

The Impact of Digital Education on Enhancing Clinical Management of GvHD and Patient-Centered Practice Change



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Background: Clinicians face numerous barriers in the management of graft versus host disease (GvHD), a key complication that develops in immunosuppressed allogeneic hematopoietic cell transplantation recipients. Among these barriers are the differentiation of acute and chronic GvHD, optimal patient selection for the limited available treatment options, staying abreast of emerging clinical data and treatment-related toxicities, and accessing information and support. To improve clinician competence in managing this rare condition, an educational initiative was designed in collaboration with the National Organization for Rare Disorders (NORD).

Methods: A 1-hour CME activity focused on GvHD diagnosis and management was broadcast live-online in June 2022 as part of the Second Annual Rare Cancers and Blood Disorders series. The activity remains on-demand through June 2023 on OMedLive.com. The program featured an interactive panel of expert physicians and a Q&A session. Knowledge and competence questions were administered pre-, immediate post-, and 2 months post-activity. Provider-reported challenges managing patients with GvHD and intent to modify practice behavior post-program were also assessed.

Results: This educational activity was attended by 83 clinicians, as of July 13, 2022. Eighty-two percent (82%) are physicians, advanced practitioners (NP/PA), and nurses, and 51% see between 1 and 10 patients with GvHD per week. Prior to the activity, clinicians identified “inadequate knowledge about the clinical presentation of GvHD” as the greatest barrier to diagnosing this disorder, and “unfamiliarity with novel therapies” as the greatest challenge in management. Similarly, a lack of knowledge regarding evidence-based strategies was the primary barrier to implementing practice changes. Improvements in knowledge/competence were seen for pre/post paired responses across all four CME questions, with gains ranging from 30% to 55%. Eighty-one percent (81%) of clinicians agreed or strongly agreed that the educational activity should improve practice behavior. Clinicians

perceived that “adherence to treatment schedules” and “anxiety about how quickly treatment will work” were the top two challenges for patients living with GvHD. Following participation, 86% of clinicians agreed that the education would impact patient clinical outcomes and 75% were motivated to modify treatment plans according to patients’ treatment response. An assessment of patient support revealed that 75% of clinicians sometimes or always direct their patients to additional resources, such as on-line communities. Qualitative and 2-month follow-up data on change in practice behavior and its impact on patient outcomes will be shared.

Conclusions: Assessments reveal a positive impact of live-online education on knowledge and competence in diagnosing and managing GvHD, as well as intention to modify practice behavior to enhance patient treatment response and quality of life.

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