

Quantitative Human Phenotyping: Opportunities for Convergent Science in the Novel Measurement of Health and Disease

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Founder and Director,
Center for Assessment Technology and
Continuous Health (CATCH)



Physician-in-Chief *Emeritus*, MGH



Jackson Distinguished Professor of Clinical Medicine,
Harvard Medical School

THE NATIONAL ACADEMIES

DIVISION ON EARTH AND LIFE STUDIES
Board on Life Sciences

A New Biology for the 21st Century

**Committee on a New Biology for
the 21st Century**

Co-Chairs:

Thomas Connelly, DuPont Company

Phillip A. Sharp, MIT



THE NATIONAL ACADEMIES

Advisers to the Nation on Science, Engineering, and Medicine

National Academy of Sciences

National Academy of Engineering

Institute of Medicine

National Research Council

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THE NATIONAL

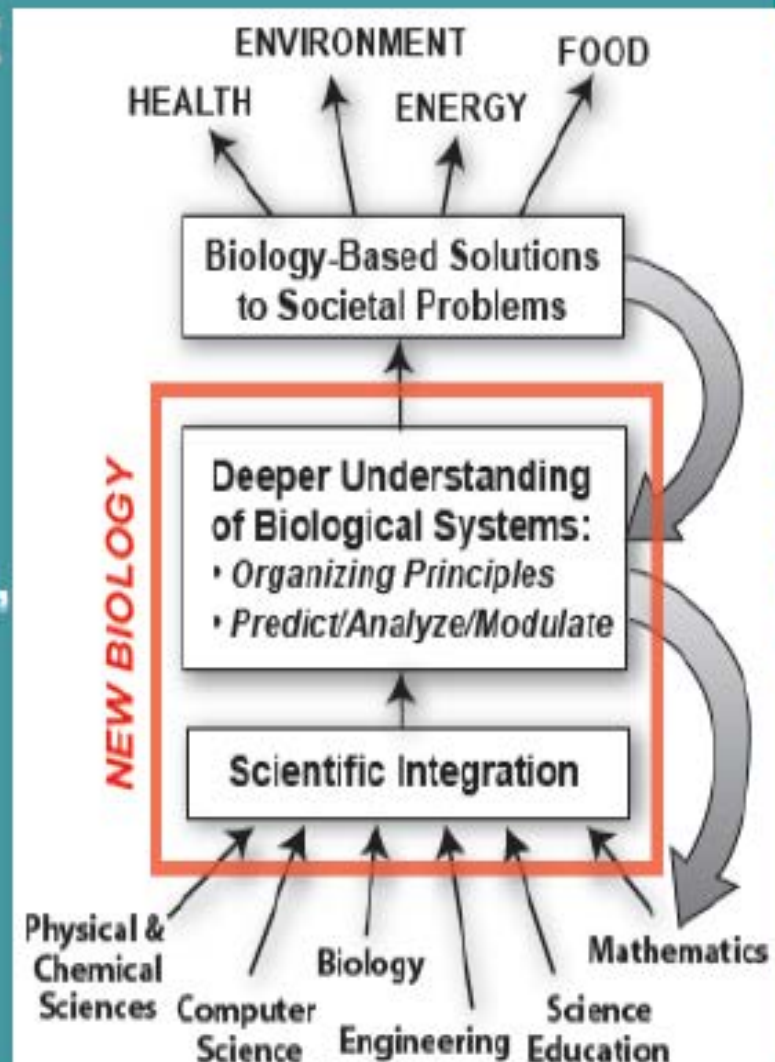
ACADEMIES

An opportunity for a New Biology with unprecedented impact

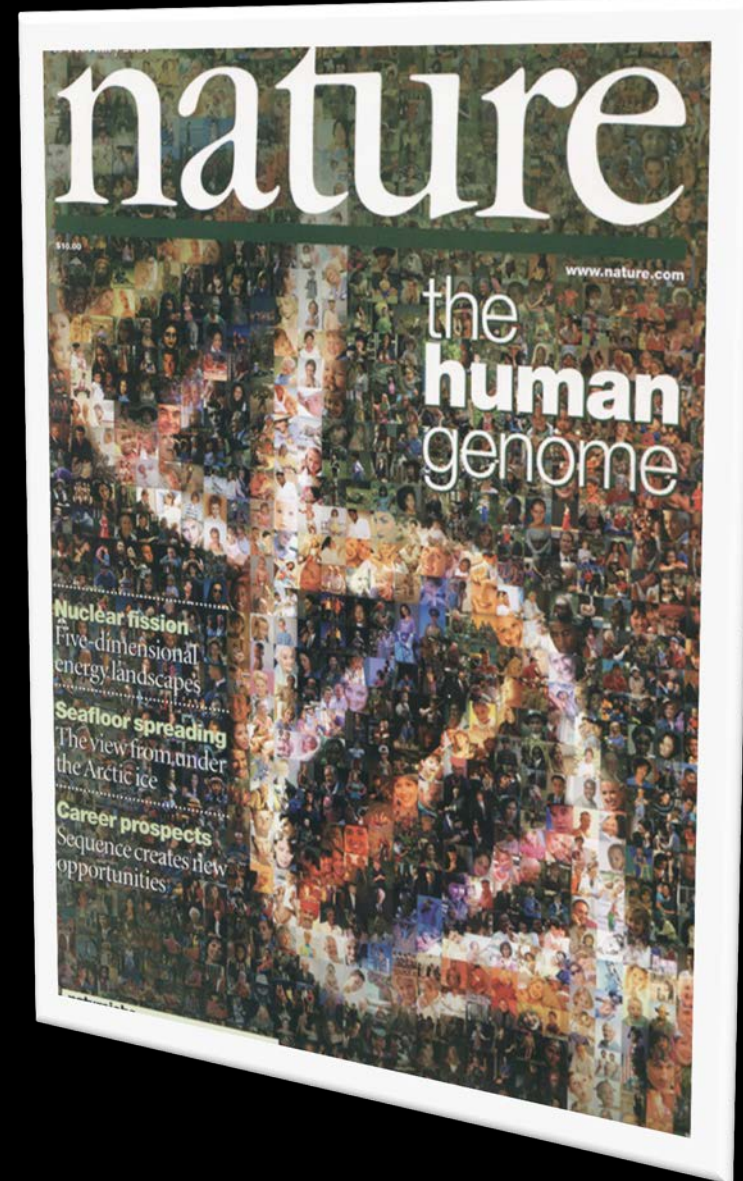
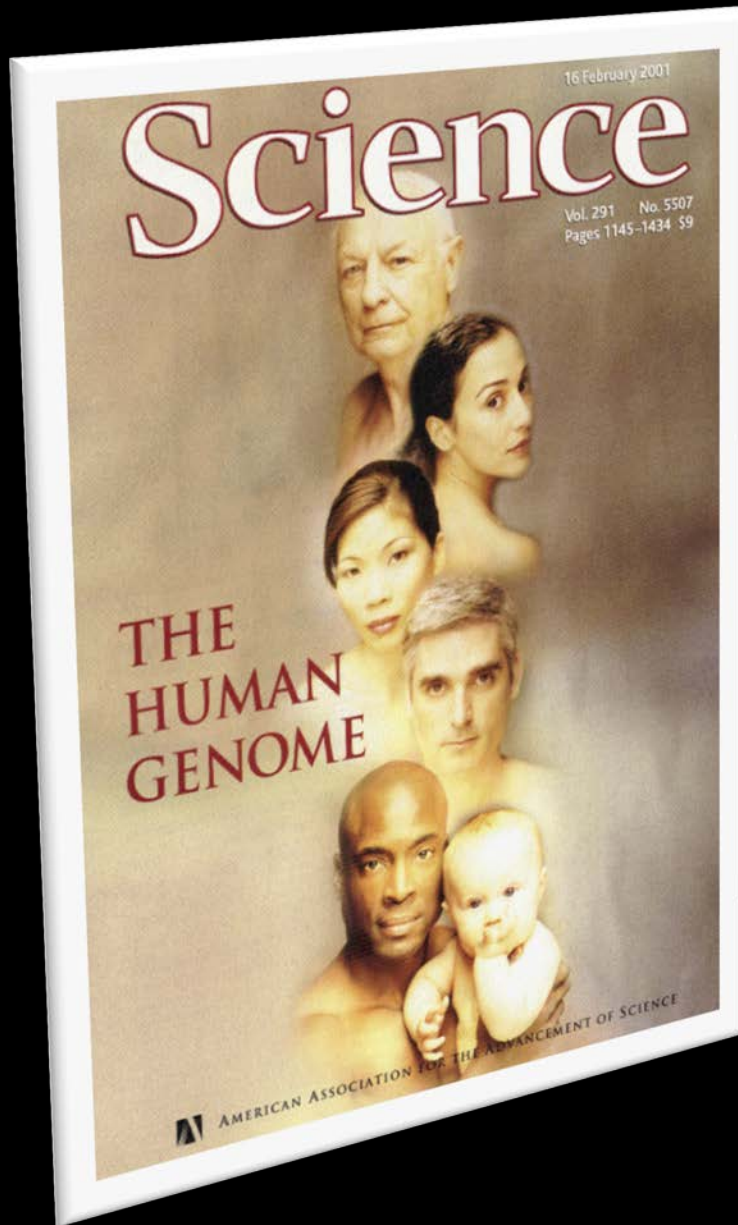
Integration of subdisciplines within biology

Cross-discipline integration: life science research performed by physical & computational scientists, engineers

Technological advances enable biologists to collect data unprecedented in quantity and quality



Promise and excitement of the human genome project



A success story for genetics: targeted therapies in oncology

The NEW ENGLAND JOURNAL of MEDICINE

ESTABLISHED IN 1812

MAY 20, 2004

VOL. 350 NO. 21

Activating Mutations in the Epidermal Growth Factor Receptor Underlying Responsiveness of Non-Small-Cell Lung Cancer to Gefitinib

Thomas J. Lynch, M.D., Daphne W. Bell, Ph.D., Raffaella Sordella, Ph.D., Sarada Gurubhagavatula, M.D.,
Ross A. Okimoto, B.S., Brian W. Brannigan, B.A., Patricia L. Harris, M.S., Sara M. Haserlat, B.A.,
Jeffrey G. Supko, Ph.D., Frank G. Haluska, M.D., Ph.D., David N. Louis, M.D., David C. Christiani, M.D.,
Jeff Settleman, Ph.D., and Daniel A. Haber, M.D., Ph.D.

EGFR
(NSCLC)

The NEW ENGLAND JOURNAL of MEDICINE

ESTABLISHED IN 1812

OCTOBER 28, 2010

VOL. 363 NO. 18

Anaplastic Lymphoma Kinase Inhibition in Non-Small-Cell Lung Cancer

Eunice L. Kwak, M.D., Ph.D., Yung-Jue Bang, M.D., Ph.D., D. Ross Camidge, M.D., Ph.D.,
Alice T. Shaw, M.D., Ph.D., Benjamin Solomon, M.B., B.S., Ph.D., Robert G. Maki, M.D., Ph.D.,
Sai-Hong I. Ou, M.D., Ph.D., Bruce J. Dezube, M.D., Pasi A. Jänne, M.D., Ph.D., Daniel B. Costa, M.D., Ph.D.,
Marileila Varella-Garcia, Ph.D., Woo-Ho Kim, M.D., Thomas J. Lynch, M.D., Panos Fidas, M.D.,
Hannah Stubbs, M.S., Jeffrey A. Engelman, M.D., Ph.D., Lecia V. Sequist, M.D., M.P.H., WeiWei Tan, Ph.D.,
Leena Gandhi, M.D., Ph.D., Mari Mino-Kenudson, M.D., Greg C. Wei, Ph.D., S. Martin Shreeve, M.D., Ph.D.,
Mark J. Ratain, M.D., Jeffrey Settleman, Ph.D., James G. Christensen, Ph.D., Daniel A. Haber, M.D., Ph.D.,
Keith Wilner, Ph.D., Ravi Salgia, M.D., Ph.D., Geoffrey I. Shapiro, M.D., Ph.D., Jeffrey W. Clark, M.D.,
and A. John Iafrate, M.D., Ph.D.

ALK
(NSCLC)

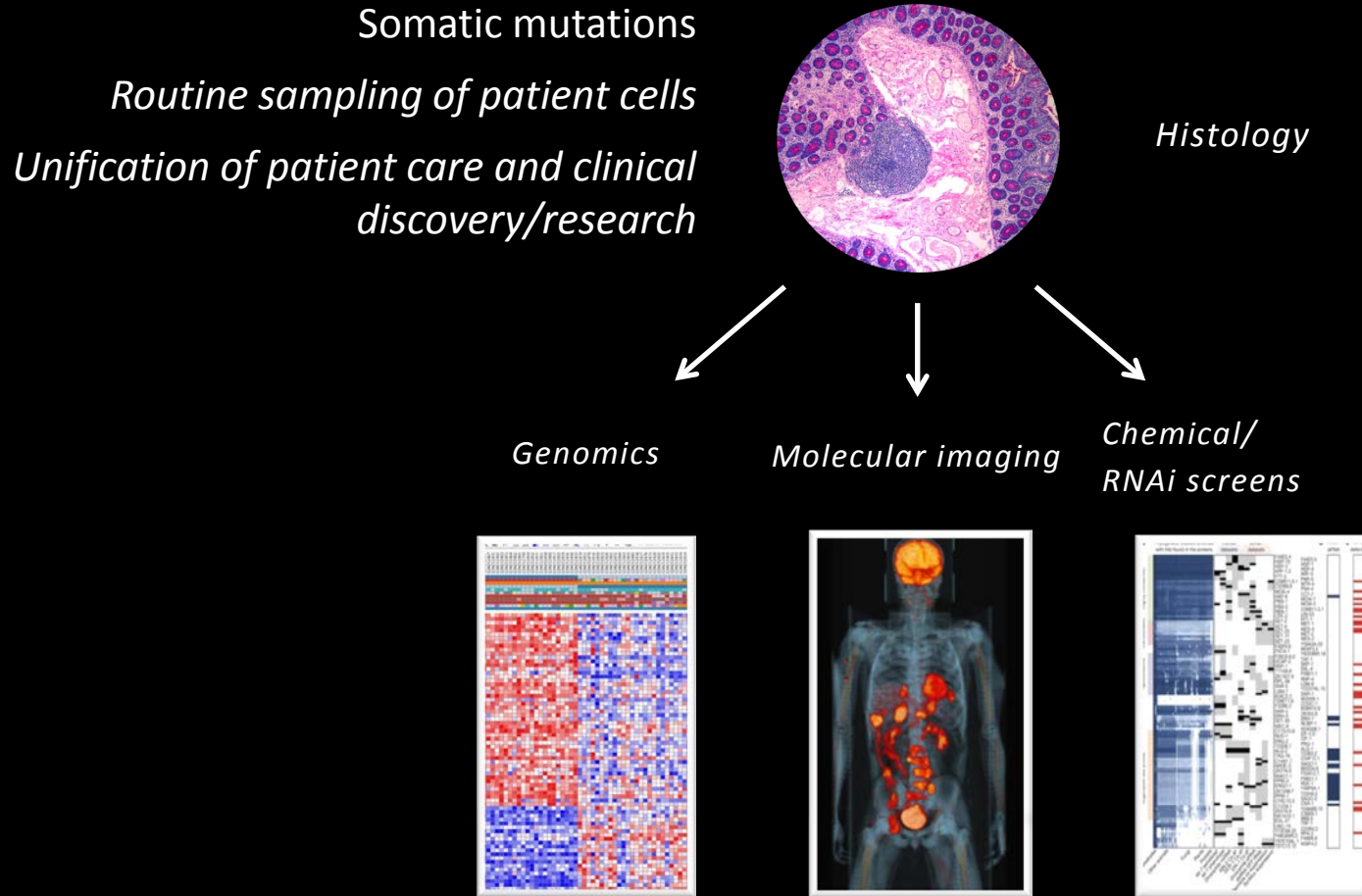
ORIGINAL ARTICLE

Improved Survival with Vemurafenib in Melanoma with BRAF V600E Mutation

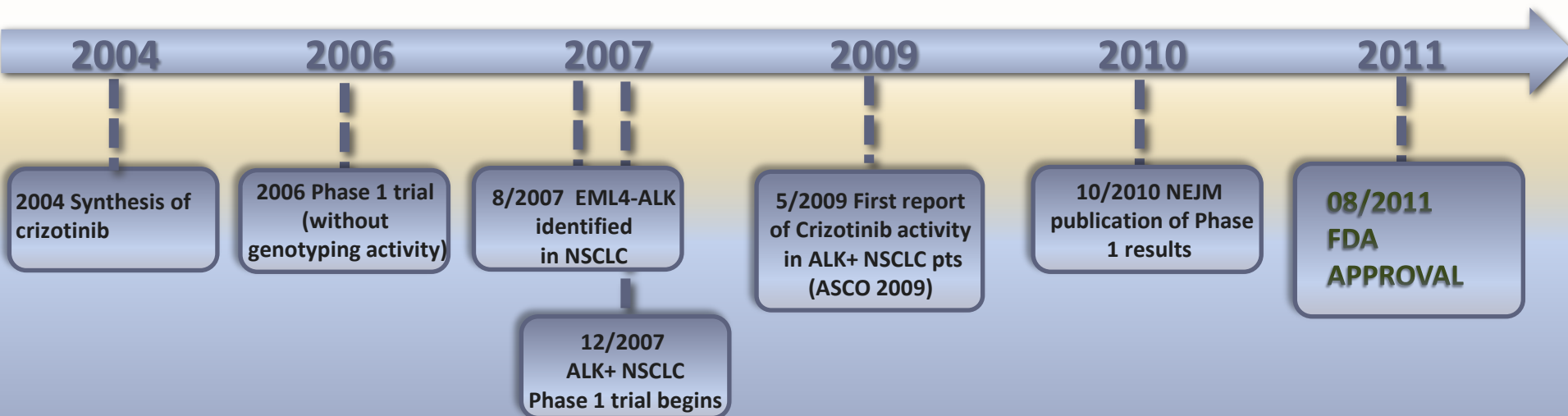
Paul B. Chapman, M.D., Axel Hauschild, M.D., Caroline Robert, M.D., Ph.D.,
John B. Haanen, M.D., Paolo Ascierto, M.D., James Larkin, M.D.,
Reinhard Dummer, M.D., Claus Garbe, M.D., Alessandro Testori, M.D.,
Michele Maio, M.D., David Hogg, M.D., Paul Lorigan, M.D.,
Celeste Lebbe, M.D., Thomas Jouary, M.D., Dirk Schadendorf, M.D.,
Antoni Ribas, M.D., Steven J. O'Day, M.D., Jeffrey A. Sosman, M.D.,
John M. Kirkwood, M.D., Alexander M.M. Eggermont, M.D., Ph.D.,
Brigitte Dreno, M.D., Ph.D., Keith Nolop, M.D., Jiang Li, Ph.D., Betty Nelson, M.A.,
Jeannie Hou, M.D., Richard J. Lee, M.D., Keith T. Flaherty, M.D.,
and Grant A. McArthur, M.B., B.S., Ph.D., for the BRIM-3 Study Group*

Braf
(Melanoma)

A success story for genetics: targeted therapies in oncology



Stratification 'rescues' a drug



From description of genetic mutation (EML4-ALK) in non-small cell lung cancer to FDA approval:

4 years !









However, our ability
to generalize this
paradigm for chronic
diseases remains
limited !

The promise of the 'genetic revolution' for stratification of cardiovascular disease?

Accuracy predicting 10 year risk of CVD

	Using Risk Factors*
10 yr CVD	0.787

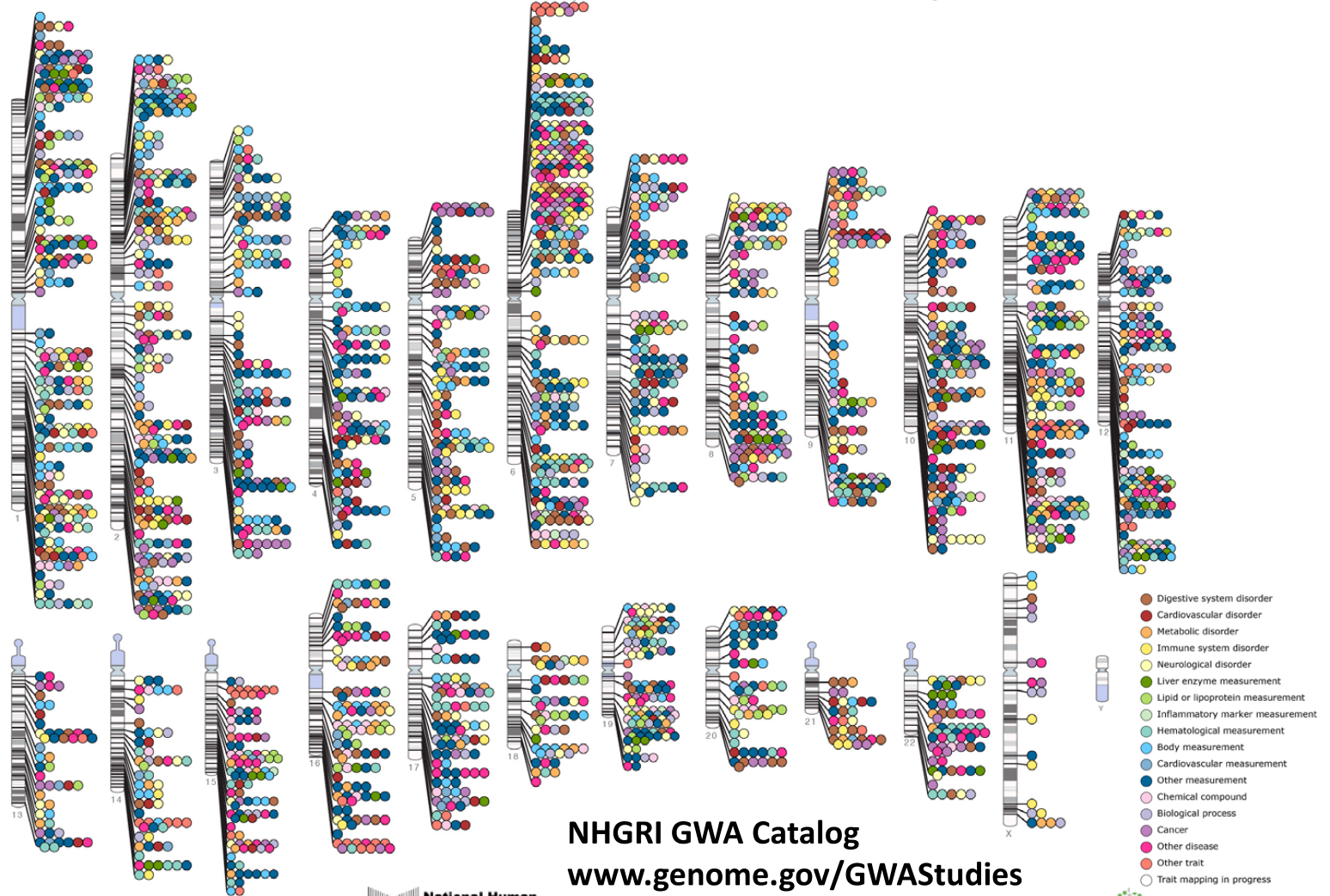
Risk Factors

	Sex		Cholesterol		Smoking
	Age & family history		Blood pressure		Food

GWAS and the 'genetic revolution'

Published Genome-Wide Associations through 07/2012

Published GWA at $p \leq 5 \times 10^{-8}$ for 18 trait categories



NHGRI GWA Catalog

www.genome.gov/GWASudies

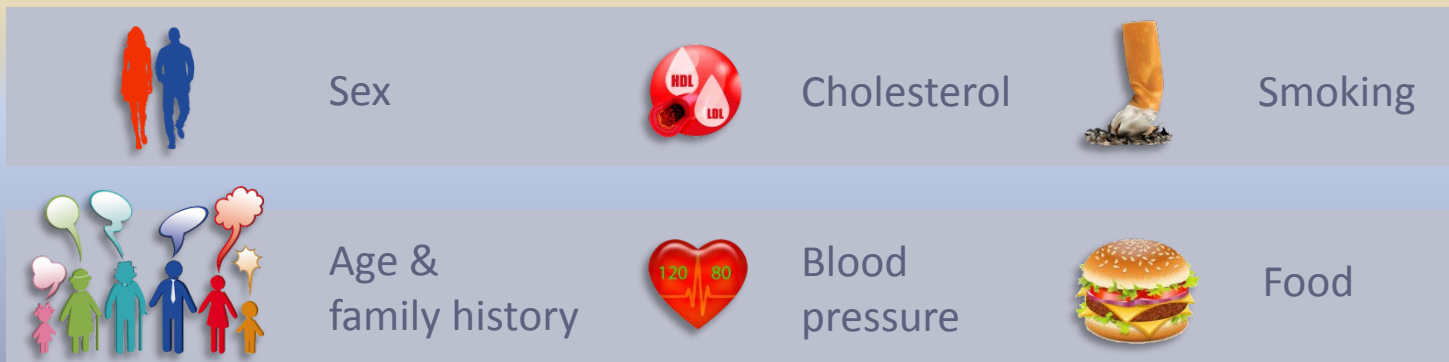
www.ebi.ac.uk/fgpt/gwas/

The promise of the 'genetic revolution' for stratification of cardiovascular disease?

Accuracy predicting 10 year risk of CVD

	Using Risk Factors*	+ Genetic Risk Score
10 yr CVD	0.787	0.788

Risk Factors



Converging revolutions:

Genetic



Digital

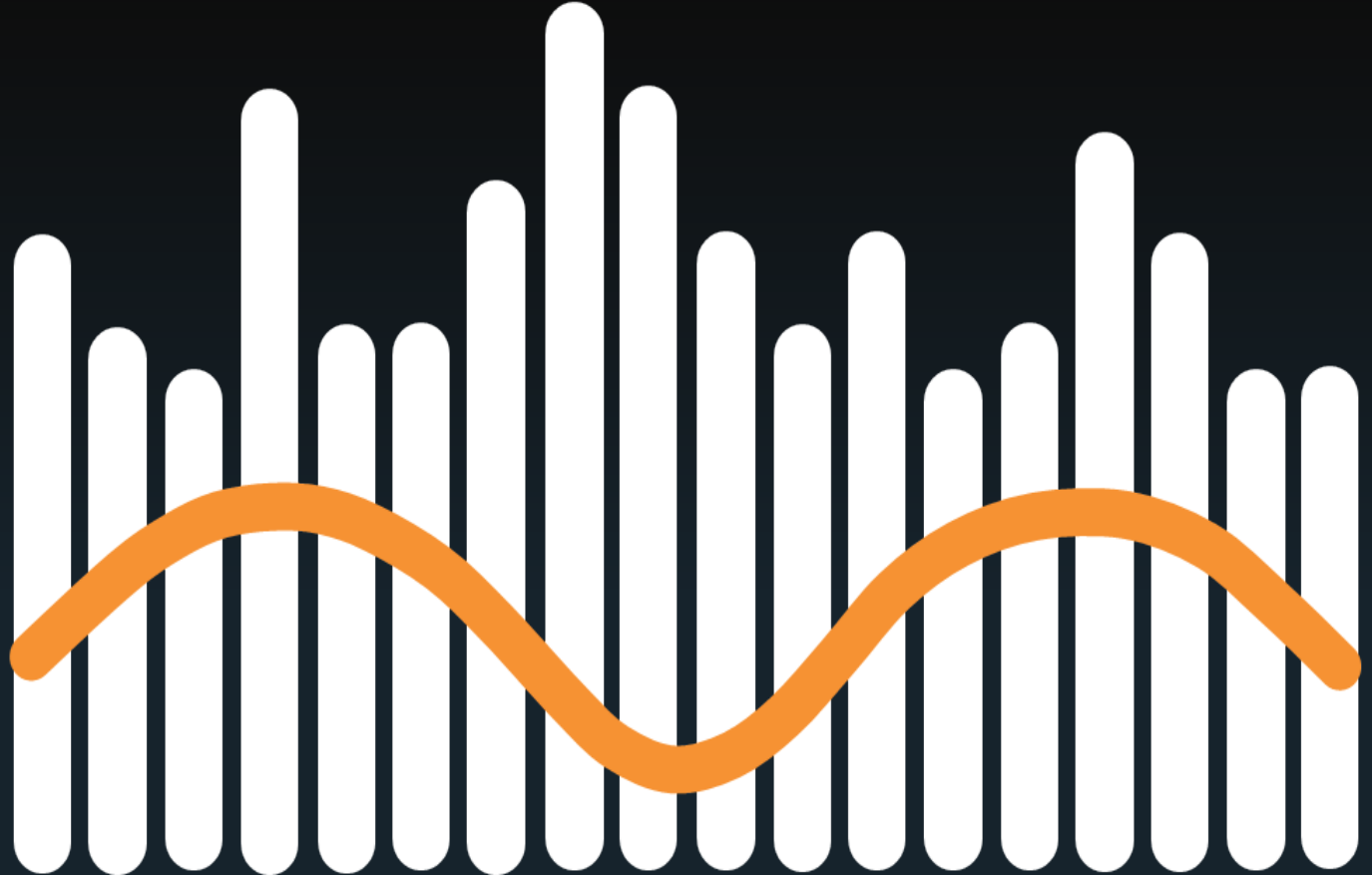


Integrative Science



Measurements used in medicine have largely not changed

- Heart rate, blood pressure
- Height, weight
- Electrocardiogram (ECG)
- Blood glucose, hemoglobin A₁C
- Blood lipids



CATCH

Center for Assessment Technology and Continuous Health

A renewed focus on phenotypes

The human phenotype must be measured

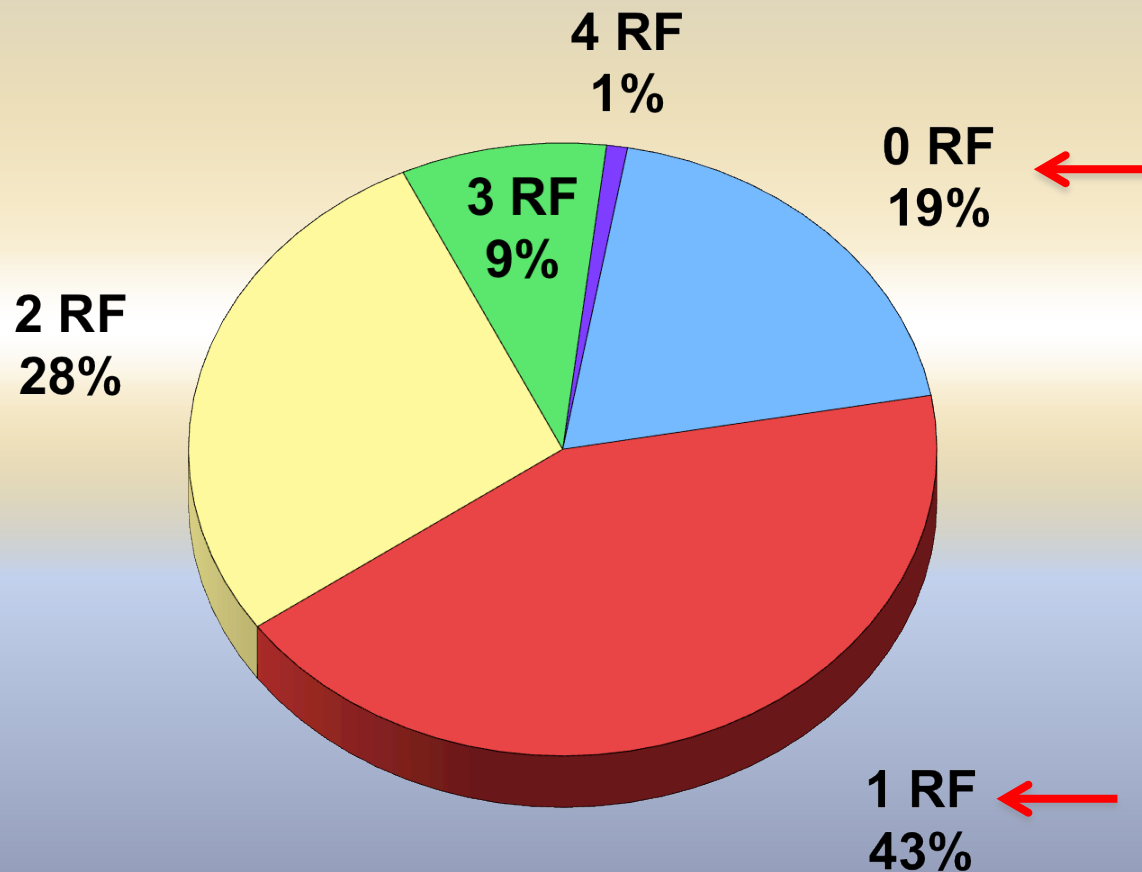
... with the same **precision** that we expect of genetic data

... in real-time to provide a **perpetual** read out

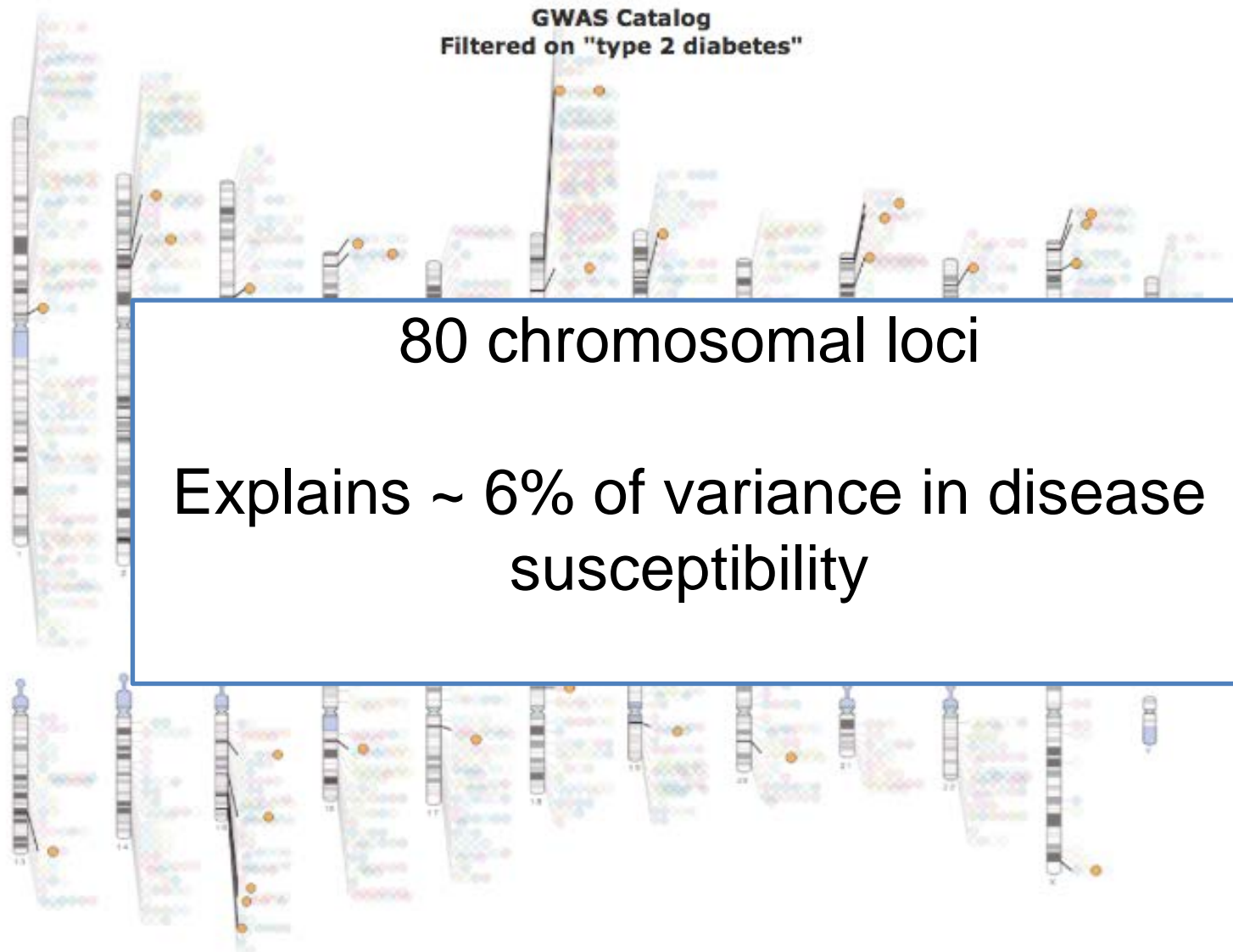
... in the context of multiple **perturbations** (such as drugs and environment)

... and must ultimately create actionable new knowledge for healthcare **performance**

Not all individuals with coronary heart disease have traditional risk factors



Type 2 diabetes: increasing physiologic and genetic understanding



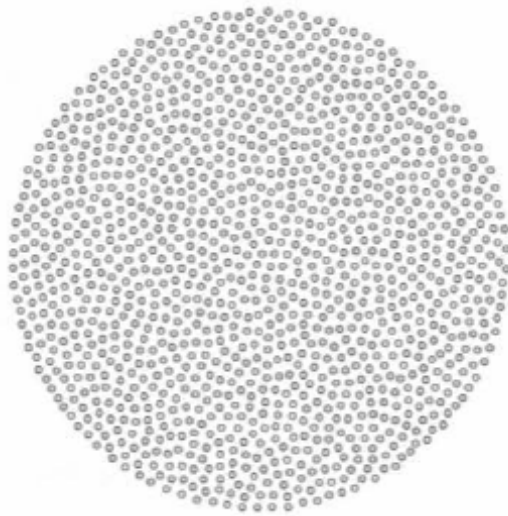
But what do we follow clinically?

BLACK BOX

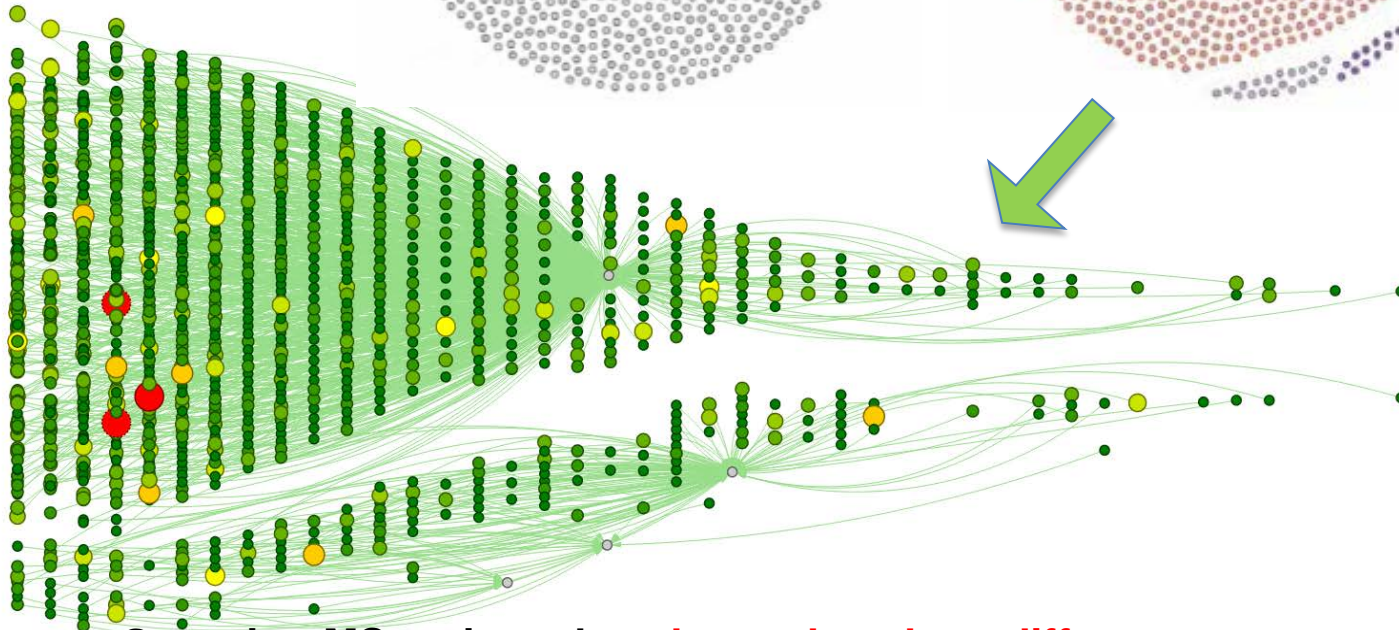
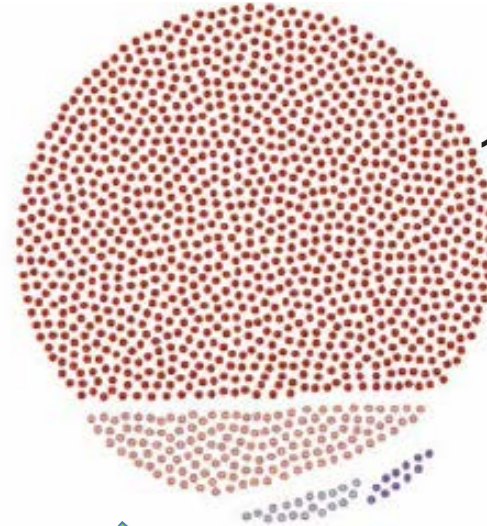


Unlocking what makes patients more different than the same - Data Analytics and Phenotyping

1,000 MS Patients:
grouped by
what they have
in common



1,000 MS Patients:
grouped by
disease stage



Grouping MS patients by **what makes them different:**
stratified by frequency of relapses, duration of disease, and severity of flares

Episodic and Symptomatic



Saturday, February 15, 2014	
8:00	Ms. Doe
8:15	
8:45	
9:00	

Episodic and Symptomatic



2014

January							February							March							April						
Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat
29	30	31	1	2	3	4	26	27	28	29	30	31	1	23	24	25	26	27	28	1	30	31	1	2	3	4	5
5	6	7	8	9	10	11	2	3	4	5	6	7	8	2	3	4	5	6	7	8	6	7	8	9	10	11	12
12	13	14	15	16	17	18	9	10	11	12	13	14	15	9	10	11	12	13	14	15	13	14	15	16	17	18	19
19	20	21	22	23	24	25	16	17	18	19	20	21	22	16	17	18	19	20	21	22	20	21	22	23	24	25	26
26	27	28	29	30	31	1	23	24	25	26	27	28	1	23	24	25	26	27	28	29	27	28	29	30	1	2	3
2	3	4	5	6	7	8	2	3	4	5	6	7	8	30	31	1	2	3	4	5	4	5	6	7	8	9	10

May							June							July							August						
Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat
27	28	29	30	1	2	3	1	2	3	4	5	6	7	29	30	1	2	3	4	5	27	28	29	30	31	1	2
4	5	6	7	8	9	10	8	9	10	11	12	13	14	6	7	8	9	10	11	12	3	4	5	6	7	8	9
11	12	13	14	15	16	17	15	16	17	18	19	20	21	13	14	15	16	17	18	19	10	11	12	13	14	15	16
18	19	20	21	22	23	24	22	23	24	25	26	27	28	20	21	22	23	24	25	26	17	18	19	20	21	22	23
25	26	27	28	29	30	31	29	30	1	2	3	4	5	27	28	29	30	31	1	2	24	25	26	27	28	29	30
1	2	3	4	5	6	7	6	7	8	9	10	11	12	3	4	5	6	7	8	9	31	1	2	3	4	5	6

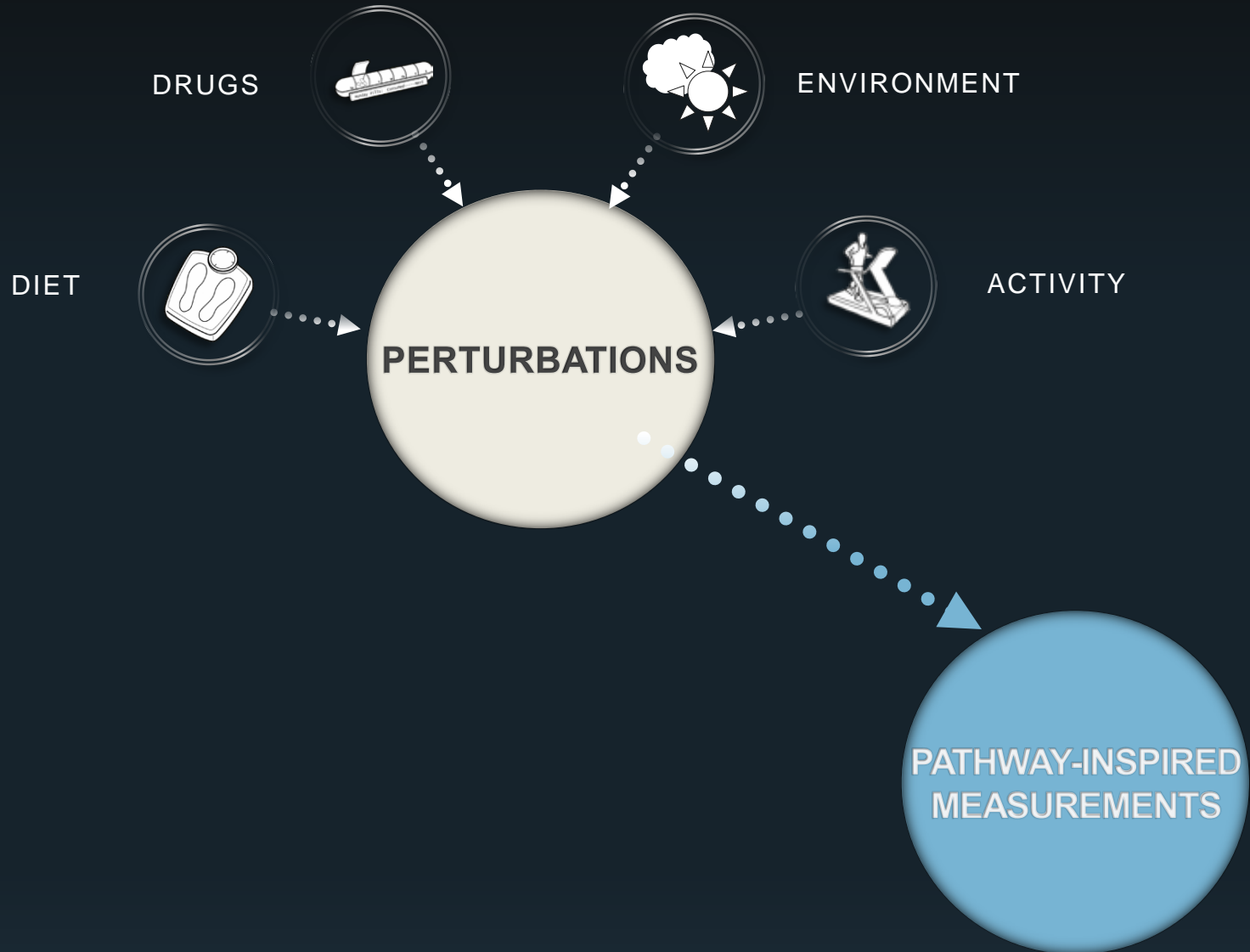
September							October							November							December						
Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	1	2	3	4	5	6	28	29	30	1	2	3	4	26	27	28	29	30	31	1	30	1	2	3	4	5	6
7	8	9	10	11	12	13	5	6	7	8	9	10	11	2	3	4	5	6	7	8	7	8	9	10	11	12	13
14	15	16	17	18	19	20	12	13	14	15	16	17	18	9	10	11	12	13	14	15	14	15	16	17	18	19	20
21	22	23	24	25	26	27	19	20	21	22	23	24	25	16	17	18	19	20	21	22	21	22	23	24	25	26	27
28	29	30	1	2	3	4	26	27	28	29	30	31	1	23	24	25	26	27	28	29	28	29	30	31	1	2	3
5	6	7	8	9	10	11	2	3	4	5	6	7	8	30	1	2	3	4	5	6	4	5	6	7	8	9	10

February 15,
2014

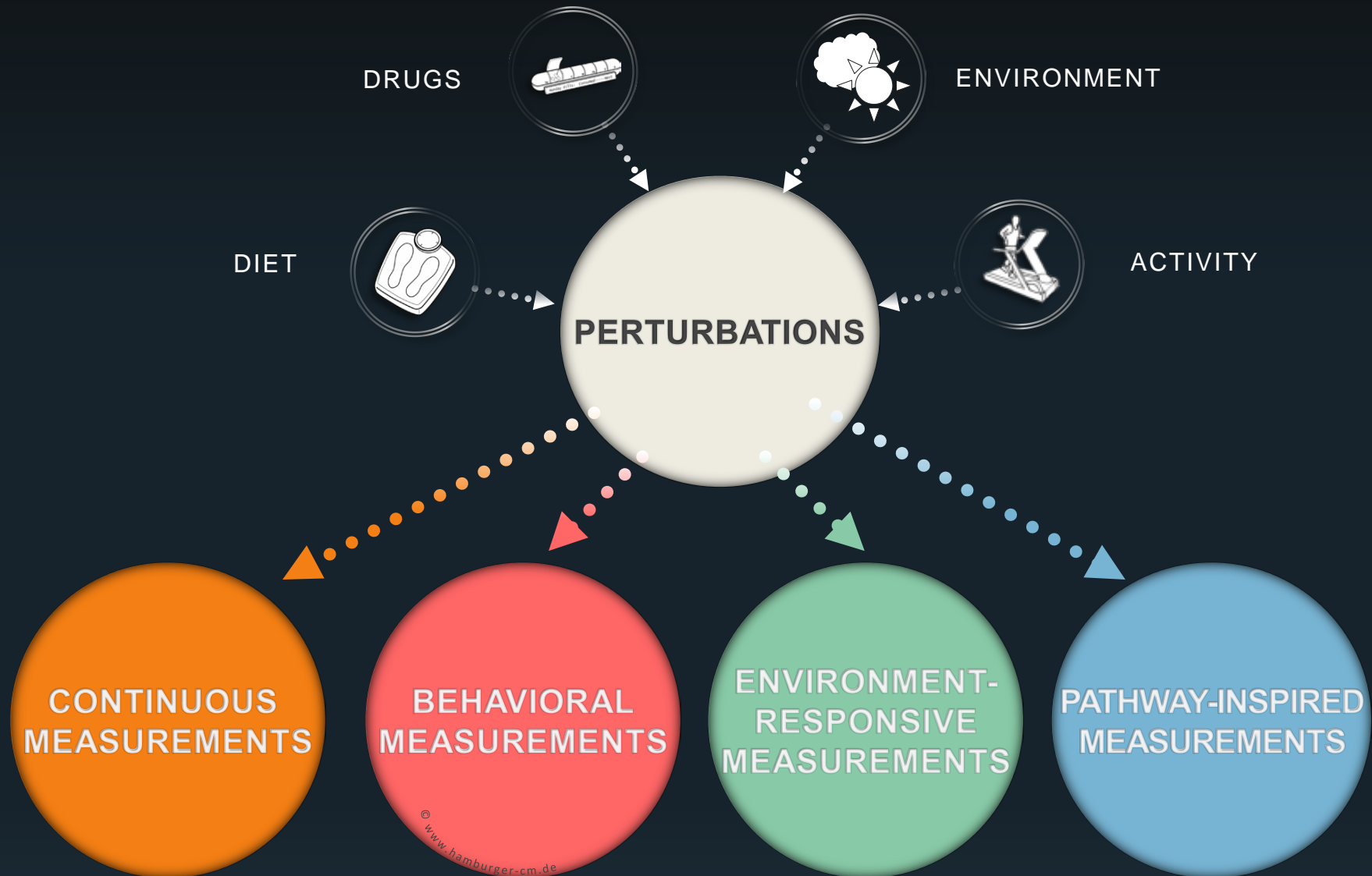
Doe

9:00

Novel phenotypes, analyzed in the context of perturbations

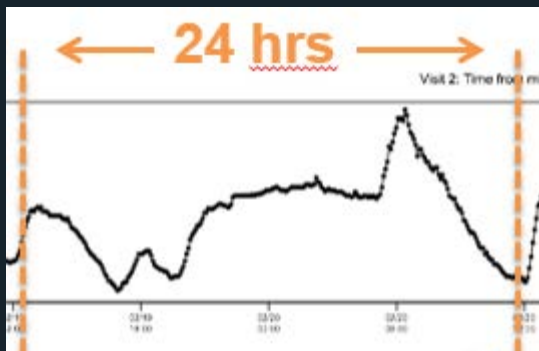


Novel phenotypes, analyzed in the context of perturbations

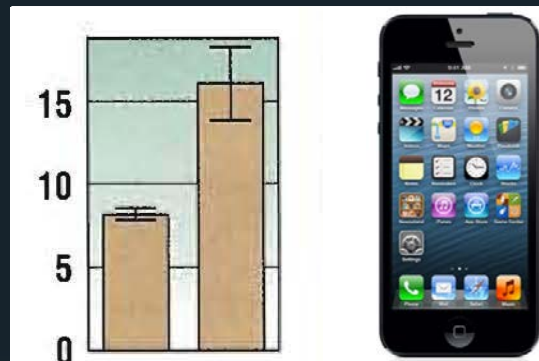


The integration of data from *different scales* and *different sources*, analyzed with a *broadening array of techniques*.

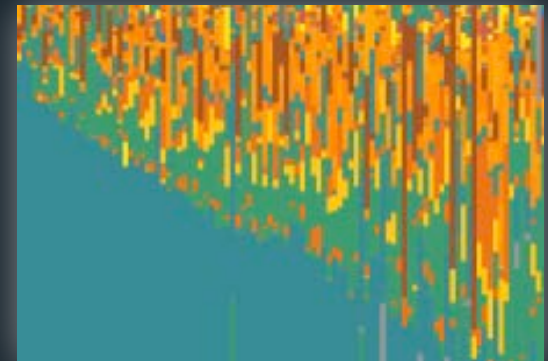
Repurposed
data to yield
new ideas



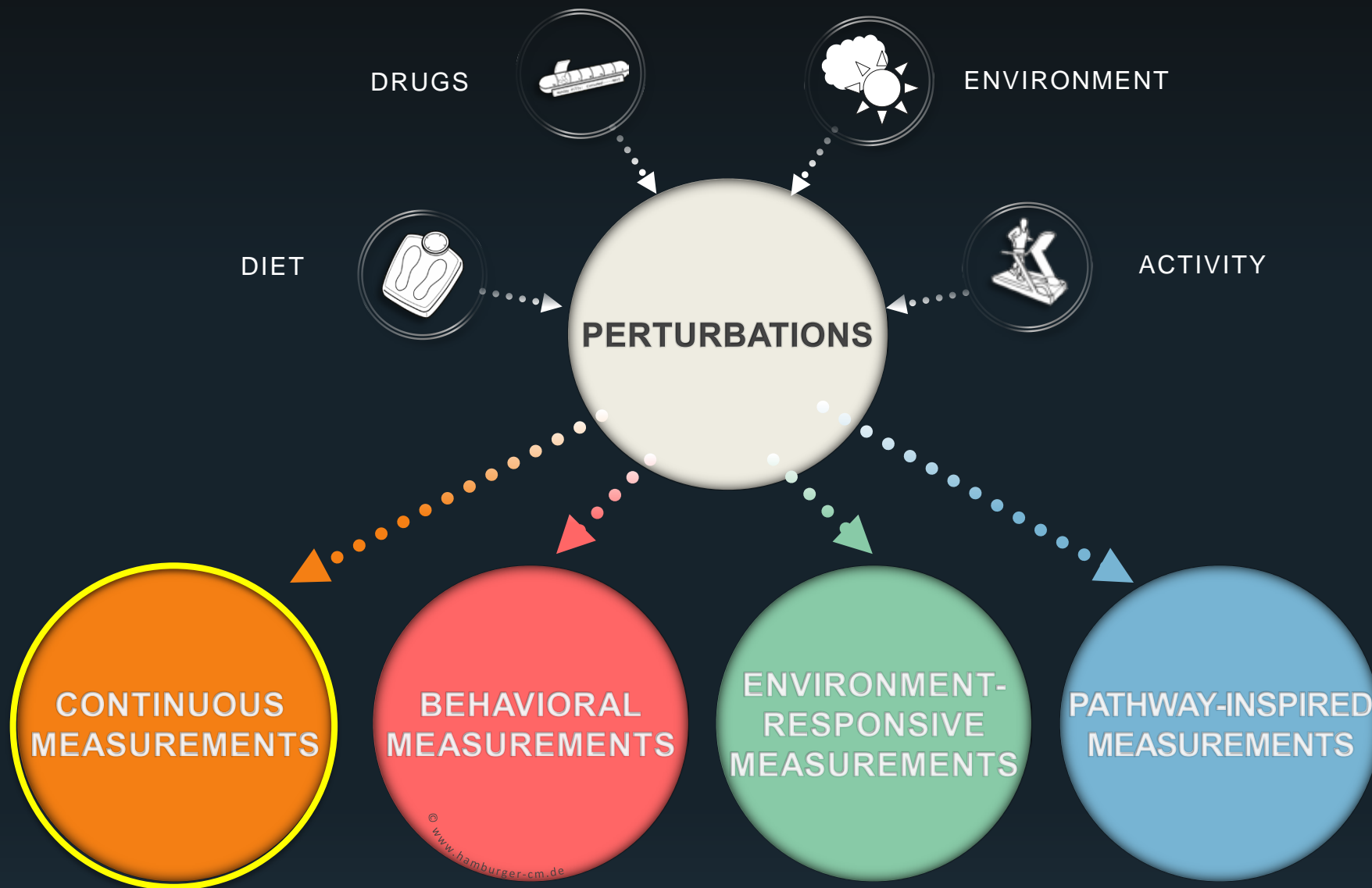
Data collected
via new
methods



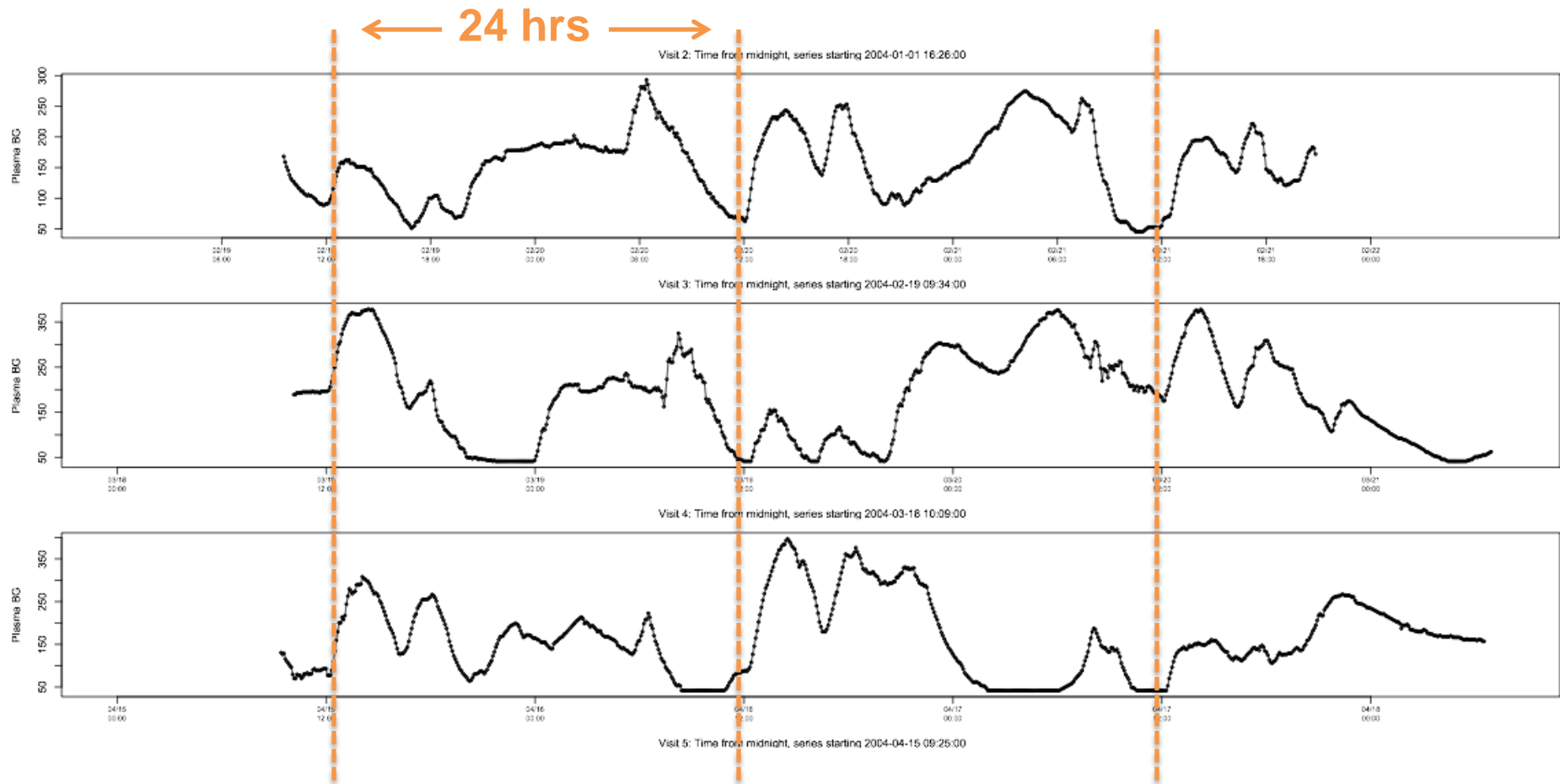
High
Dimensional
Data Sets

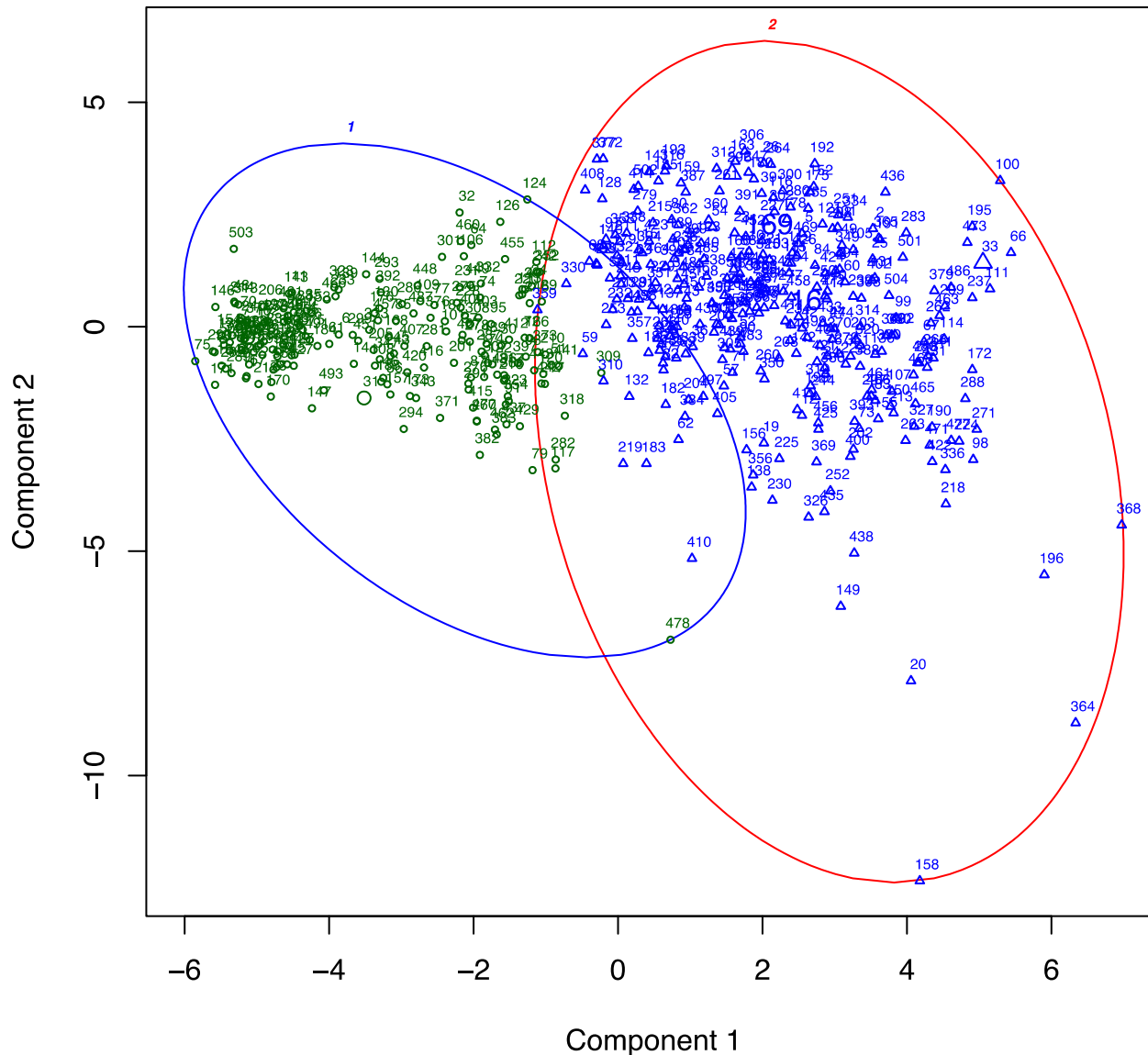


Novel phenotypes, analyzed in the context of perturbations

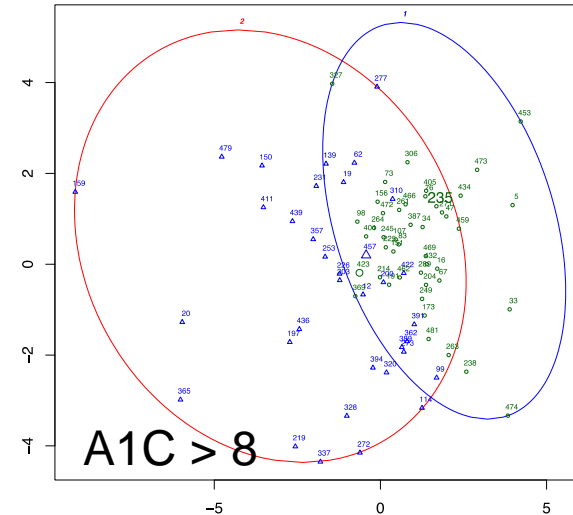
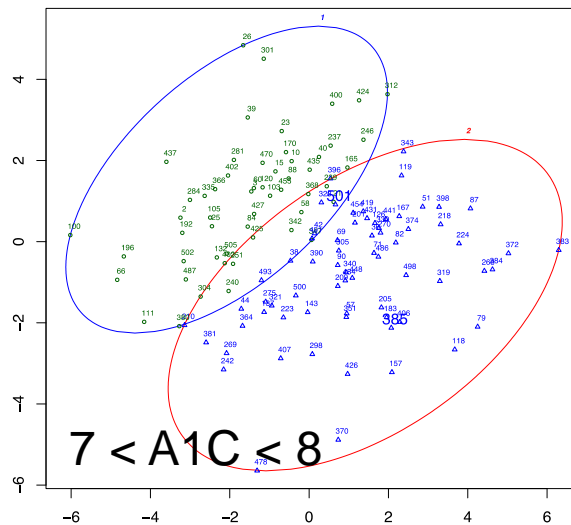
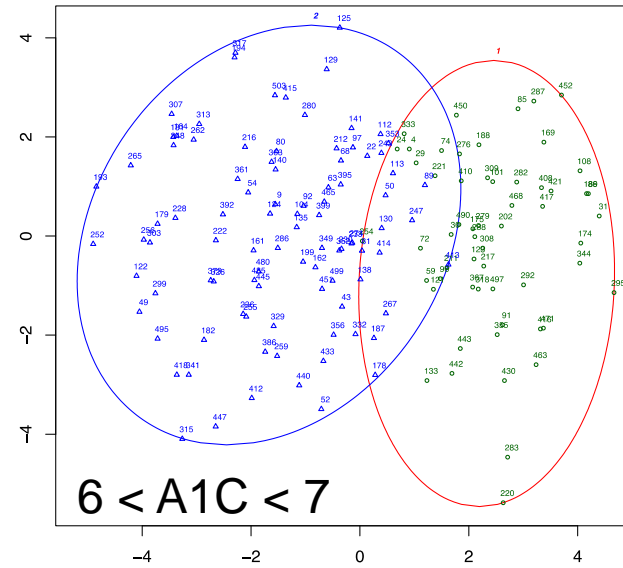
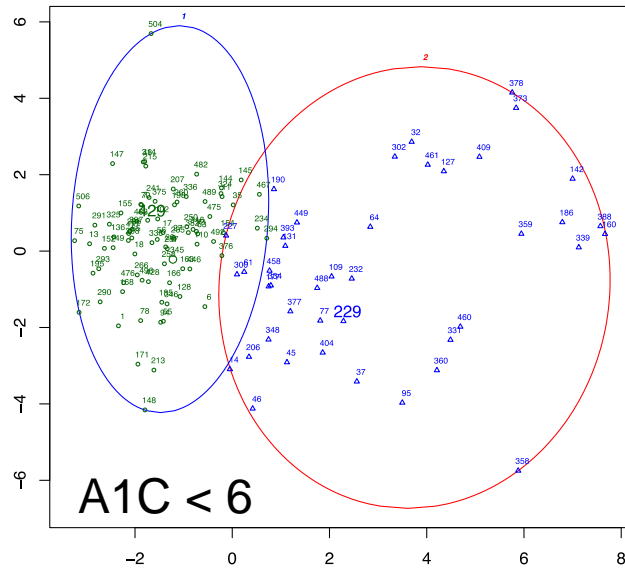


Physiologic insights from a therapeutic device: Continuous Glucose Monitoring

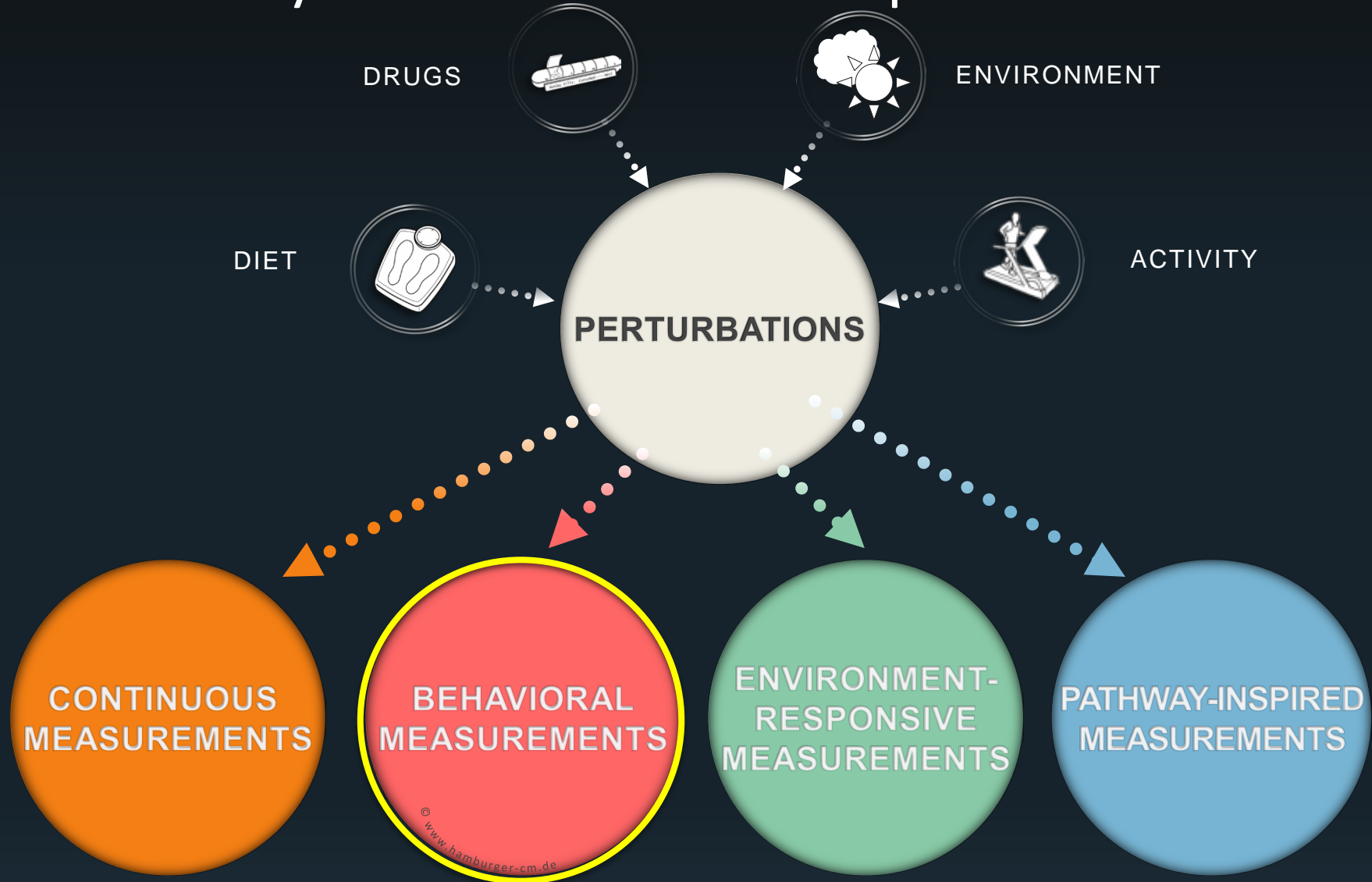




Clusters persist across diabetes status, glucose control, medication



Novel phenotypes, analyzed in the context of perturbations



Behavioral Measurements

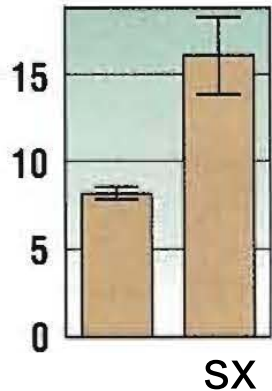
As we begin to assess health holistically
we need to turn again to non-traditional technology

Minimally Invasive
Minimally Intrusive

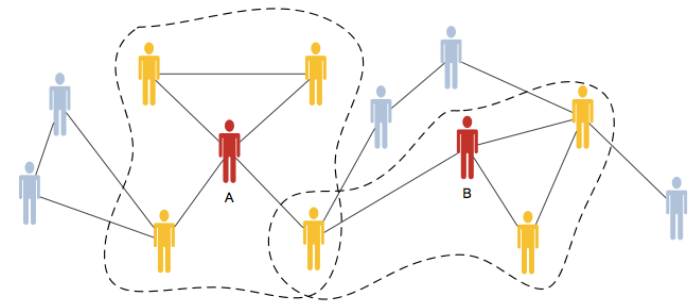


Phenotypes at home:

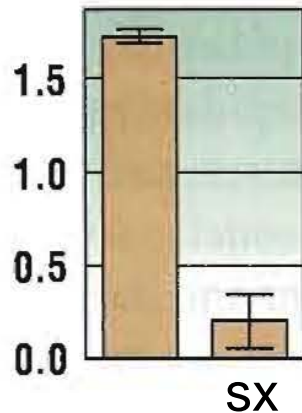
Passive and active behavioral analytics



Runny nose:
Late night/early morning
communication



Social contacts for
peer incentives:
BEHAVIOR



Fever, influenza:
WLAN 'entropy'

Sandy Pentland (MIT Media Lab)

Phenotypes at population scale

Wearable Sensors, Electronic Medical Records,
biospecimens and integrated analysis for
discovery



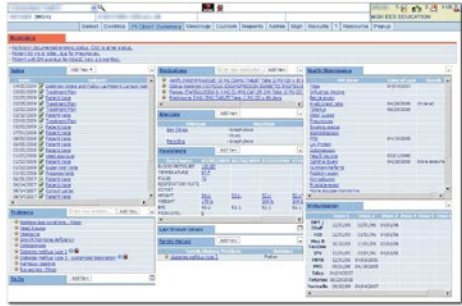
... TO “REAL-WORLD” INDIVIDUALS



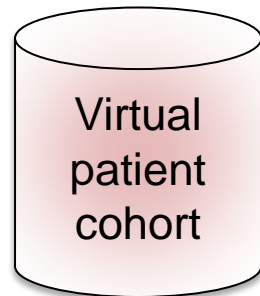
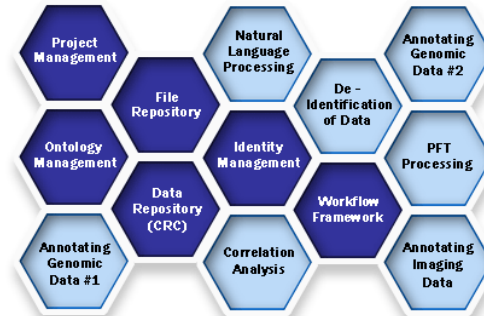
FROM RESEARCH POPULATIONS ...

EMRs to integrate research with clinical care and patient cells

Partners EMR (~4M patients)



i2b2 analysis software (phenotype extraction)



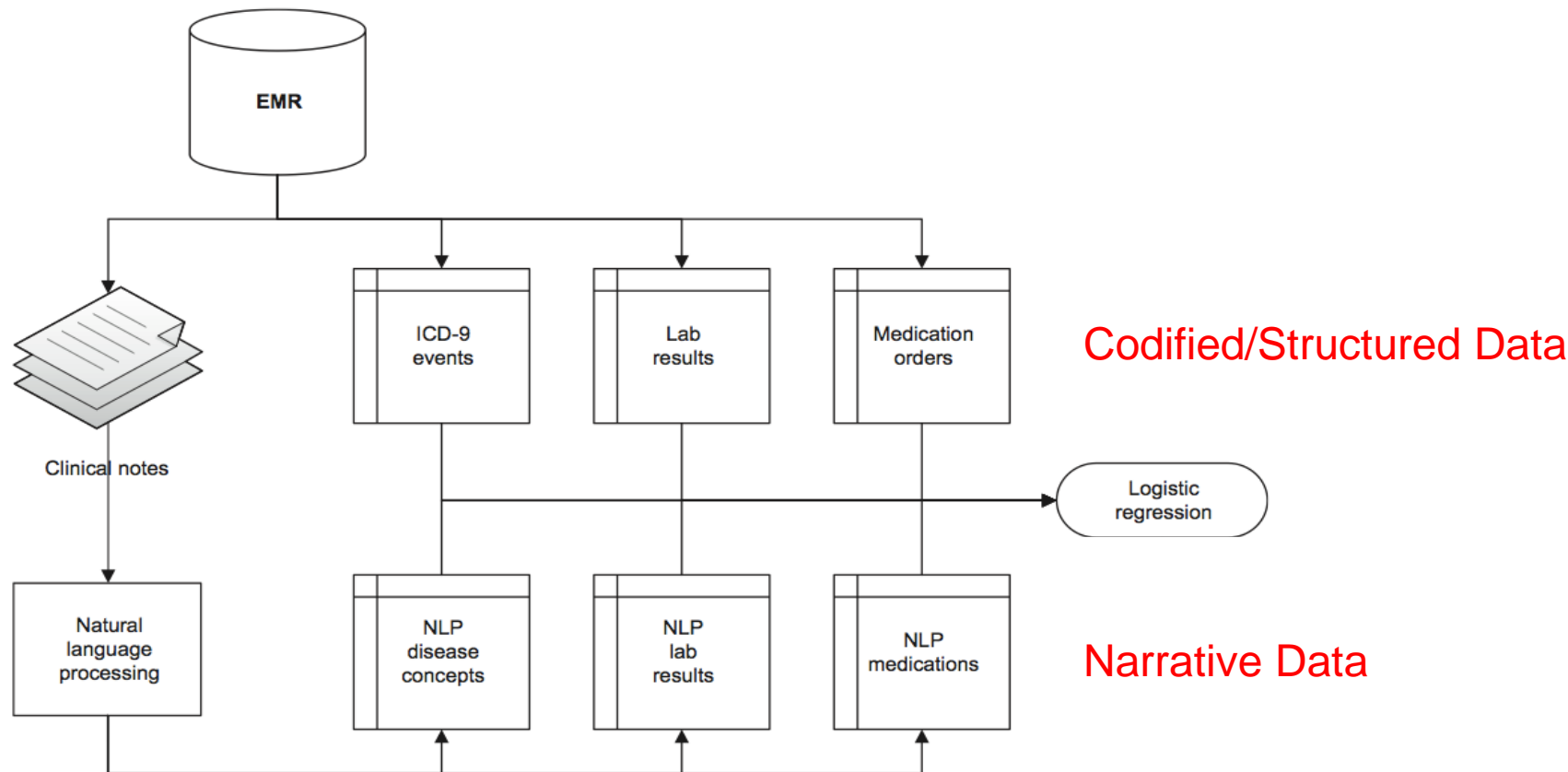
(De-identified)



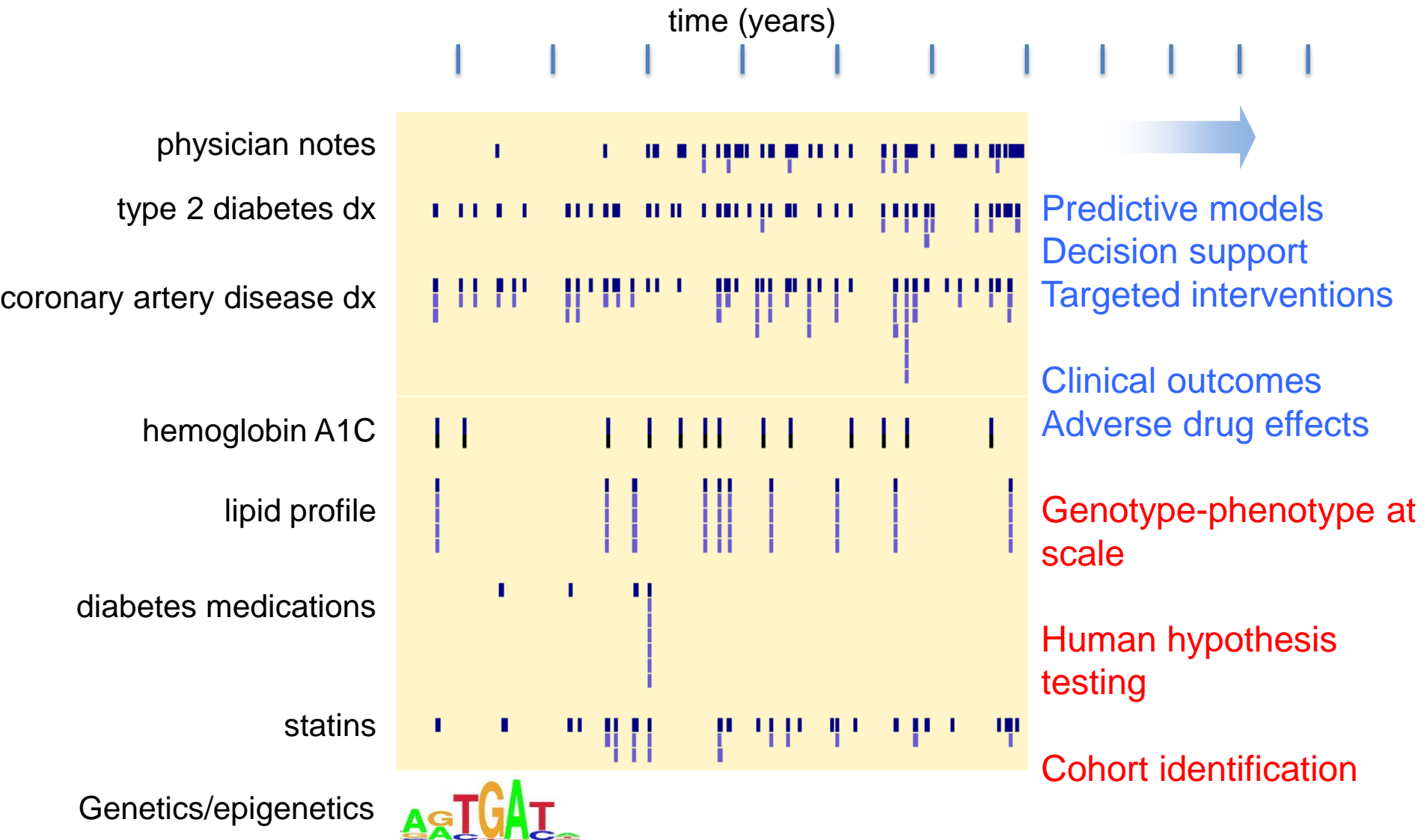
Matched,
de-identified biospecimens
from clinical labs
(Crimson)

Cost-effective measurement of genetic variation and phenotypes of large populations
“Real world” patients
Maintain patient privacy

Advanced phenotyping using data from routine clinical care

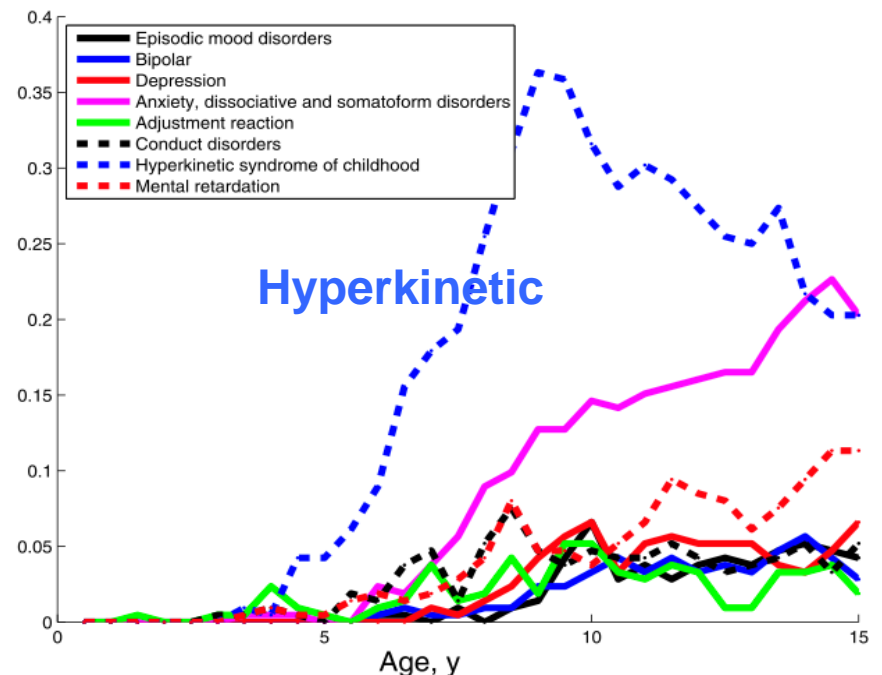
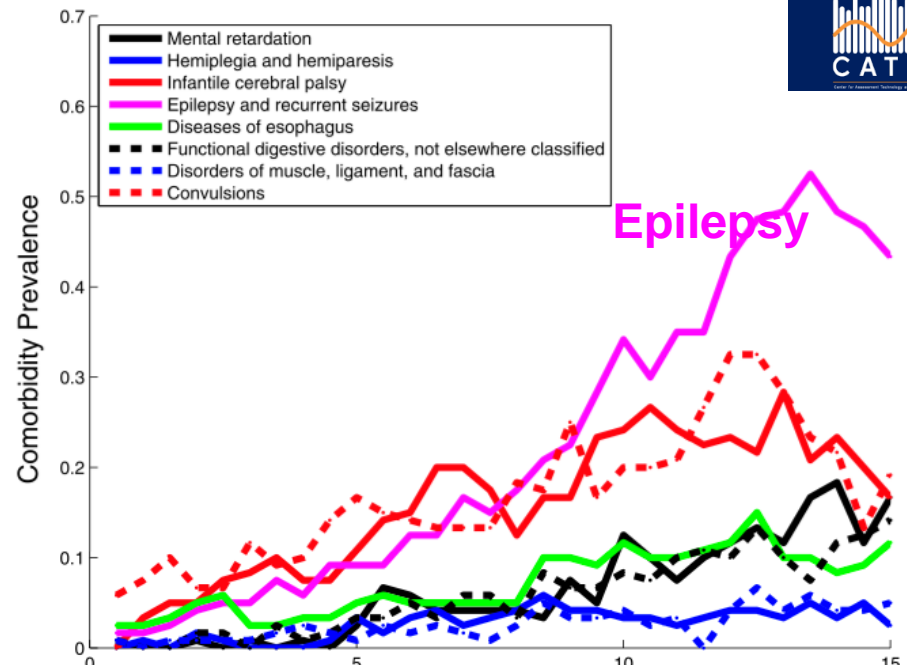
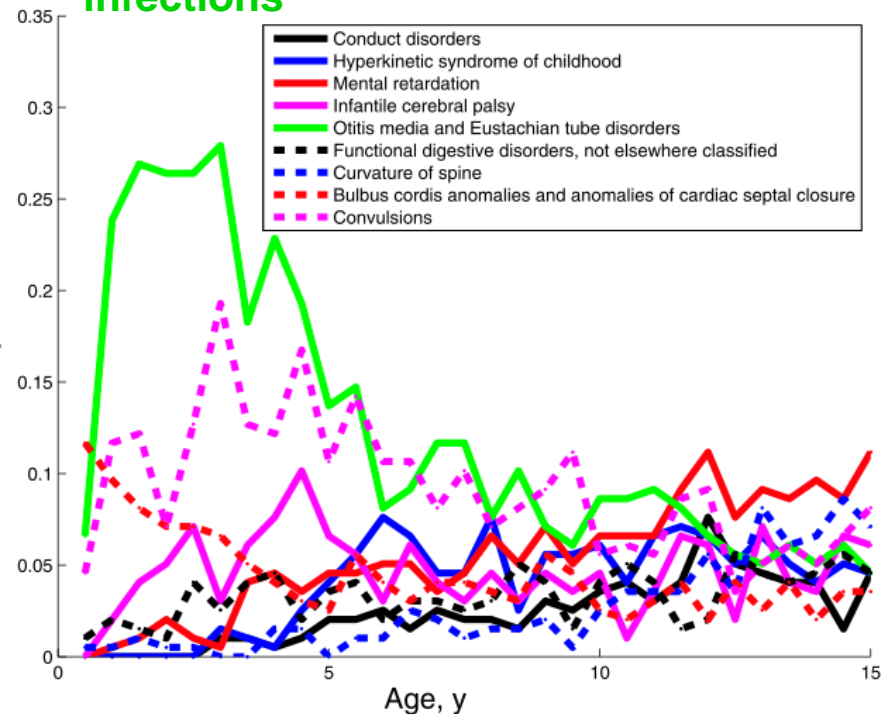


Towards predictive models for outcomes



Stratifying natural history of autism via EMR














Ear infections



We have the genetic and digital revolutions
helping to guide health.

What about the power of social media?

Moving from social media and tweets to Health!

<p>Raf Castillo</p>  <p>This #nsng / #banting diet is no joke. Am tempted to get crp, esr, hba1c, and maybe Fbs and blood lipids done. BP today was 110/70</p> <p>Thu Apr 24 14:15:57</p>	<p>kristopher latimer</p>  <p>I have been sick since Sunday blood pressure 190/100 better now thank you Lord.</p> <p>Wed Apr 23 02:47:09</p>
<p>Cassandra</p>  <p>Perfect timing! Drs visit- BP 110/70 , Pulse 82 and my blood work should be coming in shortly #drvisit #beginningstats #cassandragoesvegan</p> <p>Thu Apr 24 15:45:32</p>	<p>aaron karlo</p>  <p>Just had my bp checked by my sister. 180/100. I haven't done any rigorous activity in the past hour. Hindi normal toh db?</p> <p>Wed Apr 23 08:51:15</p>
<p>melaine mudukuti</p>  <p>Blood pressure at the Dr was 110/70. #StressFree ♡ #praiseJesus #worrylesspraymore</p> <p>Fri Apr 25 13:24:23</p>	<p>self intitled idiot</p>  <p>@Korozjin I talked to my doctor about my 3-4 headaches I was getting daily that last 3-5 hours at a time and he took my Bp. It was 170/90</p> <p>Sun Apr 20 21:29:34</p>
<p>jinglejang</p>  <p>90 lbs since Oct. Bp 110/70. LDL 72. Dropped 100 points in that time. Still going strong. Now it's time to quit smoking. /rage face</p> <p>Fri Apr 25 13:43:03</p>	<p>Veronica Jo</p>  <p>My BP was 170/90 in January when I was really sick with strep. Today it was 118/69! Yay for health!!! ☐ #prayerswork</p> <p>Thu Apr 24 13:42:54</p>
<p>Genevieve C. Opeña</p>  <p>I'M Done for my medical check-up . My blood presure is 110/70.. i tot high blood me... tnx GOD,, FOR guiding my HEALTH... ;;;;;)</p> <p>2014-04-26 02:54:33</p>	<p>Bettina A delRosario</p>  <p>Heat is killing me! BP 160/100. Ice pack on head stat.</p> <p>Thu Apr 24 08:58:06</p>
<p>Brittany Eirwin-Maqueda</p>  <p>In the last 15 months I have gone from resting blood pressure of 120-125/80-85 to 100-110/60-70! <3 Zumba <3</p>	<p>Kenny Gartner</p>  <p>My blood pressure at the doctors the other day? 160/100. I'm healthy and 25 years old. Guarantee that working overnights contributes.</p> <p>Fri Apr 25 21:26:00</p> <p> 120/80 BP 72 beats per min. 95% oxygen saturation. 1st Dr. Visit in years.</p>

Social Media for Healthcare has already arrived with patientslikeme®



patientslikeme®

Account | Settings | FAQ | Crisis | Log out |

Open Private Messages preview

My profile | Patients | Forums | **Conditions** | Treatments | Symptoms | Research

My conditions: Choose one of your conditions...

Learn About Obesity | Conditions > Obesity > How It Affects People

Overview | Community goals | How it affects people | How people treat it

Meet People | Member journals | Who's New

Join the Endocrine, Metabolism and Nutrition Forum

How Obesity affects people

Follow

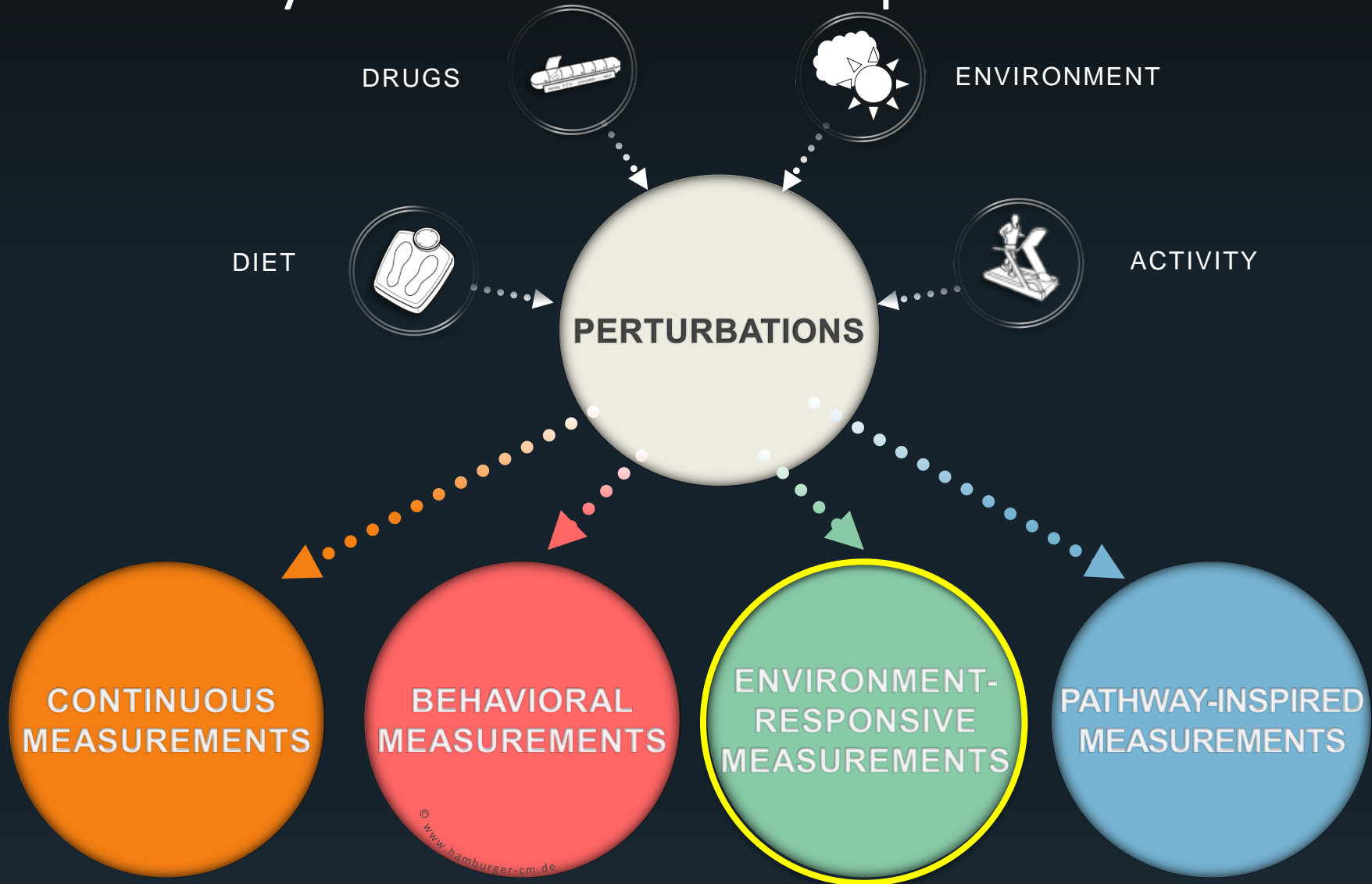
Common symptoms	How bad it is	What people are taking for it
Fatigue		Modafinil, Sleep Study for Sleep Apnea, Rest
Pain		Tramadol, Hydrocodone-Acetaminophen, Ibuprofen
Anxious mood		Alprazolam, Clonazepam, Lorazepam
Depressed mood		Duloxetine, Bupropion, Fluoxetine
Insomnia		Zolpidem, Trazodone, Melatonin

Reports may be affected by other conditions and/or medication side effects. We ask about general symptoms (anxious mood, depressed mood, insomnia, fatigue, and pain) regardless of condition.

Last updated: May 28, 2014

■ Severe ■ Moderate ■ Mild ■ None

Novel phenotypes, analyzed in the context of perturbations



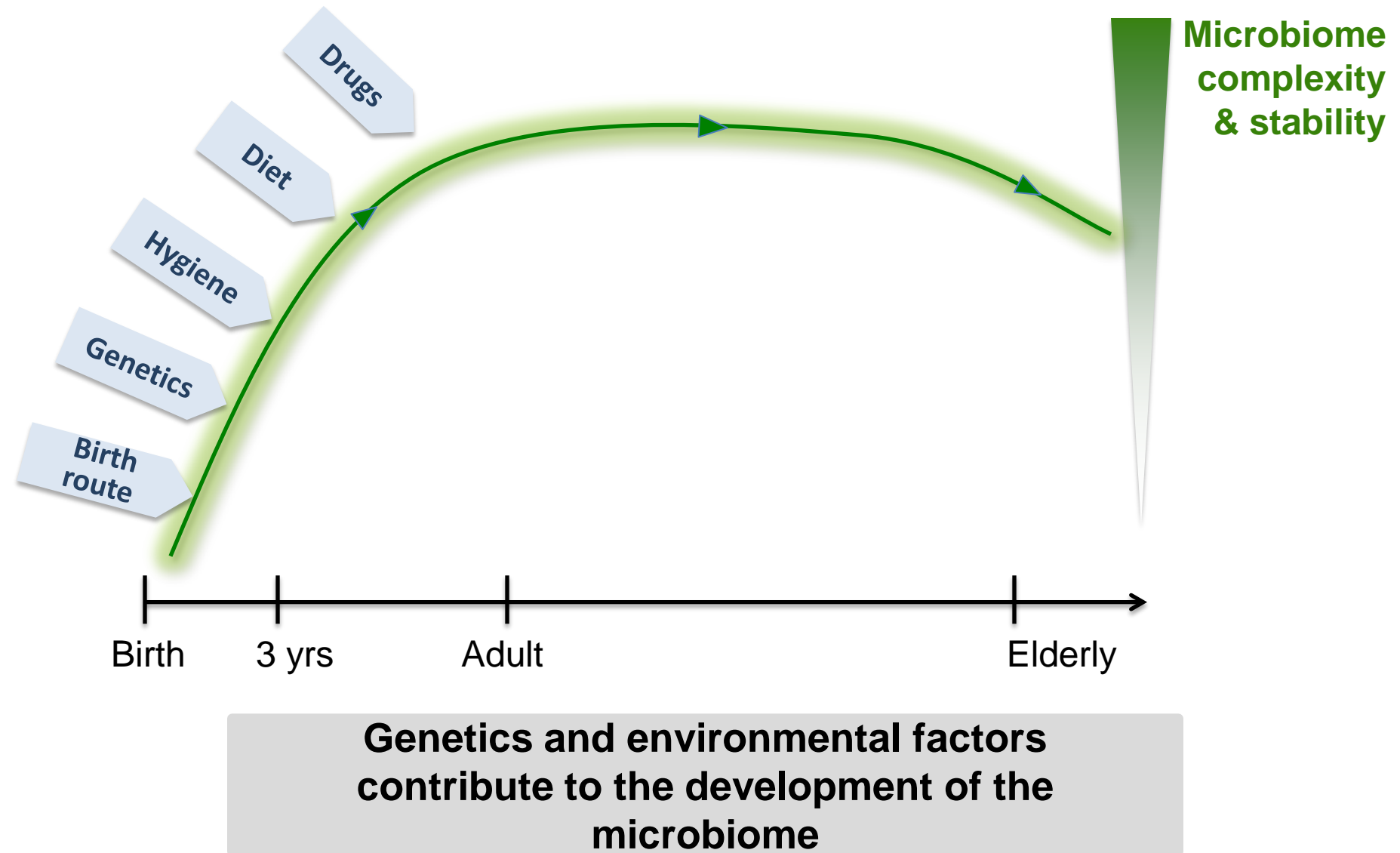
The Human Microbiome

What we know about them:

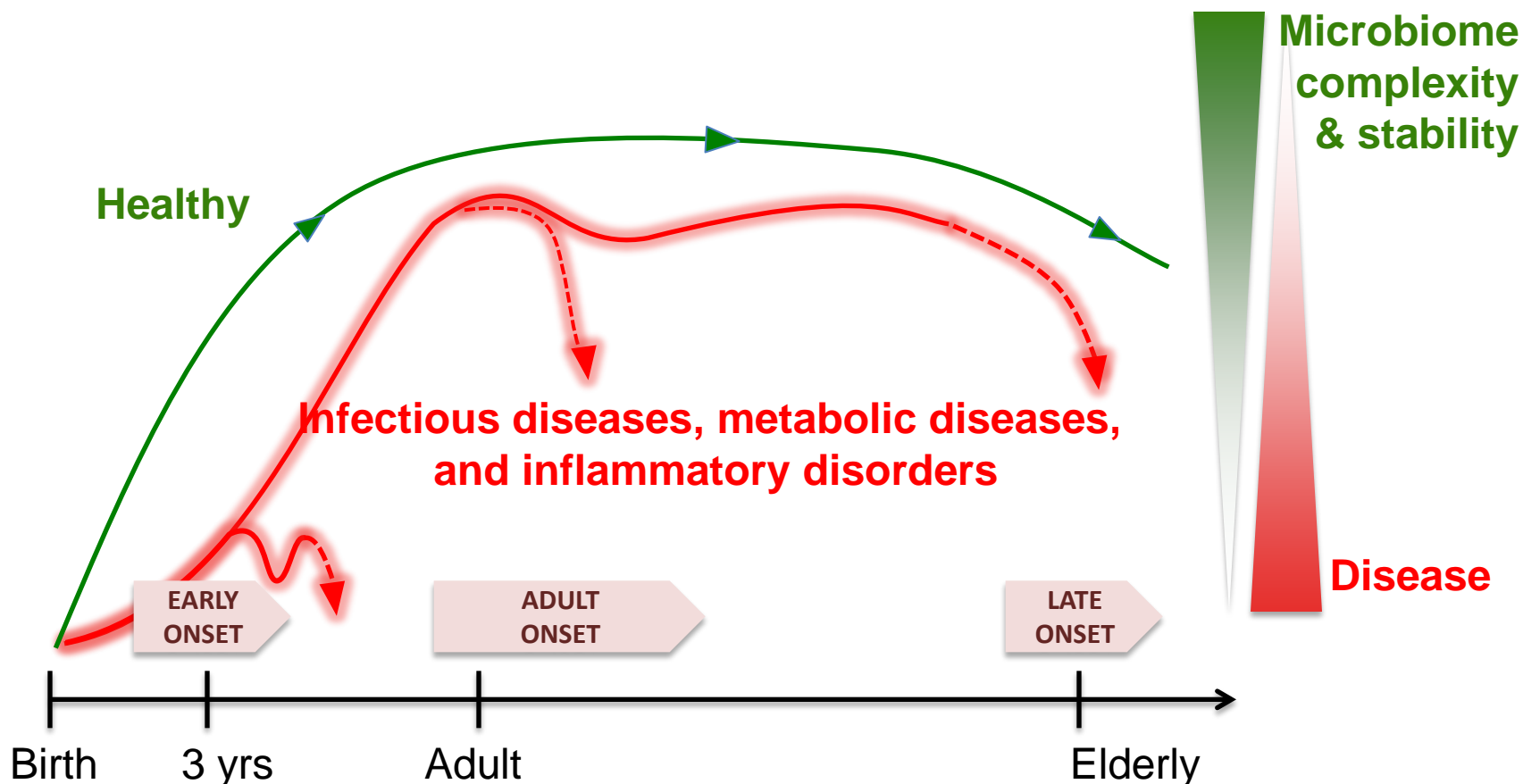
- Microbes outnumber human cells **10 to 1**
- They collectively hold **8 million** unique genes
- There are **10,000** species of microbes
- You carry **2 - 6 lbs** of bacteria



A healthy microbiome *in* a healthy body



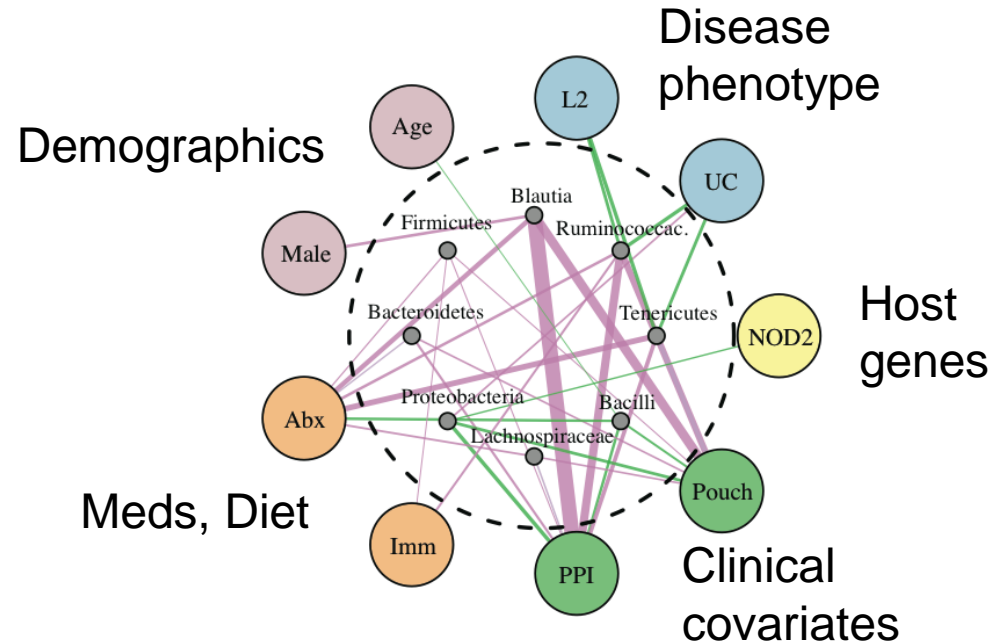
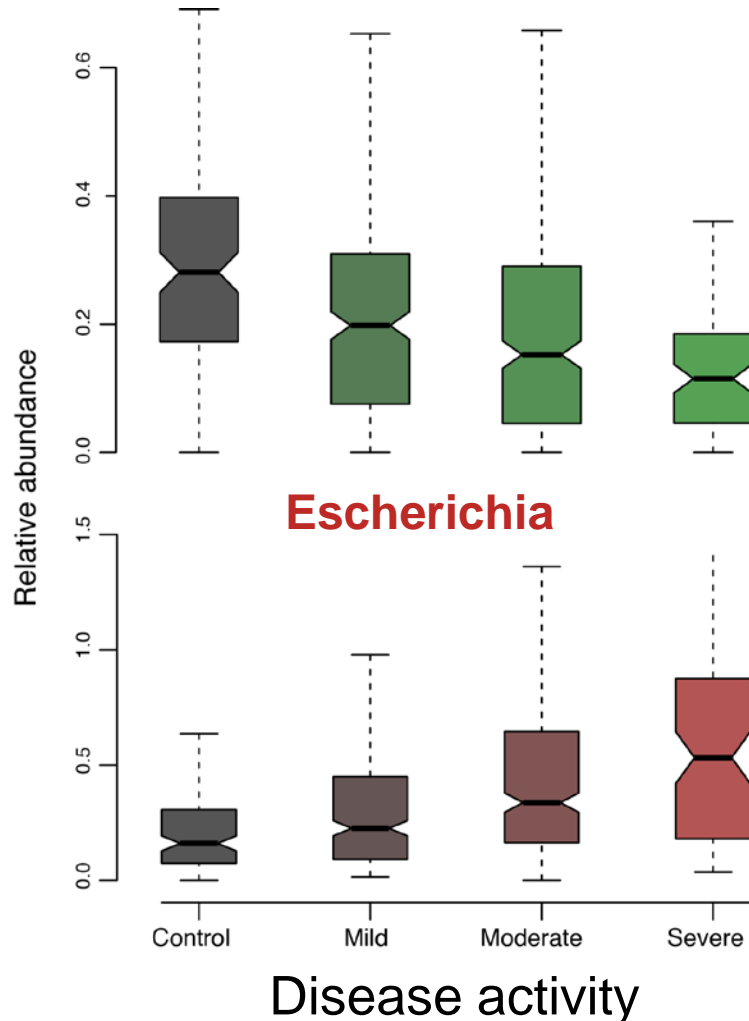
Dysbiosis is implicated in diseases



**Opportunity to use this information to
diagnose, predict, and treat diseases**

Microbiome interacts with host genome, environment, disease phenotypes

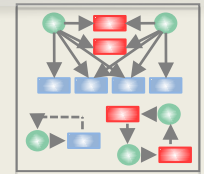
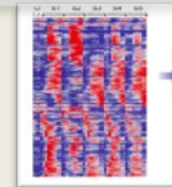
Faecalibacterium



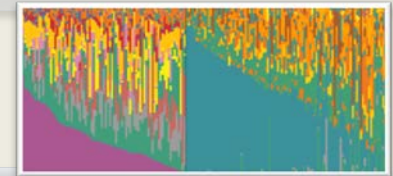
Integrating phenotypes at many levels: chronic diseases with periodic flares

days

Blood samples



Stool samples



Patient symptoms



Behavioral analytics



GINGER.io

An ecosystem outside of medicine



Boston Quantified Self

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QS
Quantified Self
Cambridge, MA
Founded Jan 12, 2010

Self-Quantifiers 1,026
Group reviews 24
Past Meetups 19
Our calendar

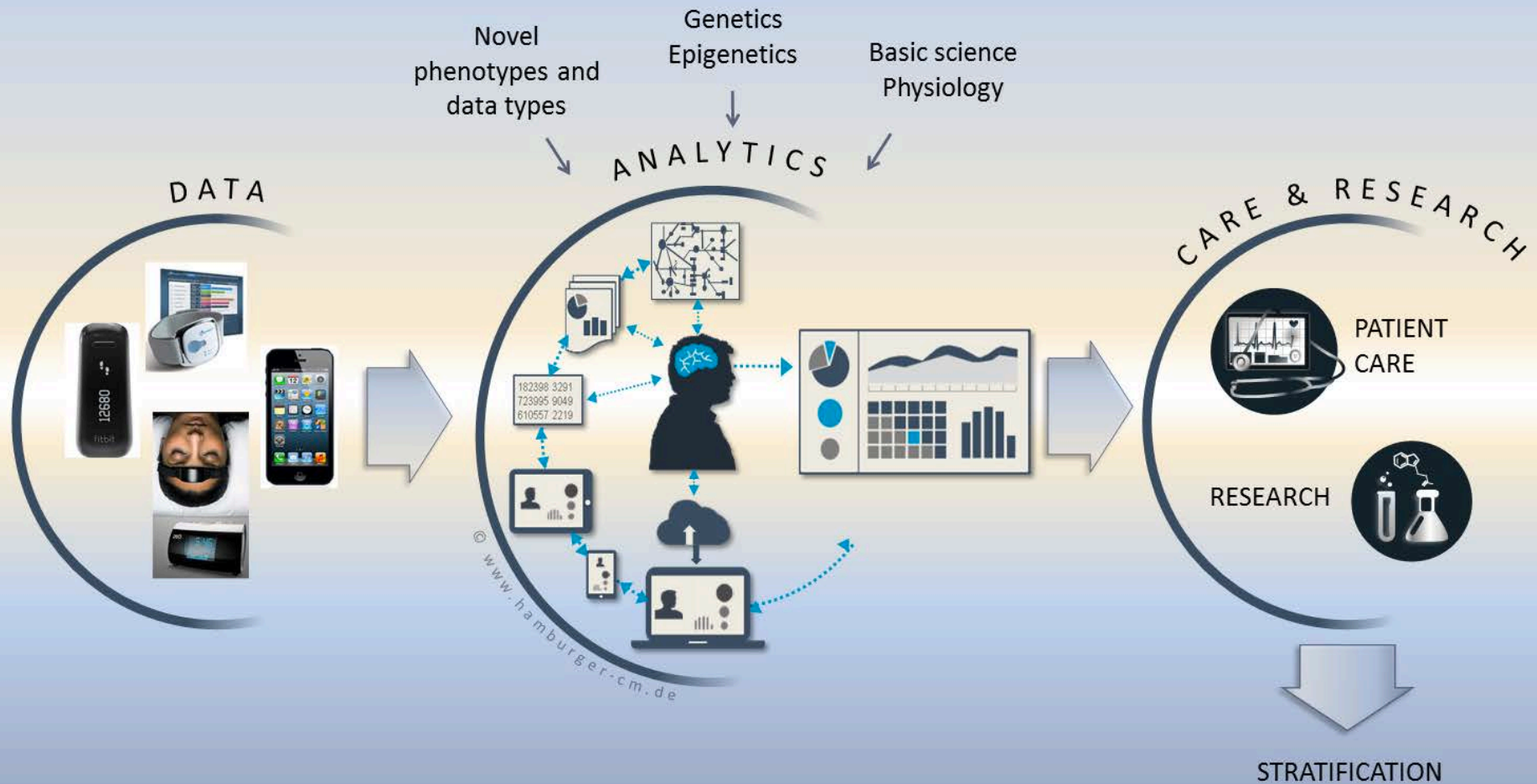
We're about:
Business Networking · Web
Technology · Business Strategy and
Networking · New Technologies · Self

The Boston Quantified Self Meetup (@QSBoston) is inspired by the Bay Area Quantified Self Show & Tell meetings started in 2008 by Gary Wolf and Kevin Kelly in the Bay Area. It's a regular show and tell for people who are tracking data about their body and conducting their own personal investigations and research into their bodies, minds, and selves. Anything is game -- from personal genetics to ways to digitize and track information, from how to self-diagnose to how to self-experiment with data and statistics.

Topics include, but are not limited to:

- * Self Experimentation
- * Personal genetics and genome sequencing
- * Generating, capturing, and working with biometric
- * Lifelogging, lifecaching, lifestreaming
- * Chemical Body Load Counts
- * Self Experimentation
- * Risks/Legal Rights/Duties
- * Behavior monitoring, tracking, and modification (including studying habit forming and breaking)
- * Location tracking
- * Non-invasive Probes
- * Digitizing Body Info

An ecosystem outside of medicine



A new partnership with patients

Engaged, participatory

Two-way information and learning exchange

Patient-controlled data

Unify wellness with spirit of inquiry



Convergence of multiple disciplines

