

Introduction of Tohoku Medical Megabank Cohort Study. How to achieve personalized health care using big data.

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The Great Eastern Japan Earthquake March 11, 2011

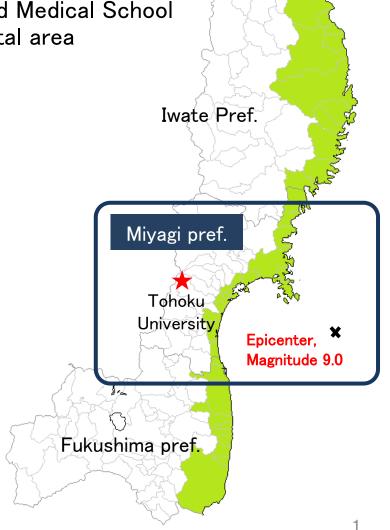
- The total number of dead and missing persons is 18,550
- Many key hospitals suffered from the Tsunami
- As an emergency support, Tohoku University Hospital and Medical School sent more than 1,500 doctors (total) to the damaged costal area

What shall we do as medical scientists?

Creative Reconstruction

- A core project is required to revitalize the Tohoku region
- Create an attractive and thriving center of innovation leading to fast-track recovery of the Tohoku region





March 25, 2011

ToMMo's

Residents Cohort and Birth & Three Generation Cohort

Community / Residents Cohort

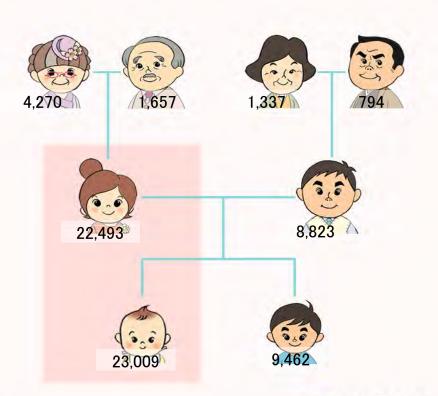
Recruit 80,000 residents from coastal areas in Miyagi and Iwate provinces Recruit through joint session with health check by local government and use of seven regional support centers in the area

Birth & Three Generation Cohort

Recruit 70,000 people including offspring, parental and grandparental generations Request expectant mothers for cooperation in maternity hospitals



At March 31, 2016, we have finished recruit of 84,000 participants for Resident Cohort and at March 31, 2017, we have finished recruit of more than 73,000 for the Birth and Three Generation Cohort.



イラスト制作 橋本さと子

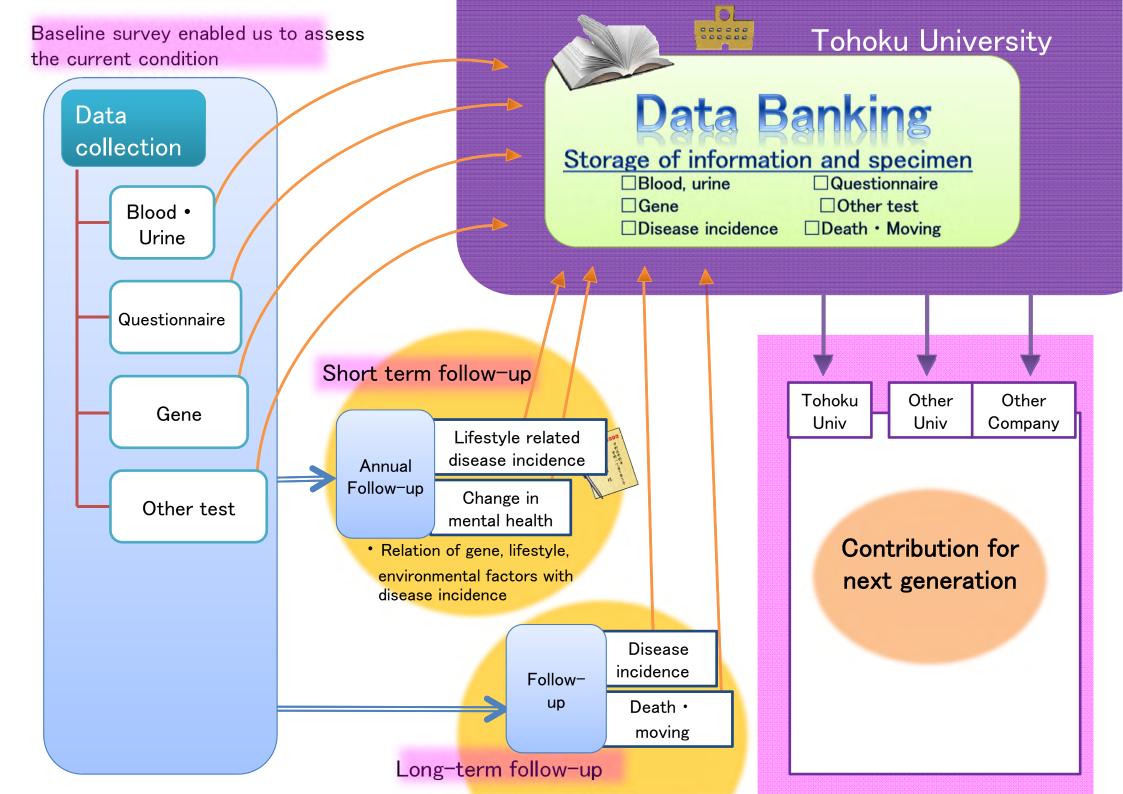
We recruited more than 150,000 participants in total.



TMM Community Based Cohort Study



Health	Depression Increment of Life Insomnia style related disease Monitor Drinking Early detection Smoking of problem and counteraction State	 Monitoring of disease incidence Early intervention if risk factors are clarified
alth Check-	Prospective cohort study design Clarify the causal relationshi and elucidate risk factors of diseases.	Prevention of secondary health damage
k-up	Gene-environmental interaction is not fully clarified	Establishment of personalized healthcare and medicine



How participants were recruited?

Inclusion criteria: Aged > 20years and live in Miyagi and Iwate prefecture

Type 1 survey based on municipal health check-up

At the sites of annual health checkup in the local communities

- Trained staff approached and obtained additional blood sample and urine sample with informed consents
- Questionnaire was distributed

Type 2 survey based on assessment center-based survey

Volunteer based recruitment at 7 community support centers

Participants voluntarily made appointments and visited community support centers nearby

Data Collected from All Participants in TMM Cohort Studies

Baseline Measurements

- Height
- Weight
- Blood pressure
- Blood glucose
- Serum cholesterol
- Liver function
- Uric acid
- Renal function
- Specific Ig E (Allergy)
- Helicobacter pylori
- Pepsinogen I and II
- Microalbuminuria
- Urinary Na
- Urinary K

Questionnaire-Based Data

- Smoking
- Alcohol consumption
- Physical activity
- Depression (CES-D)
- Psychological disorder (K6)
- Insomnia (Athene insomnia scale)
- Food Frequency Questionnaire
- Disaster related scale
- History of diseases
- Occupation
- Social connection

Type1 recruitment, Miyagi prefecture



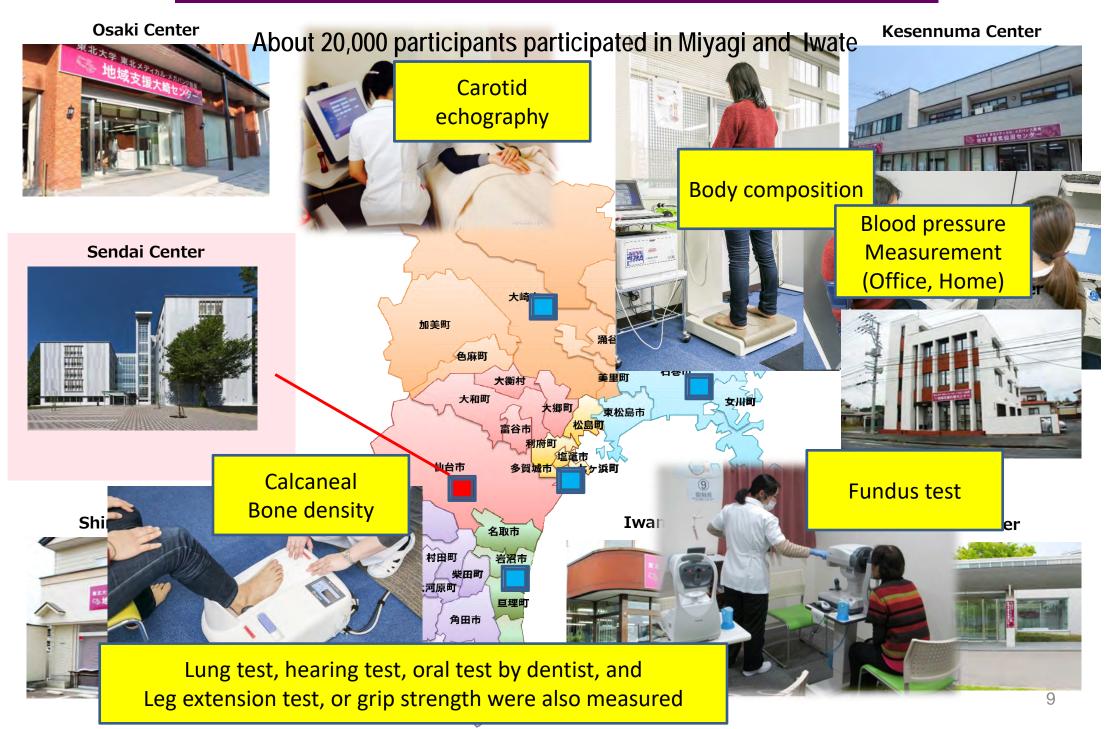
About 63,000 participants participated in Miyagi and Iwate

http://edit.freemap.j





Community Support Centers in Miyagi



Compared with inland area, coastal area showed Higher prevalence of depression or psychological distress. Higher risk of withdrawing treatment for hypertension. Higher prevalence of metabolic disorder.

They might have higher risk of atherosclerotic disease, stroke or ischemic heart disease in future.

 \Rightarrow

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Secondary damage from disaster might be occurred.

Government allowed us to measure change in subclinical atherosclerosis or other factors.

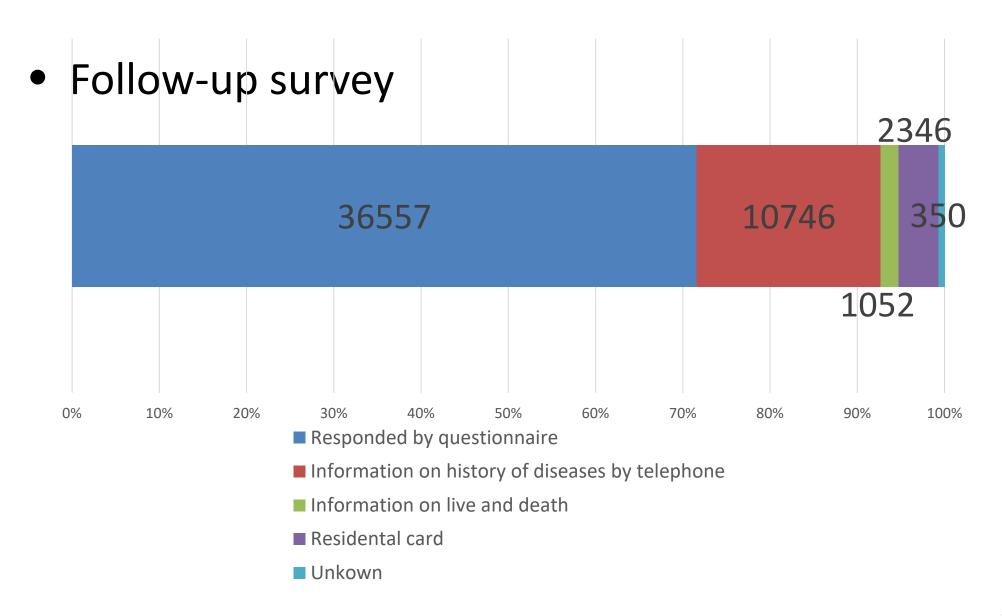
Repeat assessment center-based survey during second period have just started 1 June 2017 -

• Ask all participants to visit the community support centers nearby.

In Miyagi, more than 26,000 participants has already measured this repeated measurement within 3 year

- Questionnaire
- New devices measured at home (urine Na/K test, activity monitor, sleep monitor)

Follow-up rate



We confirmed 509 deaths until October 2018.

ToMMo is an integrated biobank



Whole Blood, Serum, WBCs are stored \rightarrow metabolome & proteome

Genomic DNA $\rightarrow QE$

DNA extracted from blood is also stored \rightarrow genomics & transcriptome

Questionnaire

Main part is for life style (including food), psychological condition, experiences of the disaster

+ MRI & more than 10 physiological examinations, and cognitive and psychological assessment

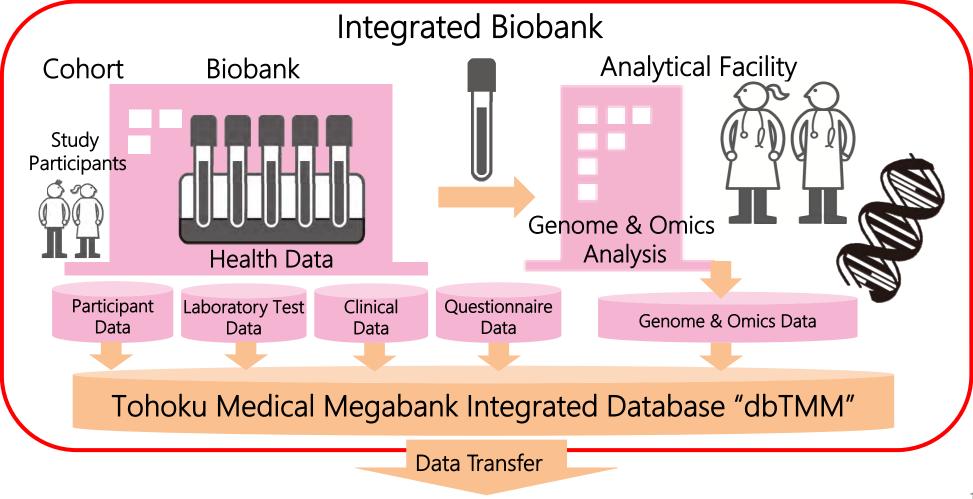
Integrated biobank

- ToMMo sets up an analytical center that executes standard analyses of samples
- To avoid rapid depletion of samples, ToMMo distributes analysis information first, and then bio-samples



Integrated biobank and database

Tohoku Medical Megabank (TMM) is an integrated biobank retaining both Biobank and Genome / Omics Analytical Facilities

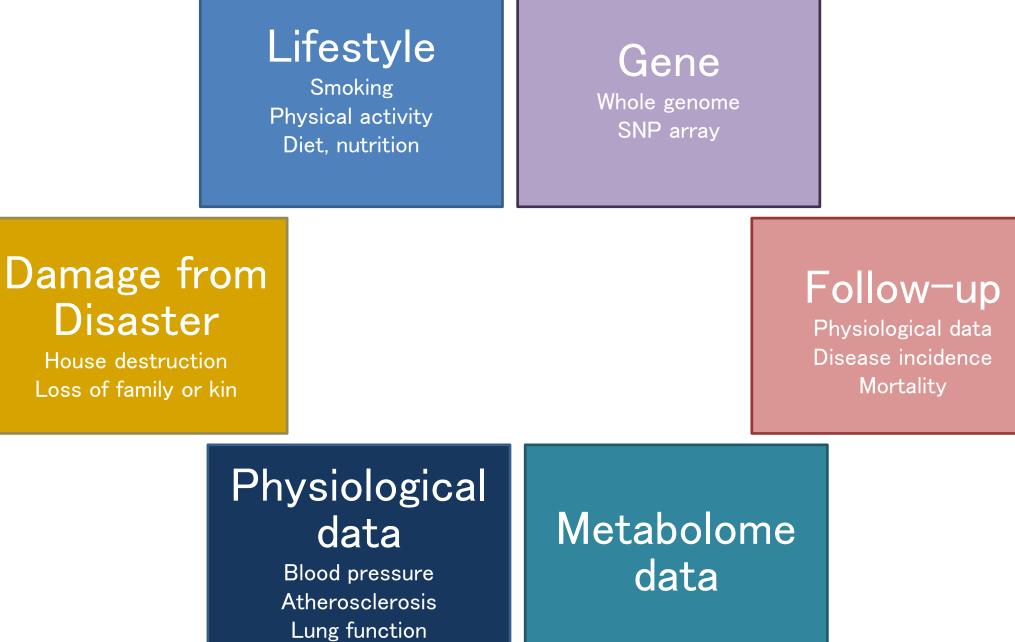


Scientists in Academia and Industry

Follow-up measurements

- As well as detailed survey, we sent brief questionnaire every 1-2 years.
- We also have obtained mortality data from residence card.
- We have already linked our data to cancer registry.
- Furthermore, we have obtained insurance data regarding medical cost and long term health care.
- From these resources, we are collecting the information on stroke or MI incidence of our participants.

Outlines of our dataset



Examples of biobank data

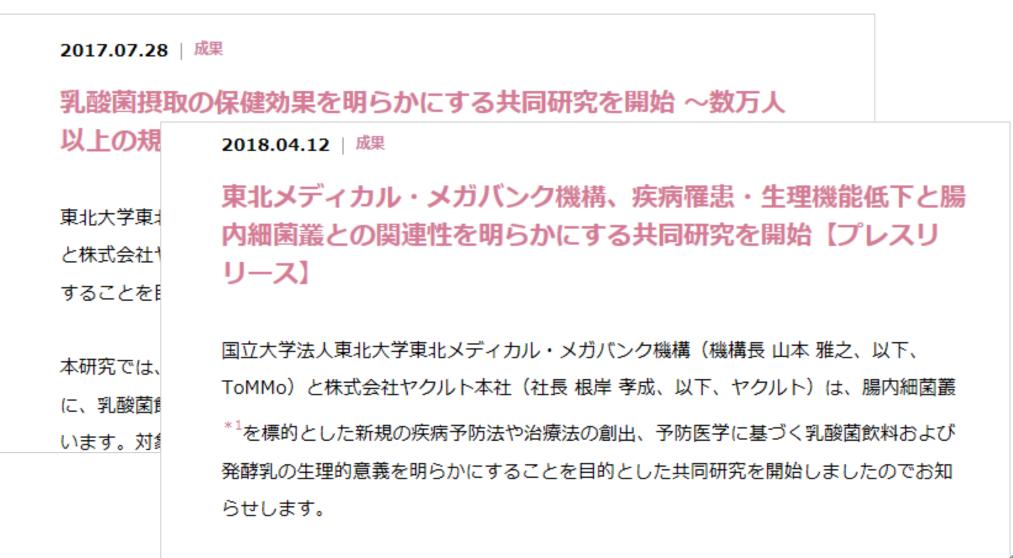
- We have started data distribution of type 1 recruitment data (about 67,000 participants).
- The data set consists of following data.
- We confirmed relation of blood pressure with traditional risk factors, such as BMI, alcohol, and NaCl.
 - Height
 - Weight
 - Blood pressure
 - Blood glucose
 - Serum cholesterol
 - Liver function
 - Uric acid
 - Renal function
 - Specific Ig E (Allergy)
 - Helicobacter pylori
 - Pepsinogen I and II
 - Microalbuminuria
 - Urinary Na
 - Urinary K

- Smoking
- Alcohol consumption
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Examples of add-on cohort in ToMMo

As a cooperative study with industrial companies, we have added several component to our detailed survey.

First example, survey regarding dairy products containing probiotics



Add on cohort with Yakult.

• Questionnaire survey (Started on August 2017)

Investigate detailed information on dairy products containing probiotics. About 40,000 participants answered the questionnaire.



Study regarding intestinal flora (Started on April 2018).

The first wave collection has completed (about 2700 samples).

Second example, survey regarding Na/K ratio using handy size device.

Potassium (vegetables and fruits etc.) intake is inverse blood pressure (INTERSALT Co-operative Research Group. BMJ 1988)

The balance between sodium intake and potassium intake (sodium to potassium ratio: Na/K ratio) has been drawing attention recently

Aim of collaborative study

OMRON

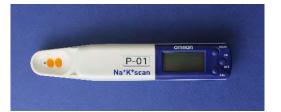


Collaboration

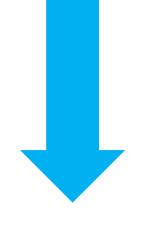
Add physical activity monitor, Na/K ratio monitor, and Sleep monitor on our second wave study.









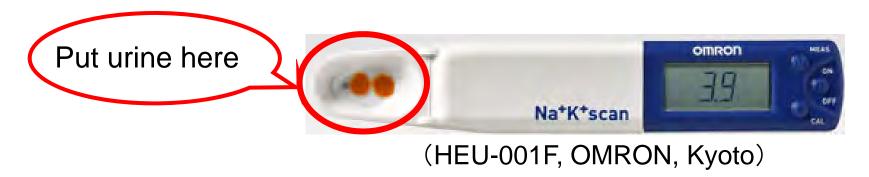






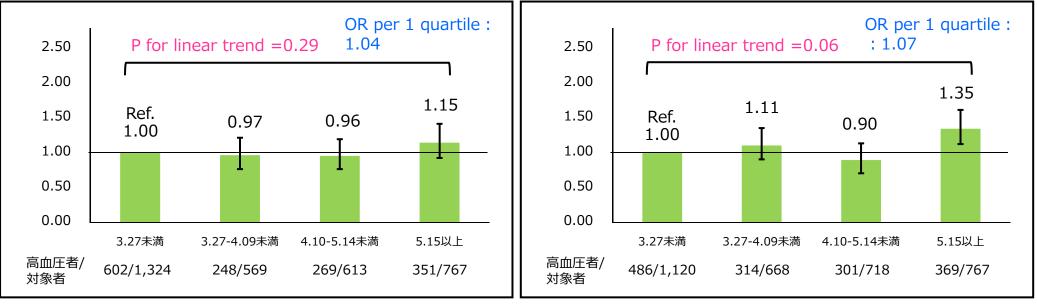
Na/K ratio

- OMRON Healthcare Co., Ltd. developed a handy-sized urinary Na/K ratio monitor
- It can quickly and easily measure Na/K ratios from urine sample for long-term

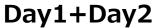


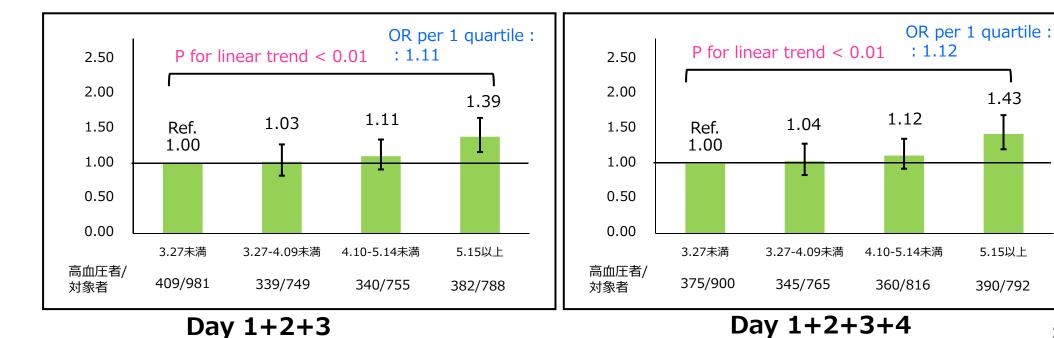
ToMMo began a collaborative study in June 2017 with OMRON Healthcare Co., Ltd.

Relationship between Hypertension and day1 to day1-4 Na/K ratio



Day 1





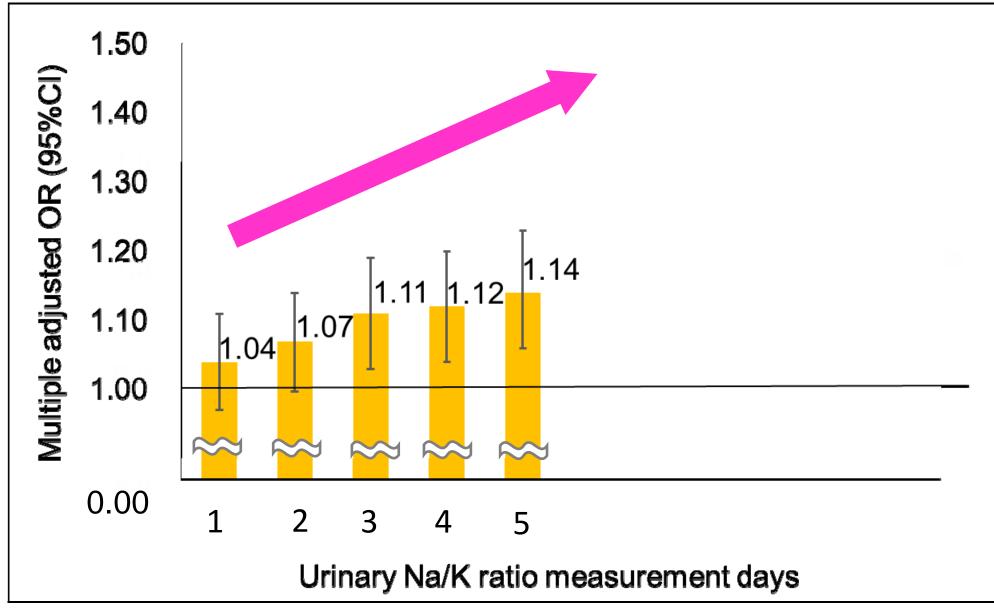
26

1.43

5.15以上

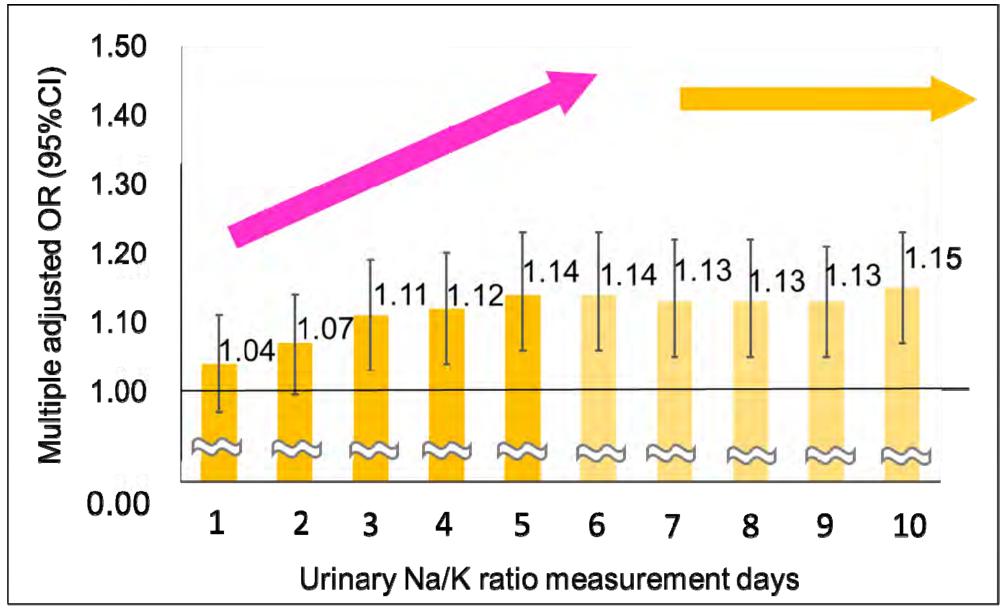
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Prevalence of home hypertension per one unit increase in urinary Na/K ratio from 1day to 10days about 3000 data



The aOR of home hypertension per one unit increase in urinary Na/K ratio increased from 1 days to around 5 days

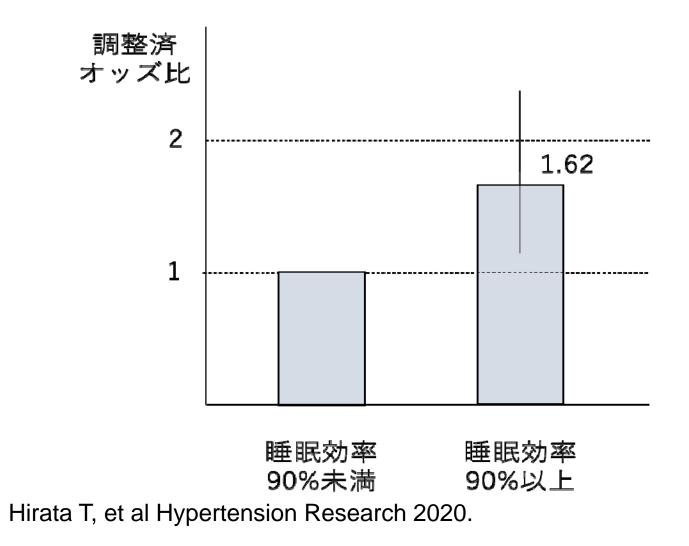
Prevalence of home hypertension per one unit increase in urinary Na/K ratio from 1day to 10days



The aOR of home hypertension per one unit increase in urinary Na/K ratiowas stable after around 6 daysKogure M, et al Hypertension Research 2020.

We also published sleep efficiency and hypertension.

Poor sleep efficiency associated with higher prevalence of hypertension.



Conclusion

- We have established community-based and three generation cohorts after Great Eastern Japan Earthquake.
- We have reported several effect of damage from GEJE on community health.
- We have also collected information on genome metabolome, and several add-on measurements.
- We have started several set of data distribution.
- We have collaborated with industrial companies.
- We consider that using our data accelerate health information.
- We would like to ask your good practice.