Doing Our Part to Enroll Patients in Clinical Cancer Trials

by Edward L. Braud, M.D.

oo few patients with cancer are enrolling in Phase I cancer drug clinical trials, holding up the development of hundreds of promising cancer treatments. Only about 3 to 4 percent of adult patients with cancer volunteer for trials, compared to about 60 to 70 percent of children enrolled in pediatric cancer trials, estimates the National Cancer Institute (NCI).

The reasons behind the low patient participation in cancer drug clinical trials are complex and range from the patient who is not informed about clinical drug trials to a patient who cannot afford to sign up for one. Even as a call is made to increase

patient participation in clinical trials, major health insurance plans often do not pay for many patient care costs associated with clinical trials. Additionally, some patients with cancer still see clinical trials as a last resort for people who have no other treatment options, even though today many patients with common cancers are receiving their first treatment in a clinical trial setting.

Recently, efforts have been made to encourage patients to enroll in early cancer drug trials. This past summer, the NCI, other research organizations, and five pharmaceutical companies that manufacture cancer drugs (Aventis, Bristol-Myers Squibb, Eli Lilly and Company, GlaxoSmithKline, and Novartis) announced joint funding of \$6 million in grants to the 61 NCI-designated cancer centers to design and implement new approaches to increase patient participation in early-stage trials. The grant program is giving special attention to proposals that would increase the access of minorities and the elderly in the

trials, groups that have been underrepresented in the past. NCI's web site (www.nci.nih.gov) features an entire section dedicated to clinical trials, including provider and patient information, frequently asked questions, and help finding clinical trials by type of cancer.

Community cancer centers are in the unique position of treating the

majority of patients with cancer and being able to counsel those patients who might possibly benefit from enrollment in clinical drug trials. Recognizing the importance of the early Phase I cancer studies, community cancer centers should increase efforts to enroll patients in one of the hundreds of clinical drug trials

currently being carried out.

When our patients ask why they should participate in clinical drug trials, we must be ready to answer. Perhaps most important is the fact that patients who take part in a clinical trial may benefit from the up-to-date care they receive. If a new treatment proves effective or more effective than standard treatment, patients enrolled in the clinical studies are usually among the first to benefit. Of course, we must also counsel our patients that a new treatment or drug being tested in clinical trials is not guaranteed to produce good results; new treatments also may have unknown risks.

Still, a new cancer treatment that proves effective in a clinical study may become a standard treatment to help patients today and in the future. Where would we be in the fight against cancer without the clinical trials that resulted in new treatments for breast, colon, rectal, and childhood cancers? Because of progress made through clinical trials, many people treated for cancer are now living longer.

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