**MINUTES**

**CPIC CONFERENCE CALL**

DATE: May 7, 2020

| TOPIC | DISCUSSION/ACTION | FOLLOW-UP |
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| Housekeeping announcements | Attendance will be taken by poll after each conference call. Members will receive an email with a doodle link after each call. Please enter your first and last name and check the box indicating you were in attendance. No action required if you were unable to make the conference call. | Kelly will send the poll link. |
| CPIC guidelines in progress | Guideline updates in progress:* *CYP2C9,HLA-B/*phenytoin: Guideline submitted
* *CYP2D6*, *OPRM1*, *COMT*/opioids: Drafting manuscript
* *CYP2C19/*clopidogrel: Evidence review underway

New guidelines in progress: * *CYP2C19/*PPIs: Guideline will be submitted soon
* *CYP2C9/*NSAIDs: Accepted for publication
* *mtRNR1*/aminoglycosides: Evidence review underway
* *SLCO1B1/*statin update: Authorship plan underway
 | Guideline preparation will continue and Kelly will continue to follow-up.  |
| Potential 2021 CPIC meeting | Planning on another CPIC meeting in Memphis, TN, currently looking at potential dates (considering May/June timeframe). Will continue to monitor COVID-19 situation. Would like input from members on session topics and speakers.  | Kelly will send a survey for meeting date preferences and ideas for session topics and speakers. |
| CPIC PGx Dissemination Working Group update | Andrew Monte provided an update on the PGx Dissemination Working Group. He highlighted the importance for individuals to write for their local society journals about CPIC guidelines so that we expand awareness of guidelines beyond *CPT* readership. Rachel Huddart is doing a great job with keeping social media up to date. There’s a new survey for CPIC Society Outreach Champions. Kelly will add the link to the CPIC website for easy access.  | Andrew will continue to update CPIC members on working group progress. Fill out CPIC Society Outreach Champions survey: [https://forms.gle/YshzvfE3M7sSNk2T7](https://nam03.safelinks.protection.outlook.com/?url=https%3A%2F%2Fforms.gle%2FYshzvfE3M7sSNk2T7&data=01%7C01%7CRoseann.Gammal%40STJUDE.ORG%7C7d4c8fdc8b1345afaa0908d7e2eca7ca%7C22340fa892264871b677d3b3e377af72%7C0&sdata=EFPDLG8iOW1ez5ONEVVCntre8nZgwqjwev8A5E3zMUw%3D&reserved=0) |
| CPIC FDA recognition  | Mary provided an update on the ongoing efforts to submit for FDA recognition of parts of CPIC for as a genomic resource database (https://www.fda.gov/medical-devices/precision-medicine/fda-recognition-public-human-genetic-variant-databases). To date, we have submitted a description of our plan to CDRH. Next step will be to have another pre-submission meeting to determine requirements. Will be requesting partial recognition of CPIC – focus on gene-specific allele functionality tables and the diplotype to phenotype tables We are applying for supplemental funding so that we can make progress on this effort, which will be an iterative process over several months.  | Mary will continue to keep CPIC members updated on the progress of this initiative.  |
| Recommendations for Clinical Warfarin Sensitivity Genotyping Allele Selection: A Joint Report of AMP and CAP | Vicky Pratt presented on the latest AMP/CAP recommendations for clinical warfarin sensitivity genotyping allele selection (manuscript is currently in press). The goal of the AMP PGx Working Group is to define recommendations by gene for a minimum set of variants that should be included in the genotyping assays. These are expert consensus recommendations meant to promote standardization of PGx gene/allele testing across clinical laboratories. Tier 1 recommendations are the minimum or “must-test” panel of variant alleles. Tier 2 recommendations are optional extended panel of variant alleles. For clinical warfarin sensitivity testing, the Tier 1 alleles include *CYP2C9 \*2, \*3, \*5, \*6, \*8, \*11*; and *VKORC1* c.1639G>A. The Tier 2 alleles include *CYP4F2\*3*; *VKORC1* warfarin resistant mutations (c.196G>A in African populations, c.106G>A in Ashkenazi Jewish population); and *CYP2C* cluster rs12777823 (relevant for the African American population). *GGCX* and *CALU* are not included in the recommendations, as these genes are not currently part of any clinical dosing guidelines. Slides are attached with these minutes. | Vicky Pratt will continue to update CPIC members when these recommendations are published. |
| NAT2/hydralazine | Michael Eadon and Kimberly Collins from Indiana University presented substantial evidence supporting the use of *NAT2* genotype to guide hydralazine therapy. They requested that CPIC consider this gene-drug pair for a CPIC guideline and suggested upgrading its classification on the gene/drug pair list.  | There was support to consider this gene/drug pair for a future CPIC guideline. CPIC leadership will work to add this potential guideline to its priority list.  |