MDD Treatment Selection: Online CME Illustrates Best Practices in Discussing Pharmacogenomic Testing With Patients

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BACKGROUND

This study examined whether an online CME clinical encounter demonstration module can improve learners' self-reported clinical behaviors related to management of major depressive disorder (MDD), identification of patients who may benefit from pharmacogenomic (PGx) testing, interpreting the results and incorporating data into clinical decision-making, and communicating benefits and limitations of PGx testing to patients.

METHODS

Clinicians participated in a 20-minute segmented online multi-media activity consisting of videos portraying realistic physician-patient interactions followed by expert commentaries. Performance in the real world was assessed at 30-60 days post-education for learners in the target audiences. Learners in the first 3 months were invited to complete a survey identifying practice changes. Each respondent reported for each possible practice whether they were a) implementing for the first time or had modified it due to education, b) already doing it prior to education, or c) not doing it before or after education. They also indicated barriers they experience at least "some" of the time for each practice. The activity launched on April 28, 2023. Data collection ended on November 8, 2023.

6,321 TOTAL LEARNERS

- 3,165 MDS
- 2,878 HCPS
- 1,855 PSYCHIATRISTS
- 623 NP/PAS
- 749 PRIMARY CARE PHYSICIANS
- 1,652 NURSES
- 78 PHARMACISTS

RESULTS

DEMOGRAPHICS

4,957 TOTAL LEARNERS

PSYCHIATRISTS, PCPS, NPS/PAS, NURSES, PHARMACISTS

95% made a practice change or had practice reinforced due to education

47,091 patients impacted per month potentially due to education

- **66%** Assess patients for inadequate response to depression medication or side effects
- **52%** Identify patients with depression who may benefit from pharmacogenomic testing
- **49%** Have initial discussions about the potential benefits of pharmacogenomic testing with your patients

ADDITIONAL INSIGHT

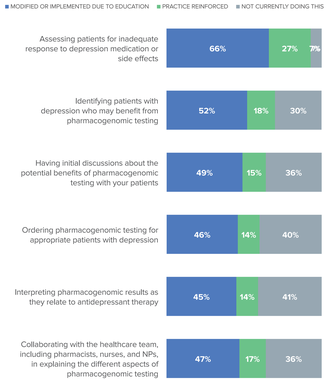
41% still aren't interpreting pharmacogenomic results as they relate to antidepressant therapy

TOP PRACTICE CHANGES

Analysis showed that 95% of learners made a practice change or had practices reinforced due to the education.

As a result of participating in this activity top practice changes include:

- 66% of participants are now assessing patients for inadequate response to depression medication or side effects
- 52% identify patients with depression who may benefit from pharmacogenomic testing
- 49% have initial discussions about the potential benefits of pharmacogenomic testing with their patients
- 65% of learners identified barriers to collaborating with the healthcare team in explaining the different aspects of pharmacogenomic testing with the top reported barrier being lack of access to a pharmacist.

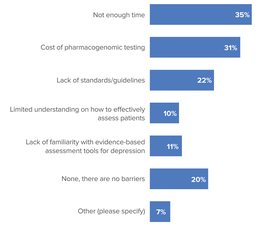


TOP REPORTED BARRIERS TO PRACTICE CHANGE

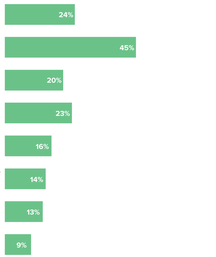
Top barriers Identified were as follows:

- 87% of learners identified barriers to identifying patients with depression who may benefit from pharmacogenomic testing with the top reported barrier being cost.
- 83% of learners identified barriers to having initial discussions about the potential benefits of pharmacogenomic testing with the top reported barrier being patient hesitation/mistrust.
- 80% of learners identified barriers to assessing patients for inadequate response to depression medication or side effects with the top reported barrier being time.

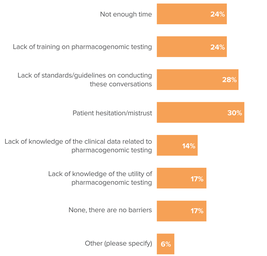
Which of the following are barriers to **assessing patients for inadequate response to depression medication or side effects** that you experience at least some of the time?



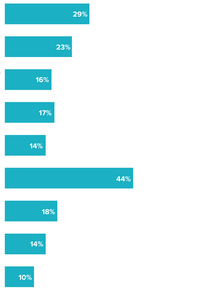
Which of the following are barriers to **identifying patients with depression who may benefit from pharmacogenomic testing** that you experience at least some of the time?



Which of the following are barriers to **having initial discussions about the potential benefits of pharmacogenomic testing** that you experience at least some of the time?



Which of the following are barriers to **ordering pharmacogenomic testing for appropriate patients with depression** that you experience at least some of the time?



SELF-EFFICACY RESULTS

Increased clinician confidence as follows:

- 55% of learners are moderately to very confident in applying pharmacogenomic testing in patients with depression.
- 50% of learners are moderately to very confident in educating patients on pharmacogenomic testing results through an interprofessional approach.

How confident are you in your ability to **apply pharmacogenomic testing in your patients with depression?**

How confident are you in your ability to **educate patients on PGx test results through an interprofessional approach?**

CONCLUSIONS

The clinical practice changes identified in this assessment provide compelling evidence that participation in online CME/CE prompts adoption of changes in practice related to improved use of pharmacogenomic testing in treatment of patients. Future education is needed to address the barriers identified in this assessment.

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