Racial/ethnic differences of understanding of biospecimen storage/sharing among breast cancer patients and non-cancer age-matched control subjects in a nationwide study



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BACKGROUND

- Collection of biological samples has become routine in clinical trials.
- Patients' understanding of biospecimen collections, storage, sharing, and current and future use may enhance cancer patients participation in cancer research that involves biospecimen collection.
- However, there is a significant knowledge gap in the cancer research community about cancer patients' understanding of biospecimen collection for current and future research.
- The understanding of biospecimen collection may differ by race but

The adjusted linear models showed that white subjects scored higher than non-whites (mean scores 14.43 vs. 13.43) on the survey questions overall (p< 0.05), after accounting for education and WRAT.</p>

RESULTS Cont'd



OBJECTIVES

The primary objective is to examine whether white and non-white subjects who consented to a cognitive function study differed in their understanding of the ways their biospecimens could be used by researchers.

The secondary objective is to examine whether cancer patients and non-cancer control subjects who consented to a cognitive function study differed in their understanding of the ways their biospecimens could be used by researchers

METHODS AND MEASURES

- Breast cancer patients scheduled to receive chemotherapy at NCI Community Oncology Research Program (NCORP) and healthy controls participated in the study.
- Consent form related to biospecimens was administered to participants during the baseline visit.
- Approximately two weeks after consenting, participants' understanding of biospecimen use was evaluated:
- Four items covered biospecimen sharing (score 0-4);
- Three items covered relevance to care (score 0-3);

- White subjects were more likely than non-whites to correctly answer all the questions for the
 biospecimen use (42.1% vs. 34.4%, p<0.22),
 biospecimen sharing (31.3% vs. 28.1%, p<0.74),
 - ✤ relevance to care (35.1% vs. 17.2%, p<0.01),</p>
 - ✤ research purpose (4.1% vs. 1.4%, p<0.97).</p>

Mean scores of the patient and control groups (all race) for outcome variables (n=650)

Variables	Treatment (n=461)			Cont	rol (n=		
	n	Μ	SD	n	Μ	SD	95% CI

- $\bullet \text{ Nine items equated bisers simon use (score 0.0);}$
- Nine items covered biospecimen use (score 0-9);
- Six items covered research purpose (score 0-6);
- Higher scores indicate better understanding in all cases.
- Sample question: Did you agree for researchers to use your human biological sample to answer specific questions in the current study? Yes/no/unsure.
- Linear models were used to compare the mean scores between white (Caucasian) and non-white (Black 71% and other 29%) subjects, adjusting for education and baseline reading comprehension (WRAT).

RESULTS					
Demographic Characteristics		White N (n=592) (r	lon-white n=58)		
Age	Mean	53.11	50.69		
	SE	1.52	9.22		
	Range	22-81	33 - 70		
Education					
	Some High School	1.1%	3.1%		
	High School	16.7%	18.8%		
	Part College	36.4%	37.5%		
	College	27.6%	26.6%%		
	Graduate	17.8%	12.5%		
Marital Status					
	Widowed	5%	9.4%		
	Divorced	11%	15.6%		
	Separated	1.9%	3.1%		
	Single	7.6%	20.3%		
	Relationship	4.8%	7.5%		
	Married	69.8%	42.2%		

Handling ⁺	428	7.55	1.97	223	7.84	1.71	-0.02 – 0.57
Sharing ⁺	427	2.36	1.46	223	2.34	1.45	-0.26 – 0.21
Relevance to care ⁺	427	1.43	1.25	223	2.09	1.12	0.47 - 0.85*
Research Purpose†	427	2.78	1.69	222	2.60	1.60	-0.43 – 0.09
*p<0.01							

- Cancer patients were less likely than non-cancer control group to understand biospecimen's relevance to care (1.43% vs. 2.09%, p<0.01).
 There was a significant difference between non-white cancer patients and non-white control group in understanding biospecimen handling (p<0.04), but there was no difference between white cancer patients and white control group.
- White and non-white control group had better understanding about biospecimen's relevance to care and biospecimen use for research purpose than white and non-white cancer patients(p<0.01).</p>

CONCLUSIONS

Our research suggests that the subjects comprehension related to biospecimens is low overall across all racial/ethnic backgrounds, but non-white subjects' scores remained lower than whites even after adjusting for education and WRAT.

The mean scores for distance matching analyses between white (n=58) and non-white (n=58) subjects were not different from the actual mean scores for white(n=592) and non-white (n=58) subjects. We therefore reported the actual results

Cancer patients may have difficulties in understanding biospecimen collection and its current and future use.

Efforts should be made by researchers to make it easier for all study subjects, especially non-white subjects and cancer patients, to understand biospecimen collection and use.

SELECTED REFERENCES

- Institute of Cassileth BR., Zupkis RV., Sutton-Smith, K., March V.
 Informed consent: why are its goals imperfectly realized? *NEJM* 1980; 896-900
- Lebacqz K, Levine RJ. Respect for persons and informed consent to participate in research. *Clin Res.* 1977;25:101-7

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