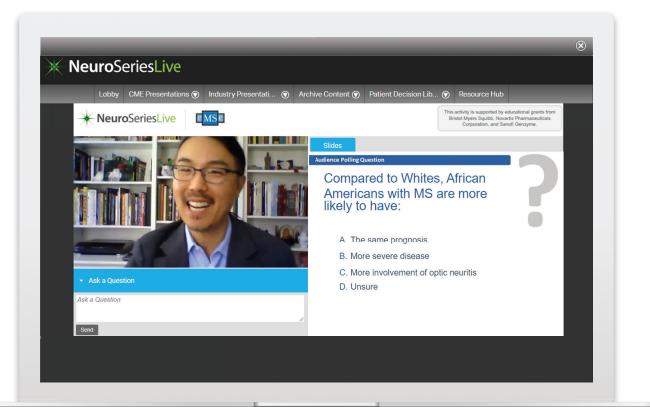
Toward the Provision of Equitable MS Care: How Continuing Medical Education (CME) Can Help Move the Needle

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INTRODUCTION

While the prevalence and burden of multiple sclerosis (MS) in the Black, Asian, and Hispanic communities has come to the forefront, clinicians (HCPs) are not yet prepared to care for a diverse population of patients. We sought to study the impact of CME on HCPs' awareness of racial and ethnic differences in MS, along with implications for management.

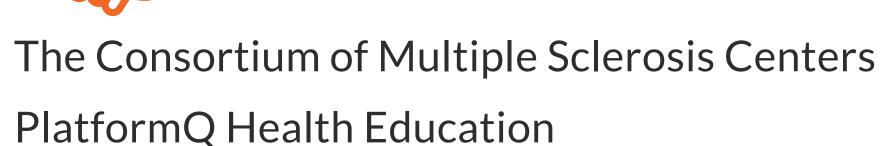


METHODOLOGY

Content Development and Dissemination



Partners



CME activities (a 60-minute didactic lecture and 75 minutes of case-based discussions) were launched

Interventions



Data Collected

Changes in knowledge, competence, and engagement

Topics Covered in the Education

live-online in August/September 2021 and remained on-demand for 1 year



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Analysis

Chi-square tests for statistical analysis and identification of lessons learned and continuing gaps

- Impact of race on MS presentation, disease course, and therapeutic decisions
- Discussing clinical trials as treatment options with patients from racial and ethnic minority groups
- Current and emerging biomarkers in MS
- Safety, efficacy, and impact on cognition of high-efficacy disease-modifying therapies (DMTs)
- Strategies for symptom management in patients with MS

Faculty



Robert K. Shin, MD, FANA, FAAN Professor, Department of Neurology MedStar Georgetown University Hospital Director. Georgetown Multiple Sclerosis and Neuroimmunology Center Georgetown University Medical Center



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Session components included recorded patient vignettes, downloadable resources, live polling, and audience real-time Q&A.

Target Audience

MS specialists, neurologists, primary care physicians, advanced practice clinicians (NPs and PAs), nurses, pharmacists, and other HCPs involved in the care of patients with MS.



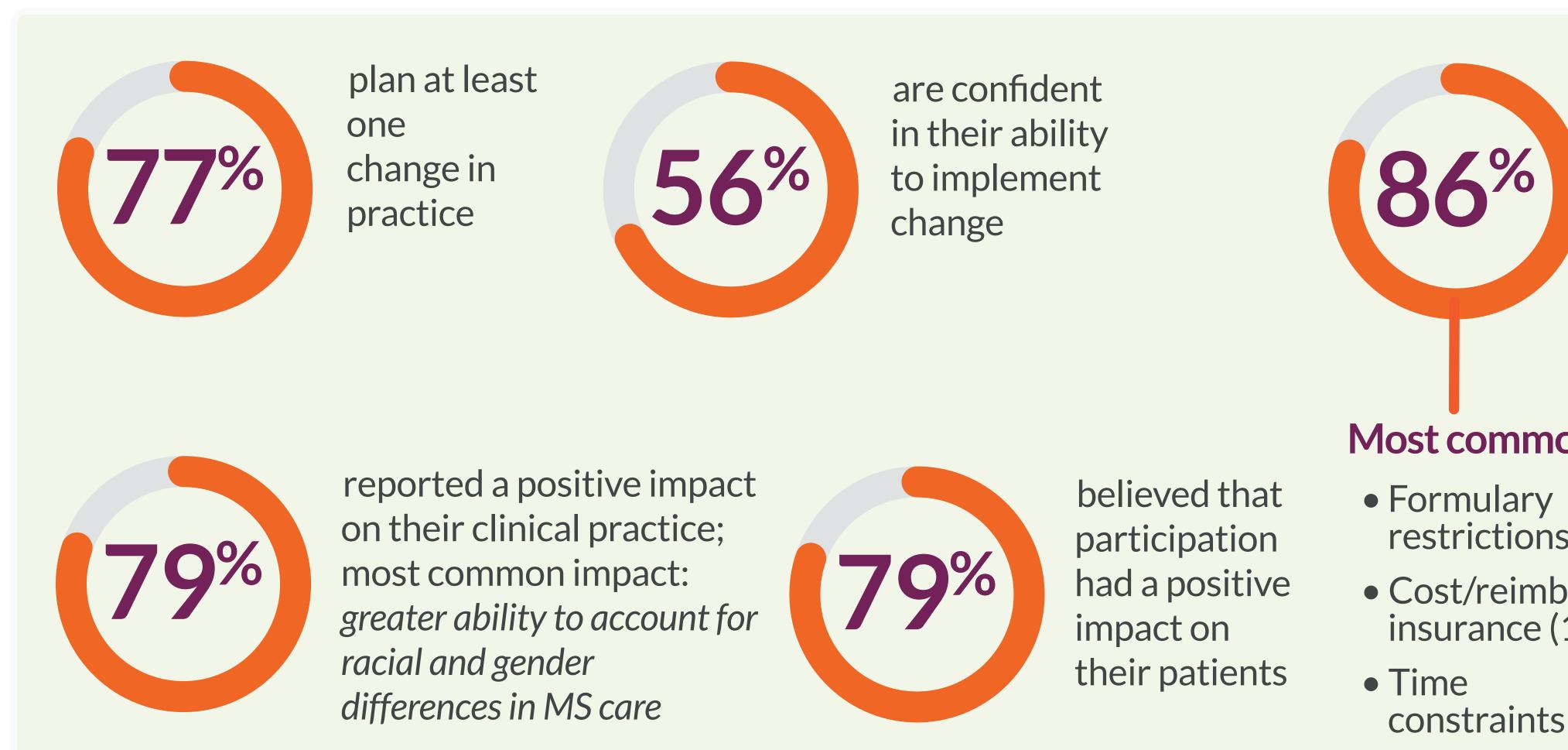
RESULTS

HCP Demographics and Engagement Changes in Knowledge/Competence Specialty* **Impact of African American** race on MS disease course 22[%] Neurology 26[%] PCP (FM/GM/IM/Ped/OB-GYN) 99% 1,543 8[%] Surgery Learner engagements* **Critical Care/ Emergency Medicine** 3[%] Pharmacology **42**% *Source: registration (n=1,543) of treaters see an average of 7 70% patients with MS per week** Pre 12 n = 819 n = 615 n = 514 LJ Years in Practice**

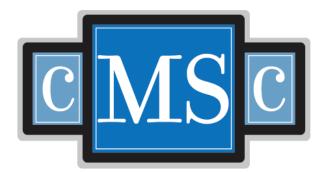
**n=186

(average)

Positive Impact on Clinical Practice and Patient Experience







Underlying pathophysiological difference compared to White patients

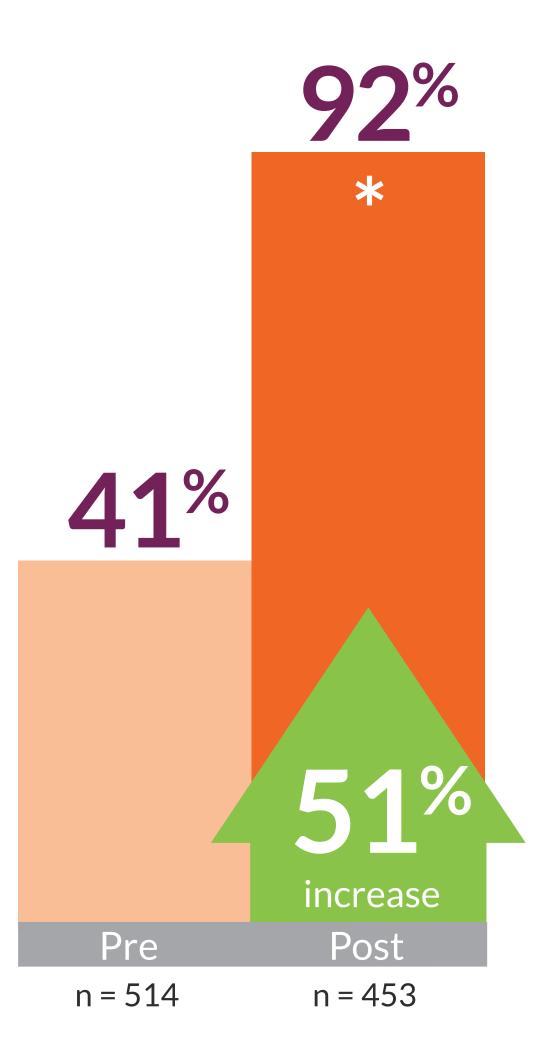
*P<0.05 (significant)

Presentation of MS in Latinos

27%

n = 507





"I am more attuned to the prevalence of MS and the race issues involved in diagnosis and treatment."

"Constantly screen for ways my own bias may influence my speech, assumptions, and recommendations."

651

Post

n = 402

"Discuss options in more detail with Black and Hispanic people with MS."

CONCLUSION

Live and on-demand CME positively impacted HCPs' awareness of key racial and ethnic differences in MS pathophysiology, along with patient presentations to be accounted for in management decisions. Additional education should reinforce these points and explore strategies to enhance access to MS care and high-potency DMTs for people of color.



reported at least one barrier to implementation

Most common anticipated barriers:

restrictions (20%) Cost/reimbursement/ insurance (18%)

constraints (16%)



