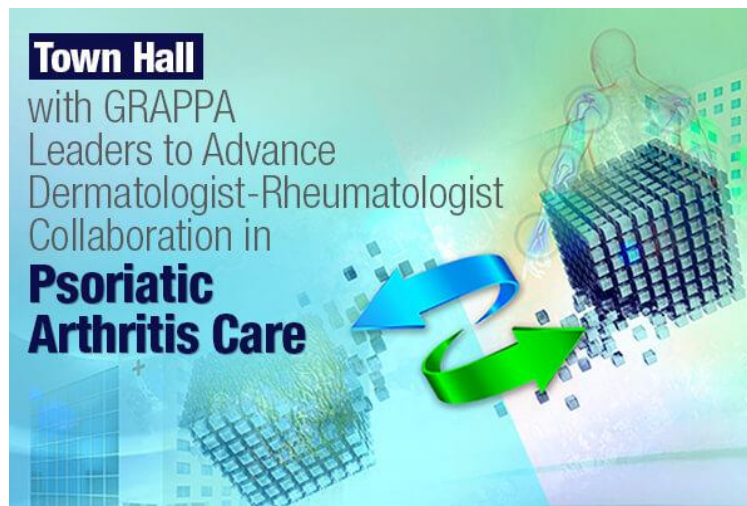
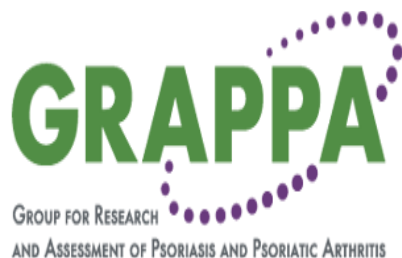


# Extending Dermatology-Rheumatology Shared Management Practices from Academic Settings to Benefit PsA Patients

Pfizer (Grant #35984615)

## Project Key Aspects



Jeffrey Carter, PhD, Research Group Manager

# Community-based Educational Initiative in Collaborative PsA Management

## PROGRAM COURSE DIRECTOR:



*“The sense I had was that the attendees really enjoyed the very interactive exchange between derms and rheums, with some useful perspective from primary care as well.”*

– Dr. Philip Mease

Director of Rheumatology Research  
Swedish Medical Center  
Clinical Professor  
University of Washington School of Medicine  
Seattle, WA

## Program Educational Design in Collaboration with



Conduct 100 Nationwide  
Surveys Among  
Rheumatologists &  
Dermatologists



6 Evening Meetings with  
Academic and Community-  
based Rheumatologists,  
Dermatologists, Primary Care



Identify Opportunities  
for Grassroots Co-  
Management of PsA

# Key Summary Outcomes from Live Activities



Improved participants' competence in non-TNFi therapies (+15%).



Achieved +49% increase in participants' referrals to rheums for PsA subpopulations with joint symptoms.



Improved participants' ability to differentiate the benefits and risks of targeted biologic or small-molecule therapies (+30%).



Improved participants ability to identify patient subpopulations who would benefit from a switch in PsA therapy due to suboptimal response (+32%).



## Action Plans

- **65%** of rheumatologists and dermatologists committed to establishing collaborative relationships for co-management
- **70%** of participants committed to integrating PsA screening tools within practice
- **48%** of primary care participants committed to building a PsA referral network of local rheumatologists and dermatologists



## Barriers

- Lack of time and reimbursement issues were top reported barriers to collaborative PsA management
- High cost or copay issues are the most frequently reported barriers for switching PsA patients to *anti-IL 12/23* or *anti-IL 17* therapies
- Concerns about efficacy is the most frequently barrier reported for switch PsA patients to *PDE4 inhibitors* or *JAK inhibitors*

# Providers' Self Reported Commitment to Improve Grassroots PsA Shared Management

Post-Activity: Which of the following do you and your team plan to implement to improve collaborative PsA care?

N=65

