



HPC for Biomed Applications The Harvard Orchestra Experience

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Outline

- About HMS
- Context
- Why Shared Biomed HPC is different
- About Orchestra today and tomorrow
- Why it matters
- Biomed HPC 2010



About the Longwood Medical Area

- 213 Acres, 37,000 employees, 15,000 students
- 21 institutions
- 2.15 million in- and outpatient visits
- Forty-seven percent of all hospital-based outpatient clinical visits, and fifty-one percent of all inpatient admissions in Boston
- Forty-seven percent of all staffed beds in Boston
- 15,016 births in the LMA



HMS Affiliated Research – Longwood

- Four of the top five Independent Hospital recipients of NIH funding nationwide
- Massachusetts was the number two state recipient of National Institutes of Health (NIH) funding
- Boston is ranked as the number one city in the nation for NIH support
- If the LMA were ranked as a city, it would be number three for funding, after New York and before Philadelphia. If the LMA were ranked as a state, it would be number eight, after North Carolina, and before Washington.
- National Institutes of Health (NIH) awards more than doubled for the LMA institutions from \$302 million to \$722 million over the decade between FY 1991 and FY 2001



What makes Biomed HPC Different?

- Larger problem space
 - Whole genome processing
 - Whole 'Ome processing
 - Image Processing
 - Simulations
 - Matlab, R, SAS, etc
 - Everything Else
- Bursty Usage
 - Processing power is not always the bottleneck
 - Most work is “embarrassingly parallel”



Biomed HPC Differences (cont.)

- Researchers
 - Funding challenges
 - Grant funding limitations and requirements
 - Everyone is a CIO
- Systems Diversity
 - Plethora of small clusters
 - General lack of centralization
 - White boxes to blue genes
- Lack of IT training



About HPC @ HMS

- Today: Orchestra Phase I
 - Modest shared cluster
 - 1000 processor cores
 - 600TB attached NAS storage
 - Interconnect: Gigabit Ethernet
 - Subsidized user contribution model
 - BUT, MOST computing happens under the desk and behind the curtain!



About HPC @ HMS (cont.)

- This Fall: Orchestra Phase II
 - \$3.7 Million NIH S10 ARRA Award
 - Will support 30 existing NIH researchers
 - 6,000K processor cores
 - Petabyte of storage
 - 10g Ethernet and Infiniband
 - High Performance Scratch Space
 - Small, integrated GPU cluster
 - Modest SMP options (24 cores)



Shared Capacity @ HMS

- Critical to the success of the shared infrastructure model
 - ½ the nodes have been contributed because of shared usage models
 - Contributors get guaranteed access to their nodes but others can use them when they were idle
 - NOTE: This approach would fail in many other disciplines
- LSF used for queue management
 - Time limited queues
 - All and shared queues



Storage Needs and Architecture

- 70% annual growth in storage with an accelerating growth rate
 - Driven largely by next generation sequence analysis and high resolution microscopy
- Implemented Isilon Storage Arrays
 - 2 600TB clusters mirrored in different facilities
 - 6 weeks of checkpoints (daily for last week)
 - Uses NFS



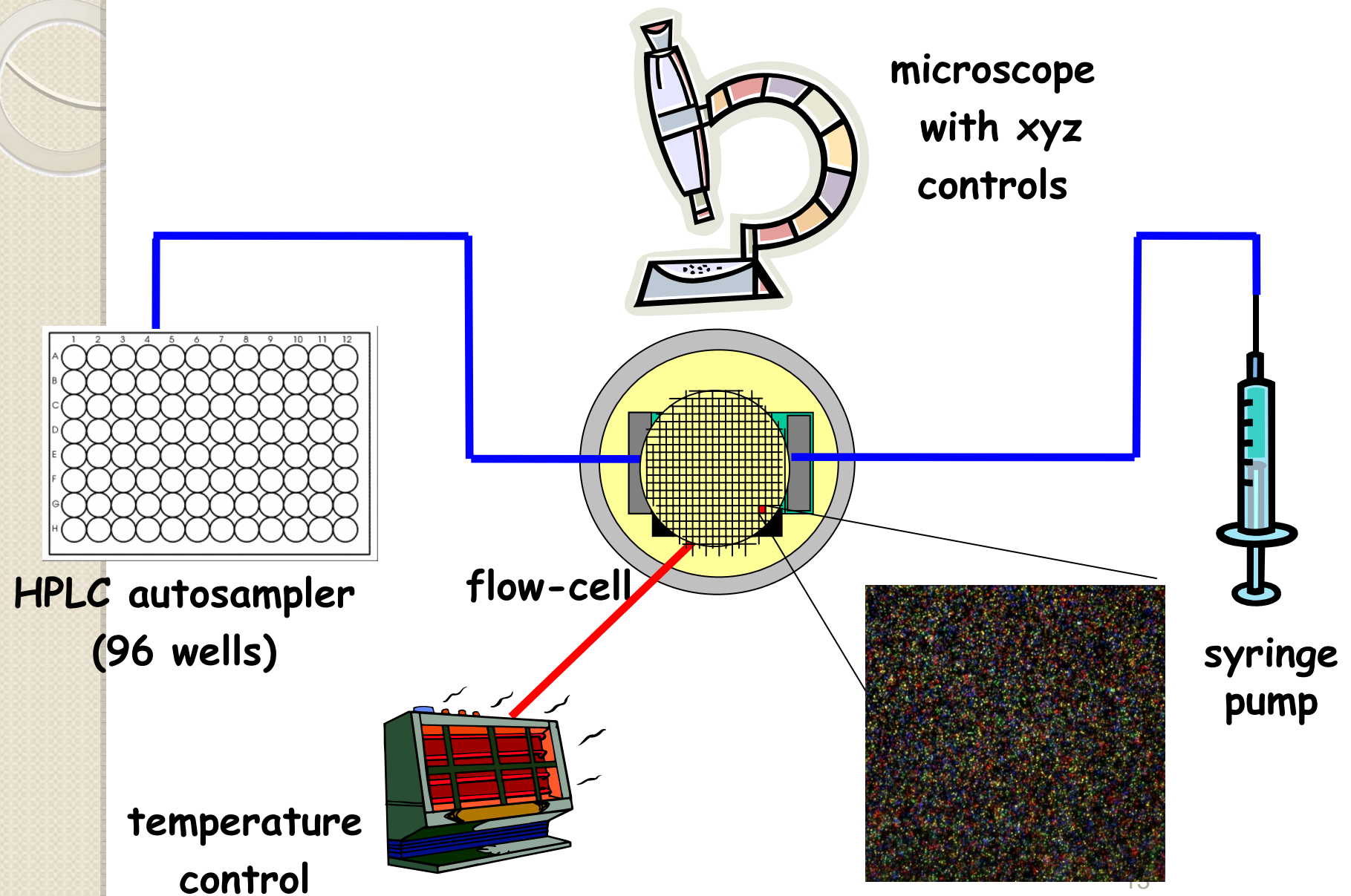


Challenge: Whole Omes

- Current cost 100K
- Working on <\$1,000 whole genome
- High Throughput Instrumentation
 - \$250-\$500 for 500,000 SNP's
 - \$50-100K for good quality phenotyping of 100K++ individuals
 - What about the samples (consented)
 - \$650/patient
 - Dozens a week
 - Wait in clinic: \$450+/patient



Sequencing Equipment



2nd-generation sequencing

Harvard-model-F07: \$106K incl. computer. \$14K support.
Open-source software, hardware, wetware Reduce reagent volume & per vol cost 100X each.



E07 (Nikon)

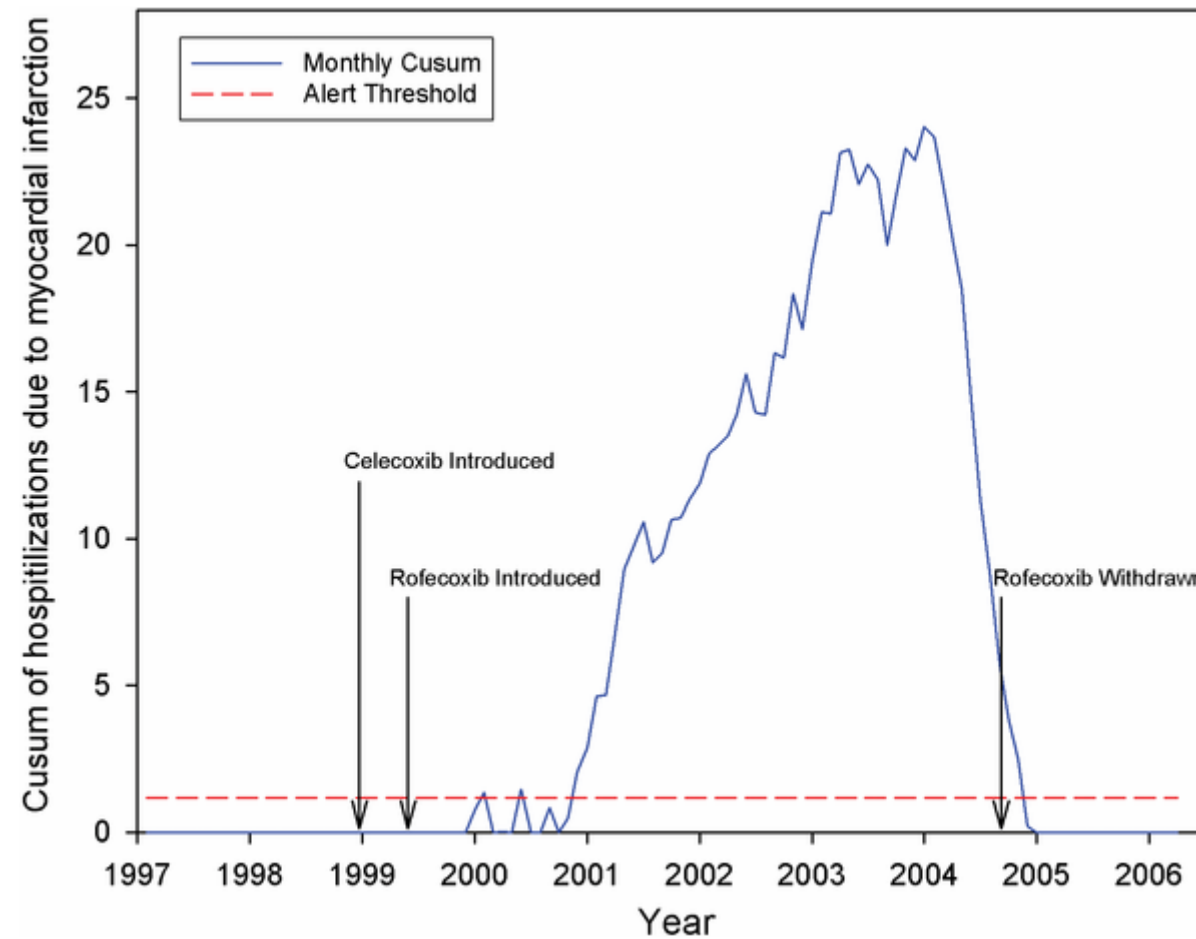


F07





Challenge: Everything to Everything



Biomed HPC Leadership Summit

- 150 leaders in biomedical HPC
- Networking, birds of a feather and user polls
- 2010 Summit to convene October 17th – October 19th in Boston MA
- <http://biomedhpc.med.harvard.edu>



Thank you

- Questions, comments:
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