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The Center for Genomic Medicine Announces Five New Collaborative Projects with the U.S. National Institute of Health (NIH) Groups

Collaborative effort within the Global Alliance for Pharmacogenomics to establish optimum drug therapies and help realize personalized medical treatment

As a part of the Global Alliance for Pharmacogenomics (GAP), the RIKEN Center for Genomic Medicine (CGM), the U.S. NIH Pharmacogenetics Research Network (PGRN) and three research institutes of the NIH are launching five new collaborative projects in asthma, prevention of breast cancer, prevention of breast cancer recurrence, major depression, and prostate cancer.

The Global Alliance for Pharmacogenomics (GAP) was established in April 2008 by the RIKEN Center for Genomic Medicine and, in the United States PGRN, the National Institute of General Medical Science (NIGMS), the National Cancer Institute (NCI) and the National Heart, Lung and Blood Institute (NHLBI) to identify genetic factors influencing the effectiveness and safety of medicines. The new projects begin in November 2008 and are in addition to current GAP collaborative efforts.

Since changing its name from the SNP Research Center (SRC) in April 2008, CGM has continued to strengthen and advance its work identifying the genetic factors leading to individual differences in constitution in order to contribute to the establishment of personalized medicine-that is, the diagnosis, treatment, prevention and drug therapies that match an individual's genetic characteristics.

PGRN works with NIGMS, NCI and NHLBI to understand the differences in drug responses and pharmacokinetics among individuals based on genetic differences.

Within GAP, CGM and PGRN are effectively combining their expertise and resources through collaborative research, forums and other interactions. GAP started with five initial projects in April 2008, including research to understand the genetic factors

influencing the effectiveness of breast cancer treatments, and the addition of these five new projects, including uncovering the genetic basis for responses to asthma medications, brings the total number of collaborative projects to 10.

These projects will speed understanding of the genetic factors affecting the safety and effectiveness of medicines, and this knowledge, when applied to clinical treatments, will contribute to global healthcare by making possible the optimal administration of medicines that are suited to individual constitutions.

Additional information on these new collaborations is available on the Global Alliance for Pharmacogenetics website.

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