Machine Learning for Personalized Medicine

Jean-Philippe Vert



DNA = 6 billions ACGT





Human genome project (1990-2003)

- Goal: sequence the 3,000,000,000 base pairs of the human genome
- Consortium of 20 laboratories, 6 countries
- 13 years, \$3,000,000,000











Interactome



Genome



Phenome

Transcriptome



Epigenome

Mutations Structural variations

Cancer: different views



Big data!

http://aws.amazon.com/1000genomes/



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International Cancer Genome Consortium		()CGC Search		d≻Lo	ogin Create your ICGC account		
Cancer Genome Projects	Committees Policies and	Guidelines Media Contacts					
Interna	tional Canc	er Genome Con	SO	rti	um		
Bladder Cancer United States					Liver Cancer Japan		
Blood Cancer United States					Liver Cancer United States		
Bone Cancer United Kingdom					Lung Cancer United States		
Brain Cancer United States	will facilitate communication among the members and provide a forum for coordination with the objective of maximizing efficiency among the scientists				Malignant Lymphoma Germany		
Breast Cancer uropean Union / United Kingdom	working to understand, treat, ar	na prevent these diseases.	A V		Oral Cancer India		
Breast Cancer	Announcements:				Ovarian Cancer Australia		
Breast Cancer United Kingdom	25/Nov/2010 - The ICGC Da announce the release of vers	3		Ovarian Cancer United States			
Breast Cancer United States	in Canada, Australia and the UK. In addition to open access data, ICGC controlled data can now be retrieved securely by users who have been authorized				Pancreatic Cancer Australia		
Cervical Cancer United States	by the Data Access Complian	nce Office (DACO).			Pancreatic Cancer Canada		
Chronic Lymphocytic Leukemia Spain	nature	International network of cancer genome			Bernany		
Chronic Myeloid Disorders United Kingdom	2010) HTML2	projects. Nature 464 , 993-998 (15 April 2010)			Germany		
Colon Cancer United States		1 T T TTANK			Prostate Cancer United States		
Endometrial Cancer United States					Prostate Cancer Canada		
Gastric Cancer					Rare Pancreatic Tumors		

The Cancer Genome Atlas 💬













Diagnosis



Opportunities



Response to drugs

Example: Pharmacogenomics / Toxicogenomics



Crowd-sourcing initiatives

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Synapse ID: syn1761567 DOI: (doi:10.7303/syn1761567)	DREAM Toxicogenetics	s Challenge ★
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Wiki Subpages • NIEHS-NCATS-UNC DREAM Toxicogenetics Data Description Data File Description • Subchallenge 1 Subchallenge 1 Final Scoring Subchallenge 1 Leaderboard • Subchallenge 2 • Subchallenge 2 Final Scoring Additional metrics Updates to Challenge Information	s Challenge (Current Page)	

DREAM8 challenge (jun-sep 2013)



156 chemicals

Genotypes from the 1000 genome project; RNASeq from the Geuvadis project

Our approach



drug descriptors

Learning occurs...



... and it somehow worked

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ng_Lab	UTSW_QBRC_kmb310.txt	syn2219079	27.2198	1	31.8681	2	1.5	1.0
ASSIS	Final_prediction_KRR_int_empiric	syn2224212	31.5714	2	34.3516	4	3.0	2.0
nss2012	Subchal1_randomforest_result.txt	syn2211170	34.8132	3	36.6703	5	4.0	3.0
_ССВ	Prediction_Result_2.txt	syn2227250	38.8242	11	28.1538	1	6.0	4.0
ng_Lab	UTSW_QBRC_kmb24.txt	syn2218907	36.0549	4	38.0110	10	7.0	5.5
A0b	submission.txt	syn2227400	36.3516	6	37.8901	8	7.0	5.5
ng_Lab	UTSW_QBRC_Im5.txt	syn2223150	37.9341		27 7000	-	75 1	
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ng_Lab	UTSW_QBRC_kmb49.txt	syn2218923	36.2747		(PR)			- 10 MA
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More to come!

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Sage Synapse: Contribute to the Cure

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Announcing the 2013 DREAM 8.5 Challenges

We are pleased to announce three new DREAM 8.5 challenges. Best performers in all DREAM 8.5 Challenges will be invited to present at the 2014 DREAM conference (date and location to be determined) with travel expenses covered by the organizers. We are also working to establish publishing partners for each of these challenges. The DREAM 8.5 Challenges are now open for registration, and will begin active problem-solving in late 2013 or early 2014.

Click on a link below to read the Challenge detail and register for a DREAM 8.5 Challenge.

Alzheimer's Disease Big Data DREAM Challenge #1

In the first of what will be a series of Alzheimer's Disease (AD) Big Data Challenges, participants will utilize data from the Alzheimer's Disease Neuroimaging Initiative (ADNI). Data will consist of cognitive, imaging, biological, and whole genome sequencing data on cohorts of volunteers, who range from cognitively normal, mild cognitive impairment and dementia. Participants will analyze the data to solve two sub-challenges: (1) Build a model that best predicts change over time in AD cognitive scores using all available test and adjacent data, and (2) Build a model that best predicts discordance between biomarkers suggestive of amyloid perturbations and lack of cognitive impairment. These models will be used to better understand the biomolecular mechanisms leading to Alzheimer's disease, and ultimately to develop new therapies. We expect to announce a publishing partner for this Challenge shortly.

ICGC-TCGA-DREAM Somatic Mutation Calling Challenge

Working with technology partners Google and Annai, we will provide 9 terabytes of raw human sequence data derived from pairs of normal and tumor tissue (from prostate and pancreas). Approved participants will analyze the data to solve two sub-challenges: (1) build a model that accurately predicts cancer mutations that alter a single nucleotide in the genome (single nucleotide variants, SNVs) (2) Build a model that accurately predicts cancer mutation, SV), such as a rearrangement, inversion or copy-number aberration. Improving the algorithms that correctly identify these variations is important because these variations provide key genetic data which can be used by predictive models to guide personalized cancer therapies. *Nature Publishing Group* enthusiastically welcomes the opportunity to consider for publication work that achieves best performance in this Challenge.

The Rheumatoid Arthritis Responder Challenge

Participants will have access to whole genome genotype data (2.2 million SNPs) and clinical data collected from 2,000 individuals with Rheumatoid Arthritis who have been treated with anti-TNF therapy. Up to one third of these patients fail to enter clinical remission. Participants will use these data to solve two sub-challenges: (1) Build a model that best predicts treatment response as measured by the change in disease activity score (DAS28) in response to anti-TNF therapy, and (2) Build a model that best predicts poor responders as defined by specific criteria (yet to be specified). The winning model will be the one that can predict the largest portion of this sample subset (~10% of the population) with a positive predictive value greater than a predetermined cutoff. These models could be used to ensure patients likely to respond to anti-TNF therapy receive the treatment, while those who are unlikely to respond are shielded from harmful side-effects and directed to new treatment approaches. *Nature Genetics* will consider for places the treatment approaches. *Nature Genetics* will consider for places to the specific of the angle is a specific of the angle is a charge of the population.

Thanks!

