NCI: Development of International Resources as Required for Personalized Medicine

Clinical Model: Measurement of Response to Therapy Using Imaging as a Biomarker

Strategy: Funding Agency Perspective

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Division of concer Treatment and Diagnosis (DCTD)

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HISC Canberra Australia Aug 21st 2009

Personalized Medicine: Clinical Model

- The next generation of electronic health care (ehealth) will most certainly include a strong emphasis on molecular based screening, diagnosis, and treatment methods as ways to facilitate personalized.
- One rapidly maturing medical discipline in personalized medicine strategies is in vivo functional and molecular imaging.
- Imaging has the potential to take the lead in integrating informatics and clinical decisionmaking software tools, creating the role of imaging as a biomarker

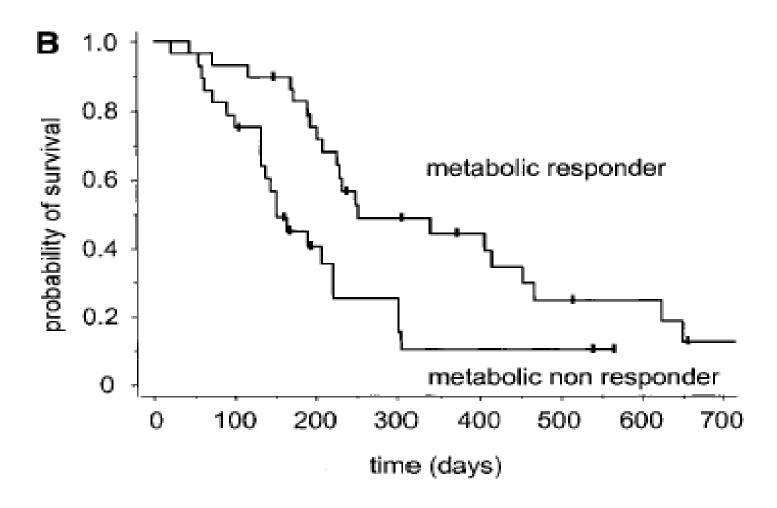
Personalized Medicine: Clinical Model

- NCI is exploring an <u>integrated approach</u> for creating reference standards for both data and software tool interoperability and clinical decision software tools.
- Goal of this presentation is to describe
 - -NCI initiatives in this area
 - Potential collaboration with Australian researchers
 - Potential leveraging of resources with Australian funding agencies

Clinical Model: Measurement of Therapy Response in Biomarker Clinical Trials

- Challenges: Data Complexity-Measurement Uncertainty
 - Multi-Modality-Molecular Imaging (PET-CT, MRI-PET,..)
 - Multi-dimensional and heterogeneous data
 - Resolution scale: cell to organ level
 - Physical measurement uncertainty –imaging platform dependent
 - Biological variability- impacts measurement uncertainty
 - Need for quantitative methods for analysis ..as opposed to observer based measurements of change over time.
- Barriers: Convert data to knowledge, absence of reference standards or consensus for:
 - Image data collection-analysis across imaging platforms
 - Data query and inter-operability of validation tools
 - Image data and meta data integration with other laboratory assays
 - Standards for validation of performance of clinical decision tools

Example: Prediction of <u>overall survival</u> after chemo in patients with NSCLC by FDG-PET



Weber WA et al. J Clin Oncol 2003.

Scope of Presentation: 4 topics

- 1. caBIG: Imaging workspace and open source tools
- 2. Web accessible reference image database resources
 - Phantom Studies
 - Clinical trial image data collections
 - Archives: Data integration
- 3. NCI international funding initiatives:
 - R01: Investigator Initiated grants
 - Research networks
 - Current generation of imaging platforms
 - Next generation of imaging platforms
- 4. Integrated approach to development of informatics and imaging standards

1. NCI Contract: caBIG® Core Principles

 Open Access — caBIG[®] is open to all, enabling wide-spread access to tools, data, and infrastructure

 Open Development — Planning, testing, validation, and deployment of caBIG[®] tools and infrastructure are open to the entire research community

 Open Source — The underlying software code of caBIG® tools is available for use and modification

 Federation — Resources can be controlled locally, or integrated across multiple sites



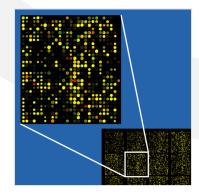
1. caBIG Path to Personalized Medicine Major Challenge: Data Integration



Clinical Data and Trials Management



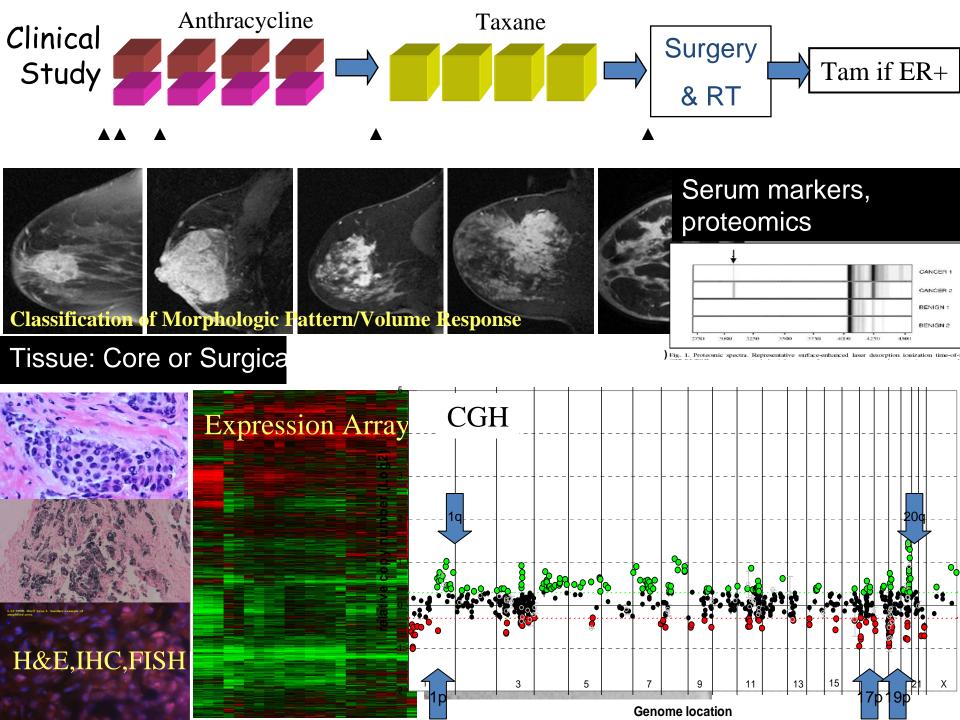
Biospecimen Management



Molecular Characterization



In Vivo Imaging



1. NCI caBIG Imaging Workspace

NBIA

Image repository

AVT

XIP

Toolkit to build

sharable imaging

applications

s Measurement, change detection validation

AIM

Share annotations and markups

Query Form

Allow searches of mage data

Middleware

Connect to caGrid for bulk data transfer

Supported by caBIG® vocabularies and ontologies and DICOM Data Elements and Ontology

- Digital Imaging and Communications in Medicine (DICOM) is a standard for handling, storing, printing, and transmitting information in medical imaging.
- caBIG® Imaging tools are DICOMcompliant and allow for the annotation, visualization, and sharing of data.
- Specialists can select any or all of the tools to meet research or clinical needs

2. NCI Contract: RIDER Database Resource

Public Resource of Image and Meta Data: CT, PET CT, DCE- DW MRI

Repeat and longitudinal phantom and patient data-with results

Open architecture platform, inter operable validation tools: annotation, validation, statistical analysis

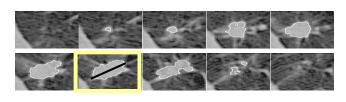
Open Science: Benchmarking data collection-analysis tools



2. CT Lung: Measurement of Response to Therapy over Time





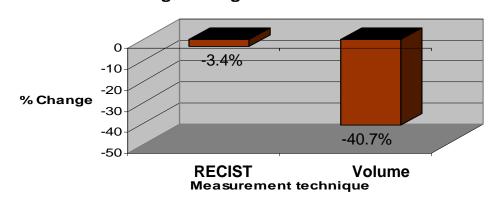


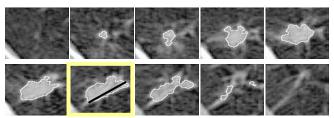
Diameter=17.7 mm

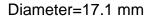


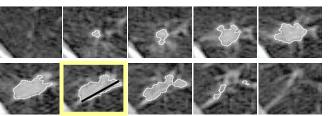
 $Vol=525.4 \text{ mm}^3$

Percentage Change in the measurement

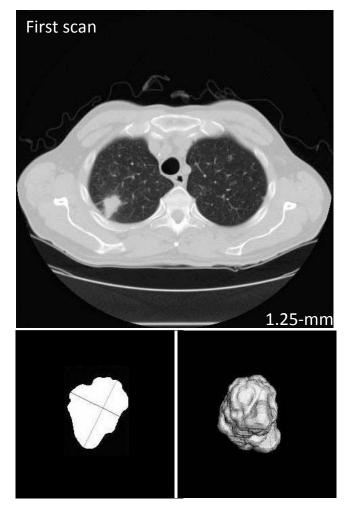






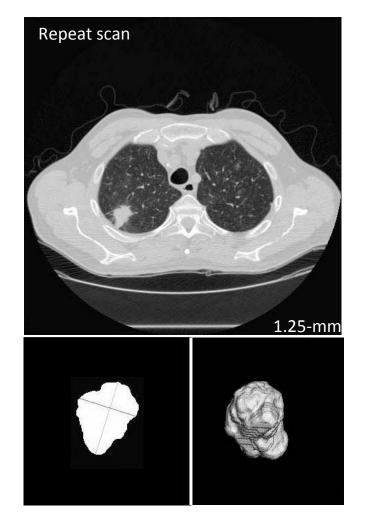


2. Same-day repeat CT Study: Minimum Change



First scan

Unidimension (mm): 27.6
Bidimension (mm²): 552
Volume (mm³): 4957.1



| Second scan | Relative Difference |
|-------------|---------------------|
| 27.8 | 0.7% |
| 597.7 | 7.9% |
| 4852.3 | 2.1% |

2. NCI Contract: caBIG: Virtual Imaging Workspace RIDER-NIST Bio-change XIP (Manual) (Batch) Measurement Host Algorithm Image **Variability** Annotation Execution **Tool Statistics** ¥ A M $\frac{A}{M}$ DICON **Annotation Database** AVT Phase II is a caGRID client ONLY caGRID

caBIG AVT: Algorithm Validation Tools: Clinical Performance

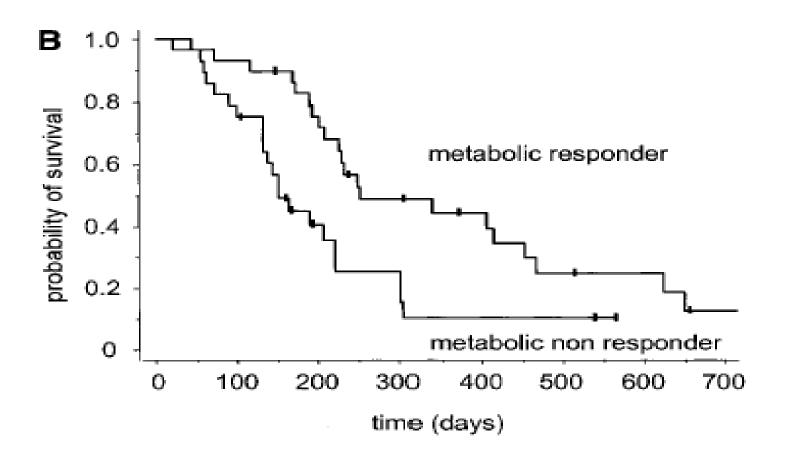
AIM DS

e.g. NCIA

DICOM DS

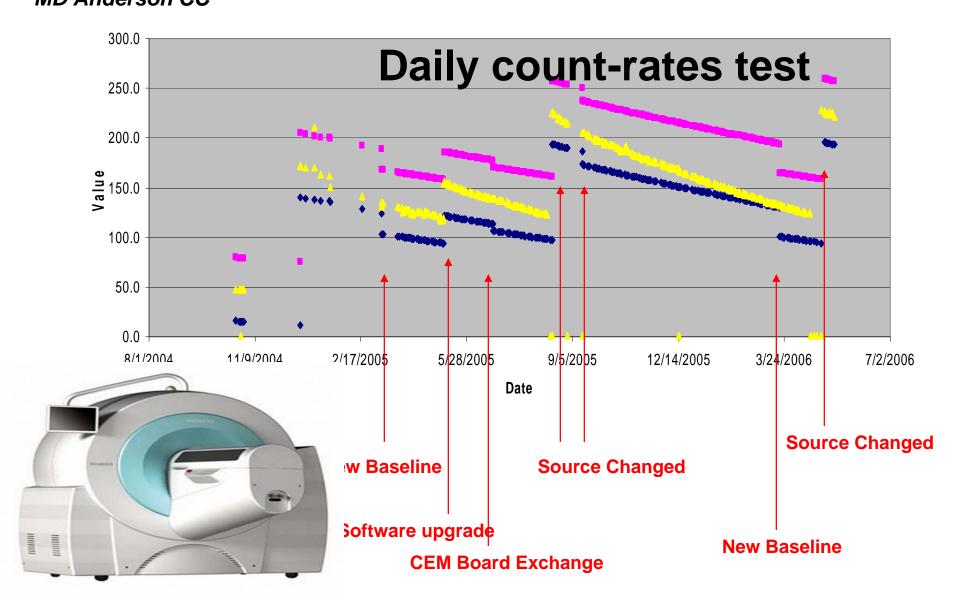
e.g. NCIA

2. Example: Prediction of <u>overall survival</u> after chemo in patients with NSCLC by FDG-PET



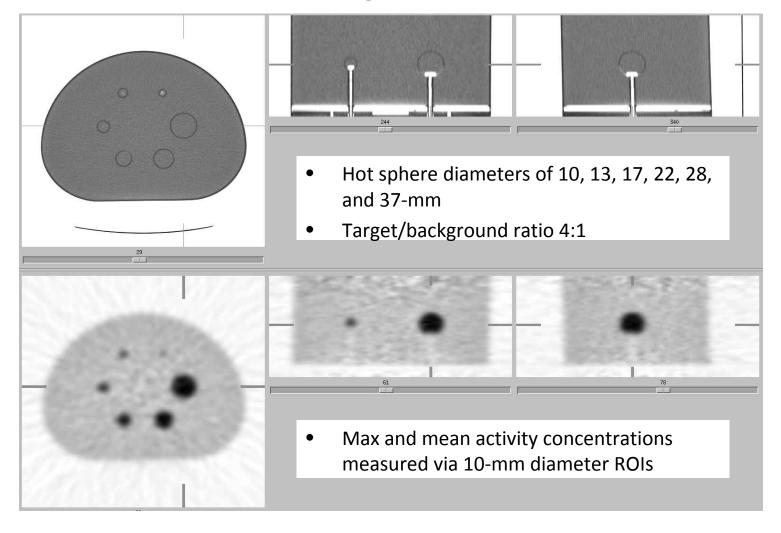
Weber WA et al. J Clin Oncol 2003.

2. PET CT: Systems Changes Over Time Osama Malawi, PhD Sources of Bias/Variance: MD Anderson CC



2. NCI Contract: PET: System Drift over Time

Paul Kinahan Uni. Of Washington: SUV Sphere Measurements



Joint Collaboration: [NCI, FDA, NIST] and [SNM, AAPM, RSNA]

3. NCI PAR:07 214: R01 Traditional Funding Mechanism Academic-Industry Partnerships: \$500K/year.

Translational Research Goals: Early cancer detection, diagnosis, IGI, and therapy response, including imaging as a biomarker

Research emphasis:

- Imaging Platforms: Human and Pre Clinical
- Validation of multi-modality imaging platforms
- Quantitative Imaging methods as a biomarker
- Development of public resource for Q/C, phantoms, software tools assessment
- Travel –Collaboration: FDA and NIST scientists
- Multiple Pl's: Option International Pl's.
- caBIG Compliant: Open source architecture and software
- CSR Review: Special Emphasis Panel.
- Link to NCI funded U01's and U54's [Described later]

3.PAR 08 225: Quantitative Imaging Network (QIN) Evaluation of Responses to Cancer Therapies Mission Goals

- Quantitative Imaging: Develop methods for data collection and analysis that permit the implementation of quantitative clinical decision tools to measure response to therapy.
- Implementation Model:
 Clinical trials in cancer centers
 or other oncology trial groups

Commercial Platform Example: PET CT



- Multi PI U01 Grants: Support multi-disciplinary and multi-site teams, including industry
- **Budget:** Total direct costs not to exceed \$500k
- Research Component: Imaging scientists with expertise in quantitative imaging and informatics
- Clinical Component: Cancer Centers, SPORES, other groups experienced in early phase clinical trials
- U01 Mechanism. International investigators can apply.

3. PAR 08 225: Quantitative Imaging Network (QIN) Evaluation of Responses to Cancer Therapies Proposed Strategy Web Assessable Resources

10-15 U01 centers

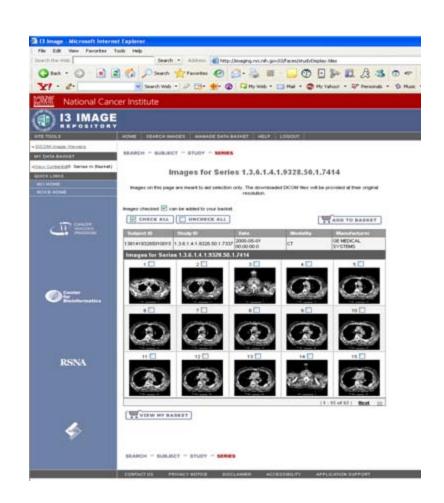
- Array of Therapy Trials
- Array of Imaging Platforms
- Array of Software Tools

Consensus Deliverables

- Imaging Protocols
- Imaging Q/C Methods
- Image Database Resources
- Clinical Outcomes
- Optimization-Validation Studies for Therapy and Drug Trials

Associate Members (AM's)

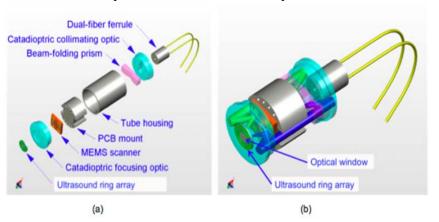
• Expand the number of sites Cancer centers and Overseas



3. Network For Translational Research (NTR) Mission Goals

 To develop, optimize, and validate multi-modal molecular imaging platforms and methods so that they can enter single or multi-site clinical trials and incorporated into clinical trials/practice within 5 years.

3MM MEMS Optical/US System Detection/Characterization/Treatment



- Develop <u>integrated platforms</u> for an array of imaging modalities across different resolution scales from the tissue -organ level.
- Drive <u>consensus on methods</u> to validate performance of these multi-modal platforms with a goal of broader dissemination and FDA approval.

GI: Cather Based Molecular Imaging



Normal illumination

Fluorescence

Filtered White light

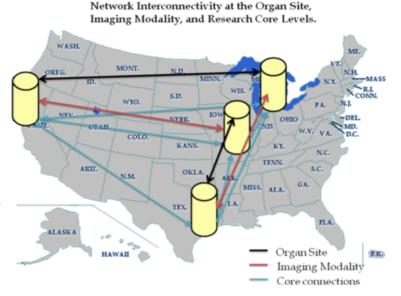
3. Network for Translational Research (NTR): Optical Imaging in Multimodal Platforms

Four Multi Site centers

- Two studying cancers of GI tract.
- Two studying breast sentinel lymph node staging.

• Five network-wide cores

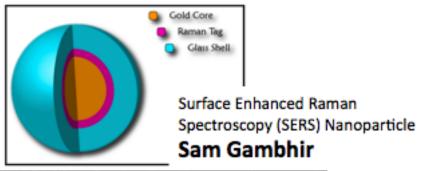
- Standards & Compliance
- Chemistry Probes & Guided Therapy
- Information Technology
- Instrumentation & Industrial Relations
- Validation & Clinical Studies
- Associate Members (AM's)
 - International investigators can apply
 - Leveraged funding sources



Stanford University
University of Michigan
Washington University
University of Texas Health Science

3. Validation Challenges: Multi Modality Molecular Imaging Platforms

Multiplexed Probes

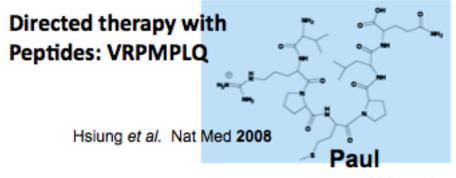


PROBES: In Vivo Imaging

of Liver Metastasis

Larry Marnett and

Rational Design

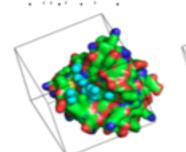


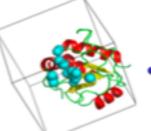
Wender

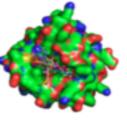
Molecular Modeling

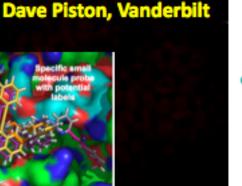
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FYNVHLEDEEEPKDEDFSPOGGYIPRILFLDPSGKVHPEIINERGNPSYKYFYVSABQVV

ORREAGERITGDAFR 135









AGR2

AGR 2

THIOREDOX IN-LIKE

THIOREDOXIN-LIKE

Therapeutics: AGR2 control of esophageal cancer

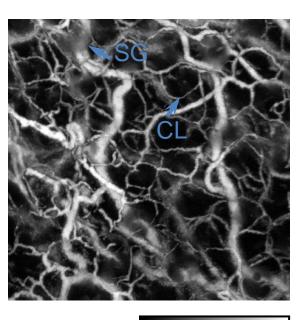
David Ostrov, University of Florida

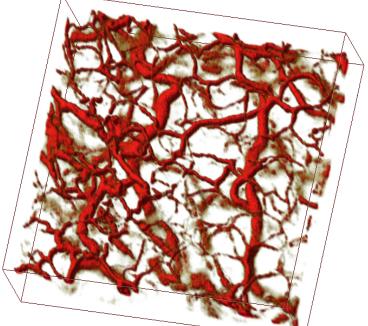
3. Validation Challenge: High Resolution Platforms Photo-acoustic Microscopic Imaging Nude Mouse In Vivo: 5 Micron Resolution

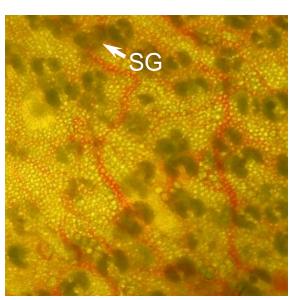
Photoacoustic image: Projection

Photoacoustic image: 3D

Optical microscopic image







– 50 μm

SG: sebaceous glands

CL: capillary (diameter of \sim 5 μ m)

Optics Letters 33, 929 (2008).

4. NCI is exploring an integrated approach for creating reference standards for both data and software tool interoperability and clinical decision software tools.

Research Networks Academia-Industry

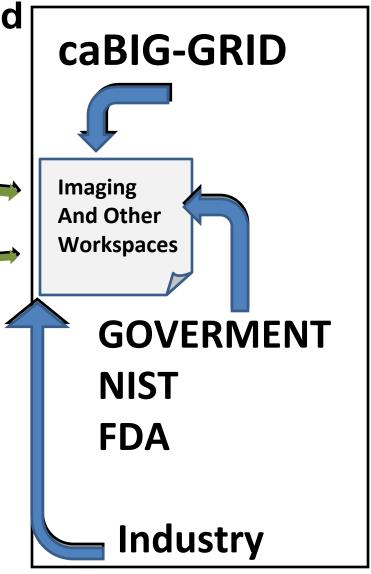
USA: Cancer and other Research Centers –

Consensus: Measurement Uncertainty

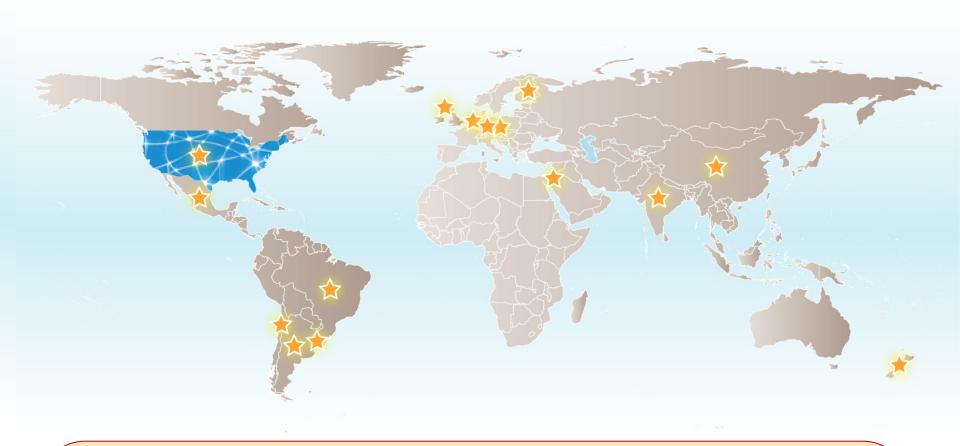
Consensus: Data Integration-Standards

Critical Need......

National and International Outreach!



4. Explore Pilot Project: Extend caBIG to include Global Research Networks



caBIG®, the world's largest biomedical research "highway", connecting a growing number of people and organizations across the globe

Pilot Project: Potential Avenues

NCI Imaging Networks

☐Membership Roles

- Steering Committee
- External Advisory
 Committee
- Selected Research Cores

☐ Functional Role

- Participate PAR 07 214 (R01)
- Link R01's with Networks
- Workshop Reports
- Consensus based Publications-
 - Validation Methods
- Public Private Partnerships
 Foundation NIH or FDA

Potential Impact

- ☐ Technology
 Dissemination
 - Reduce scientific barriers for approval of combined technologies
 - Development of resources to promote standards for validation of imaging platforms
 - Promote GLP and GMP in earlier in development of technology
 - Participate in <u>comparative</u> <u>effectiveness</u> early in the validation of technologies

URL's for reference

- NCI CIP Program: http://imaging.cancer.gov/
- caBIG[™] Website: <u>https://cabig.nci.nih.gov</u>
- FDA Critical pathways report: Drug Response:
- http://www.fda.gov/oc/initiatives/criticalpath/
- FNIH Biomarkers Consortium
 http://www.biomarkersconsortium.org
- Network for Translational Research (NTR):
 http://grants.nih.gov/grants/guide/rfa-files/RFA-CA-08-002.html
- Quantitative Imaging Network (QIN) http://grants.nih.gov/grants/guide/pa-files/PAR-08-225.html
- RSNA QIBA RSNA QIBA http://www.rsna.org/Research/qiba.cfm
- NIST: Interagency Workshop on Biomarkers 2006: (NCI, NIH, FDA, NIST) http://usms.nist.gov/workshops/bioimaging.htm

3. Network: Expansion and Opportunities

Associate Members

International Members

In progress

- ☐ Associate Member Organizations.
 - Strengthen Research Teams
 - Strengthen Research Cores
 - Increase consensus-building base.
 - Bring data & methods to the research community on a timely basis.
 - Develop web bases resources
- ☐ Leverage funding
 - Associate members will have grant funding in cancer imaging.

- ☐ Cancer Research UK?
 - Imperial College London
 - The Institute of Cancer Research (ICR)
 - King's College London (KCL) & University College London (UCL)
 - University of Oxford
- **■** EU Funded Centers?
- ☐ Australia/other

Network Governance

Steering Committee

☐ Membership

- The PI and one other investigator from each center (1 vote cumulative)
- 3 NCI program staff (1 vote cumulative)
- Other Research staff (FDA, NIST etc.); no voting rights

☐ Functional Role

 Provides guidance on governance issues of NTR including cores

External Advisory Committee

- ☐ Membership
 - Scientific Societies: RSNA (QIBA), SNM, AAPM, ISMRM.
 - FDA, NIST
 - Imaging Industry and Pharma: Leverage interest in common validation approaches for FDA guidance documents etc
 - <u>International:</u> Cancer Research UK, EU, others?

Network: Validation Challenges Key Requirements Common Research Cores

- Large Scale: Inter-operable validation and statistical tools
- Multi-Modal Image Registration
- Pathology Correlation-Registration across different resolution scales
- Sharing devices, tools and probes
- Animal Cancer Models
- GLP and GMP across sites

- Information Technology
- Chemistry Probes & Guided Therapy
- Instrumentation & Industrial Relations
- Validation & Clinical Studies
- Standards & Compliance

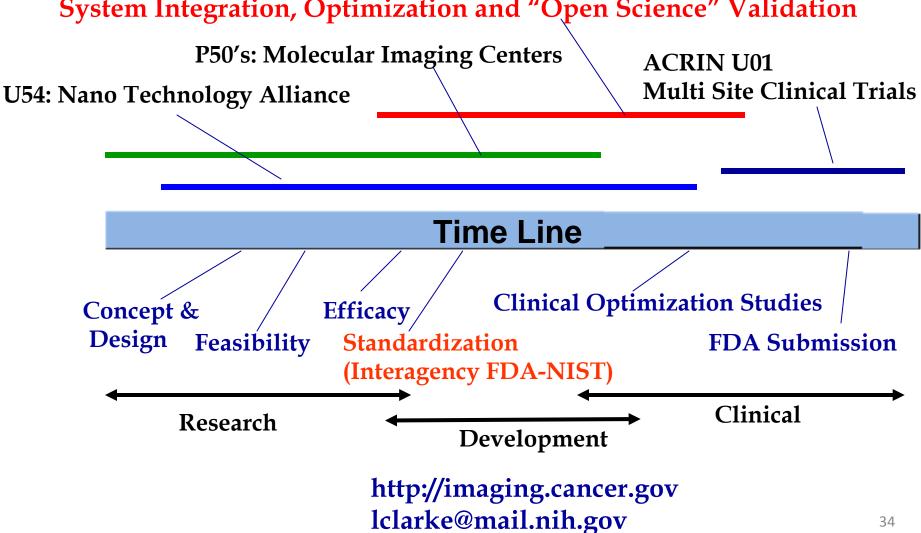
NCI Research Resources NCI (SAIC Contracts) Goals

- Ca-GRID and Federated Databases
- NCI caBIG Imaging Workspace
- NCI Biomedical Imaging Archive
- Reference Image Database to Evaluate Response (RIDER)
- RIDER: Quality Control Phantoms

- Data Integration and Clinical Decision Tools
- Computer Platform for Interoperable Tools
- Storage Clinical Trial Data
- Targeted Data Sets for Benchmarking Tools
- Q/C for Drug Trials

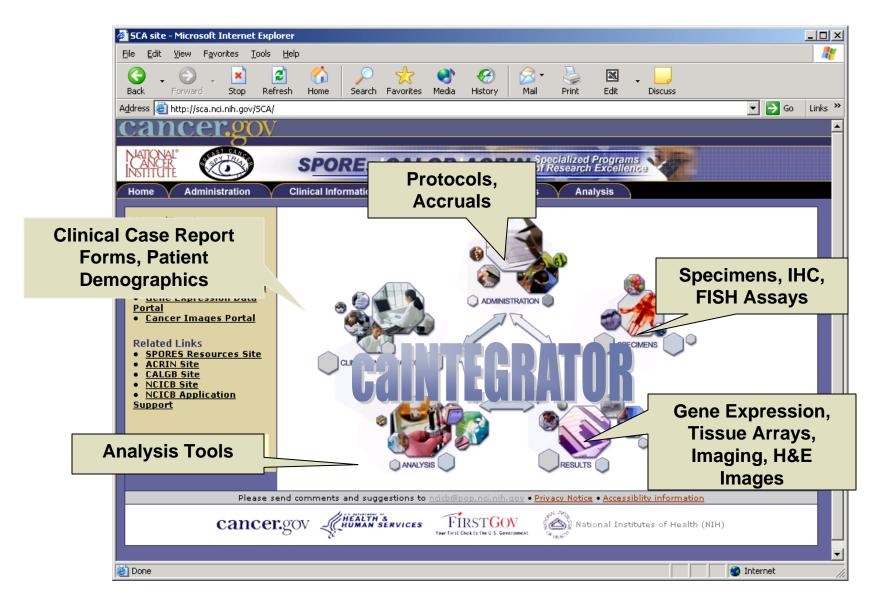
Optimization of Imaging Platforms for Next Generation of Clinical Trials (5 years)

U54: (NTR): Network of Networks: Highly Leveraged System Integration, Optimization and "Open Science" Validation



I SPY Trial Web Portal Academic Software Tools





NCI Strategy: Current Generation of Imaging Platforms For Clinical Trials

PAR U01: Quantitative Imaging Network (QIN)

PAR: R01: Academic Industry Partnerships: Tools/Methods **ACRIN** Trials **NCI Contracts:** caBIG, Image Databases Phantom Q/C **Time Line Clinical Optimization Studies Efficacy** Concept & Design **FDA Submission Feasibility Standardization** (Interagency FDA-NIST) Clinical Research Development http://imaging.cancer.gov lclarke@mail.nih.gov

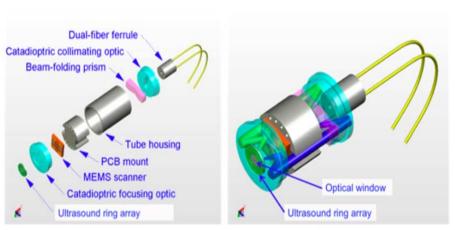
Mission: Imaging Technology Branch:

- Development and validation of current and next-generation of imaging platforms, methods and web accessible resources, as required for their broad dissemination, and FDA approval
- Goal: Provide imaging methods for cancer research and clinical trials that are validated in a standardized manner

Current Generation: PET CT

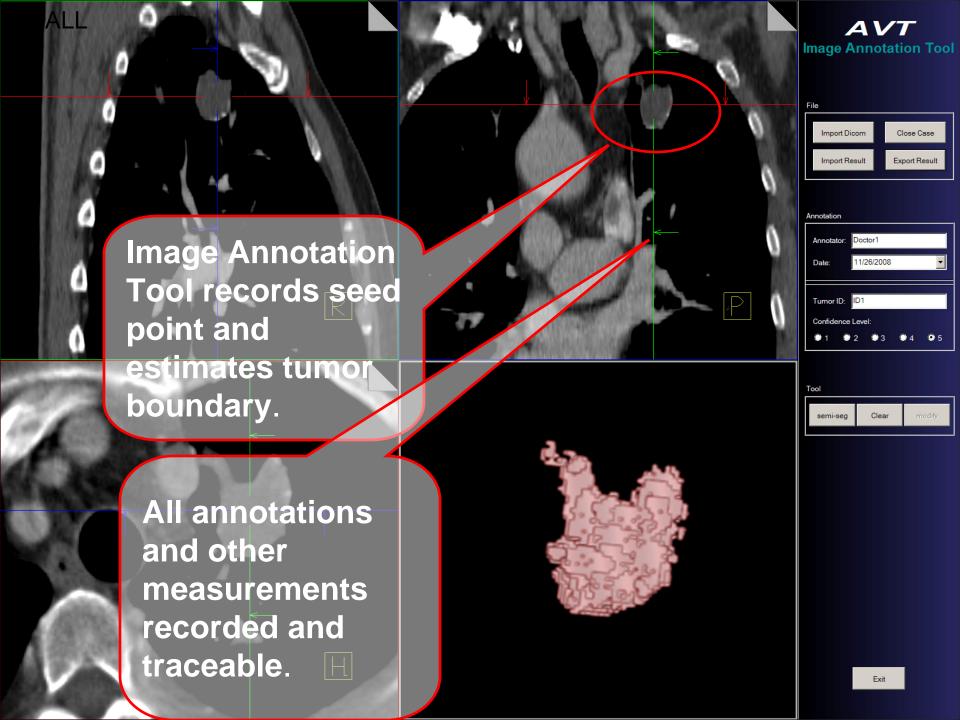


Next Generation: Optical-US 3 mm



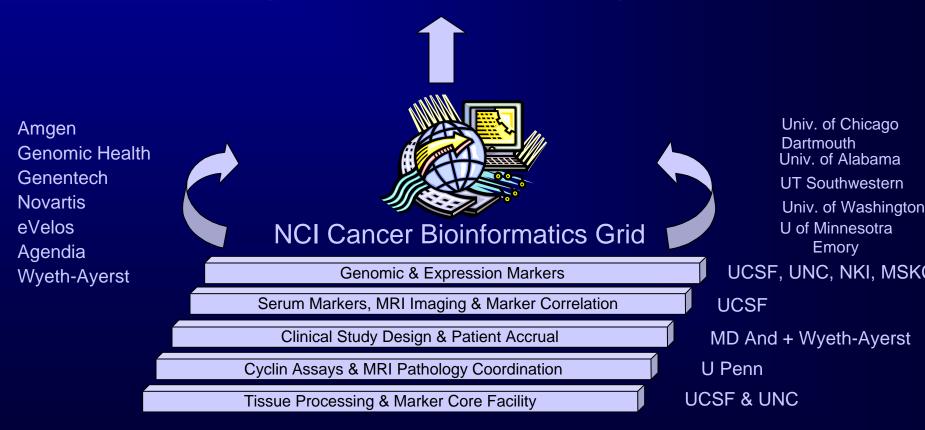
a)

(b)



CaBig Data Integration Problem I SPY Neoadjuvant Breast Trial

Mine data to bring better science insight to bear on decisions to change therapy and guide the introduction of new therapeutic agents



Pharma/Biotech

Modalities

Participating Sites