



CONVERSATIONS IN PRIMARY CARE

NACE

Live Virtual Conferences



Addressing the Challenges of Acne

Final Live Outcomes Report for Galderma – Grant #591
April 1, 2020



Executive Summary

- ❖ This activity focused on helping learners to understand the evolving pathophysiology of acne, how to target therapy to disease severity, and minimize scarring.
- ❖ 835 attendees in multiple professional specialties were reached in this program.
- ❖ Improvement across all learning domains was noted ranging from 19% to 129%. Overall, the program improved the ability of learners to care for patients with Acne.



835
Total
Attendees



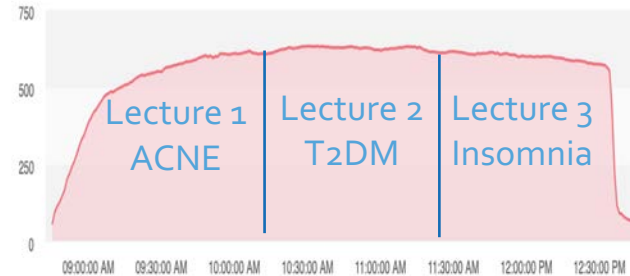
One Live Online
Broadcast

Engagement

Activity Date: Saturday, December 7, 2019

- ❖ 3.0 hour CME/CE live online CME/CE Activity
- ❖ Average of 634 learners online throughout the day
- ❖ 16,050 pre/post test responses – 47% avg response rate
- ❖ 169 Attendee questions for the Faculty

Attendance Timeline



619 out of 835 live attendees (74%) achieved an engagement score of 9/10 or 10/10

Persistent Gaps

- ❖ Though improvements were observed, learners demonstrated persistent gaps in the several areas including:
 - ❖ Recognition of the pathophysiology and clinical presentation of acne
 - ❖ Matching therapy to disease severity and scar prevention strategies

The post-test and 4 week follow up scores regarding the management of patients with Acne, signifies a clear gap in knowledge and an unmet need among clinicians. It continues to be an important area for future educational programs.

Overview

Learning Objectives

- ❖ Summarize the pathophysiology and risk factors for acne vulgaris
- ❖ Describe the clinical presentation of acne vulgaris including racial differences
- ❖ Incorporate current treatment approaches for mild, moderate and severe acne into clinical practice
- ❖ Utilize scar prevention strategies in patients with acne vulgaris

Course Director

Gregg Sherman, MD

Chief Medical Officer

National Association for Continuing
Education

Plantation, FL

Faculty

Mercedes E. Gonzalez, M.D.

Medical Director, Pediatric Dermatology of Miami

Clinical Assistant Professor | Dr. Phillip Frost Department of
Dermatology

University of Miami Miller School of Medicine and Clinical Assistant
Professor Herbert Wertheim College of Medicine, Florida
International University

Miami, FL

Activity Planning Committee

Gregg Sherman, MD

Michelle Frisch, MPH, CCMEP

Sandy Bihlmeyer M.Ed

Daniela Hiedra

Joshua F. Kilbridge

Deborah Paschal, CRNP

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

Level 2: Satisfaction

Level 3: Declarative and Procedural Knowledge

Level 4: Competence

Level 5: Performance

Level 6: Patient Health

Level 7: Community Health

Moore DE Jr, Green JS, Gallis HA. Achieving desired results and improved outcomes: integrating planning and assessment throughout learning activities. *J Contin. Educ. Health Prof.* 2009 Winter;29(1):1-15



Level 1:
Demographics & Patient Reach

2019 Conversations in Primary Care Participation and Engagement Summary

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835
Total Live Attendees

Persistent Live Audience Engagement

619 of 835 live attendees (74%) Engagement Score = 9/10



Polls Answered



Surveys Submitted



Resources Viewed



Widgets Opened



Time in Webcast



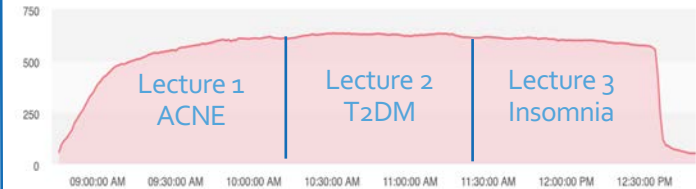
Questions Asked

Engagement Score Index Contributors:

- ❖ Length of time watching the webcast (up to 4.5)
- ❖ Number of ARS Questions answered (up to 2.0)
- ❖ Number of questions asked (up to 1.5)
- ❖ Number of complementary resources viewed (up to 1.0)
- ❖ Number of widgets opened on the console (up to 1.0)

Attendance Timeline

Attendance Timeline



Slide Set Downloads

Resources

Addressing the Challenges of Acne



Course Handbook



Leveraging GLP-1 Receptor Agonist Options to Advance Glycemic and Extraglycemic Goals in Type 2 Diabetes

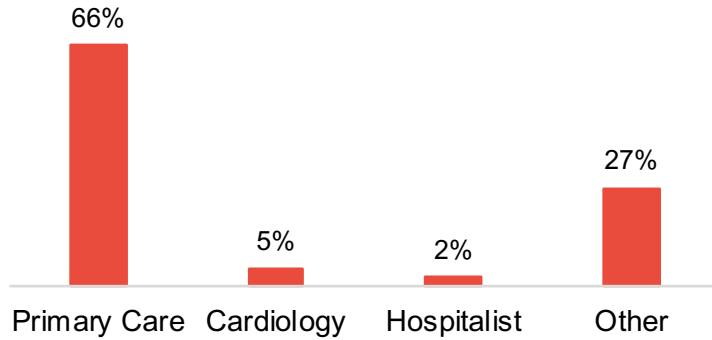


Impacting Insomnia in Practice to Improve Quality of Life

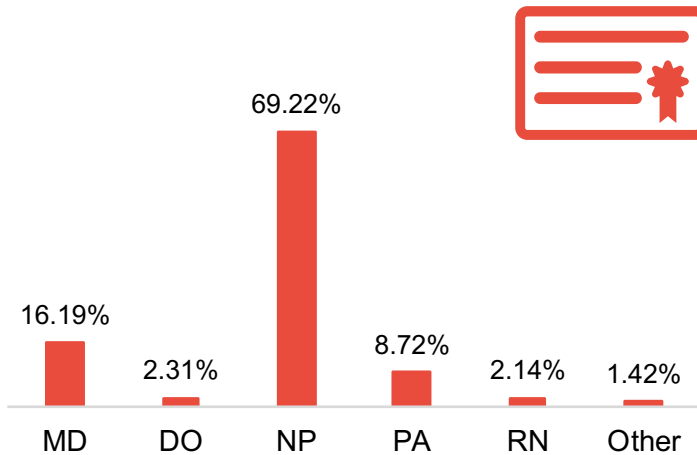


Level 1: Participation

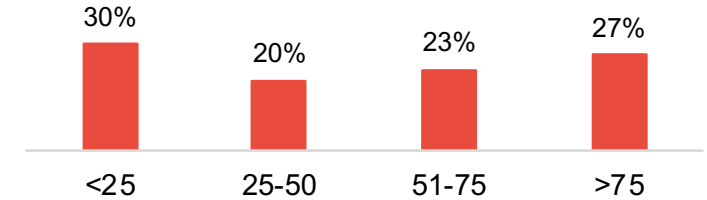
Specialty



Profession

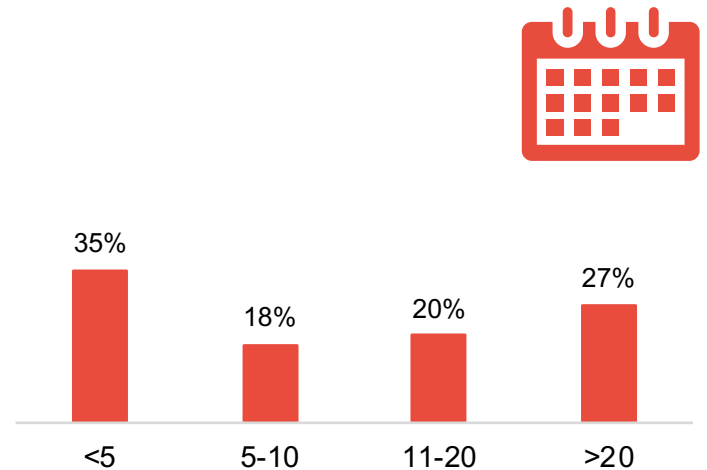


Number of patients you personally see each week, in any clinical setting



Patient Care Focus: 92%

Years in Practice



Approximate Acne patient reach = 3750 patients per week



Level 2-5
Outcomes Metrics

Level 2 (Satisfaction)



99% rated the activity as excellent



98% indicated the activity improved their knowledge



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



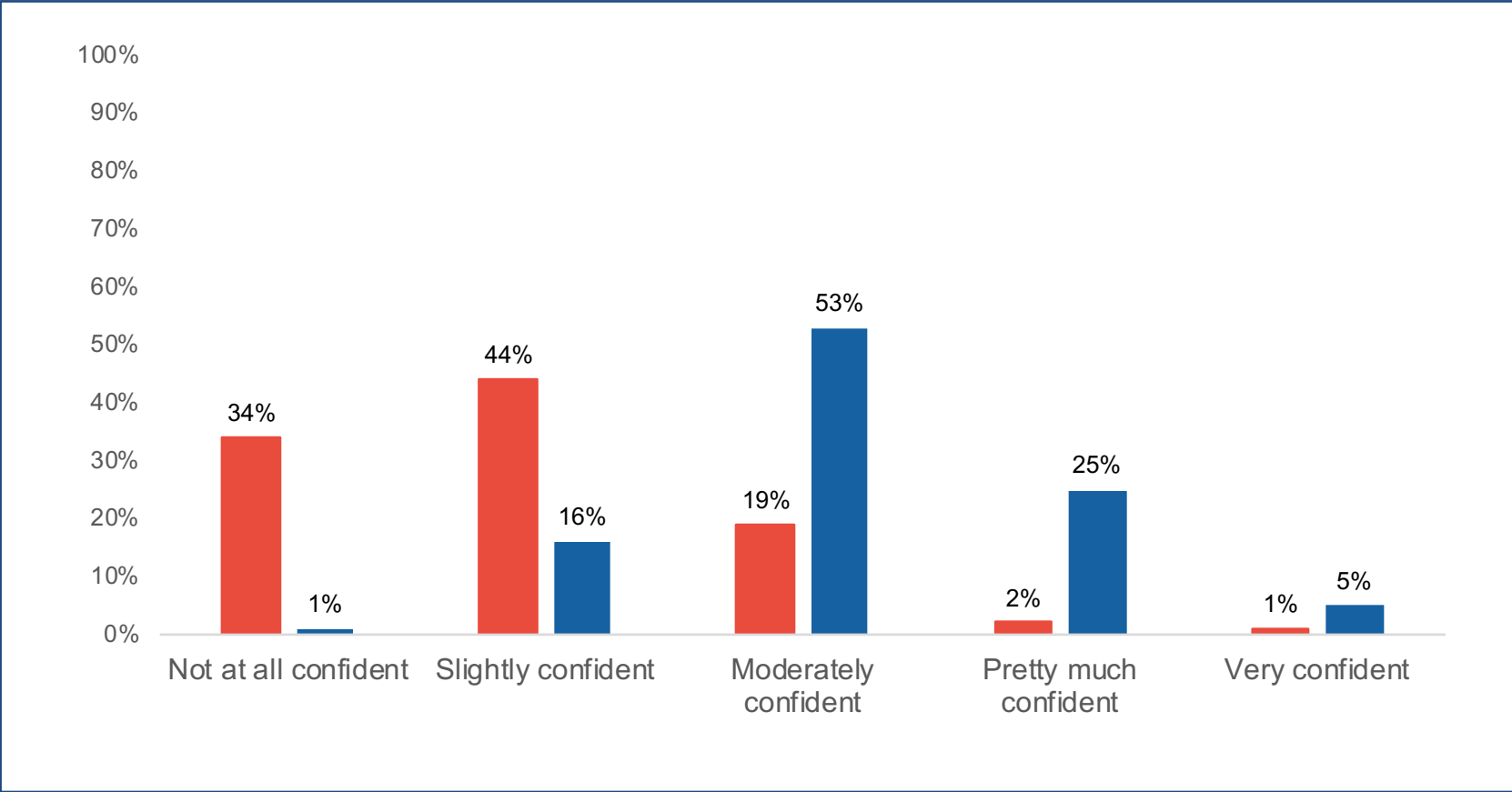
92% said they would implement new strategies that they learned



98% said the program was fair-balanced and unbiased

How confident are you in your ability to match acne therapy to severity of disease?

Learning Domain: Confidence

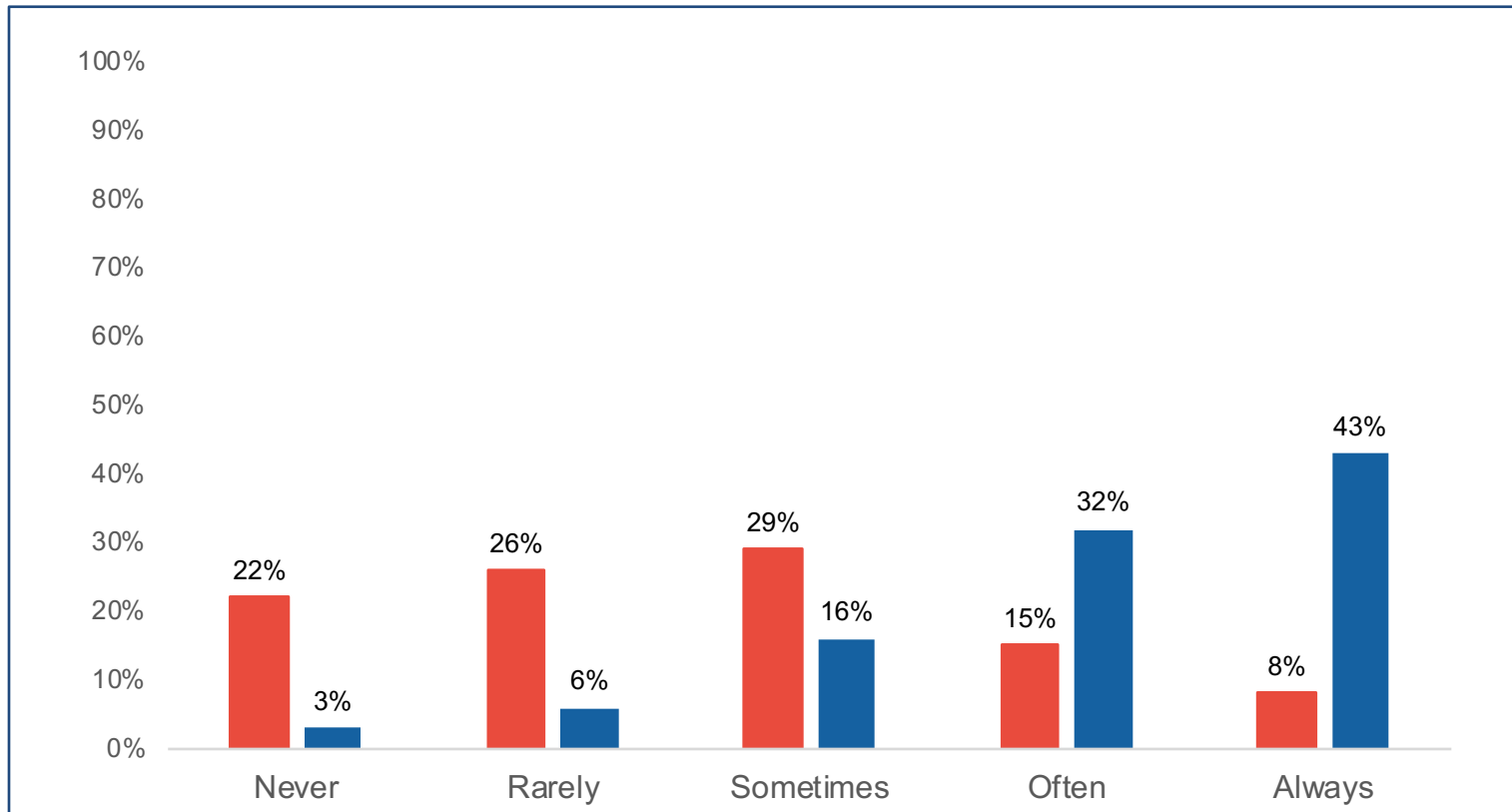


N = Pre: 352 Post: 324



How often do you use strategies to prevent scarring in patients with acne?

Learning Domain: Practice

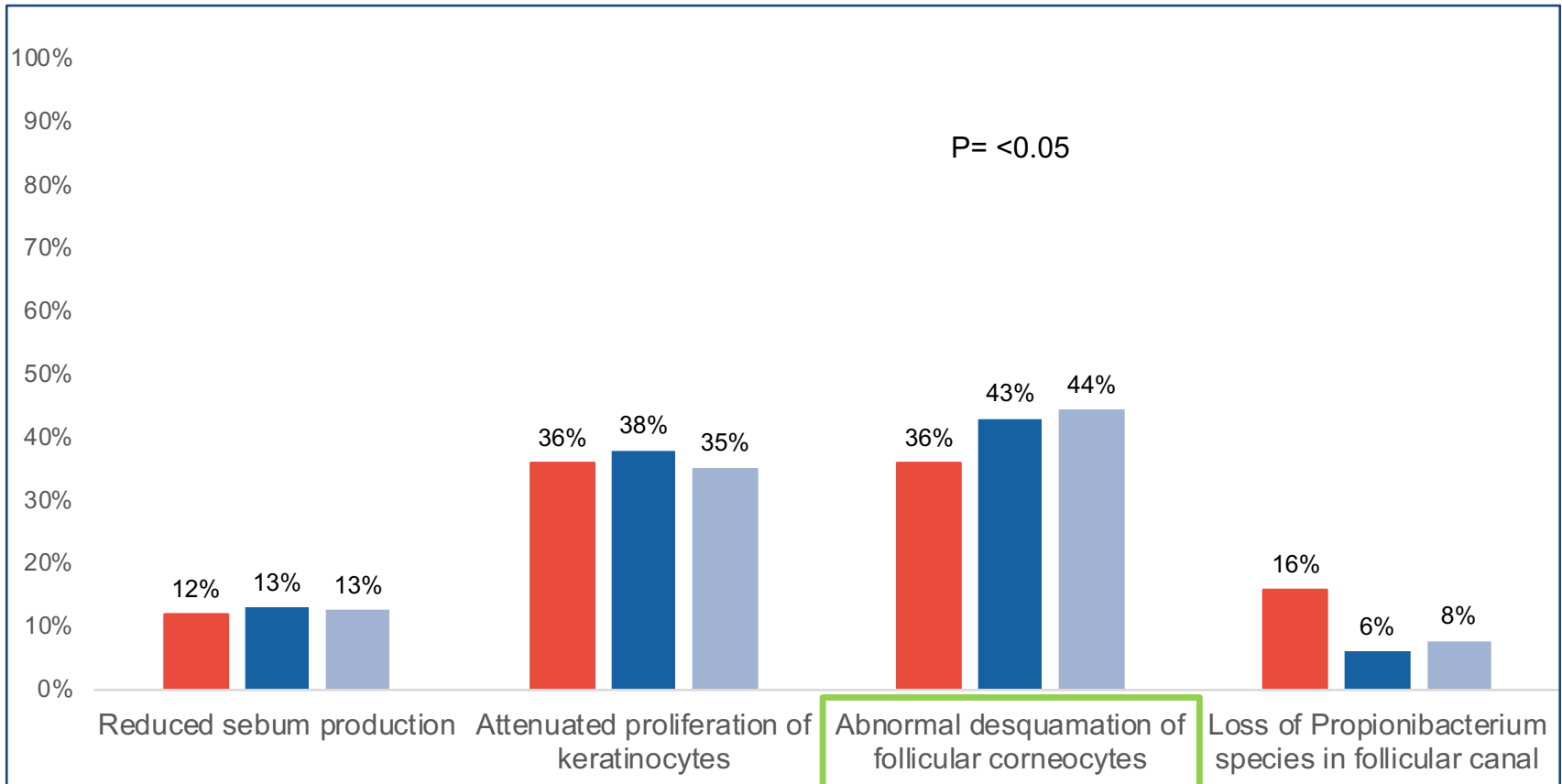


N = Pre: 339 Post: 326

Which of the following is a key mechanism in the pathogenesis of acne?

Learning Domain: Knowledge

Learning Objective: 1



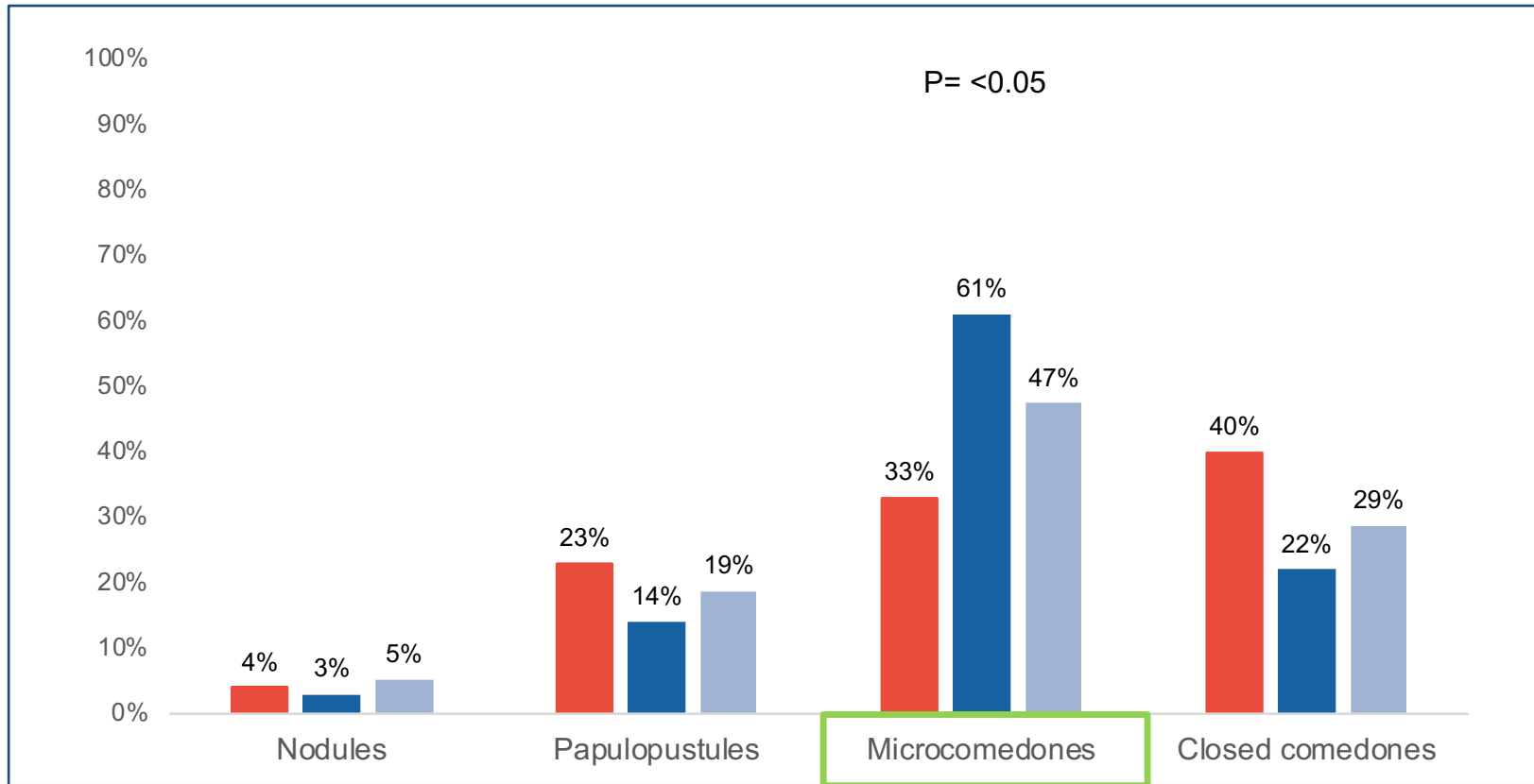
N = Pre: 311 Post: 349 PCA: 230

Pre to Post Change 19%

Pre to PCA Change 22%

Which of the following are precursor lesions in the pathogenesis of acne?

Learning Domain: Knowledge
Learning Objectives: 2



N = Pre: 330 Post: 334 PCA: 230

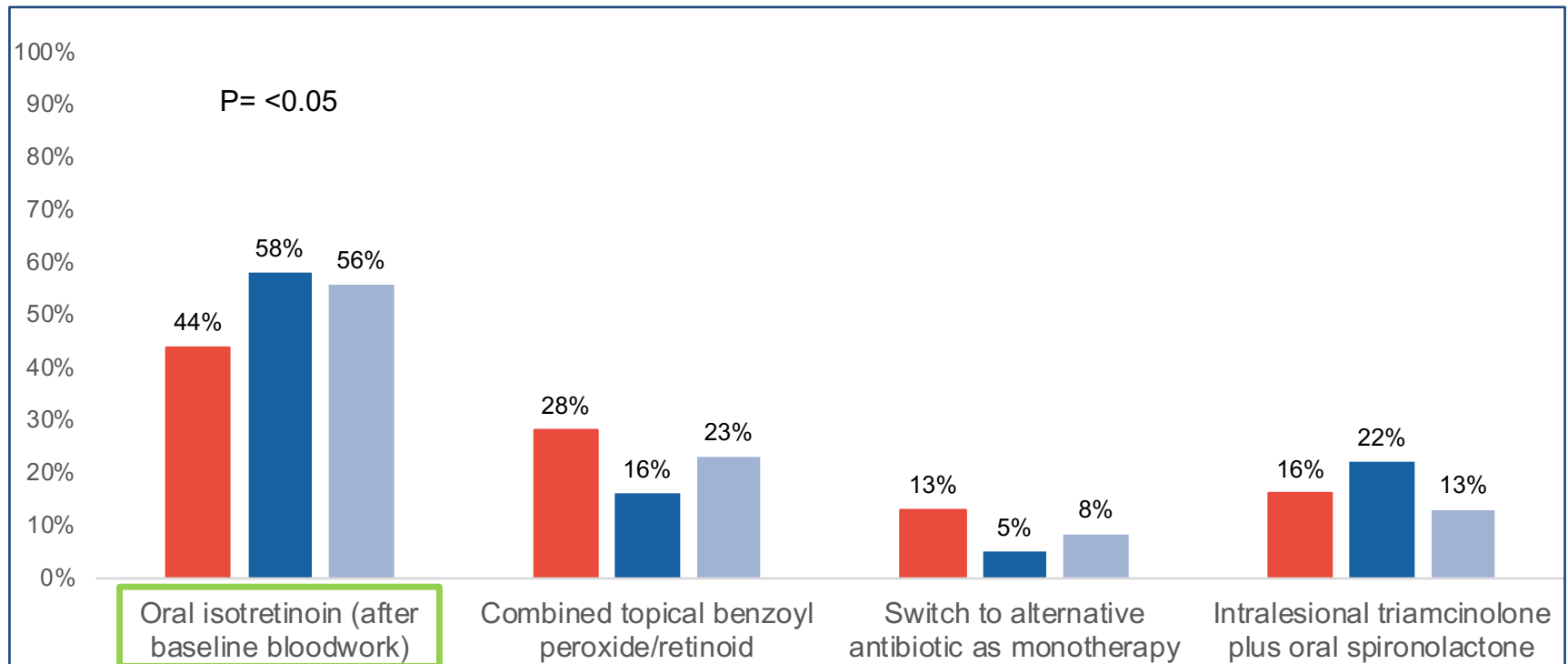
Pre to Post Change	85%
Pre to PCA Change	42%

19 y/o man with history of acne since puberty presents with numerous painful cysts, inflammatory papules/pustules, open and closed comedones on face and back. Previous Rx: Topical antibiotics, topical retinoids, Current Rx: Oral antibiotics, topical retinoid. When stops antibiotics, acne flares.

What might be an appropriate next step in treatment for this patient?

Learning Domain: Competence

Learning Objectives: 3



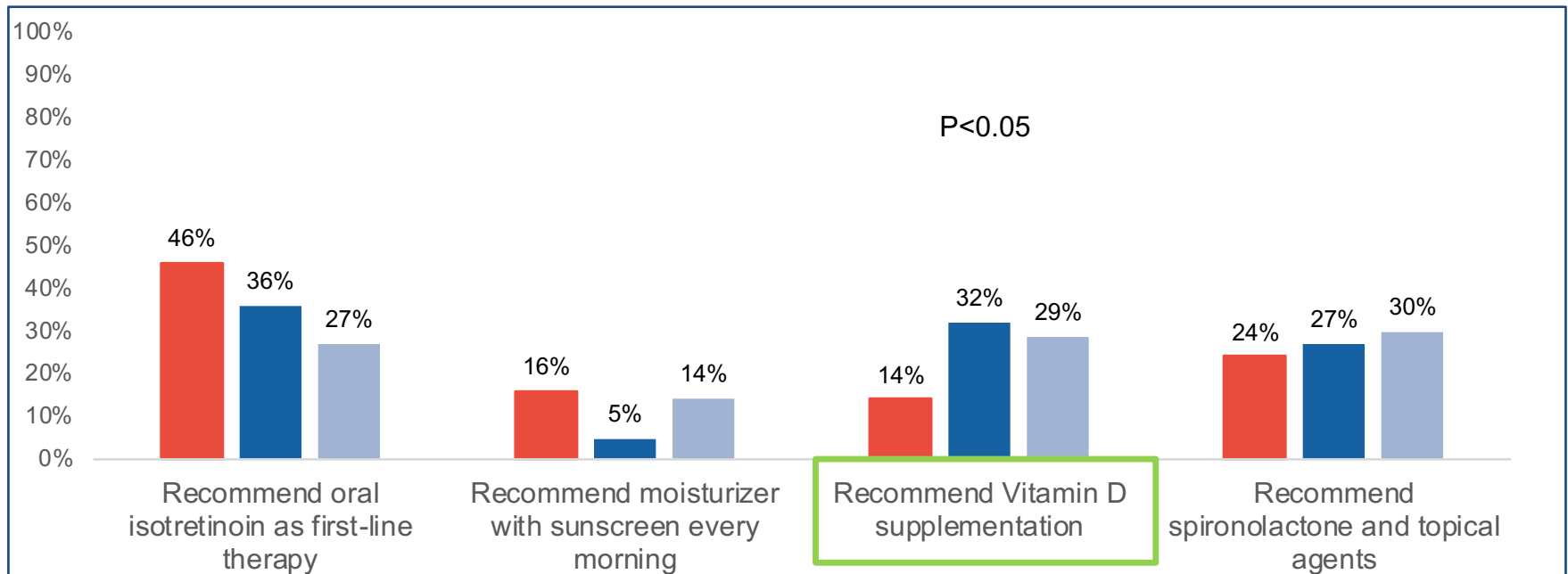
Pre to Post Change	32%
Pre to PCA Change	27%

N = Pre: 329 Post: 315 PCA: 230

35 y/o woman presents with recent worsening of acne. Had acne in puberty, then resolved until recently. Acne worsens around menses. No other medical history. Examination identifies moderate inflammatory lesions on chin and forehead. She says she is more worried about scarring and hyperpigmentation than she is about the acne.

All of the following strategies may be appropriate for this patient and reduce risk for scarring except?

Learning Domain: Competence
 Learning Objectives: 2, 3, 4



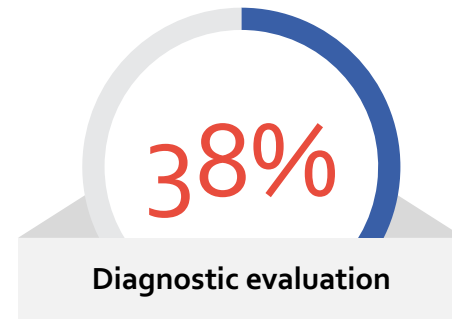
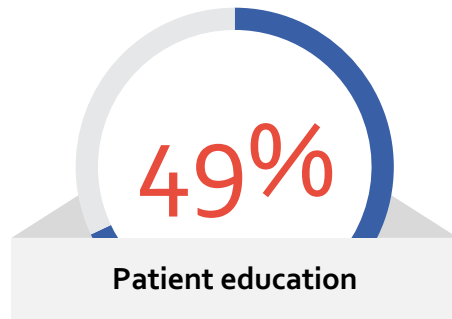
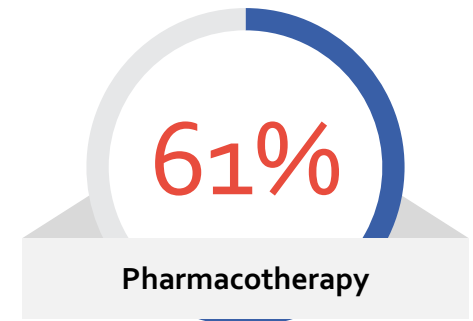
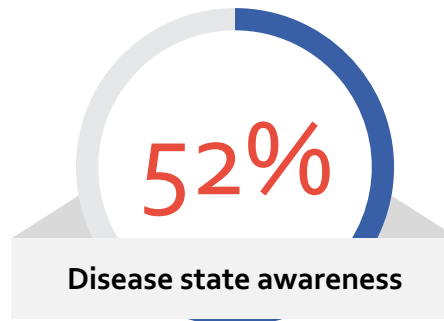
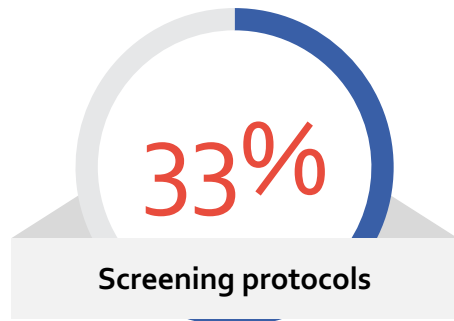
N = Pre: 342 Post: 344 PCA: 230

Pre to Post Change	129%
Pre to PCA Change	107%

(4-week Post Assessment)

Please select the specific areas of skills, or practice behaviors, you have improved regarding the treatment of patients with acne since this CME activity.

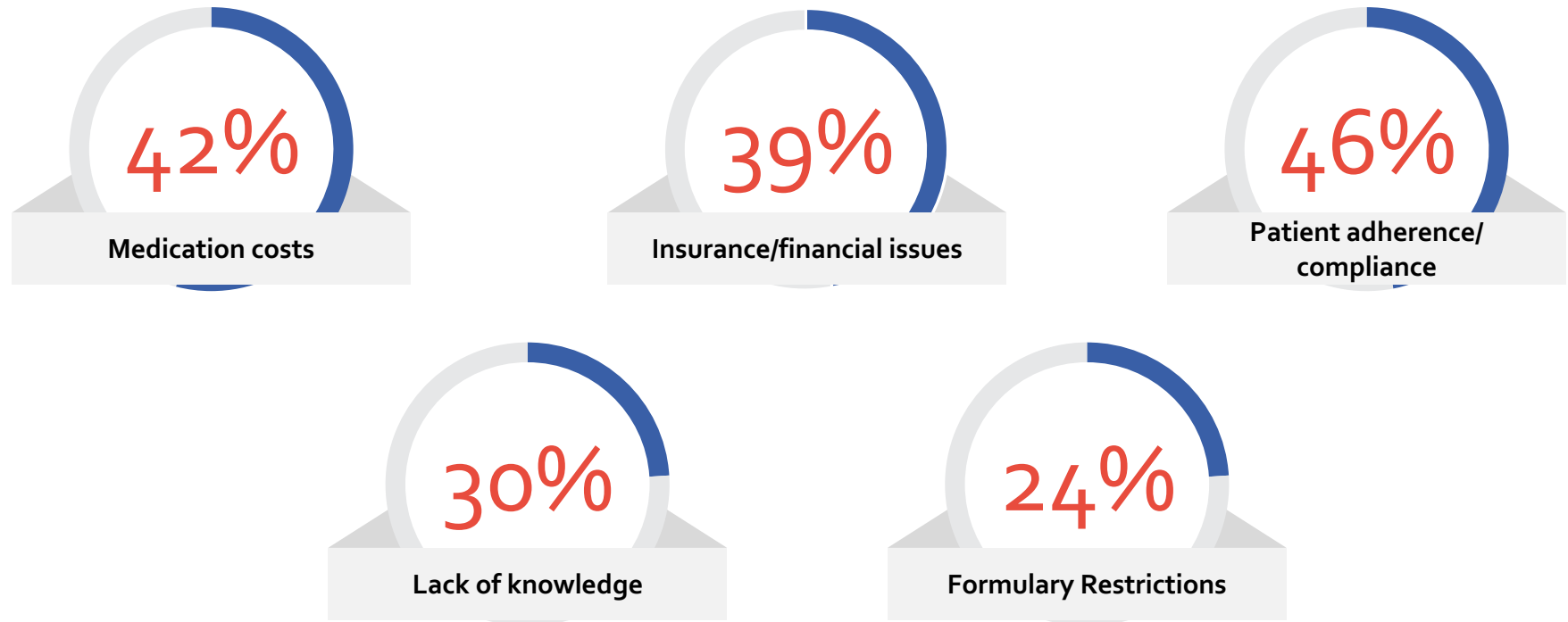
(Select all that apply.)



Sample Size: N = 230

(4-week Post Assessment)

What specific barriers have you encountered that may have prevented you from successfully implementing strategies for patients with acne since this CME activity? (Select all that apply)



Sample Size: N = 230

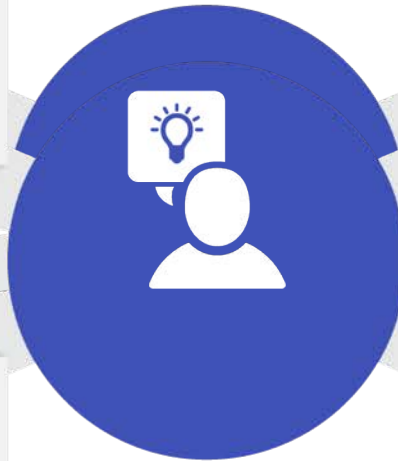
Participant Educational Gains

Improved recognition in the pathogenesis of Acne

Greater awareness of the clinical presentation and precursor lesions in the development of acne

Increased competence in identifying appropriate treatment for a patient with acne

Greater awareness of scar prevention strategies in the management of acne



Persistent Educational Gaps After 4 Weeks

Recognition of the pathophysiology of acne

Clinical presentation of acne

Scar prevention strategies

Competence and Confidence levels in the ability to match therapy to severity of disease remain low



Key Take-home Points

Participants in this program care for approximately 3,750 patients with acne weekly or 195,000 patients on a yearly basis.

After 4 weeks, participants reported improved skills regarding the treatment of patients with Acne: 61% pharmacotherapy, 52% disease state awareness, and 49% patient education

92% of learners are engaged in direct patient care and 91% reported that they will implement new strategies they learned

Significant reduction in learners reporting being not at all or slightly confident in their ability to match acne therapy to severity of disease.

