

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

Wendy Warfield, MHA, OTR/L; Sagar Parikh, MD; Clinton Wright, PharmD, BCPP; Jovanna Lubarda, PhD: Medscape LLC, Newark, NJ, USA

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BACKGROUND

This study examined whether an online CME clinical encounter demonstration module can improve learners' selfreported 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

2,878 HCPS

749 PRIMARY CARE PHYSICIANS **1,652** NURSES

1,855 PSYCHIATRISTS 78 PHARMACISTS **623** NP/PAS



DEMOGRAPHICS 66% Assess patients for inadequate response to depression medication or side effects 52% depression who may benefit from pharmacogenomic testing Have initial discussions about PSYCHIATRISTS, PCPS, 49% the potential benefits of NPS/PAS. NURSES. pharmacogenomic testing with **ADDITIONAL INSIGHT** 47,091 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:

response to depression medication or side effects 52% identify patients with depression who may benefit from

66% of participants are now assessing patients for inadequate

- pharmacogenomic testing
- 49% have initial discussions about the potential benefits of pharmacogenomic testing with their patients

■ MODIFIED OR IMPLEMENTED DUE TO EDUCATION ■ PRACTICE REINFORCED ■ NOT CURRENTLY DOING THIS Assessing patients for inadequate response to depression medication or depression who may benefit from pharmacogenomic testing Having initial discussions about the potential benefits of pharmacogenomic testing with your patients Ordering pharmacogenomic testing for appropriate patients with depression Interpreting pharmacogenomic results as they relate to antidepressant therapy

Collaborating with the healthcare team,

including pharmacists, nurses, and NPs,

in explaining the different aspects of

pharmacogenomic testing

Top barriers Identified were Which of the following are barriers to assessing patients for inadequate response to Which of the following are barriers to identifying patients with depression who may depression medication or side effects that you experience at least some of the time? benefit from pharmacogenomic testing that you experience at least some of the time? as follows: 87% of learners identified Not enough time Not enough time barriers to identifying patients with depression Cost of pharmacogenomic testing who may benefit from pharmacogenomic testing with the top reported barrier Lack of training on pharmacogenomic testing Lack of standards/guidelines being cost. 83% of learners identified Limited understanding on which patients may be appropriate for pharmacogenomic testing barriers to having initial discussions about the Lack of familiarity with evidence-based 11% Lack of knowledge of clinical data related to potential benefits of pharmacogenomic testing pharmacogenomic testing with the top reported barrier Lack of knowledge of the utility of None, there are no barriers pharmacogenomic testing being patient hesitation/ Other (please specify) 7% None, there are no barriers 139 80% of learners identified barriers to assessing patients Other (please specify) 9% for inadequate response to depression medication or side effects with the top Which of the following are barriers to ordering pharmacogenomic testing for Which of the following are barriers to having initial discussions about the pote reported barrier being time. benefits of pharmacogenomic testing that you experience at least some of the time? appropriate patients with depression that you experience at least some of the time? 65% of learners identified Not familiar with what tests are available and barriers to collaborating Not enough time with the healthcare team in explaining the Lack of knowledge of the clinical data related to Lack of training on pharmacogenomic testing different aspects of pharmacogenomic testing pharmacogenomic testing Lack of knowledge of the utility of Lack of standards/guidelines on conducting with the top reported barrier these conversations pharmacogenomic testing being lack of access to a pharmacist. Not familiar with interpreting test results 17% Patient hesitation/mistrust Lack of knowledge of the clinical data related to Not familiar with how to implement test results 14% pharmacogenomic testing Lack of knowledge of the utility of Cost of pharmacogenomic testing pharmacogenomic testing None, there are no barriers Access Other (please specify) 6% None, there are no barriers 14% Other (please specify) 10%

CONCLUSIONS

The clinical practice changes 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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For more information, contact: Wendy Warfield, MHA, OTR/L, Assoc. Director, Clinical Strategy wwarfield@medscape.net











Increased clinician confidence as follows:

 55% of learners are moderately to very confident in applying pharmacogenomic testing in patients with depression.

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?

NOT CONFIDENT

VERY CONFIDENT NOT CONFIDENT

testing results through an interprofessional approach.

50% of learners are moderately to very confident in educating patients on pharmacogenomic

VERY CONFIDENT