

# NCI's Patient-Derived Models Repository: Generating Models from Racial and Ethnic Minorities

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*Leidos Biomedical Research, Inc. In Support of DCTD, NCI*

*April 7, 2017*

<https://pdmr.cancer.gov>

## Disclosure Information

*AACR Conference on the Science of Cancer Health Disparities in Racial/Ethnic Minorities and the Medically Underserved*  
*Yvonne A. Evrard, PhD*

**I have the following financial relationships to disclose:**

**Employee of:** Leidos Biomedical Research, Inc.

**I will not discuss off label use and/or investigational use in my presentation.**

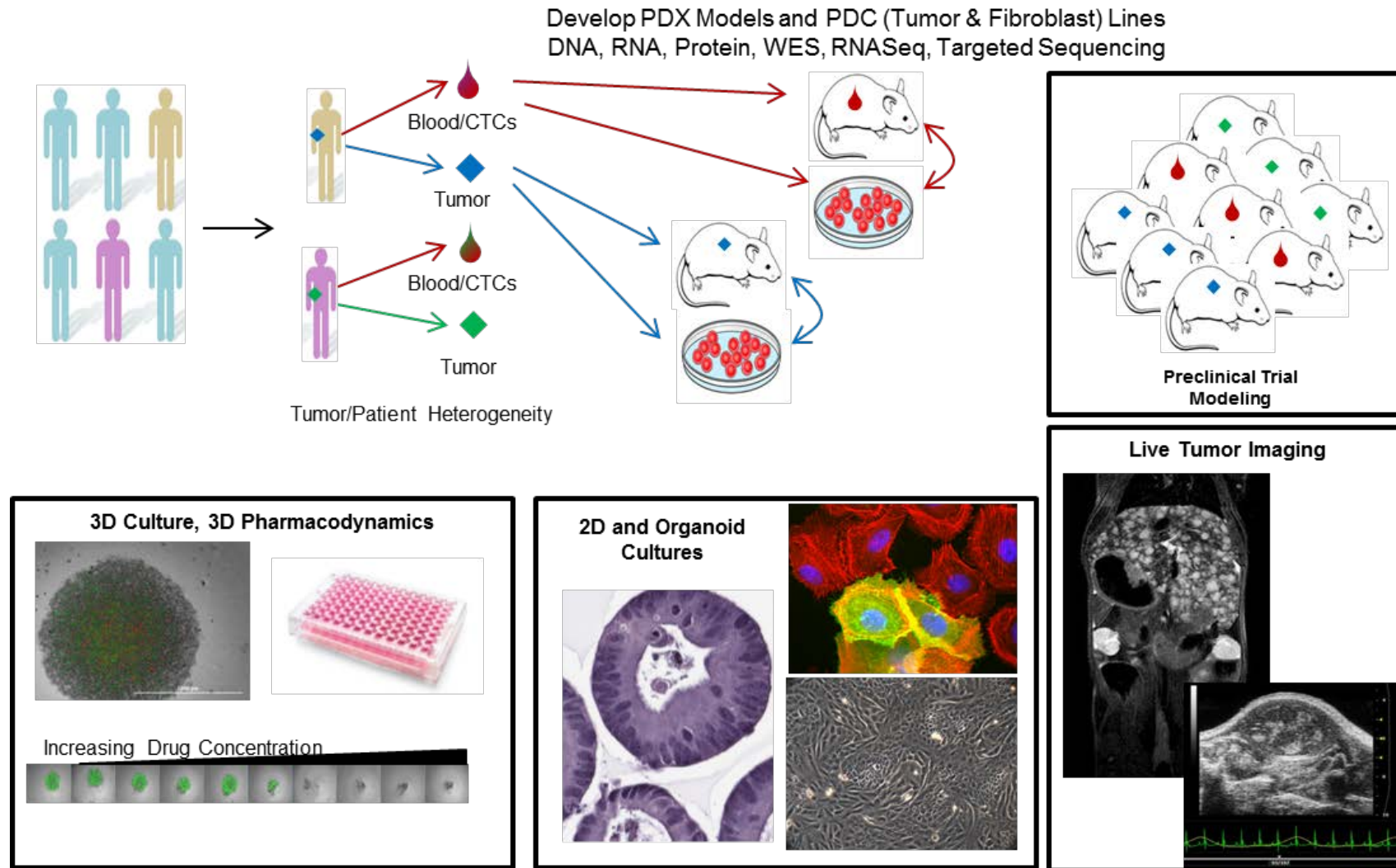
This project has been funded in whole or in part with Federal funds from the National Cancer Institute, National Institutes of Health, under Contract No. HHSN261200800001E. The content of this publication does not necessarily reflect the views or policies of the Department of Health and Human Services, nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. Government.

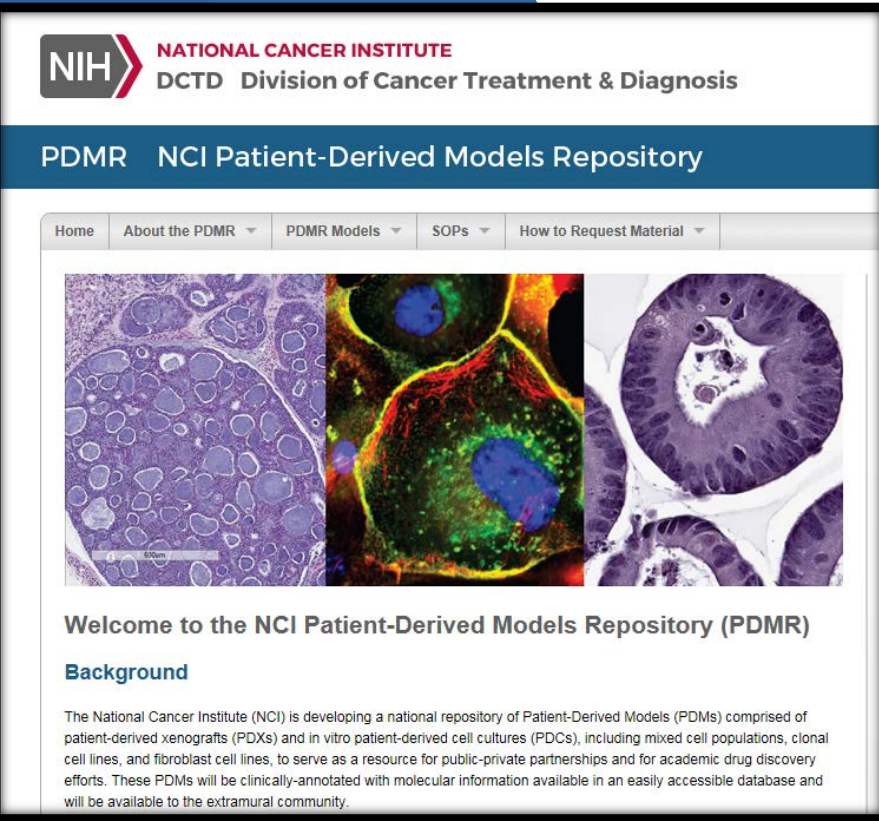


# NCI Patient-Derived Models Repository (PDMR)

- A national repository of Patient-Derived Models (PDMs) to serve as a resource for academic discovery efforts and public-private partnerships for drug discovery comprised of:
  - Clinically-annotated, Early-passage, Molecularly-characterized Patient-derived Xenografts (PDXs),
  - Patient-derived tumor cell cultures and cancer-associated fibroblast cultures (PDCs) developed from primary or metastatic tumors and/or PDXs,
- NCI to provide long-term home for >1000 PDX models and develop matched in vitro and organoid models wherever possible
- Goals:
  - ~50 unique patient models/disease (minimum) with sufficient size of each molecularly-characterized subgroup to power validation and/or efficacy studies
  - Comprehensive pre-competitive molecular characterization of samples and earliest passage PDXs: NCI Cancer Gene Panel, WES, RNAseq, histology, growth curves, and preclinical drug responses
  - All models and associated data made available through a publicly available website

# NCI Patient-Derived Models Repository: Multiple Avenues for Discovery

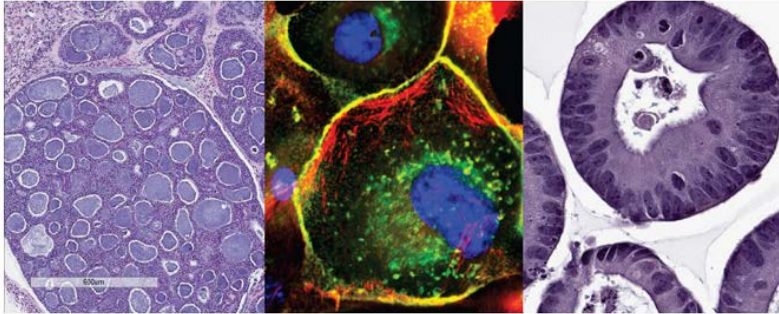




**NIH** NATIONAL CANCER INSTITUTE  
DCTD Division of Cancer Treatment & Diagnosis

**PDMR** NCI Patient-Derived Models Repository

Home About the PDMR PDMR Models SOPs How to Request Material



**Welcome to the NCI Patient-Derived Models Repository (PDMR)**

**Background**

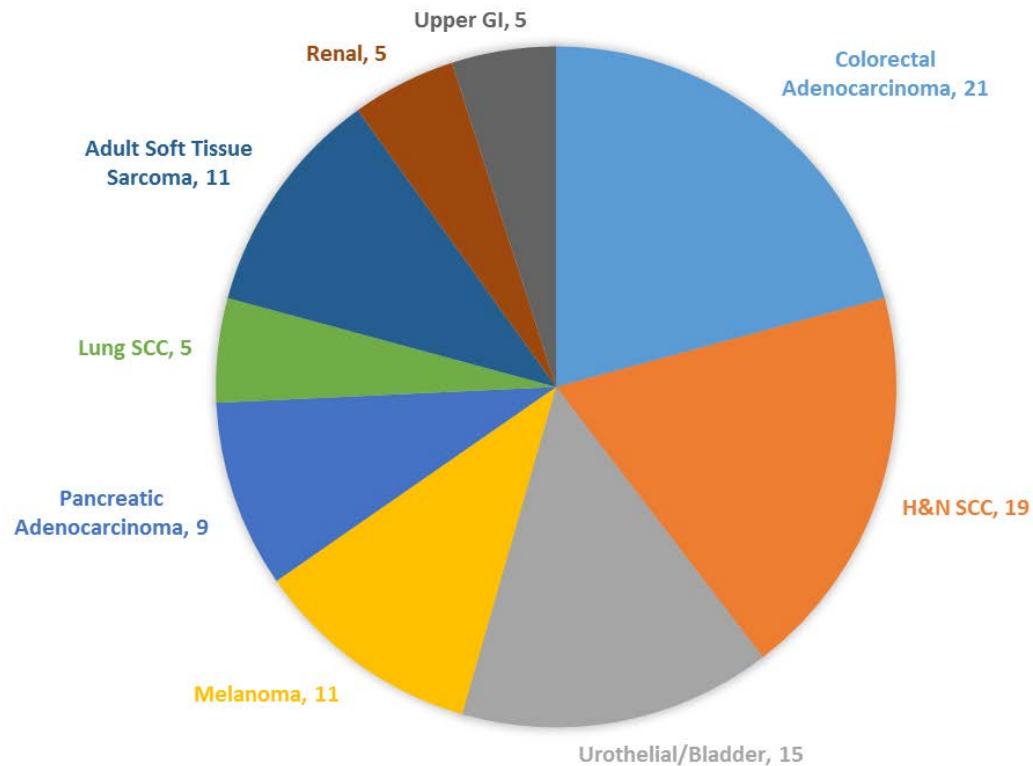
The National Cancer Institute (NCI) is developing a national repository of Patient-Derived Models (PDMs) comprised of patient-derived xenografts (PDXs) and in vitro patient-derived cell cultures (PDCs), including mixed cell populations, clonal cell lines, and fibroblast cell lines, to serve as a resource for public-private partnerships and for academic drug discovery efforts. These PDMs will be clinically-annotated with molecular information available in an easily accessible database and will be available to the extramural community.

## NCI's Patient-Derived Models Repository (PDMR)

<https://pdmr.cancer.gov>

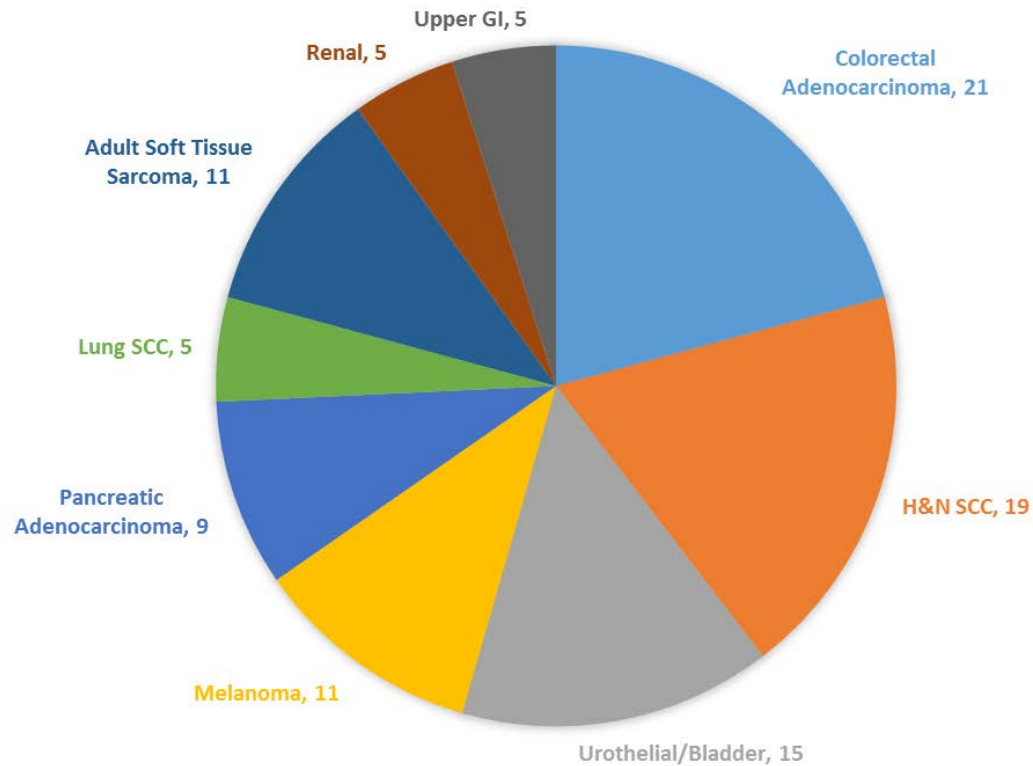
- Distribute Early-Passage, Clinically-Annotated, and Molecularly-Characterized patient-derived models at a minimal cost to researchers.
- Provide all related metadata and SOPs through a publicly available website.

# NCI Patient-Derived Models Repository (PDMR) Initial Distribution Types



- Currently have 100 PDX models available for request through the public website.
- Every model has associated patient limited medical history and representative PDX histopathology, whole exome sequence, and RNASeq data publicly accessible and available for download for metadata analysis and model selection
- Specimens are from patients with both primary and metastatic disease from treatment naïve to heavily pre-treated.
- PDX Pathology Confirmed
- Whole Exome Sequence, RNASeq, and an NCI Cancer Gene Panel Available (4-6 representative PDXs per model)
- Human Pathogen Screening and STR Profile Available
- Confirmed Re-growth from Cryopreserved Fragments

# NCI Patient-Derived Models Repository (PDMR) Initial Distribution Types



## Disease Distribution Groups

### Colorectal Adenocarcinoma

### Head & Neck Squamous Cell Carcinoma

- Pharyngeal, Laryngeal, Lip/oral cavity, NOS

### Urothelial/Bladder Ca

### Melanoma

### Pancreatic Adenocarcinoma

### Lung Squamous Cell Carcinoma

### Adult Soft Tissue Sarcoma

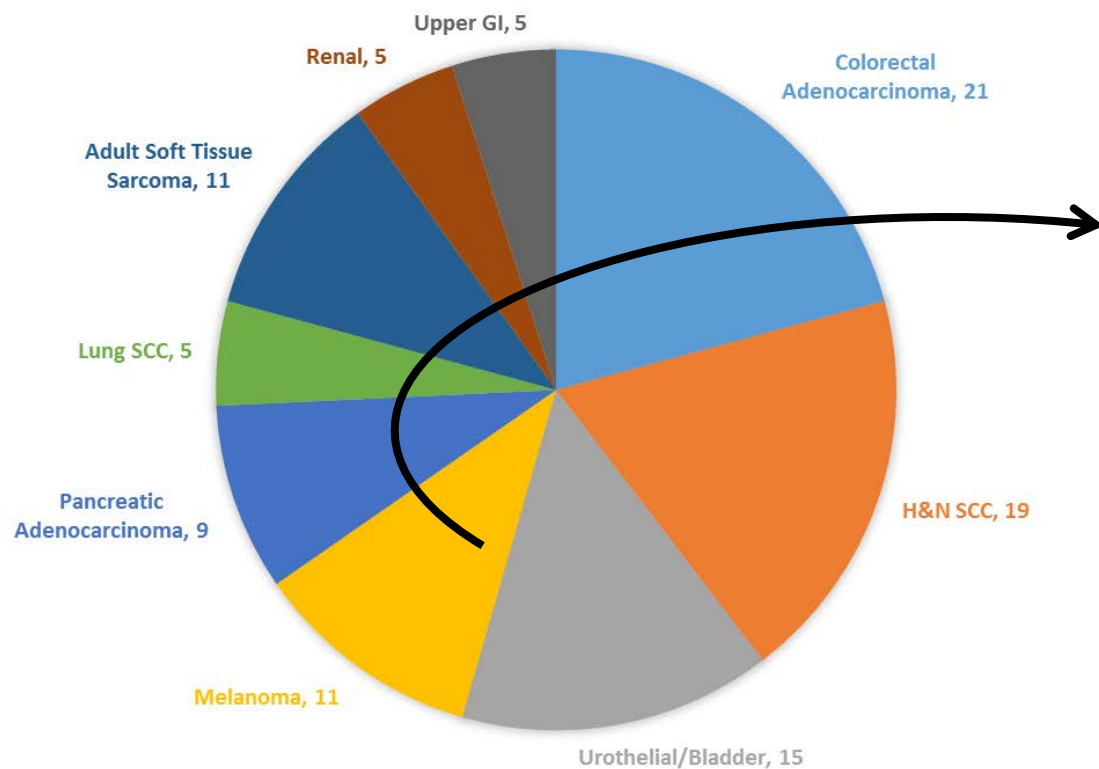
- Ewings, Leiomyosarcoma, Malignant fibro. histiocytoma, Fibrosarcoma, Non-Rhabdosarcoma NOS, Rhabdosarcoma NOS

### Renal Ca

### Upper GI Ca

- Stomach, Sm. Intest, GIST, Appendiceal

# Patient Information and Limited Medical History



CTEP SDC Code 10053571 - Melanoma

Diagnosis Subtype

Date of Diagnosis 06/2013

Age at Diagnosis 61

Grade/Stage Information Available • None Provided

Patient Notes

STR Profile [Download](#)

## ▼ Limited Medical Information (provided after delinking)

### Current Therapy

View	Date Regimen Started	Standardized Regimen	Best Response	Number of Cycles	Date of Progression or Off Therapy	Comments	Reason for Off Therapy
		No Current Therapy	NA				

[Export](#)

### Prior Therapies and Response

View	Date Regimen Started	Standardized Regimen	Best Response	Duration Months	Comments
	04/2014	Decitabine, Vemurafenib	Disease Progression	1	All other disease sites responded except left forearm
	06/2013	TVEC, Ipilimumab	PR	3	left forearm did not respond, all other disease sites responded

[Export](#)

### Additional Patient History

Known Genetic Mutations and V600E-BRAF

Tumor Markers

Additional Medical History  
Est diagnosis date from first prior therapy.

## ▼ Social History (provided after delinking)

### Social History

View	Ethnicity	Race	Occupation	Has Smoked 100 Cigarettes	Total Pack Years	Tobacco Use History
	Not Provided	Not Provided	-	Not Provided	-	-



# Pathology and Molecular Characterization of PDX Models

Pathology Data

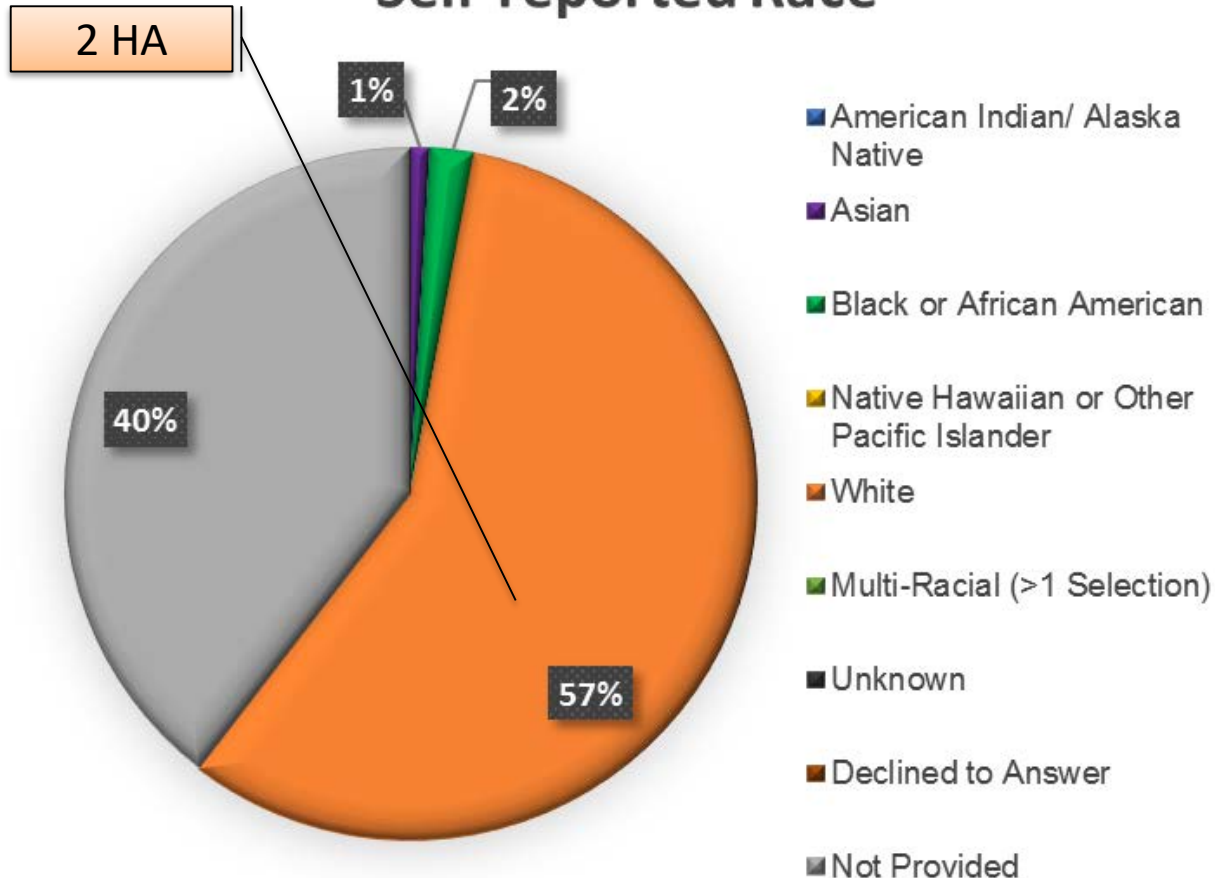
View	Tumor Grade	Tumor Content	Necrosis	Stromal	Inflammatory Cells	Low Magnification Image	High Magnification Image
	Intermediate grade or moderately differentiated	65%	5%	30%	1+ (Low)		

## Sample (PDX)

View	PDM Type	Sample ID	Patient/Originating Specimen	PDX Passage	Sample Images Avail	NCI Cancer Gene Panel Data	Whole Exome Sequence Avail	RNA Seq Avail
	PDX	J15	No	0	Yes	Yes	Yes	Yes
	PDX	J15M632	No	1	Yes	Yes	Yes	Yes
	PDX	J15M633KB9	No	2	Yes	Yes	Yes	Yes
	PDX	J16	No	0	Yes	Yes	Yes	Yes
	PDX	J16K88	No	1	Yes	Yes	Yes	Yes
	PDX	J16_RG-KD3	No	1	Yes	Yes	Yes	Yes

# Race/Ethnicity Reporting was an Early Recognized Limitation of the PDMR Models

Self-reported Race



Assessment of patient data from 454 PDX models with confirmed pathology from at least one passage 0 tumor

- During the first two years of patient recruitment, race and ethnicity were not part of the required minimal patient information requirements.
- In addition, from those that were reported there was an obvious gap in racial and ethnic minority patient recruitment
- Solutions
  - Perform ancestry assessment on all PDX models to provide the research community with additional information on patient inferred genetic ancestry
  - Increase the number of patient specimens and/or PDXs coming into the PDMR from racial and ethnic minorities

# Genetic Ancestry Assessment

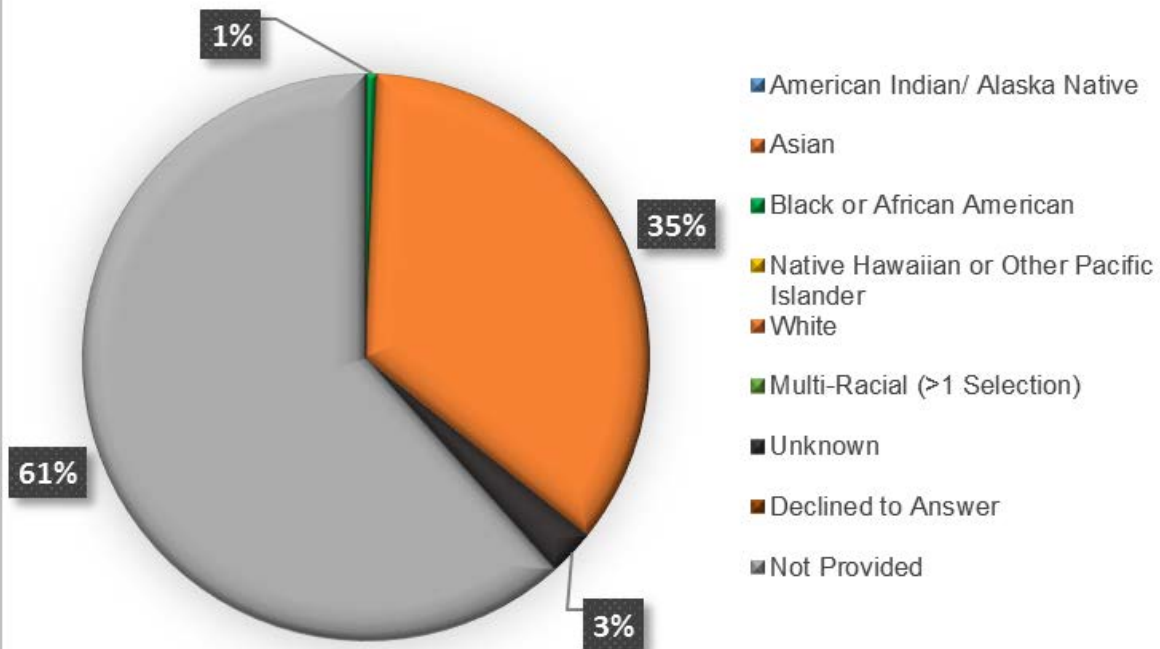
- Genetic ancestry assessment using the whole exome sequencing that is performed on all of our models.
- SNPweights Reference Panels
  - “Improved ancestry inference using weights from external reference panels” (Chen et al., Bioinformatics, 2013)
  - West African (YRI), European (CEU), East Asian (EA) and Native American (NA) from HapMap 3
  - 364,458 SNPs
- Reporting criteria
  - When available, patient material (“originator”) used for ancestry assessment
  - ...Else the average genetic ancestry of all sequenced PDX samples (4-6) is reported
  - If all ancestry assignments are <80%, inferred ancestry reported as “Mixed – All <80%”

# Genetic Ancestry Assessment

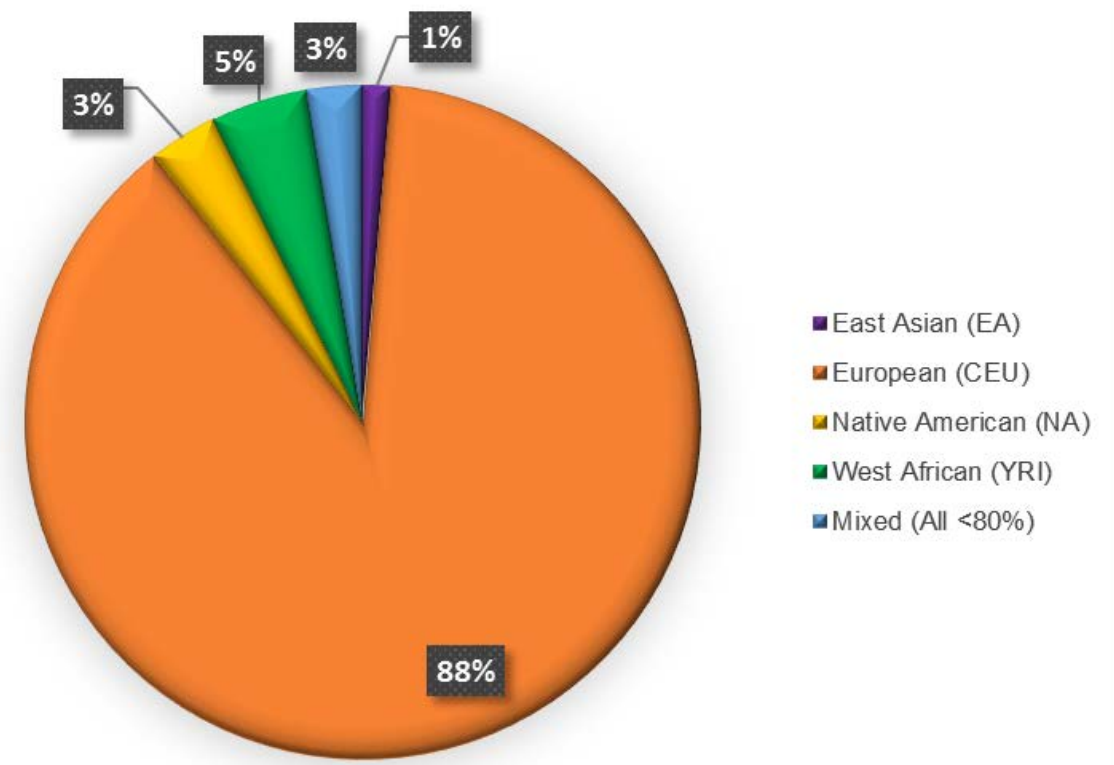
		Self-Reported	Genetic Ancestry (SNPweights)				80% cut-off	
Gender	Diagnosis	Race	% YRI	% CEU	% EA	% NA	Inferred Ancestry Assignment	Source Material
Female	Adenocarcinoma - cervix	Not Provided	1%	1%	98%	0%	East Asian	PDX
Male	Adenocarcinoma - colon	Not Provided	84%	16%	0%	0%	West African	PDX
Male	Adenocarcinoma - colon	Not Provided	0%	100%	0%	0%	European	PDX
Female	H & N squamous cell car., NOS	White	5%	95%	0%	0%	European	Originator
Female	Leiomyosarcoma - uterus	Not Provided	11%	46%	0%	43%	Mixed (All <80%)	PDX
Male	Melanoma	White	0%	100%	0%	0%	European	Originator
Male	Melanoma	Black or African American	1%	99%	0%	0%	European	PDX
Male	Non-Rhabdo. soft tissue sarcoma	White	5%	95%	0%	0%	European	Originator
Male	Pharyngeal squam. cell carcinoma	White	0%	100%	0%	0%	European	Originator
Female	Salivary gland cancer	Not Provided	83%	17%	0%	0%	West African	PDX

# Genetic Ancestry Assessment for 151 PDX Models with WES

## Self-reported Race



## Inferred Genetic Ancestry (>80%)



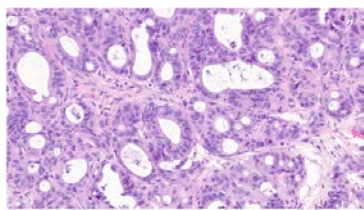
# Increasing Racial/Ethnic Minority Representation in PDMR Models

- Minority-Underserved NCORP sites (RFP Awarded, Leidos Biomedical Research – funding in support of the DCTD/NCI)
  - Goal: Enroll patients with cancer from predominantly racial and ethnic minorities to provide research specimens to the PDMR for patient-derived models development
  - Proposed specimen provision includes: Breast (incl. TNBC), Prostate, Pancreatic, Renal, Lung, and Hepatic cancer from patients of Hispanic and African-American descent; Ovarian, Cervical and Endometrial Cancers from patients of African-American descent
- **NEW**: S17-199 - Acquisition of Biological Samples for the Development of NCI's Patient-Derived Models (PDM) Repository (LBR RFP funding in support of the DCTD/NCI)
  - Posted to: FedBizOpps and Leidos Biomedical Research website
  - Date Issued: Sept 25, 2017
  - Response Due: October 13, 2017
- **PENDING**: Minority PDX Development and Trial Centers (M-PDTCs) RFA (U54) to participate as part of the PDXNet
  - Goal to perform large-scale, multicenter preclinical PDX studies

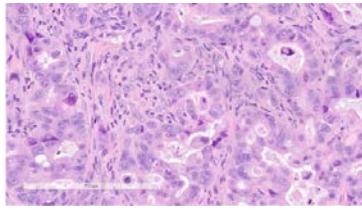
# PDMR In Development



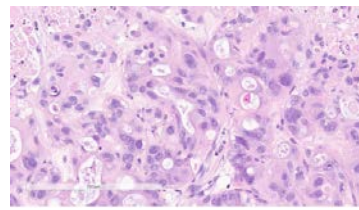
- Ancestry SNP Assessment
- Consensus Genomic Variants: list of variants that are 100% represented in WES data
- Germline Whole Exome Sequence
- Designation of Metastatic PDX Models (spontaneous, post-debulking)
- Preclinical Drug Study Results
- Whole Mouse Imaging (e.g., MRI, US)
- In vitro Early-Passage Tumor and Cancer-Associated Fibroblast Cultures
- Models Developed from Rapid Autopsy Procedures:
  - Current focus is on Pancreatic and Prostate Cancer
  - PDX Models from Primary and Metastatic Pancreatic Adenocarcinoma



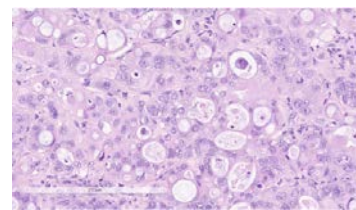
1°: Pancreas



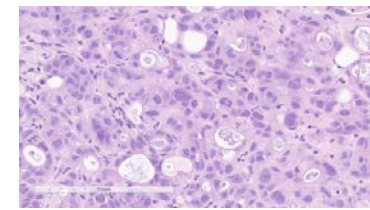
Met: Liver



Met: Colonic Fat



Met: Myometrium



Met: Colon

# Acknowledgements

## Technical/Scientific Oversight

James H. Doroshow  
Melinda G. Hollingshead  
Michelle M. Gottholm Ahalt

## Clinical Interface and QA/QC

Michelle A. C. Eugeni  
Sergio Y. Alcoser  
Linda L. Blumenauer  
Suzanne Borgel  
Tiffanie Chase  
Alice Chen  
Donna W. Coakley  
Nicole E. Craig  
Jessica Smith  
Annette Stephens  
Mary J Troncatti  
Abigail Walke  
Jenny Yingling

## In vivo & In vitro Teams

Dianne Newton  
Ufuoma T. Anidi  
Kaitlyn Arthur  
Mariah Baldwin  
Carrie Bonomi  
Suzanne Borgel  
Elizabeth Bradtke  
John Carter  
Tiffanie Chase  
Margaret R. DeFreytas  
Raymond Divelbiss  
Kelly Dougherty  
Marion Gibson  
Franklyn Jimenez  
Alexander Jordon

Catherine Karangwa  
Angelena Millione  
Malorie Morris  
Jenna E. Moyer  
Michael Mullendore  
Kevin Plater  
Marianne Radzynski  
Matthew B. Smith  
Annette Stephens  
Luke H. Stockwin  
Howard Stotler  
Jesse Stottlemyer  
Debbie Trail  
Anna Wade  
Jordan Welker

## Molecular Characterization

P. Mickey Williams  
Corrinne Camalier  
Lily Chen  
Biswajit Das  
Vivekananda Datta  
Palmer Fliss  
Thomas Forbes  
Chris Karlovich  
Jason Lih (Pharmacoclytics)  
Sean McDermott  
Rajesh Patidar  
Tomas Vilinas  
Bill Walsh

## Whole Mouse Imaging

Paula Jacobs  
James Tatum  
Joseph Kalen

## Statistics

Larry Rubinstein  
Eric Polley (Mayo)  
Mariam Konate

**The NCI expresses its deepest thanks to the patients, families, and clinical teams that make this effort possible.**