



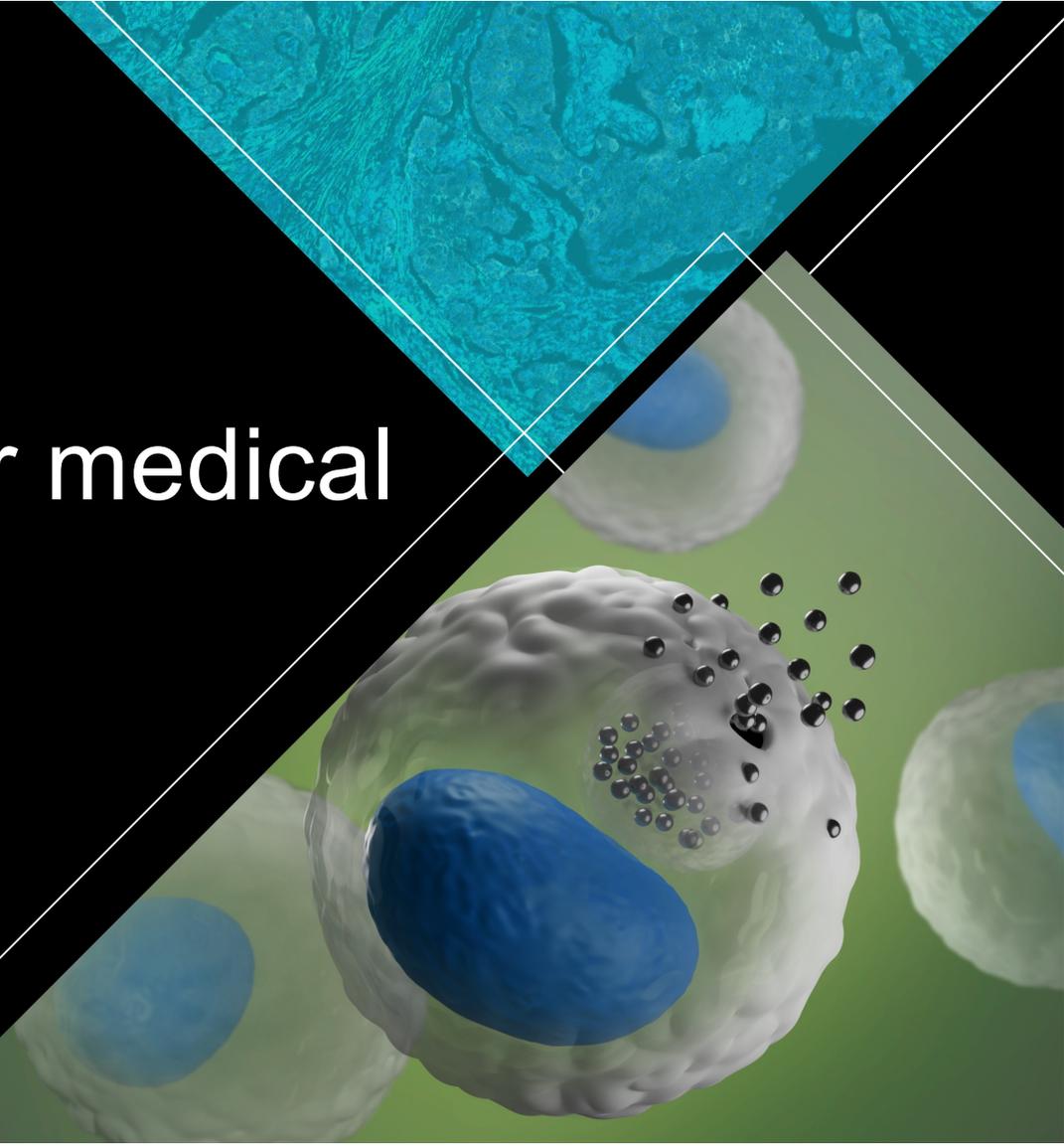
# IMPROVE-ing AI for medical applications

**Ryan Weil, PhD**

**Cancer Data Science Initiatives**

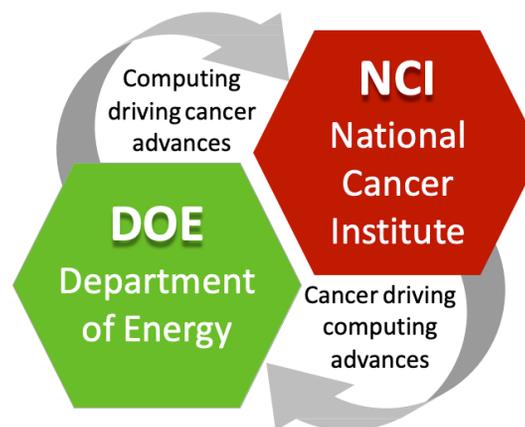
**October 27, 2022**

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# NCI-DOE Collaboration

Strategic interagency collaboration created in 2016 to accelerate cancer research using emerging exascale computing capabilities.





# AI is going to the clinic!

- ***Software as a medical device*** has an expected compounded annual growth rate (CAGR) of 21.9% during 2020–2027 and will be a >\$85B a year area.
  - ◇ Many of these products are expected to have an AI component
  - ◇ FDA with other regulatory agencies has released Good AI/ML practice guidance similar to GMP/GCP\*.
- ***AI as a biomarker/companion diagnostic***—especially with mIoT devices—is already being considered for the treatment selection
- There are many challenges to pervasive AI at the edge in medical applications.

\*<https://www.fda.gov/medical-devices/software-medical-device-samd/artificial-intelligence-and-machine-learning-software-medical-device>



# Barriers to adoption of AI at the edge

## Soft problems

- **Liability/Insurance**

- ◇ The problem is as hard or harder than liability for self driving.

- **Data**

- ◇ For most applications in medical AI the training data sets are minuscule compared to the complexity of the data.

- **Control**

- ◇ The mindset has to change in care giver community and patients.

- **Cost**

- ◇ Will the payers determine the value of the prediction is worth the computational and development cost.

- ◇ Are the data required as inputs (tests, sensors, etc) in line with the value of the prediction.



## The biosciences are behind physics

- **Physics informed AI is maturing**

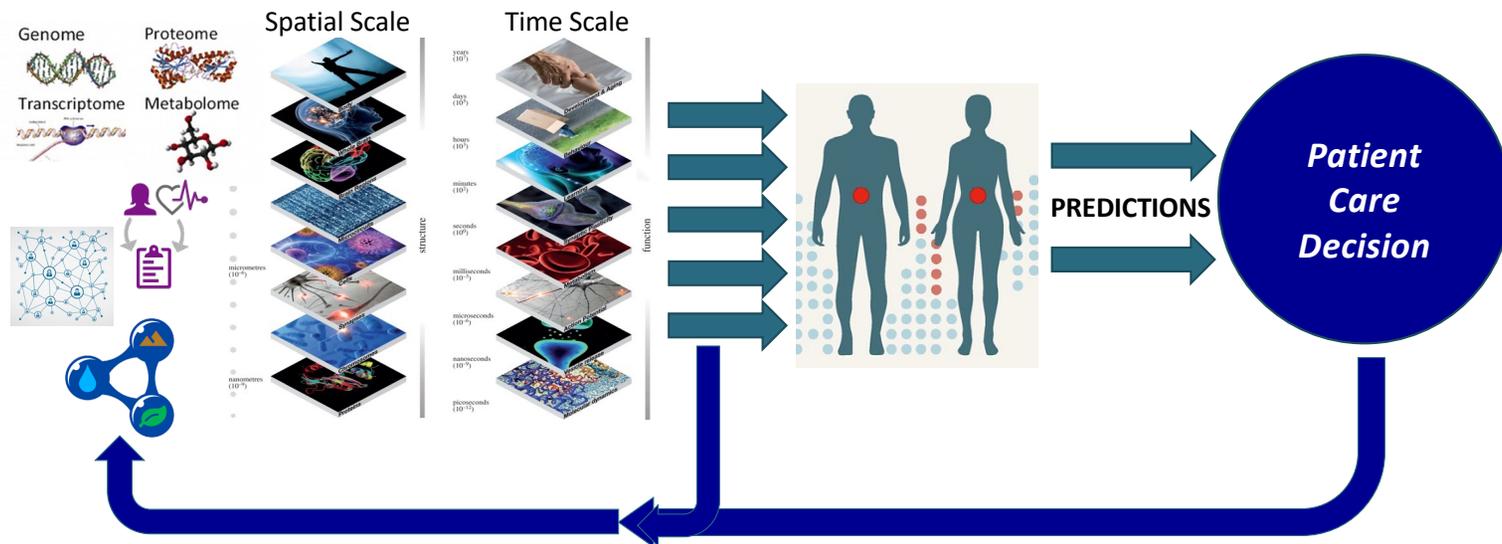
- ◇ It is relatively straight forward for an AI to rederive Bernoulli's equations from lots of training data.
- ◇ Data for physical/mechanical systems are far more readily available.

- **Biomedically informed AI is in its infancy**

- ◇ Fitness watches can identify arrhythmia and insulin pumps can predict dosing, but those use limited data and have a singular output as well as manual override.
- ◇ AI for pathology (whole slide imaging) is maturing and Paige.ai has approved products for **aiding** pathologists in diagnosing cancers.
- ◇ Digital twins are being developed but there is a lot of work to be done.

# Digital Twin for Predictive Oncology

*Patient-tailored models incorporating multi-omic, clinical, environmental and social data that can evaluate and predict the most effective prevention and therapeutic plans*



Hernandez-Boussard, T. *et al.* Digital twins for predictive oncology will be a paradigm shift for precision cancer care. *Nat Med* **27**, 2065–2066 (2021). <https://doi.org/10.1038/s41591-021-01558-5>



## Barriers: Data acquisition and use

- **IRBs**

- ◇ IRBs are not generally well setup to assess the *informational risk* to patients.

- **Consent for altruistic reasons is no longer a viable model**

- ◇ Leads to bias since there are significant differences based on race, gender, age, condition, etc.

- ◇ This leads to greater benefits for people that are well represented in the training data.

- **HIPAA**

- ◇ Data sharing laws were not set up for supporting medical AI at scale.

- ◇ Statistical and safe harbor deidentification don't stand up to analysis at scale.

This slide attempts to summarize a talk by Barbara Evans at U of F on Sustainable AI in Clinical Care



## ***Regulatory considerations***

- **Depending on their purpose AI models can be considered *in vitro* diagnostic devices and therefore subject to 21 CFR 812 (Investigational Device Exemptions) and require a 510k and post market surveillance in order to be marketed.**
  - **Significant risk means an investigational device that:**
    - ◇ (1) Is intended as an implant and presents a potential for serious risk to the health, safety, or welfare of a subject;
    - ◇ (2) Is purported or represented to be for a use in supporting or sustaining human life and presents a potential for serious risk to the health, safety, or welfare of a subject;
    - ◇ ***(3) Is for a use of substantial importance in diagnosing, curing, mitigating, or treating disease, or otherwise preventing impairment of human health and presents a potential for serious risk to the health, safety, or welfare of a subject; or***
    - ◇ ***(4) Otherwise presents a potential for serious risk to the health, safety, or welfare of a subject.***
- (21 CFR 812.3(m))



## More things to consider from 21 CFR 812

- **Is deidentified data still considered human subjects?**

- ◇ **Subject** means a human who participates in an investigation, either as an individual on whom or on whose specimen an investigational device is used or as a control. A subject may be in normal health or may have a medical condition or disease. (21 CFR 812.3(p))

- **Error handling is higher impact**

- ◇ **Unanticipated adverse device effect** means any serious adverse effect on health or safety or any life-threatening problem or death caused by, or associated with, a device, if that effect, problem, or death was not previously identified in nature, severity, or degree of incidence in the investigational plan or application (including a supplementary plan or application), or any other unanticipated serious problem associated with a device that relates to the rights, safety, or welfare of subjects. (21 CFR 812.3(s))



## The more immediate problem

- **Approval for medical devices normally requires proving effectiveness and superiority (or at least non-inferiority).**

- **How is this possible when there is:**

*No standard benchmark for testing or training*

*No standard performance measures for evaluation*

*No clear consensus approach or method*

*No clear human baseline to compare with*

*There is an opportunity to close some of the gaps discussed above.*

# **IMPROVE: Innovative Methodologies and New Data for Predictive Oncology Model Evaluation**

***Rick Stevens***

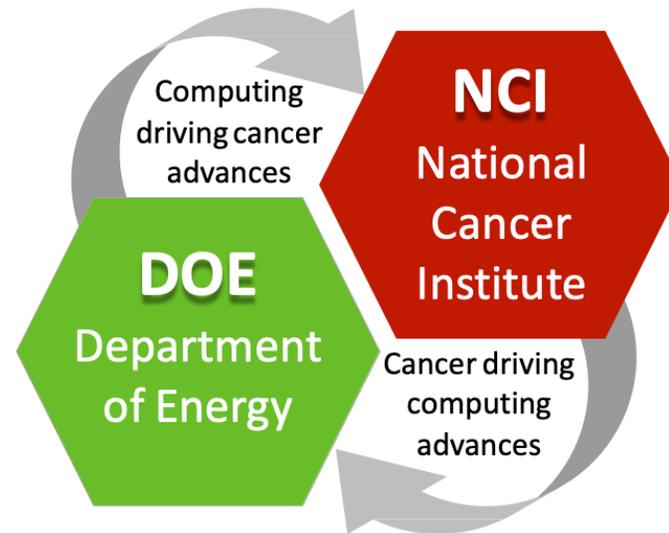
*Argonne National  
Laboratory/University  
of Chicago*

***Jeff Hildesheim***

*Division of Cancer Biology  
National Cancer Institute*

***Ryan Weil***

*Frederick National  
Laboratory for Cancer  
Research*





# Anticipated *Impacts* of IMPROVE

**Closing Gaps** in the development and application of deep learning models for predictive modeling of therapeutic response, including:

- Well-curated, clinically relevant, standardized training and testing datasets
- Standardized, easily-applicable workflow (including software pipeline, performance metrics, data, etc.) for evaluating and comparing prediction models to drive model improvement
- Understanding the model attributes related to predictive power, interpretability, and uncertainty quantification (including errors and failure to predict and how this is handled)
- Engaging the community for expert opinions and collaborations on developing a model evaluation framework and generating benchmark data

**Creating Approaches** for evaluating and improving modeling that are intended to be generalizable to deep learning models in other domains in NCI and DOE

- ◇ E.g., materials design, HPC surrogates

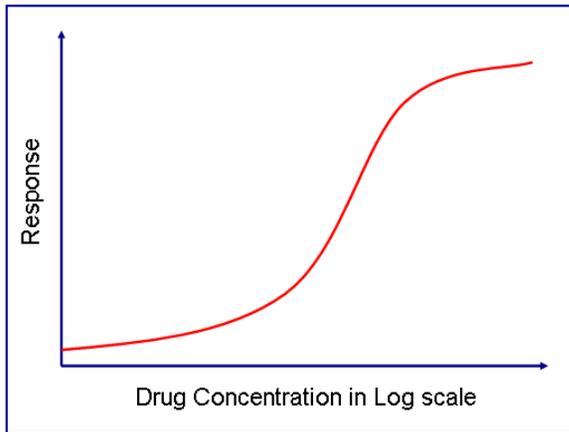
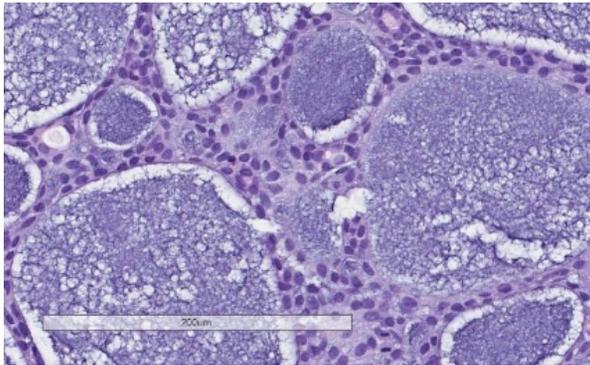
**Generating New Hypotheses** and identifying previous hidden cancer types and treatment targets.



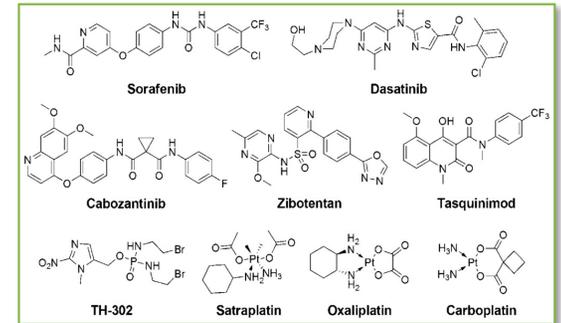
## Aims of IMPROVE Project

- Two related aims with the shared goal of **IMPROVING** deep learning models for predicting drug response in tumors:
  - ◇ **Aim 1: IMPROVE Models:** Development of semi-automatic protocols for **comparing deep learning models** and **identifying model attributes** that contribute to prediction performance.
  - ◇ **Aim 2: IMPROVE Data:** Development of protocols for **specifying drug screening experiments and generating new data**

# Data Driven Modeling of Cancer Drug Response



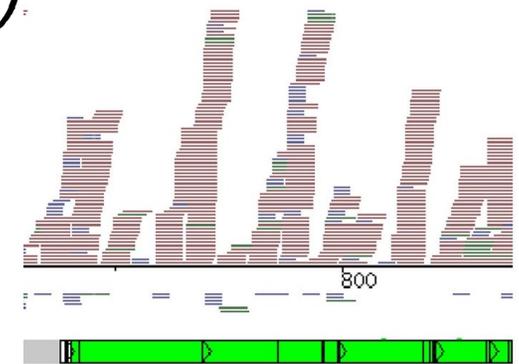
Drug (s)  
descriptors  
fingerprints  
structures  
SMILES  
dose



$$R = f(T, D, [P]^*)$$

↑  
IC50  
AUC  
GI50  
% growth  
Z-score  
**Response**

↑  
gene expression levels  
SNPs  
protein abundance  
microRNA  
methylation  
**Tumor**



$[P]^*$  (patient/treatment history, etc.)



## Components that define the predictive power of a model

How much of the predictive power of a given model is due to the **structure and nature of the model** itself vs. the **quality and coverage of the data** the model is trained and tested on?

Our approach focuses on addressing **two key bottlenecks**:

1. **Changing the model structure and tuning hyperparameters**
2. **Improving the datasets used for training and testing**

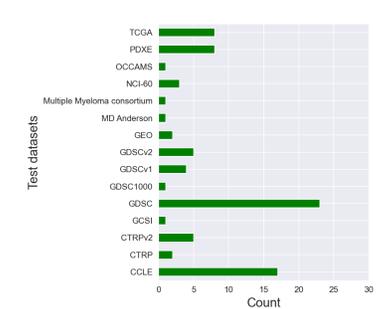
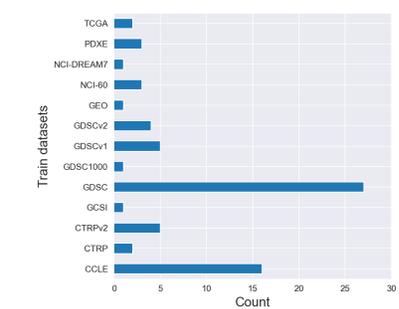
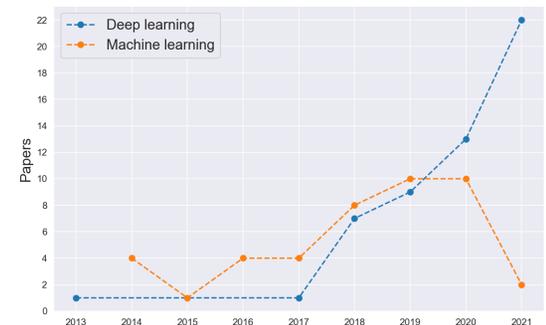
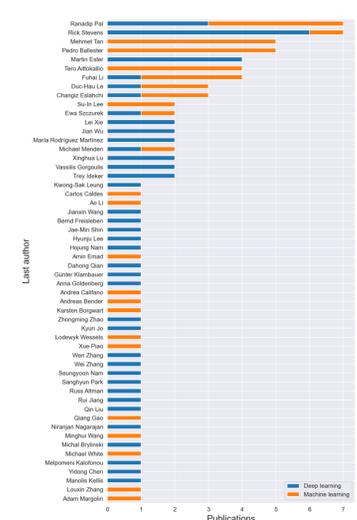
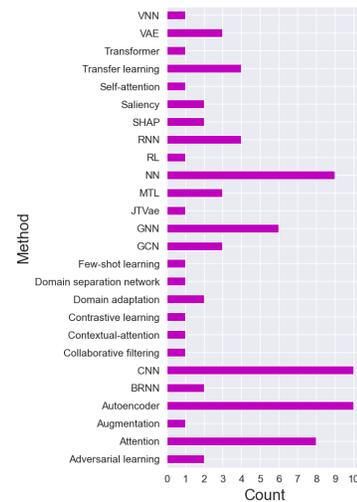
*With broad community involvement to improve transferability*

# IMPROVE Aim 1: Evaluation and Comparison of Drug Response Prediction Models

Comprehensive literature survey to collect information about research groups and models (ongoing task)

- > 100 papers about machine/deep learning drug response prediction
- Categorize models according multiple criteria to select representative ones for comparison study
  - ◇ Model architecture and technique
  - ◇ Functionality, e.g. transfer learning, interpretability and uncertainty quantification
  - ◇ Code availability and documentation
  - ◇ Training and validation data

Adapt and modify code to train and test the models, and conduct reproducibility analysis



# There's a lot already out there

First name	Last name	Institute	Expertise	Email	Link	Recommendation	First author	Paper	Year	Publisher	Primary outputs	Code	Framework	Drug set	Model name	Cancer features	Drug features	Train bio model	Test bio model	C/W/CW	DL methods	ML methods	Baselines	UQ	XAI	
Anna	Goldenberg	Associate	Anna	anna.go	<a href="https://">https://</a>	Yes, it would be great to have at least one of them as	L Rampalok	Dr.VAE	2019	Bioinformatics	AUC	GitHub	PyTorch	Single	Dr.VAE	Gene expression	None	CTRPv2	CTRPv2		W	VAE	None	RidgeLR, RF,		
Damir	President						S. Douad	Auto-Rank	2020	IEEE Journal of Biomedical and	GDSC	GitHub	R			Gene expression	PaDEL fingerprints	NCI-DRAM7			RL	None	IntegratedMR			
Changiz	Eslahi	Professor	He is focusing on	ch-eh	<a href="https://">https://</a>	Maybe. He is working on various aspects of cancer	A. Emdadi	Auto-	2021	BMC Bioinformatics	IC50	GitHub	NumPy		Auto-HMM-LMP							Autoencoder	HMM Matrix			
Dahong	Qian	Professor in		dahong	<a href="https://">https://</a>	No.	Z. Zuo	SWNet-a	2021	BMC Bioinformatics	IC50	GitHub	PyTorch	Single	SWNet	Gene expression,	Morgan	CCL4, GDSC	CCL4, GDSC		W	GNN, Salency	None	CDRcan,		
Duc-Hau	Le	Associate	He is working on	hauhdh	<a href="https://">https://</a>	Maybe. He has started working on drug sensitivity	T. Nguyen	Graph	2020	IEEE/ACM Trans Comput Biol	AUC, IC50	GitHub	PyTorch	Single	GraphDRP	CNA	Molecular graphs	GDSC	GDSC		W	Attention,	None	ICNNS	Yes	
Ewa	Szczurek	Assistant	Her main research	eszcure	<a href="https://">https://</a>	No. Her new group has recently started working on	K. Koras	Interpret	2021	Scientific Reports	AUC, IC50	GitHub	PyTorch	Single	DEERS	mRNA expression,	Kinase inhibition	GDSC	GDSC		W	Autoencoder,	None	ElasticNet,	Yes	
Fuhai	Li	Assistant	Fuhai Li is	fuhai.li	<a href="https://">https://</a>	Yes. Although his group is not big nor very established,	T. Zhang	Synergist	2021	Methods Mol Biol		No	NA	Combo	AuDNyemry							Autoencoder	None	DeepSynergy,		
Günter	Klambauer	Assistant	Tenure-Track	klamba	<a href="https://">https://</a>	Maybe. Although he only has one paper that applies DL	K. Preuer	DeepSyn	2018	Bioinformatics		GitHub	TF1	Combo	DeepSynergy	Gene expression	Morgan					NN	None	ElasticNet,		
Hojung	Nam	Associate	Professor since	nam	<a href="https://">https://</a>	Maybe	I. Jin	HIDRA	2021	Journal of Chemical Information	IC50	GitHub	TF1	Single	HIDRA	Gene expression	Morgan	GDSC1000	CCL4, GDSC1, GDSC2,	CW	Attention,	None	CDRcan,	Yes		
Hyunju	Lee	Professor,	Computations	hyunju	<a href="https://">https://</a>	No, drug response prediction is not her main research	S. Park	Super FE	2021	BMC Bioinformatics	IC50, binary	GitHub	PyTorch	Single	Super FELT	Copy number, Gene	None	GDSC	CCL4, CTRP, PDXE, TCGA	CW	Autoencoder	None	AutoBorutaR			
Jae-Min	Shin	Yongin in silico				No. They have not done any other research related to	Y. Chang	Cancer	2018	Scientific Reports	IC50	No	TF1	Single	CDRcan	Mutation	PaDEL descriptors	CCLP, GDSC	CCLP, GDSC		CNN	None	RF, SVM			
Jian	Wu	Zhenjian	Artificial	wujian	<a href="https://">https://</a>		Y. Zhu	TGSA-	2021	Bioinformatics	IC50	GitHub	PyTorch	Single	TGSA	CNV, Gene	Molecular graphs	GDSCv2	GDSCv2		W	Attention,	None	CDRcan,		
Jianxin	Wang	Professor,	His main focus	xiwang	<a href="https://">https://</a>	No. He has not done any other work related to drug	M. Li	DeepDSC	2019	IEEE/ACM Transaction of	IC50	No	TF1	Single	DeepDSC	Gene expression	Morgan	CCL4, GDSC	CCL4, GDSC		W	Autoencoder	None	DNN, KBMF,		
Kwong Sak	Leung	Professor,	His main focus	skleung	<a href="https://">https://</a>	Maybe. He is working on drug-drug interaction, drug	Pingfeng Liu	Graph	2019	BMC Bioinformatics	IC50	GitHub	TF1 (w/o Keras)	Single	ICNNS	Mutation	SMILES	GDSC	GDSC		W	CNN	None	None		
Kyuri	Jo	Assistant	Shin-ha	kyuri	<a href="https://">https://</a>	Maybe. She has two papers about drug response	K. Kim	Mathis	2021	Mathematics	IC50	GitHub	TF1 (w/o Keras)	Single	DrugGCN	Gene expression	Graph structure	GDSC	GDSC		W	GCN	None	Bagging		
Lei	Xie	Professor,	He has a	lei.xie	<a href="https://">https://</a>	Yes. His group has 2 papers of drug response prediction	D. He	Rebut	2021	bioRxiv		GitHub	PyTorch	Single	CODE-AE							Domain	None	Smpler		
Lei	Xie	Professor,	He has a	lei.xie	<a href="https://">https://</a>	Yes. His group has multiple papers of drug response	Q. Liu	TransSyn	2021	PLoS Computational Biol		GitHub	PyTorch	Combo	TransSyn	Gene dependency,	Network					Attention,	None	DeepSynergy	Yes	
Manolis	Kellis	MIT, USA				It seems that these are students.	H. Dong	Variation	2021	ICLR 2021	IC50	GitHub	PyTorch	Single	GENEVAE	Gene expression	SMILES	CCL4, GDSC	CCL4, GDSC		W	JTVAE, VAE	None	MPL, SVR		
Maria	Martinez	IBM Research,	Maria joined	MRMB	<a href="https://">https://</a>		A. Oskooli	FacctMan	2018	ICML	IC50	Yes	TF1, PyTorch	Single	FacctMan	Gene expression	Morgan	GDSC	GDSC		W	Attention,	None	Simplifia		
Maria	Martinez	IBM Research,	Maria joined	MRMB	<a href="https://">https://</a>	Maybe. She has two publications about drug response	M. Manica	Toward	2019	Molecular Pharmaceutics	IC50	Yes	TF1, PyTorch	Single	MCA	Gene expression	Morgan	GDSC	GDSC		W	Attention,	None	Simplifia		
Martin	Ester	Professor of	His research	ester@	<a href="https://">https://</a>	Yes. Martin Ester is continuously developing novel deep	H. Sharif-Noghabi	ATL	2019	Bioinformatics	IC50, binary	GitHub	PyTorch	Single	MOLI	Gene expression	None	GDSCv1	TCGA, PDXE	CW	Autoencoder	None	DNN			
Martin	Ester	Professor of	His research	ester@	<a href="https://">https://</a>	Yes. Martin Ester is continuously developing novel deep	H. Sharif-Noghabi	ATL	2020	Bioinformatics	IC50, binary	GitHub	PyTorch	Single	ATL	Copy number, Gene	None	GDSCv1	TCGA, PDXE	CW	Adversarial	None	ADDA, MOLI,			
Martin	Ester	Professor of	His research	ester@	<a href="https://">https://</a>	Yes. Martin Ester is continuously developing novel deep	H. Sharif-Noghabi	Out-of-	2021	Nature Machine Intelligence	AAC	GitHub	PyTorch	Single	Velodrome	Gene expression	None	CTRPv2, GDSCv2	CTRPv2, GDSCv2, GEO,	CW	Transfer	None	DeepAI-ERM,			
Martin	Ester	Professor of	His research	ester@	<a href="https://">https://</a>	Yes. Martin Ester is continuously developing novel deep	D. Snow	Interpret	2021	KDD	AAC	GitHub	TF2	Single	BDKANNN	Gene expression	None	GDSCv2, CTRPv2	GDSCv2, CTRPv2		CW	SHAP	None	None	Yes	
Meliponem	Kafaloun	Research Fellow	Her current	m.kafal	<a href="https://">https://</a>	No. She has not done any other work related to drug	Z. Zhao	NA	2019	IEEE Biomedical Circuits and	ActArea	No	NA	Single	NA	Gene expression	None	CCL4	CCL4		W	CNN, RNN	None	ElasticNet,		
Michael	Menden	Junior Group	He is a Junior	michael	<a href="https://">https://</a>	Maybe. Michael P. Menden is a backup candidate for	M. Menden	Machine	2019	PLOS ONE	IC50	No	Java	Single	Copy number,	PaDEL descriptors	GDSC	GDSC				NN	None	None		
Michal	Byrniek	Associate	His main focus	byrniek	<a href="https://">https://</a>	No. He has not done any other work related to drug	M. Singha	GraphDR	2020	BioRxiv	IC50 to binary	GitHub	PyTorch	Single	GraphDR							GNN	None	None		
Nirvanjan	Nagarajan	Senior Group	Focuses on	nagaraj	<a href="https://">https://</a>	No. Drug response prediction is not her main research	RP da Silva	TUGDA	2021	Bioinformatics	IC50, binary	GitHub	PyTorch	Single	TUGDA			GDSC	GDSC, PDXE, TCGA	CW	Autoencoder,	None	ElasticNet,	Yes	Yes	
Qin	Liu	Professor,	Her main	qin.liu	<a href="https://">https://</a>	No. She has not done any other work related to drug	Q. Liu	Predictio	2020	IEEE Annual Computing and	IC50	No	TF	Single	MFN	Gene expression	None	GDSC	GDSC		W	CNN, RNN	None	RF, SVM		
Ranadip	Pal	Professor,	Machine	ranadip	<a href="https://">https://</a>	Yes. His group is continuously working on drug	K. Matlock	Investiga	2018	BMC Bioinformatics		No	NA									NN	RF, KNN			
Ranadip	Pal	Professor,	Machine	ranadip	<a href="https://">https://</a>	Yes. His group is continuously working on drug	SR Dhruva	Applicat	2018	BMC Bioinformatics	AUC	GitHub	Matlab				Gene expression	None	CCL4, GDSC	CCL4, GDSC		CW	Transfer	None	Different	
Ranadip	Pal	Professor,	Machine	ranadip	<a href="https://">https://</a>	Yes. His group is continuously working on drug	O. Baagir	Repress	2020	Nature Communications	IC50	GitHub	TF	Single	REFINED	Gene expression	Descriptors	GDSC, NCI-60	GDSC, NCI-60		W	CNN	None	DNN,		
Rick	Stevens	ANL		stevens	<a href="https://">https://</a>		F. Xia	Predictio	2018	BMC Bioinformatics																
Rick	Stevens	ANL	Machine	stevens	<a href="https://">https://</a>	Yes. His group is continuously working on drug resp	A. Cyde	A	2020	arXiv	AUC	GitHub	PyTorch	Single	None	Gene expression,	Descriptors	CCL4, GDSC, NCI60	CCL4, GDSC, NCI60		W	Attention, NN	None	None		
Rick	Stevens	ANL					Y. Zhu	Ensemble	2020	Scientific Reports	AUC	No	TF1	Single	None	Gene expression	Descriptors	CCL4, GCS, CTRP,	CCL4, GCS		CW	Transfer	LightGBM			
Rick	Stevens	ANL					A. Partin	Learning	2021	BMC Bioinformatics	AUC	GitHub	TF2	Single	None	Gene expression	Descriptors	CTRPv2, GDSC1,	CTRPv2, GDSC1, GDSC2,		W	NN	None	LightGBM,		
Rick	Stevens	ANL					F. Xia	A-cross-	2021	Briefings in Bioinformatics																
Rick	Stevens	ANL					Y. Zhu	Conver1	2021	Scientific Reports	AUC	GitHub	TF1	Single	IGTO	Gene expression	Descriptors	CTRP, GDSC	CTRP, GDSC			CNN	None	LightGBM,		
Rui	Jiang	Beijing National	Computations	ruijiang	<a href="https://">https://</a>	No. Drug response prediction is not the main research	Q. Liu	DeepDR	2020	Bioinformatics	IC50, binary	GitHub	TF1, DeepChem	Single	DeepDR	DNA methylation,	Molecular graph	CCL4, GDSC	TCGA		CW	CNN, GCN	None	CDRcan,		
Russ	Altman	Stanford, USA		russ.alt	<a href="https://">https://</a>		Y. Jiang	DrugDr	2021	bioRxiv	IC50, ActArea	GitHub	PyTorch	Single	DrugDr	Gene expression	Pre-trained	GDSC, CCL4, PDXE	GDSC, CCL4, PDXE		CW	TML	None	RF, ST-ANL,		
Sanghyun	Park	Yonsei	Research	sanghy	<a href="https://">https://</a>	No. Drug response prediction is not the main research	J. Choi	RDMMN	2020	Scientific Reports	IC50 to binary	GitHub	TF1 (w/o Keras)	Single	RDMMN	Gene expression	Structure	CCL4, GDSC	CCL4, GDSC		W	NN	ElasticNet	CaDRMS		
Sungsoon	Nam	Gachon		sams@	<a href="https://">https://</a>	No. Drug response prediction is not the main research	M. Joo	A Deep	2019	International Journal of	IC50	GitHub	TF	Single	DeepDSC	Mutation	Fingerprints	CCL4, GDSC	CCL4, GDSC		W	CNN	None	Ridge		
Trey	Idkter	Professor in the	Has a large	idkter	<a href="https://">https://</a>	Yes. He has a large group working on a variety of	B. Kuan	Predictio	2020	Nature Cell	AUC	GitHub	PyTorch	Single, Combo	DrugCell (VNN)	Mutations	Morgan	CTRPv2, GDSCv1,	CTRPv2, GDSCv1, PDXE		CW	VNN	None	DNN	Yes	
Trey	Idkter	Professor in the	Has a large	idkter	<a href="https://">https://</a>	Yes. He has a large group working on a variety of	J. Ma	Few-shot	2021	Nature Cancer	AUC	GitHub	PyTorch	Single	TCRP	Gene expression,	None	CCL4, GDSCv1, PDXE	CCL4, GDSCv1, PDXE		CW	Few-shot	None	KNN, LR, RF		
Vasilios	Gorgoulis	Professor,	His main	vgorg@	<a href="https://">https://</a>	Maybe. His big group is involved in diverse research	K. Vougas	Deep	2017	bioRxiv		GitHub	R			Gene expression	None					NN	None	ElasticNet, RF		
Vasilios	Gorgoulis	Professor,	His main	vgorg@	<a href="https://">https://</a>	Maybe. His big group is involved in diverse research	T. Sakellariopoulos	A Deep	2019	Cell Reports	IC50	GitHub	R	Single		Gene expression	None	GDSC	OCCAMS, MD Anderson,		NN	None	ElasticNet, RF			
Wei	Zhang	Assistant	His research	wzhang	<a href="https://">https://</a>	No. His lab is relatively new and has not done research	KT Ahmed	Network	2020	BMC Medical Genomics	AUC, ED50	GitHub	PyTorch	Single		Gene expression	None	NSCLC	NSCLC			GNN	None	ElasticNet,		
Wen	Zhang	Huazhong		wzhang	<a href="https://">https://</a>		X. Liu	GraphCD	2021	Briefings in Bioinformatics	IC50 to binary	GitHub	PyTorch	Single	GraphCDR	DNA methylation	Molecular graphs	GDSC	CCL4, GDSC		CW	Attention,	DeepCDR,			
Xinghua	Lu	Professor of	Interests in	xinghua	<a href="https://">https://</a>	Yes. Xinghua Lu has two publications of using deep	M. Ding	Precision	2018	Molecular Cancer Research		No	Matlab									Autoencoder	None	None		
Xinghua	Lu	Professor of	Interests in	xinghua	<a href="https://">https://</a>	Yes. Xinghua Lu has two publications of using deep	Y. Fan	Predictio	2020	Proceeding of Machine Learning	IC50 to binary	GitHub	PyTorch	Single	CADRE	Gene expression	Drug target	CCL4, GDSC	CCL4, GDSC		W	Collaborative	None	Versions of	None	Linear
Yidong	Chen	Professor,	Specializes in	chenyid	<a href="https://">https://</a>	Yes. He has a large group working on many	YC Chiu	Predictio	2019	BMC Medical Genomics	IC50	No	TF	Single	DeepDR	Gene expression,	None					Autoencoder	None	None		
Zhongming	Zhao	Chair Professor	He has a large	zhong	<a href="https://">https://</a>	Maybe. His group has one paper of drug response	P. Jia	Deep	2021	Nature Communications	IC50, ActArea	GitHub	TF and R	Single	VAEN	Gene expression	None	CCL4, GDSC, TCGA	CCL4, GDSC, TCGA		CW	VAE	ElasticNet			
Jian	Wu						R. Feng	AGM	2021	arXiv	AUC	GitHub	PyTorch	Single	AGM											
Andrea	Califano	Professor, Depart	Use systems bio	acalif@	<a href="https://">https://</a>	Maybe. Andrea Califano's group is working on drug resp	M. Barsali	A-commu	2014	Nature Biotechnology	IC20	Yes	DREAM	Pair	DREAM-methods	Gene expression	None	CCL (DREAM)	CCL (DREAM)		None	DREAM-method	DREAM-methods			
Andreas	Bender	Director of Digital	He is applying	ab454@	<a href="https://">https://</a>	No. Andreas Bender is mainly working on target selection	C. Cortés-Ciriano	Improved	2016	Bioinformatics																



## **IMPROVE Aim 2: Data Generation to Evaluate and Improve Drug Response Models**

- **Aim 2 will design and execute high-throughput experiments to generate new data aiming at evaluating and improving drug response prediction models**
- **Data will include RNA-seq and DNA-seq data of cancer models and drug response data with multiple doses and replicates, and potentially other clinically relevant tests.**
- **Cancer models can be patient-derived organoids (PDOs), xenograft organoids (PDXOs), and primary cell lines (PDCs), which are better representations of patient tumors than immortalized cancer cell lines**
- **In addition to data generation, we will continuously curate and standardize new drug screening/response data from the public domain**



# Anticipated Resources Developed

## Software

- **A pipeline enabling the evaluation of new prediction models and comparison with existing state-of-the-art models; standardized evaluation metrics and scenarios will be implemented.**
  - ◇ GitHub link: <https://github.com/JDACS4C-IMPROVE>
  - ◇ Multiple prediction performance metrics and functional metrics, e.g., interpretability and uncertainty quantification
  - ◇ Multiple cross-validation scenarios

## Models

- **Existing state-of-the-art drug response prediction models included in the pipeline that can run in batch mode that have been curated/validated and publicly available for easy adoption by the cancer research community.**
- **Improved prediction models through transfer learning on newly generated/curated data**



# Anticipated Translational Goals

## Benchmark Data

- Newly generated drug screening data on PDOs, PDXOs, or PDCs.
- Newly curated, standardized, and aggregated drug screening/response data on cell lines, PDOs, PDXs, and patients

## Advancing the state of the art

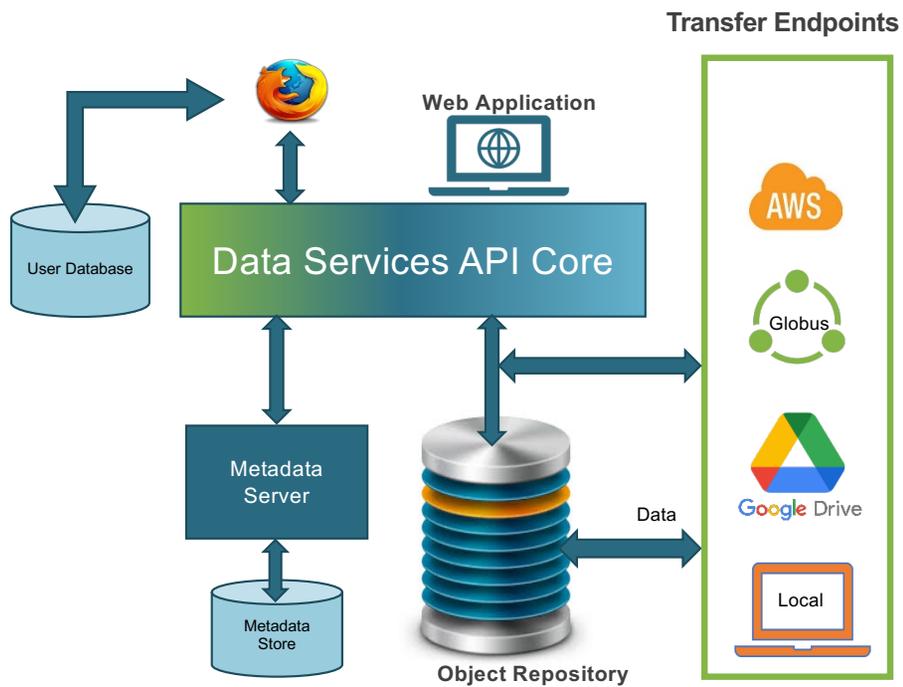
- Systematic errors in the ability of AI to predict outcomes/treatments can indicate novel subtypes and highlight previously unappreciated therapeutic targets.
- Potential help move from stage/grade classification to classification based on treatment classes and the likelihood of a favorable outcome.
- Aiding researchers in knowing, which models are believable and how they can be applied in real-world situations.
- Providing a systematic measurement of the value of each type of test/data in relation to cost and patient impact.



## Everything Needs to be Open

- The **IMPROVE** framework, our model analysis results, any improved models and all the data produced will be open source and available to the whole community
- **IMPROVE** will hold development hackathons that will be open and an annual meeting that will be open to the community for participation
- **IMPROVE** will work with the ecosystem to advocate for open models, open data, and open-source enabling replication of modeling results

# Predictive Oncology Model & Data Clearinghouse (MoDaC)



- Clearinghouse for annotated mathematical models and datasets from NCI collaborations
- Public facing web interface and RESTful APIs for submitting data.
- Metadata based search capability for locating models and datasets. Browsing and filtering support.
- Models and datasets can be staged in restricted access mode until ready for sharing.
- Multiple endpoint types supported for data transfer.
- DOI Support
  - Global identifier per asset.
  - Shareable link for citations.

<https://modac.cancer.gov>



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## **Backup slides**