

# Direct-to-Consumer (DTC) Genetic Testing



**ARE YOU THE PRODUCT?**

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# Mapping the Human Genome



- The vast majority of the human genome was sequenced by the year 2000. It marked the end of the beginning
- 99.9% of human DNA sequences are identical to each other
- The other 0.1% of variation is expected to provide many of the clues to the genetic risk for common illnesses
- This information comes with vast ethical, legal, and social implications

# Old School Screening=Newborn Screening



Designed for pre-symptomatic identification of serious conditions for which there are effective treatments

The 4 primary considerations for conditions to be screened:

- 1) The condition represents a significant public health problem
- 2) There is an accurate and low-cost screening test
- 3) Treatments exist with proven efficacy
- 4) States are capable with screening and follow-up

# Traditional Reasons for Genetic Testing



- To confirm a disease diagnosis (Alpha-1-Antitrypsin Deficiency)
- To screen for carriers of genetic mutations (Tay-Sachs disease)
- To screen newborns for inborn metabolic diseases (PKU)
- To predict susceptibility to future disease (BRCA1&2)
- To predict how an individual may respond to a particular drug therapy (pharmacogenomics)

# The Pros of the Medical Model



- Clinically indicated genetic testing is ordered and interpreted by medical genetic providers
- The health care system is the mediator of genetic information, responsible for its quality, creation, interpretation, delivery, protection, and implications
- In particular, the medical model is committed to protecting the privacy of health information, including genetic information

# The Cons of the Medical Model



- The private sector complains that the medical model innovates too slowly because of regulation and professional resistance to new practices
- Some contend that the resistance stems from the desire to preserve medical professional autonomy
- There is a shortage of skilled medical genetics practitioners
- Many see medical genetics as having failed to live up to the hype surrounding human genetics and genomics research

# The Big DTC Player: 23andMe



- 23andMe for health and ancestry data
  - The health reports tell you about physical traits, wellness, carrier status for certain genetic mutations, and genetic risk for certain diseases
  - The ancestry report tells you about your ancestry composition and has an opt-in DNA relatives tool
  - 5 million customers and counting

# 23andMe Marketing



Background music... Getting to Know You

A woman participating in various activities all over the world

Embedded text

- There are parts of you yet to be discovered
- And through our DNA
- We are all connected



# 23andMe Health and Trait Reports



- Wellness and Trait report
- Carrier Status report
- Genetic Health Risk report

# Wellness and Trait Report



- Tells you the version of each trait you are most likely to have based on your genetics
- Compares your genetic results to 23andMe research participants (mostly European ethnicities)
- Most traits aren't passed down in a strictly Mendelian fashion
- Examples in the report include: dry/wet ear wax, flushing after alcohol consumption, and the ability to smell asparagus in your urine

# “Carrier” Status Report



- Report on 40+ inherited, autosomal recessive diseases such as cystic fibrosis, sickle cell anemia, and PKU
- Many of the conditions in this report can be caused by hundreds to thousands of genetic variants and the report doesn't include all possible variants.
- This means the test can't detect all carriers
- Some Carrier Status tests are more relevant for certain ethnicities than others

# Genetic Health Risk Report



- The test genotypes a limited set of variants associated with potential risk for a grab bag of 10 conditions. It includes Parkinson's disease and late-onset Alzheimer's disease
- Although the included mutations increase the risk for these conditions, they account for a fraction of those genetic variants contributing to the diseases
- The test's positive predictive value is low because most of the mutations are incompletely penetrant or are modified by other factors

# The 2 Opt-In Genetic Reports (so far)



- Parkinson's disease
  - ~ 1 million cases in the US
- Late-Onset Alzheimer's disease
  - ~ 5 million cases in the US
- Both diseases are debilitating, unpredictable, and have no cure.
- The FDA says that these tests are intended to provide genetic risk information to consumers but they cannot determine a person's overall risk of developing the disease

# Parkinson's disease



- It is estimated that 5% of Parkinson's disease is inherited, meaning a genetic test will only have limited use
- The genetics of Parkinson's disease are extremely complex, even if you do carry a gene linked to the condition, it does not mean you will go on to develop it
- Appropriate access to counseling and advice is critically important

# Late-onset Alzheimer's disease



- 23andMe's website states, “Genetic testing for late-onset Alzheimer's disease is not currently recommended by any healthcare professionals.”
- The website also states, “there is currently no known prevention or cure for Alzheimer's disease.”
- The genetics of Alzheimer's disease are extremely complex, even if you do carry a gene linked to the condition it does not mean you will go on to develop it

# 23andMe fine print



- Your ethnicity may affect the relevance of each report
- The test is not intended to tell you anything about your current state of health, or be used to make medical decisions
- Each report describes if a person has variants associated with a higher risk of developing a disease, but does not describe a person's overall risk of developing the disease



# Is Ignorance Bliss?



- Should I tell my partner they might have to be my caretaker one day?
- What do I tell my siblings/children?
- Should I be scared?
- What does “genetic risk” even mean?
- What if I’m part of an ethnic or racial group for which these results are less valid because most of the testing was done on people of a different descent?

# 23andMe 'Research Participants'



- In 2010, all customers of 23andMe were recruited for an ongoing research project entitled 23andWe
- Participation entailed the customers electively providing personal phenotypic data that would be added to their genotypic data
- Approximately 90% of customers consented to participate
- The average 'research participant' contributed additional phenotypic data on 11 topic specific research questionnaires

# Demographics of Research Participants



- Men slightly outnumber women
- Age distribution is bimodal centering around 30 and 60 years
- Most have a college education and income of at least \$100,000/year
- The vast majority were of European descent

# The 23andMe Business Model



- Front End- the direct to consumer genetic/ancestry business
- Back End- involves pairing clients genetic data with their actual physical conditions, aggregating and anonymizing the data, and selling this information
  - Third party companies (Pfizer, Genentech)
  - Research institutions (Stanford)
  - Nonprofits (Michael J. Fox Foundation)

# 23andMe's Aggregate Data



- The data is generated by the individual clients, and ~80% of the clients are of European descent
- The genetic database has noticeable gaps, especially among Africans, Middle Easterners, Central Asians, Southeast Asians, and indigenous Americans
- 2018 23andMe initiatives:
  - [Populations Collaborations Program](#): allows U.S. based scientists already studying underrepresented groups to apply for free spit kits and DNA analysis
  - [Global Genetics Project](#): free tests to people who can trace all 4 grandparents to one of 61 underrepresented countries

# 23andMe and Genentech



- In 2016, Genentech, a leading biotechnology company, and 23andMe entered into a \$60 million deal to perform whole-genome sequencing on DNA samples collected by 23andMe from patients with Parkinson's disease
- 23andMe's terms of service states that genetic information and self-reported health information may be shared with 'research partners' including commercial partners.

# Genotyping versus Sequencing



- Genotyping- the process of determining which genetic variants an individual possesses. For looking at many different variants at once, genotyping chips are an efficient and accurate method. Cost-effective.
- Sequencing- a method used to determine the exact sequence of a certain length of DNA. Sequencing can be used to genotype someone for known variants as well as identify variants that may be unique to that person. Expensive.

# Ethical Issues with Sequencing



- Adequacy of consumers' informed consent
- Transparency of companies' research activities
- Variants of uncertain significance
- Incidental findings
- Ramifications for blood relatives
- The risk of re-identification



# Concerns about the Genentech Business Deal



- Will participants be offered the option of receiving results and appropriate genetic counseling?
- How will informed consent be obtained for whole genome sequencing?
- Will the genomic/phenotypic data collected from this project be made available to other researchers?
- What about the possibility of unauthorized re-identification of an individual from “de-identified” DNA sequence data?

# De-anonymizing genetic samples



- New lab techniques can unearth genetic markers tied to specific physical traits
- Using this process, one MIT scientist was able to identify the people behind five supposedly anonymous genetic samples randomly selected from a public research database
- It took him less than a day

# The Privacy Delusion



- HIPAA, a 1996 federal law, allows medical companies to share and sell patient data if it has been anonymized
- This loophole has proven to be a cash cow
- Once genetic data has been linked to a specific person, the potential for abuse is vast
- Linda Avey, a cofounder of 23andMe, has admitted that “it’s a fallacy to think that genomic data can be fully anonymized.”

# Genetic Information Nondiscrimination Act



- In 2008, GINA was passed to address the need to regulate how genetic information is used, most notably protecting against discrimination in health insurance and employment.
- GINA has serious limitations:
  - Its lack of application to life insurance, long-term care insurance, and to employers of < 15 employees
  - GINA places the burden on victims of genetic discrimination to prove that their information was misused

# 23andMe and Sharing/Selling Your Data



- 23andMe pledges it won't share identifiable test results unless the consumer signs a 2,700 word “research consent document”
- The 22-page privacy policy states that anonymized information can be shared without consent
- The policy goes on to say: “it is possible that a third party that has obtained some of your genetic data could compare that partial data to the published results and infer some of your other personal information”

# Informed Consent Process



- **Medical/Academic Institutions**
  - Often have someone to walk through documents with potential study participants
  - Attempt to make sure they understand all of the risks/benefits
- **23andMe**
  - User clicks I DO GIVE CONSENT
  - As a result, their genetic profile plus any information they enter into surveys can be used for research in de-identified/aggregated form

# 23andMe Privacy Policy



- Can unilaterally change the terms and conditions of its privacy policies at any time
- As a commercial enterprise, it is not bound by the same obligations as medical professionals
- Tension exists between the way 23andMe portrays itself as a health company and simultaneously wants to be treated like every other tech company that makes its money from big data

# Phenotypic and Genomic Data



- There are many sources of genomic data
- Linking phenotypic data to genomic data is much more difficult
- 23andMe acquires this linked health and behavioral data by continuously pushing out surveys to the 80% of its users that clicked the research box
- The average user answers 300 phenotypic/behavioral questions



# The Golden State Killer



- In April 2018, local investigators used a DNA-comparison service to track down a man police believed to be the Golden State Killer
- Investigators identified the suspect using a decades old DNA sample obtained from the crime scene
- The sample was uploaded to GEDmatch, a crowdsourced database of ~ a million distinct DNA sets shared by volunteers
- Investigators contended they did not need a court order before using GEDmatch

# Privacy Best Practices for Consumer Genetic Testing



- In July of 2018, 23andMe partnered with a Washington, DC nonprofit named The Future of Privacy Forum
- They created new, voluntary guidelines in which DTC companies would obtain consumers separate express consent before turning over their individual genetic data and personal information to third parties

# GlaxoSmithKline and 23andMe



- Also in July of 2018, 23andMe announced it was partnering with pharmaceutical behemoth GSK
- In the \$300 million/4 year deal, 23andMe will give GSK access to its users aggregated, de-identified genetic data

# Empowered Consumers or Suckers?



- Altruists could contend that the customer's know what they're doing and see their participation as a way to make a difference
- Sceptics could make the case that the customers have been hoodwinked into contributing their genetic data, suckered by a fun service into giving more than expected

# GATTACA



- “ There is no gene for fate.”
- Quote from the 1997 film that portrayed a dystopian vision of a world divided between the “valids” and the “in-valids”
- Genomics is best viewed as a complex and probabilistic science, in which a constellation of genetic variations makes the odds, but many other factors, environmental as well as biological, decide the outcome



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