H.R. 1966/S. 946 – The Henrietta Lacks Enhancing Cancer Research Act

Cosponsor H.R. 1966/S. 946 The Henrietta Lacks Enhancing Cancer Research Act

BACKGROUND

Patient participation is critical to the success of cancer clinical trials.

Underrepresented groups face barriers preventing them from enrolling in cancer clinical trials. Although most patients express a willingness to participate in a clinical trial, only a small fraction have the opportunity. In fact, twenty percent of cancer clinical trials fail because of insufficient patient enrollment. Therefore, addressing these barriers is key to ensuring progress in cancer research and expanding participation in cancer clinical trials.

20% **OF CANCER CLINICAL TRIALS FAIL** due to insufficient patient enrollment

BARRIERS TO PATIENT ENROLLMENT REPORT

ACS CAN released a report in 2018, "Barriers to Patient Enrollment in Therapeutic Clinical Trials for Cancer."

This report included 23 recommendations to address barriers to cancer clinical trials, which are important to advancing new cancer treatments from the lab to the patient. The report highlighted many barriers that prevent cancer patients from accessing potential new treatments through clinical trials. Over-all cost, childcare, transportation, and geographic location make it difficult or in some cases impossible for patients to enroll. The report also highlighted that ethnic groups, older Americans, rural Americans, and poorer Americans are among those that continue to be under-represented in cancer clinical trials.

ACS CAN believes that a special emphasis should be made on decreasing disparities in access to cancer clinical trials. Without action, these Americans will continue to face barriers to enrollment in cancer clinical trials, depriving them from access to new treatments and interventions. Additionally, increasing access to cancer clinical trials will ensure that cancer research becomes more efficient, reducing the time and effort needed to translate basic science discoveries into meaningful therapeutic advances that benefit all patients.

H.R. 1966/S. 946 THE HENRIETTA LACKS ENHANCING CANCER RESEARCH ACT

H.R. 1966/S. 946 would direct the U.S. Government Accountability Office (GAO) – a nonpartisan, independent agency that provides Congress with information to help the government save money and work more efficiently – to analyze federal and state policies that directly impact participation rates in cancer clinical trials.

The GAO would also be tasked with recommending potential policy changes across federal agencies that would reduce barriers that currently keep certain patients from enrolling in clinical trials.

The bill is named in honor of Henrietta Lacks, an African American woman who died of cervical cancer in 1951. To this day, cells cultivated during Mrs. Lacks' treatment have been used by medical researchers for some of modern medicine's most important breakthroughs, including the development of the polio vaccine and treatments for cancer, HIV/AIDS and Parkinson's disease.

THE BOTTOM LINE:

By analyzing the federal policies that directly impact participation rates in cancer clinical trials and then recommending potential policy changes across federal agencies, we can reduce barriers that currently keep patients from enrolling in clinical trials.

Barriers that prevent cancer patients from joining clinical trials include:

COST

LOCATION

TRANSPORTATION

CHILDCARE

INSTITUTIONAL PRACTICES