



University of Colorado
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**Determining and Addressing
Adherence to the NCCN Guidelines
for Chronic Phase CML**

Background

- ▶ **Purpose:** to determine the baseline rate of appropriate monitoring of CP-CML by BCR-ABL1 transcripts in peripheral blood using RT-PCR in accordance with the NCCN guidelines at four practices.
- ▶ To test a novel behavior change intervention in these practices and accounted for impact on the adherence rate and medical provider knowledge at the practice sites.
- ▶ **Scope:** Nationally between 31 and 51 percent of patients with CML are monitored in accordance with the NCCN guidelines. Low adherence to these guidelines is associated with disease progression, TKI resistance and poor medical outcomes

Methods

- ▶ EMR data was collected at four practice sites to determine the baseline and one year post intervention follow up.
- ▶ An interactive presentation designed to improve medical provider knowledge of and adherence to the NCCN guidelines for treatment of CP-CML was administered at each practice site.
- ▶ Pre-Post and 6 month follow up tests were used to evaluate changes in provider knowledge.

Results

- ▶ Four practices sites had pre-intervention adherence to timely monitoring of BCR-ABL by RT-PCR rates of 47, 46, 66 and 14 percent.
- ▶ Post-intervention monitoring was also suboptimal. Physician and provider training was successful at improving the knowledge of medical teams about effective CML treatment and monitoring.
- ▶ The difference between pre and post measurements is significant, $z = 5.311$, $p < .000$. indicating improved provider knowledge.

Implications and Impact

- ▶ The preliminary findings of this study suggest the need for exploration of new and innovative interventions for increasing adherence to NCCN guidelines for BCR-ABL monitoring of CML among patients taking TKI medications.
- ▶ Provider trainings should not be pursued as a primary means of increasing monitoring rates.
- ▶ Particular attention should be given to the development of interventions specific to increasing monitoring among CML survivors living with a diagnosis for more than 5 years.