

Blood-based CRC Screening Using Multiomics and Artificial Intelligence/Machine Learning

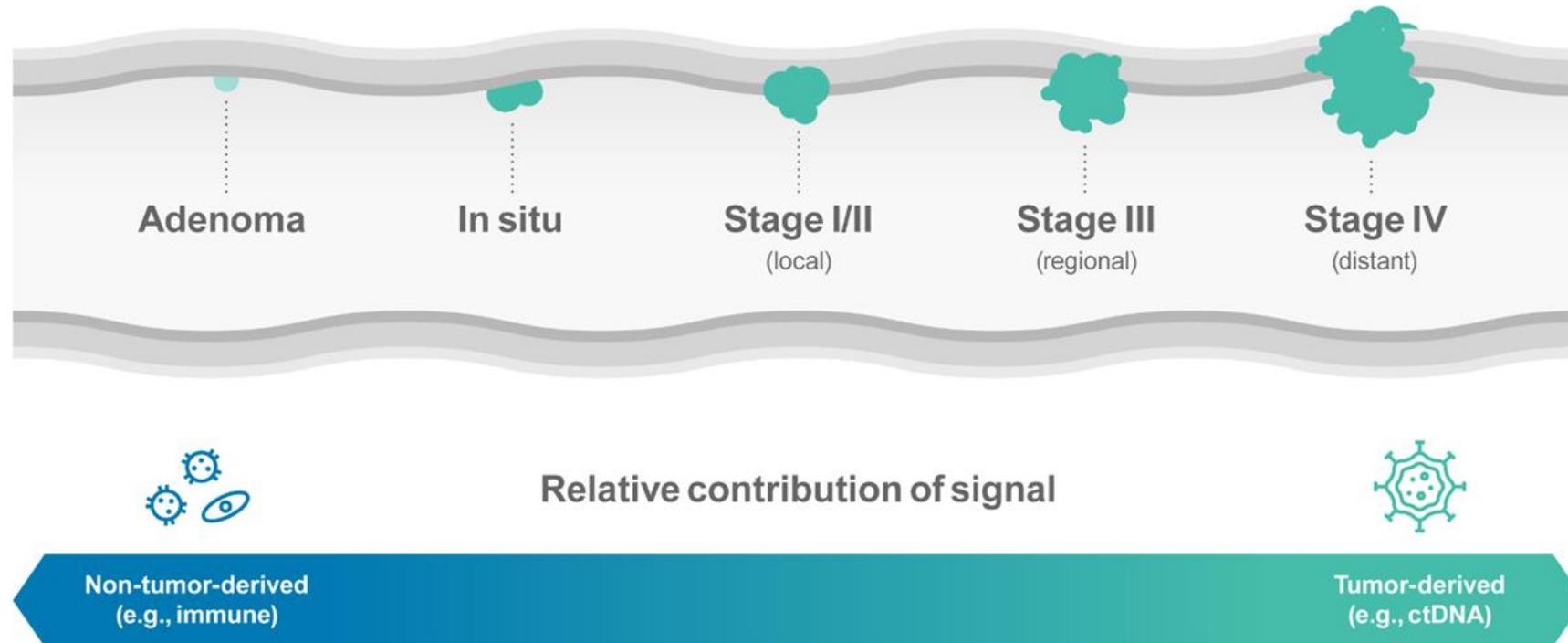
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WEO CRC Screening Committee

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Detection of earlier stages of colorectal neoplasia in blood can be difficult

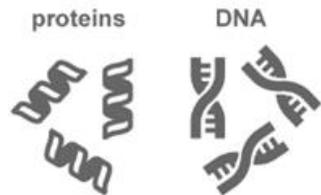


- Tumor-derived signals are detectable in late-stage disease
- Non-tumor-derived signals (e.g., immune system's tumor response) are detectable in earlier stages
- A multiomic approach could address the limitations of a strategy focused on a single assay

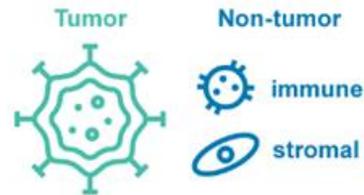
Multiomic test combines tumor- and non-tumor signals from DNA and proteins and uses an AI/ML-enabled classifier



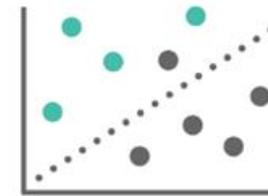
Blood Sample



Multiomics Platform



Potential Biological Signals



Machine Learning Classifier



Results

AI-EMERGE Study Design:

Prospective multi-center clinical study to iteratively train and test the classifier

**Screening Cohort
N=3217**

Scheduled for screening colonoscopy

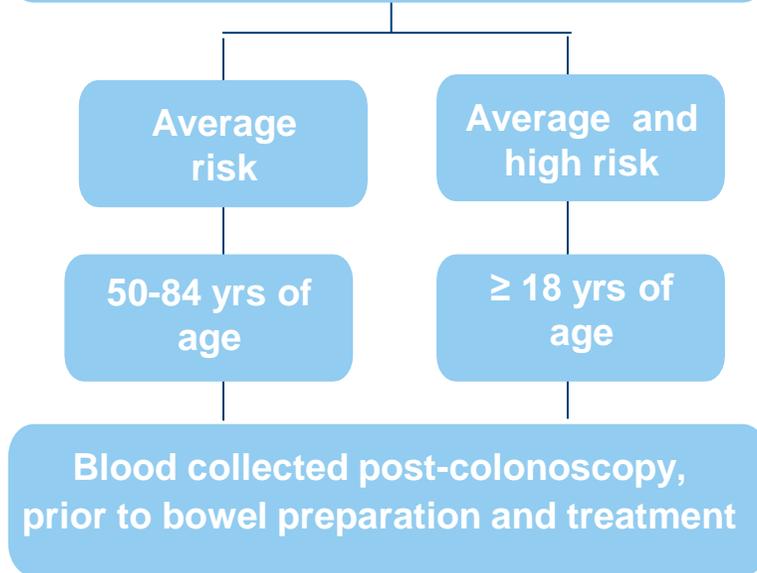
Average risk

50-84 yrs of age

Blood collected pre-colonoscopy, prior to bowel preparation

**Post-Colonoscopy Cohort
N=250**

Recent diagnosis of CRC or AA

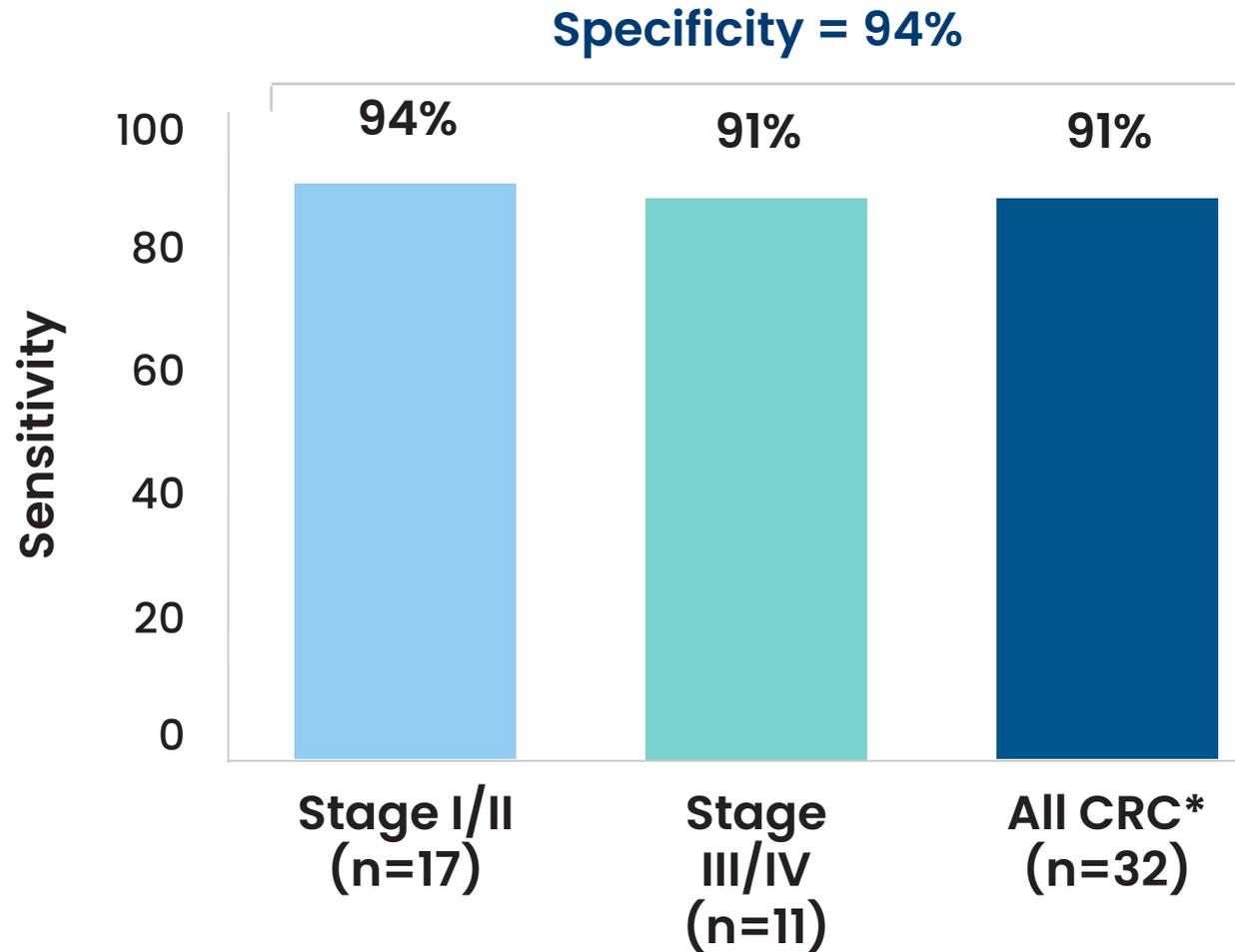


30 study sites (NCT#03688906)

- 2 academic tertiary care centers
- 28 community practices



AI-EMERGE: CRC results

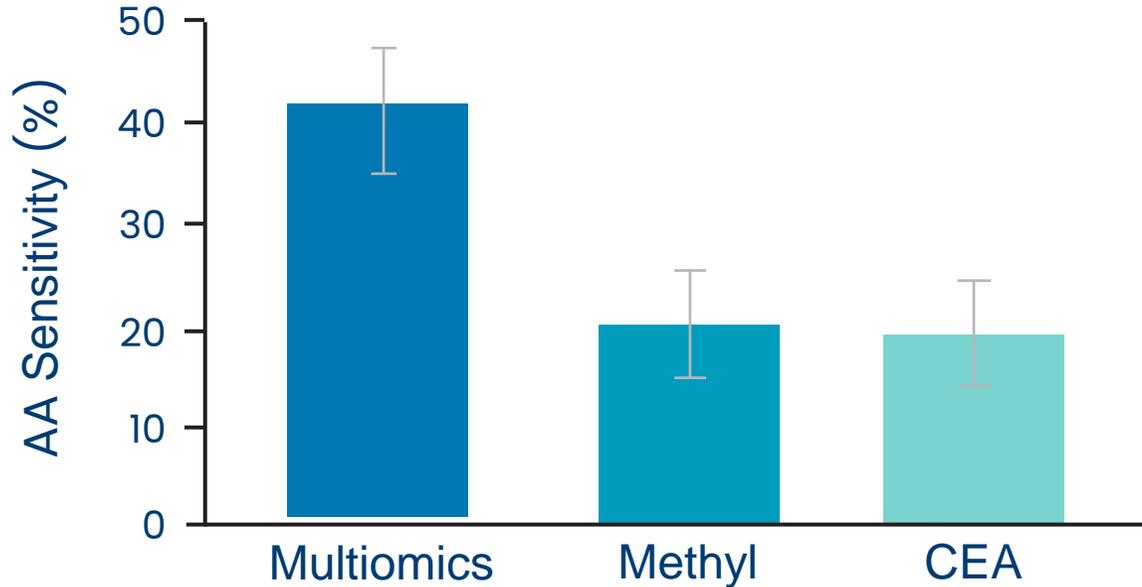


*4 samples with unknown stage were tested

- A statistically-based subset of samples from AI-EMERGE, including CRCs and colonoscopy-confirmed negatives, were used in this study
- 4-fold cross validation

AI-EMERGE: Advanced Adenoma Results

Multiomics vs cfDNA methylation or CEA alone



Sensitivity	41	20	19
Specificity	90	91	90

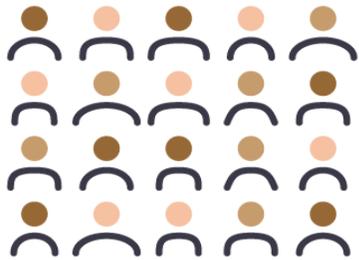
Whiskers show 95% confidence interval for sensitivity

- By combining signatures from both **tumor- and non-tumor- (e.g., immune) derived sources**, the multiomics test detected twice as many AAs as methylation-only or single-protein approaches
- 122 adenomas from screening and case-control arms
- 10-fold cross-validation was performed

The PREEMPT CRC[®] study: Prevention of Colorectal Cancer Through Multiomics Blood Testing

Prospective, Blinded, Multi-center Registrational Study (NCT04369053)

Study Population



Targeting >25,000

participants: 45-85 years of age, at average risk for CRC and willing to undergo a routine screening colonoscopy

Hybrid Recruitment

70%
Traditional



30%
Virtual



Traditional and Virtual: mobile phlebotomy available to all participants, enabling recruitment from 49 states

Study Endpoints

Sensitivity for CRC

Specificity for advanced colorectal neoplasia

Secondary: Sensitivity for advanced adenoma and negative and positive predictive value for CRC detection

Colonoscopy reference standard

Initial enrollment target of 14,000, increased to 25,000 based on lower than expected disease event rate

Highlights



Co-lead PIs

Theodore R. Levin



Aasma Shaukat



Diversity

Focus on the inclusion of a diverse and representative population

Enrollment to date:

- 12.8% Black participants
- 11.6% Hispanic participants

180 sites from 35 states:

- Academic
- Community practices
- HBCUs* (*Morehouse, Meharry*)
- FQHCs*

Partnerships:

- Colorectal Cancer Alliance
- Dia de la Mujer Latina**

Accessibility

- Traditional recruitment enables in-person study enrollment
- Virtual recruitment has enabled enrollment from 49 states and allows participants to use their preferred, local healthcare providers, reflecting real-world clinical care
- Mobile phlebotomy enables blood collection at home (or any preferred site)

*HBCU = historically black college or university; FQHC = federally qualified health center

**Partnership to build a culturally competent CRC education training curriculum for over 4,000 community health workers in Texas serving a predominantly medically underserved Hispanic community

Conclusions

- A multiomics approach, combining analysis of cell free DNA and proteins with an AI/ML classifier, may overcome traditional barriers to the detection of advanced adenomas and early stage CRC in blood.
- PREEMPT CRC, a validation study for this approach, has a target enrollment of >25,000, representing the largest registrational study to date for a non-invasive test for CRC in an average-risk population
- A hybrid virtual and site-based recruitment model is being used to recruit a diverse population and to help overcome barriers encountered during the COVID-19 pandemic.
- The population prevalence of CRC will likely decrease with ongoing screening efforts.
- To keep CRC screening affordable, creative solutions are needed to enable validation of modified or newly developed tests to proceed in a cost-efficient manner.

Thank You!

K-fold cross validation: A Machine Learning Technique

