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"Diversifying Clinical Trials:

Does presentation at gynecologic oncology tumor board increase equitable access to clinical trials for black and latinX patients?"

Abstract

Background: Tumor boards are multidisciplinary cancer conferences held to review all the clinical data, evidence-based guidelines, latest literature, and available clinical trials for each cancer case that is discussed.

Objectives: This study aims to determine whether presentation at gynecologic oncology tumor board (GO TB) increases clinical trial enrollment of black and latinX cancer patients.

Methods: A retrospective chart review of all cases presented at multidisciplinary GO TB from Jan 2019 – Jun 2022 were analyzed. For each case, demographic and cancer-specific variables as well as tumor board discussions regarding clinical trials were collected. Continuous covariates were summarized within groups by reporting means and compared using Wilcoxon rank-sum tests. Categorical covariates were summarized reporting counts and compared using Fisher exact tests.

Results: 379 cases were reviewed. 43 were excluded due to a diagnosis of preinvasive disease, borderline tumor, or non-gynecologic primary cancer. Clinical trials were discussed at GO TB for 71.7% of latinX patients and 64.5% of black patients. When evaluating enrollment in clinical trial, there was no significant difference for black patients versus white patients (20.7% vs 16.7%, p=0.26); however there was significantly lower enrollment for latinX patients than non-latinX patients (5.3% vs 18.4%, p=0.034). English-speaking patients were more likely to enroll on trial than Spanish-speaking patients (19% vs 3.8%, p=0.035). There was no significant difference in clinical trial enrollment by age, cancer stage, primary cancer site, insurance, family history, distance to treatment, or the number of times presented at GO TB.

Discussion: Many factors are considered as patients are offered clinical trial enrollment. Nationally 6.6% of black cancer patients enroll in clinical trials. Here, we show that tumor board presentation led to a greater percentage of black patients enrolling in clinical trials, 20.7%. We did find a lower enrollment rate of patients who identify as latinX. This could be related to a language barrier as we found significantly lower enrollment in Spanish-speakers. Although latinX patients had a lower enrollment rate at 5.3%, it exceeded the national average of 1.9%. In our population we have demonstrated that presentation at GO TB had a positive impact on clinical trial enrollment for black and Latinx patients.

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