

社会、健康、医療に貢献するための
学際的公衆衛生学・疫学の未来

Kyoto University School of Public Health (35 min)

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Broad Institute of MIT and Harvard



CRC = colorectal cancer

MPE = molecular pathological epidemiology

MSI = microsatellite instability

(hypermutator, high neoantigen load)

(Immune checkpoint inhibitor works for MSI-high solid tumors)

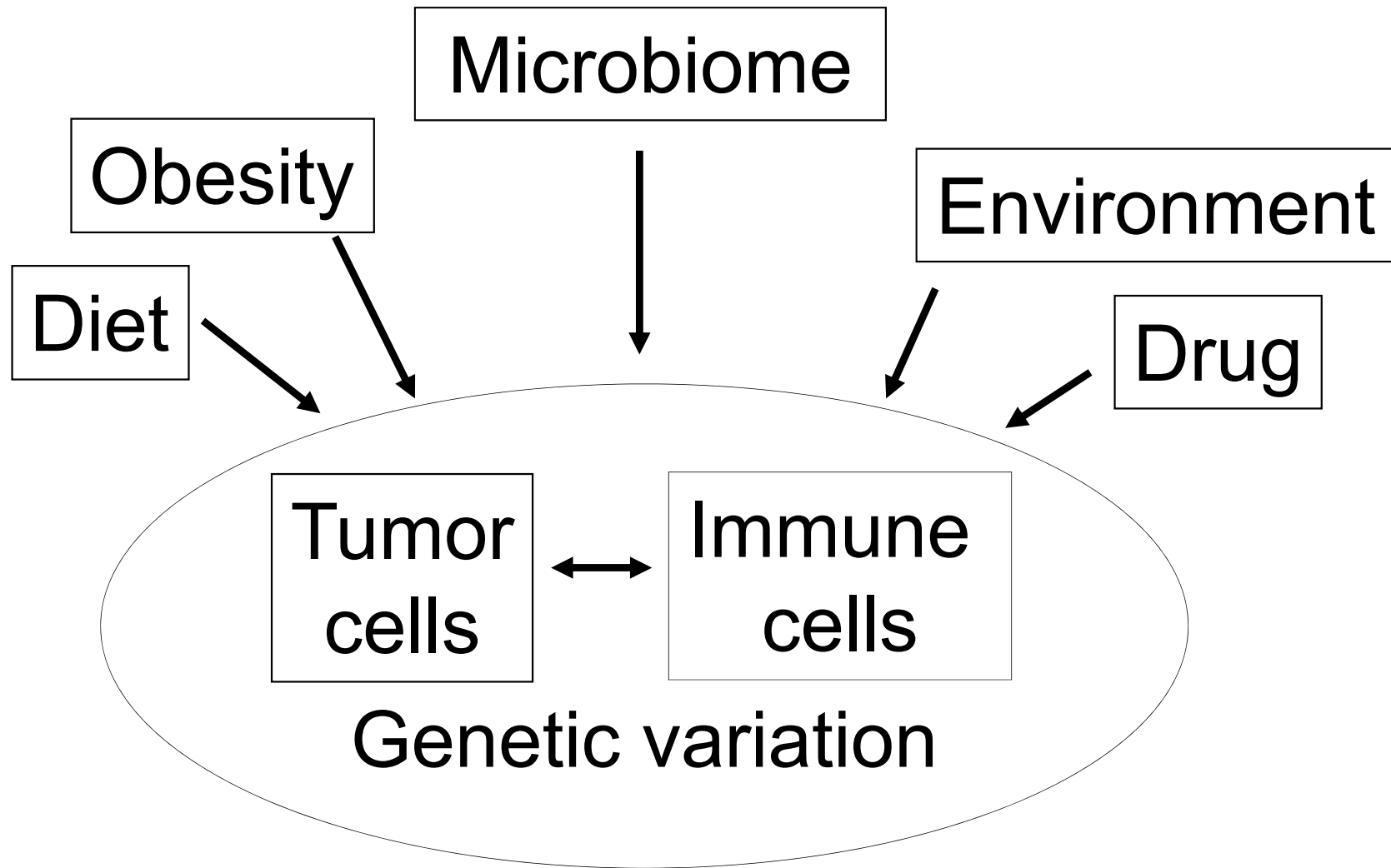
Molecular
Pathology

Epidemiology

One Field MPE

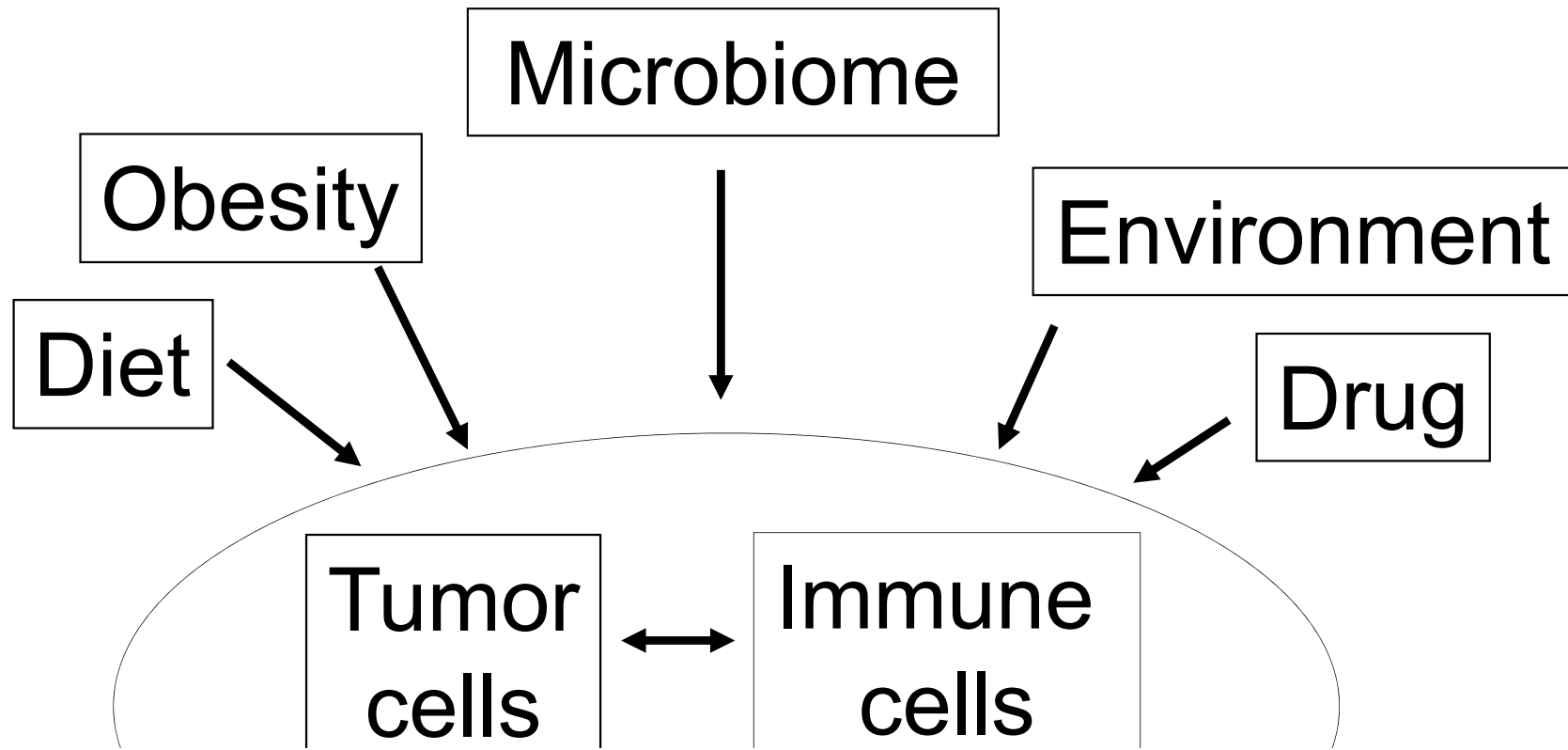
$1 + 1 \rightarrow 100$

Big Synergism



Ogino et al. Gut 2018

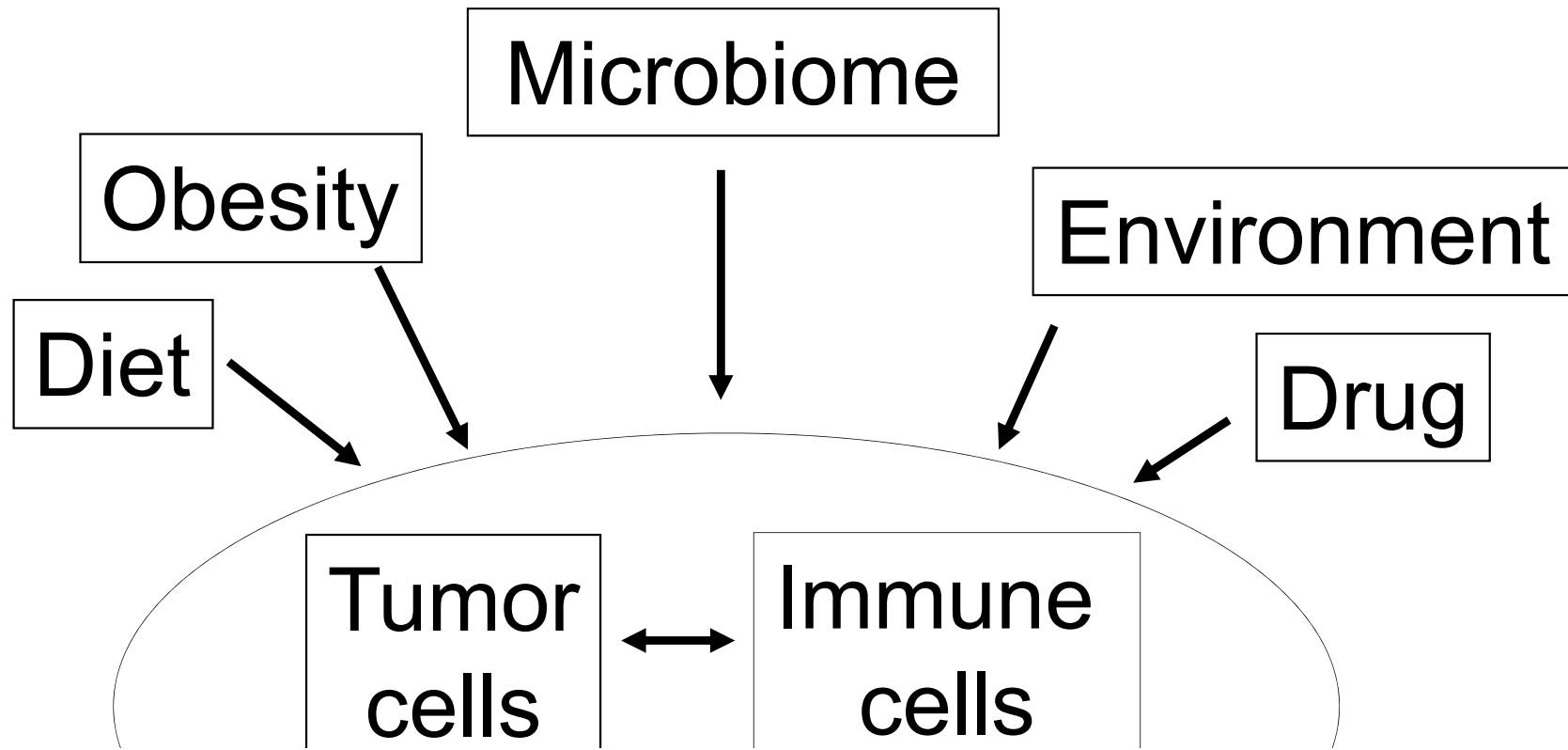
Ogino et al. Lancet 2018



**Complex problems necessitate
expertise in multiple fields**

Ogino et al. Gut 2018

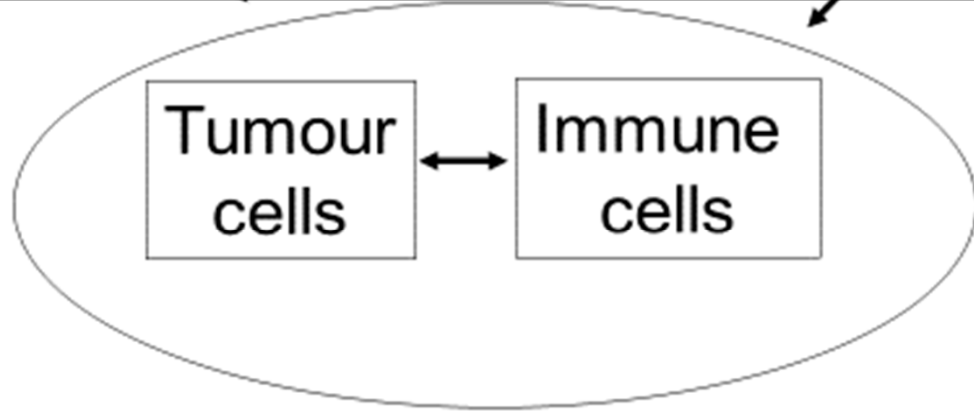
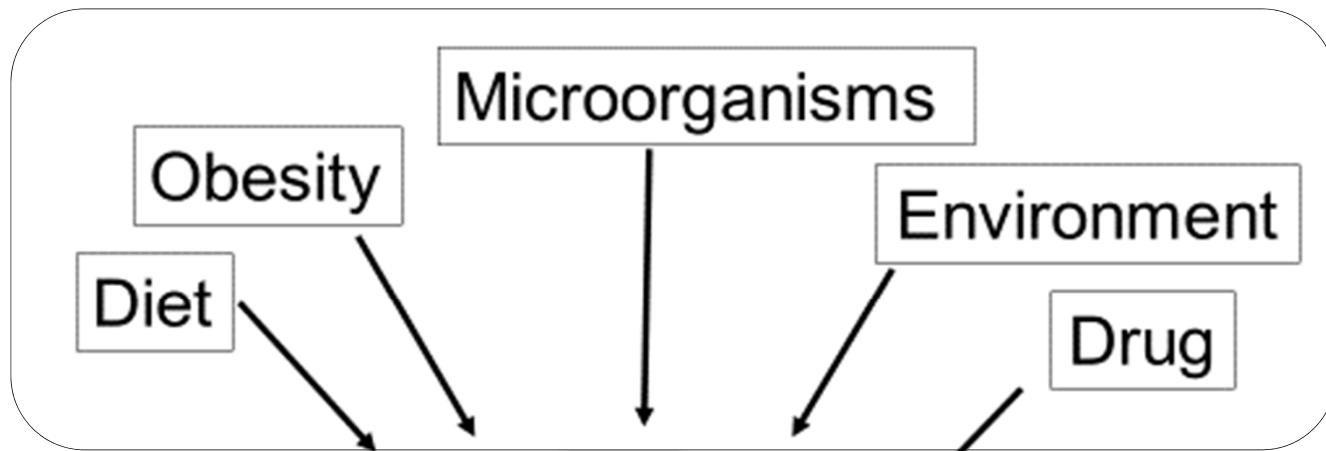
Ogino et al. Lancet 2018



**Exposures can easily influence
tumor - immune interactions**

Ogino et al. Gut 2018

Ogino et al. Lancet 2018



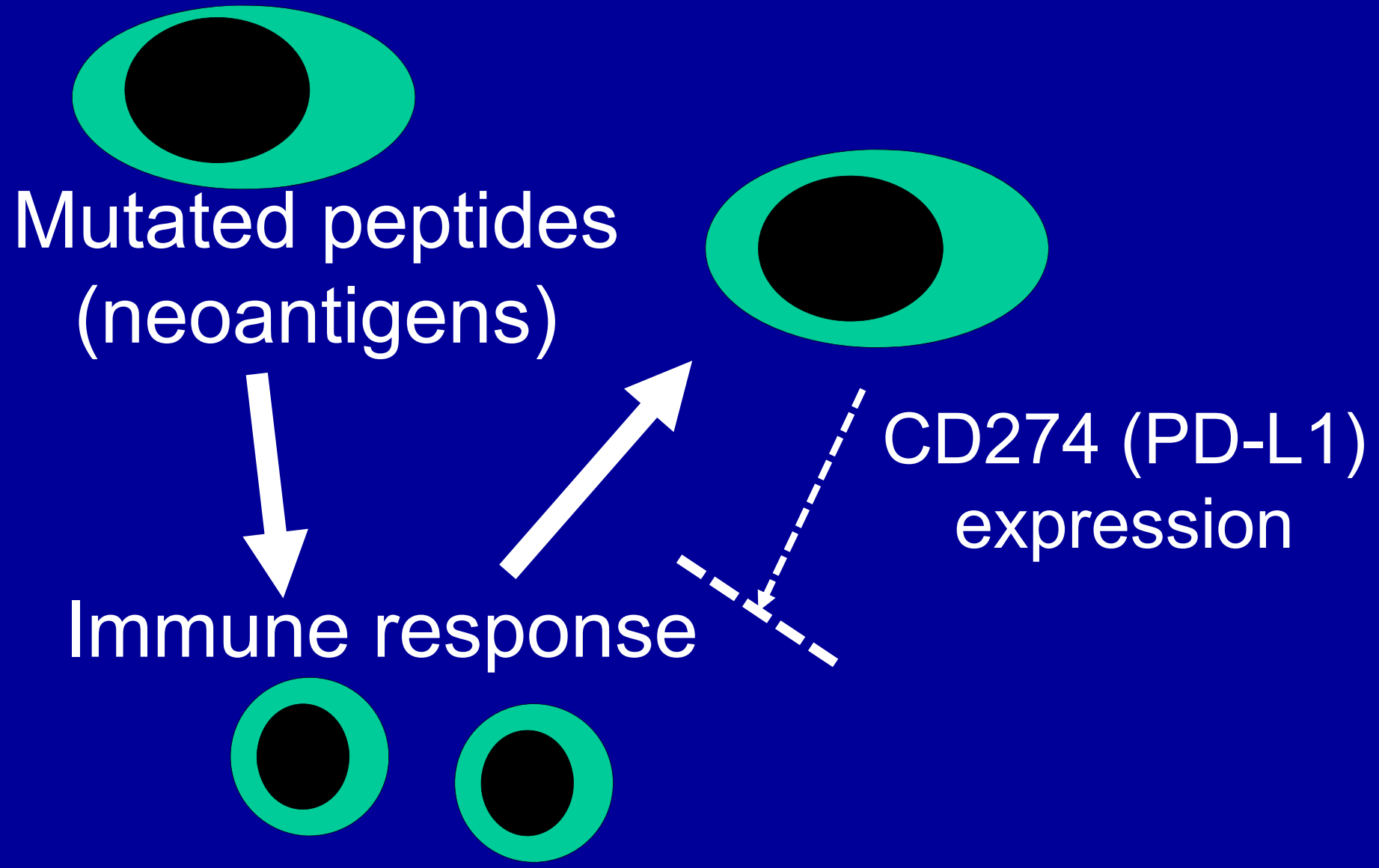
Epidemiology
methods



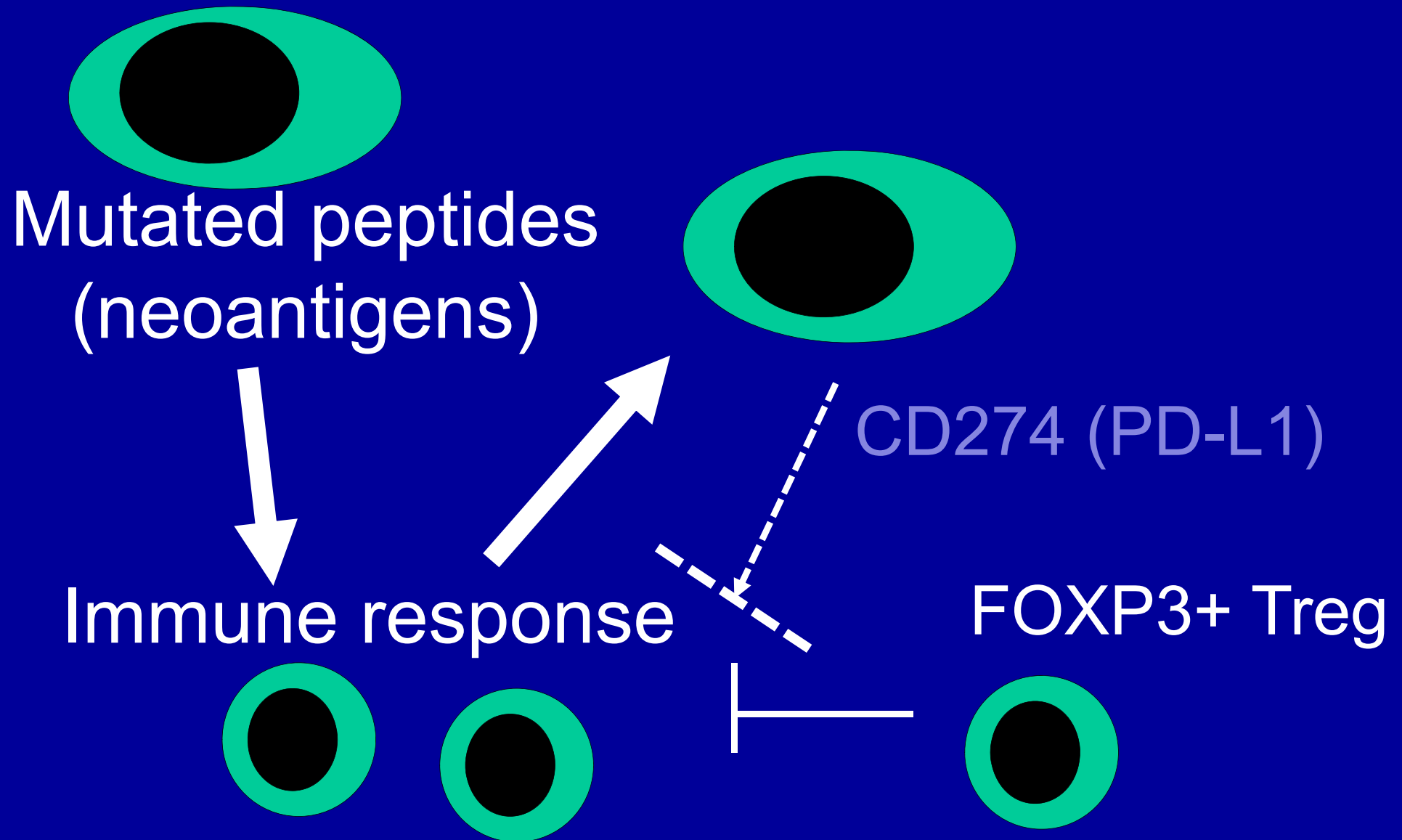
Pathology methods → Integrative MPE

Bioinformatics methods
(machine / deep learning)

Tumor - Immune Interactions

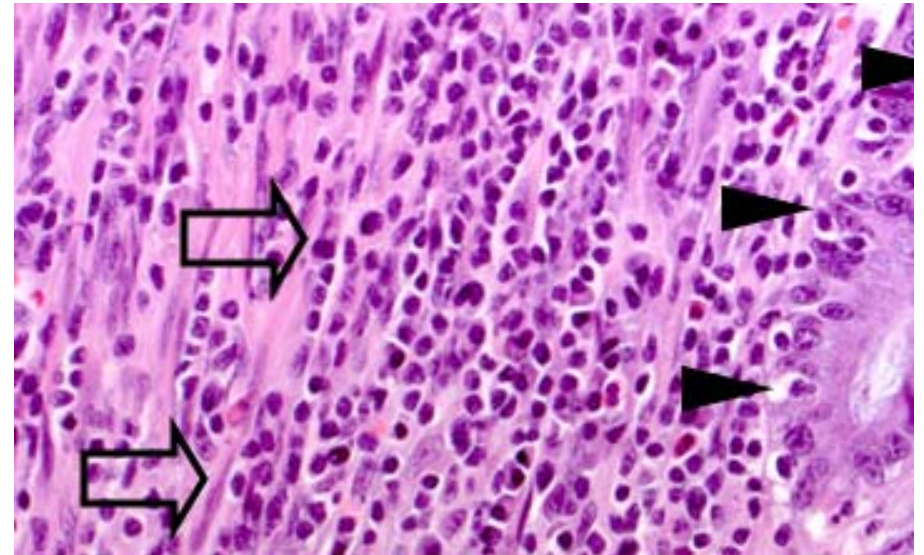
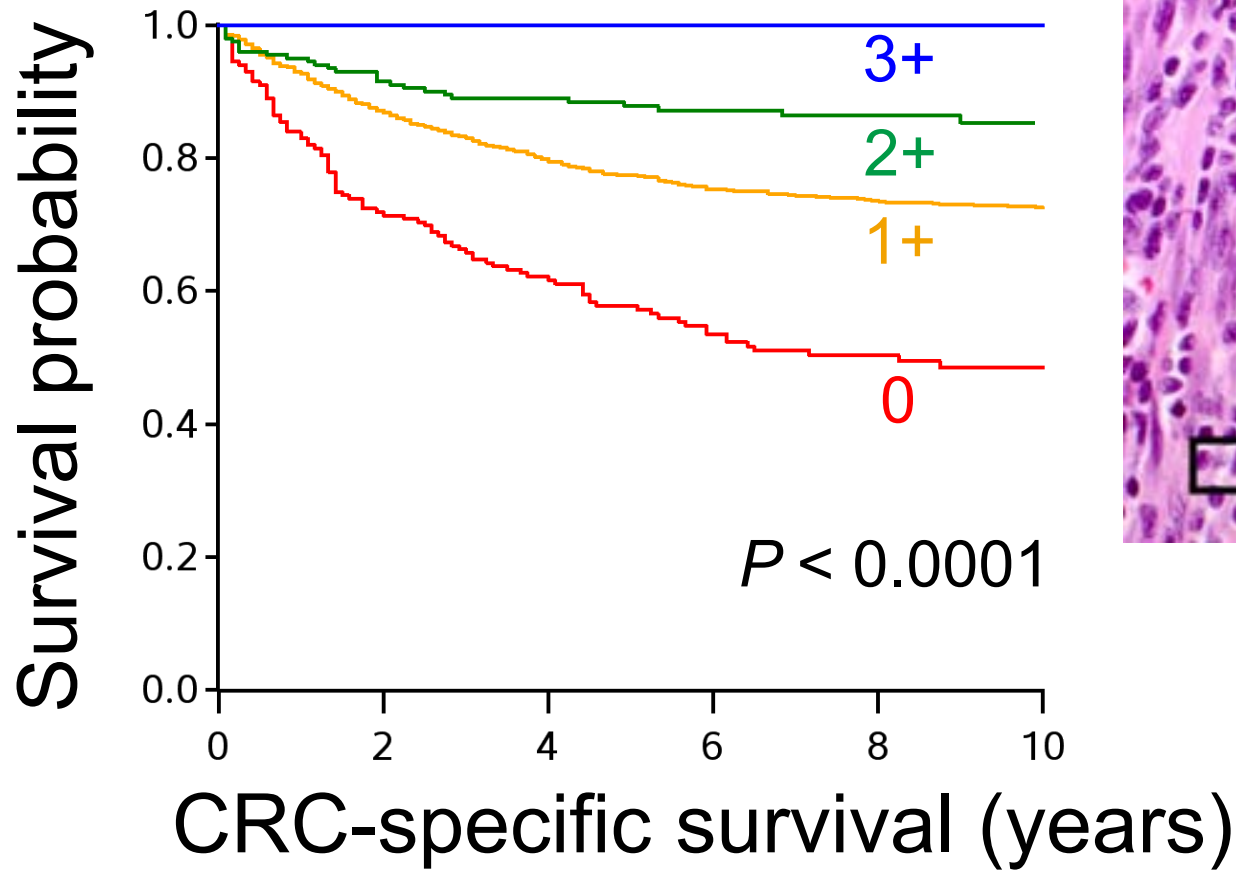


Tumor - Immune Interactions

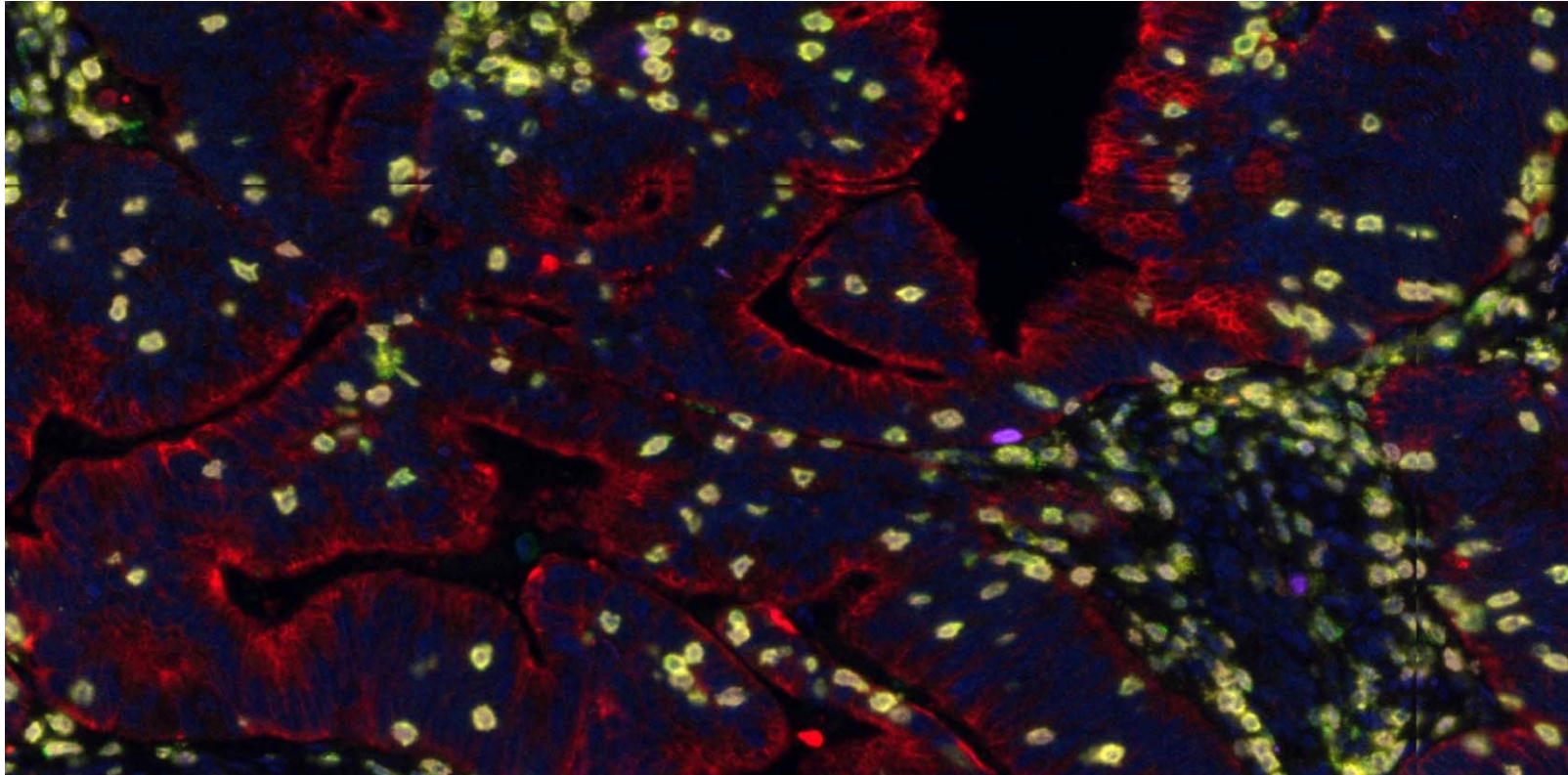


Masugi et al. Gut 2016

Immune cells in tumor microenvironment
= best prognostic biomarker
(why not clinical decision making?)



Multiplex immunofluorescence



CD3 (brown), CD4 (yellow), CD8 (purple), CD45RO
(green), FOXP3 (orange)

Borowsky, et al.

Immunology-MPE Studies

Why are there names of fields
(such as “epidemiology”)?

Colon has rich microbiota & immune tissue
Known risk (or protective) factors
Best model for immunology-MPE

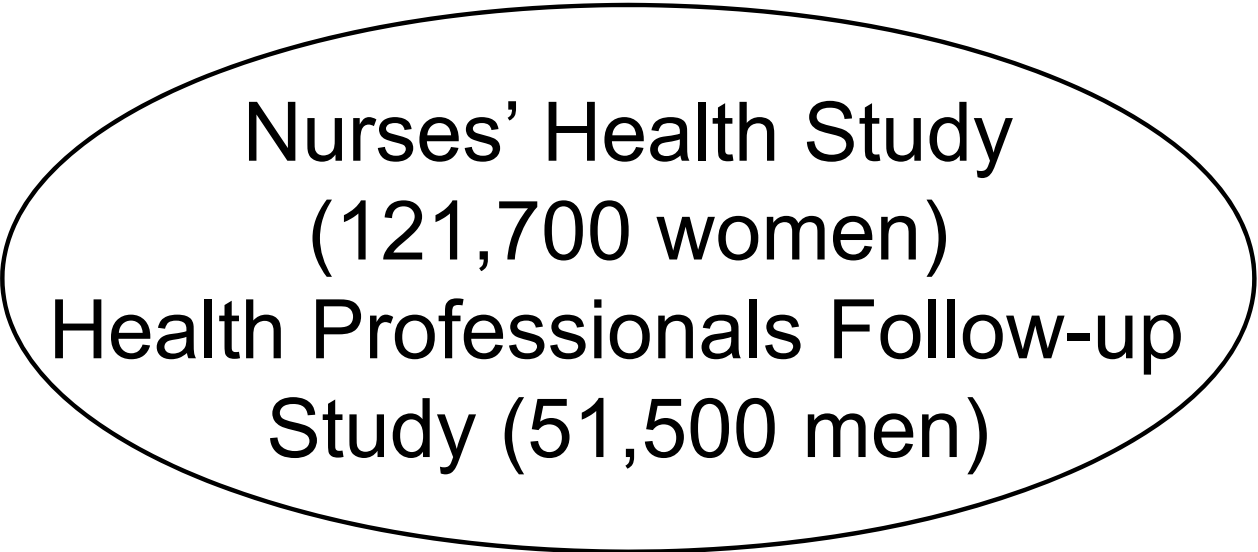


Prospective Cohort Studies

Nurses' Health Study (121,700 women)



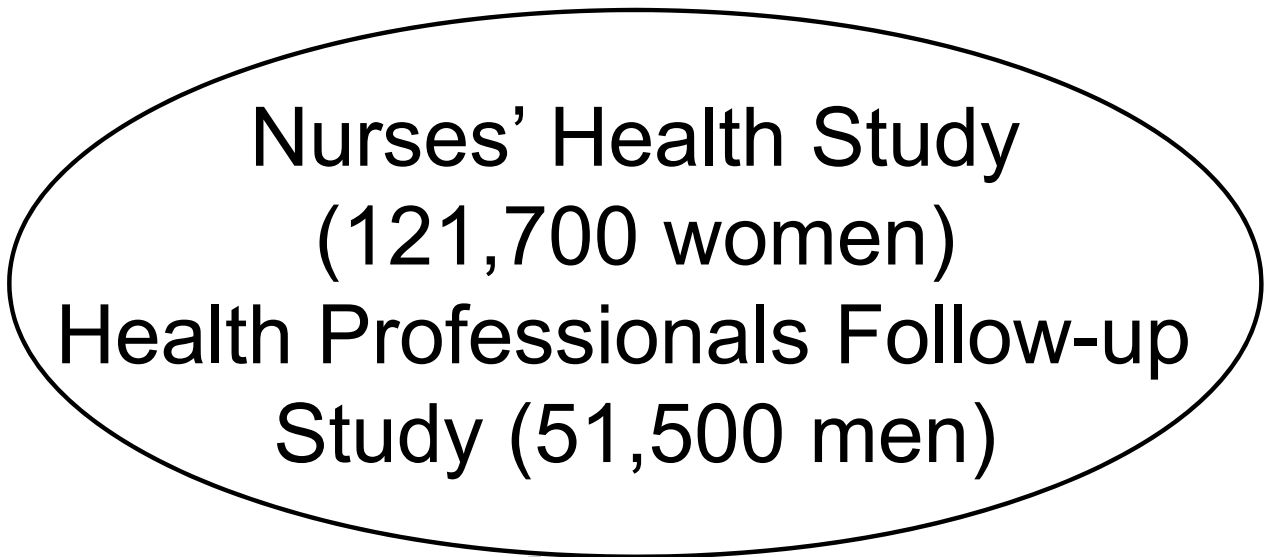
Health Professionals Follow-up Study
(51,500 men)



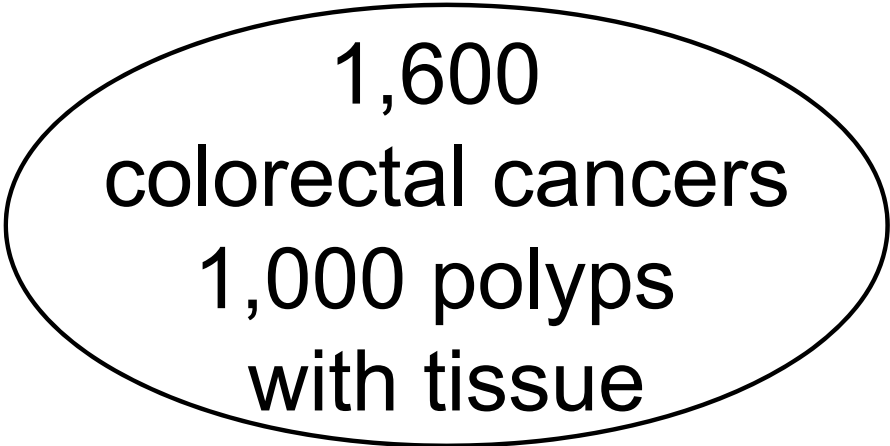
Nurses' Health Study
(121,700 women)

Health Professionals Follow-up
Study (51,500 men)

Diet, lifestyle,
environment,
genetics, plasma
metabolomics, etc.



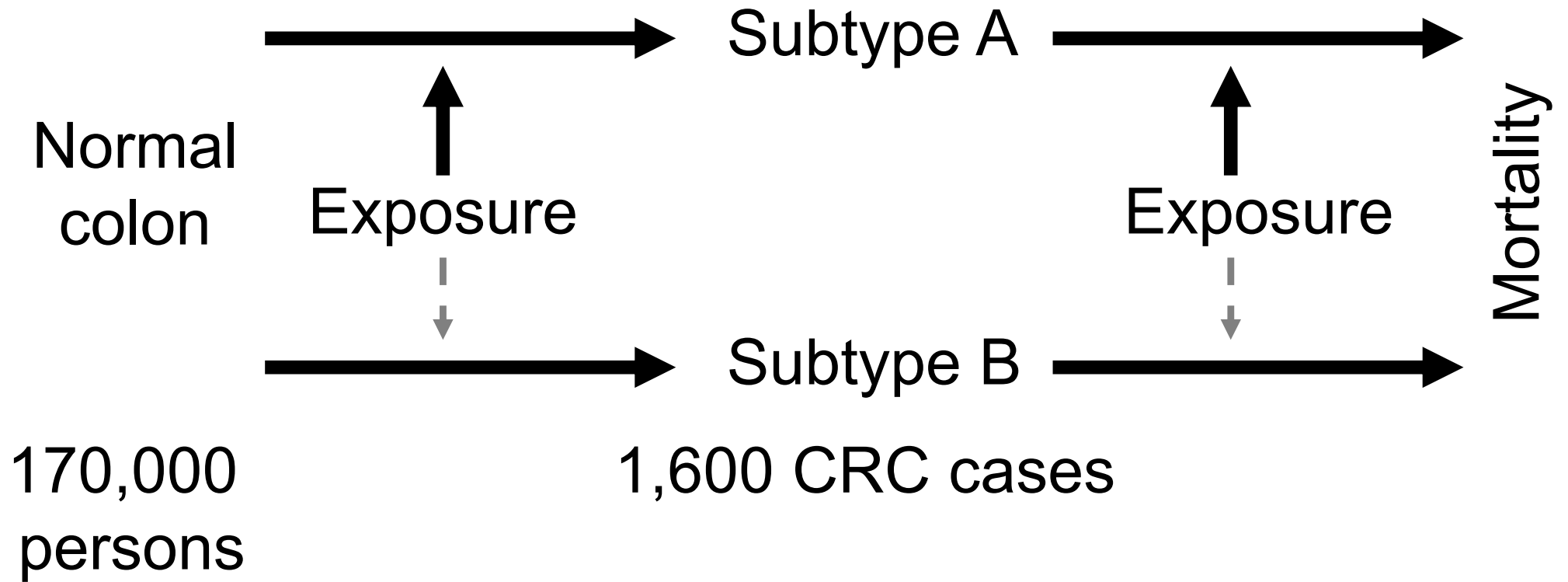
Diet, lifestyle,
environment,
genetics, plasma
metabolomics, etc.



**Molecular pathology
(whole exome sequencing,
RNA-sequencing)
Tissue microbiota
Immune cells**

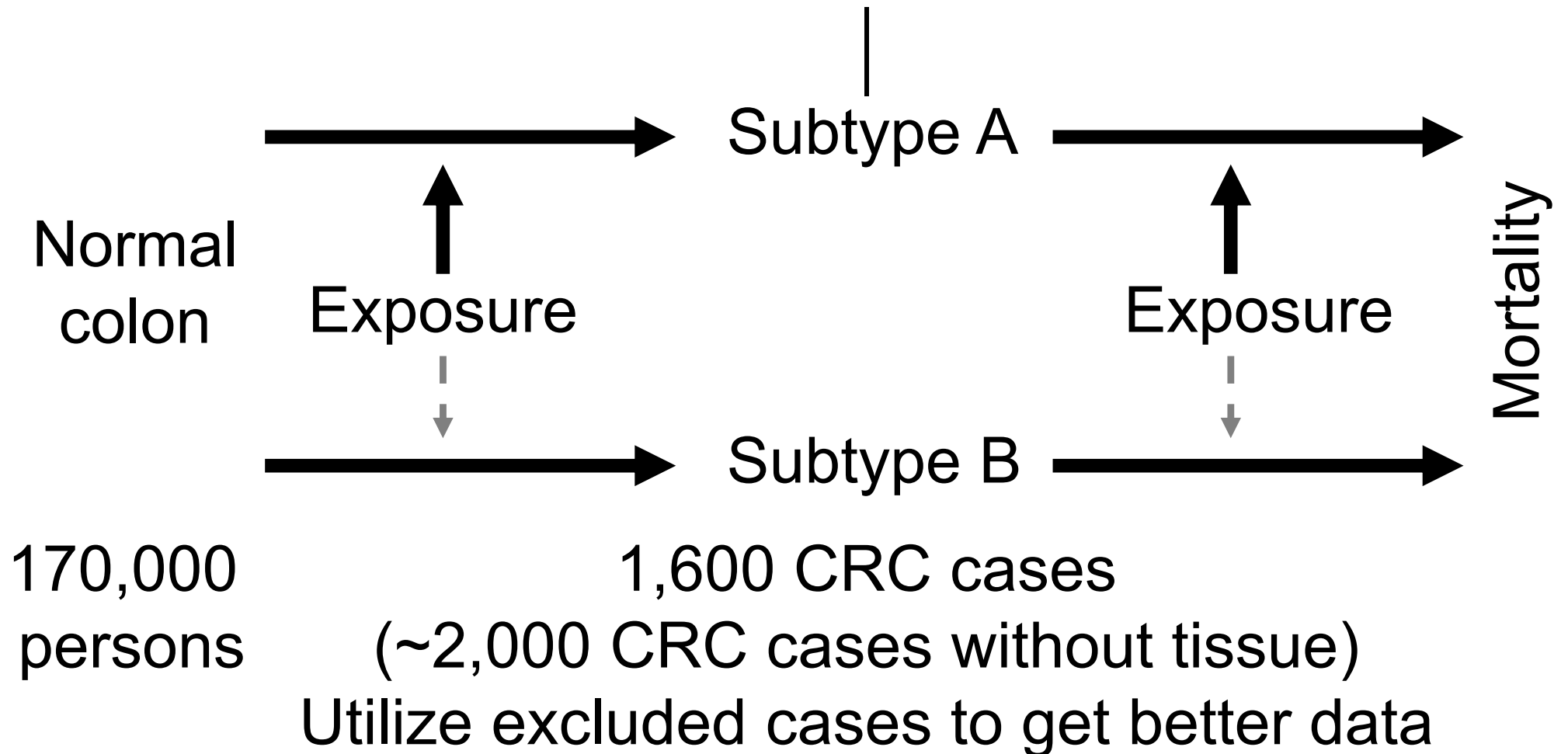
Mortality

MPE analyses

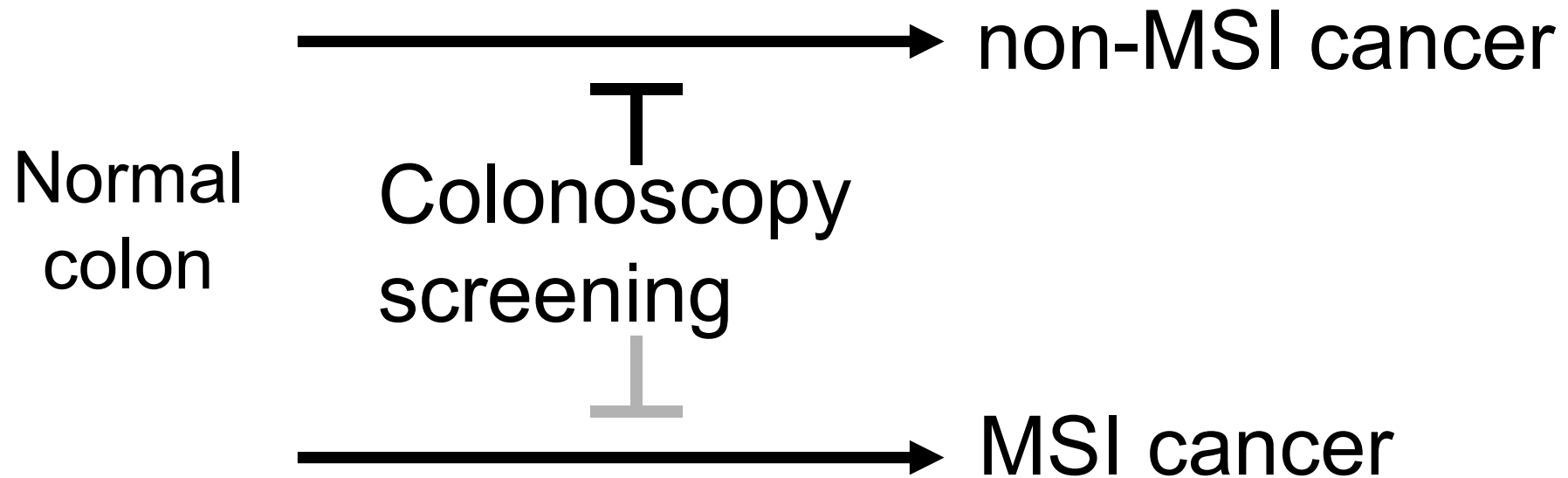


Hypothesis:

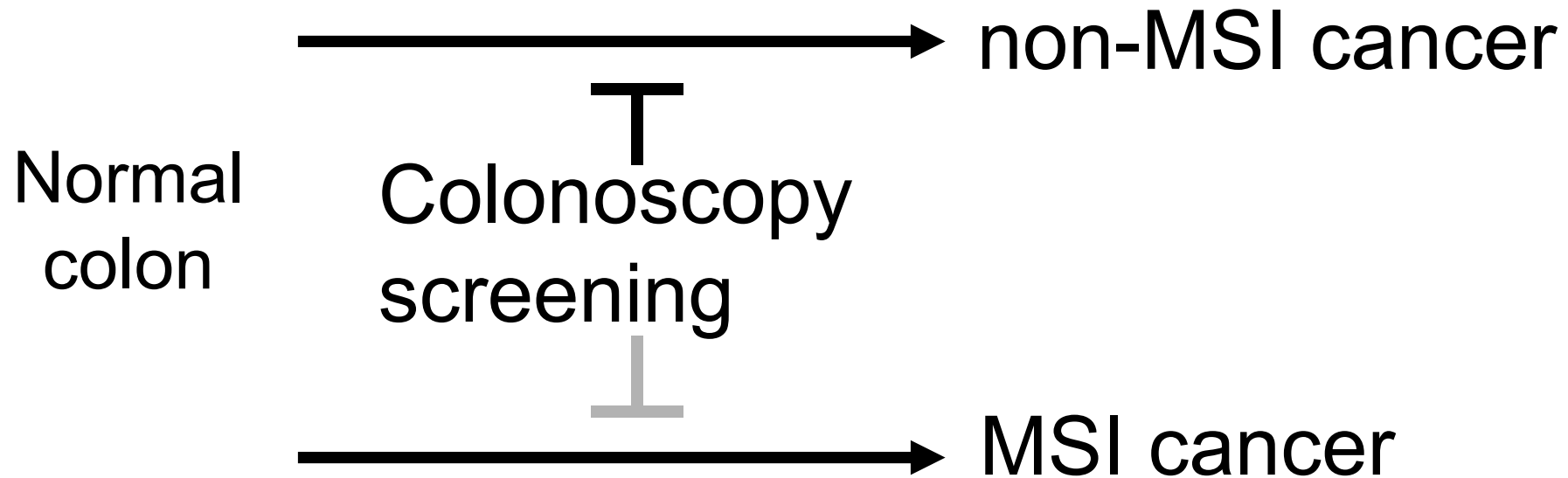
- (1) Changes caused by the exposure
- (2) Changes confer growth advantages



Preventive effect of colonoscopy differs by microsatellite instability (MSI) status



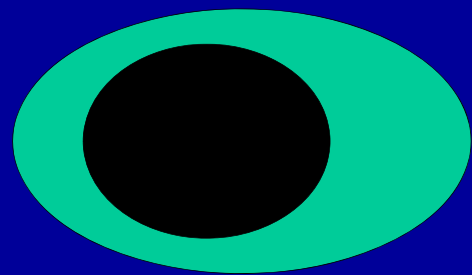
Preventive effect of colonoscopy differs by microsatellite instability (MSI) status



MPE can advance precision prevention
(smokers have higher risk for MSI cancer)

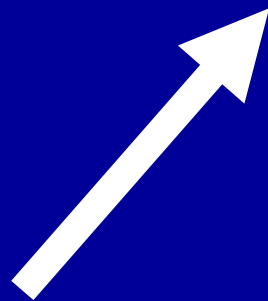
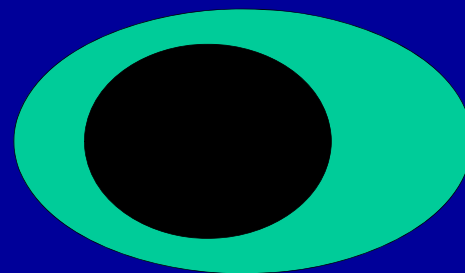
Marine ω -3 polyunsaturated fatty acids (rich in fish oil)

- (?) reduce CRC risk
- Marine ω -3 fatty acids can inhibit regulatory T cells \rightarrow stimulate effector T cells

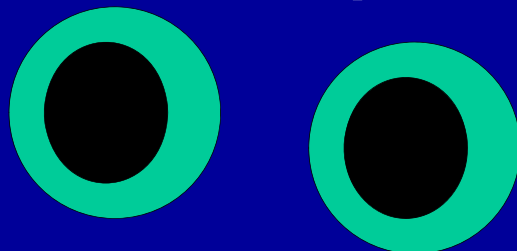


Tumor cells

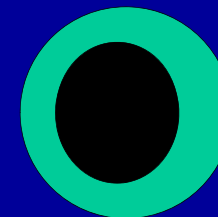
Mutated peptides
(neoantigens)

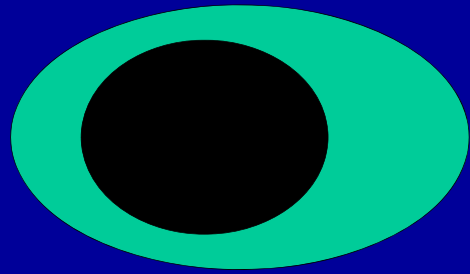


Immune response



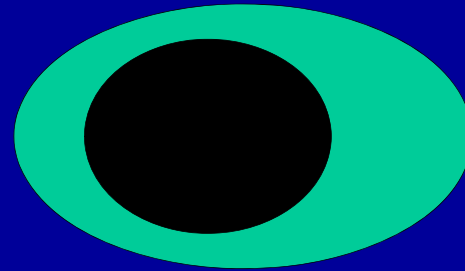
FOXP3+ Treg



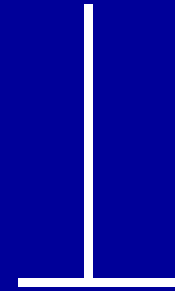
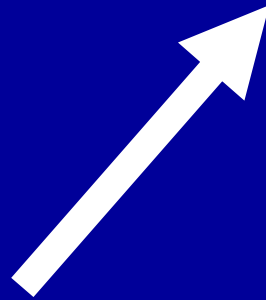


Tumor cells

Mutated peptides
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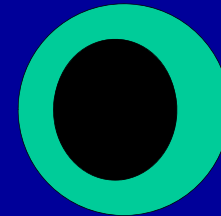
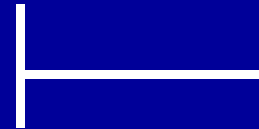
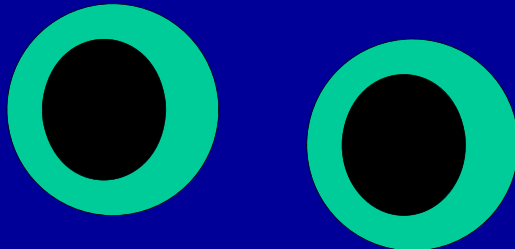


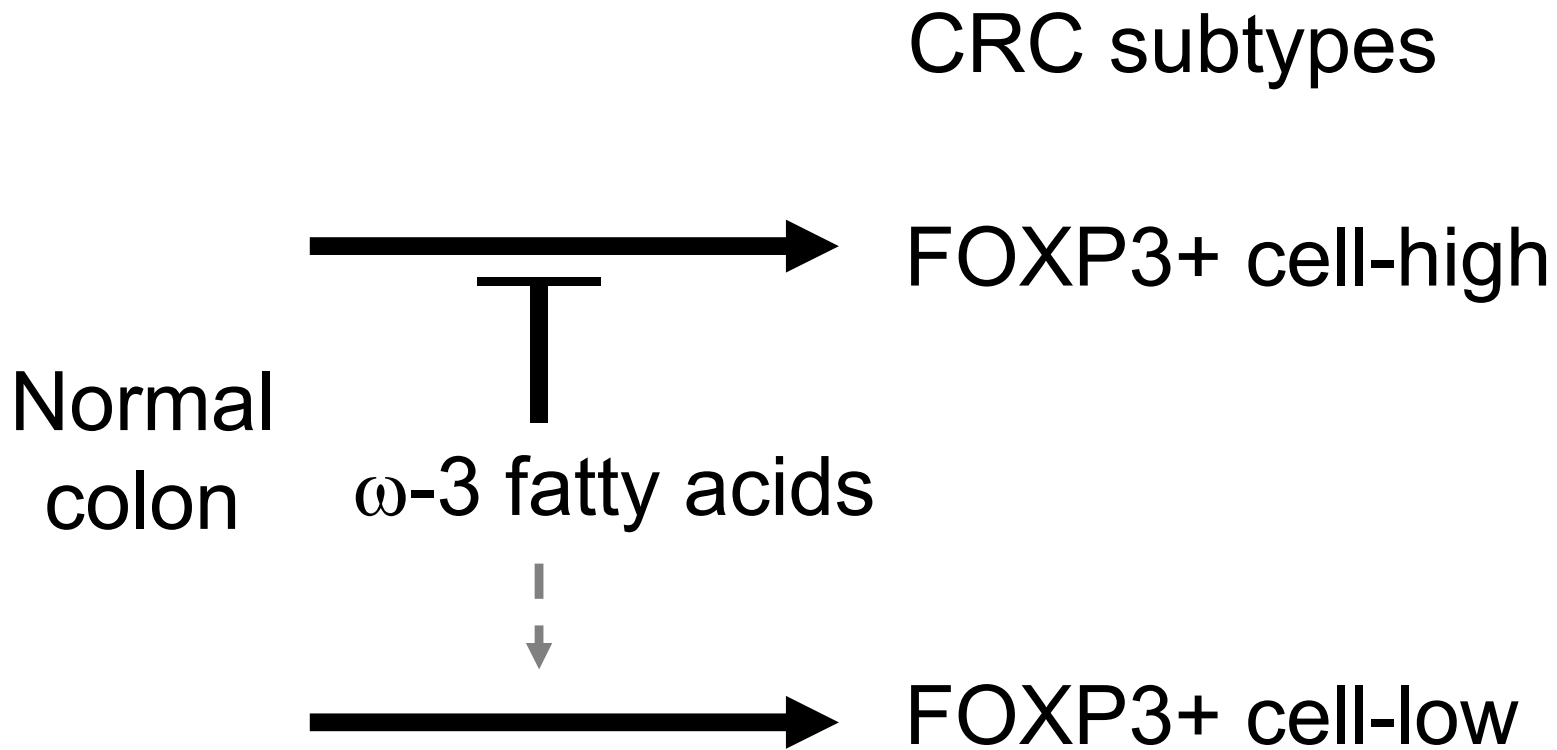
Marine ω -3
fatty acids

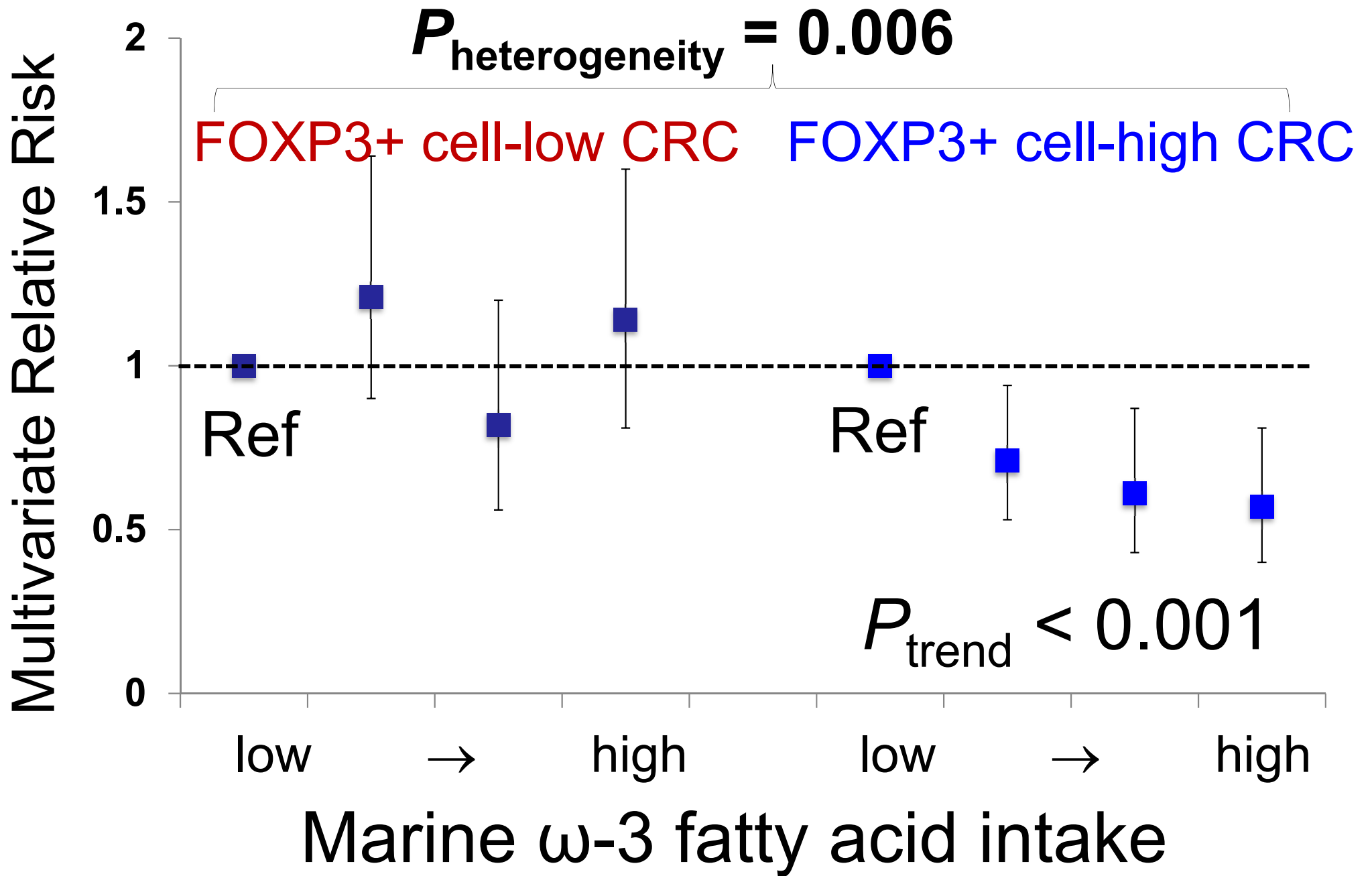


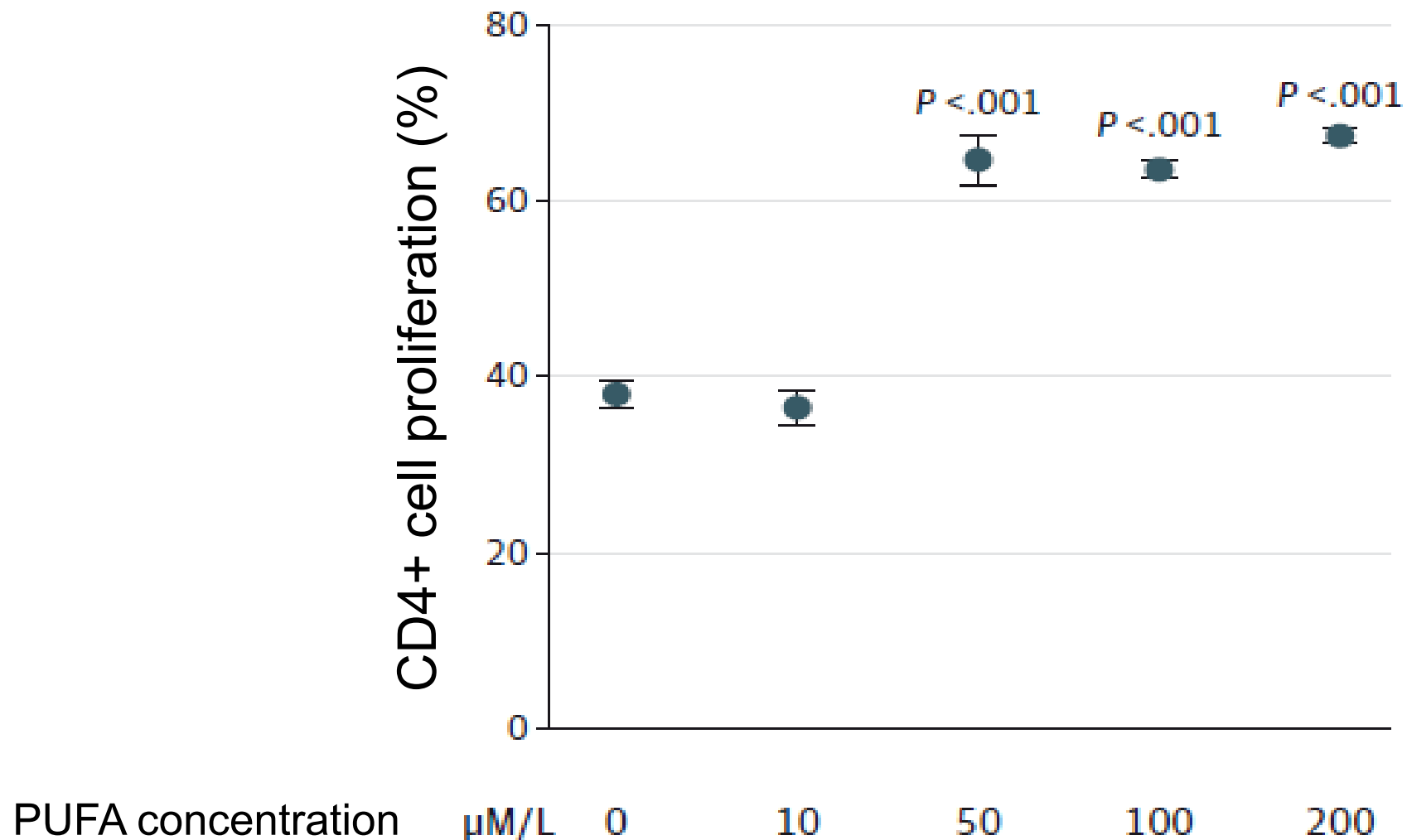
Immune response

FOXP3+ Treg



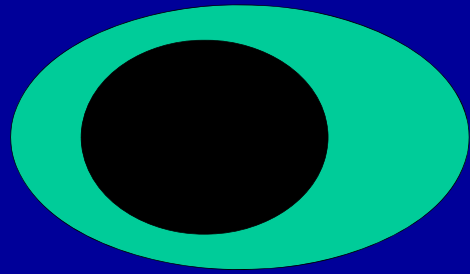






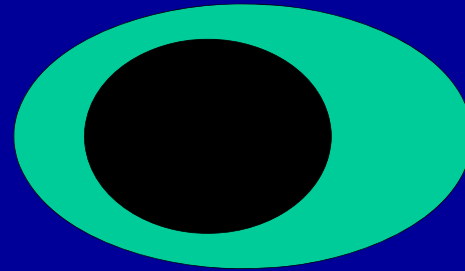
PUFA can reduce T-cell suppressive activity of FOXP3+ cell, leading to CD4+ T cell proliferation

Song et al. JAMA Oncol 2016

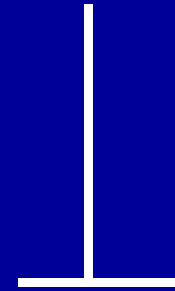
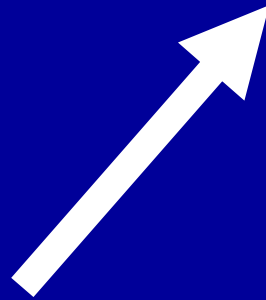


Tumor cells

Mutated peptides
(neoantigens)

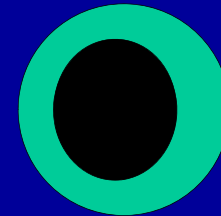
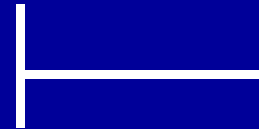
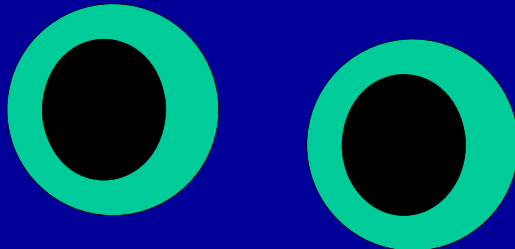


Marine ω -3
fatty acids



Immune response

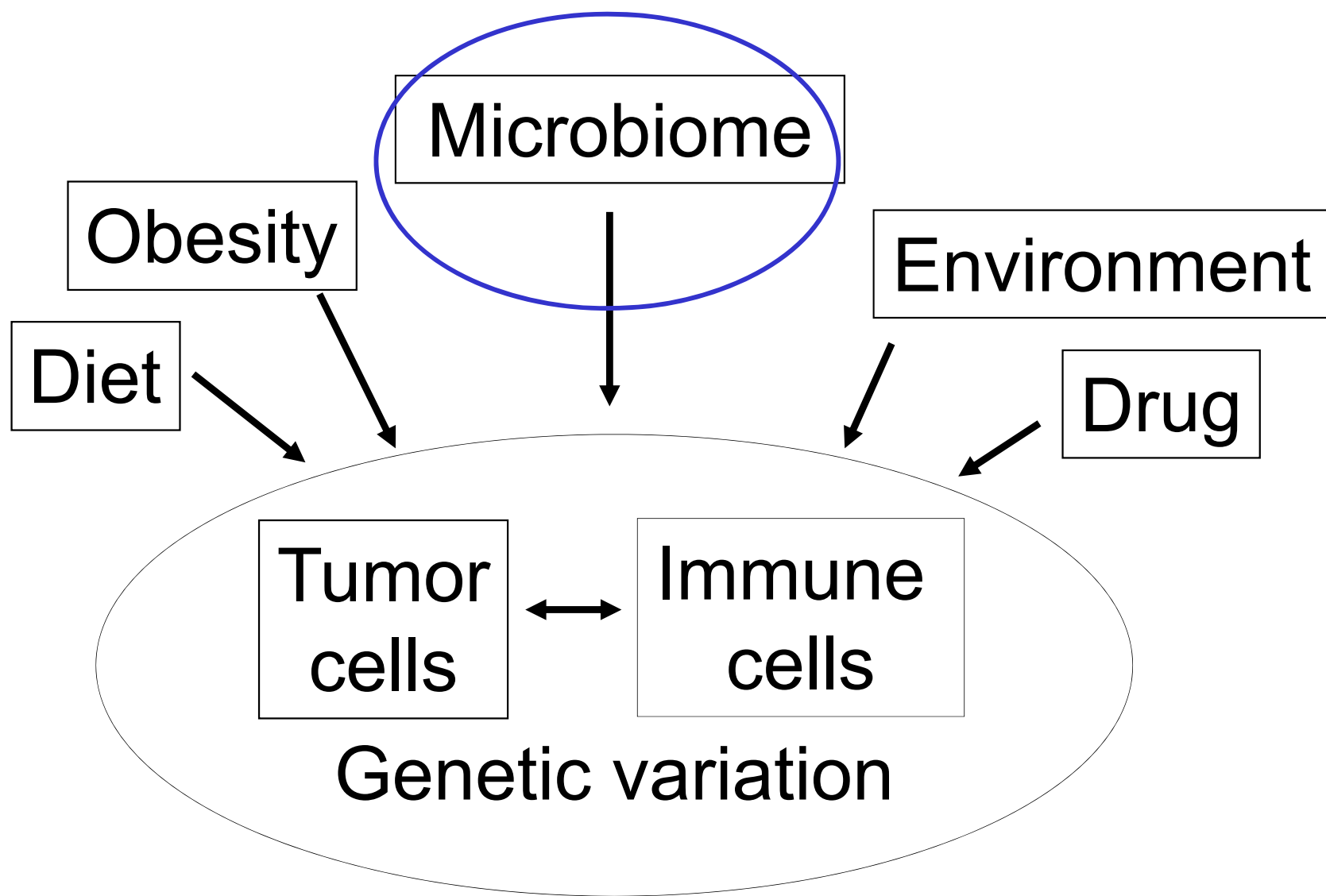
FOXP3+ Treg



Exposures (or risk factors) influence risk of CRC immune subtype

- Marine ω -3 PUFAs (Song. JAMA Oncol 2016)
- IBD risk SNP (Khalili. Carcinogenesis 2015)
- Vitamin D (Song. Gut 2016)
- Aspirin (Cao. Gastroenterology 2016)
- Inflammatory diet (Liu. Gastroenterology 2018)
- Smoking (Hamada. JNCI 2018)
- Calcium intake (Wang. Cancer Prev Res in press)

**Microbiology-MPE
(essential for
Immunology-MPE)**



Ogino et al. Nature Rev Clin Oncol 2011
Ogino et al. Gut 2018
Ogino et al. Lancet 2018

Challenges in microbiome research

- Which microorganism causes cancer?
- Experimental models have different microbiome and immune system
- We focus on tumor tissue microbiota

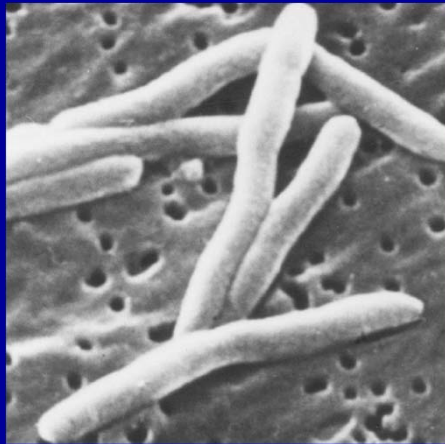
Fusobacterium nucleatum in CRC tissue

Immunosuppressive → lower T cells

Higher stage → shorter survival

MSI-high

Go with metastasis



Mima et al. JAMA Oncol 2015

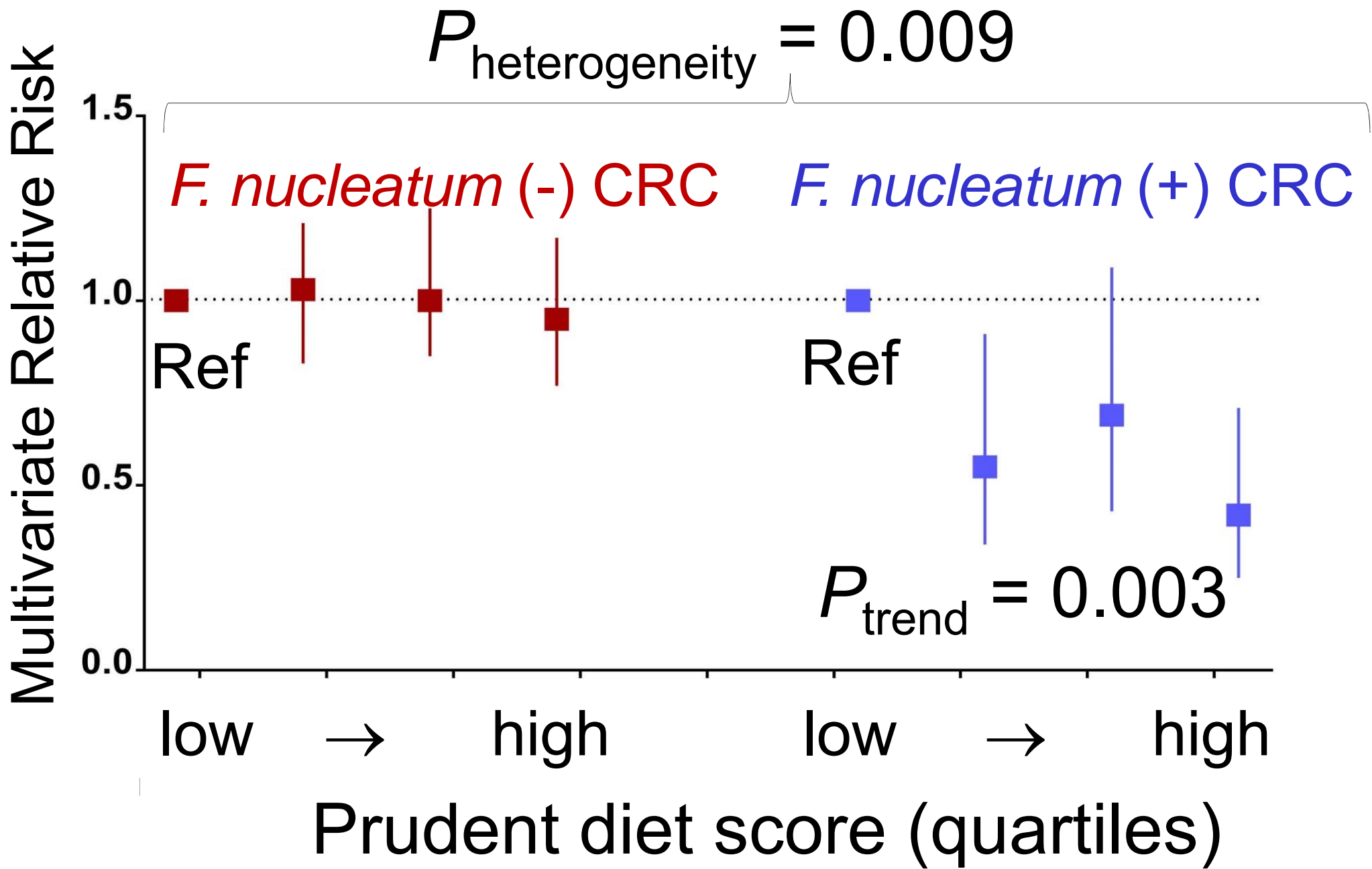
Mima et al. Gut 2016

Bullman et al. Science 2017

Diet → Gut microbiota → Cancer

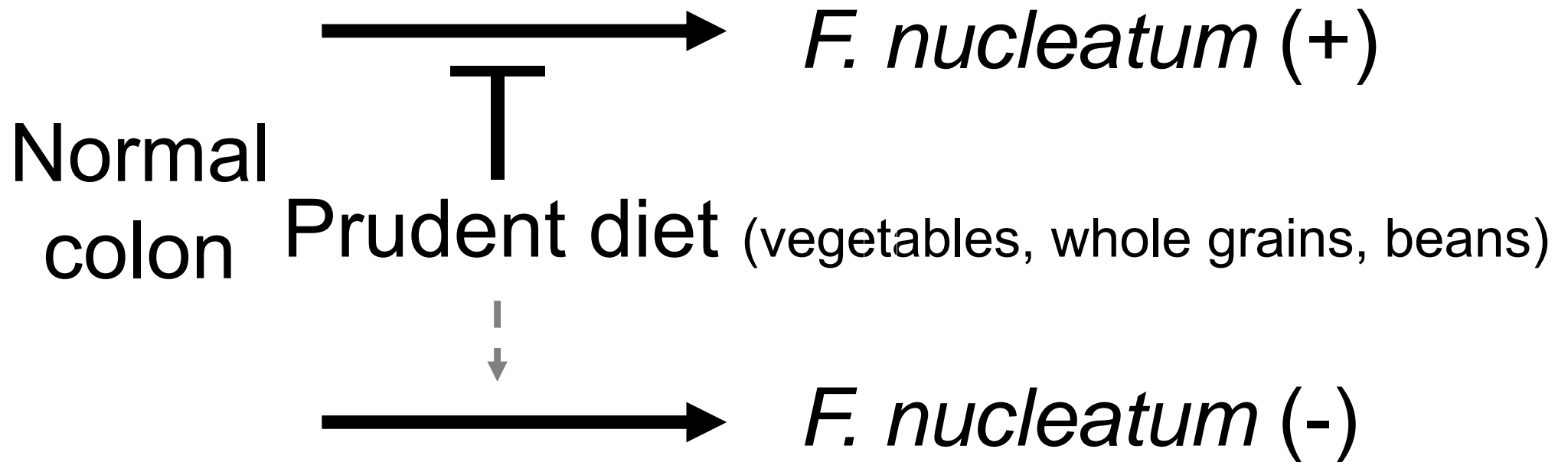
Diet → Gut microbiota → Cancer

Prudent diet (vegetables, whole grains, beans, fiber) → Good microbiota (↓ bad bacteria) —| *Fusobacterium nucleatum*(+) CRC



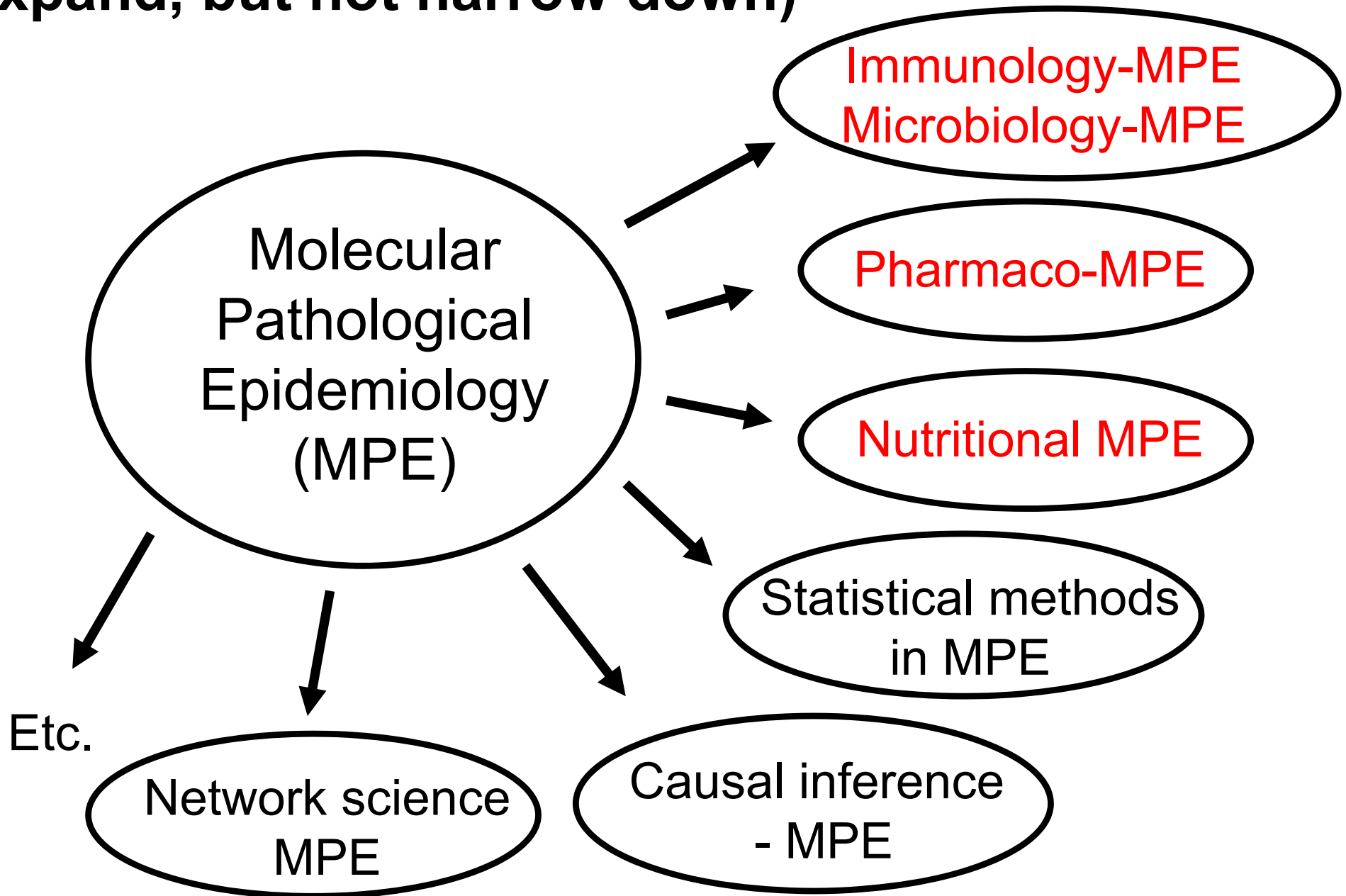
Prudent diet → microbiota → prevention

CRC subtypes



Mehta et al. JAMA Oncol 2017

MPE can change our concept on scientific fields (expand, but not narrow down)



**THE 5th INTERNATIONAL
MOLECULAR PATHOLOGICAL
EPIDEMIOLOGY (MPE) MEETING**

*Discuss Big Data Analysis,
and Think Big!*

June 2020, Boston, USA

Free registration
Open to public

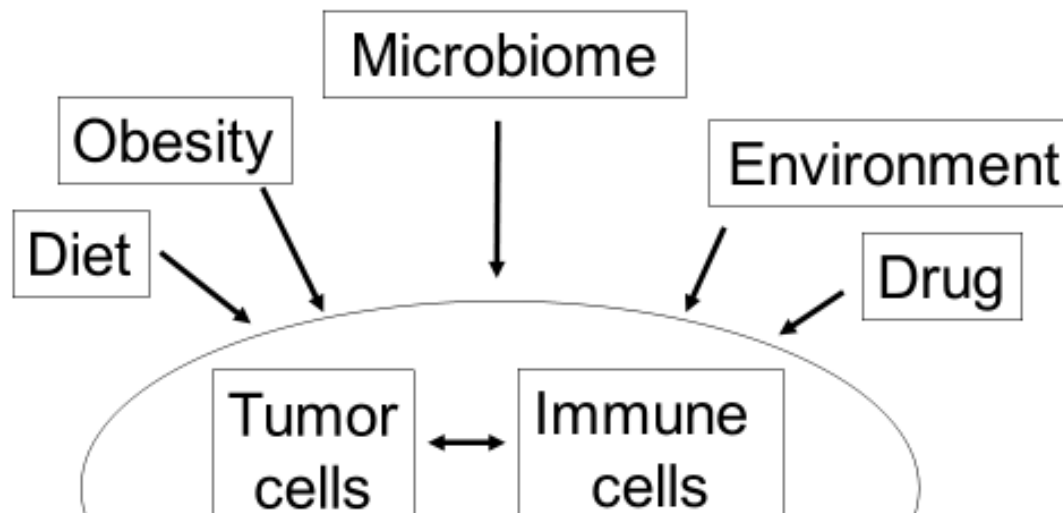
www.mpemeeting.org

Summary

- Immunology-MPE (Molecular Pathological Epidemiology) can provide new insights
 - Exposures can easily influence microbiota–tumor–immune interactions
 - Immunoprevention & therapy (using nutrients & lifestyle)
- Exposures influence immunotherapy
- MPE is making new frontiers
 - There are widely open opportunities!

Summary 2

- Let's do “immunology-MPE” and “microbiology-MPE” studies!



**Exposures can easily influence
tumor - immune interactions**

Ogino et al. Gut 2018

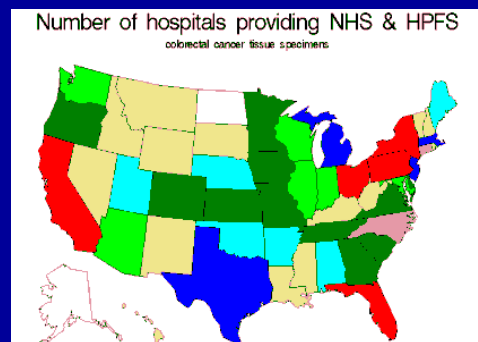
Ogino et al. Lancet 2018

Acknowledgements (I cannot list everyone)

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- Mass General Hospital
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- Fred Hutchinson CRC
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- UCLA / Parker Institute
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Acknowledgements #2

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- Japanese Society for Multidisciplinary Treatment of Cancer
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- Sara Vayrynen
- Tyler Twombly
- Melissa Zhao

MPE can change our concept on scientific fields (expand, but not narrow down)

