



UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

Variant Consensus Reporter:

Increasing the Confidence of Variants in Whole Exome Sequencing via a Consensus Approach

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Biomedicine: Unprecedented Views of Our Molecular Make-up & Disease



There are three things extremely hard, Steel, a Diamond, and to "know one's self"

- Benjamin Franklin, Poor Richard's Almanac

Molecular Medicine is Based on DNA & its Derivatives



⊘ DNA: 4 base code → instructions → cellular actions
⊘ Genome: entire DNA structure
⊘ Gene: sections of the genome that code for protein

Fruits of the Human Genome Project

Human Genome Project:

Time	Cost
1988 – 2003 (~15 yrs.)	\$2.7 billion

Yielding a nearly complete map of the DNA sequence

O Today:

Time	Cost
\sim few days	< \$10K

Oncology is seeing some of the biggest impacts

- Advanced molecular diagnostics will show an example
- New classes of therapeutics / drugs

Genetic Origins of Cancer



Ocancer is a disease of the genome at the cellular level

- *O* Each cancer has an entire genome in it, only it is mutated
- Personalized or Genomic Medicine Linking the best drug for a particular clinical condition based on your genetic make-up

Cancer is a Disease of the Genome

ONA & Spelling

- In the world of DNA spelling counts!
- Even a single base substitution can have deleterious effects on protein function

O Genomics

- What are the causes of disease?
- How to better threat and intervene?
- Ø Molecular medicine based on your genetic code



Types of Variants in DNA

Variant

- O Differences from the "normal" / reference genome
- If present, is it meaningful? (possible cause of disease)

Variant Type	Example
SNP (Single-Nucleotide Polymorphism)	$A \rightarrow C$
Insertion	$T \rightarrow GTC$
Deletion	$GTC \rightarrow T$
MNP (Multiple-Nucleotide Polymorphism)	$CCTG \rightarrow TGCT$

Tumor DNA targeted re-sequencing assay "Foundation One" <u>commercial assay</u>

THERAPEUTIC IMPLICATIONS

Genomic Alterations Detected	FDA Approved Therapies (in patient's tumor type)	FDA Approved Therapies (in another tumor type)	Potential Clinical Trials
KRAS Q61H	None	Trametinib	Yes, see clinical trials section
MTOR V2006L	None	Temsirolimus Everolimus	Yes, see clinical trials section
TSC1 A944T	None	Everolimus Temsirolimus	Yes, see clinical trials section
TET2 Q888*	None	None	Yes, see clinical trials section
LRP1B loss	None	None	None

Sample source: FFPE tumor block, 10 slices ~5μm thick, macro-dissected, no germ line material
Instrumentation: Illumina HiSeq 2500
Time: 2 wks
Cost: \$5800
Business model: Information company

Whole Exome Sequencing (WES) Methods

ONA extracted from Multiple Myeloma (MM) cell lines
 ORPMI-8226 and U266

Whole Exome Sequencing (WES) was performed:

Illumina HiSeq 2500

Alignment of short reads:

O BWA / STAMPY

• Variant calling performed:

O GATK, VarScan2, and mpileup

VCF files used as input to Variant Consensus Reporter



The Bad



One Solution: Consensus Analysis

Why: Common Approach used in Machine Learning

Variant Consensus Reporter (VCR)
 Input: Various .vcf files from variant callers

 Output: Union and/or intersection of records in .vcfs
 Output could be fed to functional annotators (i.e., ANNOVAR, snpEff)

Essential Contents of a VCF File



Interactive User Interface

🖳 Variant Co	onsensus Reporter		
VCF Files			
File A	C:\Users\petersonericha\Desktop\tes	۲	
File B	C:\Users\petersonericha\Desktop\tes	\bigcirc	Choose Which File's Attrs. to Keep
File C	C:\Users\petersonericha\Desktop\tes	\bigcirc	
Min. Qualit Max. Absol	y Score 5		Process



Automatic Graphical Results



Conclusion

Ø Biomedicine is evolving at an ever accelerating pace
 Ø Human Genome Project was a major precursor

Now able to interrogate the genome at the molecular level

Variants discovered within DNA helps elucidate mutations which might cause disease

Variant Consensus Reporter (VCR) is a custom software tool designed at UAMS

O Can help to gain more confidence in the variant calls of various variant callers

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