



Predicting Incident Heart Failure from the Microbiome: The DREAM FINRISK challenge



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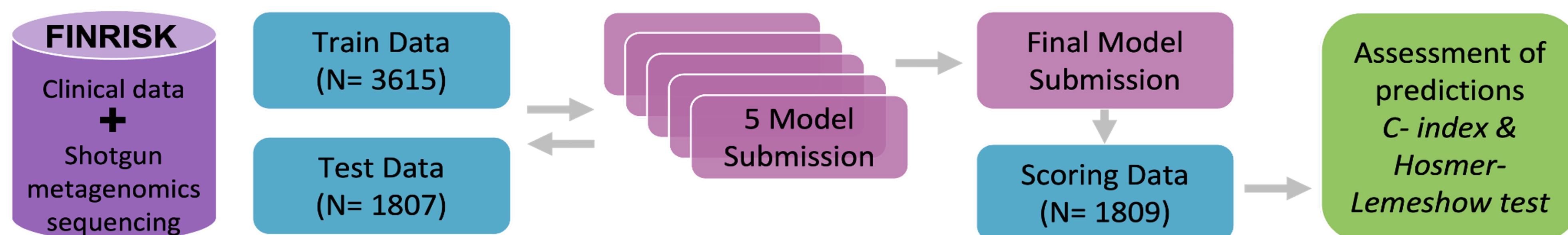


Fig 1. Dream FINRISK Challenge Overview

1. Motivation and Aim

Heart failure (HF) is a common syndrome resulting in the failure of the heart to pump blood with a lifetime risk of ~20%. Identifying individuals at risk early on is therefore of great medical relevance.

Several studies have found differences in **microbiome composition of HF patients** compared to controls. However, previous studies are limited by the low sample size (<100 HF patients) or lack longitudinal follow-up.

DREAM Challenges are competitions accessible to the whole scientific community to advance computational methods and support open collaboration. They are designed to address fundamental questions about systems biology and translational medicine.

2. FINRISK Dataset

The **DREAM FINRISK challenge** (Fig 1) focuses on using a combination of **microbiome** and **clinical data** to evaluate the potential of the **gut microbiome** for risk predictions over conventional risk factors in a large population study of Finnish adults^{1,2} with 15+ years follow up. **493** out of **6902** participants suffer from HF (Fig 2).

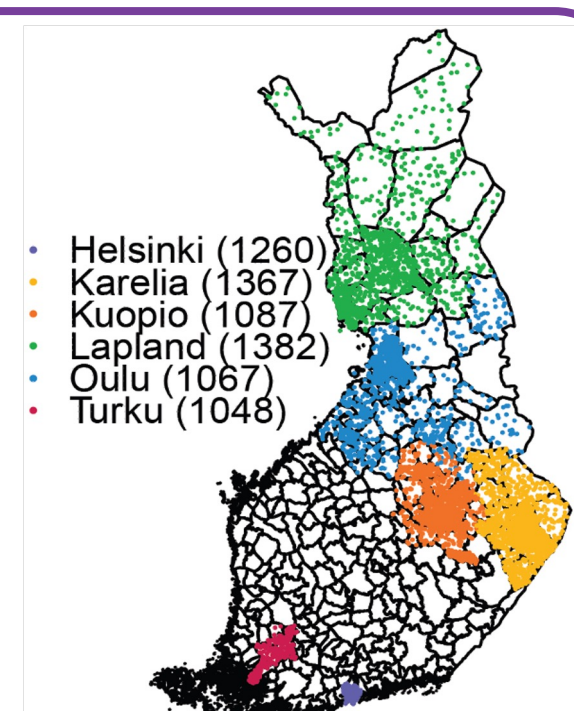


Fig 2. The FINRISK Cohort

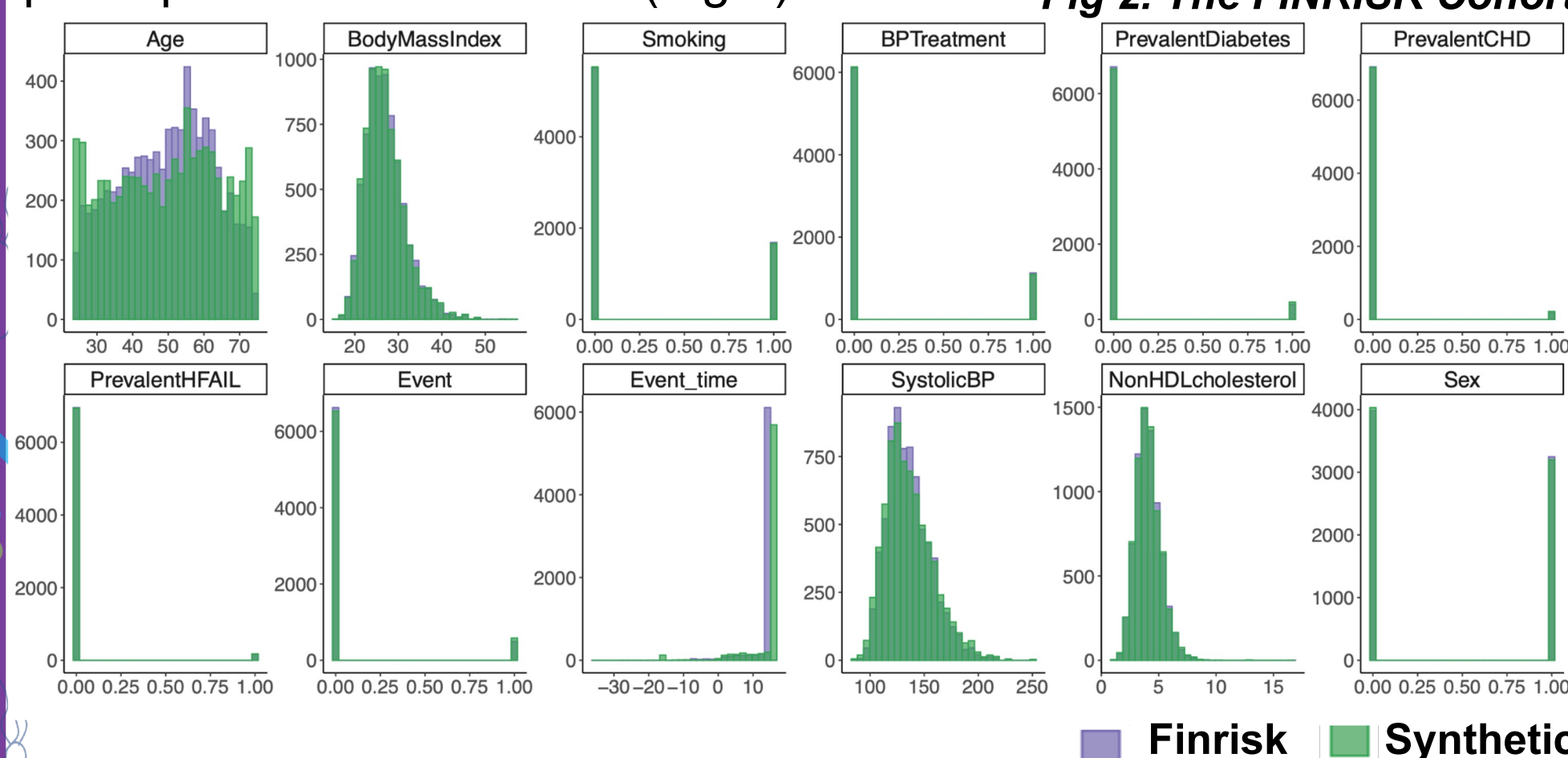


Fig 3. Comparisons of FINRISK dataset with synthetic data.

To protect the privacy of individuals, we provide synthetic data created based on multinormal draws from inverse rank normalized data that closely mimics the real data (Fig 3).

Learn More

Top teams will be invited:

- to attend the *DREAM Conference* in USA, 2023
- to participate in manuscript design & writing & eligible for authorship

for the challenge page > synapse.org/finrisk

The DREAM challenge main organizer: COST action network ML4microbiome (CA18131; ml4microbiome.eu)

References

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3. Baseline Model Results

We split the data to 3 groups (train, test, scoring) and used this setup to develop our baseline models:

- Model I: Cox model with only Age + Sex covariates
- Model II: Cox model with all clinical covariates
- Model III: Cox model with all clinical covariates + microbiome

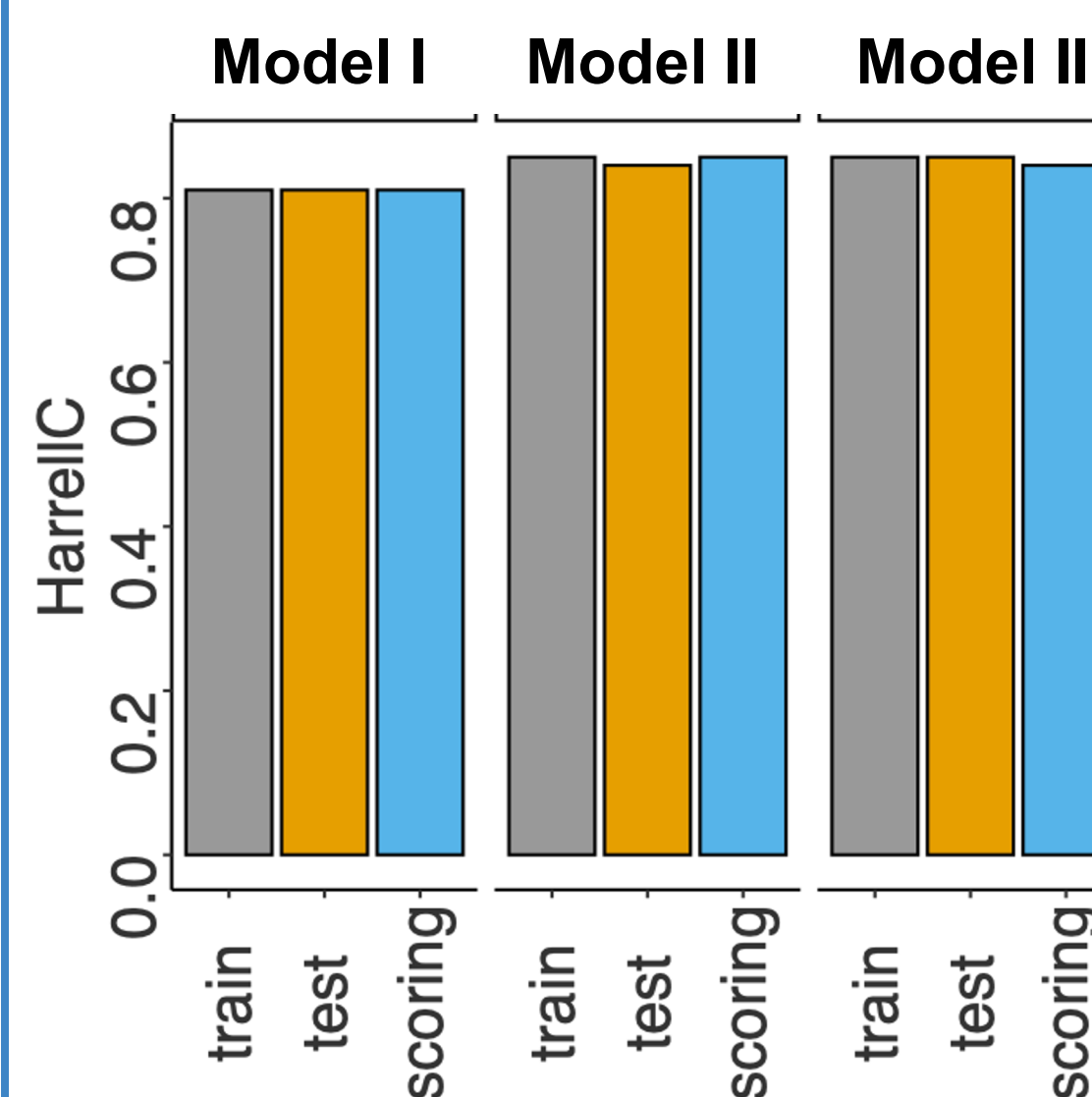


Fig 4. Harrell's C index of baseline models

We assess the **model performance** by Harrell's C index³ and the **model calibration** with the Hosmer-Lemeshov test at 10 years of follow-up. Comparison of our models showed a microbial contribution to predictions, which overall increased the accuracy & the goodness of the model (Fig 4).

4. Conclusion

- The baseline models have high Harrel C scores (0.81- 0.85), which can be further improved. For the microbiome field, this is a unique opportunity for exploring **novel approaches for time-to-event analysis**.
- Additionally, this challenge provides a ground for the scientific community to contribute and advance our current understanding of the **incidence in heart failure and microbiome associations**.
- The challenge may also allow us to **detect high risk individuals earlier** and find new risk mitigation measures.