

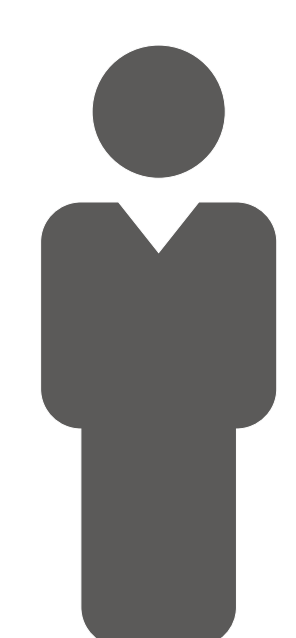
BACKGROUND

Both the World Health Organization (WHO) and US Department of Health and Human Services (DHHS) have set goals for the elimination of viral hepatitis, including hepatitis B, by 2030.¹ At present, safe and effective hepatitis B vaccines are widely available, yet the United States is not on track to meet elimination goals. It is expected that the Advisory Committee on Immunization Practices (ACIP) will soon update guidelines and recommend universal vaccination for hepatitis B virus (HBV), dramatically increasing the number of individuals for whom HBV vaccination is recommended. This study assessed the impact of online clinician education on performance in clinical practice.



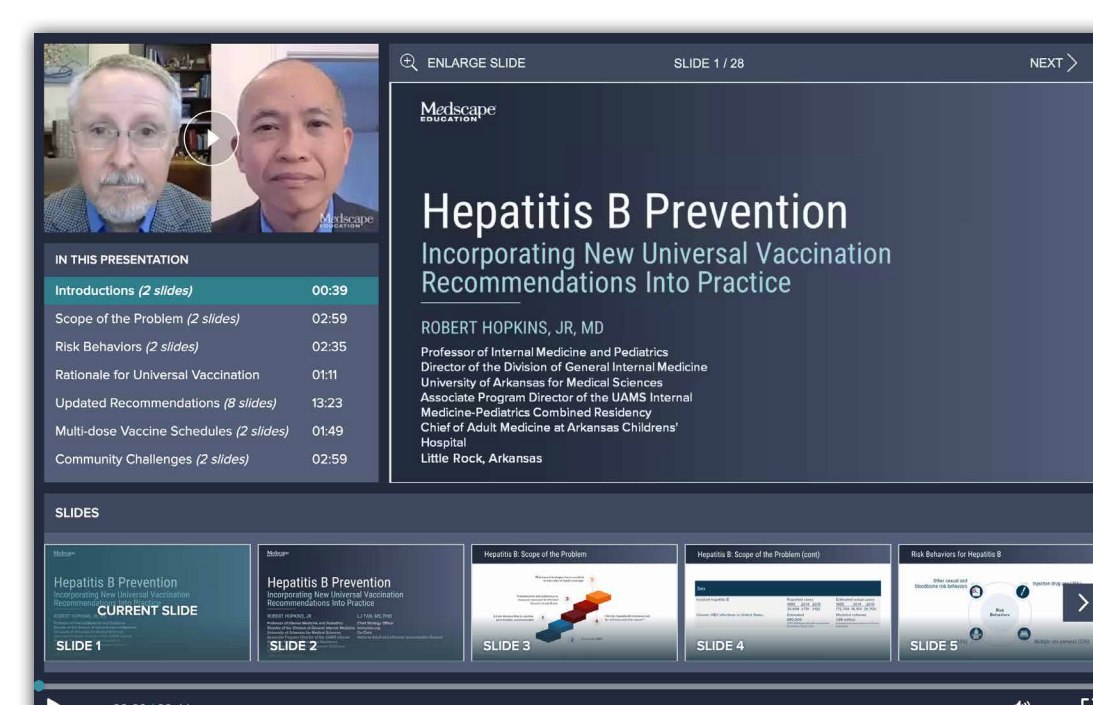
METHODS

Clinicians participated in an online, 30-minute CME/CE video discussion among experts with synchronized slides. Performance in the real world was assessed by inviting learners to complete a survey 30-60 days post-education, identifying practice changes and the degree to which clinicians experience barriers to those changes. For each possible practice, learners reported whether they were implementing for the first time or had modified it due to education, they were already doing it prior to education; or they were not doing it before or after education. They also indicated barriers they experience at least “some” of the time for each practice. The data were collected from 5/19/2022 to 10/24/2022.



Obstetricians/
Gynecologists
(OB/GYNs) (n = 9,295)

Pediatricians (PEDs)
(n = 4,407)

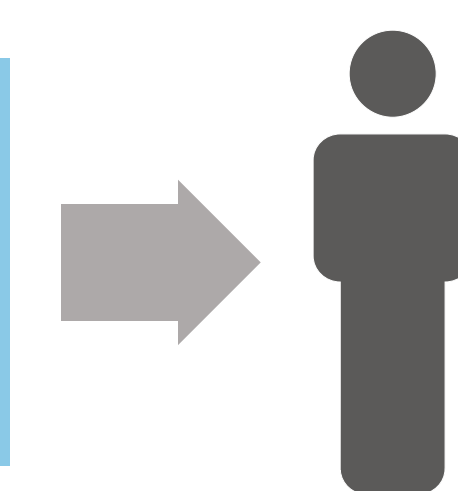


The education reached over 65,979 clinician learners, including 20,349 physicians, 9,295 OB/GYN, and 4,407 Peds.

RESULTS



9,850 PCPs,
Diab/Endos, Ob/Gyns,
Nurses, NPs, Pharms



98,500 patients
impacted per month
potentially due
to education

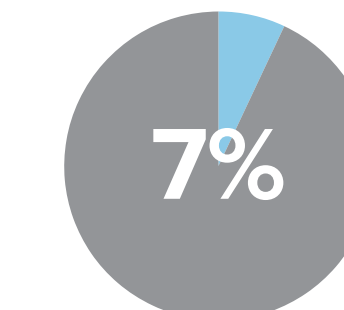
100%

100% made a practice change
or had practice reinforced due
to education

$P < .0001$

ADDITIONAL INSIGHT

7% still aren't utilizing key differences between available hepatitis B vaccines to counsel and appropriately vaccinate patients or implementing the latest universal vaccination recommendations for the hepatitis B vaccine



There were 44 learners consisting of PCPs, diab/endos, ob/gyns, nurses, NPs, and pharmacists who completed the survey. Analysis showed that 100% of learners made a practice change or had practices reinforced due to education. Top 4 practice changes modified or implemented as a result of education included:

67%

- Utilize key differences between available hepatitis B vaccines to counsel and appropriately vaccinate patients

66%

- Apply the ACIP recommendations for hepatitis B vaccination

59%

- Implement the latest universal vaccination recommendations for the hepatitis B vaccine

59%

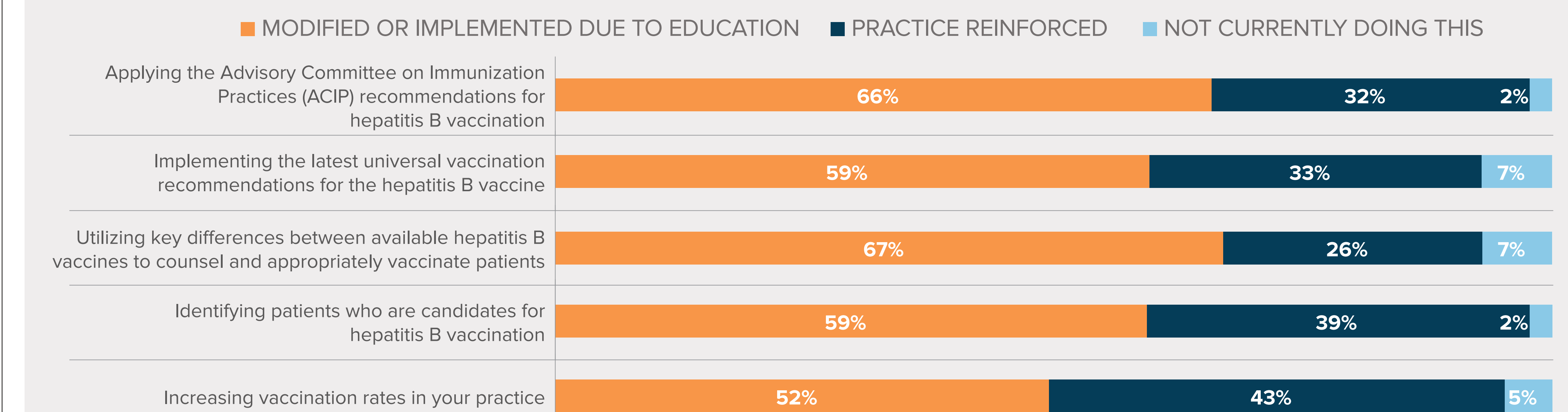
- Identifying patients who are candidates for hepatitis B vaccination

Some of the main barriers to implementing practice changes identified by the learners include:

- Patient misinformation, inaccurate expectations, and vaccine hesitancy
- Multiple vaccine doses, decreased adherence, and patients being lost to follow-up
- Understanding the indications for various hepatitis B vaccines
- Time restraints of staff and training needs

KEY DIFFERENCES BETWEEN AVAILABLE HEPATITIS B VACCINES

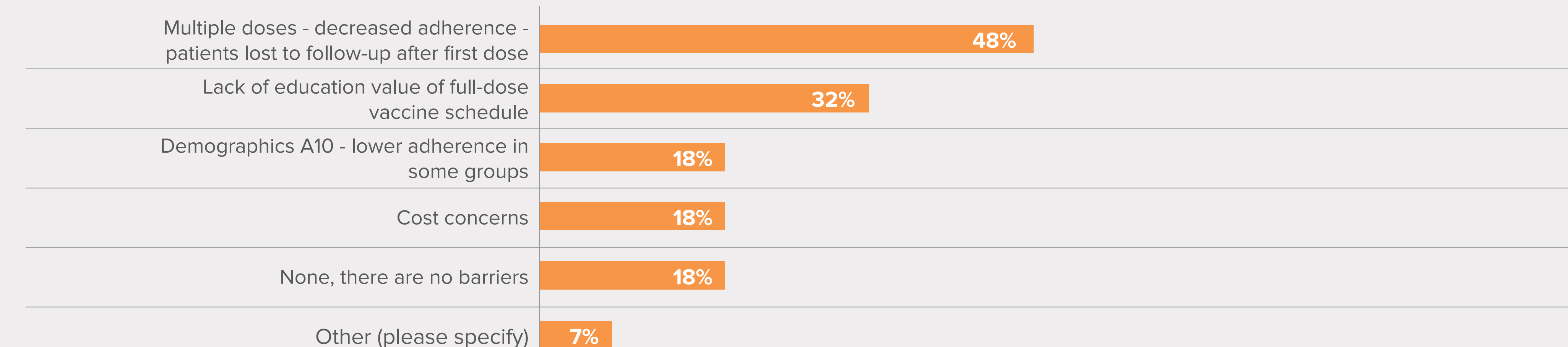
67% of participants now utilize key differences between available hepatitis B vaccines (n = 44)



BARRIERS WHEN UTILIZING KEY DIFFERENCES BETWEEN AVAILABLE HEPATITIS B VACCINES

82% of learners identified barriers when utilizing key differences between available hepatitis B vaccines to counsel and appropriately vaccinate patients (n = 44)

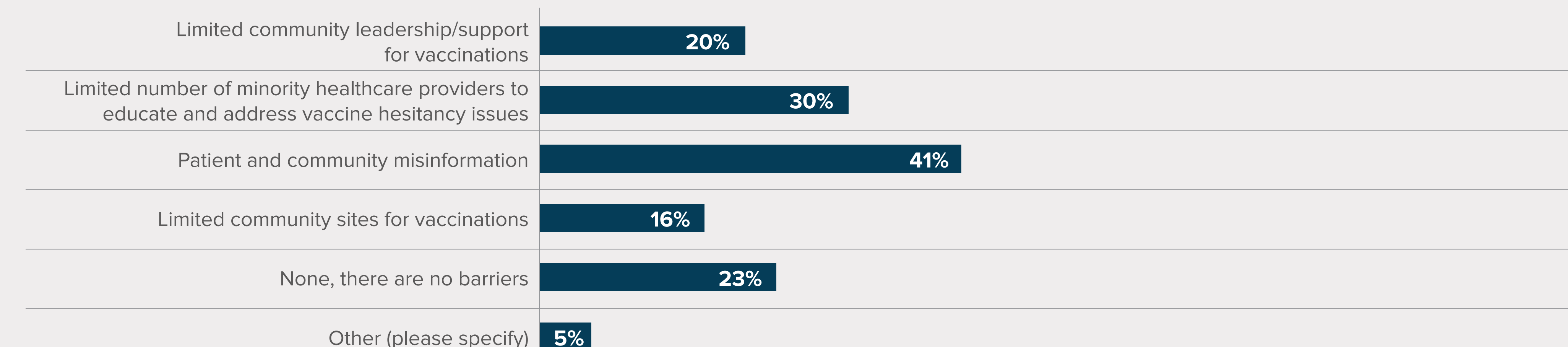
Which of the following are barriers when utilizing key differences between available hepatitis B vaccines to counsel and appropriately vaccinate patients that you experience at least some of the time?



BARRIERS TO INCREASING VACCINATION RATES

77% of learners identified barriers to increasing vaccination rates (n = 44)

Which of the following are barriers to increasing vaccination rates in your practice that you experience at least some of the time?



CONCLUSIONS

- The practice changes identified in this assessment provide a compelling evidence that participation in online CME/CE prompts adoption of changes in practice related to hepatitis B vaccination.
- Despite the effectiveness of the education, persistent gaps remain that serve as future educational targets for continuing education.

ACKNOWLEDGEMENTS

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REFERENCES

- <https://www.hhs.gov/hepatitis/viral-hepatitis-national-strategic-plan/national-viral-hepatitis-action-plan-overview/index.html#:~:text=The%20Plan%20provides%20a%20framework,the%20United%20States%20by%202030>

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