# OSC (Common Fund)



**Concept Clearance:** New Common Fund Program

#### TITLE: Nutrition for Precision Health, powered by the All of Us Research Program

**Objective:** To provide the evidence base for individualized dietary/nutrition recommendations **Initiatives:** 

- 1. Data and Study Coordination
- 2. Clinical Centers
- 3. Data Generation Centers
- 4. Artificial Intelligence, Bioinformatics and Data Modeling Center
- 5. Biobank

**Funds Available** \$155,900,00

**Program Duration:** 5 years

**Council Action:** Vote on support of Program

# Nutrition for Precision Health, powered by the *All of Us* Research Program

Griffin P. Rodgers, M.D., M.A.C.P.

Director, National Institute of Diabetes and Digestive and Kidney Diseases

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## Nutrition for Precision Health Working Group



#### **Program Co-Chairs**

Griffin Rodgers, NIDDK Diana Bianchi, NICHD Gary Gibbons, NHLBI Ned Sharpless, NCI

#### Common Fund Program Leaders

Felicia Qashu, OSC Ananda Roy, OSC

#### **Program Coordinators**

Holly Nicastro, *All of Us*, NIDDK Christopher Lynch, NIDDK

#### **Working Group Members**

Samantha Adas, NIDDK Andrew Bremer, NICHD

Cindy Davis, ODS

Qi Duan, NIBIB

Mary Evans, NIDDK

Roberto Flores, NCI

Kelly Gebo, All of Us

Chris Hartshorn, NCI

Kirsten Herrick, NCI

Craig Hopp, NCCIH

Robert Karp, NIDDK

Yasmin Kloth, All of Us

Roger Little, NIDA

James Luo, NHLBI

Padma Maruvada, NIDDK

George Papanicolaou, NHLBI

Charlotte Pratt, NHLBI

Jill Reedy, NCI

Sharon Ross, NCI

Katie Rush, All of Us

Sheri Schully, All of Us

Shurjo Sen, NHGRI

Daniel Shaughnessy, NIEHS

Pothur Srinivas, NCI

Derrick Tabor, NIMHD

Ashley Vargas, NICHD

Lu Wang, NIDCR

Xujing Wang, NIDDK

Jamie White, ORWH

Kenneth Wilkins, NIDDK

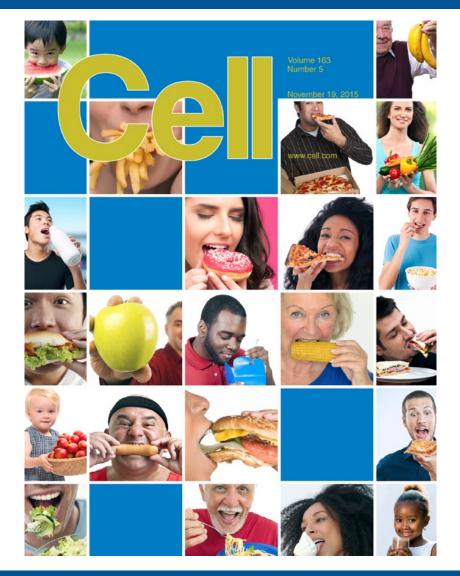
Deborah Young-Hyman, OBSSR

Giovanna Zappala, NIA

# Why precision nutrition?



- Poor diet is a leading cause of preventable death and disease and preventable healthcare costs in the US
- Current dietary recommendations provide a one-size-fits-all approach
- Interactions between dietary intake, microbiome ecology, metabolism, nutritional status, genetics, and the environment are still poorly understood



### Why do we need a Common Fund Program?



- Nutrition research is a cross cutting issue at most NIH ICOs accounting for ~\$1.8 billion in research expenditures per year
- A large harmonized effort to comprehensively analyze the metabolic status
  of a diverse population is needed before precision nutrition can be widely
  applied in clinical/public health settings
- The project requires expertise in a wide range of areas spread across NIH
- First ever Strategic Plan for NIH Nutrition Research emphasizes the importance of studying precision nutrition

Genes

# Current Approach to Precision Nutrition





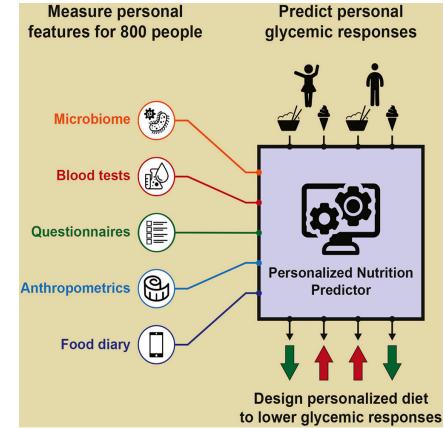
#### Authors

David Zeevi, Tal Korem, Niv Zmora, ..., Zamir Halpern, Eran Elinav, Eran Segal

#### Personalized Nutrition by Prediction of Glycemic

Responses

- 800 individuals, representative of adult non-diabetic Israeli population
- Individual glycemic excursions in response to the same foods were highly variable
- Intervention study: personally tailored meals significantly improved postprandial glucose responses
- ~90% of predictive model came from microbiome compositional data



Cell 2015 163, 1079-1094, doi: 10.1016/j.cell.2015.11.001, ©

# Challenges with Current Approach



- Problems with collection and analysis of self-reported dietary intake data
- Challenges with adherence to dietary prescriptions
- Need for accurate information about calorie expenditure
- Costs of -Omic Measures
- Models have employed selected, not comprehensive inputs
- Small precision nutrition studies with limited diversity of participants

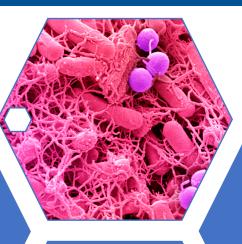


# Why now?





Improvements in multi-omic data generation, throughputs, costs, and analysis methods



Advances in artificial intelligence and deep learning

Development or refinement of digital health technologies for dietary assessment



Emergence of the All of Us
Research
Program



# Why All of Us?



- Large diverse cohort with commitment to inclusion
- Established infrastructure
- Existing data: genomics, electronic health records, digital health data, physical measurements, and surveys
- Data access and sharing policy, Researcher Workbench
- A precision nutrition program can add new data types to All of Us and provide high value information for participants

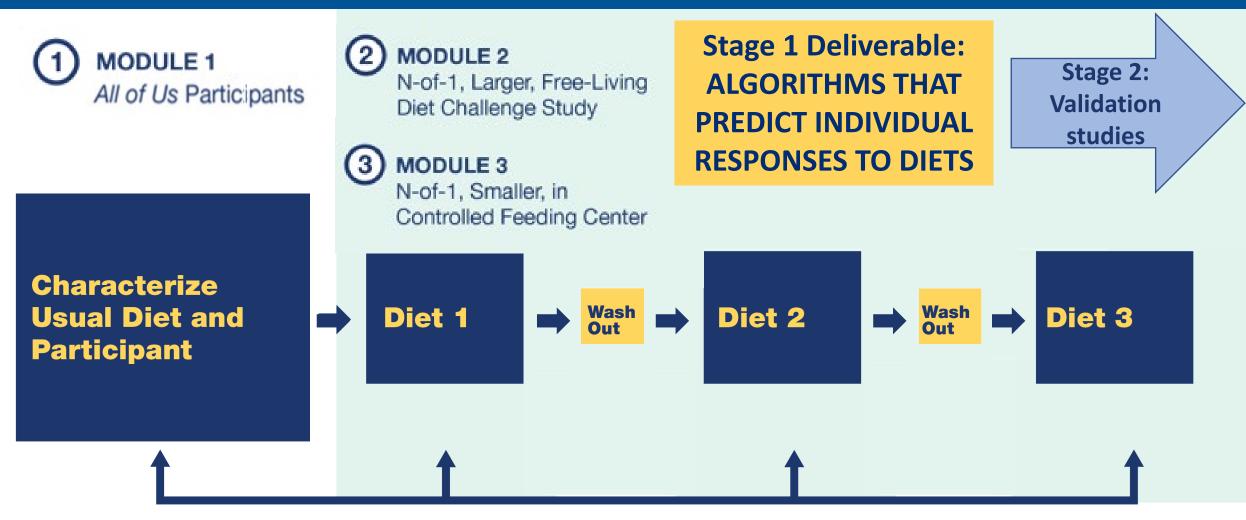
# Proposal



MODULE 1 MODULE 2 MODULE 3 Leverage existing NIH investments - including Examine usual diet with continuous Randomized dietary interventions done Randomized dietary interventions the All of Us Study - and emerging technologies at home as a subset of Module 1 glucose monitoring, followed by a conducted in inpatient controlled and tools to make the critical discoveries to steer mixed meal challenge, and microfeeding centers where precise nutrition research toward personalized approaches. biome/metabolic phenotyping nutritional intakes, microbiome ecology, and physio-metabolic data can be rigorously obtained STUDY GROUP NESTED IN ALL OF US **USUAL DIET PARTICPANTS** LARGER FREE LIVING STUDY SMALLER CONTROLLED **FEEDING CENTER** LEVEL OF MICROBIOME, PHYSIO-METABOLIC AND DIET RESPONSE DATA **AVAILABLE FROM PROPOSED MODULES** 

# Proposal





**MICROBIOME & PHYSIO-METABOLIC PHENOTYPING** 

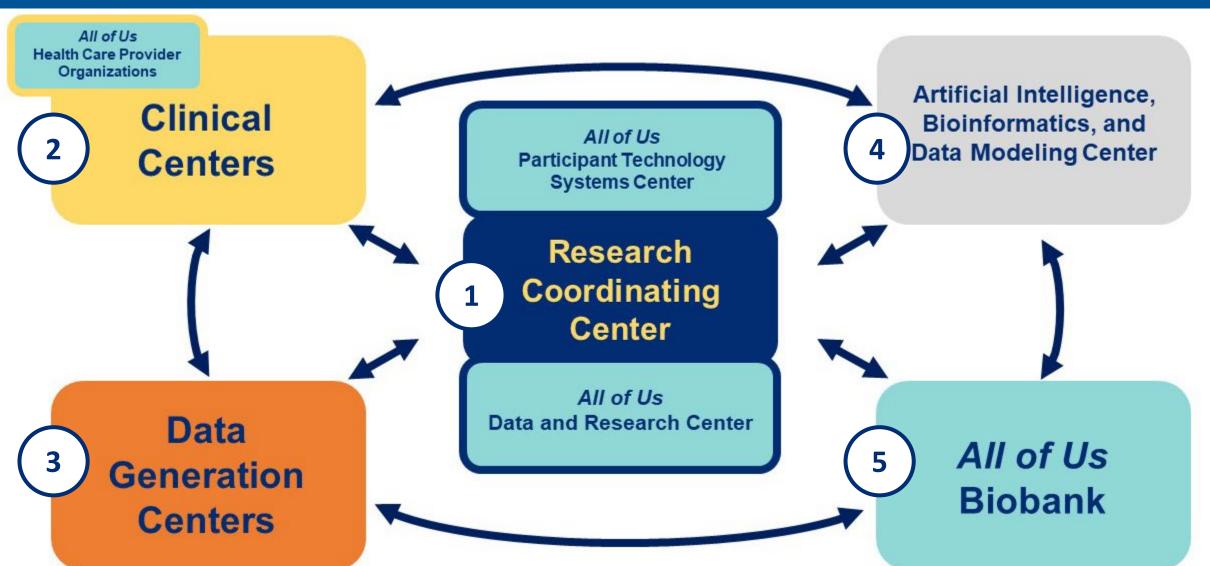
### **Innovative Measures**



Programs	Genetics	Microbiome Ecology	Continuous Glucose Monitoring	Hormones/Proteome	Physio-sensors	Mixed Meal Testing	Diet	Nutritional Status	Metabolome	24 h Urine Omics	Exposome	Socioeconomic Factors	Electronic Health Records	Psychosocial Factors	Behavioral Factors	Long Term Outcomes
Nutrition for Precision Health																
Company 1	•															
Company 2																
Company 3																
Company 4																
Company 5																
Company 6																

## **Proposed Components**





### Initiatives – Data and Study Coordination





Research
Coordinating
Center

new solicitation

All of Us
Participant
Technology
Systems Center

supplement to existing award

All of Us Data and Research Center

supplement to existing award

**GOAL:** Provide administrative management and coordination across all sites and collect, curate, aggregate, store, distribute, and ensure quality control of all data

#### Initiatives – Clinical Centers





### **Clinical Centers**

new solicitation

All of Us Health Care Provider Organizations

supplement to existing award

**GOAL:** Recruit, consent and enroll *All of Us* participants into nutrition program. Assess usual diet, conduct mixed-meal challenges, and collect biospecimens in 10,000 participants (Module 1); conduct a series of controlled feeding studies in a subset of 1,500, free-living participants (Module 2); and conduct a series of controlled feeding studies in 500 domiciled participants (Module 3).

#### Initiatives – Data Generation Centers





Metagenomics Center

new solicitation

**GOAL:** Perform epigenetic analyses and microbiome metagenomic and metatranscriptomic analyses on all participants.

Metabolomics and Clinical Assay
Center

new solicitation

**GOAL:** Perform metabolic and proteomic analyses on biosamples from stool, urine, and plasma using targeted (e.g., metabolites and nutrients) and untargeted metabolomics.

Dietary Assessment Center

new solicitation

**GOAL:** Develop innovative approaches to address dietary assessment challenges by integrating and improving measurement error in mobile dietary assessment technologies using data from free-living and controlled feeding studies.

#### Initiatives





Artificial Intelligence,
Bioinformatics, and
Data Modeling
Center

new solicitation

**GOAL:** Integrate data-driven and mechanistic approaches, with mathematical and computational modeling, to develop comprehensive dietary intervention algorithms that can predict biological responses. Enhance visualization and accessibility of data for broader scientific community.



All of Us Biobank

supplement to existing award

**GOAL:** Receive, process, record, and store biosamples and metadata related to the samples from clinical centers

# Budget - numbers are (\$1000s)



	Lead IC	FY2022 (planning)	FY2023	FY2024	FY2025	FY2026	Total
Overall Program Administration	NIDDK	\$650	\$650	\$650	\$650	\$650	\$3,250
(1a) Research Coordinating Center	TBD	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$7,500
(1b) Data and Research Center	All of Us	\$3,000	\$3,000	\$3,000	\$3,000	\$3,000	\$15,000
(1c) Participant Technology Systems Center	All of Us	\$1,500	\$1,500	\$1,000	\$1,000	\$500	\$5,500
(2a) Clinical Centers	TBD	\$7,000	\$12,000	\$12,000	\$12,000	\$12,000	\$55,000
(2b) Health Care Provider Organizations	All of Us	\$220	\$220	\$220	\$220	\$220	\$1,100
(3a) Metagenomic Center	TBD	\$550	\$3,500	\$3,500	\$3,500	\$3,500	\$14,550
(3b) Metabolomics and Clinical Assays Center	TBD	\$400	\$5,000	\$5,000	\$5,000	\$5,000	\$20,400
(3c) Dietary Assessment Center	TBD	\$1,500	\$2,200	\$2,200	\$2,200	\$1,500	\$9,600
(4) AI, Bioinformatics, and Data Modeling Center	TBD	\$2,000	\$2,000	\$3,000	\$3,000	\$3,000	\$13,000
(5) Biobank	All of Us	\$2,000	\$2,500	\$2,500	\$2,500	\$1,500	\$11,000
Total		\$20,320	\$34,070	\$34,570	\$34,570	\$32,370	\$155,900

# Thank you



