

Planning for informatics in your grant applications

August 3, 2018





Center for Research Informatics

Applications - Systems - Bioinformatics - Data warehousing - Clinical trials

At the end of this talk, you will...

- Know what parts of a grant need informatics consideration
- Understand how important it is to seek help early
- Feel comfortable reaching out to CRI and asking for help




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RESEARCH
INFORMATICS

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WELCOME TO THE CRI

AT THE UNIVERSITY OF CHICAGO

WHO WE AREWHAT WE DO




GET STARTED NOW



ACQUIRE DATA

Explore clinical data available for research and make a data request.


Clinical Research Data Warehouse
Cohort Discovery



ANALYZE DATA

We offer high-performance computing and advanced bioinformatics analysis for the most complex datasets.


Bioinformatics Core
High Performance Computing
Computing Resources



STORE DATA

Our storage is secure, standards-compliant, and backed up daily.


CRI Data Storage



MANAGE DATA

Manage studies, surveys, and databases for research.


REDCap
Clinical Trials Informatics




FIND A CUSTOM SOLUTION

Learn more about the CRI's tailor-made research solutions.


Custom Applications




ECHO
Environmental Influences
on Child Health Outcomes



Elligo/FDA Data
Harmonization



Publication
Highlight:
Science, January
2018



GAIN Consortium
Genomic Assessment
Improves Novel Therapy

Like what you see? We're just getting started.

RESEARCH. POWERED BY THE CRI.

CRI vs. ??

- CBIS
- Research Computing Center (RCC)
- Computation Institute (CI)
- ITS
- CDIS
- Biostatistics core
- CHDSI



The idealized process...

- Have an idea
- Get preliminary data
- Write a proposal
- Get funding
- Do work
- Repeat

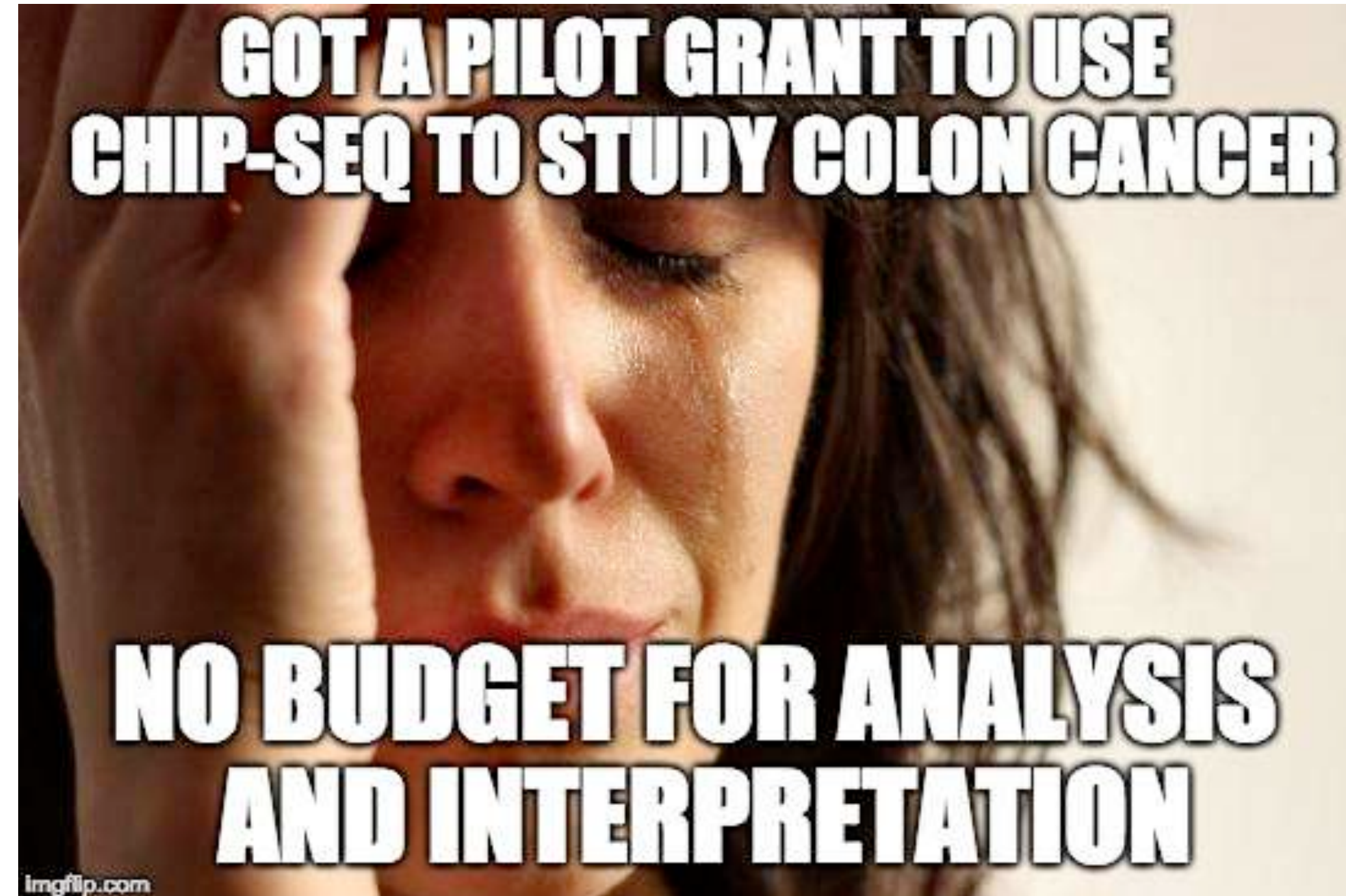


A more realistic process

- Have an idea or an extension of current work
- Apply for grant using old preliminary data
- Get award for new work
- Figure out how to actually do (and pay for) the work



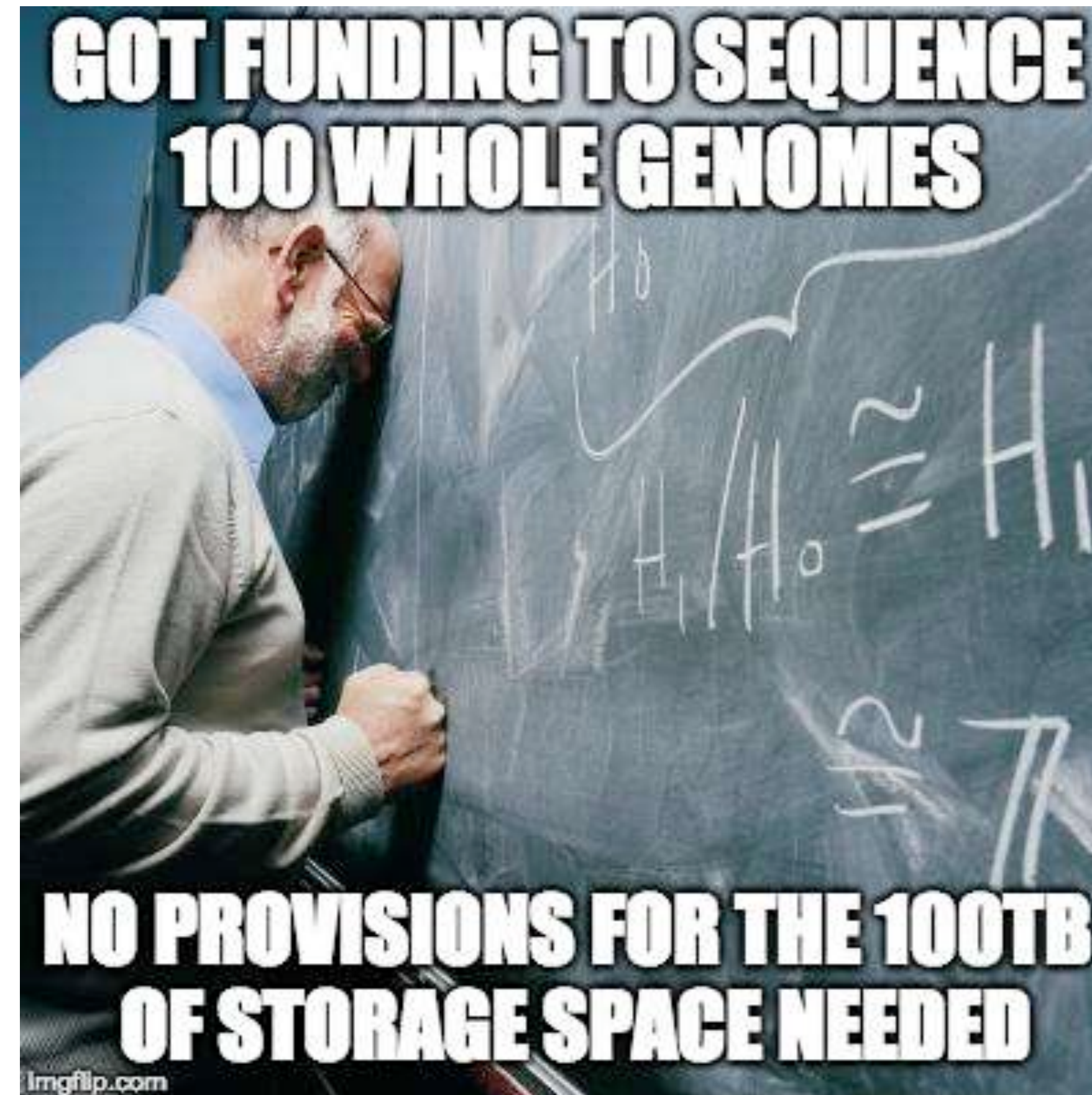
Scenario #1 - The sequencer



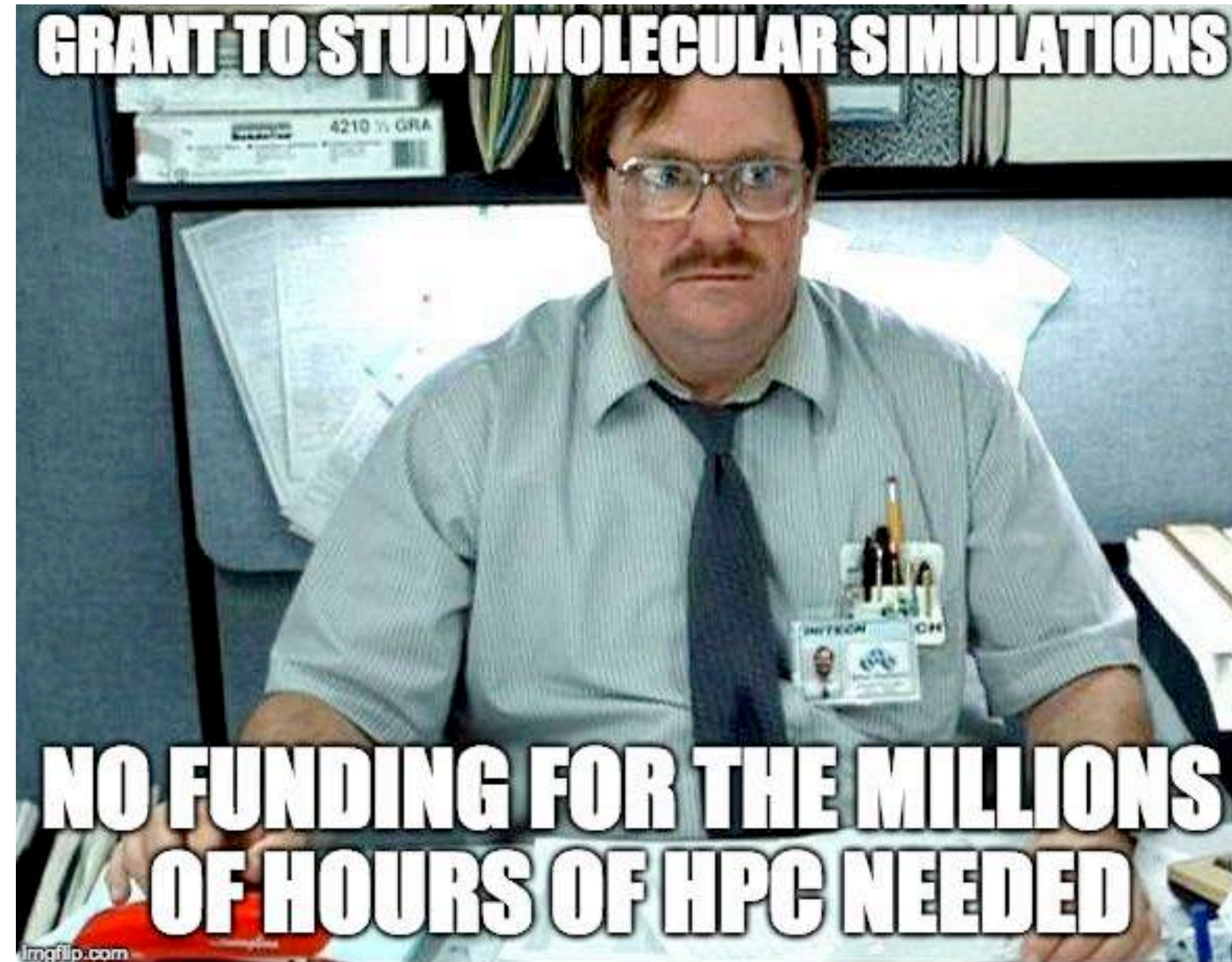
Scenario #2 - The multi-center trial



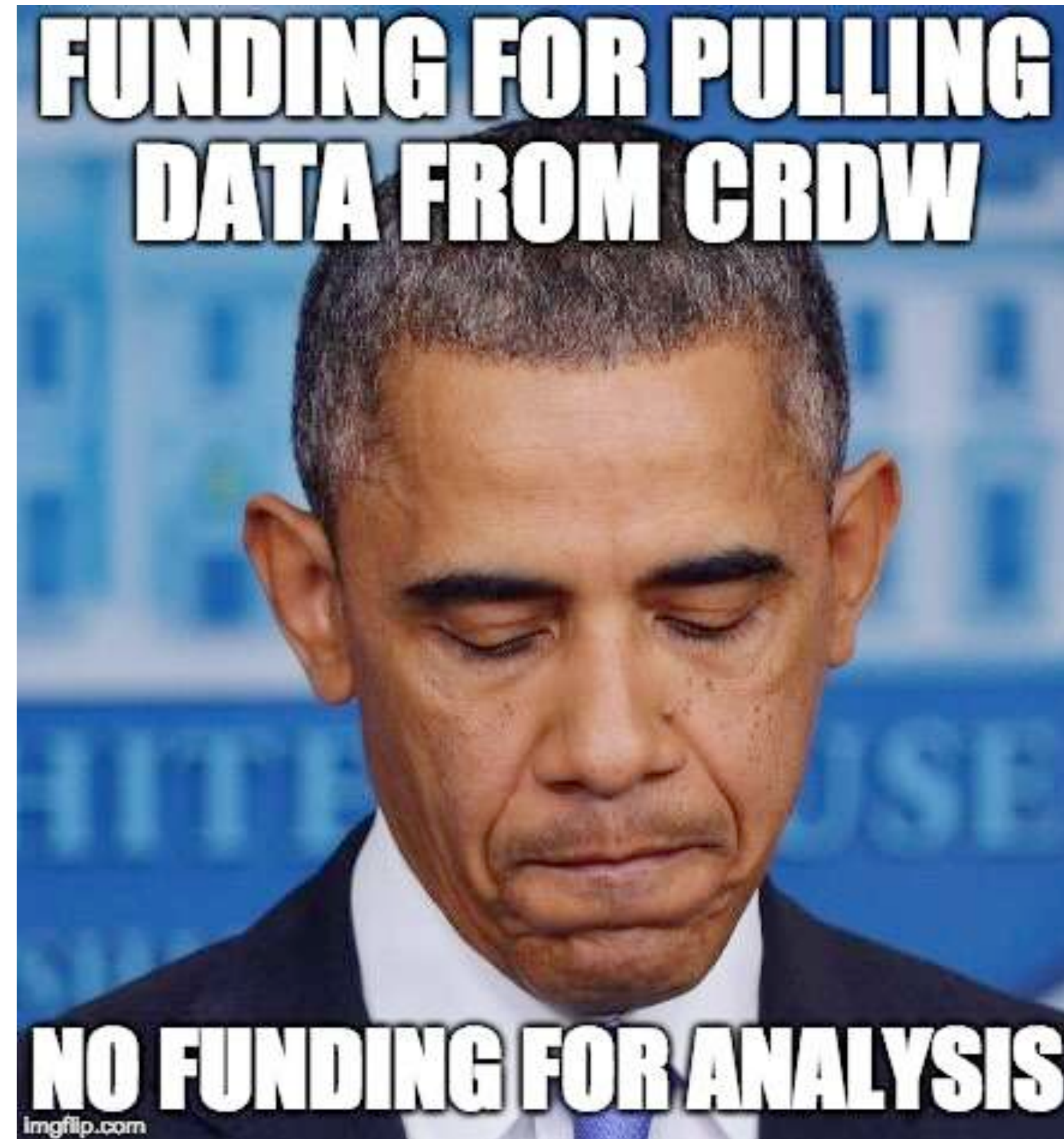
Scenario #3 - The Big Data™ user



Scenario #4 - The simulator



Scenario #5 - The analyzer



There are many opportunities to consider informatics resources

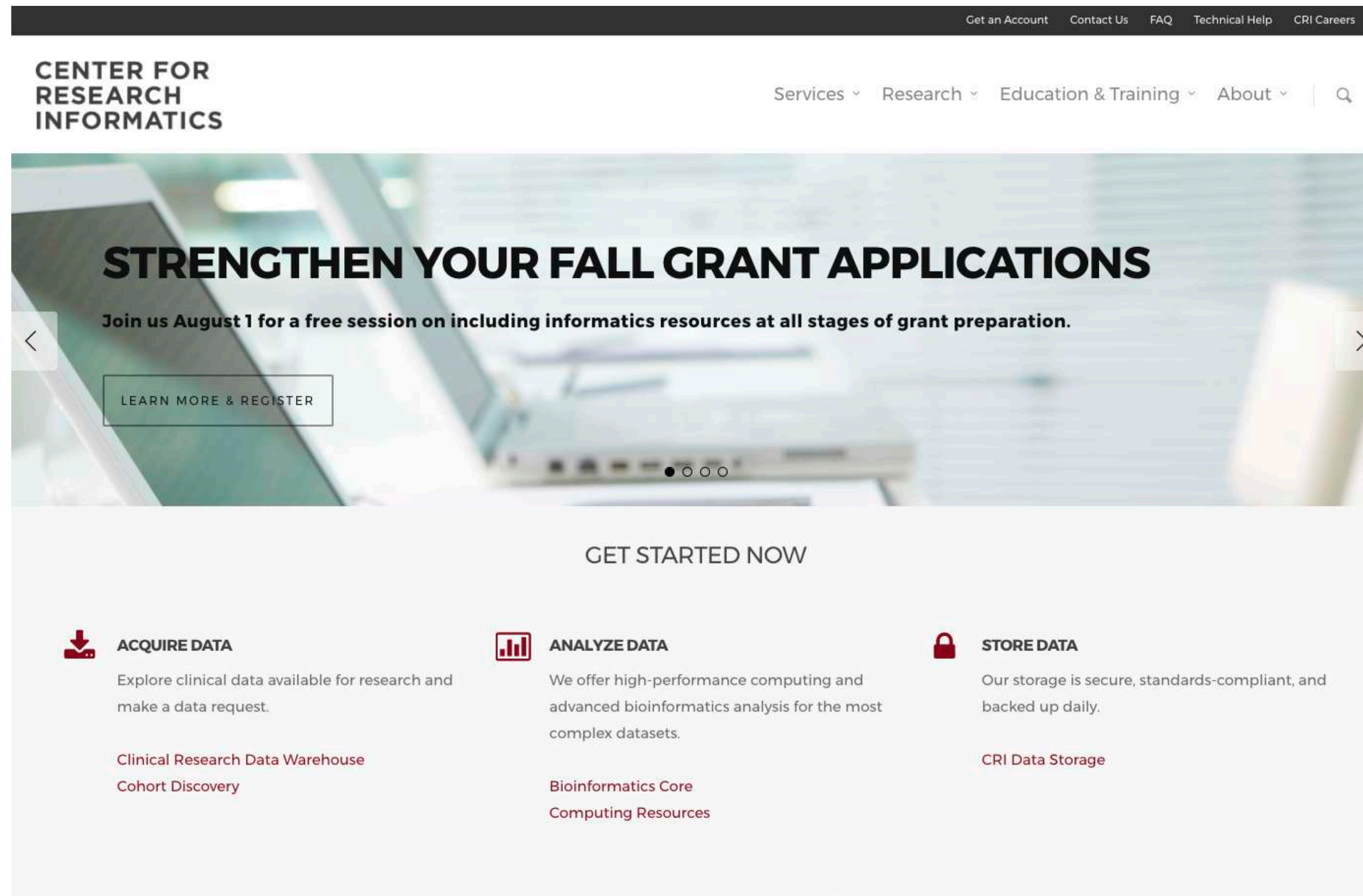


The best time is when you're just thinking about a project or writing about it.



Getting informatics help

<http://cri.uchicago.edu>



The screenshot shows the homepage of the Center for Research Informatics. At the top, there is a navigation bar with links: Get an Account, Contact Us, FAQ, Technical Help, and CRI Careers. Below this, the header includes the Center for Research Informatics logo and a main navigation menu with links: Services, Research, Education & Training, and About. A search icon is also present. The main content area features a large banner with the text "STRENGTHEN YOUR FALL GRANT APPLICATIONS" and a sub-header "Join us August 1 for a free session on including informatics resources at all stages of grant preparation." A button labeled "LEARN MORE & REGISTER" is positioned below the banner. Below the banner, there is a section titled "GET STARTED NOW" with three columns of information:

- ACQUIRE DATA**: Explore clinical data available for research and make a data request.
Clinical Research Data Warehouse
Cohort Discovery
- ANALYZE DATA**: We offer high-performance computing and advanced bioinformatics analysis for the most complex datasets.
Bioinformatics Core
Computing Resources
- STORE DATA**: Our storage is secure, standards-compliant, and backed up daily.
CRI Data Storage

slv@uchicago.edu

support@rt.cri.uchicago.edu



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BIOLOGICAL SCIENCES



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Common to all proposals

- IRB writing and positioning
- Contracts, data use agreements
- Data storage, movement, backup
- Letters of support
- Facilities and resources documentation
- Data governance and stewardship
- Data sharing / software dissemination



IRB writing / positioning

- CRI has extensive experience in writing IRB protocols and shepherding them through the process
- Many of the issues have already been encountered for other proposals
- Engage the CRI early on in the process



Contracts and data use agreements

- Sharing data outside the BSD requires an agreement
- Contracts may be needed for IP, data use, etc.
- Monthly meeting with CRI, OCR, IRB, legal, and security to discuss and address these issues **proactively**



Data storage, movement, backup

- CRI has extensive storage and backup capabilities
- Every investigator gets 2TB storage and backup for “free” as a lab share
- More extensive data usage needs to have a budget



A word about storage

These aren't good places
to store your data.
Why?

- Not HIPAA compliant
- Insecure
- No redundant backup
- Little chance of recovery if loss

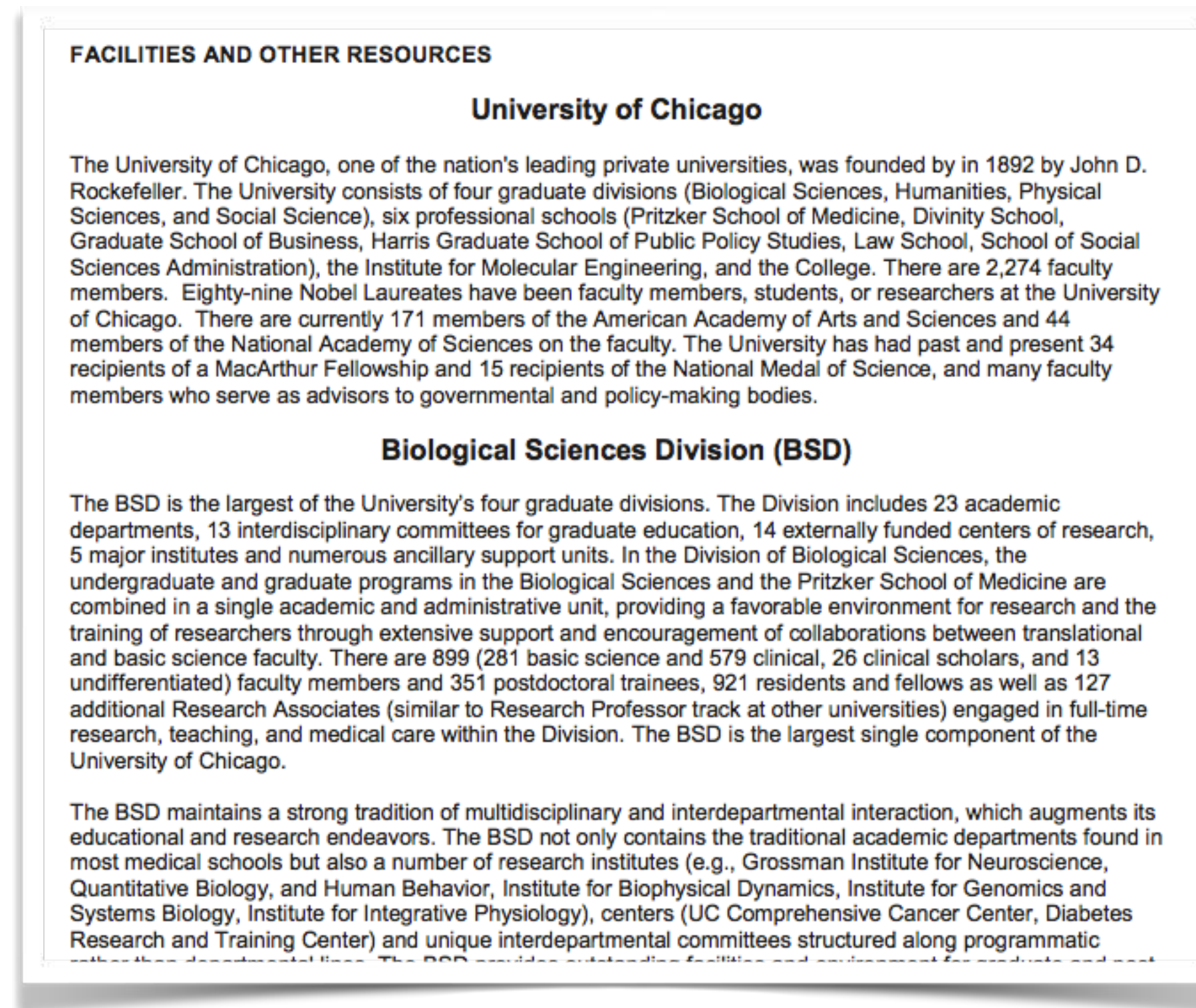


Letters of support

- General letter from CRI
- Specific support for project from CRI leadership
- Contact the CRI director service line director for any LoS issues
- Do this early. A draft is always appreciated.



Facilities and resources pages



CRI has boilerplate language for grants



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Common

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Bioinformatics

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CRDW

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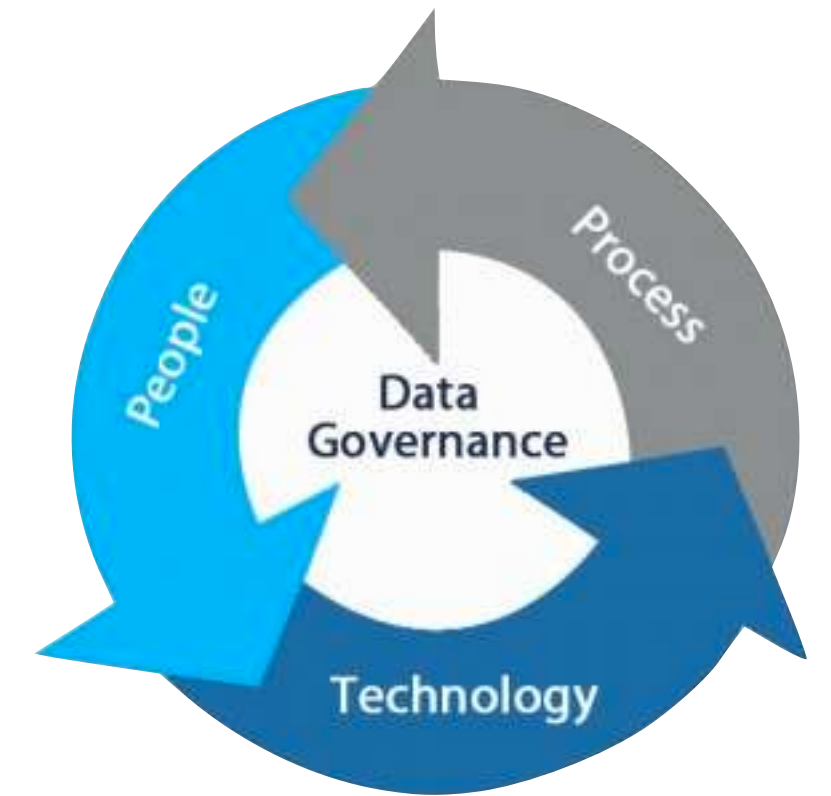
Applications

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Systems

Data governance and stewardship

- Grant readers are now looking for documentation of data governance procedures
- CRI can help document these procedures for your proposal



Examples of data governance considerations

- Who controls access to data?
- How is security documented?
- Will people have encrypted laptops?
- Is the storage HIPAA compliant?
- Are data being backed up regularly?
- How are data being moved securely between researchers?

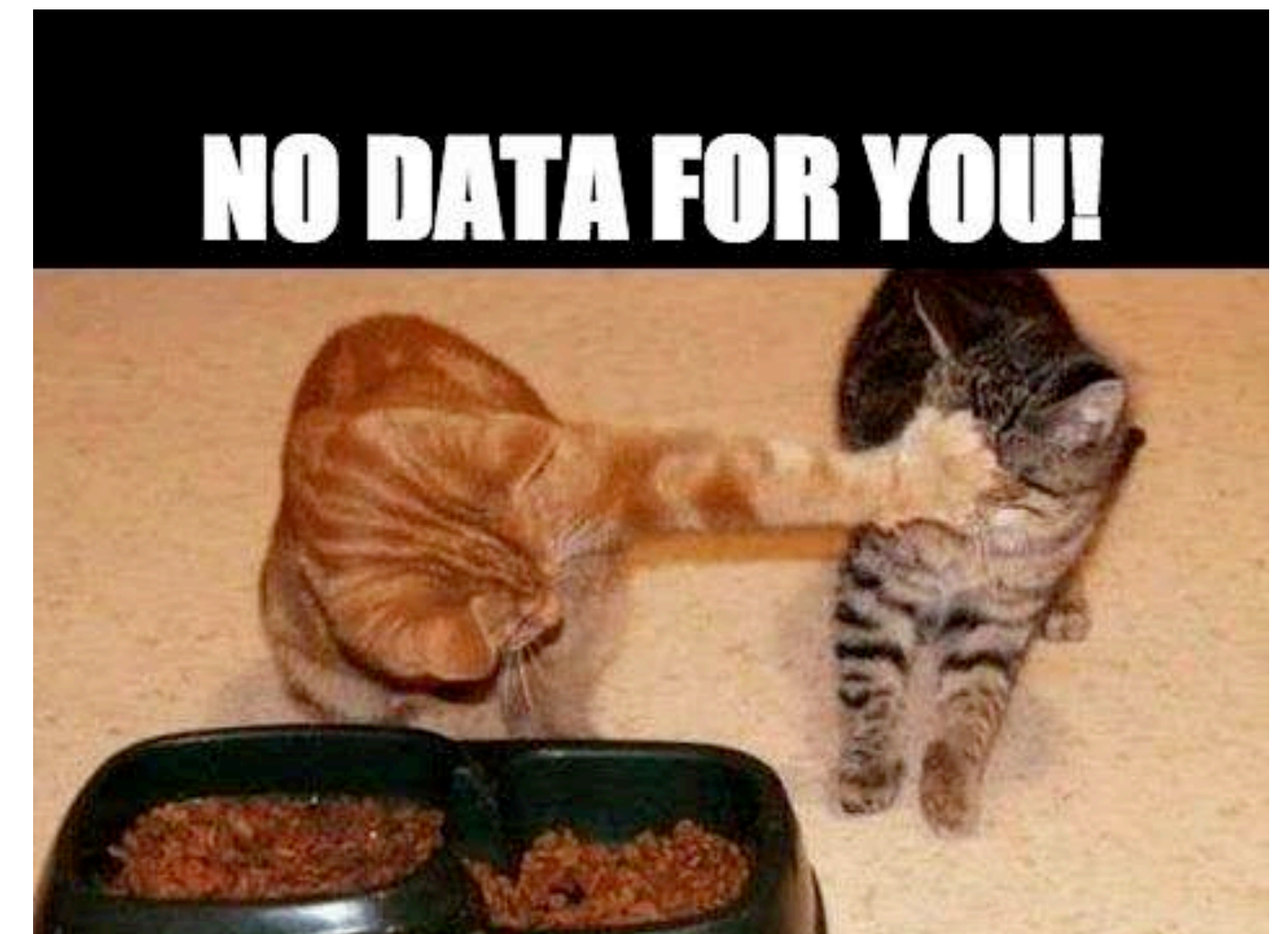


Failure to address these questions adequately can doom a proposal.



Data sharing plan

- Data sharing
 - Discussion of how data will be deposited in common repositories and shared
- Software dissemination
 - How will software be shared?
 - What kind of license will be used?
- CRI will help with this



Bioinformatics considerations

- Methods and study design
- Budget planning for data generation
- Grant writing - preliminary data, methods, research plan
- Data storage, movement, backup
- Analysis and interpretation
- Integration of multiple data sources
- Manuscript preparation and submission



Bioinformatics - Methods and study design

- What kind of analysis?
RNA-Seq? ChIP-Seq? WGS? WES?
- What depth of coverage?
- Power calculations: How many samples?
Technical replicates? Biological replicates?



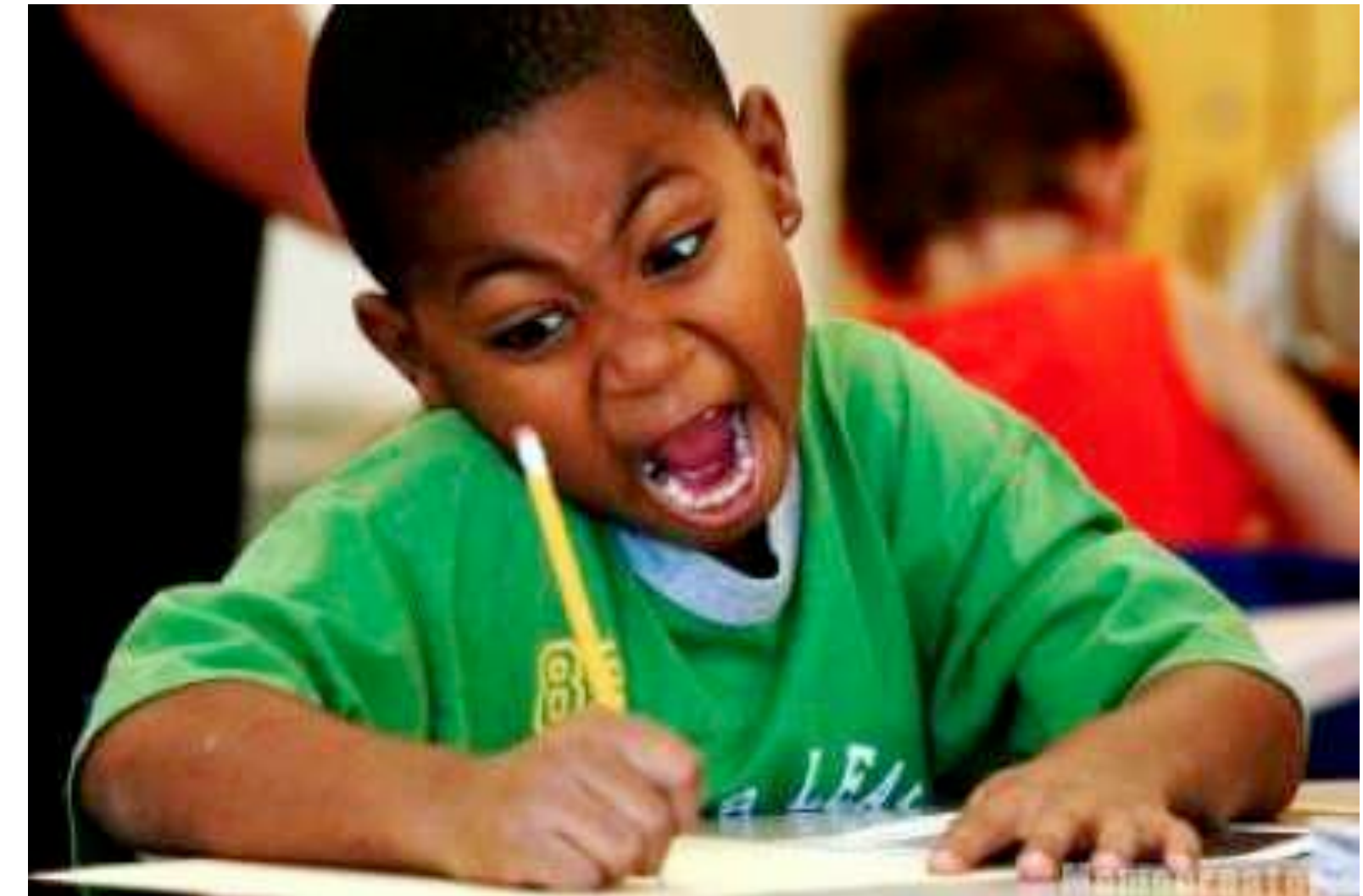
Bioinformatics - Budget planning for data generation

- How many chips? What cost to run?
- How about sample collection and preparation?
- CRI can help broker this process



Bioinformatics - Grant writing

- CRI can help with all phases of grant writing
 - Background
 - Preliminary data
 - Methods
 - Research plan



Bioinformatics - Data storage, movement, backup

- How much storage is needed?
- How will data be transferred between investigators?
- Are data being redundantly backed up?
- CRI can help ensure that all phases are secure



Bioinformatics - Analysis and interpretation
















Bioinformatics - Analysis and interpretation

- Best to involve a bioinformatician from the start
- Partnership is key for a successful collaboration
- Project time is charged on an hourly basis or through dedicated time on grants
- Co-authorship is expected, where appropriate
















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2018

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Bioinformatics - Data integration

- Consider both phenotype and genotype data
- How will the clinical data be collected?
- Who is integrating these data into the analysis?
- CRI can get the clinical data and integrate it with the genomics information - this may require engaging the CRDW



Bioinformatics - Manuscript preparation and submission

combining data from these batches difficult. We removed two outliers and the batch of 8 samples with the largest variation. We then applied *ComBat* algorithm to adjust the batch effects among the rest of 46 arrays. For Germany data set, no obvious outliers were observed. The same batch effect correction procedure was performed.

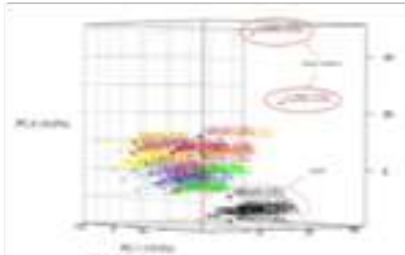


Fig. 2. Illustration of the outliers and batch effects in the COG gene expression data

Differential gene expression analysis identified 33 genes that expressed differently between two survival statuses in the COG data set

We applied moderated t-test implemented in the *Limma* package to the expression data of 10,824 preprocessed genes in the COG data set. The total of 33 genes were identified as differentially expressed between alive and dead sample group (FDR < 0.2 and |fold change| > 1.3) (Table S1). It is noted that the threshold for DE genes are less stringent compared to commonly used cutoff (FDR < 0.05 and |fold change| > 1.5-2). The subsequent functional enrichment analysis reveals that GO terms such as integrin binding (GO:0005178), cell migration (GO:0016477), cell adhesion (GO:0007155), regulation of cell proliferation (GO:0042127), blood vessel development (GO:0001568), response to wounding (GO:0009611), etc. were significantly enriched in the DE genes (Table S2).

Candidate gene expression signatures from DEGs have better prognostic performance in the COG data set than that of the random gene sets

For random signatures of 5, 10, and 20 DE genes, a signature testing procedure described in section 2 was applied. Fig. 3 shows that the random 5-gene candidate signatures from DE genes have average higher AUCs compared to the random gene sets in the COG data set. Similar results have also been observed in size 10 and 20 gene sets. This suggests that the candidate prognostic gene signatures could be derived from the DE genes between the different clinical outcomes.

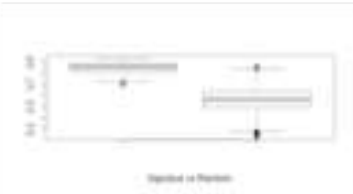


Fig. 3. Boxplot of AUCs between 5-gene candidate signatures and random gene sets

We also selected 5, 10 and 20 DE genes according to their VIM ranks and conducted the signature testing. The AUCs are compatible with the random signature sets. Candidate signatures based on VIM ranks can be used to reduce the number of random sampling of the signatures.

Putative gene signatures identified using random forests classification in the COG data set

By applying the procedure described in Section 2 and illustrated in Fig.1, we trained and tested 100 candidate signatures from 33 DE genes for each size 5, 10 and 20 gene set. Table 1 shows the selected signatures with higher AUC among 300 signatures.

Table 1. Selected candidate gene signatures for the prediction of the survival status in the COG data set

Signature	AUC	Accuracy	Sensitivity	Specificity
CTSC,ANPEP,ITGA9,DCBLD1	0.925	0.929	1.000	0.900
CTSC,ANPEP,ITGA9,DCBLD1	0.913	0.857	1.000	0.800
SLC29A1,CTSL,SPAN15,DDIT3,MR2	0.925	0.857	1.000	0.800
DCBLD1,GSTM2,LYN,RAFU015	0.925	0.857	0.750	0.900
ANPEP,CTSC,ITGA9,LOC100132167,NR1H3,PLK1	1.000	1.000	1.000	1.000
CTSC,DCBLD1,RGS16,TEF,CCL18,SLC29A1	1.000	0.929	1.000	0.900
LOC100132167,HEY2,TP53,SLC29A1,RGS16,VWF	0.950	0.929	1.000	0.900
IL6,MR2,CCL18,GSTM2,TP53,CTSC,DDIT3,RGS16,SLC29A1,ITGA9,TEF,HEY2,ICAM1,RPS8KA2	1.000	1.000	1.000	1.000
EMR2,NR1H3,CCL18,SLC29A1,AM1,LOC100132167,PDCL,ANK,ANPEP,ITGA9,ANPEP,ITGA9,TEF	0.975	0.857	0.750	0.900

Validation on the Germany data set showed poor performance of the putative gene signatures from the COG data set

An ideal prognostic gene signature derived from the COG data set is expected to predict the survival status of Germany data set with high accuracy given the expression data from two data sets show similar distribution. However, we did not observe high prediction accuracy, sensitivity or specificity on the validation data set using the best RF classification models from the COG data set (data not shown).

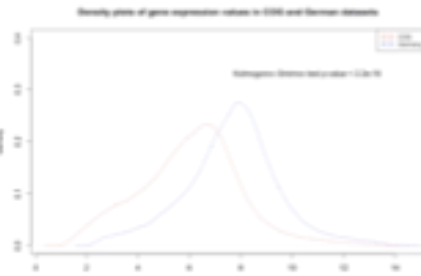


Fig. 4. Density plots of gene expression data in the COG and Germany datasets.

The possible reasons could be (1) the expression data of the validation set is significantly different from the COG data; or (2) the RF

models from the training data set might be over-fitted. Our analysis confirmed that the expression densities in the COG and Germany data set are significantly different (Kolmogorov-Smirnov test P-value < 2.2E-16, Fig. 4).

Differential gene expression analysis identified 24 genes that expressed differently between two survival statuses in the COG data set from the combined data set

To minimize the effect caused by the distribution difference, we pre-processed the CEL files of 46 COG patients and 39 German patients together and separate the two data sets after batch effect correction. By applying moderated t-test from *Limma* package to the expression data of 10,824 preprocessed genes in the COG data set from the combined data, we identified 24 differentially expressed genes between alive and dead patient groups (FDR < 0.2 and |fold change| > 1.3, Table S3). The subsequent functional enrichment analysis reveals that GO terms such as integrin binding (GO:0005178), cell migration (GO:0016477), cell adhesion (GO:0007155), response to wounding (GO:0009611), etc. were significantly enriched in the DE genes (Table S4).

Candidate gene signatures derived from the combined preprocessed COG data set still performed poorly on the validation data

Following similar procedure discussed previously, we randomly selected 100 DE genes for each of the sizes 5, 10 and 20 as the candidate signatures. For each candidate signature, we built up a RF classifier using their expression data to predict the survival status of the patients in the Germany data set. In general, the RF classifiers performed worse on the validation data than on the testing sets during model cross-validation. Specifically, the sensitivity of the prediction for the majority of the candidate signatures is less than 0.2, which means most of the dead patients were predicted as alive by the corresponding candidate signatures.

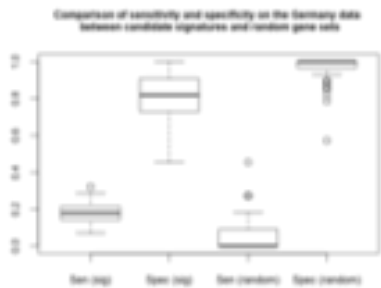


Fig.5. Boxplot of sensitivity and specificity in the prediction of the survival status on the Germany data set using 5-gene candidate signatures and random gene sets. Left two are sensitivity and specificity of the candidate signatures and right two are sensitivity and specificity of the random sets.

To compare the performance of the signatures from DE genes with the random gene sets of the same size, 100 randomly selected gene sets for each of sizes 5, 10 and 20 were trained on the COG data set and validated on the Germany data set. As can be seen in Fig.5, even though the sensitivities of the signatures from DE genes are low, they are still significantly higher than those of the random sets

(for 5-gene sets, t-test p-value < 2E-16; for 10-gene sets, t-test p-value < 2E-16).

Consensus clustering failed to reveal association between the gene expression of the COG and Germany data set and their corresponding survival status

Fig. 6 shows the clusters obtained from consensus clustering analysis for the COG and Germany data set after the combined preprocessing. As can be seen in Fig. 7 and Table S5, the survival status and cluster memberships are not concordant with each other. It implies that the gene expression patterns in both data sets are not able to classify the samples by the survival status.

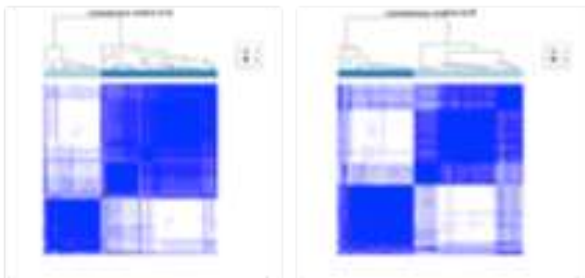


Fig.6. Consensus clustering using gene expression data from the COG data set (left) and the Germany data set (right).

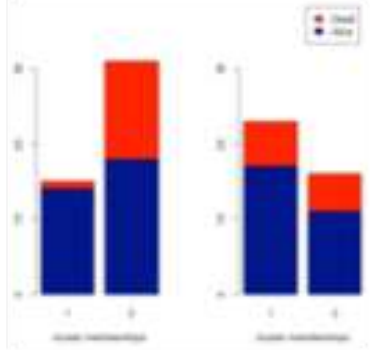


Fig.7. Stacked barplots for the distribution of survival status between consensus clusters. Left: COG data set; right: Germany data set.

No common genes among the most differentially expressed genes between the COG and Germany data sets

We applied moderated t-test in *Limma* package to the expression data of the Germany data set and ranked genes based on their FDR values. We then compared the most differentially expressed genes corresponding to the survival status in the COG and Germany data set and found no common genes for the given DE gene cutoff (FDR<0.2 and |fold change| > 1.3; DE analysis based on the separately preprocessed expression data for each data set, Table 2 and S6).

Table 2. Number of the common differentially expressed genes between the COG and Germany data sets

Ranked genes	# Common genes
top 5	0



Data warehouse and business intelligence



CRDW - Special considerations

- Preliminary data
- Cohort definition
- Data element identification
- Aggregation / normalization
- Analysis and interpretation



CRDW - Preliminary data / Cohort identification

- It can be hard to identify cohorts
- CRI has specialists to help
- Reviewers like to see preliminary identification of cohorts - "Can they really get the data"
- Sometimes new data have to be sourced



CRDW - Data element identification

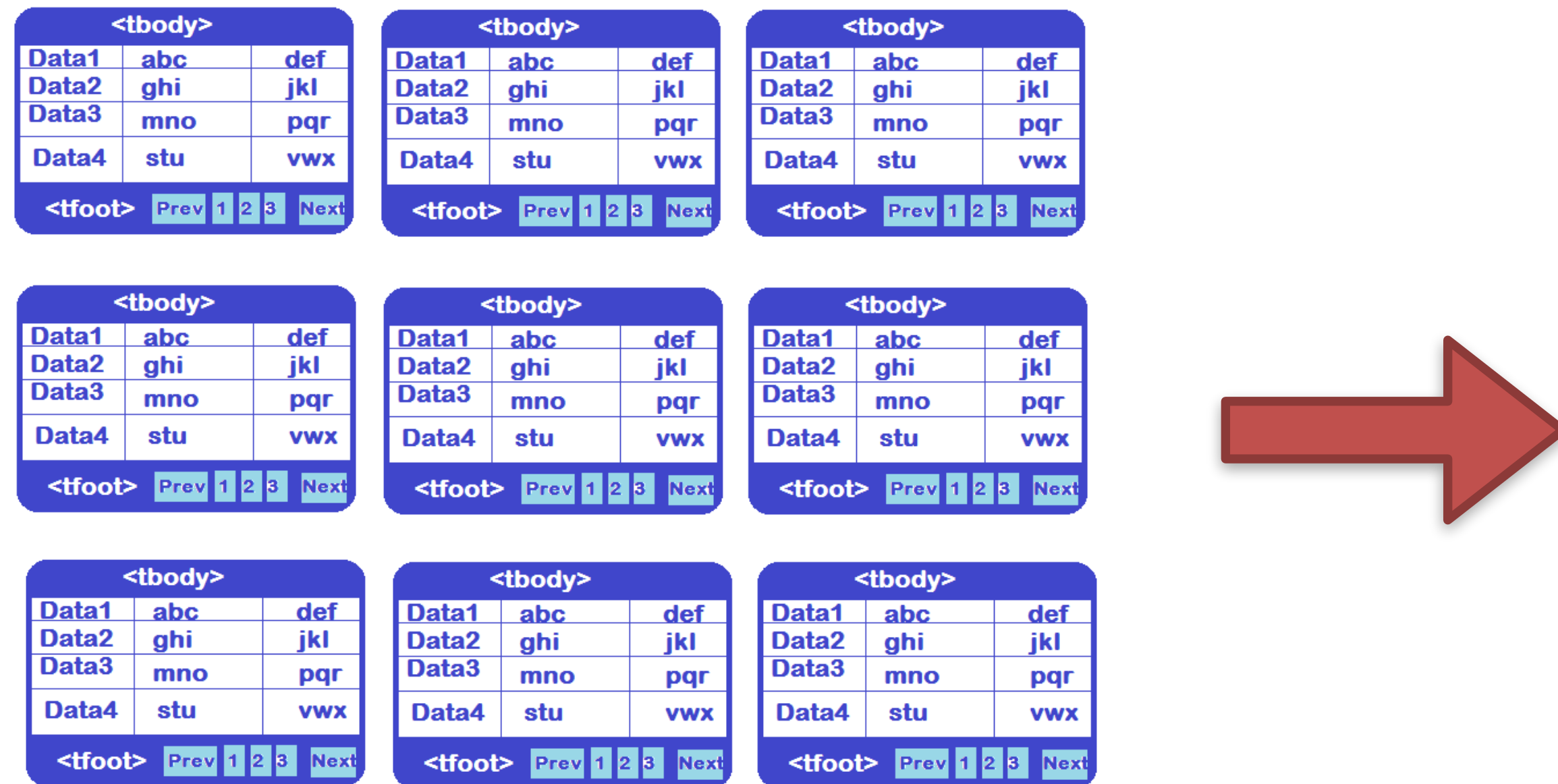
- Identifying elements to pull from the CRDW is an iterative process
- Requires input from the CRDW and the investigator
- Delineation of data elements in the grant is essential

The screenshot displays the NextGen EMR interface for a patient named John Dokes. The interface includes a sidebar with navigation options like Home, Demographics, Record Vital Signs, and Allergies. The main content area shows patient details (Age: 47, Gender: Male, DOB: 03/14/1960), current provider (Joseph Barclay MD), and current encounter (06/26/2007). It also features sections for Reason(s) for visit, Chronic Problem List, Vital Signs (with a table showing Temp, BP, Pulse, etc.), Medications (listing SIMVASTATIN), and a Health Monitor section with a table of upcoming tests and procedures.

Test/Procedure	Due Date
Physical Exam	06/26/2007
Lipid Panel	06/26/2007
Colonoscopy	06/26/2007
Signoscopy	06/26/2007
FOBT x3	06/26/2007
Influenza Vac	06/26/2007
Pneumo Vac	06/26/2007
Tetanus	06/26/2007
PSA Test	06/26/2007
Eye Exam	06/26/2007
Foot Exam	06/26/2007
HgbA1C	06/26/2007
BMP Fasting	06/26/2007
EKG	06/26/2007
Stress Test	06/26/2007
Echocardiogram	06/26/2007
Chest X-ray	06/26/2007
ALT/AST	06/26/2007
CPK	06/26/2007
Urinalysis	06/26/2007
Urine Micro	06/26/2007
TSH	06/26/2007
PFT	06/26/2007



CRDW - Data aggregation and normalization



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Data2	ghi	jkl
Data3	mno	pqr
Data4	stu	vwx
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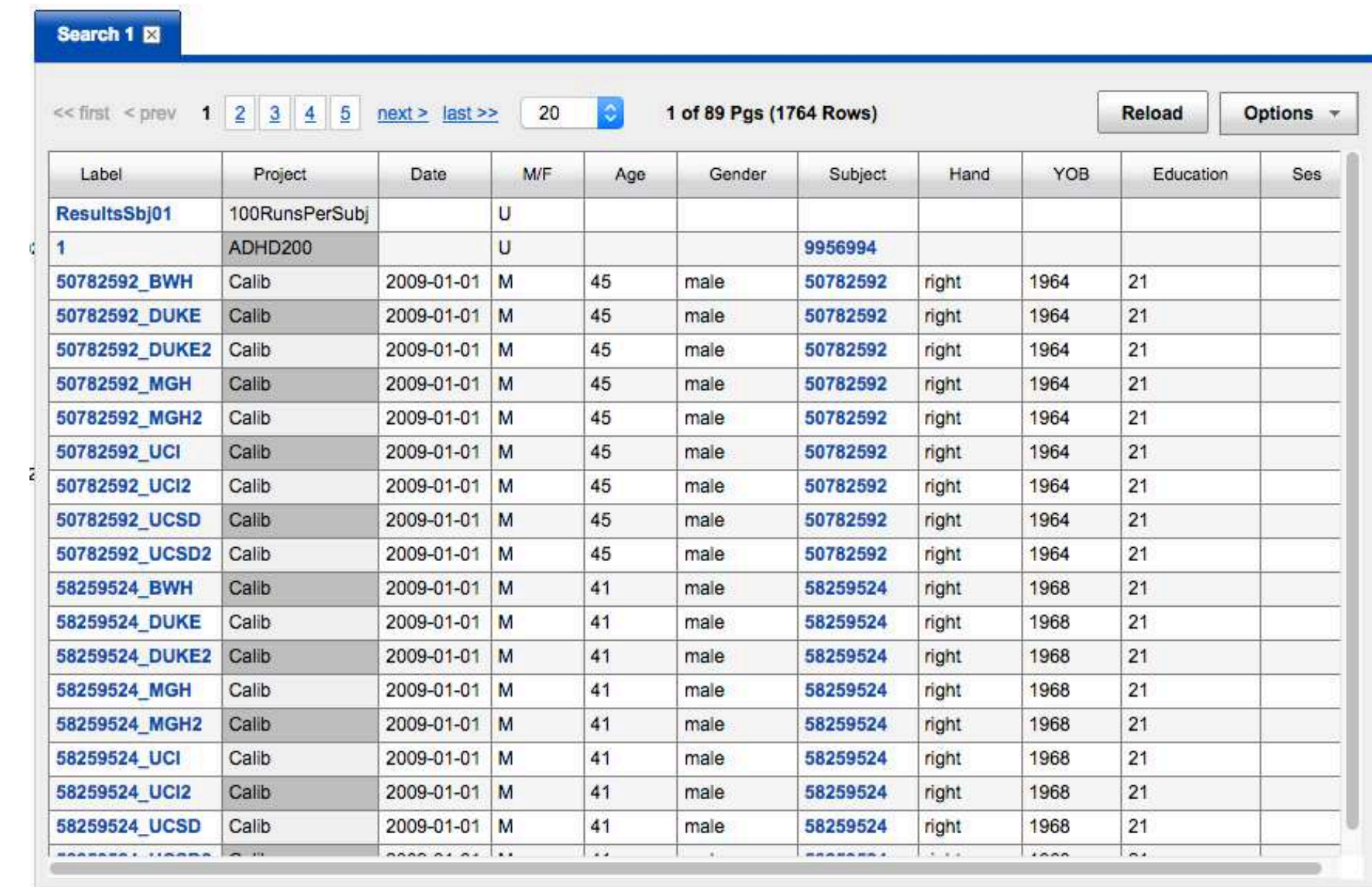
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Label	Project	Date	M/F	Age	Gender	Subject	Hand	YOB	Education	Ses
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1	ADHD200		U			9956994				
50782592_BWH	Calib	2009-01-01	M	45	male	50782592	right	1964	21	
50782592_DUKE	Calib	2009-01-01	M	45	male	50782592	right	1964	21	
50782592_DUKE2	Calib	2009-01-01	M	45	male	50782592	right	1964	21	
50782592_MGH	Calib	2009-01-01	M	45	male	50782592	right	1964	21	
50782592_MGH2	Calib	2009-01-01	M	45	male	50782592	right	1964	21	
50782592_UCI	Calib	2009-01-01	M	45	male	50782592	right	1964	21	
50782592_UCI2	Calib	2009-01-01	M	45	male	50782592	right	1964	21	
50782592_UCSD	Calib	2009-01-01	M	45	male	50782592	right	1964	21	
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58259524_UCI	Calib	2009-01-01	M	41	male	58259524	right	1968	21	
58259524_UCI2	Calib	2009-01-01	M	41	male	58259524	right	1968	21	
58259524_UCSD	Calib	2009-01-01	M	41	male	58259524	right	1968	21	

Taking the complex, multidimensional data from the CRDW and creating a usable data set for subsequent analysis requires special skills and should be included in the budget for data acquisition

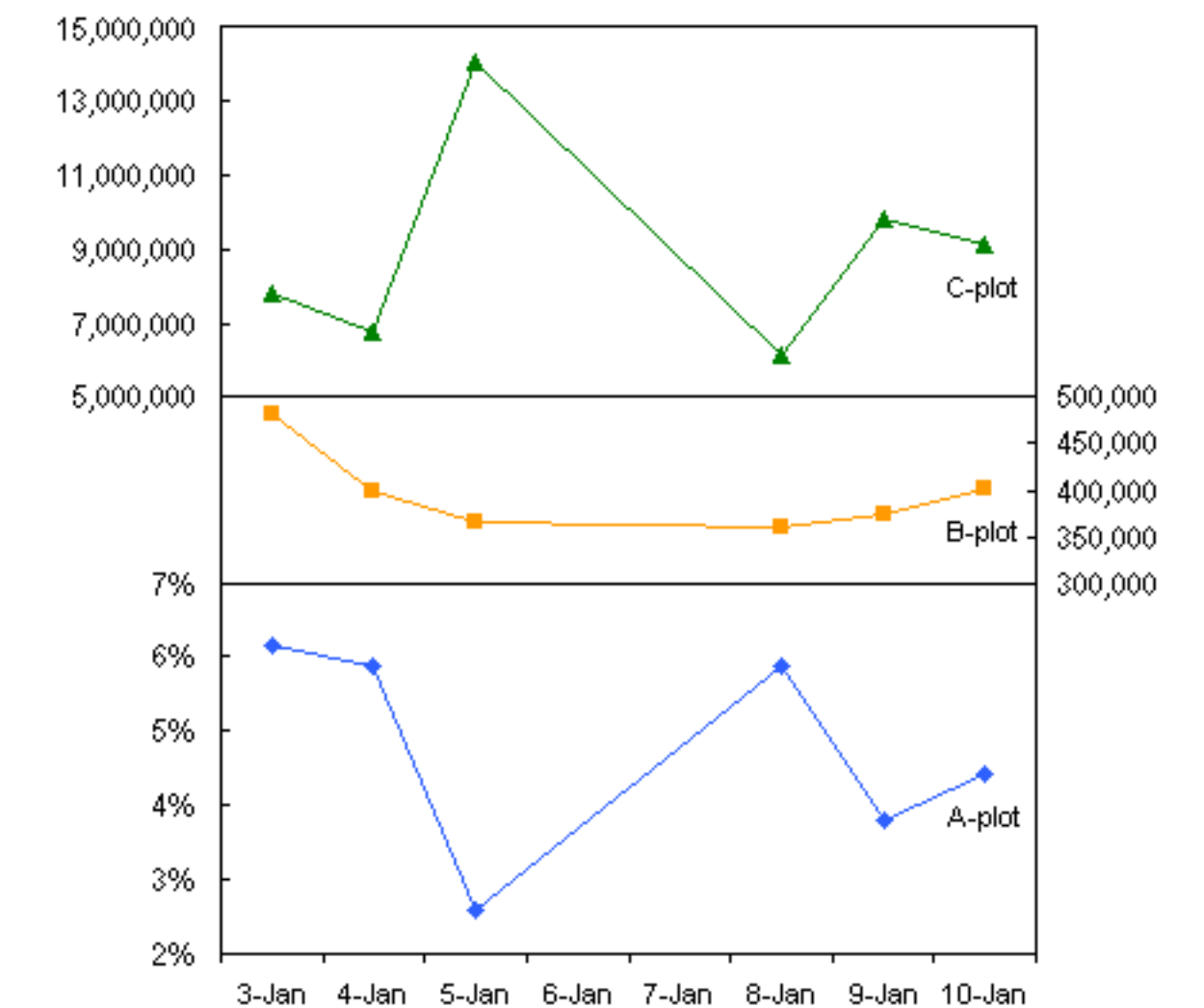
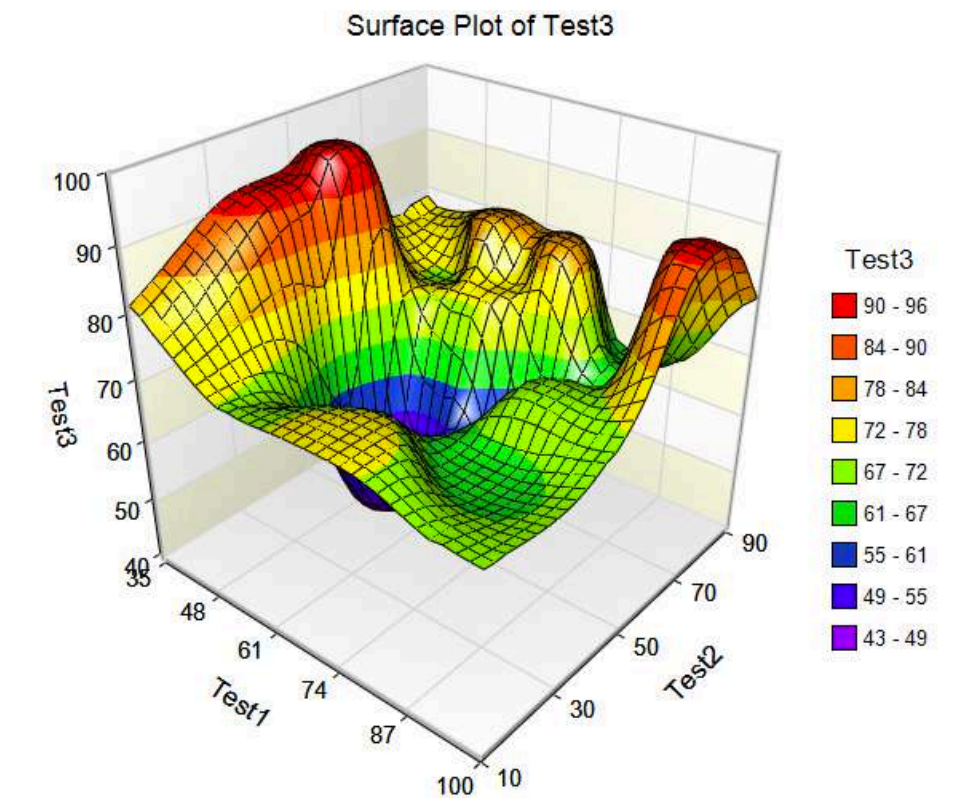
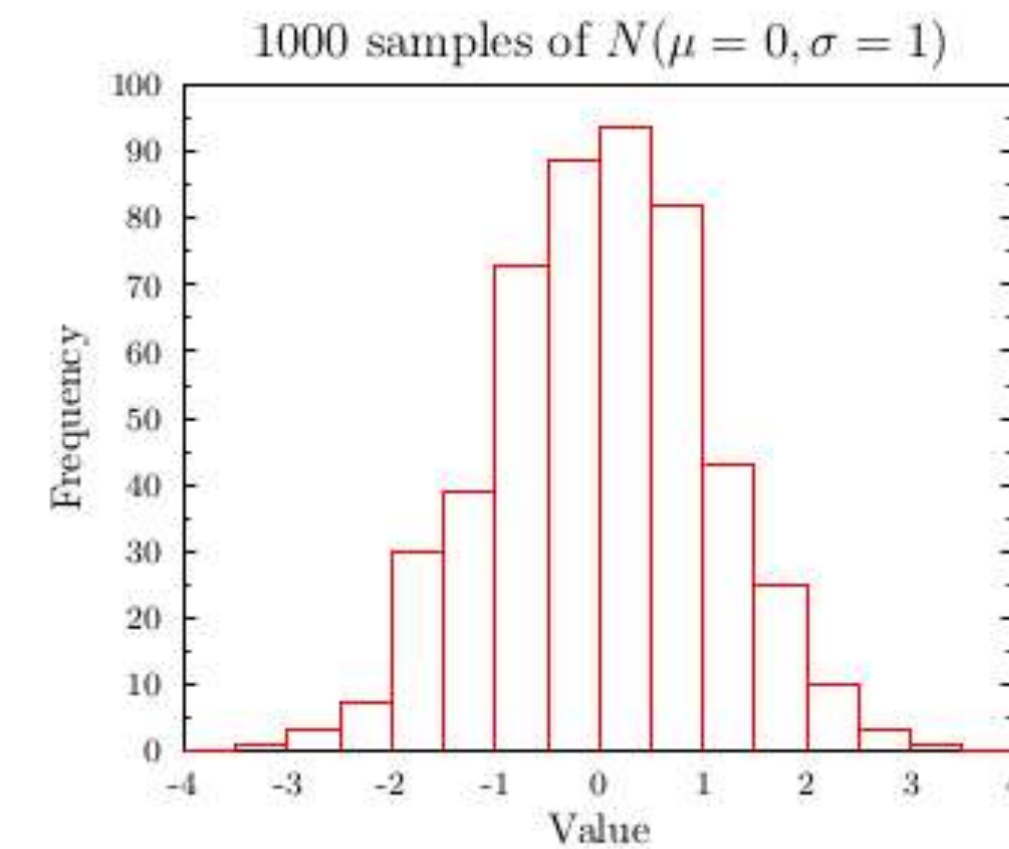
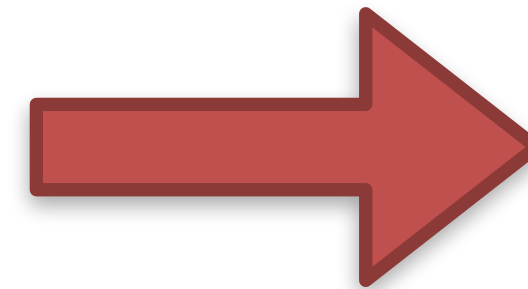


CRDW - Data analysis and interpretation

Search 1 x

<< first < prev 1 2 3 4 5 next > last >> 20 1 of 89 Pgs (1764 Rows) Reload Options

Label	Project	Date	M/F	Age	Gender	Subject	Hand	YOB	Education	Ses
ResultsSbj01	100RunsPerSubj		U							
1	ADHD200		U			9956994				
50782592_BWH	Calib	2009-01-01	M	45	male	50782592	right	1964	21	
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58259524_UCSD	Calib	2009-01-01	M	41	male	58259524	right	1968	21	



Data analysis can be costly and time-consuming.
Consider adding an analyst to your budget vs. chargeback

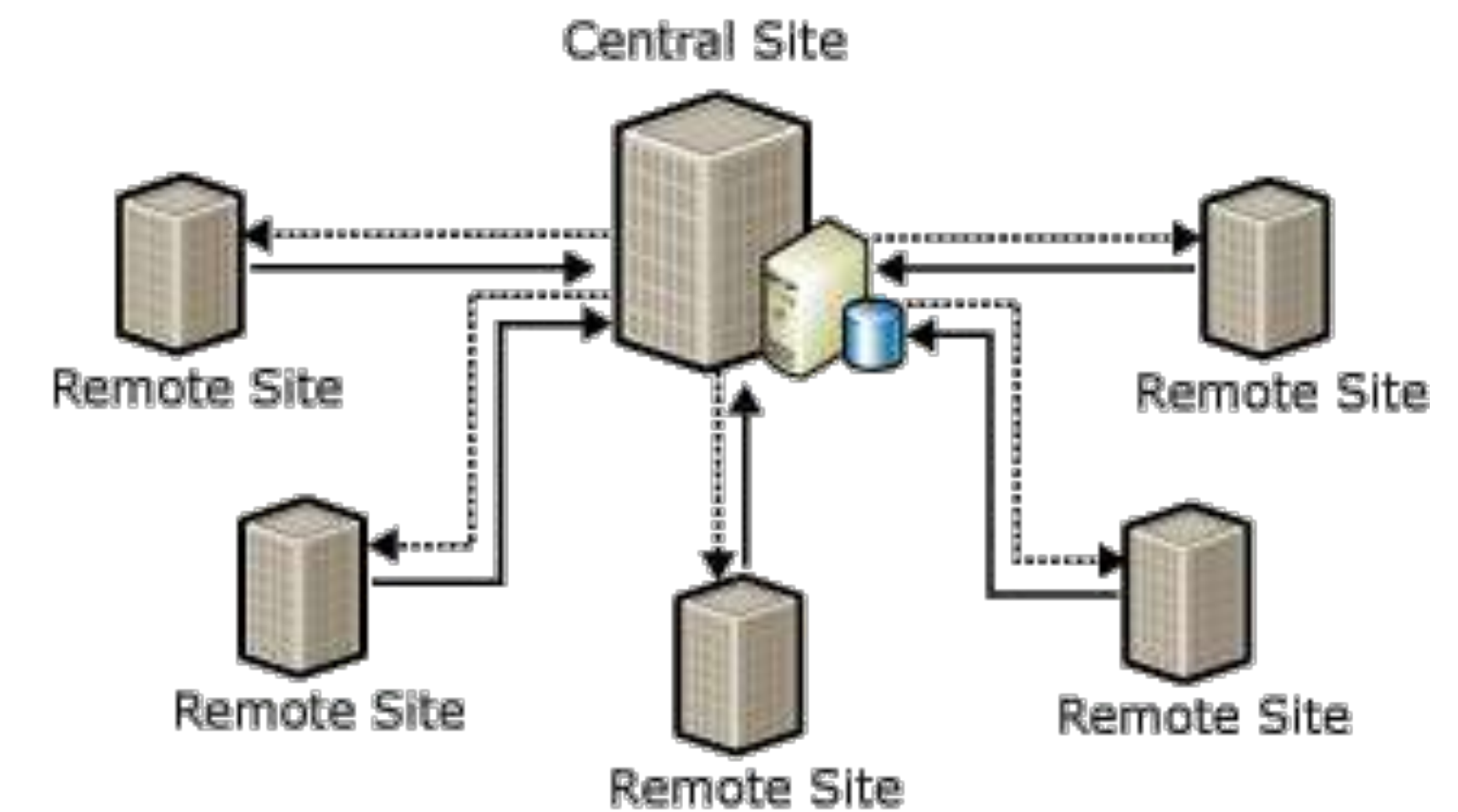


Applications / Special projects



Applications - Special considerations

- Multi-site data collection, transfer, and storage
- REDCap usage
- Application development and programming

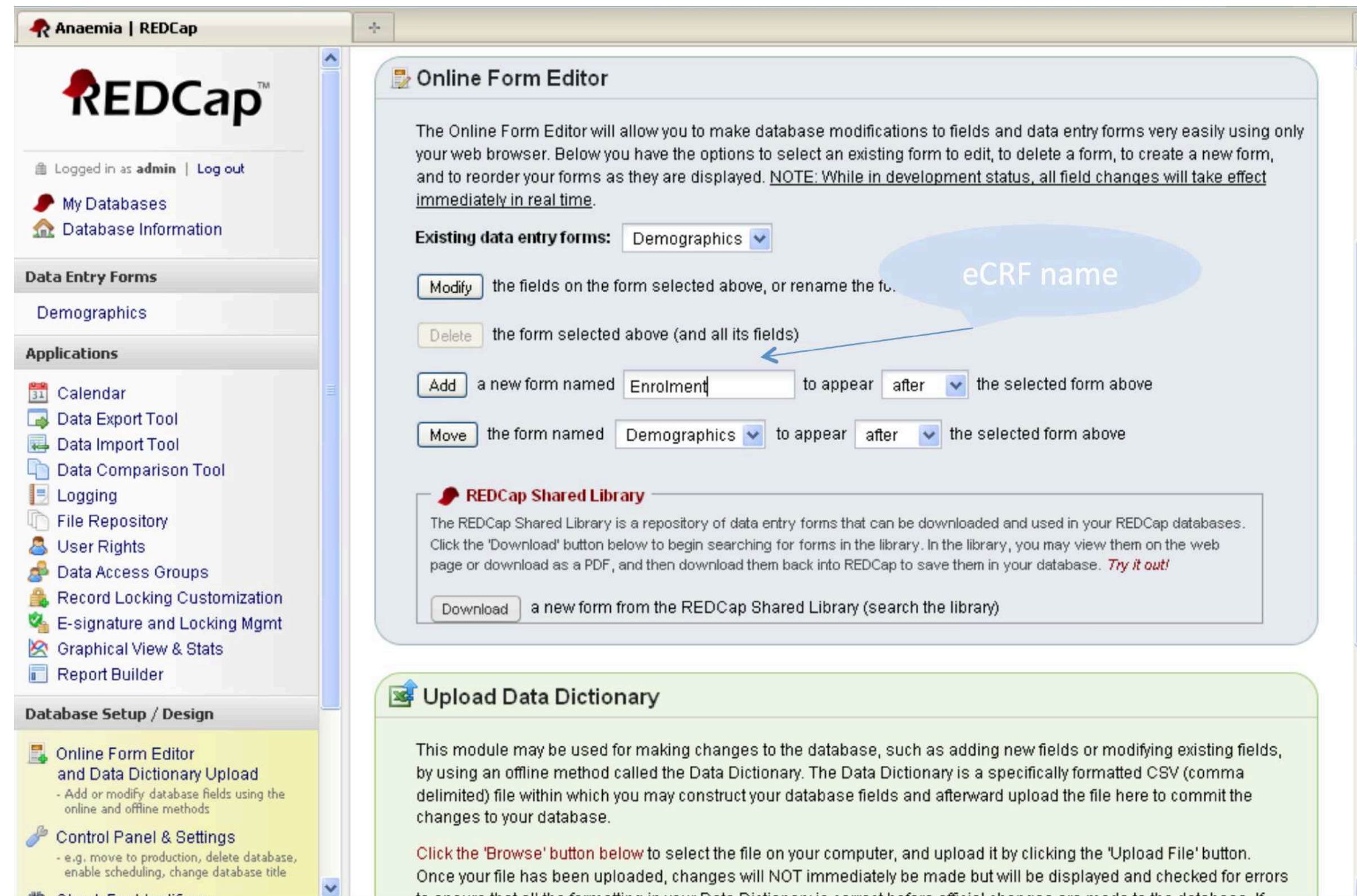


Applications - Multi-site data collection, transfer, and storage

- If multiple sites enrolling, then there are special considerations for IRB, contracts, data use agreements, and application development
- These must be tackled long before your proposal is submitted



REDCap



HIPAA-compliant data collection and storage



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Common | Bioinformatics | CRDW | Applications | Systems

Applications - REDCap

- It's easy to get a REDCap account - and it's free
- Non-BSD collaborators will need BSD accounts - and this can take time (start early)
- Most form generation can be performed by the investigators
- CRI helps with complex forms and other needs
- We can help with boilerplate grant language for REDCap



Custom application development / programming

- Do you need a website?
- How about a customized platform for data collection?
- Online tools?
- The CRI can build anything you need, but there must be budget for programmer costs
- We can help estimate the budget and write up the relevant parts of the proposal



Examples projects

- Data commons for pediatric cancer
- ECHO
- March of Dimes
- GAIN
- Thirty Million Words
- Genomic Prescribing System



Systems and infrastructure - special considerations

- Off-site access
- Flexible / growing storage needs
- HPC access
- HPC consulting
- Virtual machines / servers



Systems - Offsite access

- Do researchers outside of UChicago need access to your data?
- Collaborator accounts take time to obtain - and the CRI can help



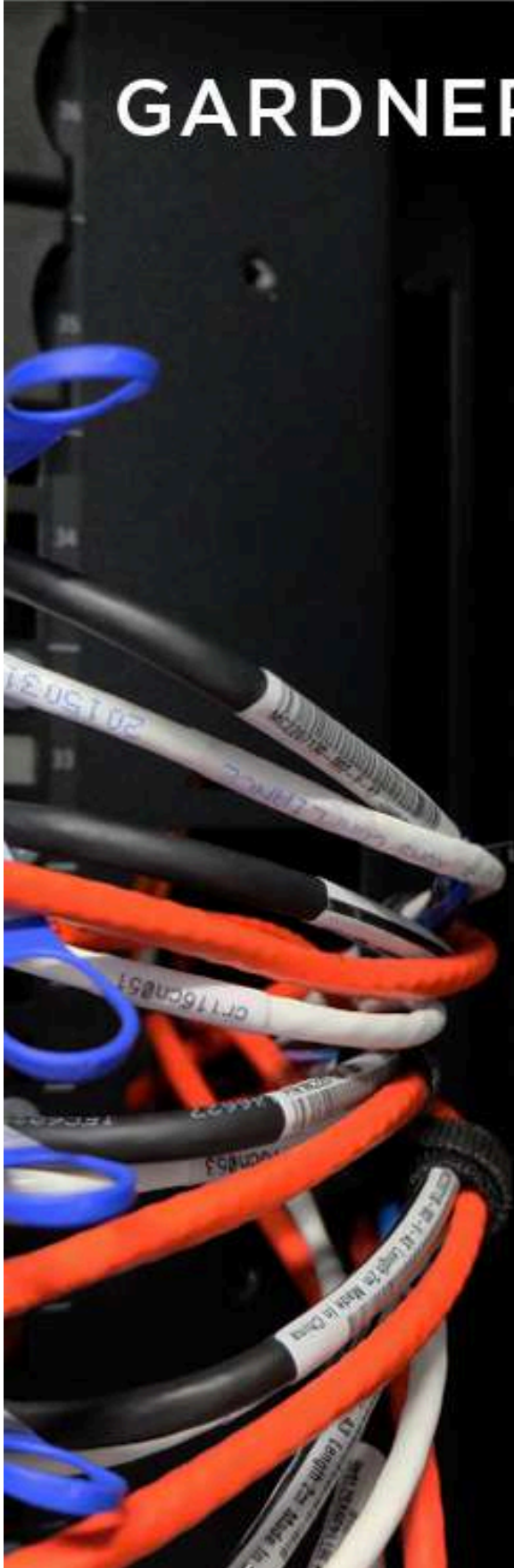
Systems - Growing / flexible storage needs

- Some projects do not require much storage in the beginning, but needs grow
- Consider the entire project, not just the first year when crafting the budget for systems



Systems - HPC

- There are many options for HPC. CRI has one of the biggest and fastest clusters on campus
- CRI also has dedicated support for helping your prepare your grant and complete your research



	TARBELL	New Cluster GARDNER
Standard Compute Nodes	38	88
Mid-Tier Compute Nodes	0	28
Large Memory Nodes	2	4
GPU Nodes	0	5
Xeon Phi Nodes	0	1
Theoretical Performance	44.2 TFLOPs	112.8 TFLOPs
Measured Performance	21.2 TFLOPs	97 TFLOPs
Total Memory	12 TB	31.6 TB
Scratch Storage	110 TB	350 TB
Interconnect Bandwidth	40 GB/s	56 GB/s



Systems - Virtual machines / servers

- Setting up and maintaining VMs is expensive
- CRI will help you develop your budget
- This is commonly left out of grant applications/budgets



Ways to get help

<http://cri.uchicago.edu>

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