

# A Timelapse of Patient and Provider Care Perceptions and Educational Needs for CLL Over Three Years of Tailored Educational Interventions

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INTRODUCTION

METHODOLOGY

The chronic lymphocytic leukemia (CLL) care paradigm has undergone significant changes over the last decade, resulting in a steady 5-year survival increase. With targeted regimens as the standard of care for most patients with CLL and a continuous release of new and long-term data, there was a distinct need to update both providers and patients/caregivers on new options such as BTK inhibitors (BTKi), refine their use in practice, and empower patients to be partners in their care.

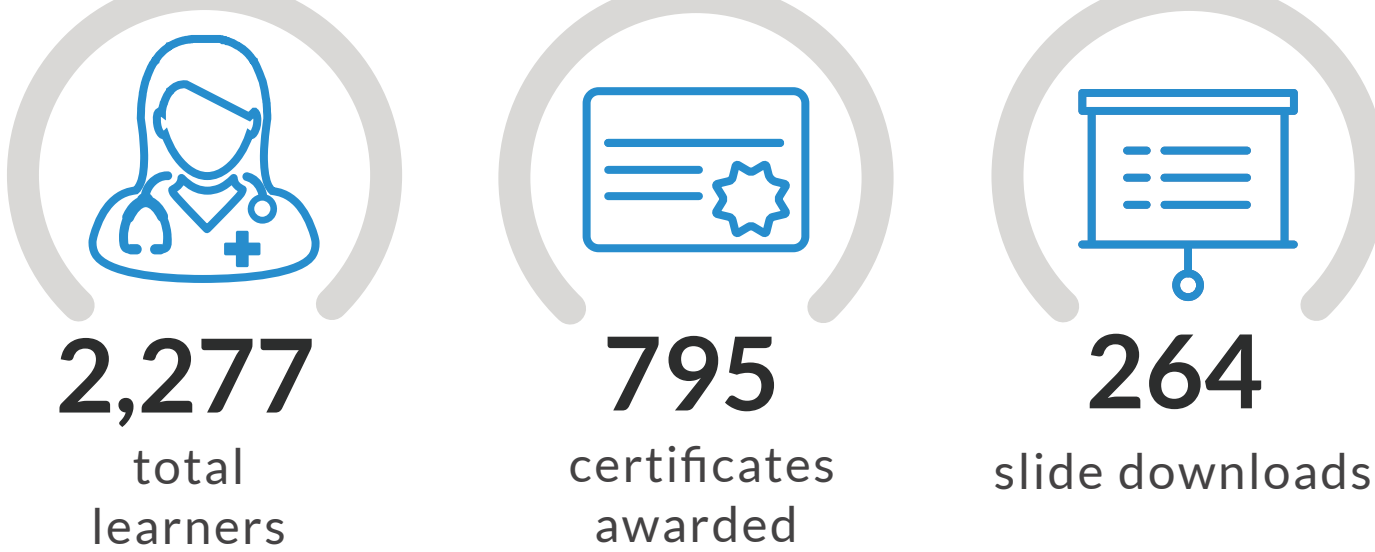
Education and Evaluation Details

**Interventions:** Over the last 3 years, digital education was provided to patients/caregivers on CancerCoachLive.com and providers on OMedLive.com; in total 11 programs were implemented utilizing multiple educational formats: 4 for patients/caregivers and 7 for providers.

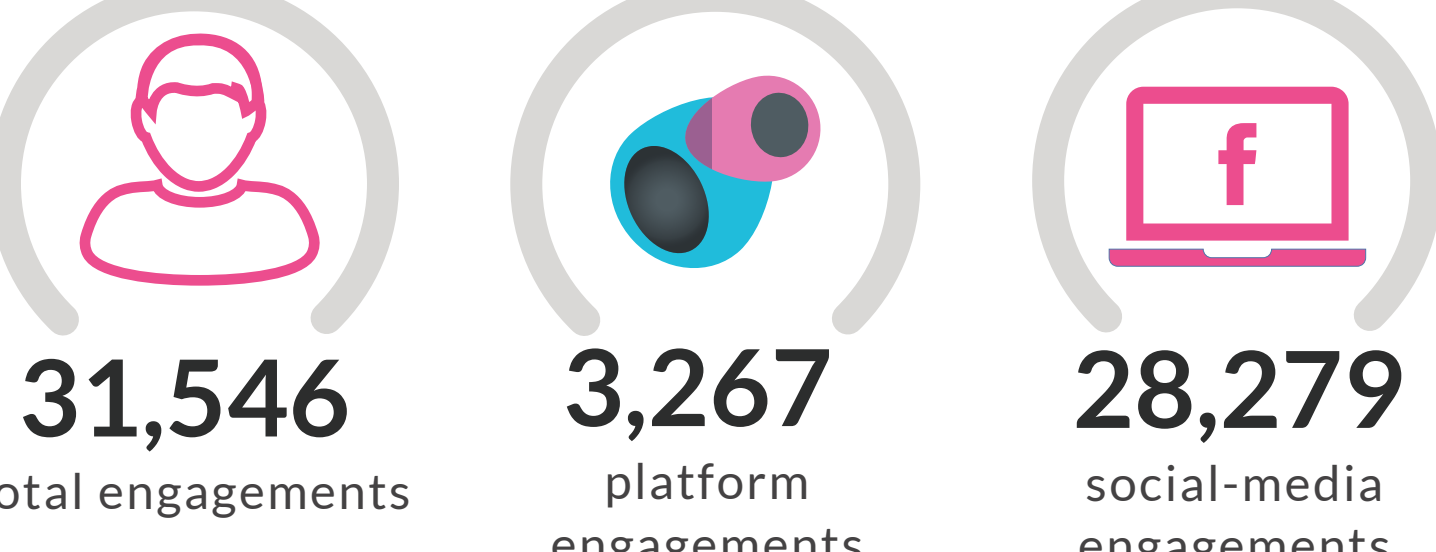
**Assessments:** Behavioral assessments of preferences and attitudes toward managing patients were examined throughout the CME series and patient/caregiver programs.

**Measurements:** Questions included in-activity polling, pre-, immediate post-, and 2 months post-activity tests. Chi-Square tests used for statistical analysis.

HCP Engagement



Patient Engagement



CLL BTKi Patient-Provider Initiative & Case Library

1 Patient Program

1 HCP Program

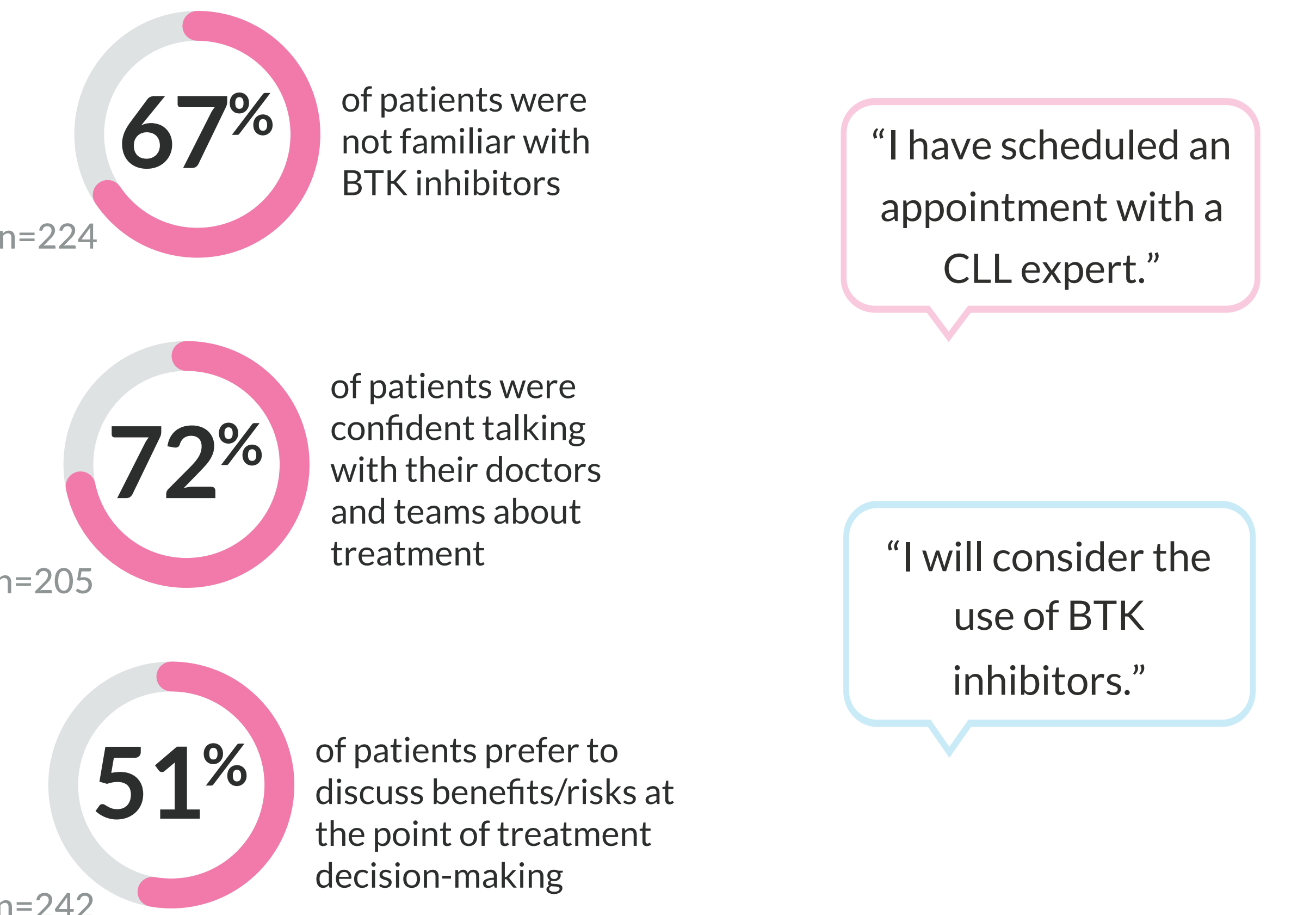
1 Case Library

“What I loved about the cases; they were unscripted patient stories ...it was very gritty, very real, and very useful.”

Co-Founder, Executive Vice President, CLL Society

What did we find?  
Misalignments in Perceptions of Care

- Low baseline provider knowledge on:**
- Indications for currently approved BTKi
  - Mechanisms of action of BTKi
  - Hesitance to use BTKi in frontline CLL
  - Sequencing of therapies
  - Counseling and management of side effects
- Top challenge in managing CLL:**
- Patient:** Understanding treatment options (21%)
  - HCP:** Disease progression/patient anxiety (19%)



Point-of-Care Decisions: HCP & Patient Workflow Initiative

2 Patient Modules

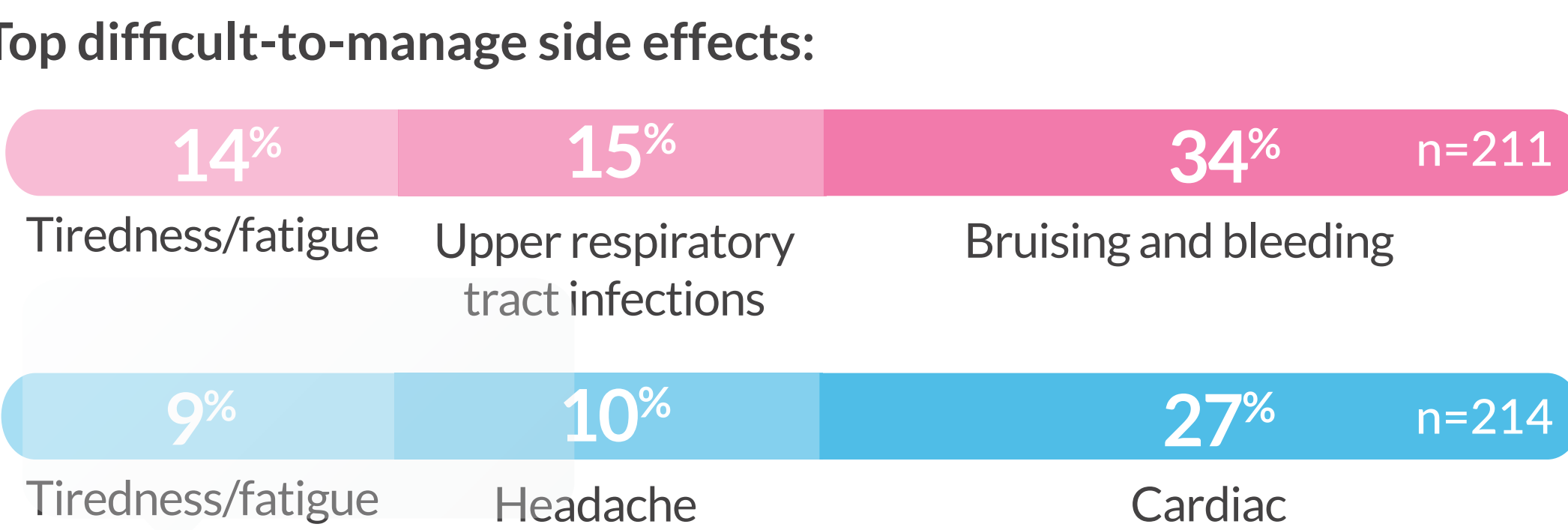
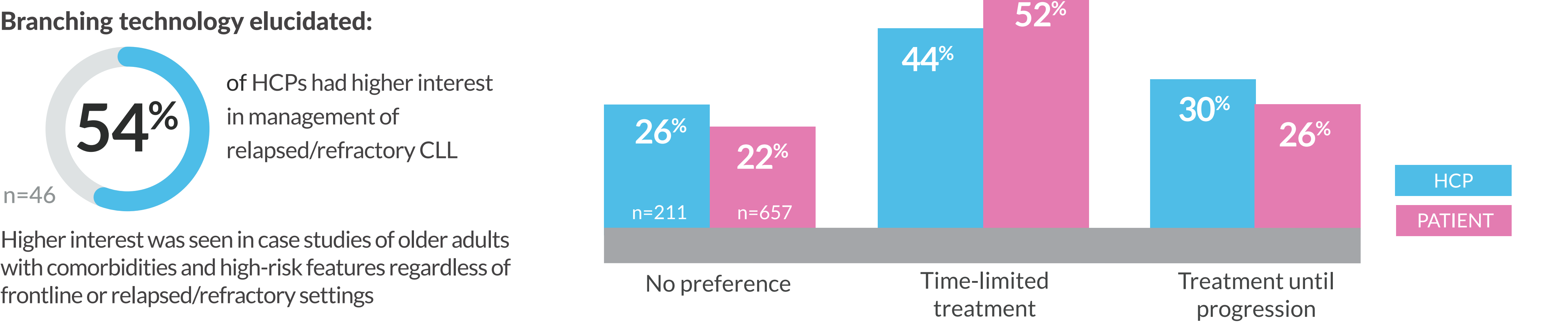
4 HCP Modules

**Featuring:**

- Branching Technology
- Multimodal Delivery (Video & Text)
- Case-based Discussions

What did we find?  
Refining and Redefining Care Pathways

- Low baseline provider knowledge:**
- Long-term and real-world data
  - Management of cardiotoxicity
  - Emerging fixed-duration regimens
  - Cytogenetic testing upon relapse
- Branching technology elucidated:**
- 54%** of HCPs had higher interest in management of relapsed/refractory CLL (n=46)
- Higher interest was seen in case studies of older adults with comorbidities and high-risk features regardless of frontline or relapsed/refractory settings
- Insights:**
- 63%** believe fixed duration regimens with BTKi have the greatest potential in the frontline setting (n=214)
  - 46%** of HCPs were surprised at the general patient-provider misalignment across multiple areas of care (n=39)
- Similar preferences for fixed-duration regimens between patients and providers:**



**70%** of patients prefer to discuss benefits/risks at the point of treatment decision-making (n=228)

“I will discuss different treatment options with my doctor in order to better manage side effects.”

CLL Multi-Component Initiative

1 Patient Program

1 HCP Program (Heme/Oncs & Cardiologists)

1 Implementation Science Initiative (recruiting)

What have we found so far?  
Patient Insights and Community Practice Patterns

- Low baseline provider knowledge:**
- Application of long-term data from RESONATE-2
  - Management of treatment-related atrial fibrillation
  - Awareness of clinical data for fixed duration regimens (e.g., GLOW trial)

- Top patient challenges in managing CLL (n=68):**
- Participating in normal activities (19%)
  - Anxiety about disease progression (18%)

CONCLUSION

This multi-year CLL educational initiative has been successful in improving care and aligning patients and providers on management preferences. The identification of persistent gaps over time has informed the educational design and content of subsequent years. This timelapse perspective provided insights into how newly released data affected patient and provider challenges, behaviors, and educational needs.