Challenges in Pulmonary and Critical Care



LIVE CME CONFERENCE



Non-Tuberculosis Mycobacterial Lung Disease (NTM-LD) – New Horizons

Final Live Outcome Report Prepared For Insmed February 5, 2019



Executive Summary

- This curriculum focused on the epidemiology and risk factors for NTM-LD, diagnostic evaluation, treatment recommendations for NTM-LD and how to integrate emerging therapies into the management of recurrent NTM-LD.
- 495 attendees in multiple professional specialties were reached via both live onsite and online formats
- Improvement across all learning domains was noted ranging from 38% to 650%



Overall, the program improved the ability of learners to diagnose patients with NTM-LD and recommend appropriate treatment options.

Persistent Educational Gaps

- . Though improvements were observed, learners demonstrated score slippage on the PCA indicating persistent gaps in several areas including:
 - Common isolates and risk factors for NTM-LD
 - Diagnostic evaluation and laboratory testing for NTM-LD
 - Pharmacotherapy recommendations for initial and recurrent NTM-LD

The post-test scores regarding the evaluation management of patients with NTM-LD signifies a clear gap in knowledge and an unmet need among clinicians. It continues to be an important area for future educational programs.

Learning Objectives

- Outline the epidemiology and risk factors for NTM-LD.
- Describe an approach to the diagnosis of NTM-LD.
- Discuss expert recommendations for the treatment of NTM-LD.
- Summarize the data on emerging therapies for NTM-LD.



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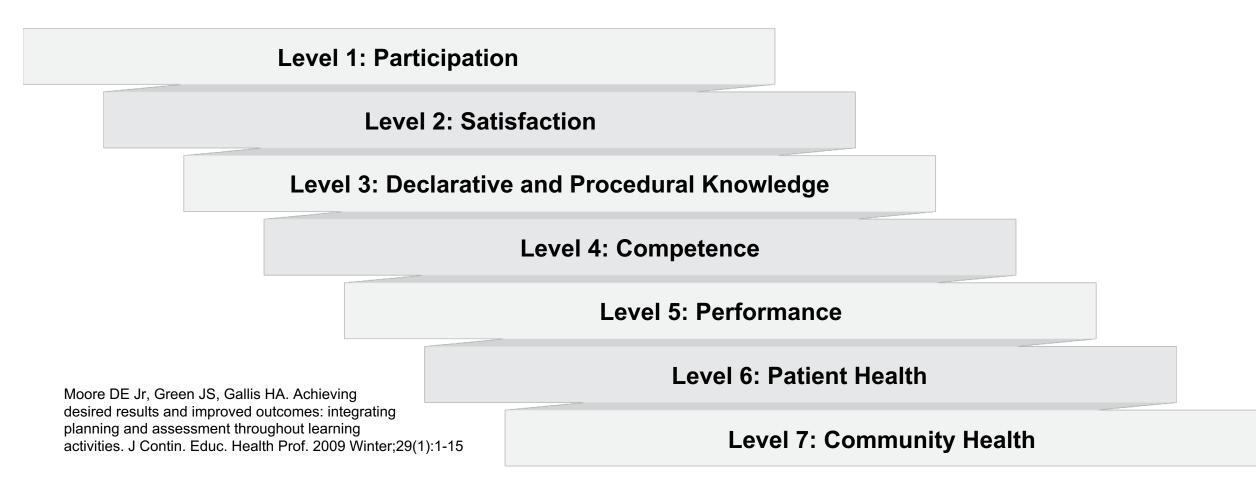
The Challenges in Pulmonary and Critical Care: 2018 CME activity was supported through educational grants or donations from the following companies:

- ❖ Bayer HealthCare Pharmaceuticals, Inc.
- Actelion Pharmaceuticals US, Inc.
- ❖ Boehringer Ingelheim Pharmaceuticals, Inc.
- CSL Behring, LLC.
- Grifols
- Insmed
- Mallinckrodt Pharmaceuticals, LLC

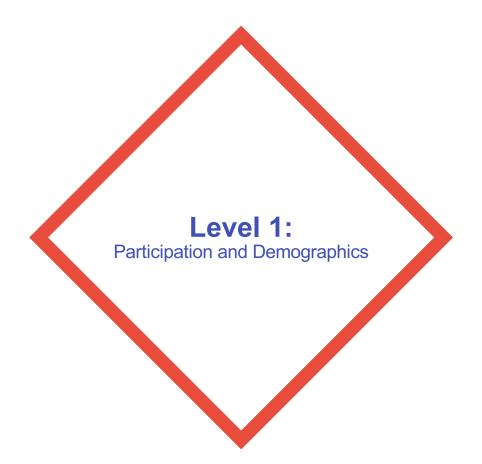


Levels of Evaluation

Consistent with the policies of the ACCME, NACE evaluates the effectiveness of all CME activities using a systematic process based on Moore's model. This outcome study reaches Level 5.









Level 1:Participation



December 1, 2018 Fort Lauderdale, FL



90%

Provide direct patient care



495 total attendees



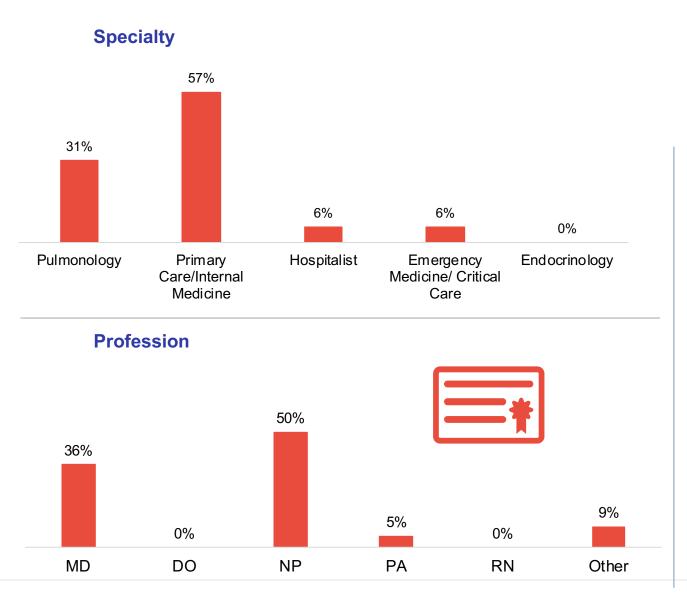
On site: 113 attendees



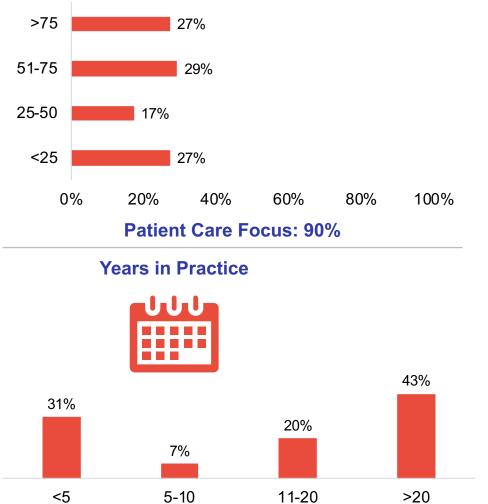
National online simulcast: 382 attendees



Level 1: Demographics and Patient Reach



Patients seen each week, in any clinical setting:









Level 2: Satisfaction



99% rated the activity as excellent



99% indicated the activity improved their knowledge



97% stated that they learned new and useful strategies for patient care



91% said they would implement new strategies that they learned



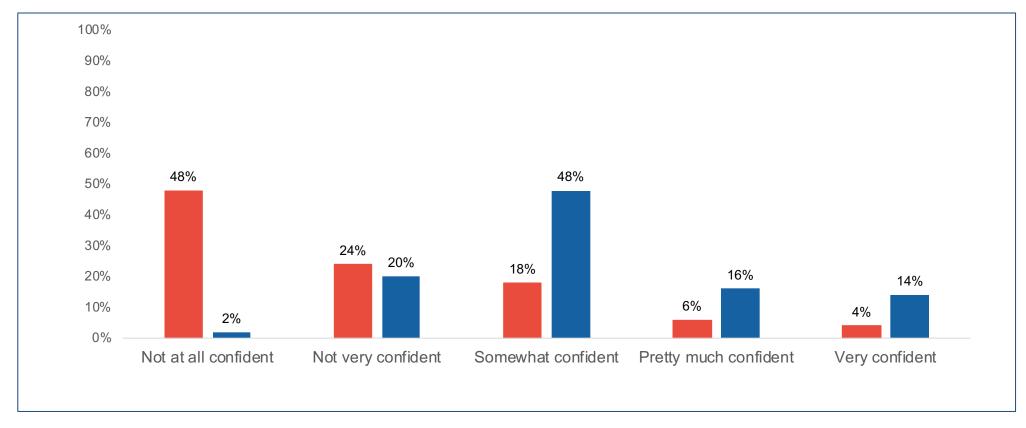
100% said the program was fair-balanced and unbiased



Confidence Assessment

Please rate your confidence in your ability to manage patients with Nontuberculous Mycobacterial Lung Disease:

(Learning Objectives 2,3)

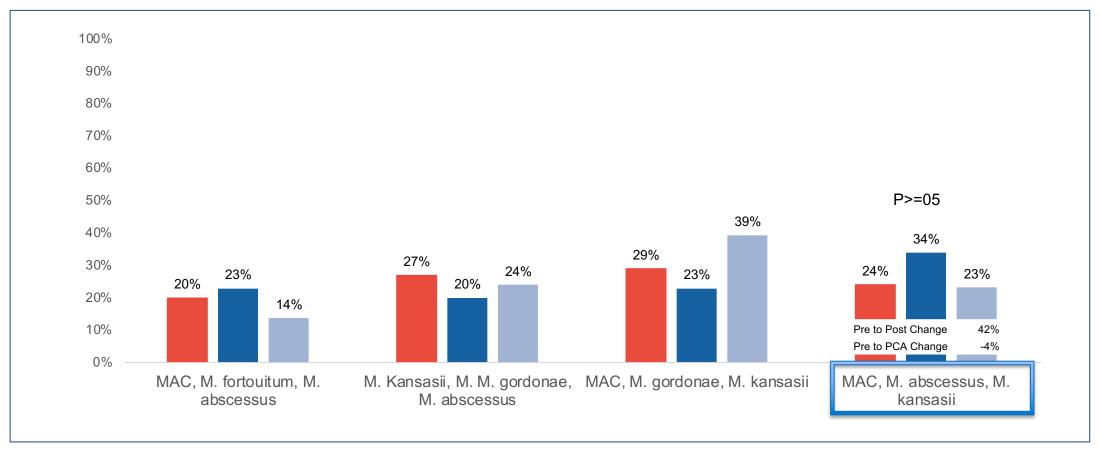




Knowledge Assessment

What are the most common isolates of pulmonary NTM (Non-Tuberculous Mycobacterial) infections in the US?

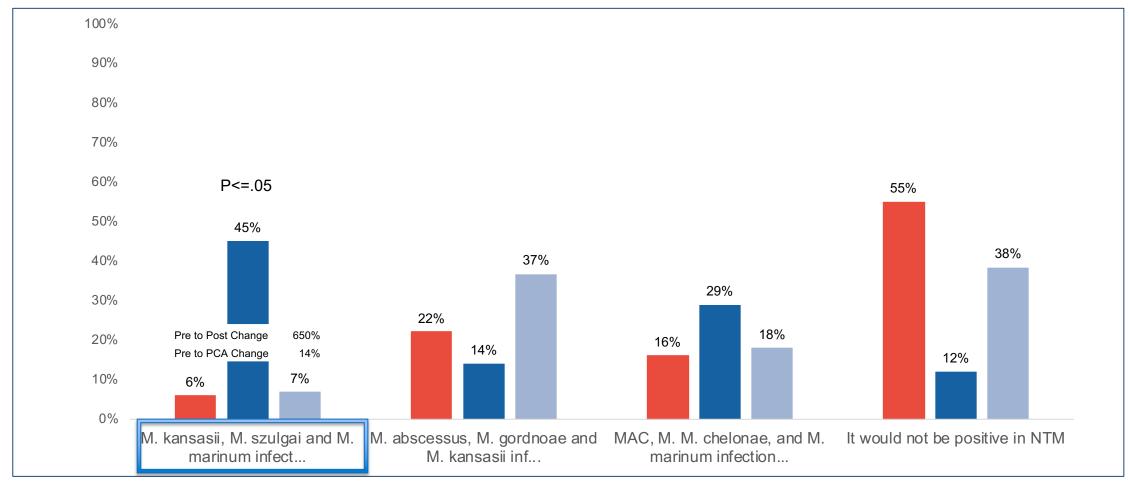
(Learning Objective 1)





Knowledge Assessment

A Quantiferon-TB Gold test may be false positive in which of the following NTM infections? (Learning Objective 2)

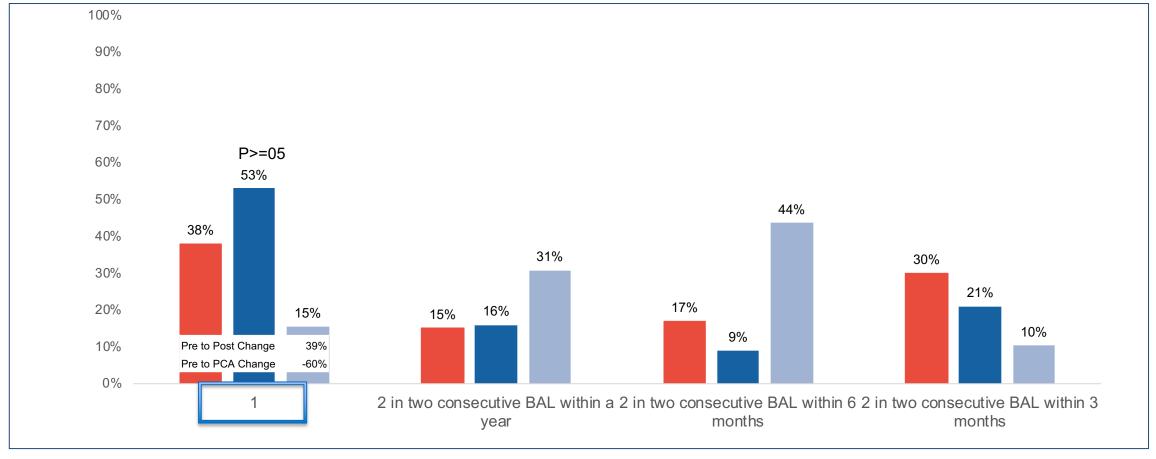




Knowledge Assessment

How many times does NTM need to be isolated from a BAL (Bronchoalveolar Lavage) specimen to the meet diagnostic criteria for pulmonary NTM?

(Learning Objective 2)

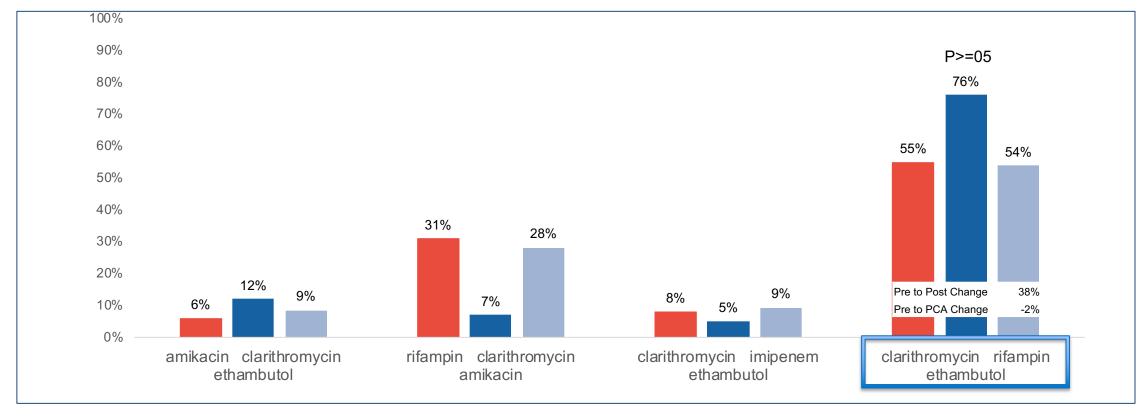




Competence Assessment

68 y/o female with history of bronchiectasis presents with a persistent cough productive of tan sputum, fatigue, increased dyspnea and night sweats. A BAL culture yields MAC. What would you recommend as the best initial treatment option for this patient?

(Learning Objective 3)

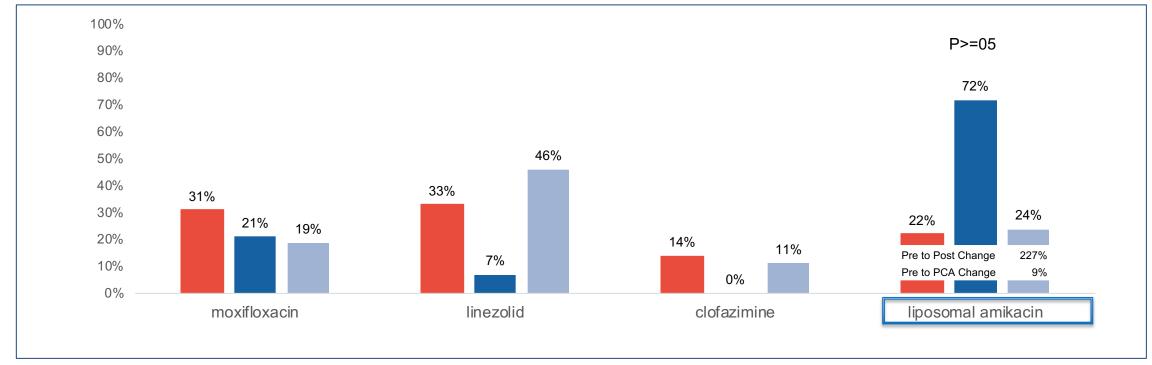




Competence Assessment

62 y/o male with history of COPD presents for MAC treatment. He had 3 COPD exacerbations in the last 6 months. MAC was diagnosed after bronchoscopy and treatment has initiated with macrolide, rifampin, and ethambutol for 7 months. He still is symptomatic and MAC has been recurrently isolated from sputum in the last month. What would you recommend as the best additional treatment option for this patient?

(Learning Objective 4)

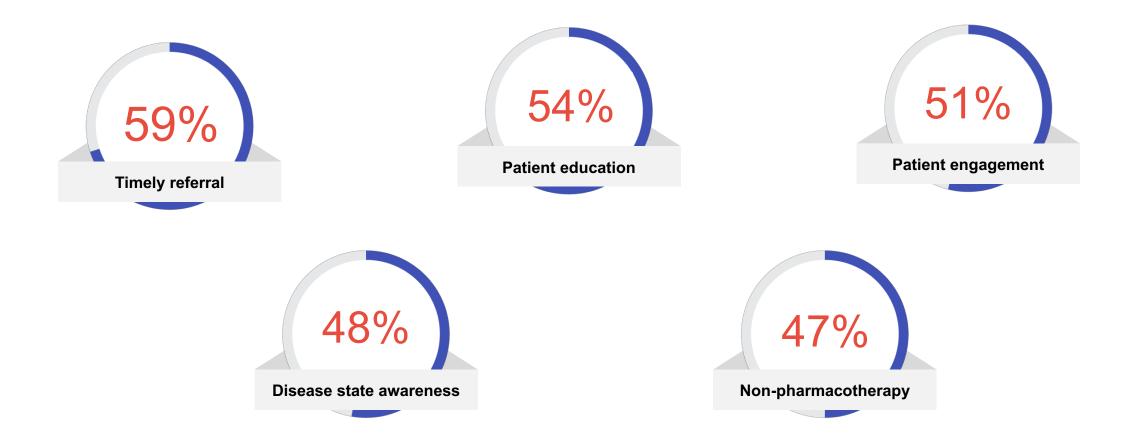




(4-week Post Assessment)

Please select the specific areas of *skills, or practice behaviors*, you have improved regarding the screening, diagnosis and treatment of NTM-LD since this CME activity. (Select all that apply.)

N=117

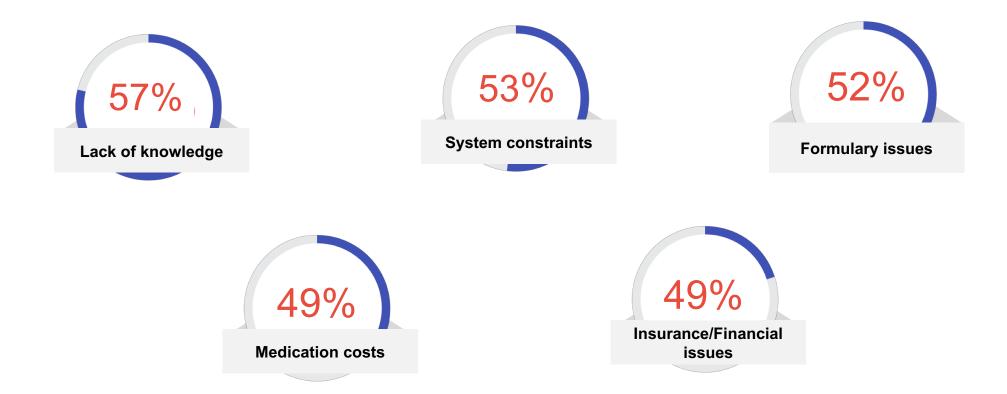




(4-week Post Assessment)

What specific *barriers* have you encountered that may have prevented you from successfully implementing screening, diagnosis and treatment of NTM-LD since this CME activity? (Select all that apply)

N=117





Participant Educational Gains

650% increase in awareness of the usefulness of Quantiferon-TB Gold in diagnosing NTM infections

-\(\frac{1}{2}\)

38% more competent in prescribing appropriate initial therapy for a patient with Mycobacterium avium complex infection

39% increase in awareness of the number of isolates from a BAL (Bronchoalveolar Lavage) specimen is required to the meet diagnostic criteria for pulmonary NTM

227% increased recognition of the role of liposomal amikacin in the treatment of recurrent MAC



Persistent Educational Gaps After 4 Weeks

Common isolates and risk factors for NTM-LD



Diagnostic evaluation and laboratory testing for NTM-LD

Initial pharmacotherapy recommendations for NTM-LD

Treatment strategies for NTM recurrence and reinfection



Key Take-home Points

Increased familiarity with the most common isolates of Non-Tuberculous Mycobacterial infections though this did not achieve statistical significance

Improved confidence in ability to manage patients with Nontuberculous Mycobacterial Lung Disease

After 4 weeks, the following improved skills were reported regarding the screening, diagnosis and treatment of NTM-LD: 59% timely referral, 54% patient education and 51% patient engagement

Gains were seen across all learning domains after the activity but score slippage after 4 weeks reinforces the need for continued education on the diagnosis and management of NTM-LD.

