Screening and Prevention Trials
Step Up Minority Recruitment

Faced with the challenge of enrolling African Americans and other hard-to-reach minority groups, recruiters for cancer prevention and screening trials are reaching out to enlist the support of these communities and their leaders.

Minority groups are generally well represented in the National Cancer Institute’s treatment clinical trials, as shown by a report published in this Journal June 19. But prevention and screening trials don’t fare as well (see News, March 6).

PLCO Trial

As the NCI’s Prostate, Lung, Colorectal, and Ovarian Cancer Screening Trial heads into its final phase of recruitment, minority participation stands at about 14%, including 6% non-Hispanic blacks, 2% Hispanics, and 6% Asians or Pacific Islanders (mostly Native Hawaiians recruited at the Pacific Health Research Institute in Honolulu, one of 10 PLCO sites across the country).

Although minority participation increased last year, African-American enrollment falls short of the 13% that they represent in the U.S. population.

Marvella E. Ford, Ph.D., an investigator at the Center for Medical Treatment Effectiveness Programs in the Henry Ford Health System in Detroit, is conducting a randomized trial of strategies designed to enhance recruitment of African Americans into the PLCO trial. The “AAMEN project” is funded in part by the federal Centers for Disease Control and Prevention to fulfill a congressional mandate for CDC to support prostate cancer screening among African-American men.

“There is some trepidation in the African-American community about getting involved in research,” Ford said, “because there’s a collective memory of historical experiences that gets passed on” involving human rights abuses in the name of medicine or research.

In addition to supporting the AAMEN project, CDC is funding studies in four states to assess knowledge, attitudes, and beliefs about prostate cancer and screening among African-American men, as well as practice patterns of physicians treating these men. Studies of men in New York’s Harlem and in northern Louisiana will allow investigators to compare results from urban and rural populations. In Massachusetts and Missouri, investigators will compare men’s recall and understanding of their own prostate screening history with data from their medical charts.

At a recruitment workshop in Washington in July, some PLCO recruiters said Hispanics have been even more difficult to recruit than African Americans. The Cancer Institute of Brooklyn, one of 10 PLCO centers, has deployed re-
Recruitment messages ranging from TV spots featuring Mayor Rudolph Giuliani, to side-of-the-milk-carton exhortations by Uncle Sam, to grab the attention of media-saturated New Yorkers. But Annette Angelone, Brooklyn’s assistant of the Men’s Trial, has targeted messages to Hispanics with little response. In the final recruitment phase, the institute will renew its efforts to bring Hispanics into the trial, she said.

Elmer E. Huerta, M.D., of the Washington Cancer Institute, Washington, D.C., told the group that Hispanics are a diverse people whose cultural bonds include the Spanish language and a number of cultural values. Prominent among these are familismo (heightened concern with family), simpatía (importance of positive interpersonal relations), respeto (respect for authority), and fatalismo (the belief that one can do little to alter one’s fate).

These values may interact in complex ways that affect recruitment of Hispanics to a clinical trial: While respeto might compel potential participants to heed a doctor’s advice, fatalismo suggests that cancer prevention and screening are a waste of time.

"Why wear a seat belt? Why have a Pap smear or a PSA or sigmoidoscopy? If I’m going to die, I’m going to die" — that’s fatalismo, and it’s a very common characteristic in the Hispanic population," Huerta said.

The Breast Cancer Prevention Trial has accrued more than three-fourths of its planned 16,000 women at increased risk for breast cancer and should finish accrual within a year. Of those randomized so far, about 4% are minorities. BCPT recently launched a minority recruitment pilot project in five cities, said Lori Psillidis, director of communications for the National Surgical Adjuvant Breast and Bowel Project. Psillidis said BCPT recruiters have been fairly successful in reaching African-American women and having them come in for eligibility screening, but have met with less success at the crucial step of enrolling them in the trial.

Community outreach workers will begin a new minority recruitment effort for BCPT in Chicago, Dallas, Philadelphia, Washington, D.C., and Greensboro, N.C. Working through churches and community groups, they will provide education on breast cancer screening and prevention, including information about the trial. African-American and Hispanic women will be the primary focus of the projects, although no specific minority recruitment targets have been set.

Men's Trial

The men’s counterpart of BCPT, the Prostate Cancer Prevention Trial, might be expected to hold particular interest for black men, who have the world’s highest incidence and mortality from prostate cancer. Yet PCPT, which is expected to complete its enrollment of 18,000 men by year’s end, has just 4% black participants along with 4% other minorities.

"We have made an effort to increase the number of minorities, but it has not been completely successful," said Carol Moinpour, Ph.D., of the Southwest Oncology Group Statistical Center, Fred Hutchinson Cancer Research Center, Seattle.

Race aside, recruitment of men from lower socioeconomic strata has been difficult, Moinpour added. On average, PCPT participants have a much higher educational level than the general population of American men aged 55 and older: 36% have a postgraduate education and 77% have at least some college education.

"It’s basically a white, middle to upper class, highly educated group," she said, "and the demographic profile of African Americans who join the trial mirrors that of Caucasians."

Generosa Grana, M.D., director of cancer prevention and control at Cooper Hospital Medical Center in Camden, N.J., outside Philadelphia, is running a CDC-funded program to promote breast and cervical cancer screening, and more recently has begun working on recruitment to BCPT. She spoke to PLCO recruiters about Hispanic recruitment.

Camden’s population is largely African American and Hispanic and "has all the barriers of the inner city — poverty, low educational level," Grana said.

"The most important piece of work for us has been building a coalition and using it to get the message out," she said, adding that her projects have involved reaching out to city and state governments, Hispanic politicians, Hispanic centers, and groups such as the American Cancer Society and the American Association of Retired Persons.

Having a member of the target population work on recruitment is also a plus, she said: "The biggest payoff for us was employing a Hispanic outreach worker."

The minority population can be difficult to reach with conventional recruiting tools such as print materials, Grana
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added. "As well-made and well-meant as they might be, brochures may not reach the audience you want to reach. People will toss them out without reading them. So we developed educational programs we thought would work for us."

One medium they have tried is theater. Working with cancer survivors in the area, Grana and co-workers created a play about breast cancer for the African Americans and are now working on a similar play for the Hispanic community.

— Tom Reynolds

Awards, Appointments, Announcements

The Oncology Nursing Foundation recently honored three individuals with $10,000 research fellowships that are designed to support short-term, postdoctoral oncology research training with a senior investigator who has an established program of research relevant to oncology nursing.

The recipients are Sara H. Kagan, Ph.D., assistant professor of gerontological nursing at the University of Pennsylvania School of Nursing, Philadelphia; Marilyn Bookbinder, Ph.D., director of nursing research at Memorial Sloan-Kettering Cancer Center, New York; and Karen Hassey Dow, Ph.D., associate professor at the University of Central Florida School of Nursing, Orlando.

In addition, the foundation named Marilyn Hockenberry-Eaton, Ph.D., as a Fatigue Clinical Research Scholar. She will receive $35,000 a year for 2 years to work on cancer-related fatigue research. She is associate professor at Baylor College of Medicine, Houston.

The individual research fellowships are cosponsored by Hoechst Marion Roussel, Inc., Chiron Corp., and Ortho Biotech, Inc., which also cosponsors the fatigue scholar award.

Lawley Named Dean

The Emory University School of Medicine, Atlanta, announced that Thomas Lawley, M.D., will be the new dean. He has been interim dean since May and chair of the university’s Dermatology Department, a post from which he will resign.

Before joining the Emory faculty, Lawley had been a senior investigator at the National Cancer Institute, Bethesda, Md.

Cassman Heads NIGMS

The new director of the National Institute of General Medical Sciences at the National Institutes of Health is Marvin Cassman, Ph.D., who has been the institute’s deputy director since 1989.

NIH Director Harold Varmus, M.D., called Cassman, who has been on the NIH staff since 1975, "an outstanding scientist and scientific program manager whose skills are ideally suited for this position at the helm of NIH’s ‘basic research institute.’"

Cassman will oversee a budget of $947 million and a portfolio of more than 3,300 grants, about 13% of the grants funded by NIH. The NIGMS budget supports basic research in the areas of cell biology, biophysics, genetics, developmental biology, pharmacology, physiology, and biological chemistry.

NMDP Medical Director

The National Marrow Donor Program, Minneapolis, announced that it is expanding the role of its medical director from part time to full time. Dennis L. Confer, M.D., who has been part-time medical director since 1991, is moving to Minneapolis to assume the position full time.

Confer has been director of bone marrow transplantation at the University of Oklahoma Health Sciences Center, Oklahoma City.

LSA Recruits Greene

The Leukemia Society of America, New York, appointed Trish Greene as senior vice president for patient services. She had been national vice president for patient services at the American Cancer Society, Atlanta.

The announcement said that Greene will evaluate LSA’s existing patient services and support programs and develop new opportunities to assist patients and families in coping with their illness. She also will work to strengthen the society’s information services center.

Rosen Named CEO

ImmunoTherapeutics, Inc., Fargo, N.D., named Michael S. Rosen as president and chief executive officer, succeeding Gerald Vosika, who will continue as the company’s chairman and chief scientific officer.

ImmunoTherapeutics is a development-stage biotechnology company involved in the research, development, and clinical evaluation of products for the pre-