Identifying Gaps in Immunotherapy Education: Beyond the Oncology Team

Abstract #PS26
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Disclosures

• Tara Perloff has nothing to disclose
• Lee S. Schwartzberg, MD, FACP: Consultant for Merck, BMS, AbbVie
Objectives and Methods

Association of Community Cancer Centers Immuno-Oncology Institute

- The ACCC Immuno-Oncology Institute is the leader in optimizing the delivery of cancer immunotherapies for patients by providing clinical education, advocacy, research, and practice management solutions for cancer care teams across all healthcare settings

Study Objectives:

- Identify gaps in immuno-oncology education and care coordination among multidisciplinary, non-oncology professionals from the United States

Methods:

- A quantitative, 10-minute study was conducted online in December 2017
- Respondents had to meet the following screening criteria in order to qualify for the study:
  - Must be a US-based healthcare professional
  - Must be from 1 of 11 non-oncology disciplines
- 150 non-oncology providers participated in this research

Data Analysis:

- T-tests were conducted to test the significance amongst the different populations
- Significance testing ($p = .05$), where appropriate, was performed at a 95% level of confidence
- Data with small base size ($n <30$) should be viewed as directional
Respondents were primarily comprised of patient-facing HCPs who work in a physician-owned practice in the United States.
Clinical Assessment

- 47% of HCPs frequently interact with IO patients
  - 47% occasionally; 6% never

- 48% of patients are most often referred to by an oncologist
  - 34% sometimes; 18% never

- 65% of HCPs were aware of patient’s IO therapy at their first visit
  - 25% sometimes; 10% no

97% of HCPs stated they consider the patient’s immunotherapy when providing further treatment

Knowledge about patient’s immunotherapy

- Informed by the patient [A] 69%
- EHR/EMR System [B] 53%
- Treating oncologist/hematologist or other member(s) of the primary oncology care team [C] 48%
- Medical chart [D] 36%
- Immunotherapy wallet card or other drug/biologic identification card [E] 8%
85% of HCPs reported having no knowledge of pathways/guidelines for treating patients on cancer immunotherapies at their place of practice.

81% of HCPs indicated that they would utilize pathways/guidelines if they existed at their place of practice.
Comfort Level Generally Treating an IO Patient

- Only 50% of HCPs are comfortable generally treating an IO patient
  - 30% are not comfortable; 20% neutral

- Dermatologists are far more comfortable generally treating an IO patient compared to other HCPs

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Total Comfortable (n=150)</th>
<th>Not at all Comfortable (n=58)</th>
<th>Scale 1-5</th>
<th>Extremely Comfortable (n=21*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dermatology (n=21*)</td>
<td></td>
<td>5%</td>
<td>10%</td>
<td>86%</td>
</tr>
<tr>
<td>Gastroenterology (n=21*)</td>
<td></td>
<td>19%</td>
<td>24%</td>
<td>57%</td>
</tr>
<tr>
<td>Primary Care (n=50)</td>
<td></td>
<td>24%</td>
<td>34%</td>
<td>42%</td>
</tr>
<tr>
<td>Other: Multi-Disciplinary HCPs (n=58)</td>
<td></td>
<td>19%</td>
<td>40%</td>
<td>41%</td>
</tr>
<tr>
<td>Total (n=150)</td>
<td></td>
<td>19%</td>
<td>31%</td>
<td>50%</td>
</tr>
</tbody>
</table>
Comfort Level with Early Recognition and Management of irAEs

- Only 49% of HCPs are comfortable recognizing and managing irAEs
- 24% are not comfortable; 27% are neutral
- Dermatologists and gastroenterologists are far more comfortable recognizing and managing irAEs
Communication with the Cancer Team

- Only 37% of HCPs notify the primary cancer team of their IO patient 80-100% of the time
  - 11% notify the primary cancer team 60-79% of the time
  - 52% notify the primary cancer team less than 60% of the time

- 76% of HCPs indicated having an extremely effective or very effective interaction with the primary cancer team

- 86% of HCPs communicate primarily with the patient’s hematologist/oncologist
Communication Methods with the Cancer Team

Utilized Methods

<table>
<thead>
<tr>
<th>Method</th>
<th>Utilization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone call(s) [A]</td>
<td>75%</td>
</tr>
<tr>
<td>EHR/EMR messaging [B]</td>
<td>53%</td>
</tr>
<tr>
<td>E-mail [C]</td>
<td>31%</td>
</tr>
<tr>
<td>In-person, one-on-one</td>
<td>26%</td>
</tr>
<tr>
<td>Tumor board /</td>
<td>19%</td>
</tr>
<tr>
<td>Texting [F]</td>
<td>13%</td>
</tr>
<tr>
<td>Online forum/social</td>
<td>1%</td>
</tr>
<tr>
<td>Other [H]</td>
<td>3%</td>
</tr>
<tr>
<td>Not applicable (N/A) [I]</td>
<td>2%</td>
</tr>
</tbody>
</table>

Preferred Methods

<table>
<thead>
<tr>
<th>Method</th>
<th>Rank 1</th>
<th>Rank 2</th>
<th>Rank 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>EHR/EMR messaging (n=80)</td>
<td>63%</td>
<td>18%</td>
<td>14%</td>
</tr>
<tr>
<td>Phone call(s) (n=113) [B]</td>
<td>50%</td>
<td>33%</td>
<td>12%</td>
</tr>
<tr>
<td>Texting (n=20*)</td>
<td>45%</td>
<td>25%</td>
<td>15%</td>
</tr>
<tr>
<td>In-person, one-on-one meetings (n=39)</td>
<td>33%</td>
<td>31%</td>
<td>13%</td>
</tr>
<tr>
<td>E-mail (n=46)</td>
<td>22%</td>
<td>41%</td>
<td>28%</td>
</tr>
<tr>
<td>Other (n=4*)</td>
<td>50%</td>
<td>50%</td>
<td></td>
</tr>
</tbody>
</table>

75% of HCPs primarily use phone calls to communicate with the primary cancer care team, but EHR/EMR messaging was ranked as the highest (63%) preferred method of communication.
Importance of IO Educational Needs

Most important IO educational need:
- Early recognition and management of irAEs (87%)

Preferred learning formats for cancer immunotherapies:
- 53% print materials
- 49% national meetings/conferences
- 48% webinars, videos, or other web-based resources
- 43% regional local seminars or workshops
- 19% focus groups
Discussion

• Study limitations:
  • Small sample size
  • HCPs self-selected to participate; these results may not represent the average

• Future actionability:
  • Tailor IO education to extend beyond the oncology team
    • Provide information
    • Train the trainer

• ACCC Immuno-Oncology Institute
  • Workshops
  • E-learning modules
  • Video webinars
  • eNewsletters
  • Working groups
Conclusion

• Multidisciplinary, non-oncology healthcare professionals experience a gap in knowledge when treating patients on an I-O agent

• More than half of the HCPs learn about the patient’s immunotherapy through the patient themselves or the EHR/EMR systems

• Certain specialists, including gastroenterologists and dermatologists are far more comfortable with treating the different I-O areas compared to the other HCPs

• Majority of HCPs report having no pathways/guidelines in place for treating patients on cancer immunotherapies, but 80% indicated that they would utilize them if they existed at their place of practice

• A minority of HCPs notify the primary cancer team of their IO patient 80-100% of the time, but 76% indicated the interaction as effective

• HCPs indicate a high need for greater educational information across the different IO areas