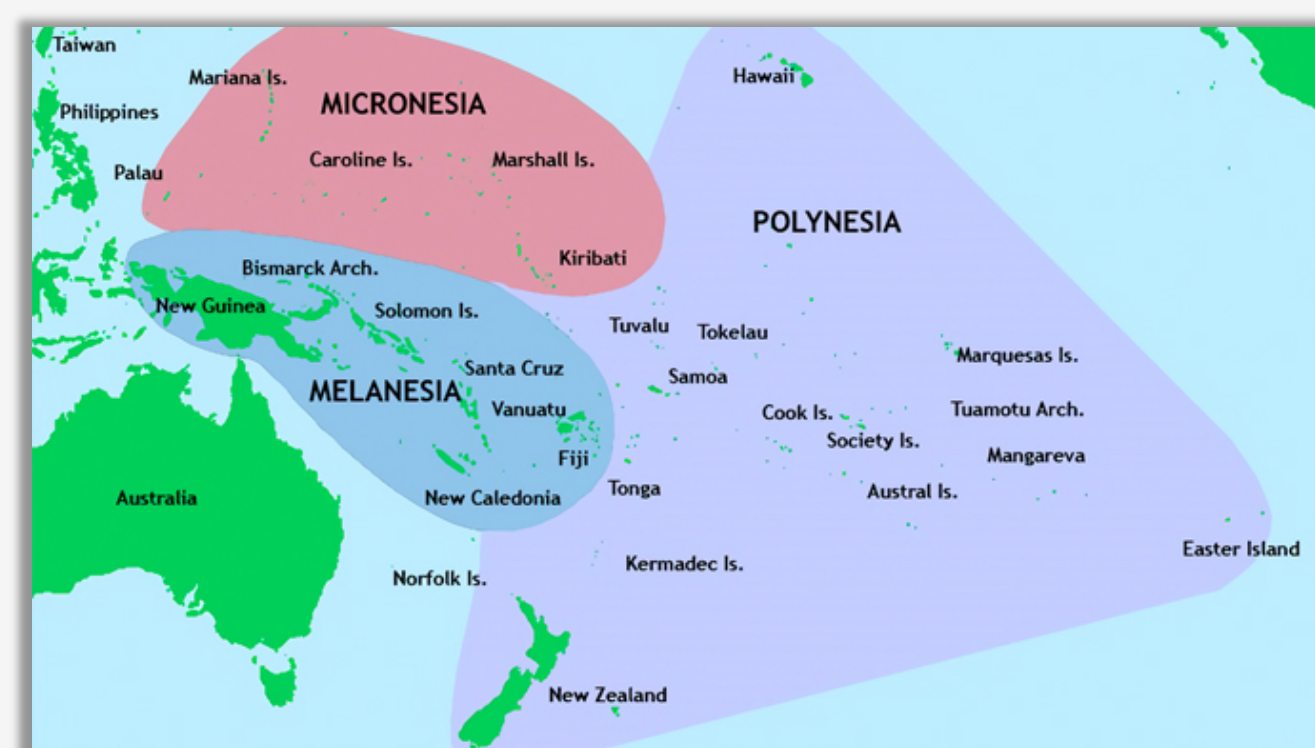


# The Challenges and Success of Enrolling Participants on the Tomosynthesis Mammographic Imaging Screening Trial (TMIST or study EA1151) in Hawaii's Minority/Underserved NCI Community Oncology Research Program (M/U NCORP)

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## Background

The primary aims of the EA1151-TMIST study is to compare 2D and 3D mammography in the detection of advanced breast cancer and develop ways to personalize breast cancer screening. The University of Hawaii Cancer Center is currently enrolling participants at the Women's Health Center housed in The Queen's Medical Center. The site on average conducts 400 screenings per week in the heart of Honolulu, Hawaii. Any woman between the ages of 45-74 with no history of breast cancer can participate.



In Hawai'i, a new wave of immigration is taking place as a result of the Compact of Free Association. These new immigrants, such as Micronesians, come from other parts of the Pacific and are under presented in clinical trials.

Despite Hawaii having no majority population, Micronesian populations experience disadvantages when accessing healthcare services, especially in breast cancer screening.

## Breast Cancer Burden in Hawaii

From 2012-2016, Hawaii had the 5<sup>th</sup> highest incidence rate of breast cancer (female) in the US<sup>2</sup>. In the same time period, breast cancer incidence and mortality rates in Hawaii were highest in Native Hawaiians<sup>3</sup>.

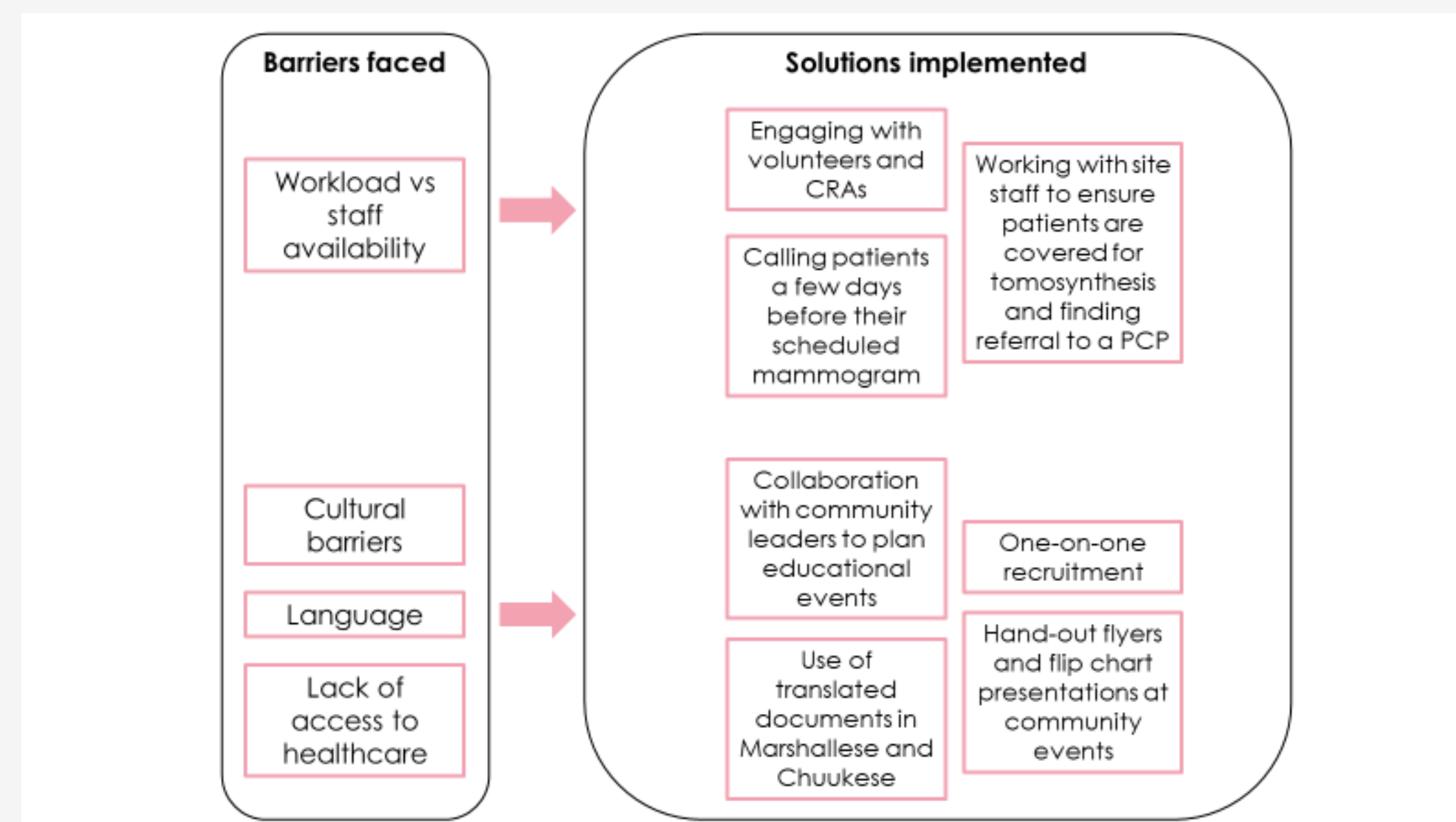
Other Pacific Islanders followed by Native Hawaiians represent the highest percentage of women that have never had a mammogram<sup>4</sup>.

Only 26% of Micronesian women 40 and older had ever had a mammogram<sup>1</sup>.

## Goal

Increase the overall accrual of participants onto the TMIST study and the accrual of minority women focusing on the Micronesian population.

## Methods

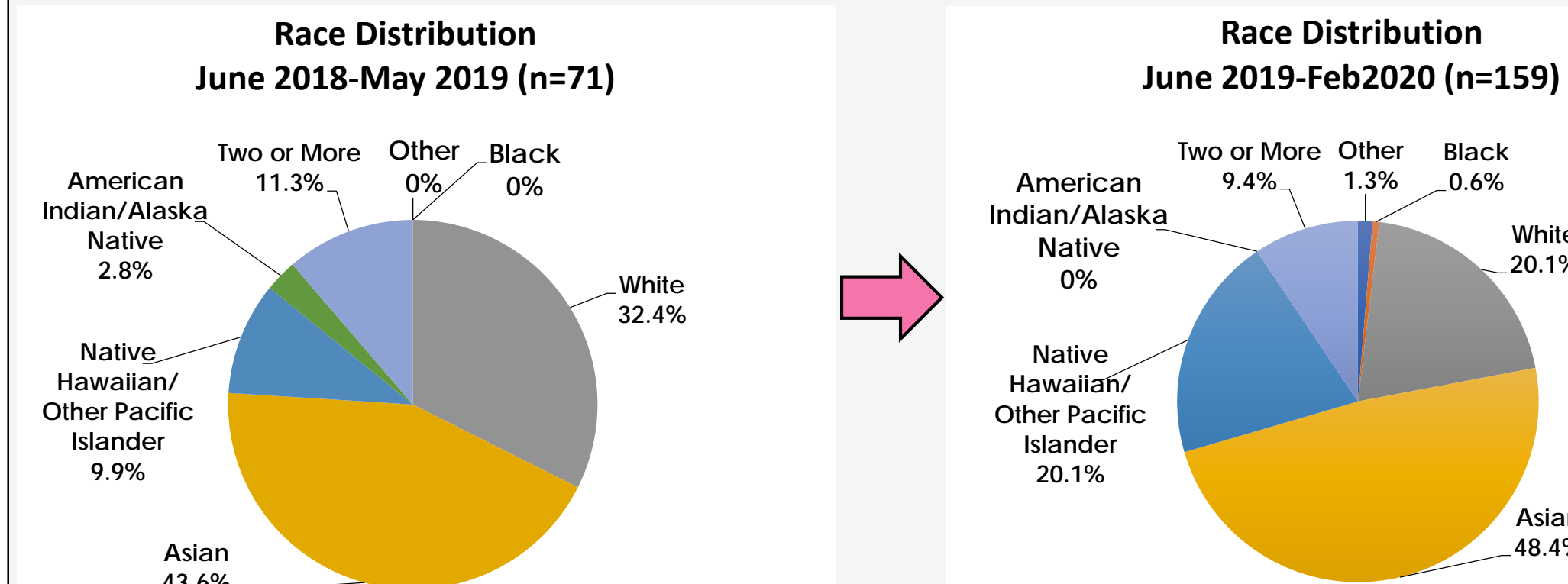


## A. Numbers of Accruals Before (n=71) vs After Community Outreach and Phone Contact Project Initiated (n=159)

Jun 2018	Jul 2018	Aug 2018	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb 2019	Mar 2019	Apr 2019	May 2019
1	10	4	1	0	2	4	6	8	12	13	10

Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020
4	34	24	15	12	7	16	28	19			

## B. Accruals by Race Before vs After Community Outreach and Phone Contact Project Initiated (n=230)



## Results



Since the trial opened in June 2018 until February 2020 our site enrolled a total of 230 participants. During the first year of recruitment, responses and accruals were relatively low. After community outreach efforts (C) were initiated in June 2019 and phone contact protocols began in August 2019 the diversity of participants expanded (A) and the number of accruals increased (B). The picture on the left is Srue Wakuk, community health educator, at a Chuukese community gathering.

## C. Community Outreach Outcomes

21  
Community  
Events

426  
Attendees

6  
Women  
Enrolled

## Summary

- Collaborating with a community health educator with the same cultural background as the population that you are working with provides patients with improved access to healthcare services and may increase the likelihood of enrolling patients onto a clinical trial.
- Building a strong network with our partner site and community leaders was essential to recruiting minority women and providing health education and disease awareness.
- We will work towards expanding our community outreach efforts along with utilizing translated documents and increasing the number and diversity of TMIST participants.

## References

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4. Mammogram - had mamm, for the State of Hawaii, for the Year(s) - 2011, 2012, 2013, 2014. Hawaii Health Data Warehouse; Hawaii State Department of Health, Behavioral Risk Factor Surveillance System.