

Health Equity Considerations for Multi-Cancer Detection (MCD) Tests: Context, Trials & Communications

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October 29, 2024

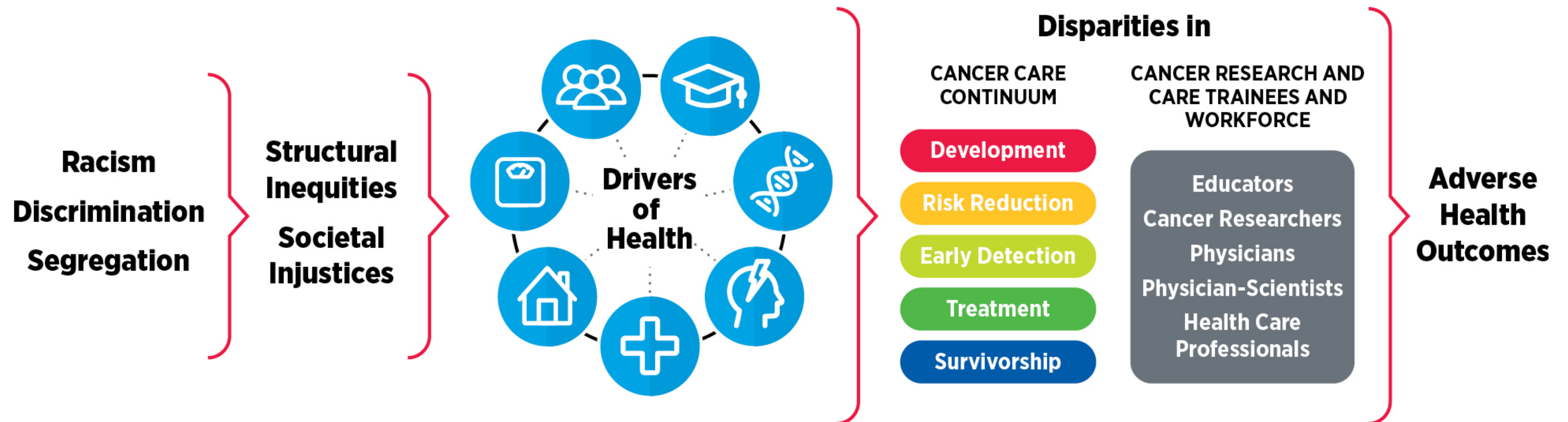
Financial Disclosures

Employee: Fred Hutchinson Cancer Center, University of Washington

Grant Funding: National Institutes of Health/National Cancer Institute, American College of Gastroenterology

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Drivers of cancer (& potentially MCD tests) disparities



Intervention points to reduce inequities in MCD tests

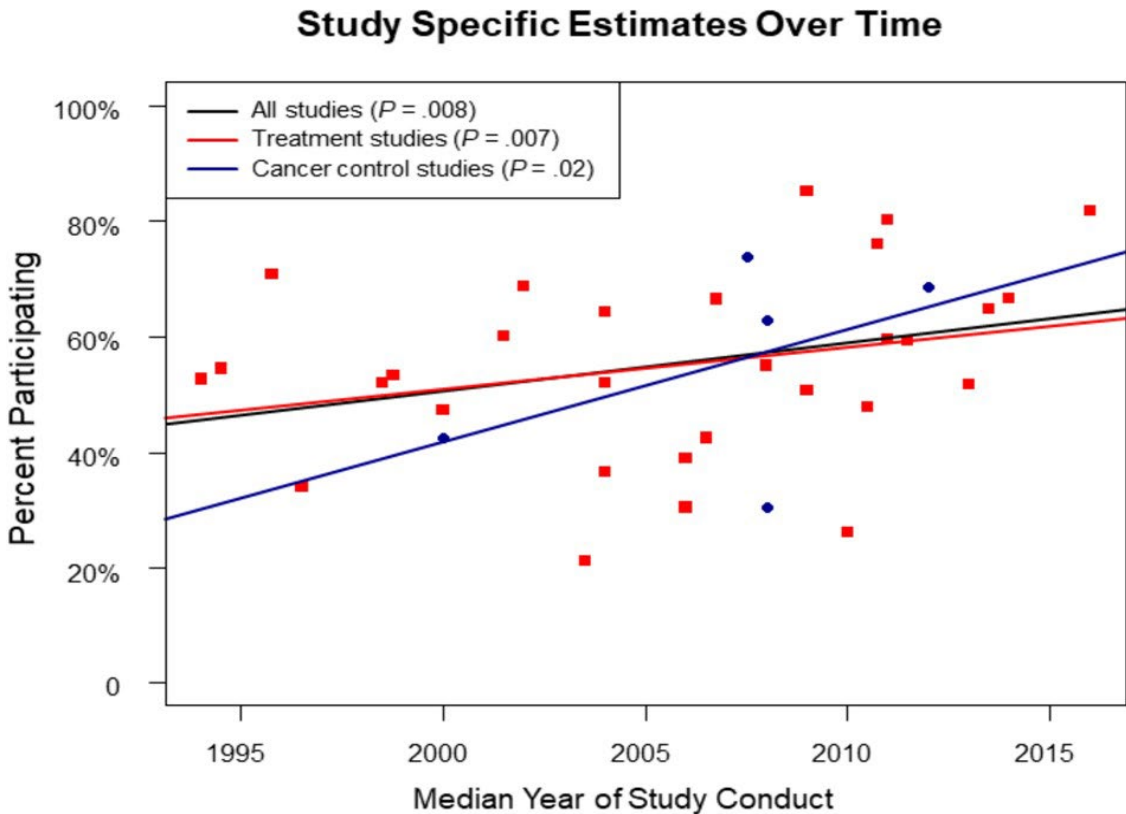
Clinical Trial Recruitment



Table 5. Composition of Trial Enrollees According to Race/Ethnicity, 1996-2002

Group	1996	1997	1998	1999	2000	2001	2002	Enrollment vs Whites, 2000-2002 vs 1996-1998*	
								Relative Risk Ratio (95% CI)	P Value
Total No. of enrollees	8154	8974	9742	10710	11792	13359	12484		
Racial/ethnic group, % of total No. of enrollees									
White	83.0	84.2	84.0	86.0	87.4	86.3	86.6	1.0 (Referent)	
Hispanic	3.7	3.1	3.1	3.0	2.8	2.9	3.0	0.88 (0.72-1.08)	.23
Black	11.0	10.7	10.3	9.0	8.0	8.5	7.9	0.76 (0.65-0.89)	<.001
Asian/Pacific Islander	2.1	1.9	2.1	1.5	1.6	2.1	2.2	0.99 (0.83-1.18)	.91
American Indian/ Alaskan Native	0.3	0.2	0.5	0.5	0.3	0.3	0.3	0.80 (0.57-1.10)	.17

Abbreviation: CI, confidence interval.
*Adjusted for age, sex, and cancer type using polyotomous logistic regression.



Published MCD trials to date do not reflect the U.S. population

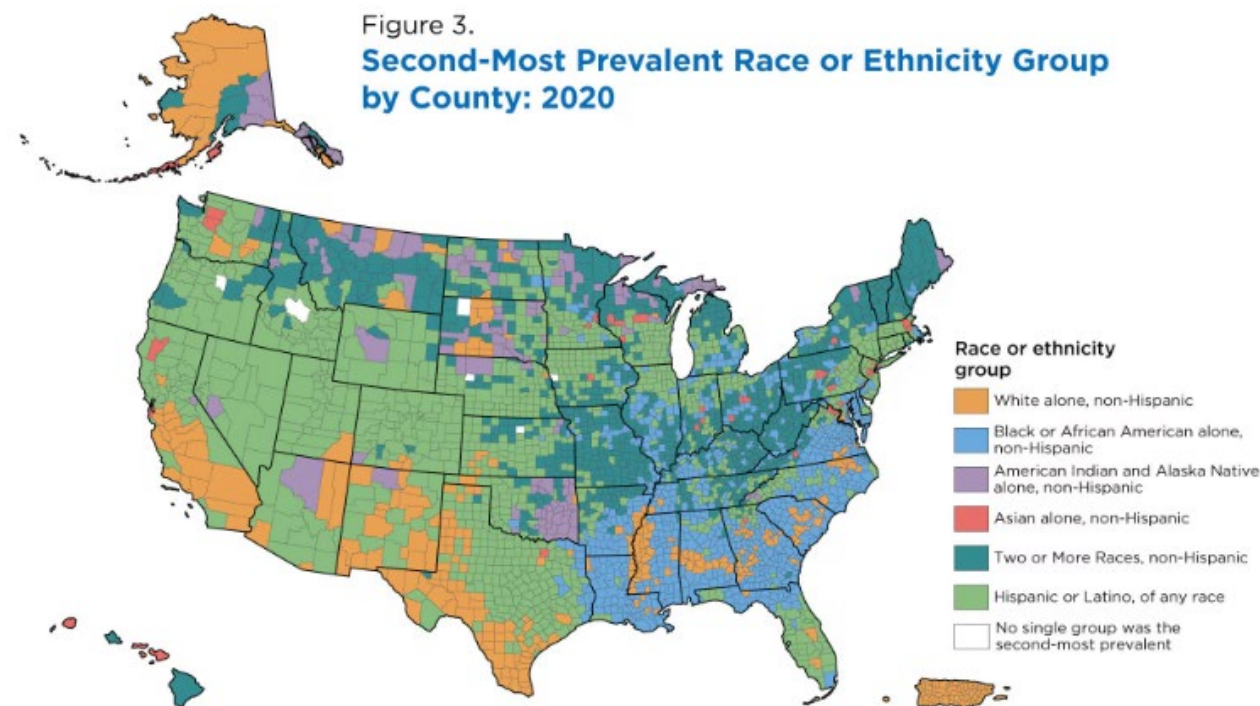
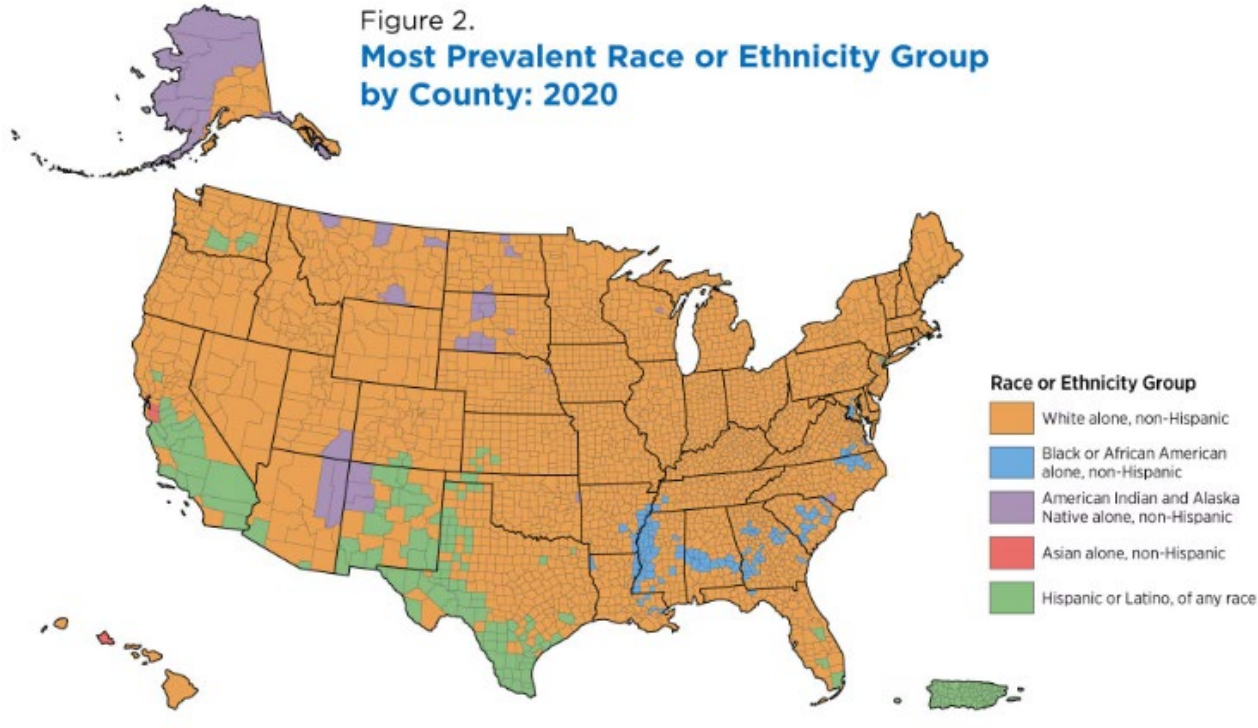
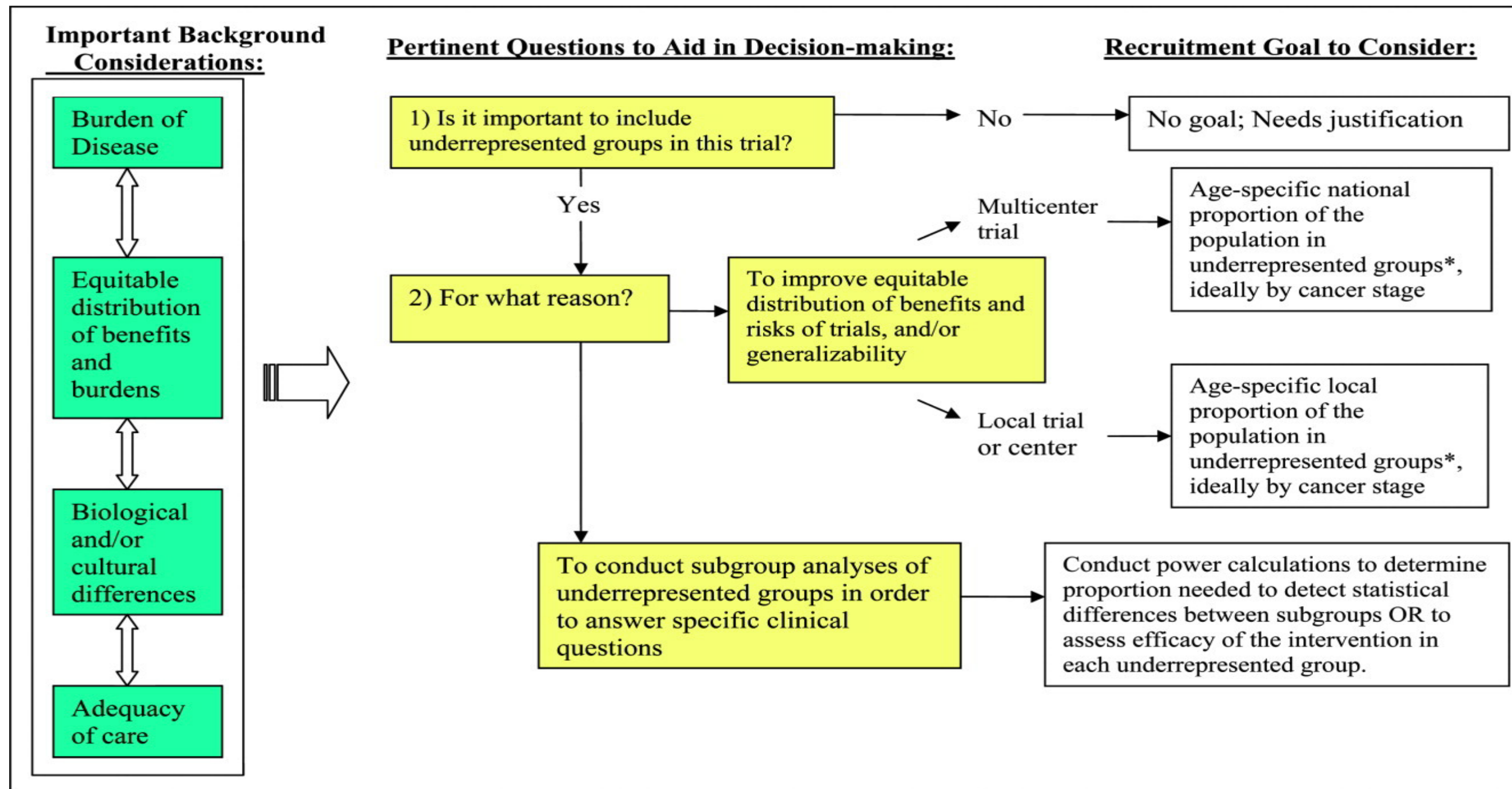


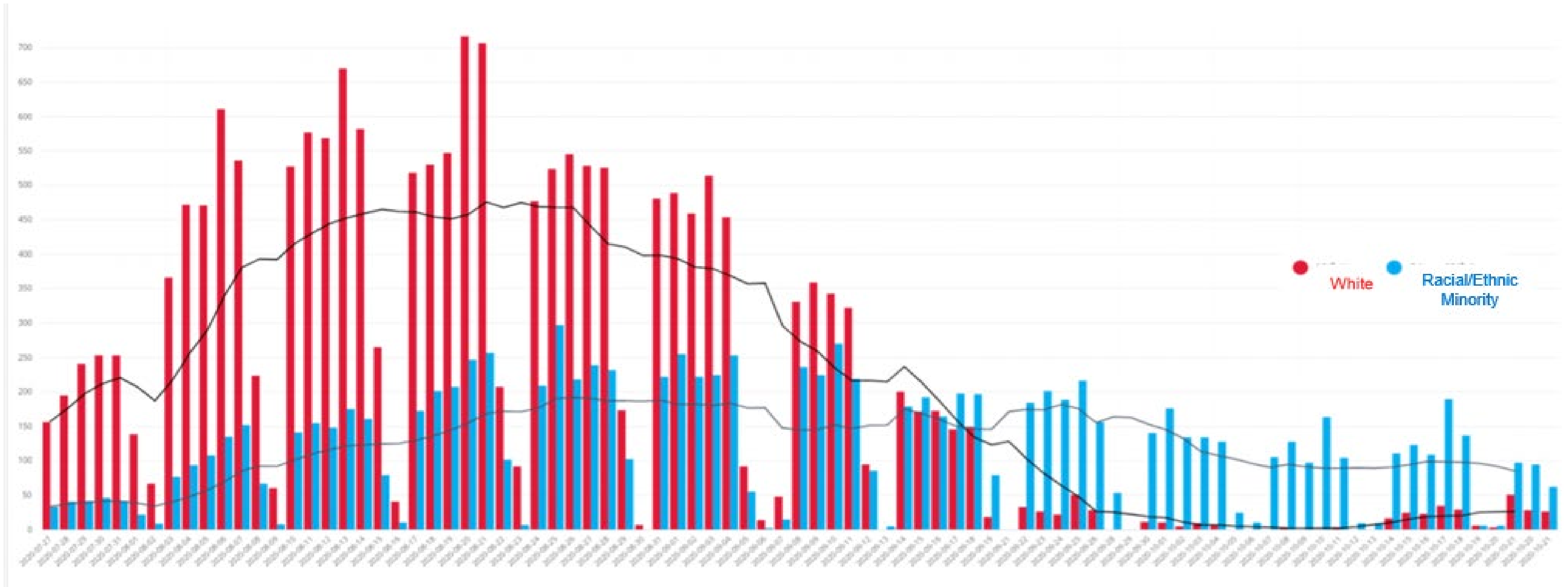
Table1. Participant demographics and baseline characteristics			
	Cancer (n=2823)	Non-cancer (n=1254)	Total (N=4077)
Race-Ethnicity, n (%)			
White, non-Hispanic	2316 (82.0)	996 (79.4)	3312 (81.2)
Black, non-Hispanic	193 (6.8)	85 (6.8)	278 (6.8)
Hispanic	192 (6.8)	103 (8.2)	295 (7.2)
Asian, Native Hawaiian or Pacific Islander	49 (1.7)	26 (2.1)	75 (1.8)
American Indian or Alaska native	8 (0.3)	7 (0.6)	15 (0.4)
Other	65 (2.3)	37 (3.0)	102 92.5)

Bolen's framework - *a priori* recruitment goals prioritize equity



* adjusted for disease prevalence or mortality in underrepresented groups whenever reasonable

COVID-19 vaccine trials, real-world use of Bolen's framework



September 7, 2020 - majority enrollment slowed
September 21, 2020 - majority enrollment stopped

Intervention points to reduce inequities in MCD tests

Clinical Trial Recruitment



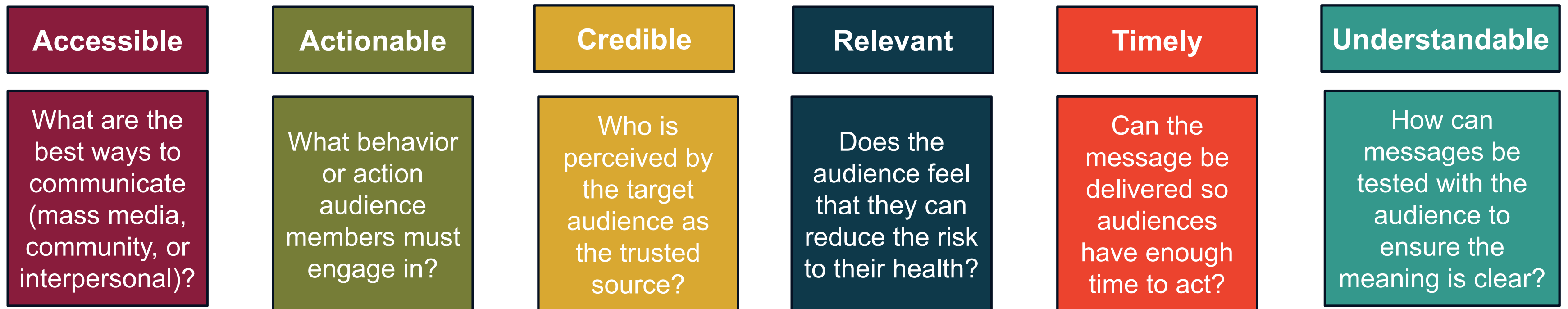
Communications

Importance of physician recommendations for cancer screening in populations that experience inequities

- In a cross-sectional study of 5,793 adults, Black (25.1%, $P<0.01$), Latino (21.2%, $P<0.01$) and Asian (22.1%, $P<0.01$) patients reported lack of physician recommendation to complete colorectal cancer screening more often than White (17.0%) patients.
- In a cross-sectional study of 282 women living in rural locations, the number one reason for completing an initial mammogram was due to a physician's recommendation (70%).

MCD related communications should center health equity

World Health Organization (WHO) framework for effective health communications





Physicians and patients are excited about MCD tests



Journal of the National Medical Association
Volume 116, Issue 4, August 2024, Pages 325-327




Physicians' perception on using a multi-cancer early detection blood test to reduce disparities in cancer screening

Garfield A. Clunie ^a, Sharon D. Allison-Otley ^b, Joy D. Calloway ^c, Marie L. Borum ^d  

In a survey of ~1200 Black physicians and medical students who primarily cared for Black patients...

- 86.8% noted that MCD test would benefit all patients
- 75% indicated that MCD tests would promote further cancer screening and early detection in Black patients



► JNCI Cancer Spectr. 2024 Sep 12;8(5):pkae084. doi: [10.1093/jncics/pkae084](https://doi.org/10.1093/jncics/pkae084) 

Primary care physicians and laypersons' perceptions of multicancer detection clinical trial designs

Goli Samimi ^{1,✉}, Sarah M Temkin ², Carol J Weil ³, Paul K Han ⁴, Elyse LeeVan ⁵, Wendy S Rubinstein ⁶, Tessa Swigart ⁷, Sarah Caban ⁸, Katherine Dent ⁹, Lori M Minasian ¹⁰

In 14 focus groups with 88 laypeople and 6 focus groups with 45 primary care physicians...

- Participants were racially, ethnically, and geographically diverse
- Primary care physicians and laypeople were willing to respectively refer patients to, or participate, in an MCD trial but wanted clear communication on collection and use of biospecimen and data

Conclusions

- **Establish recruitment goals to achieve equitable enrollment in MCD trials**
 - Bolen Framework: select *a priori* recruitment goals for underrepresented groups based on research question, study location, and population of intended use
 - Opportunity for health policies
- **Communicate strategically about MCD tests with a focus on equity in use and outcomes**
 - WHO framework
 - Engaging communities early and often
 - Collaborating with physicians and other healthcare partners



Thank you

UW Medicine