



September 26, 2018, 4:30PM  
Chancellor's Ballroom East, Carolina Inn

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**OPEN SESSION**

**FOR INFORMATION ONLY**

(No formal action is requested at this time)

1. Creativity Hubs: Heterogeneity in Obesity  
*Penny Gordon-Larsen, Professor & Associate Chair for Research,  
Dept. of Nutrition*
2. Student Startup Pitch: Phyta  
*Eliza Harrison, Class of 2019  
Lucy Best, Class of 2019  
Emily Kian, Class of 2020*

**COMMITTEE MEMBERS**

**Julia Grumbles, Chair**  
**Kelly Hopkins, Vice Chair**  
**Jeff Brown**  
**Lowry Caudill**  
**Allie Ray McCullen**  
**Hari Nath**

***Administrative Liaison:***

***Bob Blouin, Executive Vice Chancellor and Provost***  
***Judith Cone, Vice Chancellor for Innovation, Entrepreneurship, & Economic Development***



# CreativityHubs

—— HETEROGENEITY *IN* OBESITY ——

*Transdisciplinary Approaches for Precision Research and Treatment*



**Penny Gordon-Larsen, PhD**

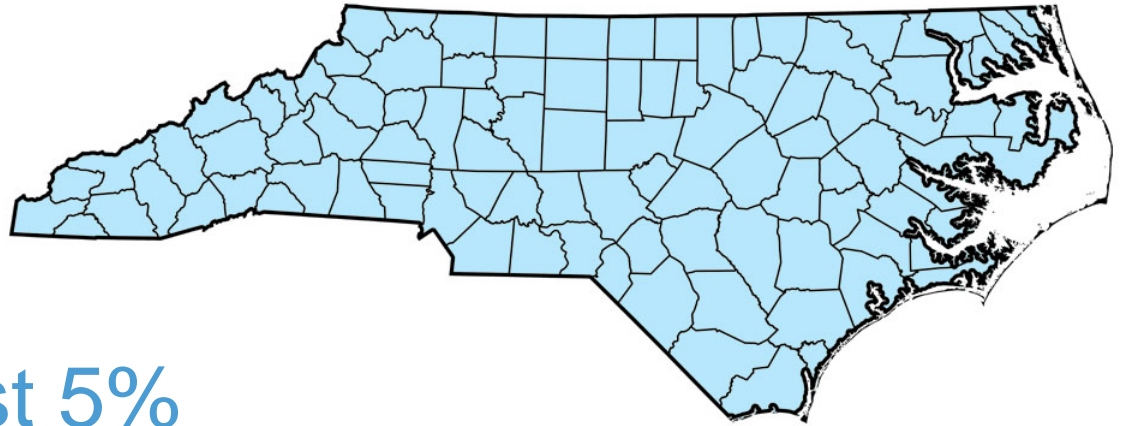
Professor of Nutrition | Associate Dean for Research  
Research, Innovation and Global Solutions  
Gillings School of Global Public Health

On behalf of The Obesity Hub

# Obesity is a major issue in North Carolina

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North Carolina has the  
16<sup>th</sup> highest obesity in  
the US



Reduction of just 5%  
in obesity would save  
>\$7 billion in 10 years  
on health care in NC

# Tremendous IMPACT of Obesity on Health

Cardiometabolic

Structural

Inflammatory

Degenerative

Neoplastic

Psychological

236

Comorbidities affecting  
**EVERY** organ system and  
medical specialty

\$190 Billion

spent per year in U.S.

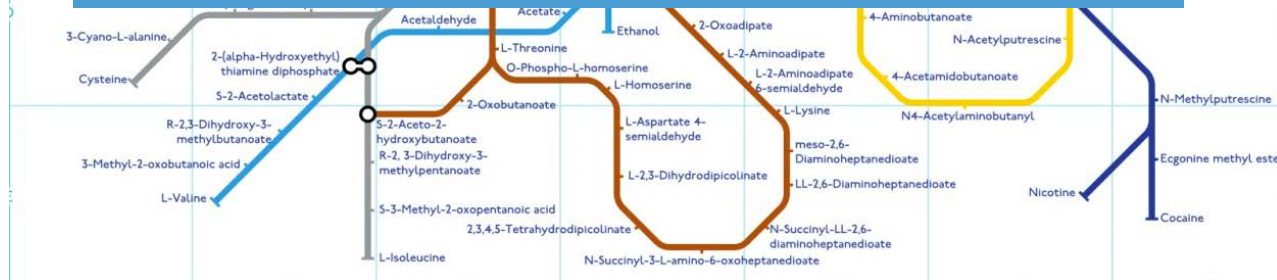
\$62 Billion

in Medicare & Medicaid spending





# Yet – we treat everyone the same!



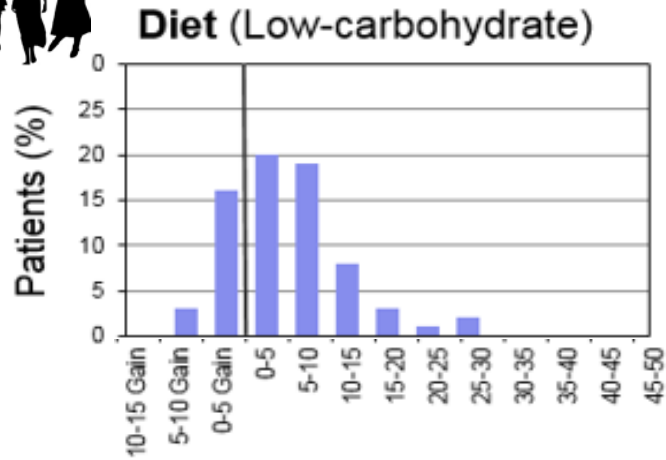
# Genetic Diversity helps us solve problems

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Differential Response

# Even with IDENTICAL diets and other treatments, weight loss varies among individuals



# Even with IDENTICAL diets and other treatments, weight loss varies among individuals



^0

High Fat Diet (12-weeks)

**Why do mice/people on the same diet differ in weight gain?**

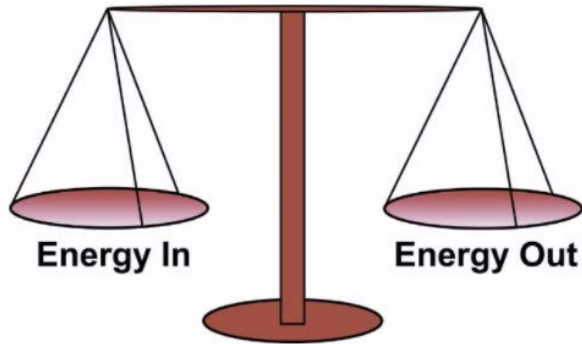
**Why do mice/people with the same obesity treatment differ in weight loss?**

10-15 G  
5-10 G  
0-5 G  
5  
10  
15  
20  
25  
30  
35  
40  
45

0-10% 10-20% 20-30% 30-40% 40-50%  
Distribution Loss (% Baseline Weight)

# Our Hub will OVERCOME major gaps in the field

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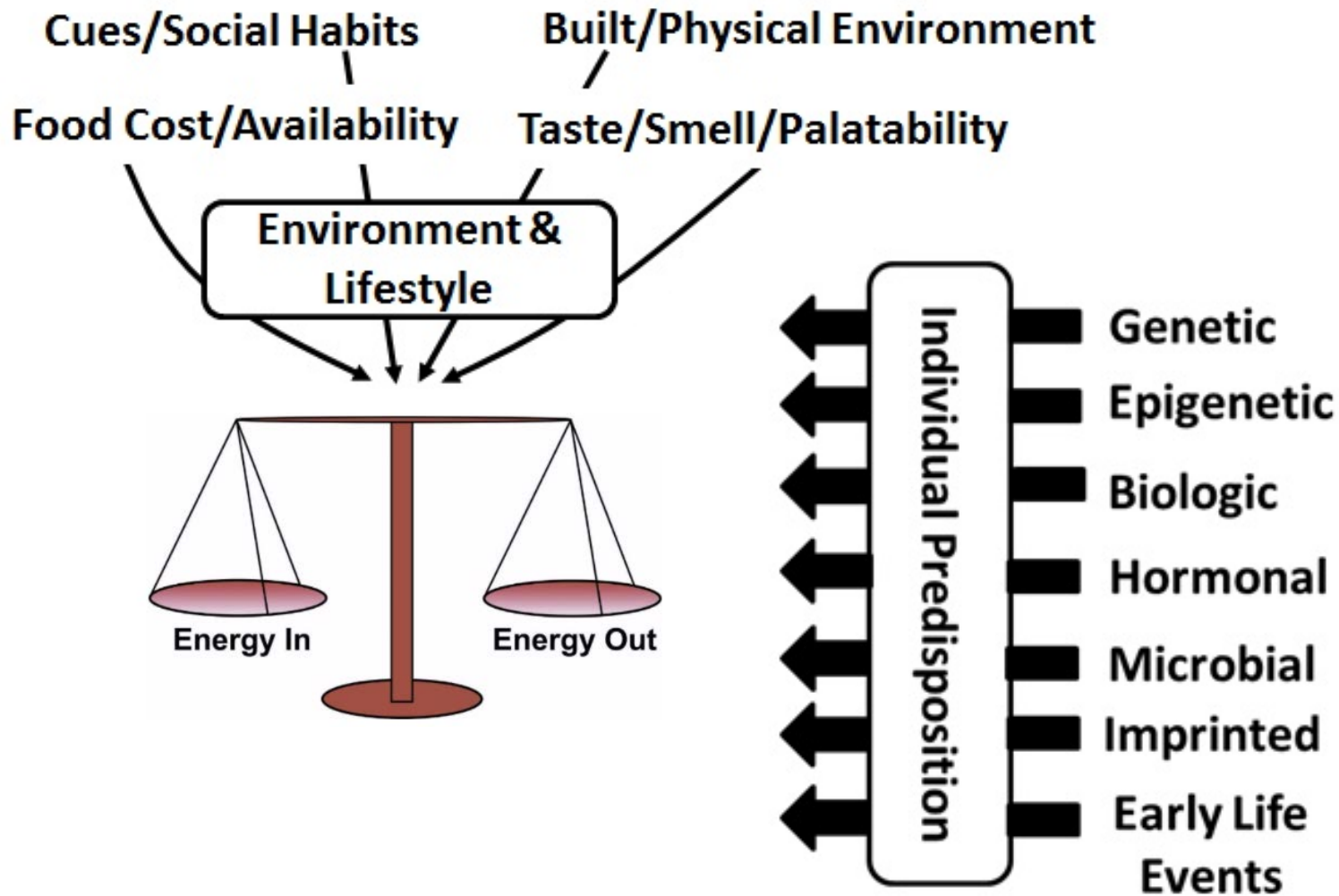
# Our Hub features Creative Solutions

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- **Novel collaborations**
- **Data innovations**
- **No one-size-fits-all approaches**
- **Multiple pathways/causes of obesity**
- **Individualized & tailored approach**



# The Obesity Hub



# Dream Team

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**Basic Scientists  
Animal Models**

**Population Scientists  
Human Models**

**Data Scientists  
App Development**

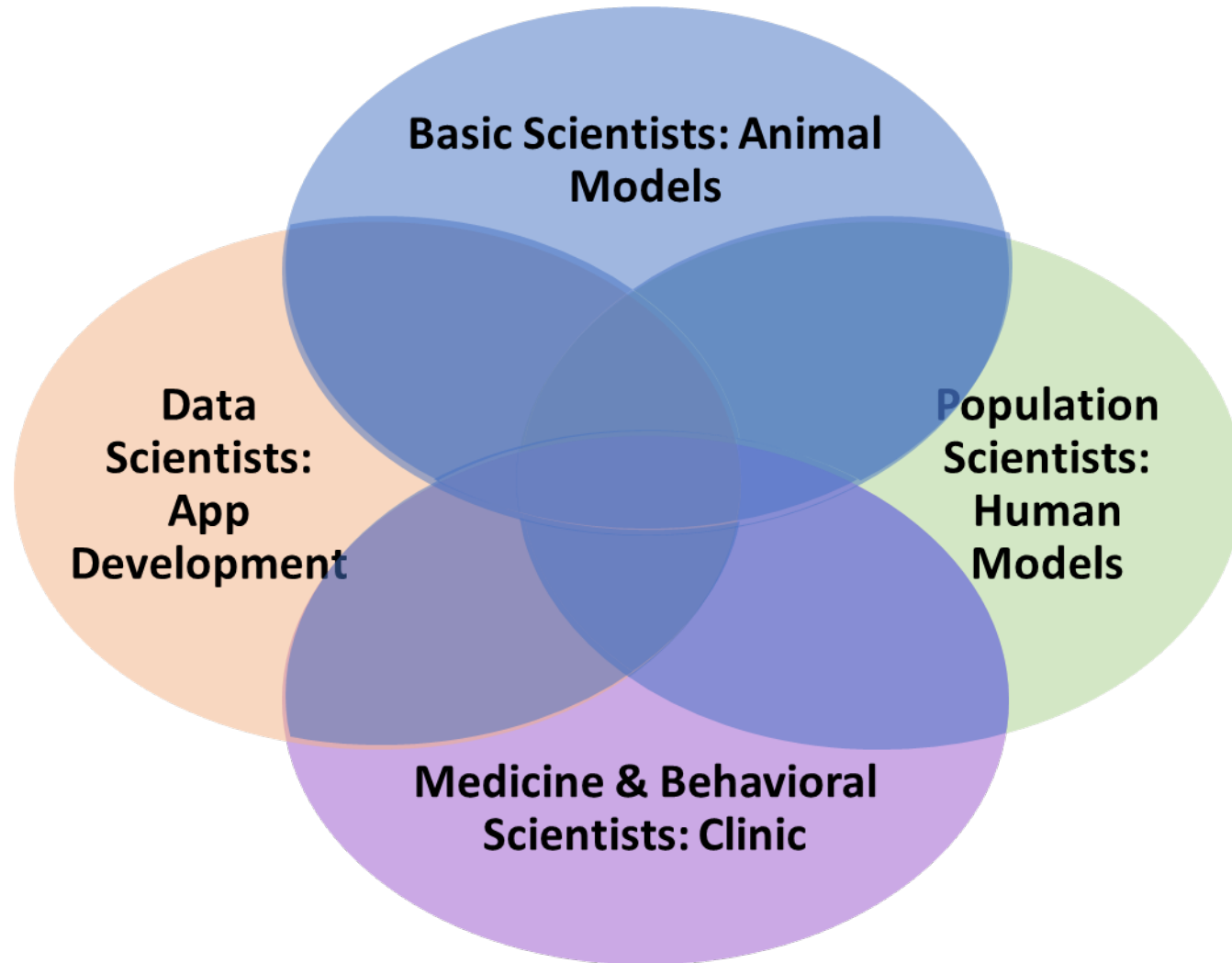
**Medicine & Behavioral Scientists  
Clinic**



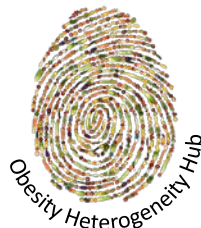
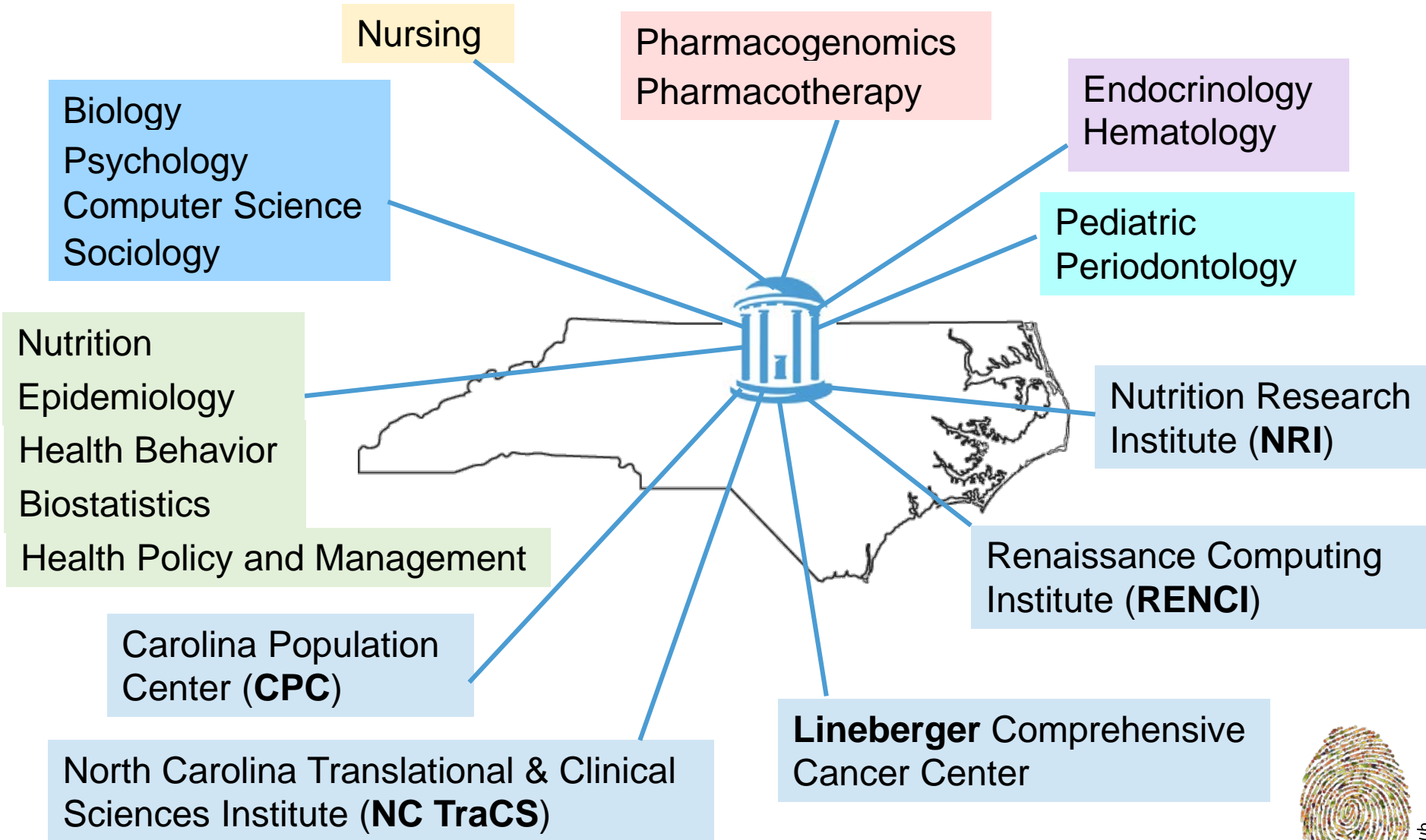


# Dream Team

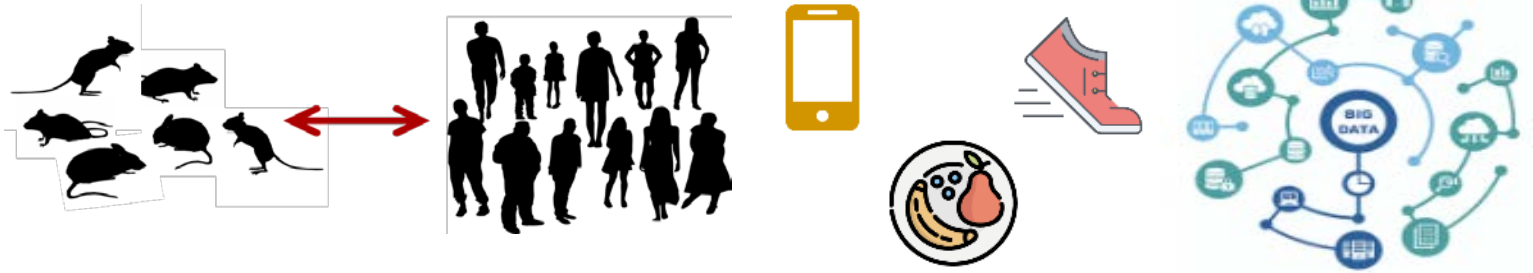
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# The Obesity Hub TEAM: 28 Investigators, 6 schools, 17 departments, and leaders from 5 Centers/Institutes



# Aim 1: Parallel Mouse & Human Studies



## Models of Weight Change

**Genes, metabolome, microbiome, social factors & behaviors**

## Aim 2: Precision Weight Loss Pilot



**Precision vs standard approach**  
**Genes, metabolome, microbiome, social factors & behavior**

# Aim 3: Application Programming Interface



**Machine Learning & Data integration**  
**Genes, metabolome, behavior**

# Novel cross talk to address *Heterogeneity of Obesity*



# Deliver outstanding TANGIBLE RESEARCH PRODUCTS

## YEARS 1 & 2

### Aim 1: Parallel Mouse & Human Studies



### Aim 2: Precision Obesity Pilot



### Aim 3: Application Programming Interface



- Outstanding pilot data for LARGE grants
- Research publications
- Proof-of-principle for providing precision obesity care
- App for machine learning across ***big data***: diet, genetics, and metabolomics
- Platform to build upon with social, behavioral data and more
- Point-of-Care tool for future precision treatment

# SUSTAINABLE impact and future strategy

## YEARS 1 & 2

### Aim 1: Parallel Mouse & Human Studies



### Aim 2: Precision Obesity Pilot



### Aim 3: Application Programming Interface



## YEAR 3-5

### Precision Testing:

**Large Mouse Cohort Experiments**

**Large UNC Obesity Clinic Randomized Controlled Trial**

**Cost Effectiveness of Precision Obesity Treatment in UNC Health Care System**

**Integrate Treatment & Analysis Apps**

**NIH Genetics of Treatment RFA**

**NIH Commons RFA**



# Broad EXPANSION for research and treatment

## YEARS 1 & 2

### Aim 1: Parallel Mouse & Human Studies



### Aim 2: Precision Obesity Pilot



### Aim 3: Application Programming Interface



## YEAR 3-5

### Precision Testing:

Large Mouse Cohort Experiments

Large UNC Obesity Clinic Randomized Controlled Trial

Cost Effectiveness of Precision Obesity Treatment in UNC Health Care System

Integrate Treatment & Analysis Apps

NIH Genetics of Treatment RFA

NIH Commons RFA

## YEAR 5-10

### Expansion:

UNC as Landmark Precision Obesity Science and Treatment Center

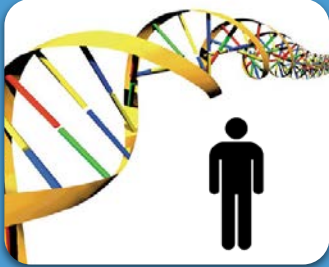
Define Essential Epic Measures at UNC and Beyond

Replication in Geisinger & NIH's 'All of Us'

UNC Roll Out and Evaluation

Broaden to Cardiovascular Diseases, Precision Exercise, Precision Behaviors & Pediatric Populations

# The Obesity Hub: IMPACT



## Fundamental shift to science and treatment

- Generate critical pilot data for multiple large, team science grants
- Transform understanding of precision obesity science and treatment



## Benefit to Society

- Obesity affects every organ system, huge disparities
- NC has 16<sup>th</sup> highest obesity, reduction of just 5% would save >\$7 billion in 10 years on health care alone



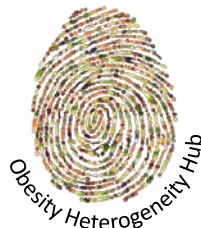
## Special Value to Carolina

- Carolina is about to amass big data but what is missing?
- Unique window to act
- Precision nutrition and obesity in IOM, NIH strategic plans
- UNC uniquely skilled to lead

# The Obesity Hub PROGRESS

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- Mouse Study
  - Analysis
  - Sequencing
- Human Population Data
  - Analysis
- Clinic
  - Training & Protocol
  - Data Collection Tools
- Application Programming Interface
  - App Framework
  - Formatting Genetic, Diet, Metabolomics Data





## Obesity as a Disease, Not a Behavior

The American Heart Association (AHA) defines ideal cardiovascular health in its 2020 Impact Goals for cardiovascular health promotion and disease prevention to include a body mass index (BMI)  $<25 \text{ kg/m}^2$ , which they recognize as an ideal health behavior.<sup>1</sup> We urge the AHA as it begins setting its 2030 goals to move beyond the concept of BMI as a health behavior. Equating BMI with behavior confuses the now widely accepted association between BMI and the mechanistically complex disease of obesity.<sup>2</sup> In our opinion, it makes little sense to establish goals and metrics that ignore a broad evidence base that supports the view of obesity as a complex, multifactorial disease and expect to achieve meaningful success in managing BMI to promote ideal cardiovascular health.

Despite the growing recognition of the complexity of obesity, like cancer decades ago, obesity has been treated as a single disease process with universal prevention and treatment strategies, rather than a fundamentally heterogeneous process with numerous underlying mechanisms and etiologies, each requiring unique prevention and treatment modalities. Obesity and related coronary artery disease, stroke, and other sequelae lead to increased health burden and billions of dollars in healthcare costs in the United States. Examining sources of heterogeneity in the etiology of obesity and in its complications will improve recognition of disease pathways and lead to actionable steps in community and clinical practice to tackle potentially distinct physiological mechanisms, disease courses, and individualized behavioral responses underlying successful weight management (ie, prevention, treatment, and weight loss maintenance). For the first time, we have access to technologies and methods to integrate large, complex biological and clinical data, which opens opportunities to identify and characterize mechanisms underlying obesity and its downstream complications, providing a critical window into personalized approaches to transform current prevention and treatment efforts as recently emphasized by Collins and Varmus.<sup>3</sup>

The most effective strategies to prevent and treat obesity are evidence-based approaches that recognize heterogeneity in obesity and its complications, and interindividual variability in treatment/intervention response, as well. Stepwise programs that are individually tailored and combine lifestyle changes (eg, diet, physical activity, sleep, stress reduction, and environmental triggers), medications, and surgery have been shown to be most effective in promoting weight loss and subsequent weight maintenance. An analogy is dyslipidemia, hypertension, and diabetes treatments that combine lifestyle changes with pharmacotherapy.

There are also adverse implications of viewing obesity as a health behavior rather than as a complex disease, such as the potential for weight bias and stigma. People with obesity already face bias and discrimination in employment, health care, and interpersonal relationships. Defining BMI, and by inference obesity, as an ideal health behavior belies the very real struggle that people with obesity face in addressing

Penny Gordon-Larsen,  
PhD  
Steven B. Heimsfield, MD

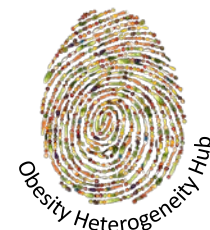
The opinions expressed in this article are not necessarily those of the editors or of the American Heart Association.

**Key Words:** cardiovascular diseases  
■ diabetes mellitus ■ life style  
■ metabolism ■ obesity

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<http://circ.ahajournals.org>

# More to Come!



# The Obesity Hub TEAM: 28 Investigators, 6 schools, 17 departments, and leaders from 5 Centers/Institutes

## Hub Leadership

<b>Penny Gordon-Larsen</b>	Nutrition
<b>Deb Tate</b>	Nutrition/Health Behavior
<b>Steve Zeisel</b>	Nutrition
<b>Kari North</b>	Epidemiology
<b>Vicki Bautch</b>	Biology
<b>Sriram Machineni</b>	Endocrinology
<b>Stan Ahalt</b>	Computer Science

## Hub Advisory

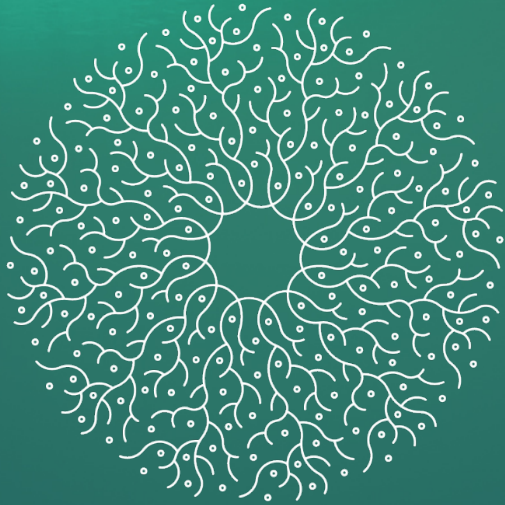
<b>Elizabeth Frankenberg</b>	Sociology
<b>Ethan Basch</b>	Hematology
<b>John Buse</b>	Endocrinology
<b>Michael Kosorok</b>	Biostatistics

## Hub Investigators

<b>Ana Bardone-Cone</b>	Psychology
<b>Kimon Divaris</b>	Pediatrics
<b>Sylvana Barros</b>	Periodontology
<b>John French</b>	Nutrition
<b>Diane Berry</b>	Nursing
<b>Jennifer Leeman</b>	Nursing
<b>Tim Wiltshire</b>	Pharmacogenomics
<b>Craig Lee</b>	Pharmacotherapy
<b>Annie Howard</b>	Biostatistics
<b>Christy Avery</b>	Epidemiology
<b>Rebecca Fry</b>	Environmental Sciences & Engineering
<b>Leslie Lytle</b>	Health Behavior
<b>Sally Stearns</b>	Health Policy Management
<b>Ian Carroll</b>	Nutrition
<b>Katie Meyer</b>	Nutrition
<b>Steve Hursting</b>	Nutrition
<b>Susan Sumner</b>	Nutrition







# PHYTA

SEAWEED FOR A SUSTAINABLE FUTURE

Lucy Best, Eliza Harrison, Emily Kian  
University of North Carolina at Chapel Hill  
Robertson Scholars



# the PROBLEM

An underwater photograph showing a large amount of plastic waste floating in clear blue water. The waste includes several large, crumpled clear plastic bags, smaller pieces of plastic, and some dark, indistinct objects. The scene is a stark representation of marine pollution.

**“Water and air, the two essential fluids  
on which all life depends,  
have become global garbage cans.”**

- Jacques Cousteau





**SEAWEED:** A cost-effective and  
pollution-reducing resource

the  
**SOLUTION**



## WHAT WE DO



Hire  
fishermen to  
install rig



Grow,  
harvest,  
and  
package



Transport



Distribute  
to buyers

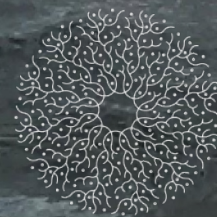


Sell  
nutrient  
removal  
credits





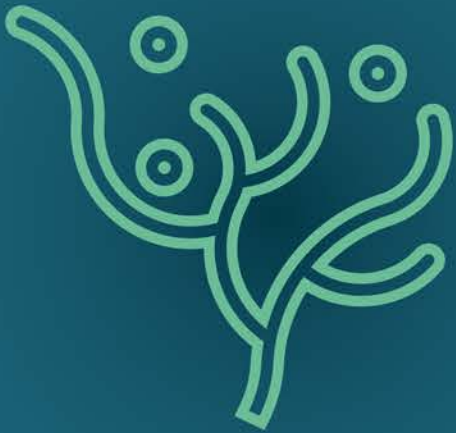
**Traditional Farms**



**PHYTA**



# COMPETITIVE ADVANTAGE



Versatile and easy  
to install



Existing seaweed  
farms harm  
ecosystems



Priced at  $\frac{3}{4}$  the  
market rate

# PARTNERS & CUSTOMERS



Seaweed Buyers

Credit Buyers

Partners

# Unit **ECONOMICS**



# Unit **ECONOMICS**





# Unit **ECONOMICS**

CREDITS  
**\$47**

COST  
**\$4**

PROFIT  
**\$9**

# Unit ECONOMICS

CREDITS  
**\$47**

COST  
**\$4**

PROFIT  
**\$9**

YIELD  
**1930 kg**



# Unit ECONOMICS

CREDITS  
**\$47**

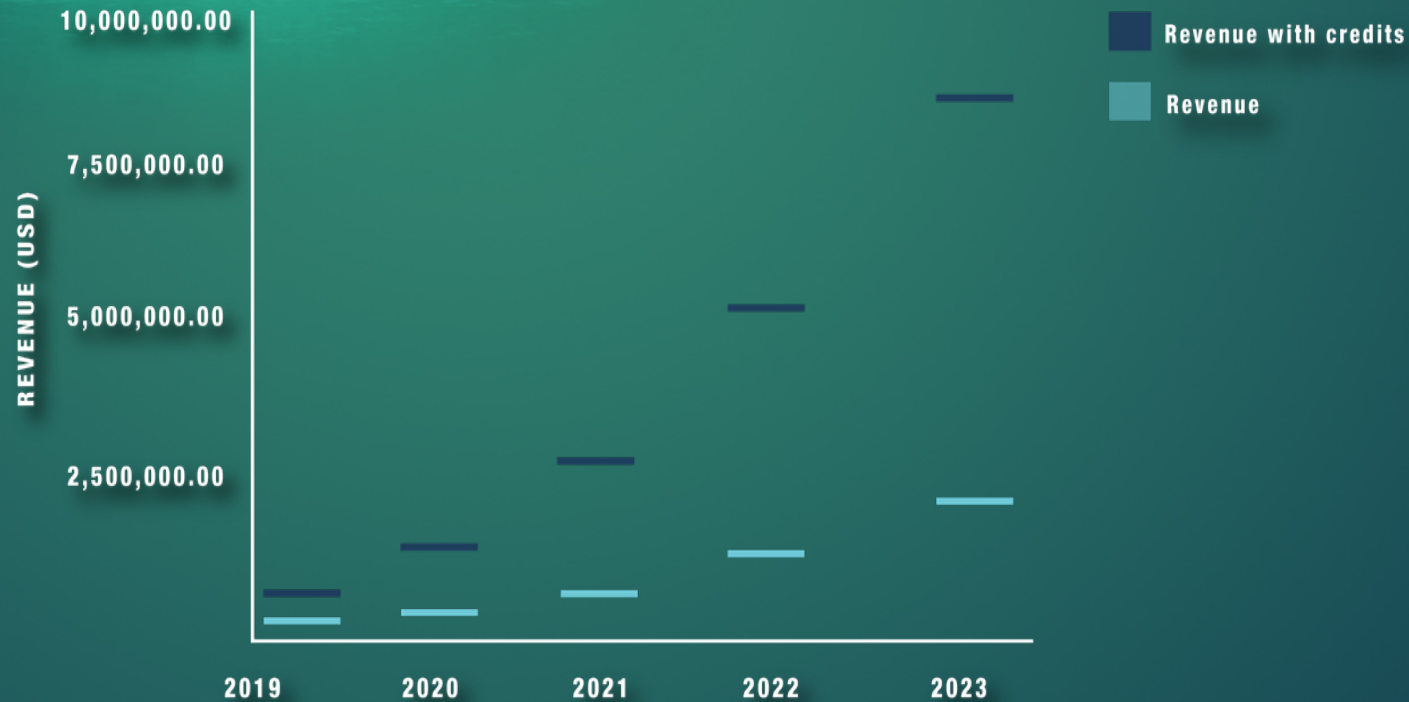
PROFIT  
**\$9**

COST  
**\$4**

YIELD  
**1930 kg**

TOTAL PROFIT  
**\$108,000**

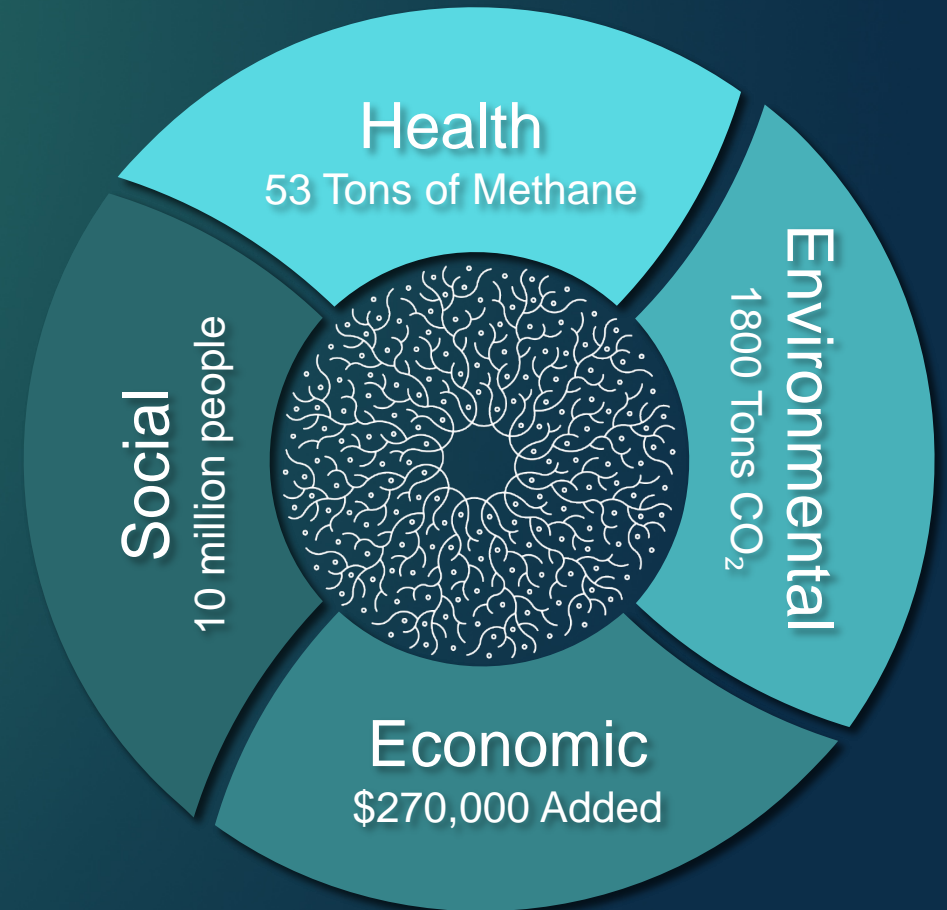
# FINANCIAL PROJECTIONS



Phase I  
U.S.A  
10 farms

Phase II  
Mexico  
40 farms

Phase III  
Brazil  
60 farms





# LOOKING FORWARD

Animal Feed  
**\$450 Billion**

• Artificial Intelligence  
**\$190.61 Billion**

# COMMUNITY IMPACT



=



0  
Liters



## COMMUNITY IMPACT



=



**0**  
Liters



**2,400**  
Trees

## COMMUNITY IMPACT



=



**0**  
Liters



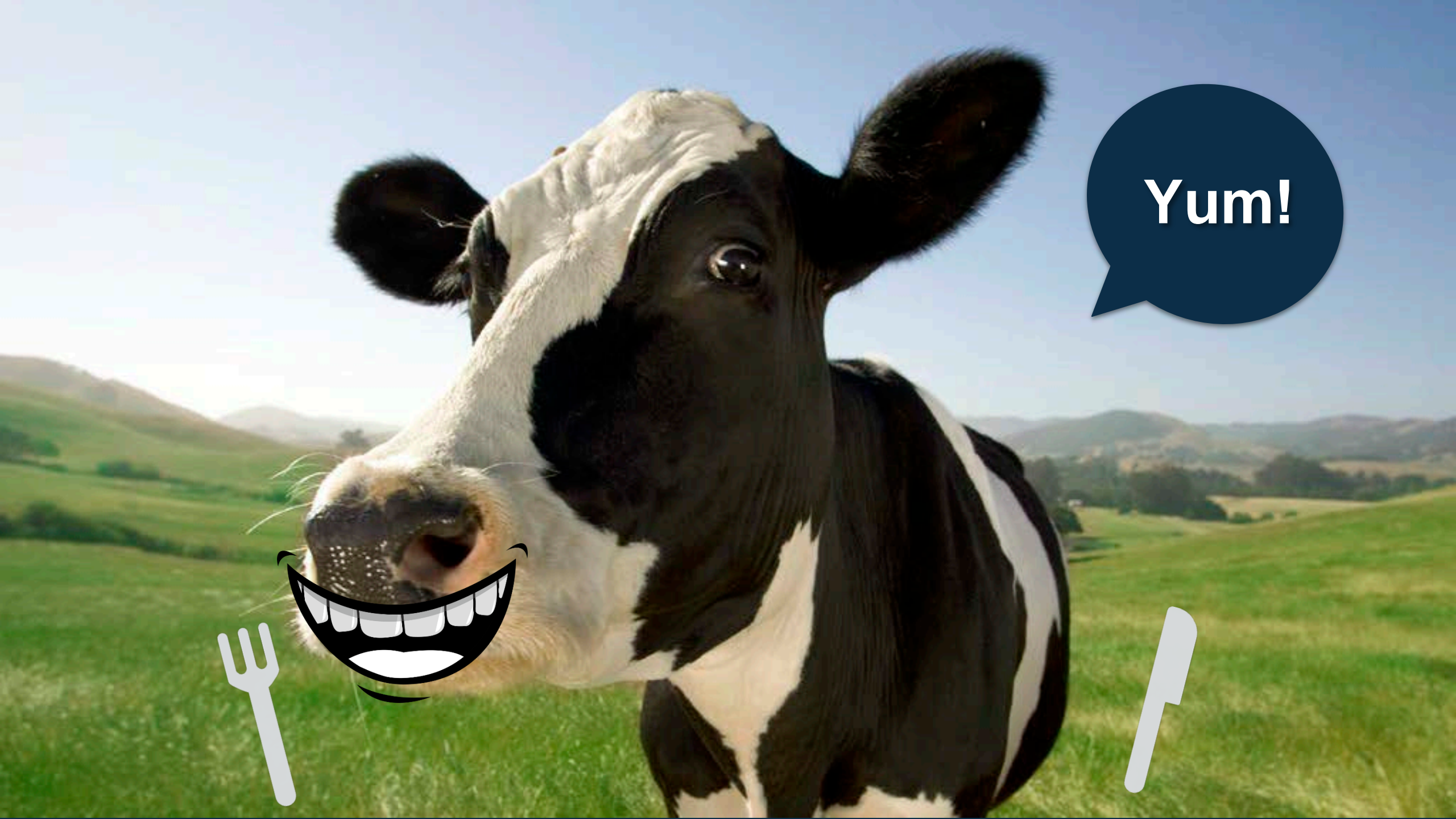
**2,400**  
Trees



**99%**  
Methane







Yum!



# TEAM & ADVISORS



**Lucy Best**  
COO  
Pragmatic Strategy



**Eliza Harrison**  
CEO  
Technical Solutions



**Emily Kian**  
CMO  
Communications

---

**Don Holzworth**  
Entrepreneur, Gillings School  
of Global Public Health

**James Morris**  
National Oceanic and  
Atmospheric Administration

**Kurt Ribisl, Ph.D.**  
Chair, Gillings School of  
Global Public Health

**Sheryl Waddell**  
Director, Global Innovate  
Carolina Network

# Transforming the World, **One Farm at a Time**



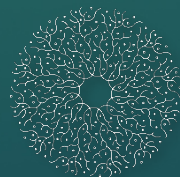
**Patented  
Structure**



**Profitable  
Business**



**Transformative  
Impact**

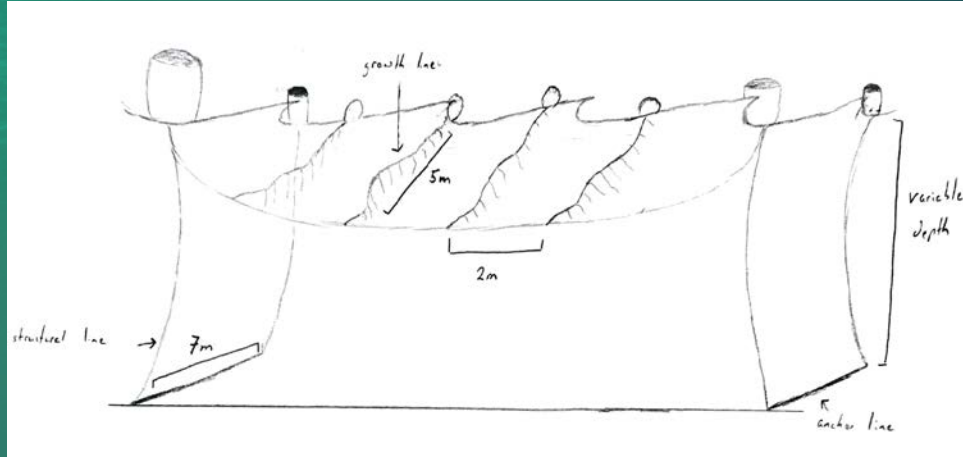


**PHYTA** [phyta.org](https://phyta.org)



## Appendix: I

# PILOT INITIATIVE



## Seaweed Buyers



## Credit Buyers



## Partners



## Future Customers



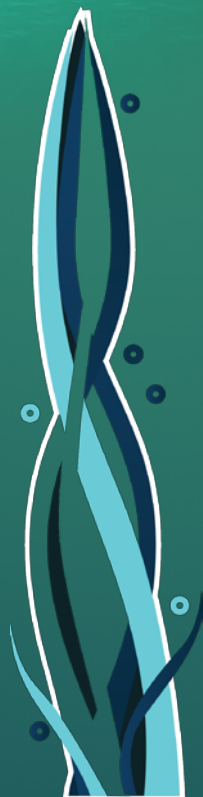
Appendix: II

# PARTNERS & TARGETED CUSTOMERS





Period I  
5 farms



Period II  
10 farms



Period III  
20 farms



Period IV  
50 farms

With \$1.2 million  
over 16 months

Appendix: III  
**INVESTMENT**

**\$3,540**

Annual Operating Cost

**6 months**

Without Credit Sales

**1 months**

With Credit Sales

**1600%**

ROI

**85%**

IRR

Appendix: IV

**PAYBACK PERIOD**



Polysaccharides are biodegradable

Resistant to microwave radiation

Less brittle

Durable

Water soluble

Improve global food security

Increases soil nutrient and water retention

Appendix: V

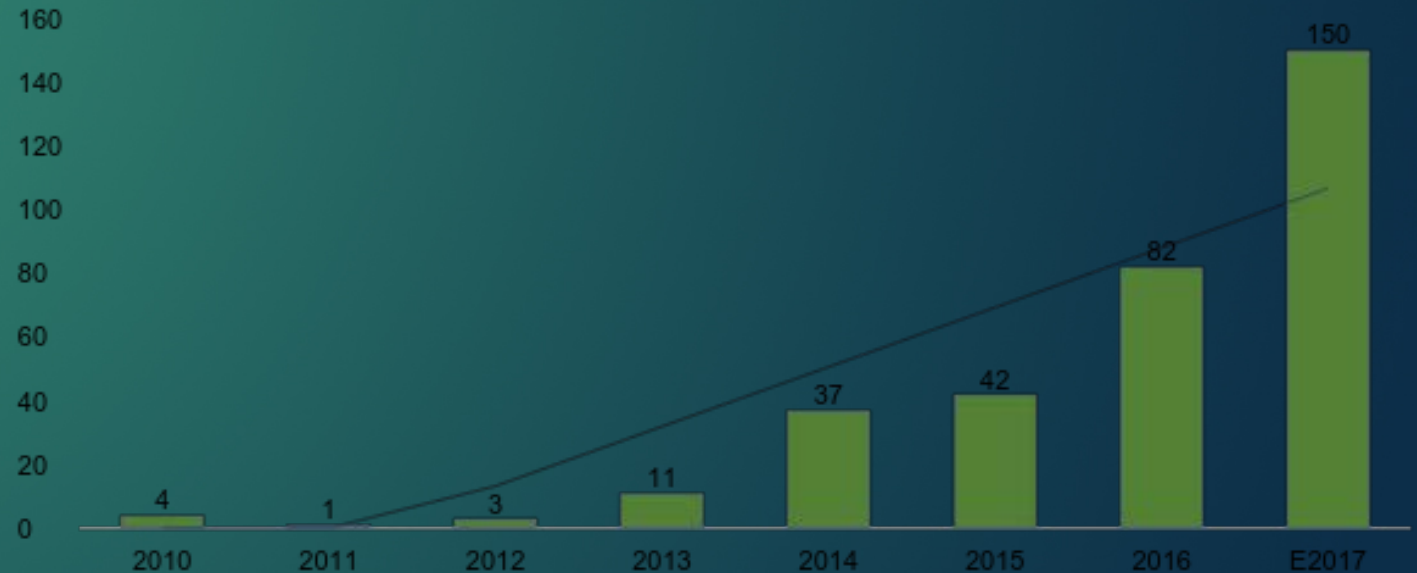
# SEAWEED AS PLASTIC



**60%**

Projected growth  
between 2017 and 2018

Green bonds issues since 2010



Source: World Economic Forum 2017

Appendix: VI

# GREEN BOND MARKET





Appendix: VII

# SCALABILITY



**James Morris**

National Oceanic and Atmospheric  
Administration



**Justin Stone**

Financial Consultant, Certified Public  
Accountant, entrepreneur



**Melissa Carrier**

Professor of Practice in the Department of Public  
Policy at the University of North Carolina



**Don Holzworth**

Entrepreneur in residence at UNC Gillings  
School of Global Public Health



**Laura Fieselman**

Coordinator for UNC Social Innovation  
Initiative, founder of Raleigh City Farm



**Kurt Ribisl, Ph.D.**

Chair in the Gillings School of Global Public  
Health - Department of Health Behavior



**Tim Flood, Ph.D.**

Associate Professor of Management and  
Corporate Communication

Appendix: VIII

# TEAM & BOARD OF ADVISORS

UNIT PRICE PER KG	
Biomass generated per harvest (kg)	643.5
Number of harvests per year	3
Total annual biomass (kg)	1930.5
Rig Lifetime (yr)	3.5
REVENUE	
Biomass	24,420
Credits	89,836
Total Revenue	114,256
COSTS	
Rig structure	2,782
Labor for Harvesting and Processing	3,540
Transportation	89
Bonus per kg	965
Packaging	171
Permitting	100
Total Costs	7,849

Profit from biomass	16,572
Profit from credits	81,987
Profit per kg seaweed	8.58
Profit from credits	46.54
Total Profit per kg with credit	55.12

Appendix: IX

# UNIT ECONOMICS



## Appendix: X FIVE YEAR PROJECTIONS

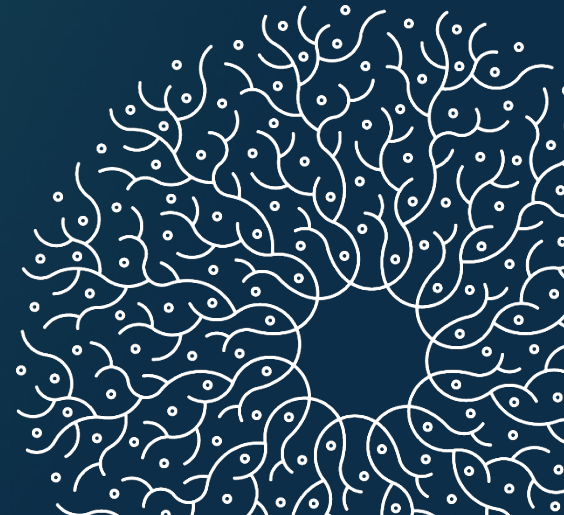
### BUSINESS MODEL

Year	2019	2020	2021	2022	2023	2024	2025	2026
Number of rigs	1	10	20	40	60	80	90	100
Total quantity of biomass (kg)	644	12,870	25,740	77,220	115,830	154,440	173,745	193,050
Revenue								
Animal Feed	-	-	6,950	20,849	41,699	62,548	83,398	104,247
Bioplastics	483	4,826	9,653	28,958	57,915	86,873	115,830	144,788
Cosmetics	7,658	76,577	153,153	459,459	918,918	1,378,377	1,837,836	2,297,295
Credits	29,945	598,907	1,197,814	3,593,443	5,390,164	7,186,886	8,085,246	8,983,607
Total Revenue	138,086	980,310	1,367,570	4,102,709	6,408,696	8,714,683	10,122,310	11,529,937
Costs								
Structure and Processing	12,037	56,071	92,968	232,980	446,777	620,827	834,625	1,008,674
Operations	5,502	20,974	40,249	105,347	208,493	311,640	414,787	517,933
Management	60,000	100,000	150,000	200,000	200,000	200,000	200,000	200,000
Total	77,540	177,045	283,217	538,326	855,270	1,132,467	1,449,411	1,726,608
<b>Profit</b>	<b>5,755</b>	<b>497,602</b>	<b>1,038,078</b>	<b>3,318,058</b>	<b>5,012,276</b>	<b>6,746,242</b>	<b>7,542,100</b>	<b>8,377,705</b>
Profit Margin	77%	81%	79%	82%	79%	78%	75%	74%

Food Products Animal Feed  
Hygiene Products Fertilizer  
Food Products Gelling Agent  
Dietary Supplements  
Food Products  
Animal Feed Fertilizer  
Animal Feed  
Gelling Agent

Appendix: XII

# SEAWEED REIMAGINED







## Appendix: XIII

# POTENTIAL APPLICATIONS

Market Segments	Value per kg (USD)
Bioplastics	2.50
Personal Hygiene	20.41
Vitamin Supplements	8.18
Food	16.56
Feed & Protein	1.43
Gelling Agent	1.05
Fertilizer	0.55
Carbon Credit	0.02
Nitrogen	40.00
Phosphorus	41,000.00

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## Appendix: XIV

# BIBLIOGRAPHY

# PARTNERS & CUSTOMERS



Seaweed Buyers



Credit Buyers



Partners



## Seaweed Buyers



## Credit Buyers



## Partners



## Future Customers



Appendix: II

# PARTNERS & TARGETED CUSTOMERS