

# Mathematical and Computational Biology In Drug Discovery (2024)

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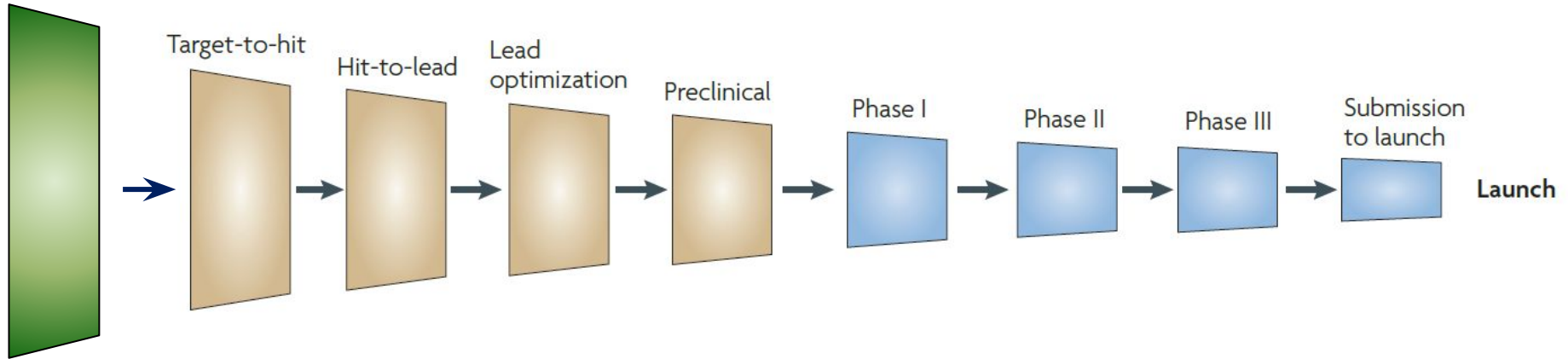
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# Administrivia

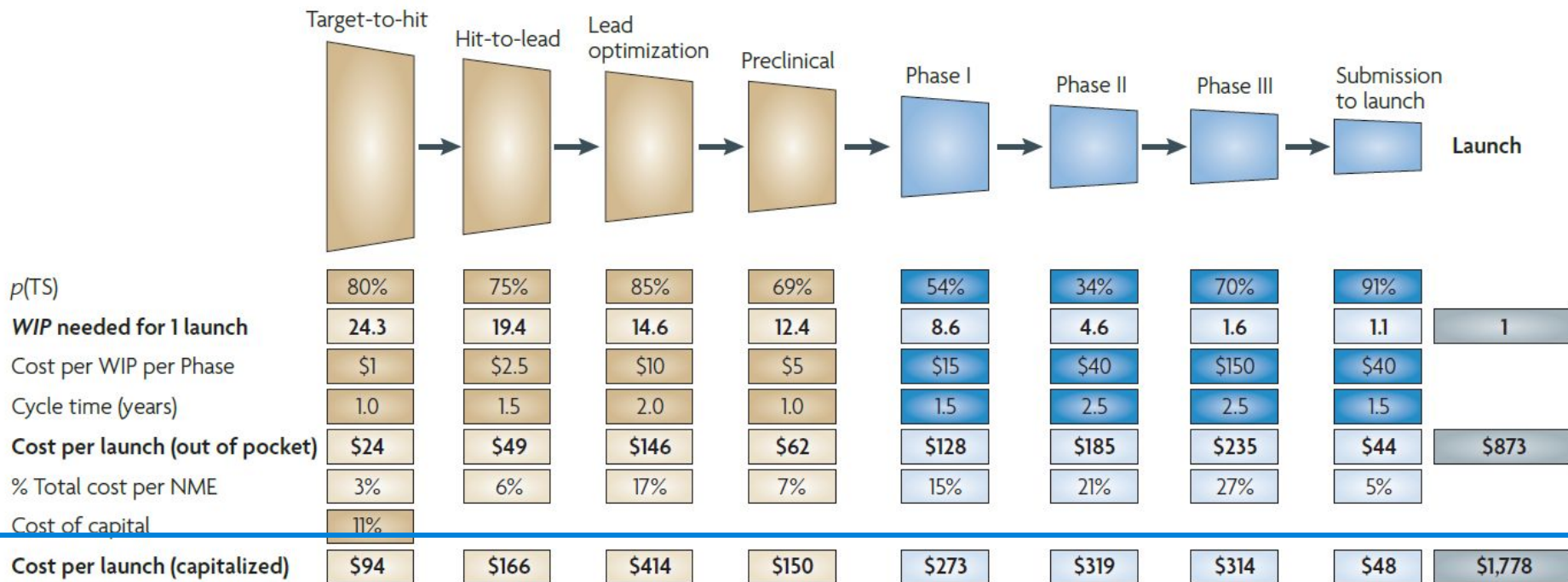
- Please fill [the pre-course survey](#).
- Grades are given by participation (50%) and offline activities (50%).
- I hope the course is a seminar more than a lecture: share your question and let's discuss!
- **Any more questions?**

# A linear view of drug discovery

Target identification & assessment

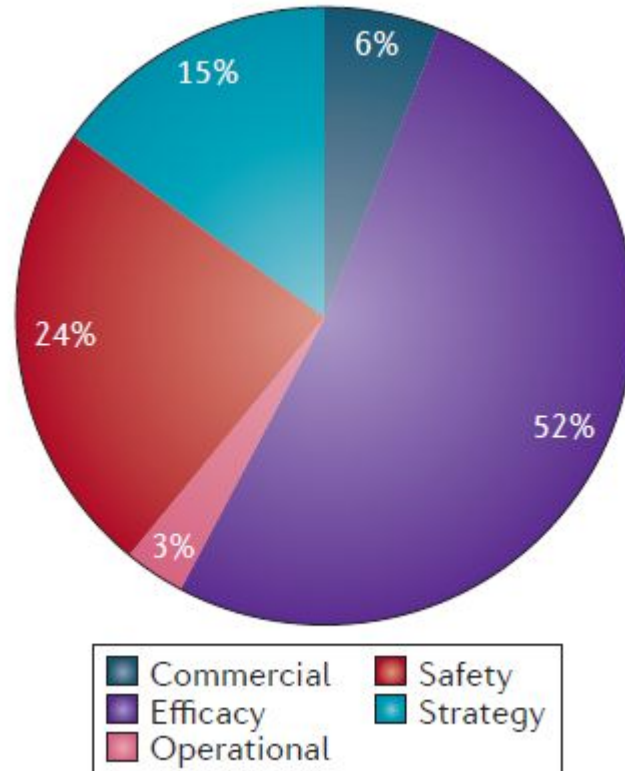


# Discussion: conclusions from the figures?

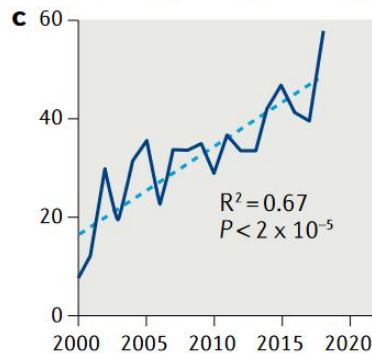
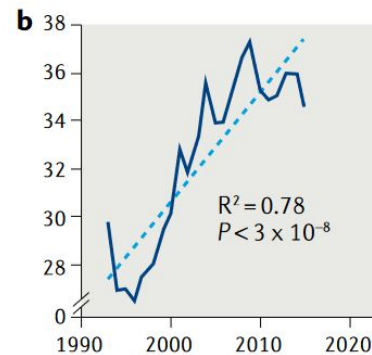
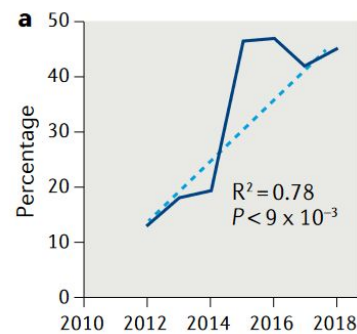
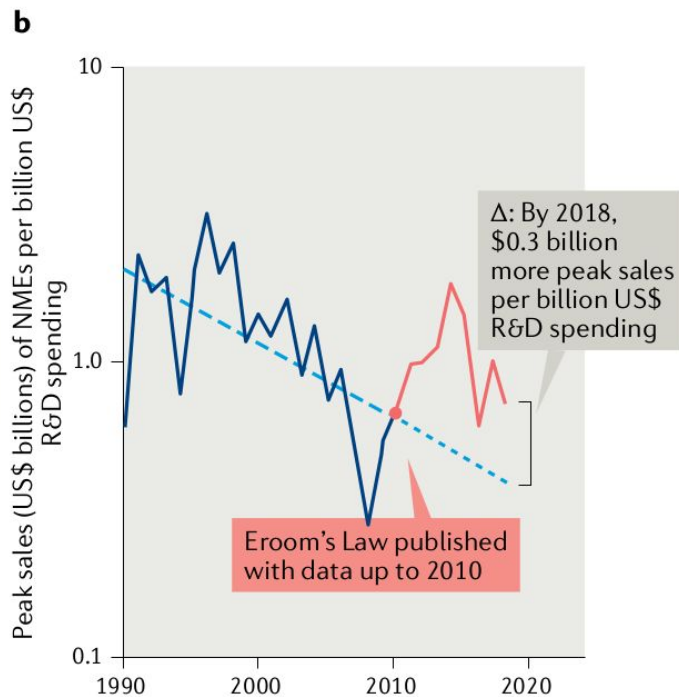
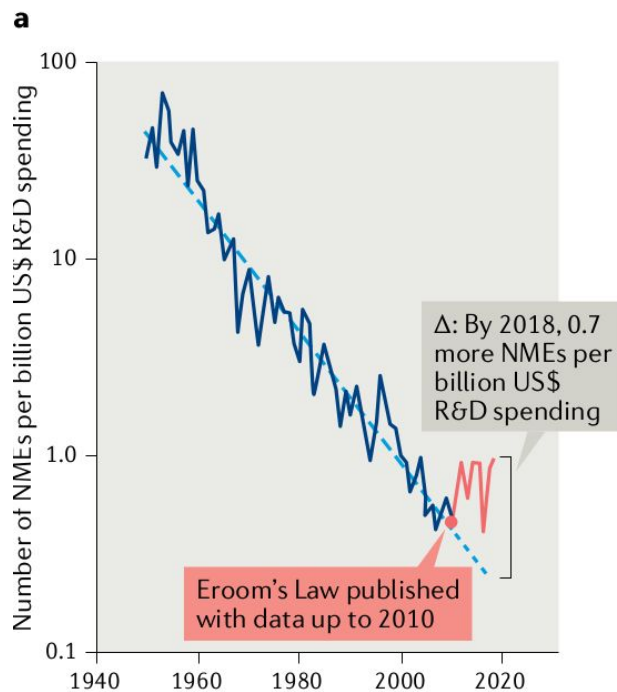


Discovery Development

# Failure analysis: 2013-2015

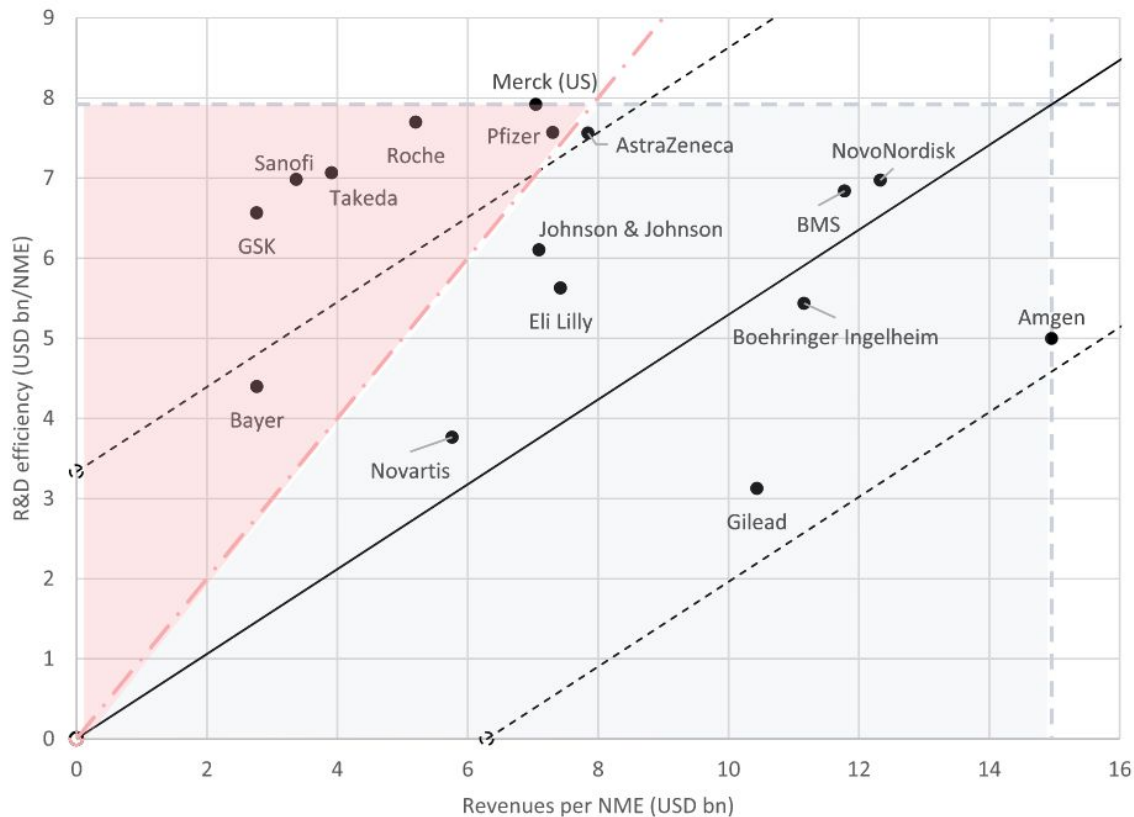


# The Eroom's Law

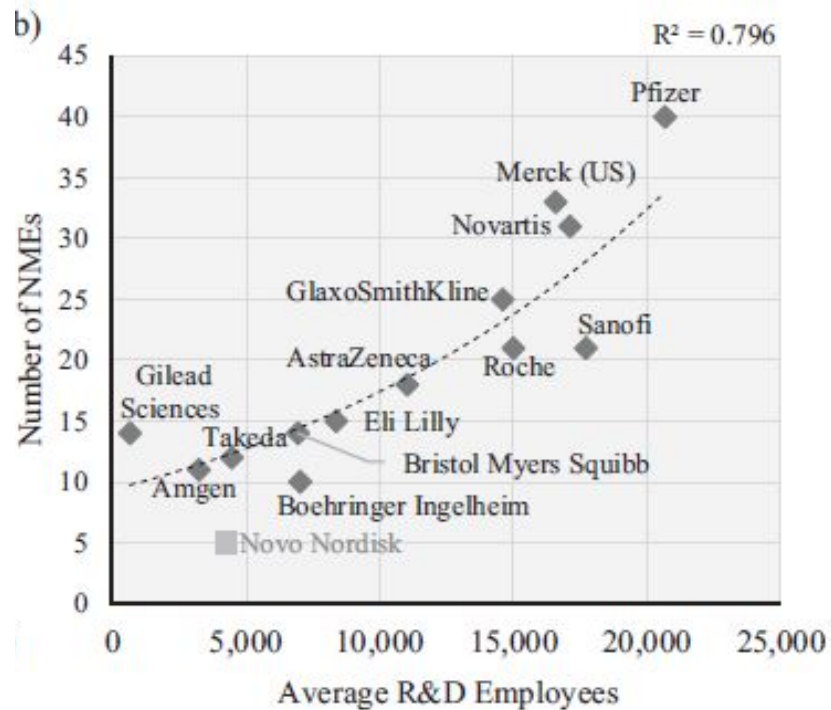
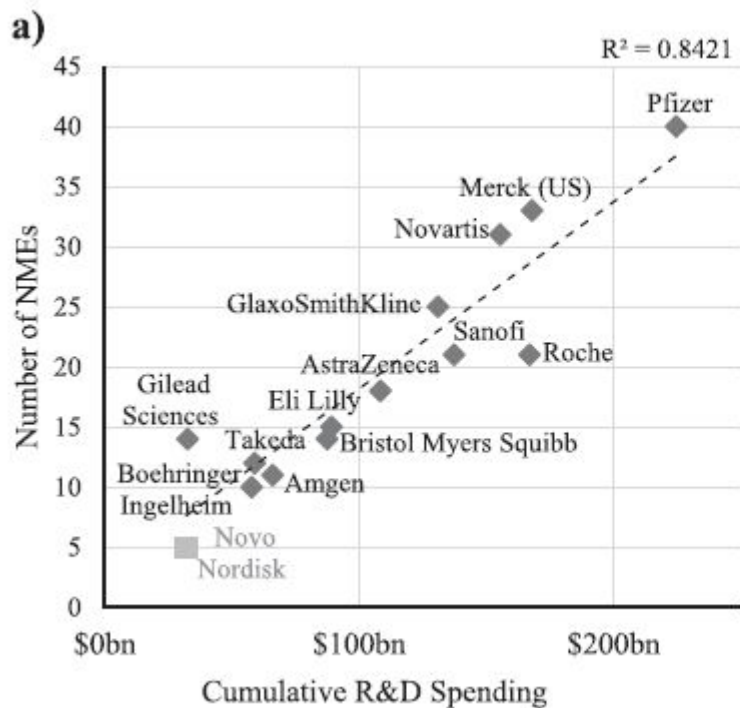


Left: R&D cost by year. Right: correlation with genetic evidence (a), focused indication (b), and rare diseases (c).

# R&D productivity of leading pharma companies (2001–2020).



# Investment and collaboration are necessary





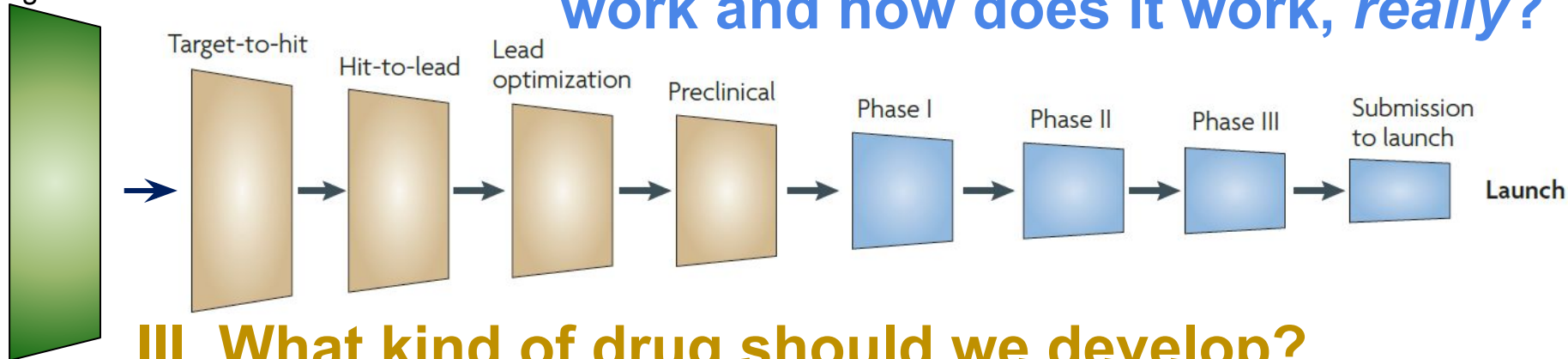
# Learnings from numbers

1. Cost of target assessment and identification is not explicit.
2. Clinical studies are expensive, but picking a wrong target is twice as expensive.
3. It is probably wise to *infer* efficacy and safety profiles of drugs as accurately as possible.

# Questions that we will address in this course

**V: For which patients will the drug work and how does it work, *really*?**

Target identification & assessment



**III. What kind of drug should we develop?**

**IV. What efficacy and safety profiles can we expect?**

**I. What makes a good drug target?**

**II. What can we do if there are no good targets?**

<b>Drug Discovery</b>	<b>Biology</b>	<b>Math./Comp.</b>
<b>Target identification, assessment, and phenotypic screening</b>	<ul style="list-style-type: none"> <li>● Genomics</li> <li>● Genetics</li> <li>● Gene expression</li> <li>● Chemical biology</li> </ul>	<ul style="list-style-type: none"> <li>● Statistical modelling</li> <li>● Machine learning</li> <li>● Mechanistic modelling</li> </ul>
<b>Drug modality and preclinical modelling</b>	<ul style="list-style-type: none"> <li>● RNA, antisense oligonucleotides, and antibodies</li> <li>● Gene expression</li> <li>● Network analysis</li> </ul>	<ul style="list-style-type: none"> <li>● Monte-Carlo methods</li> <li>● Generative models</li> <li>● Clustering</li> </ul>
<b>Biomarker, clinical modelling and reverse translation</b>	<ul style="list-style-type: none"> <li>● Population genetics</li> <li>● Gene expression</li> <li>● Pharmacokinetics and pharmacodynamics</li> </ul>	<ul style="list-style-type: none"> <li>● Causal analysis</li> <li>● Machine learning</li> <li>● Agent-based modelling</li> </ul>

# Common modelling approaches

- **Statistical modelling**
- **Causal inference**
- **Mechanistic modelling**
  - **ODEs (compartment models)**
  - **Agent-based models (particle models)**
  - **Networks (graphical and boolean models)**

# Learn more about reproducible research

- [The Missing Semester of Computer Science](#)
- [Software Carpentry](#) (Unix Shell, Git, Python & R)
- [Genomics Workshop of Data Carpentry](#)
- [Clean Code](#) by Robert C. Martin
- Open-source tutorials of respective tools, such as [sphinx](#), [Snakemake](#), [conda](#), or [docker](#). Videos or podcasts work just as fine.

# Take-home messages

- Drug discovery identifies agents modulating human disease biology as a hierarchical complex adaptive system.
- Mathematical and computational biology studies interactions within the system and help to build predictive models.
- Reproducible computational research help ourselves and others build a sustainable working environment.

# Offline activities

1. Fill [the pre-course survey](#).
2. Read '[How a pioneering diabetes drug offers hope for preventing autoimmune disorders](#)' by Elie Dolgin (Nature, 2023). Think about the question: **what roles/parties of interest (pharma company, patients, etc.) are involved in the business of drug discovery and development?**

# References

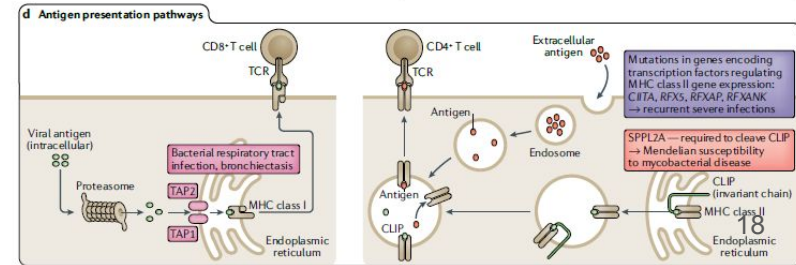
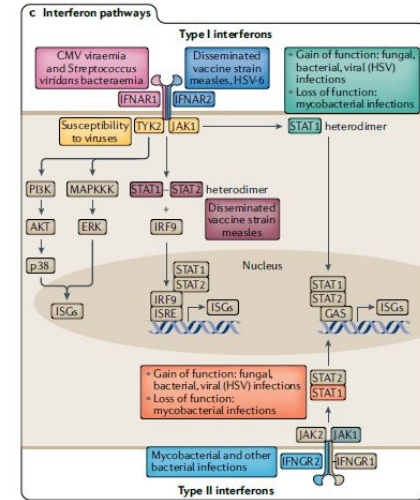
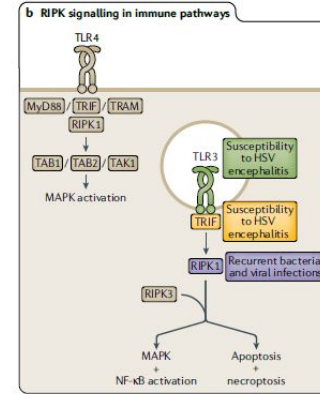
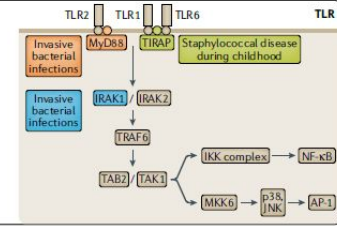
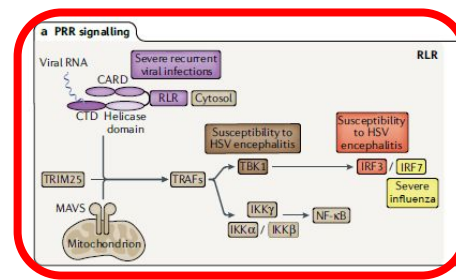
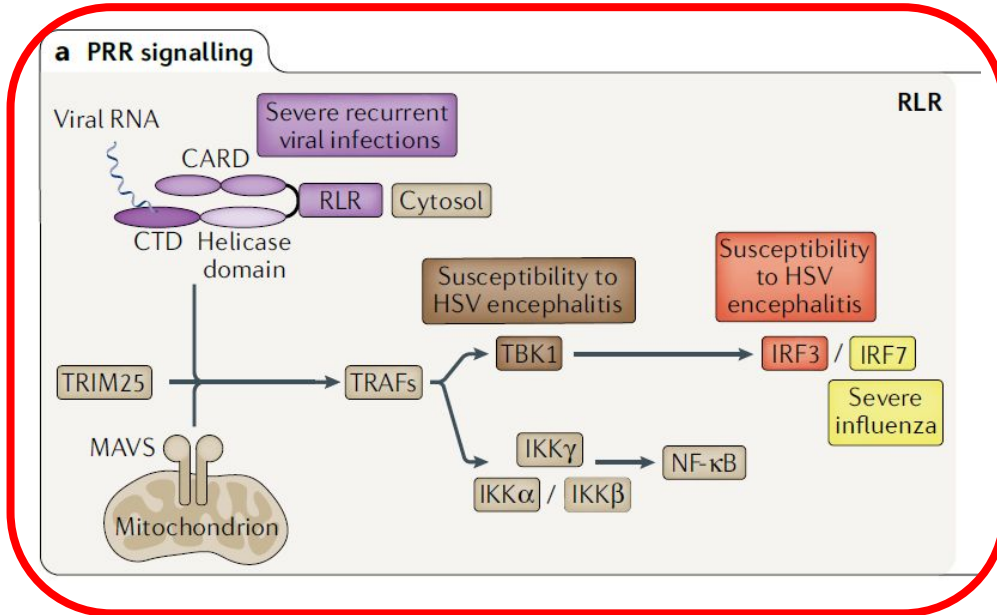
1. Paul *et al.* “How to Improve R&D Productivity: The Pharmaceutical Industry’s Grand Challenge.” *Nature Reviews Drug Discovery*, 2010.
2. Ringel, Michael S., Jack W. Scannell, Mathias Baedeker, and Ulrik Schulze. 2020. “Breaking Eroom’s Law.” *Nature Reviews Drug Discovery* 19 (12): 833–34. <https://doi.org/10.1038/d41573-020-00059-3>.
3. Morgan, Paul, Dean G. Brown, Simon Lennard, Mark J. Anderton, J. Carl Barrett, Ulf Eriksson, Mark Fidock, et al. 2018. “Impact of a Five-Dimensional Framework on R&D Productivity at AstraZeneca.” *Nature Reviews Drug Discovery* 17 (3): 167–81. <https://doi.org/10.1038/nrd.2017.244>.
4. Harrison, Richard K. 2016. “Phase II and Phase III Failures: 2013–2015.” *Nature Reviews Drug Discovery* 15 (November): 817–18. <https://doi.org/10.1038/nrd.2016.184>.
5. Schuhmacher, Alexander, Lucas Wilisch, Michael Kuss, Andreas Kandelbauer, Markus Hinder, and Oliver Gassmann. “R&D Efficiency of Leading Pharmaceutical Companies – A 20-Year Analysis.” *Drug Discovery Today* 26, no. 8 (August 1, 2021): 1784–89. <https://doi.org/10.1016/j.drudis.2021.05.005>.
6. Schuhmacher, Alexander, Markus Hinder, Alexander von Stegmann und Stein, Dominik Hartl, and Oliver Gassmann. “Analysis of Pharma R&D Productivity – a New Perspective Needed.” *Drug Discovery Today* 28, no. 10 (October 1, 2023): 103726. <https://doi.org/10.1016/j.drudis.2023.103726>.
7. Zhang, Jitao David, Lisa Sach-Peltason, Christian Kramer, Ken Wang, and Martin Ebeling. 2020. “Multiscale Modelling of Drug Mechanism and Safety.” *Drug Discovery Today* 25 (3): 519–34. <https://doi.org/10.1016/j.drudis.2019.12.009>.
8. Holland, John H. 2006. “Studying Complex Adaptive Systems.” *Journal of Systems Science and Complexity* 19 (1): 1–8. <https://doi.org/10.1007/s11424-006-0001-z>.
9. Kwok, Andrew J., Alex Mentzer, and Julian C. Knight. 2021. “Host Genetics and Infectious Disease: New Tools, Insights and Translational Opportunities.” *Nature Reviews Genetics* 22 (3): 137–53. <https://doi.org/10.1038/s41576-020-00297-6>.
10. Zeberg, Hugo, and Svante Pääbo. 2020. “The Major Genetic Risk Factor for Severe COVID-19 Is Inherited from Neanderthals.” *Nature* 587 (7835): 610–12. <https://doi.org/10.1038/s41586-020-2818-3>.
11. Sturm, Gregor. 2020. “Hallmarks of Good Scientific Software”. <https://grst.github.io/bioinformatics/2020/07/16/hallmarks-scientific-software.html>
12. Ingraham, J. B. et al. Illuminating protein space with a programmable generative model. *Nature* 623, 1070–1078 (2023).

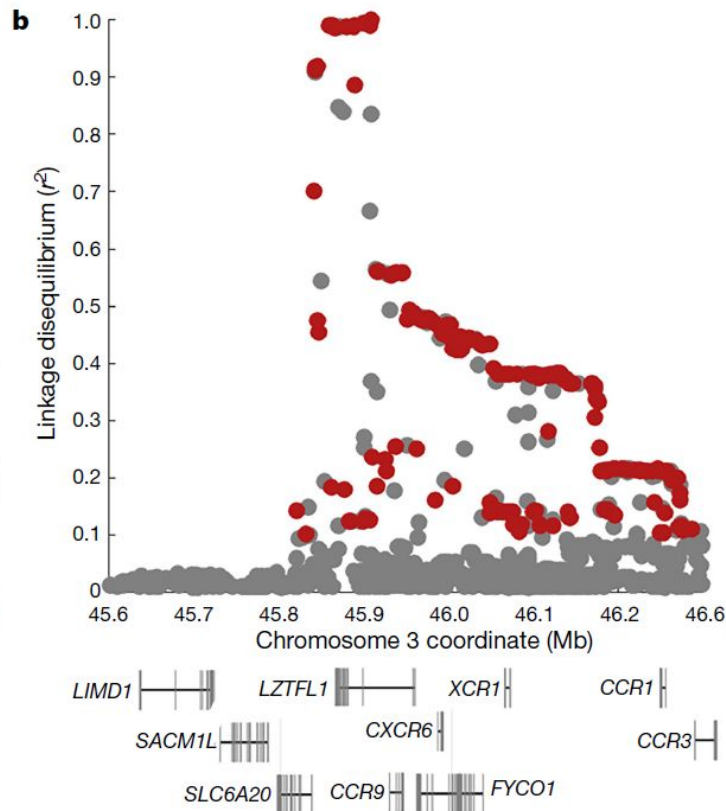
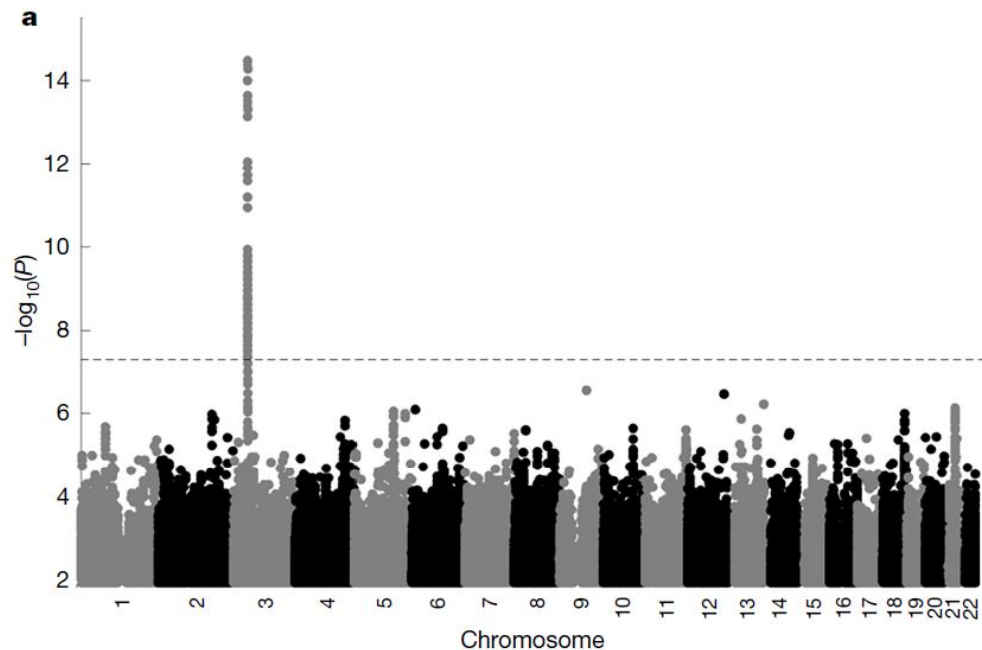


# **Backup and License**

# Complex Adaptive System

1. Parallel information channels
2. Conditional actions (if/then)
3. Modularity





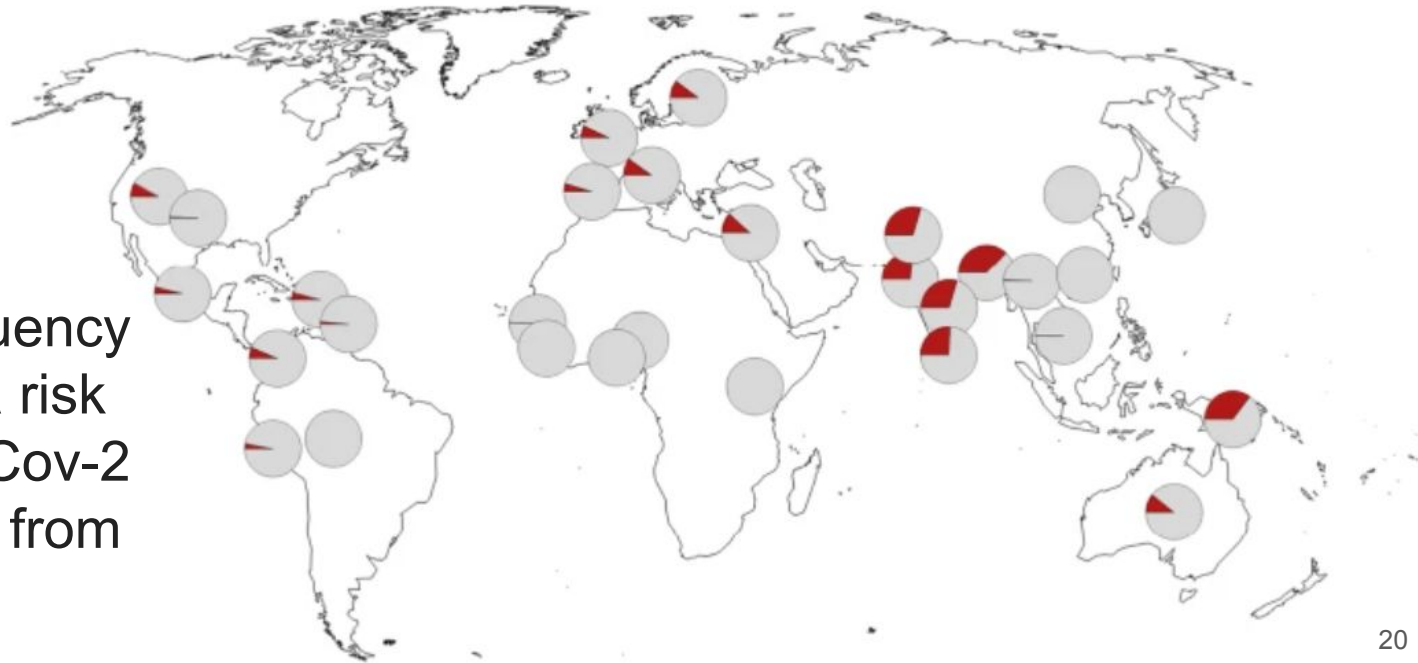
**Fig. 1 | Genetic variants associated with severe COVID-19.** **a**, Manhattan plot of a genome-wide association study of 3,199 hospitalized patients with COVID-19 and 897,488 population controls. The dashed line indicates genome-wide significance ( $P = 5 \times 10^{-8}$ ). Data were modified from the COVID-19 Host Genetics Initiative<sup>2</sup> (<https://www.covid19hg.org/>). **b**, Linkage disequilibrium between the index risk variant (rs35044562) and genetic variants in the 1000

Genomes Project. Red circles indicate genetic variants for which the alleles are correlated to the risk variant ( $r^2 > 0.1$ ) and the risk alleles match the Vindija 33.19 Neanderthal genome. The core Neanderthal haplotype ( $r^2 > 0.98$ ) is indicated by a black bar. Some individuals carry longer Neanderthal-like haplotypes. The location of the genes in the region are indicated below using standard gene symbols. The x-axis shows hg19 coordinates.

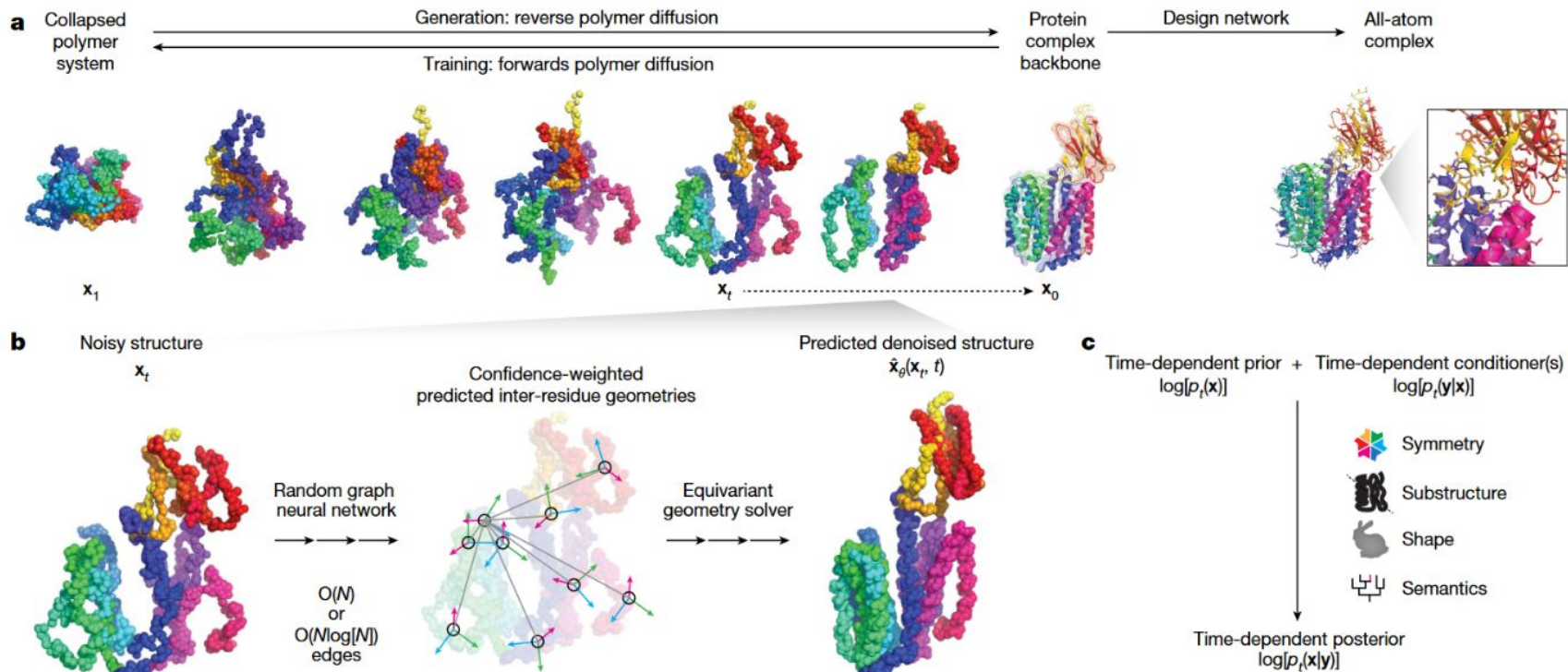
# Complex Adaptive System

## 4. Adaptation and evolution

Minor allele frequency at [rs35044562](#), a risk allele for SARS-Cov-2 that we inherited from Neanderthals.



# Chroma: a generative model for proteins and protein complexes learning from evolution

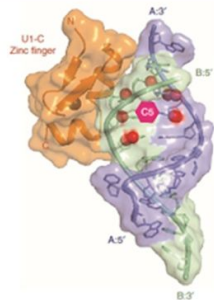


# Propositions about the course

1. Human (disease) biology is a hierarchical complex adaptive system.
2. Drug discovery aims at identifying *new agents* that change the system's behaviour with acceptable benefit and risk profiles.
3. We use mathematical and computational biology to study the system in order to predict and study the effect of modulation.

# A multiscale-modelling view of drug discovery

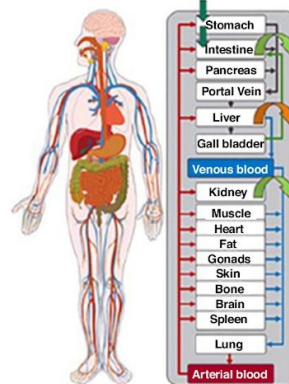
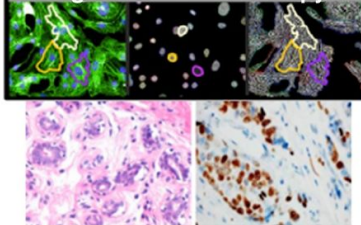
Forward translation



Molecular phenotyping



High-content microscopy



Molecular modelling

Omics and cellular modelling

Organ and system modelling

Population modelling

Reverse translation

# Complementary views of biological systems

- Metabolism
- Energy
- Information machine
- Evolution
- Computing machine
- Network
- ...



# An example of complementary views

We want to work on hepatocarcinoma (liver cancer) and have the following information about a potential target X:

- X is a receptor expressing on the surface of most cell types;
- Upon binding ligands, X activates innate immune response;
- Gene sequence of X is conserved in primates but *not* in rodents;
- Protein X interacts with protein Y, which is essential, namely Y knockout causes lethal embryos;
- Asian population has a unique genetic variant in the non-coding region of X;

Discussion: what are the consequences of having these information?

# Exercise

Where do you think mathematical and computational biology will make a difference?

## Right target

- Strong link between target and disease
- Differentiated efficacy
- Available and predictive biomarkers

## Right tissue

- Adequate bioavailability and tissue exposure
- Definition of PD biomarkers
- Clear understanding of preclinical and clinical PK/PD
- Understanding of drug–drug interactions

## Right safety

- Differentiated and clear safety margins
- Understanding of secondary pharmacology risk
- Understanding of reactive metabolites, genotoxicity and drug–drug interactions
- Understanding of target liability

## Right patient

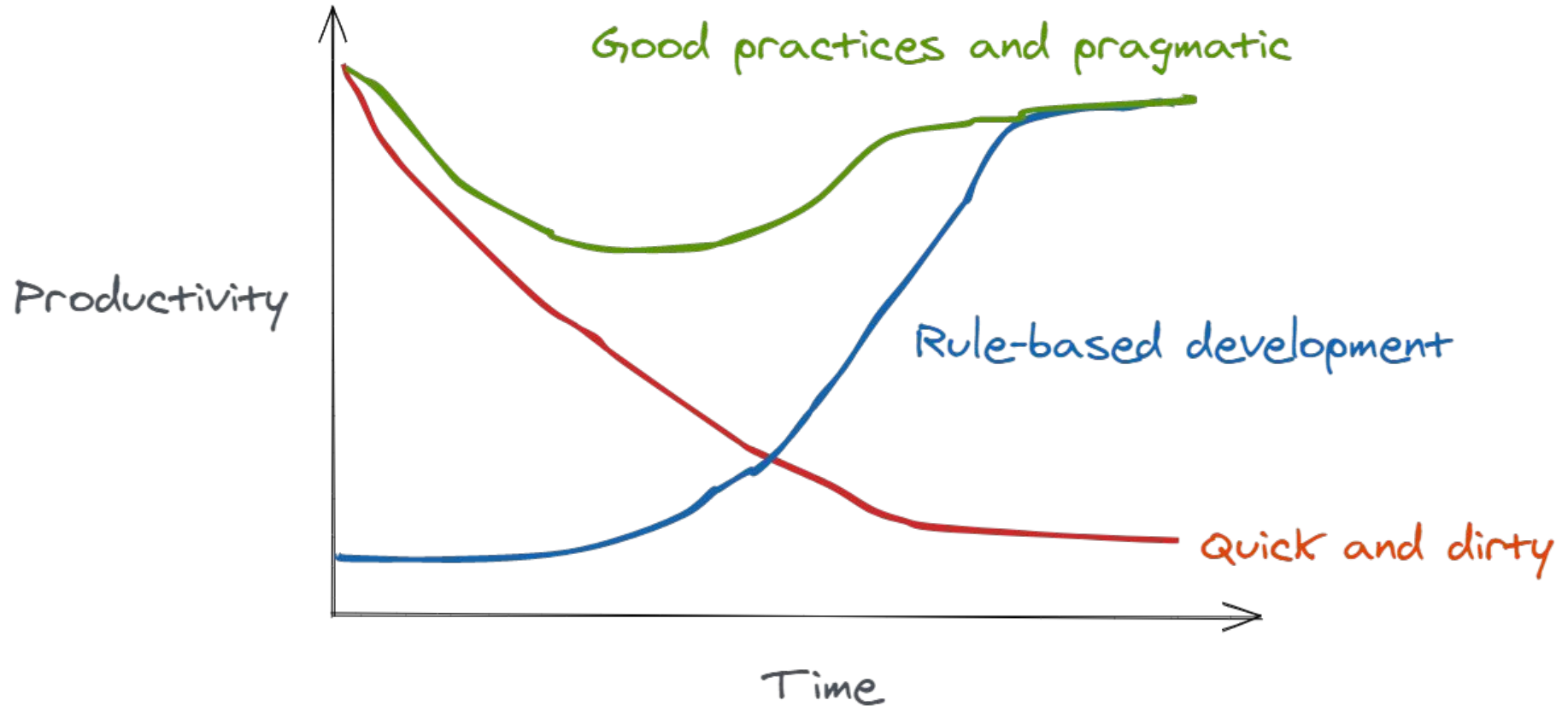
- Identification of the most responsive patient population
- Definition of risk–benefit for a given population

## Right commercial potential

- Differentiated value proposition versus future standard of care
- Focus on market access, payer and provider
- Personalized health-care strategy, including diagnostics and biomarkers

# Nine steps toward reproducible research

1. Version control (*git*)
2. Don't Repeat Yourself (DRY)
3. Keep It Simple, Stupid (KISS)
4. Automatic testing (*pytest/Hypothesis, testthat, GitHub Actions*)
5. Documentation (*sphinx, pckdown*)
6. Dependency Management (*conda, packrat*)
7. Containerization (*Docker/Singularity, Bioconda/conda-forge*)
8. Pipelining (*Snakemake, NextFlow, drake*)
9. Self-reporting analysis (*Jupyter Notebook, Rmarkdown*)



# Arguments for reproducible research

- Egoism and altruism
- *You will have to do it again*
- Sustainable long-term work

道

Tao, Path, or Way

術

Shu, Technique, or Art

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