

Increasing representation in clinical trials

Barts ECMC
Dr Peter Hall

ECMC Network Meeting

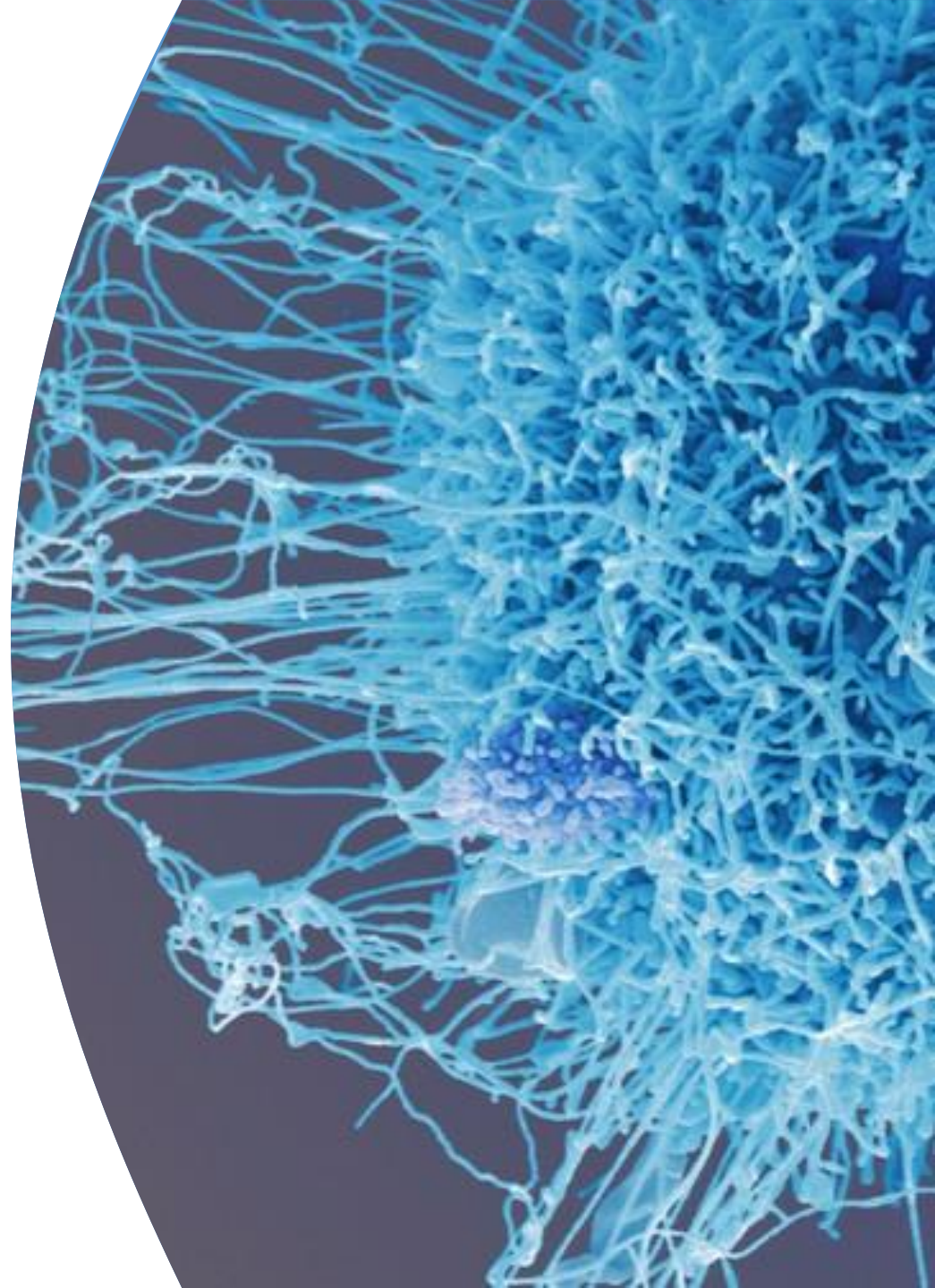
Session: *Increasing representation in clinical trials*

Dr Peter Hall
24 May 2023

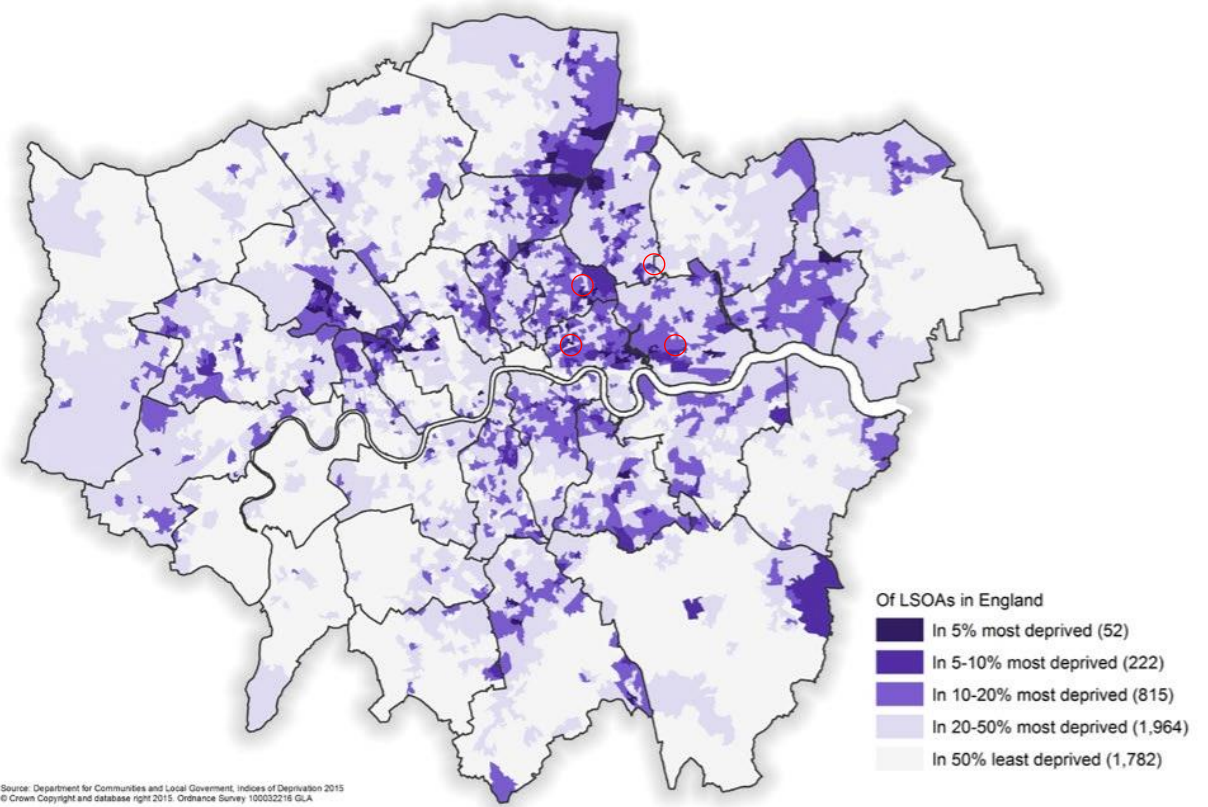


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Geography & Demographics



Source: GLA Intelligence Unit mapping of Indices of Deprivation 2015, DCLG



Geography & Demographics

Newham:

Protected characteristics

- 40% Christian | 32% Muslim
- Greater number of women amongst BAME groups
- Language: 60% English | 20% South Asian
- 32% White | 47% Black | 13% Asian | 8% Mixed Other (incl. 72.9%) BAME

Geography

- 17.9% over-crowded households
- 27.2% households renting from Local Authority or Housing Association

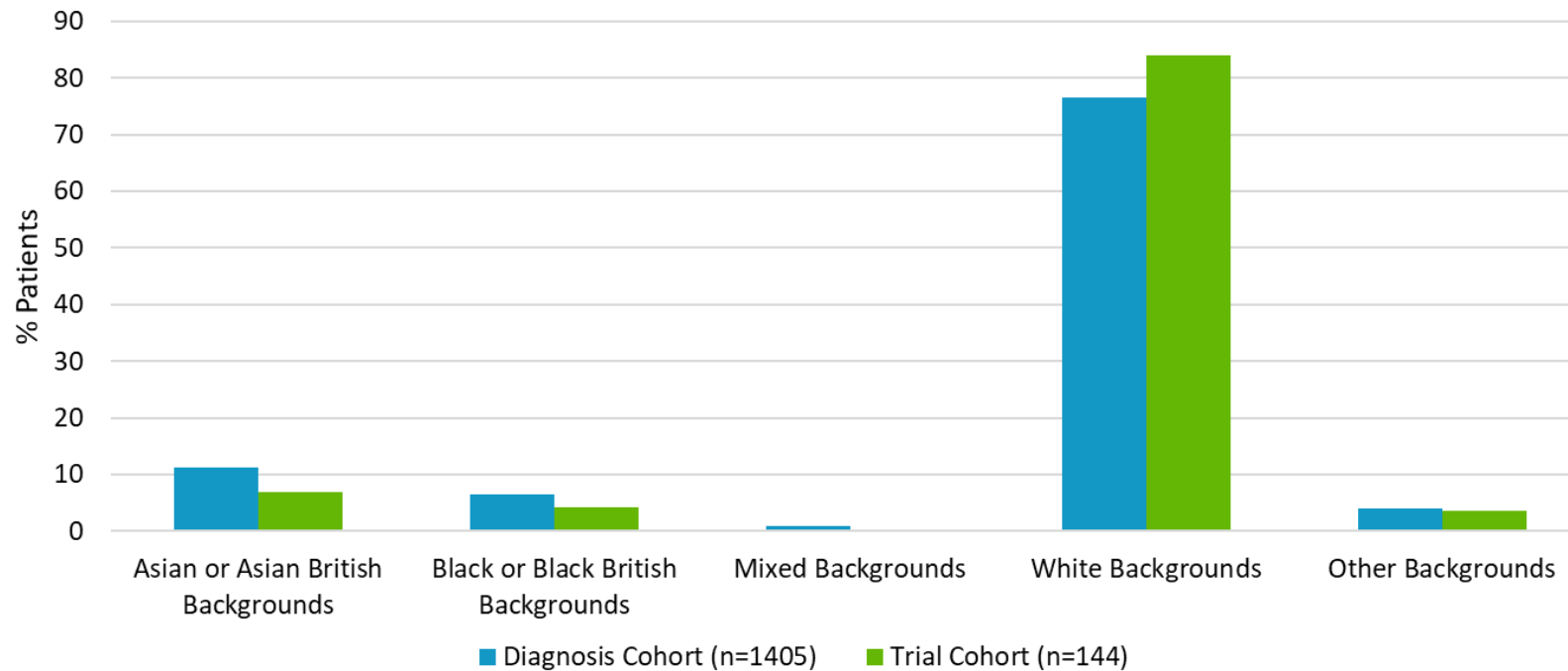
Source: Barts Health NHS Trust



Ethnic minority underrepresentation

Lung cancer at Barts

Patient Ethnicity in Diagnosis vs Trial Cohort (% total)



White backgrounds vs non-white backgrounds

P=0.022

Source: Dr Adam Januszewski, Barts Health



Projects

- PPIE group – look beyond trial patients
- Patient website & Social Media
- Monthly online forum
- Patient videos:

This video is spoken in English with English subtitles.



This video is spoken in Polish with English subtitles.



This video is spoken in English with Bengali subtitles.



This video is spoken in Hindi with English subtitles.



Projects

- International Clinical Trials Day event

ecmc
Barts

NHS
Barts Health
NHS Trust

International clinical trials day

Scan the QR code to find out more

19 May 2023
from 10:00 to 13:30

Welcome to our Discussion Forum

Boardroom,
Dean Rees House,
Charterhouse Square,
London EC1M 6BQ

Tea, coffee and food
has been arranged

For further information and to register contact:
Barts Cancer Institute 020 7882 5555
BartsECMC@qmul.ac.uk

ইসিএমসি

NHS
বার্টস স্বাস্থ্য
এনএইচএস ট্রাস্ট

আন্তর্জাতিক ক্লিনিকাল ট্রায়াল

স্ক্যান করুন QR কোড খুঁজতে আরো আউট

19 মে 2023
10:00 থেকে 13:30 পর্যন্ত

আমাদের আলোচনা ফোরামে স্বাগতম

বোর্ডরুম,
ডিন রিস হাউস,
চার্টারহাউস স্কোয়ার,
লন্ডন EC-1M 6BQ

চা, কফি এবং খাবার ব্যবস্থা করা হয়েছে

আরও তথ্যের জন্য এবং যোগাযোগ নিবন্ধন করতে:
বার্টস ক্যান্সার ইনস্টিটিউট 020 7882 5555
BartsECMC@qmul.ac.uk



@Barts EMMC

www.bartscancer.london

Projects

- Outreach work – Lung cancer awareness with London Bangla Press Club:



Next steps

Pilot Project: Increasing representation of ethnic minority patients in breast cancer clinical trials



Sites:



3 parts:

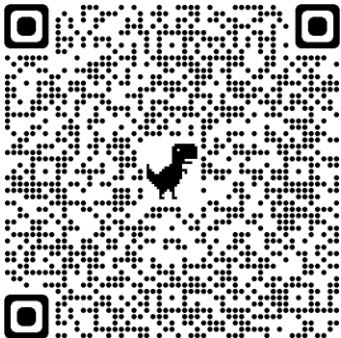
Targeted content creation

Hospital-based role

Community-based engagement

Dedicated breast care nurse to work between breast clinics at Newham University Hospital and trials clinic at St Bartholomew's Hospital

For further information:



ecmc www.bartscancer.london/centre-for-experimental-cancer-medicine/



Follow-us on twitter: **@BartsECMC**

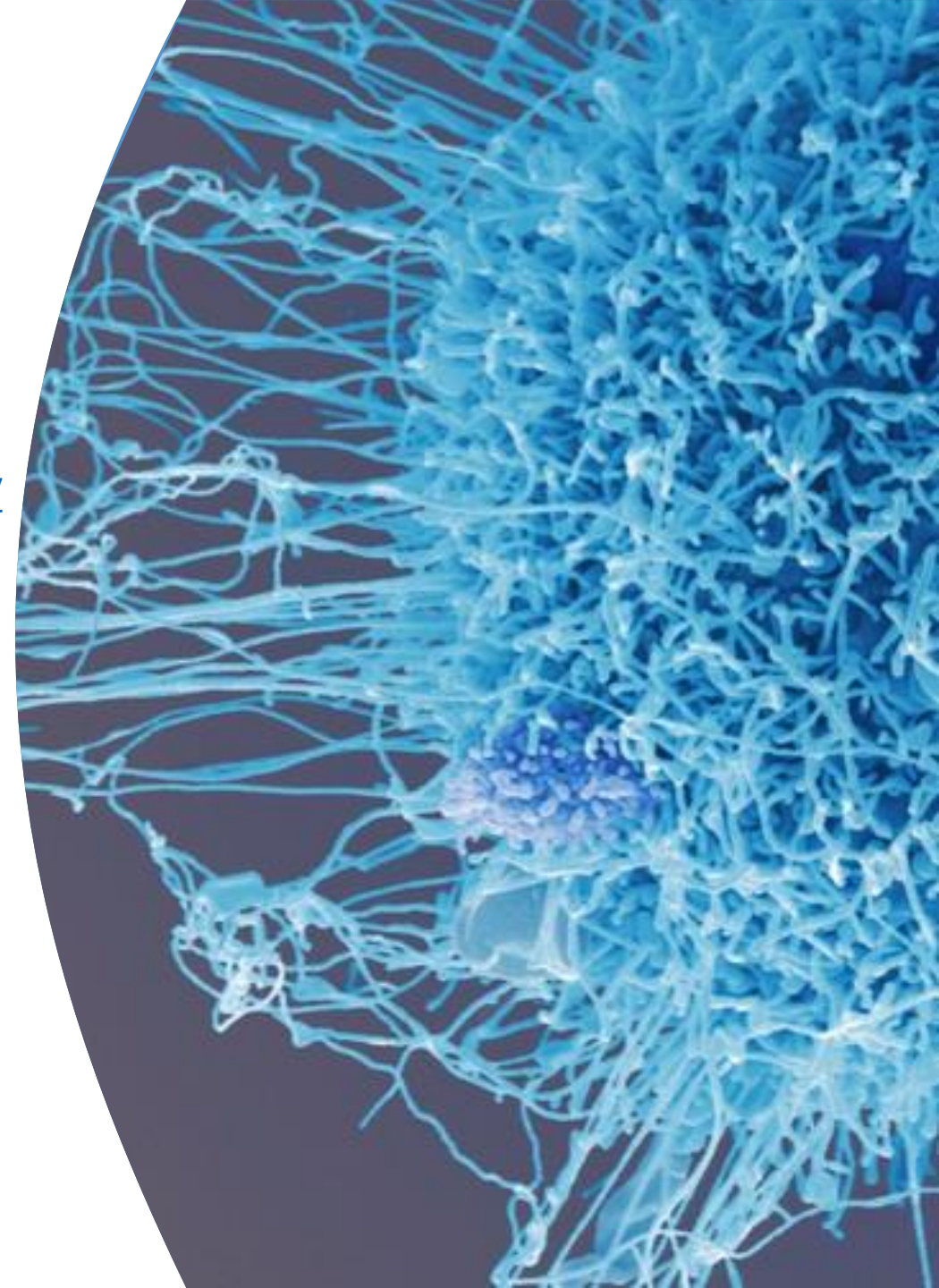


Email us: BartsECMC@qmul.ac.uk



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Glasgow ECMC
Dr Patricia Roxburgh

Increasing representation in clinical trials session

ECMC annual meeting, May 24th, 2023

Dr Patricia Roxburgh, Clinical Senior Lecturer in Medical Oncology
Glasgow ECMC

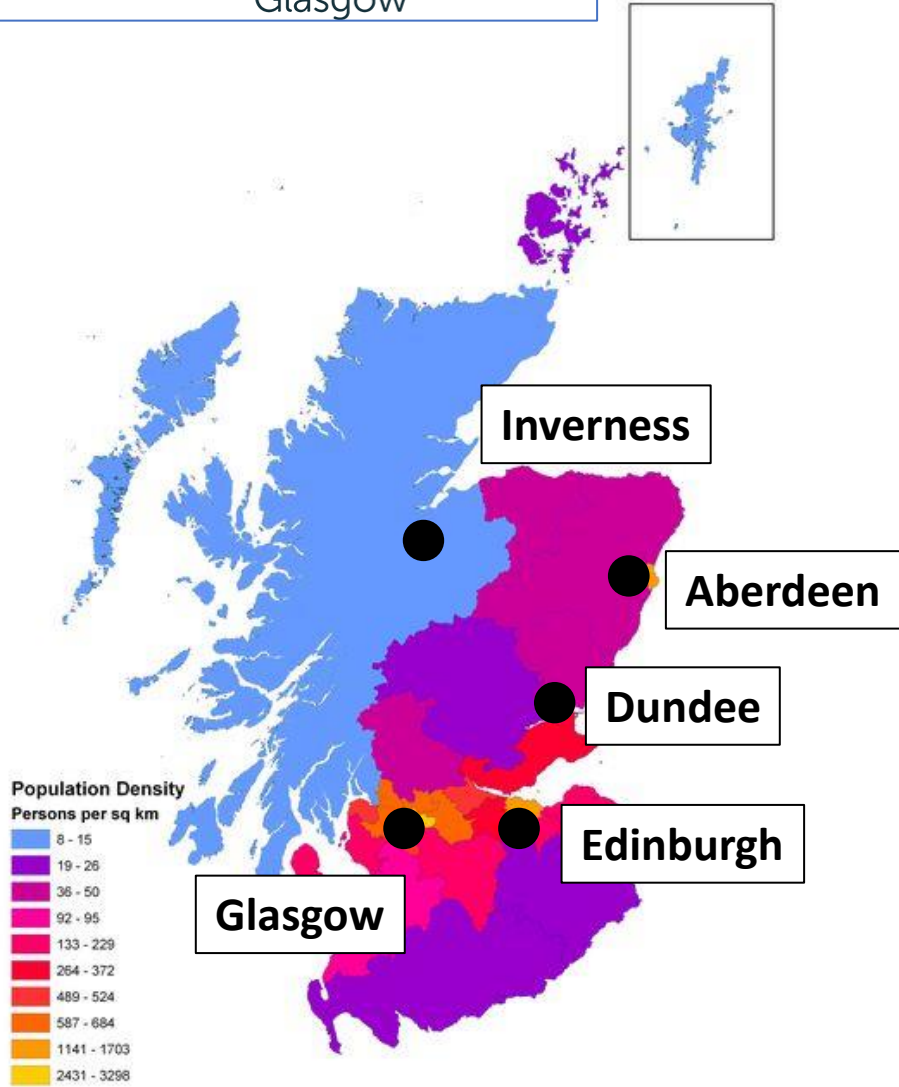
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Jointly
funded by:

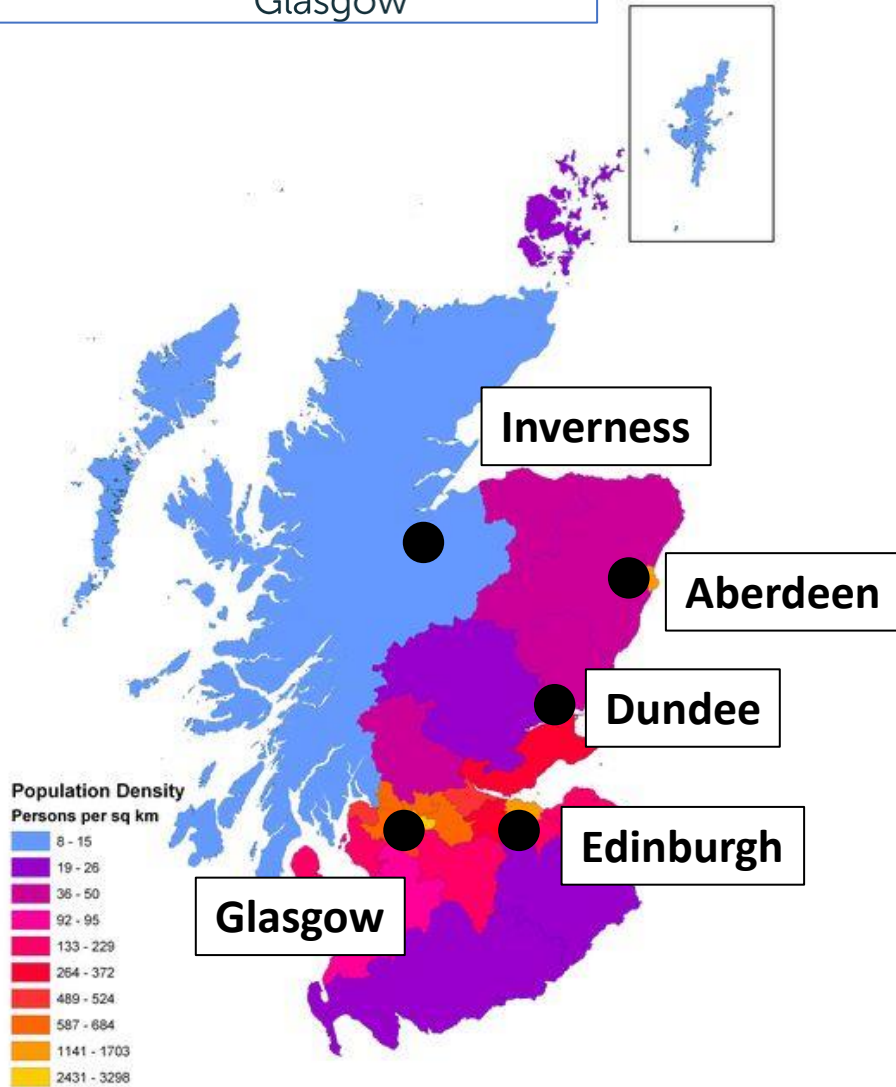


NIHR | National Institute for
Health and Care Research





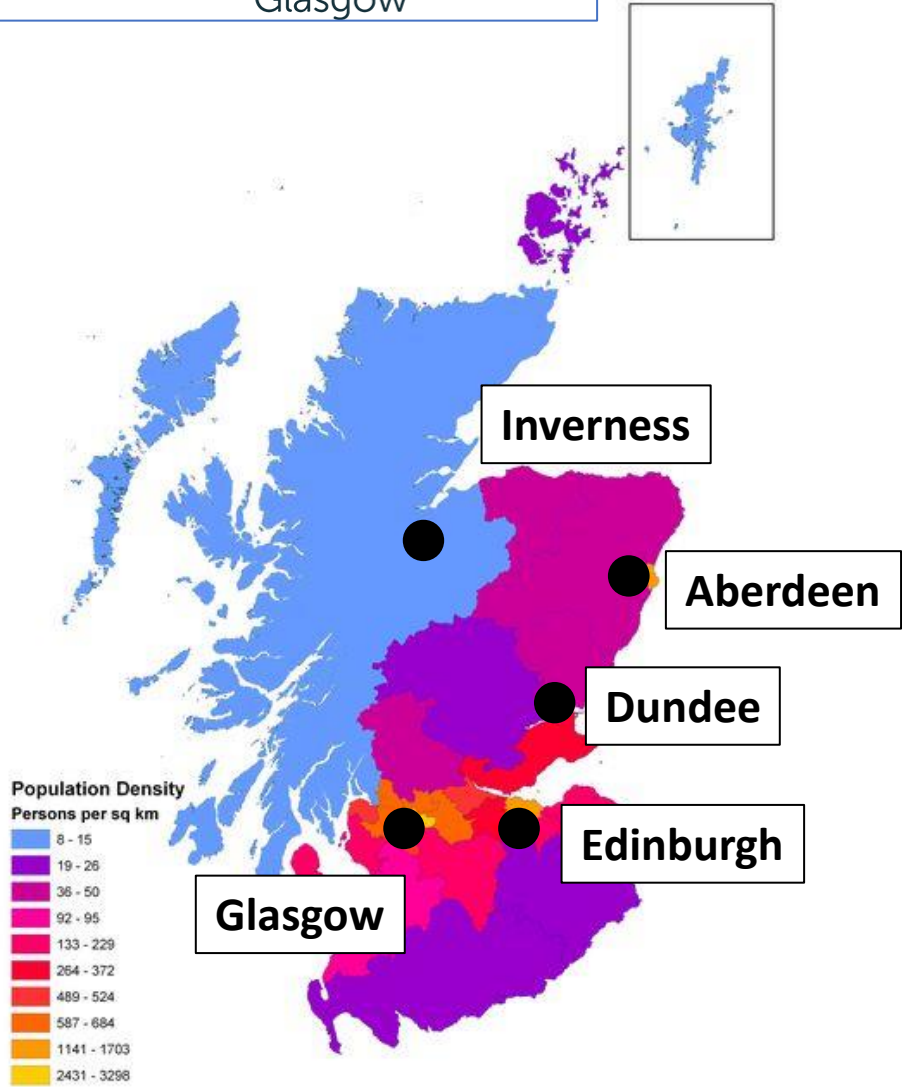
Pan-Scotland ECMC	3 Cancer Networks	14 Health Boards
<p data-bbox="1174 639 1424 711">5.5 million</p>  <p data-bbox="1268 886 1370 911">Glasgow</p>  <p data-bbox="1268 1029 1386 1053">Edinburgh</p>	<ul style="list-style-type: none"> <li data-bbox="1633 472 1893 725">West of Scotland <li data-bbox="1633 768 1893 1021">South East Scotland <li data-bbox="1633 1063 1893 1316">Northern Cancer Alliance 	<ul style="list-style-type: none"> <li data-bbox="2002 496 2440 721"> <ul style="list-style-type: none"> NHS Greater Glasgow & Clyde NHS Ayrshire & Arran NHS Forth Valley NHS Lanarkshire NHS Western Isles <li data-bbox="2002 782 2397 1006"> <ul style="list-style-type: none"> NHS Lothian NHS Fife NHS Borders NHS Dumfries & Galloway NHS Tayside <li data-bbox="2002 1082 2262 1282"> <ul style="list-style-type: none"> NHS Grampian NHS Highland NHS Orkney NHS Shetland




1. Wide socio-economic disparity
2. Participation in early-phase trials for remote communities



Representation challenges in Scotland



 **Scottish Government**
Riaghaltas na h-Alba

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Publication - Independent report

Improving equity of access to cancer clinical trials in Scotland

Published: 13 February 2023
 From: [Cabinet Secretary for NHS Recovery, Health and Social Care](#)
 Directorate: [Healthcare Quality and Improvement Directorate](#)
 Part of: [Health and social care](#)
 ISBN: 9781805254744

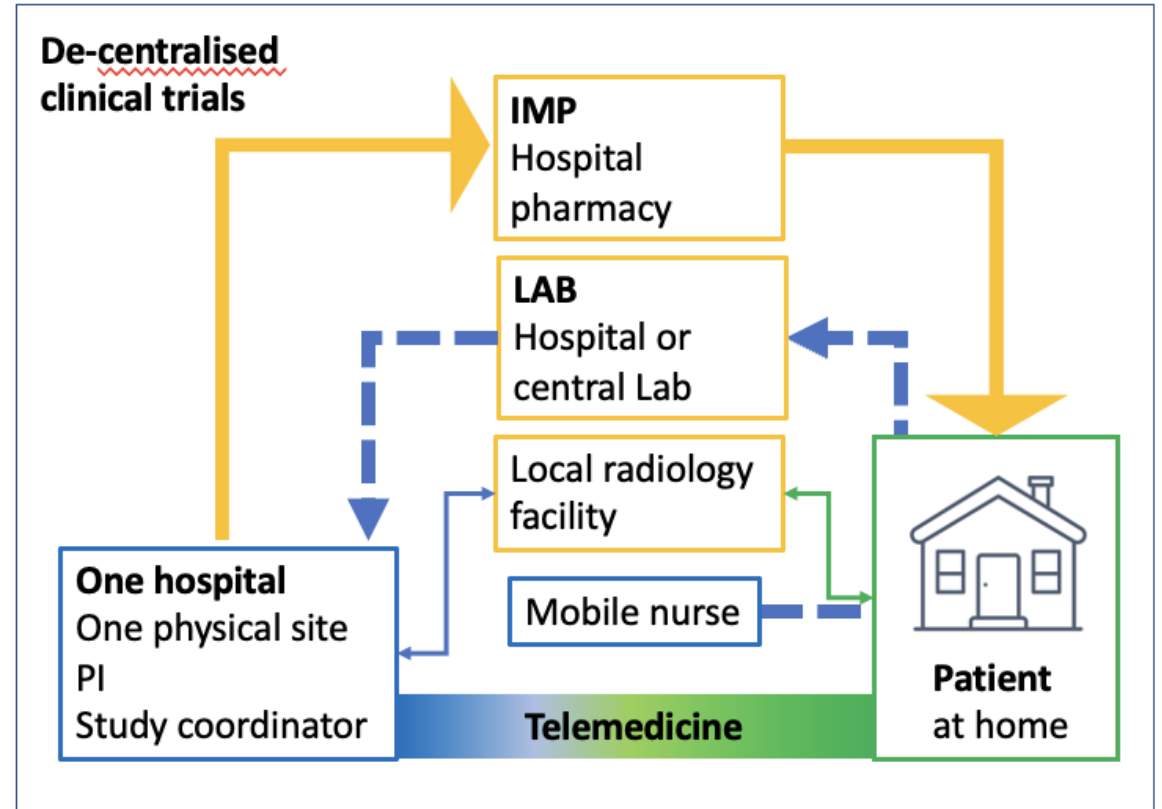
This report summarises the findings and recommendations of an Equity of Access Short Life Working Group. This is provided as a compilation of work package reports.

Two approaches so far

IMAGINE

Integrating Medically Actionable Genomics
INto Early-phase trials

Widening access to genomics for
early-phase clinical trial participants





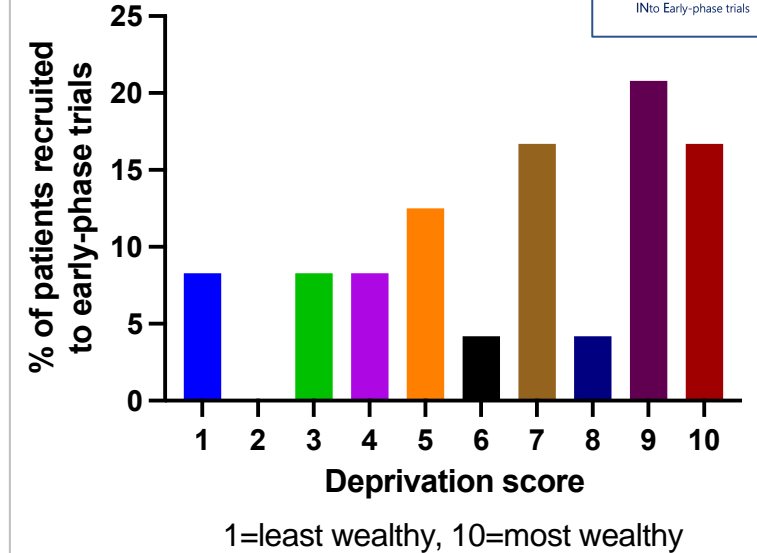
IMAGINE recruits patients in all regions of Scotland and across all deprivation indices



IMAGINE recruits by health board

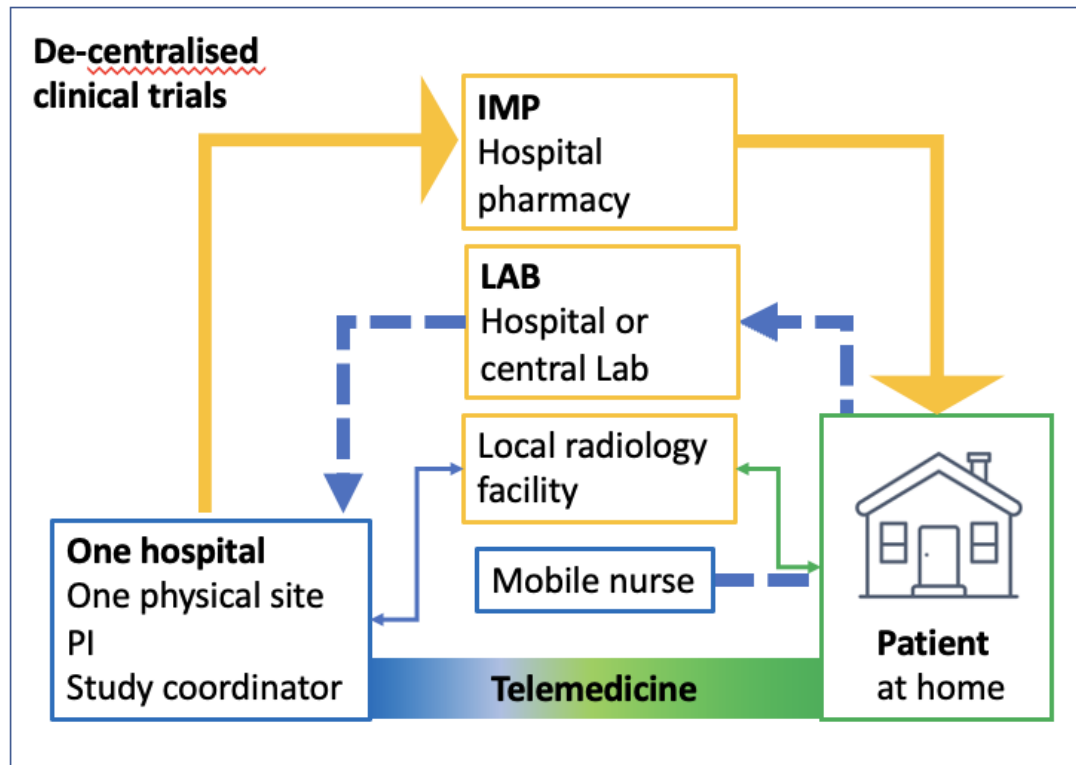


* NOSCAN=North of Scotland Cancer Network, WoSCAN=West of Scotland Cancer Network, SCAN=South East Scotland Cancer Network



Areas for improvement:

1. Drive recruitment from Lanarkshire and Lothian
2. Consider how to increase participation of least wealthy patients
3. Increase participation of TYA patients



Potential gains for all

- Trial procedures performed near patient
- More efficient to recruit rare populations
- Removes burden/cost of travel
- Improves patient participation/retention

Challenges for Regulators, Sponsors, Institutions, Investigators & Patients

- Maintaining safety
- Resources
- Managing remote staff
- Reliance on technology
- Financial reimbursement at local sites



Learnings and next steps

To improve equity of access for **less wealthy** patients, **remote communities** and **TYA** patients, we plan to

- Invite representatives from remote regions to join our PPI panel
- Work with local volunteers and charities to support patient travel for clinical trials
- Develop more patient-centred approaches to clinical trial delivery, e.g. near patient “standard” assessments
- Develop a Scotland-wide collaborative group for cancer trials nurses to support cross-referral and cross-centre communication, reaching out to parts of Scotland without access to ECMC resource at their local Cancer Centre
- Ensure that reimbursement for patient travel costs is included in funding for non-commercial clinical trials
- Use telehealth where safe to do so and helpful for patient access



ICR ECMC
Mary Van Zyl

Fair and equitable access to phase I trials

Mary van Zyl
Advanced Nurse Practitioner
Drug Development Unit
Royal Marsden Hospital and The Institute of Cancer Research



Overview

1. Assessment of a Geriatric Oncology tool (SAOP3) in a phase I trials unit
2. Investigating equality of access to the Drug Development Unit

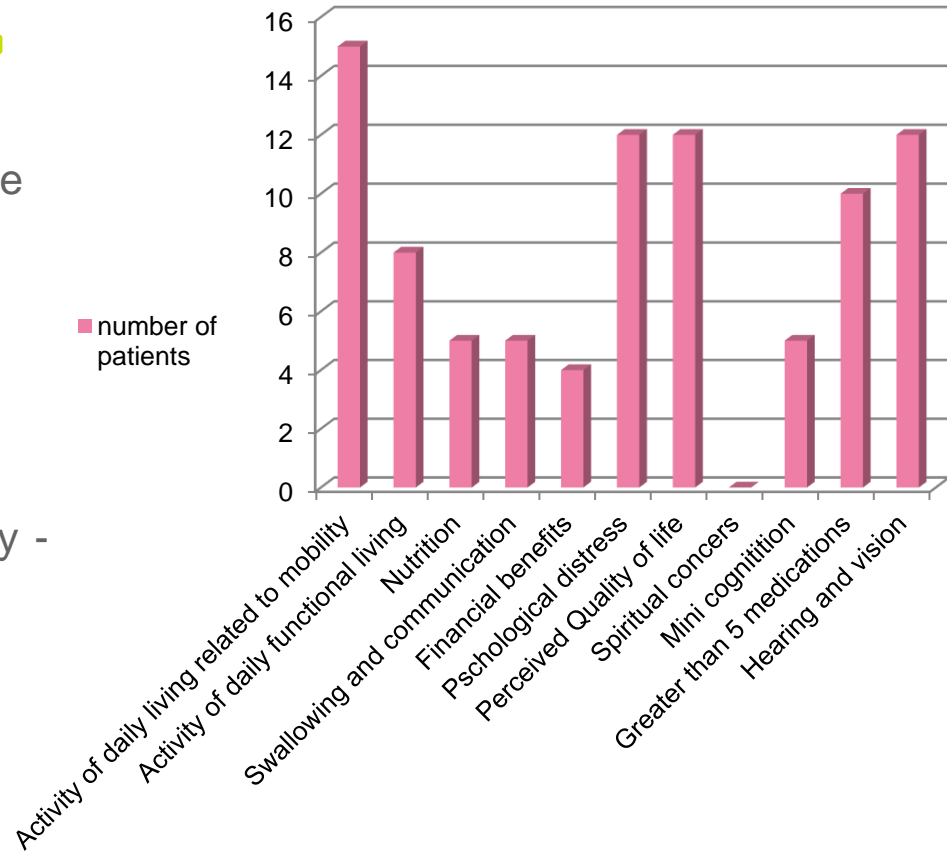
Assessment of Phase I Geriatric Oncology Project using SAOP3 tool

- Elderly population are under represented in Phase I trials and recruitment is challenging (**DDU May 2023 58/180, 32% + 70**)
- SAOP3 (Senior Adult Oncology Programme 3) tool - validated short screening questionnaire
- Inclusion
 - Patients seen in DDU new patient clinic (solid tumours)
 - Age > 70
 - Assessed at visit as suitable for trial entry

Results

- 22 patients assessed over 33 clinics
- All patients approached completed the questionnaire in full
- Age range 70-78 (median 73.5)
- All patients triggered at least one domain for further assessment/intervention
- Average of 4 domains per patient
- Most common need related to mobility - triggering the need for a physiotherapy/occupational therapy referral

Triggers for referral for each domain



Results

Free text section : “What matters to you?”

Core themes :

1. Family and friends
2. Positivity- not giving up, beating cancer getting treatment, hope and faith
3. Quality and quantity of life
4. Suicidal or negative thoughts
5. Occupation
6. Pets

Five patients (22.7%) failed mini-cognition test

- **18.2%, 4/22 deterioration resulting in trial ineligibility prior to consent signing**
- **22.7%, 5/22 screen fail risk**

Conclusion

-
- SAOP3 feasible
 - High risk of deteriorating and screen fail
 - Unmet need – potential to optimise our older population

Assessing potential barriers to recruiting onto Phase I clinical trials

51 patients agreed to participate in service evaluation

- Demographics

- Social support

- Employment statement

- Housing status

- Educational status

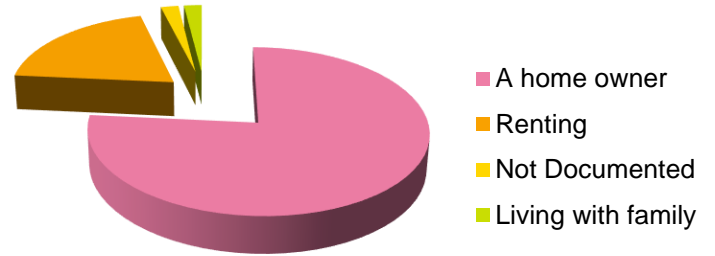
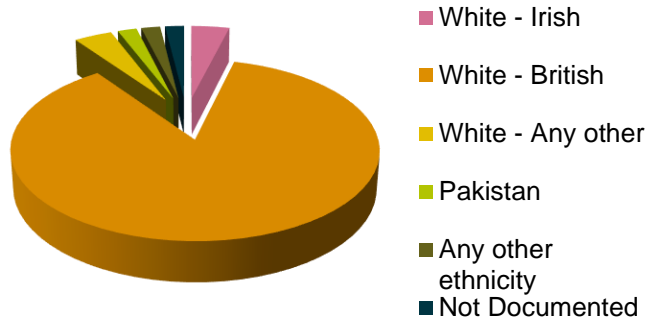
- Triggers for referral to a phase I trial

15 Referring Oncologists sent online responses anonymously assessing barriers to referrals

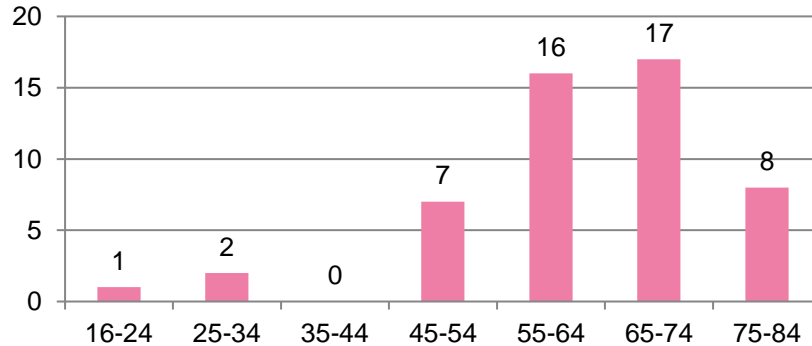
- What impacts the decision to refer

- Barriers- age, distance, socioeconomic factors, language, time to discuss, patients eagerness to explore, disease burden.

Results – patient questionnaire



Age



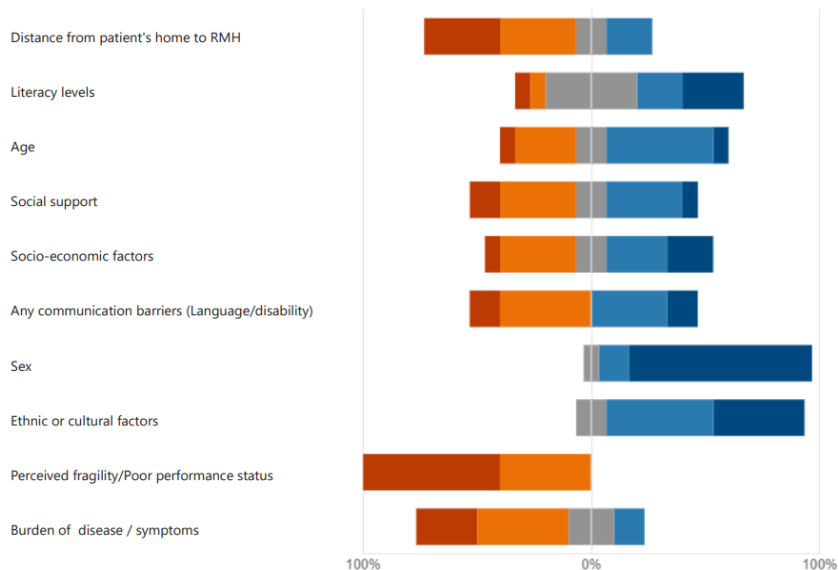
Results – patients questionnaire

- **51 patients**
 - 14 (28%) triggered referral discussion
 - 19 (38%) oncologist triggered referral discussion
 - 18 (36%) felt the discussion was joint
- Free text - 5 patients mentioned travel time/distance being a restrictive factor.
 - “Travel & time spent at hospital”
 - “Possibly the distance and the consideration of the side effects.”

Results – referrers questionnaire

Could any of the following patient characteristics impact your decision to refer individuals for a phase I trial?

Definitely Mostly agree Neither agree or disagree Mostly disagree Definitely disagree



Other themes

- Travel time and cost

40% of referrers were more likely to refer if patient was motivated to pursue trials.

40% of referrers felt time was limited to discuss phase I trials

Conclusions

- Population appears to be middle aged, white British population of reasonable financial security therefore barriers to diversity may be present
- Referrers and patients identified a number of ways to increase access to trials – common to both was cost/transport to site
- Some referrers felt that time pressures may impact decision to discuss Phase I

Future plans

- Links with RMH geri-onc group to explore prehabilitation for phase I elderly population
- We have established DDU specific PPI group to plan interventions to increase access to trials e.g video conference clinic, travel expenses for new patient visit, outreach to referrers

Thank you

-
- To the patients participating in these projects

Leicester ECMC
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