

All of Us Research Program



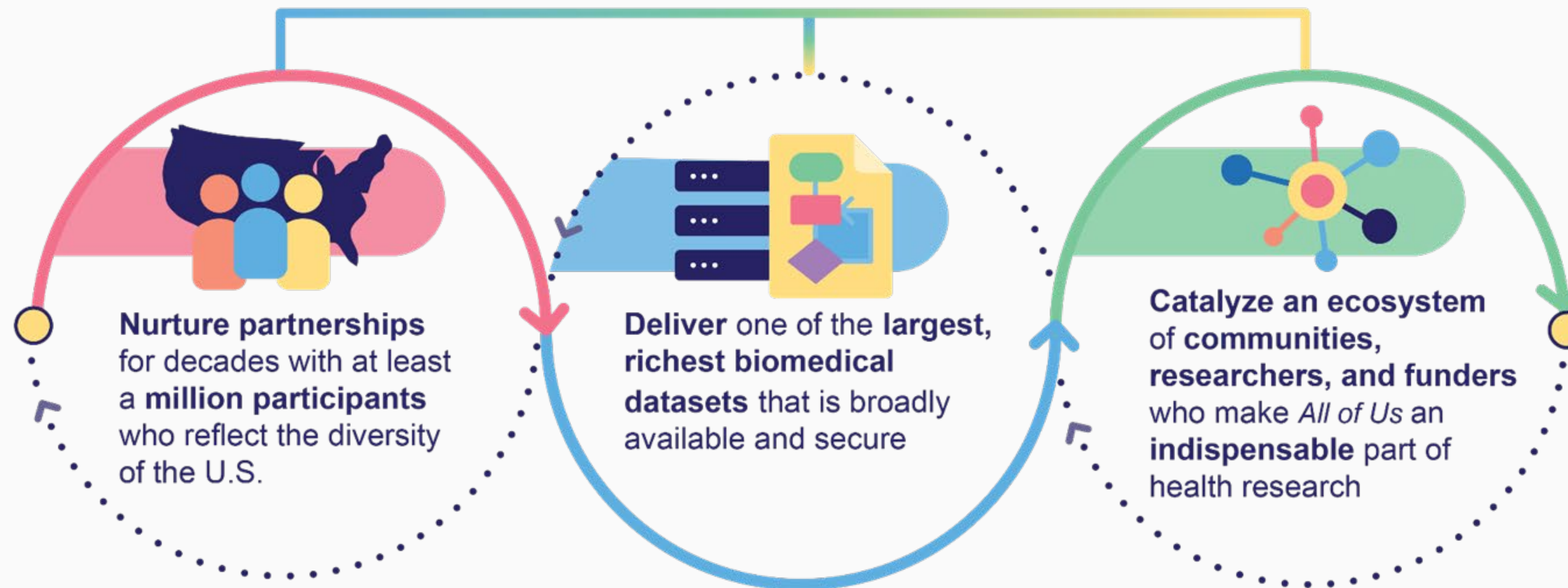
Stephanie Devaney, PhD
Chief Operating Officer
All of Us Research Program

Workshop on Considerations for Returning
Individual Genomic Results from Population-
Based Surveys
December 8, 2022

All of Us Research Program Mission

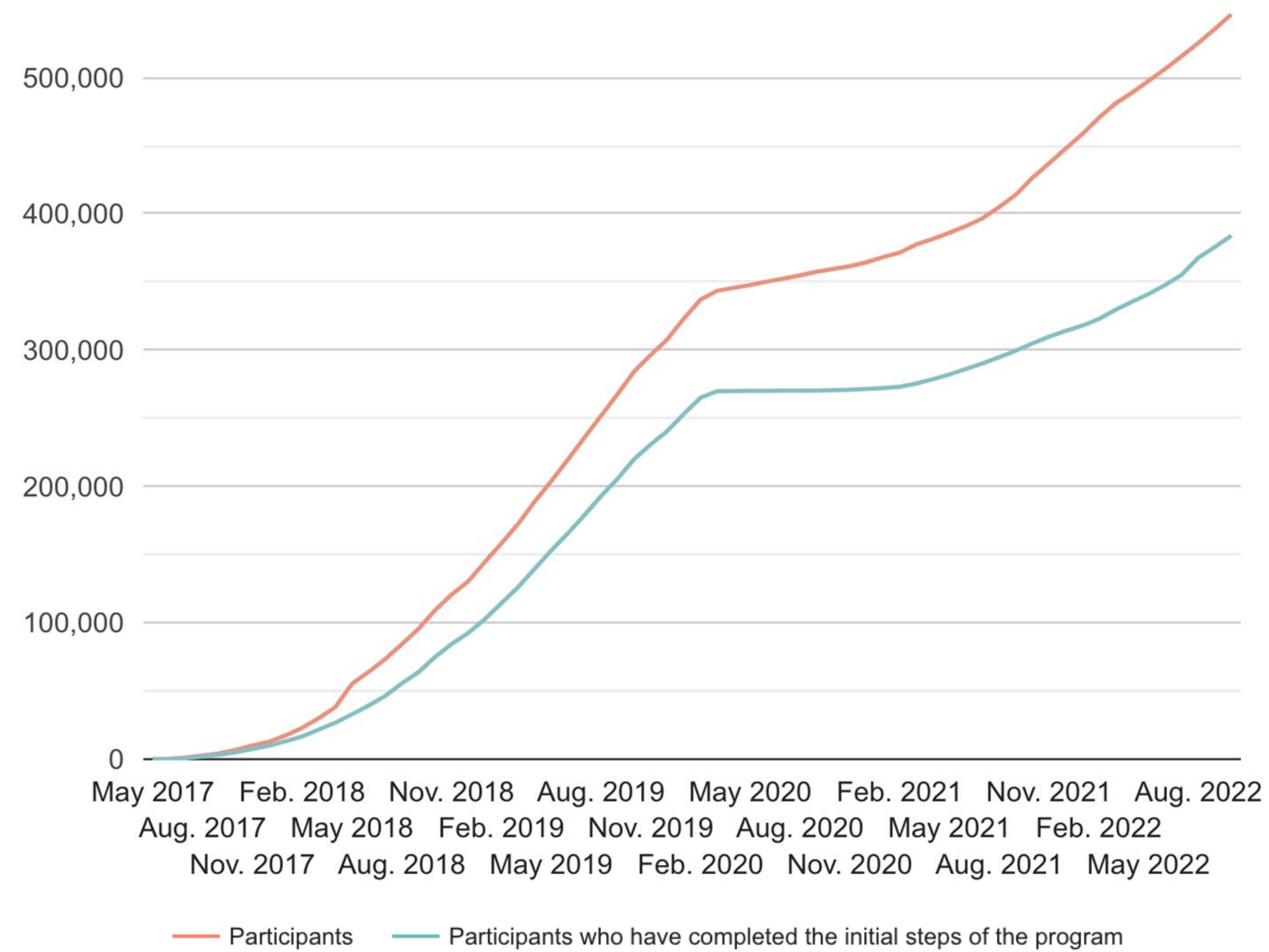
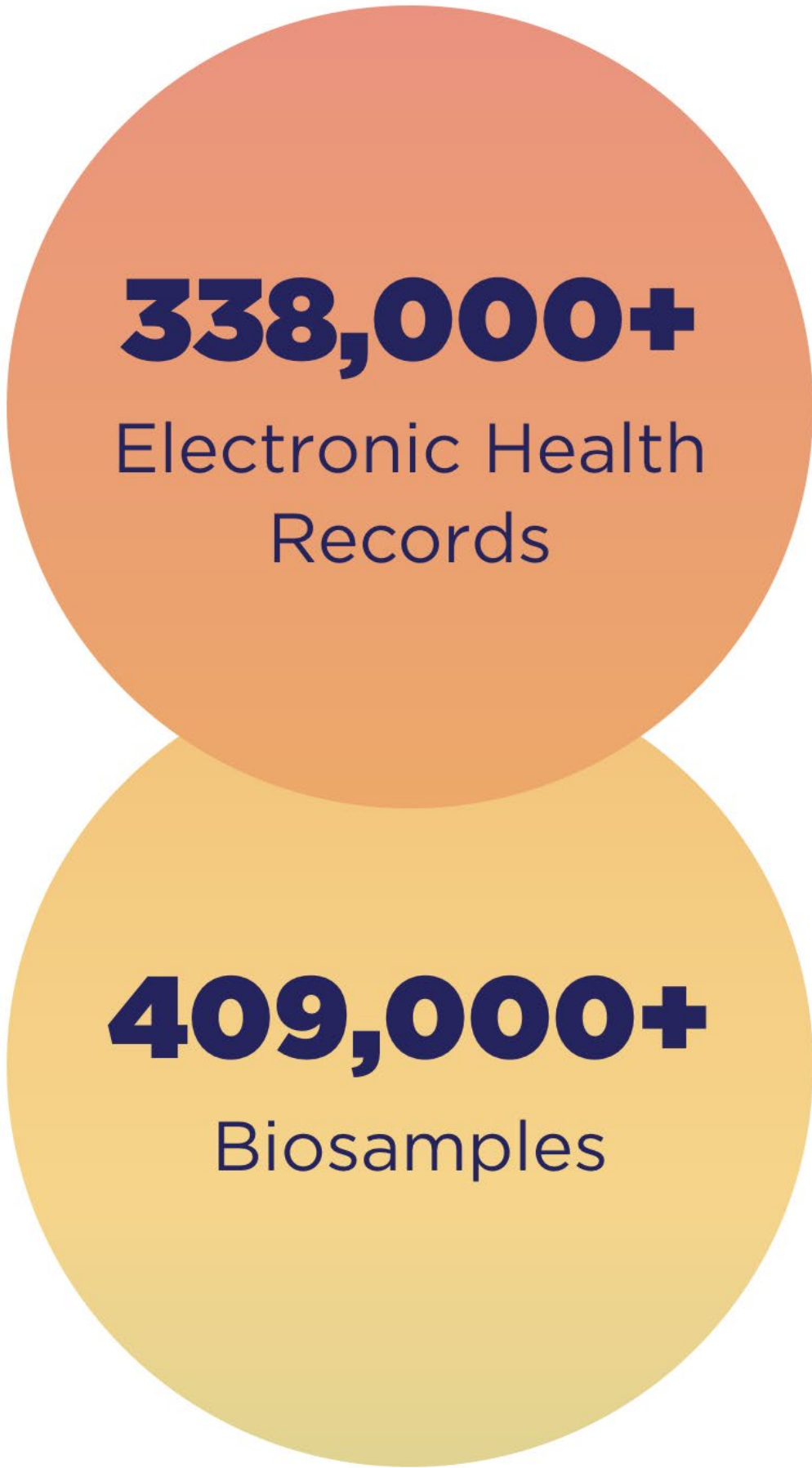
Our Mission

Accelerate health research and medical breakthroughs,
enabling individualized prevention, treatment, and care for all of us



Made possible by a team that maintains a culture built around the program's core values

Enrollment Update (as of November 29, 2022)



Diversity

Includes racial and ethnic minorities as well as sexual and gender minorities, people with low income or limited education, and other groups.

50%+

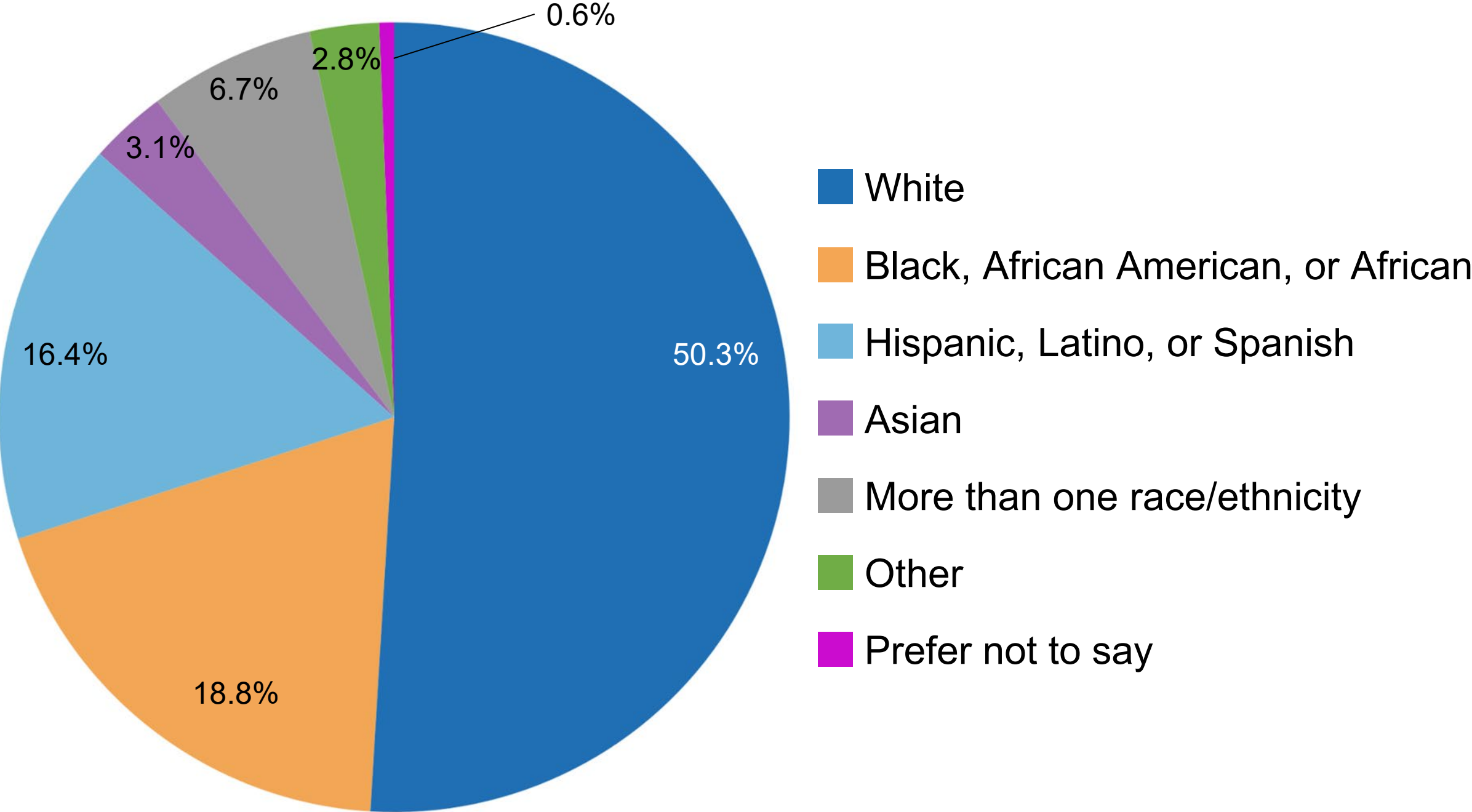
Racial and Ethnic Minorities

80%+

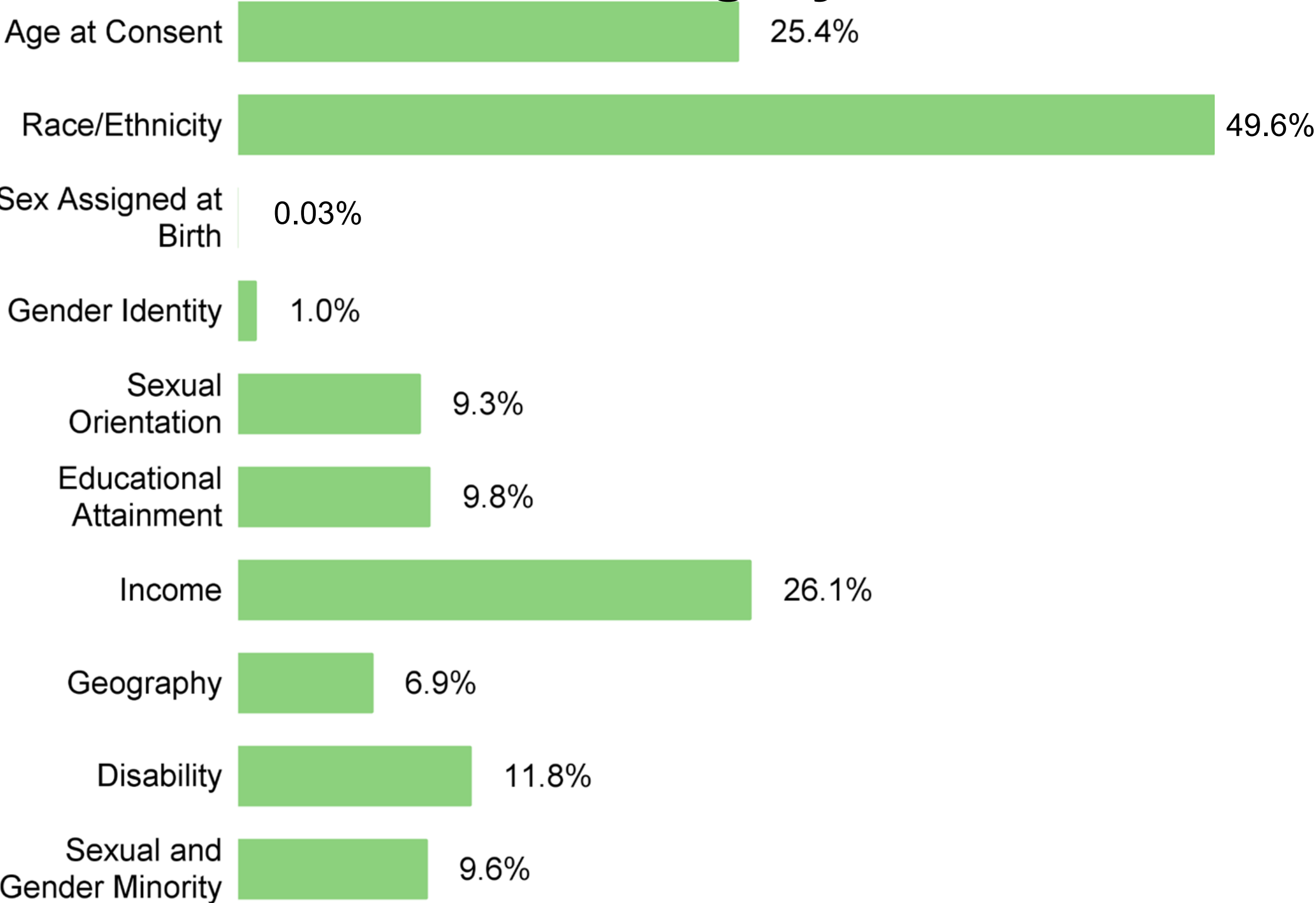
Underrepresented in Biomedical Research

Participant Diversity (as of November 29, 2022)

Race & Ethnicity of Participants



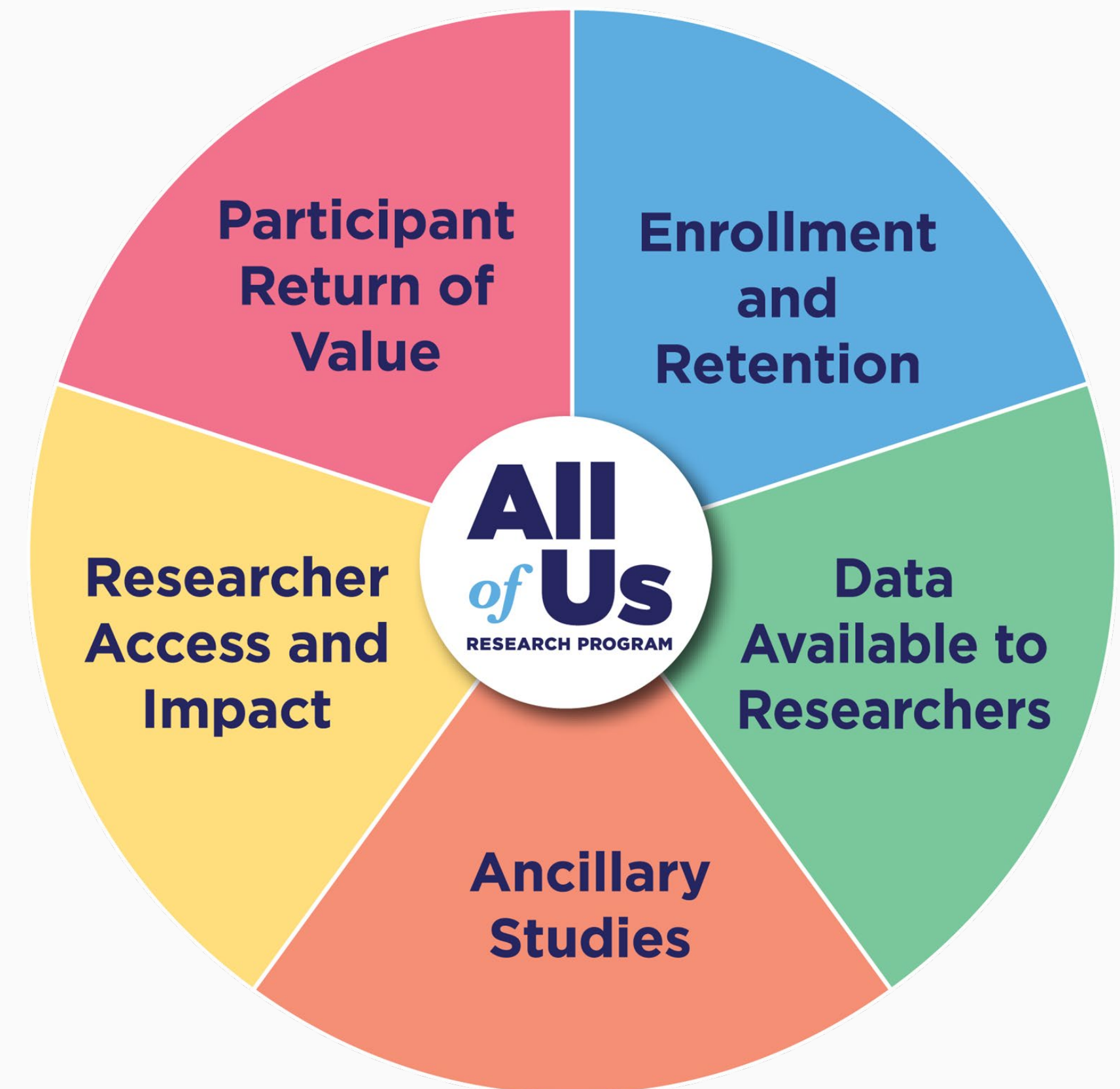
UBR Category



Over 80% of *All of Us* participants are underrepresented in biomedical research

Core Values and Goals

- 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 is accessed **broadly** for research purposes.
- **Security and privacy** are of highest importance.
- The program may be a catalyst for **positive change** in research



A Vision Spanning Three Decades



“All of Us is among the most ambitious research efforts that our nation has undertaken.”

***Former NIH Director,
Francis Collins, M.D., Ph.D.***

A Principle from the Beginning: Returning Information to Participants



“So tonight, I’m launching a new Precision Medicine Initiative to bring us closer to curing diseases like cancer and diabetes, and to give all of us access to the personalized information we need to keep ourselves and our families healthier.”

- President Barack Obama

State of the Union Address, Jan. 20, 2015



The Precision Medicine Initiative Cohort Program – Building a Research Foundation for 21st Century Medicine

“[All of Us] should ensure the responsible return of personal results and information to individual participants and sharing of aggregate findings from its investigations with participants so [they] may have opportunity to benefit from the science.”

- PMI Working Group Report

Sept. 17, 2015

What Do Participants Want?

Community Engagement Studios in 2016



77 Studios in 17 cities with 654 community members

- 16 different demographic subgroups, 4 topics
- 46% racial and ethnic minorities
- 9% sexual and gender minorities

All of Us Participant Partners



Ivey L. Allen
Mississippi



Michelle Anderson
Massachusetts



Lottie Barnes
North Carolina



Keisha Bellamy
California



Randee Bloom
Michigan



Craig Braquet
Louisiana



Larry Briendel
Massachusetts



Joyce Brown
Illinois



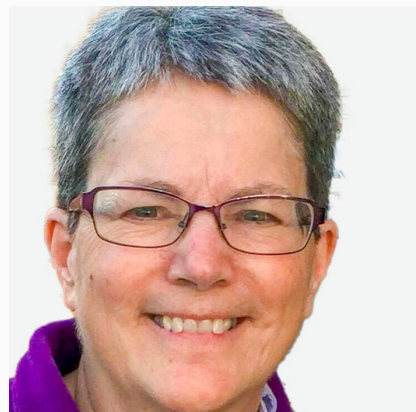
Jeff Buchanan
Tennessee



Daisy Burgos
Connecticut



Hugo Campos
California



Carolyn Cronin
Massachusetts



Sixto Escobar
Massachusetts



Dejen Eshete
Arizona



Miguel Flores, Jr.
Arizona



Edina Harsay
Kansas



Nazia Hussain
Texas



Anna Johnston
Alabama



Roger Levine
California



Juana Mata
California



Aida Milian
New York



Michael Miller
Alabama



Valarie Paige
Mississippi



Marilyn Roman
Florida



Karla Rush
Arkansas



Lynz Sickler
Pennsylvania



David Storm
Kansas



Vannesa Uzoh
Texas



Tiana Vargas
California



Alonzo Walker
Wisconsin



Joyce Bell Winkler
South Carolina

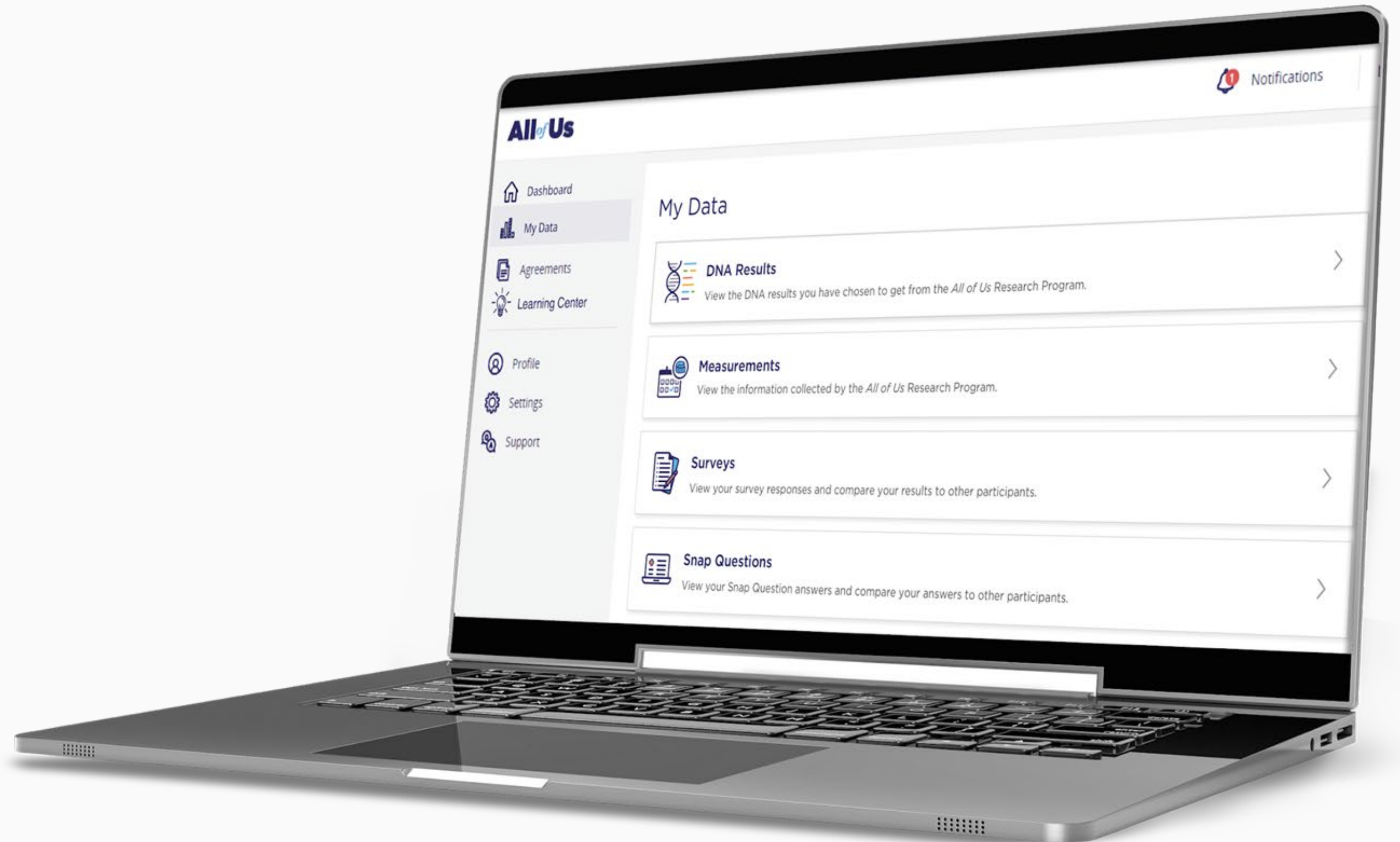


Otis Winstead
Wisconsin

Return of Information to Participants

Participants may receive:

- ***Genetic information***
- Survey data (comparative)
- EHR and claims data
- Ongoing study updates
- Aggregate results
- Scientific findings
- Opportunities to be contacted for other research opportunities



All of Us Consortium Members *(beyond community partners, as of August 2022)*

The Participant Center



Communications & Engagement



HPO Network (Health Care Provider Organizations)

RMCS All of Us California



Illinois Precision Medicine Consortium



All of Us New England



Trans America Consortium



New York City Consortium



All of Us Southern Network



All of Us Southeast Enrollment Center



HPO Lite



All of Us Wisconsin



All of Us Pennsylvania



University of Arizona and Banner Health



FQHCs (Federally Qualified Health Centers)



VA Medical Centers



Participant Technology Systems Center (PTSC)



Biobank



Data & Research Center (DRC)



Genomics Partners



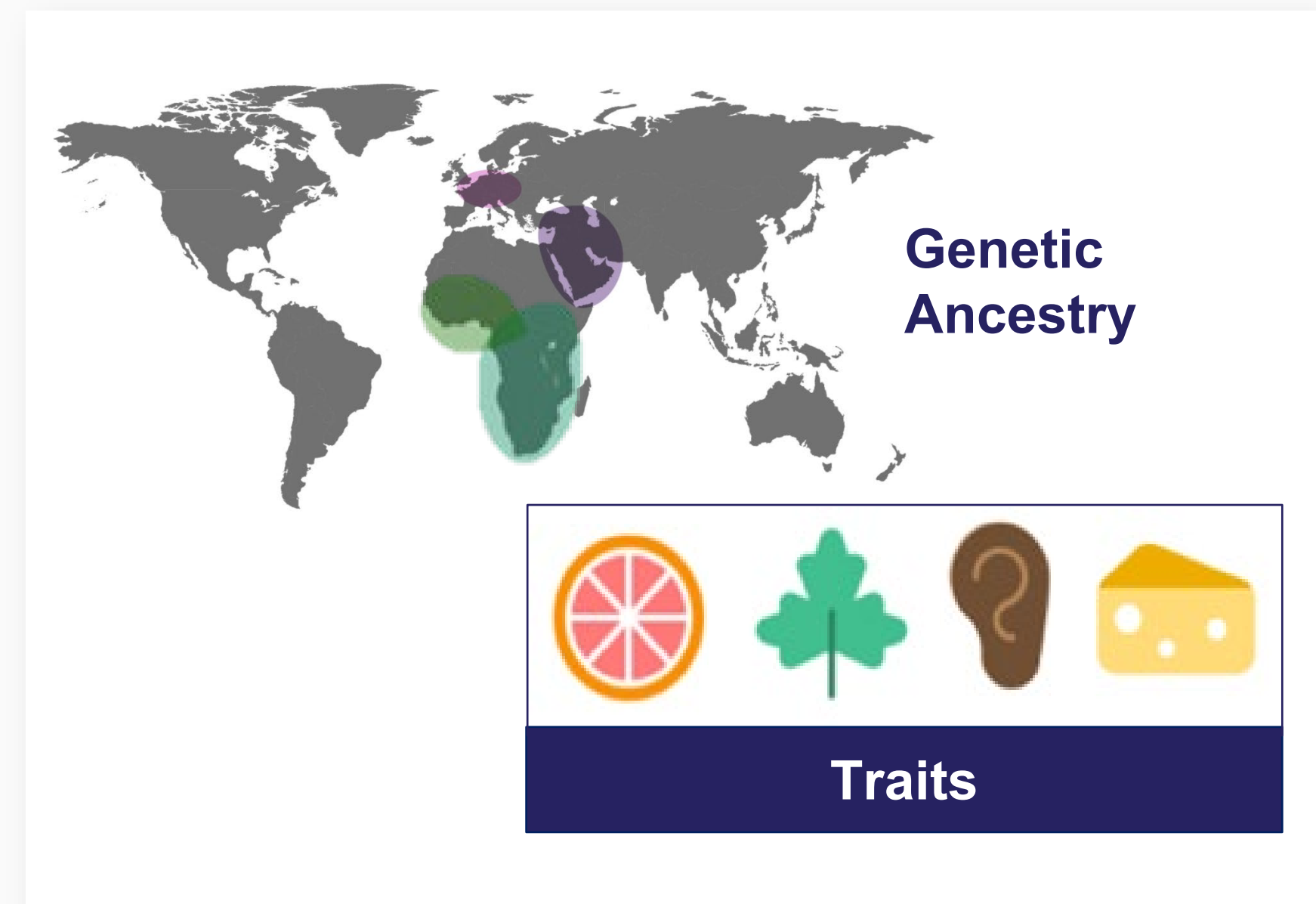
Note: These are not approved lockups and should not be repurposed on assets.

Current *All of Us* Genetics Return Strategy

Engagement	Genetic ancestry and traits results	7 regions (21 subregions)		4 traits
		• Sub-Saharan Africa • Europe • Oceania • Southern Asia	• Eastern and Northern Asia • The Middle East and North Africa • The Americas	• Ear wax • Bitter taste perception • Cilantro preference • Lactose intolerance
	Hereditary Disease Risk Report	59 genes (SNVs + indels)		
Health information		• Breast cancer • Ovarian cancer • Uterine cancer • Colorectal cancer • Prostate cancer	• Melanoma • Brain cancer • Pancreatic cancer • Stomach cancer	• Familial Hypercholesterolemia • Cardiomyopathies • Arrhythmias • Arteriopathies
	Medicine and your DNA Report	7 genes (Common Drugs)		
		• Drug metabolism • Production of molecules (e.g., NADPH) • Drug response • Membrane-bound anion transporters		

Genetic Ancestry and Traits (as of November 2022)

- **Over 180,000 participants sent notifications so far** (email, push, and SMS based on participant preference) to choose if they want to receive results
- **71% complete** genetic ancestry and traits **informing loop choice** (128k)
 - **88%** of those that view any result **view any of the 4 trait results** (bitter taste perception, cilantro preference, earwax type, and lactose intolerance) (113k)
 - **97%** of those that view any result **viewed their genetic ancestry results** (125k)



Genomic Health-Related Return of Results in Pilot Testing

All of Us
RESEARCH PROGRAM

DOB:
ID:

Specimen:
Barcode:
Collected:
Report date:

RESEARCH RESULT — Your doctor will need to confirm this result with a clinical test before using it in your care.



Medicine and your DNA

Our genes affect how we respond to medicine.

They do that in many different ways. Some genes help move medicines to the right part of the body.

This test looked at a few of the genes in your DNA that can affect how medicines are used. The technical term for this kind of information is “pharmacogenetics.”

Doctors and pharmacists use this kind of information when they consider why medicines work differently for different people.

But doctors and pharmacists don’t make decisions based on just DNA. Some other important considerations can be age, weight, health, diet, and other medicines you are taking at the same time.

What is this kind of information used for?

Pharmacogenetics: Medicine and your DNA
Genome Center: Broad Institute of MIT and Harvard, CLIA #22D2055652
Laboratory Director: Heidi L. Rehm, PhD, FACMG

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All of Us
RESEARCH PROGRAM

JANE DOE
DOB: January 1, 2000
ID: 2

Specimen: Whole Blood
Barcode: AOU 000 000 000 0002
Collected: January 1, 2022
Report date: September 29, 2022

RESEARCH RESULT - Your doctor will need to confirm this result with a clinical test before using it in your care.



Your result:

Something very important for your health was found in your *BRCA1* gene.

What does this mean?

- If confirmed by a clinical DNA test, this result means that you are more likely to get some types of cancers than other people.
- It does **not** mean that you have some types of cancers.
- It does **not** mean that you will definitely get some types of cancers.
- **This result is important** and should not be ignored.

IMPORTANT!

Share this report with your doctor.

- This report comes from a research program, so **it is a research result**. Your doctor will need to confirm these results with a clinical DNA test before using them in your care.
- **Do not change your medical care** before this result is confirmed by your doctor.
- **Results provided are from an investigational device.** An “investigational device” is a device that is the subject of a clinical study.

Genome Center: BCM
Laboratory Director: test

Hereditary Disease Risk Report: DNA and the risk for some diseases
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- **Hereditary disease risk** (starting with ACMG59) and **medicine and your DNA** (pharmacogenomics)
- Participants can choose results they want
- Interpretation begins at Clinical Validation Laboratories
- All results supported by Genetic Counselors
- Participants can obtain clinical results available for ACMG59 at no cost

Things We've Learned Along the Way

- . **Participants want this information.**
 - Research participants (both prospective and consented participants) want individual level information back about themselves.
 - Among types of information people want back, genetic information has consistently ranked at the top of the list
- . **It takes commitment of time and resources**, especially to:
 - Design and build/identify the infrastructure needed with strong security and privacy standards
 - Comply with all regulatory requirements
 - Establish the workflows and core processes
- . **Ensure support is in place for participants**
 - *All of Us* established a network of expert organizations to run the analyses, build the technology and communication pathways, provide materials and live support through genetic counselors for return of actionable health related results
 - Offering clinical confirmation for any HDR + result
 - Recontact of participants is critical
- . **There's still a lot to learn.** We're at the very beginning of returning health-related genetic results. We offer continued discussion along the way.

Thank You!



ResearchAllofUs.org



National Institutes
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#JoinAllofUs