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Background

One of the primary missions of an NCI-designated cancer center is to ensure alignment to the catchment area it serves across the research continuum, with a specific focus on clinical trial participation. Despite this, actively monitoring this population presents distinct challenges due to many factors including data siloed in different systems, disparate levels of data specificity, and lack of technical expertise. Thus, the SKCC Clinical Trial Informatics (CTI) group developed an interactive shiny application to monitor trends in clinical trial accrual, while continuing to compare to both SKCC specific data, as well as publicly available information specific to our catchment area, with a focus on reproducibility.

Goals

- Develop reporting tools to monitor the accrual population that is user friendly and interactive
- Identify disparities between clinical trial participants and catchment area population
- Highlight actionable insights around clinical trial metrics and reporting



Evaluating Clinical Trial Participation Across the Catchment Area: A Data Driven Approach

Methods

- Data are matched by patient and geographic areas
- Interactive Shiny Application
 - Heat Maps
 - Comparison points
 - By Accrual
 - By County
- Gain a better understanding of our trial population
- Provide an easy means of comparison and monitoring this population over time

Outcomes

The applications that are developed are used both within our clinical trial organization and greater institution to consistently monitor the catchment population and ensure patients on clinical trials are representative. Additionally, teams are able to identify gaps and potential disparities, and work to identify barriers to participation.

- Accrual by County 1st Quarter 2023
 - Highest accrual Philadelphia
 - Lowest accrual Burlington





Outcomes (cont.)



Accrual Heat Map 1st Quarter 2023

Lesson Learned and Future Directions

Future work will aim to provide more insights on internal metrics that may illuminate potential hurdles for patients on studies. This will include examining distances between patients and their study sites, so we can ensure we are offering trials closer to home for all patients, as well as where there are geographic gaps in trial offerings within our community sites.

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