

Multidisciplinary approach → stratification of patients with carotid artery disease

TAXINOMISIS plenary meeting October 8-9, 2020 (virtual) Extension of the project due to the Covid-19 outbreak up to June 30,2023

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TAXINOMISIS is a European Commission funded research project which aims to for develop a new approach the stratification of carotid artery disease patients.

TAXINOMISIS takes bold step beyond the state of the art unwinding the pathobiology symptomatic underlying plaques, discriminating distinct disease mechanismdriven states and biomarkers, developing a multiscale risk stratification model.

TAXINOMISIS will deliver. as main outcome, a software platform, which can perform the risk stratification.



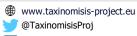


Provide novel disease mechanismbased stratification for carotid artery disease patients to address the need for stratified and personalised therapeutic interventions in the current era.

Objectives

- → Investigate the causal relationship of the major pathways and factors identified in symptomatic carotid artery disease
- → Study disease phenotypes and disintegrate them into endotypes according to specific pathobiological mechanisms
- → Integrate a computational model and an agent based model of plaque progression in the risk stratification tool
- → Perform a test for determining the presence of Nucleotide Polymorphisms predicting drug response
- → Evaluate the risk model of carotid artery disease stratification in an observational multicentre clinical study
- → Present a cost-effectiveness analysis









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Project activities

Characterization of symptomatic and asymptomatic carotid atherosclerotic plaques lesions, and identification of risk and susceptibility factors through the exploitation of longitudinal cohort data and multiomics

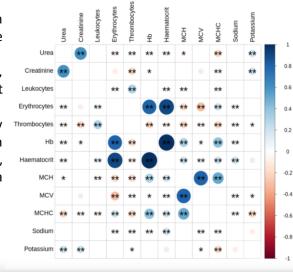
- Combined measurement of both ceramides and extracellular vesicle (EV) proteins on the exact same AtheroExpress large plasma sample set -> identification of the added value of both in prediction of secondary cardiovascular events together with a clinical model, as well as the combined association with plaque histology and symptomatic vs non-symptomatic.
- A plasma ceramide, EV proteins, EV ceramides and EV Ceramides/Plasma Cell (PC) ratios were found to be associated with major adverse cardiovascular events (MACE) occurring within 3 years after inclusion, independent of clinical risk factors.
- This is the first time that both proteins, ceramides and PCs have been measured in plasma and EV subfractions in a large consecutive cohort of carotid artery disease patients and have been associated with MACE.
- This holds great potential for the identification of high risk carotid artery disease patients using a small blood sample before surgical intervention occurs.



 Further analysis will be performed in combining proteins, ceramides and PCs with optimal cut-offs including c-statistics and net reclassification improvement.

Disintegration of carotid artery disease phenotypes into endotypes through joint modelling of multiple omics datasets and systems medicine approaches

- Evaluation of potential biomarkers that differ between symptomatic and asymptomatic patients, as well as plaque types.
- Initial results indicate that mmp-8, mmp-9, pcsk9, gdf15, pdgf_bb, urea and potassium have statistically significant difference between asymptomatic and symptomatic patients.
- Models for the classification of patients with carotid artery disease have shown that many markers which had been characterized as non-important when examined individually, could play an important role when examined together with a set of other markers.
- The models used for the classification analysis of certain data sets were of high predictive value reaching an accuracy score close to 80%, whereas for other data sets they were less accurate.









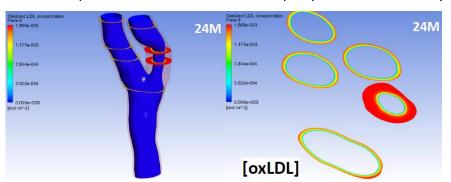


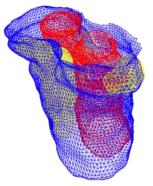
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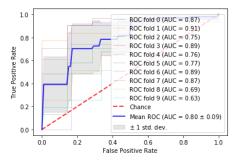
Risk stratification model

- The architecture of the Risk Stratification Tool has been established.
- The first version of the computational model of plaque progression has been developed using both retrospective data and data from the prospective clinical study.

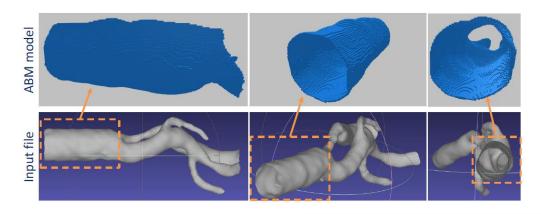








The first version of the agent based model (ABM) of plaque progression has been developed presenting an artificial 3D model of the carotid artery.









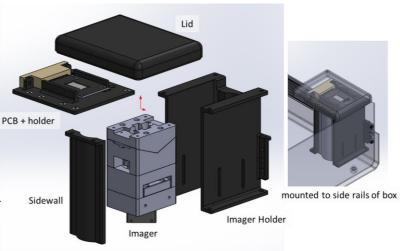
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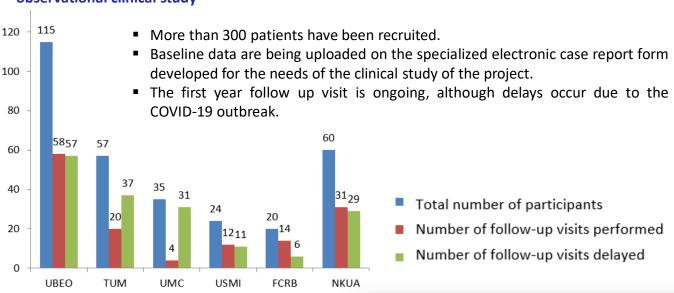
Pharmacogenomics analysis and development of a new lab-on-a-chip for further stratification of patients and personalization of medical treatment

- Final run for open fluidics multicavity PCR chips.
 - 4 different designs allowing further optimization of the closure of the central channel, imaging markers and optional controls.
 - Chip fabrication 12 wafers out, 200 chips/wafer.
- Chips were wire-bonded, awaiting calibration.





From research to the clinic: Evaluation of the new risk stratification tool in a prospective observational clinical study











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Consortium

TAXINOMISIS encompasses a highly multidisciplinary group of researchers with remarkable track record and complementarity from 12 world-leading institutions of clinical and research excellence and 3 pioneering SMEs including:

- ✓ Medical experts
- ✓ Vascular surgeons
- ✓ Cardiologists
- Neurologists
- Biologists
- Software engineers
- ✓ Biomedical engineers
- Lab-on-a-chip experts
- Health research experts

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TAXINOMISIS researchers are international leaders in their respective fields and have contributed to our current understanding of:

- the clinical medicine surrounding carotid artery disease (UMC, TUM, UBEO, USMI, FCRB, NKUA),
- the molecular mechanisms driving atherosclerosis in carotid and coronary arteries (UMC, TAUH, BRFAA, ZORA, USMI, UOXF),
- the immuno-inflammatory processes involved (UMC, BRFAA, USMI, UOXF, UBEO),
- the identification of diagnostic markers and treatments for cardiovascular disorders (TAUH, ZORA, IMEC, UMC, TUM, USMI, FCRB),
- the development of new algorithms and simulation tools for atherosclerotic plaques and CVDs (UOI, BIOIRC, END),
- the development of risk prediction models (UOI, BIOIRC),
- the design and production of lab-on-a-chip devices based on nanoelectronics (IMEC) and
- the provision of retrospective data and cohorts (NIVEL, TAUH, UMC)





