CURRENT PRACTICES IN MANAGING MULTIPLE MYELOMA (MM): ELUCIDATING EDUCATIONAL NEEDS OF HEMATOLOGY/ONCOLOGY CLINICIANS

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Two accredited clinical practice assessments (CPAs) were developed utilizing current evidence-based data relevant to newly diagnosed MM (NDMM) and relapsed/refractory MM (RRMM) online at www.medscape.org during July and August 2016.

The assessments included 20 knowledge- and case-based multiple-choice questions and were completed confidentially online at www.medscape.org during July and August 2016. Responses from clinicians were de-identified and aggregated prior to analysis. Data were collected between July 29, 2016, and September 3, 2016, for the NDMM assessment and between August 30, 2016, and September 24, 2016, for the RRMM assessment.

RESULTS

With the rapidly evolving treatment landscape, clinicians managing patients with MM have clinical judgment on their understanding of clinical data and their transition into practice. Gaps in knowledge, competence, and/or confidence can impede implementation of best practices.

OBJECTIVE

Assesses hematologists/oncologists’ baseline knowledge, skills, attitudes, and competence and identify barriers to optimal evaluation, diagnosis, and treatment of patients with MM

DESIGN/SETTING

ELUCIDATING EDUCATIONAL NEEDS OF HEMATOLOGY/ONCOLOGY CLINICIANS

CURRENT PRACTICES IN MANAGING MULTIPLE MYELOMA (MM):

CONCLUSIONS

This educational research identified gaps in knowledge, competence, and confidence regarding diagnostic and treatment approaches for newly diagnosed and relapsed/refractory MM (RRMM). These results will inform development of education regarding current practices as well as emerging management approaches in MM clinicians require in order to provide optimal patient care.

Acknowledgments

Supported in part by independent educational grants from Amgen, Bristol-Myers Squibb, Celgene Corporation, Novartis Oncology, and Takeda Oncology.

PARTICIPANTS

Of the hematologists/oncologists who participated, 122 completed the NDMM assessment and 103 completed the RRMM assessment. The majority of participants (62%) were between 1 and 5 years with NDMM mostly white, while 47% were between 1 and 5 and 27% were between 6 and 10 patients with NDMM per month.

CONCLUSIONS

Current assessment tool is an appropriate resource for educating an elderly non-diagnosed patient with MM.

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