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BACKGROUND

Asthma affects more than 24.9 million people in the United States, and severe or poorly controlled asthma can have irreversible effects on pulmonary function. Primary care clinicians are not adequately recognizing patients with severe asthma who could benefit from specialist care and co-management. Referral to respiratory specialists is often delayed, leading to suboptimal outcomes for many patients. The goal of this study was to evaluate the impact of an online CME intervention on clinical practice related to asthma recognition, assessment, and patient referrals.



To address these gaps, a 20-minute online CME intervention was developed, featuring a discussion between 2 experts about uncontrolled asthma and the clinical benefits of asthma referrals. To assess changes in practice, learners were invited by email to participate in a survey between 30 and 60 days after completion of the activity. The survey assessed demographics, 5 to 8 practices linked to the activity learning objectives, and potential barriers to the practices listed in the survey. A descriptive analysis of the target audience was used to summarize the status of implementation of the clinical practice changes in the real world and barriers to the suggested changes. The CME intervention was launched on March 22, 2024, and data were collected through August 20, 2024.





Primary Care



Nurse practitioners/ Physician assistants (NPs/PAs)

N = 107 survey respondents



Online Clinician Education Supports Improvements in Clinical Practice Related to Asthma Recognition, Assessment, and Patient Referral

Lindsay Tanskey, PhD, MEd; Sara Thorpe, MPH; Karen Badal, MD; Don Blatherwick: Medscape LLC, New York, NY, USA

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RESULTS

Of 107 learners who completed the survey, 87% indicated they made a practice change or had their practice reinforced due to the education. The top 3 practice changes included:

- Identifying patients with uncontrolled asthma (87% of participants)
- Assessing asthma severity and control (79% of participants)
- Referring patients with severe or uncontrolled asthma to specialists for further evaluation (76% of participants)

The top barrier to the identification of patients with uncontrolled asthma was patients being unaware if their asthma is controlled and thus not reporting it (51% of participants).

Additionally, 66% of learners identified barriers to assessing asthma biomarkers. 28% of learners indicated they lack tools to assess biomarkers, and 25% indicated they do not know what biomarkers to assess.

Half of learners identified barriers to referring patients with severe or uncontrolled asthma to specialists for further evaluation. 21% of learners felt patients were satisfied with their current care, and 19% indicated they lack connections to specialists for referrals.

PRACTICE CHANGES DUE TO EDUCATION

Modified or implemented due to education
Practice reinforced
Not currently doing this

IDENTIFIED BARRIERS

Which of the following are barriers to referring patients with severe or uncontrolled asthma to specialists for further evaluation?



Which of the following are barriers to identifying patients with uncontrolled asthma?





		87%	10	<mark>%3</mark> %	
79	9%		189	% <mark>3</mark> %	
769	%		20%	6 <mark>4</mark> %	
8%		17	%	10%	
3%		15%		12%	
			27%	6%	
	289	%		17%	
189	%			23%	



67%

65%





This analysis shows the success of expert-led, online CME in improving clinicians' practices related to the recognition and assessment of patients with asthma and referral of patients with severe or uncontrolled asthma to a specialist. Our assessment of barriers to clinical practice change suggests a need for patient education on the consequences and recognition of uncontrolled disease and importance of reporting these symptoms to a healthcare professional.

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For more information, contact: Sara Thorpe, Director Clinical Strategy at sthorpe@medscape.net







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