

Efforts Needed to Get Minorities Into Clinical Trials, Experts Say — People of color "are much less likely to be asked" to participate

by [Joyce Frieden](#), News Editor, MedPage Today
August 3, 2020



More work needs to be done to enroll people of color in clinical trials, Freda Lewis-Hall, MD, chief patient officer and executive vice president at Pfizer, said Sunday at the annual meeting of the National Medical Association.

"One of the really interesting things the data tell us about participation in clinical trials of Black and brown people is they are much less likely to be asked," Lewis-Hall said during the plenary session of the meeting, which was held remotely.

Lewis-Hall said investigator bias against Black and brown patients is reflected in statements such as "I don't know if they can get here; adherence might be a problem; it may take too long," and this needs to improve.

One thing that would help is having more Black and brown physicians, she added. "The numbers are woefully lagging. We need to increase our pipeline of physicians and physician-investigators, because over and over we heard that the trust issue is critical," and that "we need to educate patients around clinical trials and their relative safety."

The number of minority physicians "is woefully lagging," said Freda Lewis-Hall, MD. (Photo courtesy National Medical Association livestream)

Georges Benjamin, MD, executive director of the American Public Health Association, said that many clinicians, especially those practicing in communities of color, don't know what clinical trials are happening. "In rich communities, patients walk in with their Google documents demanding to be in clinical trials," said Benjamin, who moderated the session. "That doesn't happen as much in communities of color."

Susan Bailey, MD, president of the American Medical Association (AMA), said it's "important that drugmakers make inroads into communities they've historically ignored for clinical trials, communities where there is rightfully a lot of mistrust after decades and decades of mistreatment, exploitation, and injustice." She added that historically, African Americans make up only about 5% of clinical trial participants, and Hispanics far less. "We need your help." Bailey referred the audience to a patient-gearred [website](#) for enrolling in COVID-19 vaccine and antibody trials.

Bailey also addressed the issue of Operation Warp Speed, the federal effort to speed development of a coronavirus vaccine, noting that it was designed "to compress a very long vaccine process to meet the urgent demands of our raging pandemic." She called Operation Warp Speed "an unfortunate name because safety and efficacy are always the number one priority when it comes to vaccine development."

"Whether it's accurate or not, the title 'Operation Warp Speed' sends a bit of a mixed message," she continued. "Yes, we're all eager to fight for a vaccine to fight COVID-19 as soon as possible, but if it's not safe and if it's not effective, it will create more problems than it will solve."

Noting that Operation Warp Speed officials have set an "ambitious" goal of 300 million doses of a vaccine by January 2021, Bailey added, "However this plays out, it's critical that physicians and patients have total confidence in these vaccines and the processes that led to their development. This is something the AMA is going to continue to monitor very closely."

Operation Warp Speed's name is "unfortunate," said Susan Bailey, MD, president of the American Medical Association. (Photo courtesy National Medical Association livestream)

Lewis-Hall reminded viewers about the history of the polio vaccine, noting that Black patients "were not believed to be infected by polio" and because of the segregation of healthcare at the time, "there was no place for us to go to get treated, and as the vaccine was being developed, there was a question about whether it should be available to us as a community because the infection rates were low."

"We have the honor, opportunity, and obligation to participate in clinical trials so this could be clarified and we know: Is the dose the same? Is the effect the same? Are the adverse effects the same?" Lewis-Hall said. "In much of the research we do with people as to why they would participate in clinical trials, the idea is really that it's not as much about them as it is for future generations -- the women who say, 'I'm in a trial because I don't want my daughter to go through this; I want something better for her if she has breast cancer.' These are opportunities for us to have that discussion with our community and say that no one can be in the trial for us."


Garth Graham, MD, vice president of community health and impact at CVS Health, said the country was facing "two different pandemics, one in the general population and what you see in Black and brown communities," where there is a higher level of positive testing "that in many cases has been two or three times that of the general population." CVS is working to make more testing available in these communities, he said. What's going to be important over the next couple of months "is how we evolve -- as the pandemic evolves -- to meet the unique needs of Black and brown communities."

Norvell Coots, MD, president and CEO of Holy Cross Health, a two-hospital system in Silver Spring, Maryland, predicted that mental health would be the next big side effect from the pandemic "and it's going to hit us hard." In addition to the general impact on the

community and the healthcare providers who will develop resiliency issues, the longstanding intensive care unit (ICU) patients "will now have post-ICU syndrome, loss of memory -- like a post-traumatic stress disorder you see in military combat." This will partly be a result of being alone in the ICU without friends or family members around, Coots said.

To help providers at his own hospitals, "we put on specialized teams that rotate through different units to meet healthcare providers and talk to them, and we have set aside special times and special places where people can socially distance but still gather and talk about these issues in the community ... We're only seeing the beginning of what's going to be a much larger mental health crisis coming, particularly if a vaccine is as far out as some people think it might be."



[Joyce Frieden](#) oversees MedPage Today's Washington coverage, including stories about Congress, the White House, the Supreme Court, healthcare trade associations, and federal agencies. She has 35 years of experience covering health policy. Follow 

Recommended For You