



NCCIH Report of FY13-14 Inclusion Data

I. Background/Overview

- A. The mission of NCCIH is to define, through rigorous scientific investigation, the usefulness and safety of complementary and integrative health interventions and their roles in improving health and health care. Research of interventions supported by the NCCIH clinical portfolio is comprised primarily of natural product-based and mind/body-based interventions. Generation of an evidence base for such interventions is crucial for informing decision-making by the public, by health care professionals, and by health policymakers regarding the use and integration of complementary and integrative health approaches. The primary goals and objectives of the NCCIH clinical portfolio are therefore to advance the science and practice of symptom management; develop effective, practical, personalized strategies for promoting health and well-being; and enable better evidence-based decision-making regarding complementary and integrative health approaches and their integration into health care and health promotion.
- B. In support of its research goals and objectives, the NCCIH supports an extensive portfolio of interventional clinical trials and observational studies varying in size and complexity. As NCCIH-supported work is focusing on generating a knowledge base for many natural product and mind/body interventions, the portfolio includes primarily early-phase clinical research in these areas. Clinical research efforts are therefore focused on formal intervention development, pilot and feasibility testing, as well as some associated mechanistic studies. In view of the goals and objectives of the NCCIH research program, larger multi-center clinical trials of these interventions are not a current focus, although the progress in developing a deeper evidence base will ultimately inform plans for larger trials of interventions that demonstrate promise in early-phase testing. In view of the focus on early-phase testing and intervention development, maximizing enrollment diversity may not be feasible or warranted in such early small studies. Progression from early-phase to larger trials of efficacy or

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effectiveness, however, would incorporate the need for maximizing enrollment diversity to address concerns of generalizability of research results.

Data from the National Health Interview Survey (NHIS) over the last decade has reported extensive public use of many complementary practices and approaches that are studied within the NCCIH portfolio (see NHIS publications list in section IV). There is extensive use primarily by educated White women in the US. Consistent with these reports, the enrolled cohort in the general NCCIH-funded program has revealed a preponderance of White women in the US.

II. Strategies for Ensuring Compliance

A. PEER REVIEW PROCESS-

The NIH Peer Review regulations (42 C.F.R. 52h) specify that reviewers will take into account, in determining overall impact that the project in the application could have on the research field involved, the adequacy of plans to include both sexes/genders, minorities, children, and special populations as appropriate for the scientific goals of the research. Therefore, the scientific review groups must factor their evaluation of the proposed plans for the inclusion of individuals on the basis of their sex/gender, race, ethnicity, and age into their overall evaluation of an application's scientific and technical merit.

- i. Reviewers are instructed to evaluate the assigned applications or R&D proposals, and each individual project within multi-component applications or R&D proposals, to assess whether the plan for the inclusion of Women and Minorities is acceptable or unacceptable by providing narrative text to answer each of the following questions:
 - a. Inclusion plan - Does the applicant describe the planned distribution of subjects by sex/gender, race, and ethnicity for each proposed study considering the following?
 - b. Description and rationale of subject selection - Does the applicant adequately describe the subject selection criteria and rationale for selection considering the population at risk for the disease/condition under study and the scientific objectives and proposed study design?

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- c. Rationale for exclusion-If the proposed sample is not representative of those at risk for the disease/condition under study, does the applicant provide an adequate justification of this considering the following:
- The literature on the existence of (or lack of) differences on the basis of sex/gender, race, and ethnicity
 - The proposed sample size
 - The need to fill a particular research gap
 - The feasibility of establishing collaborative arrangements (cost is not an acceptable justification)
 - The purpose of the research constrains applicant selection (e.g., unique stored specimens, rare surgical specimens etc.)
- ii. Description of outreach programs for recruitment- Does the applicant adequately describe recruitment and outreach plans or other methods for enrolling the individuals proposed as part of the sample?
- iii. Additional requirements when evaluating NIH-defined phase III clinical trials: Does the applicant adequately consider whether clinically important sex/gender, racial, and/or ethnic differences are expected? Does the applicant describe one of the following?
- Plans to conduct valid analyses to detect significant differences in intervention effect among sex/gender, racial, and/or ethnic subgroups when prior studies strongly support these significant differences among subgroups, or
 - Plans to include and analyze sex/gender, racial, and/or ethnic subgroups when prior studies strongly support no significant differences in intervention effect between subgroups. (Representation of sex/gender, racial, and ethnic groups is not required as subject selection criteria, but inclusion is encouraged), or
 - Plans to conduct valid analyses of intervention effect in sex/gender, racial and/or ethnic subgroups (without requiring high statistical power for each subgroup) when the prior studies neither support nor negate significant differences in intervention effect among subgroups.

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B. RESOLVING INCLUSION CONCERNS

- i. If concerns related to inclusion are noted during the peer review process, the concern is noted in the summary statement and the grant's score may be impacted.

For grants that NCCIH considers for funding that contain an unacceptable inclusion plan, program staff must work with the investigator to develop a scientifically acceptable inclusion plan. Once an concerns noted in review are addressed and an acceptable plan is approved by NIH staff, administrative tasks for funding consideration may proceed..

- C. TRAINING FOR STAFF- NCCIH Staff take advantage of the training received at the NIH-level for grants management, scientific review, and program staff. In addition, in-service training is provided to NCCIH staff by NCCIH representatives who participate in several NIH human subjects and inclusion management committees.
- D. Please see Tables A at the end of the report to review information on the number of grants that were found to contain unacceptable inclusion plans.

III. Analysis and Interpretation of Inclusion Data

A. FY13 and FY13 Data

See attached tables

B. Discussion of FY12 and FY13 Inclusion Data

Table 1 shows that in FY 13, the NCCIH Extramural Program had 57 clinical studies with enrollment activity, with a total enrollment of 22,783 subjects (69% female and 15% minorities). Note that "clinical studies" has been defined broadly, to include clinical intervention trials, as well as non-interventional clinical research, epidemiologic studies, behavioral studies, and database studies

Table 2 shows that in FY 14, the NCCIH Extramural Program had 59 clinical studies with enrollment activity, with a total enrollment of 26,537 subjects (70% female and 13% minorities).

Tables 3 shows that in FY13, out of the 57 studies reporting enrollment activity, 10 studies reported enrolling only females or only males.

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Tables 4 shows that in FY14, out of the 59 studies reporting enrollment activity, 10 studies reported enrolling only females or only males.

Tables 5, 6, 7, and 8 are the Phase III Tables. As NCCAM did not support phase III trials in FY 13 and FY 14, data tables for phase III trial enrollment are not included in this report.

Table 9 shows that in FY13, the NCCIH Intramural Program had one clinical study which enrolled 5 subjects (100% female, 60% minority).

Table 10 shows that in FY14, the NCCIH Intramural Program had one clinical study which enrolled 5 subjects (100% female, 60% minority). It should be noted that the NCCIH intramural program has been significantly restructured over the last few years, and that this clinical program is currently expanding.

IV. Additional information

A. NHIS Publications

- i. Barnes PM, Bloom B, Nahin RL. Complementary and alternative medicine use among adults and children: United States, 2007. *Natl Health Stat Report*. 2008;(12)(12):1-23.
- ii. Barnes PM, Powell-Griner E, McFann K, Nahin RL. Complementary and alternative medicine use among adults: United States, 2002. *Adv Data*. 2004;(343)(343):1-19.
- iii. Black LI, Clarke TC, Barnes PM, Stussman BJ, Nahin RL. Use of complementary health approaches among children aged 4-17 years in the United States: National health interview survey, 2007-2012. *Natl Health Stat Report*. 2015;(78)(78):1-19.
- iv. Clarke TC, Black LI, Stussman BJ, Barnes PM, Nahin RL. Trends in the use of complementary health approaches among adults: United States, 2002-2012. *Natl Health Stat Report*. 2015;(79)(79):1-16.
- v. Peregoy JA, Clarke TC, Jones LI, Stussman BJ, Nahin RL. Regional variation in use of complementary health approaches by U.S. adults. *NCHS Data Brief*. 2014;(146)(146):1-8.

Table A. Level of Compliance with Inclusion Policy in New Extramural Grant Applications as Assessed During Scientific Peer Review

NATIONAL CENTER FOR COMPLEMENTARY & INTEGRATIVE HEALTH

Council Dates		Jan-13	May-13	Aug-13	Oct-13	Jan-14	May-14	Aug-14	Oct-14
Total Number of Applications Reviewed	(#)	124	145	15	119	318	225	16	111
Number of Applications with Human Subjects	(#)	70	81	2	60	91	144	0	57
Number (percent) of Applications approved by IRG as submitted	(#)	67	81	2	57	89	139	0	55
	(%)	95.71%	100%	100%	95%	97.8%	96.53%	0%	96.49%
Number (percent) of Applications with unacceptable <i>minority-only</i> inclusion	(#)	0	0	0	1	1	4	0	1
	(%)	0%	0%	0%	1.67%	1.1%	2.78%	0%	1.75%
Number (percent) of Applications with unacceptable <i>sex/gender-only</i> inclusion	(#)	0	0	0	0	0	1	0	1
	(%)	0%	0%	0%	0%	0%	0.69%	0%	1.75%
Number (percent) of Applications with both unacceptable minority AND sex/gender inclusion	(#)	3	0	0	2	1	0	0	0
	(%)	4.29%	0%	0%	3.33%	1.1%	0%	0%	0%
Total Number (percent) of Applications with unacceptable minority inclusion	(#)	3	0	0	3	2	4	0	1
	(%)	4.29%	0%	0%	5%	2.2%	2.78%	0%	1.75%
Total Number (percent) of Applications with unacceptable sex/gender inclusion	(#)	3	0	0	2	1	1	0	1
	(%)	4.29%	0%	0%	3.33%	1.1%	0.69%	0%	1.75%
Total Number (percent) of unacceptable Applications as submitted	(#)	3	0	0	3	2	5	0	2
	(%)	4.29%	0%	0%	5%	2.2%	3.47%	0%	3.51%

Table 1: FY 2013 Aggregate Enrollment Data for All Extramural Research Protocols

NATIONAL CENTER FOR COMPLEMENTARY & INTEGRATIVE HEALTH

Old Form: Total of All Subjects Reported Using the 1977 OMB Standards Number of Protocols with Enrollment Data: 0

	American Indian/ Alaska Native	Asian	Black or African American	* Hawaiian/ Pacific Islander	Hispanic	White	* More Than One Race	Unknown/ Other	Total
Female									
Male									
Unknown									
Total									

* Categories not in use in Old Forms, but are provided here for consistency with the 1997 OMB Standard.

New Form: Total of All Subjects Reported Using the 1997 OMB Standards Number of Protocols with Enrollment Data: 57

	Total of All Subjects by Race								Total of All Subjects by Ethnicities			
	American Indian/ Alaska Native	Asian	Black or African American	Hawaiian/ Pacific Islander	White	More Than One Race	Unknown/ Not Reported	Total	Not Hispanic	Hispanic or Latino	Unknown/ Not Reported	Total
Female	94	315	1,325	27	11,692	381	415	14,249	12,582	653	1,014	14,249
	0.66%	2.21%	9.3%	0.19%	82.05%	2.67%	2.91%	62.54%	88.3%	4.58%	7.12%	62.54%
Male	50	155	478	13	5,400	156	208	6,460	5,774	301	385	6,460
	0.77%	2.4%	7.4%	0.2%	83.59%	2.41%	3.22%	28.35%	89.38%	4.66%	5.96%	28.35%
Unknown	2	4	3	1	132	3	1,929	2,074	132	7	1,935	2,074
	0.1%	0.19%	0.14%	0.05%	6.36%	0.14%	93.01%	9.1%	6.36%	0.34%	93.3%	9.1%
Total	146	474	1,806	41	17,224	540	2,552	22,783	18,488	961	3,334	22,783
	0.64%	2.08%	7.93%	0.18%	75.6%	2.37%	11.2%	100%	81.15%	4.22%	14.63%	100%

NATIONAL CENTER FOR COMPLEMENTARY & INTEGRATIVE HEALTH

Old Form: Total of All Subjects Reported Using the 1977 OMB Standards

Number of Protocols with Enrollment Data: 0

	American Indian/ Alaska Native	Asian	Black or African American	* Hawaiian/ Pacific Islander	Hispanic	White	* More Than One Race	Unknown/ Other	Total
Female									
Male									
Unknown									
Total									

* Categories not in use in Old Forms, but are provided here for consistency with the 1997 OMB Standard.

New Form: Total of All Subjects Reported Using the 1997 OMB Standards

Number of Protocols with Enrollment Data: 59

	Total of All Subjects by Race								Total of All Subjects by Ethnicities			
	American Indian/ Alaska Native	Asian	Black or African American	Hawaiian/ Pacific Islander	White	More Than One Race	Unknown/ Not Reported	Total	Not Hispanic	Hispanic or Latino	Unknown/ Not Reported	Total
Female	124	399	1,269	31	14,285	367	516	16,991	15,246	678	1,067	16,991
	0.73%	2.35%	7.47%	0.18%	84.07%	2.16%	3.04%	64.03%	89.73%	3.99%	6.28%	64.03%
Male	57	178	466	14	6,255	157	235	7,362	6,677	289	396	7,362
	0.77%	2.42%	6.33%	0.19%	84.96%	2.13%	3.19%	27.74%	90.7%	3.93%	5.38%	27.74%
Unknown	2	6	1	1	119	7	2,048	2,184	112	6	2,066	2,184
	0.09%	0.27%	0.05%	0.05%	5.45%	0.32%	93.77%	8.23%	5.13%	0.27%	94.6%	8.23%
Total	183	583	1,736	46	20,659	531	2,799	26,537	22,035	973	3,529	26,537
	0.69%	2.2%	6.54%	0.17%	77.85%	2%	10.55%	100%	83.04%	3.67%	13.3%	100%

Table 3: FY 2013 Aggregate Enrollment Data for Extramural Research Protocols Excluding Male-Only and Female-Only Protocols

NATIONAL CENTER FOR COMPLEMENTARY & INTEGRATIVE HEALTH

Old Form: Total of All Subjects Reported Using the 1977 OMB Standards

Number of Protocols with Enrollment Data: 0

	American Indian/ Alaska Native	Asian	Black or African American	* Hawaiian/ Pacific Islander	Hispanic	White	* More Than One Race	Unknown/ Other	Total
Female									
Male									
Unknown									
Total									

* Categories not in use in Old Forms, but are provided here for consistency with the 1997 OMB Standard.

New Form: Total of All Subjects Reported Using the 1997 OMB Standards

Number of Protocols with Enrollment Data: 49

	Total of All Subjects by Race								Total of All Subjects by Ethnicities			
	American Indian/ Alaska Native	Asian	Black or African American	Hawaiian/ Pacific Islander	White	More Than One Race	Unknown/ Not Reported	Total	Not Hispanic	Hispanic or Latino	Unknown/ Not Reported	Total
Female	93	279	1,246	25	11,040	372	333	13,388	11,935	624	829	13,388
	0.69%	2.08%	9.31%	0.19%	82.46%	2.78%	2.49%	61.07%	89.15%	4.66%	6.19%	61.07%
Male	50	155	478	13	5,400	156	207	6,459	5,774	301	384	6,459
	0.77%	2.4%	7.4%	0.2%	83.6%	2.42%	3.2%	29.46%	89.39%	4.66%	5.95%	29.46%
Unknown	2	4	3	1	132	3	1,929	2,074	132	7	1,935	2,074
	0.1%	0.19%	0.14%	0.05%	6.36%	0.14%	93.01%	9.46%	6.36%	0.34%	93.3%	9.46%
Total	145	438	1,727	39	16,572	531	2,469	21,921	17,841	932	3,148	21,921
	0.66%	2%	7.88%	0.18%	75.6%	2.42%	11.26%	100%	81.39%	4.25%	14.36%	100%

Table 4: FY 2014 Aggregate Enrollment Data for Extramural Research Protocols
Excluding Male-Only and Female-Only Protocols

NATIONAL CENTER FOR COMPLEMENTARY & INTEGRATIVE HEALTH

Old Form: Total of All Subjects Reported Using the 1977 OMB Standards Number of Protocols with Enrollment Data: 0

	American Indian/ Alaska Native	Asian	Black or African American	Hawaiian/ Pacific Islander	Hispanic	White	* More Than One Race	Unknown/ Other	Total
Female									
Male									
Unknown									
Total									

* Categories not in use in Old Forms, but are provided here for consistency with the 1997 OMB Standard.

New Form: Total of All Subjects Reported Using the 1997 OMB Standards Number of Protocols with Enrollment Data: 49

	Total of All Subjects by Race								Total of All Subjects by Ethnicities			
	American Indian/ Alaska Native	Asian	Black or African American	Hawaiian/ Pacific Islander	White	More Than One Race	Unknown/ Not Reported	Total	Not Hispanic	Hispanic or Latino	Unknown/ Not Reported	Total
Female	120	360	1,193	27	13,364	354	439	15,857	14,367	624	866	15,857
	0.76%	2.27%	7.52%	0.17%	84.28%	2.23%	2.77%	62.42%	90.6%	3.94%	5.46%	62.42%
Male	57	178	466	14	6,255	157	235	7,362	6,677	289	396	7,362
	0.77%	2.42%	6.33%	0.19%	84.96%	2.13%	3.19%	28.98%	90.7%	3.93%	5.38%	28.98%
Unknown	2	6	1	1	119	7	2,048	2,184	112	6	2,066	2,184
	0.09%	0.27%	0.05%	0.05%	5.45%	0.32%	93.77%	8.6%	5.13%	0.27%	94.6%	8.6%
Total	179	544	1,660	42	19,738	518	2,722	25,403	21,156	919	3,328	25,403
	0.7%	2.14%	6.53%	0.17%	77.7%	2.04%	10.72%	100%	83.28%	3.62%	13.1%	100%

Table 9: FY 2013 Aggregate Enrollment Data for Intramural Research Protocols For On-Site and Off-Site Combined

NATIONAL CENTER FOR COMPLEMENTARY & INTEGRATIVE HEALTH

Old Form: Total of All Subjects Reported Using the 1977 OMB Standards

Number of Protocols with Enrollment Data: 0

	American Indian/ Alaska Native	Asian	Black or African American	* Hawaiian/ Pacific Islander	Hispanic	White	* More Than One Race	Unknown/ Other	Total
Female									
Male									
Unknown									
Total									

* Categories not in use in Old Forms, but are provided here for consistency with the 1997 OMB Standard.

New Form: Total of All Subjects Reported Using the 1997 OMB Standards

Number of Protocols with Enrollment Data: 1

	Total of All Subjects by Race								Total of All Subjects by Ethnicities			
	American Indian/ Alaska Native	Asian	Black or African American	Hawaiian/ Pacific Islander	White	More Than One Race	Unknown/ Not Reported	Total	Not Hispanic	Hispanic or Latino	Unknown/ Not Reported	Total
Female	0	0	0	0	2	1	0	3	2	1	0	3
	0%	0%	0%	0%	66.67%	33.33%	0%	60%	66.67%	33.33%	0%	60%
Male	0	0	2	0	0	0	0	2	2	0	0	2
	0%	0%	100%	0%	0%	0%	0%	40%	100%	0%	0%	40%
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
								0%				0%
Total	0	0	2	0	2	1	0	5	4	1	0	5
	0%	0%	40%	0%	40%	20%	0%	100%	80%	20%	0%	100%

**Table 10: FY 2014 Aggregate Enrollment Data for Intramural Research Protocols
For On-Site and Off-Site Combined**

NATIONAL CENTER FOR COMPLEMENTARY & INTEGRATIVE HEALTH

Old Form: Total of All Subjects Reported Using the 1977 OMB Standards **Number of Protocols with Enrollment Data: 0**

	American Indian/ Alaska Native	Asian	Black or African American	* Hawaiian/ Pacific Islander	Hispanic	White	* More Than One Race	Unknown/ Other	Total
Female									
Male									
Unknown									
Total									

* Categories not in use in Old Forms, but are provided here for consistency with the 1997 OMB Standard.

New Form: Total of All Subjects Reported Using the 1997 OMB Standards **Number of Protocols with Enrollment Data: 1**

	Total of All Subjects by Race								Total of All Subjects by Ethnicities			
	American Indian/ Alaska Native	Asian	Black or African American	Hawaiian/ Pacific Islander	White	More Than One Race	Unknown/ Not Reported	Total	Not Hispanic	Hispanic or Latino	Unknown/ Not Reported	Total
Female	0	0	0	0	2	1	0	3	2	1	0	3
	0%	0%	0%	0%	66.67%	33.33%	0%	60%	66.67%	33.33%	0%	60%
Male	0	0	2	0	0	0	0	2	2	0	0	2
	0%	0%	100%	0%	0%	0%	0%	40%	100%	0%	0%	40%
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
								0%				0%
Total	0	0	2	0	2	1	0	5	4	1	0	5
	0%	0%	40%	0%	40%	20%	0%	100%	80%	20%	0%	100%