

Patients with lower income less likely to participate in clinical trials

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Patients newly diagnosed with cancer were less likely to participate in clinical trials if their annual household income was below \$50,000, according to an article published online by *JAMA Oncology*.

Joseph M. Unger, Ph.D., of the Fred Hutchinson Cancer Research Center, Seattle, and coauthors used data from a survey of adult patients with new diagnoses of breast, lung or colorectal cancer. All patients were enrolled prior to making a treatment decision and then followed for six months to assess whether they participated in a clinical trial.

Of the 1,581 patients who were eligible, 1,262 (80 percent) with annual income data were available for the analysis. Patients were predominantly younger than 65, female and not African American.

The authors report patients with annual household income below \$50,000 had 32 percent lower odds of [trial participation](#) than higher income patients (12 percent vs. 17 percent). Trial participation decreased as annual [household income](#) decreased from \$50,000 or higher to between \$20,000 and \$49,999 and to less than \$20,000 (17 percent vs. 13 percent vs. 11 percent, respectively).

"The identification of patient income level as an independent predictor of trial participation is important for multiple reasons. If income is associated with health status, then improving representativeness of lower-income patients in trials would improve the generalizability of study outcomes. Also, greater participation of lower-income [patients](#) would

allow trials to be conducted more quickly, speeding the development of new treatments. Crucially, since clinical trial treatments represent the newest available treatments, access to this vital resource should be available to individuals of all [income](#) levels," the authors conclude.

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