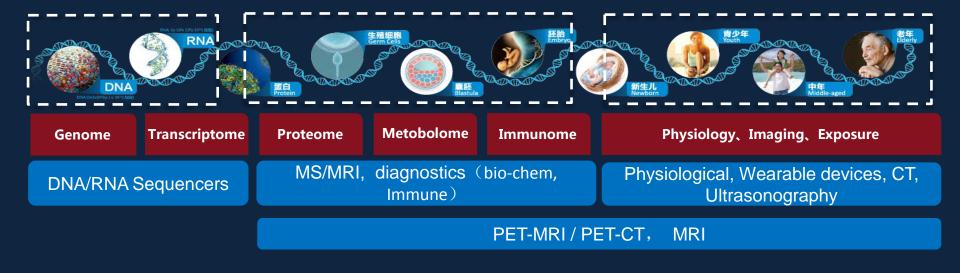
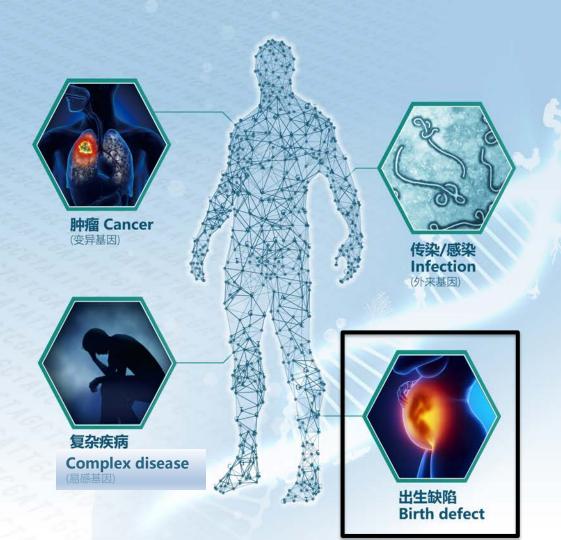
Personalized Medicine Benefits To Healthcare System And Society - the Chinese Perspective

Grover Yu PhD BGI, China

Precision VS Evidence-Based





The basis of health is encoded in genes

Technology

Accessible and Reliable

Cost

Affordable

Population

Scalable and Sustainable

Data

Manageable

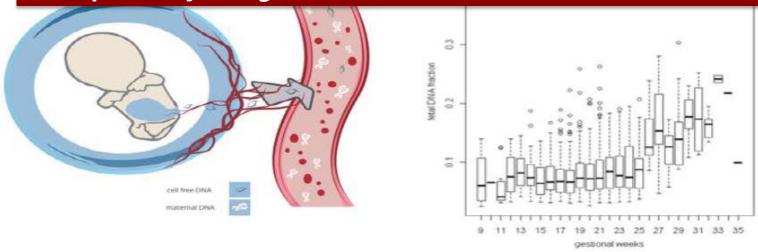
Technology Accessible



Circulating cell free DNA (ccfDNA) in maternal blood



To detect Trisomy 21, 18 and 13 non-invasively with high sensitivity and specificity using ccfDNA in maternal blood



Technology Reliable

China is the first country in the world that has specific regulation on NIPT

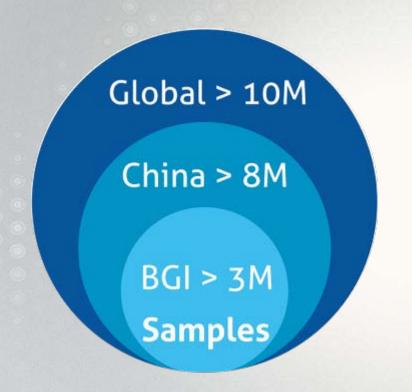
In order to standardize domestic NIPT market and avoid abuse of new technology. CFDA suspended NIPT in 2014 nationally and required CFDA approval from any provider that intends to perform NIPT.

BGI got the first CFDA certificate in six months thanks to CFDA's **novel** registration process for supporting implementation of new reliable technology.

Technology reliable

According to the global assessment of NIPT on New England Journal of Medicine 2015,

NIFTY from BGI enjoys honor of the Best Performance Lab.							
Lab(Test Name)		%	True positive	False positive			
Sequenom (MaterniT21, SafeT21)	121	44%	98(81%)	23(19%)			
Ariosa (Harmony)	25	9%	18(72%)	7(28%)			
Natera (Panorama)	40	14%	32(80%)	8(20%)			
llumina (Verif)	44	16%	35(80%)	9(20%)			
BGI (NIFTY)	47	17%	41(87%)	6(13%)			
Integrated Genetics (Informaseq)	1	<1%	0	1(100%)			
Total	278	95%	224	54			
unknown	16	5%					
Tota1	294						



Country/Region	Price
Japan	\$1000
USA	\$1000
Singapore	\$1000
Europe	\$723
Malaysia	\$450
China Average	\$308

Technology reliable







Non-invasive prenatal testing for trisomies 21, 18 and 13: clinical experience from 146 958 pregnancies

Correction(s) for this article

H. Zhang, Y. Gao, F. Jiang, M. Fu, Y. Yuan, Y. Guo, Z. Zhu, M. Lin, Q. Liu, Z. Tian, H. Zhang, F. Chen, T. K. Lau, L. Zhao, X. Yi, Y. Yin, W. Wang

First published: 19 January 2015 | https://doi.org/10.1002/uog.14792

Affordable and Scalable

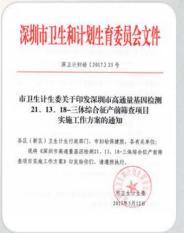
Shenzhen Model: Government allowance+ Maternity Insurance

- 2013: incorporating government allowance as the special support for biological development; \$90/person
- 2013: incorporating social medical insurance; \$60/person
- 2017:the first city incorporating NIFTY into city public health budget, supporting \$40/person from finance plus \$80/person from social medical insurance. The coverage of NIPT in Shenzhen is more than 80% and we expect the number will go up to 90% in 2018







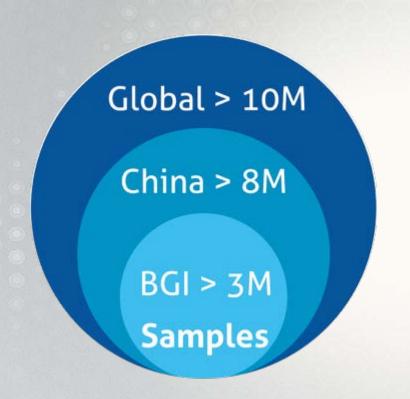


The live birth rate of baby with Down syndrome has been greatly decreased.

b 12			唐氏病例数		总发生率 (1/	总发生率(1/	· (大生率 (1/) - (2011-2017年深圳市唐氏综合征发生率、活产率(1/万)
年依	出生数	活产数	终止妊娠数 (或死胎死产数)	总例数	万)	活产率(1/万)	12.00 - 10.00 -	11.64	
201	182956	43	43	86	4.70	2.36	1 8.00	8.69 8.57	
201	213729	57	77	134	6.27	2.68	1	7.31 ——总发生率	
201	207841	63	89	152	7.31	3.05	万 6.00	6.27 —— 活产率	
201	205990	53	126	179	8.69	2.59	4.00 -	4.70	
201	211262	43	138	181	8.57	2.05		2.36 2.68 3.05 2.59 2.05 2.41	
201	213024	51	220	271	12.72	2.41	2.00 -		
201	240481	20	260	280	11.64	0.84	0.00	0.84	
合计	1475283	330	953	1283	8.70	2.25		2011 2012 2013 2014 2015 2016 2017	

^{——}With the advocation of two child policy in family and increasing maternal age, Down syndrome occurring rate has obviously increased, but with effective intervention, the live birth rate of baby with Down syndrome has been greatly decreased from 2.36/10K in 2011 to 0.84/10K in 2017.

Affordable NIPT in China



Country/Region	Price
Japan	\$1000
USA	\$1000
Singapore	\$1000
Europe	\$723
Malaysia	\$450
China Average	\$308
Shenzhen	\$0 paid by social medical insurance

This model is adjustable and applicable in one way or another.

Up to date, BGI has developed the model for more than 20 provinces in China, making personalized medicine accessible, reliable, affordable, scalable, sustainable

3.4M NIPT genetic tests in China accomplished by BGI

Lower Pass, Bigger Data

A data set of **140K+ samples**

(the biggest data research

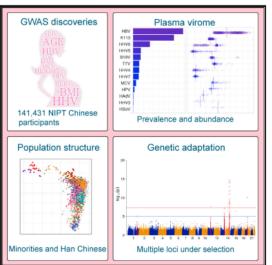
ever)on Chinese population is

published on Cell on Oct 4, 2018.

Cell

Genomic Analyses from Non-invasive Prenatal Testing Reveal Genetic Associations, Patterns of Viral Infections, and Chinese Population History

Graphical Abstract



Authors

Siyang Liu, Shujia Huang, Fang Chen, ..., Xin Jin, Rasmus Nielsen, Xun Xu

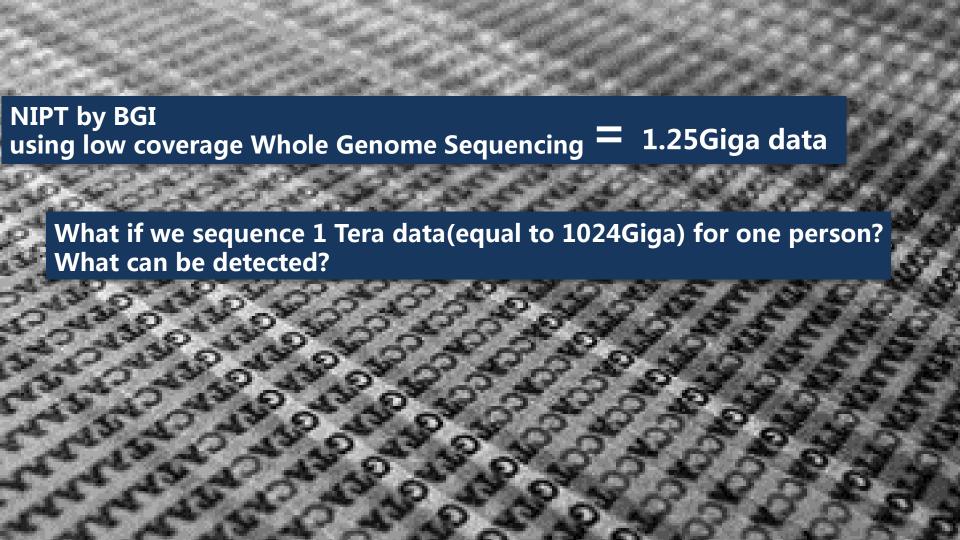
Correspondence

wangjian@genomics.cn (J.W.), albrecht@binf.ku.dk (A.A.), jinxin@genomics.cn (X.J.), rasmus_nielsen@berkeley.edu (R.N.), xuxun@genomics.cn (X.X.)

In Brief

Large-scale analysis of genome sequences from non-invasive prenatal testing in Chinese women yields insights into phenotypic trait associations, viral infection patterns, and population history.

What is more?



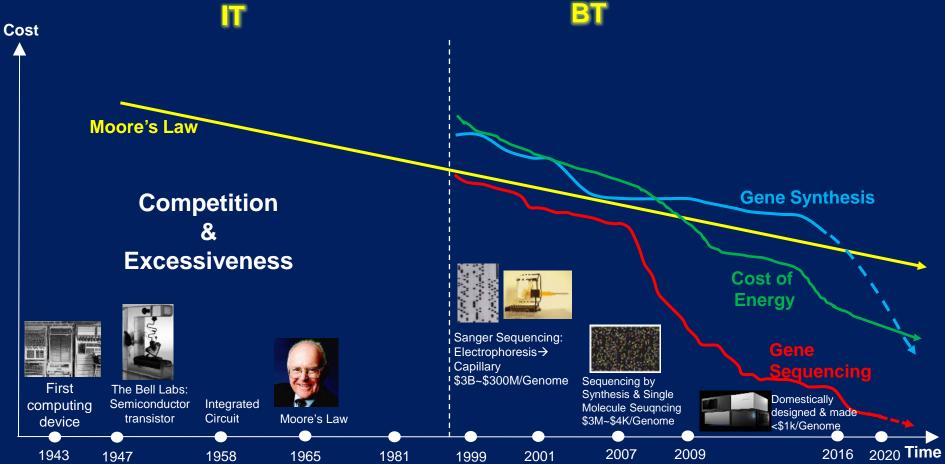
From limited known to reality, more than 90% of birth defects can be detected

Fertility Data 107 108 109(Giga) 1010 1011 1012

	Fertility Data products	10 ⁷	108	10 ⁹ (Giga)	1010	1011	10 ¹² (Tera)	Application
	Thalassemia gene test 301	4x10 ⁷ (50x,0.2M,PE100)						Gene screening of thalassemia test 301 mutations
	NIFTY®Basic		2.1x10 ⁸ (0.1x,6M,SE35)					Abnormal chromosome number+9 kinds of CNV
	NIFTY®Pro 1.0/2.0		8.75x10 ⁸ (0.3x,25M,SE35)					Abnormal chromosome number+88 kinds of CNV
	ChromosomeSeq-5M		3.5x10 ⁸ (0.1x,10M,SE35)					5M above CNV abnormalities
Biomarker	ChromosomeSeq-5M			1.225x10 ⁹ (0.4x,35M,SE35)				100k above CNV abnormalities
Detection	PGS		3.5x10 ⁸ (0.1x,10M,SE35)					Abnormal chromosome number and 4M above CNV abnormalities
	PGD			4x10 ⁹ (200x,20M,PE100)				34 monogenetic disease PGD
	Carriers screening-100 kinds of disease		6.0x10 ⁸ (200x,3M,PE100)					Screening of 100 single-gene disease carriers
	Deafness 127 genes detection			1.5x10 ⁹ (100x,7.5M,PE100)				127 deafness gene detection
	Deafness 22 genes detection (159 mutations)		5x10 ⁸ (1000x,2.5M,PE100)					22 deafness genes detection with 159 mutations
	WES				1.5x10 ¹⁰ (80x,75M,PE100)			Monogenetic disease detection
Fetal Genome	WGS				9x10 ¹⁰ (30x,450M,PE100)			The real status of the fetus (abnormal chromosome number, CNV, monogenic disease, mitochondrial disease, etc.)
Maternal and infant genomes	WGS (Pregnant women blood plasma)					3x1011 (100x,1.5G,PE100)		The real status of maternal and fetal double genomes (mother gene component type and fetal chromosomal abnormalities, including parental balanced translocation)
Maternal and infant genomes + Transhistology + nutrition	The fetus and pregnant women WGS + mass spectrometry + i image + nutrition						1x1012	Both Maternal and Infant Genome Real Status + Health Guidance

What makes Shenzhen model so successful?

Rate of Gene Sequencing and Synthesis: Beyond Moore's Law





Cutting edge sequencing technology and Sequencing tool

Government's guidance and policy support

广东省物价局 广东省卫生厅文件 广东省人力资源和社会保障厅

寿价 [2011] 276号

关于胎儿 21-三体综合征基因检测筛查 列人省医疗服务价格项目的通知

各地模以上市物价局、卫生局、人力资源社会保障局(社会保障局)、卫生与人口计生类。 供障局, 混制的发展改革表, 市场宣导局, 卫生与人口计生类。 人力资源社会保障局, 停山市原植区发展模型和统计局, 卫生 与人口计生局。人力变源社会保障局, 中央、军队、武警、省 届起牌军存出他。

为通应医疗技术发展、满足解众被医需要、现样"他儿 21-在标场企业基图检测传查" (250700010-2) 项目列入我者医疗 服务价格项目、试行两年、指导价为 1705 元/次; 并对原源化 综合医傅查项目 (250700010) 进行修订、具体内容如下、清速 组执行。

广东省卫生厅

专工册 [2013] 53 号

关于同意深圳华大基因临床检验中心 开展胎儿染色体非整倍体无创 基因检测等技术的批复

深圳华大基因临床检验中心:

此鬼。

根据你们的申请。提供7署二为应疗技术申核机构审核。 中心具备开展总色色体重整体工物留的物品, 人类共商毒品 因分型检测和耳囊基因分型检测等 3 项技术的能力、根据《医疗 技术临床应用管理分准》、提研定、用意作中心开展加点电色体 整绘测率 3 项技术、以上收在用于加几先大线输动电管性展 病产的诊断的(包括加应排金),持位卫生部《产业动物和整件程序 理办法》(卫生际》2002年第 33 号)等有关规定分理,并按照 理处法定。是工程下 2002年第 33 号)等有关规定分理,并按照 管理、分值及可量参加信息规定。 市政府办公会议纪要

(63) 原则市人民政府办公厅

2013年2月20日

关于研究支持深圳华大基因临床检验中心 开展基因检测技术应用第二阶段试点 的会议纪要

1月24日上午,原杰副台北主持召开会议。所取了原期申大 部因临床检验中心(以下简称华大基园)开展制几款仓休申整倍 休主创基因检测(以下商标无创产制温面控制)等技术的情况之 进、研究了相关问题,并就下一册及工作进行了部署,纪美如下; 会议认为,2011年月至2012年10月,年大基因与改享多 张医院仓作,共定成7122列旁沟标本检测,检出72到杂色体本 条件体监见,通过模型分析设定。两者有合单为100%,考虑到

深圳市卫生和计划生育委员会文件

莱亚计归转 [2017] 25 号

市卫生计生委关于印发深圳市高通量基因检测 21、13、18-三体综合征产前筛查项目 实施工作方案的通知

各区(新区)卫生计生行政部门,市知物保健院,各有关单位; 现件《探训市高通量基因检测21、13、18-三体综合征产前排 责项目实施工作方案3 印发给你们,请建照核行。

2012年5月1

Thanks