Integrating a Paradigm Shift in the Treatment of Renal Cell Cancer: Effect of Online CME on Oncologists' Knowledge and Competence

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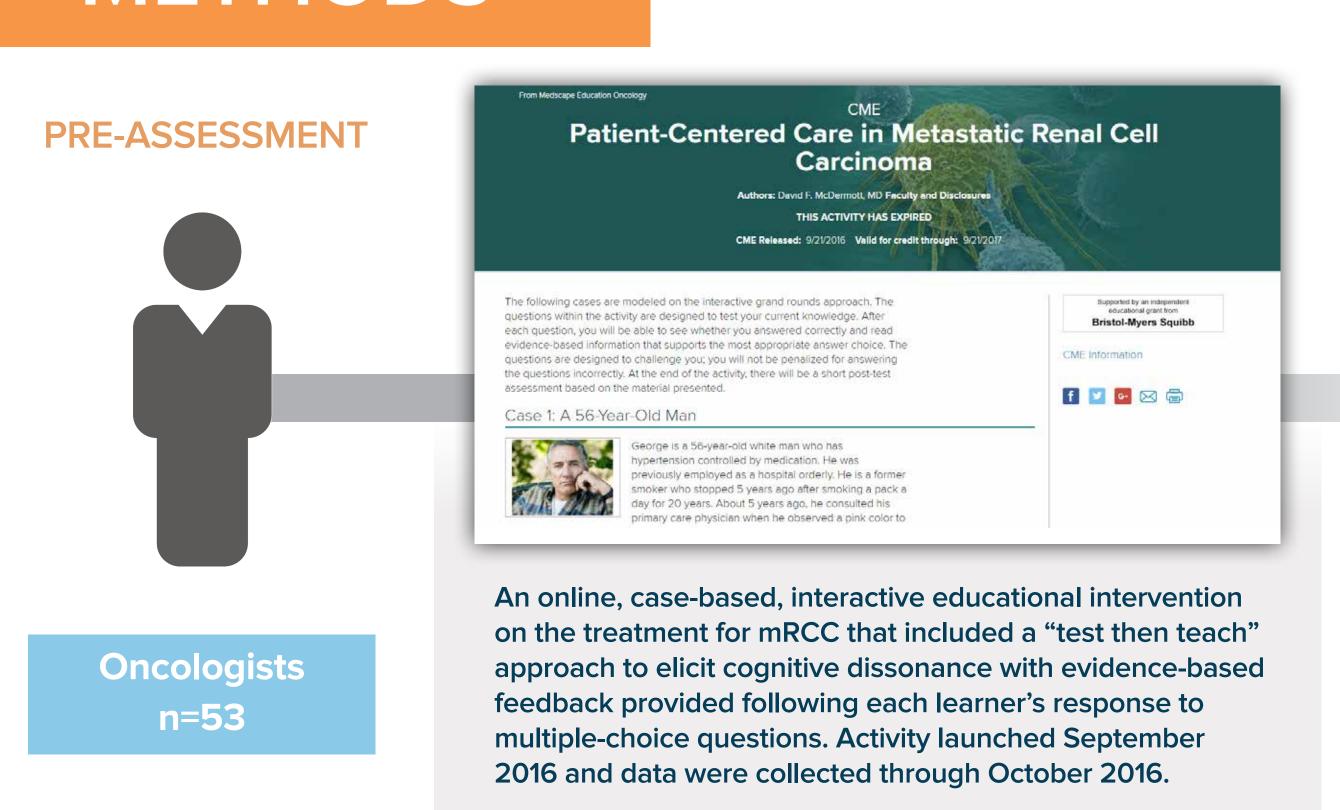
BACKGROUND

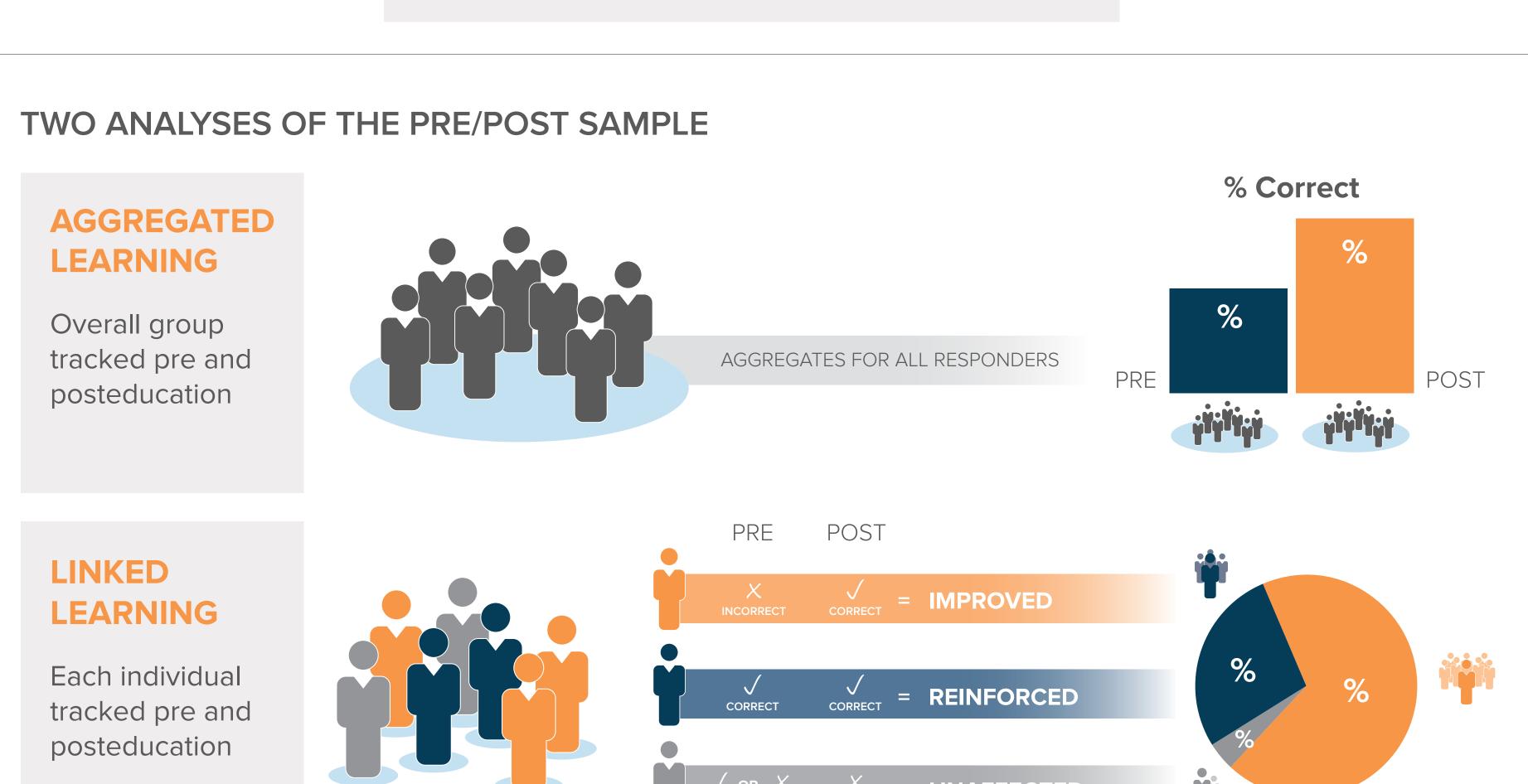
In the last decade, the treatment landscape for metastatic renal cell cancer (mRCC) has expanded to include molecularly targeted agents and immunotherapies that delay disease progression, improve quality of life, and extend overall survival by personalizing therapy for each patient. With clinical trials offering limited data on head-to-head comparisons or on the best order of therapy in mRCC, oncologists struggle to select the most appropriate therapies to optimize outcomes throughout each patient's course of care. The objective of this study was to determine the effect of online continuing medical education on the knowledge and competence of oncologists regarding the management of mRCC.

POST-ASSESSMENT

Oncologists

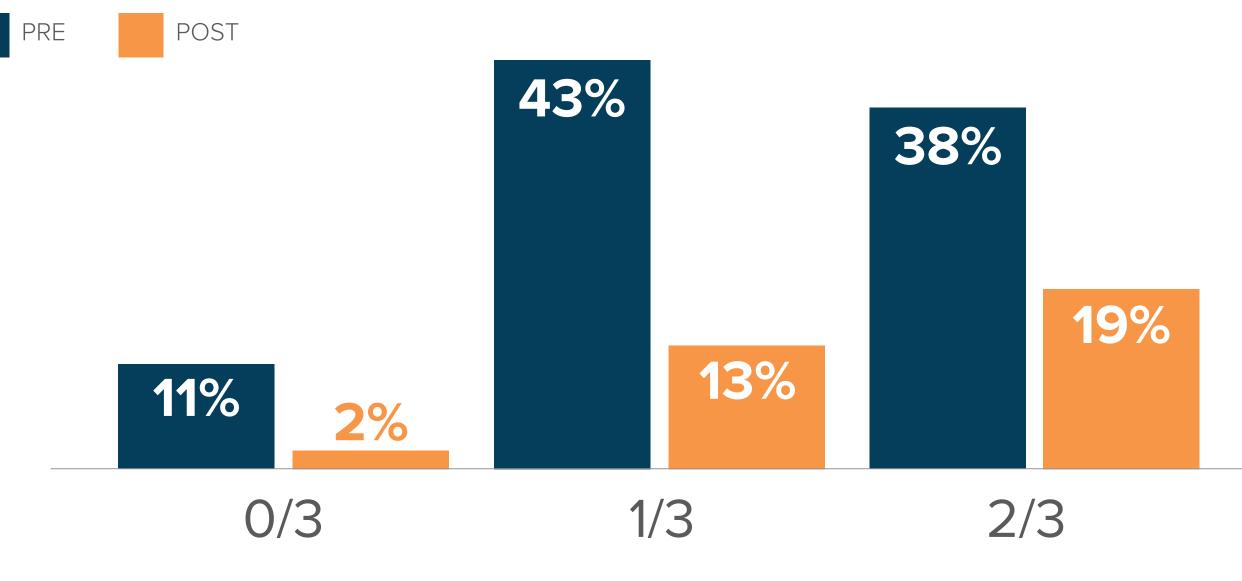
METHODS

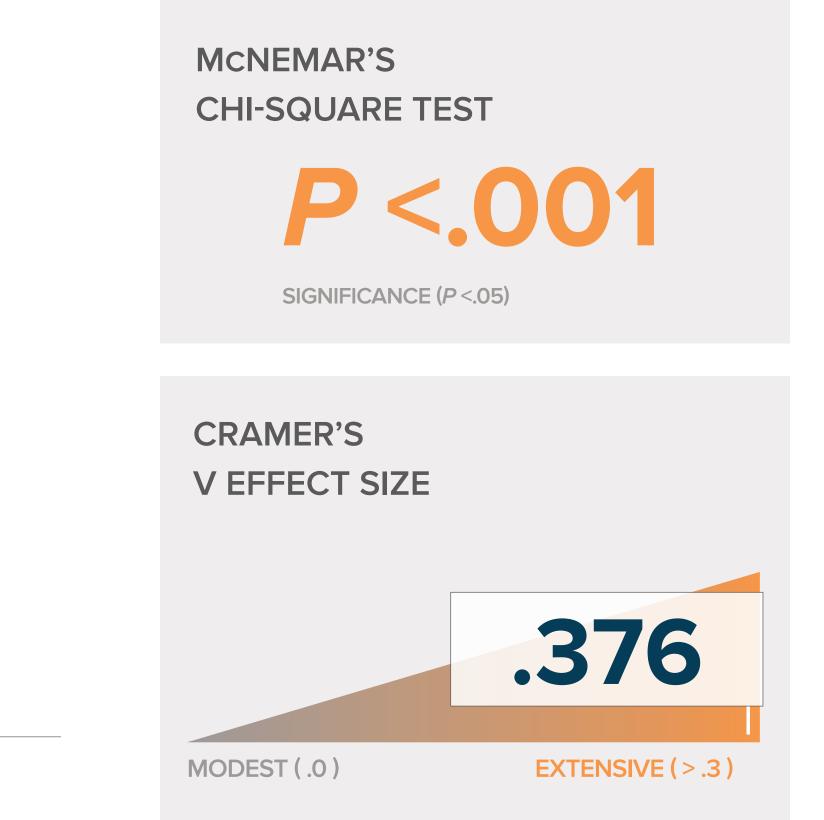




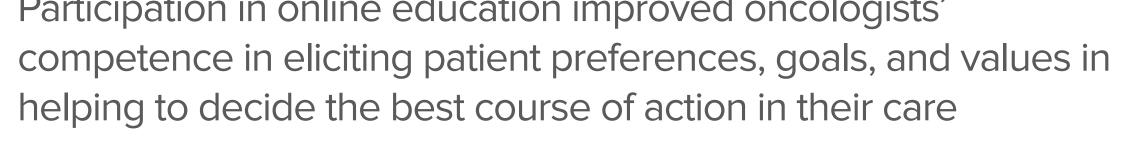
RESULTS

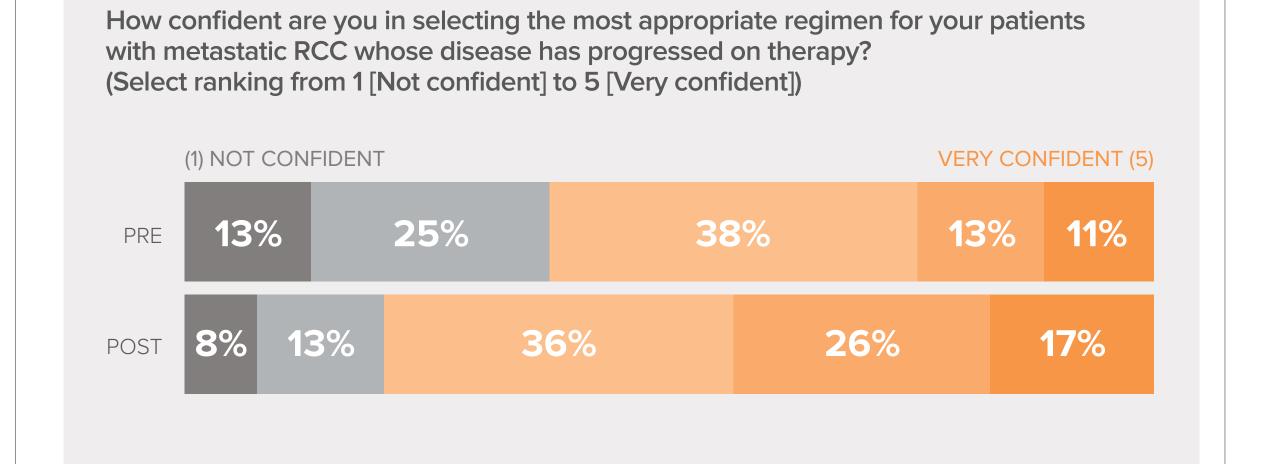






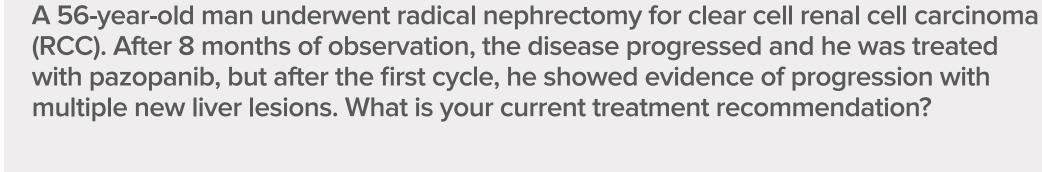
SELF-EFFICACY QUESTION Participation in online education improved oncologists'

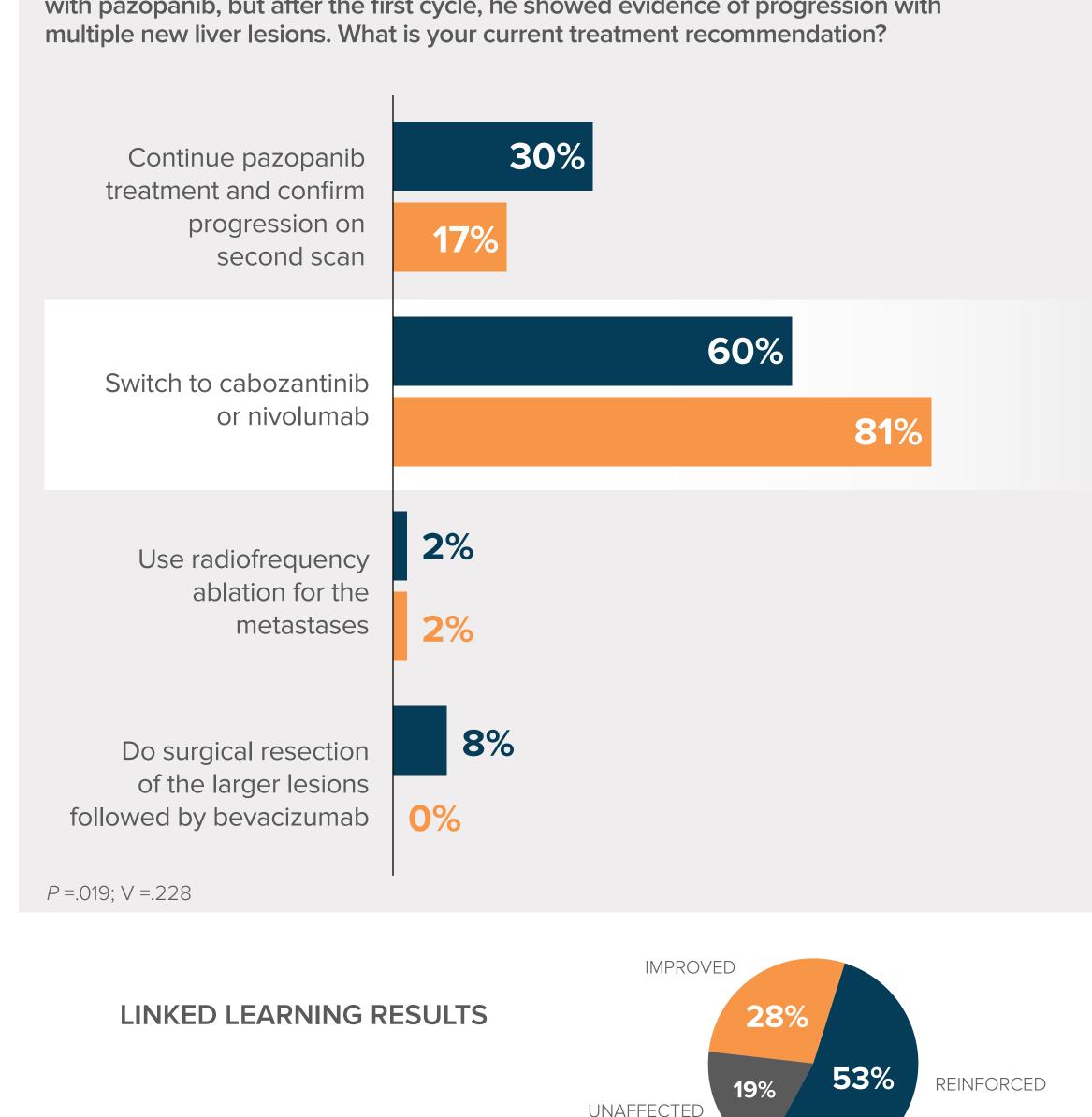




QUESTION 1 RESULTS

Oncologists were more likely to identify the most appropriate evidence-based regimens for a patient with mRCC who has quickly progressed on therapy



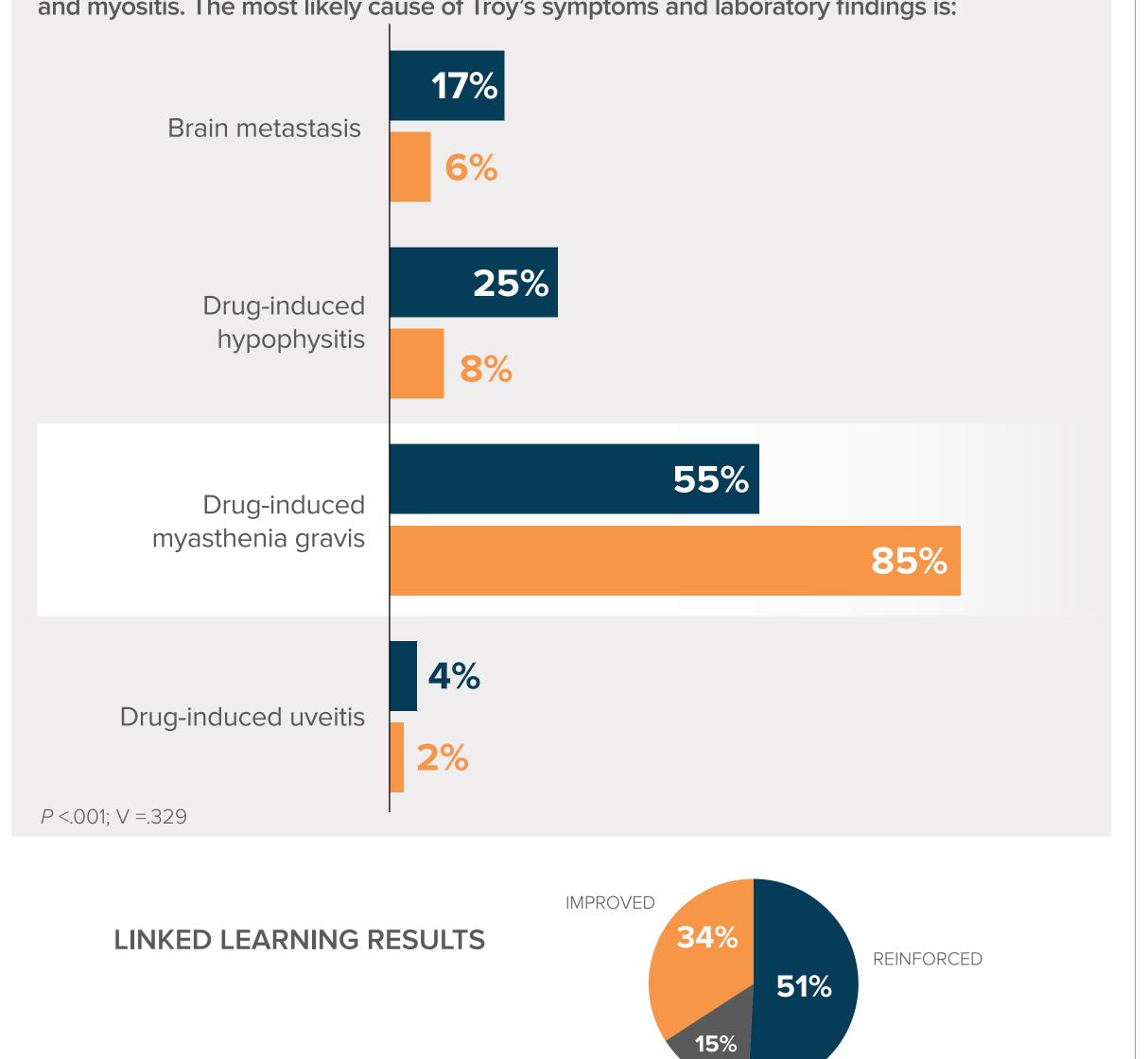


QUESTION 2 RESULTS

8%

Education improved recognition of the symptoms of an immune-mediated adverse event in a patient receiving an immune checkpoint inhibitor

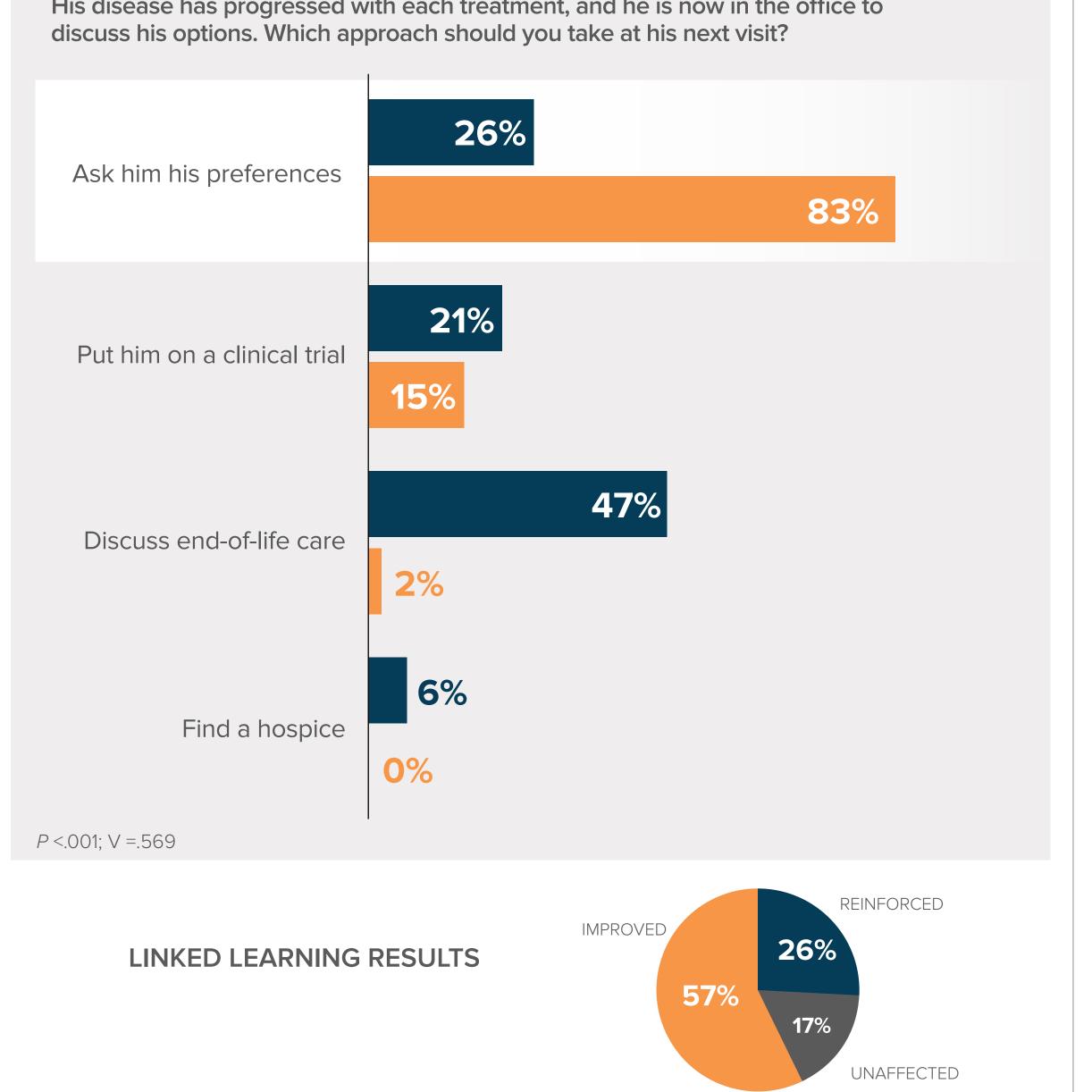
A 66-year-old man with stage 3, recurrent RCC enters a clinical trial of an anti-PD-L1 antibody. Approximately 2 weeks after his second dose, he presents with sudden onset of double vision, along with a 10-day history of muscle pain and weakness, joint aches, and malaise. Neurologic examination is notable for nearly complete ophthalmoplegia and fatigability of his deltoids; it is otherwise non focal. Laboratory test results are notable for transaminitis and myositis. The most likely cause of Troy's symptoms and laboratory findings is:



QUESTION 3 RESULTS

Oncologists were more confident in selecting the most appropriate regimen for a patient with mRCC whose disease has progressed on therapy

A 66-year-old man has received several treatments for metastatic RCC, including a clinical trial, axitinib, cabozantinib, and an mTOR-containing regimen. His disease has progressed with each treatment, and he is now in the office to discuss his options. Which approach should you take at his next visit?



CONCLUSION

Use of an online, case-based, interactive CME activity improved the knowledge and competence of participating oncologists, showing that unique educational methodologies and platforms that are available on-demand can be effective tools for advancing clinical decision making in the rapidly changing environment of mRCC disease management. Additional studies are needed to assess whether improved knowledge and confidence translate to improved performance during clinical practice.

ACKNOWLEDGMENTS

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