



GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales



Pathogen Genomics: from research to service, and beyond

***Professor Tom Connor
Bioinformatics Lead Public Health Wales NHS Trust,
Professor of pathogen genomics and bioinformatics,
Cardiff University***

Supported by

MRC

Cloud Infrastructure
for Microbial
Bioinformatics



Partneriaeth
Genomeg
Cymru
Genomics
Partnership
Wales



Llywodraeth Cymru
Welsh Government



GIG
CYMRU
NHS
WALES | Iechyd Cyhoeddus
Cymru
Public Health
Wales

Conflict of Interest

No Conflicts to declare!

Funding Sources



MRC CLIMB



COG-UK, ConCOV



SP3



Microbes in the Food Chain



Welsh Government



Public Health Wales NHS Trust



Acknowledgements

PHW Pathogen Genomics

Dr Sally Corden
Joanne Watkins
Lee Graham
Alec Birchley
Bree Wilcox
Jason Coombes
Lauren Gilbert
Dr Catherine Moore
Dr Noel Craine
Dr Helen Adams
PHW Specialist virology centre
PHW CDSC
Welsh Healthcare Epis

Key CLIMB and COG-UK

Collaborators

Professor Nick Loman
Radoslaw Poplawski
Dr Sam Nicholls
Professor Andrew Rambaut and team, esp Dr
Áine O'Toole and Dr Verity Hill
Dr Erik Volz and team
Professor Oli Pybus and team esp Dr Louis du
Plessis
Professor David Aanensen and team

Cardiff University

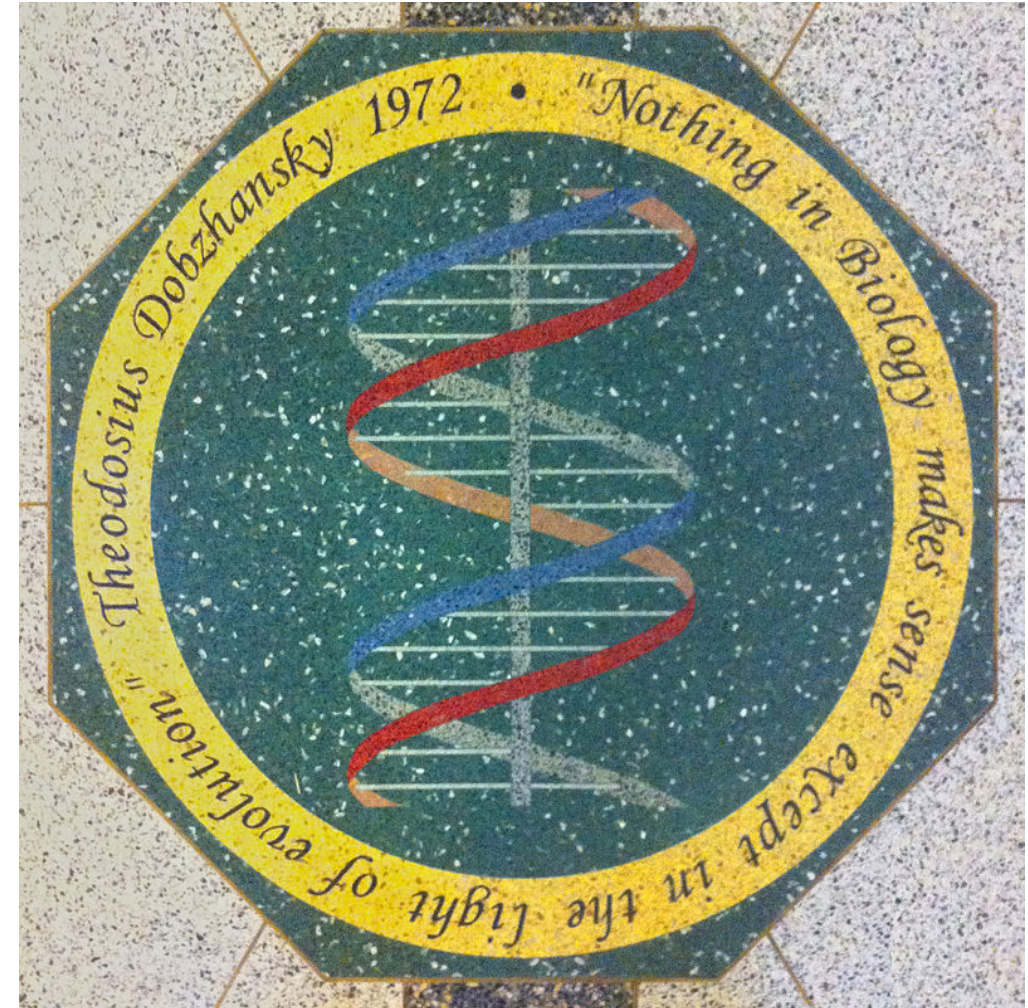
Dr Anna Price
Dr Joel Southgate
The ARCCA team
PHW Bioinformatics
Dr Matt Bull
Dr Sara Rey
Dr Nicole Pacchiarini
Dr Stephen Attwood
Dr Catie Williams
Amy Gaskin

The wider COG-UK Consortium : <https://www.cogconsortium.uk/>



Overview

- Introduction to genomics
- Potential
- Key challenge
- Research and service in action
- The future

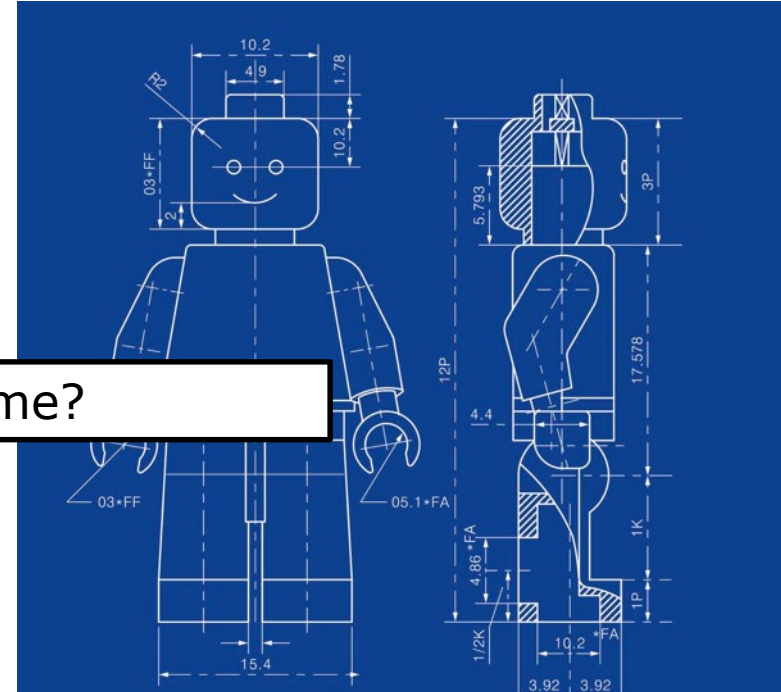


So, what is Genomics?

Put simply, genomics is the branch of biology that is concerned with studying genomes

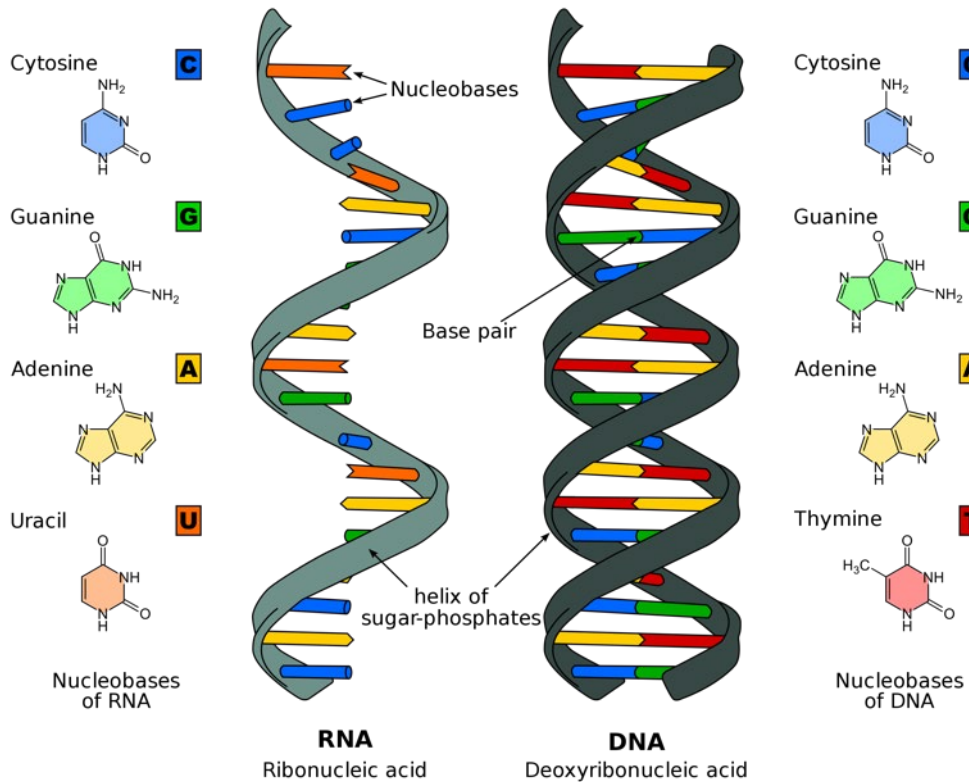


But what is a genome?



A genome is effectively the blueprint containing the instructions to build and run an organism

Idea is simple



1. The blueprint is 'written' in nucleic acids – DNA and RNA and is unambiguous

2. We can use that 'text' to examine organisms of interest

```
ATGATCGTAAACCTATCAGCTTTAGGTAAAAAGCGGTACGGGAATGTGGCAATACT
ATGATCGTAAACCTATCAGCTTTAGGTAAAAAGCGGTACGGGAATGTGGCAATACT
ATGATCGTAAACCTATCAGCTTTAGGTAAAAAGCGGTACGGGAATGTGGCAATACT
```

3. Changes in the blueprint can result in changes in the organism

```
ATGATCGTAAACCTATCAGCTTTAGGTAAAAAGCGGTACGGGAATGTGGCAATACT
ATGATCGTAAACCTATCAGCTTTAGGTAAAAAGCGGTACGGGAATGTGGCAATACT
ATGATCGTAAACCTATCAGCTTTAGGTAAAAAGCGGTACGGGAATGTGGCAATACT
ATGATCGTAAACCTATCAGCTTTAGGTAAAAAGCGGTACGGGAATGTGGCAATACT
```

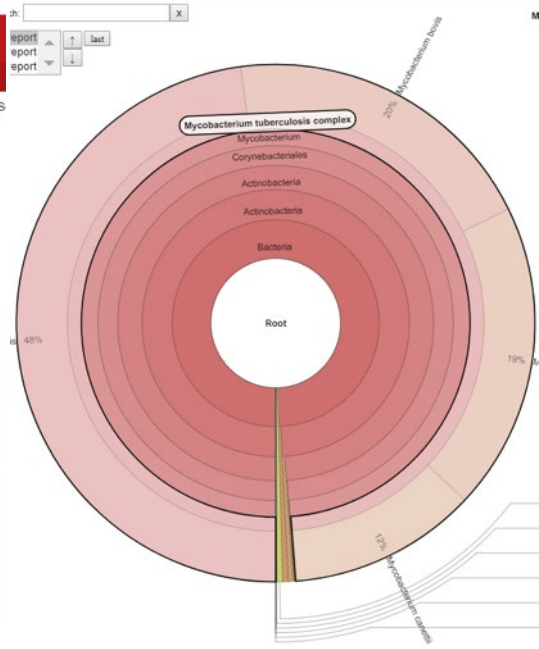
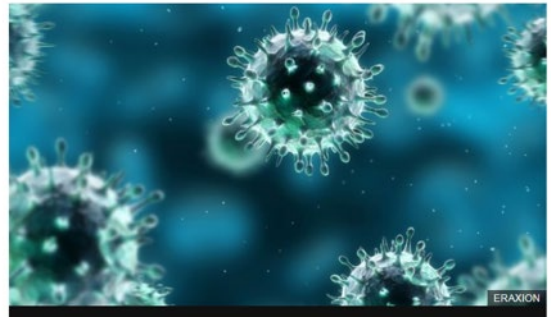
4. This means that genomics could replace a whole slew of tests and underpin new services

Pathogen genomics has massive potential

High throughput =
Faster turnaround

Common data types =
Diagnostic data can be used
for (population-level)
surveillance in real time

Precision healthcare



Organism Identification

Kraken (percentage)
Human 0.01

Mykrobe

Phylo_group	Percentage	Median
Mycobacterium_tuberculosis_complex	99.71	44
Species: Mycobacterium_tuberculosis	97.94	38
Lineage: European_American	100.00	45

Sequencing Quality Mapped to: R00000039

Total reads (~millions)	Mapped %	No reads mapped (~millions)	Coverage %
1.22	99.14	1.21	92.00

Resistance Summary

INH	RIF	EMB	PZA	QUI	SM	AG
S	S	S	S	S	S	S



Unambiguous
= clearer
diagnostics

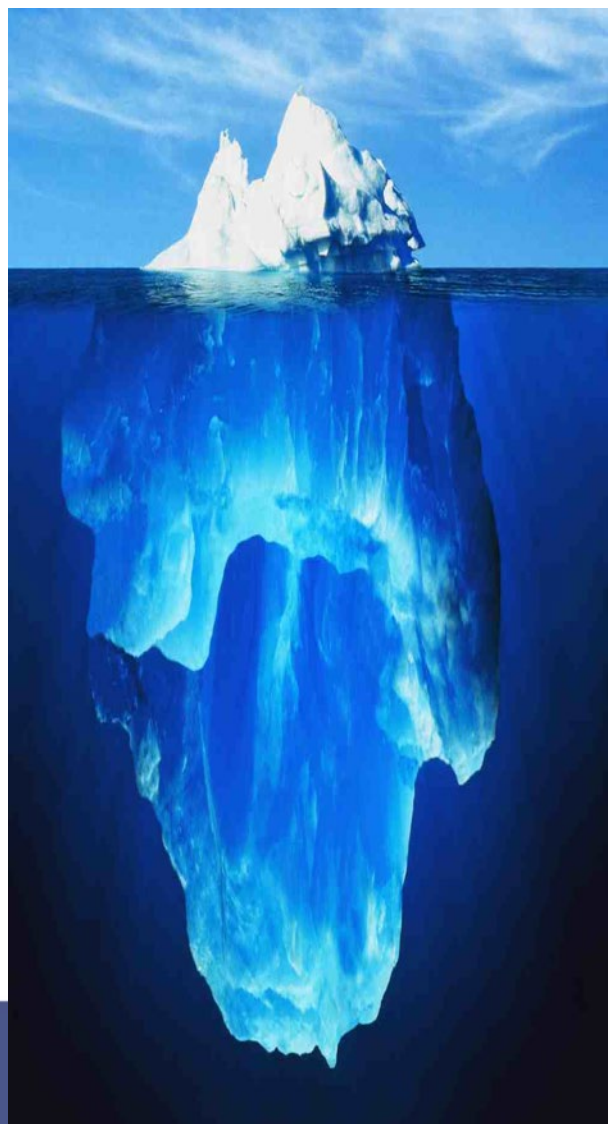
Precision medicine
Whole Genome = More
tests possible
simultaneously

Vast potential, but genomics greatest strength is also its greatest challenge

@M04531:39:000000000-AVVU9:1:1101:12907:2147 1:N:0:52
CCCGATGTTGCGCACGCCCTGGTTGGCGAAACCATAGTTGGCGCTGCCGGCATTGCCGAACCCGACGTTGAAGTTGCCACATCCGCCAACCCGATG
TTGAGGATGGGGATCTGGTTCAACGCGGTCCCGGCCGACACGCCCCGACAGCTGATGGCCGACGTTGCCGAGGCCCGACAGCACCCGCCGGCGT
CCCGAGCGGCAACACGCTGGTGTGTAGATCCCCGAGACACCCGAGCCGACGTTGAGCA
+
BAAAABBBFFFBGGGGGGGGGGGGGGDGHGGGGGGHHHHHHHHHGGGGGGHGCCGCFHHHG?EGGGG?EGEFHHHDGGHHHHHGGHHHGGGGGG
GGGGCDCGB1FHHGHGHGEDGHGHGHGHGHGGFGGGGGHFGGGGGADGFGGGGEGGGGFFFFFFFFFBFFFFFFFFFFFFFC=FAFFFFFFFFFFFFF
FFAFF.BCBDAFFFFFFFFFBADEFFFFFFFFFAABFF?9>D;DA->B=EE.FF/
@M04531:39:000000000-AVVU9:1:1101:20177:2174 1:N:0:52
GTTTTCGTCGCGATCGCCACGAGACCGAGGCTGATCTCGTATGCCGTCTTCTGCTTGAAACAAAAAAGCCGTACCCACCATTGACACCCGCGTACTC
ACCACTCTTACCGTCCTACTCACCTTTGCTTTTTGCCCGGCTTTATTCTGTCGACGCTACTCCTTCCCCCCCCGCTGCGTGCTCTCCATCCCCCTCC
TCCGAGACCTGCTTTACTTCCGGGCCTTGTCGCTGTCTTCTCCGCCTCTCTC
+
AAA?AF@FBDDDAEGEEECCEAECE2AEFGGHA1AFGFFF?GHFH0EEHGGDDGHFH1333B?111/1B0/?/?F3/?/3?44////////<</>//1??G1/?01
1110.<...11<>1<C..<00=0<00<-<<0.-;-;C-/000;0009/..-9;..-0;/000/9/.-;;;@--;-...9////////;;A.9.-A..9/99--..9.99////////.---9./9//;-
..;/9////.....9///
@M04531:39:000000000-AVVU9:1:1101:17824:2565 1:N:0:52
TTCTAATACTGTATCATCTGCTCCTGTGTCTAATAGGGCTTCTATCAGCCTGTCTCTTATACACATCTCCGAGCCCACGAGACTAGGCATGATCTCGTATG
CCGTCTTCTGCTTGAAAAAAAATAAATAAACTGTTACCATAAACGTGACTATTATGGCCATAAATAGTAACAATGTCTAGAGTAGATTCAATATGAAG
ACCGCTACATAATAGATAAATACGTCGTACGTCAACTTCGACAATCTGG
+
BBBBBFFFFFFFFGGGGGGGGGGGGHGHHHHHHHHHHHHHHFFHHHHHHHHHBBGFHHHHFHHHHHHHHHFFHHHFHDHGEGCGCFFGGGCGHHHHGHGH
FFHHFGHHGHGGGGHFGHHGHGHGCGFH@EEC/232B33332@2@>2>22@2<D22/0/??<<11111/?1<F11111>11<11111<00=0=DF00
0=D000000000//---::009;;000;000000.0.9-..-/...9900....-//;/:



The sequencing iceberg: data and translational challenges of moving genomics from research to service



Sequencing is relatively cheap, and sequencing data is the 'same'

However, the key challenges and costs are hidden

Bioinformatics expertise

Network capacity

User accessibility of software/hardware

Appropriate compute capacity

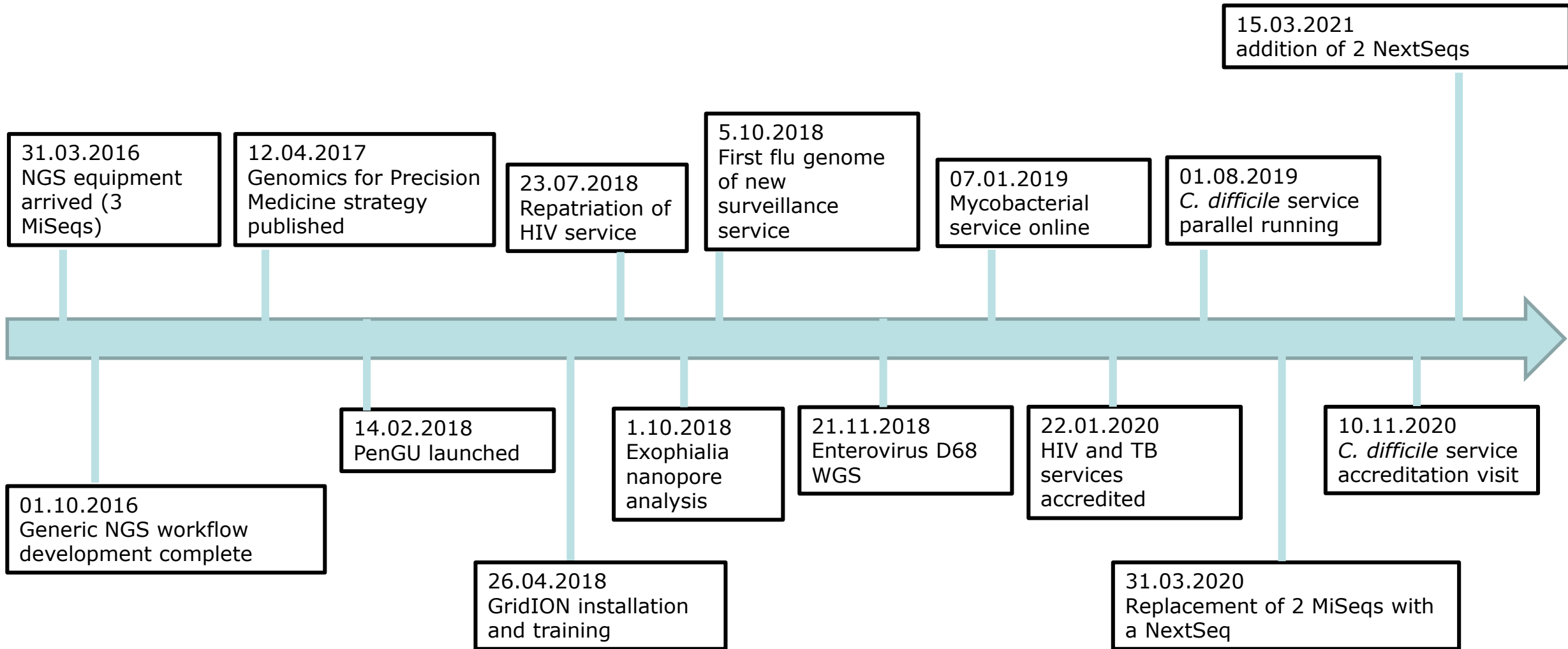
Software development

Storage availability

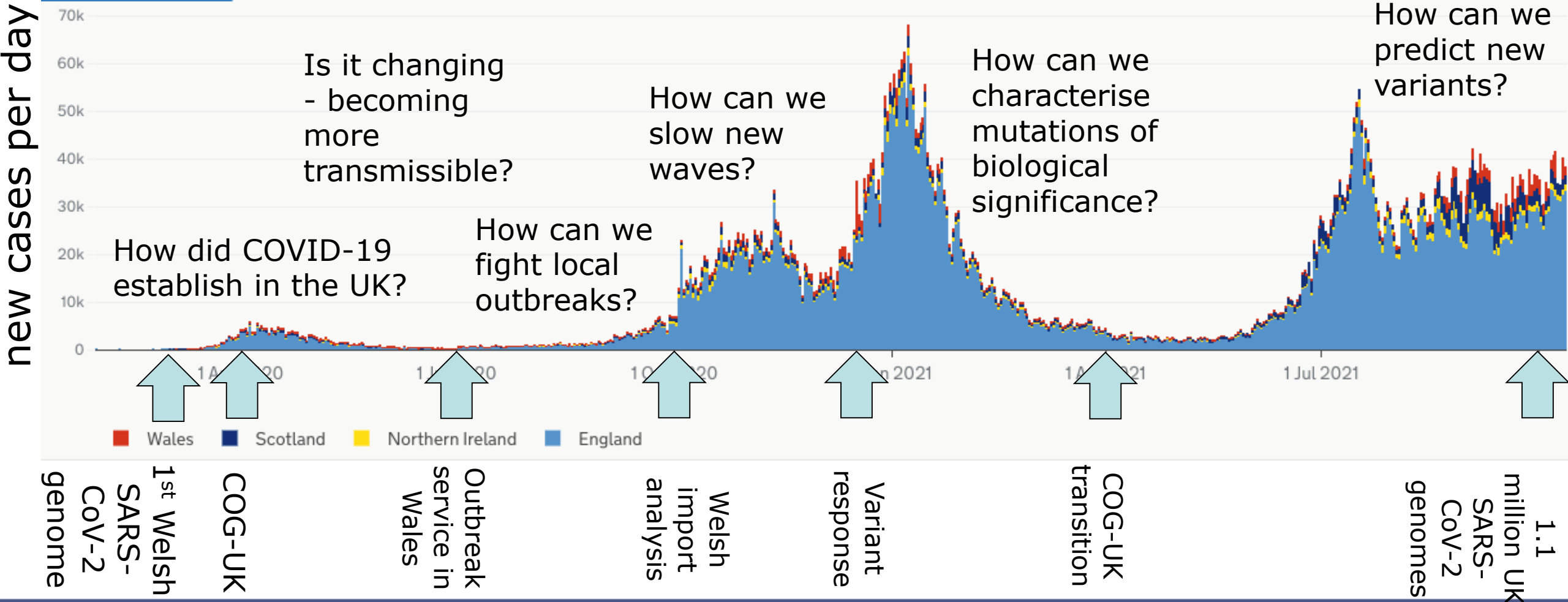
Requires research, infrastructure, expertise

In research, these can account for up to 90% of the costs of doing genomics work

Sequencing iceberg breaking in Wales



Vision of the future: Evolution of precision healthcare services from research – SARS-CoV-2



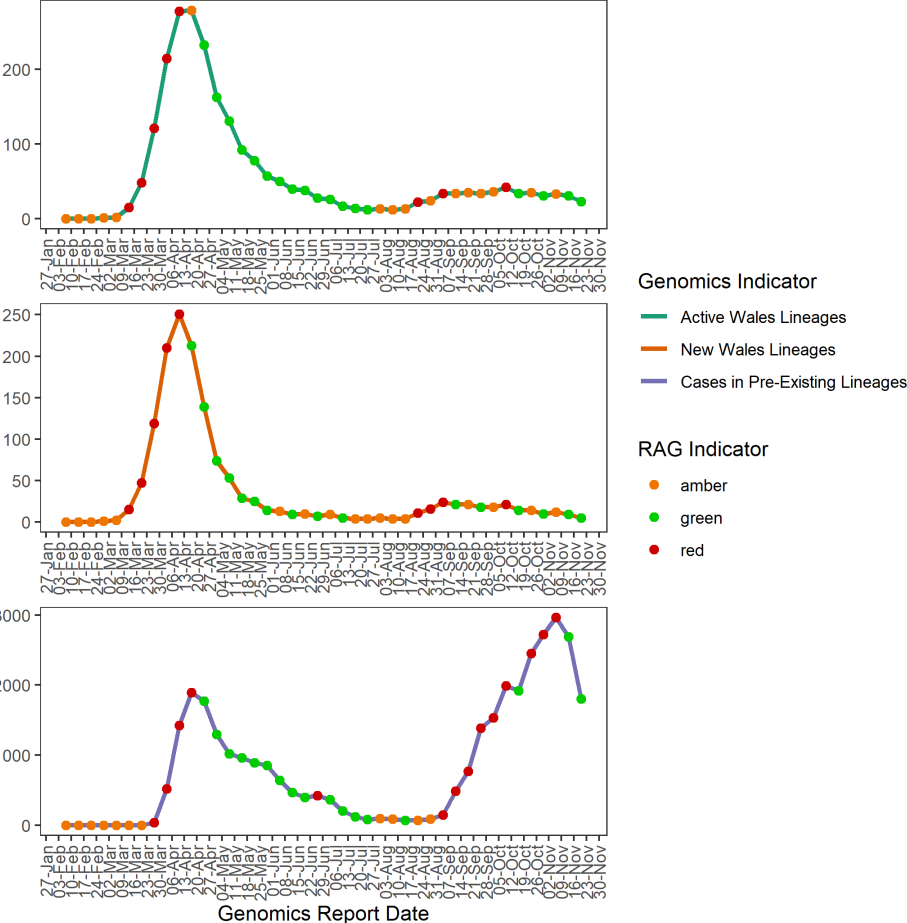
Iechyd Cyhoeddus Cymru
Public Health Wales

Pathogen genomics research translation enables precision public health

Phylotype	TestLocationForPhylotypes		
	Community Testing	Acute Hospital	Community Hospital
UK5_1	●●●●●●●●	●●●	●●●
UK5_1.1	●		
UK5_1.23		●	
UK5_1.58	●●●●●●●●	●●●●●●●●	●
UK5_1.222	●		
UK5_1.296	●		
UK42_1.38		●	
UK47_1.1		●	
UK86_1	●		
UK116_1.1	●●●		
UK131_1			●●●
UK150_1	●		
UK158_1.2	●		
UK463_1		●	
UK527_1.3			●
UK632_1	●		
UK632_1.4	●●●●		
UK632_1.9	●	●	
UK633_1	●		
UK5322_1.2.2.1	●		

Local Level

National Level



Supporting Government

Pathogen genomics in Wales

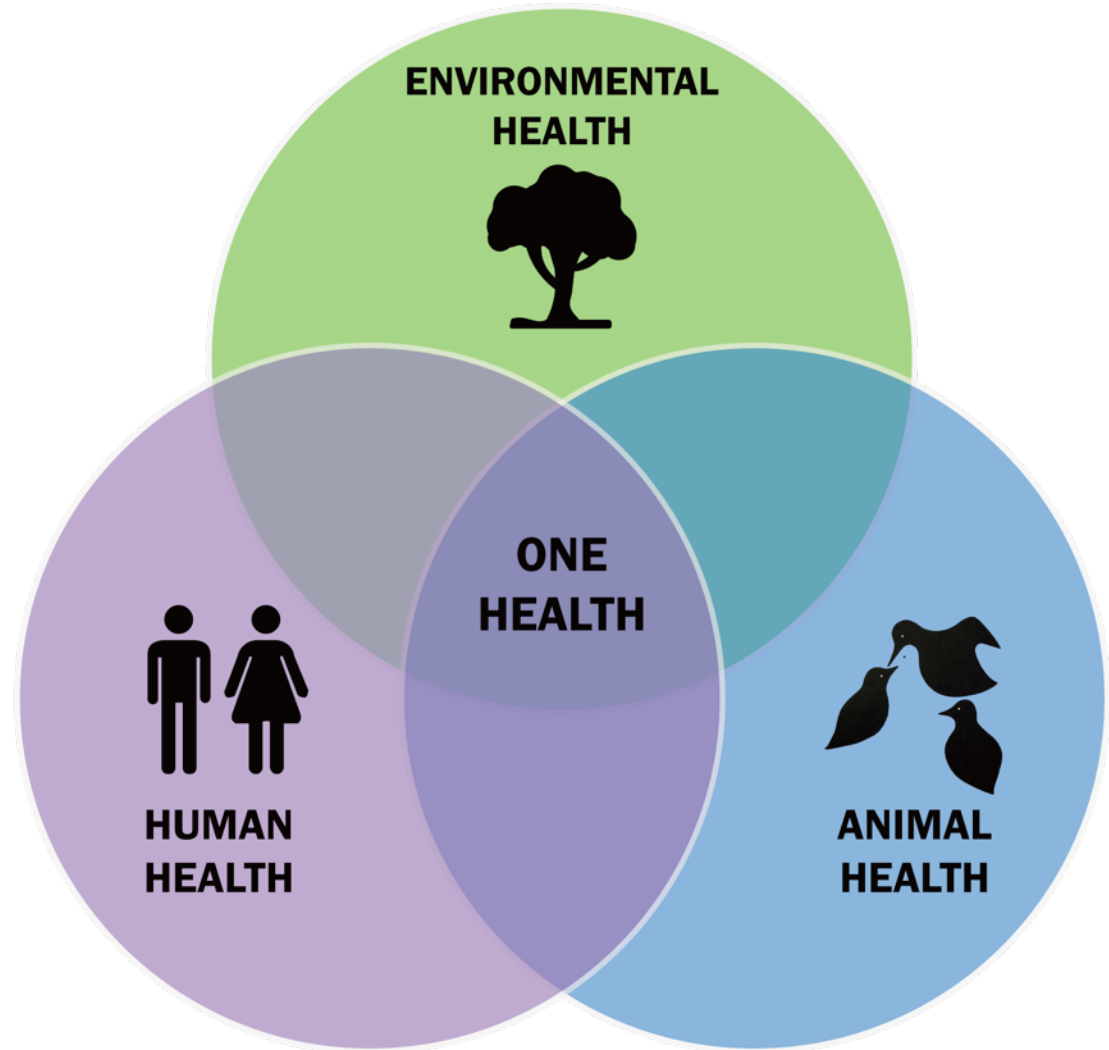
- PenGU has translated pathogen genomics research into service
- Key is co-creation and collaborative working
- Current development areas
 - **AMR bacterial surveillance and characterisation**
 - **Cystic Fibrosis polymicrobial infection diagnostics**
 - **Enterovirus surveillance**
- Production systems
 - ***C. difficile* surveillance and outbreak support**
 - ***Mycobacteria* identification and characterisation**
 - Influenza surveillance
 - **HIV susceptibility testing**
 - COVID-19 outbreak support and surveillance



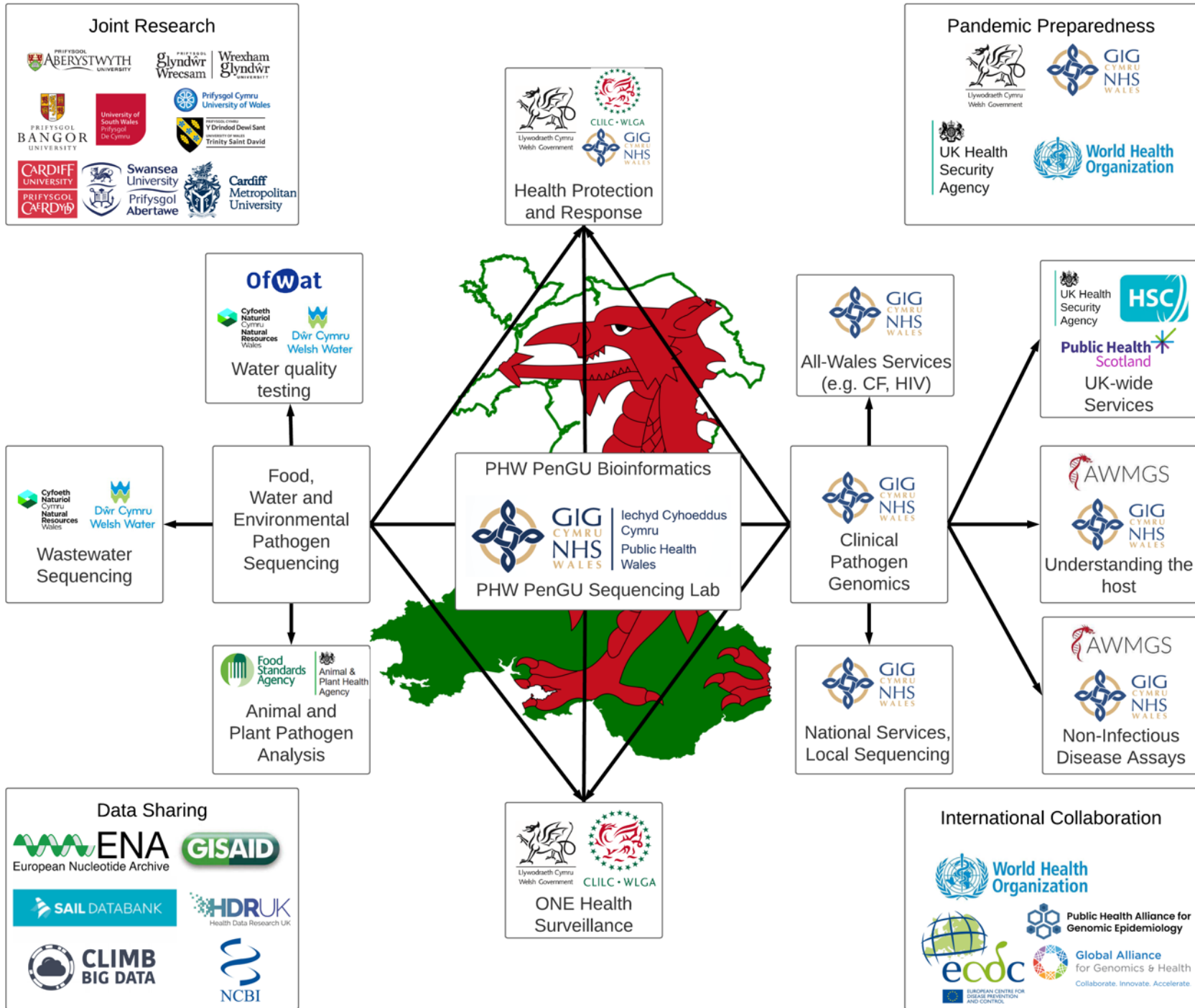
Accredited Services
System design/needs assessment in progress
Pilot system development

Going further – ONE Health

- Next step is to move beyond single services to new levels of data integration and data use
- This will require integrating research from other areas
- End goal is enabling a holistic view of healthcare that integrates pathogen, human, animal and the environment



Genomics is the lynchpin of future service development, which unlocks the possibility of ONE Health and precision healthcare/public health



Conclusions

Genomics is a foundational technology which allows precision healthcare

Genomics in service has grown from genomics research, and the translational pathway for this remains critical

SARS-CoV-2 has demonstrated how the potential of genomics can be realised

Challenge now is to imagine that new future, and what research and service development work is required

Genomics isn't just another typing tool, it is a field which will give birth to new services and enable a totally new approach to healthcare, integrating patients and populations

