

NCATS

COLLABORATE. INNOVATE. ACCELERATE.

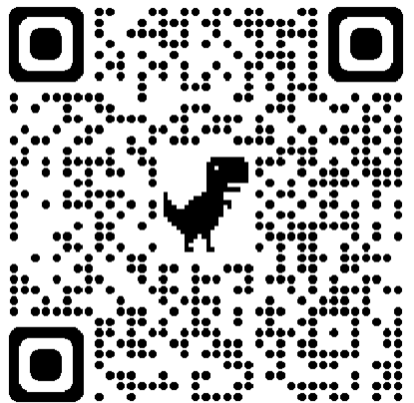
Research at the Intersection of Translational Science and Children's Health

Joni L. Rutter, PhD

Director

National Center for Advancing Translational Sciences

*National Advisory Child Health and Human Development
September 6, 2023*



NIH National Center
for Advancing
Translational Sciences

The Public Health Challenge

10,000

Diseases



and only

5%

Have
Treatments
or Cures



Time from early
development to the
medicine cabinet takes
10-15 years.

9 out of **10**

Promising therapeutic candidates
that enter clinical trials fail.





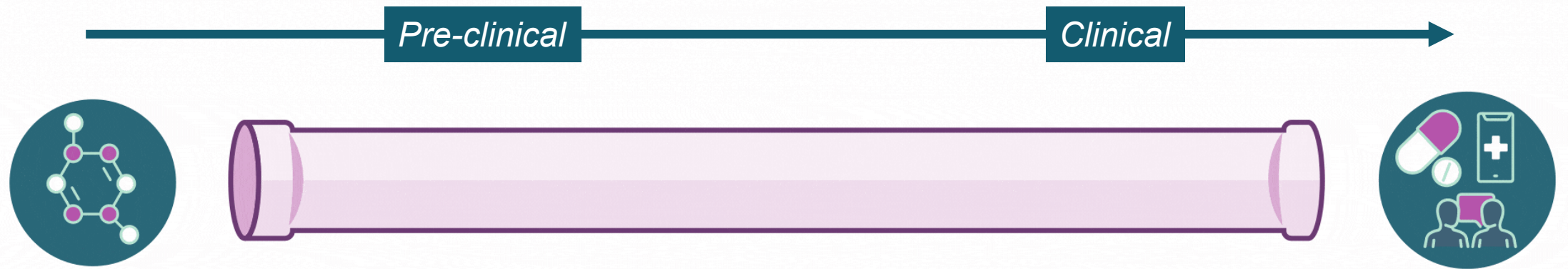
NCATS' MISSION

**Turn research observations
into health solutions through
translational science**



NCATS is Re-engineering the Translational Pipeline

NCATS is advancing translational science by addressing long-standing bottlenecks in the translational pipeline so that new treatments reach people faster.



Examples of bottlenecks

• And solutions

Operational

“One size fits all” approach

- **Adaptive clinical trial design, master protocols**
- **N of small CTs, RDCRN basket/umbrella trials**

Low enrollment and diversity in clinical trials

- **Patient Advisory Groups, Enhanced community engagement efforts (TIN)**

Administrative/Workforce Dev

Administrative burden for study start-up

- **Streamlined business and regulatory processes (SMART IRB)**

Shortage of qualified translational investigators

- **Training and career development best practices (CTSA K, T, R25, R03, DPI)**

Scientific

Insufficient tools and technologies to predict toxicity and efficacy of new drugs

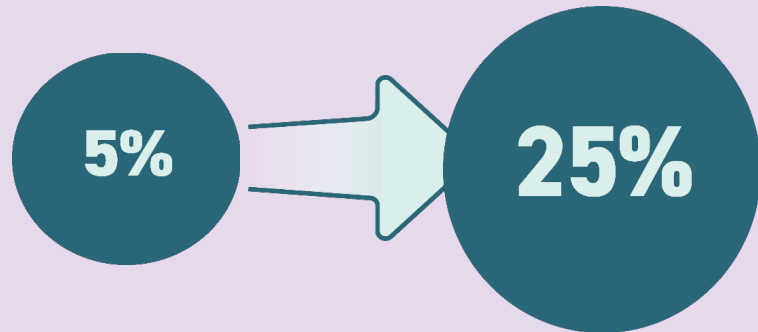
- **Platform-based Tissue/Organ on chips; 3D biofabrication**
- **Gene targeted therapies**
- **AI/ML drug development (ASPIRE)**

Incompatible databases to advance data science

- **Data, interoperability and integration (Translator, N3C, GARD, RARESource)**

NCATS Vision: Three Audacious Goals

More Treatments



**Five-Fold Increase
in Number of Diseases
with Treatments**

All People



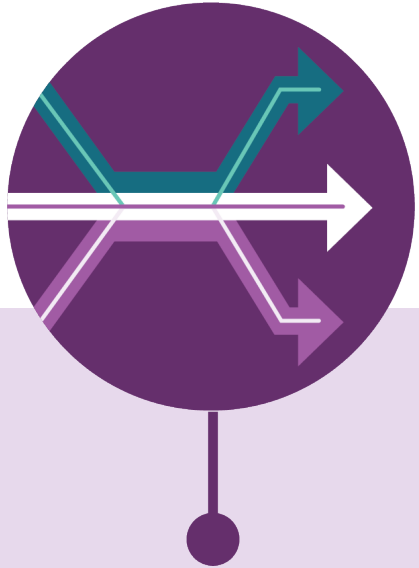
**Dramatically Increase
Inclusivity Across Every
Area We Support**

More Quickly



**Enable Diagnostics and
Therapeutics to Reach
People Twice as Fast**

Key NCATS Approaches



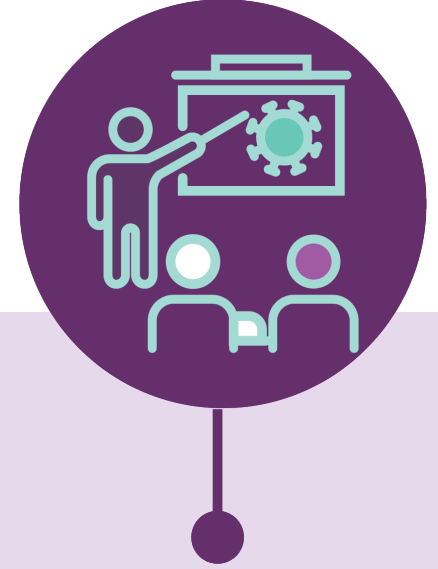
Understanding what's similar across diseases to spur multiple treatments at a time



Developing models that better predict a person's reaction to a treatment

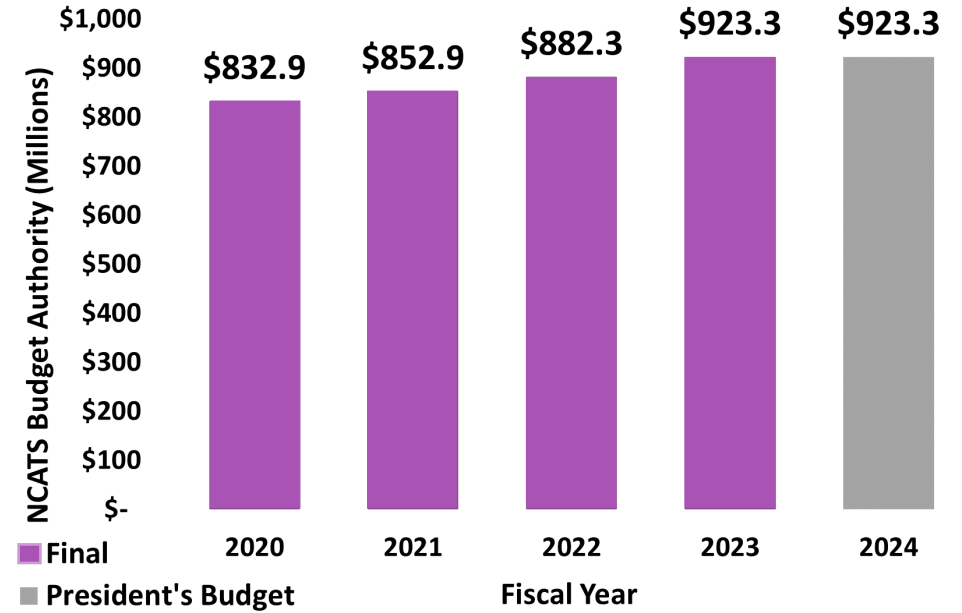
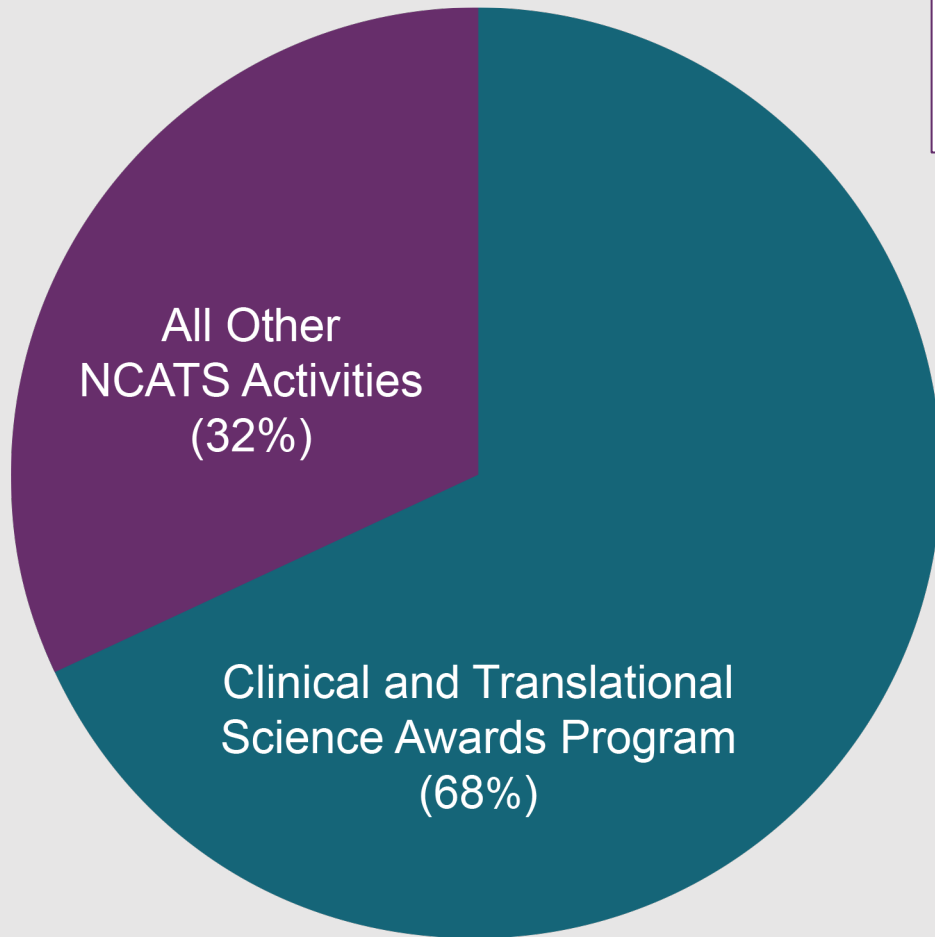


Enhancing clinical trials so the results more accurately reflect the patient population



Leveraging real-world data and data science approaches to address public health needs

NCATS' Budget At-a-Glance



\$ (in millions)	FY 2023	FY 2024	
	Enacted	President's Budget	FY24 PB +/- FY23 Enacted
NCATS			
Total	923.3	923.3	0 (0%)
CTSA	629.6	629.6	0 (0%)
Non-CTSA	293.8	293.8	0 (0%)

Reflects Fiscal Year 2023 Enacted Appropriations
 NCATS Budget: \$923,323,000

Specific Efforts in Translational Science for Children's Health

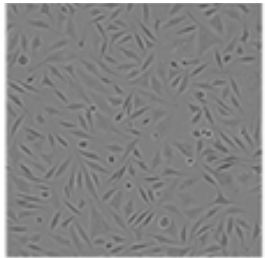
Pre-clinical --- Clinical --- Data Science



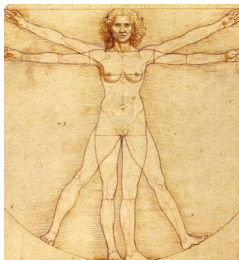
Revolutionizing Drug Development Approaches

(PhRMA, Biopharmaceutical Research Industry Profile, 2016)

2D Cell Lines



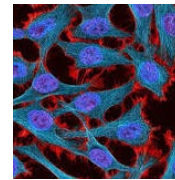
Human



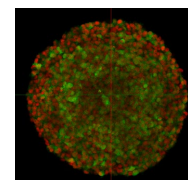
Mouse



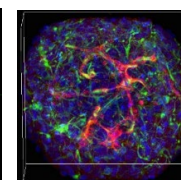
2D



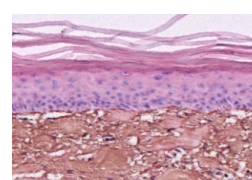
Spheroids



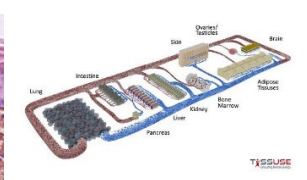
Organoids



Printed Tissues



Organ-on-a-chip

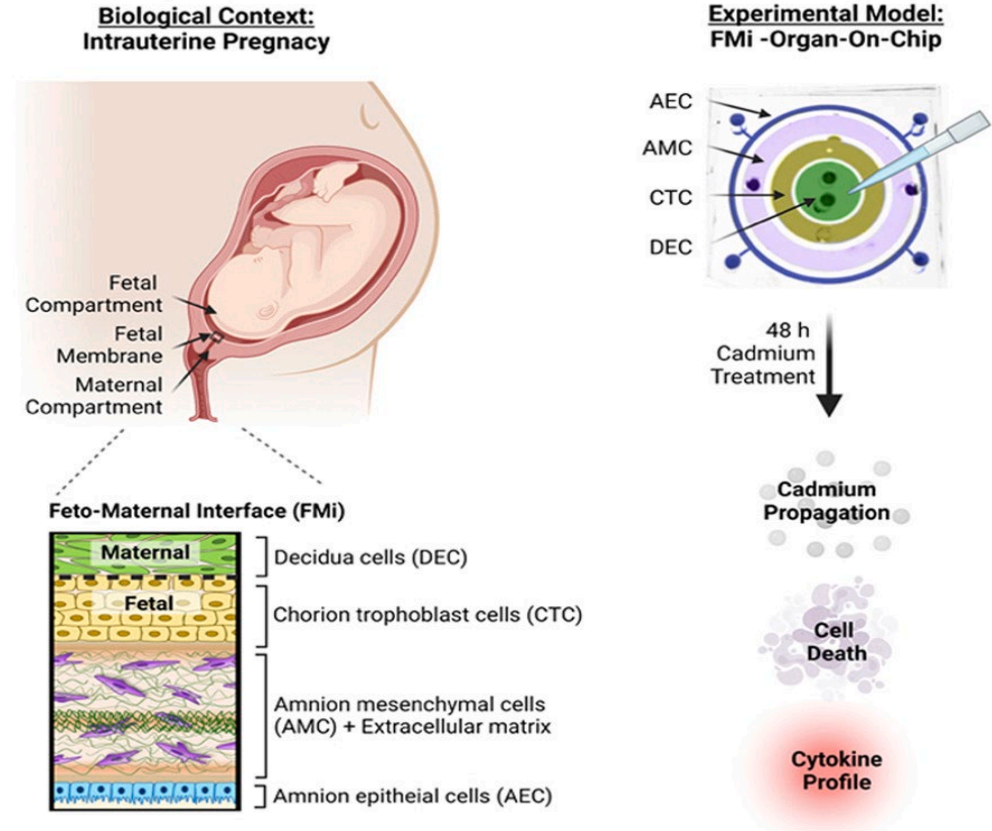


Need for new technologies and better predictive tools across the translational pipeline



Using 3-D Tissue Bioprinting and Tissue Chip to Improve Health in Pregnancy

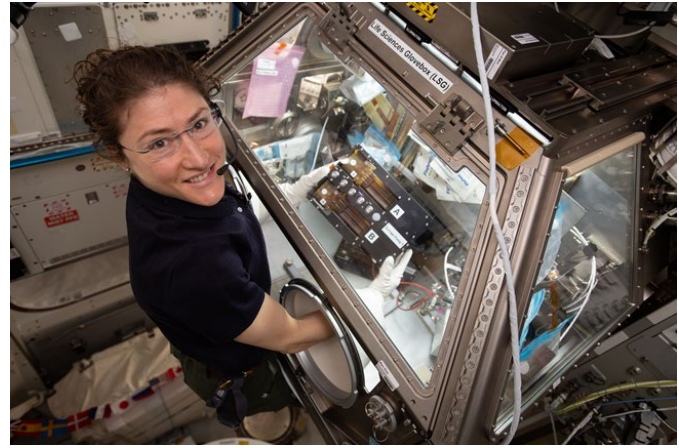
- The Fetal-Maternal Interface (FMI) on a Chip aims to reproduce the structure, function, and responses of the FMI, mimicking health and inflammation
- The goal is to offer a personalized FMI model to test potential treatments and streamline clinical trials.
- One study tested the effect of maternal exposure to cadmium (Cd), an environmental toxin, and found significant cell death in maternal cells, but minimal effect on fetal cells. ([PMID: 34391970](https://pubmed.ncbi.nlm.nih.gov/34391970/))



Kim S, Richardson L, Radnaa E, Chen Z, Rusyn I, Menon R, Han A. Molecular mechanisms of environmental toxin cadmium at the feto-maternal interface investigated using an organ-on-chip (FMI-OOC) model. *J Hazard Mater.* 2022 Jan 15;422:126759. doi: 10.1016/j.jhazmat.2021.126759. Epub 2021 Aug 2. PMID: 34391970; PMCID: PMC8595660.



Physiological Changes under Prolonged Microgravity: Chips in Space

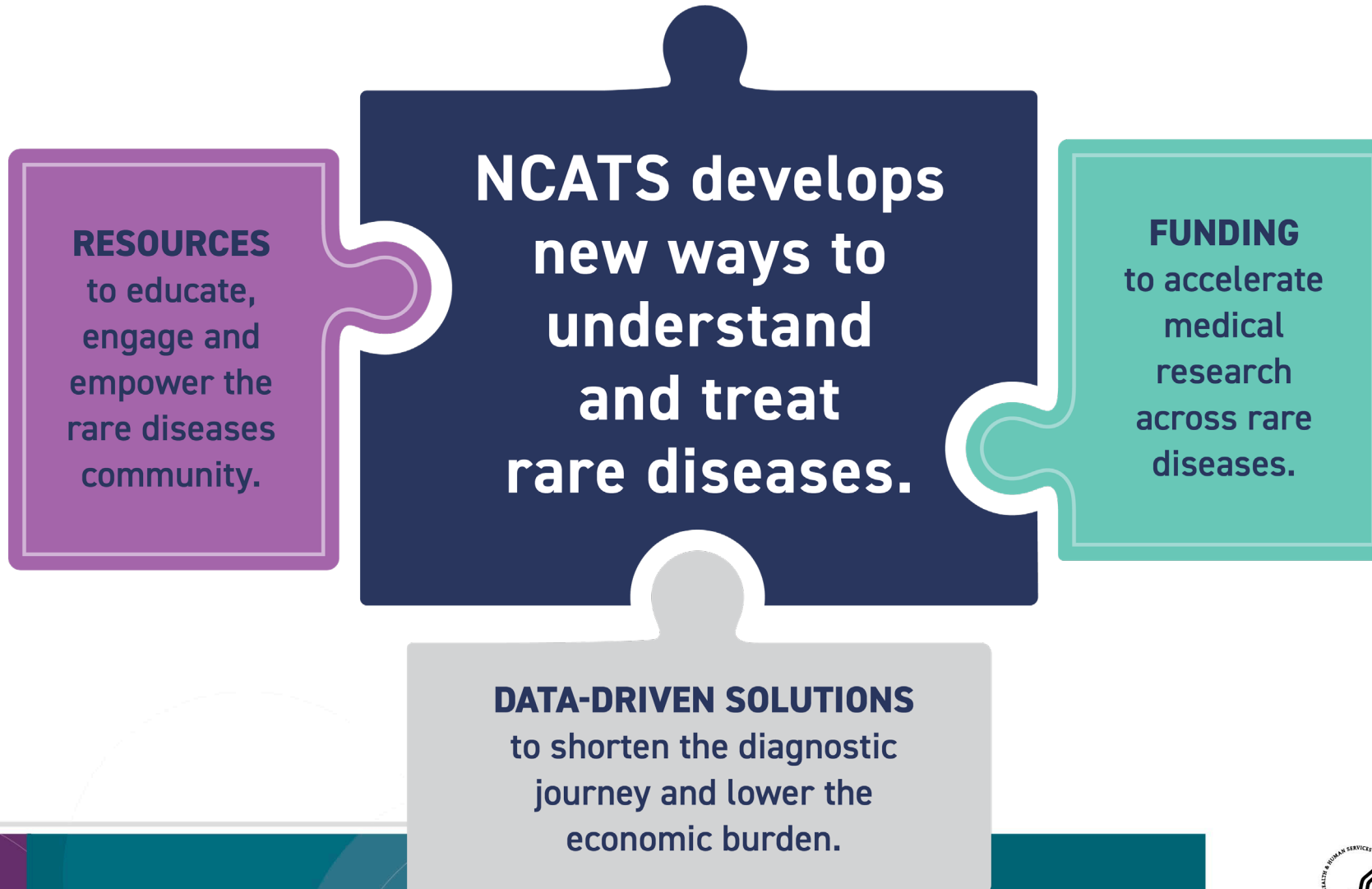


Resupply Mission
March 14, 2023

TISSUE CHIPS IN SPACE



NCATS Has a Home for Rare Diseases



NCATS Study Suggests People with Rare Diseases Face Significantly Higher Health Care Costs

Individual medical costs for people with a rare disease are

3-5 TIMES

greater than for those who do not have a rare disease.

The medical costs of rare diseases have been underestimated.



Yearly direct medical costs estimated at around

\$400 BILLION

are similar to those of cancer, heart failure and Alzheimer's disease.

Rare diseases are collectively common, affecting an estimated

**25-30
MILLION**

people in the United States.

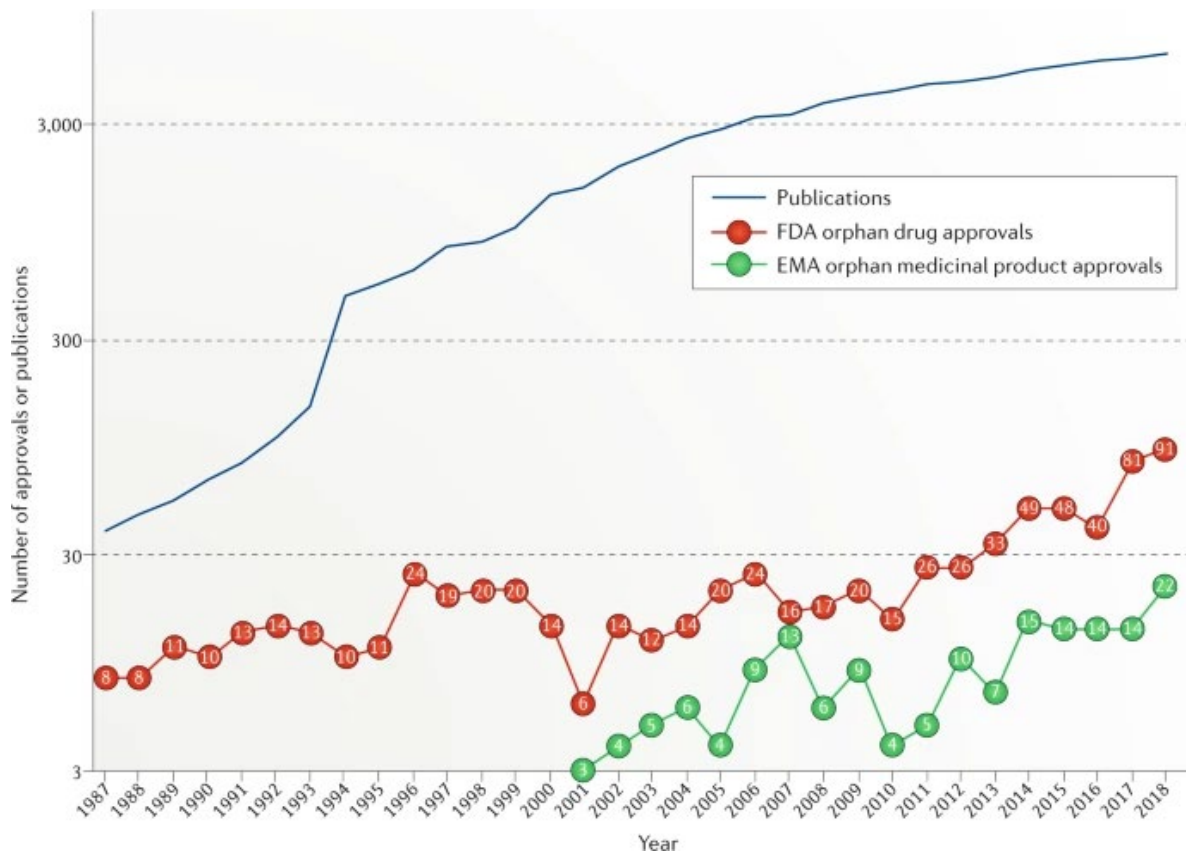


Source: The IDeaS Initiative: Pilot Study to Assess the Impact of Rare Diseases on Patients and Healthcare Systems



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Translational Sciences

Gap Between Scientific Research and Translation to Therapies for Rare Diseases



Tambuyzer, E. et al. Nat Rev Drug Discov. 2020 Feb;19(2):93-111.

Challenges:

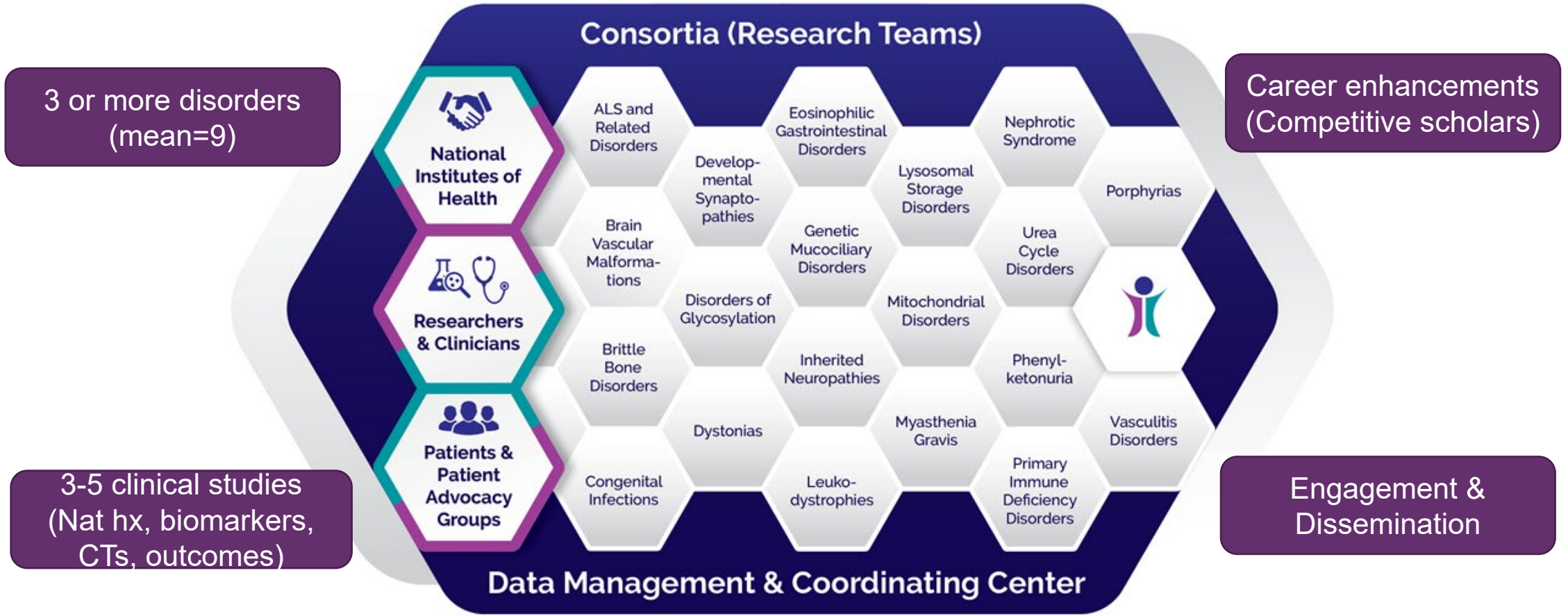
- Small number of patients
 - clinical phenotypes often overlap
 - different mutations a single gene can lead to different phenotypes
- Categorizing the genetic variants that cause disease, associating phenotypes, & grouping diseases based on common mechanisms
- ***Data exists but it is not collectively organized and shared to extract knowledge***

Opportunities:

- Apply advances in data and information technologies
- Build bioinformatics platform to make rare disease data more accessible



A network of 20 research teams collaborating to achieve faster diagnosis and better treatments for patients with rare diseases



National Center for Advancing Translational Sciences

NIH National Center for Advancing Translational Sciences

NIH National Institute of Neurological Disorders and Stroke

NIH National Institute of Dental and Craniofacial Research

NIH Eunice Kennedy Shriver National Institute of Child Health and Human Development

NIH National Institute of Diabetes and Digestive and Kidney Diseases

NIH National Institute of Mental Health

NIH National Institute of Allergy and Infectious Diseases

NIH National Heart, Lung, and Blood Institute

NIH National Institute of Arthritis and Musculoskeletal and Skin Diseases

NIH National Institutes of Health Office of Dietary Supplements

RDCRN Clinical Sites



Active Sites	Unique Locations	Site co-located with CTSA
358	197	144

Average of 19 sites per consortia (range 5 – 42)

Site	# of consortia	Country	# of sites
Children's Hospital of Philadelphia	9	Australia	2
Baylor College of Medicine	8	Belgium	1
Mayo Clinic	8	Canada	18
University of Minnesota	8	England	13
University of Utah	8	Germany	3
Children's Hospital Colorado	7	India	1
Seattle Children's Hospital	7	Ireland	1
Stanford University	7	Italy	2
Boston Children's Hospital	6	Netherlands	1
Children's National Medical Center	6	South Africa	1
Duke University	6	Switzerland	1
Massachusetts General Hospital	6		
Washington University in St. Louis	6		
Cleveland Clinic	5		
Johns Hopkins University	5		
University of Alabama at Birmingham	5		
University of California, Los Angeles	5		
University of California, San Francisco	5		
University of Miami	5		
University of Pennsylvania	5		

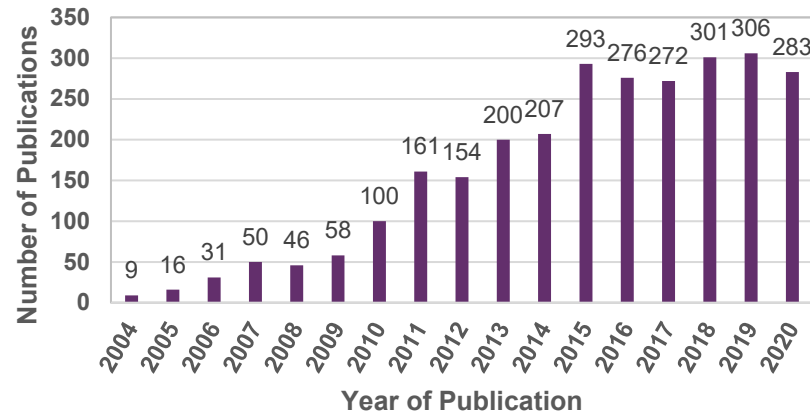


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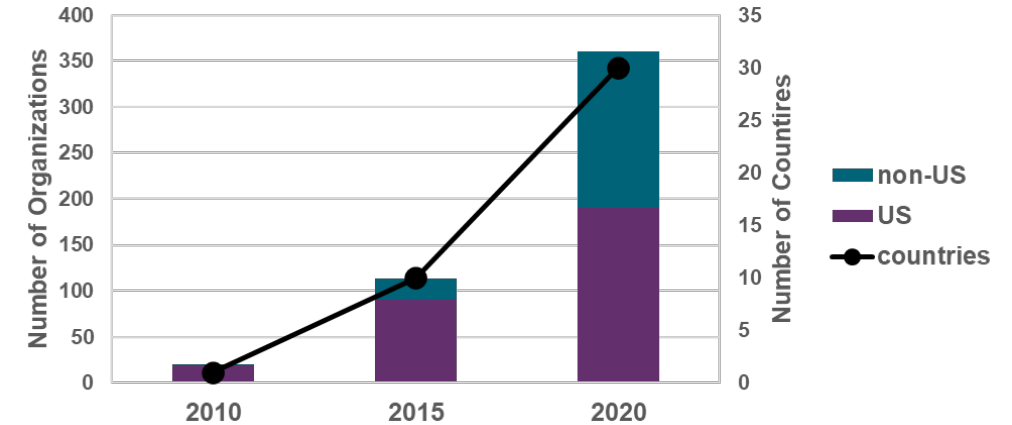


RDCRN Publications, International Collaborations, and Co-author Networks

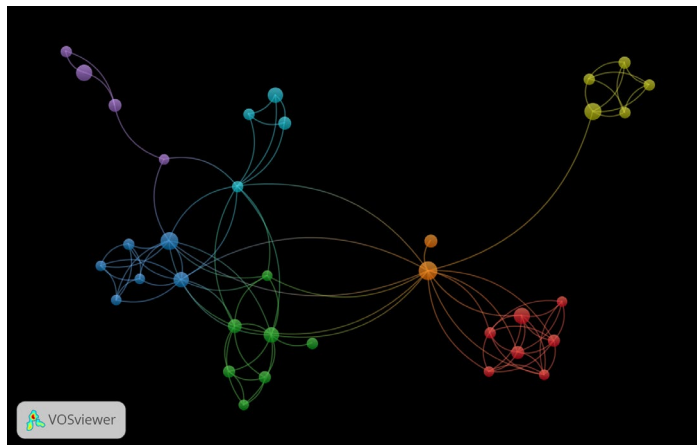
Number of RDCRN publications per year



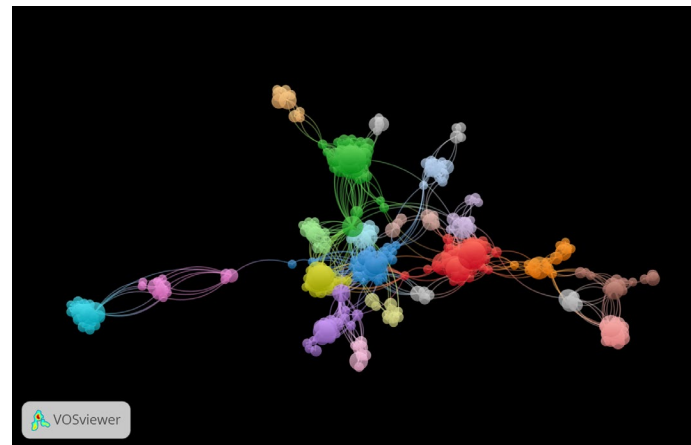
Number of organizations* and countries over time



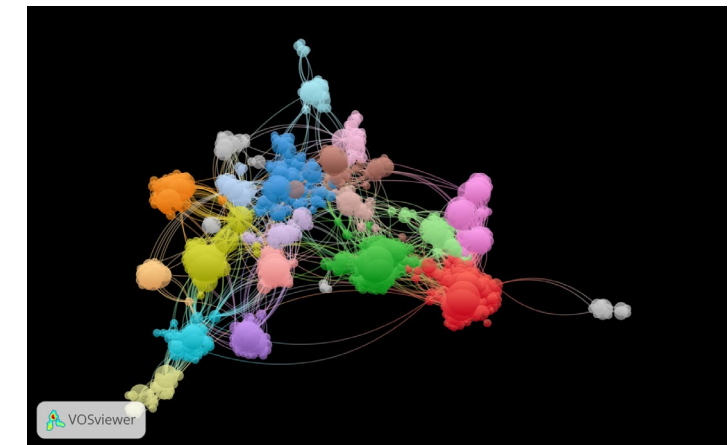
2004-2010 52 authors*



2004-2015 340 authors



2004-2020 946 authors



*Authors or organizations that contributed to at least 5 publications
 28 consortia funded during first three U54-grant cycles
 Analysis performed using iCite (NIH) and VOSviewer (Leiden University)



National Center for Advancing Translational Sciences



RDCRN Translational Impact

Clinical Trials directly funded by U54 grant

- Predominantly small **Phase 1/Phase 2**
- **81 clinical trials** total since 2003
- Currently **18 trials** funded in **RDCRN4**
- **22 of 33 consortia** have conducted at least one CT

RDCRN-associated Clinical Trials

- Predominantly **Phase 2/Phase 3**
- **At least 13 ongoing clinical trials**
- Funded by industry, IC-specific grants, FDA, patient advocacy groups...
- **Leveraging** patient populations, clinical endpoints, biomarkers, safety/efficacy data...
- *No NCATS \$\$ involved*

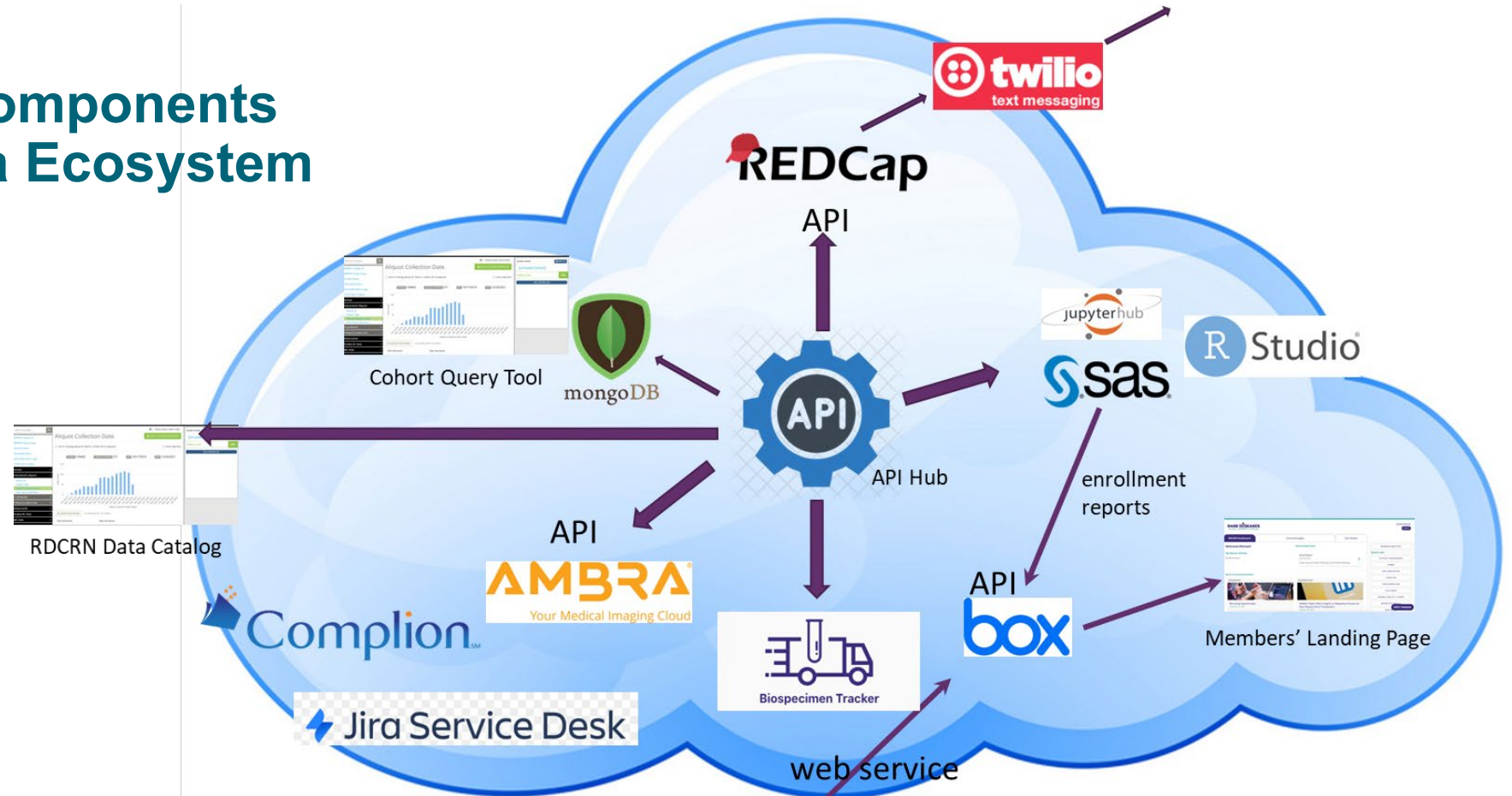
8 FDA-approved treatments for 9 rare diseases

Consortium	Drug	Other Name	Indication	Company	Approval Date
RLDC	RAPAMUNE®	sirolimus	lymphangi leiomyomatosis (LAM)	Pfizer	May 2015
UCDC	CARBAGLU®	carglumic acid	N-acetylglutamate synthetase (NAGS) deficiency	Orphan Europe	March 2010
VCRC	RITUXAN®	rituximab in combination with corticosteroids	Wegener's granulomatosis (WG) and microscopic polyangiitis (MPA)	Genentech and Biogen	April 2011
UCDC	RAVICTI®	glycerol phenylbutyrate	urea cycle disorders (UCD)	Hyperion Therapeutics	February 2013
PC	SCENESSE®	afamelanotide	erythropoietic protoporphyria (EPP)	Clinuvel	October 2019
PC	GIVLAARI®	givosiran	acute hepatic porphyria (AHP)	Alnylam Pharmaceuticals	November 2019
CEGIR	DUPIXENT®	dupilumab	eosinophilic esophagitis (EoE)	Regeneron	May 2022
RTT	DAYBUE™	trofinetide	Ret t syndrome	Acadia Pharmaceuticals	March 2023



Operational Environment

Turning Components into a Data Ecosystem



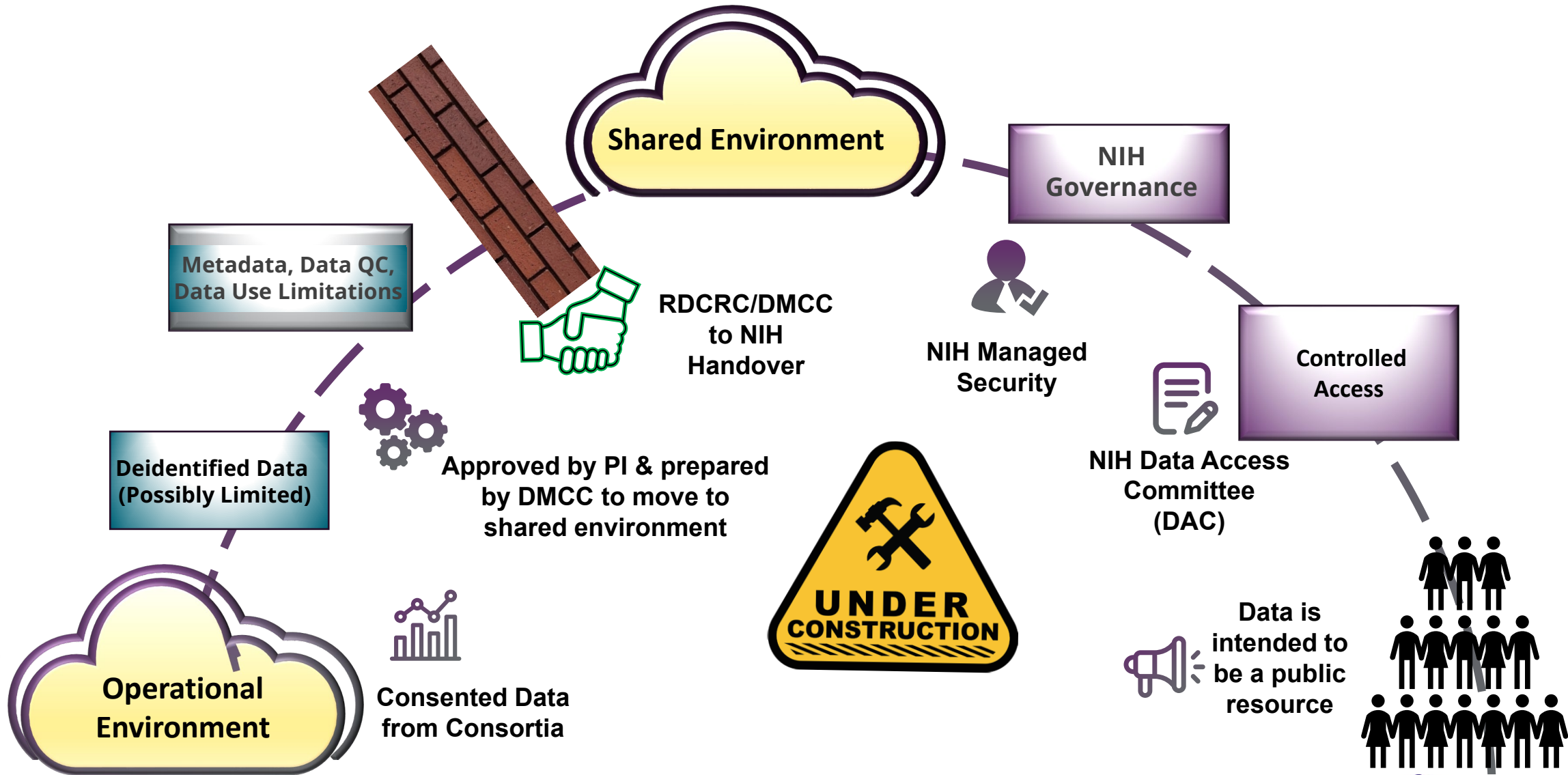
Audience: RDCRN researchers
Authentication: RDCRN login page
Authorization: Consortia
Data governance: Consortia and DMCC
Internal data sharing



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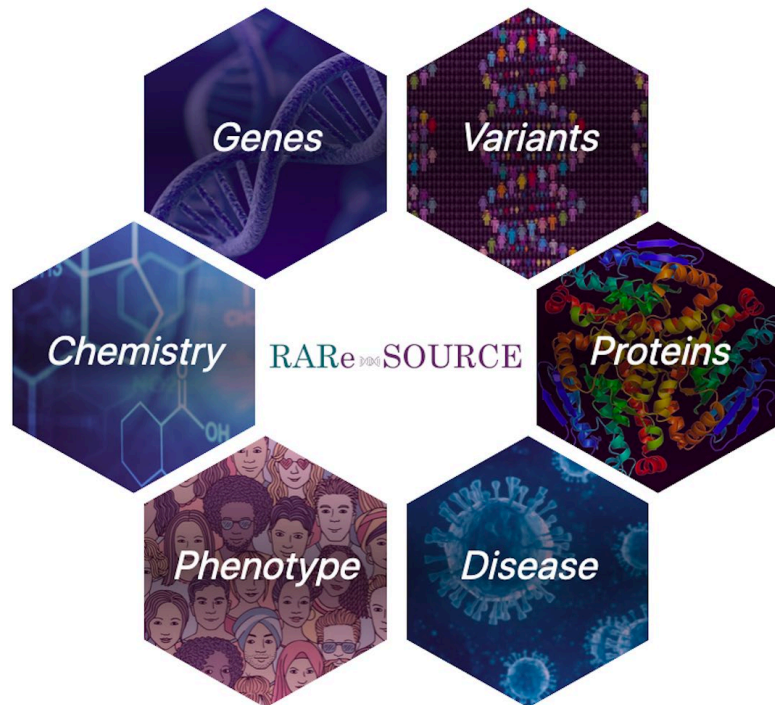
RDCRN Shared Data Environment



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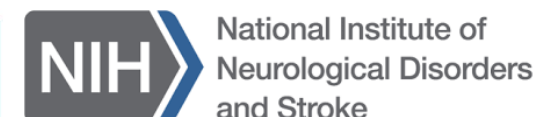
RARe-SOURCE

Unlocking novel insights into rare disease commonalities through multimodal data integration



Using a big data approach to understand how rare diseases can be grouped to be treated by the same drug

Collaborative Effort



Shortening the Diagnostic Odyssey

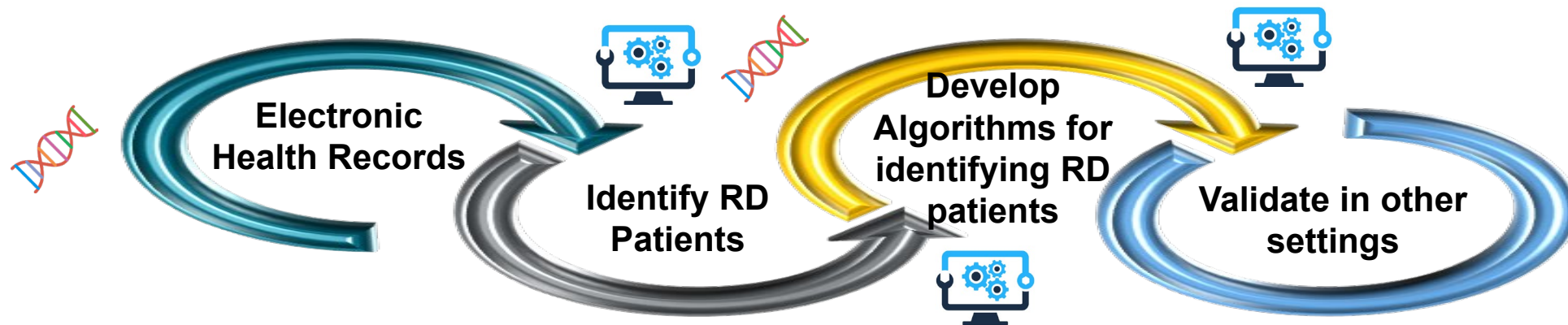
For more information, contact [Alice Chen Grady, M.D.](#) 

Multidisciplinary Machine-Assisted, Genomic Analysis and Clinical Approaches to Shortening the Rare Diseases Diagnostic Odyssey (UG3/UH3 Clinical Trial Optional)

Principal Investigator(s)	Year Awarded	Institution	Title
Gelb, Bruce D.; Chen, Rong; Balwani, Manisha	2022	Icahn School of Medicine at Mount Sinai	Using Electronic Medical Record Data to Shorten Diagnostic Odysseys for Rare Genetic Disorders in Children and Adults in Two New York City Health Care Settings
Gropman, Andrea Lynne; Berger, Seth I.; Vilain, Eric J.	2022	Children's Research Institute	Machine-Assisted Interdisciplinary Approach for Early Clinical Evaluation of Neurodevelopmental Disorders
Lalani, Seema R.; Lee, Brendan	2022	Baylor College of Medicine	Virtual Platforms for Genetics Evaluation in the Medically Underserved

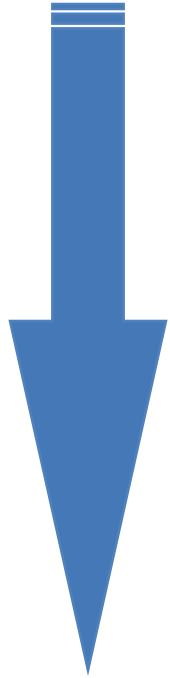


<https://ncats.nih.gov/programs/diagnostic-odyssey>



Developing and Streamlining Delivery Approaches

Development



Clinical Trials

- 1) Somatic Cell Gene Editing – (SCGE)
 - 1) NIH Common Fund Program
 - 2) Moving to clinical studies for second phase
 - 3) Toolkit – data on performance of delivery technologies

- 2) Accelerated Medicines Program[®] – Bespoke Gene Therapy Consortium (BGTC)
 - 1) Enhancing vector manufacturing
 - 2) Enhancing gene expression
 - 3) Regulatory playbook

- 3) Platform Vector Gene Therapy – (PaVe-GT)
 - 1) Single AAV vector as a platform for multiple therapeutic genes
 - 2) Testing ability to increase efficiency to clinical trial start-up



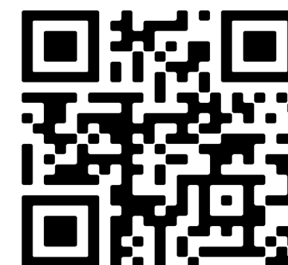
TARGETED GENOME EDITOR DELIVERY CHALLENGE



NIH will award up to \$6M USD in prize money and provide independent testing for the most promising delivery vehicles in two Target Areas:

- **Programmable Target Area:** highly efficient programmable delivery system delivering genome editing machinery which targets at least 3 distinct cells, tissues or organs and be at least as efficient as the current state of the art
- **Crossing BBB Target Area:** highly efficient nonviral delivery system capable of crossing the BBB to deliver genome editing machinery to a majority of target cell types in the central nervous system

Award: Top competitors could win up to \$1M in prize money and have solution independently tested and validated



3 Phase 1 Deadline

5 October 2023

<https://qrco.de/bdveZP>

Accelerating Medicines Partnership® Bespoke Gene Therapy Consortium (BGTC)



Program Website

<https://fnih.org/BGTC>

Highlights and progress:

- Basic AAV Biology awardees selected
- List of disease candidates for clinical trial component down to 14; Final selection by May 2023
- Manufacturing subteam met with FDA CBER to discuss minimal set of critical quality attributes for clinical AAV vectors
- BGTC session at American Society of Gene and Cell Therapy meeting (May 2023)



Program Management:

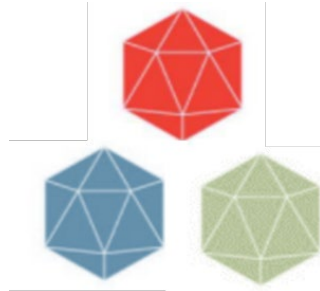
Juan Esparza-Trujillo (FNIH)
Brad Garrison (FNIH)
Courtney Silverthorn, PhD (FNIH)

Steering Committee Co-Chairs:

PJ Brooks, PhD (NCATS/NIH)
Tim Miller, MD (Thermo Fisher)
Peter Marks, MD, PhD (CBER/FDA)

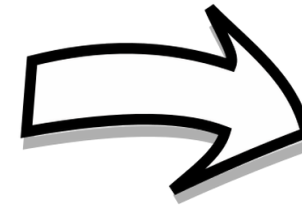
AMP[®] Bespoke Gene Therapy Consortium Components

1 AAV BASIC BIOLOGY TRANSLATIONAL IMPLICATIONS

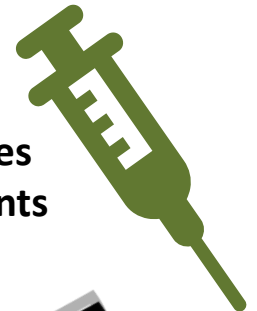


Eight research proposals selected for funding

Goal: Increase efficiency by orders of magnitude.



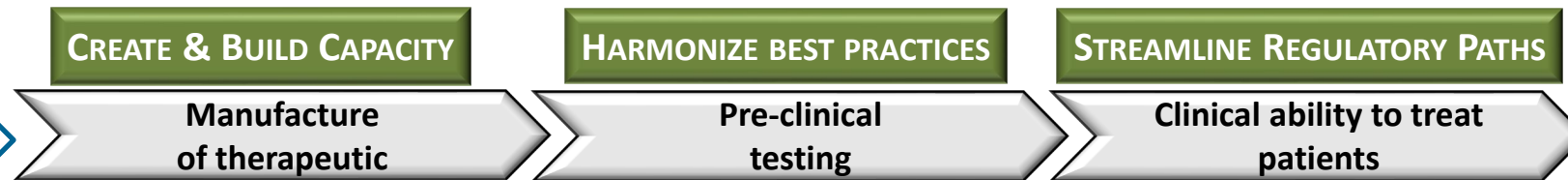
Therapies for patients



2 ADVANCING ACCESS TO AAV TECHNOLOGIES AND VECTORS FOR BESPOKE CLINICAL APPLICATIONS



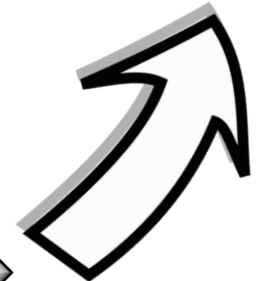
Gene therapy target for rare disease (62 initial submissions)



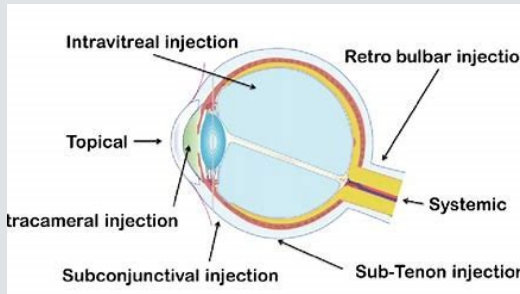
CQAs (FDA MEETING HELD 9/29/22)

GLP/Tox (FDA MEETING JUNE 2023)

Goal: Standardized, faster, reduced \$



Clinical portfolio announced May 16, 2023



Ocular

**Congenital Hereditary
Endothelial Dystrophy (CHED)**

Retinal Degeneration (NPHP5)

**Retinitis pigmentosa 45
(CNGB1)**

Neurological

Multiple Sulfatase Deficiency

**Charcot Marie Tooth disease
type 4J**

Spastic Paraplegia type 50

Systemic

Propionic Acidemia

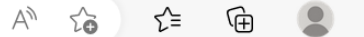
**Morquio A syndrome
(Mucopolysaccharidosis IVA)**

Platform Vector-Gene Therapy (PaVe-GT) Milestones

Orphan Drug and Rare Pediatric Disease Designation Templates



https://pave-gt.ncats.nih.gov/publications/



This page lists project-relevant scientific publications authored by the PaVe-GT project team.






2023

Human Gene Therapy > Vol. 34, No. 5-6 > Clinical Developments

Open Access



Successfully Navigating Food and Drug Administration Orphan Drug and Rare Pediatric Disease Designations for AAV9-hPCCA Gene Therapy: The National Institutes of Health Platform Vector Gene Therapy Experience

Richa Madan Lomash , Oleg Shchelochkov, Randy J. Chandler, NIH PaVe-GT Team[†], Charles P. Venditti , Anne R. Pariser , Elizabeth A. Ottinger , Averion Gilberto V., Balakrishnan Krishna, Bönnemann Carsten G., Brooks Philip J., Burden Steven J., Campbell Eggerton, Chen Catherine, Choi Eun-Young, Driscoll Claire, Dukhanina Oksana, Ferry Susan, Foley A. Reghan, Hauserman Janelle Geist, Li Lina, Lo Donald C., Mangalampalli Venkata, Manoli Irini, Mendoza Christopher, Oury Julien, Porter Forbes D., Portero Deanna, Portilla Lili, Rooney Jachinta, Saade Dimah, Sloan Jennifer L., Tambe Mitali, Terse Pramod, Todd Joshua, Toney London, Van Ryzin Carol, Stan Rodica, Vepa Sury, Wagner Erik, Wang Amy, Xu Xin, Zou Yaqun [See fewer authors](#) 

Published Online: 20 Mar 2023 | <https://doi.org/10.1089/hum.2022.232>

<https://www.iebpub.com/doi/10.1089/hum.2022.232>

SUBSCRIBE

Sign-up for PaVe-GT updates.

Subscribe 

PAVE-GT RESOURCES

Rare Pediatric Disease (RPD) Designation Request for AAV9-hPCCA

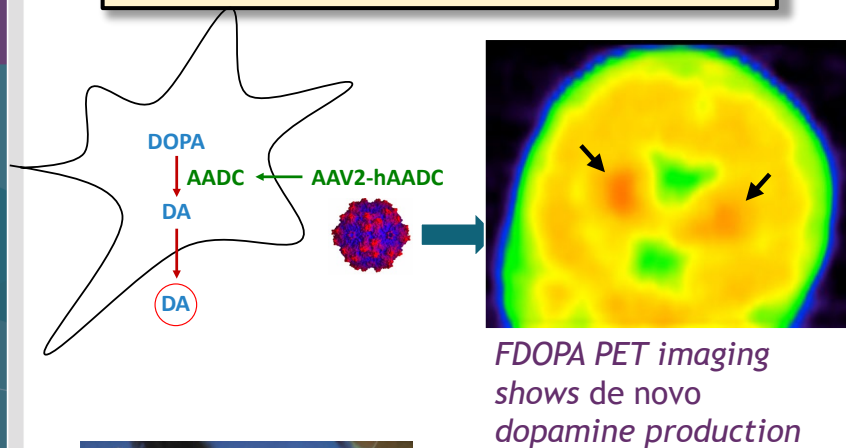
This pdf file contains the RPD designation request for AAV9-hPCCA (NCATSBL-0746) and associated communications between NCATS and FDA OOPD.



<https://pave-gt.ncats.nih.gov/outputs>

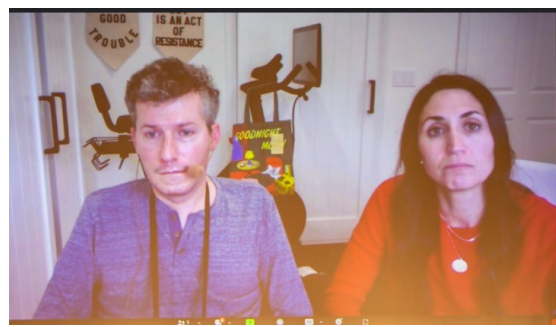
Gene therapy approval from TRND/Therapeutic Development Branch collaboration

Upstaza™
eladocagene exuparvovec



- *First disease-modifying treatment for aromatic L-amino acid decarboxylase (AADC) deficiency*
- *Global prevalence of 4,000 to 6,000 patients; life expectancy of 4-8 years*
- *First marketed gene therapy directly infused into the brain*
- Therapeutics for Rare and Neglected Diseases (TRND) program collaboration with Agilis Therapeutics and National Taiwan University begins in 2016
- NCATS develops GMP-grade manufacturing process and completes GLP safety evaluations
- Clear patient benefit in clinical studies (>5 years)
- FDA allows direct BLA filing after Phase II
- Agilis acquired by PTC Therapeutics in 2018
- **PTC granted European Commission approval in July 2022 for patients 18 months and older**





RARE DISEASE DAY at NIH

Feb. 28, 2023 | #RDDNIH

Natcher Conference Center • Bethesda, MD



Abbey Hauser



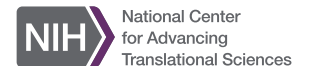
- Comments from Congressional Rare Disease Caucus chairs and NIH Acting Director
- NCATS resources and programs
- NIH Children’s Inn
- Needs of adolescent/young-adult rare disease patients; transitioning pediatric–adult health care
- Genetics, gene-targeted therapies, and diversity, equity, and inclusion
- Role of patient and patient advocates in research and rare disease therapeutics development and collaborations with industry
- Storybook ending

Stay Tuned for RDD@NIH Feb. 2024



NIH lit up Building 38A in Rare Disease Day colors.

PHOTO: NCATS



CTSA Program: Premier National Network Speeds Health Solutions

#CTSAProgram



Develop, demonstrate, and disseminate innovations that turn science into health faster



Promote impactful partnerships and collaborations



Address health disparities



Provide a national resource for the rapid response to urgent public health needs

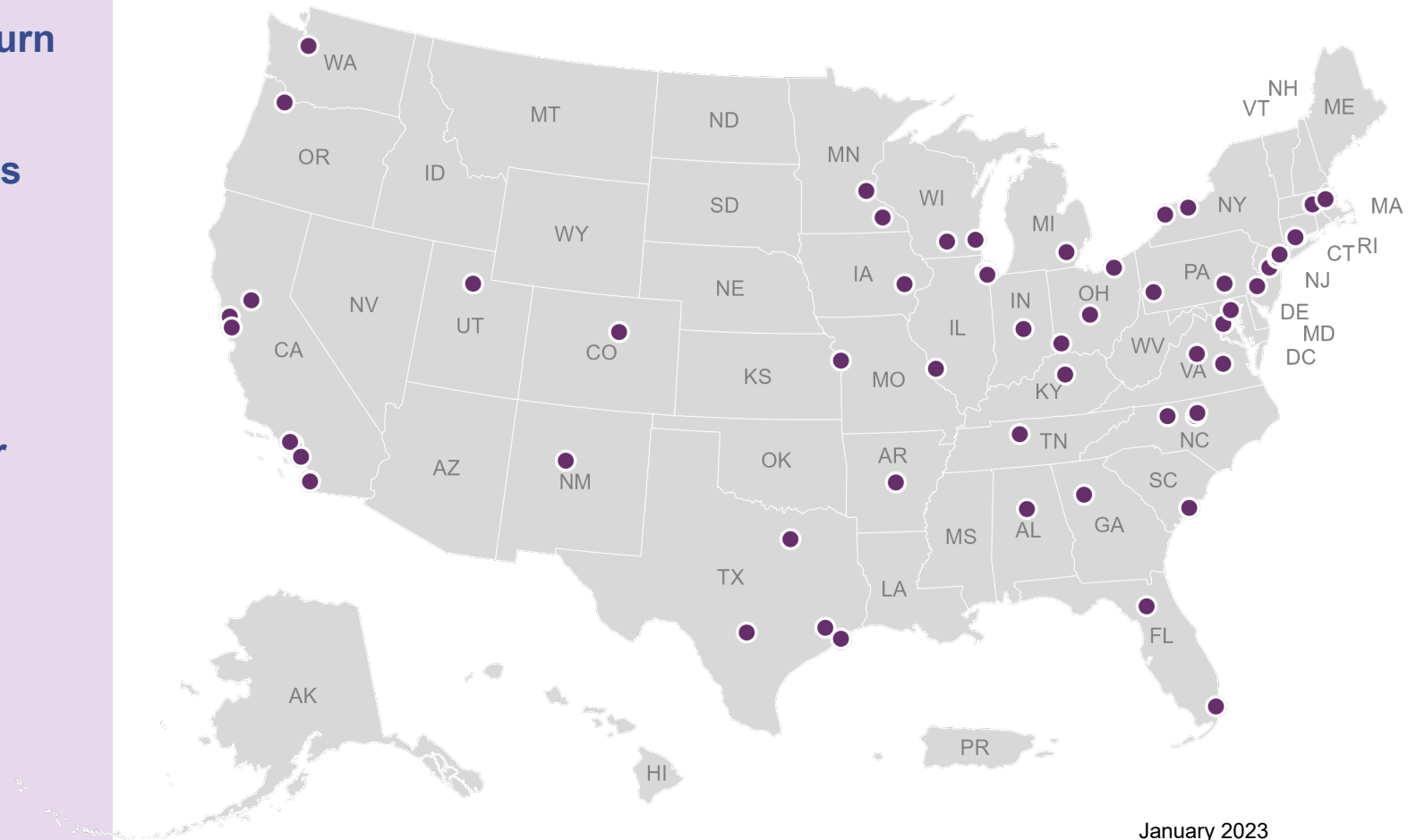


Promote training and career support



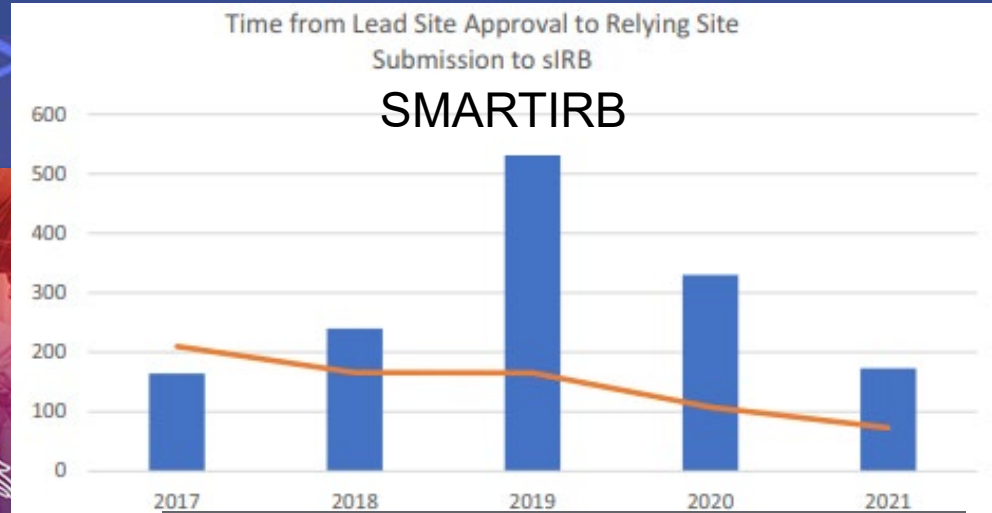
Nurture the field of translational science

Clinical and Translational Science Awards Primary Institutions



January 2023

...Local strengths enable nimble, rapid, and robust responses to national public health challenges



Support Pediatric Research Outcomes Utilization Telehealth and Virtual Care Challenges (pre-COVID)

- Variation in services provided via telehealth and virtual care
- Lack of adequate research and reliable, generalizable data to support practices, reimbursement, and provider adoption
- Different focus for different stakeholders: clinicians, payers, patient urgent cares, primary care



Last updated: 03-23-2022

NCATS Funds Network to Improve the Use of Telehealth in Children's Health Care

Home > News > Researchers Shed Light on a Rare Genetic Disease in Children

Researchers Shed Light on a Rare Genetic Disease in Children

Findings could lead to better treatments for primary ciliary dyskinesia

partners to better

19 clinical questions.



Mobile health vehicles offer health resources, vaccine education and outreach opportunities through the Our Community, Our Health programs.

trial to test immune modulators for treatment of COVID-19

COVID-19 can trigger an immune response that causes inflammation that can lead to life-threatening conditions. ACTIV-1 will determine if regulating the immune response with immune modulators can reduce the need for ventilators and shorten hospital stays.

Pediatric Reach of the CTSA Program at Active Hubs in FY22

53

With an associated children's hospital

13

Have a PI or MPI that are pediatricians

10

Have children's hospitals as a partner

Pediatrics at CTSA Hubs – KL2 Scholars and TL1 Trainees in FY22

6%

Board certified in pediatrics

3%

Pediatric training but not pediatric board certified*



Pediatrica Therapeutics – UAMS TRI Trainee Startup

Addressing problem of infants born physically dependent on opioids due to maternal opioid use disorder, through development of a novel drug based on a proprietary technology which has shown promise to protect fetal development against neonatal opioid withdrawal syndrome.



[Publication](#)

- Every 15 min a newborn suffers from opioid withdrawal.
- Improving an already FDA-approved drug by “tweaking” its pharmacology to produce less fetal/neonatal opioid exposure.
- Neonatal opioid withdrawal syndrome costs \$2.5B yearly.



Pediatrica
— T H E R A P E U T I C S —



Julia Tobacyk, PhD, CSO

Hayot Tychiev, CMO

Veronica Garcia, COO

Megan Reed, PhD, CEO



National Center
for Advancing
Translational Sciences

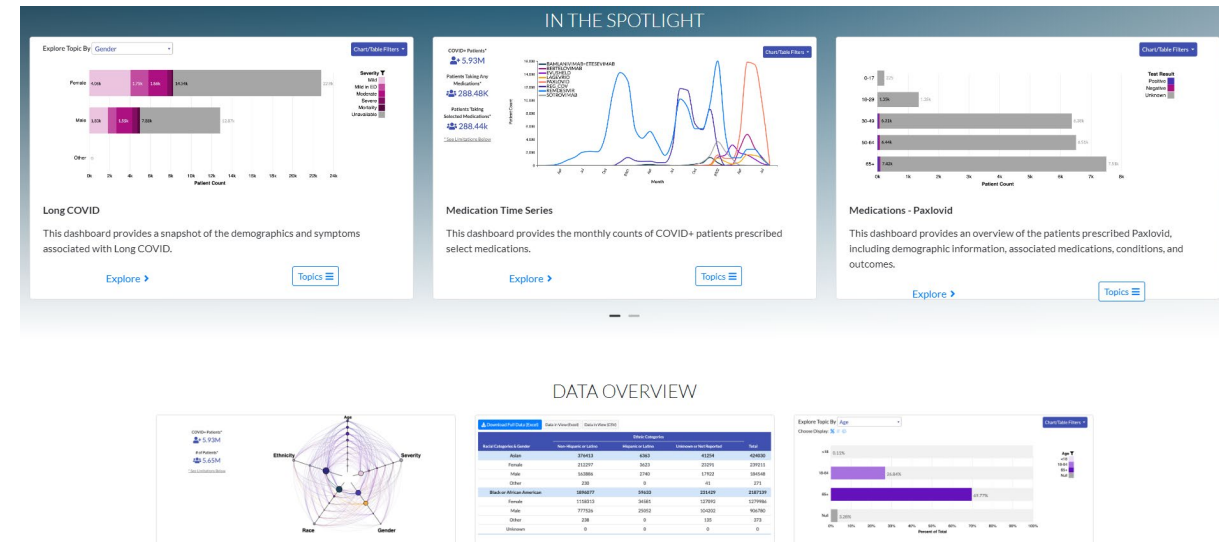
Towards a National Health Data Ecosystem: National COVID Cohort Collaborative (N3C)

The N3C data enclave is the largest collection of real-world COVID-19 data in the United States

- **Sites:** 80
- **Persons:** Over 20 million
- **COVID+:** Over 7.9 million
- **Rows of data:** 27.1 billion
- **Clinical observations:** 2.5 billion
- **Publications and preprints:** Over 117
- **Google citations:** Over 1,000
- **Informs public health questions**
 - Long-COVID risk
 - mAB effectiveness across variants
 - Paxlovid use

<https://covid.cd2h.org/dashboard/>

NCATS N3C Dashboard



EHRs * CMS * Vaccine Data * Viral Variant Seq
Updated every 2 weeks



NIH National Center for Advancing Translational Sciences

The National COVID Cohort Collaborative (N3C): EHRs and RWD

N3C is being used to study COVID-19, identify potential treatments, and validate existing therapies

The Pregnancy Clinical Domain Team aims to leverage N3C data to gain insights into pressing COVID-19 questions around pregnancy.

These include understanding the incidence, timing, and severity of COVID-19 in pregnant women and the associated maternal and infant outcomes.

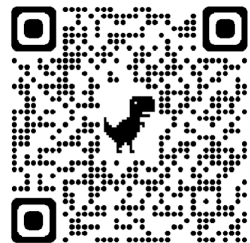
Risk for stillbirth among pregnant individuals with SARS-CoV-2 infection varied by gestational age

Tianchu Lyu¹, Chen Liang², Jihong Liu³, Peiyin Hung¹, Jijia Zhang³, Berry Campbell⁴, Nadia Ghumman¹, Bankole Olatosi¹, Neseet Hikmet⁵, Manting Zhang⁶, Honggang Yi⁶, Xiaoming Li⁷; of the National COVID Cohort Collaborative Consortium

Collaborators, Affiliations + expand

PMID: 36858096 PMCID: PMC970919 DOI: 10.1016/j.ajog.2023.02.022

[Free PMC article](#)



Temporal Events Detector for Pregnancy Care (TED-PC): A rule-based algorithm to infer gestational age and delivery date from electronic health records of pregnant women with and without COVID-19

Tianchu Lyu¹, Chen Liang¹, Jihong Liu², Berry Campbell³, Peiyin Hung¹, Yi-Wen Shih¹, Nadia Ghumman¹, Xiaoming Li⁴; National COVID Cohort Collaborative Consortium

Affiliations + expand

PMID: 36315520 PMCID: PMC9621451 DOI: 10.1371/journal.pone.0276923



Characteristics, Outcomes, and Severity Risk Factors Associated With SARS-CoV-2 Infection Among Children in the US National COVID Cohort Collaborative

Blake Martin¹, Peter E DeWitt², Seth Russell², Adit Anand³, Katie R Bradwell⁴, Carolyn Bremer³, Davera Gabriel⁵, Andrew T Girvin⁴, Janos G Hajagos³, Julie A McMurry^{6,7}, Andrew J Neumann^{6,7}, Emily R Pfaff⁸, Anita Walden⁷, Jacob T Wooldridge³, Yun Jae Yoo³, Joel Saltz³, Ken R Gersing⁹, Christopher G Chute^{5,10}, Melissa A Haendel⁷, Richard Moffitt³, Tellen D Bennett^{1,2}

Affiliations + expand

PMID: 35133437 PMCID: PMC8826172 DOI: 10.1001/jamanetworkopen.2021.43151

[Free PMC article](#)



Multilevel determinants of racial/ethnic disparities in severe maternal morbidity and mortality in the context of the COVID-19 pandemic in the USA: protocol for a concurrent triangulation, mixed-methods study

Jihong Liu¹, Peiyin Hung², Chen Liang², Jijia Zhang³, Shan Qiao⁴, Berry A Campbell^{2,5}, Bankole Olatosi², Myriam E Torres³, Neseet Hikmet⁶, Xiaoming Li⁴

Affiliations + expand

PMID: 35688597 PMCID: PMC9189547 DOI: 10.1136/bmjopen-2022-062294

[Free PMC article](#)



Implementation of Whole Genome Sequencing (WGS) as Screening in a Diverse Cohort of Healthy Infants

- First RCT to explore the impact of WGS in ethnically and racially diverse population of healthy infants
- Develop, implement, and evaluate a sustainable approach to Genome Sequencing (GS) as screening that leverages underserved community
- To generate much-needed evidence of the value of GS in infants
- Addresses central questions that need to be answered before GS becomes routine in pediatric care



U01TR003201 (PI: Green) *with co-funding from NICHD; Collaboration with Brigham and Women's Hospital (Harvard Medical School hub), Boston Children's Hospital, Icahn School of Medicine at Mount Sinai, University of Alabama at Birmingham, Baylor College of Medicine, and The Broad Institute, Inc.



13 Years to 13 Hours

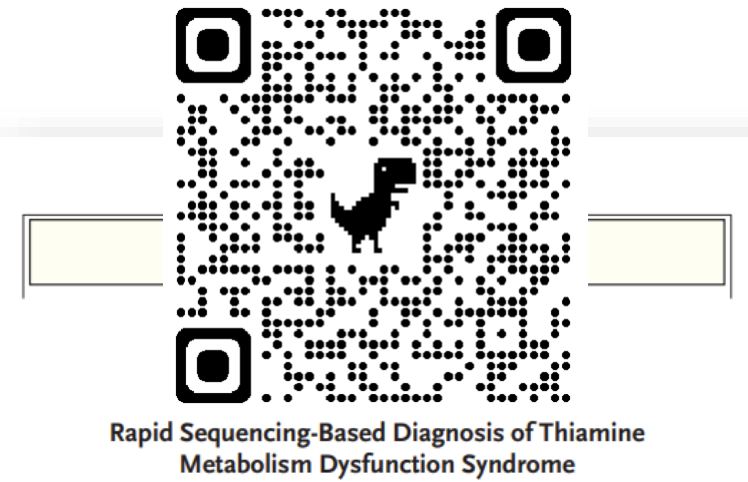
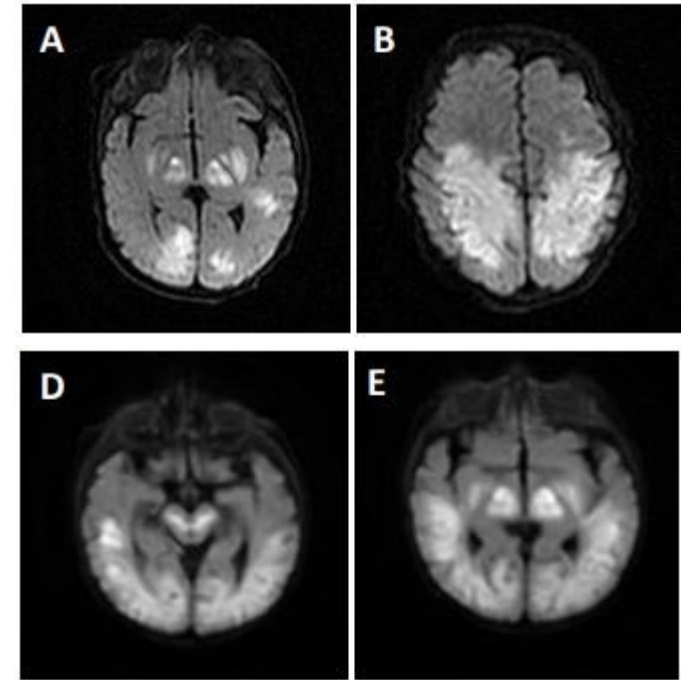
“A 5-week-old, previously healthy male infant was admitted after 2 hours of inconsolable, atypical crying and irritability. Examination revealed downward eye deviation when he cried. Computed tomography of the head showed multiple large, bilateral hypodensities.”

“Infantile encephalopathy is associated with approximately 1500 genetic diseases, many of which are clinically indistinguishable but have unique, effective treatments.”

“... 13 hours after we initiated sequencing,

“The results led to a clinical diagnosis of *thiamine metabolism dysfunction syndrome 2 (THMD2)*”

“Thiamine and biotin administration was started 37.5 hours after admission... Six hours later, the patient was alert, calm, and bottle feeding.”



NCATS Strategic Planning Process 2024-2029: Stakeholder Engagement



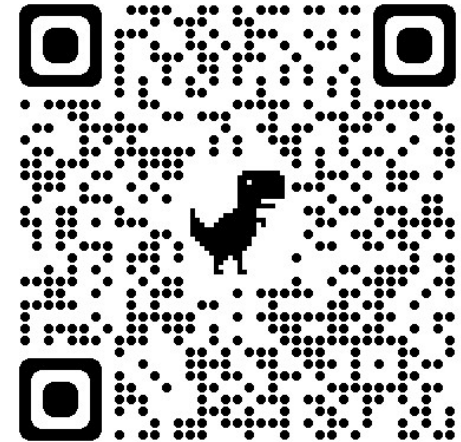
- Overview of NCATS, Translational Science principles, audacious goals
- Icebreaker questions



- Discussion guided by questions to get different groups' perspectives



- Focused questions to gain additional insight from individuals and/or groups





Thank You!

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