
Supplementary information

**Population diversity in
immuno-oncology trials**

In the format provided by the authors

Supplementary Table 1 | List of 92 IO drugs and combinations approved

Approval Date (press release /media link)	Type of approval	Pivotal trial NTC ID	Drug name(s)	Approval Indication
Apr-10	regular	NCT00065442	Sipuleucel-T	Prostate Cancer
Mar-11	regular	NCT00324155	Ipilimumab	Melanoma
Apr-11	regular	NCT00006249	Peginterferon alfa-2b	Melanoma
Sep-14	accelerated	NCT01295827 (melanoma cohorts)	Pembrolizumab	Melanoma
Dec-14	accelerated	NCT01721746	Nivolumab	Melanoma
Mar-15	regular	NCT01642004 NCT01721759	Nivolumab	Non Small Cell Lung Cancer
Oct-15	regular	NCT00636168	Ipilimumab	Melanoma
Oct-15	regular	NCT00769704	Talimogene laherparepvec	Melanoma
Oct-15	accelerated	NCT01927419	Ipilimumab + Nivolumab	Melanoma
Oct-15	accelerated	NCT01295827 (NSCLC cohorts)	Pembrolizumab	Non Small Cell Lung Cancer
Oct-15	regular	NCT01673867	Nivolumab	Non Small Cell Lung Cancer
Nov-15	accelerated	NCT01668784	Nivolumab	Renal Cell Carcinoma
Dec-15	regular	NCT01866319 NCT01704287	Pembrolizumab	Melanoma
Jan-16	accelerated	NCT01844505	Ipilimumab + Nivolumab	Melanoma
May-16	accelerated	NCT02181738 NCT01592370	Nivolumab	Hodgkin's Lymphoma
May-16	regular	NCT02108652	atezolizumab	Bladder Cancer
Aug-16	accelerated	NCT01848834 (HNSCC cohort only)	Pembrolizumab	Head and neck squamous cell carcinoma
Oct-16	regular	NCT02008227 NCT01903993	Atezolizumab	Non Small Cell Lung Cancer
Oct-16	regular	NCT02142738	Pembrolizumab	Non Small Cell Lung Cancer
Nov-16	regular	NCT02105636	Nivolumab	Head and neck squamous cell carcinoma
Feb-17	accelerated	NCT02387996	Nivolumab	Bladder Cancer
Mar-17	accelerated	NCT02453594	Pembrolizumab	Hodgkin's Lymphoma
Mar-17	accelerated	NCT02155647	avelumab	Merkel cell carcinoma
Apr-17	accelerated	NCT02951767	atezolizumab	Bladder Cancer
May-17	accelerated	NCT01693562	Durvalumab	Bladder Cancer
May-17	accelerated	NCT01772004	Avelumab	Bladder Cancer

May-17	accelerated	NCT02039674	Pembrolizumab + chemotherapy	Non Small Cell Lung Cancer
May-17	regular	NCT02256436	Pembrolizumab	Bladder Cancer
May-17	accelerated	NCT02335424	Pembrolizumab	Bladder Cancer
May-17	accelerated	NCT02628067	Pembrolizumab	MSI-H or dMMR cancer (solid tumors)
		NCT02460198		MSI-H or dMMR cancer (colorectal cancer)
		NCT02054806		MSI-H or dMMR cancer (mesothelioma)
		NCT01848834 (multiple cohorts)		MSI-H or dMMR cancer (Solid tumors)
		NCT01876511		MSI-H or dMMR cancer (colorectal cancer and others)
Jul-17	regular	NCT02013167	Blinatumomab	Leukemia
Jul-17	regular	NCT01696045	Ipilimumab	Melanoma
		NCT01445379		
Aug-17	regular	NCT02435849	Tisagenlecleucel	Leukemia
Sep-17	accelerated	NCT02335411	Pembrolizumab	Gastric cancer
Oct-17	regular	NCT02348216	axicabtagene ciloleucel	Non-Hodgkin's Lymphoma
Dec-17	regular	NCT02388906	Nivolumab	Melanoma
Feb-18	regular	NCT02125461	Durvalumab	Non Small Cell Lung Cancer
Mar-18	accelerated	NCT01207388	Blinatumomab	Leukemia
Apr-18	regular	NCT02231749	Ipilimumab + Nivolumab	Renal Cell Carcinoma
May-18	regular	NCT02445248	Tisagenlecleucel	Non-Hodgkin's Lymphoma
Jun-18	accelerated	NCT02576990	Pembrolizumab	Non-Hodgkin's Lymphoma
Jul-18	accelerated	NCT02060188	Ipilimumab + Nivolumab	Colorectal Cancer
Aug-18	regular	NCT01728805	Mogamulizumab	Non-Hodgkin's Lymphoma
Aug-18	accelerated	NCT01928394	Nivolumab	Small Cell Lung Cancer
Aug-18	regular	NCT02578680	Pembrolizumab + chemo	Non Small Cell Lung Cancer
Sep-18	regular	NCT02760498	Cemiplimab	Cutaneous squamous-cell carcinoma
Oct-18	regular	NCT02775435	Pembrolizumab + chemo	Non Small Cell Lung Cancer
Nov-18	accelerated	NCT02702414	Pembrolizumab	Hepatocellular carcinoma
Dec-18	regular	NCT02366143	Atezolizumab + chemo + bevacizumab	Non Small Cell Lung Cancer
Dec-18	accelerated	NCT02267603	Pembrolizumab	Merkel cell carcinoma
Feb-19	regular	NCT02362594	Pembrolizumab	Melanoma
Mar-19	accelerated	NCT02425891	Atezolizumab + chemo	Breast cancer
Mar-19	regular	NCT02763579	Atezolizumab + chemo	Small Cell Lung Cancer
Apr-19	regular	NCT02220894	Pembrolizumab	Non Small Cell Lung Cancer
Apr-19	regular	NCT02853331	Pembrolizumab + axitinib	Renal Cell Carcinoma
May-19	regular	NCT02684006	Avelumab + axitinib	Renal Cell Carcinoma

Jun-19	regular	NCT02358031	Pembrolizumab + chemo	Head and neck squamous cell carcinoma
Jul-19	regular	NCT02564263	Pembrolizumab	Esophagus cancer
		NCT02559687		
Aug-19	regular	NCT02371369	pexidartinib hydrochloride	Rare tumor
Dec-19	regular	NCT02367781	Atezolizumab + chemo	Non Small Cell Lung Cancer
Jan-20	regular	NCT02625961	Pembrolizumab	Bladder Cancer
Mar-20	accelerated	NCT01658878	Ipilimumab + Nivolumab	Hepatocellular carcinoma
Mar-20	regular	NCT03043872	Durvalumab + chemo	Small Cell Lung Cancer
May-20	regular	NCT02477826	Ipilimumab + Nivolumab	Non Small Cell Lung Cancer
May-20	regular	NCT02409342	Atezolizumab	Non Small Cell Lung Cancer
May-20	regular	NCT03215706	Ipilimumab + Nivolumab + chemo	Non Small Cell Lung Cancer
May-20	regular	NCT03434379	Atezolizumab + bevacizumab	Hepatocellular carcinoma
Jun-20	regular	NCT02569242	Nivolumab	Esophagus cancer
Jun-20	regular	NCT03284424	Pembrolizumab	Cutaneous squamous-cell carcinoma
Jun-20	regular	NCT02563002	Pembrolizumab	Colorectal cancer
Jun-20	regular	NCT02603432	Avelumab	Bladder Cancer
Jul-20	accelerated	NCT02601313	brexucabtagene autoleucel	Non-Hodgkin's Lymphoma
Jul-20	regular	NCT02908672	Atezolizumab + cobimetinib + vemurafenib	Melanoma
Oct-20	regular	NCT02899299	Ipilimumab + Nivolumab	Mesothelioma
Oct-20	regular	NCT02684292	Pembrolizumab	Hodgkin's Lymphoma
Jan-21	regular	NCT03141177	Nivolumab + chemo	Renal Cell Carcinoma
Feb-21	regular	NCT02631044	Lisocabtagene maraleucel	Non-Hodgkin's Lymphoma
Feb-21	regular	NCT03132636	Cemiplimab	Basal Cell Carcinoma
Feb-21	regular	NCT03088540	Cemiplimab	Non Small Cell Lung Cancer
Mar-21	accelerated	NCT03105336	axicabtagene ciloleucel	Non-Hodgkin's Lymphoma
Mar-21	regular	NCT03189719	Pembrolizumab + chemo	Gastric cancer
Mar-21	regular	NCT03361748	idecabtagene vicleucel	Multiple Myeloma
Apr-21	regular	NCT02872116	Nivolumab + chemo	Gastric cancer
Apr-21	accelerated	NCT02715284	Dostarlimab	Endometrial Carcinoma
May-21	accelerated	NCT03615326	Pembrolizumab + trastuzumab + chemo	Gastric cancer
May-21	regular	NCT02743494	Nivolumab + chemo	Esophagus cancer
Jul-21	regular	NCT03517449	Pembrolizumab + lenvatinib	Endometrial Carcinoma
Jul-21	regular	NCT02819518	Pembrolizumab + chemo	Breast cancer
		NCT03036488		

Aug-21	regular	NCT02811861	Pembrolizumab + lenvatinib	Renal Cell Carcinoma
Aug-21	regular	NCT02632409	Nivolumab	Bladder Cancer
Aug-21	regular	NCT02853305	Pembrolizumab	Bladder Cancer
Oct-21	regular	NCT02614066	brexucabtagene autoleucel	Leukemia
Oct-21	regular	NCT02486718	Atezolizumab	Non Small Cell Lung Cancer
Nov-21	regular	NCT03142334	Pembrolizumab	Renal Cell Carcinoma
Dec-21	regular	NCT03412565	Daratumumab + carfilzomib + dexamethasone	Multiple Myeloma
Dec-21	regular	NCT03553836	Pembrolizumab	Melanoma
Feb-22	regular	NCT03548207	ciltacabtagene autoleucel	Multiple Myeloma
Mar-22	regular	NCT02998528	Nivolumab + chemo	Non Small Cell Lung Cancer
Mar-22	regular	NCT03470922	Nivolumab + Relatlimab double formulation	Melanoma
Apr-22	regular	NCT03391466	axicabtagene ciloleucel	Non-Hodgkin's Lymphoma
May-22	regular	NCT03143153	Nivolumab + chemo/ Nivolumab + Ipilimumab	Esophagus cancer
May-22	accelerated	NCT03568461	Tisagenlecleucel	Non-Hodgkin's Lymphoma
Jun-22	regular	NCT03575351	Lisocabtagene maraleucel	Non-Hodgkin's Lymphoma
		NCT03483103		

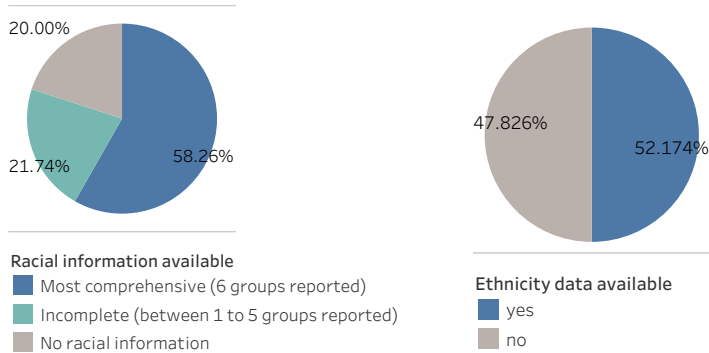
Supplementary Table 2 | List of NCT IDs of trials included in the retrospective analysis of pivotal IO trials.

NCT00065442	NCT02039674	NCT02425891	NCT03105336
NCT00324155	NCT02256436	NCT02763579	NCT03189719
NCT00006249	NCT02335424	NCT02220894	NCT03361748
NCT01295827	NCT02628067	NCT02853331	NCT02872116
NCT01721746	NCT02460198	NCT02684006	NCT02715284
NCT01642004	NCT02054806	NCT02358031	NCT03615326
NCT01721759	NCT01876511	NCT02564263	NCT02743494
NCT00636168	NCT02013167	NCT02559687	NCT03517449
NCT00769704	NCT01696045	NCT02371369	NCT02819518
NCT01927419	NCT01445379	NCT02367781	NCT03036488
NCT01673867	NCT02435849	NCT02625961	NCT02811861
NCT01668784	NCT02335411	NCT01658878	NCT02632409
NCT01866319	NCT02348216	NCT03043872	NCT02853305
NCT01704287	NCT02388906	NCT02477826	NCT02614066
NCT01844505	NCT02125461	NCT02409342	NCT02486718
NCT02181738	NCT01207388	NCT03215706	NCT03142334
NCT01592370	NCT02231749	NCT03434379	NCT03412565
NCT02108652	NCT02445248	NCT02569242	NCT03553836
NCT01848834	NCT02576990	NCT03284424	NCT03548207
NCT02008227	NCT02060188	NCT02563002	NCT02998528
NCT01903993	NCT01728805	NCT02603432	NCT03470922
NCT02142738	NCT01928394	NCT02601313	NCT03391466
NCT02105636	NCT02578680	NCT02908672	NCT03143153
NCT02387996	NCT02760498	NCT02899299	NCT03568461
NCT02453594	NCT02775435	NCT02684292	NCT03575351
NCT02155647	NCT02702401	NCT03141177	NCT03483103
NCT02951767	NCT02366143	NCT02631044	
NCT01693562	NCT02267603	NCT03132636	
NCT01772004	NCT02362594	NCT03088540	

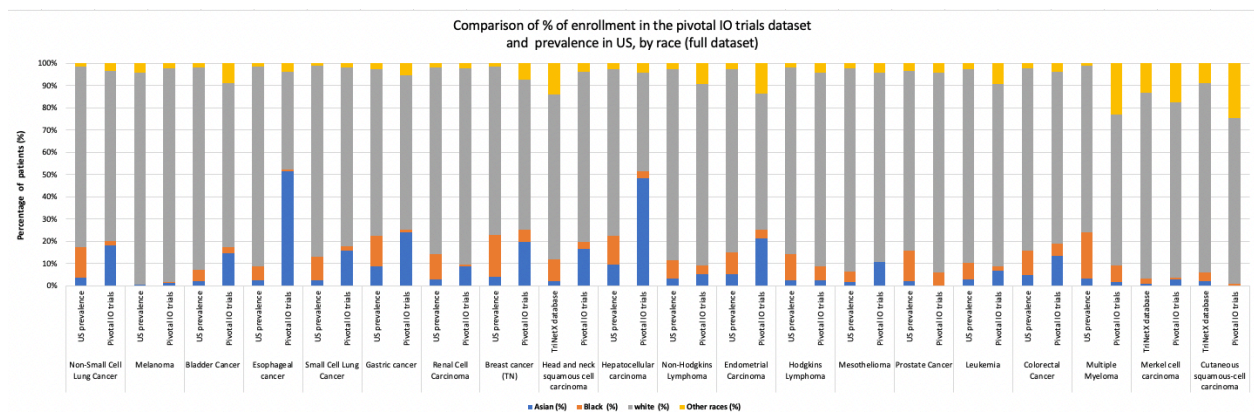
Supplementary Figure 1: A fraction of clinical trials leading to FDA approvals of immuno-oncology assets fail to report racial and ethnic information on enrolled patients.

Figure 1a: Percentage of trials reporting racial information (dataset: pivotal IO trials leading to FDA approval from 2010 to August 2022).

Figure 1b: Percentage of trials reporting ethnicity information (dataset: pivotal IO trials leading to FDA approval from 2010 to August 2022).



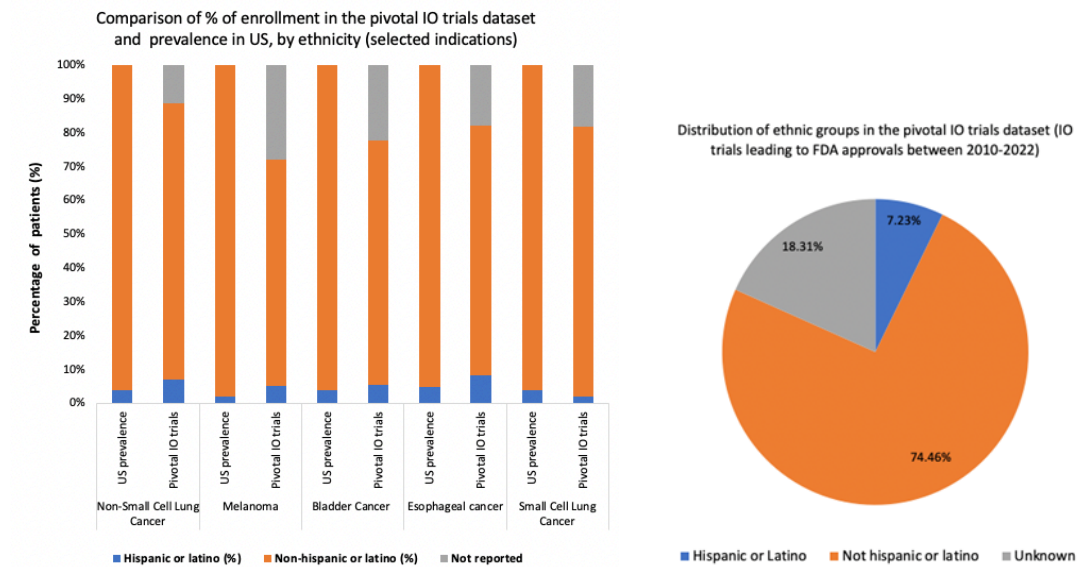
Supplementary Figure 2: Comparison of relative enrolment and disease prevalence, by race (full list of indications in the pivotal IO trials dataset). For those indications for which SEER prevalence data was not available, TriNetX real-world dataset was used for comparison.



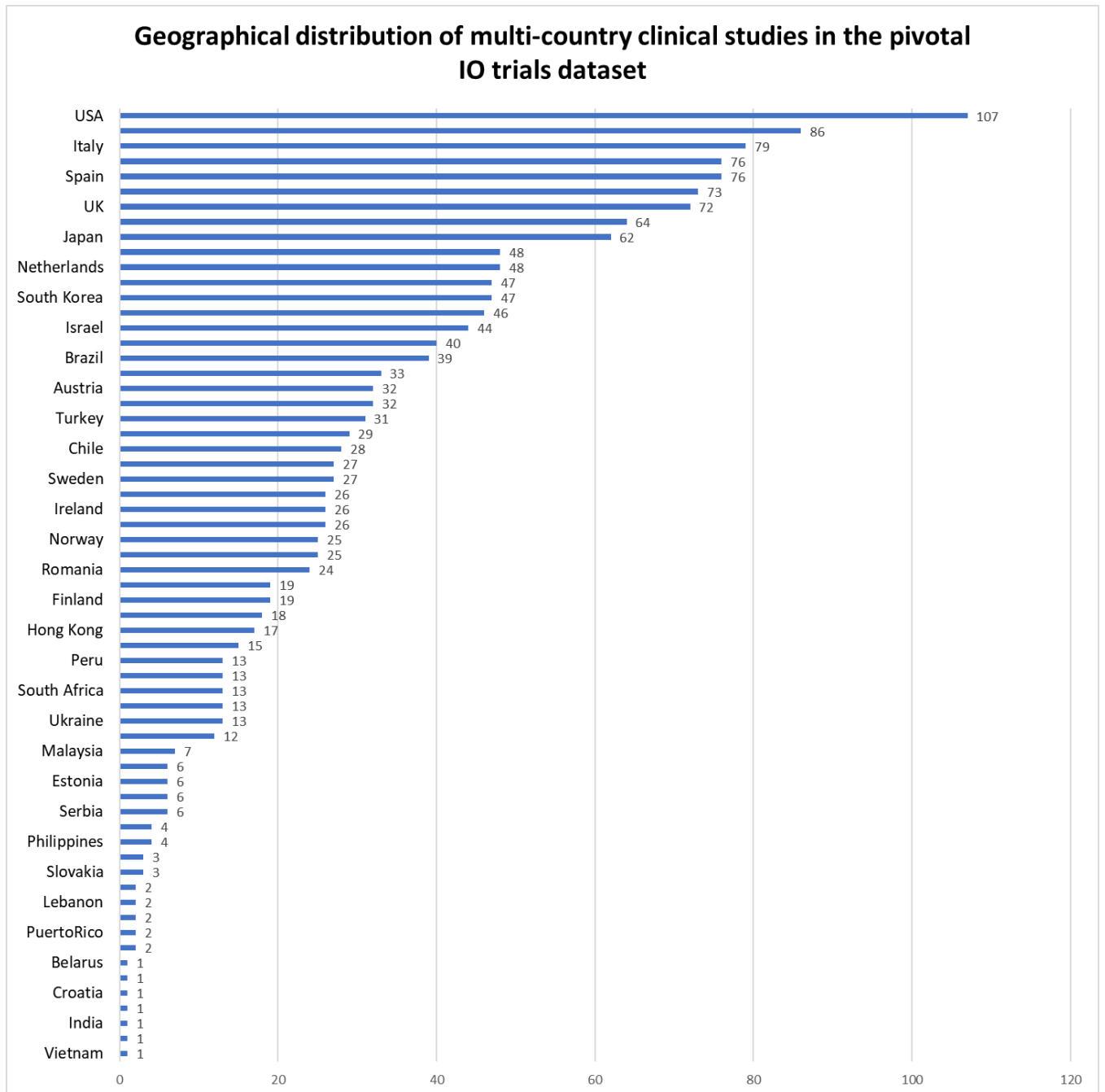
Supplementary Figure 3: Ethnic distribution in the pivotal IO trials dataset and comparison to disease prevalence in US.

Figure 3a: Comparison of relative enrolment and disease prevalence, by ethnicity, in the trials for the five indications gathering the most IO approvals in this dataset. US prevalence according to SEER 2019 data.

Figure 3b: Percentage of each ethnic group in the pivotal IO trials dataset.



Supplementary Figure 4: Geographical distribution of multi-country clinical studies in the pivotal IO trials dataset.



Supplementary Table 3 | Percentage of patient recruitment in clinical trials by race in the different US states, according to IQVIA's proprietary clinical trial database.

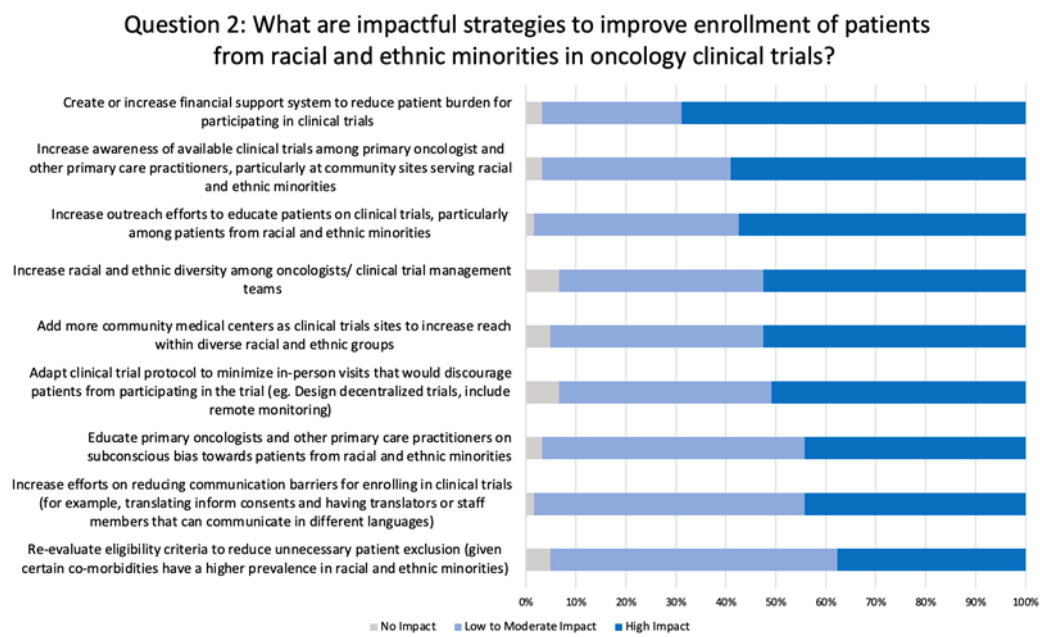
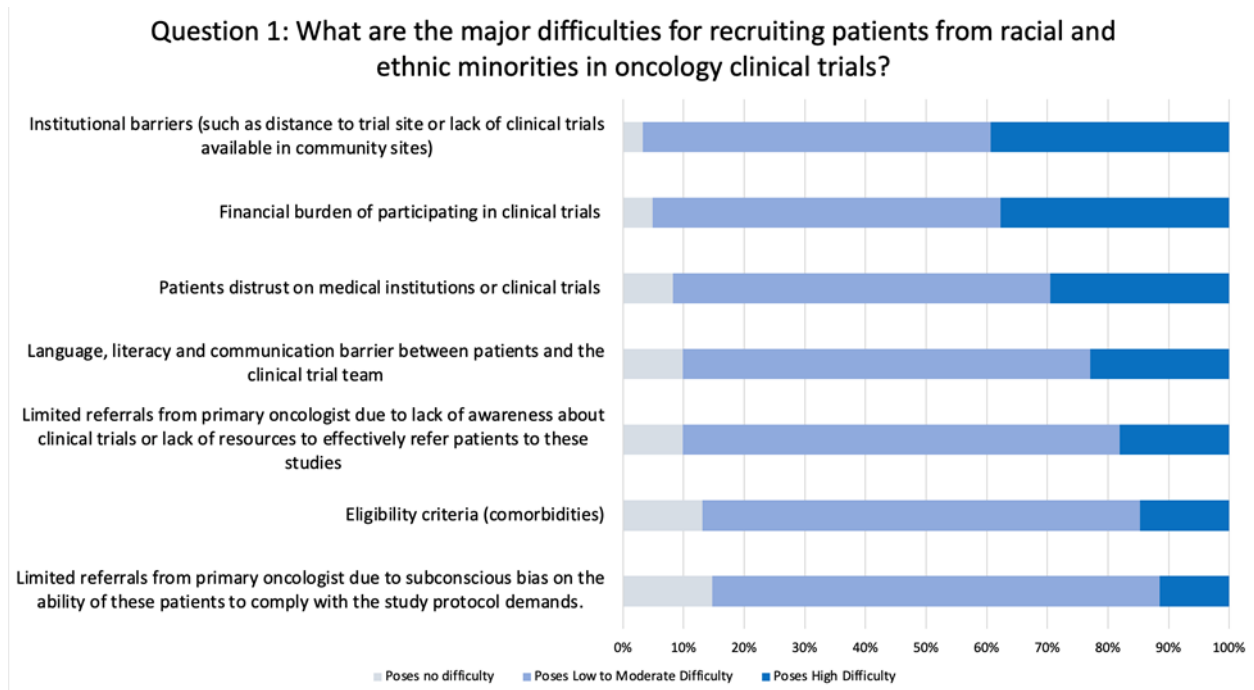
State	Black African- American Percentage	Asian Percentage	White / Caucasian Percentage	Hawaiian/ Pacific Islander Percentage	Native American/ Alaska Native Percentage	Multiracial Percentage	Others/ Unannotated Percentage
Georgia	38.7%	1.3%	48.4%	0.1%	0.5%	0.0%	11.0%
Arkansas	36.2%	0.6%	51.2%	0.1%	0.6%	0.0%	11.4%
Mississippi	33.5%	0.4%	43.2%	0.1%	0.0%	0.0%	22.7%
Louisiana	28.9%	1.0%	52.4%	0.1%	0.5%	0.0%	17.1%
Maryland	26.6%	3.9%	54.9%	0.2%	0.6%	0.0%	13.7%
Illinois	25.6%	4.3%	60.6%	0.6%	1.6%	0.0%	7.4%
District of Columbia	24.4%	1.8%	56.9%	0.0%	0.4%	0.0%	16.6%
Alabama	23.8%	0.4%	60.7%	0.1%	0.4%	0.0%	14.7%
Missouri	23.7%	1.0%	60.9%	0.2%	0.4%	0.0%	13.7%
Virginia	23.4%	2.2%	56.2%	0.3%	0.4%	0.0%	17.5%
New Jersey	22.1%	3.8%	64.5%	0.2%	0.4%	0.0%	9.1%
New York	19.4%	3.9%	60.2%	0.3%	0.9%	0.0%	15.3%
South Carolina	19.1%	0.8%	70.7%	0.1%	0.4%	0.0%	8.9%
California	18.6%	6.8%	49.3%	0.6%	1.0%	0.0%	23.7%
Ohio	18.4%	1.2%	65.2%	0.1%	0.4%	0.0%	14.7%
North Carolina	18.3%	1.2%	64.5%	0.2%	0.5%	0.0%	15.4%
Delaware	18.1%	0.0%	20.8%	0.0%	0.4%	0.0%	60.8%
Nevada	17.5%	2.6%	54.9%	0.5%	0.9%	0.0%	23.5%
Michigan	16.1%	2.9%	59.6%	0.1%	1.0%	0.0%	20.4%
Texas	15.2%	2.1%	60.3%	0.2%	0.5%	0.0%	21.6%
Pennsylvania	14.6%	1.8%	62.3%	0.3%	0.3%	0.0%	20.7%
Tennessee	14.5%	0.6%	66.0%	0.1%	0.4%	0.0%	18.4%
Florida	13.1%	0.9%	66.9%	0.2%	0.5%	0.0%	18.5%
Oklahoma	11.9%	0.7%	58.3%	0.3%	4.3%	0.0%	24.4%
Nebraska	10.7%	0.5%	69.9%	0.4%	1.1%	0.0%	17.5%
Connecticut	10.0%	0.7%	59.5%	0.1%	0.4%	0.0%	29.3%
Massachusetts	8.8%	4.3%	70.7%	0.1%	0.7%	0.0%	15.5%
Puerto Rico	8.8%	0.0%	15.7%	0.0%	0.0%	0.0%	75.5%
Kentucky	8.6%	1.5%	73.6%	0.1%	0.5%	0.0%	15.6%
Kansas	8.3%	1.4%	76.6%	0.2%	1.4%	0.0%	12.2%
Indiana	6.4%	0.7%	74.4%	0.2%	0.1%	0.0%	18.0%
Colorado	5.7%	1.9%	75.1%	0.3%	1.1%	0.0%	15.9%
Arizona	5.5%	1.9%	78.8%	0.4%	1.6%	0.0%	11.9%
West Virginia	5.5%	1.1%	87.0%	0.0%	0.6%	0.0%	5.8%
Washington	5.2%	4.0%	57.8%	0.8%	1.8%	0.0%	30.5%
Minnesota	5.1%	5.0%	74.5%	0.3%	1.6%	0.0%	13.4%
Alaska	4.7%	0.0%	14.0%	0.0%	0.0%	0.0%	81.4%
Wisconsin	4.4%	1.2%	73.4%	0.1%	0.5%	0.0%	20.3%
Rhode Island	3.8%	0.8%	79.9%	0.1%	0.5%	0.0%	15.0%
Oregon	3.5%	3.5%	74.6%	0.4%	1.8%	0.0%	16.3%
New Mexico	3.2%	0.8%	59.6%	0.1%	8.3%	0.0%	27.9%
North Dakota	2.2%	0.0%	15.4%	0.0%	0.8%	0.0%	81.7%
Iowa	2.1%	1.5%	78.3%	0.2%	0.3%	0.0%	17.6%
Hawaii	1.4%	26.2%	25.2%	7.8%	0.0%	0.0%	39.5%
Maine	1.3%	0.0%	61.4%	0.2%	0.2%	0.0%	37.0%
Utah	1.0%	1.3%	81.8%	0.4%	0.6%	0.0%	14.8%
Vermont	1.0%	1.0%	91.4%	0.1%	1.3%	0.0%	5.2%
Idaho	0.3%	0.7%	86.6%	0.2%	0.5%	0.0%	11.7%
New Hampshire	0.3%	1.3%	89.1%	0.3%	0.2%	0.0%	8.7%
Montana	0.2%	0.2%	80.0%	0.1%	2.1%	0.0%	17.3%
South Dakota	0.2%	0.3%	79.7%	0.0%	3.5%	0.0%	16.3%
CA	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%
MA	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%
Wyoming	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%

Country	State	Black / African-American Percentage	Asian Percentage	White / Caucasian Percentage	Hawaiian/ Pacific Islander Percentage	Native American/ Alaska Native Percentage	Multiracial Percentage	Others/ Unannotated Percentage
United States	Georgia	38.7%	1.3%	48.4%	0.1%	0.5%	0.0%	11.0%
United States	Arkansas	36.2%	0.6%	51.2%	0.1%	0.6%	0.0%	11.4%
United States	Mississippi	33.5%	0.4%	43.2%	0.1%	0.0%	0.0%	22.7%
United States	Louisiana	28.9%	1.0%	52.4%	0.1%	0.5%	0.0%	17.1%
United States	Maryland	26.6%	3.9%	54.9%	0.2%	0.6%	0.0%	13.7%
United States	Illinois	25.6%	4.3%	60.6%	0.6%	1.6%	0.0%	7.4%
United States	District of Columb	24.4%	1.8%	56.9%	0.0%	0.4%	0.0%	16.6%
United States	Alabama	23.8%	0.4%	60.7%	0.1%	0.4%	0.0%	14.7%
United States	Missouri	23.7%	1.0%	60.9%	0.2%	0.4%	0.0%	13.7%
United States	Virginia	23.4%	2.2%	56.2%	0.3%	0.4%	0.0%	17.5%
United States	New Jersey	22.1%	3.8%	64.5%	0.2%	0.4%	0.0%	9.1%
United States	New York	19.4%	3.9%	60.2%	0.3%	0.9%	0.0%	15.3%
United States	South Carolina	19.1%	0.8%	70.7%	0.1%	0.4%	0.0%	8.9%
United States	California	18.6%	6.8%	49.3%	0.6%	1.0%	0.0%	23.7%
United States	Ohio	18.4%	1.2%	65.2%	0.1%	0.4%	0.0%	14.7%
United States	North Carolina	18.3%	1.2%	64.5%	0.2%	0.5%	0.0%	15.4%
United States	Delaware	18.1%	0.0%	20.8%	0.0%	0.4%	0.0%	60.8%
United States	Nevada	17.5%	2.6%	54.9%	0.5%	0.9%	0.0%	23.5%
United States	Michigan	16.1%	2.9%	59.6%	0.1%	1.0%	0.0%	20.4%
United States	Texas	15.2%	2.1%	60.3%	0.2%	0.5%	0.0%	21.6%
United States	Pennsylvania	14.6%	1.8%	62.3%	0.3%	0.3%	0.0%	20.7%
United States	Tennessee	14.5%	0.6%	66.0%	0.1%	0.4%	0.0%	18.4%
United States	Florida	13.1%	0.9%	66.9%	0.2%	0.5%	0.0%	18.5%
United States	Oklahoma	11.9%	0.7%	58.3%	0.3%	4.3%	0.0%	24.4%
United States	Nebraska	10.7%	0.5%	69.9%	0.4%	1.1%	0.0%	17.5%
United States	Connecticut	10.0%	0.7%	59.5%	0.1%	0.4%	0.0%	29.3%
United States	Massachusetts	8.8%	4.3%	70.7%	0.1%	0.7%	0.0%	15.5%
United States	Puerto Rico	8.8%	0.0%	15.7%	0.0%	0.0%	0.0%	75.5%
United States	Kentucky	8.6%	1.5%	73.6%	0.1%	0.5%	0.0%	15.6%
United States	Kansas	8.3%	1.4%	76.6%	0.2%	1.4%	0.0%	12.2%
United States	Indiana	6.4%	0.7%	74.4%	0.2%	0.1%	0.0%	18.0%
United States	Colorado	5.7%	1.9%	75.1%	0.3%	1.1%	0.0%	15.9%
United States	Arizona	5.5%	1.9%	78.8%	0.4%	1.6%	0.0%	11.9%
United States	West Virginia	5.5%	1.1%	87.0%	0.0%	0.6%	0.0%	5.8%
United States	Washington	5.2%	4.0%	57.8%	0.8%	1.8%	0.0%	30.5%
United States	Minnesota	5.1%	5.0%	74.5%	0.3%	1.6%	0.0%	13.4%
United States	Alaska	4.7%	0.0%	14.0%	0.0%	0.0%	0.0%	81.4%
United States	Wisconsin	4.4%	1.2%	73.4%	0.1%	0.5%	0.0%	20.3%
United States	Rhode Island	3.8%	0.8%	79.9%	0.1%	0.5%	0.0%	15.0%
United States	Oregon	3.5%	3.5%	74.6%	0.4%	1.8%	0.0%	16.3%
United States	New Mexico	3.2%	0.8%	59.6%	0.1%	8.3%	0.0%	27.9%
United States	North Dakota	2.2%	0.0%	15.4%	0.0%	0.8%	0.0%	81.7%
United States	Iowa	2.1%	1.5%	78.3%	0.2%	0.3%	0.0%	17.6%
United States	Hawaii	1.4%	26.2%	25.2%	7.8%	0.0%	0.0%	39.5%
United States	Maine	1.3%	0.0%	61.4%	0.2%	0.2%	0.0%	37.0%
United States	Utah	1.0%	1.3%	81.8%	0.4%	0.6%	0.0%	14.8%
United States	Vermont	1.0%	1.0%	91.4%	0.1%	1.3%	0.0%	5.2%
United States	Idaho	0.3%	0.7%	86.6%	0.2%	0.5%	0.0%	11.7%
United States	New Hampshire	0.3%	1.3%	89.1%	0.3%	0.2%	0.0%	8.7%
United States	Montana	0.2%	0.2%	80.0%	0.1%	2.1%	0.0%	17.3%
United States	South Dakota	0.2%	0.3%	79.7%	0.0%	3.5%	0.0%	16.3%
United States	CA	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%
United States	MA	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%
United States	Wyoming	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%

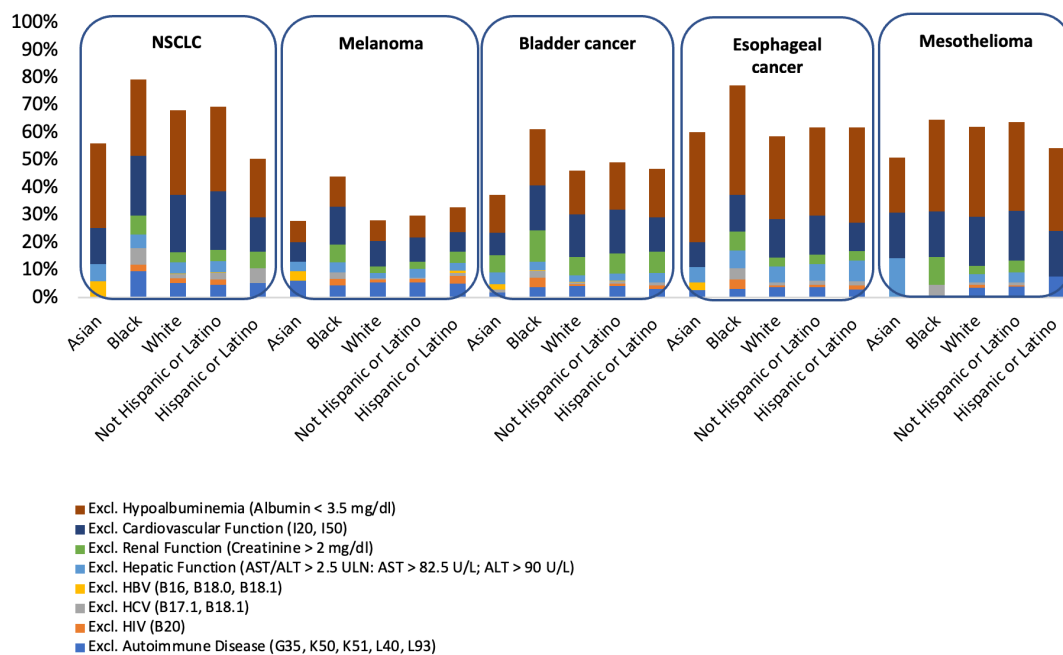
Supplementary Figure 5:

Figure 5a: Answers to survey on major difficulties for recruiting patients from racial and ethnic minorities in oncology clinical trials.

Figure 5b: Answers to survey on possible strategies to improve enrolment of patients from racial and ethnic minorities in oncology clinical trials.



Supplementary Figure 6: Percentage of cancer patients in the TriNetX real-world dataset, by race and indication, presenting co-morbidities typically listed under exclusion criteria in IO trials. The different exclusion criteria considered for this analysis are depicted in different colours.



Methods:

Information on pivotal trials leading to IO approvals by the FDA between 2010 and August 2022 (used in Table 1, Table 2, Fig. 1a, Fig.1b, Suppl. Fig.1, Suppl. Fig.2, Suppl. Fig.3 and Suppl. Fig.4)

Patients race and ethnicity information was collected as provided on the clinical trials documentation (associated scientific publication/ trial page in clinicaltrials.gov) from those trials listed in Supplementary figure 1. NIH/OMB reporting guidelines were followed in order to define the racial and ethnic groups considered in this article:

https://prsinfo.clinicaltrials.gov/results_table_layout/DataEntryTable_BaselineRegionRaceEthnicityForm.pdf

Information on clinical sites geographic location for trials in this dataset was also extracted from clinical trials documentation. In Supplementary figure 5, only those trials for which patients enrolled in more than one country are included.

a. Information on disease prevalence, by race and ethnicity (used in Fig.1a, Suppl. Fig.2 and Suppl. Fig.3)

US prevalence data for each indication was extracted from SEER data source according to seer.cancer.gov webpage: US 2019 cancer prevalence estimates are based on 2019 cancer prevalence proportions from the SEER 12 Areas and 1/1/2019 US population estimates based on the average of 2018 and 2019 population estimates from the US Bureau of the Census.

Where indicated, TriNetx racial and ethnic data was utilized instead of SEER 2019 prevalence data. In these cases, patient cohorts for the indications of interest were built covering 3 subsequent 3 year periods (patients diagnosed last 3 years, patients diagnosed between 3 and 6 years ago and patients diagnosed between 6 and 9 years ago). Using the built-in explore cohort functionality of TriNetX, the % distributions by race and ethnicity were extracted and analyzed. The TriNetX data covers clinical practice only and is not related to clinical trials.

b. Survey data (used in Fig.2)

Survey data were collected between September 2, 2022 to October 4, 2022 in an online survey format consisting of two questions (questionnaire 1 and questionnaire 2). Each question had multiple answer options (listed in fig. 2) that the responders were asked to score. A free text option at the end of each questionnaire was also provided. Collectively, data were collected from 61 responders which comprised 27 clinical leads, 12 medical directors or advisors, 13 medical doctors involved in execution of clinical trials and 9 responders that identified as clinical operations personnel, clinical manager or clinical trial staff.

c. Patient recruitment by race and US state (used in Suppl. Table 3)

Aggregated data visualizing the percentage of enrolled patients, by race, in different US states.

Data source: IQVIA proprietary dataset from 1047 clinical trials for all indications (including those beyond cancer) conducted by IQVIA, where population diversity information is accessible.

d. Analysis on co-morbidities in cancer patients, by race (used in Suppl. Fig.6)

For this analysis, real-world clinical practice data from TriNetX was used to perform patient attrition funnel analysis. As a starting point, queries by race and ethnicity were created for five solid tumor indications of interest, targeting patients seen by a physician for their disease in the last three years. Subsequently, onto each starting population (patient cohort) we overlayed queries on frequently seen protocol exclusion criteria and evaluated the patient population drop in % by patient cohort. The TriNetX data covers clinical practice only and is not related to clinical trials.