

# Towards Precision Medicine: Translational Diagnostics, Feasibility Research and OME

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5-June-2014

Karl Garsha

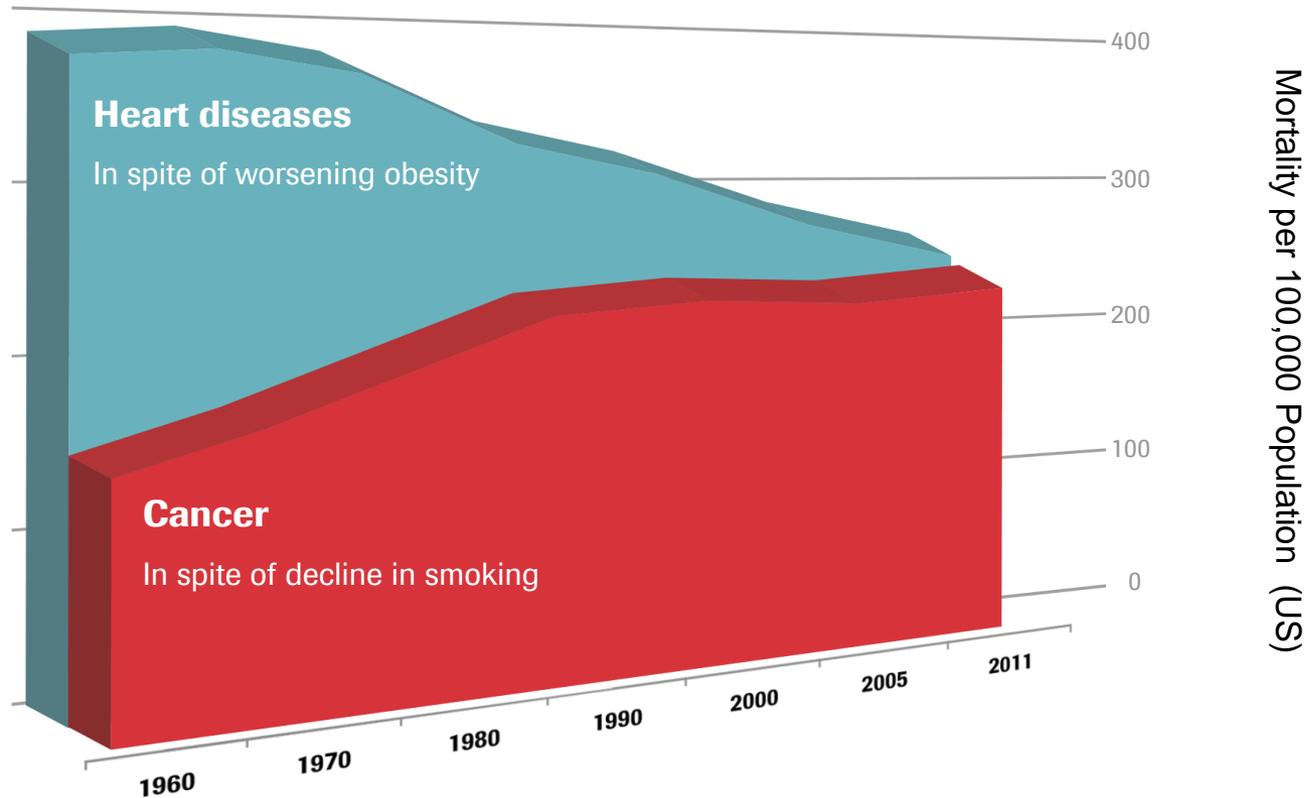
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# Cancer death rates remain stubbornly high



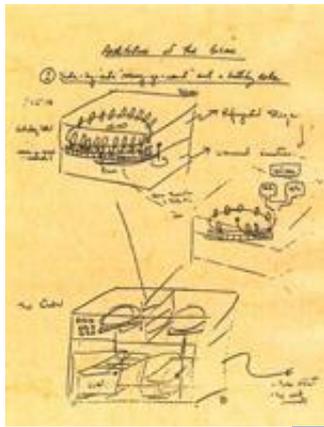
# To Improve the Lives of all Patients afflicted with Cancer

“ *Change the practice of medicine by inventing tools that didn't exist before, rather than building a better microscope.* ”

—Tom Grogan, MD  
Ventana Founder



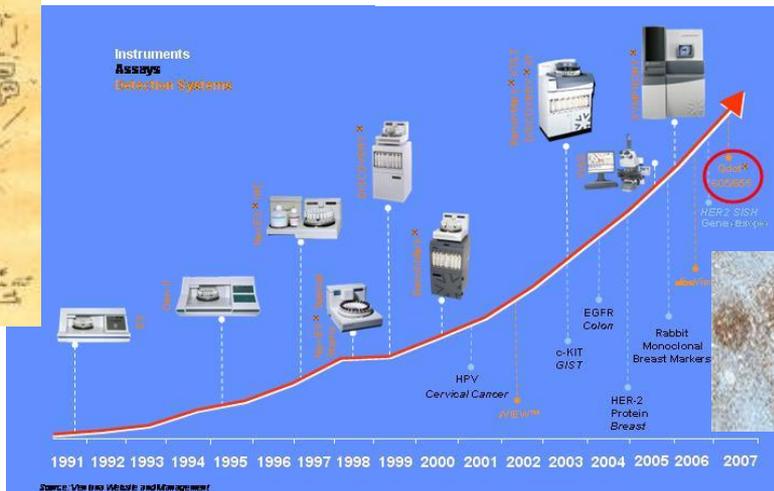
1991

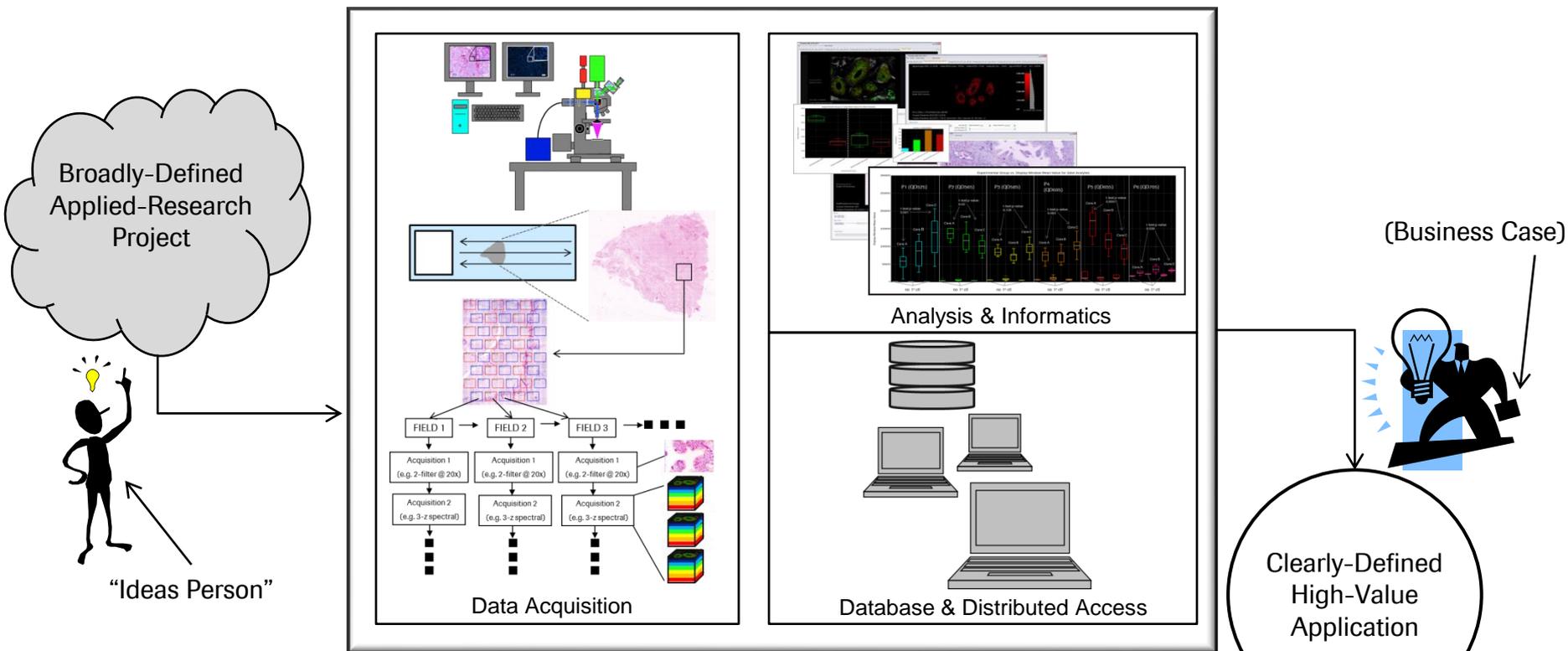


2007



2012





- **Engage high risk**-unknown outcome, plenty of inventing, little precedent
- **Succeed fast or change direction:** Moving parts and evolving priorities
- **'Scope creep' comes with the territory** (adapt and overcome)
- **Enable exploratory data collection** for high-value – not an end in itself
- **Can't be "shrink-wrapped"** -**heavy reliance on microscopy and preliminary work with chemistry/detection/biology scientists to rapidly evolve solutions**
- **Rapid progression to GO:NO-GO commercial decision point for opportunities**

Technology Transfer Funnel

**Multiple genetic and epigenetic changes can cooperate to drive cancer and confound cancer therapy**

## Intratumor Heterogeneity and Branched Evolution Revealed by Multiregion Sequencing

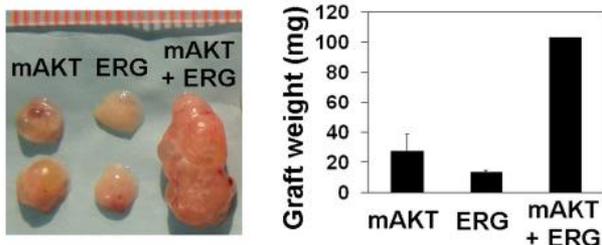
Gerlinger et al. N Eng J Med 2012 366, 10: p883

## Identification of a Cell of Origin for Human Prostate Cancer

Goldstein et al. Science 2010 329, 5991: p568

## ETS family transcription factors collaborate with alternative signaling pathways to induce carcinoma from adult murine prostate cells

Zong et al. PNAS 2009 106, 30: p12465



ETS family transcription factors collaborate with PTEN pathways to induce carcinoma from prostate cells.

## The clonal and mutational evolutionary spectrum of primary triple-negative breast cancers

Shah et al. Nature, 2012 486, 395-399

## Clonal Evolution in Cancer

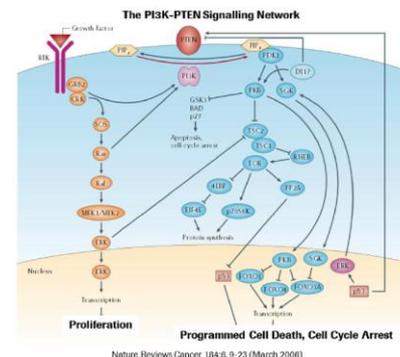
Greaves & Maley, Nature, 2012 481, 306-313

## PIK3CA Mutations Frequently Coexist with RAS and BRAF Mutations in Patients with Advanced Cancers

Janku et al. PLoS ONE 2011 6, 7: 222769

## Beyond PTEN mutations: the PI3K pathway as an integrator of multiple inputs during tumorigenesis

Cully et al. Nature Reviews: Cancer 2006 184, 6: p184

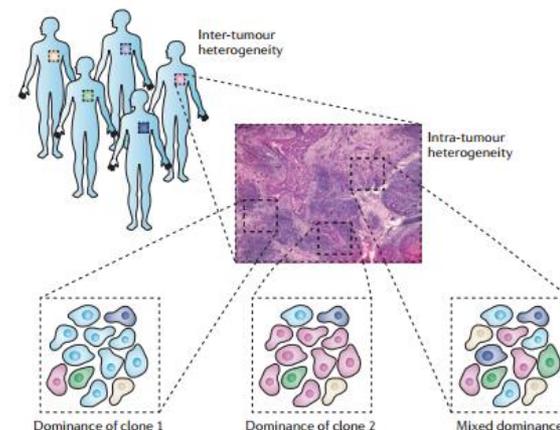


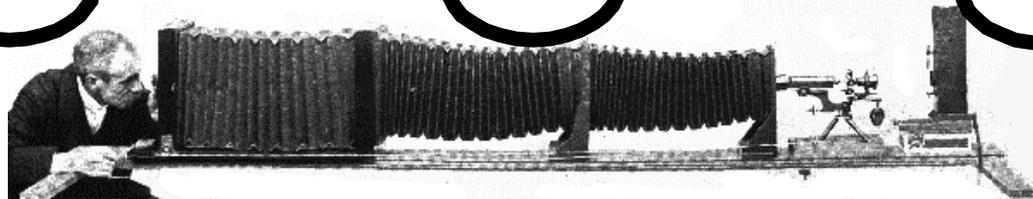
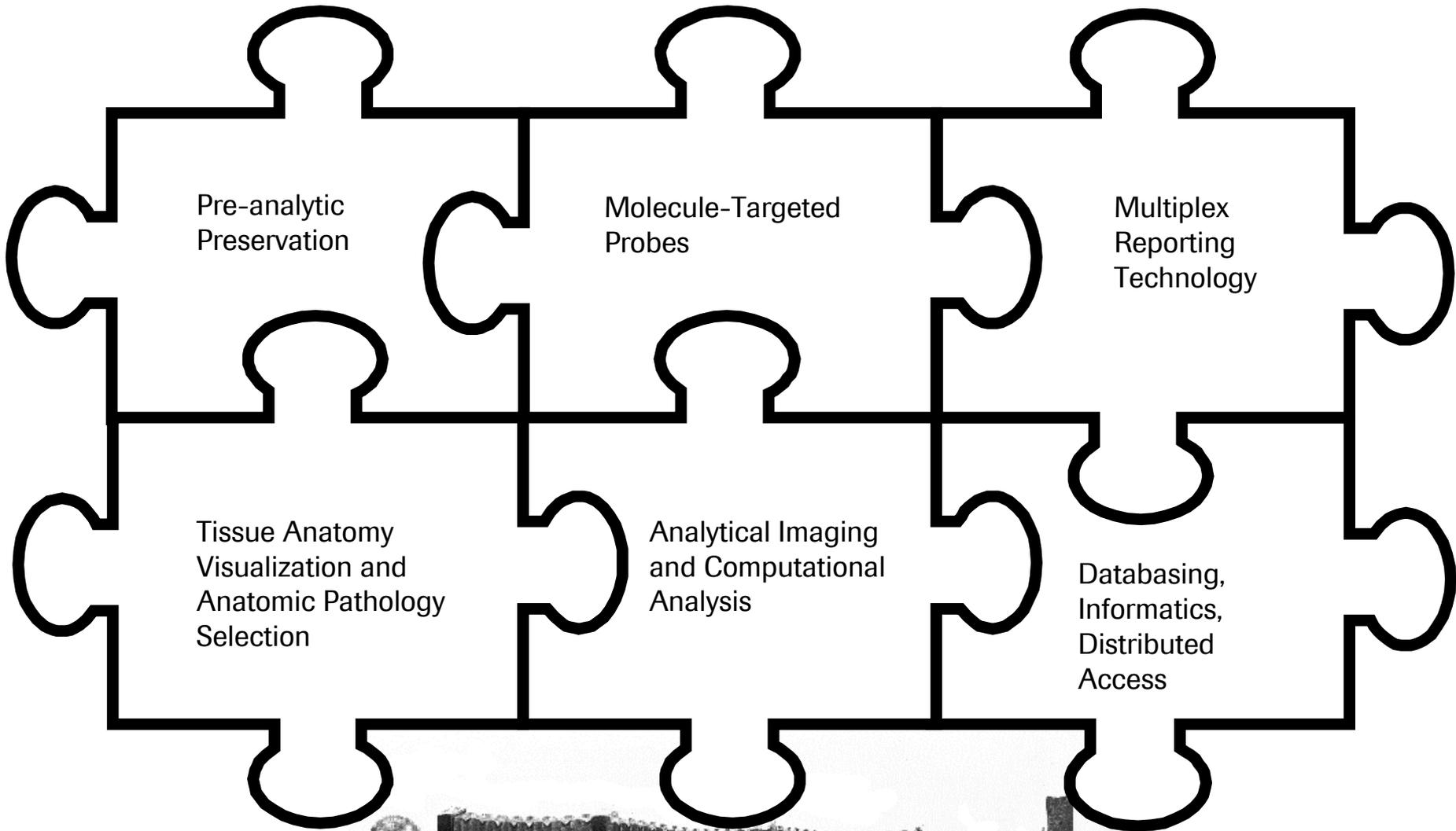
## Clonal evolution in relapsed acute myeloid leukaemia revealed by whole-genome sequencing

Ding et al. Nature, 2012 481, 506-510

## Intra-tumour heterogeneity: a looking glass for cancer?

Ding et al. Nature Reviews Cancer, 2012 12, 323-334





*Copyright: Figure 8 from 'Nature through microscope and camera' by Richard Kerr (London, 1905).* Arthur Smith, 1904

# Analytical Imaging Technology: The 4 Pillars

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Analytical Multiplexing **ENABLES** Ventana special research projects – technology platform for **advancing personalized medicine and companion diagnostics**

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## 1. **Preserve Anatomic Context**

1. Provides expert-guided selection of anatomic pathology
2. Cell morphology indicates cell type and anomalous expression patterns
3. Spatial heterogeneity of genotype and phenotype in tumor

## 2. **Multiplexed Biomarkers**

1. Reporters indicate multivariate changes in same cells; increased information density from limited tissue
2. Deconvolution of multiplexed signals is important for:
  1. Interpretation–extends limits of human perception
  2. Segmentation
  3. Quantitation

## 3. **Photometric Measurement Standardization and Quantitation**

1. Permits inter-slide and intra-slide comparison of marker levels over extended time periods
2. Greater objectivity in measurement of expression on a continuous scale
3. Higher dynamic range of measurement
4. Facilitates concordance of measurement results between instruments

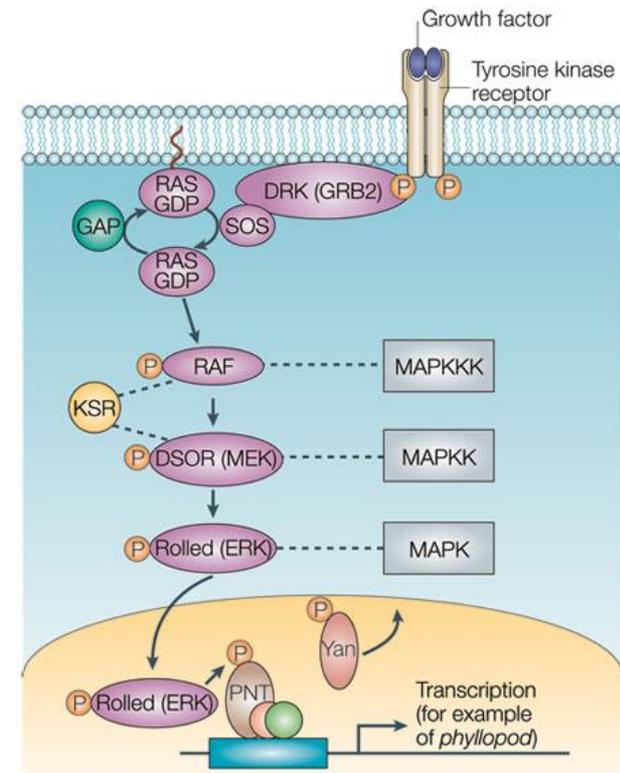
## 4. **Enable statistically-powered analysis and informatics tools**

1. Permits scientifically defensible hypothesis testing for assays without medical precedent
  2. Enables objective interpretation of subtle, but significant, differences in genotype or phenotype
-

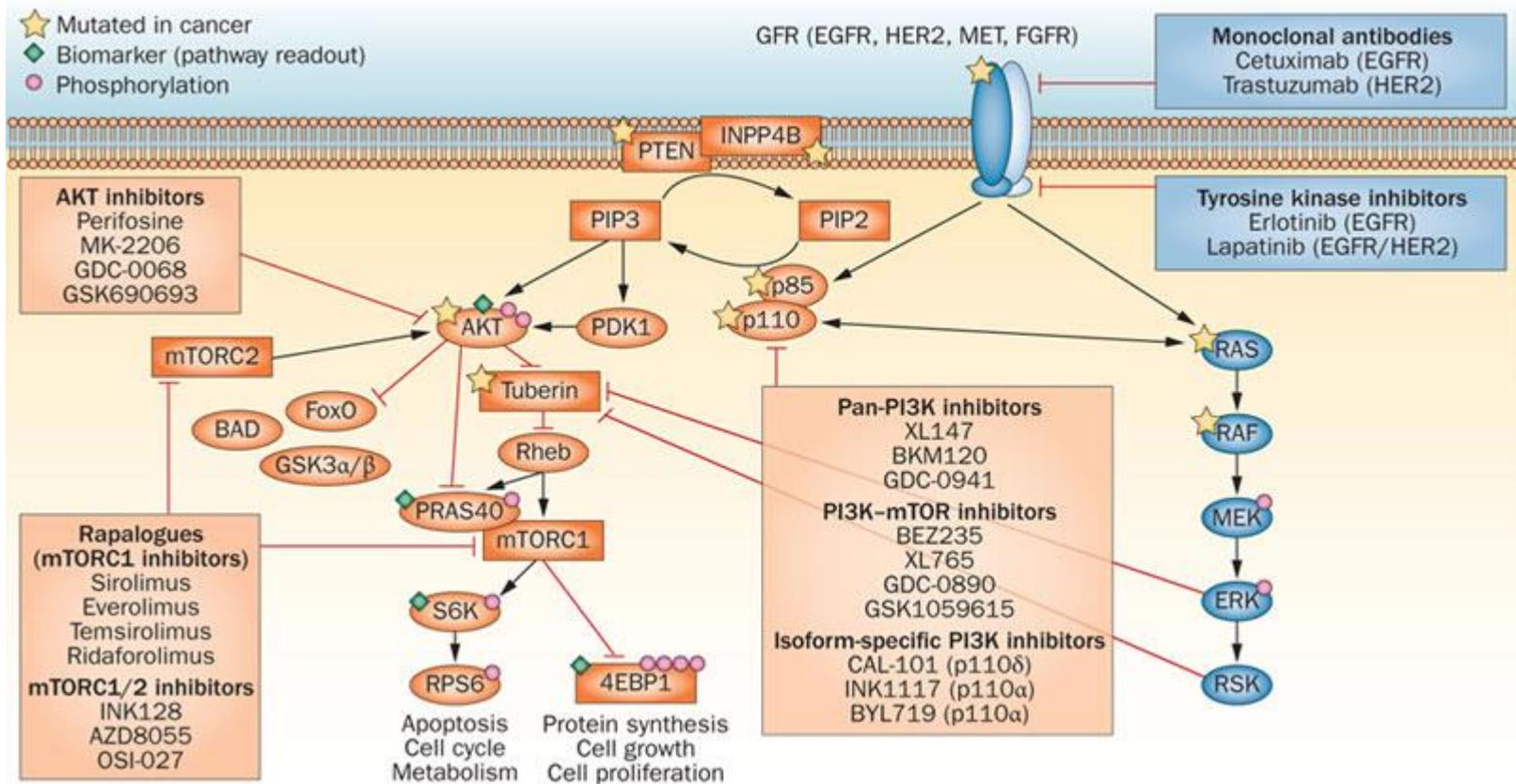
We are developing technology to enable **multiplexed** identification of **molecular changes** at key nodes in complex molecular **signaling pathways**

- Cells receive chemical signals at the membrane through receptors (HER2, EGFR, HER3)
- Signals are relayed through protein phosphorylation cascades
- Signal transduction regulates the genetic machinery to alter cellular 'behavior'
- Each pathway may influence several biological outcomes
- Chemical 'action-items' are decided through interaction between signalling pathways at 'nodes'
- Crosstalk between tumorigenic signalling pathways can contribute to dysregulation and malignancy

## The Canonical RTK Signalling Pathway



## Existing cancer medicines directed to PI3K signaling pathway

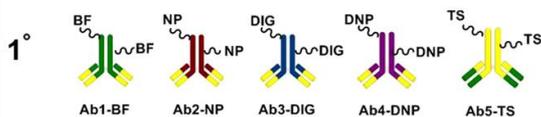


## Multiplex QD Reporting Chemistry (Kosmeder et al.)

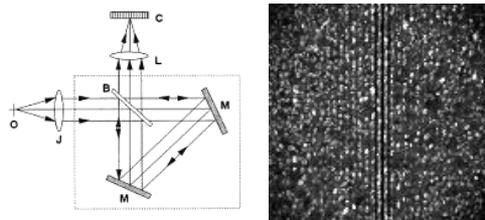


### Multiplex stain with Quantum Dots

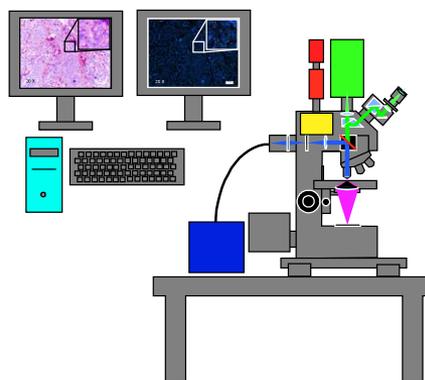
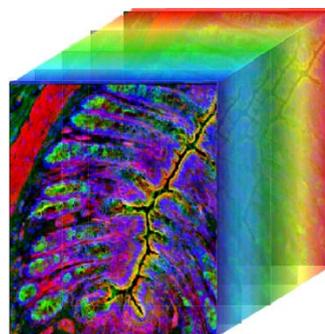
Mx-BF-Q605    Mx-NP-Q525    Mx-DIG-Q565    Mx-DNP-Q625    Mx-TS-Q655



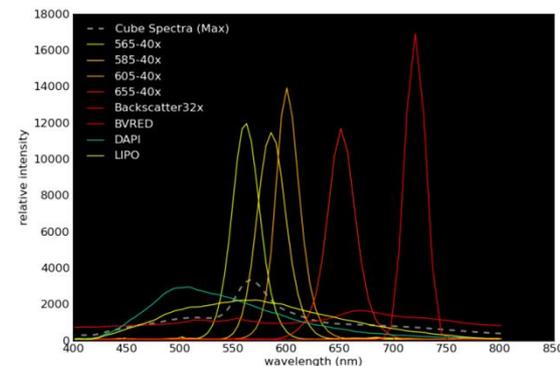
## Analytical (Spectral) Imaging



J. Microscopy, Vol 182, Pt. 2, May 1996, pp. 133-140



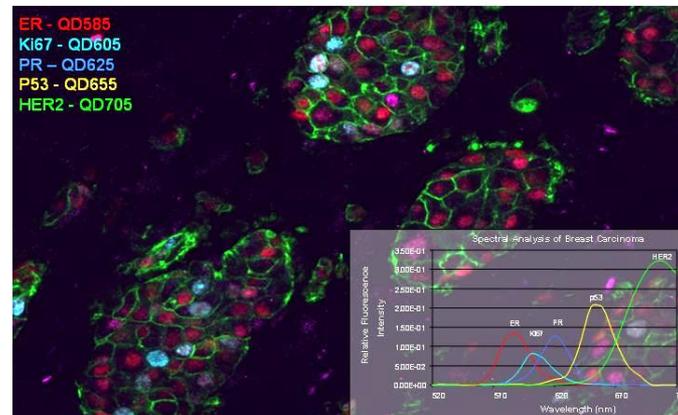
## Computational Analysis and Quantitation

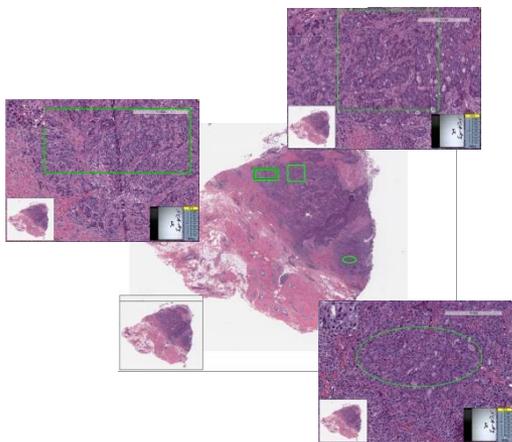


fluorescence    reference spectra    analyte

$$\begin{bmatrix} F_{\lambda_1} \\ F_{\lambda_2} \\ \vdots \end{bmatrix} = \begin{bmatrix} S_{\lambda_1}^{a_1} & S_{\lambda_1}^{a_2} & \dots \\ S_{\lambda_2}^{a_1} & S_{\lambda_2}^{a_2} & \dots \\ \vdots & \vdots & \ddots \end{bmatrix} * \begin{bmatrix} a_1 \\ a_2 \\ \vdots \end{bmatrix}$$

### Infiltrating Ductal Breast Carcinoma - IHC Multiplexing with Haptens (Ashworth-Sharpe et al., 2008)

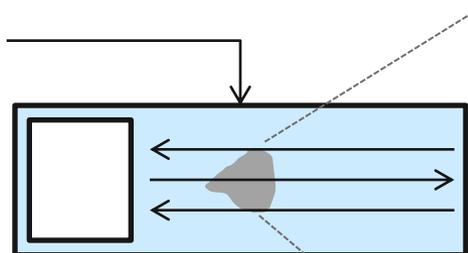




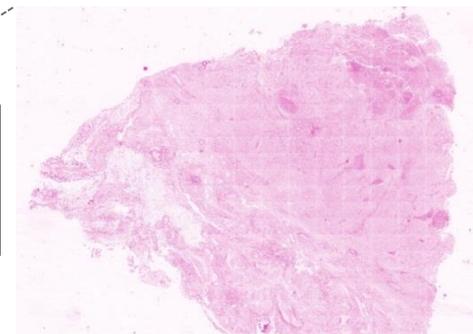
1. Pathologist selects regions on primary stained section (digitized)



Ventana Research System (Vu Lab OHSU)

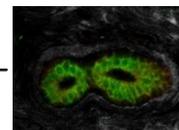
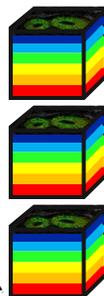
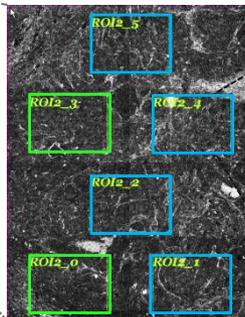
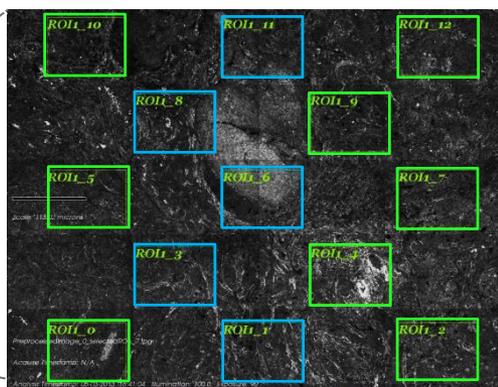
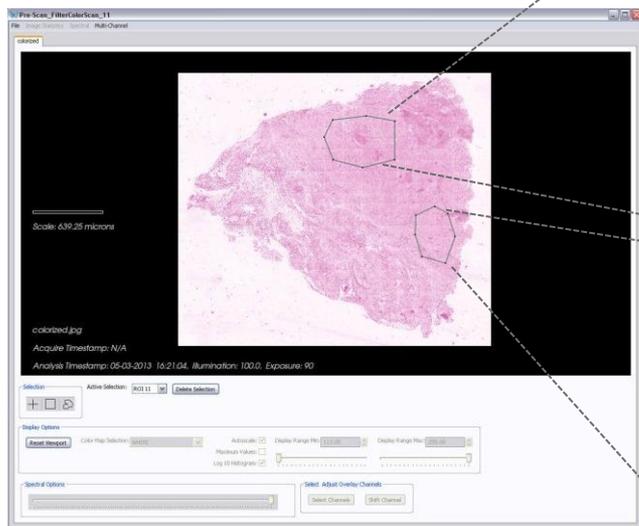


2. Transparent tissue section digitized using 'Bright Vision' near-IR contrast on Ventana Analytical Imaging System (VAIS)

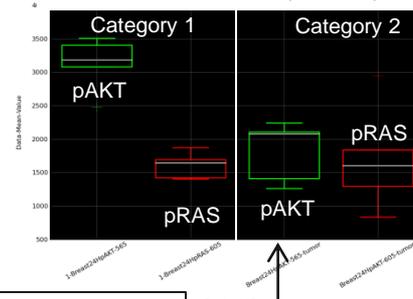


\*Qdot stained tissue anatomy is invisible to naked eye; refractive contrast avoids photodamage to section and permits fast overview scan

3. Digital image of tissue structure is viewed and marked for regions of interest in VAIS software



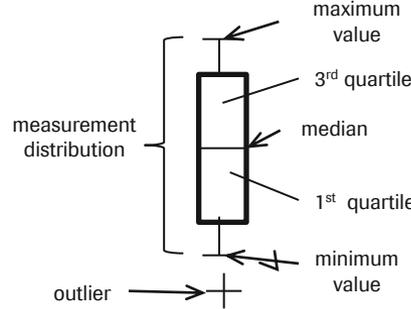
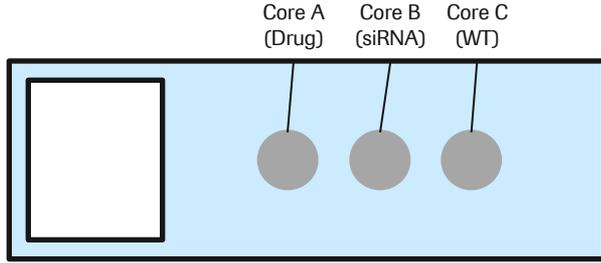
Measured Mean Intensity of Analytes



4. Large regions are spectral-spatial imaged at regular grid intervals to acquire accurate multiplex molecular information efficiently

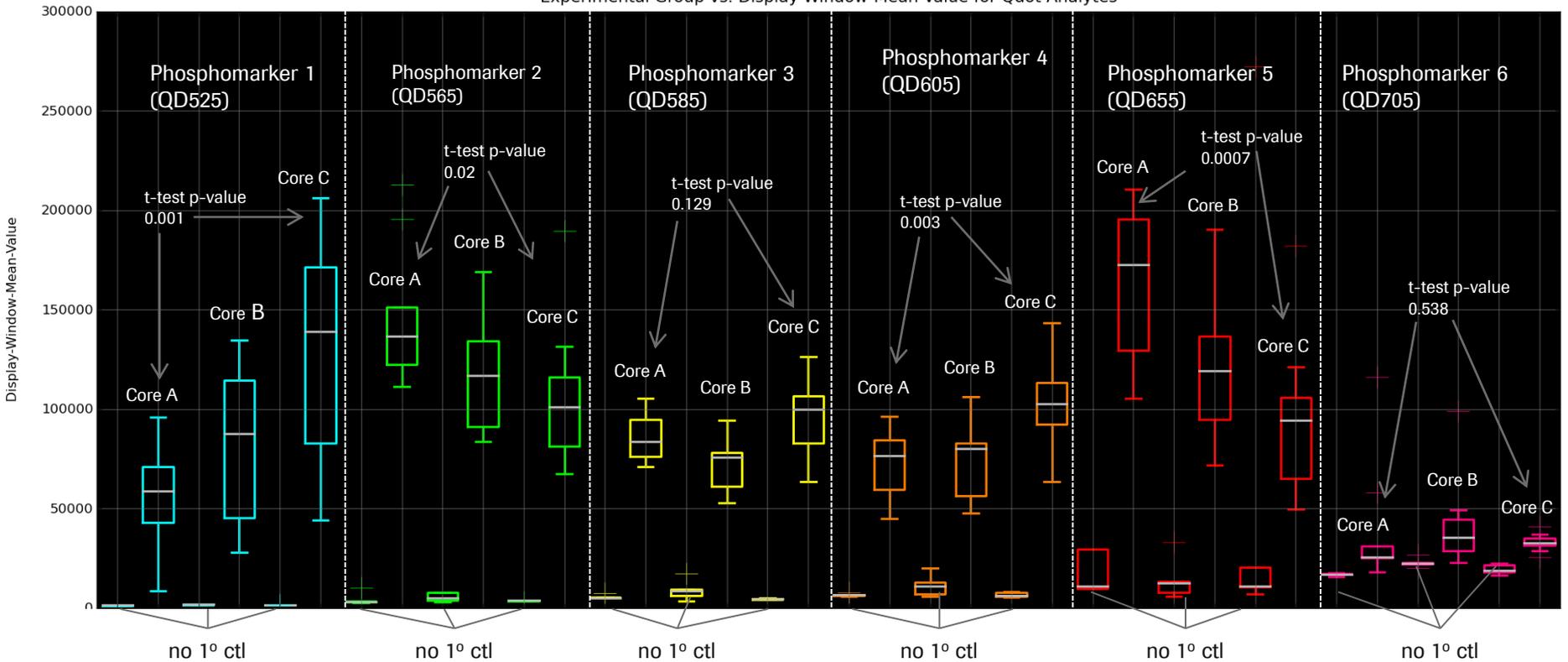
# PI3K Quantitative 6-plex: Photometric Quantitation

SKBR3 cell lines 3-in-1 slides: GSK690693 (AKT inhibitor), AKT1-3 si wild-type (WT)



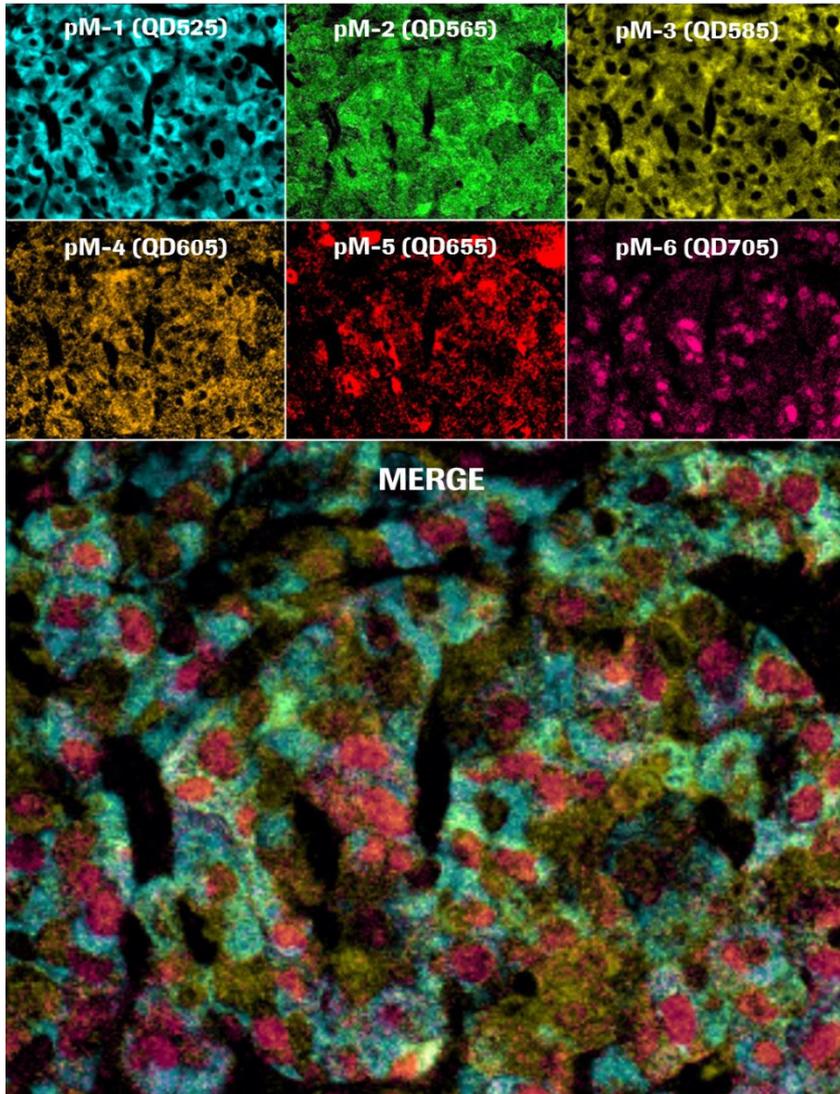
- Each distribution represents 10 fields per core, 2 replicate slides (5 fields each core, for each slide)
- No primary controls (no 1<sup>o</sup> ctl) indicate low non-specific background levels
- 6-Plex measurements are consistent with images of single marker DAB staining experiments on 3-in-1 slides

Experimental Group vs. Display-Window-Mean-Value for Qdot Analytes

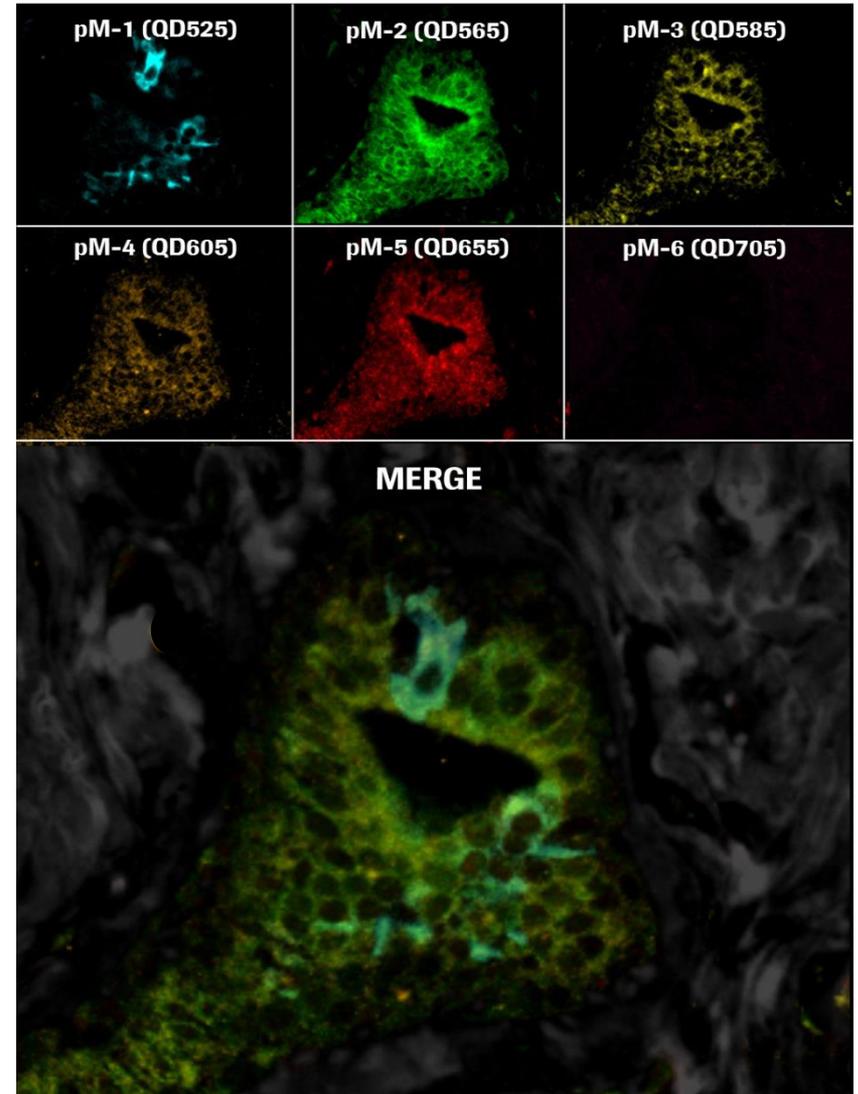


Can we describe this objectively and identify the competing phenotypes?

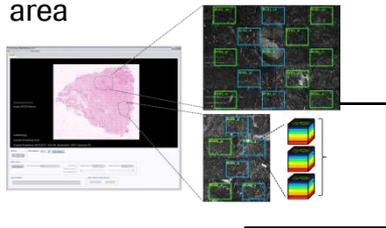
## TUMOR



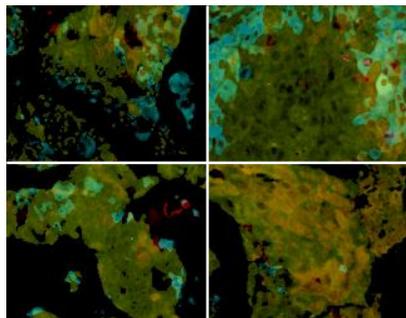
## TUMOR ADJACENT



Unmixed Layer Stacks sampled over tumor area

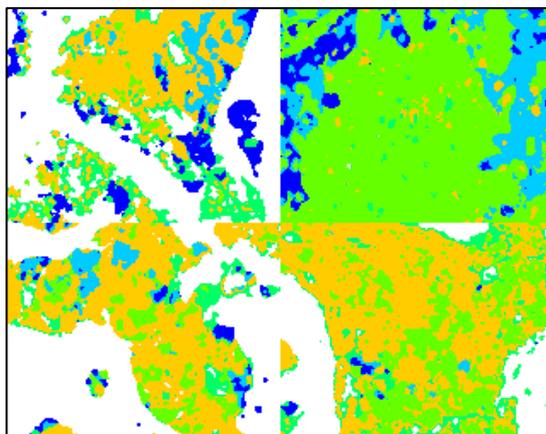


Multiple ROI dataset



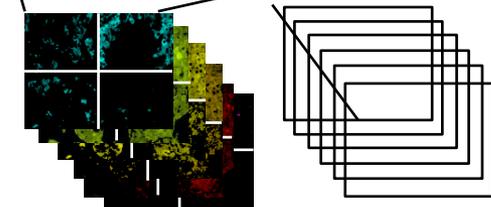
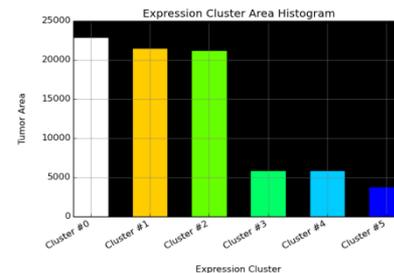
Cluster Algorithm

**EXPRESSION CLUSTER MAP:**  
heterogeneity of marker expression pattern mapped as colors

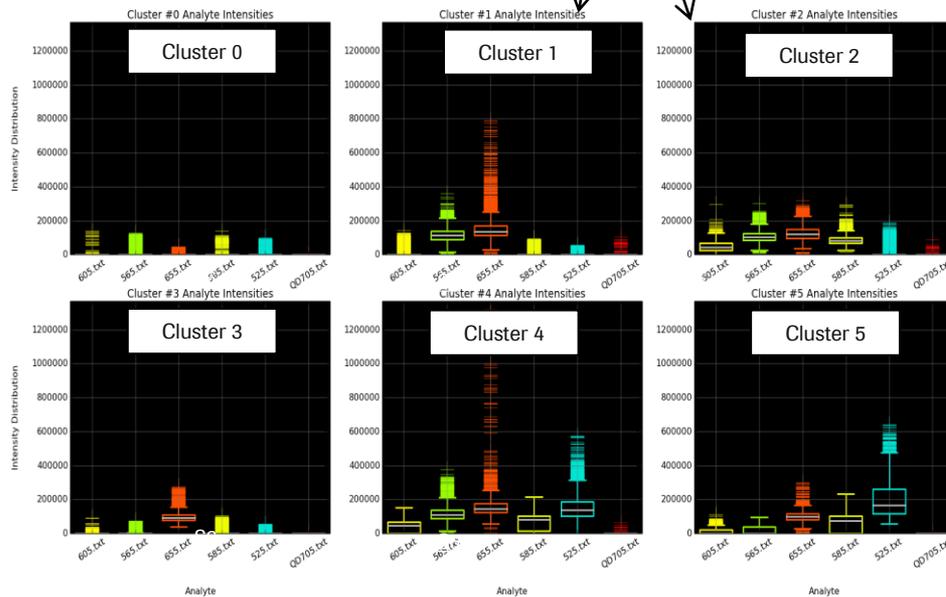


Cluster 5  
Cluster 4  
Cluster 3  
Cluster 2  
Cluster 1  
Cluster 0

Tumor Histogram by 'expression cluster' (color coded to expression map)



Each unit area has 6 scalar values that define a vector (6 unmixed analyte values)

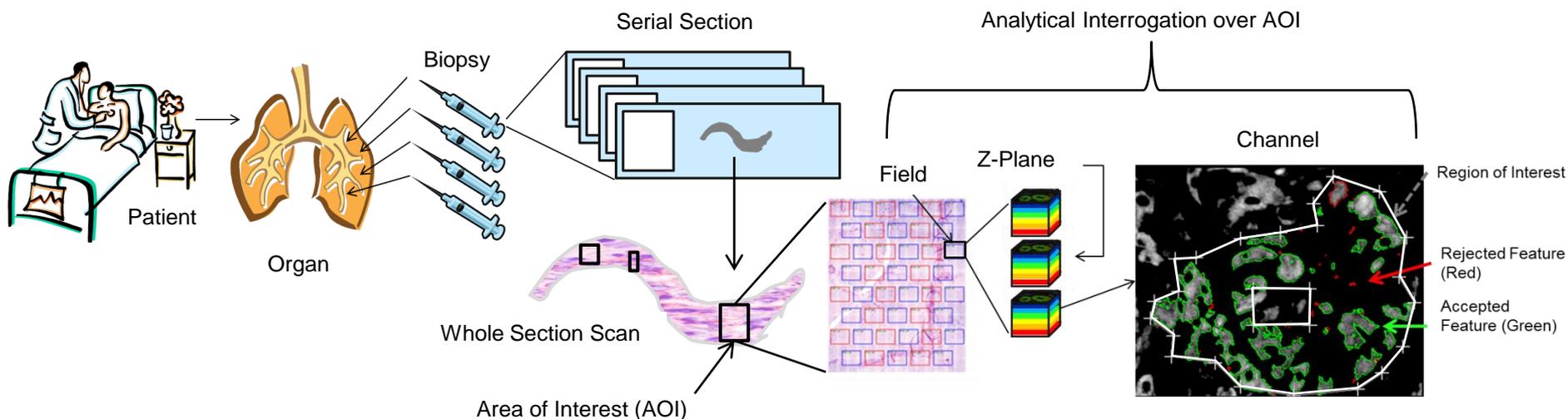


Plot values for each marker grouped by 'expression cluster'

# OME in Precision Pathology: Challenges and Opportunities

Analytical Digital Pathology applications have different technical and workflow requirements from conventional research microscopy

## 1. Data Model for analytical tissue pathology organized relative to anatomic context



## 2. Lack of file formats and/or rare proprietary file formats (PFF)

1. Rare and unusual file formats hamper 'out-of-the-box' adoption of turnkey OME tools
  1. FT spectral imaging 'raw' spectral cube format
  2. Mass-spec ratio imaging data
  3. Ventana Digital Pathology 'bif' format
2. Implementation of OME internal data model will provide improved framework for managing such data
3. Internal proprietary standards and commercial development toolkits ('Feeding the Monster')

## OME in Precision Pathology: Challenges and Opportunities

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Our strategy makes extensive use of Python-wrapped, natively-compiled libraries to facilitate high plasticity; our analysis software provides a rudimentary (proof-of-concept) client interface to OMERO

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1. We leverage well-established scientific computing library interfaces (native compiled C and C++, Java)
    1. Translating high-level data representations can be tricky
    2. **Type-handling** and **debugging** requires some knowledge of underlying library source and language
  2. **Managing** Python-version and other **dependencies** with large wrapped libraries is non-trivial
    1. Resources, knowledge & time for re-compiling libraries from source on Windows are very limited
    2. Our current development environment is Python 2.7, 64-bit (Windows 7) & 32-bit (Windows XP)
    3. ICE framework / OMERO.blitz are KEY, however:
      1. we historically have run into challenges with the combination of Windows, ICE and Python 2.7
      2. Sync OMERO.blitz & ICE with scientific Python distributions (e.g. Enthought)?
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## OME in Precision Pathology: Suggestions to Enable Precision Medicine

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Further development of machine learning tools, server-side data mining and handling of data from heterogenous sources will help advance precision diagnostics research

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1. It will be important to **consolidate** access/storage/analysis of **sequence data, mass spec data\***, and **other analytical technologies**
  1. Link analytical data to image data based on tissue pathology data model
  2. Provide consolidated access (client capabilities) to access and mine information in other databases
2. **Machine learning and pattern recognition** tools are important technologies to next-generation precision digital pathology
  1. Identifying/Segmenting morphological patterns to interrogate
  2. Categorizing molecular phenotype
  3. Multivariate index assays (MIA)
3. Ability to reference and access **multimodal images at hierarchical anatomic levels**
  1. Non-invasive (MRI, CT)
  2. Digitized tissue sections (primary stain and single stain IHC)
  3. Analytical imaging (multiplex molecular tags)

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\* See: Schramm, et al., 2012 “**imz-ML – A common data format for the flexible exchange and processing of mass spectrometry imaging data**”, J. Proteomics 75, 16: 5106-5110. Also: [www.imzml.org](http://www.imzml.org)

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- Michael Otter
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