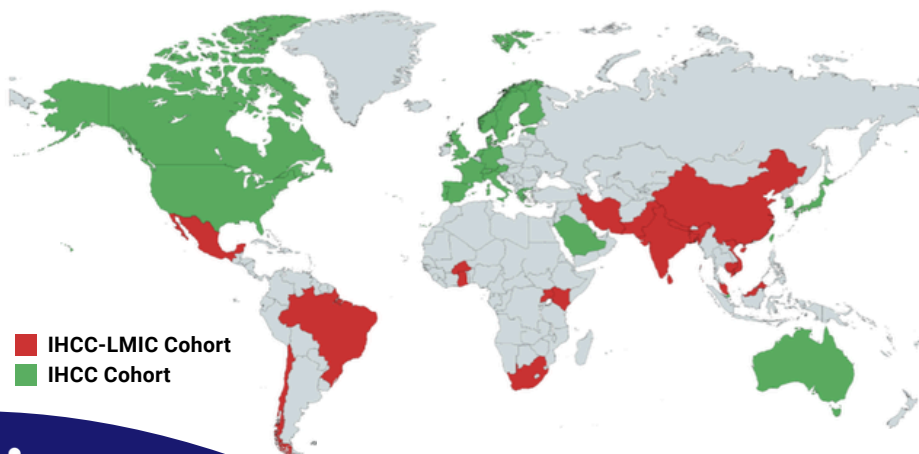




# The International Health Cohorts Consortium (IHCC)

The International Health Cohorts Consortium (IHCC) is a global network of large cohorts that collaborate to enhance our understanding of human health and disease and to improve clinical care and population health. ***Our mission is to forge cohort connections that revolutionize population health science by providing sustainable data infrastructure, cultivating a collaborative research environment, and promoting policies and best practices that foster connectivity, interoperability, and reciprocity.***

**IHCC members represent 89 cohorts of various sizes and stages of development from over 42 countries with > 34 million participants.**



■ IHCC-LMIC Cohort  
■ IHCC Cohort





# Our Goals

- ▶ **Facilitate Collaboration:** IHCC facilitates and promotes collaboration between cohorts including those working with under-represented populations and low and middle-income countries (LMICs). We support projects focused on the biological, environmental, and social determinants of health and disease.
- ▶ **Accelerate Research:** By leveraging data from diverse populations, IHCC accelerates the discovery of new insights into disease mechanisms, risk factors, and potential interventions.
- ▶ **Harmonize Data:** IHCC works on standardizing and harmonizing data across different cohorts, enabling more effective and meaningful comparative studies and meta-analyses.
- ▶ **Educate Researchers:** IHCC is preparing the next generation of genomic medicine professionals through the development of mentorship programs, educational webinars, and other activities aimed at fostering leadership skills in genomic medicine.
- ▶ **Enhance Public Health:** Knowledge gained through IHCC collaborations aims to inform public health policies and practices and ultimately improve global health outcomes.
- ▶ **Foster Innovation:** IHCC encourages the development and use of new technologies and methodologies in cohort research, promoting innovation in health research.



Join us on this journey!



# Opportunities for Collaboration

IHCC facilitates access to an extensive network of large cohorts and associated clinical sites. Collaborators can utilize IHCC resources to drive distinct areas of research, or to access samples and data from populations of interest. **Examples of how these collaborations can advance include:**

**Cohort Collaborations.** Leveraging or strengthening existing cohorts or creating new cohorts. Member cohorts have different types of resources, including biospecimens, genomic data, and/or phenotypic datasets.

- All member cohorts have agreed to a common charter for collaboration, data-sharing and (federated) analysis following FAIR principles.
- Many cohort members are clinical sites, with an interest in prospective studies of rare diseases, population health, and/or specific disease areas.
- Contribute to capacity building and essential resources within LMICs for diagnosis and treatment of patients.
- Cohort members benefit from centralized coordination of logistics and contracting for collaborative projects and programs.

**Support Future Scientists.** IHCC is focused on developing education programs for early career investigators (ECIs) especially those from low and middle-income countries (LMICs). Initiatives include:

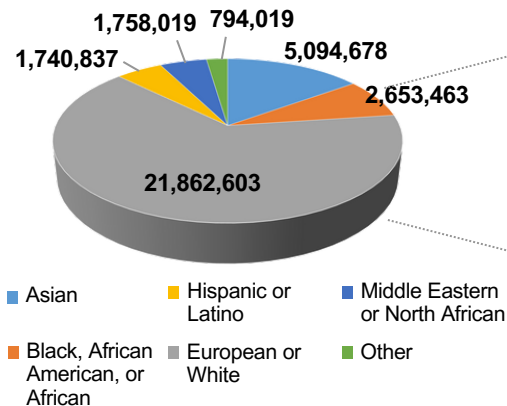
- Educational webinars, including a monthly series with speakers from around the world. Themes include cohort discovery, program-building, industry perspectives, and clinical implementation.
- Financial support to attend international meetings.
- Opportunities to join scientific leadership committees.
- Virtual or in-person fellowships.



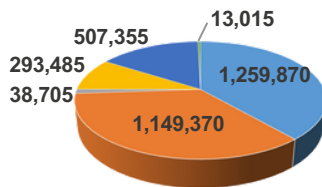
## Unlocking Global Networks for Biopharmaceutical Innovation

By partnering with IHCC, industry collaborators can streamline their research efforts, capitalize on diverse patient populations, and save time and resources in pursuit of groundbreaking genomic discoveries and therapeutic innovations. ***We invite all collaborators to engage in program and project design, execution and analysis ensuring that initiatives are tailored to meet specific objectives.***

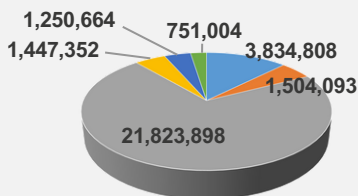
**Approximate Breakdown of Underlying Cohorts: ~33,872,619 unique individuals from a survey of 69 cohorts (data from 2023 cohort survey)**



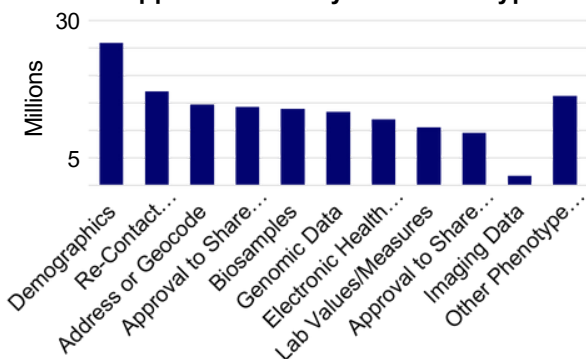
**LMIC (N=24): ~3,261,800 Unique Individuals**



**Not LMIC (N=45): ~30,611,819 Unique Individuals**

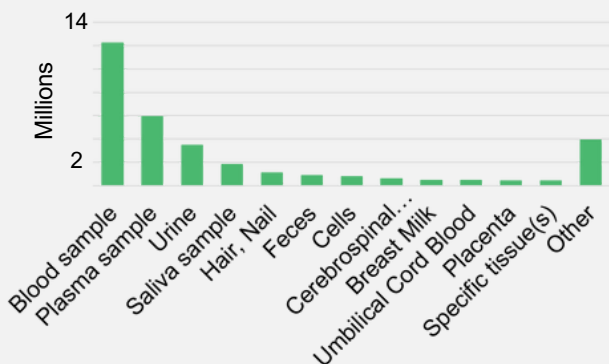


**Approximate N by Resource-Type**



Resource-Type	N
Demographics	25,990,025
Re-Contact Participants	17,122,253
Address or Geocode	14,768,908
Approval to Share Data	14,335,125
Biosamples	13,958,495
Genomic Data	13,373,524
Electronic Health Records	12,001,863
Lab Values/Measures	10,583,582
Approval to Share Samples	9,627,396
Imaging Data	1,742,962
Other Phenotype Data	16,331,995

**Approximate N Biosample Types Available**



Biosample Type	N
Blood sample	12,213,838
Plasma sample	5,910,983
Urine	3,452,419
Saliva sample	1,814,943
Hair, Nail	1,098,609
Feces	838,960
Cells	739,690
Cerebrospinal Fluid (CSF)	555,250
Breast Milk	442,550
Umbilical Cord Blood	441,250
Placenta	412,750
Specific tissue(s)	386,127
Other	3,904,885