



Clinical Trials

“The key to finding new and better treatments for cancer lies in research. Through the dedication of Huntsman Cancer Institute scientists and the Clinical Trials Office staff, as well as the enthusiastic participation of our patients, we continually develop new approaches that help cancer patients live longer and better lives,” says Jennifer Katz, clinical research administrative director at Huntsman Cancer Institute (HCI).

All cancer treatments used today began with research that became clinical trials. Clinical trials test treatments for safety and effectiveness in patients, playing an important role in advancing cancer research from the laboratory to the development of new cancer treatments. Patient participation in clinical trials is an essential factor in this process.

The Clinical Trials Office (CTO) at HCI assists physician investigators with the complexities of running more than 100 clinical trials at a time. The CTO staff includes research, regulatory, and finance coordinators. Research coordinators assist investigators

in preparing their research ideas to become clinical trials, screen potential patients for eligibility, and enroll eligible patients in the trials; they also collect and report patient data. Regulatory coordinators ensure that all studies comply with HCI, University of Utah, and federal regulations. Financial coordinators prepare budgets, negotiate contracts, and oversee study billing and accounting.

The CTO staff’s dedication is crucial to managing the large numbers of studies. “The staff in this department work amazingly well together. They embody the concept of teamwork in order to provide excellent service to our patients and the physicians caring for them,” says Katz. The combined efforts of the CTO staff, physicians, and study patients have helped the department grow in size over the last six years, offering more trials each year. “Our ability to offer a wide variety of clinical trials that treat various types of cancer for patients in the Intermountain West keeps us moving forward,” says Katz.

After successful treatment, GayeRene Ledford’s doctors at Huntsman Cancer Institute (HCI) warned that the type of breast cancer she had often recurs.

At the time, HCI was participating in a nationwide clinical trial of the drug Herceptin. Early testing showed it could reduce recurrence significantly. GayeRene chose to join 3,300 other women (28 at HCI) in the trial.

“There were some risks,” GayeRene says. “Before I started Herceptin, I was told a possible side effect was congestive heart failure.” She accepted the risk, hoping the drug might lengthen her time with her family. She stopped taking Herceptin during the trial because her heart was not performing properly. A month later, her heart function improved and she resumed the trial.

GayeRene finished a year of Herceptin treatments in June 2006; now she has quarterly follow-ups at HCI. Her participation in the trial continues to give her hope.

“They tell me Herceptin could reduce the chance of recurrence to 50 percent. I see even the possibility of changing the odds that much as a real benefit,” GayeRene says.



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