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Al platform helps tailor mix of drugs for cancer patients

Trial involving those with multiple-relapsed lymphoma expected to begin next year

In the near future, patients with relapsed lymphoma can likely en-rol in a formal clinical trial that will personalise the most effective cocktail of drugs to treat their disease based on calculations done by an artificial intelligence (AI) platform.

This clinical trial rests on the results of a study published on Oct 19 in Science Translational Medicine journal, where eight of the 17 pa-tients who had suffered multiple lymphoma relapses saw signifi-cant improvement after they took a cocktail of medication recommended by this platform.

The study was conducted by the National University Cancer Institute, Singapore (NCIS) and Sing-Health. Of the eight patients who saw significant improvements, five had their cancer completely eradicated eradicated.

Such lymphoma patients typically have a less than 10 per cent chance of improving their condition under conventional treat-ment plans, and are unlikely to survive beyond a few months, said Dr Anand Jevasekharan, a consultant at the department of haema-tology-oncology at NCIS and a

or science Institute of Singapore (CSI Singapore).

The study's lead investigator explained: "Under a conventional treatment plan, some patients will respond to the drug and some patients will not respond to the tients will not respond to the drug... This is due to a wide varia-bility within molecular features of cancers between patients."

But by identifying the varia-tions, patients' treatments could perhaps be tailored to their specif-ic cases, he added.

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comes in, said Associate Professor Edward Chow, CSI Singapore's principal investigator and the lead scientific researcher behind the development of the quadratic phenotypic optimisation platform (QPOP).

Prof Chow said: "The main thrust of QPOP is, how can you use maths and engineering-based approaches to optimise combinations that affect a disease without

tions that affect a disease without knowing everything inside a cell, or an animal, or a human body?"

Cancer cells are extracted from patients and incubated with a set

of 12 carefully selected lymphoma drugs in different dosages. Each drug is then measured for

how effective it is when used in

different combinations.

The information is fed to QPOP, which then computes the effec tiveness score for each permuta-tion of the 12 drugs used and ranks the effectiveness scores, high-lighting the most effective permu-tation of drugs for the patient, Dr Chow said.

These drug permutations may be surprising, said Dr Anand, add-ing that one of the patients, Madam Peggy Tay, 73, whose lympho-ma had relapsed, was recom-mended a drug cocktail that was only ever used to treat breast cancer. After being put on that course of medication in December 2019, the retired administrator made a swift recovery and remains cancer

free to this day.

Dr Anand said: "There is an immense body of research being done on how effective certain drugs are on certain cancers, but it would take a prohibitively large amount of time to conduct clinical

trials on all molecular subtypes.

"Artificial Intelligence here then functions like a sieve, which allows for the identification and capture of patterns we would ordi-

narily miss."

While the formal clinical trial, while the formal clinical trial, expected to begin next year, will take in only patients with relapsed lymphoma, Prof Chow expects the technology to be able to prescribe effective treatments across different cancers and even infec-tious diseases like Covid-19. It might even be able to person-alise effective treatments accord-

ing to a patient's drug budget, he said. "This may allow clinicians to recommend unique treatment combinations taking into consideration anti-cancer drugs that are presently subsidised," he added.

The Standard Drug List has 600

The Standard Drug List has 600 drugs, including those for cancer, that are subsidised in Singapore. Patients taking these drugs may receive 50 per cent to 75 per cent subsidy if they are deemed eligi-

ble under means testing.

Prof Chow said: "This added layer of personalisation can help keep drug costs low and, more importantly, give control back to pa-tients on the kinds of treatments they would like to pursue."

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Associate Professor Edward Chow (left) and Dr Anand Jeyasekharan, both of whom played key roles in the study on which the clinical trial will be based, with swift recovery from her lymphoma after participating in the study. PHOTO: LIANHE ZAOBAO

GIVING PATIENTS CONTROL

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ASSOCIATE PROFESSOR EDWARD CHOW, lead scientific researcher behind the artificial intelligence platform, on its ability to personalise effective treatments according