

Data Science Opportunities for the NCI

Interim Recommendations

National Cancer Advisory Board
Ad hoc Working Group on Data Science

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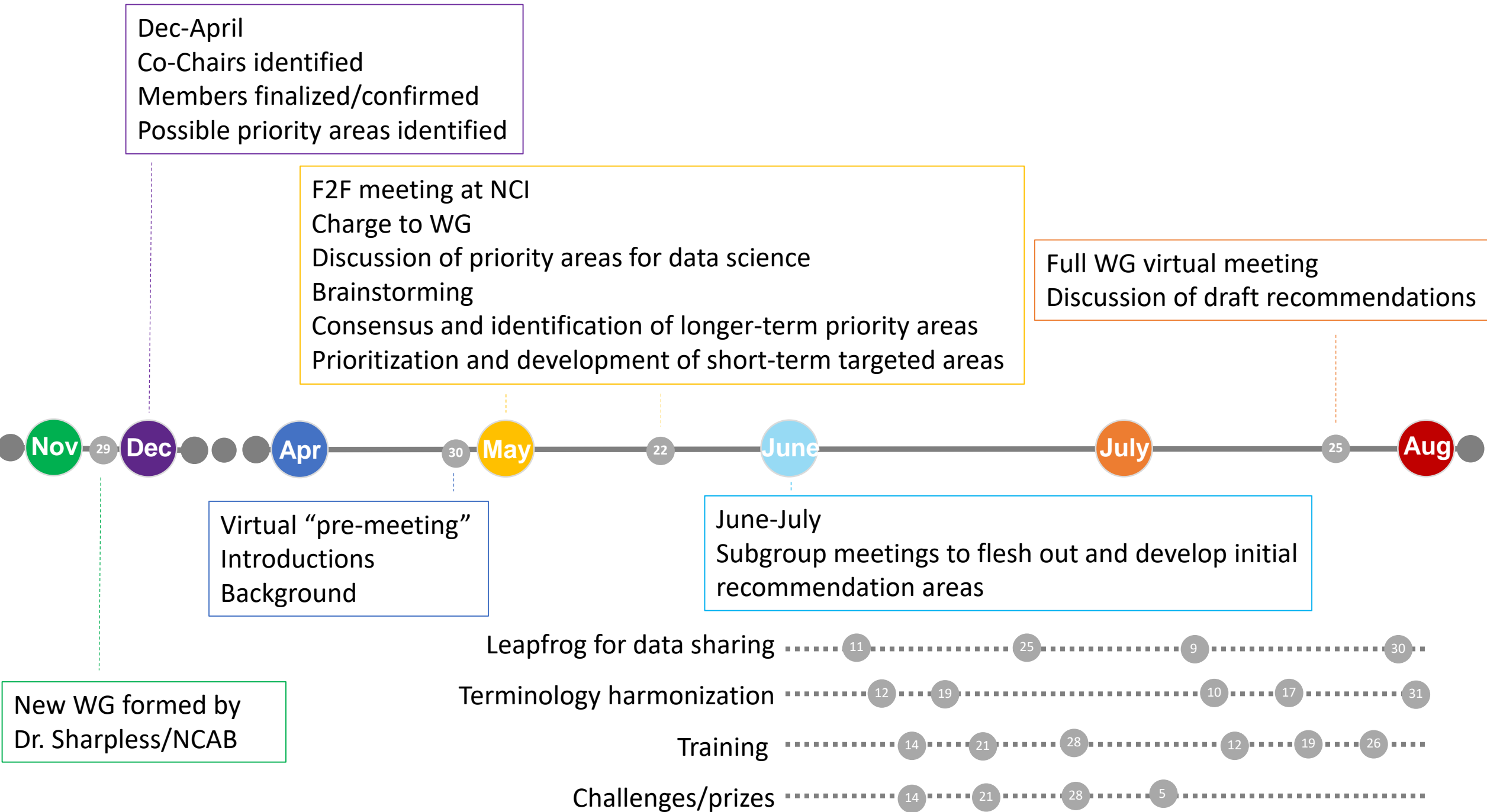
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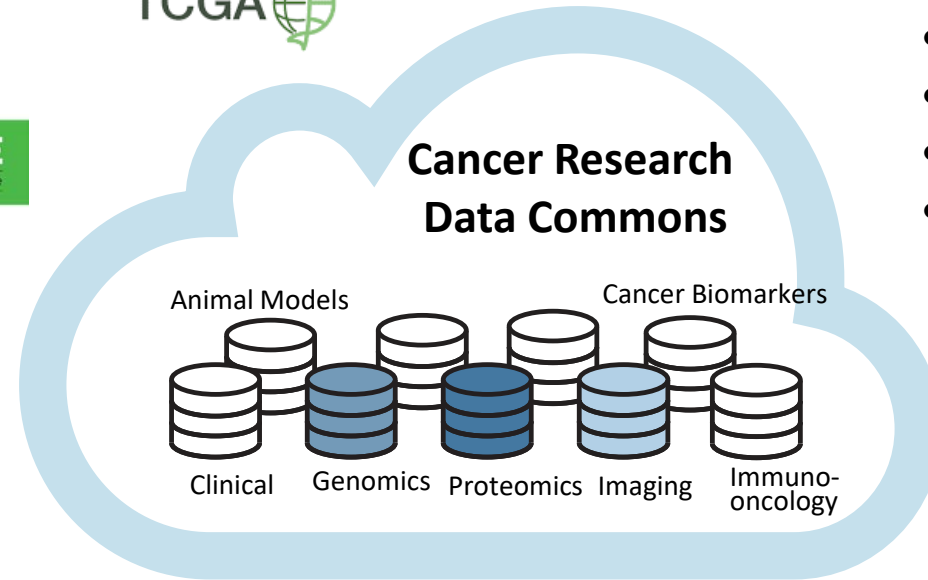
Initial Recommendation Areas

1. Investments to leapfrog data sharing for high-value datasets
2. Harmonization of terminology between cancer research data and clinical care data
3. Support of data science training at the graduate level
4. Opportunities for funding challenges and prizes

Recommendation 1: Investments to leapfrog data sharing for high-value datasets

- Resources to support

- Identification
- Enrichment
- Curation
- Harmonization
- Annotation
- Publishing



Subgroup members:

- John Carpten
- Warren Kibbe
- Mia Levy
- Vince Miller
- Charles Sawyers
- Nick Wagle

- Examples of high-value datasets

- Those fully collected and annotated but not yet shared in a public repository
- Datasets that would be enhanced by additional data generation and/or collection (e.g., genomic datasets needing additional clinical annotation)

Recommendation 2: Harmonize terminologies between cancer research and clinical care

- Augment EHR data standards to further bridge clinical care and cancer research
- Fund research related to achieving near clinical trial grade data within traditional clinical care settings
- Identify and prioritize existing standards bodies and activities



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Subgroup members:

- George Hripcsak
- Mimi Huizinga
- Warren Kibbe
- Michelle Le Beau

Benefits of harmonized terminologies

- Increase the utility and ease of incorporation/integration of clinical care data from EHRs into cancer research
- Enable more efficient research, better patient care, and better real-world evidence generation
- Enhance integration of the cancer and non-cancer research communities



NATIONAL CANCER INSTITUTE TYPES OF CANCER RESEARCH

CANCER RESEARCH INCLUDES FOUR BROAD CATEGORIES

Basic research seeks to understand the fundamental aspects of nature. It provides the foundation for advances against cancer.



Clinical research tests drugs, medical devices, or other interventions in human volunteers to improve all aspects of patient care.



Population-based research explores the causes of cancer, cancer trends, and factors that affect the delivery and outcomes of cancer care in specific populations.

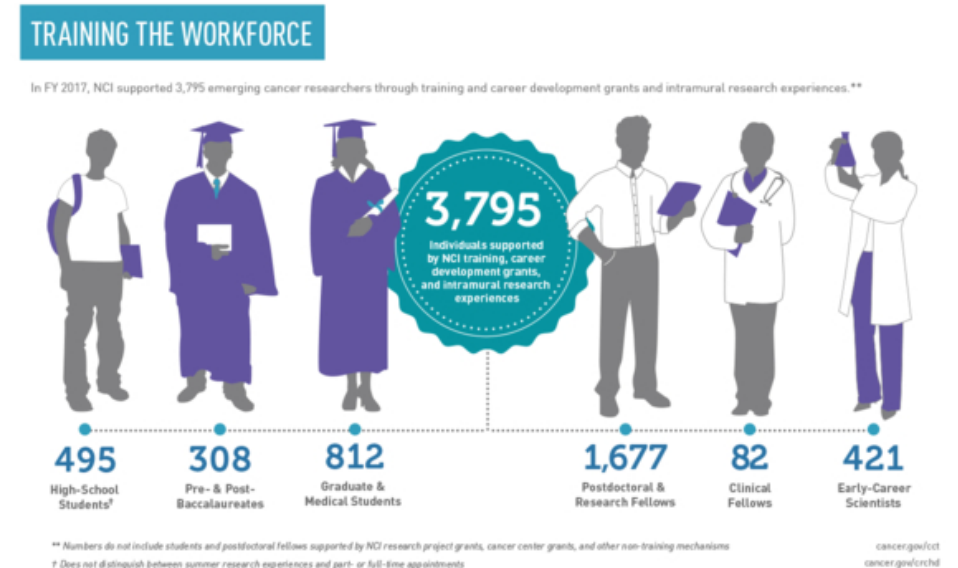


Translational research moves basic research findings into the clinic and clinical research findings into everyday care. In turn, results from clinical and population-based studies can guide basic research.



Recommendation 3: Increase the number of training programs and trainees in cancer data science

- Dedicate a specific T32 training program in cancer data science
- Contribute to existing NIH training programs
 - NLM T15 training programs
 - NIGMS Medical Scientist Training program
- Develop a short-term training program for clinicians and biological scientists



Subgroup members:

- Regina Barzilay
- Amanda Haddock
- Rebecca Jacobson
- Anne-Marie Meyer
- Sylvia Plevritis
- Kim Sabelko

Recommendation 4: Sponsor a series of data science challenges

- Potential challenge topics (~4-8 per year)
 - Drug response prediction
 - Discovery of multi-omic prognostic biomarkers
 - De-convolution of heterogenous tumors
 - Cancer diagnosis, grading, and staging
 - Facility of data access and integration from the ethical, legal, and social implications standpoint
- Consider beginning with an “idea challenge” to identify the appropriate challenge topic/task/question

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- Lincoln Stein



Benefits of data science challenges

- Spur research in computational cancer biology and increase the availability of advanced analytic software to the broader research community
- Attract new talent to cancer research
- Validation and dissemination of state-of-the-art tools and technologies
- Demonstrates the inter-relationship between all the recommendations. Challenges require:
 - Openly shared datasets
 - Ability to work across harmonized datasets
 - Participants with appropriate skillsets and expertise