

Ethnic disparities seen in enrollment for a clinical trial

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(HealthDay)—In the Bronchiolitis Follow-up Intervention Trial



(BeneFIT) setting, physicians more often determined that Hispanic patients were not appropriate for as-needed follow-up and excluded them from the trial, according to a research brief published online Jan. 19 in *Pediatrics*.

Eric R. Coon, M.D., from the University of Utah School of Medicine in Salt Lake City, and colleagues conducted a secondary analysis of data from BeneFIT, involving previously healthy children hospitalized for bronchiolitis randomly assigned to an automatic (control group) versus asneeded (intervention group) posthospitalization follow-up visit.

The researchers found that 506 of the 548 eligible patients for BeneFIT were deemed appropriate for the intervention by physicians. Of those deemed appropriate, 29 percent were of Hispanic ethnicity compared with 52 percent among patients considered not appropriate. Only Hispanic ethnicity remained significantly associated with reduced odds of physician-deemed appropriateness in a multivariable model (odds ratio, 0.4).

"Our findings suggest that physician biases may have reduced the generalizability of trial results and perpetuated disparities by depriving Hispanic families of an opportunity to reduce their time and financial burdens after hospital discharge through trial participation," the authors write. "In future trials, researchers should consider interventions addressing provider and researcher biases at the time of participant screening to maximize diverse and inclusive participation."

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