IMPROVING THE MANAGEMENT OF REFRACTORY PARTIAL-ONSET SEIZURES THROUGH CONTINUING MEDICAL EDUCATION

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INTRODUCTION

Epilepsy is a spectrum of disorders characterized by seizures with unpredictable frequency and differing about 3 million people in the United States.1-3 Knowledge of the correct anti-epileptic drugs (AEDs) is important for determining the best treatment options for patients. At baseline, many neurologists lack confidence in the ability to choose the correct AED in a given patient. This study was designed to assess the knowledge and confidence of neurologists in choosing the correct AED for a patient with refractory partial-onset seizures.

METHOD

An online survey was administered to compare the knowledge and confidence of neurologists before and after participating in an online continuing medical education (CME) activity. The CME activity focused on management of refractory partial-onset seizures.

RESULTS

A total of 98 neurologists were included in the assessment data, and the activity included 19 neurologists. The activity was conducted on a smaller sample of those who also participated in the follow-up post-assessment. The data were analyzed using Cramer’s V, and results were considered statistically significant at the p < .05 level. The activity was designed to increase confidence and knowledge of neurologists regarding management of refractory partial-onset seizures.

INSTRUCTIONAL METHOD

An online educational activity was presented in a video-conference format. The activity was designed to assess the effectiveness of the educational intervention and to determine whether the activity would improve knowledge and confidence of neurologists regarding management of refractory partial-onset seizures.

ASSESSMENT METHOD

The effect of the educational intervention was determined by comparing pre- and post-assessment scores. The survey examination included sections that assessed the effectiveness of the activity and the participants’ confidence in their knowledge of the correct anti-epileptic drugs for managing refractory partial-onset seizures.

CONCLUSIONS

Significant improvements in the knowledge and confidence of neurologists regarding management of refractory partial-onset seizures were observed as a result of participating in the online video-based educational intervention. These improvements were maintained 30 days after initial participation in the educational intervention. Additional education is necessary to further improve results in building upon the tactics of the educational initiative.

Acknowledgments

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References

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FIGURE 1. Linked learning assessment.

FIGURE 2.

FIGURE 3.

FIGURE 4.

FIGURE 5.

This content is for you in your ability to appropriately manage and treat patients with partial-onset seizures who do not respond to initial antiepileptic therapy.