

## Taking Stock: Local researcher leads recruiting in national drug trial

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Familiar with television commercials for Cymbalta, the anti-depressant drug?

Recent clinical trials found the drug may also be useful in relieving the painful side effects of certain chemotherapy drugs due, in no small part, to research conducted at Illinois CancerCare.

Chetaye Knox, a clinical research associate at Illinois CancerCare, enrolled more patients in that particular clinical trial than anyone else in the country, 21 of the total 231 patients in the study.

"It's a behind-the-scenes role that's very much needed," she says of her part in screening and recruiting Illinois CancerCare patients for the Cymbalta study and other clinical trials.

Knox's top enrollment rates are in keeping with Illinois CancerCare's top ranking nationally for recruiting participants for clinical trials. The 13-clinic network ranks ninth of 174 groups in the newly-formed Alliance of Clinical Trials in Oncology, ahead of stalwarts such as the Cleveland Clinic and M.D. Anderson Cancer Center in Texas.

The alliance is a merger of three cooperative research groups funded by the National Cancer Institute.

Illinois CancerCare's Community Clinical Oncology program, one of 49 CCOPs in 29 states funded by the National Cancer Institute, allows both patients and physicians to participate in state-of-the-art clinical trials for cancer treatment and prevention without leaving their local communities.

Dr. Nguyet Le-Lindqwister and Dr. Sachdev Thomas directed Illinois CancerCare's portion of the Cymbalta trials.

While physicians at Illinois CancerCare are not the only local researchers either conducting their own or taking part in other clinical trials, they are probably the most prolific.

Before most area clinical trials can move forward, particularly federally-funded studies, the Peoria Institutional Review Board, or PIRB, must issue its stamp of approval.

"I'd say 50 percent of our workload is from Illinois CancerCare," says Mindy Reeter, director of the Office of Human Research Oversight based at the University of Illinois College of Medicine at Peoria.

The PIRB, an independent body made up of researchers and community volunteers, reviews about 200 new clinical trial proposals a year, according to Reeter. The board meets once a month to review new studies that present "greater than minimal risk" to humans, she says.

Researchers who want a faster response can also go through commercial institutional review boards, which can meet as often as weekly. There are other institutional review boards in the area that review proposals for non-medical research. For instance, Bradley University's IRB reviews proposals for socio-behavioral research. But medically-related research conducted at Bradley goes through the PIRB.

Still, Illinois CancerCare helps keep the PIRB busy.

"They have quite a large system out there," Reeter says of Illinois CancerCare's Peoria office along Wood Sage Road. "It brings a lot of research opportunities and trials to our area."

At any given time, 13 clinical research associates at Illinois CancerCare are following an average of 65 patients each through the course of a clinical trial led by a physician, according to Jamie Harper, clinical research supervisor.

Trials may range from treatment trials assessing the safety and effectiveness of drugs to cancer-prevention trials focused on healthy people or people at high risk of getting cancer.

The Cymbalta trials are an example of a trial for a drug already approved for use in one area that researchers thought might be effective in other areas — in this case, treating neuropathy, or nerve damage, a side effect of certain chemotherapy treatments. (The FDA has already approved Cymbalta for diabetes-related neuropathy.)

The study, which opened in 2008, was the first study Knox worked on as a clinical research associate. It closed in 2011.

Based on an analysis of the data released earlier this year, results of the national Cymbalta trial were promising. Almost 60 percent of the patients who took Cymbalta daily for six weeks reported a decrease in pain, compared to 39 percent taking the placebo.

Knox says she's happy to have played a part in finding alternatives to help people ease the pain. Trial participants told her stories of not being able to stand for long or dropping dishes because of the pain.

"It's such a problem," she says. "The more options a patient has, the greater the chance for relief."

Knox is currently coordinating six studies, including one on drugs that could possibly help prevent heart damage in breast cancer patients treated with Herceptin, a drug that interrupts the growth of certain types of cancer cells.

"We're always trying to find new ways to fix problems," she says.

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