#### A SMART of project workshop CAD RISK PREDICTION AND STRATIFICATION: THE ICT APPROACH

## SMARTool Lipidomics for ATS risk prediction and Point of Care devices

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Tuesday 6th November 2018



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### MAIN ENDPOINTS OF MOLECULAR CHARACTERIZATION IN SMARTool

- 1. To characterize the genotype and phenotype of CAD patients and select the **best molecular markers** of **CAD SEVERITY AND PROGRESSION**
- 2. To develop **point-of-care technologies** to measure selected markers directly in blood
- To create a pre-imaging algorithm based on gender, age and molecular variables with an additive value to stratify risk of CAD presence and severity

#### **OMICS IN SMARTool**



#### **PTS ANNOTATION OF CAD SEVERITY**

#### N= 259 with LUMC visual analysis completed



#### WHICH LIPIDS, HOW AND WHY?

| MALDI TOF TOF TRIPLE TOF                    |  |
|---|--|
|   | CVD Role   |
| CE (cholesterol esters)                     | <ul> <li>Cheng et Al Atherosclerosis 2015 found association with fraction of necrotic core and lipid burden by NIRS with many CE species in the ATHEROREMO-IVUS population (N=574).</li> <li>Stegemann et al Circulation 2014 In Brunek trial (N=685) they found CE(16:1) as one informative marker of CVD event (stroke, MI, sudden death) prediction in 10 years</li> </ul>  |
| TG (triacylglycerols)                       | <b>Stegemann et al Circulation 2014</b> In Brunek trial (N=685) they found TG(54:2) as one informative marker of CVD event (stroke, MI, sudden death) prediction in 10 years   |
| PC (phosphatidylcholines) Targeted analysis | <b>Paapstel et al Nutrition metabolism and cardivascular disease 2018</b><br>found in N=50 CVD pts and N=50 healthy subjects an inverse relationship<br>between PCs and arterial function/ inflammation molecules  |
| PE (phosphatidylethanolamines)              | Meikle et al ATVB2011 Association between PEs and symptomatology (= 140 pts stable angina vs unstable angina) Stegemann et al Circulation 2014 In Brunek trial (N=685) they found PE(36:5) as one informative marker of CVD event (stroke, MI, sudden death) prediction in 10 years Ellims et al European Heart Card Imaging 2014 found in N=100 patient with CCTA a significant association between PEs and burden of non – calcified plaques |
| Cer (Ceramides)                             | <b>Cheng et Al Atherosclerosis 2015</b> found association with fraction of necrotic core and lipid burden by NIRS with many Cer 18:1 16:0 in the ATHEROREMO-IVUS population (N=574).   |
| SM (Shingomyelins)                          | <b>Fernandez et al Plos One 2013</b> SM38 species predict cardiovascular events in N= 420 cases.   |

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#### THE THREE CLASSES MULTIVARIATE ANALYSIS IN SMARTool: BASELINE DATA

| Footuro         | ANCOVA |       |         |               |  |  |
|-----------------|--------|-------|---------|---------------|--|--|
| realure         | Class  | LDL   | Statins | Class*Statins |  |  |
| Cer_d18_1_16_0_ | 0.025  | 0.031 | 0.127   | 0.920         |  |  |
| PC_38_4_        | 0.046  | 0.790 | 0.340   | 0.507         |  |  |
| PS_38_6_        | 0.019  | 0.406 | 0.683   | 0.255         |  |  |
| PS_40_6_        | 0.029  | 0.510 | 0.707   | 0.079         |  |  |
| SM_34_1_        | 0.011  | 0.019 | 0.092   | 0.196         |  |  |
| SM_40_1_        | 0.038  | 0.000 | 0.099   | 0.232         |  |  |
| TG_54_2_        | 0.01   | 0.617 | 0.080   | 0.075         |  |  |

TG (54:2) NO CAD TG (54:2) CAD







#### SMARTool SPHINGOMYELINS AND STATIN USE: FOLLOW UP DATA

|          | ANCOVA |       |       |         |                   |
|----------|--------|-------|-------|---------|-------------------|
| Feature  | Class  | LDL   | TG    | Statins | Class*Stati<br>ns |
| SM_36_2_ | 0.007  | 0.009 | 0.762 | 0.810   | 0.019             |
| SM_38_2_ | 0.002  | 0.002 | 0.312 | 0.339   | 0.026             |
| SM_42_4_ | 0.006  | 0.113 | 0.091 | 0.136   | 0.013             |
| SM_42_3_ | 0.008  | 0.020 | 0.126 | 0.661   | 0.007             |

SM(42:3) no CAD no statins SM(42:3)NO CAD statins SM(42:3) CAD no statins SM(42:3)CAD statins



#### THE ADDITIVE VALUE OF LIPID CLASSES IN ATS RISK PREDICTION

Stegemann et al reported in the Brunek cohort a strong relationship between TG54:2 and cardiovascular events at 10 years

Cheng et al reported in ATHEROREMO trial an association between Cer18:1 16:0 and lipid burden determined by NIRS

Fernandez et al. showed that SM38 was the only lipid species associated with increased risk of future cardiovascular events.

SMARTool is the first longitudinal trial with a double CCTA able to assess association of lipid species with:

- CAD severity
- CAD progression
- CCTA assessed plaque features

#### ATS RISK STRATIFICATION AND PREDICTION OF PROGRESSION

#### Point of Care device in SMARTool: PROOF OF CONCEPT



### Next generation of POC devices





#### THE DESIGN OF ELISA ON CHIP: ANTIBODY IMMOBILIZATION AND CAPTURE

#### ELISA on chip for the detection of cardiovascular biomarkers



| Antibody immobilization |
|-------------------------|
| Surface passivation     |
| Antigen capture Washing |
| Detection antibody      |
| Labeling                |
| Detection               |
|                         |





#### **THE DESIGN OF ELISA ON CHIP:** DETECTION

ELISA on chip for the detection of CAD-relevant markers with a detection based on chemiluminescence







SMARTOO

anitoa



ICAM - 5 ng/ml







## **SMARTool**

- ✓ SMARTool H2020-project started in 2016 and will end in 2019.
- ✓ The clinical learning phase of SMARTool consisted in a clinical trial of a suspected SCAD population, with a previous CTA performed 6-7 years before and biohumoral characterization. CTA was repeated together with an enlarged molecular characterization during SMARTool
- The technical learning phase of SMARTool consists of: (i) the development of a PIM (pre imaging probability) algorithm based on molecular information and assessed by CTA. (ii) The refinement of ARTreat 3D-based models: 3D reconstruction model and plaque growth model prediction refined and assessed by CTA scan pairs in SMARTool. (iii) The development of SMART FFR by CT, validated by ICA. (iv) The development of a virtual angioplasty tool.
- ✓ The final outcome of SMARTool is an integrated Decison Support System for CAD patient management in a cloud-enviroment

## **THANK YOU**



This project has received funding from the EU-H2020 Research and Innovation Programme under Grant Agreement N 689068



# ANALYSIS OF COVARIANCE – ANCOVA

- The equality of lipids means across the defined groups (class, statins therapy), adjusted for the effect of LDL and triglycerides, was tested using the 1- or 2-way ANCOVA method.
- ANCOVA is a general linear model including both ANOVA (categorical) and regression (continuous) predictors:

• 
$$y_{ij} = \mu + a_i + \beta (x_{ij} - \bar{x}) + \varepsilon_{ij},$$
  
•  $H_0: \alpha_1 = \alpha_2 = \cdots = \alpha_K$ 

 $y_{ij}$ :  $j^{\text{th}}$  observation of the dependent variable in the  $i^{\text{th}}$  group

- $x_{ij}$ :  $j^{th}$  observation of the covariate in the  $i^{th}$  group
- $\mu$ : overall mean of the dependent variable
- $\bar{x}$ : mean of the covariate
- $a_i$ : the effect of the *i*<sup>th</sup> level of the independent variable
- $\beta$ : slope of the line
- $\varepsilon_{ij}$ : random disturbances

#### **Main assumptions**

- Normality of residuals  $\varepsilon_{ij}$
- Linearity of regression
- Homogeneity of regression slopes

# **Box Plots**

Baseline:
 Cases vs.
 Controls

