



SYMPOSIUM

**BLACK
WO(MEN)
SPEAK**



Session 2

How Healthcare Provider
Communication Can Impact
Clinical Trial Enrollment

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SPEAK**



SPEAKER

Dr. Adaeze Nwosu Iheme

Breaking Barriers, Building Trust
and Finding Solutions

black-women-speak.org

BLACK
WOMEN
SPEAK



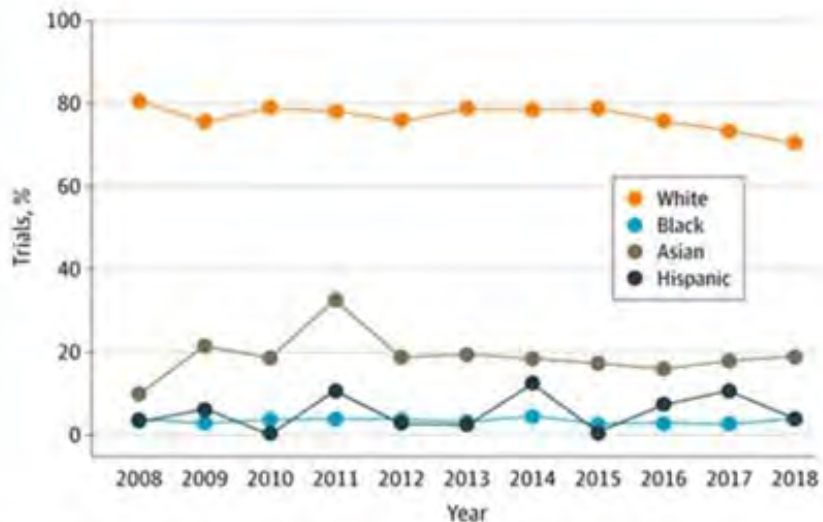
Breaking Barriers Building Trust Finding solutions...

Adaeze Iheme, MD

Assistant Professor, Breast
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MD Anderson Cancer Center

A Percentage of patients enrolled in FDA drug approval trials by race



Loree et al, Jama Onc 2019

Racial/Ethnic Group	No. of Trial Enrollees		2013 Cancer Prevalence	EF
	No.	%	%	%
All cancers				
Non-Hispanic white	46,431	83.4	79.0	1.2
African American	3,270	6.0	10.0	0.7
Hispanic	1,484	2.6	7.0	0.4
Asian/Pacific Islander	2,982	5.3	3.3	1.9
American Indian/Alaskan Native	190	0.3	0.3	1.3
Other	1,332	2.4		

Duma et al...JOP 2018

Having Breast Cancer while Black...

- . Mortality rate **40%** higher in BW even though Black women = White women in rate of developing cancer.
- . BW twice more likely to get an aggressive form of breast cancer .





Barriers

1

Health Provider

-Poor Physician and Team Communication

-Physician –patient Bias

-Cultural Differences and Diversity in
Workforce

-Provider not aware of potential trials

2

Patient

-Distrust/Broken Trust

-Socioeconomic factors

Rates of agreement to participate if asked...

Comparison Group	Black	Hispanic	Asian
All Studies			
No. of studies	13	7	6
Rate, %	58	67	64
Rate in white patients, %	55	61	57
p	.88	.48	.62

Unger et al. JNCI 2021

State of Workforce in Oncology ..2021

DIVERSITY IN ONCOLOGY



- 4.7% Oncologists who are Hispanic or Latino⁵
- 3% Oncologists who are Black or African American⁵
- 0.1% Oncologists who are American Indian or Alaska Native⁵
- 35.2% Oncologists who are female⁶

GEOGRAPHY

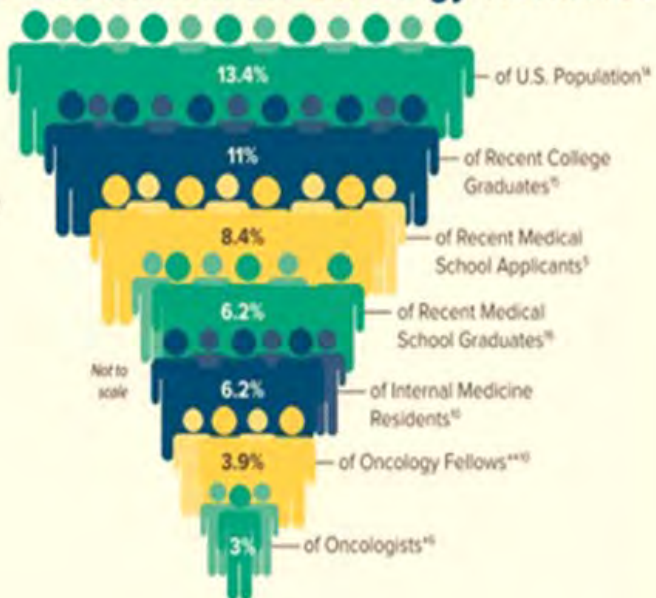


- 11.2% Oncologists who practice in a rural area^{6,11}

Black Representation in the Oncology Workforce

People who are Black comprise:

At each step towards becoming an oncologist, the percentage of Black participants decreases.



Patient Barriers...

1. Distrust/Broken Trust

- Ask family/advocates for recommendations/referrals to providers they trust
- Seek a second opinion(trust your instincts)

2. Socioeconomic factors



OTHER BARRIERS...



-Trial access

-Limited Eligibility



ASCO- Friends of Cancer Research Joint Statement..

Washout periods	Time-based washout periods should be removed from eligibility criteria in most cases. 2. Relevant clinical and laboratory parameters should be used in place of time-based washout periods to address safety.
Concomitant medications	Only an exclusion factor if known drug-drug interactions exist or potential toxicities will impact efficacy.
Prior therapies	Not an exclusion unless it potentially interact with a prior therapy
Laboratory reference ranges and test intervals	should only be used as exclusion criteria when scientifically justified and when abnormal test results confer safety concerns
Performance status	Patients with reduced PS should be included unless there is a scientific and/or clinical rationale for exclusion justified by established safety considerations

Recommendations from ASCO'S Road to Recovery

- Allow more local/remote administration of treatment
- Make trials equitable/accessible and realistic
- Trials should be designed in a way that it can be easily integrated into routine clinical care.
- Limit collection of research biospecimens



Financial Barriers...Big deal

Nonmedical costs
Medical costs

The screenshot shows the CONGRESS.GOV website interface. At the top, there is a navigation bar with "CONGRESS.GOV" in blue and red, "Advanced Searches | Browse" in blue, and "Legislation |" on the right. Below this is a search bar with "Legislation" selected and a dropdown arrow, and a text input field containing "Examples: hr5, sres9, 'health care'". A "MORE OPTIONS" dropdown is visible below the search bar. The main content area shows the breadcrumb "Home > Legislation > 117th Congress > H.R. 5030" and the title "H.R. 5030 - DIVERSE Trials Act" in bold, with "117th Congress (2021-2022) | Get alerts" below it. A red "BILL" button and a "Hide Overview" button are present. The "Sponsor:" field lists "Rep. Ruiz, Raul [D-CA-36] (Introduced 08/13/2021)". The "Committees:" field lists "House - Energy and Commerce; Ways and Means". The "Latest Action:" field lists "House - 08/16/2021 Referred to the Subcommittee on Health. (All Actions)". The "Tracker:" field shows a progress bar with a green dot and the following steps: "Introduced" (highlighted in black), "Passed House", "Passed Senate", "To President", and "Became Law".



Increasing Racial & Ethnic Diversity in Cancer Clinical Trials

The American Society of Clinical Oncology (ASCO) and Association of Community Cancer Centers (ACCC) jointly released recommendations to engage the entire cancer clinical trial ecosystem in expanding the participation of underrepresented individuals in research that advances progress against cancer and increases the equity, diversity, and inclusion (EDI) of cancer clinical trials.

ASCO-ACCC Recommendations



IMPROVE ACCESS

Every person with cancer should have the opportunity to participate in clinical trials, as an integral component of high-quality cancer care.



EQUITY FOCUSED DESIGN

Trials should be designed with a focus on reducing barriers and enhancing EDI and work with sites to conduct clinical trials in ways that increase participation of underrepresented populations.



PARTNERSHIPS

Clinical trial sponsors, researchers, and sites should form long-standing partnerships with patients, patient advocacy groups, and community leaders and groups.



EDUCATION & TRAINING

Those designing or conducting trials should complete recurring education, training, and evaluation to demonstrate and maintain cross-cultural competencies, mitigation of bias, effective communication, and a commitment to achieving EDI in clinical trials.



INVEST IN EDI

Research stakeholders should invest in programs and policies that increase EDI in clinical trials and in the research workforce.



SHARING DATA & STRATEGIES

Research stakeholders should collect and publish aggregate data on racial and ethnic diversity of trial participants when reporting the results of trials, programs, and interventions used to increase EDI.



CLINICAL TRIAL ECOSYSTEM

Active participation and collaboration of multiple stakeholders is fundamental to changing the infrastructure of cancer clinical trials and advancing EDI goals. Stakeholders include:

- ▶ Academic Medical Centers
- ▶ Non-Academic Clinical Practices
- ▶ Healthcare Organizations
- ▶ Research Sites
- ▶ Clinicians & Investigators
- ▶ Clinical & Research Staff
- ▶ Community Leaders & Groups
- ▶ Patients & Patient Advocates
- ▶ Trial Designers
- ▶ Trial Sponsors
- ▶ Contract Research Organizations
- ▶ Site Management Organizations

Thank you.

