

Next generation sequencing in diagnostic laboratories: opportunities and challenges

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Marie Bashir Institute
for
Emerging
Infectious Diseases
&
Biosecurity











No conflict of interest to declare



We can sequence everything. Does it matter?

	Institute of Clinical Pathology	GENERAL ENQUIRIES: (02) 9845 6600	PATHOLOGY
and Medical Research		(02) 70 10 0000	REQUEST FORM
APA: Sydney West Area Health Service (SWA	HS) 1053 Westmead Hospital, Hawkesbury Rd, Westmead 2145	Result Enquiries: (02) 9845 8288	
Patient Details		Client Details	
Medical Record No.	Location Date of Birth Sex	Name	
1130676	RNSH 4/11/39 M	g M PALMS - MICROBIOLOGY	
Last Name	First Name	PATHNET Code Phone	Fax
		0512	94375746
Street			
		Tests Requested / Specimen Type or	Site
36		☐ URGENT ☐ Phone ☐ Fa	ax
Water Company of the			
Clinical Information (Include	drugs/therapy/travel that might affect results)		
☐ Fasting ☐ Random	Pregnant	·	sequencing.
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	13-Feb-17 NS1130676	*	SRM 20MAR 15:41



Disruptive technology: NGS platforms

Platform	Output (Gb)	Read length (bp)	Reads (x10 ⁶)	Running time	Error rate
Illumina MiniSeq	0.6-7.5	2 x 150	25	4-24 h	0.1%
Illumina MiSeq	0.3-15	2 x 300	25	5-55 h	
Illumina NextSeq	20-120	2 x 150	130/400	12-32 h	
Illumina HiSeq	125-700	2 x 150	2500	1-6 days	
Ion PGM	0.03-2	200-400	0.4-5.5	2-7 h	1%
Ion S5/S5 XL	0.6-15	200-400	3-80	3-18 h	
Oxford Nanopore MinION	21-42	Up to 300,000	2.2-4.4	1min-48 h	4-12%
PacBio RSII	0.5-1	Up to 60,000	55,000	30min-4 h	?
PacBio Sequel	0.75-1.25	Up to 60,000	370,000	30min-6 h	



Consensus

Sequence

Relationship between quality and coverage depth

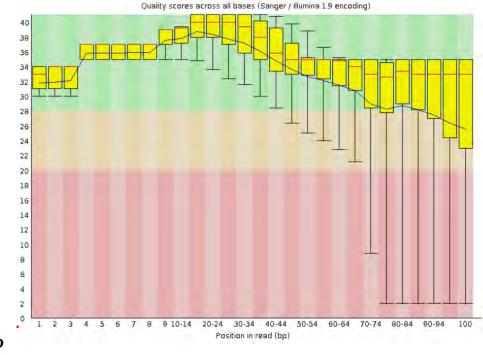
Coverage depth = Number of times a particular base pair is covered by sequenced reads

ATGGCATTGCAA
TGGCATTGCAATTTG
AGATGGTATTG
Reads GATGGCATTGCAA
GCATTGCAATTTGAC
ATGGCATTGCAATTT
AGATGGTATTGCAATTTG

AGATGGCATTGCAATTTGAC

x7

 $Q = -10\log_{10} P$



Phred score	Prob of incorrect base	Base call accuracy
10	1 in 10	90%
20	1 in 100	99%
30	1 in 1000	99.9%
40	1 in 10000	99.99%
50	1 in 100000	99.999%

Dallman et al. Microb Genet 2016

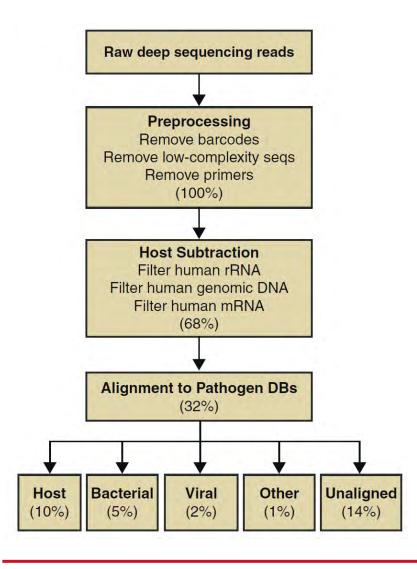


Genomics Paradigms

- Infectious disease genomics has been recognised as a subspecialty by NSW Health Pathology
- Applications of NGS
 - Pathogen discovery
 - Pathogen identification and characterization [e.g., detection of drug resistance associated substitutions (RAS)]
 - Public health surveillance
- Outdated databases and RAS catalogues can be dangerous for business

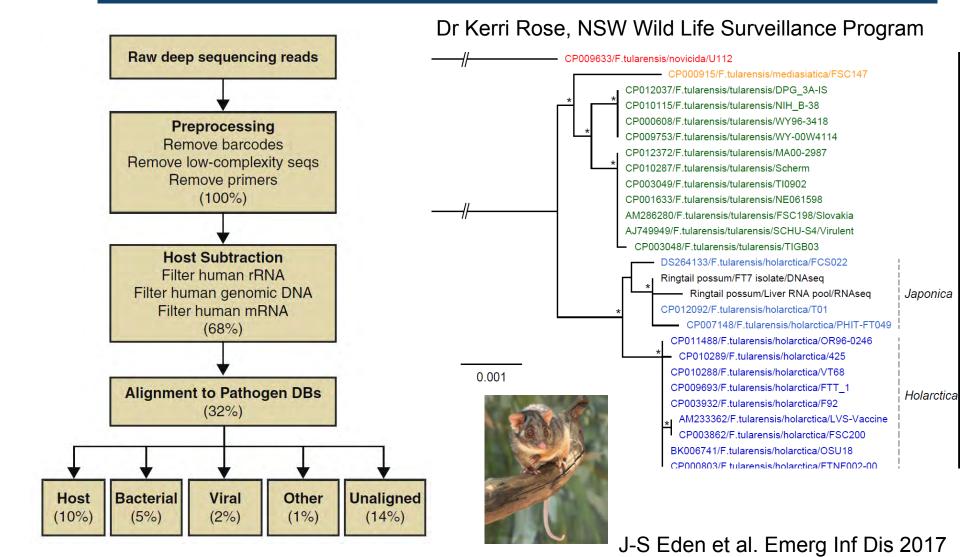


Power of unbiased pathogen discovery



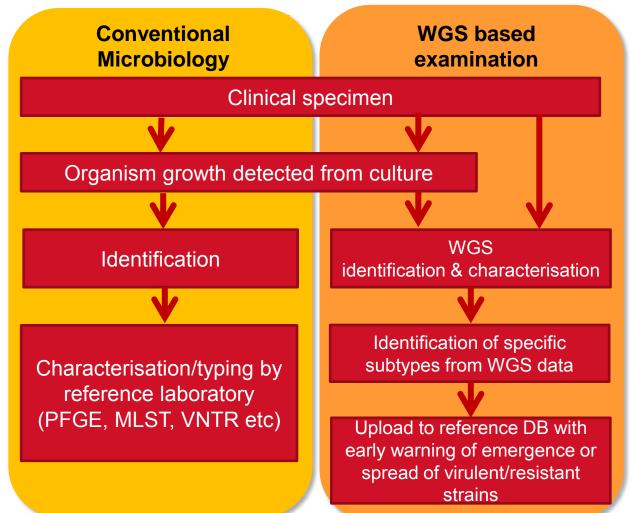


Power of unbiased pathogen discovery





Pathogen Identification: From Pasteur to Watson







Genome sequencing as a lab automation

Modernising Medical Microbiology





CRyPTIC Project

REHAB: The Environmental Resistome

Infections in Oxfordshire Research Database

CRyPTIC Project









NSW Health Pathogen Genomics Partnership



Marie Bashir Institute for Emerging Infectious Diseases and Biosecurity (Tania Sorrell, Alicia Arnott)

Centre for Infectious Diseases and Microbiology-Public Health (Jon Iredell, Lyn Gilbert)

Pathology West-ICPMR (Dominic Dwyer, Sharon Chen, Peter Howard)
NSW Health (Vicky Sheppeard, Kirsty Hope, Chris Lowbridge)















NSW Health TRG Translating Pathogen Genomics into Improved Public Health Outcomes: Prospective evaluation of the effectiveness of genome sequencing-guided investigation of outbreaks



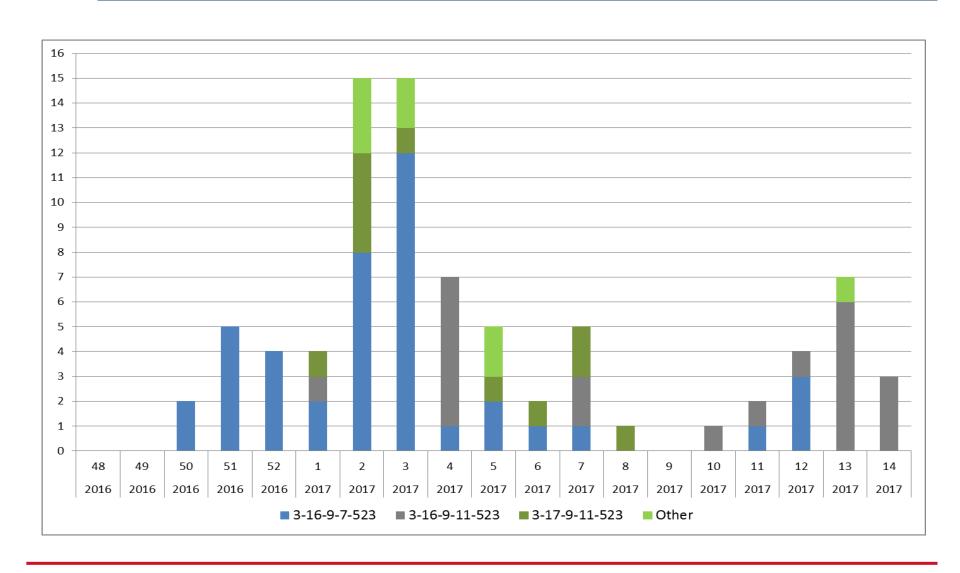








Genomics-guided laboratory surveillance





Portable sequencing of Ebola outbreaks

LETTER

doi:10.1038/nature16996

Real-time, portable genome sequencing for Ebola surveillance

Joshua Quick¹*, Nicholas J. Loman¹*, Sophie Duraffour²,³*, Jared T. Simpson⁴,⁵*, Ettore Joseph Akoi Bore², Raymond Koundouno², Gytis Dudas³, Amy Mikhail², Nobila Ouédra Amadou Bah²,¹¹, Jonathan H. J. Baum²,³, Beate Becker-Ziaja²,³, Jan Peter Boettcher²,¹², N Álvaro Camino-Sánchez², Lisa L. Carter²,¹³, Juliane Doerrbecker²,³, Theresa Enkirch²,¹⁴, Nicole Hetzelt²,¹², Julia Hinzmann²,¹², Tobias Holm²,³, Liana Eleni Kafetzopoulou²,¹¹6, Mic Eeva Kuisma²,¹¹0, Christopher H. Logue²,¹₀, Antonio Mazzarelli²,¹¹9, Sarah Meisel²,³, Marc Didier Ngabo²,¹¹0, Katja Nitzsche²,³, Elisa Pallasch²,³, Livia Victoria Patrono²,³, Jasmine P. Natasha Y. Rickett²,¹¹5,²³, Andreas Sachse²,¹², Katrin Singethan²,²²⁴, Inès Vitoriano²,¹¹0, Rah Elsa G. Zekeng²,¹¹5,²³, Trina Racine², Alexander Bello², Amadou Alpha Sall²6, Ousmane N'Faly Magassouba², Cecelia V. Williams²,²²,², Victoria Amburgey²,²², Linda Winona²,²², Frank Washington²,³, Vanessa Monteil³, Marine Jourdain³, Marion Bererd³, Alimou Ca Abdoulaye Ciarra³⁴, Yacouba Savane³⁴, Raymond Bernard Pallawo³⁴, Giovanna Jaramillo Isabelle Roger³⁴, Christopher J. Williams6,³, Facinet Yattara¹¹, Kuiama Lewandowski¹0, Ja Daniel J. Turner³, Georgios Pollakis¹, Sa, Julian A. Hiscox¹, David A. Matthews⁴0, Mattl Andrew McD. Johnston⁴1, Duncan Wilson⁴4, Emma Hutley⁴2, Erasmus Smir⁴3, Antonino I. Kilian Stoecker²,⁴4, Erna Fleischmann²,⁴4, Martin Gabriel²,³, Simon A. Weller³8, Lamine K. Sakoba Keita¹, Andrew Rambaut8,⁴6,⁴7, Pierre Formenty³4, Stephan Günther²,³ & Miles W



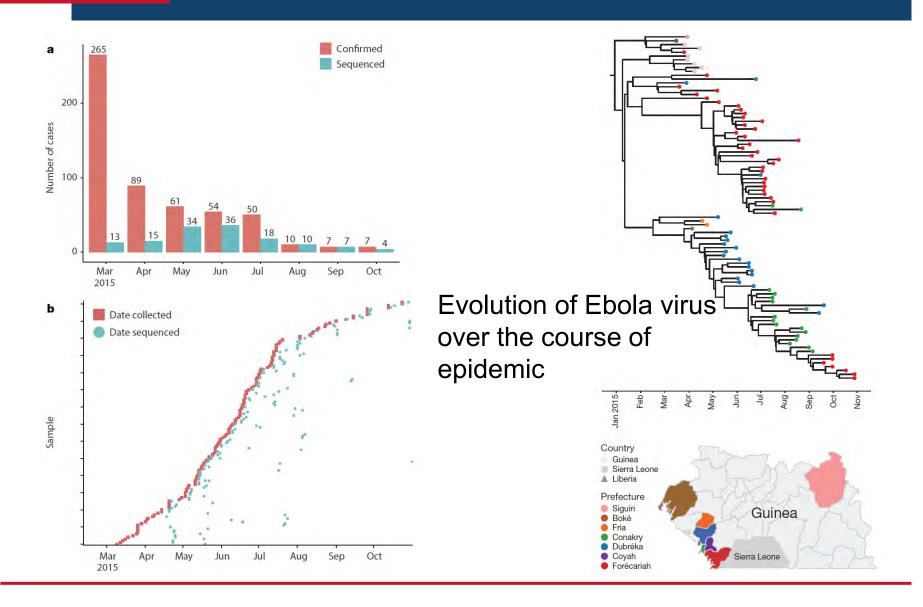






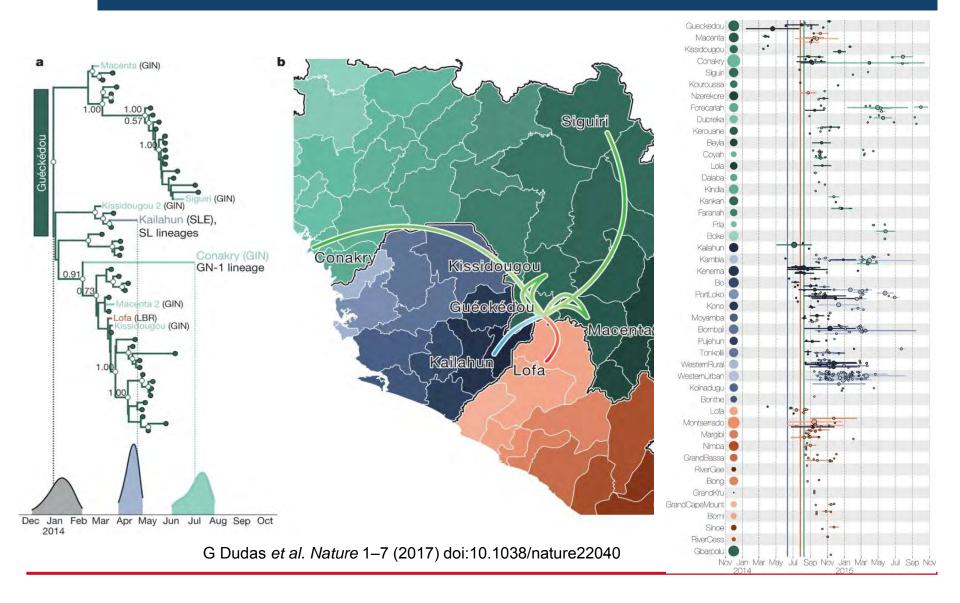


Monitoring Ebola outbreaks





Temporal phylogeny and EBOV dispersal events





Good Laboratory Practice: 'Wet lab' NGS

NA extraction

Library preparation

Sequencing

Data analysis

Picogreen against
DNA standard (DNA normalisation protocol)

Measure quantity and cell content



Good Laboratory Practice: 'Wet lab' NGS

NA extraction

Library preparation

Sequencing

Data analysis

Picogreen against
DNA standard (DNA normalisation protocol)

Fragmentation of input NA

PCR amplification and clean-up

Library normalisation and quantPCR

Measure quantity and cell content

Check fragment size distribution

Confirm amplification

Quantify library concentration

Fewer QC steps required

as protocols being streamlined, less sample-sample variability and fewer purification steps



FDA clearance of sequencing platforms as Class II Exempt devices



Good Laboratory Practice: 'Wet lab' NGS

NA extraction

Library preparation

Sequencing

Data analysis

Picogreen against DNA standard (DNA normalisation protocol)

Fragmentation of input NA

PCR amplification and clean-up

Library normalisation and quantPCR Measure quantity and cell content

Check fragment size distribution

Confirm amplification

Organism	Kappa (pM)		
	Optimal	Pass	Fail
Mycobacterium	500	60	<30
Salmonella	1000	300	<150
Staphylococcus	1000	500	<300

Fewer QC steps required

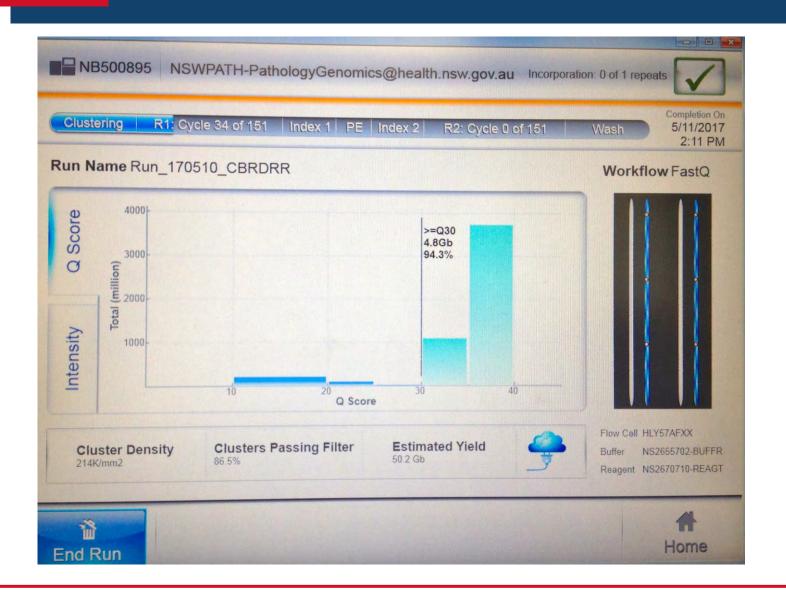
as protocols being streamlined, less sample-sample variability and fewer purification steps



FDA clearance of sequencing platforms as Class II Exempt devices



Assess sequencing run metrics





Monitoring Q30

Q30 (i.e. 99.9% base call accuracy) values for TRG sequencing



Illumina requirement



Good Laboratory Practice: 'Dry lab' NGS

Primary analysis

Base calling
Data trimming

Read length, % reads with ~Q30 or above (e.g. FastQC) (performance specifications established by manufacturer)

FASTQ

Secondary analysis

De-multiplexing
Alignment [to a reference]
Assembly
Id of sequence variants

N50

No of reads mapped to reference Coverage % of SNPs in clusters Multiplicity and parsimony BAM and VCF files

Tertiary analysis

Annotation
Filtering and classification
Reporting and retention of
lab results

% of intact MLST genes
Phylogenetic tree shapes
Concordance among prediction
programs
Credentialing of pipelines
Concordance among labs in PT

'Clinicalgrade' VCF



Summary

	[Standard] Genomics	Pathogen discovery (RNASeq)
Pre-processing	Genomic DNA extraction & library prep	Additional host DNA depletion & microbial DNA enrichment
NGS output and TAT	1-2 GB 26-30 h	40 GB 14 days
Pathogen/host reads ratio	Low	High
Taxonomic accuracy	Species and subtypes	Species
Differentiation of virulent/MDR strains	+	+/-
Detection of point- source outbreaks, estimation of transmission pathways	+	?

Thank You!

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