



Clinical Trial Accrual: The Wichita CCOP Experience




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Clinical Trials and Cancer Patients

- **Study of 600 patients and oncologists**
 - More than 80% of patients were unaware of available clinical trials
 - 69% of cancer patients said they would be interested in participating in a clinical trial
 - 79% learned about clinical trial from physician
 - 26% read about clinical trial online
 - **Top 2 reasons for not participating in clinical trials**
 - Fear of side effects (40%)
 - Fear of receiving a placebo or sugar pill (30%)
- **National accrual = 2 – 3 % of cancer patients go on clinical trials**



Community Clinical Oncology Program

- **Integral to NCI Clinical Trials Network**
 - Cancer Centers
 - CCOPs
 - Cooperative Groups



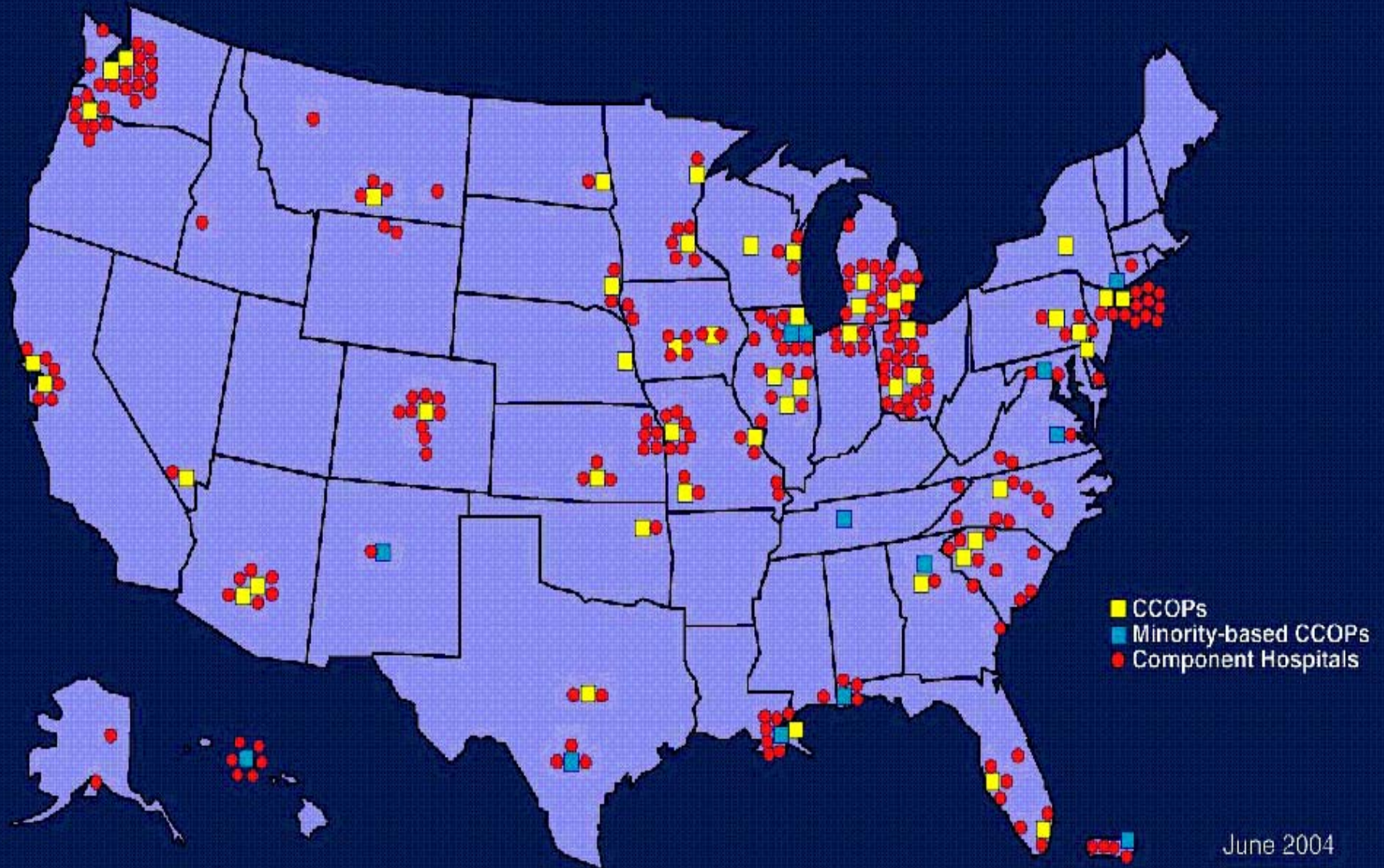
CCOP Mission

- **Bring the advantages of state-of-the-art cancer treatment, prevention and control research to individuals in their own communities by:**
 - **Involving community physicians and their patients in NCI-approved clinical trials**
 - **Involving primary health care providers in research process**
 - **Increasing minority participation**
 - **Providing access to cancer prevention and control research in the cooperative groups**

Funded CCOP Programs

50	CCOPs	30 states
13	MB CCOPs	10 states, DC & Puerto Rico
14	Research Bases	Headquarters in 10 states

CCOPs and Minority CCOPs



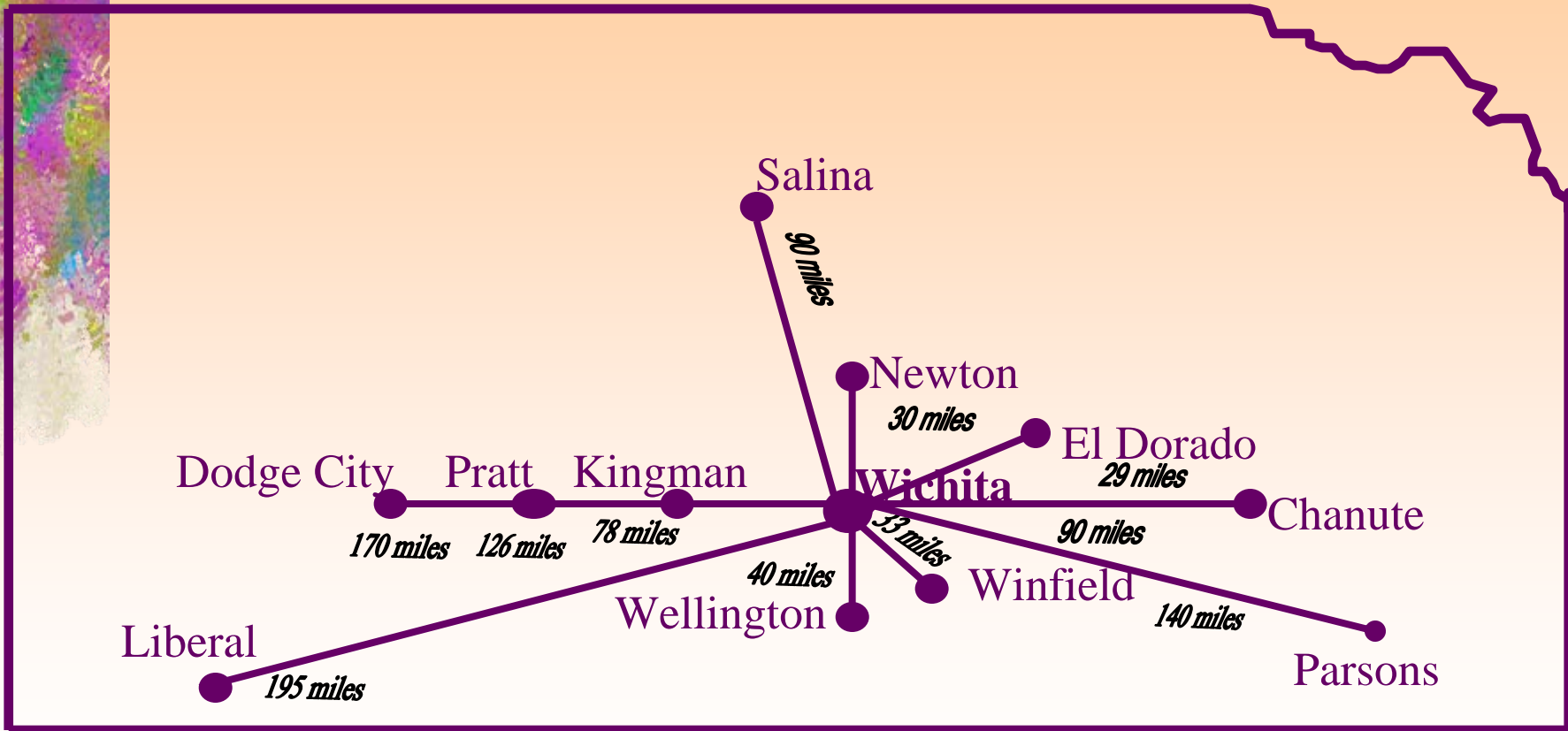
Wichita CCOP Components

- **Component Hospitals**
 - **Via Christi Regional Medical Center**
 - St. Francis Campus
 - St. Joseph Campus
 - Riverside Medical Center
 - **Wesley Medical Center**

Wichita CCOP Affiliates

- **University of Kansas School of Medicine - Wichita**
- **Harry Hynes Memorial Hospice**
- **Wichita State University - Psychology Dept.**
- **12 Affiliates across Kansas**
 - 16 treating sites

Wichita CCOP Affiliates Outside Wichita



Research Base Affiliations

- **Southwest Oncology Group (SWOG)**
- **North Central Cancer Treatment Group (NCCTG)**
 - **Eastern Cooperative Oncology Group (ECOG)**
- **National Surgical Adjuvant Breast & Bowel Project (NSABP)**
- **MD Anderson Cancer Center (MDACC)**
- **University of Rochester Cancer Center (URCC)**
- **Children's Oncology Group (COG)**
- **Clinical Trial Support Unit (CTSU)**

Open Studies Per Base as of 7/15/07

- SWOG = 30
 - Pharmaceutical = 26
 - NCCTG = 23
 - ECOG = 16
 - CTSU = 10
 - MDACC = 6
 - URCC = 3
 - COG = 2
- Total = 116

Physician Membership

- **11 Medical Oncologists**
 - One practice
- **6 Radiation Oncologists**
 - 4 sites
- **2 GYN Oncologists**
- **1 Pediatric Oncologist**
- **17 other (urologists, surgeons, PCP)**
- **> 175 referring/assisting with prevention & cancer control studies**

Wichita CCOP Accrual

Fiscal Year	Treatment	Cancer Control	Total
1983 – 84	147	N/A	147
1984 – 85	136	N/A	136
1985 – 86	123	N/A	123
1986 – 87	114	N/A	114
1987 – 88	153	4	157
1988 – 89	134	109	243
1989 – 90	158	428	586
1990 – 91	163	101	264
1991 – 92	146	223	369
1992 – 93	161	204	365
1993 – 94	175	209	384
1994 – 95	145	81	226
1995 – 96	182	70	252
1996 – 97	255	57	312
1997 – 98	228	113	341
1998 – 99	292	138	430
1999 – 2000	349	232	581
2000 – 01	459	179	638
2001 – 02	441	733	1174
2002 – 03	368	501	869
2003 – 04	370	346	716
2004 – 05	464	468	932
2005 – 06	504	422	926
2006 – 07	463	405	868
Total	6,130	5,023	11,153

Fiscal Year = June 1 – May 31

Statistics

- **Newly diagnosed cancer cases**
 - 2,662 from 2 Wichita hospitals
 - 1,919 from satellite sites
 - 4,581 total
 - (source = 2005 Cancer Registries)
- **2006/07**
 - Screened average of 267 pts/mo
 - Accrual average/mo = 39 tx/mo
34 cc/mo
 - 29 % pts screened were registered

Average Physician Treatment Trial Accrual

2004/05	2005/06	2006/07
4 = 81 pts (70%)	4 = 80 pts (63%)	4 = 76 pts (66%)
3 = 37 pts (24%)	3 = 40 pts (24%)	4 = 33 pts (29%)
2 = 13 pts (6%)	3 = 19 pts (11%)	2 = 14 pts (6%)
2 = 2 pts (<1%)	1 = 11 pts (<1%)	1 = 8 pts (2%)
(n=11 Drs; 465 pts)	(n=11 Drs; 506 pts)	(n=11 Drs; 461 pts)

Keys to Success

- **Physician commitment to clinical trials**
 - Enjoy academic experience within community
 - PCP physician referral patterns
- **Community Support**
 - Hospitals, laboratories, office staff, media
 - Main institution pharmacy
- **Nursing focus**
- **Funding**
- **Education**
- **Quality > Quantity**

Right Decisions

- **Nursing Focus**
 - “Make it easy” - reduce barriers of time, maintain protocol compliance and quality data collection
 - Maintain visibility and awareness
 - Non-nurse CRA support staff
 - Workload assessment
 - Implement efficiency tools



Challenges

- **Maintaining quality**
- **Time to devote to cancer control/prevention**
- **↑ in number of trials and complexity**
- **Filling nursing positions**
- **Visibility**
- **Accrual from rural communities**
- **Access to minority populations**
- **↑ involvement of other physician specialties**



Parting Thoughts

- **Physician commitment is vital**
 - PI plays significant role
 - Staff are needed to support physicians
 - Remove barriers
- **Community commitment also required**
- **Funding**
- **Get to know your community**
- **Challenges are a daily occurrence**
- **Learn from mistakes**

