Supplementary Online Content

Taparra K, Benavente R, Shih JJ, et al. Race and ethnicity representation in phase 2/3 oncology clinical trial publications in the US. *JAMA Health Forum*. 2024;5(6):e241388. doi:10.1001/jamahealthforum.2024.1388

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This supplementary material has been provided by the authors to give readers additional information about their work.

		Unadjusted LR			Adjusted LR		
Characteristic	(vs Reference Group)	OR	95% CI	Р	aOR	95% CI	Р
Any Race/Ethnicity ¹		4 40	(0.00.0.00)	0.450	4.07	(4.04.0.00)	0.040
Only US Participants	(vs International)	1.40	(0.88-2.22)	0.153	1.67	(1.01-2.80)	0.048
White ²							
Kidney/Bladder	(vs Breast Cancer)	0.56	(0.29-1.07)	0.089	0.49	(0.25-0.96)	0.039
Only US Participants	(vs International)	1.52	(0.97-2.41)	0.067	1.78	(1.02-3.13)	0.045
Multicenter Trial	(vs Single Center)	2.17	(0.84-5.55)	0.107	3.62	(1.31-9.99)	0.012
Black ³	,		ĺ			,	
Only US Participants	(vs International)	1.40	(0.92-2.14)	0.113	1.75	(1.08-2.87)	0.023
Multicenter Trial	(vs Single Center)		(0.81-5.45)	0.126		(1.24-9.45)	0.018
Al/AN ⁴	(12 2g.2 20)		(0.0.0)	01120	0.0.	(0.0.0
NEJM	(vs JAMA)	0 14	(0.04-0.52)	0.095	0.21	(0.05-0.94)	0.040
Endometrial	(vs Breast Cancer)		(1.72-20.0)	0.053		(2.70-48.6)	< 0.001
Only US Participants	(vs International)		(1.72-20.0)	0.005		(1.52-7.23)	0.003
NHPI ⁵	(vs international)	2.30	(1.30-4.40)	0.005	3.23	(1.52-7.23)	0.003
	(v.a. N.a. wth a a.a.t.)	4.00	(4 00 40 0)	-0.004	2.70	(4.00.44.6)	0.047
West	(vs Northeast)		(1.83-13.8)	<0.001		(1.28-11.6)	0.017
Endometrial	(vs Breast Cancer)	6.23	(1.44-24.7)	0.117	10.3	(1.82-58.9)	0.008
Hispanic ⁶							
NEJM	(vs JAMA)	0.10	(0.02-0.45)	<0.001	0.14	(0.03-0.67)	0.014
2018-2022	(vs 2012-2017)	1.96	(1.15-3.42)	0.014	2.36	(1.31-4.31)	0.005
Industry Sponsored	(vs Not Sponsored)	0.35	(0.20-0.62)	< 0.001	0.50	(0.27-0.95)	0.033

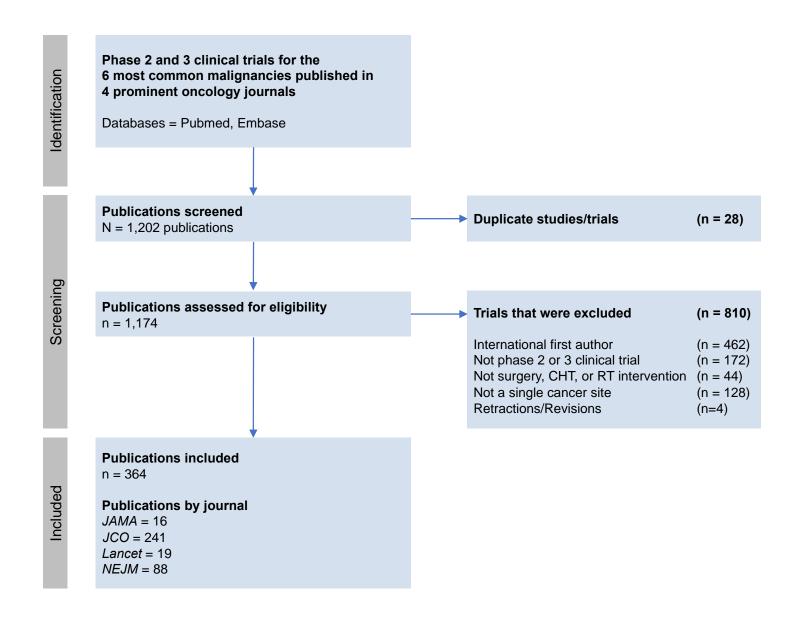
Covariates used in multivariable model after forward stepwise selection

- 1. Adjusted for US region, cancer site, multicenter trial, having only US patients, and blinding.
- 2. Adjusted for journal, cancer site, multicenter trial, and having only US patients.
- 3. Adjusted for cancer site, multicenter trial, having only US patients, randomization, blinding, and industry sponsorship.
- 4. Adjusted for journal, US region, cancer site, multicenter trial, having only US patients, randomization, and industry sponsorship.
- 5. Adjusted for journal, US region, trial phase, cancer site, randomization, blinding, and industry sponsorship.
- 6. Adjusted for journal, year, having only US patients, industry sponsorship, and treatment response primary endpoint.

eTable 1. Univariable and multivariable logistic regression for significant predictors of race and ethnicity reporting. Covariables included journal, US region, year, trial phase, cancer site, only US participation, multicenter trial, randomization, blinding, and industry sponsorship, survival endpoint primary endpoint, and treatment response primary endpoint. The full list of covariates meeting this threshold is reported numerically in the footnote by race. Asian race reporting did not have any statistically significant covariates on multivariable logistic regression. Abbreviations: aOR=Adjusted Odds Ratio; 95%CI=95% Confidence Interval; AI/AN=American Indian and Alaska Native; NHPI=Native Hawaiian and Other Pacific Islander; NEJM=New England Journal of Medicine; JAMA=Journal of the American Medical Association.

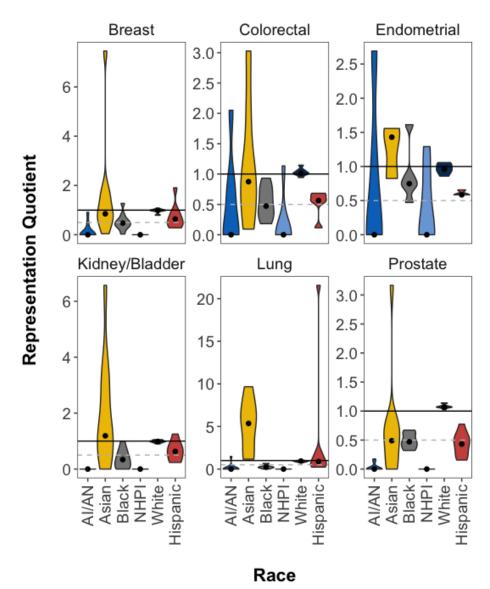
Race Reported	Publication Reported	ClinicalTrials.gov Reported	Рмс
AI/AN			<0.001
No	312 (86%)	199 (55%)	
Yes	52 (14%)	165 (45%)	
NHPI			< 0.001
No	336 (92%)	208 (57%)	
Yes	28 (7.7%)	156 (43%)	

eTable 2. Comparison between Indigenous Race reporting between clinical trial publication and ClinicalTrials.org. Al/AN and NHPI were chosen for evaluation as the only two groups having the lowest RQ values, with an overall median RQ of 0.00. Statistics reported as n (%). McNemar's Chi-squared test with continuity correction was used to calculate the *P*-value (P_{MC}). Abbreviations: Al/AN=American Indian and Alaska Native; NHPI=Native Hawaiian and other Pacific Islander.



eFigure 1. PRISMA Flow diagram of included and excluded oncology clinical trial publications. Initial publication identification was obtained using Pubmed and Embase searches for phase 2/3 clinical trials of the most common non-cutaneous solid malignancies in the United States published in *JAMA*, *JCO*, *Lancet*, or *NEJM*, between 2012-2022. Cancers included were lung, breast, prostate, endometrial, kidney/bladder, and colorectal cancers. All papers were reviewed by 2 independent reviewers, discrepancies were evaluated and decided by KT. Abbreviations: JAMA=Journal of the American Medical Association; JCO=Journal of Clinical Oncology; NEJM=New England Journal of Medicine; CHT=Chemotherapy; RT=Radiation Therapy.





eFigure 2. Violin plot of yearly composite representation quotients of published phase 2/3 oncology clinical trials by cancer site and the 5 federally recognized race categories. Yearly composite RQ values represent the proportion of patients included in clinical trials by race compared to year-matched site-specific NAACCR CiNA data. Black circles represent median yearly composite representation quotients by race, 2012-2022. Abbreviations: Al/AN=American Indian and Alaska Native; NHPI=Native Hawaiian and other Pacific Islanders; NAACCR=North American Association of Central Cancer Registries; CINA=Cancer in North America.