

Optimizing treatment in BCC and CSCC:

3 YEARS OF ONCOLOGY CME

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BACKGROUND

Basal cell carcinoma (BCC) and cutaneous squamous cell carcinoma (CSCC) are the most common malignancies in the US. The FDA recently approved immunotherapy for the treatment of advanced disease, but provider knowledge of clinical trial data remains inadequate for optimal therapeutic selection.



INTRODUCTION

RMEI investigated commonalities across multiple proprietary NMSC CME programs to identify persistent learning gaps and relevant learner trends.



MATERIALS & METHODS

Systematic review of 18 RMEI oncology CME activities launched between 2019-2022 identified 10 CME activities focused on BCC and/or CSCC, which share at least one clinical area of focus. Consistent Post-test methodology to assess educational impact, incorporates Knowledge, Procedural Competence, Intent to Perform, and Confidence questions unique to each activity. Shared clinical foci used for analysis included “safety and efficacy of immunotherapeutic agents” and “select appropriate immunotherapy”.

Learning gaps identified in the outcomes analysis for each activity were evaluated for commonalities and grouped thematically; of the 10 CME activities, 8 were defined as having a learning gap related to ‘therapeutic efficacy’ and ‘therapeutic selection’ which were cross-referenced with activity clinical foci to confirm validity. Two activities were demographic outliers and excluded, individual activity data of 6 activities were combined into a collective CME data set for analysis.

10 ACTIVITIES WITH SHARED CLINICAL FOCUS

Systematic review of 18 RMEI oncology CME activities launched between 2019-2022

LEARNERS

Total number of learners: 2,647

- 74% MDs
- 37% Oncologists
- 35% Dermatologists
- 7% Surgeons
- 60% Active Treaters

TARGET

45% in practice >20 years*

23% in practice for 11 to 20 years*

30% Group Practice

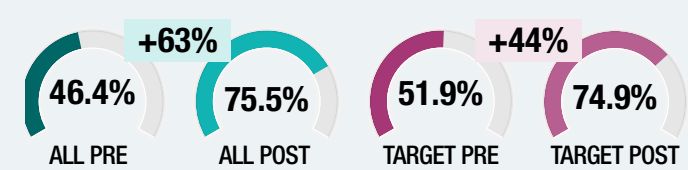
23% Solo Practice

*Years in practice and practice setting were reported for 4 activities (2021-2022)

LEARNER SUCCESS

Overtime learners gained understanding and feel empowered to utilize new treatments.

2019-2022 Cumulative Test Scores



Test Score: Pre N=2,647, Post N= 2,265
Target Learners: Pre N= 863, Post N=788

PROPRIETARY EDUCATIONAL DESIGNS

These educational designs present data and guidelines while leveraging patient cases and experiences and real-world strategies to support change in clinical practice.



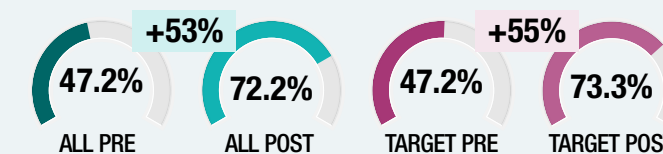
No meaningful differences were seen between educational formats.

IMPROVED PROFICIENCY

+53% Immunotherapy, safety, and efficacy

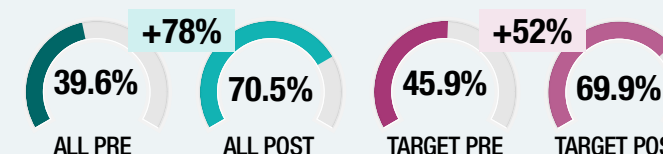
+78% Immunotherapy selection

Knowledge of Therapeutic Efficacy Score



Pre N=1,940, Post N= 1,542
Target Learners: Pre N=537, Post N=654*

Competency in Therapeutic Selection Score



Pre N=2,647, Post N= 2,265
Target Learners: Pre N=537, Post N=654*
*Pre N is smaller due to sample sizes of activity 2

+78% Improvement in competency

+47% Intend to change their clinical practice

ABLE & EMPOWERED TO CHANGE THEIR CLINICAL PRACTICE

Overtime, learner intent to change their clinical practice increased from 27% to 47%. Overall, 53% of learners intend to change their treatment approach.



RESULTS

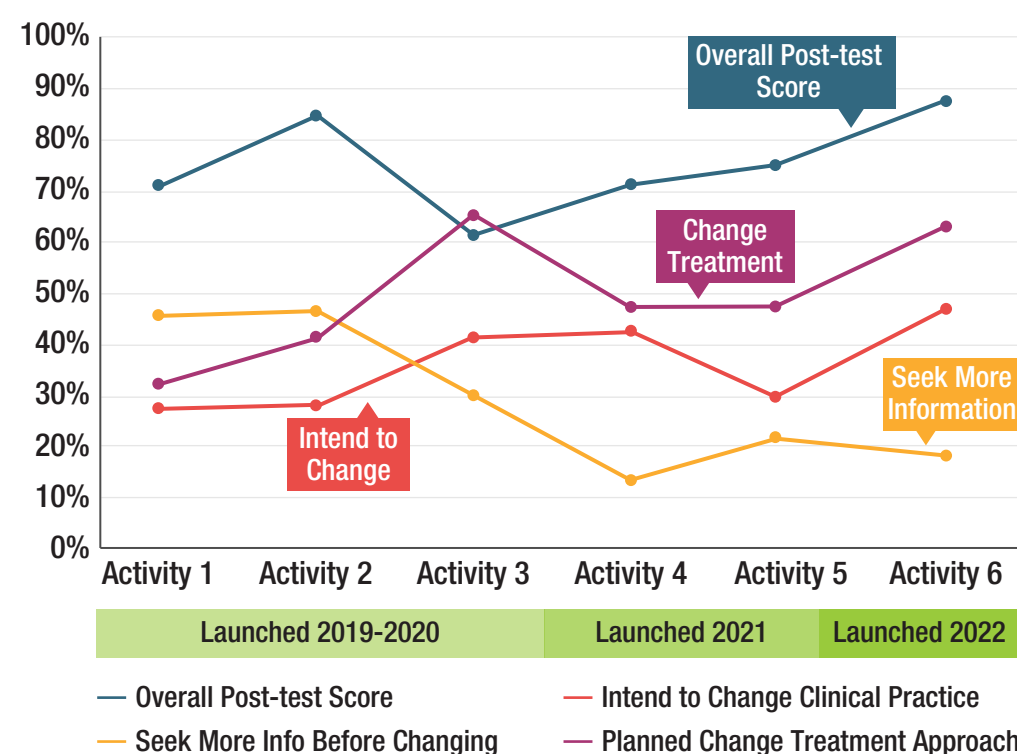
79% of learners were oncology, dermatology, and surgery clinicians. Low pre-test scores were consistent across all activities (<50%), particularly in ‘therapeutic selection’. At post-test, improvements were observed in overall scores for Knowledge and Procedural Competence (+63%) and clinical foci (efficacy + 53%, selection +78%). This was accompanied by a reduction in learners seeking further information prior to implementing desired practice changes, (38-45% in 2020 to 18% in 2022) with more learners planning to change their practice, specifically treatment approach.



CONCLUSIONS

Learners have gained knowledge and procedural competence regarding the role and place of immunotherapy in BCC and CSCC, reflected in both educational improvements as well as intent to change their clinical practice. However, persistent clinical foci learning gaps indicate the need for educational reinforcement.

Ability and Empowerment Across Time



AUDIO WALKTHROUGH



PARTICIPATE IN RMEI ONCOLOGY PROGRAMS

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