

MAKING A DIFFERENCE & MEASURING IMPROVEMENT: Psoriasis in Primary Care

Curriculum Components



Virtual Expert Roundtable

Optimizing Diagnosis and Management of Psoriatic Disease in Primary Care

1.50 AMA PRA Category 1 Credits™ or 1.50 AANP, including 0.30 AANP Pharm

3/24/2016 – 3/24/2017



Patient Case Study

A 37-Year-Old Woman with Moderate-to-Severe Plaque Psoriasis

1.00 AMA PRA Category 1 Credits™ or 1.10 AANP, including 0.60 AANP Pharm

3/24/2016 – 3/24/2017



Expert Perspective

Frequently Asked Questions: Optimizing Diagnosis and Management of Psoriatic Disease in Primary Care

1.00 AMA PRA Category 1 Credits™ or 1.00 AANP, including 0.30 AANP Pharm

4/15/2016 – 4/15/2017

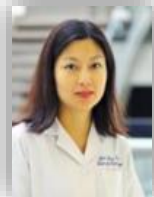
Curriculum Learning Objectives

- ▶ Improve PCPs' knowledge and competence in the recognition and diagnosis of psoriasis and psoriatic arthritis, including a strong working knowledge of the various forms/stages of psoriasis, and the common comorbidities, so as to better affect a timely referral and treatment with a specialist
- ▶ Improve PCPs' clinical understanding of stage-appropriate pharmacological management of psoriasis and psoriatic arthritis so as to develop individualized treatment plans, which result in the greatest improvement in patient outcomes
- ▶ Assess the comparative risk-benefit profiles of available and emerging treatments for psoriasis, including topical, oral and biologic agents so as to better manage disease, while limiting unnecessary side effects and suboptimal outcomes
- ▶ Utilize clinician-patient communication strategies to clarify treatment expectations, emphasize the importance of adherence to therapy, and address patient concerns regarding the physical, psychological and emotional impact of psoriasis on QOL

Faculty



Vasilios Chrisostomidis, DO



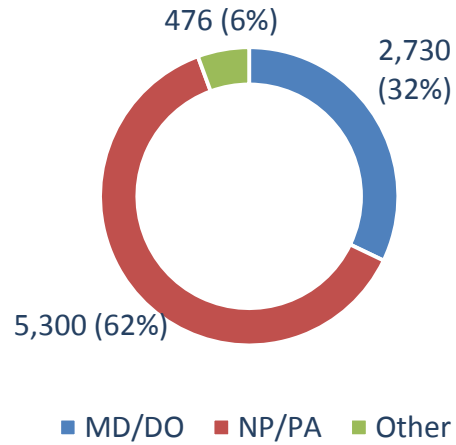
Sylvia Hsu, MD



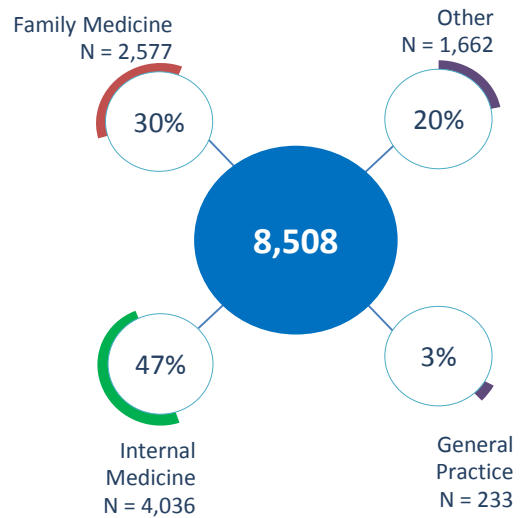
Anthony P. Fernandez, MD, PhD

LEARNER DATA

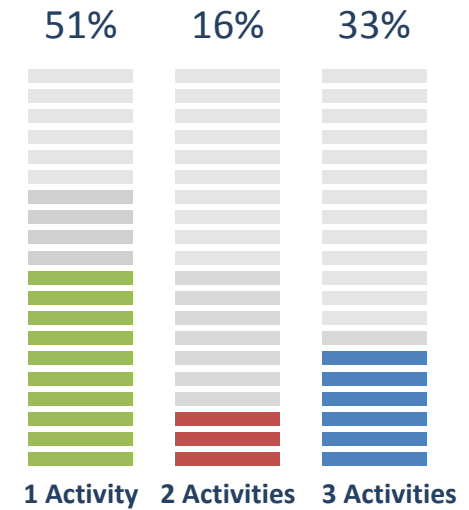
Degree Breakdown



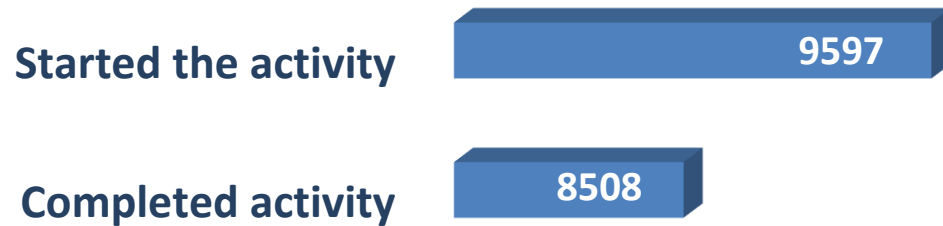
Specialty Breakdown



% of Learners Who Completed...



88% Completion Rate Across All Activities



Completion Goal

3,500

Total Completions

8,508

Total CME Hours Awarded

10,066

EDUCATIONAL OUTCOMES

| Topic | Pre-education | Post-education | % Change (from BL) | 6-week Survey | % Change |
|---|---------------|----------------|--------------------|---------------|----------|
| Knowledge: Risk of cardiovascular disease in patients with severe psoriasis | 57% | 64% | 12% | 72% | 26% |
| Knowledge: Average time (10-20 years) it takes for the onset of psoriatic arthritis after the onset of cutaneous psoriasis | 40% | 69% | 73% | 47% | 18% |
| Knowledge: Identification of atopic dermatitis based on a written description of skin lesions | 17% | 25% | 47% | 21% | 24% |
| Competence: Approximation of body surface area affected in a patient with thick, scaly, well-demarcated plaque on his leg the size of the patient's hand | 41% | 69% | 73% | 67% | 63% |
| Knowledge: Indications (e.g. BSA >10%) for initiation of systemic or biologic therapy in a patient with psoriasis | 71% | 76% | 14% | 92% | 53% |
| Knowledge: Proper vaccinations strategies for patients treated with biologic agents | 68% | 70% | 3% | 81% | 19% |
| Knowledge: Screening for tuberculosis in patients who are to start treatment with adalimumab | 85% | 93% | 9% | 93% | 9% |
| Knowledge: Efficacy of biologics over time | 62% | 75% | 21% | 87% | 40% |
| Knowledge: Association of teratogenicity and end-organ damage with conventional systemic agents | 36% | 41% | 14% | 55% | 53% |
| Knowledge: Acitretin is contraindicated during pregnancy | 40% | 59% | 48% | 67% | 68% |
| Knowledge: Newer drugs, such as biologics, have significantly improved the percentage of patients who are able to achieve clearance | 77% | 81% | 5% | 88% | 14% |
| Competence: Use of ustekinumab in a 41-year-old woman with a 2-year history of moderate-to-severe generalized psoriasis who has been dissatisfied with past treatments | 32% | 45% | 41% | 47% | 47% |
| Knowledge: Identification of tofacitinib as a janus kinase inhibitor among a list of biologic agents | 46% | 57% | 24% | 47% | 2% |

REAL WORLD EVIDENCE OUTCOMES

Diagnosis Rate

| Provider Type | Providers | Pre Period | | | Post Period | | | Pre to Post |
|-------------------------|-----------|----------------------|--------------------|--------------------|----------------------|--------------------|--------------------|--------------------------------|
| | | Patients Encountered | Patients Diagnosed | New Diagnosis Rate | Patients Encountered | Patients Diagnosed | New Diagnosis Rate | Diagnosis Rate Relative Change |
| Participating Providers | 18 | 8,507 | 48 | 0.564% | 8,047 | 48 | 0.596% | 5.716% |
| Control Providers | 18 | 8,597 | 37 | 0.430% | 7,445 | 27 | 0.363% | -15.736% |

Treatment Initiation Post-Education

| | | | |
|---|------------------------|--------------------------------|-------------------------|
| IL-17A Inhibitors | 0% (vs 0% control) | PDE-4 Inhibitors | 0.3% (vs 0.3% control) |
| IL-12/IL-23 Inhibitors | 0.3% (vs 0.3% control) | Topical Corticosteroids | 4.0% (vs 3.48% control) |
| TNF-α Inhibitors | 0.6% (vs 0.3% control) | Coal Tar | 0% (vs 0.3% control) |
| Immunomodulators | 0% (vs 0% control) | Antimetabolites | 0.3% (vs 0.3% control) |
| Vitamin D Analogs | 0% (vs 0.3% control) | | |

CONCLUSIONS

- ▶ The curriculum exceeded the target goal for completions by 143% with a very high completion rate (88%) across all three activities
- ▶ There was a high proportion of learners who completed > 1 activity in the curriculum (49%)
- ▶ Learners demonstrated significant improvements in knowledge and competence around the nature, diagnosis, and treatment of psoriasis post-education and on the 6-week post-education survey
- ▶ As a result of education, there was an increase in the diagnosis rate of psoriasis and, among learners who utilize Amazing Charts EHR and participated in the study.
- ▶ These results highlight the success CME plays in education of psoriasis for the primary care audience and in addition to the aforementioned topics, future education should continue to focus on:
 - ▶ Differential and physical diagnosis of psoriasis
 - ▶ Teratogenicity associated with some traditional agents (i.e. acitretin)
 - ▶ Indications and appropriate use of biologic agents
- ▶ With continued education, primary care providers will become increasingly comfortable with assessing, diagnosing and treating psoriasis, through the utilization of traditional and emerging biologic agents.