This material was developed and funded by Pfizer Ltd and is intended for a UK public audience. This material is not a substitute for professional medical care. Readers are strongly advised to discuss the information provided and seek personalised advice from their doctor or care team. Pfizer Ltd would like to offer their thanks to the patients who participated in the co-creation of this document.



Cancer clinical trials

The role of clinical studies in cancer and the importance of <mark>ethnic diversity</mark> in treatment development

If you're thinking about taking part in a cancer clinical trial, it is likely that you will have questions for your healthcare team. This document answers some common questions about cancer clinical trials. It can also be used as a guide for questions to ask your healthcare team before you make a decision to join a trial.

Cancer clinical trials: The what and why?

Cancer clinical trials test potential new treatments involving people living with cancer. They test whether different treatments are suitable and how well they work. Taking part in a trial may mean you get access to new treatments years before they are widely available.^{1,2}

All potential new treatments must be carefully and fully tested. This makes sure they are suitable and work better than treatments already used to treat cancer. By taking part in a cancer clinical trial you will be making a positive contribution to cancer research.¹⁻³

Clinical trials can also be used to research other areas of cancer care, such as diagnosis, side effects and quality of life.¹⁻³

Why are clinical trials in cancer important?

Why is ethnic diversity in clinical trials important?

Ethnic diversity in cancer clinical trials means the inclusion of participants from diverse ethnic backgrounds and cultures. Race, ethnicity, age, and sex can all impact how different people respond to the same treatment. The more diverse a group of clinical trial participants is, the more we can learn about the safety and efficacy of a potential new treatment for people now and in the future.⁴⁻⁶

Trial organisers are changing to better serve diverse communities by following guidelines promoting race equality and prioritising access and knowledge of cancer clinical trials for minority populations.⁴⁻⁶

What are the stages of cancer<u>clinical trials?</u>

What is a cancer

clinical trial?

Before a trial can involve people, research into potential new treatments begins in the laboratory. Clinical trials then test how well these new potential treatments work in people and check their safety. Trials are divided into different stages, called phases. At each phase of a cancer clinical trial, researchers learn more about a potential new treatment.^{1-3,7}

Phase 1

Continues to Phase 2

Tests a very low dose of the potential new treatment for the first time

Phase	2	Continues to

Decides the best dose of the potential new treatment, and which cancer it works for

Phase 3

Phase 3 Continues to approval of treatment

Compares the potential new treatment with existing treatments for cancer

Phase 4

Finds out even more about the new treatment once it's available to the general public

Adapted from: Macmillan Cancer Support² and Cancer Research UK.⁷

Joining a cancer clinical trial

Your cancer care team will consider whether certain trials are suitable for you to take part in, and discuss these with you. All clinical trials have a list of entry conditions called 'inclusion and exclusion criteria'.^{1,2}

Who can take part in a cancer clinical trial?

What is informed consent during a cancer clinical trial?

A doctor, nurse or other researcher will always ask your permission to enter you into a clinical trial. They will give you the information you need to help you make a decision. You should feel free to ask any questions that will help you. Agreeing to enter a trial once you have been given this information is called giving informed consent.¹²

Your healthcare team will respect the decision you make and will not ask you to provide any explanation. You can leave a trial at any time without needing to give a reason.^{1,2}

If English is not your first language, all information should be explained to you in a language you understand. The consent form to confirm your participation in any trial may be written in your preferred language, or translated by an interpreter.¹

Each trial has a main researcher and a surrounding medical team. These are usually medical doctors, nurses, pharmacists, research co-ordinators and other healthcare professionals who help to deliver treatment and monitor patient responses and side effects.²

Who is involved in a cancer clinical trial?

Protocol and participation in cancer clinical trials

What is the trial protocol and design?

The plan for the trial is The trial design describes the different ways that trials can be set up to learn as much as possible known as the protocol. about the safety and effectiveness of a potential new treatment.^{1,2} This explains:1,2 It also describes what treatment participants will receive:² The purpose of **Randomised trials: Controlled trials:** the trial Participants are randomly assigned to their Compare a potential new treatment with an treatment group. Each treatment group will existing standard treatment.² How the trial is have a specific ratio of trial participants.² carried out Placebo trials: What will Only used when a potential new treatment happen during is being tested as an addition to an existing the trial standard treatment. Comparing the potential new treatment to the placebo can show if the treatment is really working.² Who can join

> You may not know if you are receiving the potential new treatment or a placebo. It is important to know that people who receive the placebo will also receive the standard treatment.²

How are patients safeguarded during cancer clinical trials?

the trial

The trial design

Every clinical trial protocol in the UK is reviewed by an ethics committee and a data monitoring committee that protect the rights and well-being of all people taking part in the trial. These committees can stop trials early if a potential new treatment is not working well, or there is evidence the treatment is causing harm.^{1,2}

If you participate in a clinical trial, your General Practitioner (GP) will be informed so they can support your healthcare plan. Your medical records remain confidential to the trial research team and your healthcare team – nobody else can see the information gathered during the trial.²

Participating in a clinical trial comes with many potential benefits or disadvantages. Some to consider are listed below:

Potential benefits

Could benefit from a new treatment that is only available through the trial^{1,2}

Improve treatment for other people with cancer⁸

Learn more about your health⁸

) More monitoring by your healthcare team can feel reassuring^{1,2,8}

Potential disadvantages

There is always a risk that a potential new treatment may bring side effects. Your healthcare team will try to limit the risk of any side effects¹²

The cost of more travel, hospital visits and time off work^{1,2}

What are the benefits or disadvantages to joining a cancer clinical trial?

What happens after a cancer clinical trial has ended?

The research team will often want to continue checking in with you after the trial has ended to see how well you are doing after treatment. Results of trials are published to help decide the best treatments for people with cancer. The best way to find out about trial results is to ask your cancer specialist.¹²

Jargon buster: Common terms you may hear or see when learning about cancer clinical trials

Also known as an oncologist. This is a doctor who treats cancer and provides medical care for a person diagnosed with cancer ⁹	
The reasons that a person is not allowed to participate in a clinical trial ¹⁰	
The reasons that a person is allowed to participate in a clinical trial ¹⁰	
A fake treatment that looks the same as, and is given in the same way as, a real treatment being studied ¹⁰	
How comfortable an individual is, and their ability to participate in or enjoy life events ²	
An effect of a drug that is not intended to happen ¹⁰	
The best available treatment for a particular type of cancer agreed by guidelines and widely used by healthcare professionals ²	

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