

# Minority and Underserved in Clinical Trials: NCI Programs to Enhance Accrual

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### 1993 NIH Revitalization Act

#### Inclusion of:

- Women and minorities and their subpopulations in all clinical research
- Minorities in phase III trials so that valid analysis of differences in intervention effects can be performed
- Cost is not an acceptable reason for exclusion
- NIH initiate programs and support for outreach to recruit and retention



#### Elderly

Treatment: 70+ (5-7%)

Prevention: 70+ (9%)

Adolescents

Lower Socioeconomic status

Rural Areas

African Americans

Hispanics/Latinos

**Asian Americans** 

American Indians



### **Today's Presentation**

- Accrual in the Clinical Trials Network
- Beyond "Bean Counting"
  - Enhancing the Infrastructure
  - Generating Research Questions
- Trans NCI Initiatives



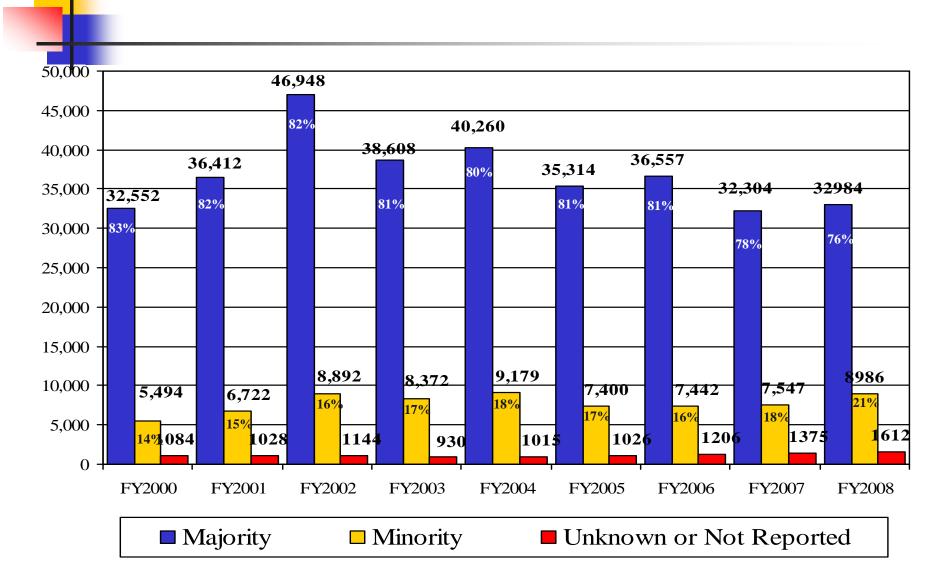
#### **NCI Clinical Trials Network**

- NCI Cancer Centers (64), other academic centers
- Community Clinical Oncology Program (47)
- Minority-Based Clinical Oncology Program (13)
- Cancer Disparities Research Partnership Program (5)
- NCI Community Cancer Centers Program (16)

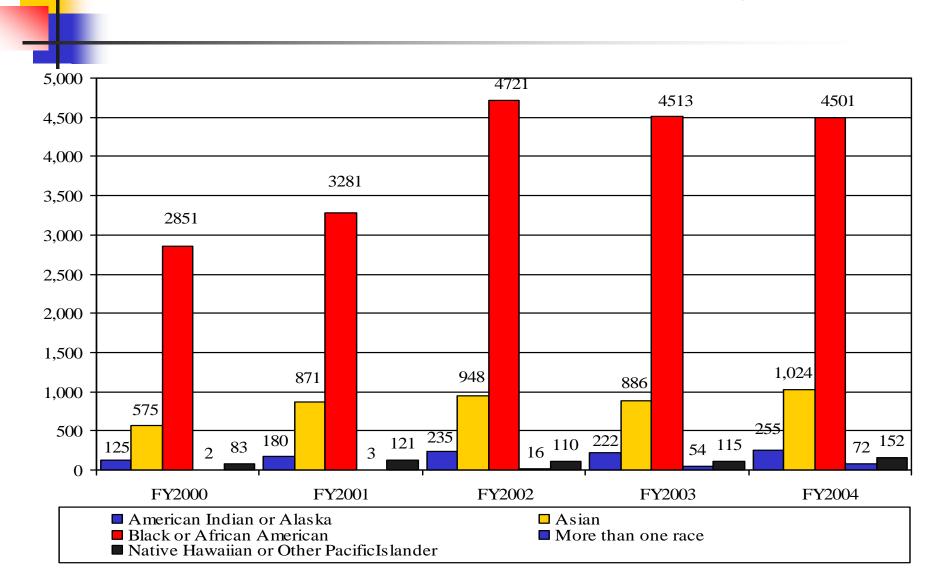


- OMB Directive 15 issued in 1997:
  - Created racial and ethnic standards for Federal statistics and administrative reporting

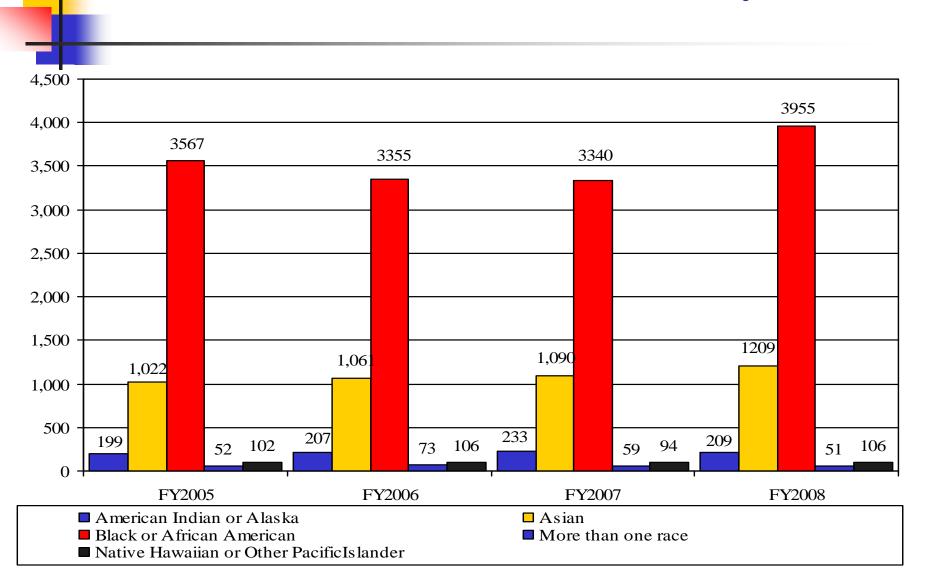
## Minority Enrollment to NCI (CTEP, DCP, RRP) Clinical Trials



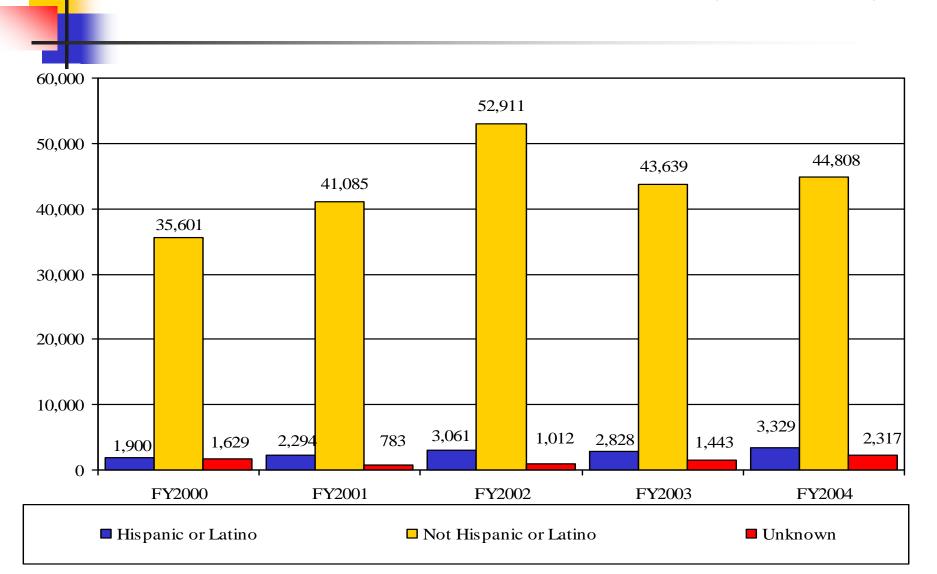
## Minority Enrollment on NCI (CTEP, DCP, RRP) Clinical Trials by Race



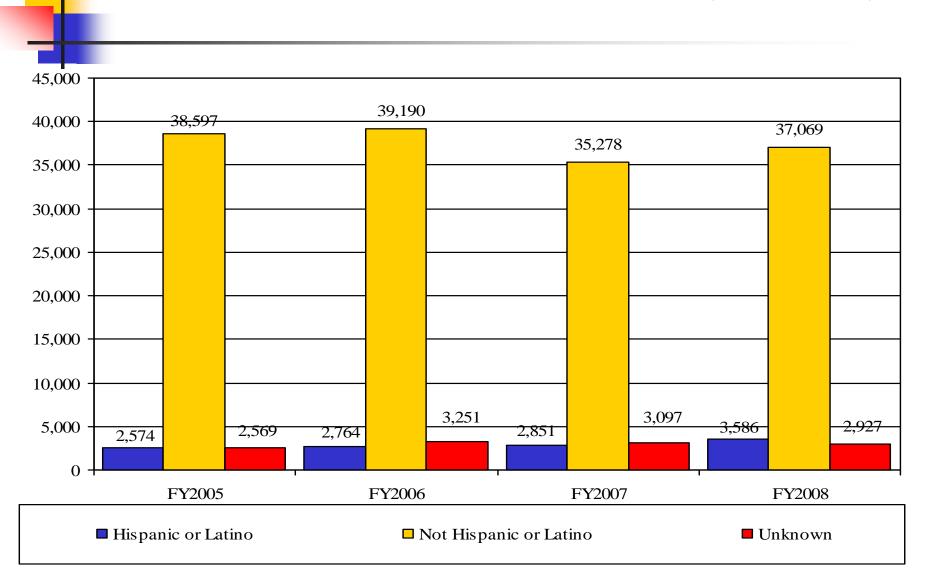
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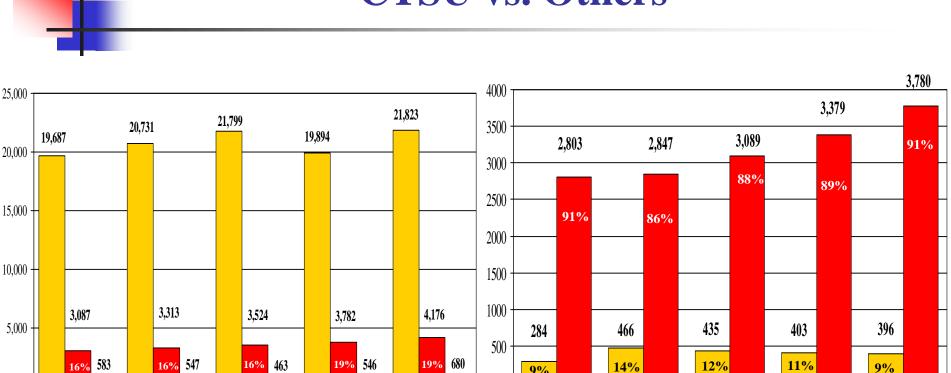
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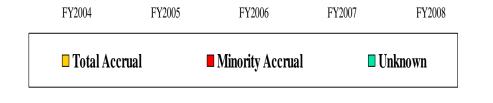
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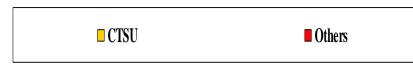


# Accrual to CTEP Treatment Phase III Clinical Trials CTSU vs. Others



FY2004





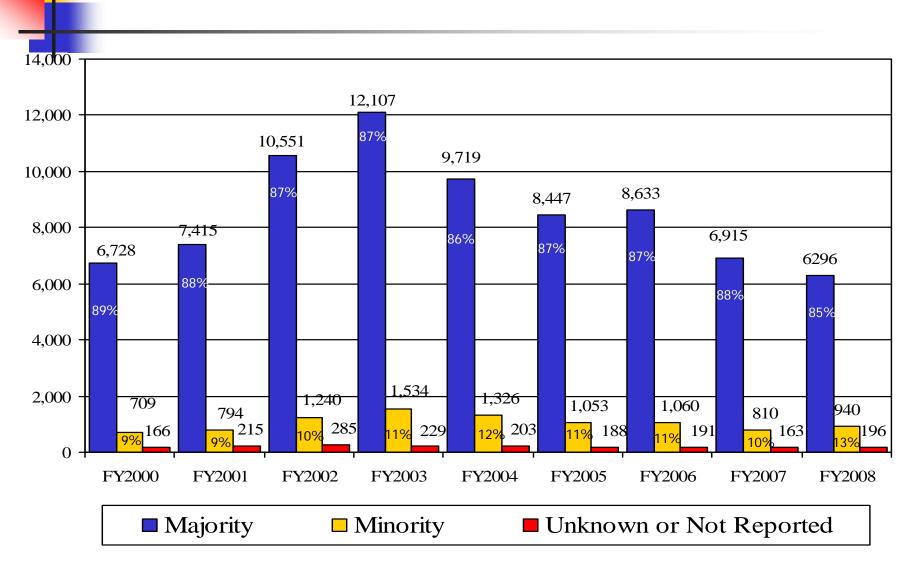
FY2006

FY2007

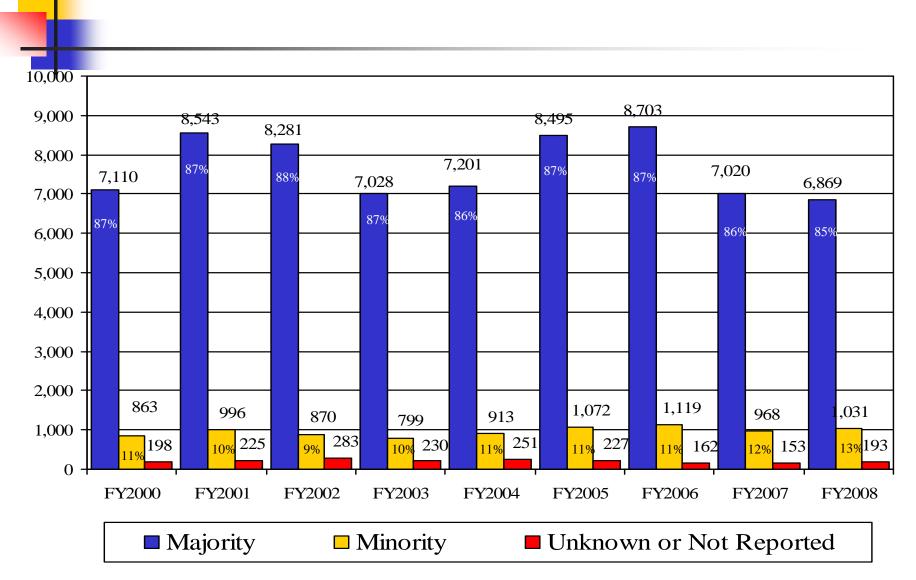
FY2008

FY2005

# Minority Enrollment on NCI (CTEP, DCP, RRP) Clinical Trials For Patients 70 and Older



# Minority Enrollment on NCI (CTEP, DCP, RRP) Clinical Trials For Patients 65 and Older



#### 13 Funded MBCCOPs

- SUNY Downstate Medical Center, NY
- John Stroger Cook Co., IL
- Louisiana State University, LA
- Louisiana State University, LA
- Medical College of Georgia, GA
- Meharry Medical, TN
- Gulf Coast, AL
- South Texas Pediatrics, TX
- San Juan, PR
- University of Hawaii, HI
- University of Illinois, IL
- University of New Mexico, NM
- Va. Commonwealth U., VA

### **Impact of MBCCOPS on Clinical Trials**

Minority-Based CCOPS						
Grant/Fiscal Year	# of Funded MBCCOPS	Treatment Accrual	Prevention & Control Accrual	Overall Accrual	# of Minority Patients	% Minority Overall
2000	8	425	358	783	446	57 %
2001	10	642	541	1183	676	57 %
2002	11	567	682	1249	901	72 %
2003	11	521	930	1451	1088	75 %
2004	13	673	467	1140	674	59 %
2005	13	709	428	1137	579	51 %
2006	13	684	393	1077	602	56%
2007	14	805	776	1581	965	61%
Total (2000 – 2007)		5,026	4,575	9,601	5,931	
Community Clinical Oncology Program (CCOPS)						
2000	51	6241	4872	11,113	938	8 %
2001	50	6328	7936	14,264	991	7 %
2002	50	5257	6373	11,630	888	8 %
2003	50	5269	6963	12,232	1,038	8 %
2004	50	6729	4871	11,600	1,095	9 %
2005	50	7239	4783	12,022	846	7 %
2006	50	5718	4601	10,319	974	9 %
2007	49	5533	6020	11,553	1,115	10%
Total (2000 – 2007)		48,314	46,419	94,733	7,885	

### NCI Community Cancer Centers Program: Clinical Trials

- Goals:
  - Increase Accrual to all trials
  - Accrual focus:
    - Minorities and Underserved
    - Multimodality and early phase trials

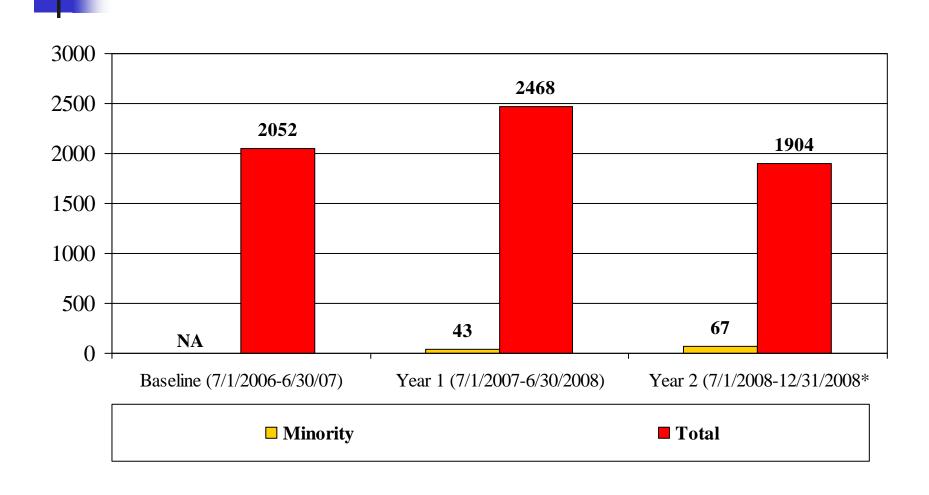




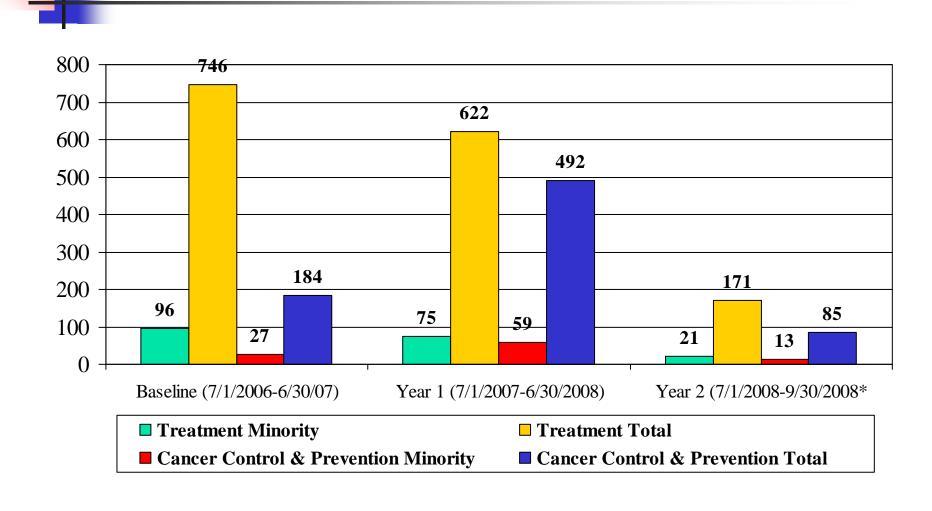
### 10 Organizations Selected

- <u>6 Community Hospitals</u>
  - Hartford Hospital, Connecticut
  - St. Joseph's/Candler, Georgia
  - Our Lady of the Lake Regional Medical Center, Louisiana\*
  - Spartanburg Regional Hospital, South Carolina\*
  - St. Joseph Hospital, Orange, California
  - Christiana Hospital, Delaware\*
- 2 Rural Hospitals Native Americans
  - Billings Clinic, Montana\*
  - Sanford USD Medical Center, South Dakota\*
- 2 National Health Systems Multistate with multiple program locations
  - Ascension Health: Indianapolis, Milwaukee and Austin
  - Catholic Health Initiatives: Towson, MD; Colorado Springs and 3 sites in Nebraska\*
  - \* CCOPMBCCOP or affiliation





### NCCCP NCI Cooperative Group Trials



# 4

## Beyond "Bean Counting"



Refining tools to assess comorbidity in older patients

Expanding trials to include patients with comorbidity

### K-ras Mutations and Colon Cancer Benefits from Cetuximab

Karapetis. NEJM 2008, Cutsem, ASCO 2008

• Among minorities with colon ca: Higher incidence of regional & distant disease; higher mortality

Ongoing Trials:

	MBCCOP	CCOP	
C80405	90	448	
N0147	130	854	

Target: 2,289

Accrual: 1,429

% Min. accrual= 22

- Research Questions:
  - Prognosis vs. Prediction
  - Interaction with co-morbidity (adherence)
  - Sensitivity of assay; community/central concordance



- What data should be collected to
  - Improve clinical outcomes?
  - Interpret clinical outcomes?



- Data suggests SES influences clinical outcomes
  - IOM, Singh, Lantz, HHH PRG Health Disparities
- Currently, we collect zip codes and insurance status: SES or surrogates are not routinely collected
- Consideration for the future trials
  - Education
  - Census Tract information



### **MBCCOP Mentoring Case Report**

- Private Practitioner in San Juan, PR with staff to support practice
- Participating site in SELECT
- Accrued 1000 + men
- San Juan MBCCOP Mentoring:

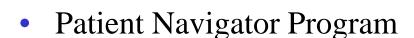
Data management

IRB access

Audit preparation







- Partnership (MBCCOP, CCOPs, NCCCP, Cancer Centers)
- Community Network Program
  - Education and collaboration with clinical trials network
    - Baquet, et al., Analysis of Maryland Cancer Patient Participation in National Cancer Institute–Supported Cancer Treatment Clinical Trials, JCO, 2008
- ENACCT (Ed. Network to Advance Ca Clinical Trials

### **Minorities in Chemoprevention Trials**

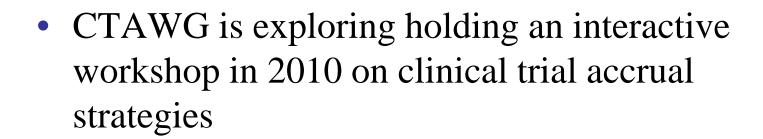
	Total Enrollment/%	Minority Enrollment/%
ВСРТ	13,388	3.7
6/1992-9/1997		AA 220 (1.7)
	<b>RAF: 98,018</b>	Other 319 (2.0)
		<b>RAF: 5,530</b>
PCPT	18,882	8.0
1/1994-5/1997		Black 723 (4)
		Other 767 (4)
STAR	19,747	6.5
7/1999-11/2004		AA 474 (2.4)
		<b>Hispanic 384 (2.0)</b>
	RAF: 184,461	RAF: 28,910
SELECT	35,534	21.0
8/2001-6/2004		Black 5,256 (15)
		Asian 474 (1)
		Hispanic (5)



• Foster collaboration and information sharing of clinical trials accrual initiatives among the NCI Centers, Offices, Divisions and Programs that review, support, and fund clinical trials.

• Develop initiatives that promote successful clinical trial accrual practices





• CTAWG with OCE is investigating how sites might use an interactive web site of evidenced-based accrual strategies.

We can all help in finding new cancer treatments.

Consider taking part in a clinical trial.

w.cancer.gov 1-800-4-CANCER

ABOUT CLINICAL TRIALS

WWW.cander.gov
1-900-4-CANCER

National Cancer Institute

Today, we have better cancer treatments.

Why? Because people like you took part in a clinical trial.

Ask if one is right for you.



www.cancer.gov 1-800-4-CANCER



## Impact of Programs Enrolling Minorities and Underserved in Cancer Clinical Trials

- Serve as training ground for oncologists and related disciplines in oncology practices
- Laboratories for identifying preclincal, clincal and behavioral issues
- Collection of tissue for advanced technologies,
   (i.e., pharmacogenomics)
- Enrich literature on research, recruitment, retention and overall improvement in cancer clinical care in underserved populations.