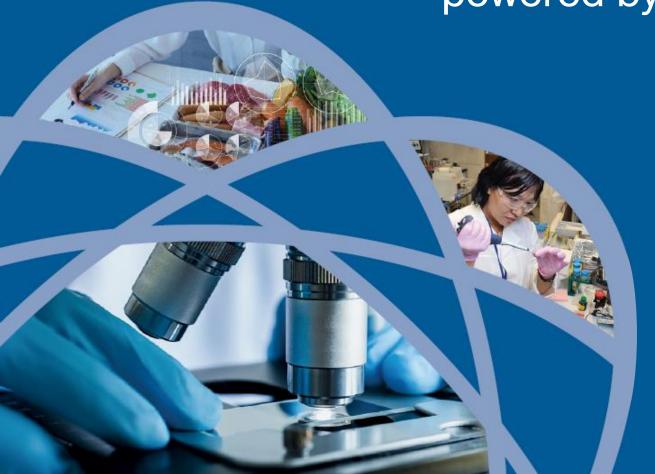
Nutrition for Precision Health

powered by the All of Us Research Program



Pre-Application Webinar

11 am EST

This meeting is being recorded



Webinar Best Practices

- Please turn off VPN
- Ask questions in the Q and A box only
- Refrain from using chat

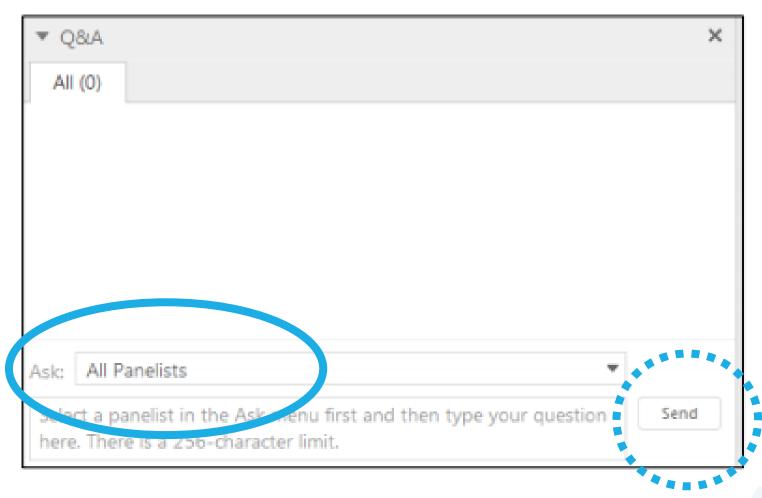


Webinar Outline

- Presentation
 - Panelist introduction
 - NIH Common Fund
 - Nutrition for Precision Health (NPH) overview
 - All of Us Research Program
 - Key points for all RFAs
 - Key points for specific RFAs
- Q&A



Submit Questions via the Q&A panel



Be sure that "All Panelists" is selected

Do not use "chat" for Q and A



Panelists: Program Officers



Ashley Vargas
Research Coordinating Center
Clinical Centers



Padma Maruvada

Microbiome and

Metagenomics Center



Christopher HartshornArtificial Intelligence, Multimodal Data
Modeling, and Bioinformatics Center



Jill ReedyDietary Assessment Center



Pothur Srinivas
Metabolomics and Clinical
Assays Center



Pam JeterResearch Coordinating Center SRO



Panelists: NPH Coordinators



Holly Nicastro



Christopher Lynch



Felicia Qashu



Ananda Roy
National Institutes of Health



Danyelle Winchester



Samantha Adas

Panelists: All of Us and CFDE



Romey Azuine
Data and Research
Center Program Officer



Mark Caulder
Biobank Program Director



James McClain
Participant Technologies
Program Director



Holly Garriock
Acting Director of Division
of Scientific Programs



Sheri Schully
Acting Chief Medical
and Scientific
Officer



Haluk Resat



Christopher Kinsinger

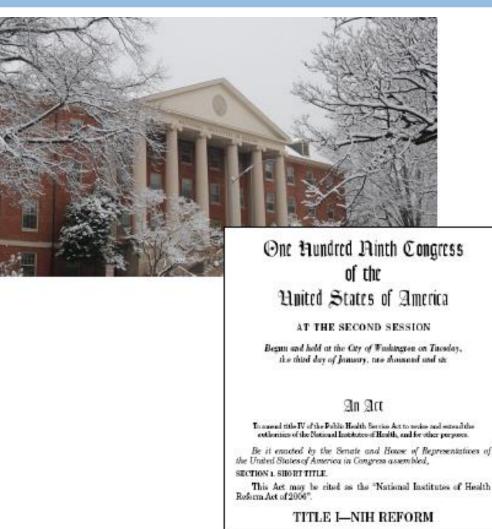


Common Fund Data Ecosystem (CFDE) Data Coordinating
Center Engagement Directors

NIH Common Fund



What is the Common Fund



2004: NIH Roadmap is launched2006: Congress unanimously reauthorizes the

Establishes the Division of Program Coordination, Planning, and Strategic Initiatives (DPCPSI) within Office of the Director and the NIH Common Fund to provide a dedicated source of funding to enable goal driven *trans*-NIH research.

Separate budget line for the Common Fund.



Common Fund Programs

Transformative Must have the potential to dramatically benefit biomedical and/or

behavioral research

Catalytic Must achieve a defined set of goals within 5-10 years

Synergistic Outcomes must synergistically advance individual missions of Institutes

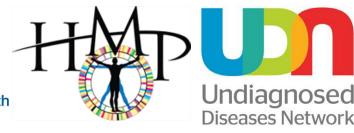
and Centers

Cross-cutting Program areas must cut across missions of multiple Institutes and

Centers, requiring a coordinated approach

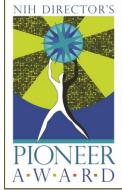
Unique No other entity is likely or able to do







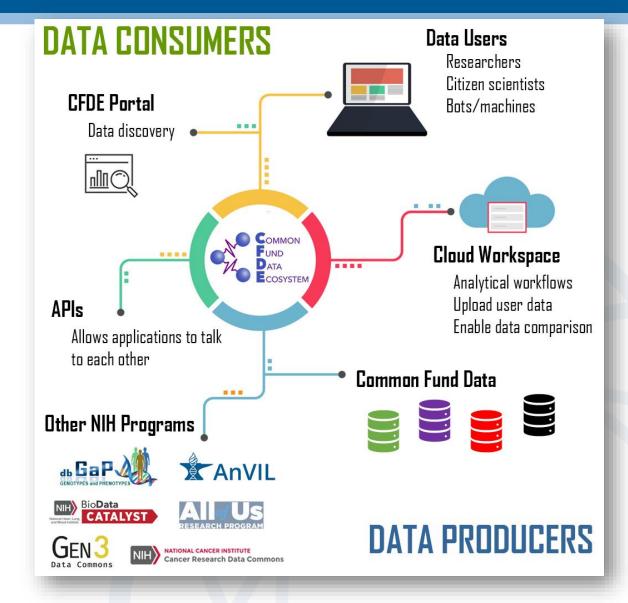




Common Fund Data Ecosystem (CFDE)

Goals

- 1. Query across and use datasets
- 2. Sustain data and tools
- 3. Train researchers to use data and tools





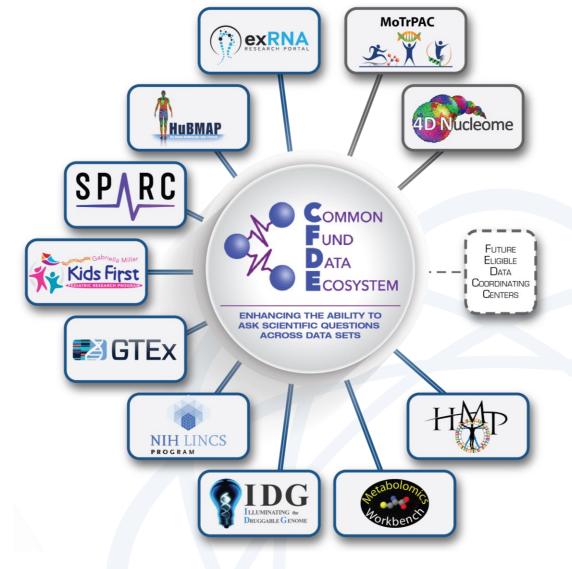
CFDE and Common Fund Data Coordinating Centers (DCCs)

CFDE Engagement

- Construct data infrastructure to ensure FAIRness of data
- Coordinate to ensure data and metadata standards enable interoperability with other Common Fund datasets
- Foster cross-program collaboration

Points of Contact

- Chris Kinsinger: <u>kinsingc@mail.nih.gov</u>
- Haluk Resat: haluk.resat@nih.gov





STRIDES: Science and Technology Research Infrastructure for Discovery, Experimentation, and Sustainability

STRIDES provides:

- Discounted rates on cloud services
- Access to support & training

Common Fund award applicants should:

- Include cost estimates for cloud computing needs in their application(s)
- NIH will use this cost estimate to provide inkind services from STRIDES if application is funded
- NIH staff will work with awardees to set up STRIDES accounts



For more information visit:

commonfund.nih.gov/dataecosystem/faqs

https://grants.nih.gov/grants/guide/notice-files/NOT-RM-20-009.html



Nutrition for Precision Health Overview



Nutrition for Precision Health

Powered by the All of Us Research Program



- Primary goal: to develop algorithms to predict individual responses to foods and dietary patterns
 - Using comprehensive set of microbiome, genomic, physiological, metabolic, behavioral, cognitive, contextual, electronic health record, survey, and environmental data
 - In large and diverse population of participants (All of Us Research Program)



Proposal overview



Examine <u>baseline diet</u> in an <u>observational study</u> followed by a mixed meal challenge test

10,000 *All of Us* participants



Examine responses to 3 shortterm intervention diets in freeliving **controlled feeding** studies

1,000-2,000 Module 1 participants



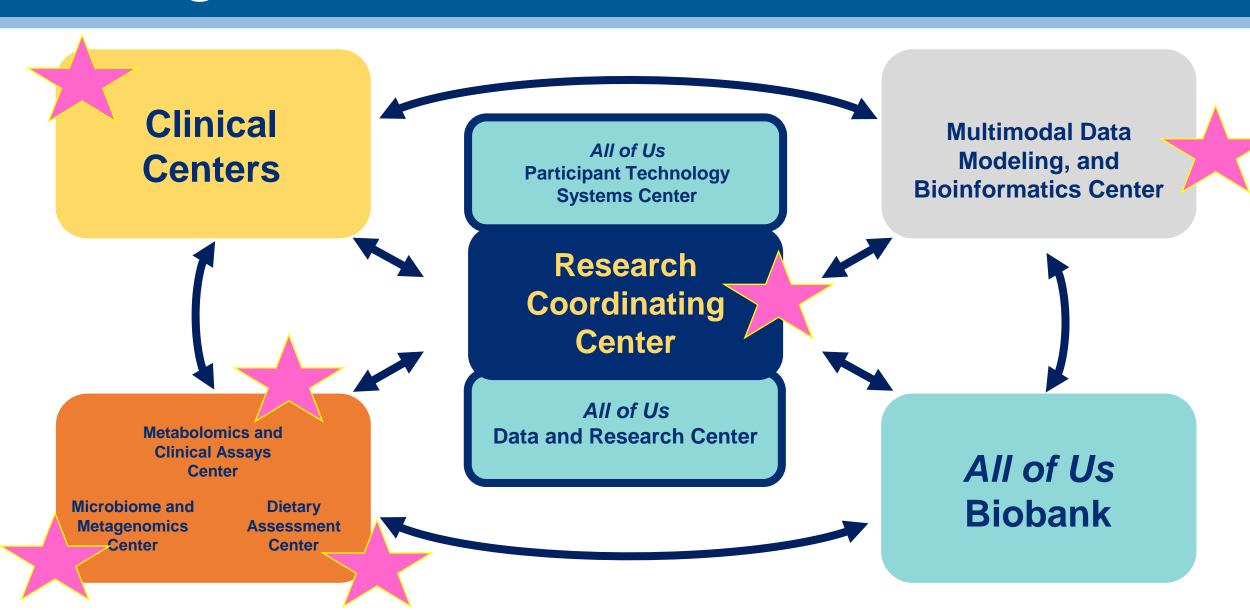
Examine responses to 3 shortterm intervention diets in domiciled controlled feeding studies

500-1,000 Module 1 participants

In all 3 modules

- Collect microbiome, physiological, metabolic, behavioral, cognitive, and environmental data, and leverage existing genomic, EHR, and survey data, and conduct mixed meal challenges to model the impact of diet and dietary patterns on physiological responses
- Use machine learning and artificial intelligence to develop predictive algorithms

Program structure



All of Us Research Program



All of Us Research Program

- Diversity at the scale of 1 million people or more
- Focus on participants as partners
- Longitudinal design, ability to recontact
- Multiple data types: EHR, surveys, baseline physical measurements, biospecimens, genomics
- National, open resource for all: broadly accessible to all researchers with open source software & tools
- Security and privacy safeguards for all participant data





All of Us Core Values

- Participation is open to all.
- Participants reflect the rich diversity of the U.S.
- Participants are partners.
- Trust will be earned through transparency.
- Participants have access to their information.

- Data will be accessed broadly for research purposes.
- Security and privacy will be of highest importance.
- The program will be a catalyst for positive change in research.



All of Us Researcher Workbench

1. Participants share their data with the All of Us Research Program through multiple sources. These data are sent to a secure cloud environment, managed by the Data and Research Center.

2. Participant data is received and funneled through a curation pipeline within a secure repository that connects to the Research Hub tools.

3. Anyone can visit the Research Hub to learn more about the types of data All of Us makes available for research. The **Survey Explorer** and **Data Browser** offer more information about the unique data elements and let visit ors browse aggregated participant data.

6. Publications and research

on the **Publications** page.

findings related to the All of Us Research Program can be viewed











access to the Researcher Workbench to analyze data.

5. Registered researchers in the Researcher Workbench can create research projects using collaborative workspaces, cohort-building tools, interactive notebooks, and more.

4. Researchers register and apply for





All of Us Enrollment Sites



Key Points for all RFAs



Important Dates

- Letter of Intent Due Date: March 7, 2021 <u>nutrprechealth@nih.gov</u>
- Application Due Date: April 6, 2021
- Peer Review Dates: June 2021
- Advisory Council: October 2021
- Earliest Start Date: December 2021



Administrative Details

- FAQs covering many details are available online: https://commonfund.nih.gov/nutritionforprecisionhealth
- NIH Involvement: There will be substantial NIH programmatic involvement in individual projects and Consortium activities.
- RFAs: These are one-off announcements with no revisions or appeals
- Review: Reviews will be in Special Emphasis Panels. Please pay attention to review criteria given in the RFAs.



Administrative Details

- **Eligibility**: Foreign institutions are not eligible to apply. Non-domestic components of US organizations are eligible to apply. Foreign components are allowed. For-profit organizations and NIH intramural program are eligible to apply.
 - Exception: RFA-RM-21-004: Non-domestic components are not eligible to apply, and foreign components are not allowed.
- Institutions may apply to one or more RFAs



Budgeting Details

- "NIH Common Fund intends to commit...." refers to total costs, NOT direct costs
- Applicants are encouraged to budget for Consortium activities, travel to annual consortium meetings, resource sharing, outreach, and meeting attendance as part of their proposed budget.
- NIH may modify budgets on award.



Consortium Assurance

- Applicants must submit a Consortium Assurance under "Other Attachments"
- State willingness to participate in consortium activities
 - Sharing scientific portions of applications
 - Participation in regular meetings
 - Abiding by approved consortium policies
 - Following common protocol elements
 - Providing data to RCC in approved formats
 - Providing biospecimens to the Biobank using approved protocols



Data Flow

Data collection

- All of Us already has some data on participants
- Clinical Centers will collect new primary data from participants
- CCs, Biobank, DAC, MMC, MCAC, and RCC may all generate new data from participants' biospecimens, measurements, and survey information
- Data processing and curation
 - DAC, MMC, and MCAC will clean and pre-process data that they generate
 - DAC, MMC, and MCAC may analyze their respective data separately
 - RCC and All of Us Data and Research Center (DRC) will curate data
 - DRC will upload data to the All of Us Researcher Workbench
- Data analysis and storage
 - All data will be stored in the All of Us Researcher Workbench
 - NPH investigators will analyze combined NPH data in the All of Us Researcher Workbench
 - No data leaves the Researcher Workbench



Planning Year

- Year 1 of all awards will be a planning year
- Activities:
 - Developing consortium committees, policies, and procedures
 - Finalizing research protocols
 - Planning for data standards, anonymization, assembly, curation, access, analysis, and storage
 - Developing a detailed timeline with concrete milestones for the entire study



Consortium Governance

- Steering Committee
 - One PD/PI per NPH award plus NIH staff
 - NIH will appoint co-chairs
 - Subcommittees will form in 1st year as appropriate
- Consortium governance rests with Steering Committee
- Subject to oversight by NIH NPH Working Group
- Groups must work collaboratively and interactively



Milestone-Driven

- NPH is a consortium-driven project and relies on specific milestones and timelines accomplished by each component
- Applicants should include a detailed description of a reasonable timeline for proposed activities with achievable milestones as feasible by the capacity and budget
- Awardees will develop a detailed timeline with concrete milestones for the entire study during the planning year



RFA-RM-21-001 Artificial Intelligence, Multimodal Data Modeling, and Bioinformatics Center



AIMDMB Center

Goals

- To develop comprehensive dietary intervention algorithms that can predict biological responses to a myriad of input data
- To enable adaptive visualization and interrogation of multimodal data with advanced mathematical and computer modeling tools



AIMDMB Center

Expertise

 Applicants should assemble a multi-disciplinary team with expertise in biomedical data science, systems biology, artificial intelligence, and nutrition as well as other biological and physical science expertise.



AIMDMB Center

- Activities in the first years should be targeted towards
 - Development of tools with non-study data
 - Collaboration with the consortium
 - Formulation of Al-specific gold standards for all data types
 - Participating in development of the clinical study protocol, in collaboration with Steering Committee, for defining data standards, curation, and provenance needs
 - Development of transparent, ethical protocols and procedures for working with study data within the All of Us Researcher Workbench
 - Other aspects specific to the AIMDMB Center project's proposed in the application
 - Identification and leveraging other data sets of value to driving development of their tools, technologies, platforms, or algorithms



AIMDMB Center

Pilot projects

- Administrative and Coordination Core must include pilot projects that have significant potential to address developing needs and opportunities.
- These will be determined after the awards have been made and will continue through the study.
- No pilot needs to be outright defined or developed to be included in the application.
- Applicants may suggest example projects that could be undertaken by the AIMDMB Center relative to its structure, proposed projects, or leveraging existing collaborations that will make it unique to other applications.
- AIMDMB Centers are required to allocate a minimum of \$250K per year direct costs, beginning in Year 2 of the research funding cycle – should be built into Center budget



RFA-RM-21-002 Metabolomics and Clinical Assays Center (MCAC)



Metabolomics and Clinical Assays Center

Goals

- To generate targeted and non-targeted metabolite profiles
- To perform or facilitate clinical assays from blood, urine and stool biospecimens



RFA-RM-21-003 Microbiome and Metagenomics Center (MCC)



Microbiome and Metagenomics Center

Goal:

 To perform microbiome, metagenomics and metatranscriptomics analysis of stool specimens collected in the Nutrition for Precision Health study



MCAC/MMC

Budget

 Applicants should not include costs for specimen collection (e.g., supplies, materials, shipping, courier logistics)



MCAC/MMC

Sample collection

- Biospecimens listed in the RFA are a guideline
- The final suite of biospecimens to collect, and their timing, will be determined by the Steering Committee in year 1



RFA-RM-21-004 Dietary Assessment Center



Dietary Assessment Center

Goal:

- To support the side-by-side application of
 - at least one innovative approach to assess dietary intake
 - the Automated Self-Administered 24-hour (ASA24) Dietary Assessment Tool
 - using free-living and controlled feeding studies
- To improve these methodologies through validation, evaluation, and modeling efforts



RFA-RM-21-005 Clinical Centers



Goal

 To enroll participants and implement complex, modular protocols for dietary interventions studies



Modules

- 1: Follow approximately 10,000 participants for up to 14 days to examine baseline diet and physiological responses to a test meal challenge
 - Two clinic visits approximately two weeks apart, with remote data collection during the study period.
- 2: Free-living controlled feeding study that will examine responses to three short-term (~14 days) intervention diets in approximately 1,500-2,000 Module 1 participants.
 - 3 2-week dietary intervention periods with washouts between
- 3: Domiciled controlled feeding study that will examine responses to the same three short-term (~14 days) intervention diets in approximately 500-1,000 participants from Module 1, but not Module 2.
 - 3 2-week dietary intervention periods with washouts between



Sample Size

- Applicants can propose all 3 Modules or Module 1 + one other
 - All participants must do Module 1
 - Some Module 1 participants may then do Module 2 OR Module 3
- Applicants should propose to enroll a feasible number of participants
 - No minimum or maximum requirements



Mixed meal challenges

- The same mixed meal challenge will be conducted in modules 1, 2, and 3
- Applicants should propose one type of mixed meal challenge
 - Should be designed to produce different metabolic responses among individual participants in order to provide individual-level dietary response information for precision nutrition algorithm development
- Mixed meal challenge costs should be included in the budget



Dietary interventions for modules 2 and 3

- The same 3 dietary patterns will be tested in all module 2 and 3 participants.
- Each participant receives all 3 patterns in randomized order and serves as their own control
- Applicants should propose 3 different dietary patterns
 - Should not be designed to induce weight loss
 - Should be designed to produce differential metabolic responses among individual participants in order to provide individual-level dietary response information for precision nutrition algorithm development.
- Costs to administer controlled diets should be included in the budget



Inclusion Criteria

- Adults 18+
- Applicants should propose minimal well-justified inclusion/exclusion criteria
 - Pregnant women, people with chronic diseases/conditions, people without chronic diseases/conditions should all be included
 - Exclusion criteria focused on ability to complete the study ok
- Enrollment of a diverse population is a requirement



Budget

- NIH Common Fund intends to commit approx. \$7M in FY2022 and \$9.5M in FY2023-2026
- 5-6 awards are anticipated
- Budget should reflect actual need, including participant capacity, and modules proposed
- Budget should not include participant incentives



Enrolling All of Us participants

- Where geographically feasible, work with All of Us Health Care
 Provider Organizations (HPOs) to engage and enroll participants
 from the All of Us cohort to participate in the Nutrition for
 Precision Health study
 - It is required than an All of Us Research Program Investigator be part of the research team
 - No specific requirement for All of Us investigator as PI, co-I, etc
 - Can enroll new All of Us participants who then enroll in NPH



Enrolling All of Us participants

- Where it is not geographically feasible to partner with an existing *All of Us* HPO, CCs will implement the *All of Us* enrollment protocol (https://allofus.nih.gov/about/all-us-research-program-protocol) for new *All of Us* participants
 - Will require regulatory onboarding steps including executing a reliance agreement, *All of Us IRB* approval, and an interconnection security agreement to share EHRs and implement the protocol













RFA-RM-21-006 Research Coordinating Center



Research Coordinating Center

Goals

- To provide administrative management and general coordination across the Nutrition for Precision Health consortium
- To facilitate the development and implementation of dietary intervention and assessment studies across the consortium
- Curate Nutrition for Precision Health data prior to transfer to the All of Us Researcher Workbench



Research Coordinating Center

Capitation

- Each year's budget will be limited to a BASE budget
 - \$3.5M in year 1
 - \$2.5M in years 2-5
- RCC will administer a process to provide ~\$2.5M per year in years 2-5 to Clinical Centers for participant incentives
- Applicants should not include the participant incentives in their proposed budget



Connect with us:

- General mailbox: <u>nutritionresearch@nih.gov</u>
- Website: https://commonfund.nih.gov/nutritionforprecisionhealth

Frequently Asked Questions:

https://commonfund.nih.gov/nutritionforprecisionhealth/faqs

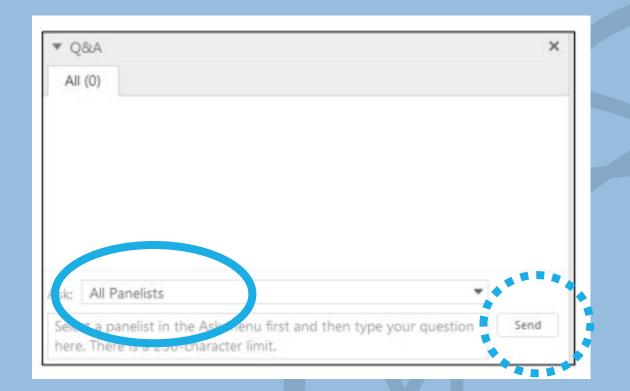
Interested in applying?

We strongly recommend you discuss any application with us in advance and that you submit a LOI.



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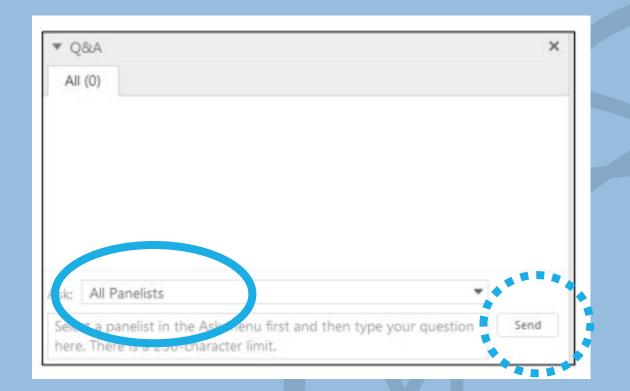
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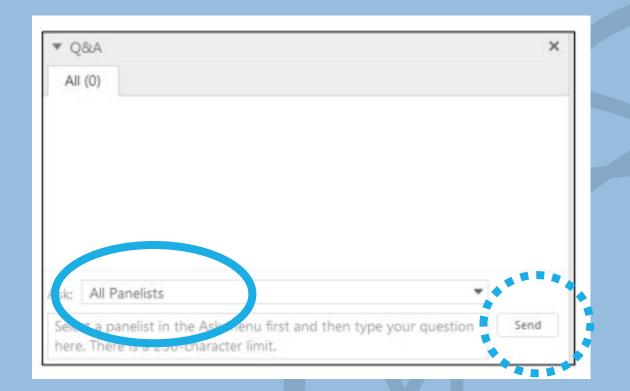






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