

Health Care Systems Research Collaboratory

NIH Collaboratory Grand Rounds, May 14, 2021

"Creating more diversity in clinical trial participants: why and how?"

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No relevant disclosures

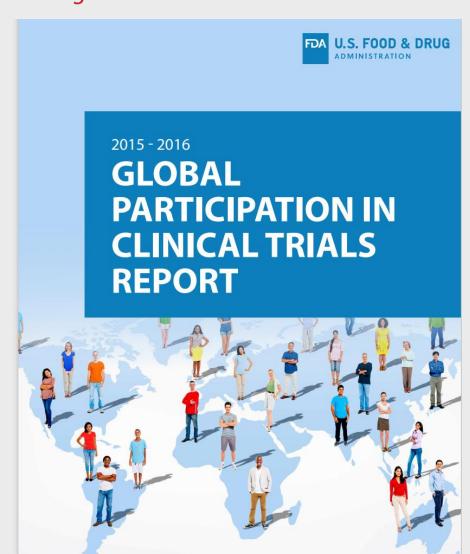


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Who Participates in Clinical Trials?

NIH Collaboratory Rethinking Clinical Trials®

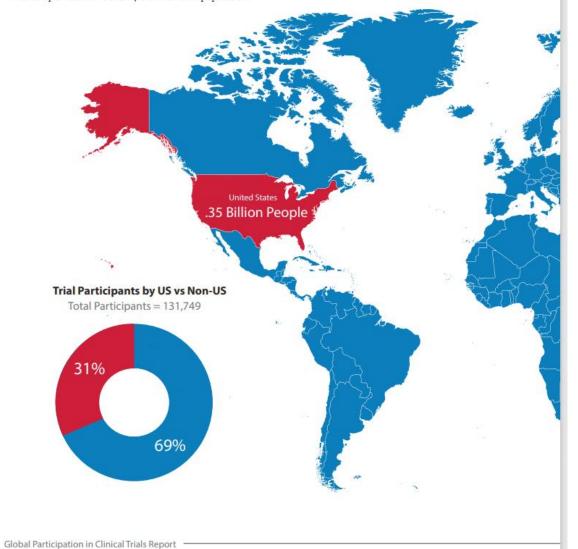
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Geography

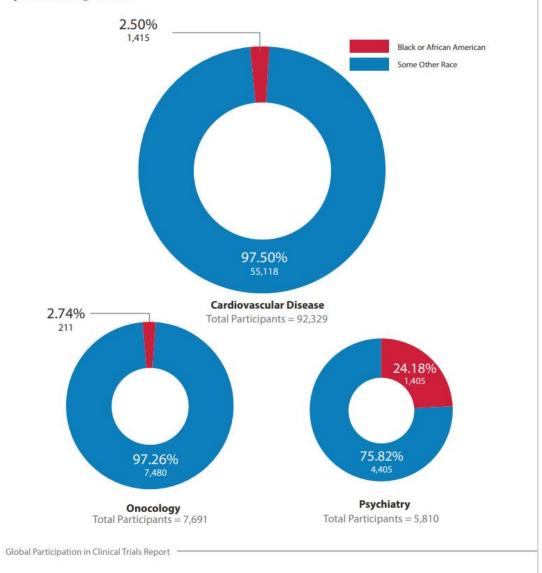
Where are Participants From?

The country contributing the most clinical trial participants was the United States. Compared to the population of the entire world (7.4 Billion), the US (0.35 Billion) makes up a little more than 4% of the world population.



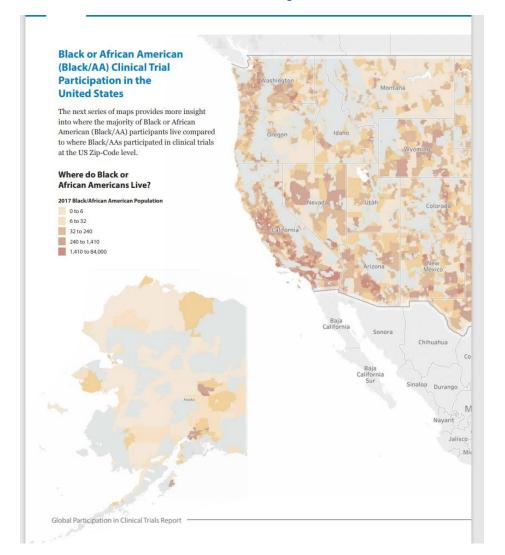
Participation of Black/AAs in Clinical Trials for Oncology, Cardiology, and Psychiatry

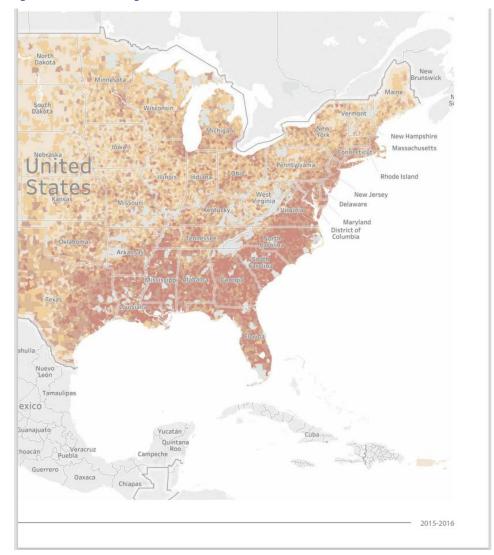
More insight into the participation rates of Black/AAs in clinical trials for Oncology, Cardiology, and Psychiatry are provided in the figures below.



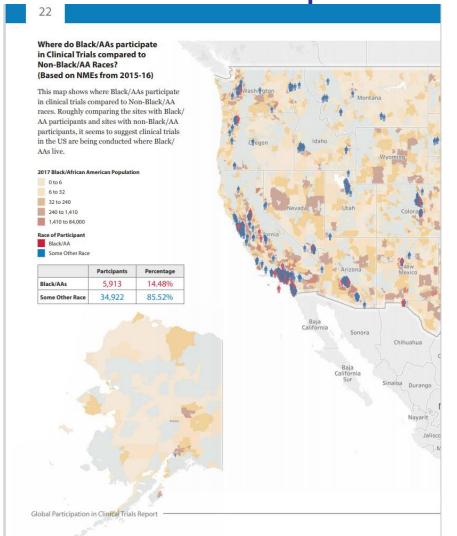
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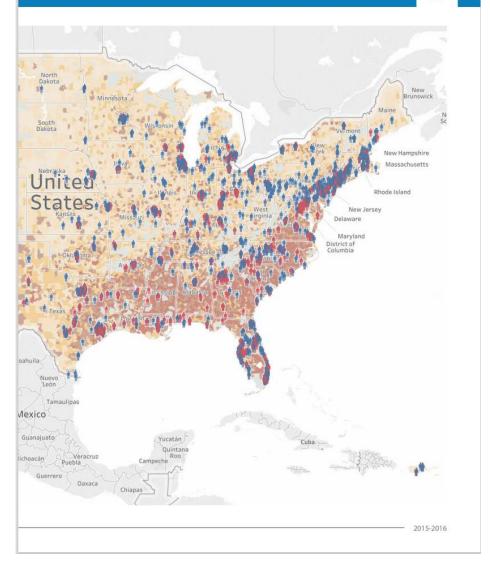
Heat Map- Clinical Trial participants- Black



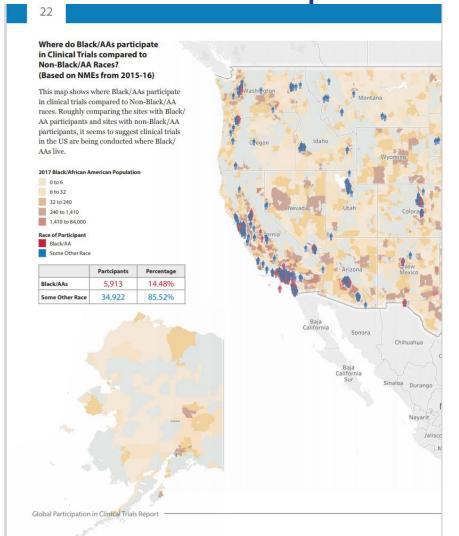


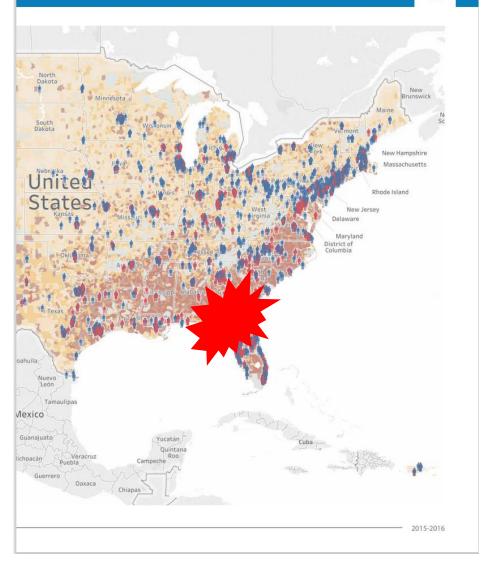
Heat Map- Clinical Trial Participants: All





Heat Map- Clinical Trial Participants: All







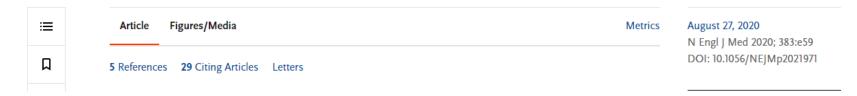
Why is diversity in clinical trial recruitment important?

Cardiovascular Disease Disparities

Perspective

Racial Disproportionality in Covid Clinical Trials

Daniel B. Chastain, Pharm.D., Sharmon P. Osae, Pharm.D., Andrés F. Henao-Martínez, M.D., Carlos Franco-Paredes, M.D., M.P.H., Joeanna S. Chastain, Pharm.D., and Henry N. Young, Ph.D.









More ♥ COVID 10 and A4

COVID-19 and African Americans

Clyde W. Yancy, MD, MSc1

» Author Affiliations | Article Information

JAMA. 2020;323(19):1891-1892. doi:10.1001/jama.2020.6548

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Racial Disparities in the Utilization and Outcomes of TAVR



TVT Registry Report

Mohamad Alkhouli, MD,^{a,b,*} David R. Holmes, JR, MD,^{a,*} John D. Carroll, MD,^c Zhuokai Li,^d Taku Inohara, MD, PhD,^d Andrzej S. Kosinski,^d Molly Szerlip, MD,^e Vinod H. Thourani, MD,^f Michael J. Mack, MD,^g Sreekanth Vemulapalli, MD^{d,h}

CENTRAL ILLUSTRATION: Race-Stratified Differences in the Use and Outcomes of TAVR in the United States **Utilization of TAVR Among Racial Minorities** 5% 4.0 3.9 4.0 4% 3.7 3.7 3.5 3.5 3.4 3% 3.5 JACC: CARDIOVAS 3.4 3.1 2.7 © 2019 PUBLISHED 2% 2.4 AMERICAN COLLEG 1.8 1.8 1.6 1% 1.5 1.5 1.4 1.3 0.9 0% **Total Number of TAVR Patients** Racial 4,445 1,648 2,839 4,344 6,152 9,737 11,095 13,192 16,731 2012 2012 2013 2013 2014 2014 2015 2015 2016 Q1-Q2 Q3-Q4 Q1-Q2 Q1-Q2 Q3-Q4 Q3-Q4 Q1-Q2 Q3-Q4 Q1-Q2 **Outco** % of Blacks (p = 0.678) — % of Hispanics (p = 0.017) — % of Others (p = 0.997) TVT Regi **Baseline Characteristics** In-Hospital Outcomes **One Year Outcomes** Non-White vs. White Non-White vs. White Non-White vs. White Death Younger Age Death More Females Myocardial Infarction Myocardial Infarction More Medicare Insurance Stroke Stroke Longer 5-Meter Walk Distance

Major Bleed

 \leftrightarrow

Valve Interventions

HF Hospitalizations

↑ Black

↑ Black, Hispanic

Mohamad Alkho Andrzej S. Kosi Sreekanth Vemi

Alkhouli, M. et al. J Am Coll Cardiol Intv. 2019;12(10):936-48.

Higher STS Score

More Aortic Insufficiency

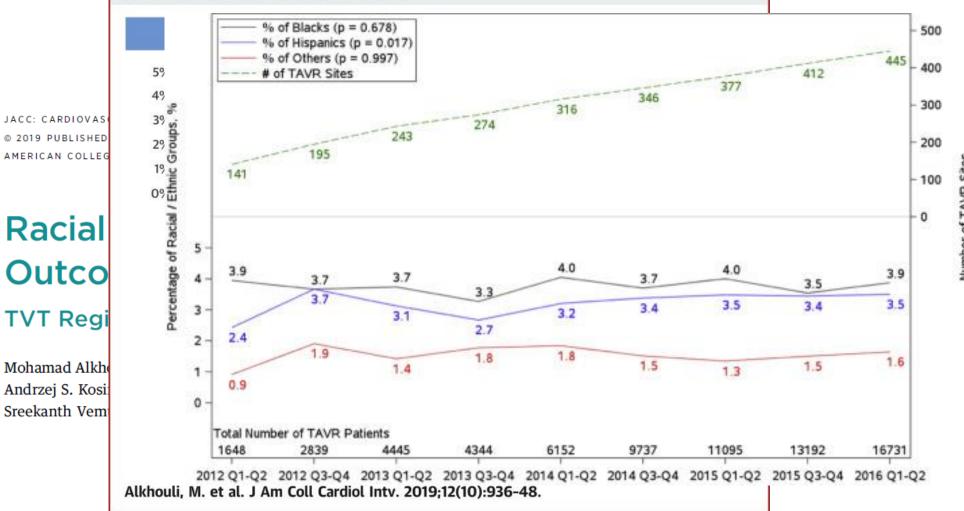
More Non-Elective TAVR

Major Bleed

Vascular Complications

Pacemaker

CENTRAL ILLUSTRATION: Race-Stratified Differences in the Use and Outcomes of TAVR in the United States

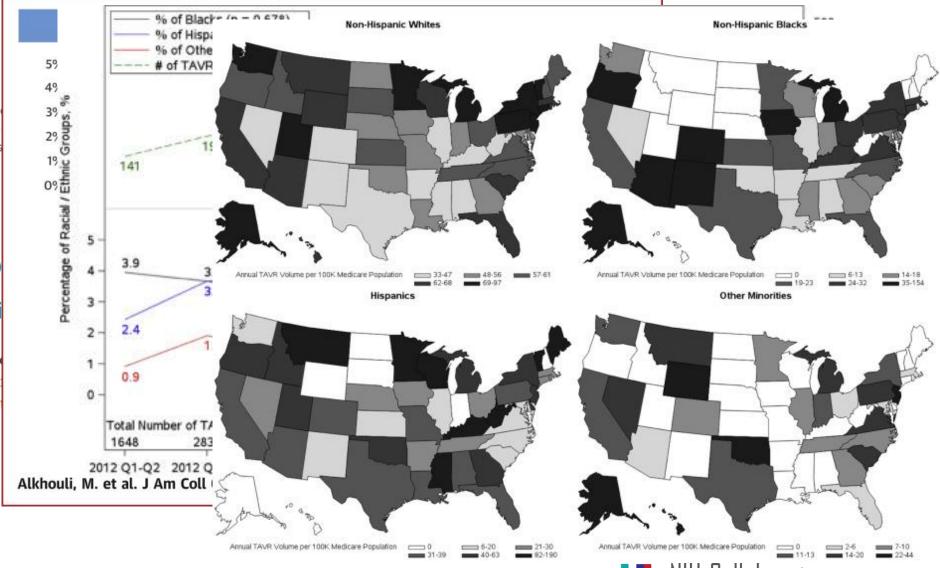


CENTRAL ILLUSTRATION: Race-Stratified Differences in the Use and Outcomes of TAVR in the United States



Racial Outco

Mohamad Alkho Andrzej S. Kosii Sreekanth Vem





Can we change the way we evolve evidence?

Targeting Diversity in Clinical Trials

A relevant database-

Overcoming Lack of Diversity in Cardiovascular Clinical Trials

A New Challenge and Strategies for Success

Rebecca F. Ortega, Clyde W. Yancy, Roxana Mehran, Wayne Batchelor

Originally published 18 Nov 2019 https://doi-org.ezproxy.galter.northwestern.edu/10.1161/CIRCULATIONAHA.119.041728 Circulation. 2019;140:1690–1692

"While it may be argued that patient heterogeneity is a nuanced, rather than critical, component of drug or device efficacy, it is unquestionable that the current standard of care emanates from randomized controlled trials that have failed to fully represent elderly patients, minorities, and women.¹ The lack of adequate data for these relevant subgroups challenges the integrity of our evidence-based care algorithms and questions the replication of favorable safety and outcomes across all populations. These persistent missteps in our evidence-based generation could permit less than ideal health outcomes as a function of sex, age, race, and ethnicity."

The Path Forward:

Ortega RF, Yancy CW,
Mehran R, Batchelor W.
Overcoming Lack of Diversity
in Cardiovascular Clinical
Trials: A New Challenge
and Strategies for Success.
Circulation.
2019 Nov 19;140(21):1690-1692.

- Consideration of economic incentives (or penalties) by the FDA (or payers) that would enable greater inclusion of diverse patients in clinical trials.
- Commitment by industry and the clinical science community to revisit the design of trials, selection of investigators and sites, and geographic balance of US and non-US subjects.
- Engagement with peer investigators outside of the United States to target more race/ethnicity diversity and gender balance in clinical trial recruitment.
- Exploration of enhanced cohort recruitment in phase <u>IV</u> or postapproval studies to address important safety and implementation questions.

The Path Forward:

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2019 Nov 19;140(21):1690-1692.

- Recruitment and training of more diverse coordinator and investigator research teams.
- Incorporation of novel information technology strategies, including use of electronic health data, social media, gamification, and other digital health technologies as unique steps to expand the pool of potential research subjects.
- Revision of the informed consent process, assuring that language matches literacy levels and that consent is culturally sensitive.
- Education at the societal level to advance the overall "research IQ" of the populace, thus overcoming a legacy of mistrust of the research enterprise and reducing barriers to participation in clinical trials.



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Are there concordant points of view?

MULTI-REGIONAL CLINICAL TRIALS **Achieving Diversity, Inclusion, Equity In Clinical Research**

Multi-Regional Clinical Trials Center

The MRCT Center is supported by voluntary contributions (www.MRCTCenter.org) and grants

Proceedings from FDA-hosted launch 9/22/2020

Brigham & Womens Faculty Director:

Barbara E. Bierer, MD

Opportunities: What can we do? Determine access to Ensure recruitment strategy potential target is informed by patient population to guide preferences country, region, and site Connect with referral selection networks in the community, Use data-driven including organizations strategies directly involved with target Determine the feasibility population of enrollment figures for Monitor and communicate site progress, address and target subpopulations in partnership with site(s) adjust with site as needed **Site Support & Trial Design Site Selection** Communication Communicate targets for Characterize target enrollment including population based on demographic projections epidemiology, disease Assist sites with local burden and demographics recruitment plan and Engage patient population outreach activities to maximize recruitment Assess and support each and retention strategies site's cultural readiness and minimize burden of Provide diversity training to trial 22 September 2020 19 ©MRCT Center Investigators and site staff FDA-hosted Launch

FDA Guidance to Enhance Diversity in Clinical Trials, November 9, 2020

Inclusive Trial Practices

- Developing protocols intentionally to support inclusion
- Expanding recruitment criteria from phase II to phase III trials
- Recruitment of subjects who represent the target marketing population
- Explicit inclusion of women to support important sex/gender analyses
- Inclusion of racial minorities with concomitant detailed sociodemographic data

Trial Design and Methodological Approaches

- Include genomics
- Consider adaptive trial design to accommodate alterations in clinical trial population based on real-time enrollment data

FDA Guidance to Enhance Diversity in Clinical Trials, November 9, 2020

Broadening Eligibility Criteria in Trials

Enrichment strategies' emphasizing recruitment of targeted populations

Making trial participation less burdensome

- Support for transportation, parking other fees associated with logistics
- Access for those with disabilities
- Use of digital health tools

Adopt enrollment and retention practices that enhance inclusiveness

 Start with community engagement and public outreach; focus groups and community-based participatory research (engaging community members and leaders in the design and execution of the research)



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How do we create accountability?

Diversity in Clinical Trial Leadership May, 2021

JACC: HEART FAILURE

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EDITOR'S PAGE







Promoting Diversity in Clinical Trial Leadership: A Call to Action

JoAnn Lindenfeld, MD, Deputy Editor, JACC: Heart Failure, Mona Fiuzat, PharmD, Executive Editor, JACC: Heart Failure,

Christopher O'Connor, MD, Editor-in-Chief, JACC: Heart Failure

- First, we need to be more engaged and intentional in choosing site-based principal investigators with an eye toward diversity.
- Second, as journal editors we need to take an active role in inquiring and considering why a design or results paper of a large-scale clinical trial does not have significant representation of female or Black physicians in positions of leadership.
- The authors must explain the diversity of the study's leadership (PIs, committees, core labs, etc.) and author list in the Methodology section of the manuscript. If there is a lack of diversity, an explanation of this must be stated in the Limitations section of the manuscript.

SUMMARY

- Diversity in Clinical Trials is important as a meaningful action addressing ongoing cardiovascular health disparities
- Advancing Diversity in Clinical Trials involves:
 - Policy
 - Outreach
 - A priori intentions to support inclusion with trial design/protocol
 - Lessening barriers and improving access
 - Diversifying Clinical Trial Leadership
 - Accountability
 - FDA
 - Sponsors
 - Journal Editors