Increasing Patient Access to Clinical Trials Through Operationalizing a Satellite Cancer Center Within the Perlmutter Cancer Center Network

G. Gargano, B. Bodin, A. Joshi, B. Pothuri, J. Mehnert

Laura & Isaac Perlmutter Cancer Center at NYU Langone Health

1. Background

Brooklyn is a critical catchment area for NYU Langone due to its diverse population. In response to the growing need for accessible oncology care, construction was completed for Perlmutter Cancer Center – Sunset Park (PCC-SP), NYU's first comprehensive NCI-Designated Cancer Center in Brooklyn, in June 2019. Patient cases have since surged an astounding 172 percent, with 605 patient cases in 2021 up to 1,646 cases in 2023. Since 2021, there has been a total of 61 patients referred from Brooklyn to Manhattan for clinical trial enrollment. The NYU community recognized this pressing demand for accessible trial opportunities for the Brooklyn population, and addressing this need quickly became a priority.

2. Goals

Establish a comprehensive satellite Clinical Trials Office (CTO) in Brooklyn to augment trial enrollment in underserved areas by increasing the amount of de-centralized studies.

3. Solutions and Methods

A formal site assessment was conducted in April 2021 to determine PCC-SP's capability to conduct research. As data, regulatory, and business/finance units are centralized in our model, the resulting key needs included dedicated Brooklyn CTO staff, investigational pharmacy equipment and training, and space for research biospecimen equipment. To activate trials despite these limitations, we designed a selective feasibility process where analytic case data is reviewed to determine patient population and accrual potential, followed by completing investigational pharmacy review first. Starting with a GYN surgical trial that did not require Investigational Product (IP), we then opened a thoracic trial that utilizes all standard of care (SOC) therapies and are now close to activating multiple breast trials that utilize IP.

4. Results and Outcomes

A secondary assessment conducted in January 2024 confirmed resolution of immediate needs identified in 2021. Collaborative efforts resulted in the creation of three Brooklyn CTO coordinator positions, which were approved in March 2023 and filled by December 2023. Through exceptional partnership between PCC, pharmacy, and hospital leadership, an investigational pharmacy, operational as of December 2023, was established within the cancer center, with onsite investigational pharmacists capable of compounding and dispensing IP of both hazardous and non-hazardous classes. A shared space within the PCC-SP lab, with onsite research coordinators to process and ship research biospecimen samples was prepared for processing in January 2024. Since September 2023, the number of open trials has increased from two to five. From 2022 to 2023 we had 8 accruals, 87.5 percent of which were accruals from minority backgrounds. Projected accruals for 2024 is set at 10 patients.

5. Lessons Learned and Future Directions

Establishing a satellite CTO requires multi-department collaboration, buy-in from key stakeholders, and proper resource and budget allocation. Having a selective feasibility process and careful escalation of trial complexity proves to be a successful strategy in launching a new site. As the research program in Brooklyn grows in trial number and complexity, space will become the main limiting factor. Mitigation

strategies include acquiring additional space for lab and pharmacy within the NYU Langone Hospital-Brooklyn campus. This initiative aims to enhance diversity in clinical trial enrollment to more accurately reflect the borough's diverse demographics. The initial accrual has already demonstrated that close to 90 percent of accruals were from patients of diverse backgrounds.