Can Irritable Bowel Syndrome with Diarrhea Diagnosis and Management be Improved Through Online Case-Based Education?

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BACKGROUND
Case-based learning has been recognized for its benefits in modeling real-life problems, integration of knowledge into practice, and self-evaluation and reflection.1 Irritable-bowel syndrome (IBS-D) is a prevalent condition about which physicians often have practice gaps in appropriate diagnosis and management. The goal of this study was to determine if online case-based continuing medical education (CME) could improve competence and confidence of physicians related to IBS-D.²

METHODS
Two analyses of the PRE/POST sample tracked pre and post-education linked learning results. The pre-education survey was collected from March 25, 2017, to November 20, 2017.

RESULTS
Gastroenterologists n=511

- Significant improvement in selecting appropriate tests to evaluate patient and rule out IBD
- Significant improvement in appropriate evaluation of suspected IBD
- Significant improvement in selecting appropriate therapies for IBS-D

Primary Care Physicians (PCPs) n=1154

- Significant improvement in selection of appropriate therapies for IBS-D
- Significant improvement in evaluation of stool texture using the BSFS

PRE POST

Question: What is the most appropriate next step in the evaluation of suspected IBS-D?

Correct Answer: Evaluation of stool texture using the BSFS

Question: What pharmacologic therapy or therapies are most appropriate for this patient?

Correct Answer: Eluxadoline or rifaximin

CONCLUSION
Online, interactive, case-based CME modeling real-life scenarios in IBS-D led to improvements in physicians’ knowledge and competence in diagnosis and management of IBS-D. Education that is relevant to clinical practice scenarios can improve the translation of learning into patient care.

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REFERENCES