Encouraging and Measuring Practice Improvements Via Sequential Continuing Education

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1 Defining the Need for Education

At the time of the education (Fall ’18)

- New guidelines had recently been released1
- Providers continued to struggle to differentiate the rapidly expanding array of treatment options2

Identified Knowledge/Competence Gaps to Define the Educational Needs

- Immuno-pathology of Disease & Associated Implications
  - Neurology providers scored only 54% on questions related to the immunopathology disease and associated clinical implications (e.g., diagnosis, classes of therapies)7

2 Program Content and Design

Program Goals and Content

Optimize use of new guidelines and patient outcomes via sequential, engaging education on

- Immuno-pathology of disease & imaging
- New guidelines
- New and emerging options
- Gender-specific issues
- Shared decision making

Sequential Learning Approach

Half-day CME Summit

Best of Web Posting

PDRC Participation

• Designed to reinforce learning and measure learners’ implementation of practice changes
• Sent 45 days post-education to completers of either the live or web programs

276 invitations sent to certificate earners
41 Learners in the PDRC

15% participation rate, which more than doubles historical participation rates in non-accredited follow-up
40% Were not applying the latest evidence to the management of patients with PPMS
36% Were not actively engaging patients in SDM

Educational Efficacy

Overall there was an 37% relative increase in knowledge and competence

74% relative increase in knowledge regarding SDM strategies

45% avg relative increase in knowledge regarding treatments for SPMS and PPMS

62% relative increase in knowledge regarding treatment for patients with highly active disease

Potential Patient Impact

>5K Number of patients with MS seen per month who are 36% more likely to receive evidence-based care

Case-Based Follow-up – Impact on Clinical Decision Making

Case Details

- Slightly worsening gait symptoms for 1.5 years
- Increased fatigue
- 25-foot walk in 9.9 sec, unaided

Case Challenge Question 1

Which of the following features meets the 2017 McDonald criteria for PPMS? (select all)

- Venous-venous shunt
- 4 mm periventricular lesions
- Periventricular 4 mm lesion, vertical orientation that enhances

Case Challenge Question 2

In discussing the initiation of therapy with a humanized anti-CD20 monoclonal antibody, which of the following would be important to discuss with this patient? (select all)

- No risk of cancer with this treatment
- Good chance patient will improve with treatment
- Need to be checked for HBV infection prior to starting anti-CD20 therapy

Impact on Practice

83% of respondents indicated they were more likely to receive evidence-based care

88% of those who were not applying the latest criteria to identify patients with PPMS in a timely manner, 88% would now do so

88% of those who were not actively engaging in SDM, 87% would now communicate at least 3 accurate pieces of information to engage patients

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