## There Are Too Many White People in Clinical Trials and it's a Bigger Problem Than You Think

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According to a recent study conducted by researchers at the University of California, Davis, white Americans still make up the overwhelming majority of clinical trials. Non-white people represent fewer than five percent of overall participants, and fewer than two percent of clinical cancer research studies focus specifically on minority groups.

Why is that a problem? Well, because research into cancer among minority groups is stalling at the same time as non-white Americans are bearing more of the country's cancer burden. For instance, black Americans have the highest rates of cancer — and the shortest rates of survival — of any other racial group in the nation. The gap can be stark. Black women are 40 percent more likely to die of breast cancer than white women. But African Americans represent just 1.3 percent of the participants in cancer clinical trials.

"The proportion of minorities in clinical research remains very low and is not representative of the U.S. population with cancer," Moon Chen, the associate director for cancer control for UC Davis' cancer center and the lead researcher of the study, explained in a press release about his findings. "What is needed is deliberate effort. Minorities are not hard to reach. They are hardly reached."

Incorporating racial diversity into clinical trials is essential because certain treatments may not work as well for different populations. Researchers typically find that ethnic and geographic differences can affect how cancer progresses, so studying a range of different racial groups gives them better insight into how the disease can most effectively be combated. For instance, previous research has revealed that Asian patients suffering from lung cancer are more likely to possess a certain genetic mutation that affects the way they respond to traditional chemotherapy.

This is an issue that's been plaguing the medical community for years. Back in 1993, Congress passed the Health Revitalization Act, which specifies that trials funded by the National Institute of Health must include non-white participants. But according to Chen and his fellow researchers, not much has progressed over the past two decades.

There's racial disparity on the other end of NIH's trials, too. A recent review of the agency's grant data found that black scientists are systematically underfunded. Even when they have the same credentials as their white peers, black researchers are 10 percentage points less likely to win NIH funding for their projects. That likely contributes to the fact that research into diseases that disproportionately affect black people, like sickle cell anemia, also remains underfunded.

In fact, it's not difficult to trace the impact of racial divides all the way through our public health sector. Even outside of the specific issue of cancer, black Americans are still dying younger than white Americans — largely because institutionalized structures of racism and poverty have contributed to a society in which African Americans are more likely to suffer from health issues yet less likely to receive quality health care.

## This post originally appeared on

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