Incidental Findings and Next-Generation Genomic Research

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Disclaimer

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Roadmap

- Background: next-generation sequencing
- Incidental findings in genetic research
- Unresolved ethical controversies and questions

Glossary of Terms/Acronyms

- GWAS = genome-wide association studies
- SNP = single nucleotide polymorphism
- dbGaP = \underline{d} ata \underline{b} ase of \underline{G} enotypes \underline{a} nd \underline{P} henotypes
- WES = whole exome sequencing
- WGS = whole genome sequencing
- NGS = next generation sequencing
- IF = incidental findings

Definition

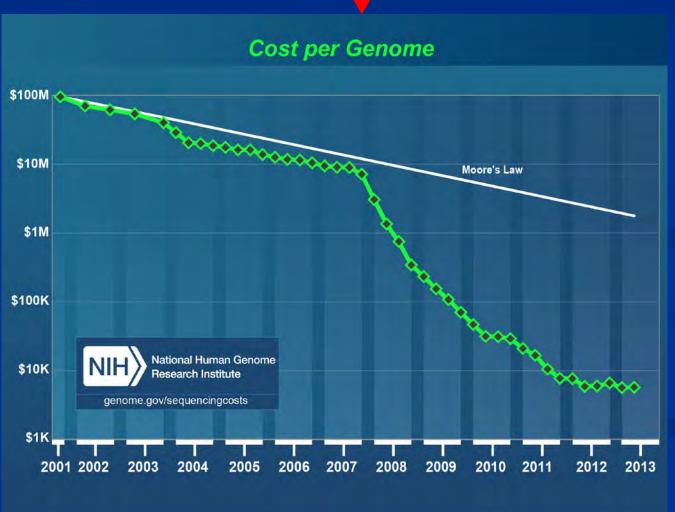
- An incidental result is:
 - "[A] finding concerning an individual research participant *that has potential health or reproductive importance* and is discovered in the course of conducting research *but is beyond the aims of the study*"

Wolf, et. al., JLME, 2008, "Managing Incidental Findings in Human Subjects Research"

Background: Next-generation sequencing

Advancing Sequencing Capacity



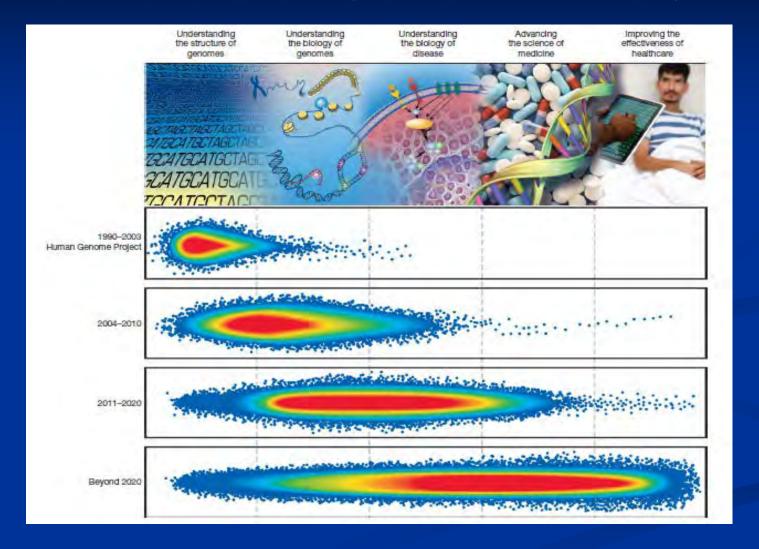


En Route to Routine Whole-Genome Sequencing

Targeted Genetic Research



The Future of Genomic Medicine



Green, et. al., Nature, 2011, "The Future is Bright".

Incidental Findings in Genetic Research

General Argument

- WES/WGS does not raise novel ethical concerns, but...
- ...it will significantly magnify and make more concrete many of the risks that have been relatively theoretical to this point...
- ...challenging some basic assumptions about how to handle incidental findings in genetic research

(Tabor, Berkman, Hull, et. al., 2011, AJMG, How Exome and Whole Genome Sequencing Challenge the Framework of Human Genetics Research)

A new way of thinking about returning incidental findings?

- Current assumption #1
 - Traditional genetic research will produce very few clinically significant incidental findings

- Revised assumption #1
 - It is no longer a question of whether or not clinically relevant results will be found in any research participant, but rather how many results will be identified in each participant.

Looking for Incidental findings in a Whole Genome

- WGS was performed on 2 monozygotic twins
- 44,270 variants detected initially
 - Exclude bad data
 - Exclude known non-pathogenic variants and variants in untranslated regions, noncoding regions, synonymous changes
- 1,407 possibly pathogenic variants
 - Excluding clearly false positive data
- **430** variants

Incidental Findings and WGS

Looking at raw data, cross reference each of the 430 variants with existing databases and published literature to determine which variants occur in genes connected to any human disease or condition.

Results

- 8 likely pathogenic variants that definitely need to be confirmed;
- 30 potentially pathogenic variants that might be clinically relevant and will be discussed by a group of clinicians, medical geneticists, genetic counselors and ethicists to determine whether they meet the protocol's threshold reporting criteria in our protocol

A new way of thinking about returning incidental findings?

- Current assumption #2
 - A clear distinction exists between so-called "incidental" findings and findings that are explicitly related to the original study hypotheses or disease focus.

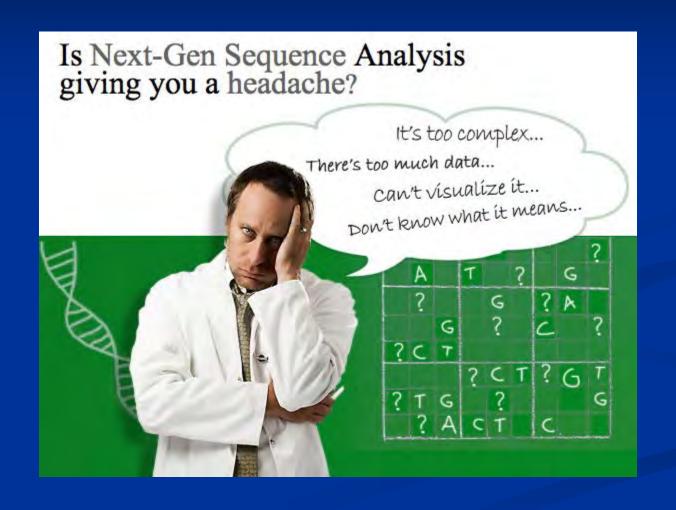
- Revised assumption #2
 - For experimental approaches based on WES/WGS, this distinction between incidental and non-incidental findings will become less meaningful.

A new way of thinking about returning incidental findings?

- Current assumption #3
 - Don't look, don't tell:
 - "Researchers generally have no obligation to act as clinicians and affirmatively search for IFs" (Wolf et al.)

- Revised assumption #3
 - With WGS technology, the act of "looking" for all possible results becomes much more practical and indeed is a fundamental component of the analytical approach

The Problem with Technological Advances



From the Mouths of IRBs...

There is more than one ethically-defensible approach to WES research

"It's much more case-by-case. What are the protocols? Who are the people? What's the relationship between the investigators and the people whom they're studying?"

From the Mouths of IRBs...

IRBs are still figuring out how to review WES protocols

"We certainly don't have a policy, and I don't know that we really have come to a firm conclusion. I mean, it gets discussed every time, and there's disagreement every time."

From the Mouths of IRBs...

Think we've gone through several different discussions in our IRB for each specific protocol, but I think we are still at the stage where we hear from investigators what their approach is, and then we decide at the meeting if that sounds reasonable."

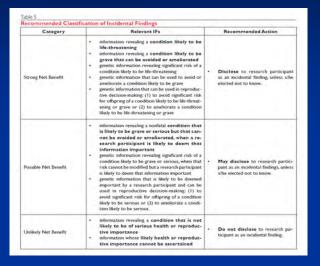
Three Emerging Models

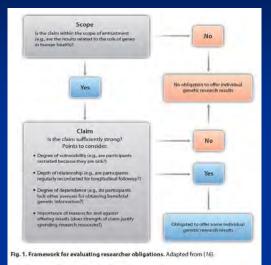
| Design | (Re)consent Covers: |
|--|--|
| No incidental findings to be disclosed | Nature and scope of analysis Datasharing plans That results will NOT be disclosed even though they might be generated |
| Limited incidental findings to be disclosed | Nature and scope of analysis Datasharing plans That results might be disclosed under carefully defined circumstances Though unlikely |
| More robust plans for disclosure of findings | Nature and scope of analysis Datasharing plans That results might be disclosed under carefully defined circumstances How preferences will be solicited Any "mandatory disclosure" provisions |

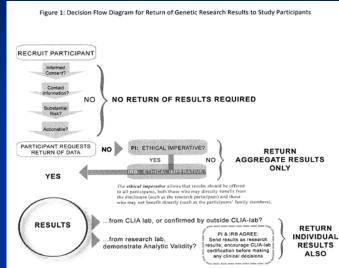
Guidelines and Frameworks

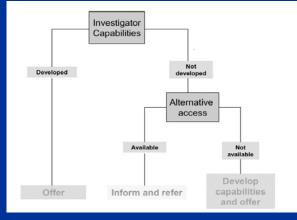
- NHLBI (2004)
- NHLBI (2009)
- Result-evaluation approach (Ravitsky and Wilfond, 2006)
- Net-benefit approach (Wolf, et al., 2008)
- Ancillary care framework (e.g., Beskow and Burke, 2010)
- Tiered-consent model (Rothstein, 2006)
- Etc.

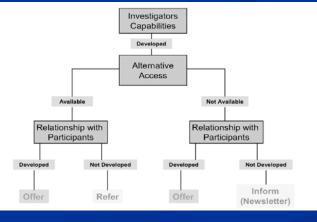
Conflicting Guidance

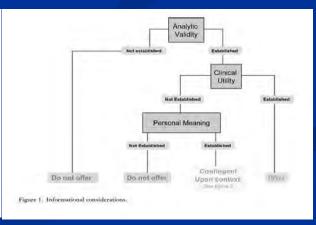












Unresolved Ethical Controversies and Questions

Why is there an obligation to disclise GIFs?

- **Beneficence:** the idea that researchers should have the welfare of the research participant as a goal.
- Respect for autonomy: the recognition that all individuals have the right to make their own decisions.
- **Duty to warn:** obligation to warn participants if they are in significant, imminent danger.
- Right to know: research participants have an inherent right to obtain genetic information about themselves.

Why is there an obligation to disclise GIFs?

- **Reciprocity:** the idea that investigators owe participants something in exchange for their contribution to the research endeavor.
- Autonomy: Genetic information is important and when incorporated into decision-making can enhance autonomy
- **Doctor-Patient relationship:** participants should be treated like patients, and clinicians would disclose these results to their patients.
- Professional responsibility to inform their subjects

Why is there an obligation to disclise GIFs?

- Legal liability: fears about law suits if a participant later develops a condition that could have been prevented.
- Public trust in research
- Institution's professional reputation

Some arguments against an obligation to return incidental research findings

- Challenges to the notion that beneficence, respect for persons, reciprocity, justice are violated by lack of disclosure
- The purpose of research is not to benefit the individual research participant but rather to produce generalizable knowledge
- Risks associated with conflating research and clinical care
 - Therapeutic (diagnostic) misconception
- Resource limitations

Initial Views on Whether There is an Obligation to Disclose GIFs

Do you believe that researchers have an obligation to disclose genetic incidental findings to participants?

Always 13%

Sometimes 65%

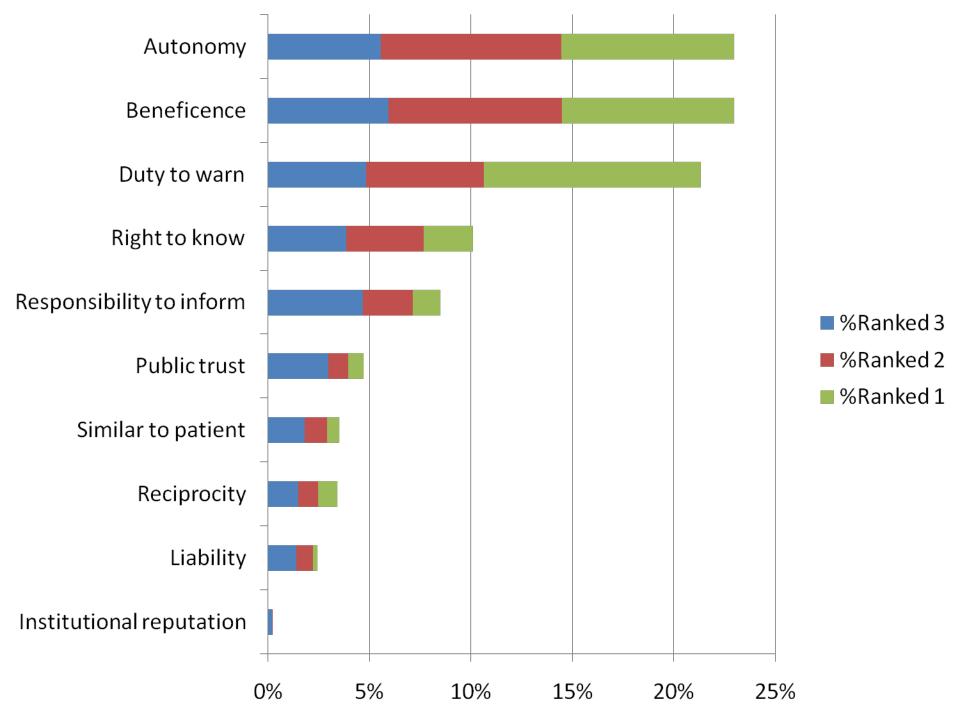
Rarely 13%

Never 2%

Don't know 7%

Ethical Reasoning

| | Strongly agree or agree |
|-----------------------------|-------------------------|
| Duty to warn | 84% |
| Respect for autonomy | 80% |
| Beneficence | 79% |
| Professional responsibility | 67% |
| Public trust in research | 58% |
| Right to know | 54% |
| Institutional reputation | 36% |
| Legal liability | 34% |
| Participants = patients | 34% |
| Reciprocity | 34% |



Factors that can diminish an obligation to disclose GIFs

| | Strongly agree or agree |
|--|-------------------------|
| Inadequate clinical or analytic validity | 71% |
| Inadequately demonstrated clinical utility | 66% |
| Lack of funding, resources or infrastructure | 29% |
| Adverse psychological impact | 23% |
| Participants won't understand | 22% |
| Investigators ≠ clinicians | 18% |
| Time and effort required | 7% |

#1 (validity) and #2 (utility) > #3, #4, #5, #6, #7 (p<0.05)

What kind of genetic information generates an obligation?

- Some general agreement about the relevant factors:
 - Analytic validity
 - Clinical relevance
 - Actionable
 - Desired

But disagreements and controversial issues lurk:

- Why can't we agree on a set of common definitions?
- How much does the research context matter?
- When is reconsent required?
- Do researchers have a duty to look for incidental findings?
- When is it appropriate to disclose genetic information to relatives of the proband?
- Is the right not to know absolute?

A Lack of Common Definitions

- "Clinical Significance"
 - Defining the threshold
 - Clear and immediate need vs. important health implication
 - Net benefit (strong, possible, unlikely)
 - Clinical utility, personal utility, general utility
 - \blacksquare Relative risk > X
- "Incidental"
 - Aims vs. methods
- "Actionable"
 - Reproductive information
 - Huntington's Disease
- "Research Result"
 - Analytic validity Is CLIA certification required?

Do All Studies Have to Return Incidental Findings

- Literature and guidelines have focused on defining the kind of information that might give rise to an obligation to return results
- Emerging idea that the obligation to return incidental findings could also be a function of the research context
 - Study characteristics
 - Population characteristics

Beskow and Burke, 2010, Science Translational Medicine, "Offering Individual Genetic Research Results: Context Matters."

Incorporating Factors Relating to the Research Characteristics

- Nature of study
 - Clinical trial, natural history, basic science
- Study resources
 - e.g., genetic counselors
- Investigator expertise
- Specific aims
- Feasibility of recontact

Incorporating Factors Relating to Subject Characteristics

- Alternative access/dependence
- Degree of vulnerability
- Depth of relationship

Re-examining the Stumble Strategy

- Assuming there is a duty to disclose significant incidental findings, might there be an obligation for researchers to actively look for these findings? (Gliwa and Berkman, forthcoming)
- Standard view: "researchers generally have no obligation to act as clinicians and affirmatively search for IFs," (Wolf et al. 2008)

Questions

- Assuming that there is some obligation to return incidental findings that one stumbles upon, do investigators have a duty to look for incidental findings?
- What if a list of "reportable" variants existed
 - A committee-compiled and regularly-updated list of variants that meet a certain threshold of validity, severity, and actionability

Disclosure to Relatives

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Target Article

Genomic Inheritances: Disclosing Individual Research Results From Whole-Exome Sequencing to Deceased Participants' Relatives

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Flavia M. Facio, National Human Genome Research Institute Haley Eidem, National Human Genome Research Institute Sara Chandros Hull, National Human Genome Research Institute Leslie G. Biesecker, National Human Genome Research Institute Benjamin E. Berkman, National Human Genome Research Institute

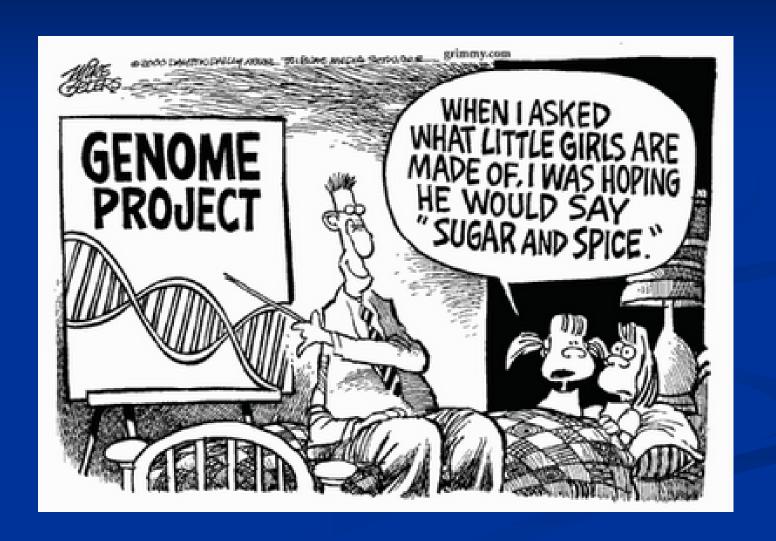
Whole-genome analysis and whole-exome analysis generate many more clinically actionable findings than traditional targeted genetic analysis. These findings may be relevant to research participants themselves as well as for members of their families. Though researchers performing genomic analyses are likely to find medically significant genetic variations for nearly every research participant, what they will find for any given participant is unpredictable. The ubiquity and diversity of these findings complicate questions about disclosing individual genetic test results. We outline an approach for disclosing a select range of genetic results to the relatives of research participants who have died, developed in response to relatives' requests during a pilot study of large-scale medical genetic sequencing. We also argue that studies that disclose individual research results to participants should, at a minimum, passively disclose individual results to deceased participants' relatives.

Keywords: genomics, medical genetics, research, genetic, personal genetic information, bioethical issues, ethics, research

Disclosure to Relatives

- Should genetic research results of potential clinical benefit be disclosed to a deceased participant's relatives?
- If so, under what circumstances and through what mechanism should they be disclosed?
- What subset of the results should be disclosed?

The Right Not to Know



One Area of Apparent Consensus

- Findings should only be returned when they are desired by the research participant
- An obligation to offer individual findings to research subjects
- Discuss right not to know and solicit subject preferences
 - IFs should only be *offered* when "During the informed consent process or subsequently, the study participant has opted to receive his or her individual genetic results."

Standard Ethical Review

- If a participant has asserted a desire not to know and such consent is valid, standard ethical analysis suggests that such results must not be returned
 - Autonomy
 - Privacy
- Extensive support in the genetic testing and research ethics literature
 - E.g., BRCA, Huntington's, Alzheimer's
 - Incidental findings guidance documents

Questions

- Are traditional conceptions about the "right not to know" appropriate in a genomic research context?
- How should a subject's desire not to know genetic information be solicited?
- Are there any (limited) circumstances where it might be ethically appropriate to override an individual's expressed wish not to know genetic information about themselves?
 - See e.g., ACMG guidelines

Thank you

- Questions:
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