

Black patients received less clinical trial information than white patients

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A study comparing how physicians discuss clinical trials during clinical interactions with black patients versus white patients further confirms racial disparities in the quality of communication between physicians and patients.

Oncologists provided black patients with less information overall about [cancer clinical trials](#) compared with white patients, according to data presented at the Fifth AACR Conference on The Science of Cancer Health Disparities, held Oct. 27-30, 2012.

"Minority patients tend to receive less information, which could, in part, explain under-enrollment by minorities in clinical [cancer trials](#)," said Susan Eggly, Ph.D., associate professor of oncology in the Population Studies and Disparities Program at Wayne State University School of Medicine and the Barbara Ann Karmanos Cancer Institute in Detroit, Mich. "These disparities could also lead to [minority patients](#) being enrolled in trials without fully understanding the purpose of the trial and the potential risks of participation."

Eggly and colleagues examined 22 video-recorded interactions between oncologists and patients during which a clinical trial was offered. Patients were matched by cancer type and [sociodemographic characteristics](#). Half of the video-recorded interactions were with black patients and the other half were with white patients. Researchers used linguistic discourse analytical methods to examine several aspects of the interactions, including overall discussion of clinical trials and the five

basic elements of consent: purpose, risks, benefits, alternatives to participating and the voluntary nature of trial participation.

Data revealed that clinical trial interactions with black patients were shorter overall and included less discussion of clinical trials compared with interactions with white patients. Key aspects of consent were also discussed less with black patients than with white patients, especially the purpose of the trial and risks of participation. However, the researchers found that oncologists spoke more about voluntary participation with black patients than with white patients.

Previous research by Eggly and colleagues showed that [black patients](#) tended to ask fewer questions and they trusted their doctors less than [white patients](#) did. In addition, physician biases affected the quality of communication, which Eggly believes may also account for the differences found in this study.

"Taking a close look at interactions and the language used can help us to identify patterns of behavior and make the necessary improvements that may ultimately lead to decisions that are in the best interest of each patient," she said.

Provided by American Association for Cancer Research

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