

# The *All of Us* Research Program

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Chief Medical and Scientific Officer, *All of Us* Research Program

Clinical Center Research Hospital Board

June 21st, 2024

# 76th Anniversary Framingham Heart Study



## Factors of Risk in the Development of Coronary Heart Disease— Six-Year Follow-up Experience

### The Framingham Study

WILLIAM B. KANNEL, M.D., THOMAS R. DAWBER, M.D., F.A.C.P.,  
ABRAHAM KAGAN, M.D., F.A.C.P., NICHOLAS REVOTSKIE, M.D.,  
AND JOSEPH STORES, III, M.D.  
*Framingham, Massachusetts*

INCREASINGLY RELIABLE ESTIMATES of the prevalence and incidence of coronary heart disease (CHD) emphasize the importance of this disease as a contemporary health hazard. Cardiovascular disease is

Since it has been established that coronary atherosclerosis is present for many years prior to the development of symptomatic CHD, it seems evident that efforts at prevention must begin many years before the

now the leading cause of death in the United States. The prevalence of CHD in the United States has increased steadily in the past decade, and this increase is expected to continue. The increase in CHD is a result of a combination of factors, including changes in diet, lifestyle, and heredity. The increase in CHD is a result of a combination of factors, including changes in diet, lifestyle, and heredity.

Received for publication from the Framingham Heart Study, National Heart Institute, U.S. Department of Health, Education, and Welfare, Bethesda, Md. Presented at the American Heart Association National Conference, Boston, Mass., October 1961. Requests for reprints to Dr. William B. Kannel, Heart Disease Branch, National Heart Institute, Bethesda, Md.

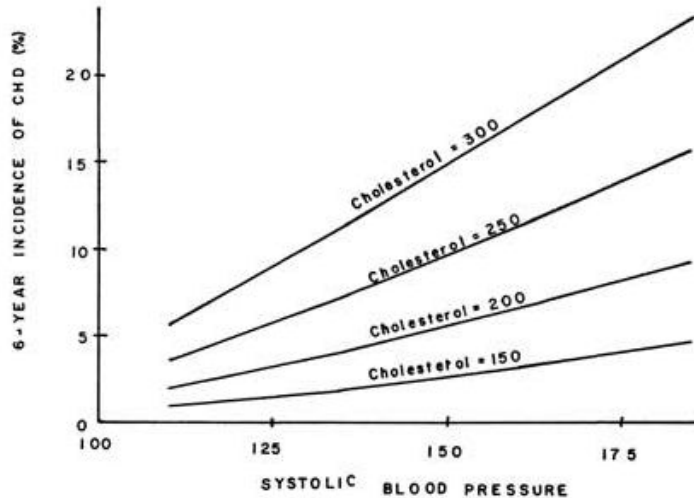


FIGURE 2. Six-year incidence of coronary heart disease according to level of systolic blood pressure at specified serum cholesterol levels (men 45 to 62 years). For explanation, see legends for Figure 1.

Enrolled 5,209 men and women in 1948

Some Framingham early discoveries:

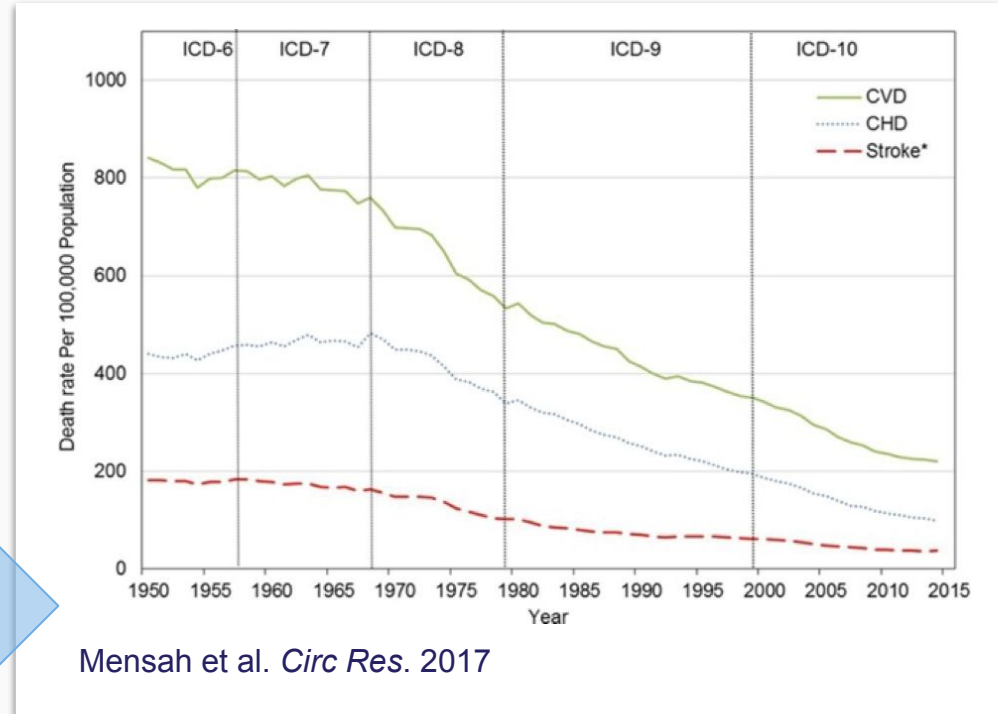
- 1960 – Cigarettes increase heart disease
- 1961 – cholesterol, blood pressure increase heart disease
- 1967 – exercise decreases risk of heart disease; obesity increases it
- 1970 – high blood pressure and atrial fibrillation cause stroke

# The Strength of Large Cohort Studies

## The impact of Framingham (and similar cohorts) has been dramatic

From 1950 - 1996: Heart disease mortality fell 56%, stroke rates fell by 70%

Since 1990, heart disease mortality has continued to fall by 22%



# The *All of Us* Research Program

**Our Mission: Accelerate health research and medical breakthroughs, enabling individualized prevention, treatment, and care of all of us**



**Nurture partnerships** for decades with at least a **million participants** who reflect the diversity of the U.S.



**Deliver** one of the **largest, richest biomedical datasets** that is broadly available and secure.



**Catalyze an ecosystem of communities, researchers, and funders** who make *All of Us* an **indispensable** part of health research.



*“The program’s rich and diverse dataset is now a vital resource for medical researchers across the NIH, the country, and indeed the world.”*

*- Dr. Monica Bertagnolli, Massachusetts Policymakers All of Us Briefing, April 2024*

# 809K+ Participants Enrolled

## Participant Enrollment

**809,000+**

Participants

**450,000+**

Electronic Health  
Records

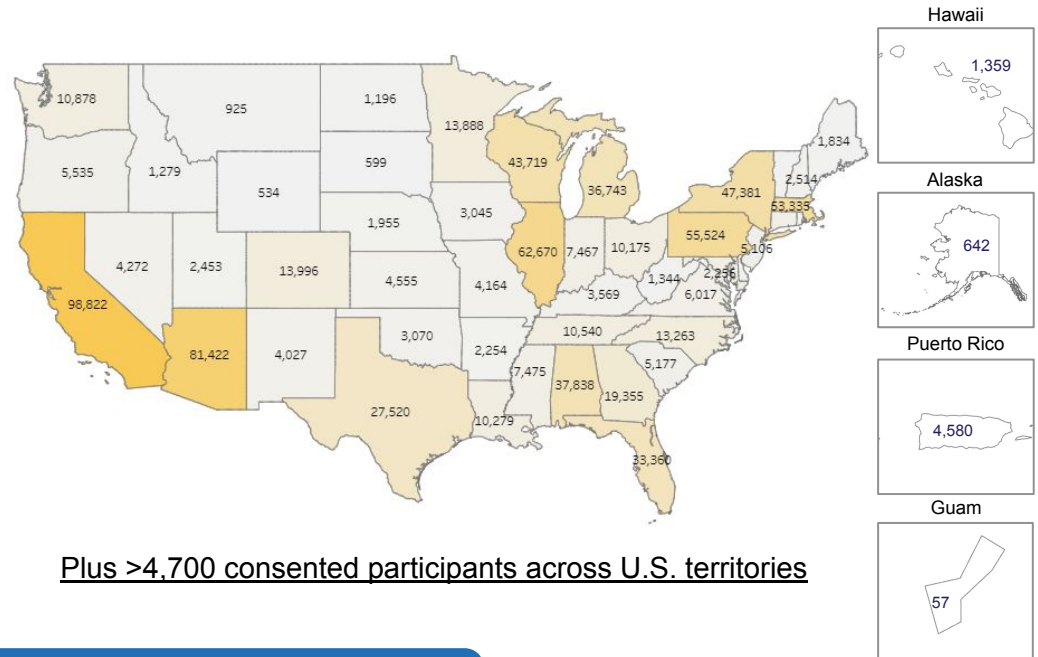
**553,000+**

Participants who have  
completed initial steps of the  
program

**572,000+**

Biosamples

## Map of Participants

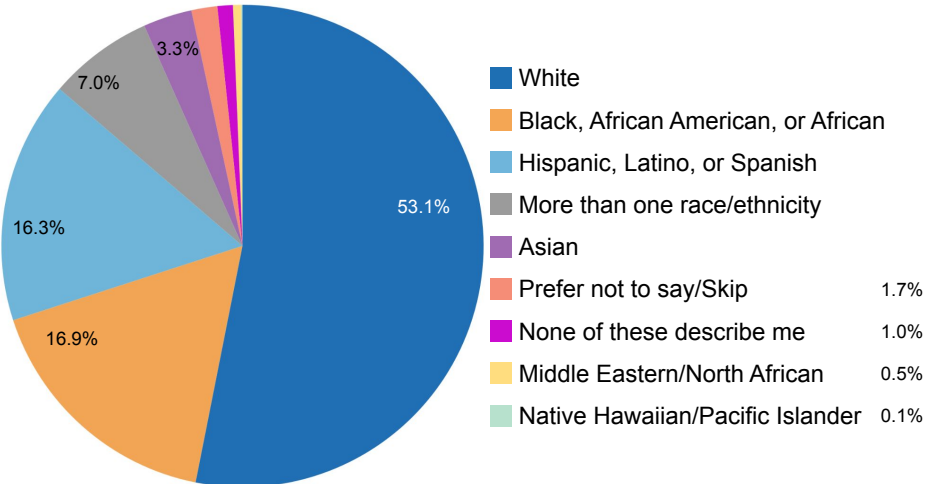


Plus >4,700 consented participants across U.S. territories

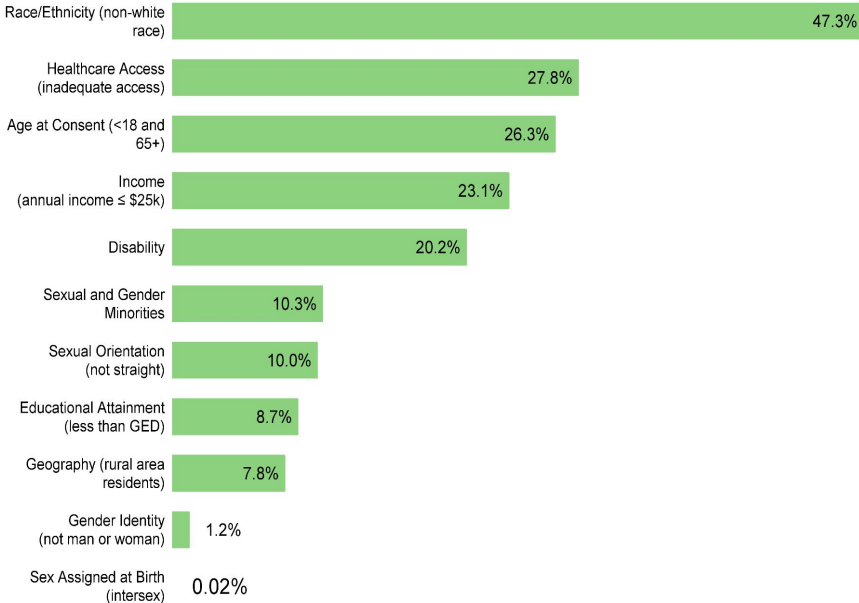
**Over 87% of *All of Us* participants are underrepresented in biomedical research**

# Participant Diversity

## Race & Ethnicity of Participants



## UBR Category



**Over 87% of *All of Us* participants are underrepresented in biomedical research**

**Numbers current as of May 1, 2024**

# Data Types Collected from *All of Us* Participants

Currently open to nearly all adults 18 and over living in the United States



## Electronic Health Records

Data types collected from EHR include:

- Demographics
- Vital signs
- Diagnoses
- Procedures
- Medications
- Doctor and Laboratory Visits



## Participant Surveys

The Basics      Health Care Access & Utilization      Mental Health and Well-Being  
Overall Health      Personal and Family Medical History  
Lifestyle      Social Determinants of Health



## Physical Measurements

- Blood pressure
- Heart rate
- Height
- Weight
- BMI
- Hip circumference
- Waist circumference



## Biosamples

- Blood
- Saliva
- Urine



## Wearable Data

Fitbit data, including:

- Heart Rate
- Activity (Daily Summary)
- Activity Intraday Steps
- Sleep data

# Nearly 250,000 Whole Genome Sequences Available to Advance Precision Medicine

The *All of Us* Researcher Workbench contains the one of the largest sets of whole genome sequences widely available for research.



**413,350+**  
Survey Responses



**337,500+**  
Physical Measurements



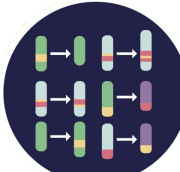
**312,900+**  
Genotyping Arrays



**287,000+**  
Electronic Health Records



**245,350+**  
Whole Genome Sequences



**11,350+**  
Structural Variants  
**NEW! In 2023**



**1,000+**  
Long-Read Sequences  
**NEW! In 2023**



**15,600+**  
Fitbit Records  
**NEW! Sleep Data**

The whole genome sequence dataset includes variation at more than **1 billion** locations, which is nearly **one-third** of the entire human genome



*Includes 275 million genetic variants never seen before, including 4 million with protein coding consequences*

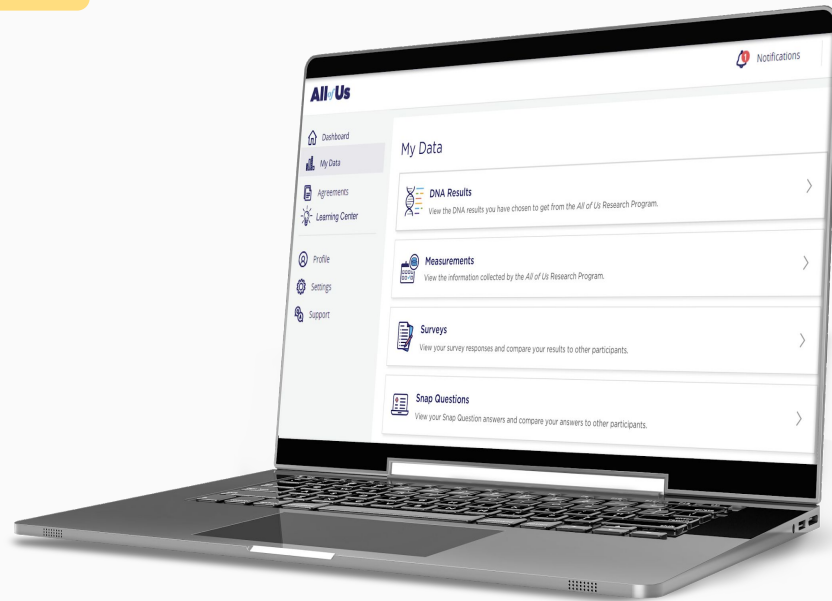


# Return of Value to *All of Us* Participants: A Unique Feature of *All of Us*

## Return of Value for Participants

Participants may receive:

- **Genetic information**
- Survey data (comparative)
- EHR and claims data
- Ongoing study updates
- Aggregate results
- Scientific findings
- Opportunities to be contacted for other research opportunities



# Participants Can Receive Two Types of Health-Related Genetic Results

## Hereditary Disease Risk (HDR) Report



*All of Us* looks for genetic variants in 59 genes associated with serious health conditions, including:

- Breast cancer
- Ovarian cancer
- Uterine cancer
- Colorectal cancer
- Prostate cancer
- Melanoma
- Brain cancer
- Pancreatic cancer
- Stomach cancer
- Familial hypercholesterolemia
- Cardiomyopathies
- Arrhythmias
- Arteriopathies
- Neurofibromatosis type 2

## Medicine and Your DNA Report



*All of Us* analyzes seven genes that can affect how bodies process medicine and impacts which medication or what dosage you take. This report includes 50+ different medicines that may be impacted by your genetics, including:

- Citalopram (Celexa®)
- Clopidogrel (Plavix®)
- Escitalopram (Lexapro®)
- Sertraline (Zoloft®)
- Lidocaine
- Glimepiride (Amaryl®)
- Sulfamethoxazole/trimethoprim (Bactrim®)
- Simvastatin (Zocor®)
- Amitriptyline (Elavil®)

*Genetic counselors (english and spanish)  
are available to help at any time*

# Genomic Health-Related Return of Results

## Hereditary Disease Risk

*All of Us* currently looks for genetic variants in 59 genes associated with serious health conditions.

**All of Us**  
RESEARCH PROGRAM

JANE DOE  
DOB: January 1, 2000  
ID: 2

Specimen: Whole Blood  
Barcode: A0U 000 000 000 0002  
Collected: January 1, 2022  
Report date: September 29, 2022

RESEARCH RESULT — Your doctor will need to confirm this result with a clinical test before using it in your care.



### Your result:

Something very important for your health was found in your *BRCA1* gene.

#### What does this mean?

- If confirmed by a clinical DNA test, this result means that you are more likely to get some types of cancers than other people.
- It does **not** mean that you have some types of cancers.
- It does **not** mean that you will definitely get some types of cancers.
- **This result is important** and should not be ignored.

#### IMPORTANT!

#### Share this report with your doctor.

- This report comes from a research program, so **it is a research result**. Your doctor will need to confirm these results with a clinical DNA test before using them in your care.
- **Do not change your medical care** before this result is confirmed by your doctor.
- **Results provided are from an investigational**

**228k+** offered choice  
**125k+** (55%) said “yes”  
**101.5k+** viewed results  
**2.9%** with actionable result

CC  
BY  
NC  
ND

10/2022  
17/12

## Medicine and Your DNA

*All of Us* analyzes seven genes that can affect how bodies metabolize medicines.

**All of Us**  
RESEARCH PROGRAM

DOB:  
ID:

Specimen:  
Barcode:  
Collected:  
Report date:

RESEARCH RESULT — Your doctor will need to confirm this result with a clinical test before using it in your care.



### Medicine and your DNA

#### Our genes affect how we respond to medicine.

They do that in many different ways. Some genes help move medicines to the right part of the body.

#### What is this kind of information used for?

This test looked at a few of the genes in your DNA that can affect how medicines are used. The technical term for this kind of information is “pharmacogenetics.”

Doctors and pharmacists use this kind of information when they consider why medicines work differently for different people.

**But doctors and pharmacists don't make decisions based on just DNA.** Some other important considerations can be age, weight, health, diet, and other medicines you are taking at the same time.

**228k+** offered choice  
**118k+** (52%) said “yes”  
**97.1k+** viewed results  
**>90%** with actionable result

Ph  
Gen  
Lab

1/13

## Genetic Ancestry and Traits

*All of Us* provides genetic ancestry details for 7 regions, and information on four genetic traits.

### DNA Results

You'll see all of your DNA results here when they're ready. See [options for your DNA results](#).

#### Genetic ancestry and trait results

5 results



#### Genetic ancestry

Genetic ancestry can be very interesting, but you may also learn information you didn't expect.

[View Results](#)



#### Bitter taste

Learn what yo



#### Cilantro pre

Your genes pl



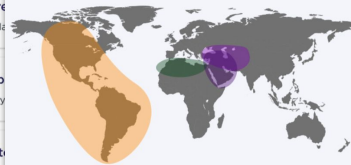
#### Earwax typ

Flaky or sticky



#### Lactose int

Your genes ha



The Americas	50%
The Americas	100%
Such as North, Central, and South America	
The Middle East and North Africa	50%
Northern Africa	10%
Such as Morocco, Algeria, and Egypt	
The Middle East	40%
Such as the Arabian Peninsula and Egypt	
Western Asia and the Caucasus	50%
Such as Turkey, Iran, Syria, Iraq, and the Caucasus	
<a href="#">See Other Ancestry Groups Tested</a>	

**295k+** offered choice  
**171k+** (58%) said “yes”  
**168k+** viewed results

# An Outcomes Research Agenda Downstream of Return of Results

Measures under consideration with a focus on diverse populations:

- Understanding of the results
- Willingness and motivation to share
  - With family members
  - With health providers
- Influence on decisions
- Provider understanding of results
- Changes in management
- Follow up testing and evaluations
- Health care utilization
- Clinical utility
- Personal utility



# Scientific Impact of *All of Us*

# Growing Scientific Impact



researchallofus.org/publications/

**CLINICAL RESEARCH** | www.jasn.org **OPEN**

### Genetic Inhibition of APOL1 Pore-Forming Function Prevents APOL1-Mediated Kidney Disease

Adriana M. Hung<sup>1,2</sup>, Victoria A. Assimon<sup>3</sup>, Hua-Chang Chen<sup>1,4</sup>, Zhihong Yu<sup>1,4</sup>, Caitlyn Vlasschaert<sup>4</sup>, Jefferson L. Triozzi<sup>2</sup>, Helen Chan<sup>2</sup>, Lee Wheelless<sup>5</sup>, Otis Wilson<sup>1,2</sup>, Shaija C. Shah<sup>7</sup>, Taralynn Mack<sup>1,8</sup>, Trevor Thompson<sup>9</sup>, Michael E. Matheny<sup>1,4,9</sup>, Saranya Chandrasekar<sup>10</sup>, Sahar V. Mozaffari<sup>7</sup>, Cecilia P. Chung<sup>10</sup>, Philip Tsao<sup>11,12</sup>, Katalin Susztak<sup>1,3</sup>, Edward D. Siew<sup>1,2</sup>, Karol Estrada<sup>3</sup>, J. Michael Gaziano<sup>1,4,15</sup>, Robert R. Graham<sup>2</sup>, Ran Tao<sup>1,4</sup>, Maarten Hoek<sup>2</sup>, Cassianne Robinson-Cohen<sup>2</sup>, Eric M. Green<sup>2</sup>, and Alexander G. Bick<sup>1,14</sup> for the Million Veteran Program\*

**nature cardiovascular research**

Letter <https://doi.org/10.1038/s41467-023-00473-6>

### High-proportion spliced-in titin truncating variants in African and European ancestry in the All of Us Research Program

Received: 25 September 2023 | Naman S. Shetty<sup>1</sup>, Akhil Pampura<sup>1</sup>, Nirav Patel<sup>1</sup>, Peng Li<sup>1</sup>, Garima Arora<sup>1</sup> & Parul Arora<sup>2,3</sup>  
 Accepted: 19 December 2023  
 Published online: 13 January 2024

**Journal of Personalized Medicine**

Perspective

### All of Us and the Promise of Precision Medicine: Achieving Equitable Access for Federally Qualified Health Center Patients

Carolyn P. Neuhaus<sup>1,\*</sup>, Danielle M. Pacia<sup>1</sup>, Johanna T. Crane<sup>2</sup>, Karen J. Maschke<sup>1</sup> and Nancy Berlinger<sup>1</sup>

Health disparities in the treatment of bipolar disorder

Vladimir Tchirikov<sup>a</sup>, Mark E. Ladner<sup>b</sup>, Felicia V. Caples<sup>b</sup>, Mitzi Morris<sup>c</sup>, Hailey Spillers<sup>c</sup>, Christina D. Jordan<sup>d</sup>, Joyce E. Balls-Berry<sup>d</sup>, Monica J. Taylor-Desir<sup>e</sup>, Mark A. Frye<sup>e</sup>, Eric J. Vallender<sup>a,4</sup>

**nature medicine**

Article <https://doi.org/10.1038/s41586-023-06957-x> | The All of Us Research Program Genomics Investigators\*  
 Received: 22 July 2022

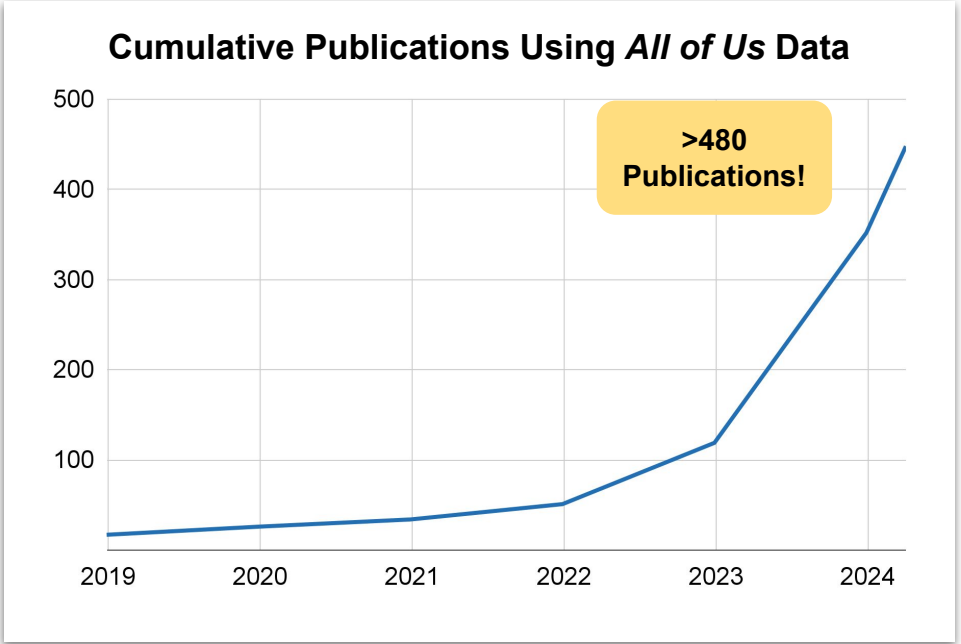
### Selection, optimization and validation of ten chronic disease polygenic risk scores for clinical implementation in diverse US populations

Article | [Open Access](#) | [Published: 10 October 2022](#)

### Association of step counts over time with the risk of chronic disease in the All of Us Research Program

Hiral Master, Jeffrey Annis, Shi Huang, Joshua A. Beckman, Francis Ratsimbazafy, Kayla Marginean, Robert Carroll, Karthik Natarajan, Frank E. Harrell, Dan M. Roden, Paul Harris & Evan L. Brittain

*Nature Medicine* **28**, 2301–2308 (2022) | [Cite this article](#)



# Matching All of Us Participants with Actively-Recruiting Trials

**All of Us**  
RESEARCH PROGRAM



Electronic Health Records

181,529

All of Us Participants

Match

1. Medical condition
2. Age
3. Sex at birth
4. Zip code

**NIH**

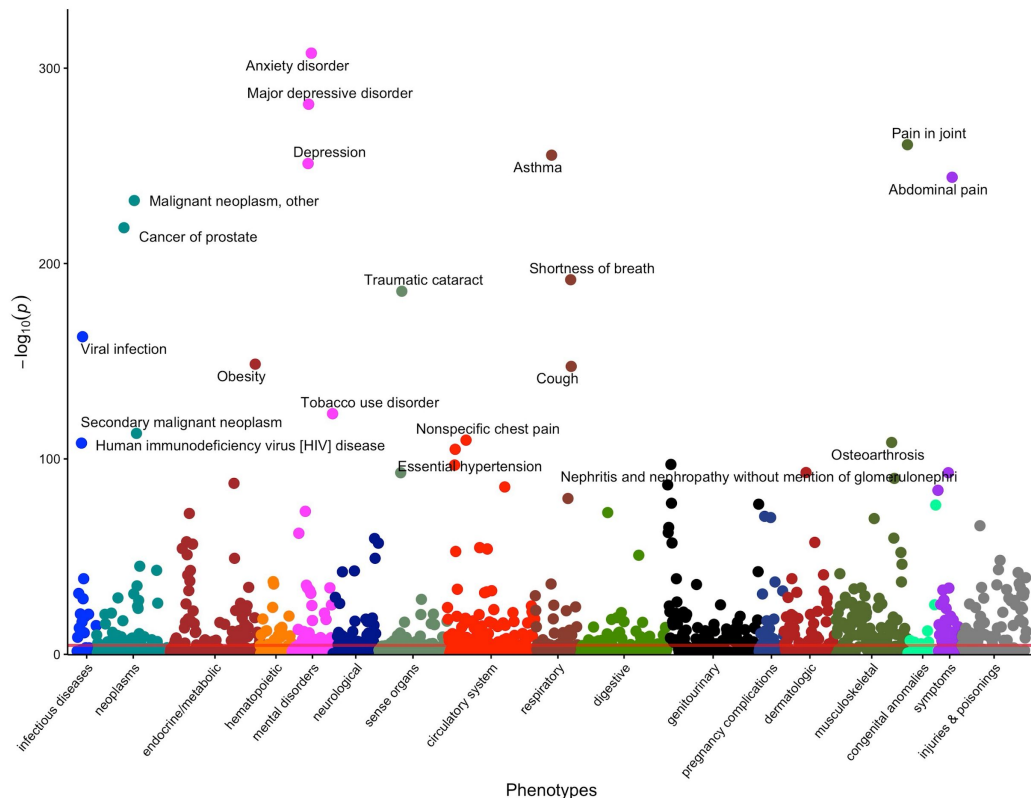
Database on  
clinical trials

ClinicalTrials.gov

Actively recruiting,  
U.S.-based, adult trials



18,634  
Clinical Trials



# Enabling Scientific Discovery with *All of Us*: What's Next?



# Approaches to Collecting Environmental Data in *All of Us*

## Data Linkages and Surveys

### Location

Integrate locational information into the *All of Us* workbench through a decentralized address geocoding tool.

Center for  
Linkage and Acquisition of Data (CLAD)

Social Determinants of Health (2022)

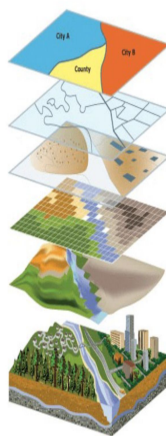
Environmental Exposure and  
Occupational Health (expected  
2025)

## Geospatial Data

### Geographic Information System (GIS) Data Linkage

#### Growing Number of Data Layers

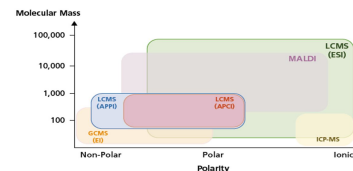
- Airports
- CAFOs
- Cellular towers
- Drinking water
- Dry cleaners
- Hazardous waste
- Highways
- Nuclear sites
- Wastewater
- Population info
- Power lines
- PR landfills
- Railroads
- Spills
- Sanitary landfills
- Superfund sites
- Toxic release sites, Etc.



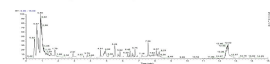
Address at the time of survey completion and longest lived childhood address

## Exposomics and Health

### LC- and GC-based high-resolution mass spectrometry



Complementary LC and GC HRMS



Untargeted HRMS (exposomics) through the **NIH** Human Health Exposure Analysis Resource to study **Type 2 Diabetes**.

Collaboration from other ICOs to tackle additional phenotypes.

Entire *All of Us* cohort

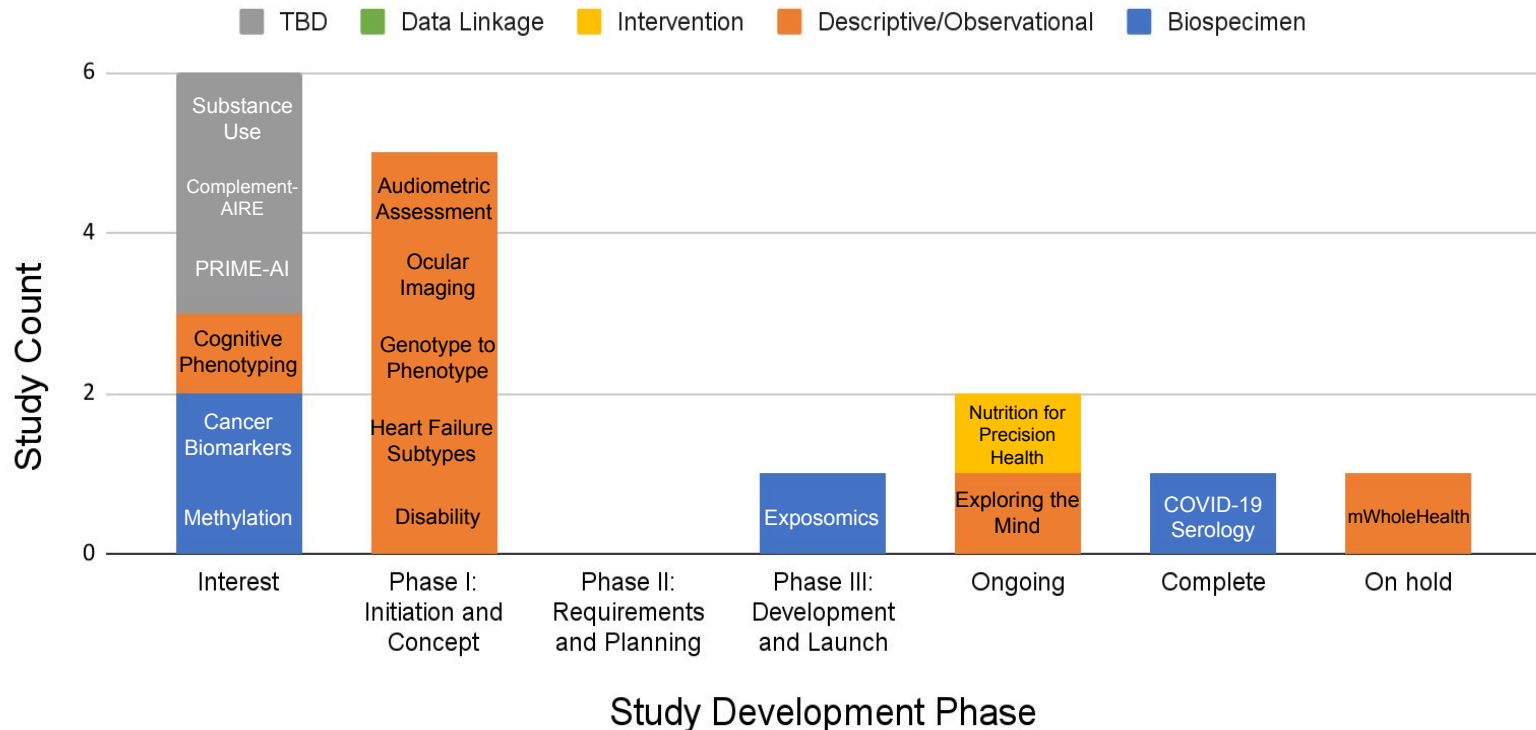
Subset of cohort

# Ancillary Studies Will Have a Positive Impact on Increasing Access to a Research-Ready, Diverse National Cohort



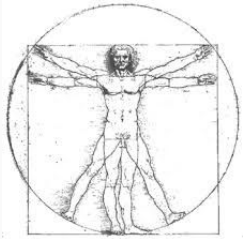
# Increasing interest in ancillary study opportunities across NIH Institutes, Centers, and Offices

## Ancillary Study Proposals in Development by Phase



# Shifting Paradigm: Genotype to Phenotype Discovery

Phenotype



Genotype



Large, diverse cohort  
Clinical informatics

Targeted studies in Deep phenotyping  
Utilize unique resource: the NIH  
Clinical Center

Evaluate loss of function variants with no association to disease to identify novel associations of genes and phenotypes

Reduce bias in ascertainment and increase diversity of research participation

Discover function of uncharacterized genes

Understand genetic disease resilience

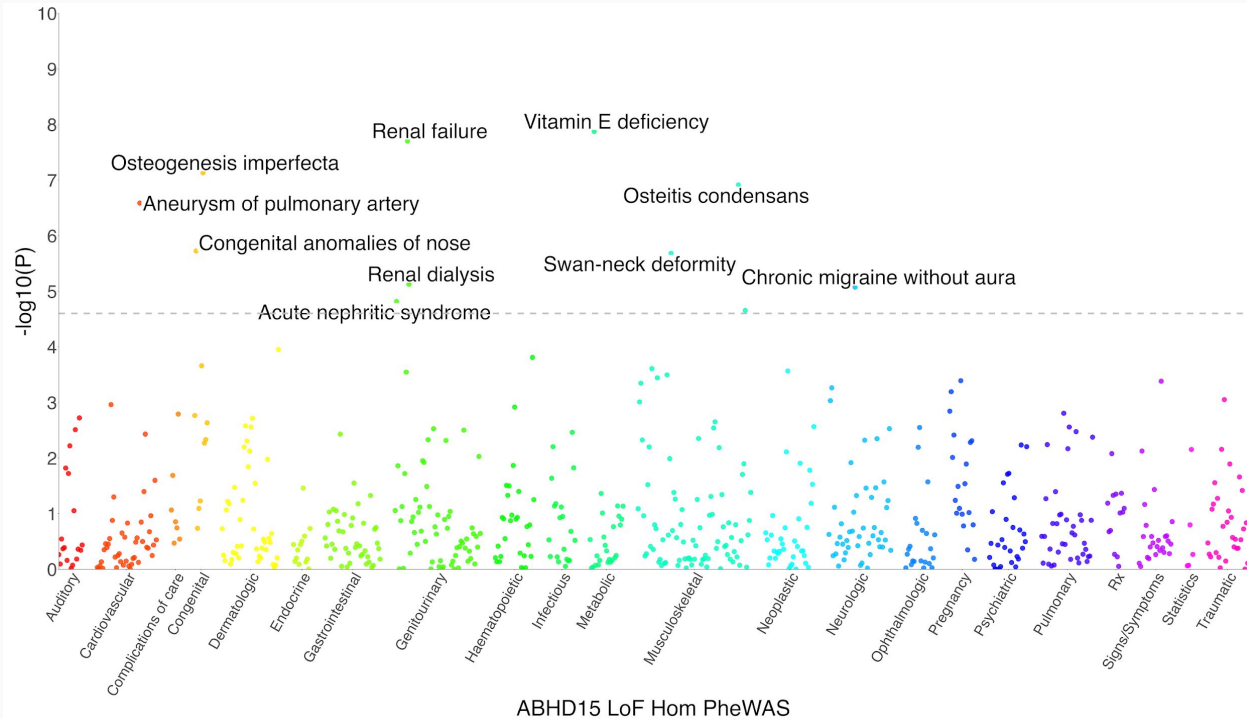
# Example: Phenotypes in *All of Us* associated with individuals homozygous for LOF in unknown gene *ABHD15*

Reverse of a GWAS

Genotyped cohort with coded EHR data

Query is a variant or group of variants in a gene

What phenotypes are associated?



Clinical Center can be used to confirm novel gene-phenotype associations via deep phenotyping

### Analysis of 589,306 genomes identifies individuals resilient to severe Mendelian childhood diseases

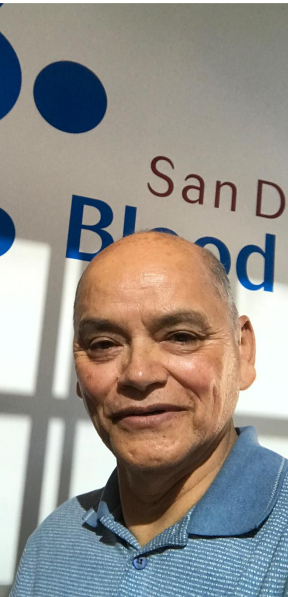
Rong Chen<sup>1,2,12</sup>, Lisong Shi<sup>1,2,12</sup>, Jörg Hakenberg<sup>1,2</sup>, Brian Naughton<sup>3,11</sup>, Pamela Sklar<sup>1,2,4</sup>, Jianguo Zhang<sup>5</sup>, Hanlin Zhou<sup>5</sup>, Lifeng Tian<sup>6</sup>, Om Prakash<sup>7</sup>, Mathieu Lemire<sup>8</sup>, Patrick Sleiman<sup>6</sup>, Wei-yi Cheng<sup>1,2</sup>, Wanting Chen<sup>5</sup>, Hardik Shah<sup>1,2</sup>, Yulan Shen<sup>5</sup>, Menachem Fromer<sup>1,2,4</sup>, Larsson Omberg<sup>9</sup>, Matthew A Deardorff<sup>6</sup>, Elaine Zackai<sup>6</sup>, Jason R Bobe<sup>1,2</sup>, Elissa Levin<sup>1,2</sup>, Thomas J Hudson<sup>8</sup>, Leif Groop<sup>7</sup>, Jun Wang<sup>10</sup>, Hakon Hakonarson<sup>6</sup>, Anne Wojcicki<sup>3</sup>, George A Diaz<sup>1,2</sup>, Lisa Edelmann<sup>1,2</sup>, Eric E Schadt<sup>1,2</sup> & Stephen H Friend<sup>1,2,9</sup>

Genetic studies of human disease have traditionally focused on the detection of disease-causing mutations in afflicted individuals. Here we describe a complementary approach that seeks to identify healthy individuals resilient to highly penetrant forms of genetic childhood disorders. A comprehensive screen of 874 genes in 589,306 genomes led to the identification of 13 adults harboring mutations for 8 severe Mendelian conditions, with no reported clinical manifestation of the indicated disease. Our findings demonstrate the promise of broadening genetic studies to systematically search for well individuals who are buffering the effects of rare, highly penetrant, deleterious mutations. They also indicate that incomplete penetrance for Mendelian diseases is likely more common than previously believed. The identification of resilient individuals may provide a first step toward uncovering protective genetic variants that could help elucidate the mechanisms of Mendelian diseases and new therapeutic strategies.

# NIH Clinical Center - Opportunities with *All of Us*

- **Ancillary studies**
  - Deep phenotyping: undiagnosed genetic disorders <<>> associations with human phenotypes
    - Improve underdiagnosis of genetic disorders,
      - particularly in populations historically underrepresented in biomedical research
    - Identify unrecognized/latent phenotypes in individuals with pathogenic variants
- **Co-enrollment with Clinical Center-led clinical trials/studies**
  - *All of Us* data to augment trials (SDOH, wearables, environmental exposures, etc.)
  - *All of Us* as a home for longitudinal trial data
  - Co-enrollment of clinical center patients in *All of Us*
    - Allows for sequencing, surveys and long term follow up for understanding the natural history of rare diseases
- ***All of Us* as a partner with the Clinical Center to NIH intramural research**
  - Training opportunities for early stage investigators
  - Share best practices on including the voice of the participant/patient
  - Developing return of results/value strategies





**Thank you!**

[f](#) [i](#) [v](#) [t](#)

@AllofUsResearch  
@AllofUsCEO  
#JoinAllofUs



**Thank you to our 766,000+ participants!**