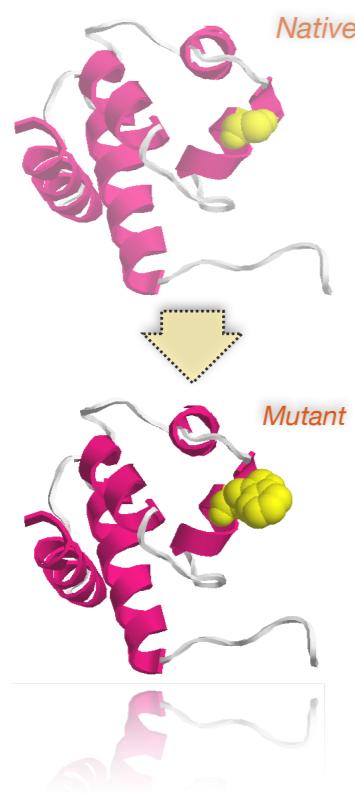
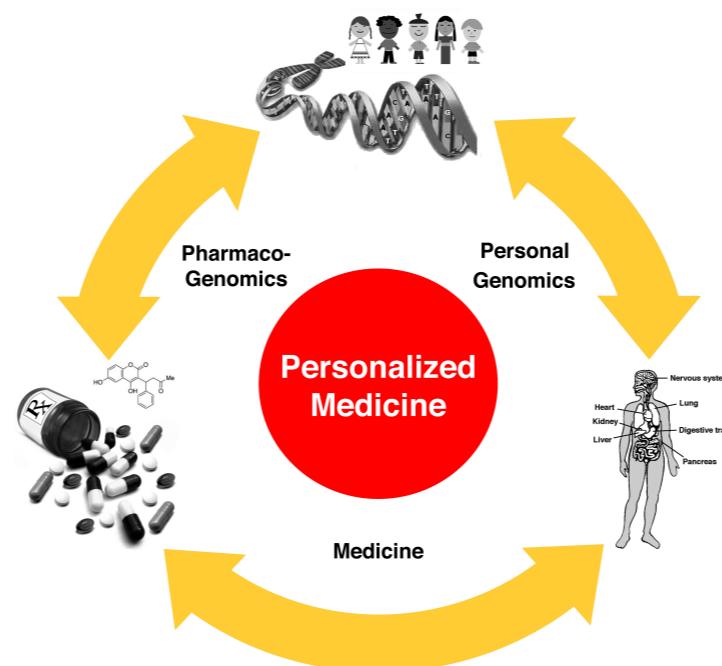


Computational methods for personalized medicine



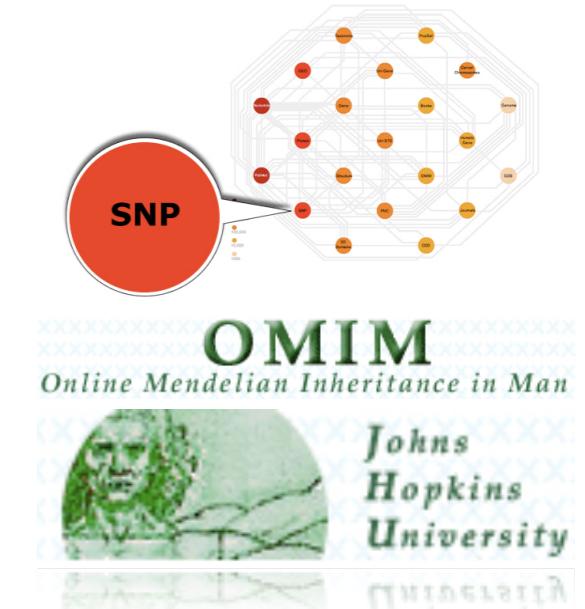
SSS Carlo Urbani
University of Camerino, Camerino (MC)
October 24, 2018



Emidio Capriotti
<http://biofold.org/>



Biomolecules
Folding and
Disease



Department of Pharmacy
and Biotechnology (FaBiT)
University of Bologna



Presentation outline

- Human genome project:
Sequencing, assembly, international consortiums
- Genetic variants:
Variant databases and annotation
- Machine learning methods for variant interpretation:
machine learning algorithms, prediction assessment
- Variations in cancer:
Cancer data resources, gene prioritization
- Conclusions and future directions

Human genome race

The first draft of the **human genome was released in 2001**.

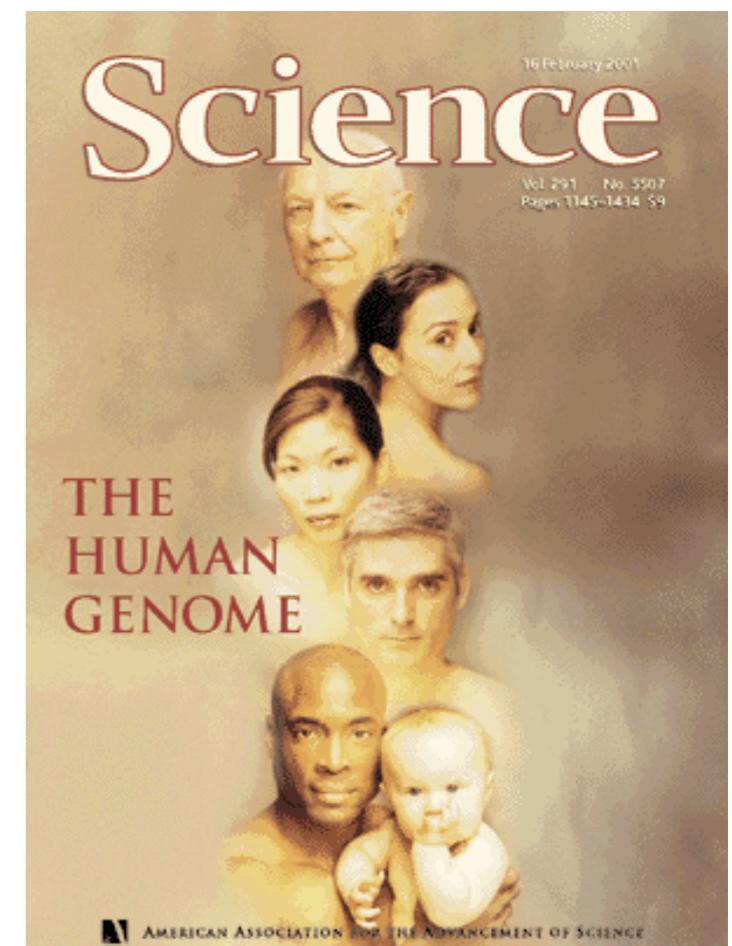
The project was started 1990 and ended in 2003 and **cost \$3 billion**



Int. HGS Consortium (2001).
Nature. 409: 860–921.



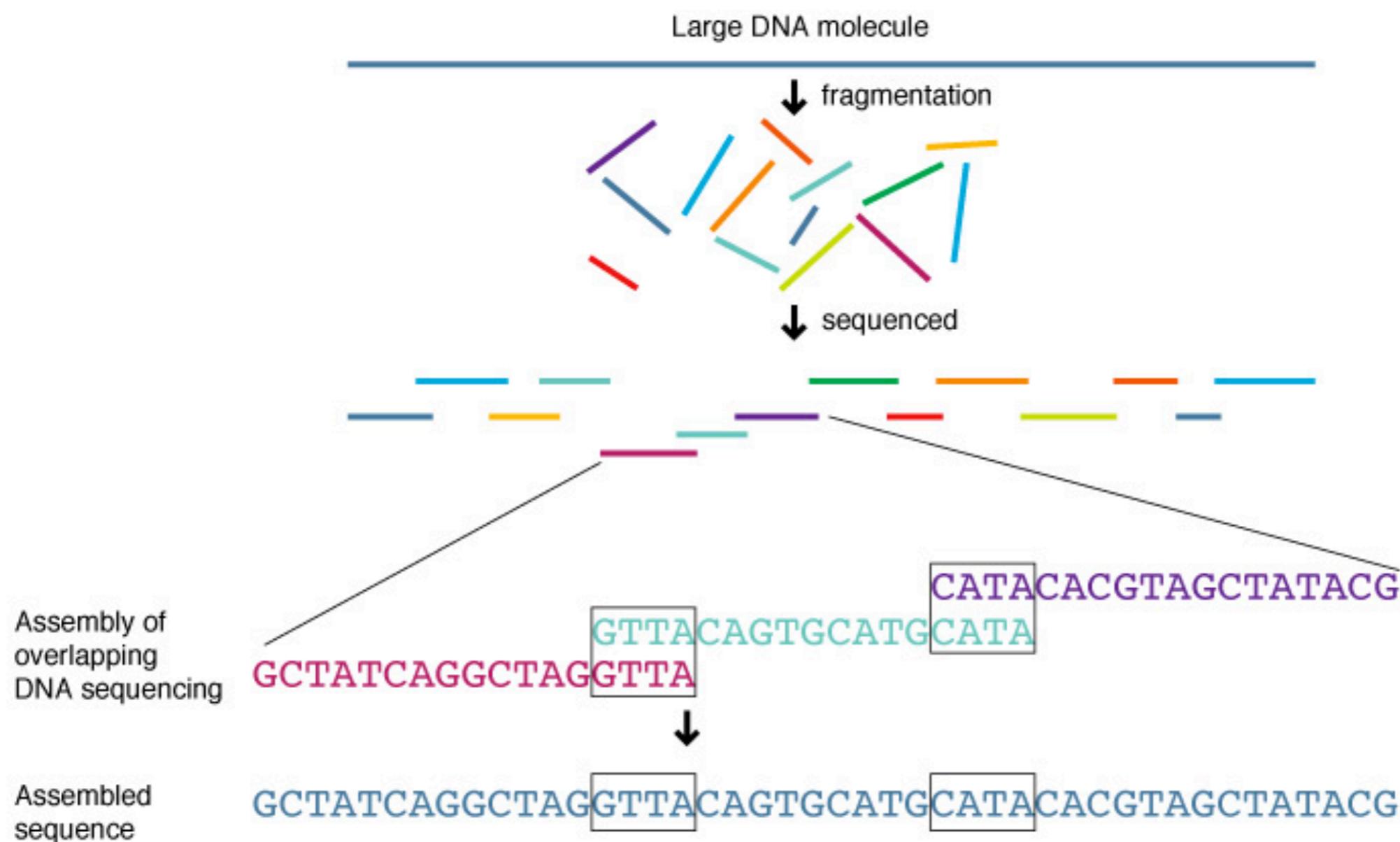
Cracking the Genome: Inside the
Race to Unlock Human DNA.
by *Kevin Davies*



Venter et al (2001).
Science. 291: 1304-1351.

Sequencing method

Shotgun sequencing involves **randomly breaking up DNA** sequences into fragments (reads) and then **reassembling the sequence** by looking for regions of overlap.



The genome assembly

The **assembly** problem is to reconstruct as much of a genome as possible given a collection of reads or read pairs.

- the **orientation** of each read is not known
- one must **allow a certain amount of error**
- the **entire genome is not covered** by the read data

Different **algorithms** were developed for optimizing the genome **assembly**. An important contribution was given by **Eugene Myers** who significantly contributed to the determination of the Human, Mouse and Drosophila genomes

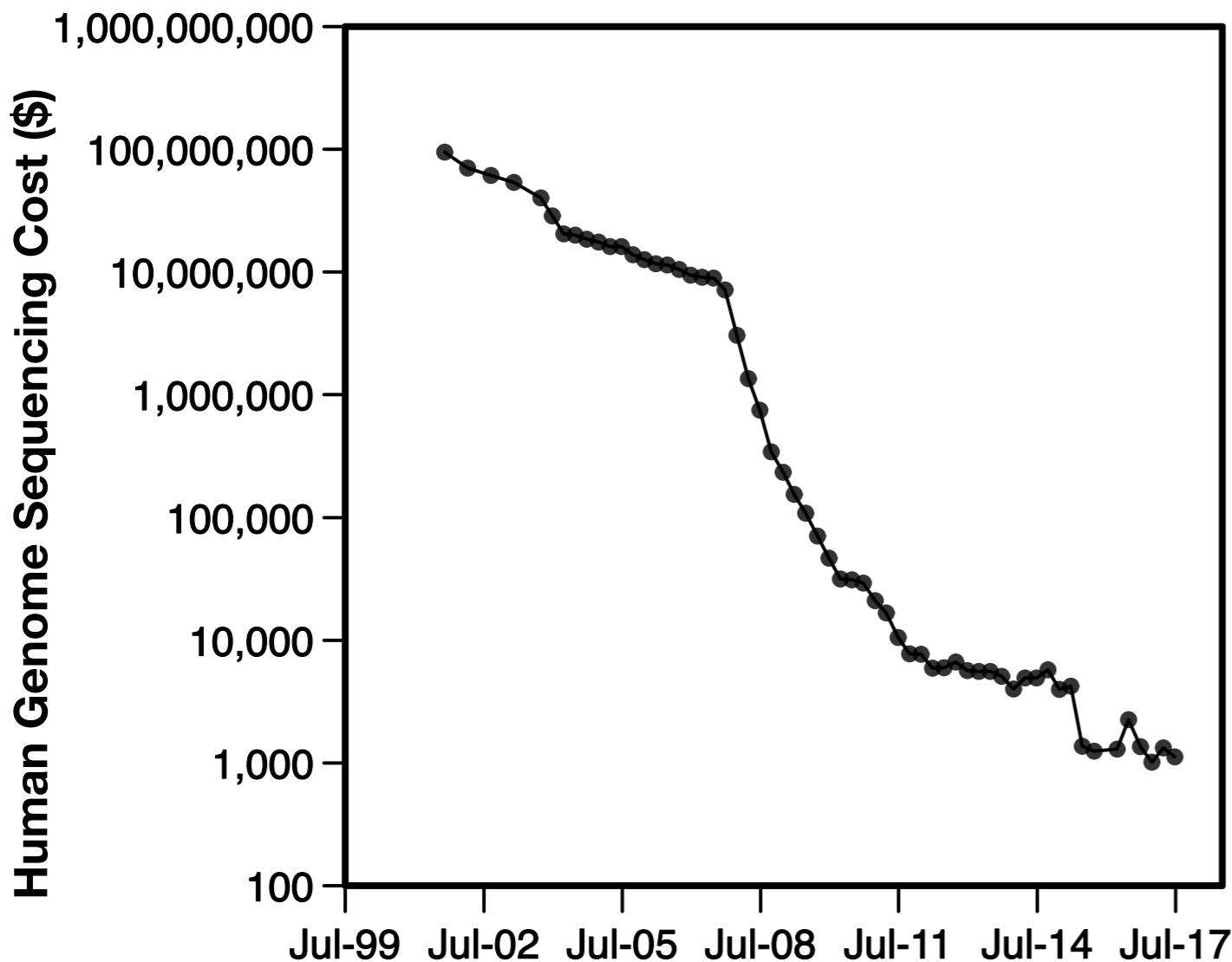


Some numbers

- Size: ~3.23 Billion bases
- 19,000-20,000 protein-coding genes
- Protein-coding sequences account ~1.5% of the genome, remaining part is associated with introns, non-coding, RNA molecules, regulatory DNA and sequences for which as yet no function has been determined.
- Differences among individuals on the order of ~0.1% while the differences with chimpanzee is ~4%

Sequencing cost

During the last few years the sequencing **cost** of the human genome decreased significantly



AB370A
>500 Kb/day
~16 years/Genome

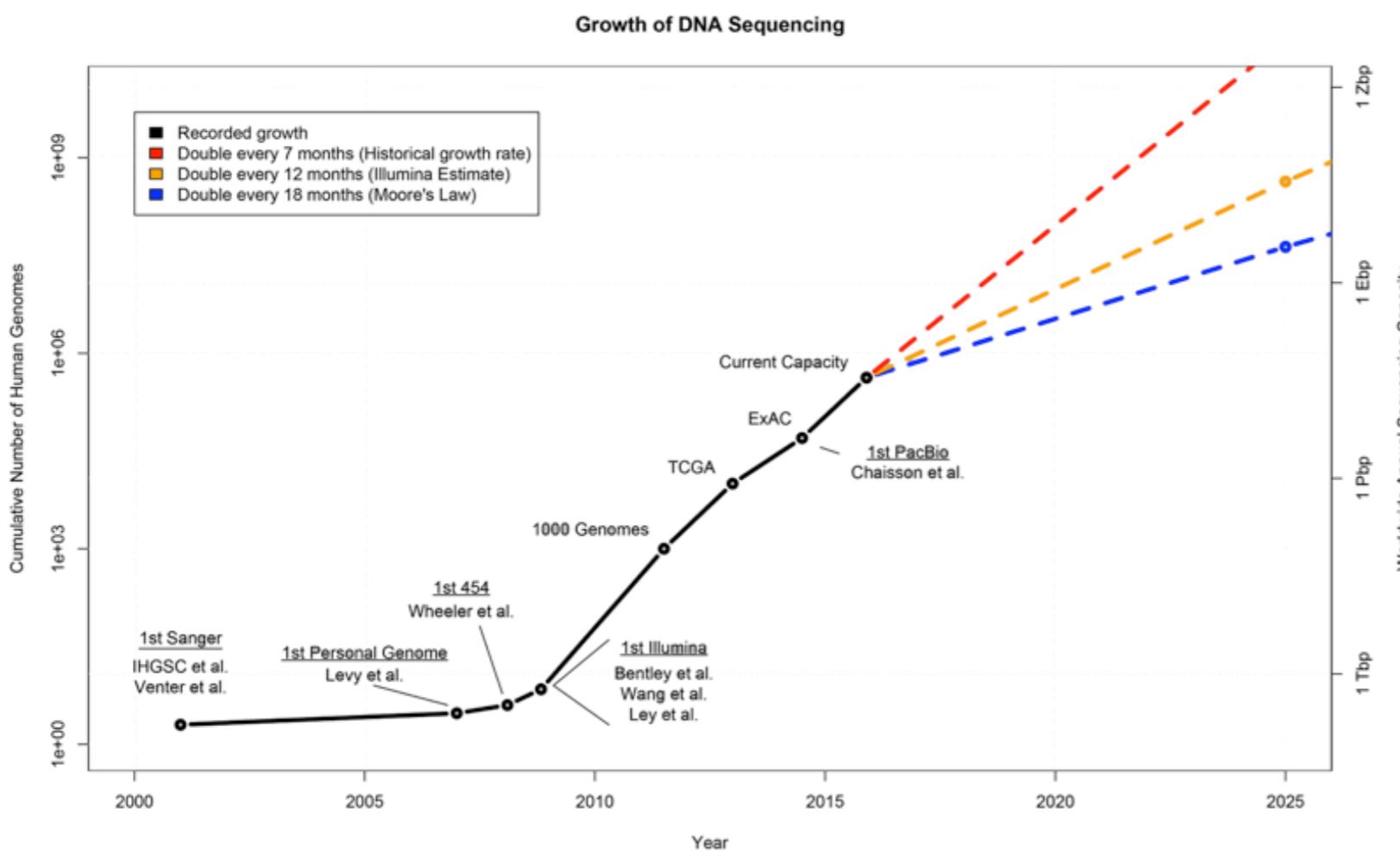


HiSeq X
1.6-1.8 Tb/run
>18,000 Genomes/year
\$10M



Big Data in biomedicine

International consortiums generated a **huge amount of sequencing data** from human and genomes from many organisms



International consortiums

large-scale sequencing projects of the human genome

HapMap Project (2002-2009)



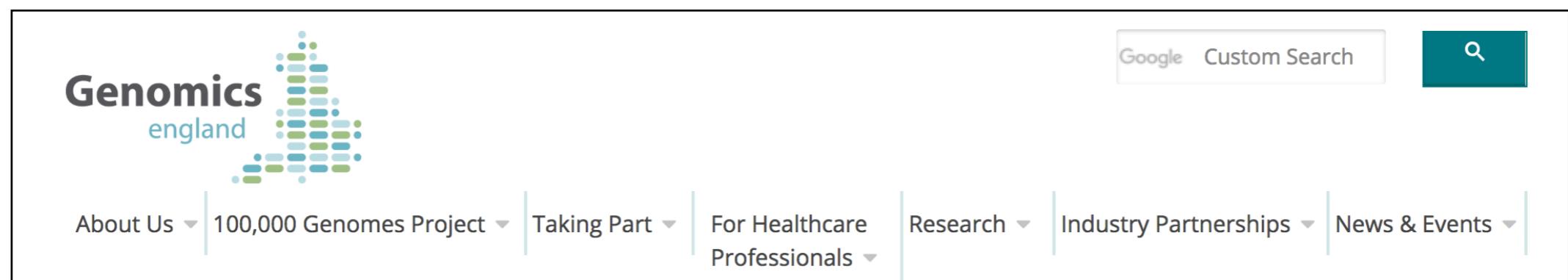
1000 Genomes Project (2008-2015)

<http://www.internationalgenome.org/>



100,000 Genomes Project (2012-)

<https://www.genomicsengland.co.uk/>



Single Nucleotide Variants

Single Nucleotide Variants (SNVs)

is a DNA sequence variation occurring when a single nucleotide A, T, C, or G in the genome differs between members of the species.

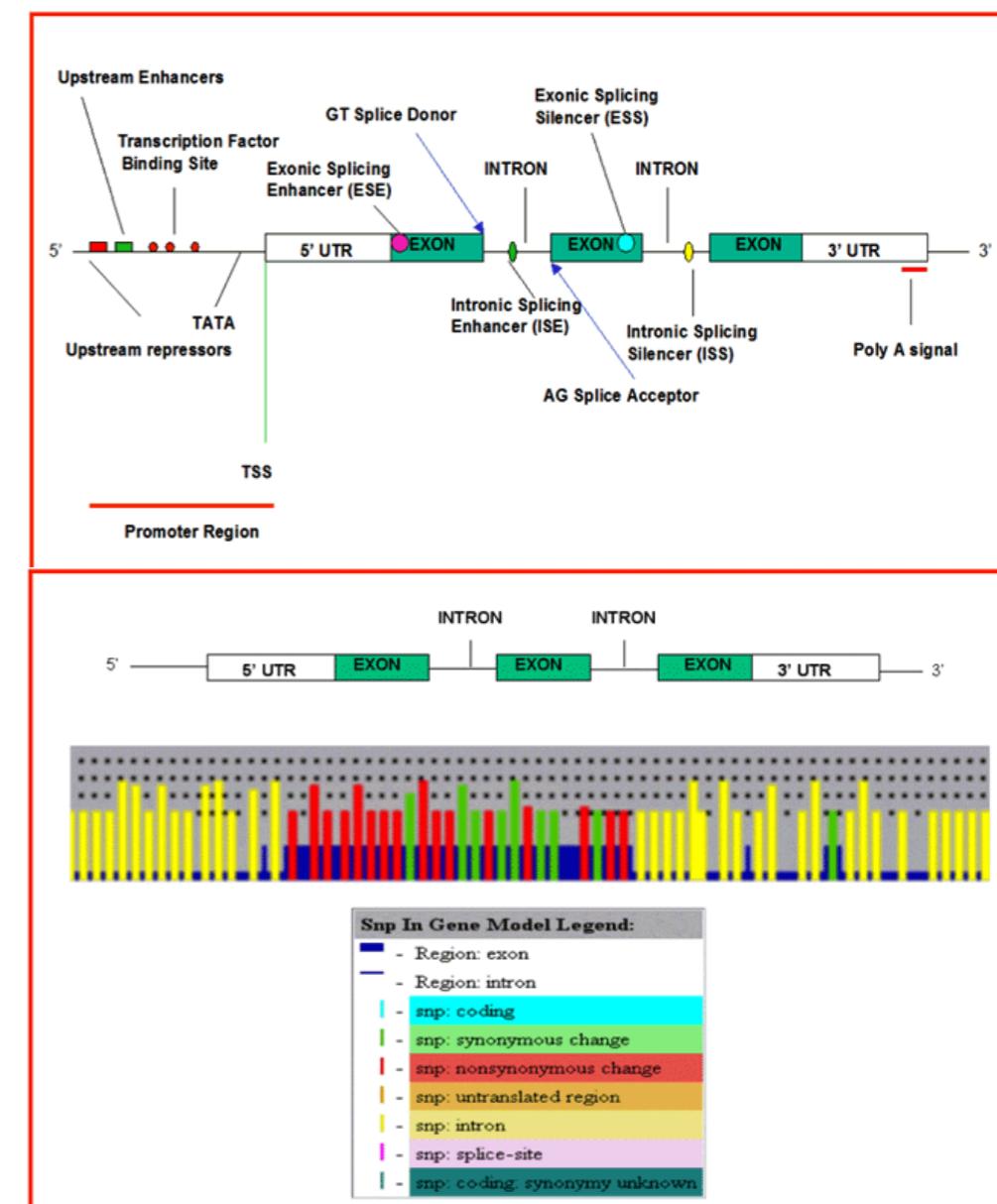
It is used to refer to Polymorphisms when the population frequency is $\geq 1\%$

SNVs occur at any position and can be classified on the base of their locations.

Coding SNVs can be subdivided into two groups:

Synonymous: when single base substitutions do not cause a change in the resultant amino acid

Non-synonymous or Single Amino Acid Variants (SAVs): when single base substitutions cause a change in the resultant amino acid.



1000 Genomes

The 1000 Genomes Project aims to create the **largest public catalogue of human variations and genotype data**. Last versione released the genotype of ~2,500 individuals.

Table 1 | Variants discovered by project, type, population and novelty

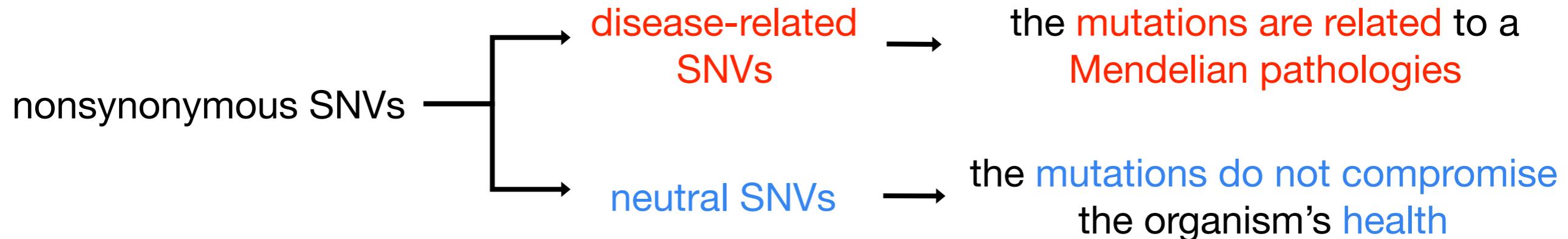
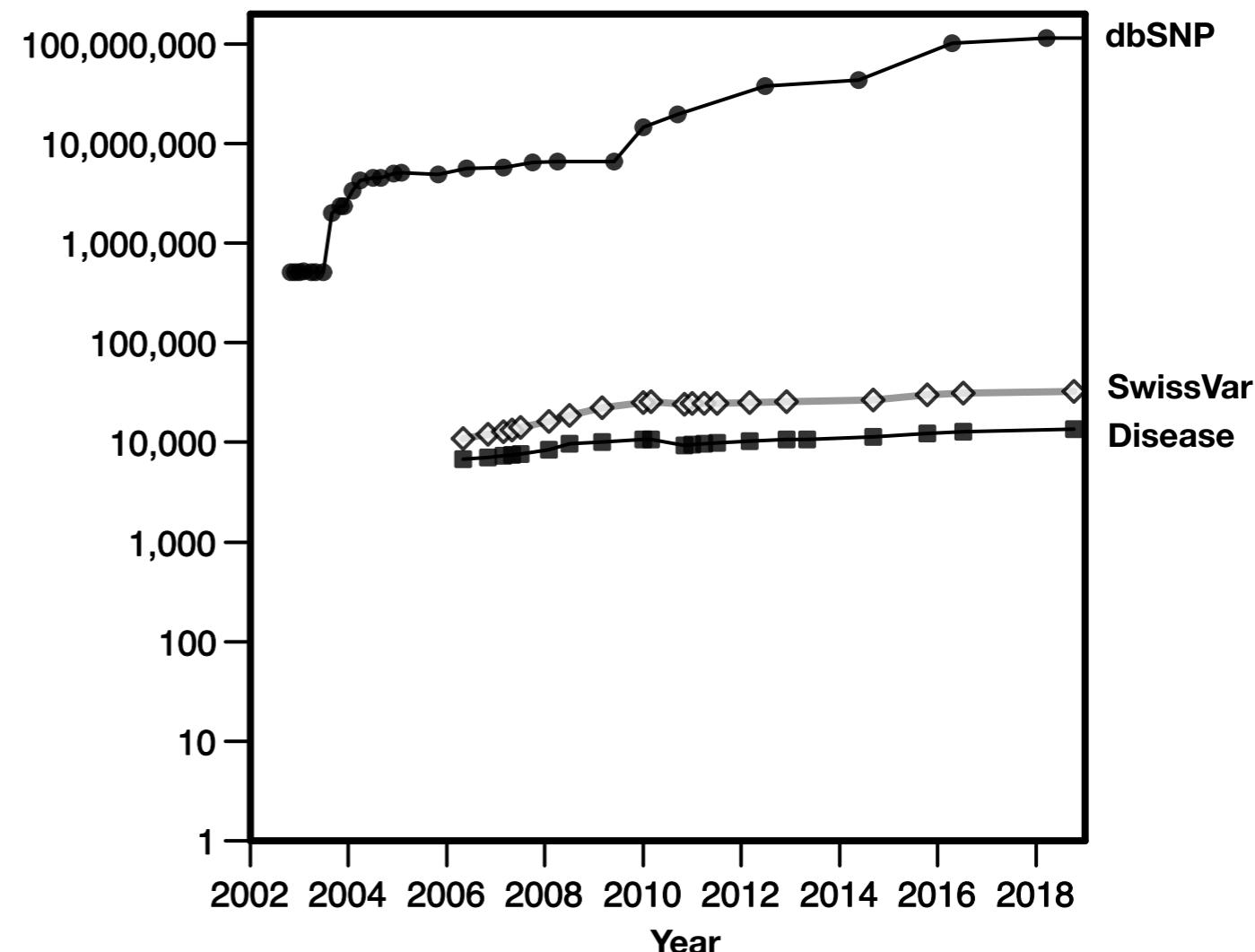
a Summary of project data including combined exon populations

Statistic	Low coverage				Trios			Exon (total)	Union across projects
	CEU	YRI	CHB+JPT	Total	CEU	YRI	Total		
Samples	60	59	60	179	3	3	6	697	742
Total raw bases (Gb)	1,402	874	596	2,872	560	615	1,175	845	4,892
Total mapped bases (Gb)	817	596	468	1,881	369	342	711	56	2,648
Mean mapped depth (×)	4.62	3.42	2.65	3.56	43.14	40.05	41.60	55.92	NA
Bases accessed (% of genome)	2.43 Gb (86%)	2.39 Gb (85%)	2.41 Gb (85%)	2.42 Gb (86.0%)	2.26 Gb (79%)	2.21 Gb (78%)	2.24 Gb (79%)	1.4 Mb	NA
No. of SNPs (% novel)	7,943,827 (33%)	10,938,130 (47%)	6,273,441 (28%)	14,894,361 (54%)	3,646,764 (11%)	4,502,439 (23%)	5,907,699 (24%)	12,758 (70%)	15,275,256 (55%)
Mean variant SNP sites per individual	2,918,623	3,335,795	2,810,573	3,019,909	2,741,276	3,261,036	3,001,156	763	NA
No. of indels (% novel)	728,075 (39%)	941,567 (52%)	666,639 (39%)	1,330,158 (57%)	411,611 (25%)	502,462 (37%)	682,148 (38%)	96 (74%)	1,480,877 (57%)
Mean variant indel sites per individual	354,767	383,200	347,400	361,669	322,078	382,869	352,474	3	NA
No. of deletions (% novel)	ND	ND	ND	15,893 (60%)	6,593 (41%)	8,129 (50%)	11,248 (51%)	ND	22,025 (61%)
No. of genotyped deletions (% novel)	ND	ND	ND	10,742 (57%)	ND	ND	6,317 (48%)	ND	13,826 (58%)
No. of duplications (% novel)	259 (90%)	320 (90%)	280 (91%)	407 (89%)	187 (93%)	192 (91%)	256 (92%)	ND	501 (89%)
No. of mobile element insertions (% novel)	3,202 (79%)	3,105 (84%)	1,952 (76%)	4,775 (86%)	1,397 (68%)	1,846 (78%)	2,531 (78%)	ND	5,370 (87%)
No. of novel sequence insertions (% novel)	ND	ND	ND	ND	111 (96%)	66 (86%)	174 (93%)	ND	174 (93%)

SNVs and Disease

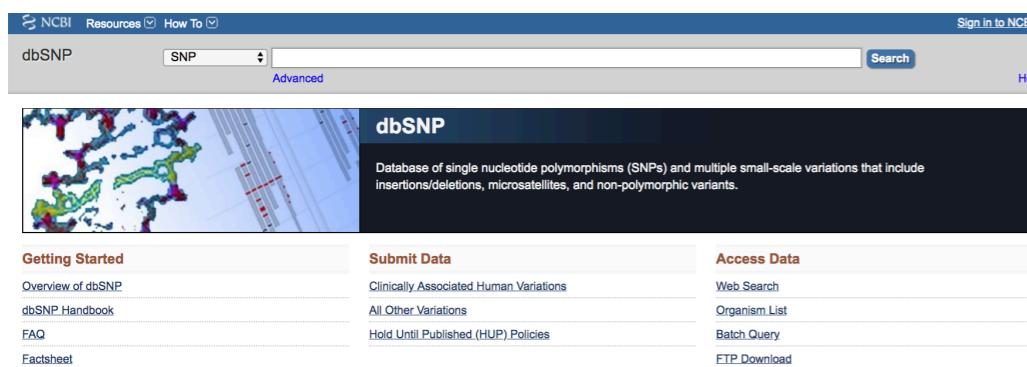
Single Nucleotide Variants (SNVs) are the most common type of genetic variations in human accounting for more than **90% of sequence differences** (1000 Genome Project Consortium, 2012).

SNVs can also be responsible of genetic diseases (Ng and Henikoff, 2002; Bell, 2004).



SNVs and SAVs databases

dbSNP (Mar 2018) @ NCBI



The screenshot shows the dbSNP homepage. At the top, there's a search bar with 'SNP' selected and a 'Search' button. Below the search bar is a 'Help' link. The main content area features a map of genetic variants and a brief description: 'Database of single nucleotide polymorphisms (SNPs) and multiple small-scale variations that include insertions/deletions, microsatellites, and non-polymorphic variants.' Below this are three main navigation sections: 'Getting Started' (Overview of dbSNP, dbSNP Handbook, FAQ, Factsheet), 'Submit Data' (Clinically Associated Human Variations, All Other Variations, Hold Until Published (HUP) Policies), and 'Access Data' (Web Search, Organism List, Batch Query, FTP Download).

<http://www.ncbi.nlm.nih.gov/snp>

SwissVar (Oct 2018) @ ExPASy



<http://www.expasy.ch/swissvar/>

Single Nucleotide Variants

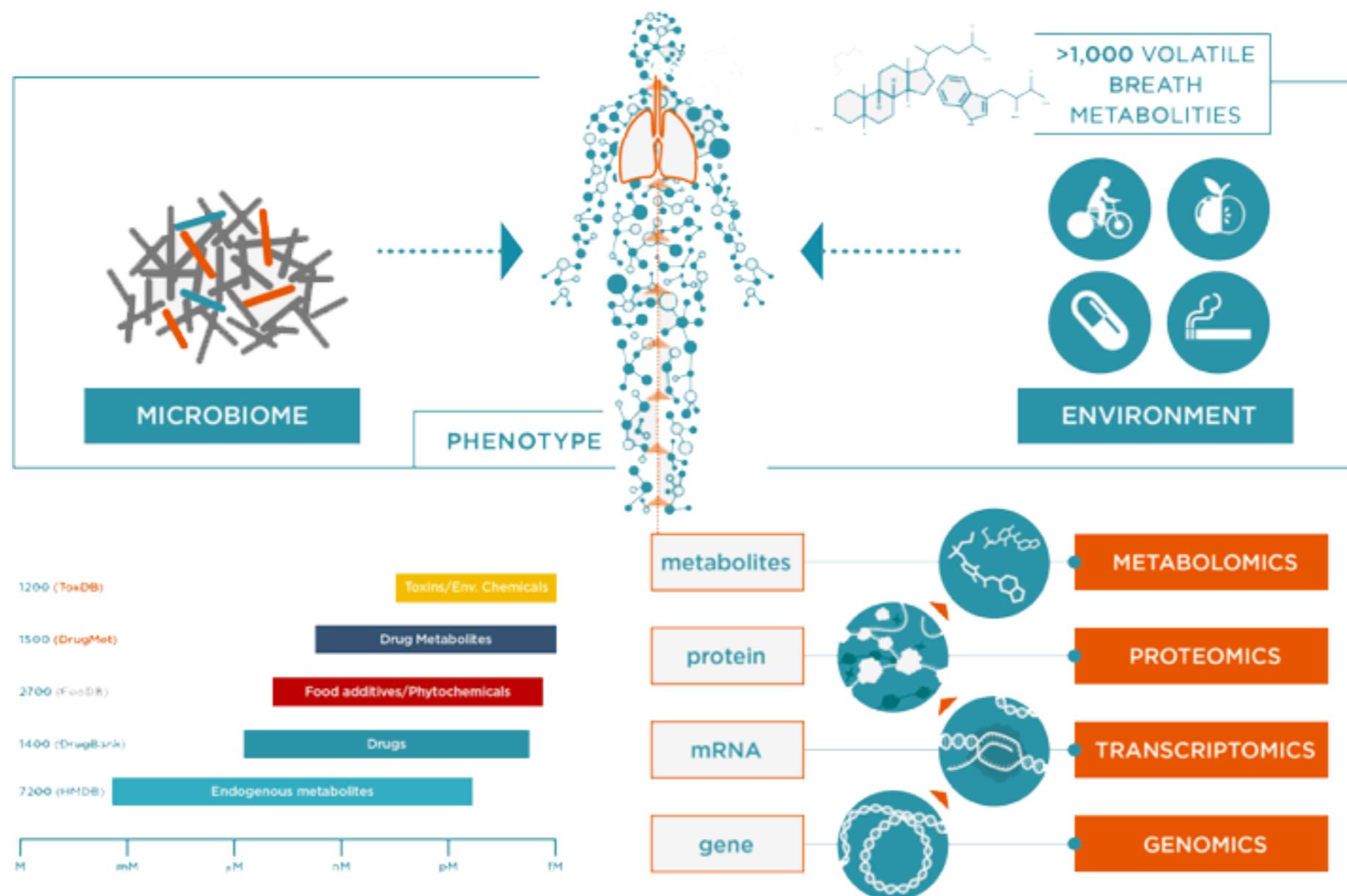
<i>Homo sapiens</i>	113,862,023
<i>Gallus gallus</i>	15,104,956
<i>Zea mays</i>	14,672,946

Single Amino acid Variants

<i>Homo sapiens</i>	76,608
<i>Disease</i>	29,529
<i>Polymorphisms</i>	39,779

Precision Medicine

The analysis of genomic data from healthy individuals and patients can be used to develop **better diagnostic and personalized treatment strategies**

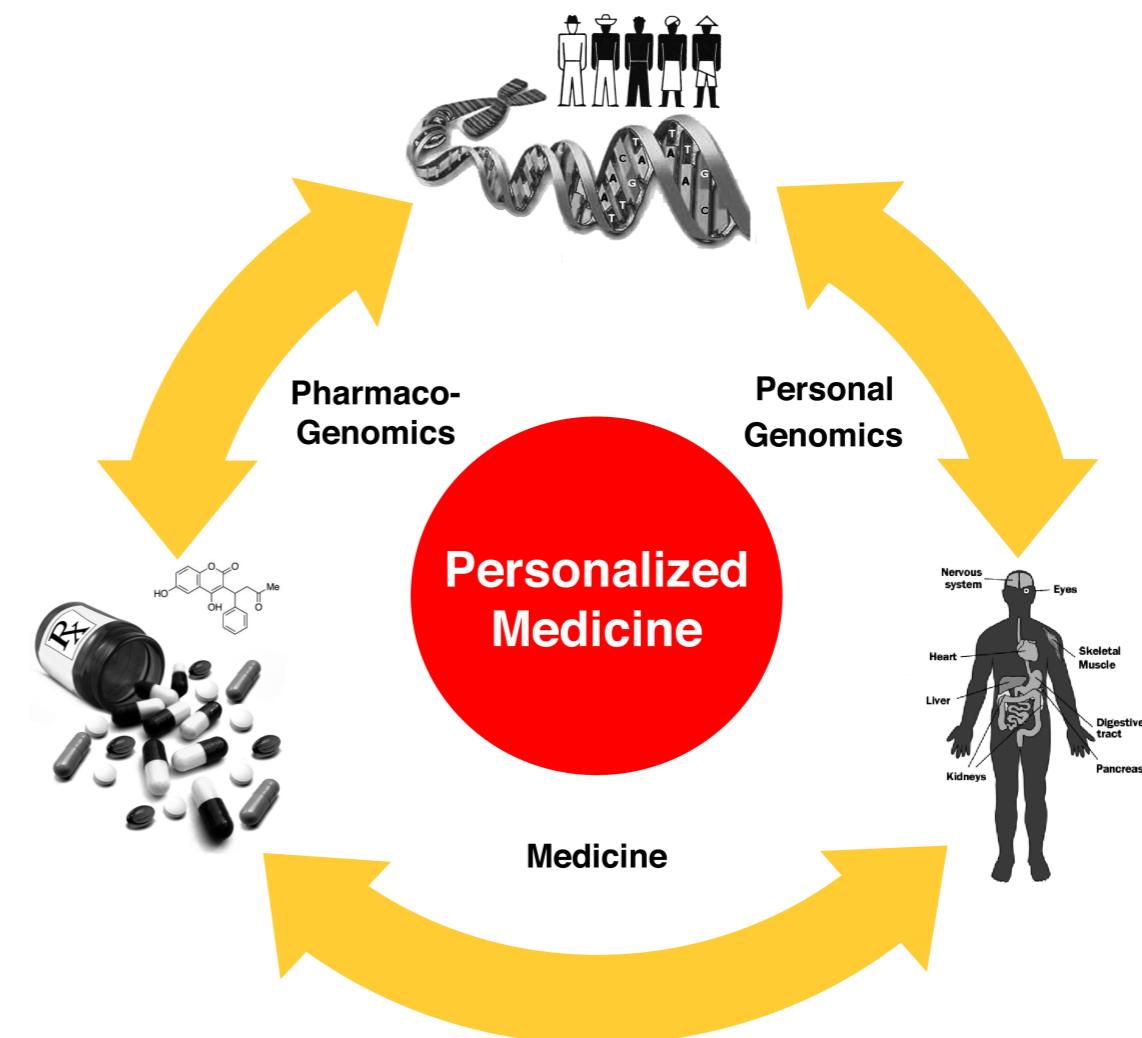


Personalized medicine

Direct to consumers company are performing genotype test on markers associated to genetic traits, and soon the full genome sequencing will cost ~\$1,000.

The future bioinformatics challenges for personalized medicine will be:

1. Processing Large-Scale Robust Genomic Data
2. Interpretation of the Functional Effect and the Impact of Genomic Variation
3. Integrating Systems and Data to Capture Complexity
4. Making it all clinically relevant



Variant Interpretation

Sequence, Structure & Function

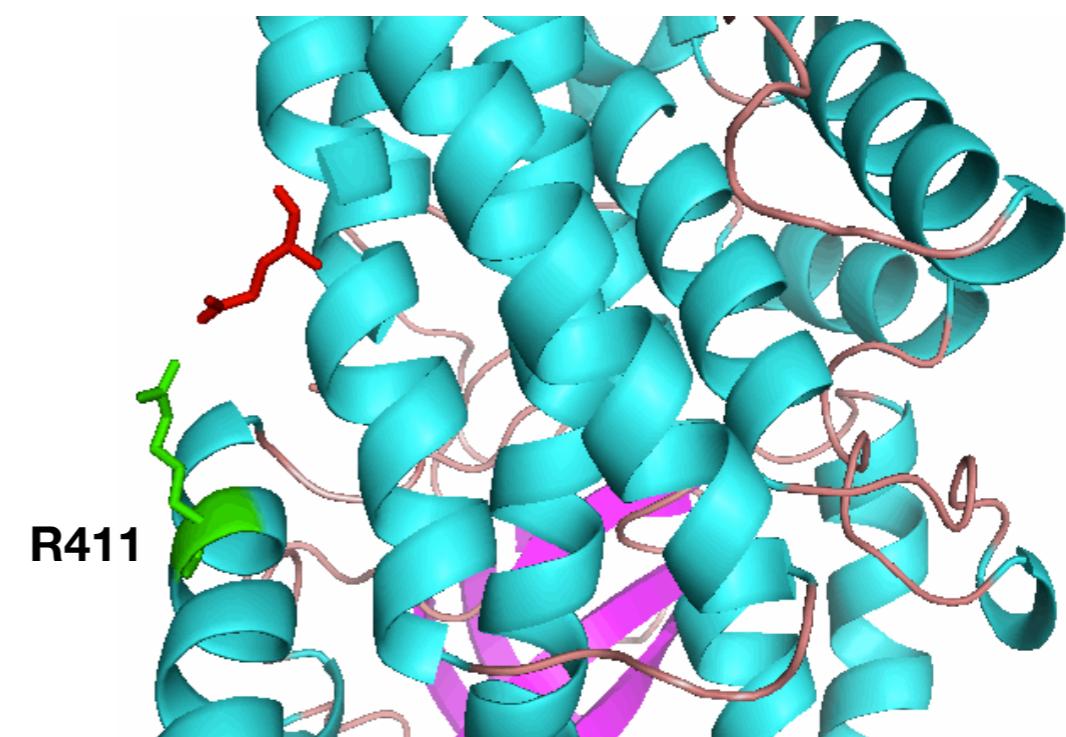
Genomic variants in sequence motifs could affect protein function.

Mutation S362A of P53 affect the interaction with hydrolase USP7 and the deubiquitination of the protein.



Nonsynonymous variants responsible for protein structural changes and cause loss of stability of the folded protein.

Mutation R411L removes the salt bridge stabilizing the structure of the IVD dehydrogenase.



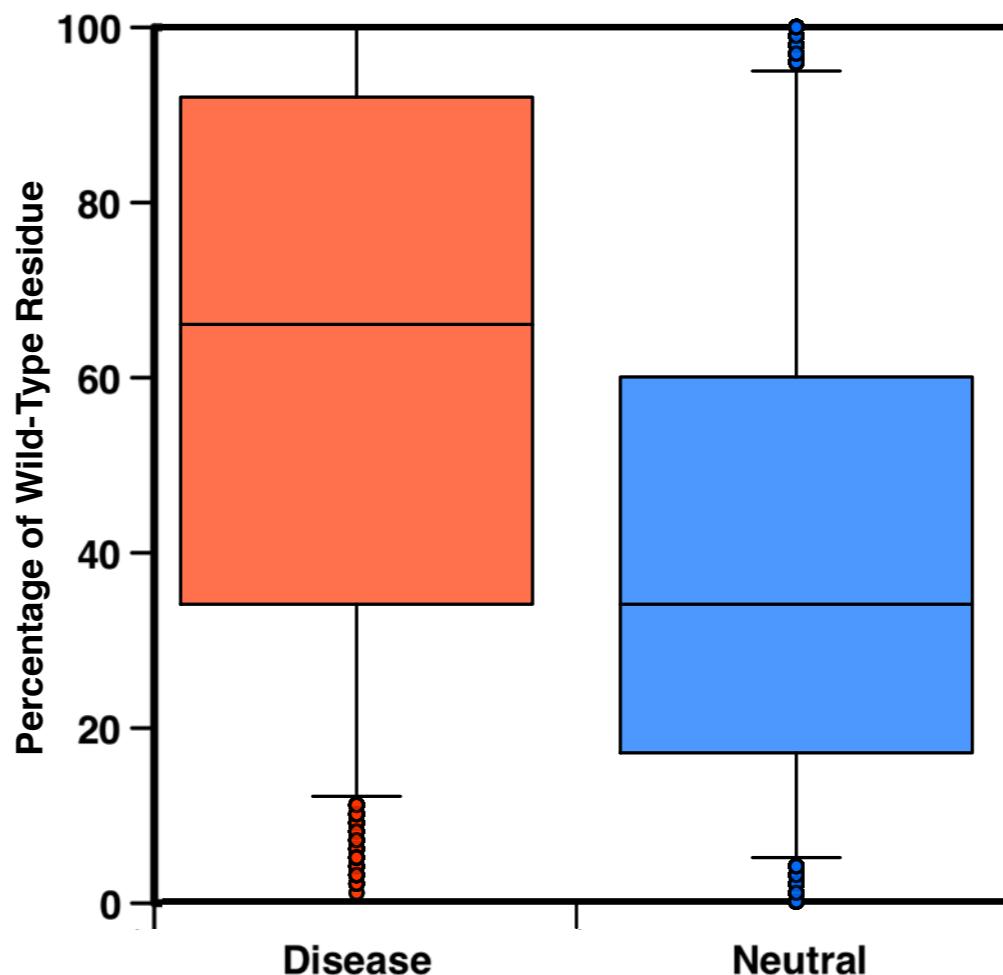
Conserved or not?

In positions 66 the Glutamic acid is highly conserved Asparagine in position 138 is mutated Threonine or Alanine

Sequence profile

The protein **sequence profile** is calculated running **BLAST** on the UniRef90 dataset and selecting only the hits with $e\text{-value} < 10^{-9}$.

The **frequency distributions of the wild-type residues** for disease-related and neutral variants are significantly different (KS p-value=0).

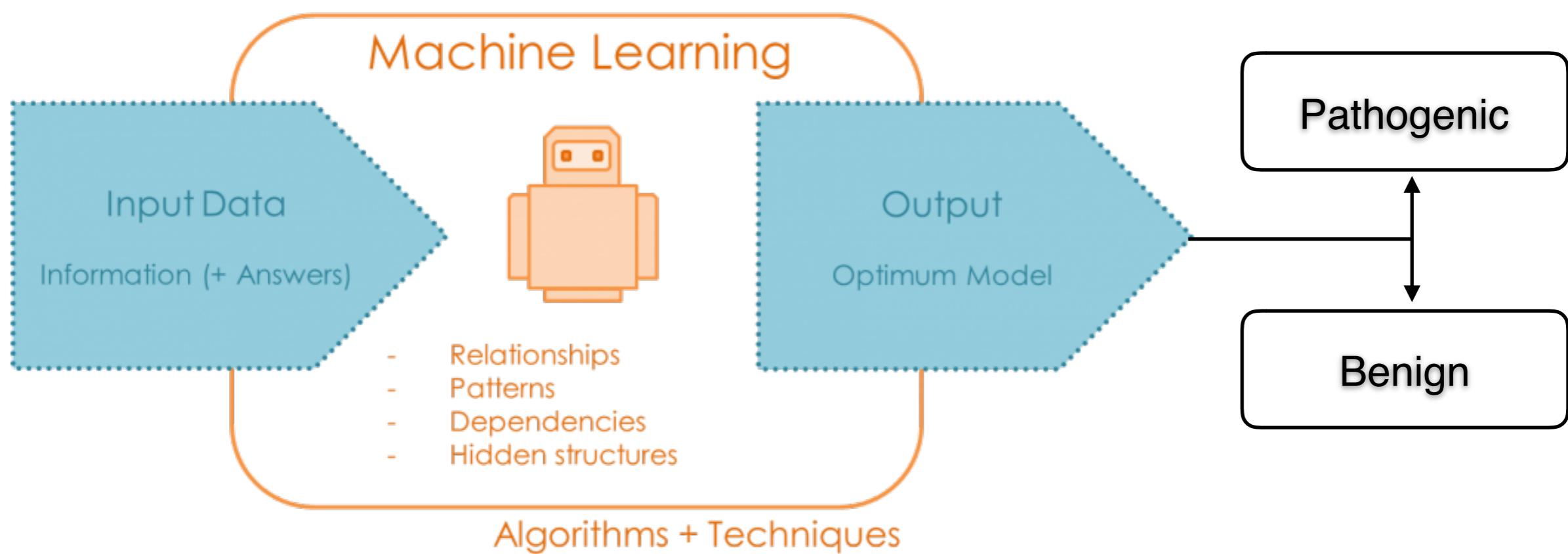


Machine learning

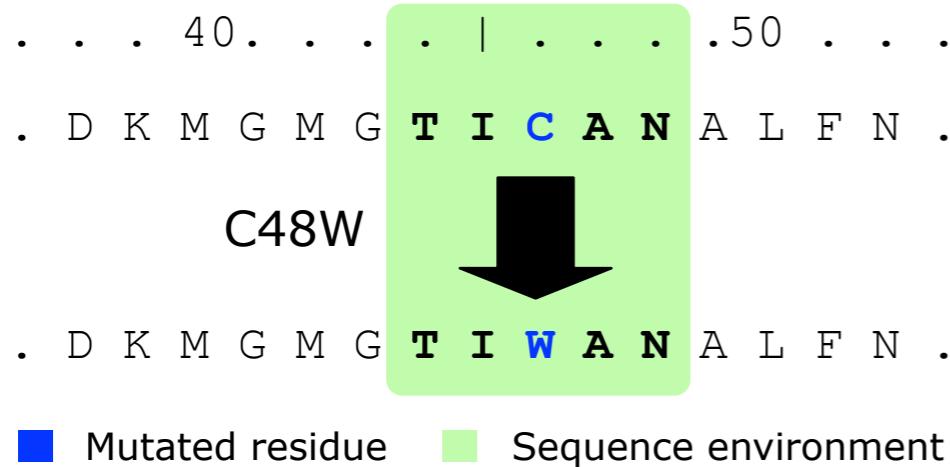
- Computational approach to build models based on the analysis of empirical data.
- Machine learning algorithms are suitable to address problems for which analytic solution does not exists and large amount of data are available.
- They are implemented selecting a representative set of data that are used in a training step and then validated on a test set with data “*not seen*” during the training.
- Most popular machine learning approaches are in computational biology are Neural Networks, Support Vector Machines and Random Forest.

Variant interpretation

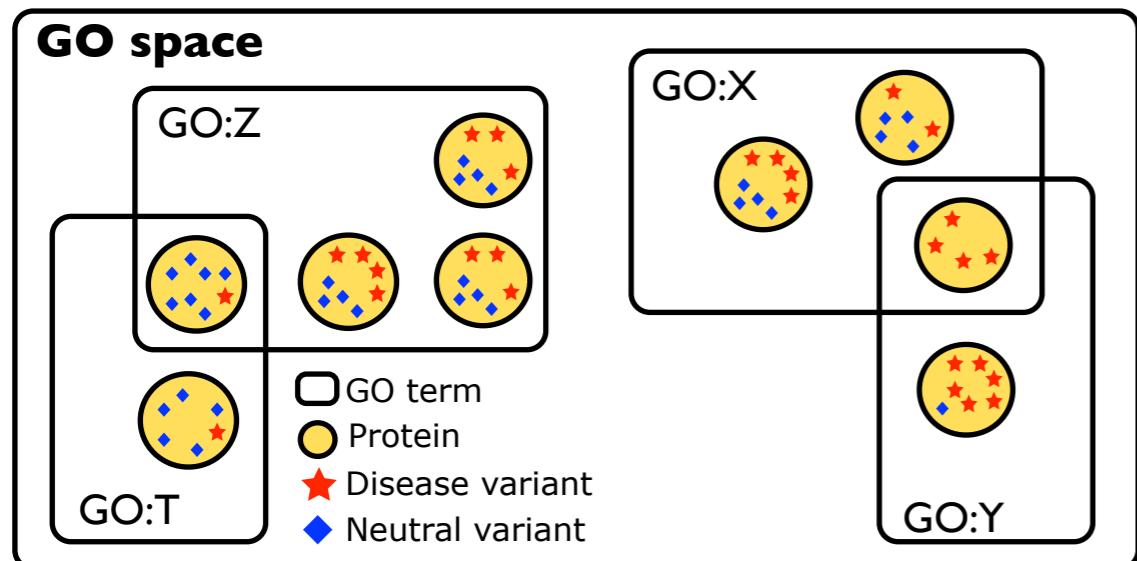
Usually based learning algorithm which takes in input features associated to the variants and returns a probability for the variant to be Pathogenic or Benign



SNPs&GO input features



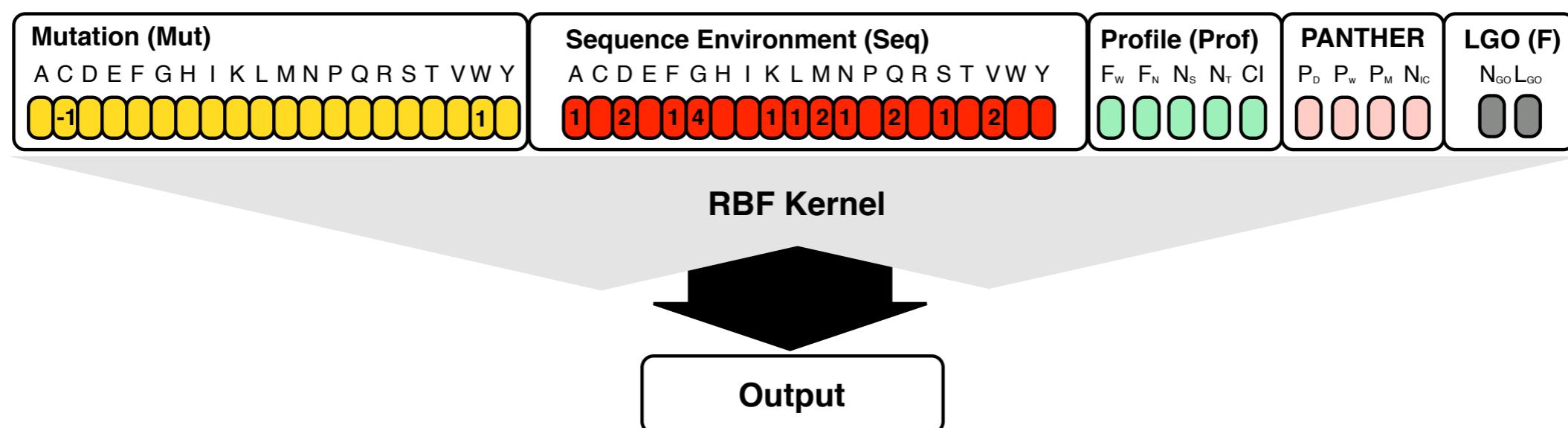
Protein sequence profile information derived from a multiple sequence alignment. It is encoded in a 5 elements vector corresponding to different features general and local features



The GO information are encoded in a 2 elements vector corresponding to the number unique of GO terms associated to the protein sequences and the sum of the logarithm of the total number of disease-related and neutral variants for each GO term.

SNPs&GO performance

SNPs&GO results in better performance with respect to previously developed methods.



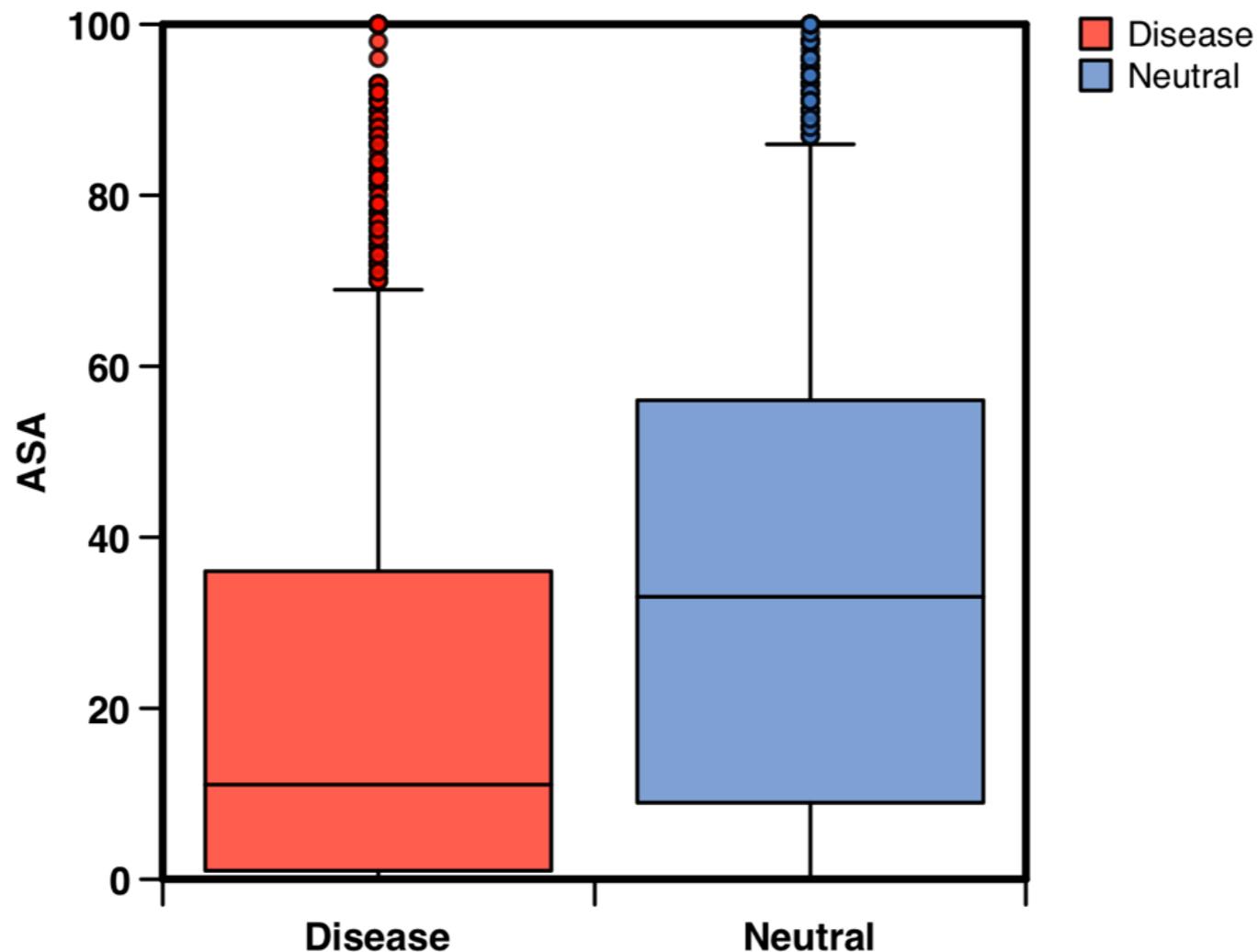
Method	Q2	P[D]	Q[D]	P[N]	Q[N]	C	PM
PolyPhen	0,71	0,76	0,75	0,63	0,64	0,39	58
SIFT	0,76	0,75	0,76	0,77	0,75	0,52	93
PANTHER	0,74	0,77	0,73	0,71	0,76	0,48	76
SNPs&GO	0,82	0,83	0,78	0,80	0,85	0,63	100

D = Disease related N = Neutral

DB= 33672 nsSNVs

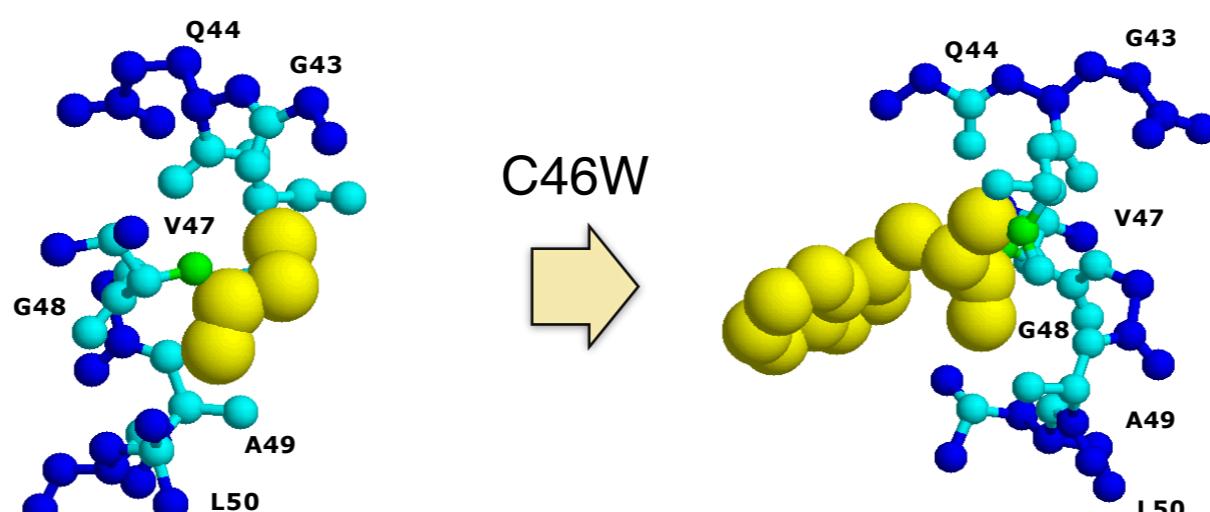
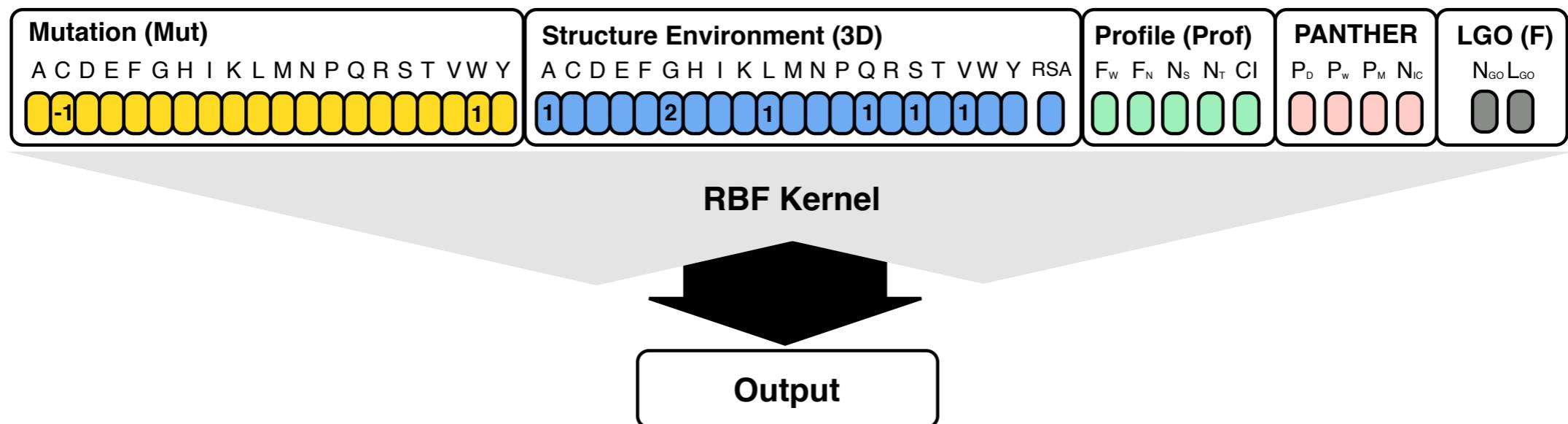
Structure environment

There is a **significant difference** (KS p-value = 2.8×10^{-71}) between the **distributions** of the relative Accessible Solvent Area for disease-related and neutral variants. Their mean values are respectively 20.6 and 35.7.



The structure-based method

The method takes in to input 4 types of information encoded in a 48 elements vector. The input features are: mutation data; structure environment, sequence profile and functional score based on GO terms.



Mutated Aminoacid

0 < R < 2 Å

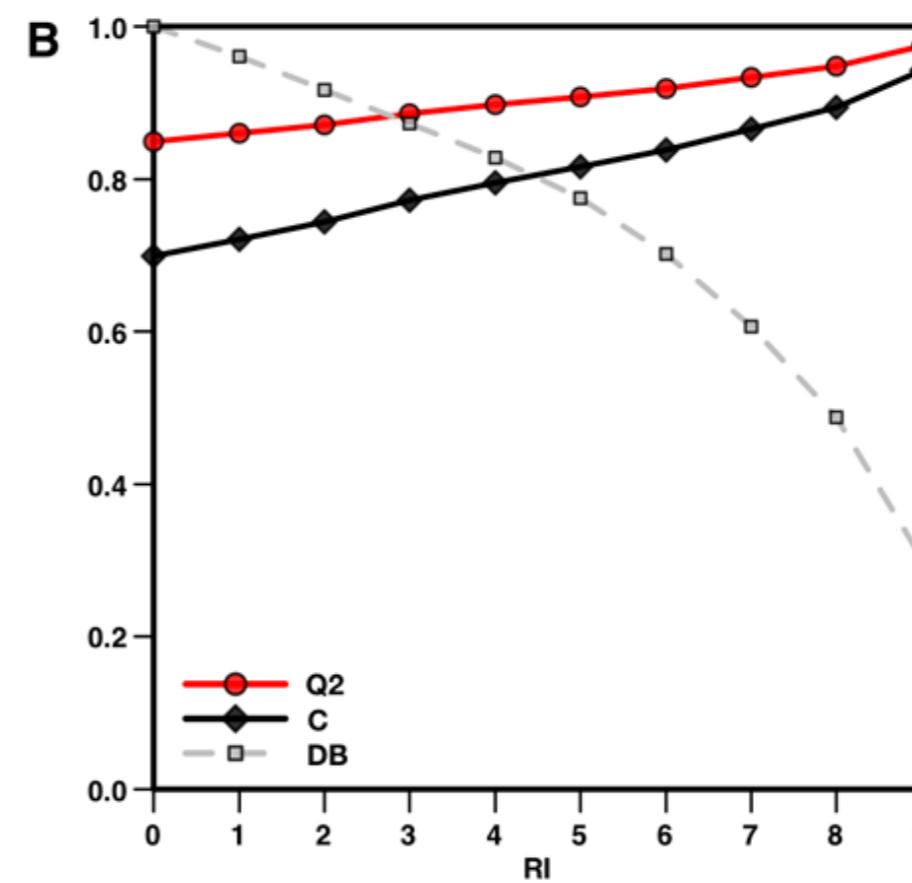
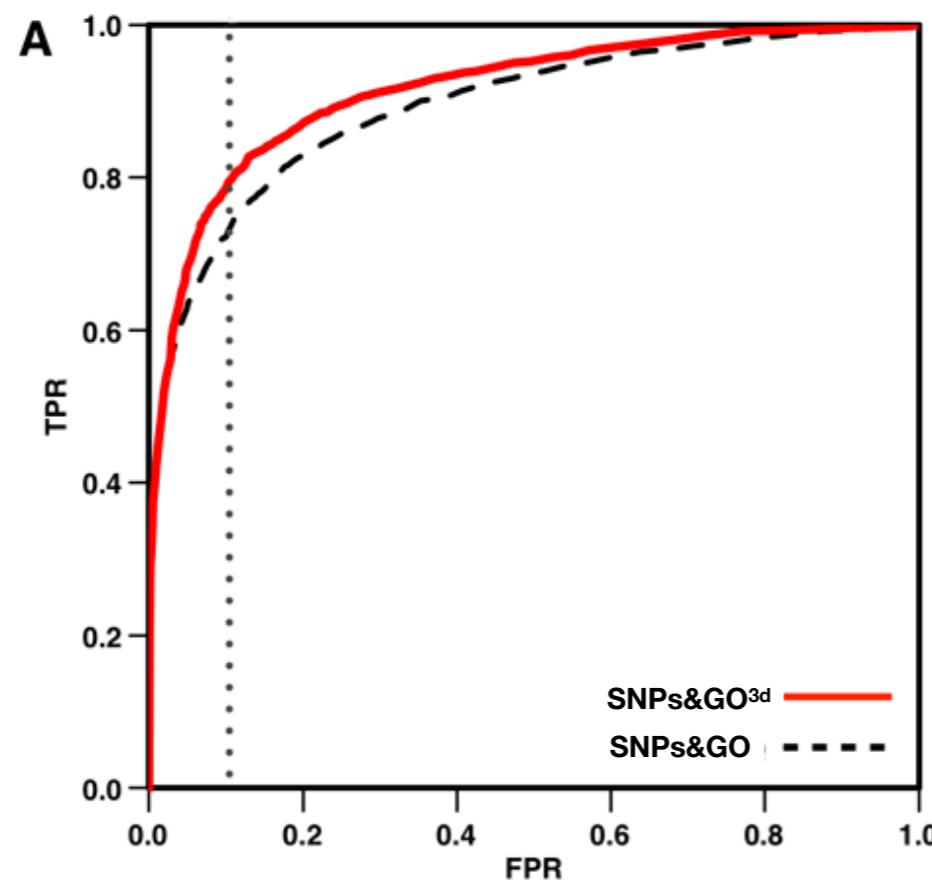
2 < R < 4 Å

4 < R < 6 Å

Sequence vs Structure

The structure-based method results in better accuracy with respect to the sequence-based one. **Structure based prediction are 3% more accurate** and **correlation coefficient increases of 0.06**. If 10% of FP are accepted the TPR increases of 7%.

	Q2	P[D]	S[D]	P[N]	S[N]	C	AUC
SNPs&GO	0.82	0.81	0.83	0.82	0.81	0.64	0.89
SNPs&GO^{3d}	0.85	0.84	0.87	0.86	0.83	0.70	0.92

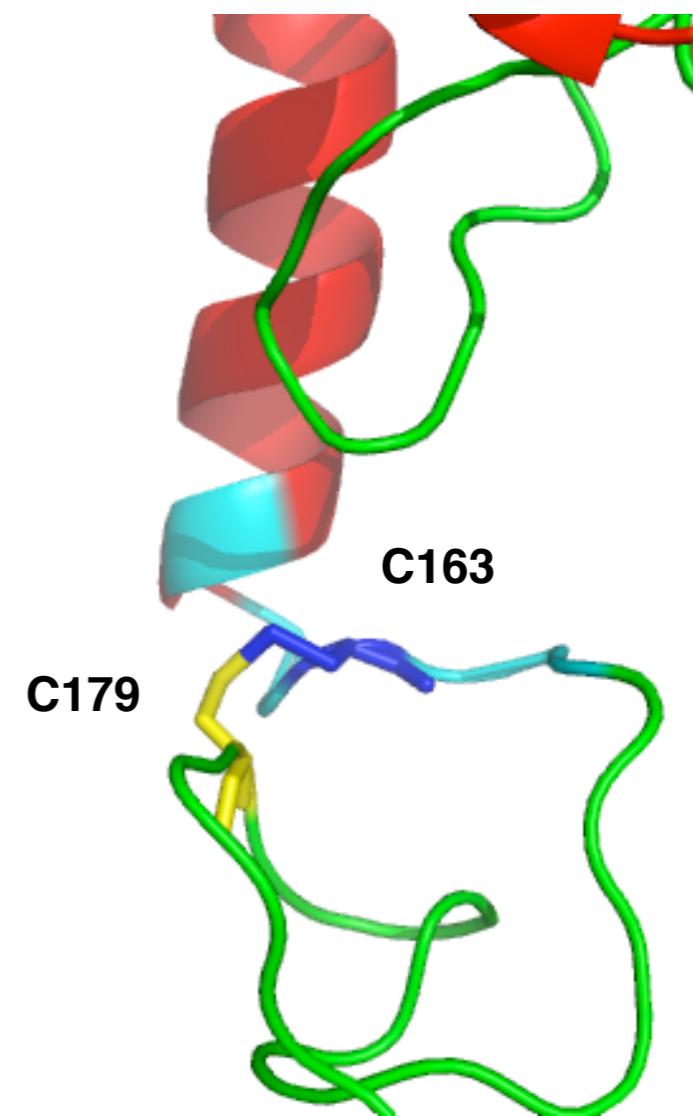


Prediction example

Damaging missing Cys-Cys interaction in the Glycosylasparaginase. The mutation p.Cys163Ser results in the loss of the disulfide bridge between Cys163 and Cys179. This SAP is responsible for Aspartylglucosaminuria.

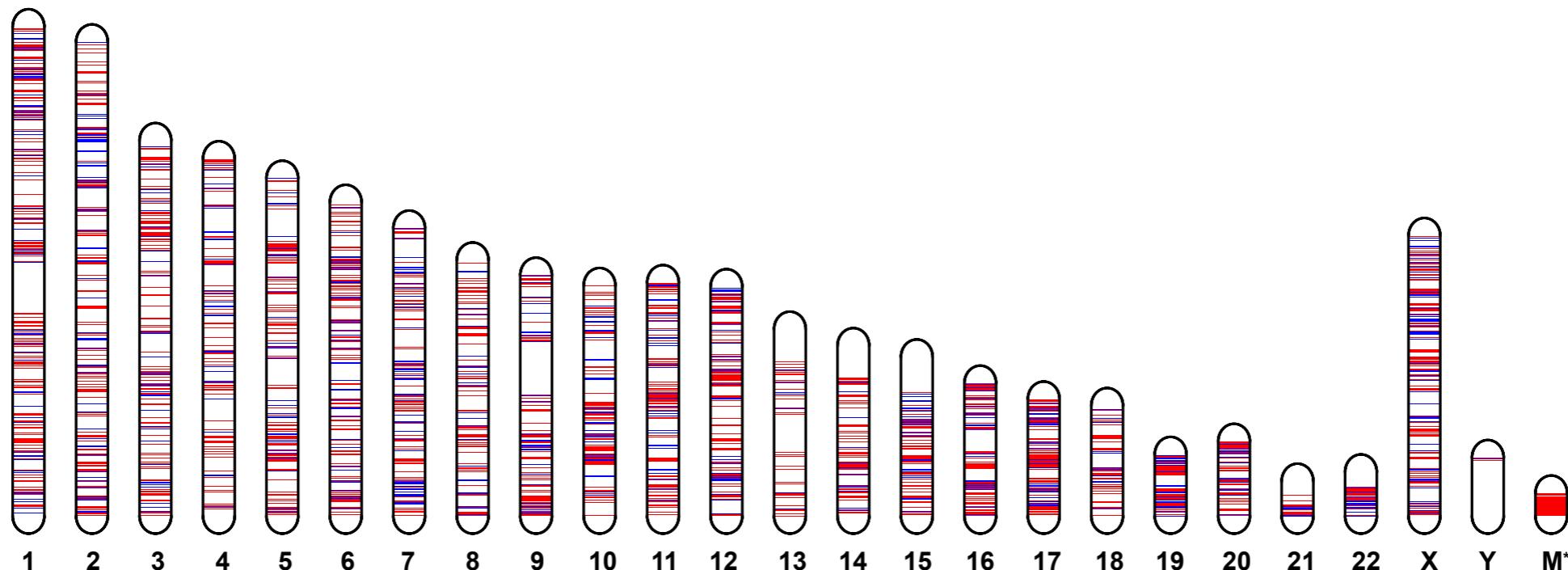


1APY: Chain A, Res: 2.0 Å



Whole-genome predictions

Most of the genetic variants occur in non-coding region that represents >98% of the whole genome.

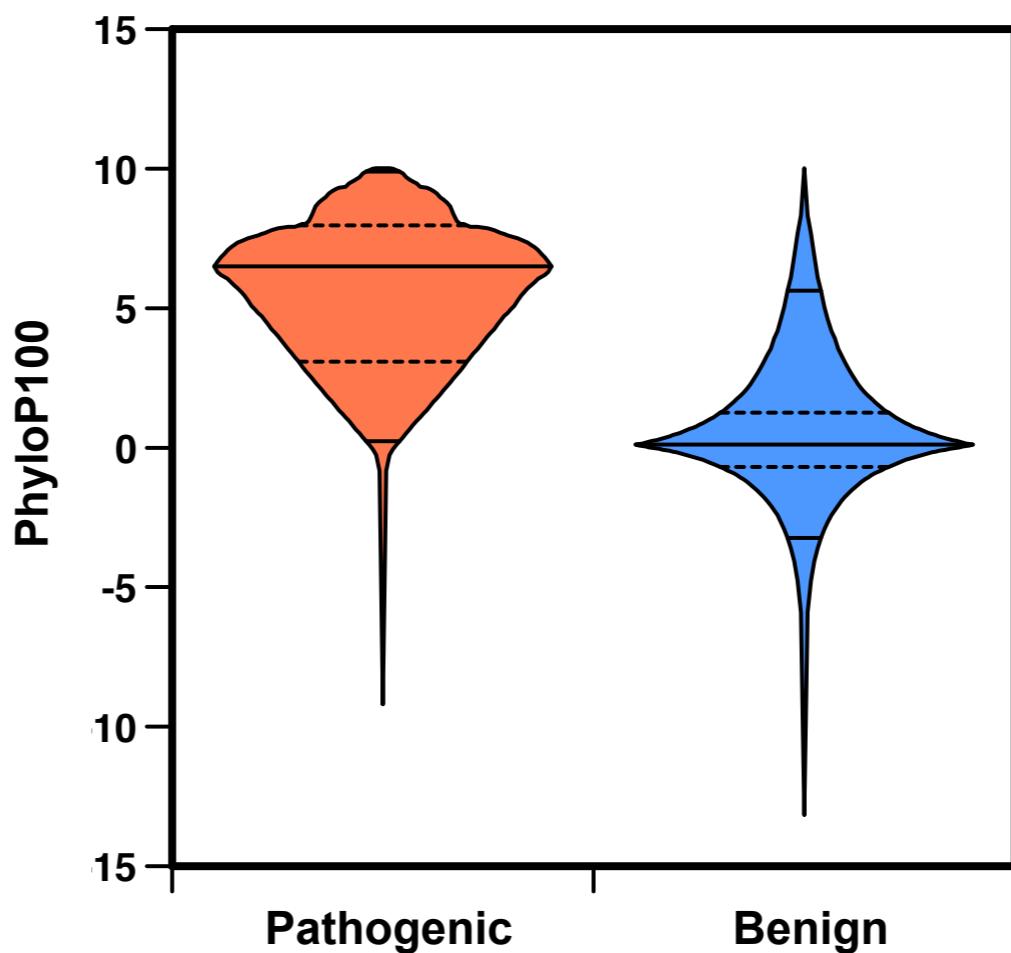


Predict the effect of SNVs in non-coding region is a challenging task because conservation is more difficult to estimate.

Sequence alignment is more complicated for sequences from non-coding regions.

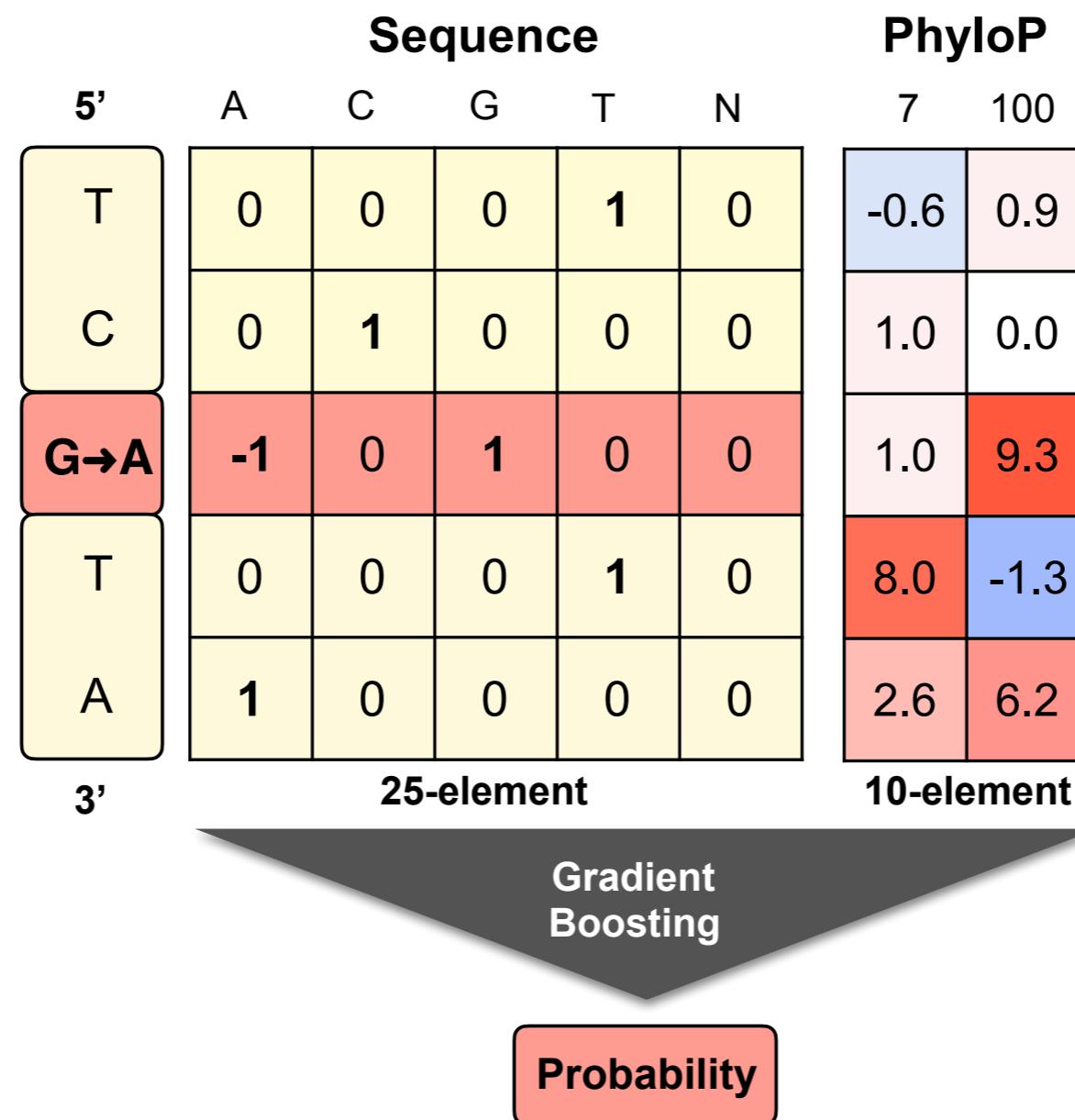
PhyloP100 score

Conservation analysis based on the pre-calculated score available at the UCSC revealed a **significant difference between the distribution of the PhyloP100 scores in Pathogenic and Benign SNVs.**



PhD-SNPG

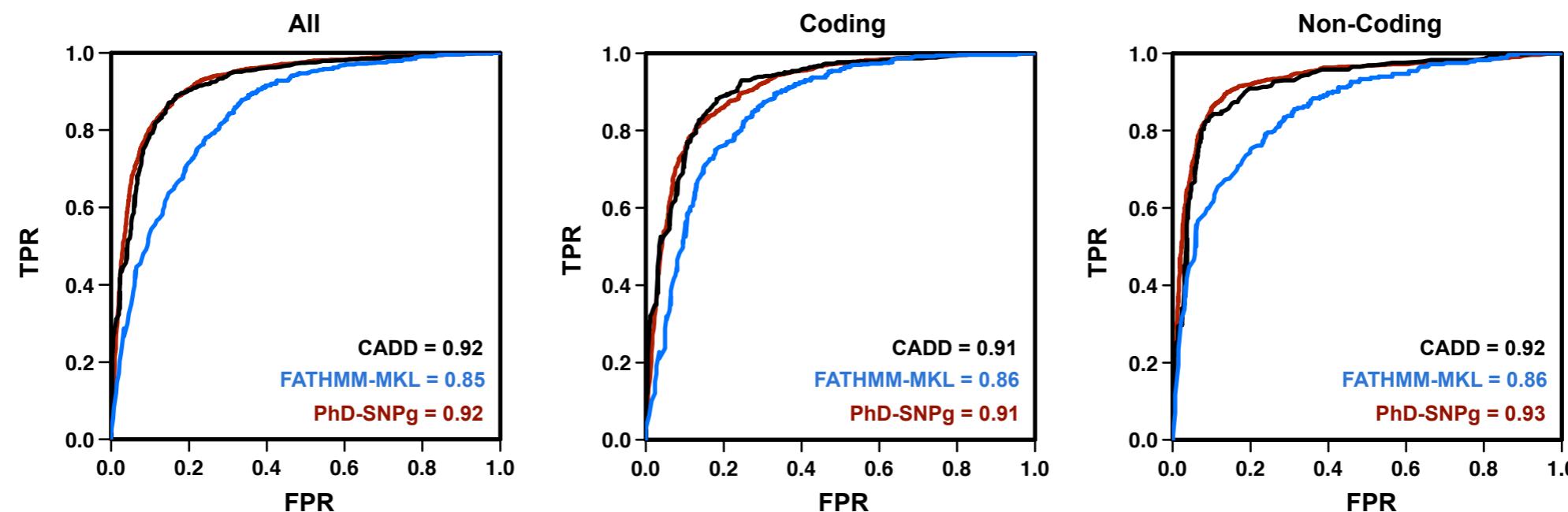
PhD-SNPG is a simple method that takes in input **35 sequence-based features** from a window of 5 nucleotides around the mutated position.



Benchmarking

PhD-SNP^g has been tested in cross-validation on a set of 35,802 SNVs and on a blind set of 1,408 variants recently annotated.

	Q2	TNR	NPV	TPR	PPV	MCC	F1	AUC
PhD-SNP^g	0.861	0.774	0.884	0.925	0.847	0.715	0.884	0.924
Coding	0.849	0.671	0.845	0.938	0.850	0.651	0.892	0.908
Non-Coding	0.876	0.855	0.911	0.901	0.839	0.753	0.869	0.930



Blind Validation

CAGI experiments

The Critical Assessment of Genome Interpretation is a community experiment to objectively assess computational methods for predicting the phenotypic impacts of genomic variation.

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- ☒ [Challenges](#)
 - ☒ [Bipolar exomes](#)
 - ☒ [Crohn's exomes](#)
 - ☒ [eQTL causal SNPs](#)
 - ☒ [Hopkins clinical panel](#)
 - ☒ [NAGLU](#)
 - ☒ [NPM-ALK](#)
 - ☒ [PGP](#)
 - ☒ [Pyruvate kinase](#)
 - ☒ [SickKids clinical genomes](#)
 - ☒ [SUMO ligase](#)
 - ☒ [Warfarin exomes](#)
- ☒ [Conference](#)

Welcome to the CAGI experiment!

The CAGI 4 Conference

The Fourth Critical Assessment of Genome Interpretation (CAGI 4) prediction season has closed. Eleven challenges were released beginning on 3 August 2015, and the final challenge closed on 1 February 2016. Independent assessment of the predictions has been completed.

The CAGI 4 Conference was held 25-27 March 2016 in Genentech Hall on the UCSF Mission Bay campus in San Francisco, California. Conference presentations (remixable slides and video) are provided on the [CAGI 4 conference program page](#) and also on each challenge page.

Please distribute this information widely and follow our Twitter feed @CAGInews and the web site for updates. For more information on the CAGI experiment, see the [Overview](#).

CAGI Lead Scientist or Postdoctoral Researcher position open!

Take the lead of the CAGI experiment! We are searching for a CAGI Lead Scientist or Postdoctoral Researcher to join us in early 2016. Roger Hoskins will lead the CAGI 4 experiment to its completion, but he is unable to continue in the role beyond mid-2016. He will overlap with the new CAGI leader to ensure a seamless transition. Job descriptions posted at <http://compbio.berkeley.edu/jobs>

The P16 challenge

CDKN2A is the most common, high penetrance, susceptibility gene identified to date in **familial malignant melanoma**. **p16^{INK4A}** is one of the two **oncosuppressor** which promotes cell cycle arrest by inhibiting cyclin dependent kinase (CDK4/6).

Challenge: Evaluate how different variants of p16 protein impact its ability to block cell proliferation.

Provide a number between **50%** that represent the normal **proliferation rate of control cells** and **100%** the maximum proliferation rate in case cells.

SNPs&GO prediction

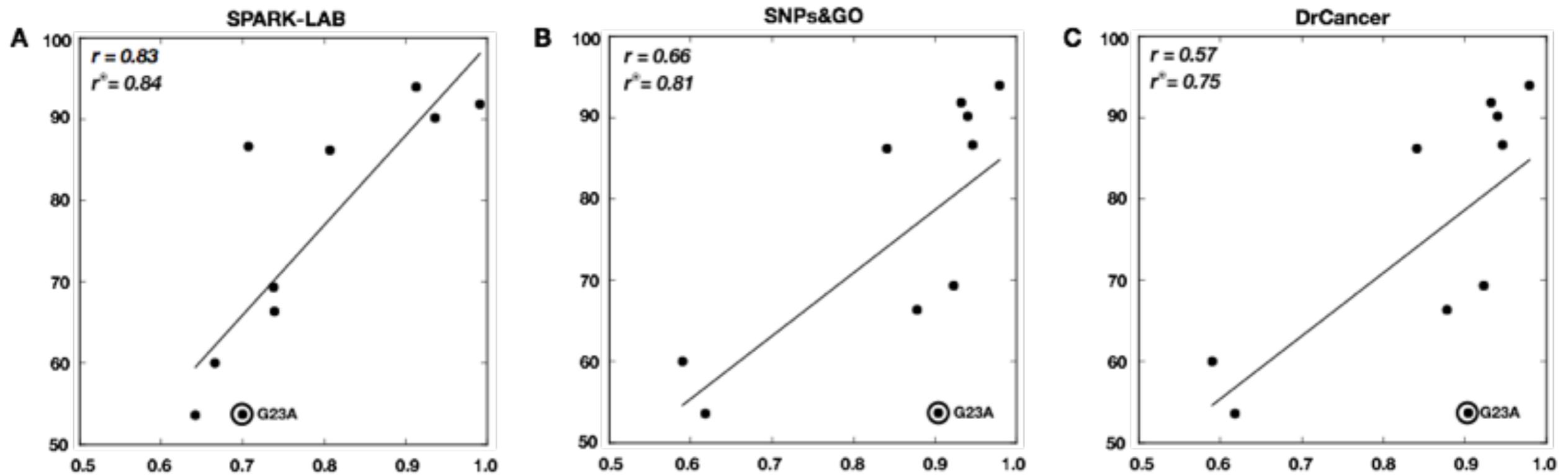
Proliferation rates predicted using the **output of SNPs&GO** without any optimization.

Variant	Prediction	Real	Δ	%WT	%MUT
G23R	0.932	0.918	0.014	84	0
G23S	0.923	0.693	0.230	84	1
G23V	0.940	0.901	0.039	84	0
G23A	0.904	0.537	0.367	84	2
G23C	0.946	0.866	0.080	84	0
G35E	0.590	0.600	0.010	12	14
G35W	0.841	0.862	0.021	12	0
G35R	0.618	0.537	0.081	12	4
L65P	0.878	0.664	0.214	15	1
L94P	0.979	0.939	0.040	56	0

P16 predictions

SNPs&GO resulted among the best methods for predicting the impact of P16INK4A variants on cell proliferation.

Method	Q2	AUC	MC	RMSE	rPearson	rSpearman	rKendallTau
SPARK-LAB	0.900	0.920	0.816	0.30	0.595	0.619	0.443
SNPs&GO	0.700	0.880	0.500	0.33	0.575	0.616	0.445
DrCancer	0.600	0.840	0.333	0.46	0.477	0.495	0.409



The NAGLU challenge

NAGLU is a lysosomal glycohydrolase which deficiency causes a rare disorder referred as Sanfilippo B disease

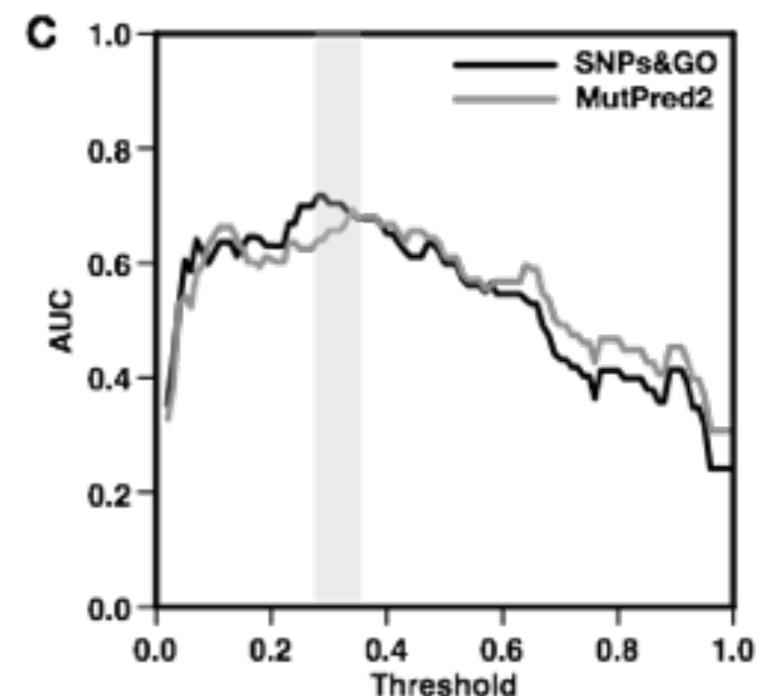
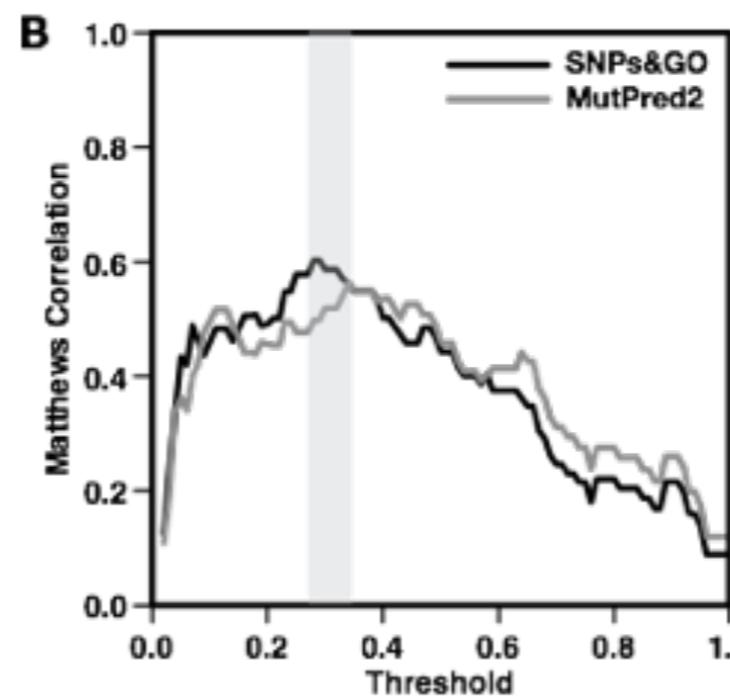
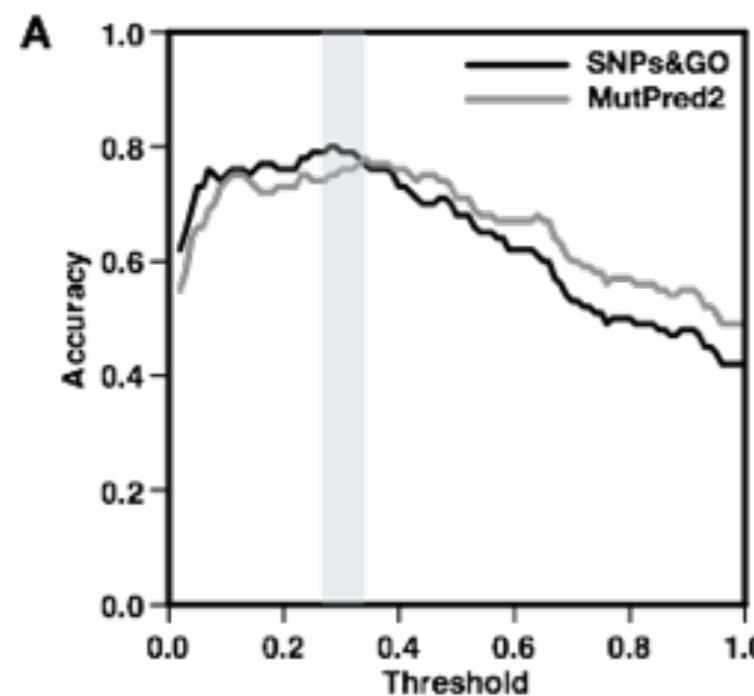
Challenge: Predict the effect of the 165 variants on NAGLU enzymatic activity.

The submitted prediction should be a numeric value ranging from 0 (no activity) to 1 (wild-type level of activity).

A posteriori evaluation

I performed a posteriori evaluation of the performance based on my version of the predictor and found that **SNPs&GO reaches similar accuracy than the best method (MutPred2)**

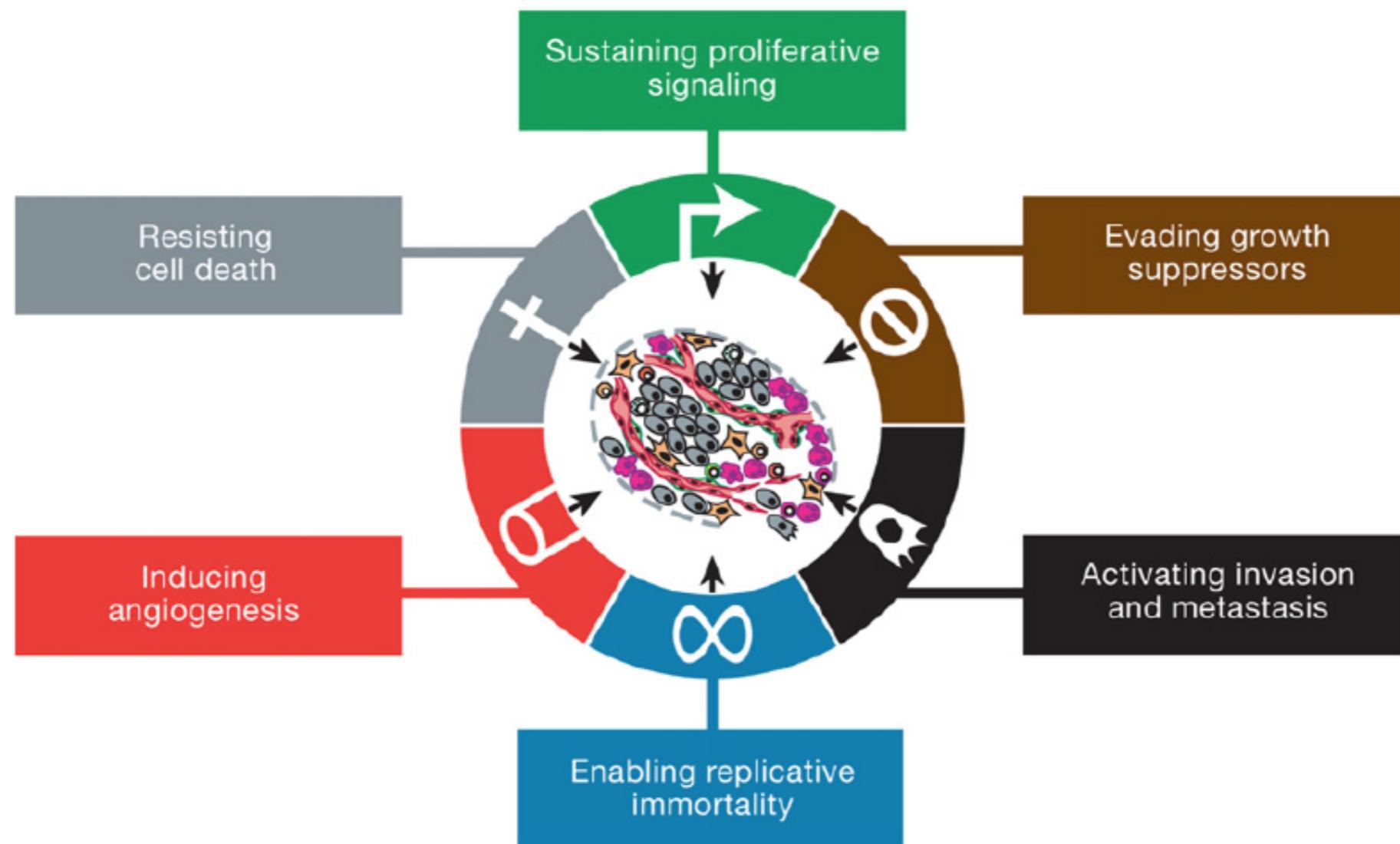
Method	Q2	AUC	MC	RMSE	rPearson	rSpearman	rKendallTau
MutPred2	0.780	0.850	0.565	0.30	0.595	0.619	0.443
SNPs&GO	0.800	0.854	0.603	0.33	0.575	0.616	0.445
SNPs&GO ⁰⁹	0.750	0.749	0.499	0.46	0.477	0.495	0.409



Variations in Cancer

Hallmarks of cancer

The six hallmarks of cancer - distinctive and complementary capabilities that enable tumor growth and metastatic dissemination.



The complexity of cancer

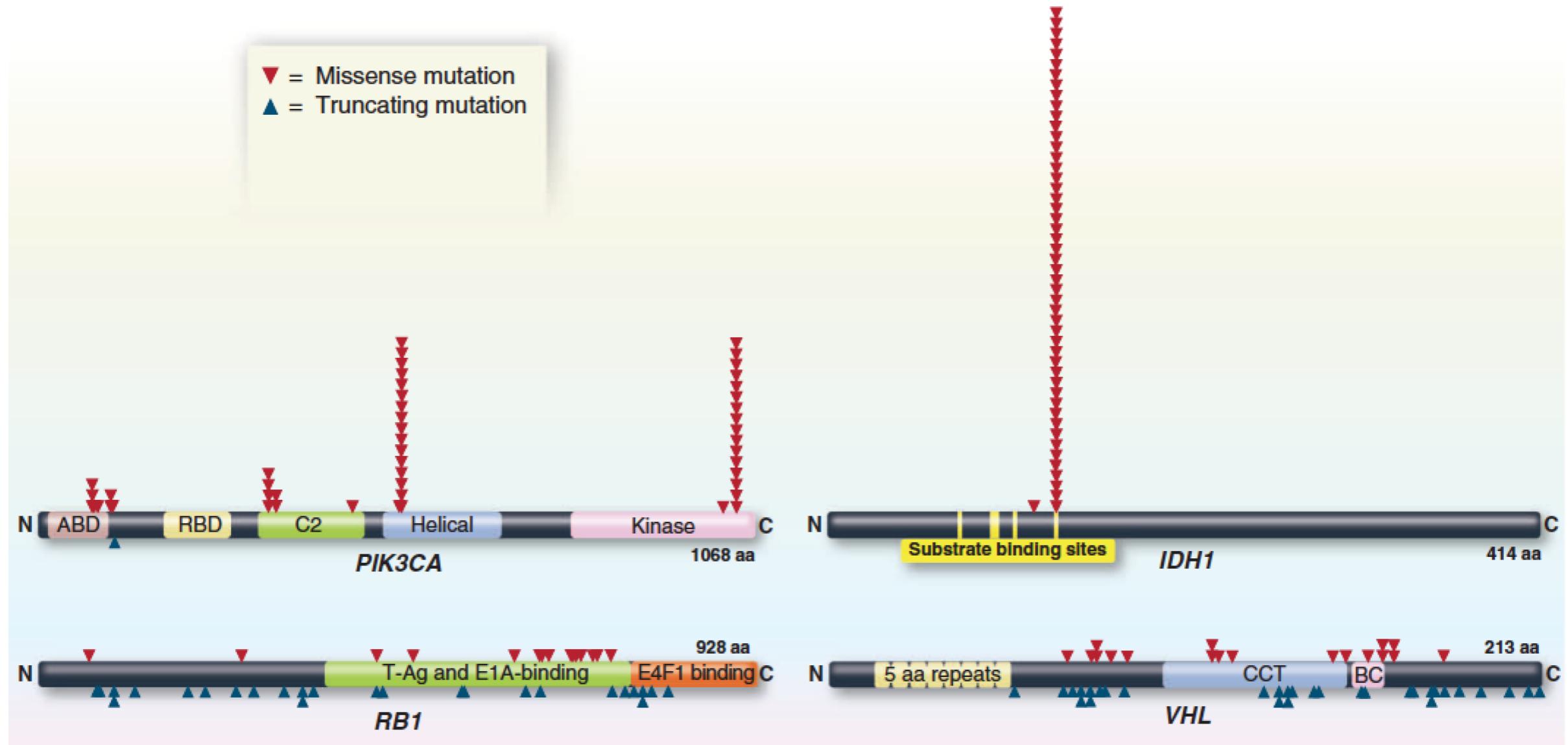
Cancer is **complex disorder** characterized by high level of mutation rate.

Mutations can be classified in **germline and somatic** whether they are inherited from parents or the result of error in DNA replication.

Another classification is between **driver and passenger** mutations whether they provide selective advantage with respect to normal cells increasing their proliferation rate or not.

Oncogene vs Suppressor

Oncogenes have highly recurrent mutations, tumor suppressors have sparse variants.



Main challenges

Computational methods for cancer genome interpretation have been developed to address the following issues:

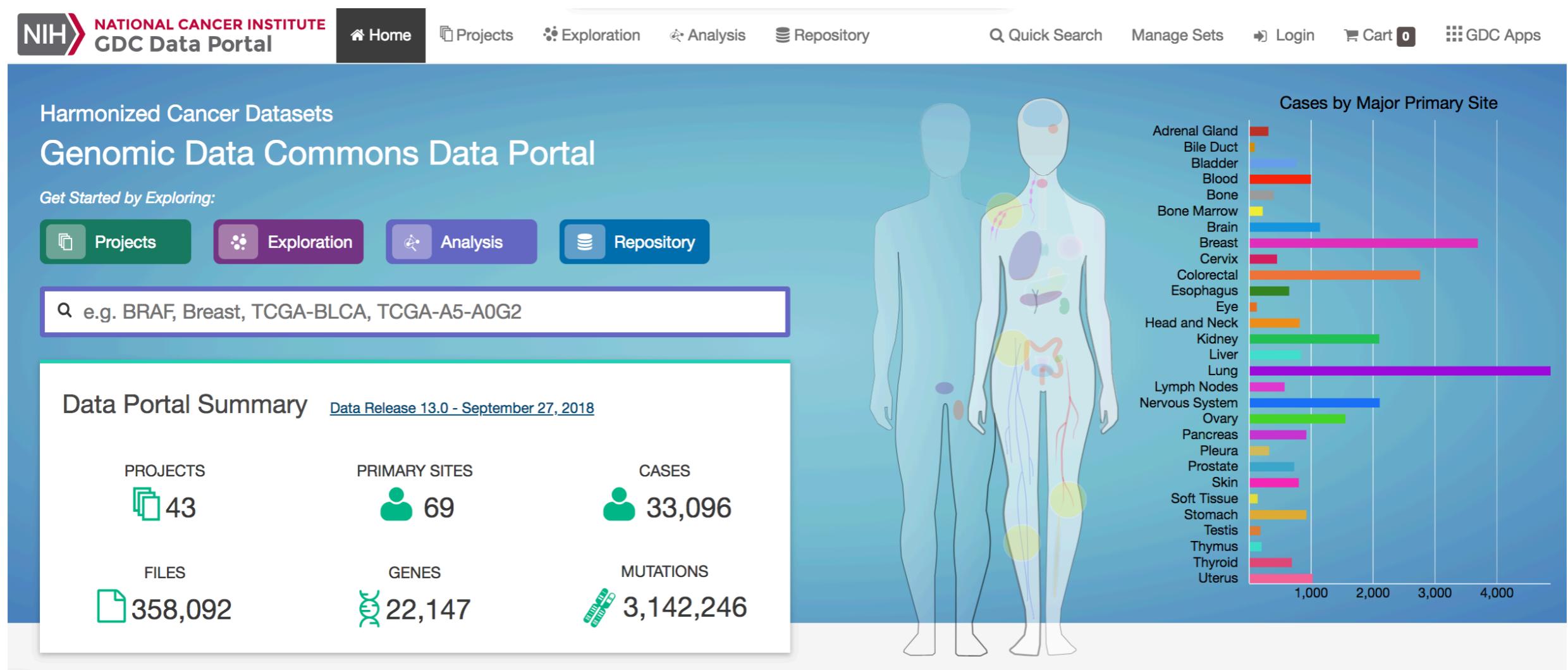
- Detection of **recurrent somatic mutations** and **cancer driver genes**;
- Prediction of **driver variants** and their functional impact;
- Estimate the **impact of multiple variants** at network and pathway level;
- Differentiate **subclonal populations** and their variation pattern.

The TCGA data

The Cancer Genome Atlas Consortium

Genomic Data Commons (<https://portal.gdc.cancer.gov/>)

- 43 Projects
- 69 Primary sites



The ICGC data portal

The International Cancer Genome Consortium

- ~24000 cancer patients
- 84 cancer projects in 22 primary sites
- more than 77 million simple somatic mutations.

The screenshot shows the ICGC Data Portal homepage. At the top, there is a navigation bar with five buttons: "Cancer Projects" (orange), "Advanced Search" (blue), "Data Analysis" (purple), "DCC Data Releases" (teal), and "Data Repositories" (green). Below the navigation bar, there is a section titled "Cancer genomics data sets visualization, analysis and download." It features a "Quick Search" input field containing placeholder text "e.g. BRAF, KRAS G12D, DO35100, MU7870, Fl998, apoptosis, Cancer Gene Census, imatinib, GO:0016049" and a "Search" button. Below the search input, there are three buttons: "By donors", "By genes", and "By mutations". To the right of the search section, there is a summary of "Data Release 27" from April 30th, 2018, which includes the following statistics:

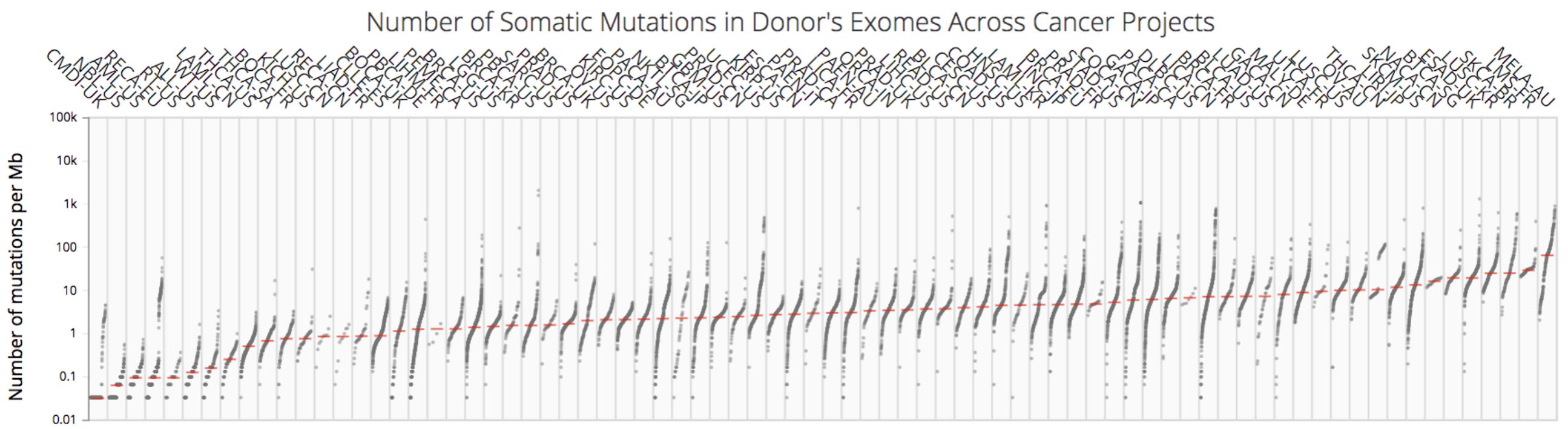
Category	Value
Cancer projects	84
Cancer primary sites	22
Donor with molecular data in DCC	20,487
Total Donors	24,077
Simple somatic mutations	77,462,290

At the bottom right, there is a "Download Release" button.

ICGC (<https://dcc.icgc.org/>)

Mutational landscape

The distribution of somatic variants varies significantly across cancer types



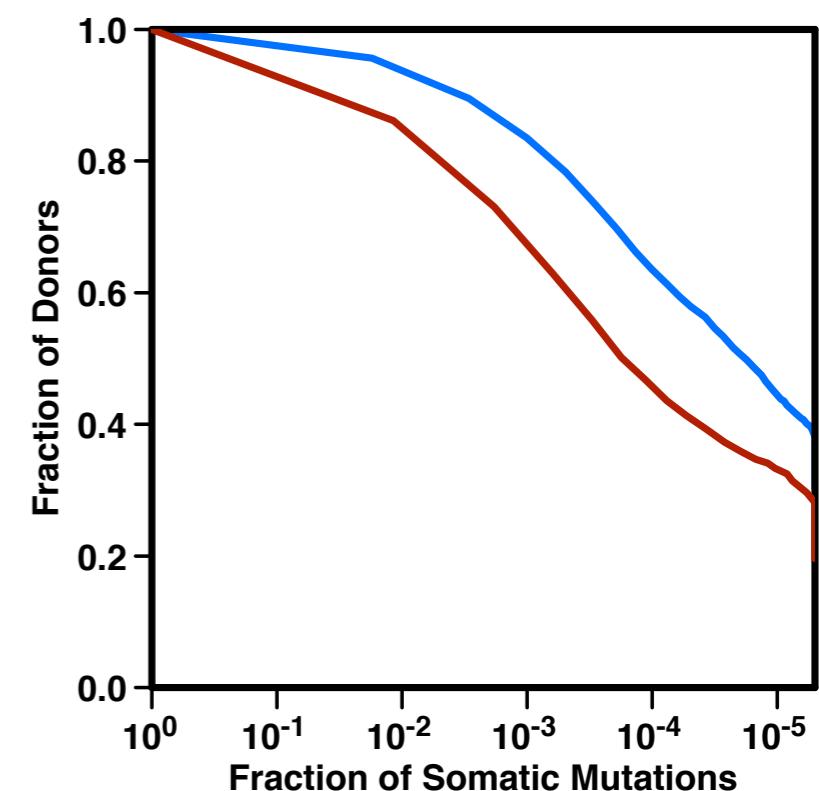
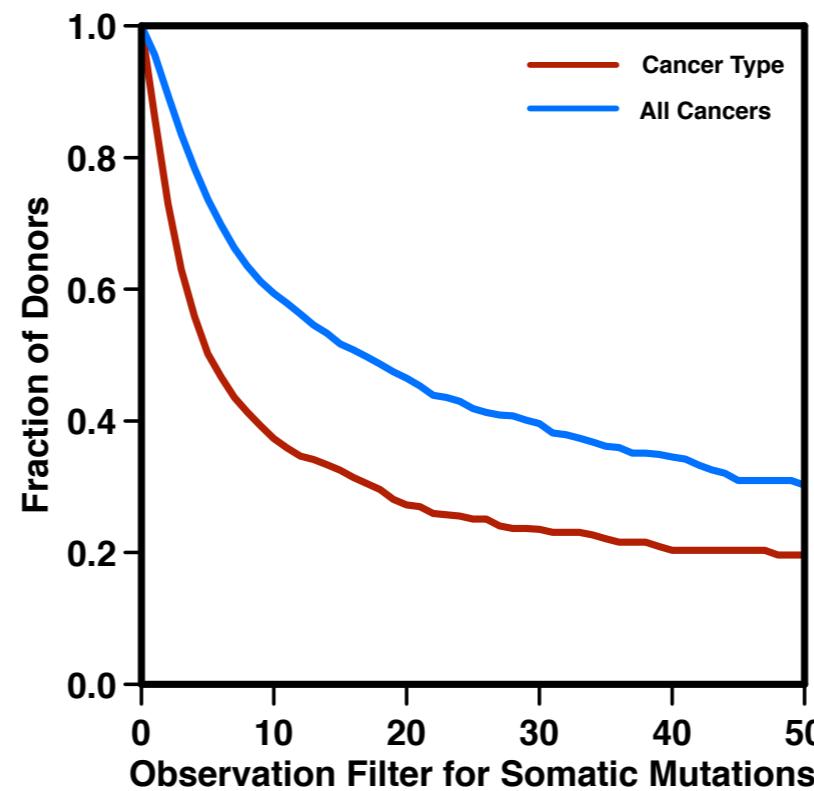
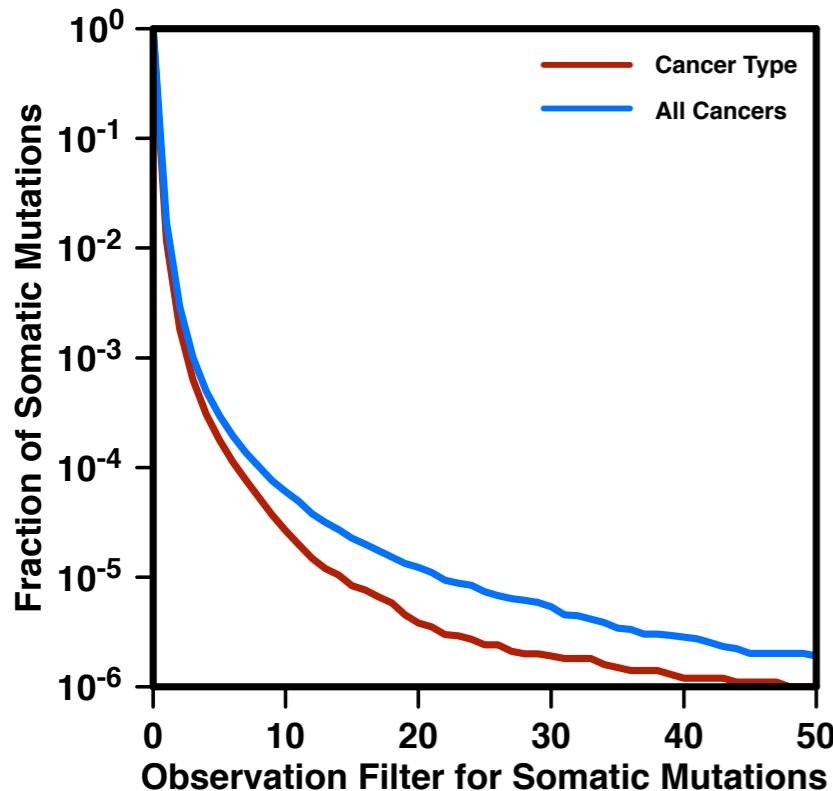
from <https://dcc.icgc.org/projects>

Driver vs Passenger

Number of recurrent mutations decrease exponentially.

On average a small fraction of variants is present in the majority of the samples.

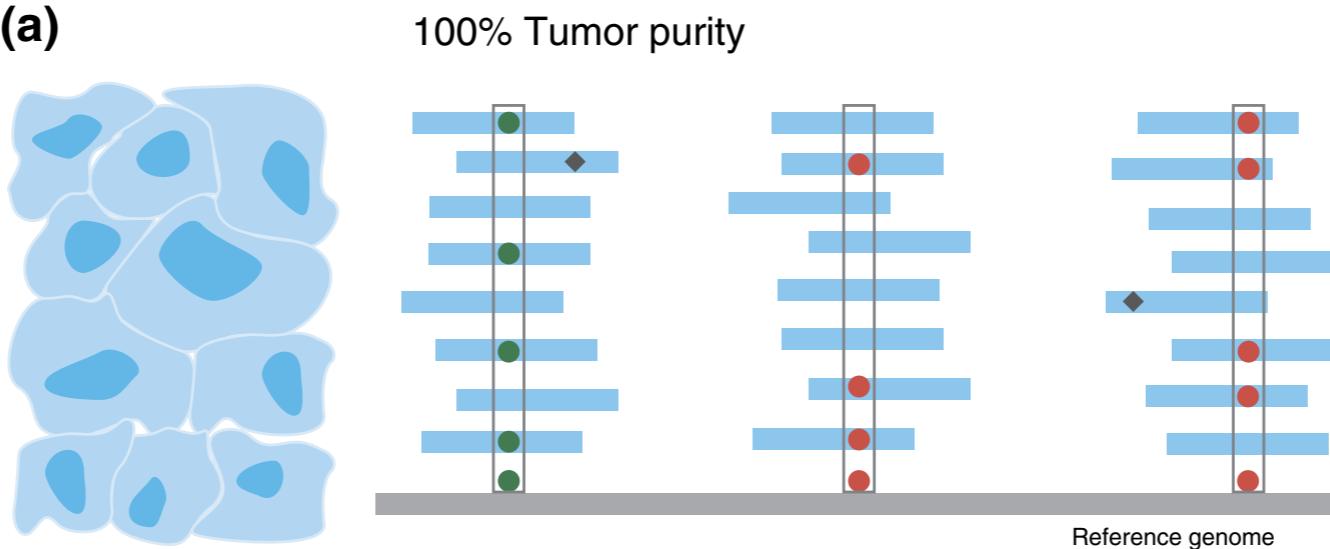
Selecting mutations that are repeated at least twice we filter out ~98% mutations
and are still able to recover ~96% of the patients



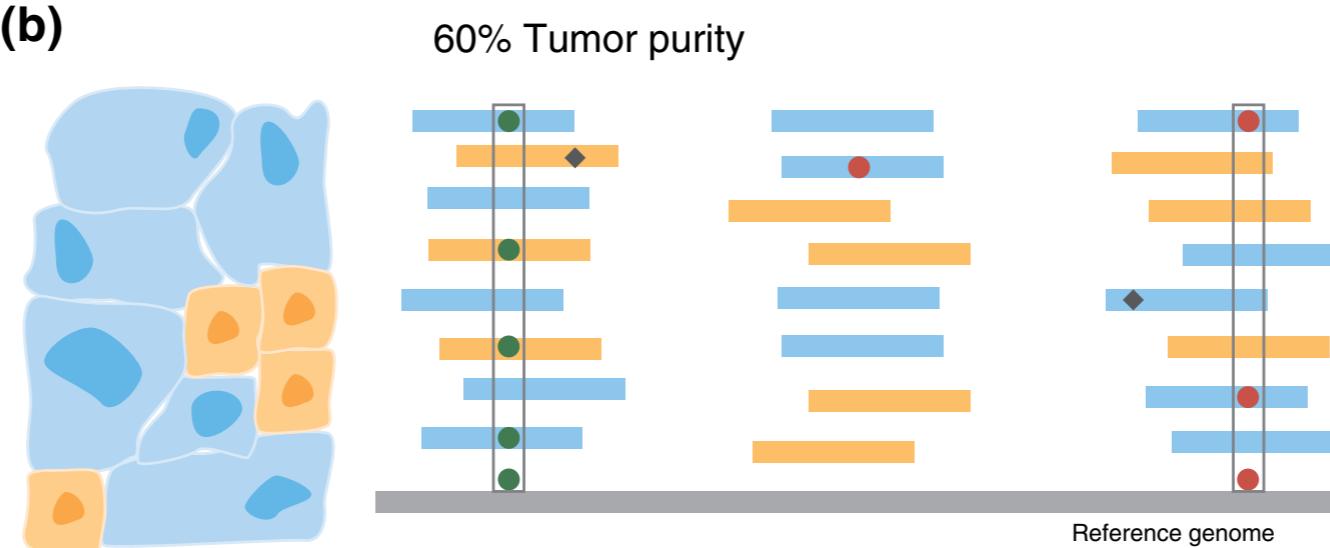
Sample purity

Impurity in the sample purity reduce the ability to detect variants

(a)



(b)



Key:

Read

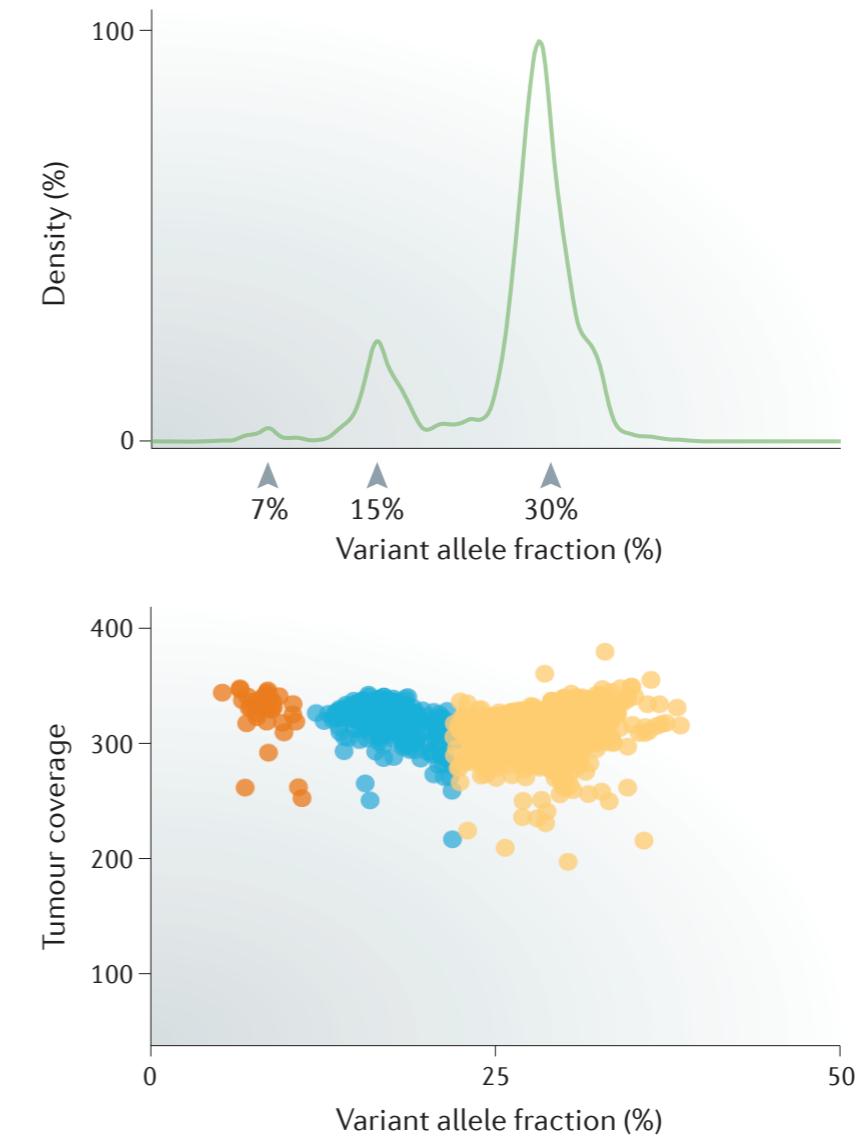
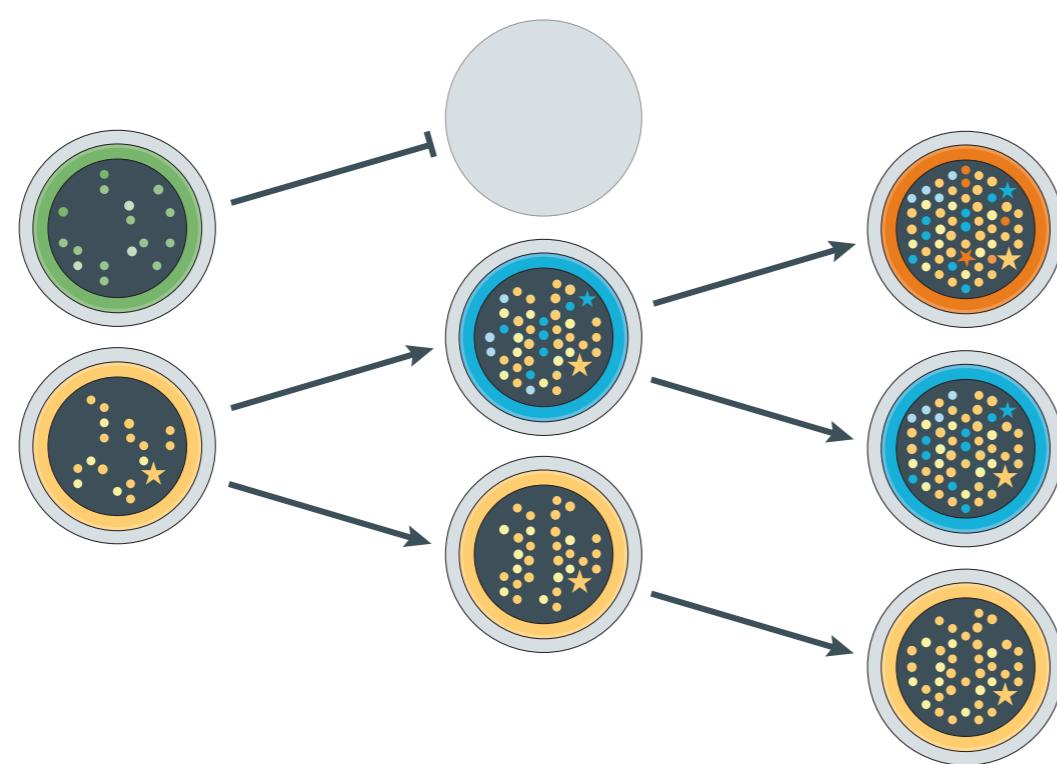
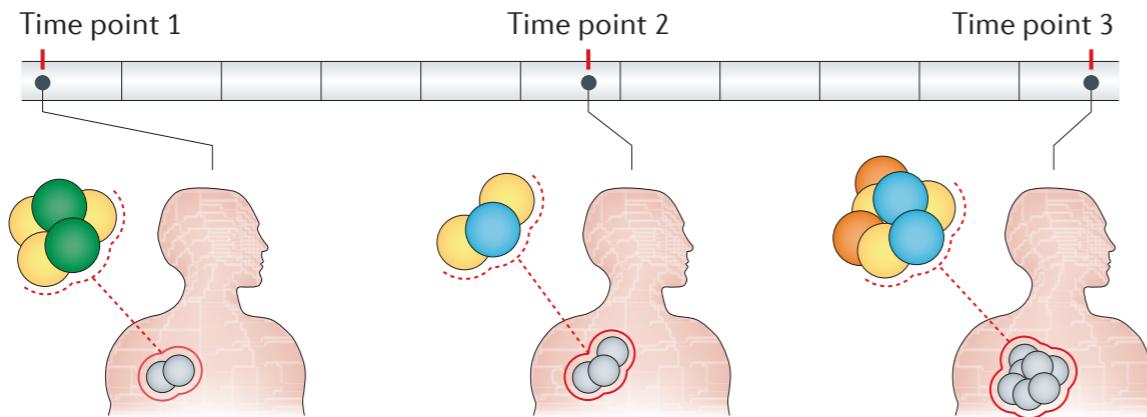
Sequencing error

Heterozygous germline SNV

Heterozygous somatic SNV

Clonal evolution

On average tumor samples have ~150 more rare missense variants and mutated genes

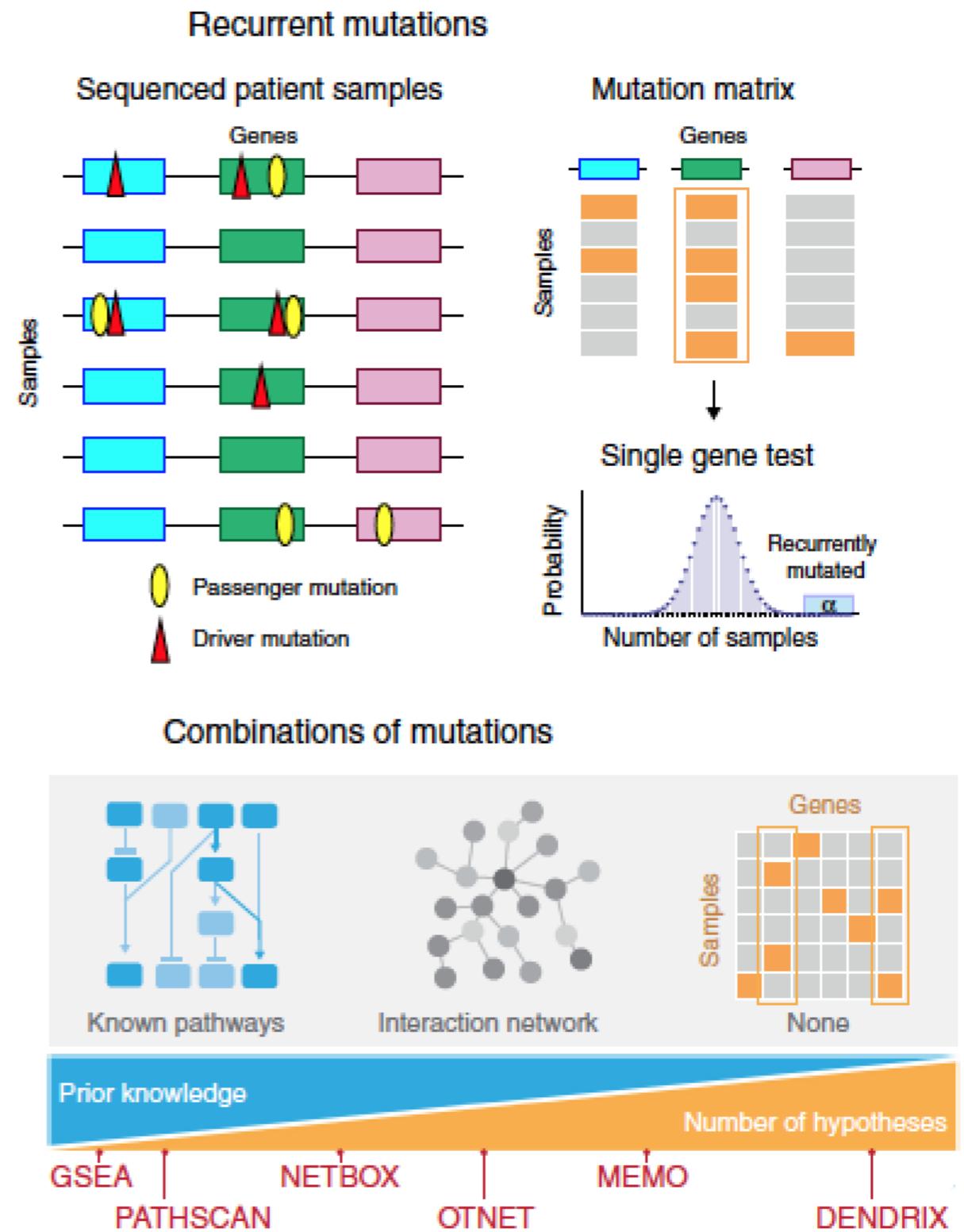


Recurrent variations

Recurrent mutations found in more samples than expected are good candidates for driver mutations.

To identify such recurrent mutations, a statistical test is performed which usually collapses all the non-synonymous mutations in a gene.

Identification of recurrent mutations in predefined groups of genes such as pathways and protein-protein interaction networks and de novo identification of combinations, without relying on a priori definition.



Mutation rates

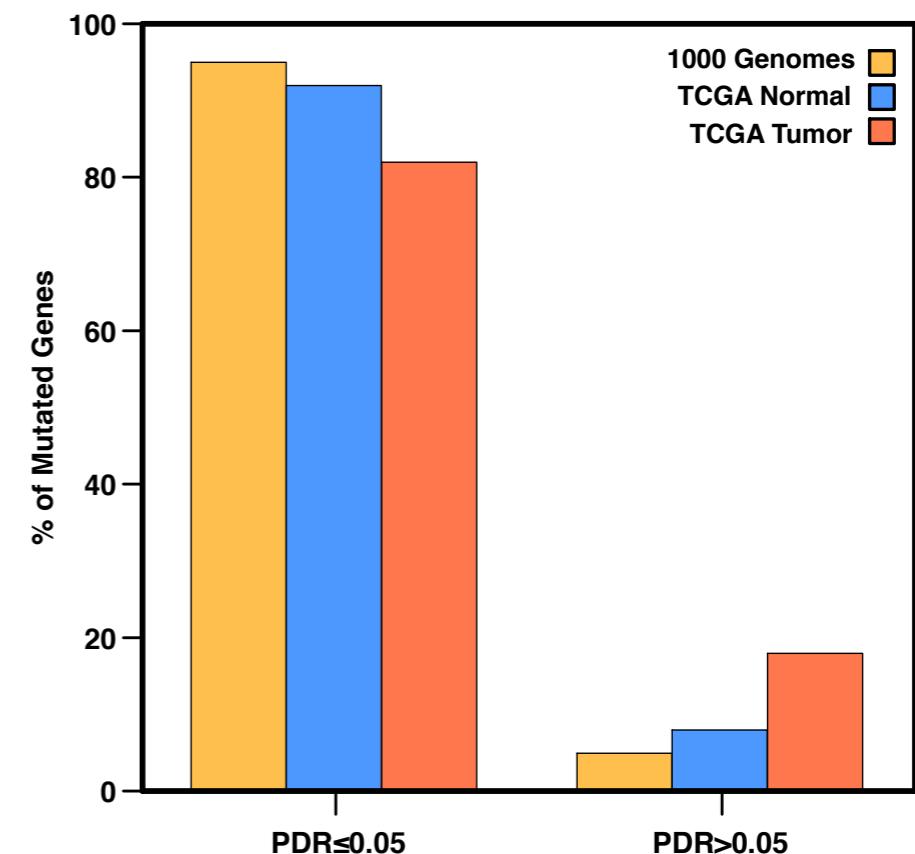
The analysis of 1000 Genomes, The Cancer Genome Atlas (TCGA) normal and tumor samples shows an increasing number of genes with rare nonsynonymous SNVs.

Cohort	%Genes PDR≤0.05	%Genes PDR>0.05
1000 Genomes	95%	5%
TCGA Normal	92%	8%
TCGA Tumor	82%	18%

Tumor = Colon Adenocarcinoma

PDR = Gene Putative Defective Rate

Fraction of samples in which a gene has ≥ 1 nonsynonymous variant with MAF $\leq 0.5\%$



Gene prioritization

New method for cancer gene prioritization based on the comparison of the mutation rates in tumor samples vs normal and 1000 Genomes samples.

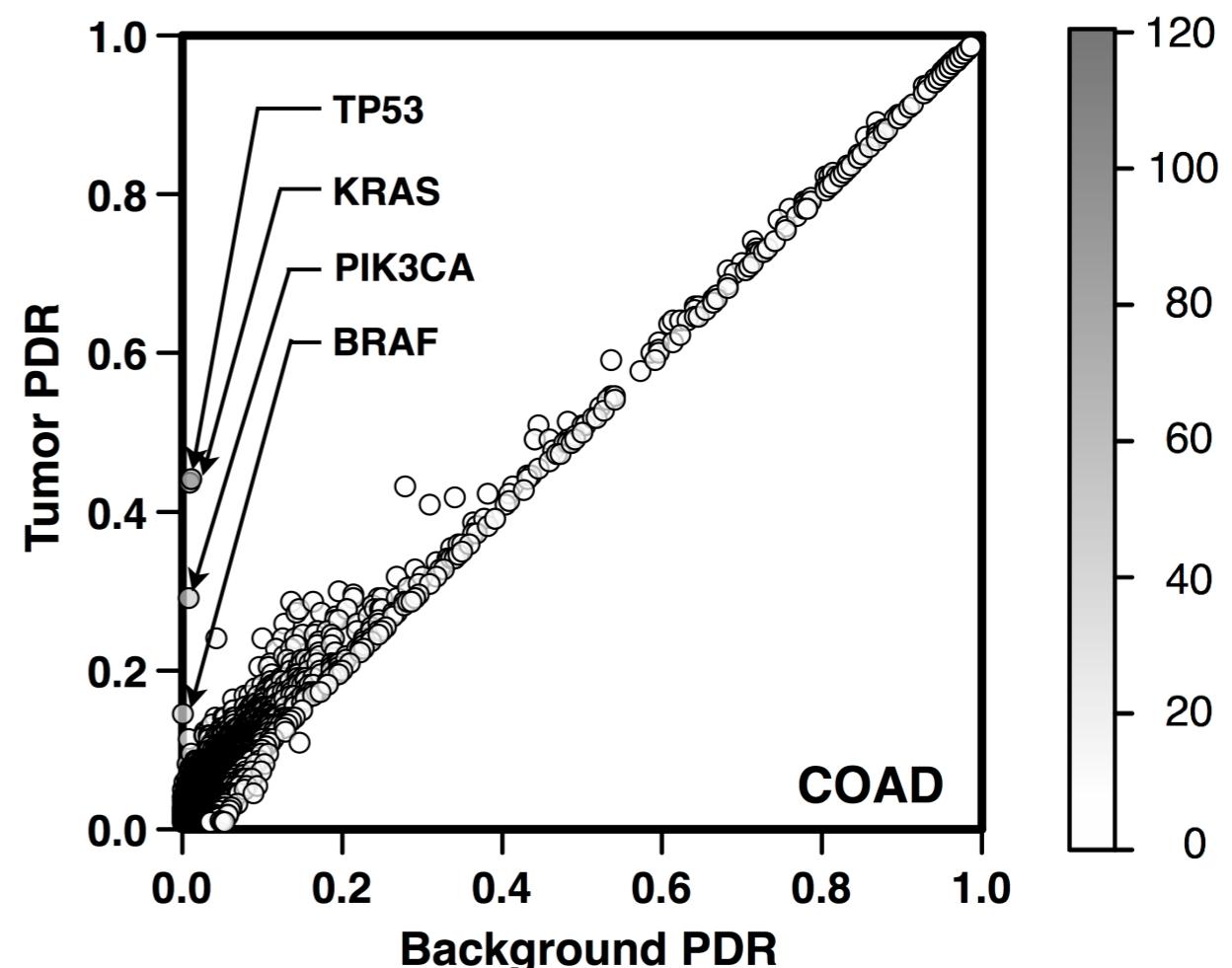
Gene	PDR[T]	PDR[B]	Score
KRAS	0.436	0.009	72.6
TP53	0.441	0.011	63.7
PIK3CA	0.291	0.007	39.4
BRAF	0.146	0.001	29.9

Colon Adenocarcinoma

PDR[T] = Putative Defective Rate Tumor

PDR[B] = Putative Defective Rate Background

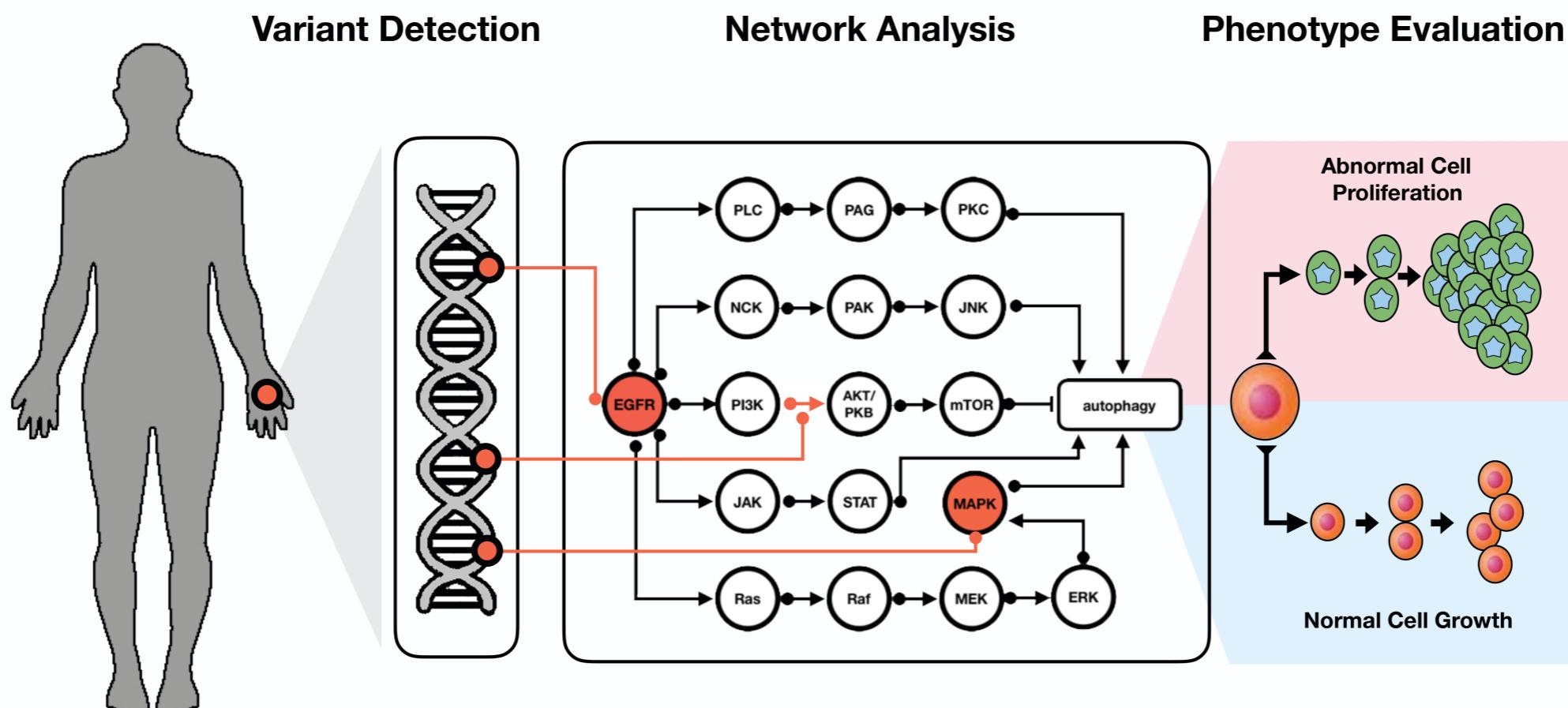
Background = Max (Normal and 1000 Genomes)



Other Research Lines

Variants and networks

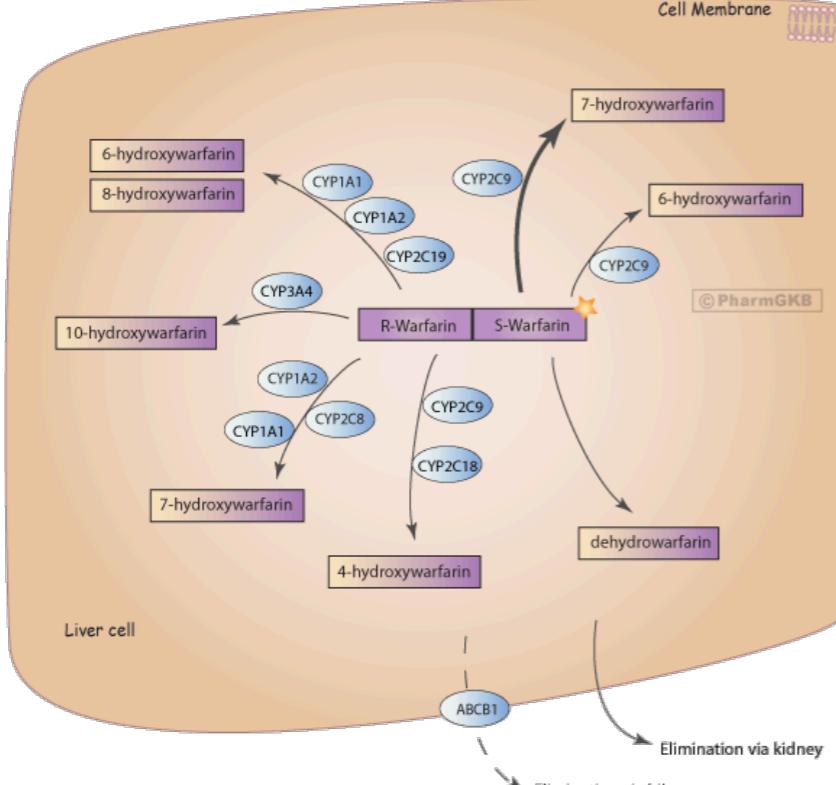
The simple one-variant one-phenotype model valid for many monogenic diseases does not capture the complexity of polygenic traits and disorders.



Variants and drug response

Pharmacogenomics aims at understanding how genetic variants influence drug efficacy and toxicity.

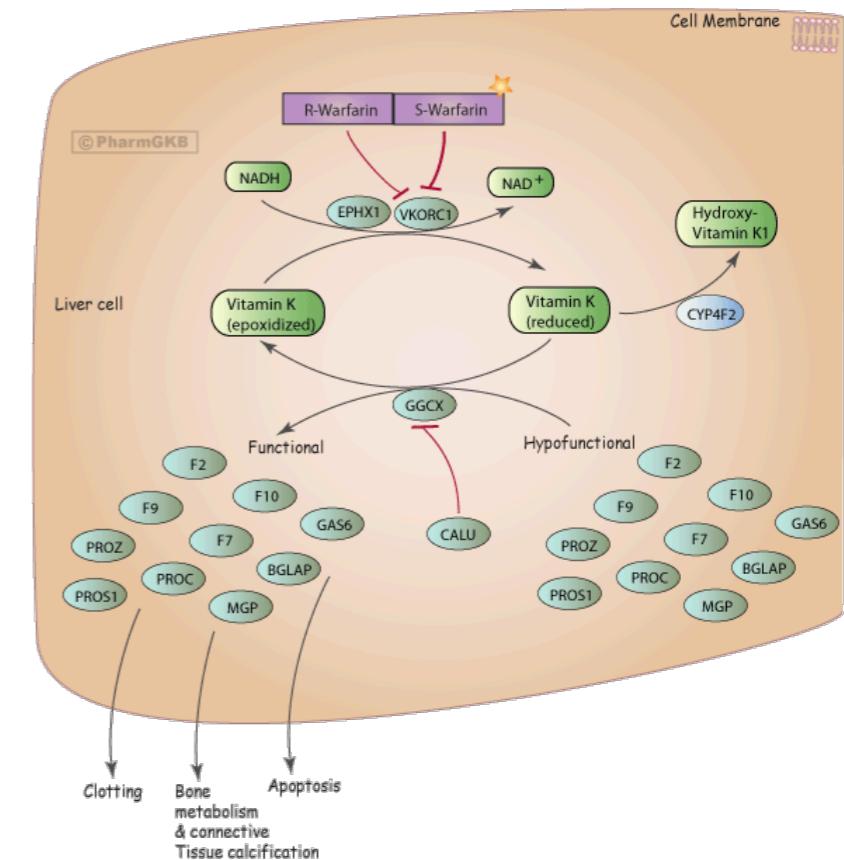
Pharmacokinetics variants: drug undergoes to bioinactivation via metabolic pathway. When the **functionality of the pathway is compromised**, a much higher concentrations of parent drug will accumulate.



<https://www.pharmgkb.org/>

Pharmacodynamics variants have an effect on the **drug-receptor interactions and concentration**. These variations have a directly impact on the dose-response relationships.

Warfarin and VKORC1



Conclusions

- The advances of the sequencing technology allowed to detect a huge amount of genetic variants whose function is unknown.
- Variant interpretation is a challenging task that can be solved by machine learning methods based on protein sequence, structure and function information.
- An important feature for variant interpretation is the sequence conservation. Variants in conserved regions are more likely to be pathogenic. This observation is valid also in noncoding regions.
- Statistical approaches for the analysis of genetic variations in cancer sample are important for developing gene prioritisation methods.

Future directions

- Development of computational methods for **integration of omics data** from different experimental techniques.
- Implement **interoperable systems** and software applications for **storing and sharing genomic data**.
- Detect genetic variants at **single cell** level. Test the effect of mutations using **genome editing technique** such as CRISPR-Cas9.
- Making all this **information relevant at clinical level** to improve health care system

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<http://biofold.org/>

