

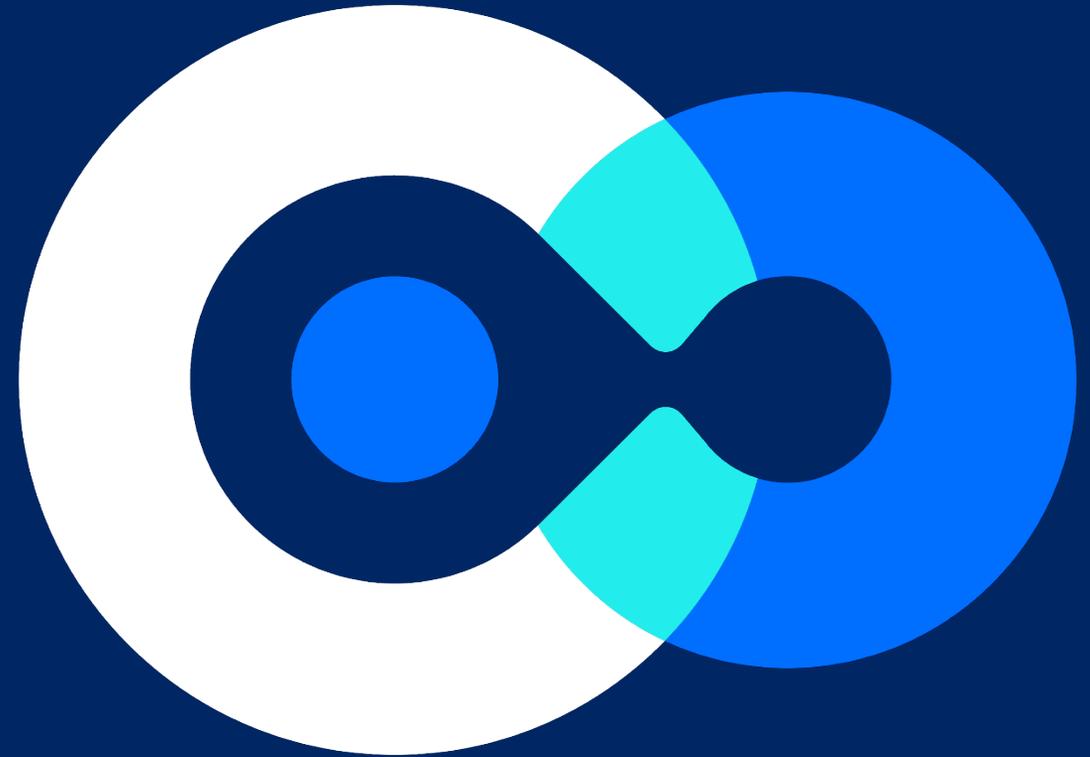


# 21<sup>st</sup> Century Medicine: Big Data, Wellness, Disease

**Lee Hood, MD, PhD**

Senior VP and Chief Strategy Officer  
Institute for Systems Biology, Seattle

Senior VP and Chief Science Officer  
Providence St. Joseph Health,  
Seattle



**Measuring Man**

October 10, 2019



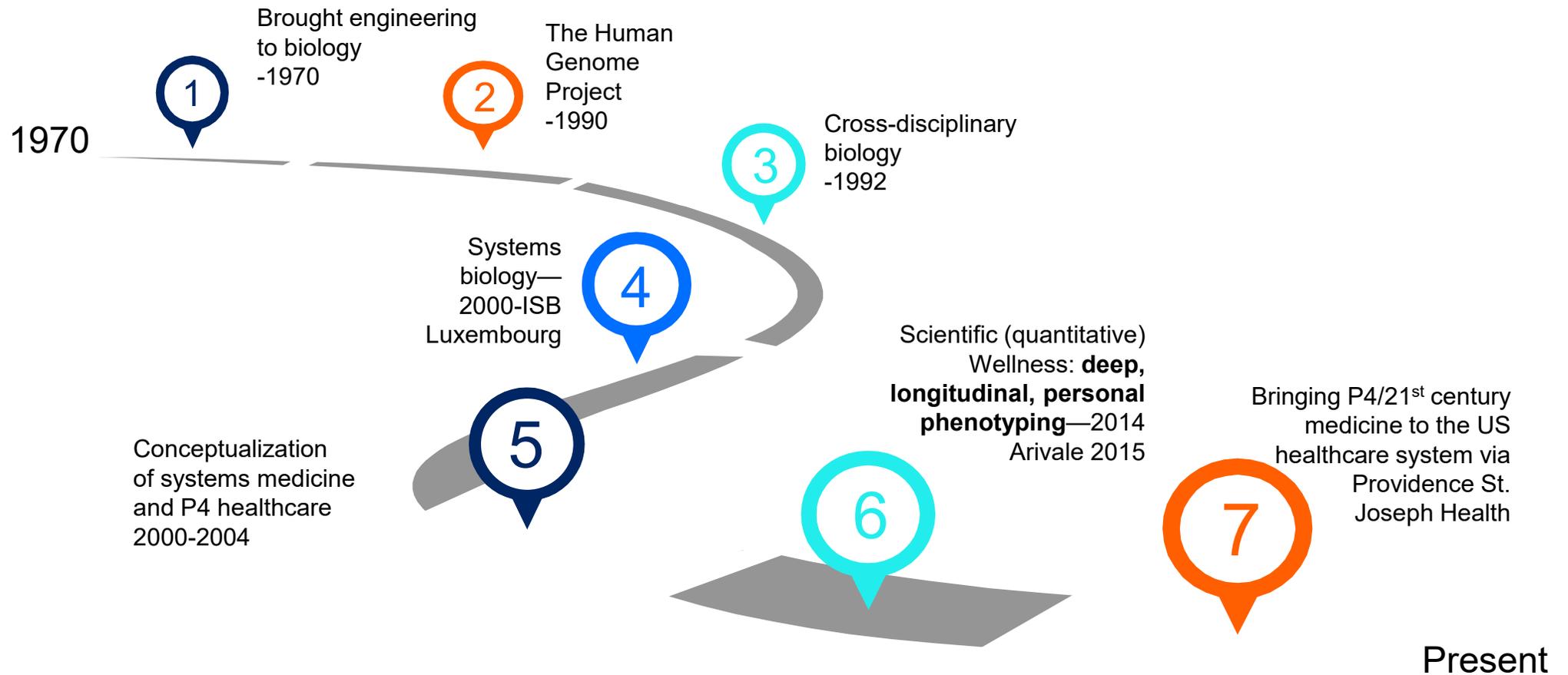
## The grand challenge for biology and medicine:

Deciphering biological complexity

(1970, Assistant Professor Caltech)



# I Participated in Seven Paradigm Changes in Biology Dealing with Complexity Which Led to My View of 21<sup>st</sup> Century Medicine



# Two Paradigm Changes in the Last 100 Years Framing US Medicine

## 1900s

Germ Theory  
Chemistry  
Physiology  
Pathology  
Physics  
Precision medicine



*Find It  
Fix It*

*Understanding  
Disease*

20<sup>th</sup> Century Medicine

## 2000s

Systems medicine  
P4 healthcare  
Scientific wellness  
Genomics  
Deep phenotyping of  
individuals N=1 (Omics)  
Digital self measurements  
Microbiomes

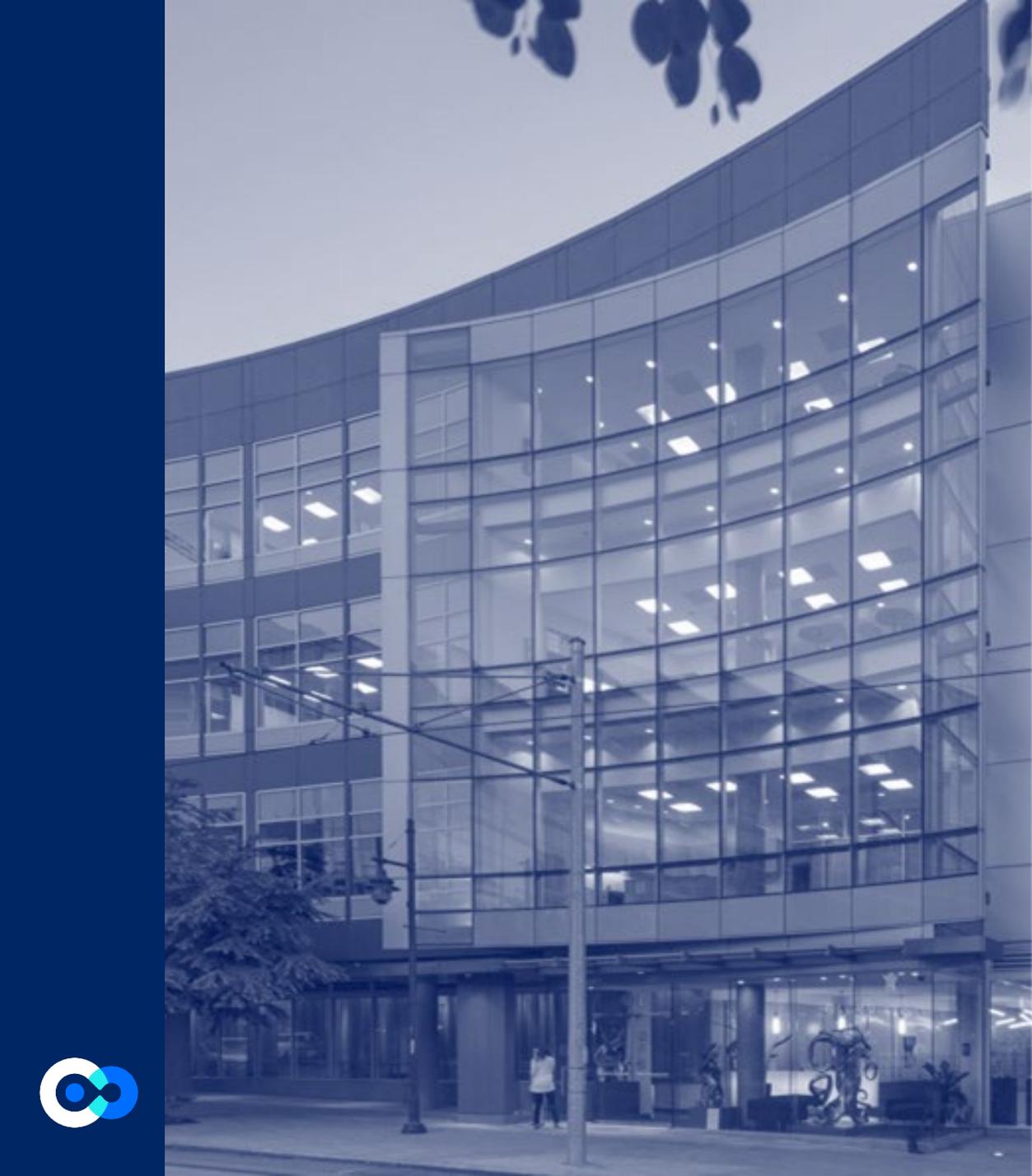


*Predict It  
Prevent it  
Personalize It  
Participatory*

*Systems Approaches to  
Understanding Wellness,  
Disease, and their  
Transitions*

Systems-Driven 21<sup>st</sup>  
Century Medicine





# Institute for Systems Biology

*Non-profit scientific research organization  
founded in 2000*

## 2019

- *12 faculty, 220 staff*
- *\$40 million annual budget*

Holistic

Longitudinal deep phenotyping/complexity

Networks and hierarchy

Dynamics

Integrative

Discovery vs. mechanistic hypothesis data generation



# Inventing the Future with Integrative Systems Biology at ISB

20th Century Biomedicine

21st Century Biomedicine-ISB

- **Reductionist**

Analyzing one gene and one small problem at a time



**ISB  
FOUNDED  
in 2000**

- **Integrative Biological Systems Analysis**
- **Systems-Driven Technology and Systems-Driven Strategies**
- **Pioneering Computational Tools**
- **Cross-Disciplinary Environment**
- **Employs Big Science to Attack Large-Scale Integrative Biological Problems**
- **Strategic Partnerships**
- **Transferring Knowledge to Society – education & start ups**



# Longitudinal Deep Phenotyping

Personal, Dense, Dynamic (Longitudinal) Data Clouds (Big Data)

## iPS CELLS

0100101011010101101  
0110101010101011010  
1010101101010101010

## GENOME

GCGTAGTC  
ATGCGTAG  
GGCATGCT  
ATGCCATG  
ATAGCTGC

CUUAGUGC  
UAUGCGUA  
GCUAGGCG  
CAUGCUUC  
GAGUGAUA

## TRANSCRIPTOME

## TRANSACTIONAL

0100101011010101101  
0110101010101011010  
1010101101010101010

## SINGLE CELL

0100101011010101101  
0110101010101011010  
1010101101010101010

## PROTEOME

arg-his-pro-val-  
gly-leu-ser-thr-  
ala-trp-tyr-val-  
met-phe-arg-

Na 143 K 3.7  
BP 110/70  
HCT 32  
BUN 12.9  
Pulse 110  
PLT 150  
WBC 92

## PHENOME

## METABOLOME

0100101011010101101  
0110101010101011010  
1010101101010101010

## EPIGENOME

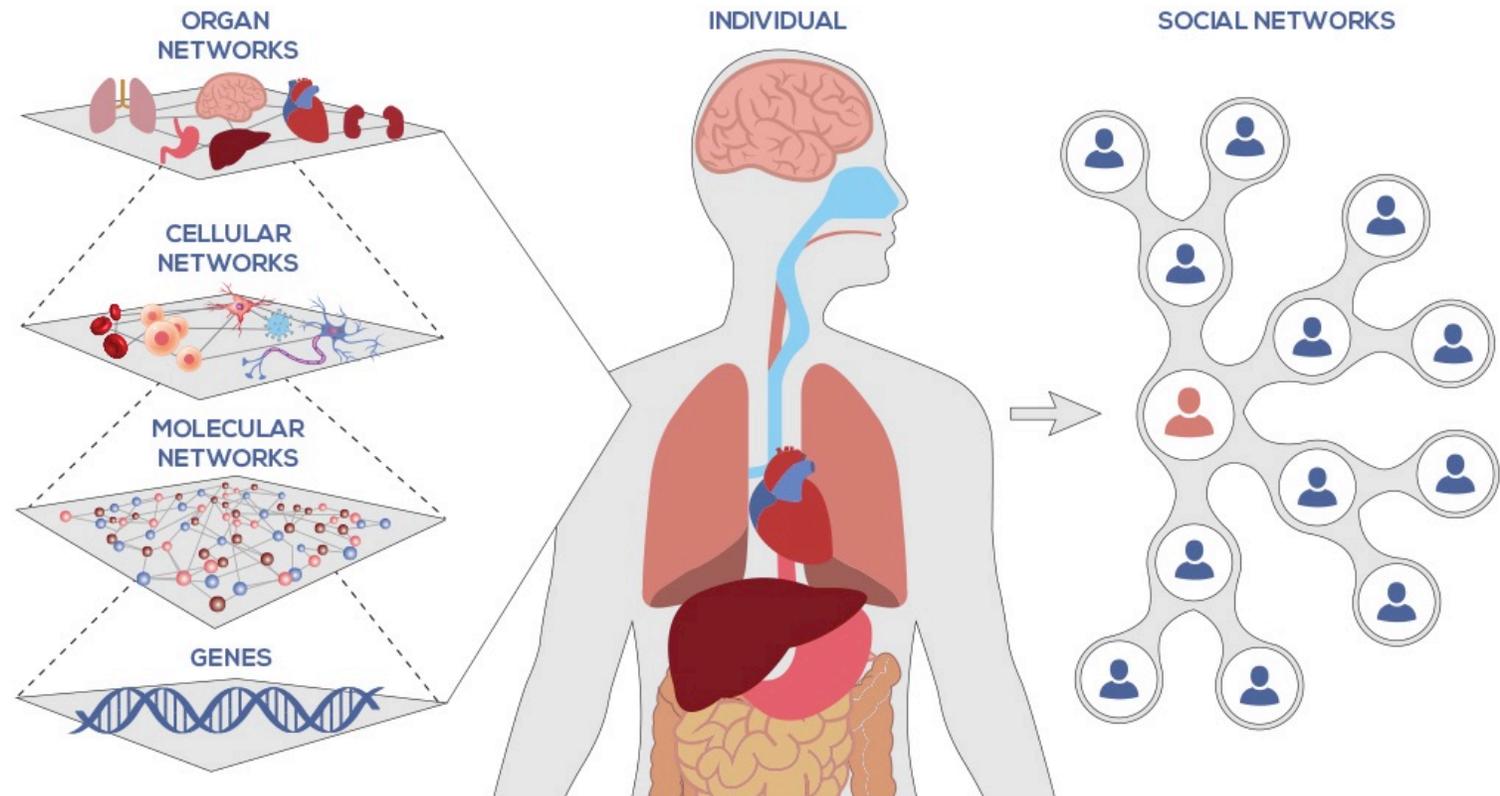
0100101011010101101  
0110101010101011010  
1010101101010101010

## SOCIAL MEDIA

11010100010  
10101011010  
10101001000  
10110100111  
10110101010

These data clouds provide insights into wellness and disease and provide the essence of what "Precision Medicine" should be

# The Network of Networks is Hierarchical in Nature



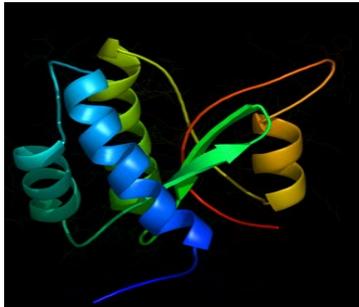
# Human Biological Information Is Quantized and Hierarchical

Analysis of single molecules, single cells, single organ and single individuals—quantized units of information

Technologies for measuring each quantized unit are needed

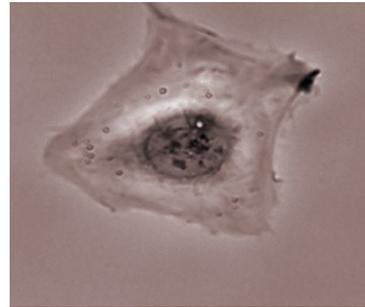
Biology must be attacked at the level of each single quantized unit follow by an “information integration” of their data types

## Single molecule



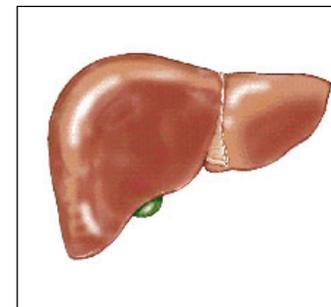
3<sup>rd</sup> generation DNA sequencing

## Single cell



Analyze 40 proteins  
In each of 10,000  
T cells

## Single organ



Organ-specific  
Blood proteins

## Single individual



Personal, dense, dynamic  
Data clouds



# Systems-Driven Technologies and Strategies

## Technologies

- 3<sup>rd</sup> generation DNA sequencing (\$100 genome)—single molecule sequencing
- Targeted and SWATH proteomics (blood biomarkers)—SRM Atlas
- Peptide protein-capture agents (replace antibodies as diagnostics and drugs)
- Single-cell analyses (deciphering biological complexities)
- Digitalized measurements of many features of self

## Strategies

- Family genome sequencing (identify disease genes and compare 1000s of genomes)
- Animal model disease dynamics (identify earliest disease-perturbed networks)
- MS-based proteomics blood biomarker (protein) discovery (cancer, preterm birth, PTSD, liver disease)
- Organ-specific blood proteins assess health of many organs simultaneously
- Deep phenotyping--dense, dynamic, personal data clouds to analyze wellness and disease
- Use analysis of disease-perturbed networks to identify drug target candidates
- Synthetic biology for new drug generation and high throughput screening
- Blood is a window into the dynamics of human biology and disease (separate/analyze molecules of blood, vesicles, cells)

## Analytics

- AI—expert systems Newco
- Machine learning
- Pattern recognition
- Imaging
- Integration



# The Emergence of P4 Medicine in 2014

Predictive, Preventive, Personalize, Participatory

## Converging Megatrends



## P4 Medicine

- Proactive
- Individual N=1 medicine
- Wellness & Disease
- Deep phenotyping and personalized data clouds
- Personalized data clouds for clinical trials (N=1 experiments)

## Contemporary Medicine

- Reactive
- Population
- Primarily Disease
- Averaged patient populations
- Averaged patient populations for clinical trials



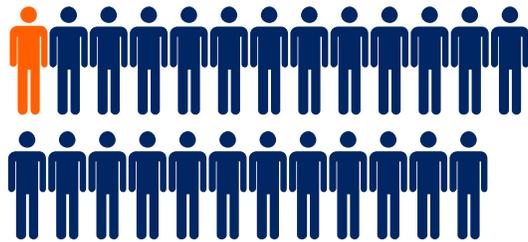
# Imprecision Medicine:

Time for N=1 Drug Trials to Stratify Disease Subtypes, Responders and Toxicities

1) ABILIFY  
Schizophrenia



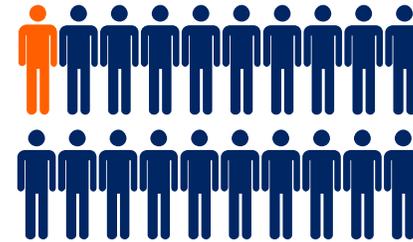
2) NEXIUM  
Heartburn



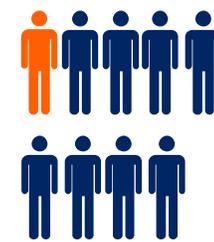
3) HUMIRA  
Arthritis



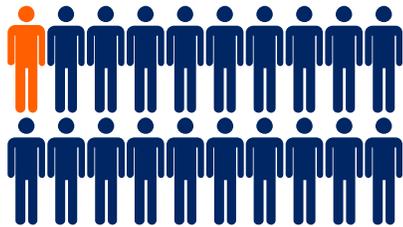
4) CRESTOR  
High cholesterol



5) CYMBALTA  
Depression



6) ADVAIR DISKUS  
Asthma



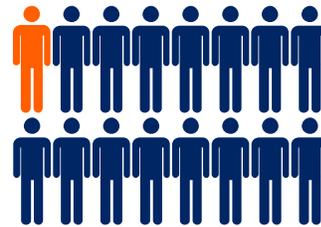
7) ENBREL  
Psoriasis



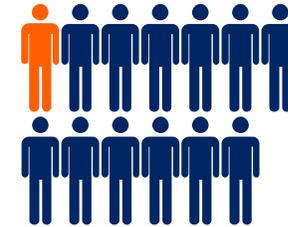
8) REMICADE  
Crohn's Disease



9) COPAXONE  
Multiple Sclerosis



10) NEULASTA  
Neutropenia



For every person in the US that the 10 highest grossing drugs do help (orange), they fail to improve the conditions of between 3 - 24 people (blue).





## – Genomics and Deep Phenotyping

### 2014- The 108 Person Scientific Wellness Pilot Project

(Pioneers)

**Principal Investigators:**

Lee Hood and Nathan Price

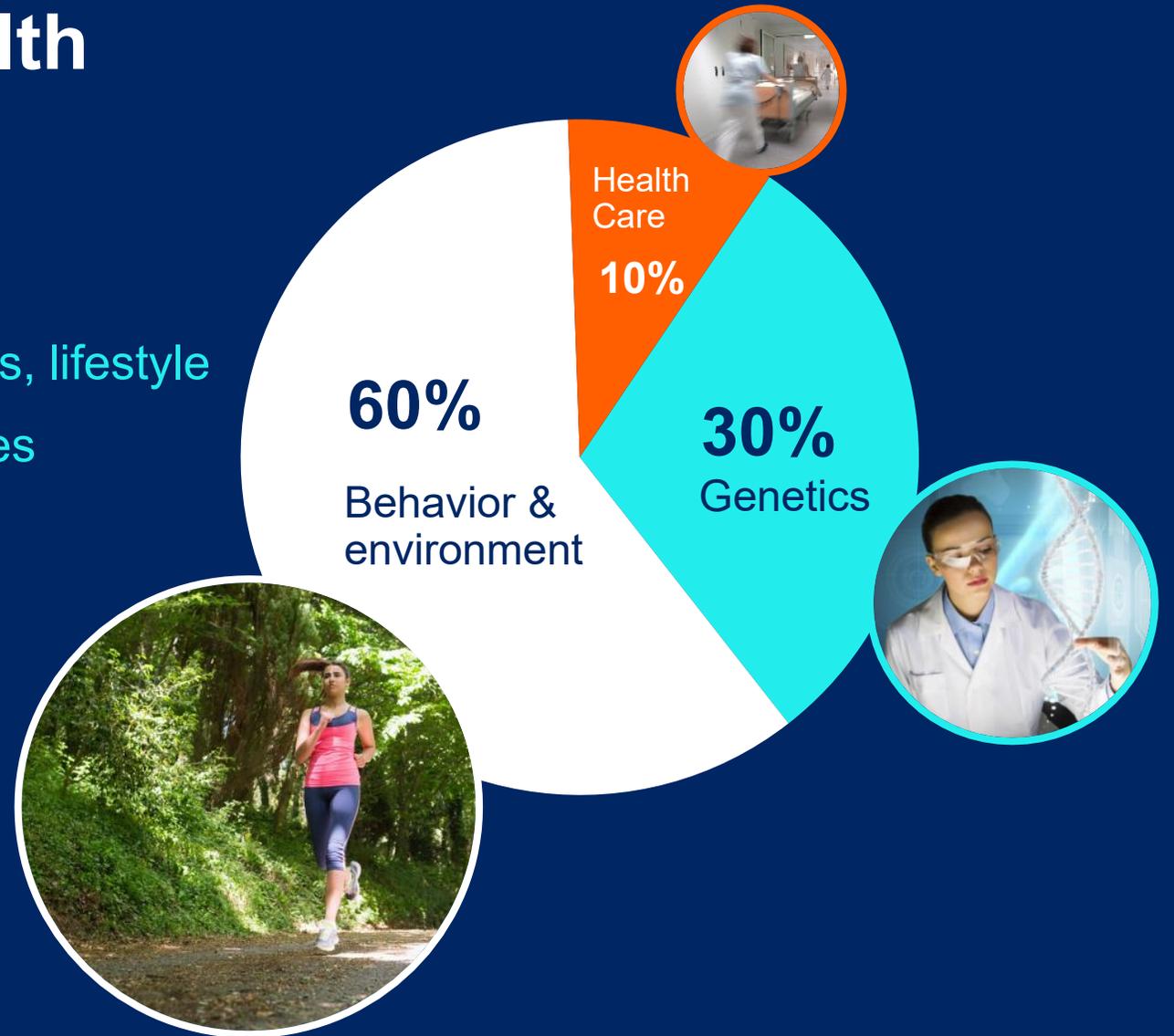
Using longitudinal deep phenotyping and  
genomics

*IRB approved study: Price, Magis, Earls,  
Hood et al, Nature Biotechnology, 2017*



# Determinants of Health in the U.S.

Deep phenotyping will assess the integration of individual genetics, lifestyle and adverse environment exposures



# Deep Phenotyping of 108 Scientific Wellness Pioneers

Creating dense, dynamic, personal data clouds

Price, Magis, Earls...Hood, *Nature Biotechnology*, 2017

## GENOME

Whole Genome Sequencing  
**SNPs Millions**

## LABS

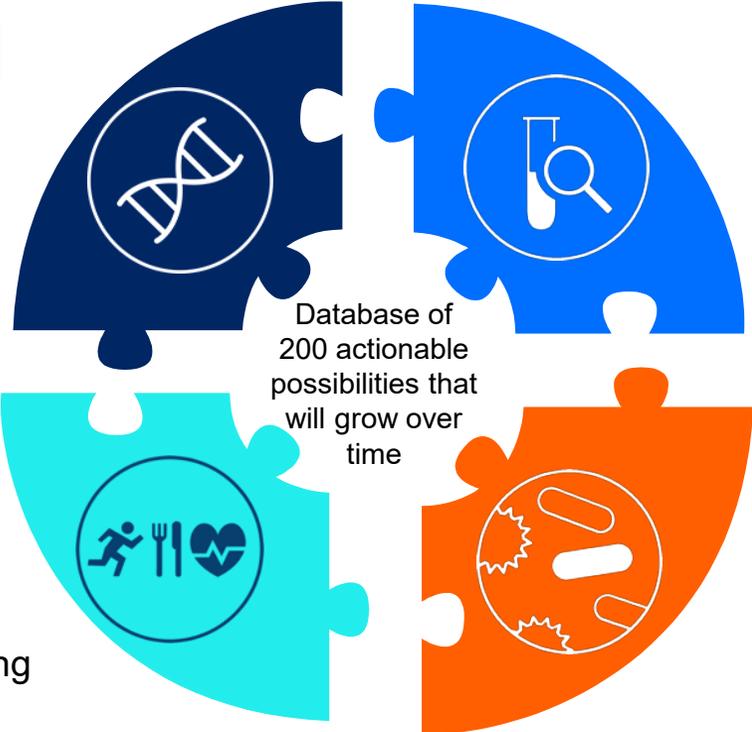
Detailed lab tests 3x (blood, urine, saliva)  
**Clinical chem. 150**  
**Metabolites 700**  
**Proteins 400**  
**Almost 1200 analytes**

## SELF-TRACKING

Continual self-tracking of physiology & lifestyle monitoring

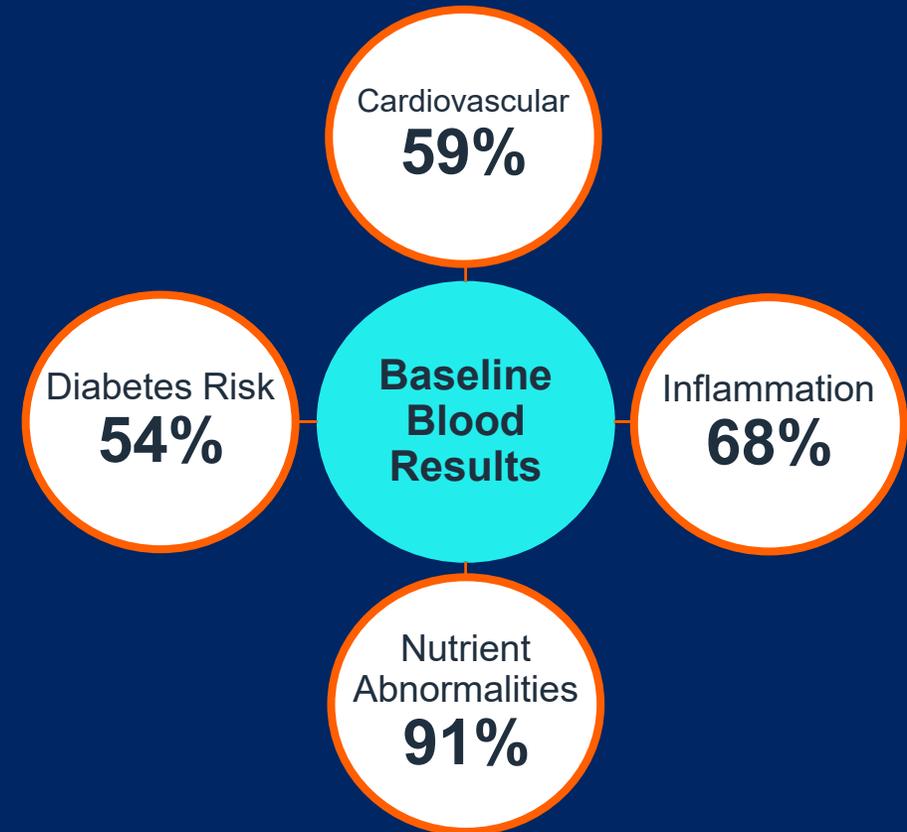
## MICROBIOME

Gut Microbiome  
Ration of microbial species 3x



# Initial Clinical Labs Discovery: High Rate of Actionable Clinical Results

- The 108 “well” participants had a high rate of initial abnormal lab results
- **100%** of the participants had multiple actionable recommendations from their blood results



# Some of Lee Hood's Actionable Possibilities

- Weight—lost 20 pounds—within 5 lbs college football weight\
- Exercise—balanced and more extensive—resting pulse rate changed from about 55/min to 41/min
- Continuous glucose monitoring—2 weeks—N=1 perturbations—optimize diet
- Intermittent fasting—lower blood glucose
- Carotid artery ultrasound analysis—detect atherosclerosis
- Assessment of distribution of body fat—ultra sound imaging
- On statin--complications—muscle atrophy, diabetes (genetic markers indicate susceptibility)
- Corrected 5 nutritional deficiencies—supplements and vitamins
- Vitamin D extremely low—need mega-doses—genome vitamin D uptake blocking variants
- High mercury (eliminate tuna sushi)
- Inflammation—control with diet
- Biological age is 15 years younger than chronological age and decreasing
- **Realized wellness is my responsibility; acquired deep insights about my personal wellness and act on them (participatory)**



# Lee Hood Pulse During a Bout of the Flu

Digital Health

Pulse

Voice

Typing

Blood—1200 analytes

Saliva—n analytes

Urine —m analytes

CSF—x analytes

Electric signals: brain, heart

Sleep

Heart rate variability

Cognitive brain assays and

exercises



# Where Do You Reside On The Wellness Staircase?

*Scientific wellness is a life long journey to healthy aging—mentally physically active—90s*

**Increasing Scientific Wellness**



← **“Welllderly”**

↑ **Actionable Possibilities**

**Average Person** →



# Creation of a Consumer-Based Scientific Wellness Company

Arivale 

Your scientific path to wellness

**2015 LAUNCH**

6000 clients

100 wellness to disease

Transitions

**2019 Shut Down**

**P4 Medicine Clinic--Seattle**





# Personal Dense, Dynamic Data Clouds: Probing the Dark Matter of Wellness And Disease

*The Hubble Telescope allows us to probe the dark matter of the universe just as dense and dynamic personal data clouds allow us to probe the dark matter of human biology and disease.*

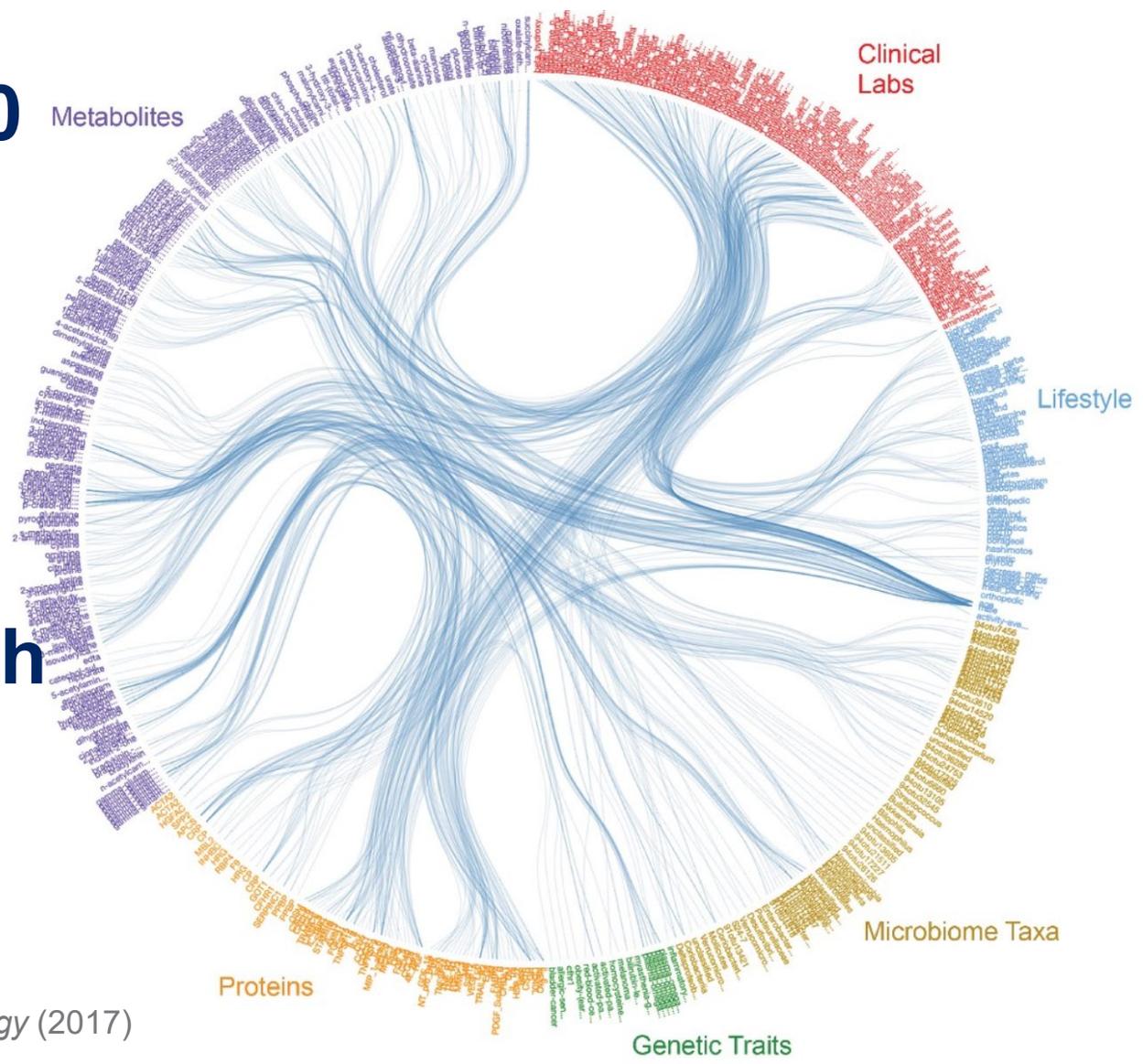




# Statistical Correlations

# Deriving Insights from Data: New Frontiers— 3500 Statistical Correlations with 1200 analytes

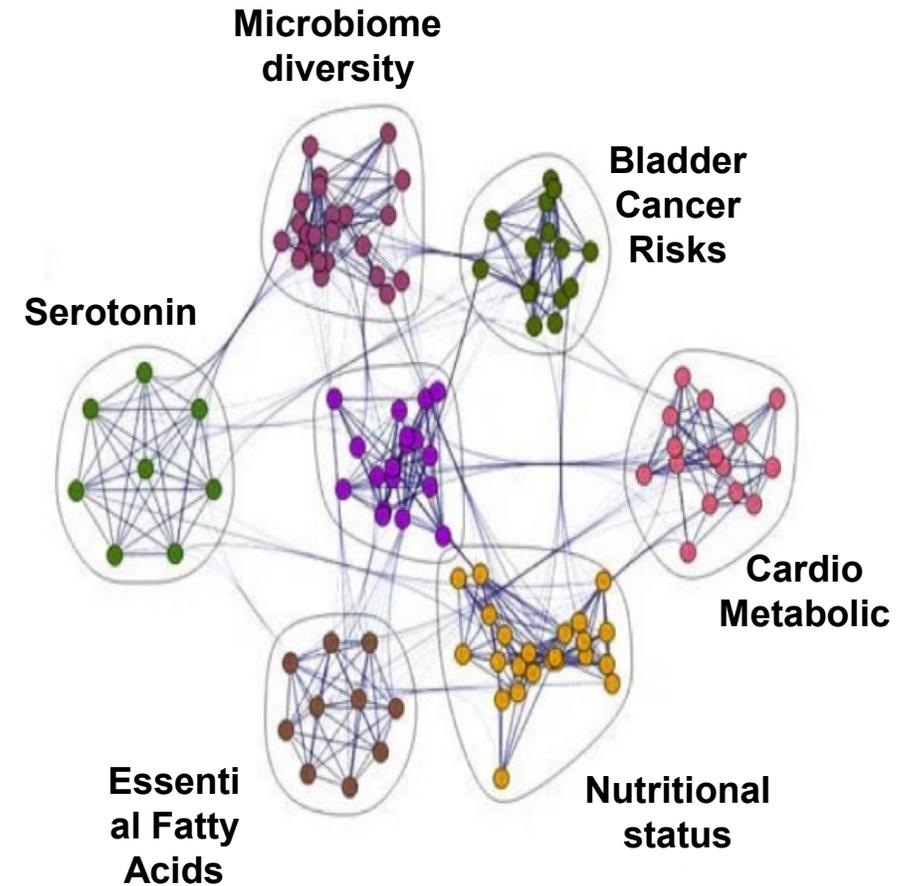
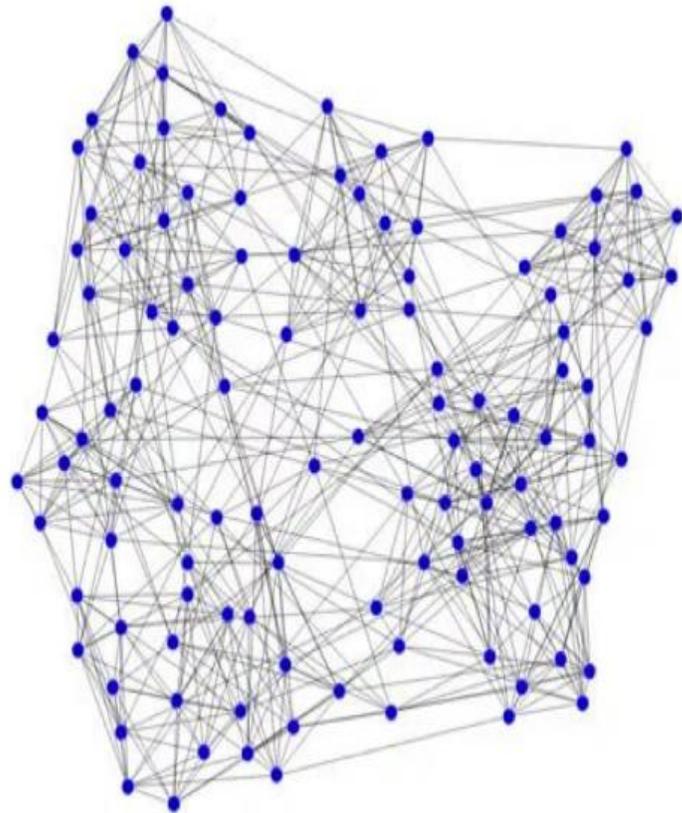
— 35,000 Correlations with 5000 More Proteins



Price, Magis, Earls, Hood, et al, Nature Biotechnology (2017)



# Identification of 70 multi-omic functional communities (modules) in the correlation network.



# Total cholesterol community as one of 70 communities

- Cholesterol is **positively associated with alpha-tocopherol** (Vitamin E)
- Cholesterol is **negatively associated with endogenous thyroxine**
- A beneficial side effect of **the drug thyroxine** (Synthroid) is lowering LDL cholesterol



We can determine  
individual **polygenic**  
**risks for more than**  
**100 diseases**



# Calculation of 127 Polygenic Scores from WGS and GWAS Data



Phenotype	N <sub>samples</sub>	N <sub>variants</sub>	Reference
Asthma	35,083	8	Hirota et al. 2011
Bilirubin levels	9,937	14	Kang et al. 2010
Bladder cancer	65,308	8	Rothman et al. 2010
Body Mass Index	249,796	32	Speliotes et al. 2010
Coronary Artery Disease	109,124	23	Dichgans et al. 2013
Inflammatory Bowel Disease	77,064	110	Jostins et al. 2012
LDL cholesterol	188,577	56	Willer et al. 2013
Omega 6 PUFAs	8,631	8	Guan et al. 2014
Type 2 Diabetes	187,590	61	Mahajan et al. 2014

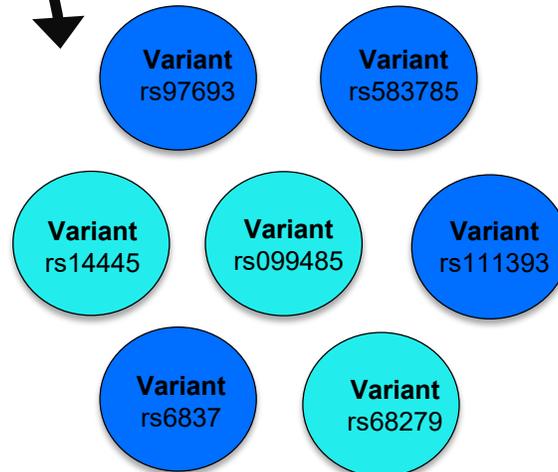
1. Welter, D. et al. (2014). The NHGRI GWAS Catalog, a curated resource of SNP-trait associations. *Nucleic Acids Research*, 42(Database issue), D1001–6.



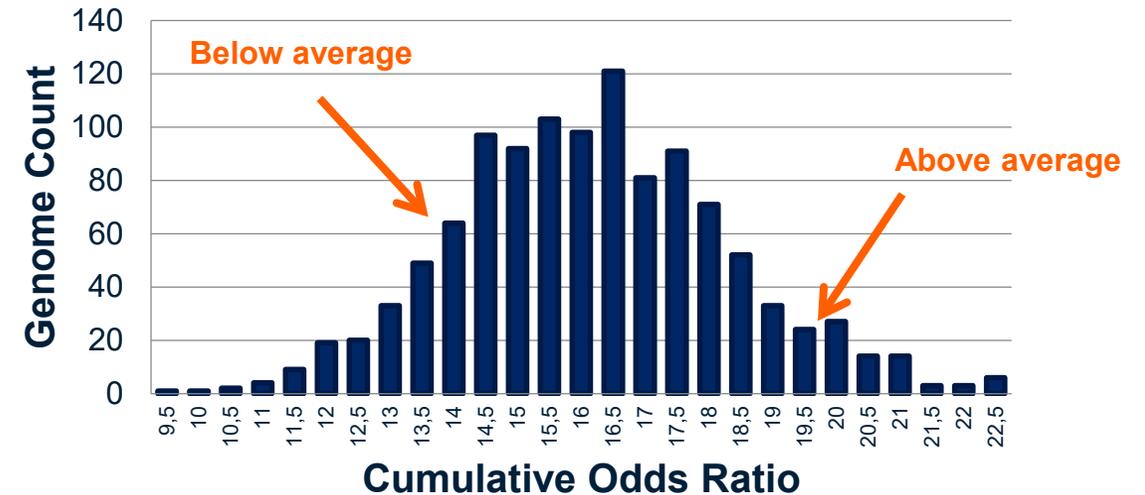
# Cumulative sum for an individual can give an estimate of risk relative to a population of 2000 normal individual genomes



Calculate the effects of all common variants within an individual



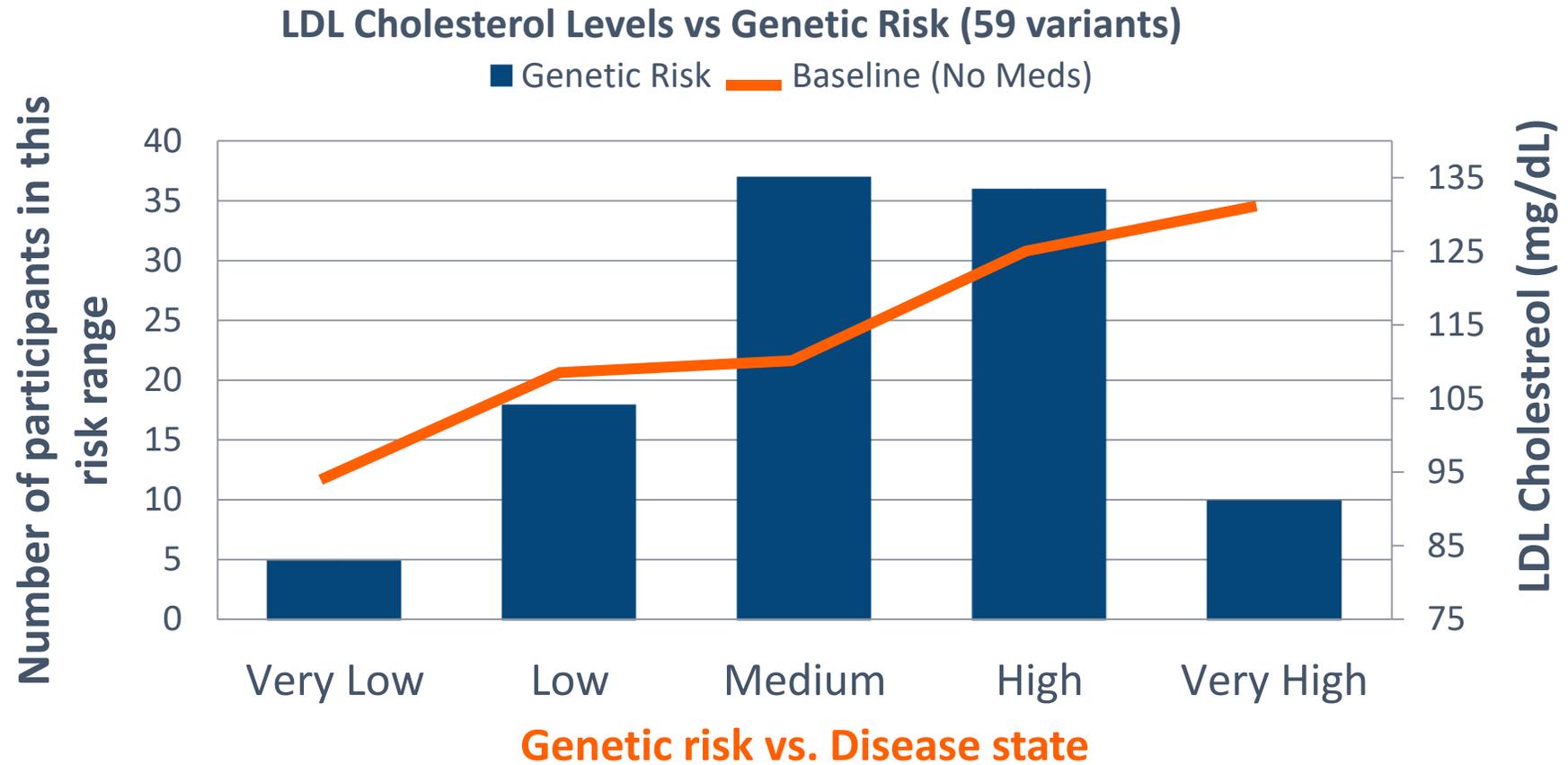
### Risk for high cholesterol levels



Estimate the risk for high cholesterol relative to a population of 2000 normals.



# LDL cholesterol in Participants Shows Monotonic Relationship with 'Genetic Risk'



# Reflections of polygenic risks in the blood

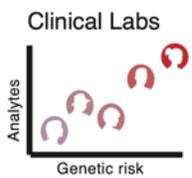
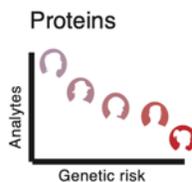
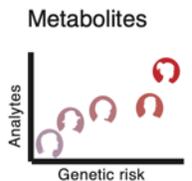
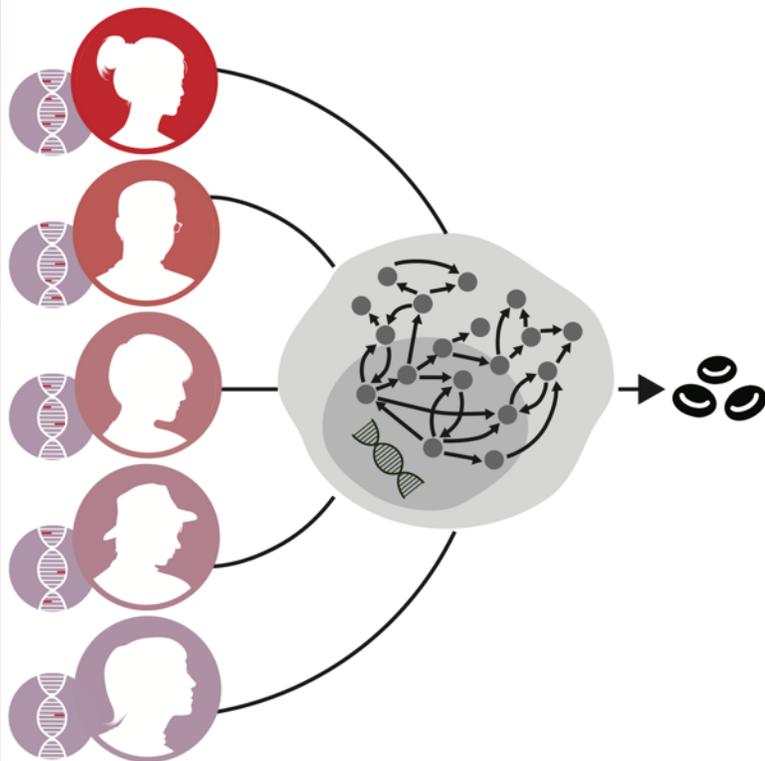


High genetic risk

1 Individuals carry variants affecting trait predisposition

2 resulting in altered biological functions

3 that can be captured in measured analyte levels.



# The multi-omic blood manifestations of genetic disease risk

Michael Wainberg, Andrew T. Magis, John C. Earls, Jennifer C. Lovejoy, Nasa A. Sinnott-Armstrong, Gilbert S. Omenn, Leroy Hood\*, Nathan D. Price\*

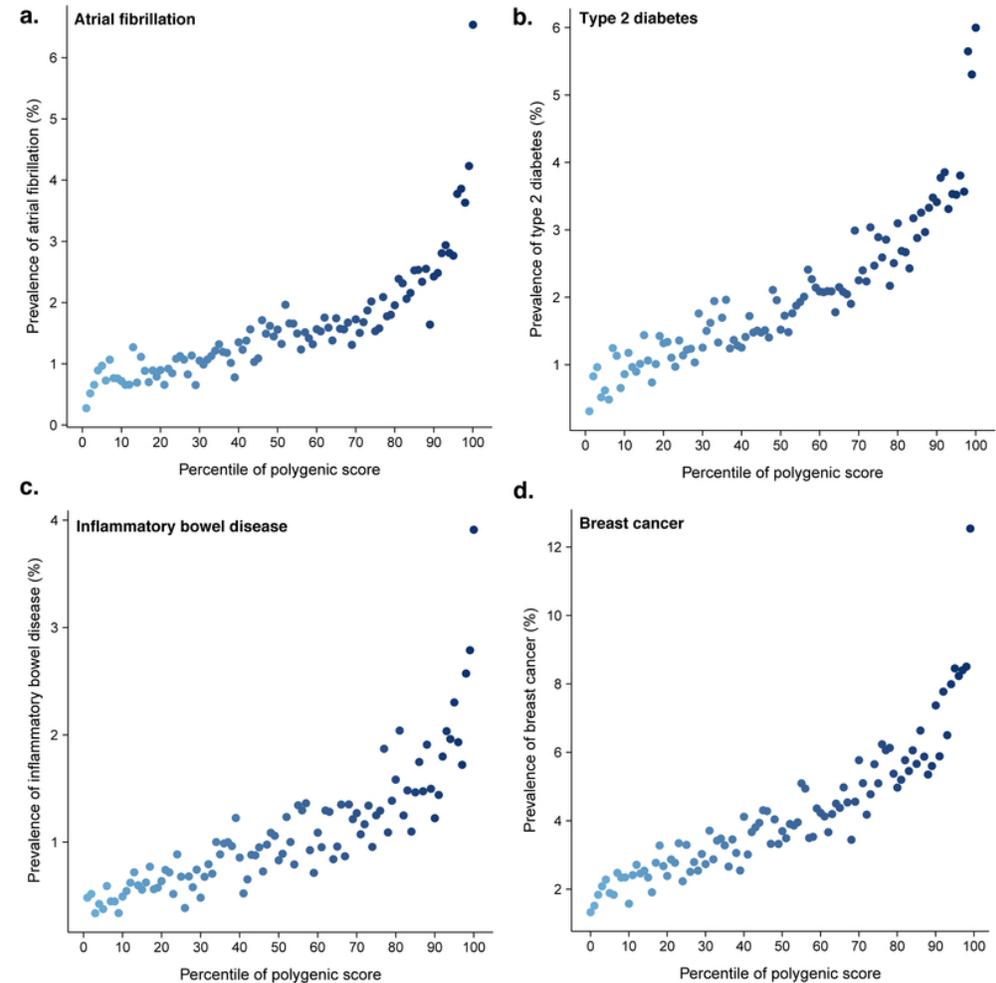
\*Nature, submitted.



- |  |   |  |   |
|--|---|--|---|
| <p><b>Anthropometric</b><br/>Birth weight<br/>Body mass index<br/>Height<br/>Waist-to-hip-ratio adjusted for BMI</p>   | <p><b>Cancer</b><br/>Breast cancer<br/>Prostate cancer</p>                                    | <p><b>Miscellaneous</b><br/>Glaucoma<br/>Male pattern baldness<br/>Parental extreme longevity</p>                          | <p><b>Other immune</b><br/>Allergic disease<br/>Asthma<br/>Atopic dermatitis<br/>FEV1</p>   |
| <p><b>Autoimmune</b><br/>Ankylosing spondylitis<br/>Celiac disease<br/>Crohn's disease<br/>Inflammatory bowel disease<br/>Juvenile idiopathic arthritis<br/>Primary biliary cholangitis<br/>Primary sclerosing cholangitis<br/>Psoriasis<br/>Systemic lupus erythematosus<br/>Type 1 diabetes<br/>Ulcerative colitis</p> | <p><b>Cognitive</b><br/>Cognitive performance<br/>Educational attainment<br/>Intelligence</p> | <p><b>Musculoskeletal</b><br/>Carpal tunnel syndrome<br/>Heel bone mineral density<br/>Total body bone mineral density</p> | <p><b>Psychiatric</b><br/>Anxiety/tension<br/>Bipolar disorder<br/>Depression<br/>Neuroticism<br/>Subjective well-being<br/>Worry</p> |
| <p><b>Cardiovascular</b><br/>Atrial fibrillation<br/>Coronary artery disease<br/>Diastolic blood pressure<br/>Stroke<br/>Systolic blood pressure</p>   | <p><b>Metabolic</b><br/>Chronic kidney disease<br/>Gout<br/>Type 2 diabetes</p>               | <p><b>Neurological</b><br/>Alzheimer's disease<br/>Amyotrophic lateral sclerosis<br/>Epilepsy<br/>Multiple sclerosis</p>   | <p><b>Sleep</b><br/>Chronotype<br/>Insomnia symptoms<br/>Narcolepsy<br/>Sleep duration</p>  |



**Polygenic risk scores (PRS) predict genetic risk as a weighted sum of risk alleles found by genome-wide association studies (GWAS)**



# Summary

Genetic risk for **54 traits is associated with 858 detectable alterations** in plasma proteomic, metabolomic and clinical laboratory measurements.

**These alterations provide insights into molecular pathophysiology**, and some suggest **therapeutic strategies** and protection from aging.

Individuals at high genetic risk for a **trait display dysregulation** in many of the same analytes that are **dysregulated in frank disease**, and this signature of dysregulation is frequently detectable in the blood. Our results emphasize that genetic risk scores, far from being a mere statistical tool for disease risk stratification, also **reflect underlying disease biology**—**treat at this stage? See clearly initial disease stages.** Using **genetic risk as a proxy for prodromal disease** can substantially broaden the insights gained from population-scale multi-omic cohorts. Learn about disease from wellness populations.



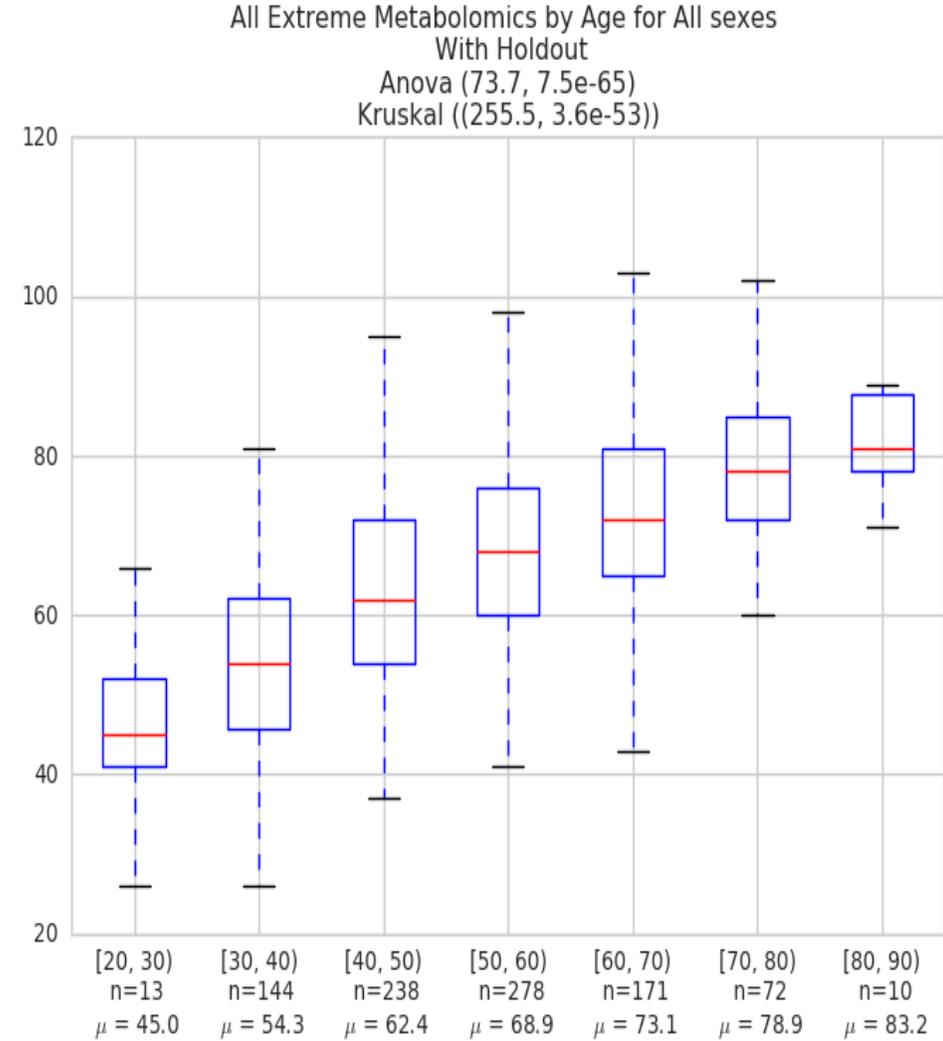
## Analyte Expression Levels Diverge with Age and Permit the Determination of Your Biological Age

*The age your body says you are rather than your birthdate—your chronological age*



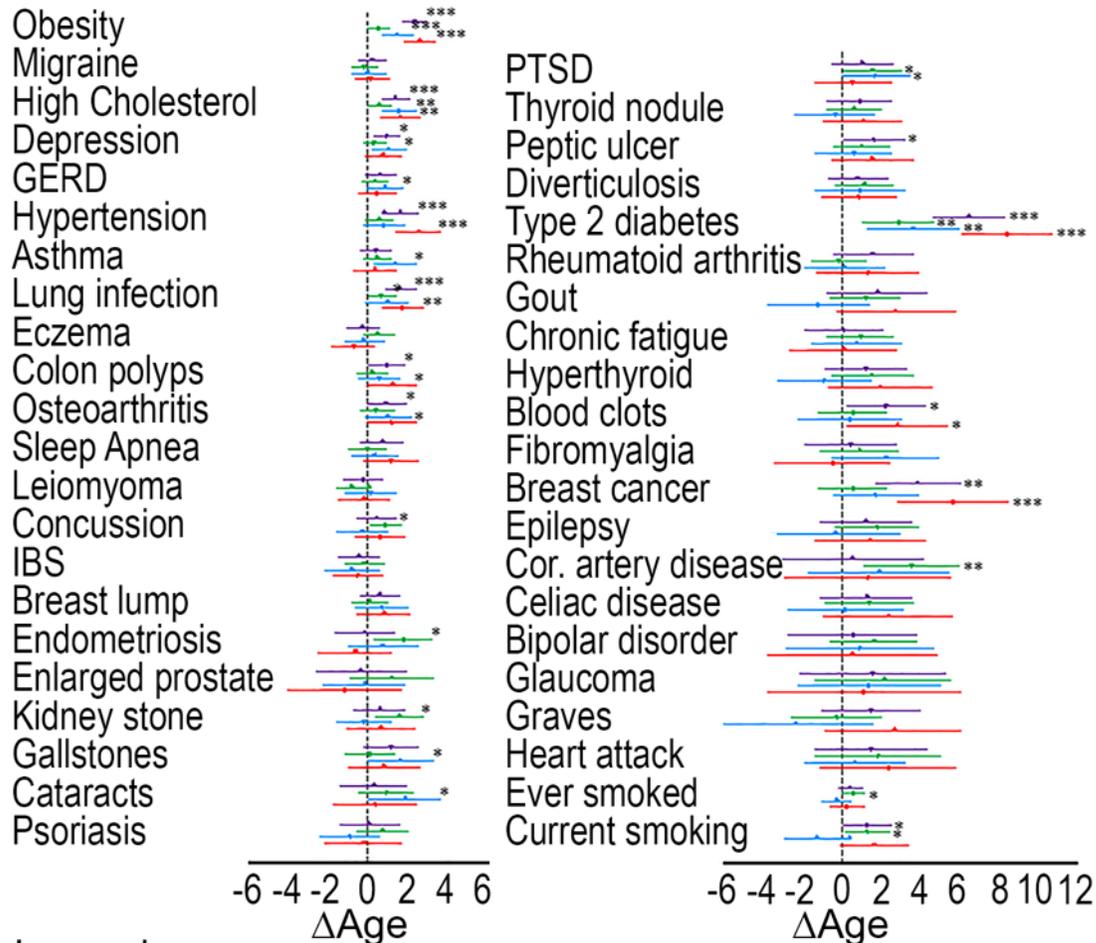
# Loss of Control of Analyte Expression with Increasing Age

Increasing Variance of Expression



Increasing decades of life





Legend:  
 — All Data Sources  
 — Proteomics  
 — Metabolomics  
 — Clinical Labs

# Multi-omic biological age estimation and its correlation with wellness and disease phenotypes: A longitudinal study of 3558 individuals

John C. Earls, Noa Rappaport, Laura Heath, Tomasz Wilmanski, Andrew T. Magis, Nicholas J. Schork, Gilbert S. Omenn, Jennifer Lovejoy, Leroy Hood, Nathan D. Price

**Journal of Gerontology**  
in press.



Figure and analysis by Laura Heath





# Employing Scientific Wellness for Individuals is Key to Healthy Aging

*More than half of all children born in 2007 in **developed countries** can expect to celebrate their 100th birthday.*





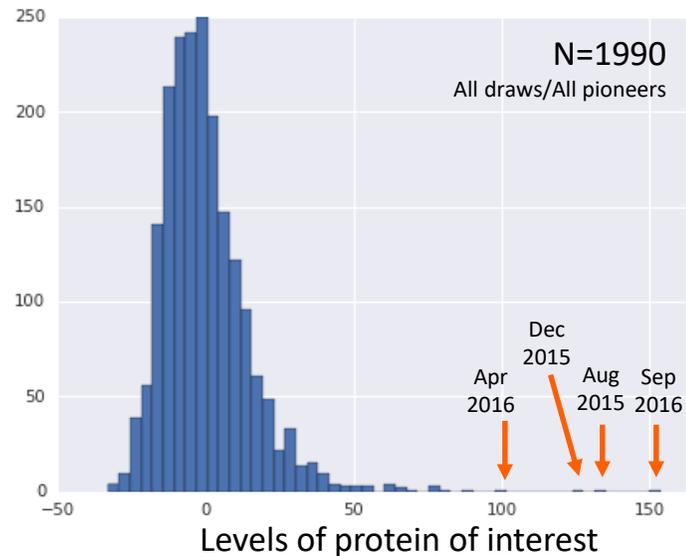
# Microbiome to blood

- 11 metabolites allow us to predict the alpha diversity of the gut microbiome
- T. Wilmanski, et. al Nature Biotechnology Sept. 2019



# State Transitions : Wellness to Disease

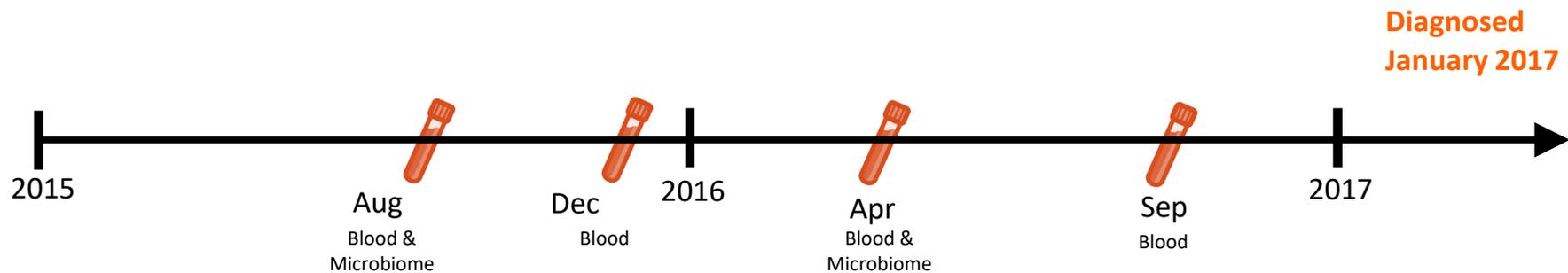
# Example – identifying outlier for pioneer with pancreatic cancer



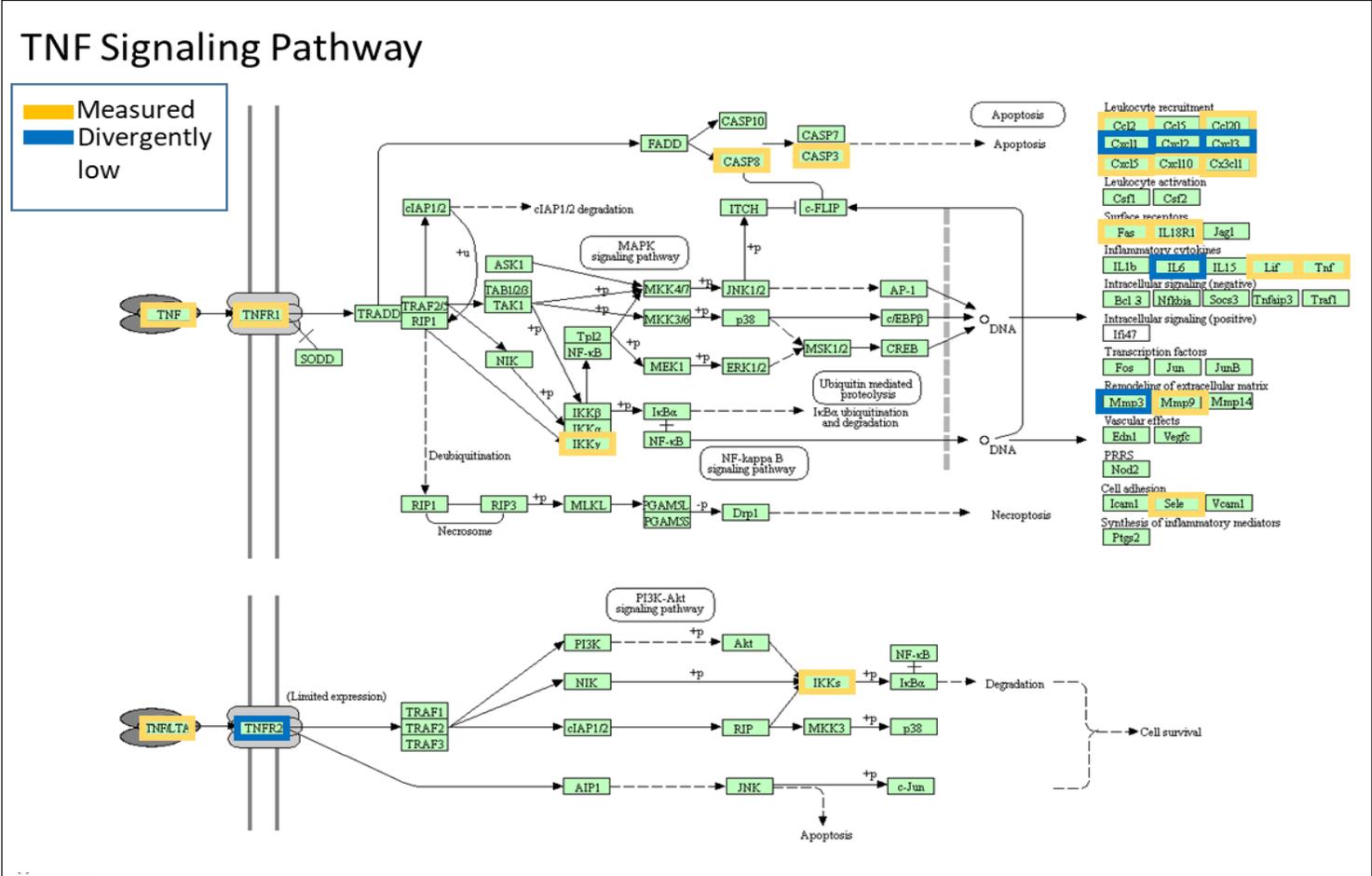
Over the course of the four blood draws, this pioneer has **consistently** been the **largest outlier for the protein of interest**.

A 2010 study by Bert Vogelstein estimates at least 5 years between parental, non-metastatic founder cell and metastatic ability in pancreatic cancer<sup>1</sup>.

1. Yachida, S et al. (2010). Distant metastasis occurs late during the genetic evolution of pancreatic cancer. *Nature*, 467(7319), 1114–1117.



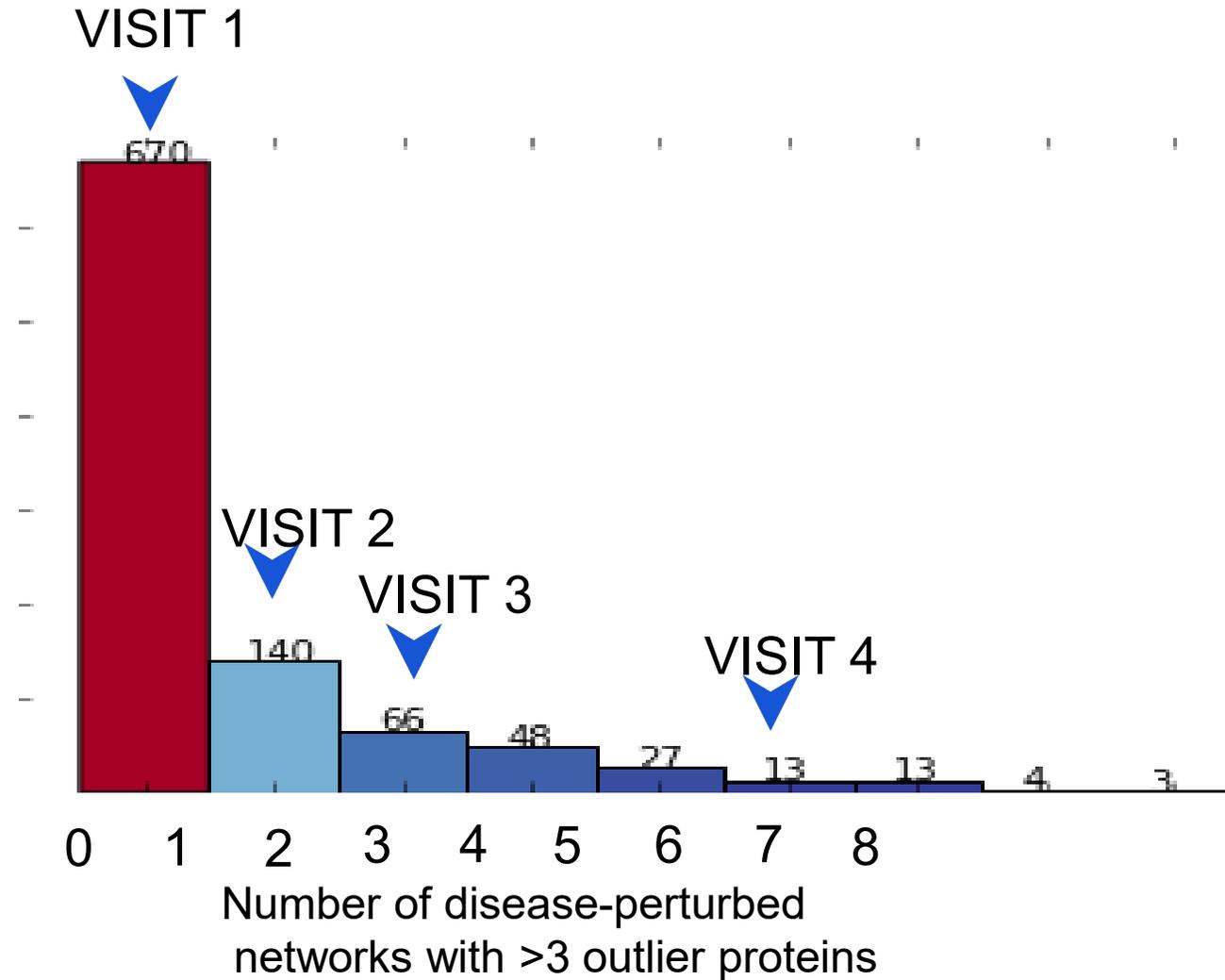
# Identifying disease-perturbed networks pre-diagnosis: Early example for pancreatic cancer



# Distribution of # of significantly low p-values

948 clients/how many of 9 potential cancer-related networks perturbed

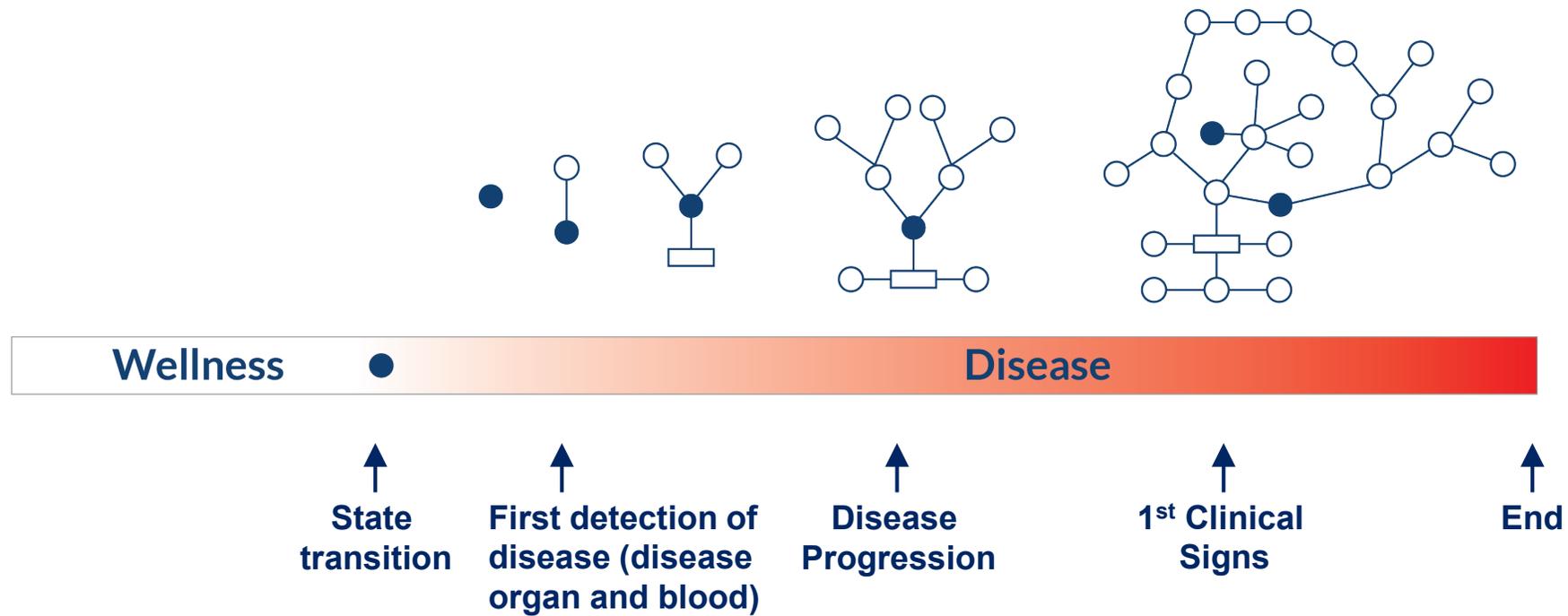
Eve  
▼





# A New N=1 Approach to Disease

← Disease Perturbed Networks →



# Early Reversal of Chronic Diseases: Preventive Medicine of the 21<sup>st</sup> Century

- In following about 6,000 or more patients over an extended time period, we have started to see more than 100 wellness to **earliest disease transitions** for all common diseases (as measured by blood analytes).
- Use data clouds to develop **blood biomarkers** for the earliest transitions for each disease and disease-perturbed network biology analyses to identify drug candidates/life style changes for **therapies** to reverse each disease at its earliest transition.
- Thus individuals will have diseases reversed before the diseases manifest themselves as a chronic disease phenotype—an approach to eventually eliminating chronic diseases--**preventive medicine of the 21st century**—note that **86% of the healthcare budget spent on chronic diseases**



# ISB & Providence St. Joseph Health Affiliation

*Alaska, California, Oregon, Montana, Washington, New Mexico, Texas*

States served	7
Hospitals	50
Physicians	7500
RNs	36,000
Unique patients served each year	8 million
Total Assets	\$23 billion

Third largest not-for-profit healthcare system in the US  
Integrated Medical Electronic Health Records for 30 million patients



# Systems-Driven Clinical Trials

1. **Scientific wellness**
2. **Alzheimer's (3 trials)**
3. **Multiple sclerosis**
4. Wellness for breast cancer survivors
5. Lyme disease
6. Immunotherapy for cancer (vaccine)
7. Pregnancy
8. Dental caries
9. Sepsis

## Strategies

Systems-driven technologies  
and strategies

Longitudinal, deep phenotyping

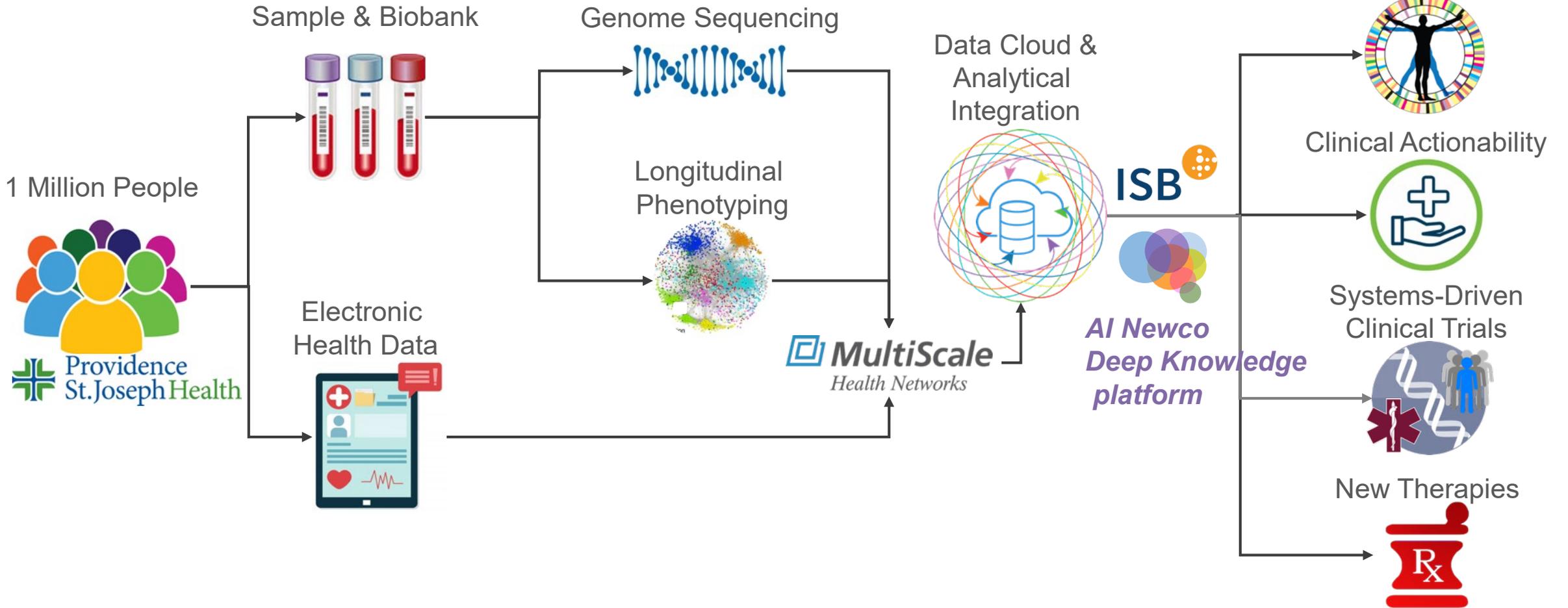


# One-Million Longitudinal Patient Genome/Phenome Project



# 1 Million Genomes Bring PSJH Into 21<sup>st</sup> Century Medicine

Personalized Wellness



Sample Pipeline

LabCorp  
BioBank

Genotyping/Phenotyping

illumina® METABOLON®  
Veritas  
The Genome Company  
olink  
PROTEOMICS  
LabCorp

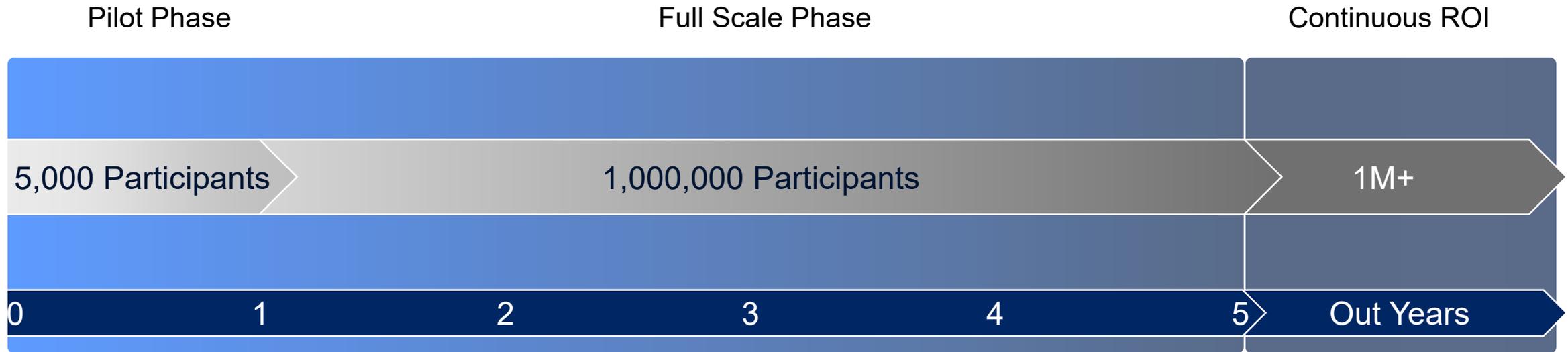
Informatics Technology

Microsoft  
IBM® Google

Therapeutics

Pharma--  
3 companies

# Implementation of Health 2.0 Population Screening – 1 Million Genome/Phenome (Gx/Px) Project



## Project Timeline (Years)

- Pilot Program
- Wellness—Family Practice
- Cardiovascular
- Diabetes/Obesity
- Cancer
- GI Diseases

# Longitudinal Deep Phenotyping

- Blood proteins—O-link
- Selected clinical chemistries—Lab Corp
- Blood metabolites--Metabolome
- Gut microbiome—CoreBiome
- Wearables and digital health applications
- Cognitive Brain metrics and training
- Epigenetics\*
- DNA sequencing of WBC mRNA and miRNA\*
- Every 6 months

\*Future analysis of biobanked samples



# Overview of the Arivale Platforms at ISB

- The **Arivale production platform** is designed to **manage hundreds of thousands of individuals** through blood draw collection, sample shipping, and clinical data processing.
  - Automated requisitions and clinical data ingestion
  - Member tracking and clinical decision support
  - Saliva and microbiome kit shipping and tracking
  - Online lifestyle and health history assessment collection
  - Member notifications (critical for data collection syncing)
- The **Arivale research platform** is designed to **enable research on longitudinal multi-omic datasets**.
  - Ingest and process genetic, microbiome, proteomics, and metabolomics data
  - Automated batch correction for metabolomics and proteomics
  - Automated computation of polygenic scores
  - Consolidated datasets designed for immediate scientific analysis through Jupyter notebook interface
- The **Arivale clinical platform** consists of **clinical and scientific curation processes** that provide a strong evidence base for our approach to data integration and automated recommendations.

# Clinical Benefits for Physicians and Patients: Identify verified Actionable Possibilities and Discover Thousands of New Actionable Possibilities

## Genome

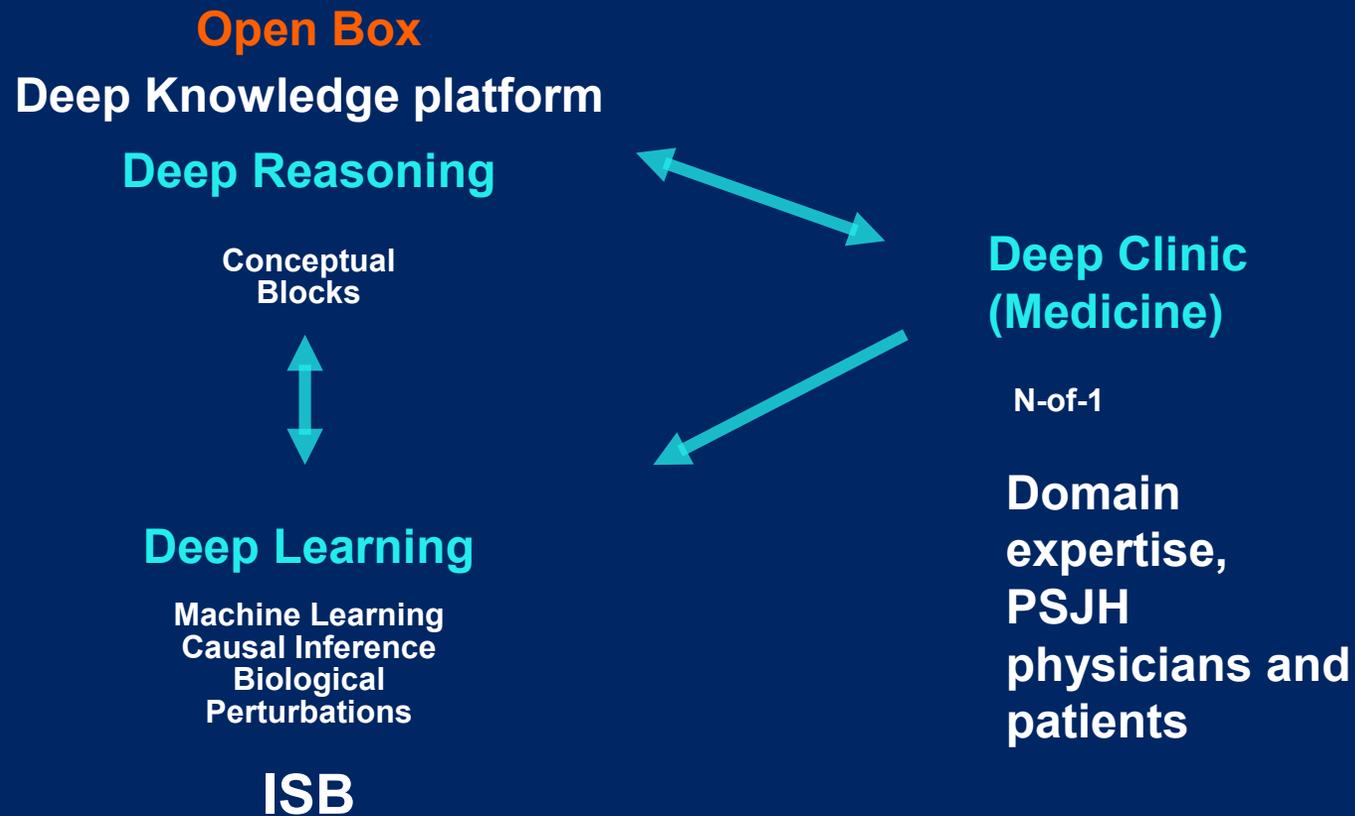
- Assess genetic risks for 125 diseases (hundreds more in the future)—polygenic profiles (GWAS-based)
- 59 actionable variants (ACHG)
- Pharmacogenomics 25/top 100 prescribed drugs
- 7500 recessive Mendelian diseases (e.g. hemochromatosis)
- Convert the two lower levels of actionable possibilities in ClinVar to high level possibilities—discovery of hundreds of new actionable possibilities
- Far most sophisticated assays of immunological function (HLA typing by DNA sequence)
- Nutrigenomics
- Athletic injury susceptibility
- Optimize diet and exercise according to your genomic constraints
- Rare diseases
- Pediatric Emergency room

## Phenome

- Determine biological age to facilitate healthy aging (be mentally and physical functional in 90s)
- Identify wellness to disease transitions for all chronic disease and reverse before the disease manifests itself
- Identify new biomarkers and potential drug target candidates by statistical correlations
- 100 polygenic scores to determine how to treat patients and follow high risk patients for earliest transitions and learn to reverse them



# AI—Expert Systems Newco--the Deep Knowledge platform creates the continuous self-learning healthcare system that is open box—the rationale is visible



The platform brings together deep reasoning, deep learning, and deep clinical practices (domain expertise).

It enables best medical thinking to be applied individually to patients anywhere on the globe. N=1 treatments. Democratization of medicine. Deliver actionable possibilities as notes that can directly be placed in clinical database



# Doubling of Medical Knowledge

## Time for medical knowledge to double

1950 50 years

2010 3.5 years

2020 estimated 73 days

## Assume

Doubles every 2 years—in 50 years 33.5 million times today's medical information

Doubles every 78 days—in 50 years  $10^{75}$  times the information

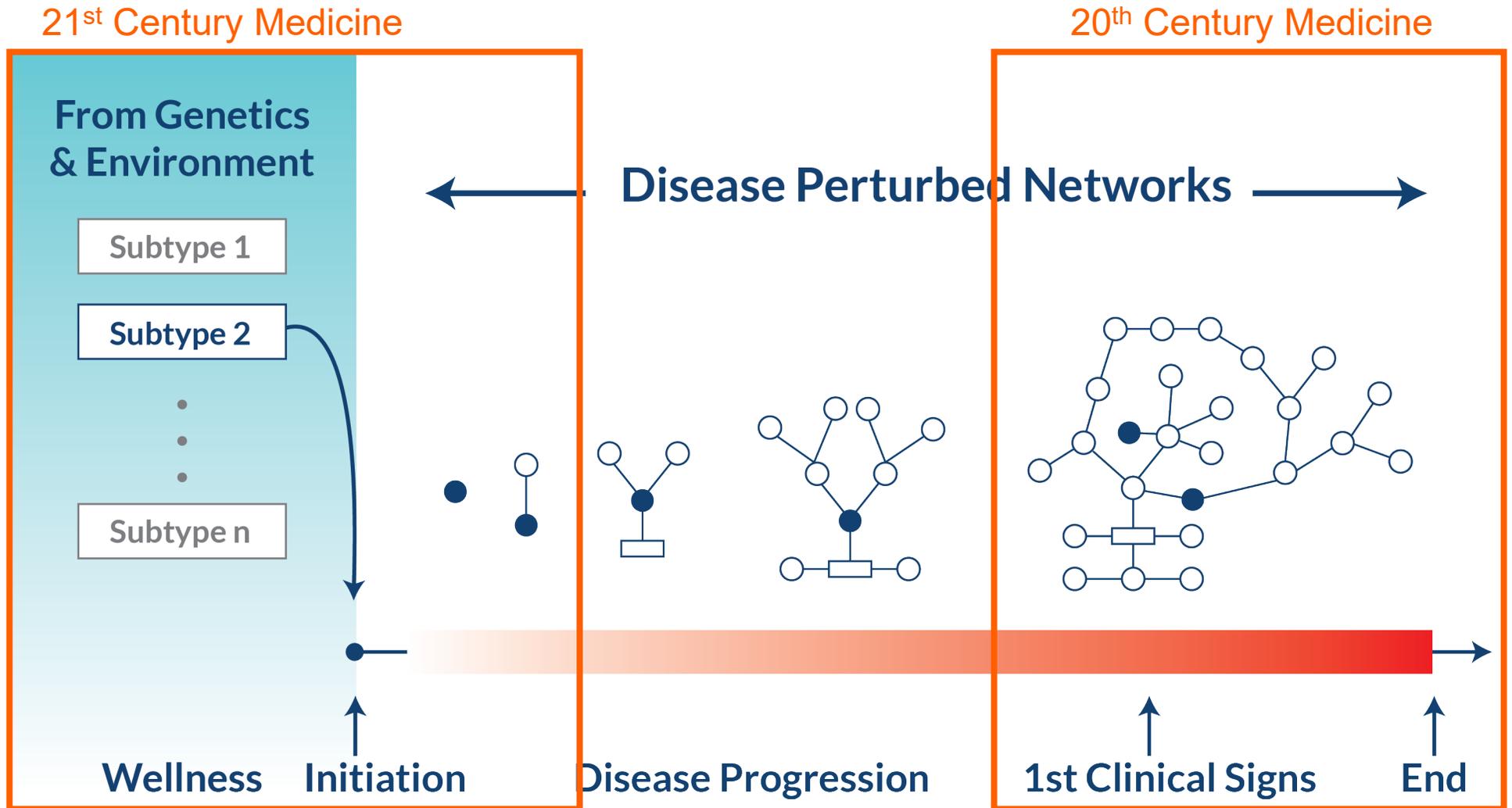


# Unique Features of the 1-million person Gx/Px project

- **Longitudinal deep phenotyping unique**—longitudinal data—N=1—establish baselines and follows wellness to disease transitions (and reverse)—unique new actionable possibilities
- **Discovery**—generate 1000s of new actionable possibilities
- **Converting data to actionable possibilities** to improve physician treatment and optimize patients' health. Follow with **outcomes**.
- **Integrated computational platforms and a deep AI knowledge platform** to integrate these data (Gx, Px and EHRs) and convert them into **actionable possibilities**—directly deliverable to physicians and hence to patients—these integrated computational platforms make possible a “**continuous learning system**” and **open box** explanation of rationale for resulting diagnosis and therapy
- **Unique strategic partnerships**—because of scale and immediacy of initiation
  - DNA sequencing companies
  - Phenomic vendors
  - Technology companies
  - Pharma companies
  - Biobank company?
  - Open AI both deep knowledge and deep learning
- **Focus on both wellness and disease**--CV, Cancer, GI, Diabetes/Obesity, Wellness (family practice)



# The wellness to disease spectrum and 21<sup>st</sup> century medicine vs. 20<sup>th</sup> century medicine



# I. Deep Phenotyping and 21<sup>st</sup> Century Medicine Will:

- **Optimizing individual wellness**--this will help avoid disease
- **Identifying and reversing wellness to disease transitions at their earliest point** for many chronic diseases—preventive medicine of the 21<sup>st</sup> century
- **Identifying through longitudinal deep phenotyping populations at high genetic risk for 100 or so diseases** and follow them closely to respond to earliest transition and find early transitions.
- **Identifying high risk individuals with prodromal disease—and reversing it before it every transitions into frank disease. Understanding early disease.**
- **Understanding human biological complexity by N=1 approach**—human nutrition
- **Pioneering new approaches to blood biomarker and drug target discovery**—analyte correlations (static and dynamic), analyte correlations with increasing genetic risk, systems approaches to biology at transition points, **multimodal therapies** for complex diseases, etc.



## II. Deep Phenotyping and 21<sup>st</sup> Century Medicine Will:

- **Healthy aging**—bring individuals into their 90s mentally alert and physically active. Biological age metric key to optimization of healthy aging. Identify other aging metrics
- **Drug discovery with two 50 patient trials** (1<sup>st</sup> trial--identify biomarker for responders and 2nd trial include only responders).
- **AI-expert systems Newco (continuously learning knowledge-based, open-box system for diagnosing and treating disease)** will make each physician an expert in the relevant disease—democratization of medical expertise and dealing with biological complexity.
- **Managing complex diseases of individuals by N=1.**
- **Saving the healthcare system substantial expenses** (e.g. Alzheimer's) and drugs (dual N=50 clinical trials)
- **Migrating wellness healthcare** from big healthcare systems to individual clinical practices and ultimately the home.





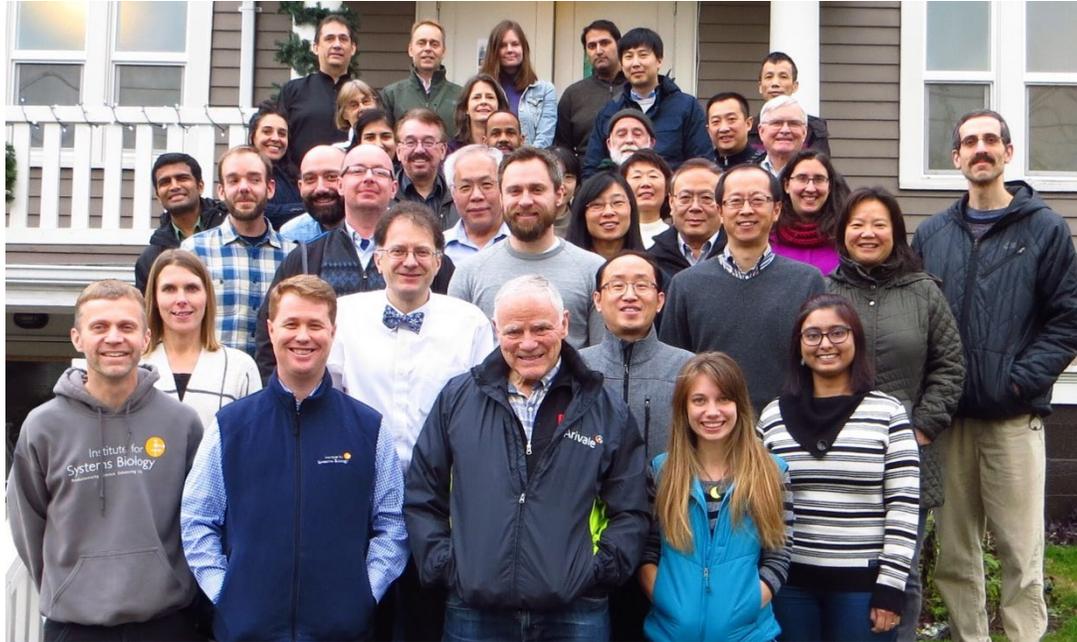
# What Will 21<sup>st</sup> Century Medicine Achieve?

- **Improve wellness for the individual, healthy aging and functional into 90s**
- **Reverse diseases at their earliest transitions-- eliminate many chronic diseases**
- **Reverse and strikingly decrease the ever-escalating healthcare costs**
- **Scientific wellness will move healthcare to the home--tricorder**



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## Funding



