Minorities Are Underrepresented in COVID-19 Clinical Trials

More diversity would help doctors determine whether coronavirus treatments and vaccines will work for all population groups.

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While clinical trials are currently underway to find treatment and vaccines for COVID-19, a new article published in The New England Journal of Medicine reveals that these trials lack sufficient representation of Black and indigenous people and people of color despite higher rates of coronavirus infection, COVID-19 hospitalization and death among these individuals, reports the University of Georgia's news site UGA Today.

Scientists are currently looking at the effectiveness of the antiviral remdesivir. In the Adaptive COVID-19 Treatment Trial, African Americans accounted for just 20% of all participants while Latinos and Native Americans represented about 23% of those taking part in the study. Another trial for the drug conducted by the pharmaceutical company Gilead Sciences showed that only about one of every 10 patients given remdesivir were Black, and Latinos and Native Americans made up less than 1% of participants.

"The overwhelming majority of the patients in both of those large clinical trials were Caucasians," said Daniel Chastain, PharmD, a clinical assistant professor of pharmacy at the University of Georgia's Albany campus and the study's lead author. "Knowing that African Americans die at a higher rate than Caucasians, can I say that this medication will work in them as well? Yes, they enrolled a bunch of patients, and, yes, they got these data out as fast as possible, but can we use this information to inform treatments in all patients?"

Previously, remdesivir trials showed that patients who took the drug recovered from COVID-19 slightly faster than those given a placebo. However, Black and indigenous people and people of color are more likely to experience severe symptoms and disease complications, which makes it difficult to know how individuals in these groups will respond to any treatments.

"Lack of diversity in clinical trials may stem from longstanding medical distrust on the part of minority communities, but the problem may be compounded by cost (in particular, hidden costs for such requirements as fuel, parking, meals and lodging), poor health literacy, lack of information, language barriers, limited accessibility and implicit biases against minorities," noted the researchers.

Chastain and his coauthors are calling on government agencies, medical journals, research funders, pharmaceutical companies and others to include a diverse pool of participants in COVID-19 trials in order to generalize results to the general population.

For related coverage, read "Institutional Racism Affects COVID-19's Impact on African Americans" and "Structural Racism Puts Latinos at Risk for COVID-19."

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