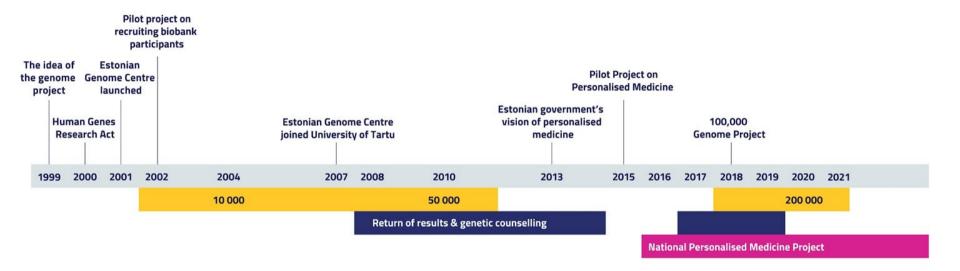


#### Will genomics help to support the long-expected shift towards prevention?

#### Lili Milani Head of Estonian Genome Centre Vice Director, Institute of Genomics, University of Tartu



**Biobank participants** 

202 282 biobank participants

- Health records, diet, physical activity, etc.
- DNA, plasma and cell samples

Estonian adult population



#### 5000+ return of results (RoR)\*

\*RoR & genetic counselling

202 282 genotyped

3000 sequenced

- Estonian Human Genes Research Act
- Broad informed consent
- Open for research: Clear access rules

# Whole-genome sequencing + genotyping + genotype imputation (+ validation)

- 1. 3000 whole genomes and 2500 whole exomes sequenced
- 2. Genotyping of 700K markers (Global Screening Array, Illumina)
- 3. Imputation and long-range haplotyping
- 4. Rare mutations and polygenic risk scores for common diseases

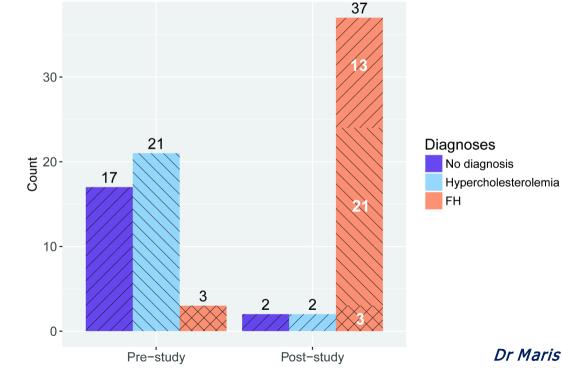


### Familial hypercholesterolemia Frequency >1:200 LDLR, APOB, PCSK9

### Familial breast cancer Frequency >1:200 BRCA1, BRCA2

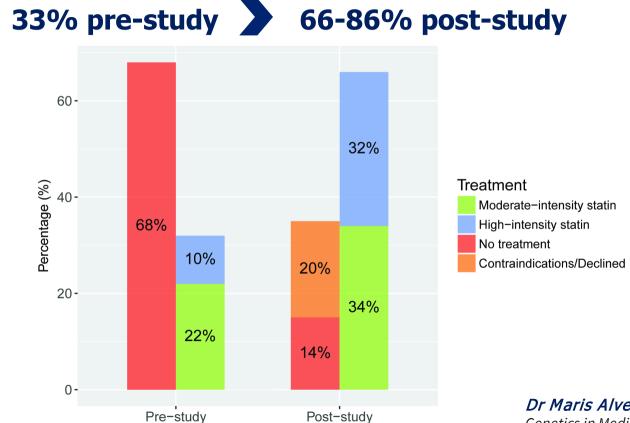


# Diagnosed?4776 genomes41 mut (LDLR, APOB, PCSK9)3 diagnosed



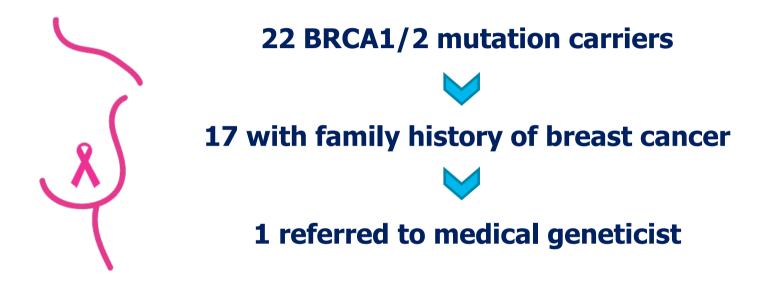
*Dr Maris Alver, Dr Tõnu Esko Genetics in Medicine* 2018

#### **Treatment?**



*Dr Maris Alver, Dr Tõnu Esko Genetics in Medicine* 2018

#### Familial breast cancer (1:200): Recall by genotype



#### (2 diagnosed with BrCa and 2 diagnosed with PrCa)

Dr Liis Leitsalu, Dr Neeme Tõnisson, Marili Palover

## **Conclusions of FH & BRCA studies**

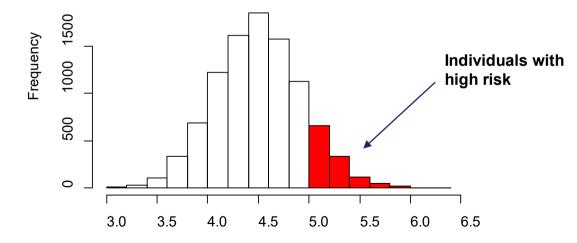
Unawareness of the familial background of the diseases Low pre-established treatment adherence Cardiologists & oncologists acknowledge the value of genetics-first approaches

## Common complex diseases & Polygenic risk scores

### Polygenic risk scores for common diseases

- Effect of each single variant is small
- Variants and effect sizes can be summed into **risk scores**

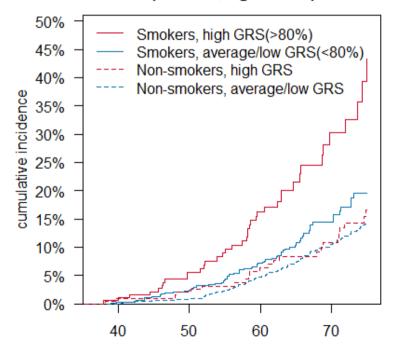
Distribution of polygenic risk score for Cardiovascular disease



Prof Krista Fischer, Kristi Läll

#### **Incident Myocardial Infarction:** analysis of 246 incident cases among men

#### MI incidence in men by GRS category (n=8345, age 30-75)



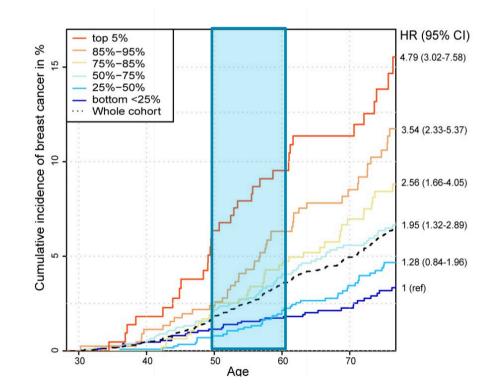
Time (age)

HR=2.2, p=7.6\*10<sup>-5</sup> (compared to lower GRS) 40 cases (n=204)

No significant GRS effect seen among non-smoking men

Dr Kristi Läll, Prof Krista Fischer

#### **PRS for breast cancer**



Dr Kristi Läll, Prof Krista Fischer BMC Cancer 2019

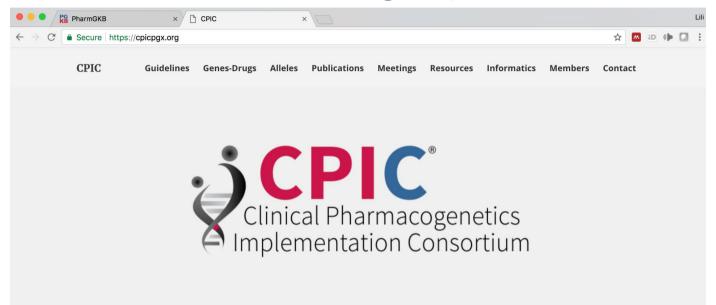
# Top 5% highest genetic risk score = 20% of cardiovascular deaths

Targeted disease prevention

11 | ESTONIAN GENOME CENTER

## **Pharmacogenetics**

#### >98% of individuals carry mutations that affect drug response



What is CPIC?

The <u>Clinical Pharmacogenetics Implementation Consortium (CPIC®)</u> is an international consortium of individual volunteers and a small dedicated staff who are interested in facilitating use of pharmacogenetic tests for patient care.

### **Pharmacogenetics report**

Geen	Genotüüp	Hinnang	Soovitus	Mõjutatud ravimi toimeained	
CYP2C19	*2/*2	Aeglane ravimi lagundamine	0	Estsitalopraam, Tsitalopraam, Klopidogrel, Sertraliin, Vorikonasool, Esomeprasool, Lansoprasool, Pantoprasool, Omeprasool, Klomipramiin Amitriptüliin	
CYP2C9	*1/*1	Tavapärane ravimi lagundamine	0	Fenütoiin	
CYP2C9; VKORC1	*1/*1; rs9923231 (AA)	Tavapärasest madalam doosisoovitus	•	Varfariin	
CYP3A5	*3/*3	Aeglane ravimi lagundamine, Tavapärane muster	0	Takroliimus	
DPYD	*1/*5	Tavapärane ravimi lagundamine	0	Kapetsitabiin, Fluorouratsiil	
IFNL3	rs12979860 (CC)	Tavapärane ravimi toime	0	Alfa-2b-peginterferoon, ribaviriin	
SLCO1B1	rs4149056 (TT)	Tavapärane müopaatia risk	0	Simvastatiin	
ТРМТ	*1S/*1	Tavapärane ravimi lagundamine	0	Tioguaniin, Merkaptopuriin, Asatiopriin	

🚱 - Tarvitada tavapäraselt. 🌔 - Tarvitada ettevaatusega, võib vajada doosi muutmist. 🕕 - Tarvitada väga ettevaatlikult, oht kõrvaltoimeteks.

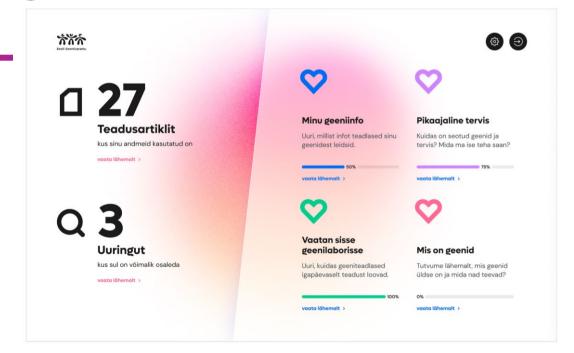
## Translation into digital prescription recommendations in the clinic

avim Meditsiiniseade			
Sr   Number   Kinnitatud   Annulleeritud   Annulleeritud     2077528207   19.07.2021   11:50   Image: Compare the second s	PATSIENT Koostamise kuupäev: 19.07.2021 v Eesnimi: Perekonni Isikukood Ravilugu nr: 40 🛊		
oodustus 50% 75% 90% 100% taishind Kindlustatuse staatus EV kindlustatu EL kindlustatu töövõimetus muu töövõimetus puudub kindlustamata	Volitusliik Retsepti liik orivaatne volitatud Kehtivus päevades: 180 1 2 3 Diagnoos: 111.9 Südamekahjustusega		
Ravimpreparaat ATC: C09BX01 Perindoprilum+Amlodipinum+Indapami dum Nimetus: Ravimvorm: tablett tulk pakendis: 30TK	Toimeaine + Ravimpreparaat + Ravimsegu   Toimeaine nimetus Kontsentratsioon   > Sertrallin 12.5mg		
itte asendada, 🗸 🗸 🗸	Väljakirjutatud ühikute koguarv 60 TK Orig. arv 2		
Annustamine detailselt Ühekordne annus: 1 tablett v Annustuskordi ajaühikus: 1 x pāevas v Ravikuuri tūūp: Pidev v Kestvus pāevades:	Lisainfo/selgitus: Müügiloa taotlus Tüüpil hommikul		
Sini koostatud retsepte Sini Retseptikeskuse retsepte	me Kinnita retseot Soodustus Ravimileht 🖨 Prindi Ra	Europa Liit Eesti Europa Regionaalarengu Fond	

Marko Arrak, Dr Sulev

R

### **Coming soon: Estonian biobank portal**







#### estonian genome center

Andres Metspalu, Tõnu Esko, Krista Fischer, Reedik Mägi, Maris Alver, Kristi Krebs, Kristi Läll, Mart Kals, Tom Haller, Liis Leitsalu, Neeme Tõnisson, Marili Palover, Maarja Lepamets, Anu Reigo, Kelli Lehto, Tuuli Jürgenson, Helene Alavere, Ene Mölder, Kristjan Metsalu, Kairit Mikkel, Mari-Liis Tammesoo, Steven Smit, and many more.





ACC Softw. Applica

Software Technology and Applications Competence Center Regionaalhaigla *A.D.* 180<sup>A</sup> *B.D.* 180<sup>A</sup> *B.D.* 180<sup>A</sup> *B.D.* 180<sup>A</sup> *B.D.* 180<sup>A</sup> *B.D.* 180<sup>A</sup> *B.D.* 180<sup>A</sup>

Prof. Jaak Vilo, Hedi Peterson, Sulev Reisberg, Sven Laur, Dage Särg, jt.





REPUBLIC OF ESTONIA MINISTRY OF SOCIAL AFFAIRS

Kalle Killar, Anneli Laansoo, Silja Elunurm, Raili Sillart, jt.



Prof Toomas Veidebaum, Annika Veimer, Piret Kuhlbars, Pille Kink, Helen Lepa, jt.

