Exploring the Options ACS CTMS: Patient Video

BARBARA OHANESIAN:

I participate in clinical trials because I think that it will provide valuable information for my care going forward.

DR. ROBERT L. COMIS:

A clinical trial today might become the treatment tomorrow, and all the treatments today... were clinical trials yesterday.

KATIE DAHLQUIST:

Without clinical trial research we're not going to be able to find a cure for cancer.

DR. JAMES K. BENNETT:

Particularly if it's a treatment trial, it may expose that patient to new and innovative therapies that may very well be better than the existing therapies that are already approved.

DR. COMIS:

Often times those treatments aren't available outside a clinical trial.

DR. BENNETT:

That is why I feel that it's important for researchers like myself to make sure that the community understands that we need these trials.

BARBARA:

How else are we ever going to get these drugs into the mainstream treatments? And these may be the drugs that so many of us are waiting for!

Misconceptions about Clinical Trials

DR. COMIS:

In adults about 5% of patients participate in cancer clinical trials. So you see how critical it is to increase the level of participation. And it's not just to increase the number: It's to get the answer quickest.

KATIE:

There is the myth that clinical trials are only going to be appropriate for patients that have exhausted all their treatment options, and this simply isn't true.

DR. COMIS:

In fact, the greatest advances that we've made in the treatment of diseases like breast cancer, colorectal cancer, lung cancer even, have been when we've applied new approaches to people in their initial stages of treatment.

DR. COMIS:

Another major myth is that patients who participate in clinical trials are treated like guinea pigs.

MEL BANKS, JR.:

Because there was extra care given to make sure I was comfortable, I didn't ever really feel like a guinea pig.

DR. COMIS:

It is a very comprehensive approach to your care within a clinical trial.

BARBARA:

I felt so... cared for... during the clincal trial process.

MEL:

The doctor, as well as the staff, took a little bit more care it seemed because they were required to report back how I was doing and what my different medical conditions were throughout the trial.

Title Graphic: Clinical Trials Matching Service

DR. COMIS:

There's a huge misperception in the country about clinical trials and the use of placebos. In cancer clinical trials, you don't get randomized or treated with nothing--with a sugar pill. If there is an effective, existing treatment, we never use a placebo.

BARBARA:

Then there's no down side to me participating in a clinical trial, because if it turns out it's not the best treatment for me, then much as you would do if I were on a standard therapy, you would suggest a change.

DEBORAH AUTEN:

(nat sound in call center under graphic)

...American Cancer Society's Clinical Matching Service, this is Deborah. How may I help you?

KATIE:

The Clinical Trials Matching Service helps patients find clinical trials that they might be eligible for, and we do this by asking them information about their cancer diagnosis and their past treatment history.

DR. COMIS:

Their call center is populated with experts.

KATIE:

Clinical trial information is hard to find--especially for someone that's not well-versed in medical terminology. And a lot of times doctors might not bring up clinical trials as a treatment option. So we're available to help patients find the information that they need so they can include that whenever they're making their treatment decision.

Title Graphic: An Option Worth Considering

DR. BENNETT:

If you can go to one web site or one place and find all of the research trials that are available, I think that's a wonderful service!

BARBARA:

It puts you immediately on the road to taking charge of how you're going to handle your treatments.

DR. COMIS:

There are presently about 9,000 cancer clinical trials in the system.

KATIE:

So we can narrow that down, so instead of *you* having to go through all of that information we can do that for you.

BARBARA:

It's such a valuable resource for people to know that they can go there, they can call the 800 number... it's just such a valuable reference service.

CHRIS HARRISON:

What we can do is give them other options or at least explore those other options.

BARBARA:

So I think it's an amazing service, and I'm so pleased to know it's available.

DR COMIS:

It's the clinical trials that are done which really is the engine for medical progress.

BARBARA:

I think that we are doing ourselves a disservice as people who have the condition or the disease if we don't participate, because we could be providing our own best choice a year from now.

Closing Title Graphic with contact information

DR. COMIS:

The important thing for a patient is to understand that when you're discussing treatment options with your doctor at first, clinical trials should be a component of that discussion. BARBARA:

I'm a lot better than I was when I started. And that has been through clinical trial treatment.

DR. COMIS:

If we're going to continue to move the treatments forward, move the quality of life forward, patients and their doctors are going to have to continue to participate in clinical trials.

KATIE:

Whether it's your first treatment decision or your second or third, it's always good to look at clinical trials for treatment options.

MEL:

I believe that given the opportunity to participate in a clinical trial was vital to the success of me feeling comfortable and knowing that I'm going to be living for a few more years and 'having some more birthdays,' I guess you could say.

VO:

For more information about cancer clinical trials and the American Cancer Society's Clinical Trials Matching Service, call us at 1.800.227.2345 or visit us at cancer.org/clinicaltrials.