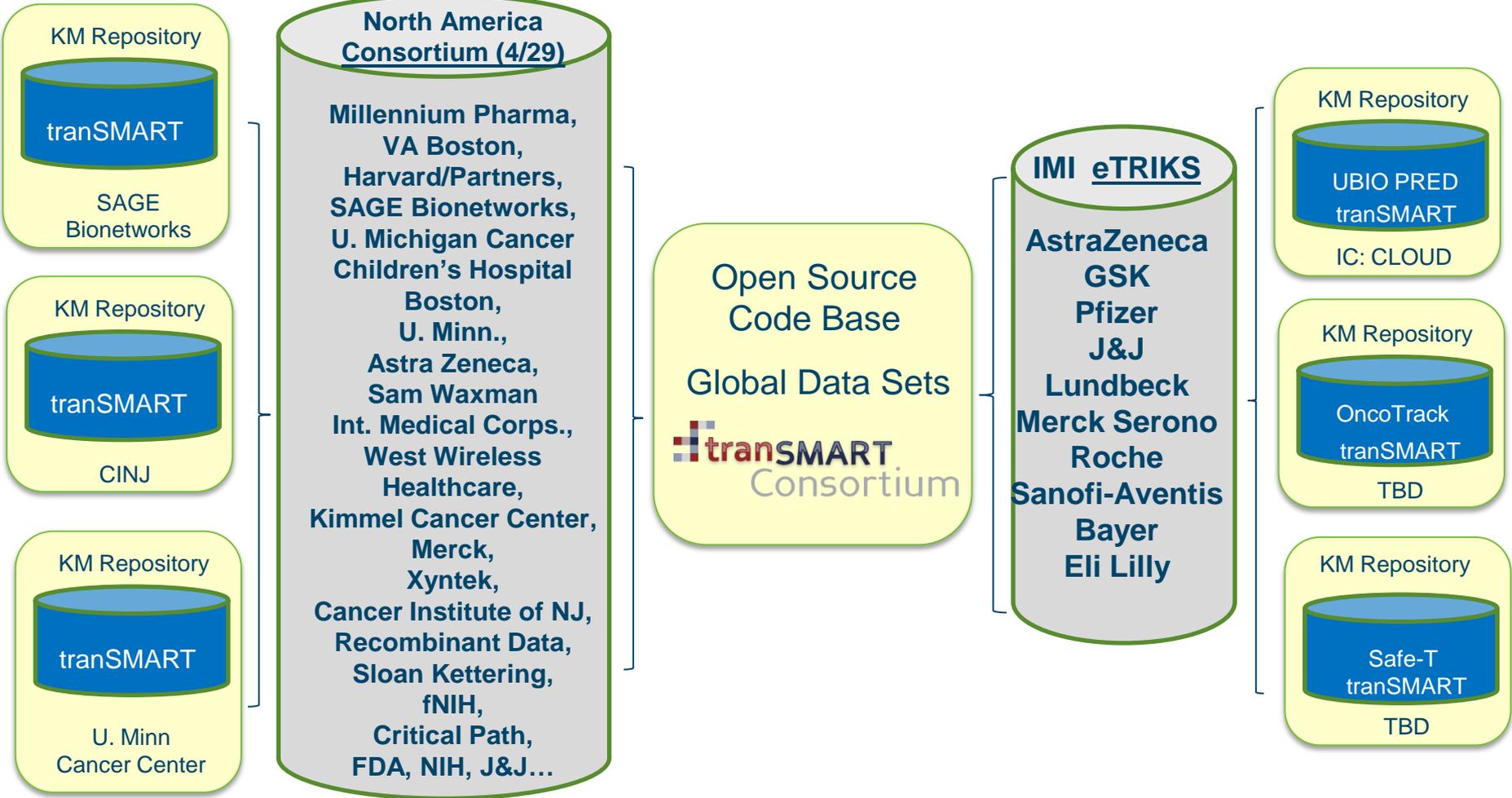
# tranSMART Example: U-BIOPRED



- Exploratory COPD study (ECLIPSE) sponsored by GSK
  - 3000 Patients, 6 Time points over 3 years
  - 1800 Clinical Attributes (inc Lung Function, Exacerbations and Sputum cell counts & protein markers)
  - Blood Samples for all patients for all time points
    - 200 Patients with Micro-arrays of baseline blood
  - 60 Patients with Micro-array of baseline sputum
- Successful Pilot
  - Training, tech transfer, tranSMART instance construction and loading of 300 patient cohort from ECLIPSE completed in **3 weeks**.



# tranSMART Consortium



# For More Information...

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[infodesk@imi.europa.eu](mailto:infodesk@imi.europa.eu)

[www.imi.europa.eu](http://www.imi.europa.eu)

# Big Scary Diagram

