

Income affects oncology clinical trial participation

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Joseph M. Unger, Ph.C., of the Fred Hutchison Cancer Research Center in Seattle, and colleagues assessed clinical trial participation patterns according to socioeconomic and demographic factors for 5,499 [oncology patients](#) using an Internet-based treatment [decision tool](#).

The researchers found that 40 percent of patients discussed clinical trials with their physicians; of these discussions, 45 percent led to offers of clinical trial participation, and about half (51 percent) of these offers led to participation in clinical trials. Overall, the rate of participation in

clinical trials was 9 percent. Based on univariate analysis, participation was significantly less likely for older patients and patients with lower income and education. Income remained a significant predictor of clinical trial participation in multivariable analysis (odds ratio, 0.73). For patients aged 65 years and older with universal access to Medicare, lower income still predicted lower participation in trials. Among lower-income patients, cost concerns were more evident.

"Because clinical trials offer the newest cancer treatments, equal access to this important resource for patients of all income groups is essential. Also, improved lower-income participation would allow clinical trials to be conducted more quickly and would better ensure the applicability of trial results to all income levels (i.e., generalizability)," the authors write. "Understanding that income is related to clinical trial participation could help guide [policy decisions](#) aimed at increasing access for lower-income patients."

One author disclosed [financial ties](#) to NexCura.

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