Biobank registers in Finland

TMF Workshop: Sharing experiences and lessons learned while operating National Biobank Registers

Kaisa Silander



Topics

- The Finnish Biobank Law & Finnish Biobanks
- BBMRI.fi: the Finnish Biobank Network
- Biobank cataloging efforts:
 - Epidemiological sample collections
 - Clinical sample collections
- Challenges of standardizing & cataloging



Ministry of Social Affairs and Health, Finland N.B. Unofficial translation. Legally valid only in Finnish and Swedish



Objectives

The objectives of this act are to support research that utilises human biological samples, to promote openness in the use of these samples and to secure the protection of privacy and self-determination when processing these samples.



http://www.finlex.fi/fi/laki/kaannokset/2012/en20120688.pdf

Features of the Biobank Law

- Biobanks have to register in a national Biobank Register (maintained by the National Supervisory Authority for Welfare and Health)
- Allows wide consent. Example:
 - "The aim is to develop new methods for diagnosis, treatment and prognosis of urological cancers..." (HUB project)
- Allows transfer of old sample collections and hospital's clinical collections to a biobank with new wide consent
- New samples (clinical and research) can be collected directly to a biobank for future undefined research





THL Biobank:

- Belongs to the National Institute for Health and Welfare
- Hosts country-wide population- and family-based research sample collections

HUB & FHRB:

 Samples from hospital patients with specific diseases

Regional biobanks:

- Operated through collaboration between hospital districts and universities
- Host mainly hospital sample and data collections

A Unique National Collaboration

- Large National Biobanks are being established simultaneously with the BBMRI.fi infrastructure !
 - Coordination by THL
 - Partner biobanks cover 6 universities and all hospital districts
- Finland is a Member Country of BBMRI-ERIC
- BBMRI.fi general aims are in line with BBMRI-ERIC:
 - Ensure access to high quality samples and data for the basis of high quality research
 - Ensure utilization of BBMRI standards for samples & data
 - Build a common access portal for biobank samples & data
 - Organize nationally unified, legal access principles (& MTA)







A plan for National ICT-infrastructure





Population cohorts



Existing DNA samples collections

Finnish epidemiological and disease specific sample collections with DNA, N=181 361





Tools aiding researchers in finding suitable samples

Electronic application system

👬 bbmri-lpc

aims to promote the access to European population based cohorts

Searchable catalog:

- Type of sample collection
- Stionalbiobanks.r • Basic information (target population, number of samples, regions, age groups)
- Data categories & Standardized variables

Find suitable collections

Availability service of biobank:

- based on individual-level phenotype data
- in collaboration with cohort researchers
- only aggregated results

Obtain permission, MTA & DTA

Raw data database:

- Specific secure access to data
- Selection & downloading data for analysis
 - Variable values and metadata

• Omics data

Nationalbiobanks.fi



Pages currently focus on DNA sample

20.2.2010

Nationalbiobanks.fi: study description

\varTheta FINRISK

Published on Tuesday, 12 June 2012 21:50 | Written by Super User | 📇 | 🖂 | Hits: 7558

The National FINRISK Study (BRIF 1640)

The FINRISK cohorts comprise the respondents of representative, cross-sectional population surveys that are carried out every 5 years since 1972, to assess the risk factors of chronic diseases (e.g. CVD, diabetes, obesity, cancer) and health behavior in the working age population, in 3-5 large study areas of Finland. DNA samples were collected in the following survey years: 1987, 1992, 1997, 2002, 2007, and 2012. The MONICA and EHES (EU) procedures were applied in phenotype collection (cf. MORGAM) and a wide spectrum of laboratory tests was carried out from serum and plasma samples. Background information on socioeconomic status, medical history, diet, exercise, measured anthropometric measures, etc. was collected by questionnaires and during a clinical visit. Plasma/serum samples are still available for the 2002-2012 cohorts. The cohort sizes are 6000-8800 per survey. The cohorts have been followed up by linking them to the national hospital discharge register, causes-of-death register and cancer register. Genome-wide SNP data is available for several subsets of FINRISK participants (see GWAS Table).

Link to homepage [in Finnish]

THL – The National Institute for Health and Welfare **Principal Investigators:** Erkki Vartiainen, firstname.lastname (at) thl.fi Veikko Salomaa, firstname.lastname (at) thl.fi **Contact person:** Satu Männistö, firstname.lastname (at) thl.fi

Key reference:

Thirty-five-year trends in cardiovascular risk factors in Finland. Vartiainen E, Laatikainen T, Peltonen M, Juolevi A, Männistö S, Sundvall J, Jousilahti P, Salomaa V, Valsta L, Puska P. Int J Epidemiol. 2010 Apr;39(2):504-18



FINRISK 1992, 1997, 2002, 2007, 2012 (1972-): Detailed information

KITE availability tools:

- Catalog information on biobanks and sample collections based on MIABIS
- Browse & search tools for each collection's standardized variables
- First implemented by THL Biobank
- https://kite.fimm.fi





KITE: MIABIS attributes for describing sample collections

Acronym: FINRISK 1992

Description

The FINRISK cohorts comprise the respondents of representative, cross-sectional population surveys that are carried out every 5 years since 1972, to assess the risk factors of chronic diseases (e.g. CVD, diabetes, obesity, cancer) and health behavior in the working age population. FR1992 studied the following regions: North Karelia, North Savonia, Turku/Loimaa and Helsinki/Vantaa.

Age range / gender: 25 - 64 year / male and female

Data categories

biological samples, survey data, national registries, Physiological/Biochemical measures

Survey data

Health information, sociodemographic characteristics, socioeconomic characteristics, physical environment, mental health, familial disease history, individual disease history, individual history of injuries, medication use, perception of health/quality of life, woman's health, reproductive history, Sleep, Alcohol usage, Smoking, Diet, Exercise, physical activity

Medical data

Inclusion Criteria Population representative sampling

Collection Type Cohort, Cross-sectional, Population-based

Consent broad consent

Rules for access cooperation, co-authorship, return data

Donor / sample counts 6024 /

Sample type DNA, plasma, serum

Contact

Satu Männistö National Institute for Health and Welfare Department of Chronic Disease Prevention Mannerheiminkatu 168b 00271 Helsinki FI Ph:

https://kite.fimm.fi



20.2.2015

Steps in retrospective variable harmonization of epidemiological cohorts

- 1. Tabulating all variable metadata
- 2. Translating variable metadata to English
- 3. Adding reference terms: UMLS-metathesaurus
- 4. Creating an ontology (=structure), adding
- keywords
- 5. Importing the datasets to SamWise/KITE

Tools needed:

- 6. Cross-referencing variables with other datasets
- 7. Building up reference dictionaries (UMLS and keywords)



Manual



https://kite.fimm.fi

KITE: Searching variables



Collection	Category	Name	Protocol	UMLS relation	Select
FINRISK 1992	Current health/Q45L	Headache	Basic questionnaire	Related	+
FINRISK 1997	Health and wellbeing/Q45I_97	Headache	Basic questionnaire	Related	+
FINRISK 1997	Medication/KY60_1	Painkillers for headache	Basic questionnaire	Related	+
FINRISK 2002	Health and wellbeing/Q45L_97	Headache	Basic questionnaire	Related	+
FINRISK 2002	Medication/KY60_1	Painkillers for headache	Basic questionnaire	Related	+
FINRISK 2007	Health status/Medication/KY60_1	Analgesics for headache	Basic questionnaire	Related	+
FINRISK 2007	Sleep/Q45L_97	Headaches in past month	Basic questionnaire	Related	+
YFS	YFS10/Migraine/M1	Suffered from headache	Migraine questionnaire	Related	+
YFS	YFS10/Migraine/M10_1	Nausea with headache	Migraine questionnaire	Close	+
YFS	YFS10/Migraine/M10_2	Vomiting	Migraine questionnaire	Close	+
YFS	YFS10/Migraine/M10_3	Sensitivity to light	Migraine questionnaire	Close	+
YFS	YFS10/Migraine/M10_4	Sensitivity to sound	Migraine questionnaire	Close	+



https://kite.fimm.fi

National Availability Database (based on KITE)



REMS electronic data access for biobanked samples & data:

Resource Entitelement Management System

- Personal login and researcher profile
- Sample and data request
- Approval and material transfer agreement
- First implemented by THL Biobank



REMS: Resource Entitlement Management System



Old FFPE tissue samples in hospitals/clinical biobanks



Clinical data

PATHOLOGY (1993-)

 morphology, TNM staging, immunohistochemistry, molecular pathology N = 400 000 samples CLINICAL DIAGNOSES (2004-) ICD-10 CODES N = 10 000 000 diagnoses

LABORATORY RESULTS (2005-)

measurement, value and reference values N = 100 000 000 values

PATIENT DATA (2004-)

 Date of birth, date of death, N = 500 000 patients

RADIATION THERAPY (2000-) Target, dose

N = 250 000 fractions

CLINICAL OPERATIONS (2004–) N = 1500 000 operations

ΛURIΛ ΒΙΟΡΑΝΚΚΙ HOSPITAL PHARMACY (2000–) Chemotherapy, dose N = 200 000 doses

CARDIOLOGY (2003-) AND LUNG FUNCTION

PERSON ID

Harmonizing Pathological Samples & Patient Data



- Cataloging tissue samples: sample type, organ and histological diagnosis (snomed-code), donor age and sex, and name of biobank
- Standardization and harmonization of associated patient data
- Digital archive: delivery and storage of digital images of tissue specimens, annotation tools



Added value from harmonizing patient data

Preventive value of data increases exponentially when digitized and associated with big data



Probability to discover hidden or complex symptoms rise dramatically with large feature base



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Slide from Pia Nyberg, Northern Finland Biobank Borealis

Clinical Biobanks: ICT Opportunities



Slide from Pia Nyberg, Northern Finland Biobank Borealis



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Contact information for the digitalization project

Pia Nyberg Northern Finland Biobank Borealis PPSHP Pia.nyberg@ppshp.fi

Saila Kauppila Northern Finland Biobank Borealis PPSHP saila.kauppila@ppshp.fi



Jaakko Sauvola Center for Advanced System Studies University of Oulu jaakko.sauvola@oulu.fi

Challenges in developing general catalogs & availability tools

- Different types of sample collections with different characteristics and different cataloging needs
- Differing levels of information about sample donors and different types of information
- How should one catalog hospital's pathological and other sample collections?
- Each hospital district has different database systems and uses different diagnosis vocabularies
- Different access policies for different collections need to harmonize within a biobank and between biobanks
- Each epidemiological collection has its own database system



Different sample collections

FINRISK

- Prospective cohorts
- 5 regions in Finland
- Baseline questionnaire, clinical examination, laboratory measurements, follow-up register data
- DNA, RNA, cells, serum, plasma, urine, feces
- -omics data

HUCH pathological collections

- pathological samples collected for medical diagnostics
- District of Helsinki and Uusimaa
- Histological diagnosis and possibly associated medical records
- Tissues (frozen, paraffin)



Comparing variables between studies





Thank you! Kiitos! Tack! תודה! Danke!





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Esityksen nimi / Tekijä