

Steve Laurie
Variant Effect Predictor
Training Course
Prague, 7<sup>th</sup> November 2017

cnag

centre nacional d'anàlisi genòmica centro nacional de análisis genómico





#### The RD-Connect Platform

- 1) What is RD-Connect
- 2) What **you** can do with the RD-Connect Genome-Phenome Analysis Platform (GPAP)
- 3) Case study the BBMRI-LPC WES call





#### RD-Connect:

#### Infrastructure for Rare Disease Research

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6-year project funded by EU 7<sup>th</sup> Framework Programme
An integrated platform connecting data, clinical
information, registries, and biobanks for rare disease research

- Creating a central system for reprocessing, storing, analysing and sharing of -omics data, including the integration of phenotypic and biosample data
- Contributing to International Rare Diseases Research Consortium (IRDiRC) objectives of delivering 200 new therapies, and means to diagnose most rare diseases of genetic etiology by 2020





## What are rare/orphan diseases?



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# 7% OF THE POPULATION ARE AFFECTED BY RARE DISEASES



## OVER 7000 DISEASES

80% GENETIC IN ORIGIN.
OFTEN CHRONIC AND LIFE-THREATENING



# Huge social impact on patients and their carers



# JUGGLING CARE AND DAILY LIFE: THE BALANCING ACT OF THE RARE DISEASE COMMUNITY

Through its survey initiative Rare Barometer Voices, EURORDIS-Rare Diseases Europe carried out the first European-wide survey on the impact of rare diseases on everyday life. The survey covered issues including coordination of care, mental health, employment and economic impact.

See the full survey report at eurordis.org/voices#studies



#### 30 million

people are living with a rare disease in Europe and 300 million worldwide



No cure for the vast majority of diseases and few treatments available

#### Rare diseases seriously impact everyday life reduced or stopped have difficulties completing professional activity due to daily tasks (household their or their family chores, preparing meals, member's rare disease. shopping etc.) more people living with a rare disease and spend more than 2 hours a carers report being unhappy day on disease-related tasks. and depressed than the general population\*

\* Rare Barometer Voices sample compared to International Social Survey Programme, 2011



Rare Barometer Voices is a EURORDIS-Rare Diseases Europe online survey initiative. It brings together over 6,000 patients, carers and family members to make the voice of the rare disease community stronger. Results are shared with policy decision makers to bring about change for people living with a rare disease.

3,071
people responded
to the survey.

23 leaguages ACTOSS

Voices

\*\*Thank you to all Rare Barometer

Voices participants and partners!

www.eurordis.org/content/contribute-rare-barometer-programme

For more information visit eurordis.org/voices or email rare.barometer@eurordis.org







## Bottlenecks in RD research

Lack of cohorts for trials Lack of data and samples for RD research patients are rare! Lack of Lack of cases to genetic diagnosis



## Many bottlenecks are cross-cutting

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#### ... across diseases and across research domains

- > A lot of them come down to data
- Not just scarcity of data, but lack of options to reuse the data that does exist
  - > Privacy protection issues, particularly across borders
  - Lack of infrastructure for data sharing
  - Lack of standards and interoperability
  - Reluctance to share unpublished data
  - > Lack of capacity to analyse large amounts of data
  - > Challenges of linking different datasets in different places





Infrastructure for data sharing in rare disease research

Flagship IRDiRC project implementing IRDiRC policies and guidelines on data sharing

EU 7th Framework Programme, 12M EUR, 6 years

Genomic analysis and gene discovery

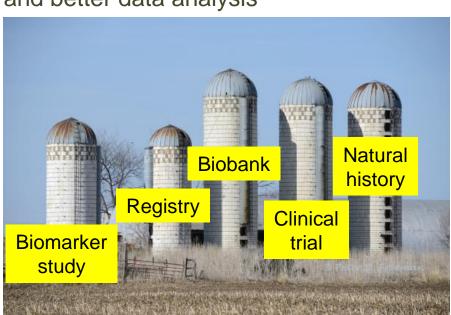
Standardized phenotypic data collection

Searchable catalogue of biosamples

Data linkage across resources

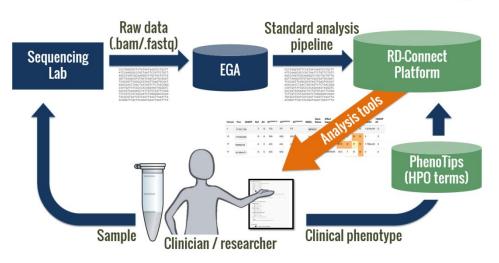
#### **Overcoming Silos**

Data sharing for research and better data analysis



Omics data, clinical data and biosamples from an individual with RD





Disease-causing variants can be identified using the

**Genome-Phenome Analysis Platform** 

Samples findable in the **Biosample**Catalogue

Registry data findable in the Registry and Biobank Finder



### RD-Connect Platform

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Home

Genome-Phenome Analysis

Platform

**PhenoTips** 

Registry & Biobank Finder

Biosample

## An integrated platform connecting databases, registries, biobanks and clinical bioinformatics for rare disease research

Welcome to the central platform for access to data submitted by RD-Connect's partner projects. The online Genome-Phenome Analysis Platform is now open for submissions from all users. Our automated registration system will come online shortly, but if you would like to access the interface now please email platform@rd-connect.eu and we will contact you to request the information we need to set you up on the system.

Get started today





## catalogue.rd-connect.eu

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duchenne



#### Linking up rare disease resarch across the world

Catalogue Search Help Request

#### Search

duchenne

Search

Search for: duchenne

Search returned 113 hits (Registries:34 /Biobanks:8)



Australian National Duchenne Muscular Dystrophy Registry

Caroline Graham

https://nmdregistry.com.au/dmd/https://nmdregistry.com.au/index.html

Duchenne muscular dystrophy: Number of Patients, Donors 482

Diseases DiseaseName: Duchenne muscular dystrophy

DiseasesSynonym: Severe dystrophinopathy, Duchenne type, DMD

Organization OrganizationName: Australian National Duchenne Muscular Dystrophy Registry

Congenital Muscular Disease International Registry

CMDIR 1

Rachel Alvarez



## catalogue.rd-connect.eu

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search by: Disease Name, Gene, ORPHACODE, ICD10, OMIM ...





ID # 77350

Date of Inclusion: 01/04/2015

Last Activities: 21/04/2017



#### **Galliera Genetic Bank**

The GGB is located at Genetics Laboratory – of Galliera Hospital in Genoa and collects samples from patients affected by chromosomal disorders several genetic diseases since 1983. To date the biobank

Overview [17]

Diseases [132]

Documents



#### Host institution

Laboratory of Human Genetics -E.O. Ospedali Galliera Via Alessandro Volta, 6

16128 Genova Italy

Website Link

Tel.0039010563-4383

Fax.0039010563-4381

#### General Information

Acronym: GGB

Type of Host Institution: Hospital

Source of funding: Target population:

Vear of establishment: 1983

#### Personnel

#### Main contact

chiara haldo@dalliera it

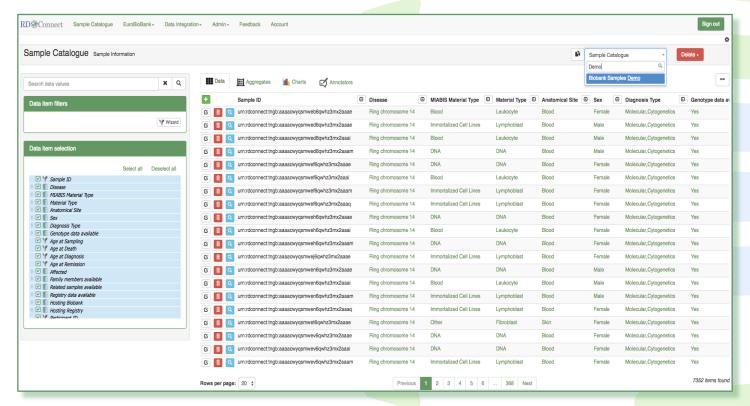
Chiara Baldo Curator





### Sample-level catalogue (under development)

The RD-Connect Sample Catalogue contains information on available samples across participating biobanks







## RD-Connect: Ethical and Legal Issues

- Database registered in the Agencia Española de Protección de Datos
- To submit and/or to access donor data, a Code of Practice and Adherence Agreement must be signed
- Documents were approved by Comité Ètic d'Investigació
   Clínica del Parc de Salut Mar in 2015
- User-activity is logged





## RD-Connect: Helping you share your data

#### **RD-Connect enables:**

- Full data sharing and analysis within RD-Connect for registered users
- Partial data sharing outside RD-Connect (in accordance with ethical and legal limitations)
- A core requirement of having data incorporated into RD-Connect is that that corresponding phenotypic descriptions for all donor samples must be entered into the RD-Connect PhenoTips instance
- If you share your data, you are more likely to solve your cases e.g. through internal and external matchmaking (MME)



## RD-Connect: Helping you share your patients' data (with consent)

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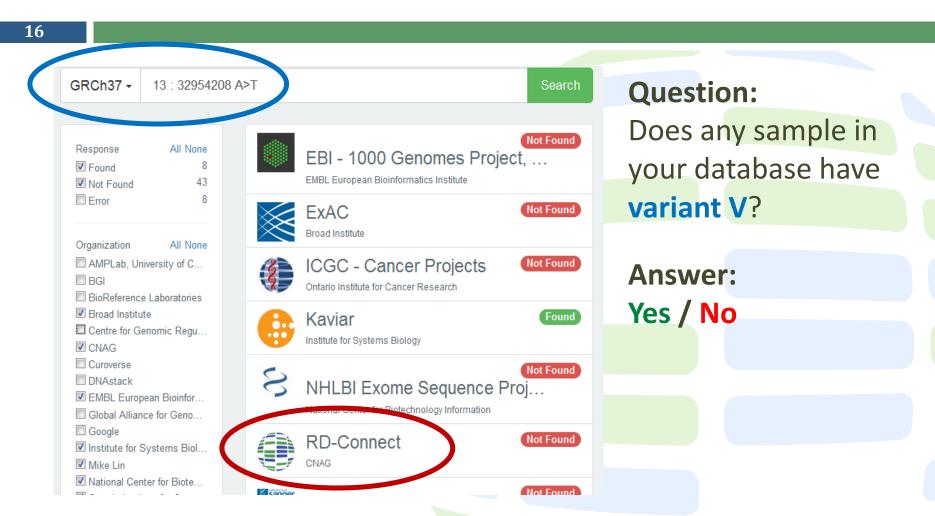
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## Data Sharing: GA4GH Beacon







## Data Sharing: MatchMaker Exchange (IRDiRC, GA4GH)

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#### **Question:**

Do you have a patient with a *similar* phenotype and *similar* variants to mine in your database?

#### **Answer:**

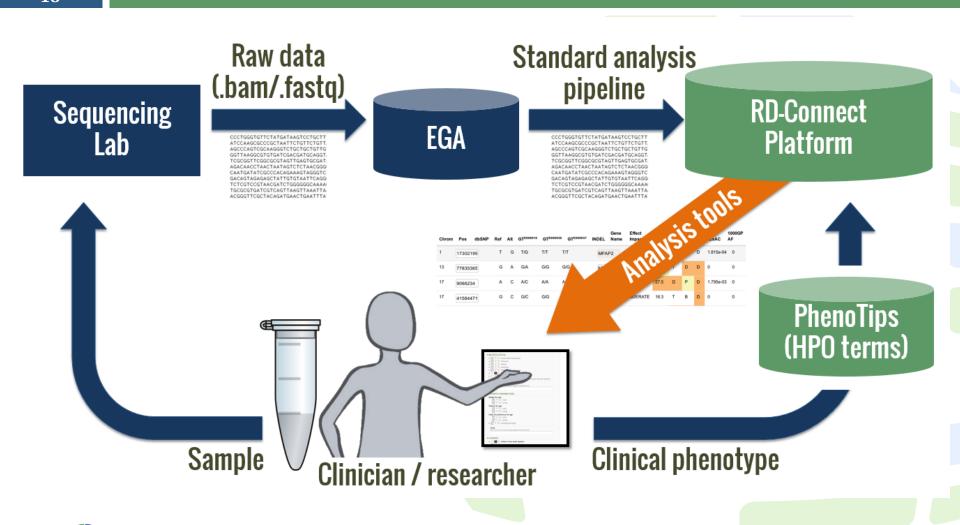
No / Yes – here are some of the details of some similar individuals



Philippakis, A.A. et al. (2015)



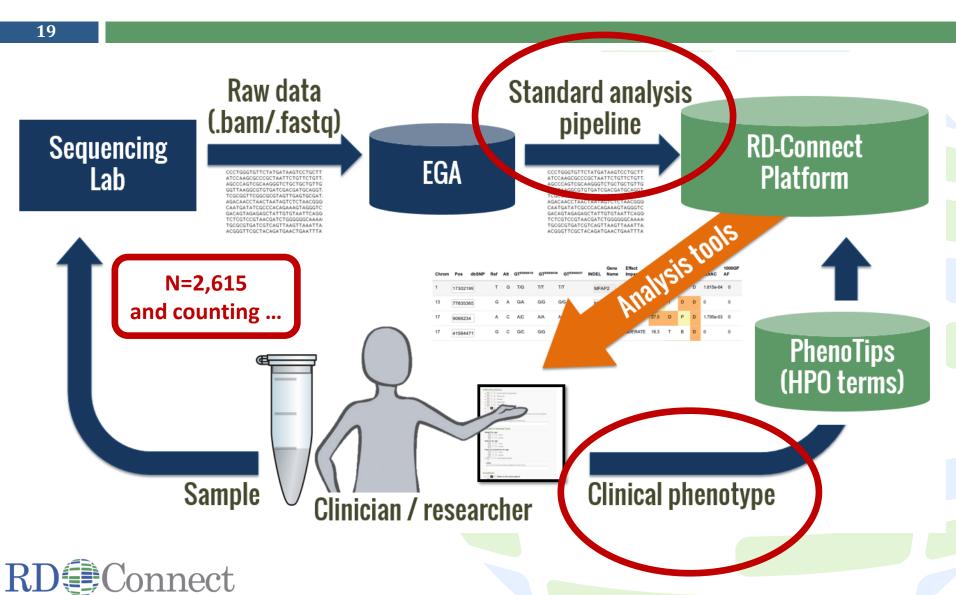
### Genome-phenome data flow into RD-Connect







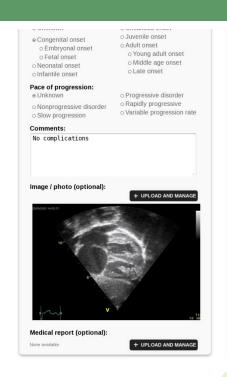
## Genome-phenome data flow into RD-Connect





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NA	Υ	N	Generalized hypotonia
NA	Υ	N	Seizures
NA	Υ	N	Ataxia
NA	Υ	N	Dystonia
NA	Υ	N	Chorea
NA	Υ	N	Spasticity
NA	Y	N	Spinal dysraphism
NA	Υ	N	Morphological abnormality of the central nervous system
ROW	/ТН	l P	nd choose among suggested ontology terms)  ARAMETERS
ROW	/ТН	l P	ARAMETERS
ROW	/TH	l Pa	ARAMETERS
GROW Veight	/TH	age N	ARAMETERS    <3rd   >97th
ROW Weight	for Y	age N N	ARAMETERS    <3rd   >97th
GROW Veight	for Y Y for Y	age N N ag	ARAMETERS  a <a href="https://doi.org/10.1001/j.j.com/">a <a href="https://doi.org/">a </a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a>



Information from PhenoTips can be sent directly to other tools within the platform (e.g. Exomiser, MME)

PhenoTips (Brudno et al.)
achieved using the Human
Phenotype Ontology (HPO

– Robinson, Köhler *et al.*)

Diseases classified using the Orphanet Rare

Disease Ontology and OMIM identifiers





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Clinical symptoms and physical findings

PHENOTIPS	
PHENOTIPS	
☆ » DATA » P0000700	● NEW PATI
P0000700	
Reported by Irina Zaharieva on 2014/06/16 10:13 · Last modified by Rachel Thompson on 2016/07/29 06:40	
I confirm that patient consent has been obtained which allows next generation sequencing of the sample to I confirm that patient consent has been obtained which allows the sharing of this anonymised clinical information	o which the data refers mation with international collaborators and researchers including those from commercial partners
Patient information	
Identifier:	DNC0010
Sex:	Female
Clinical status	
FAMILY STUDY	
This patient is the Child This patient is the Child	Of patient with identifier DNC0040 Of patient with identifier DNC0041
Global mode of inheritance:  Sporadic	
NO Consanguinity	
Global pace of progression  Progressive	
Global age of onset:  Congenital onset	



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#### Clinical symptoms and physical findings

#### COGNITIVE DYSFUNCTION

NO Intellectual disability

▲ Normal cognitive development

#### MUSCLE BULK

Distal arthrogryposis Arthrogryposis multiplex congenita

#### SKELETAL DEFORMITIES

Congenital hip dislocation

#### WEAKNESS

Face Neck

#### MOTOR ABILITY

Inability to walk

▲ can crawl and stand with KAFOs at 4 yrs

#### OTHER SIGNS

Recurrent lower respiratory tract infections Muscular hypotonia

#### INVESTIGATIONS

Muscle biopsy

▲ Suggestive of CMY

#### Diagnosis

OMIM disorder:

[117000] #117000



P0003641	
Reported by <b>demo user</b> on 2016/10/24 04:57 · Last modified on 2016/10/24 04:57	✔ Save ▼ ⊘ Can
I confirm that patient consent has been obtained which allows next generation sequencing of the sample to which the data refers  I confirm that patient consent has been obtained which allows the sharing of this anonymised clinical information with international collaborators and researchers including those from commercial partners	This case is owned by <b>&amp; you</b> and is <b>&amp; private</b> . It is shared to
Patient information	
Family history and pedigree	
Prenatal and perinatal history	
Medical history	
Measurements	
Ataxia tests	
Genotype information	
Onset data	
Unified Huntington's Disease Rating Scale (UHDRS) and Total Functional Capacity (TFC) data	
Clinical symptoms and physical findings	
Diagnosis	
Case resolution	
Medication	



24 **FAMILY STUDY** + NEW ENTRY @ Global mode of inheritance: ▼ □ Gonosomal inheritance 
⑤ Sporadic 1 Autosomal dominant inheritance 6 X-linked inheritance 6 X-linked dominant inheritance 6 Sex-limited autosomal dominant 6 ☐ Male-limited autosomal dominant **①** X-linked recessive inheritance Autosomal dominant somatic cell mutation 6 Y-linked inheritance 6 Multifactorial inheritance 6 Autosomal dominant contiguous gene syndrome 6 Digenic inheritance 6 Autosomal recessive inheritance 6 Oligogenic inheritance 6 Polygenic inheritance 6 ☐ Mitochondrial inheritance ♠ NA Y N Consanguinity Global pace of progression Unknown O Progressive 6 O Rapidly progressive 6 O Nonprogressive 6 Variable progression rate 6 Slow progression 6 Global age of onset: @ Unknown O Juvenile onset 6 Adult onset <a> A</a> Ocongenital onset 6 O Young adult onset 6 O Neonatal onset 6 Middle age onset 6 ○ Infantile onset ♠ O Late onset 6 Childhood onset 6

Medical history

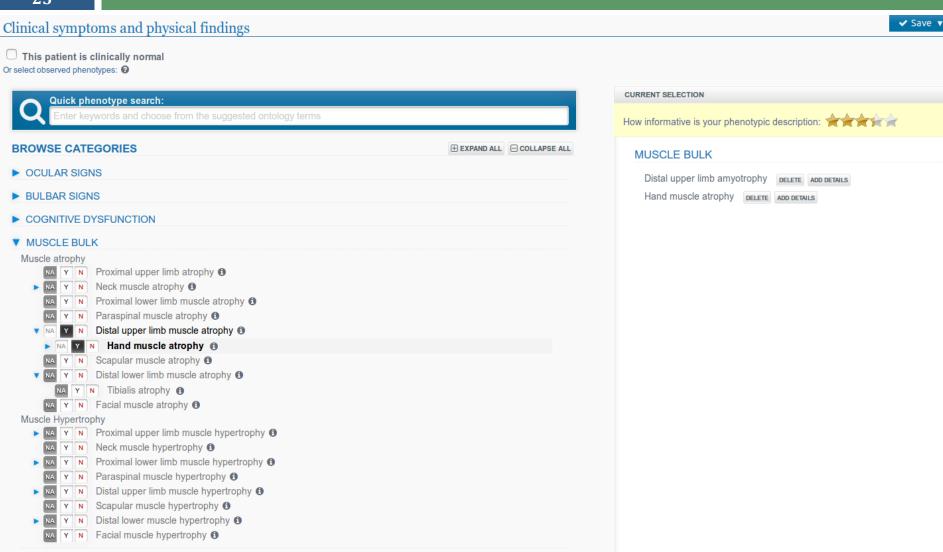
Family history and pedigree

Prenatal and perinatal history

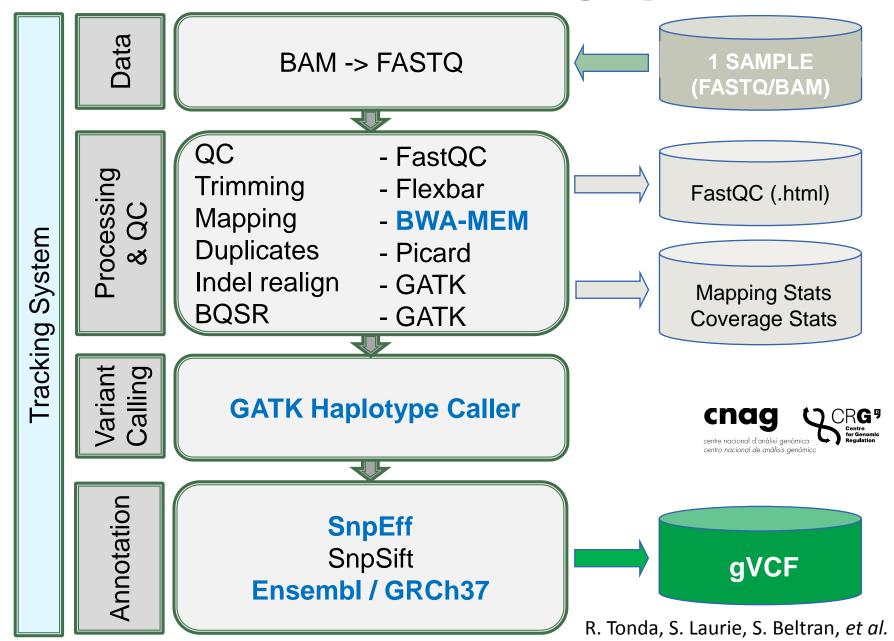


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Other



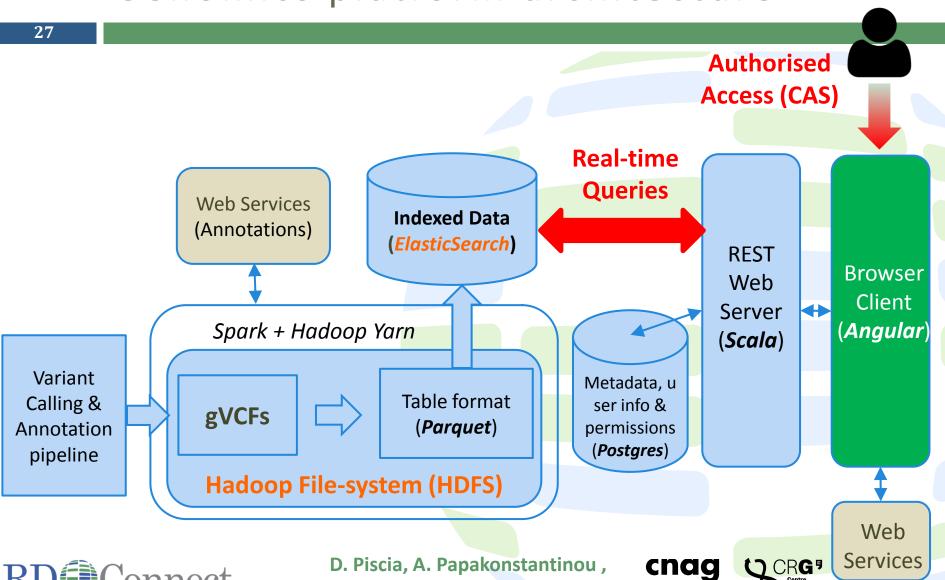
## RD-Connect Variant Calling Pipeline





## RD-Connect:

Genomics platform architecture

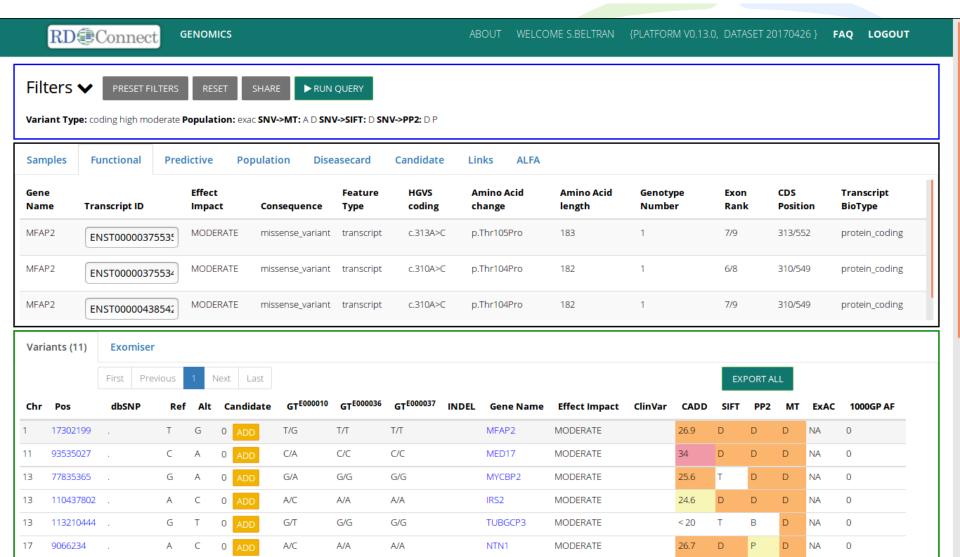


J. Protasio, S. Laurie, , S. Beltran et al.

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#### RD-Connect GPAP Interface





## GPAP Interface — Filters

Filters  ► PRESET FILTERS RESET SHARE ► RUN QUERY	
Sample Selection ?	^
Select individual Samples or search across all ? (accessible: 1993, own: 0, shared: 814, visible to all: 1331)	
Variant Type ?	~
Population ?	~
SNV Effect Prediction?	~
Genes, Disorders and Phenotypes	~
Position Specific filters and Runs Of Homozygosity	~





## GPAP Filters - Variant Type

ariant Type <b>?</b>	
/ariant Class	Variant Type
∃High	□snv
Moderate	
Low	
Modifier	
ClinVar Classification	Transcript Biotype
Pathogenic-(5)	☐ Protein_coding
Likely pathogenic-(4)	□RNA
Any	☐ Other



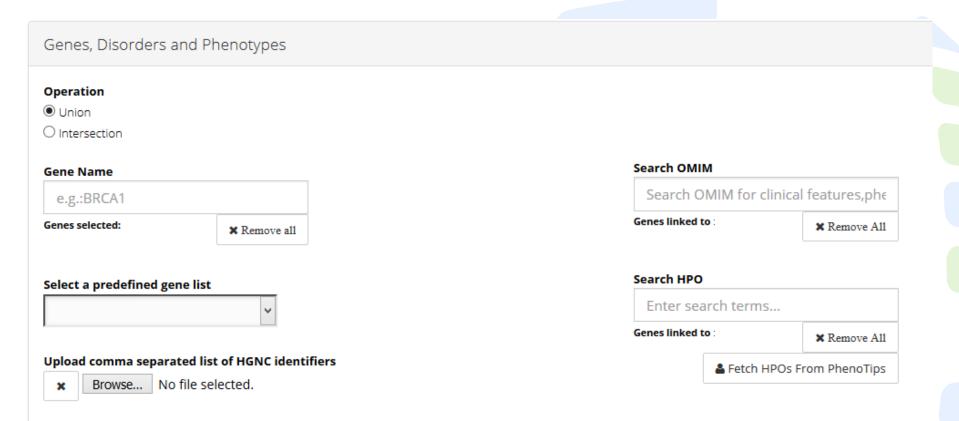


## GPAP Filters - Runs Of Homozygosity

Position Specific filter	s and Runs Of Homozygo	sity
Start End	•	Minimum run of homozygosity length ☐ 0.5MB ☐ 1.0MB ☐ 2.0MB
Upload BED file  Browse No file select	ted.	Upload coordinate file  Browse No file selected.



## GPAP Filters - Genes & Phenotypes

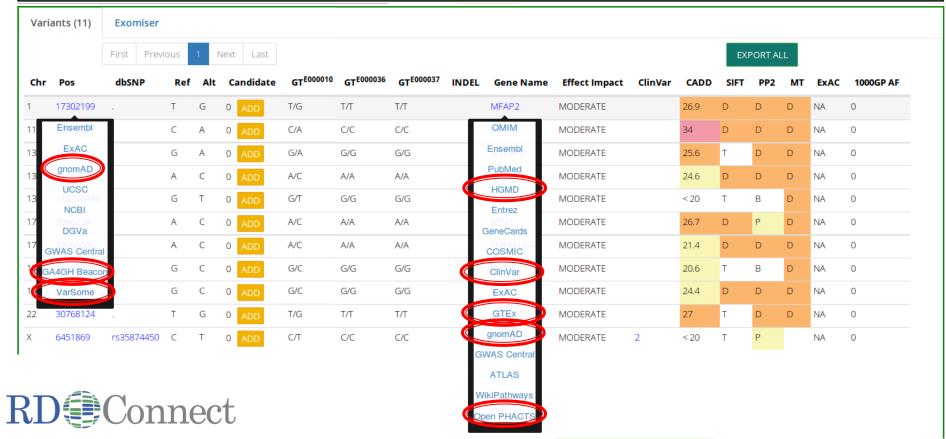






### Results (integrated data and links)

Samples	Functional Pred	dictive Po	pulation Dise	asecard	Candidate	Links ALFA					
Gene Name	Transcript ID	Effect Impact	Consequence	Feature Type	HGVS coding	Amino Acid change	Amino Acid length	Genotype Number	Exon Rank	CDS Position	Transcript BioType
MFAP2	ENST00000375535	MODERATE	missense_variant	transcript	c.313A>C	p.Thr105Pro	183	1	7/9	313/552	protein_coding
MFAP2	ENS 000003 5534 Ensembl	MODERATE	missense_variant	transcript	c.310A>C	p.Thr104Pro	182	1	6/8	310/549	protein_coding
MFAP2	ENS HSF 3542	MODERATE	missense_variant	transcript	c.310A>C	p.Thr104Pro	182	1	7/9	310/549	protein_coding





## Exomiser for Variant Prioritisation

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Variants (9)

Exomiser

#### **Run Exomiser on filtered results**

HPO terms are extracted from the first affected sample that is selected. If you want to run the analysis on another sample, please select it as first.

For performance reasons, Exomiser can only run with a number of variants up to 200.



#### Inheritance model:

Autosomal dominant 🕶

#### Prioritise genes:

PhenIX (compare phenotypes against human only) 🔻

Exomiser will run with the following HPO term HP:0000297 HP:0000467 HP:0001252 HP:0001374 HP:0002540 HP:0002783 HP:0002804 HP:0005684

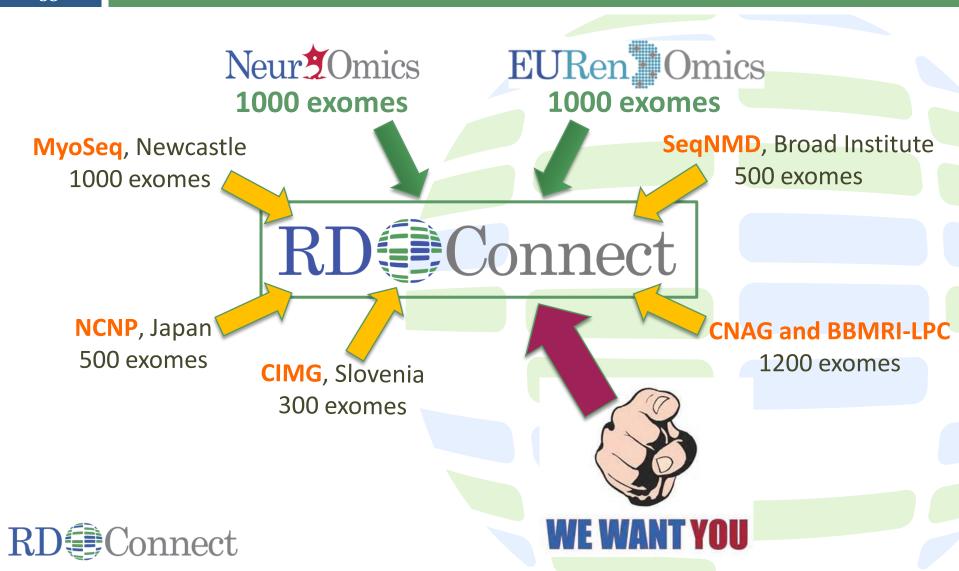




HPO terms and inheritance model extracted from PhenoTips through API



## Data in the RD-Connect GPAP





# 2016 BBMRI-LPC Whole Exome Sequencing Call

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#### Sequencing the exome of 900 rare disease samples in collaboration with EuroBioBank and RD-Connect

#### **Objectives**

- √ to promote the usage of biobanks for rare diseases
  - samples deposited in the EuroBiobank network
- ✓ to promote the utilization of NGS for the identification of novel causative variants
  and genes through free-of-charge sequencing of 900 exomes
- ✓ to molecularly diagnose RD patients analysis through the RD-Connect GPAP
- ✓ to promote data sharing for rare disease research through the EGA and RDConnect and phenotyping with HPO















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#### Sequencing the exome of 900 rare disease samples in collaboration with EuroBioBank and RD-Connect

#### **Eligibility**

- ✓ Coordinated projects, with 2-3 PIs from different European countries
- ✓ Each project will focus on a particular disorder and will include at least 3 genetically undiagnosed index cases
- ✓ Samples must have been obtained with "informed consent" of donors, including sharing of the data in controlled access repositories and databases
- ✓ DNA samples must be available in the biobanks from the EuroBioBank network, or researchers must commit to deposit them , if project is awarded
- ✓ Phenotypic description of the donors will have to be provided using the Human Phenotype Ontology (HPO)















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#### Sequencing the exome of 900 rare disease samples in collaboration with EuroBioBank and RD-Connect

#### **Timeline**

Call launch
Project submission
Review Process
Sample Submission
Sequencing
Data release

June 23<sup>rd</sup> 2016
by July 25th 2016
by September 2nd 2016
by September 30th 2016
by December 30<sup>th</sup> 2016
by February 28<sup>th</sup> 2017















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#### Sequencing the exome of 900 rare disease samples in collaboration with EuroBioBank and RD-Connect

#### **Outcome**

- √ 17 transnational projects selected
- √ 899 samples sequenced in total
- √ 10 projects sequenced at CNAG (545 samples)
- ✓ 7 projects sequenced at the Wellcome Trust Sanger Institute (345 samples)













2010 DDIVINI EI & Wildle Exeme Sequencing can							
TITLE OF AWARDED PROJECT	PRINCIPAL INVESTIGATORS						
Exome sequencing of a cohort of Rett syndrome-like patients	Armstrong Morón JS, Tejada M, Renieri A						
Genetic Heterogeneity of the familial gastric neuroendocrine tumors	Benitez J, Valdés Socin H, Calvete O						
Molecular diagnosis of albinism	Montoliu José L, Carracedo Alvarez Á, Arveiler B						
Deciphering the molecular causes of Ophthalmogenetic Diseases: Exome Sequencing analysis for gene discovery	Ayuso C, Rivolta C						
Exome trios in 50 patients with gastroschisis	Lapunzina P, Scarano G						
Identification of novel genes in patients with Congenital Myasthenic Syndrome (CMS)	Lochmüller H, Senderek J						
Identification of Molecular Pathology of Undiagnosed Patients with Mitochondrial Disorders by Whole Exome Sequencing	Dursun A, Soler D						
Undiagnosed cases with complex phenotypes including intellectual disability	Posada De La Paz M, Forzano F, Mari F						
Identification of Genetic Causes of Undiagnosed Epileptic Encephalopathies	Yalnizoglu D, Antonietta Mencarelli M, Koksal Ozgul R						
Unravelling the genetic cause of a neuropathic pain phenotype segregating in an extended multigenerational family through WES	Cormand Rifà B, Serra J						
Identification of genes involved in congenital disorders of glycosylation and 3-methylglutaconic aciduria	Tort F, Morava Kozicz E, Vilarinho L						
Undiagnosed cases of congenital and dystrophic neuromuscular diseases	Mora M, Muntoni F, Scerri C						
Gene Characterization in Carbohydrate metabolic alterations (neonatal diabetes & congenital hyperinsulinemic) in early childhood	Castaño L, Barbetti F, Polak M						
Identification and characterization of the underlying genetic and molecular defect in undiagnosed inherited ataxias by WES	Matilia-Duenas A, Houlden HJ						
Whole exome sequencing for clarification of rare causes of axonal Charcot-Marie- Tooth disease	Espinós C, Seeman P						
Identification of additional genes involved in Pyruvate Kinase Deficiency phenotypic variability	Segovia JC, Bianchi P, van Wijk R						
Identification of New Genes involved in Infant and Adult Sudden Cardiac Death	Gimeno Blanes JR, Corral De La Calle J, Elliott PM						

### BBMRI-LPC exome call: Preliminary Results

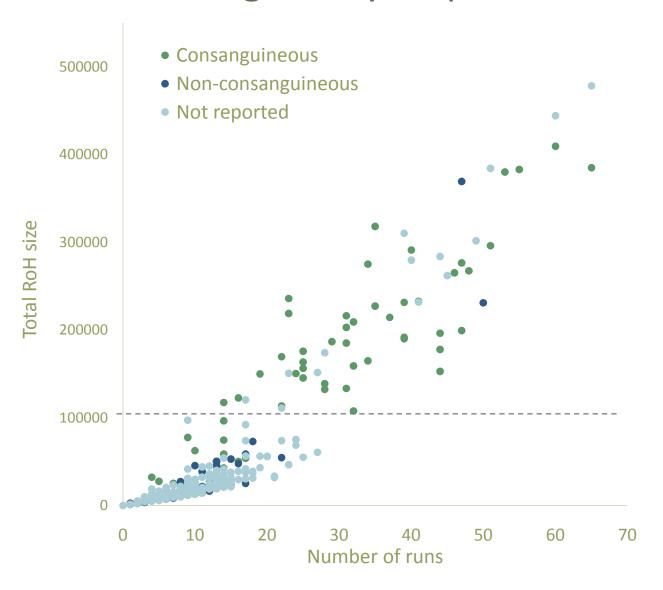
PROJECT	Pl.1	CLINICAL REFERRAL	TOTAL SAMPLES	TOTAL FAMILIES	PEDIGREES ANALYSED	TOTAL CASES WITH CANDIDATE VARIANTS (ALL)	TOTAL CASES WITH CANDIDATE VARIANTS (%)	TOTAL VERY STRONG CANDIDATES	TOTAL VERY STRONG CANDIDATES (%)	
BBMRI_01	Carmen Ayuso	Ophthalmogenetic Diseases	41	10	10	4	40	4	40	
BBMRI_02	Hanns Lochmuller	Congenital Myasthenic Syndrome	87	47	47	16	34	16	34	
BBMRI_03	Ali Dursun	Mitochondrial Disorders	50	41	41	25	61	19	46	
BBMRI_04	Manuel Posada	Intelectual disability	60	26	8	5	62,5	4	50	
BBMRI_05	Dilek Yalnizoglu	Epileptic Encephalopathies	50	32	32	19	59	12	37	
BBMRI_06	Bru Cormand	Neuropathic pain	15	1	1	0	0	0	0	
BBMRI_07	Marina Mora	Neuromuscular diseases	81	52	52	24	46	13	25	
BBMRI_08	Antonio Matilla	Ataxia	50	28	28	16	57	11	39	
BBMRI_09	José C. Segovia	Pyruvate Kinase Deficiency	31	Not released						
BBMRI_10	JR Gimeno Blanes	Sudden Cardiac Death	83	Pending						

Total	548	237	219	109	50	79	36
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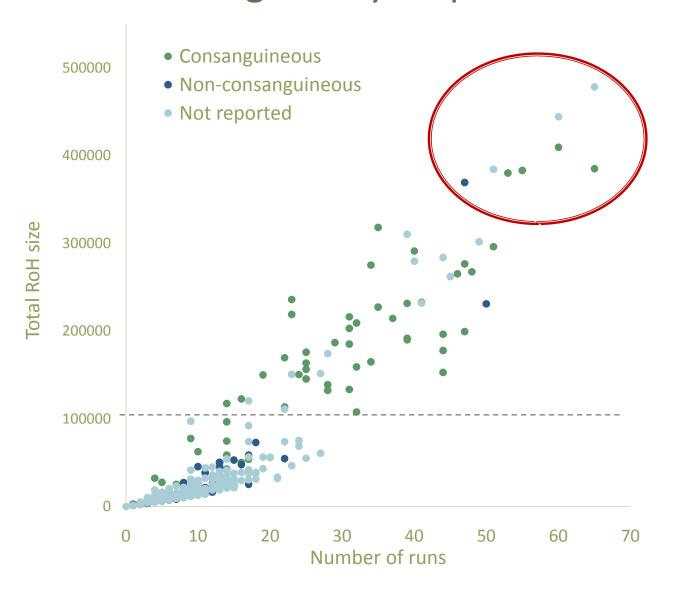
CANDIDATE VARIANTS VERY STRONG CANDIDATES Very good candidates + VUS in described genes or P and LP in genes associated with diseases that partially fit the clinical symptoms-> need validation from clinician

P or LP variants in described genes or VUS in described genes that fit the phenotype of the patient

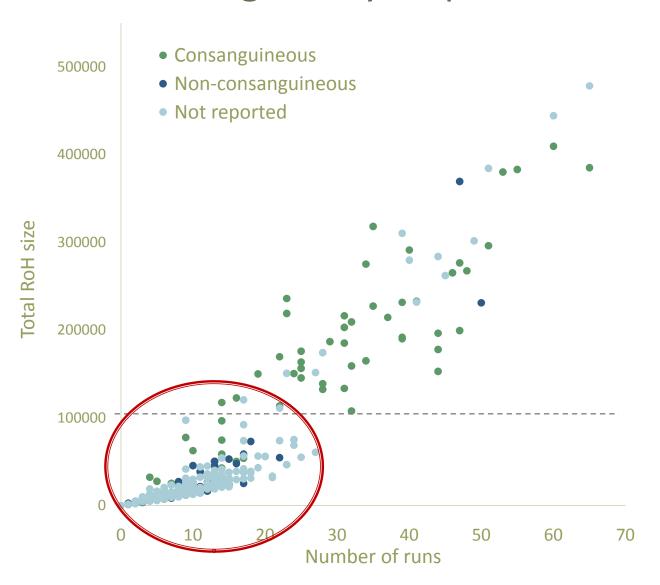
# Concordance of length of RoH with consanguinity reported in PhenoTips



# Concordance of length of RoH with consanguinity reported in PhenoTips



# Concordance of length of RoH with consanguinity reported in PhenoTips



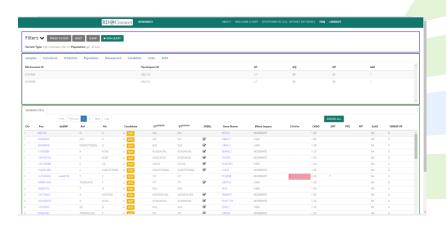


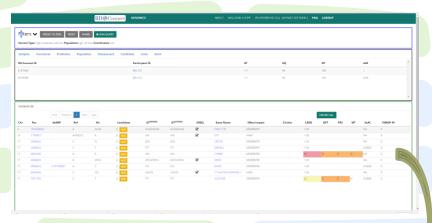
### Application of RoH filter

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**Standard filters – 101 variants** 

Homozygous blocks – 9 variants



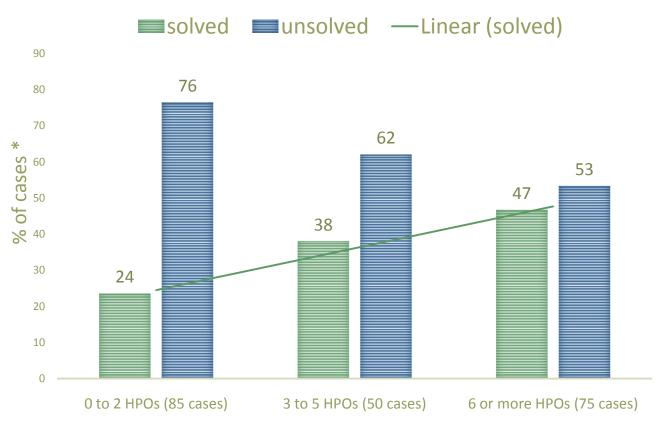


17 4805260 G A A/A A/A CHRNE MODERATE 32 D D D NA 0



### Importance of Detailed Phenotypic Description

### PERCENTAGE OF RESOLUTION OF CASES VS NUMBER OF REPORTED HPOS



**Number of HPOs reported** 

\*Only cases with "strong candidates" have been taken into account



### RD-Connect: Become a partner

- Registration details are available on-line first point of contact is platform@rd-connect.eu
  - Check your consent forms do they cover data sharing for research purposes?
  - Check your phenotypic data do you have a detailed phenotype for each participant?
  - Check your data do you have access to the BAM / CRAM / FastQ files from your sequencing experiments?
  - > Contact us platform@rd-connect.eu for further details





### Acknowledgements

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**WP1: Coordination** Hanns Lochmüller

(Newcastle and TREAT-NMD)

**WP2: Patient registries** 

**Domenica Taruscio** (ISS and EPIRARE)

WP3: Biobanks Lucia Monaco

(Fondaz. Telethon & EuroBioBank)

WP4: Bioinformatics Christophe Béroud (INSERM, Marseille)

WP5: Unified platform Ivo Gut (CNAG, Barcelona)

WP6 Ethical/legal/social Mats Hansson (Uppsala)

**WP7: Impact/Innovation Kate Bushby** 

(Newcastle and EUCERD/ EJARD)

**CNAG** 

I. Gut S. Beltran

D. Piscia

S. Laurie

J. Protasio

A. Papakons. F. Camacho

I. Martinez L. Matalonga

R. Tonda

J.R. Trotta

CNIO/BSC

A. Valencia S. Capella

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### Try it for yourself

# RD-Connect GPAP Hands-on demos today at 1415h and 1615h In Zurich 3





If you would like to join RD-Connect, please contact platform@rd-connect.eu

RD-Connect: http://rd-connect.eu/ > @ConnectRD

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