#### **Challenges in Pulmonary and Critical Care: 2020**

**Final Live Outcome Report** 



# Sarcoidosis: New Paradigms of Therapy

ST Shared Services LLC Grant ID : MED-PUL-2306

February 9, 2021



## **Executive Summary**

This activity focused on deepening understanding of the pathophysiology of sarcoidosis, and incorporating current methodologies into diagnosis and management, including consideration of patient phenotypes, extent of disease, and responsiveness of disease to treatment, to enhance selection of appropriate treatment strategies.

- 548 attendees in multiple professional specialties were reached in this program.
- Improvement across all learning domains was noted ranging from 21% to 113%.







**1** Live Virtual Broadcast

Overall, the program improved the ability of learners to recognize the patient phenotypes associated with sarcoidosis; identify disease characteristics leading to appropriate diagnostic and treatment strategies; and identify appropriate treatment based on extent of disease.

#### **Persistent Educational Gaps**

Despite educational gains, PCA scores demonstrate some loss of these educational gains over time:

- Recognition of systemic features of sarcoidosis requiring systemic therapy
- Identifying appropriate treatment for patients with worsening symptoms.

Significant baseline educational gaps in pre-activity learners were noted:

- Only 10% identified Caucasian females as the phenotype most closely associated with sarcoidosis in the US
- Only 44% correctly utilized patient data to determine appropriate next diagnostic steps
- Only 30% identified complete heart block as the feature of sarcoidosis for which consensus dictates that systemic therapy should be initiated
- Only 29% correctly initiated therapies for worsening symptoms in a patient with sarcoidosis.

These findings represent clear gap in knowledge and an unmet need among clinicians, underscoring that this topic continues to be an important area for future educational programs.



## **Learning Objectives**

- Describe the pathophysiology and the epidemiology of sarcoidosis
- Incorporate up-to-date methodology to accurately diagnosis sarcoidosis
- Recognize the impact of patient phenotypes in the management of sarcoidosis
- Provide appropriate treatment for patients with sarcoidosis based on the extent and responsiveness of their disease



#### **Course Director**

#### Franck Rahaghi, MD, MHS, FCCP

Director of Advanced Lung Disease Clinic Director, Pulmonary Hypertension Clinic Chairman, Dept. of Pulmonary and Critical Care Cleveland Clinic Florida Weston, FL

#### **Activity Planning Committee**

Gregg Sherman, MD

Michelle Frisch, MPH, CCMEP

Sandy Bihlmeyer M.Ed

Sheila Lucas, CWEP

Franck Rahaghi, MD, MHS, FCCP

Laurl Ann Matey, MSN, RN-BC, CHPN

Joshua F. Kilbridge

Cedric Nazareth, MBBS

Angela Golden, DNP, FNP-C, FAANP

#### Faculty

Robert Baughman, MD University of Cincinnati Medical Center University of Cincinnati Cincinnati, OH



## **Commercial Support**

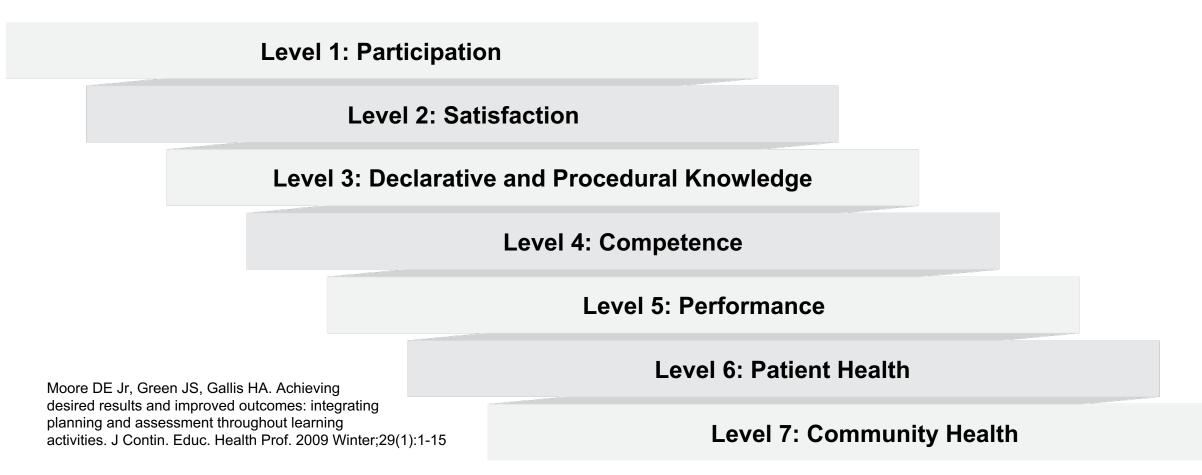
The Challenges in Pulmonary and Critical Care 2020 CME activity was supported through educational grants or donations from the following companies:

- Actelion Pharmaceuticals US, Inc.
- AstraZeneca Pharmaceuticals
- Bayer HealthCare Pharmaceuticals Inc.
- Grifols
- Jazz Pharmaceuticals, Inc.
- ST Shared Services LLC

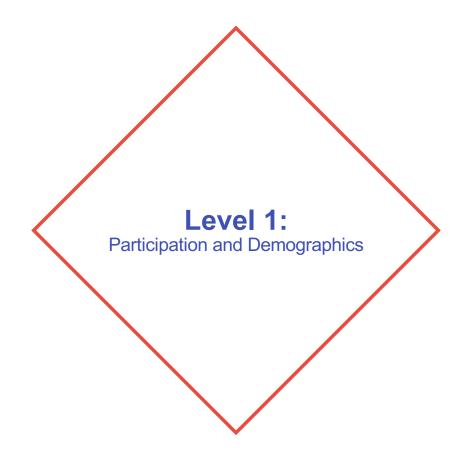


## **Levels of Evaluation**

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**



### 548 total attendees



## 1 Live Virtual Broadcast

Activity	Date	Attendees
Challenges in Pulmonary and Critical Care	12/12/2020	548
Total		548



## 95%

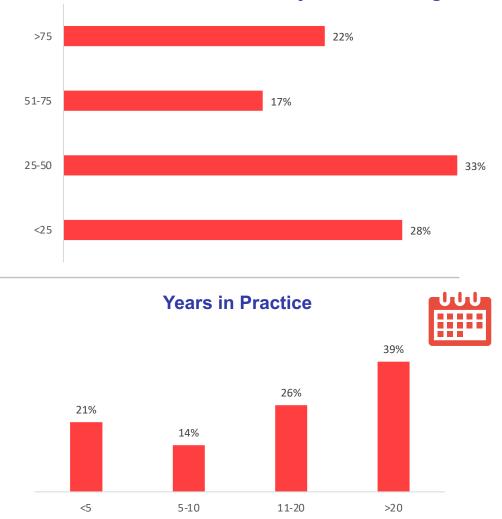
Provide direct patient care



### **Level 1: Demographics and Patient Reach**



#### Patients seen each week, in any clinical setting:









## **Level 2: Satisfaction**



97% rated the activity as excellent



98% indicated the activity improved their knowledge



95% stated that they learned new and useful strategies for patient care



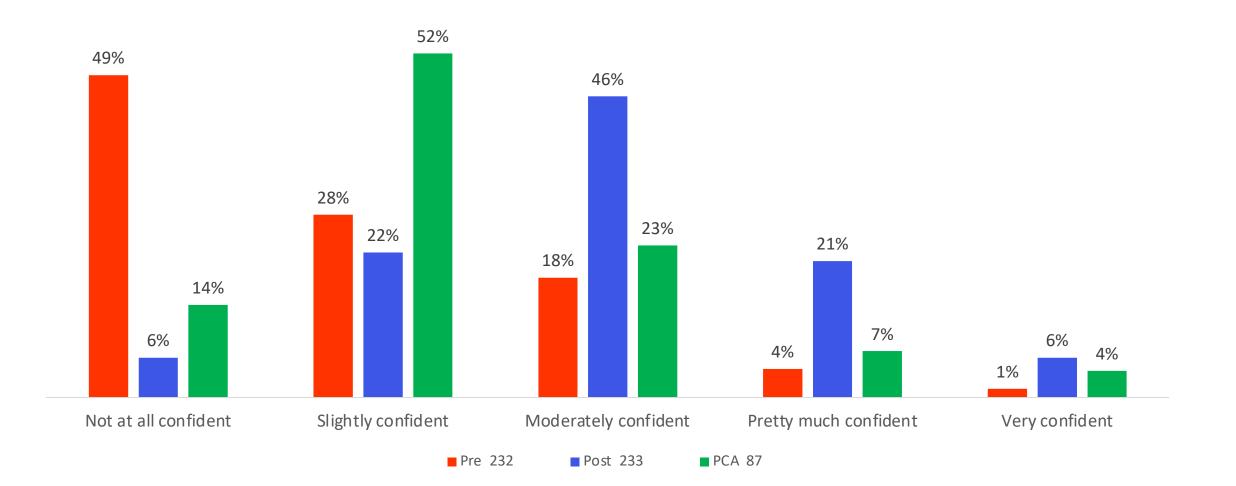
86% said they would implement new strategies that they learned



97% said the program was fair-balanced and unbiased

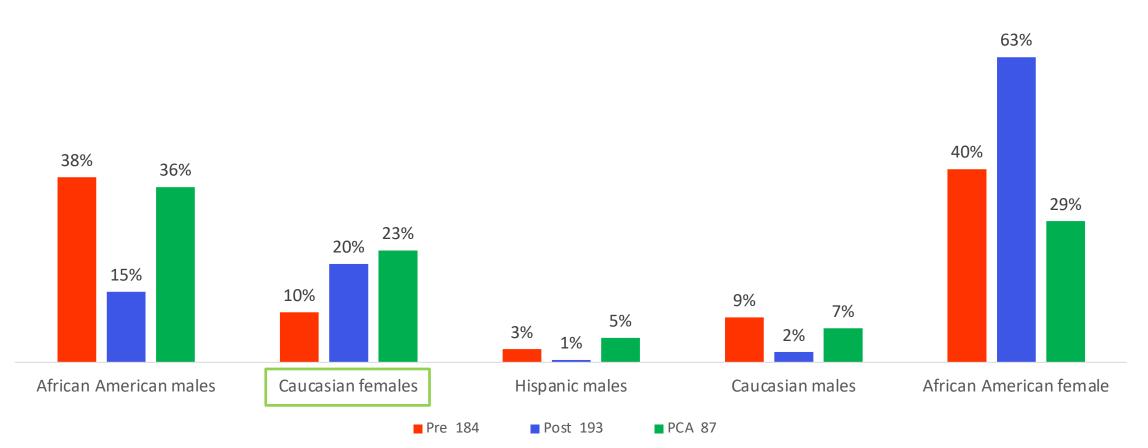


#### Confidence Assessment How confident are you in your ability to treat sarcoidosis?





# In the United States, which group has the highest number of sarcoidosis cases?



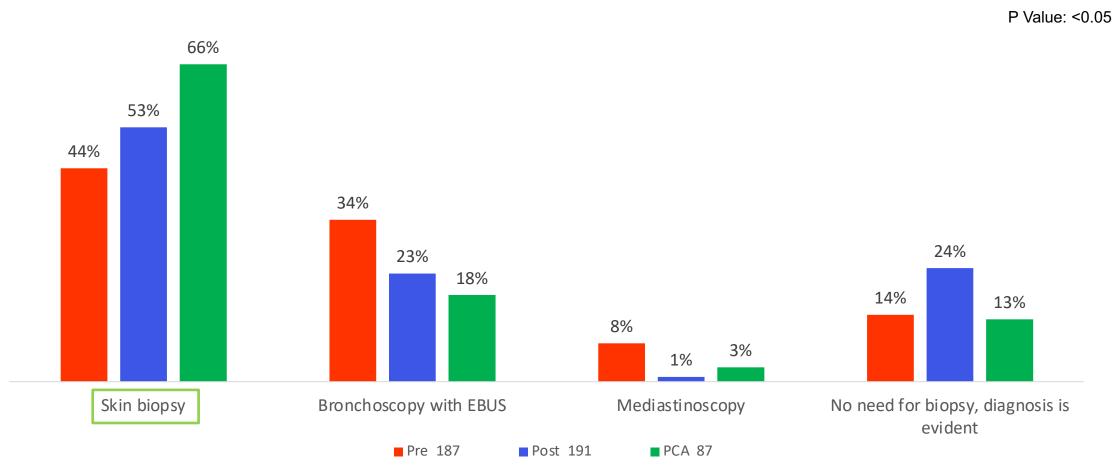
P Value: <0.05

Pre-Post Change	100%
Pre-PCA Change	130%



#### Knowledge Assessment

## In a patient with this chest x-ray and skin lesion, what is safest next step to make a diagnosis?

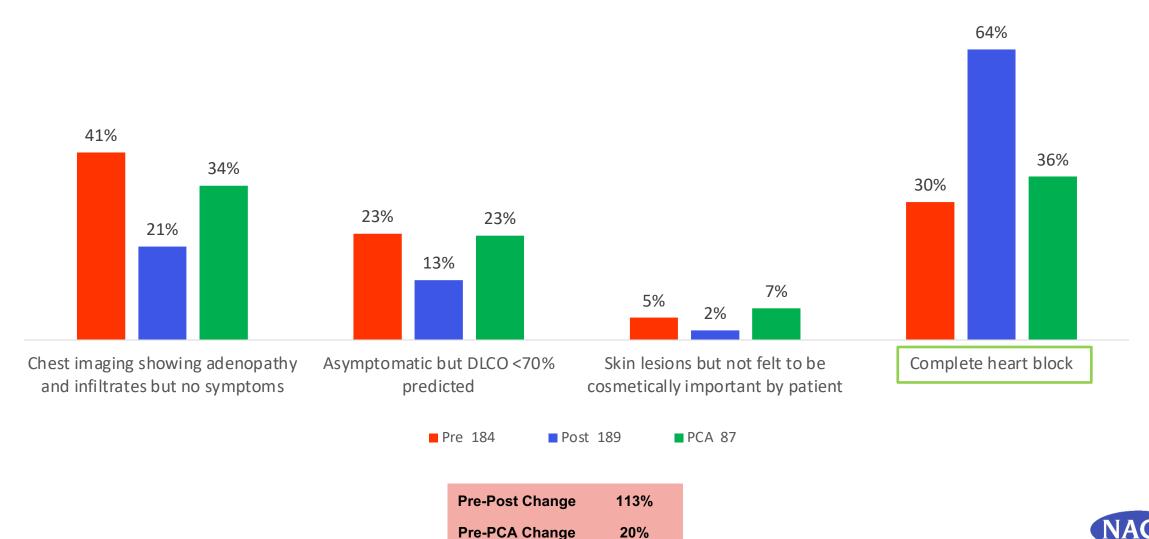


Pre-Post Change	21%
Pre-PCA Change	50%



#### Knowledge Assessment

## For which feature of sarcoidosis is there consensus that systemic therapy should be started?

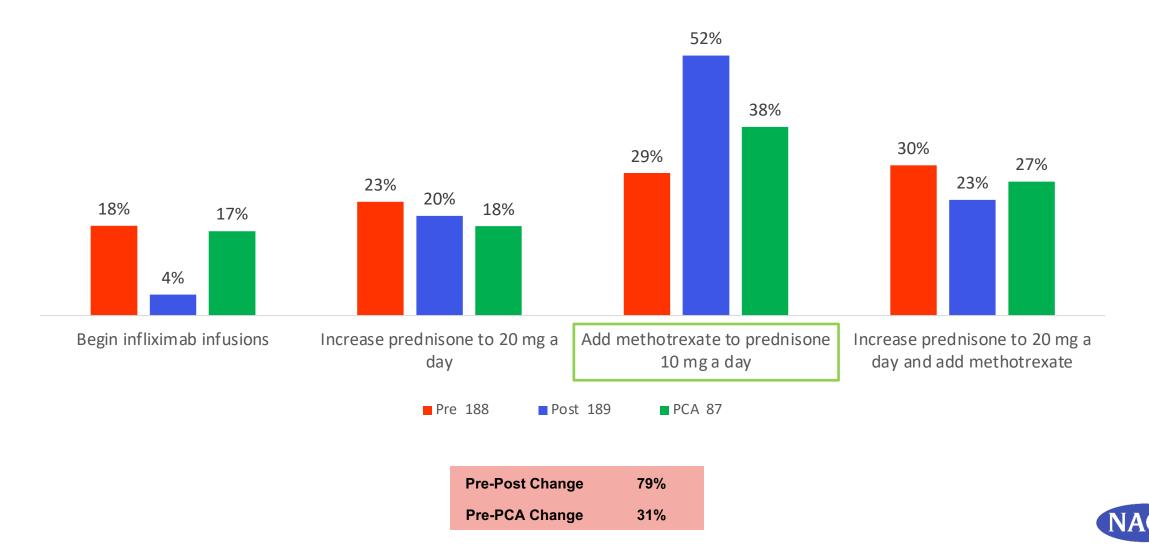


P Value: <0.05

#### Knowledge Assessment

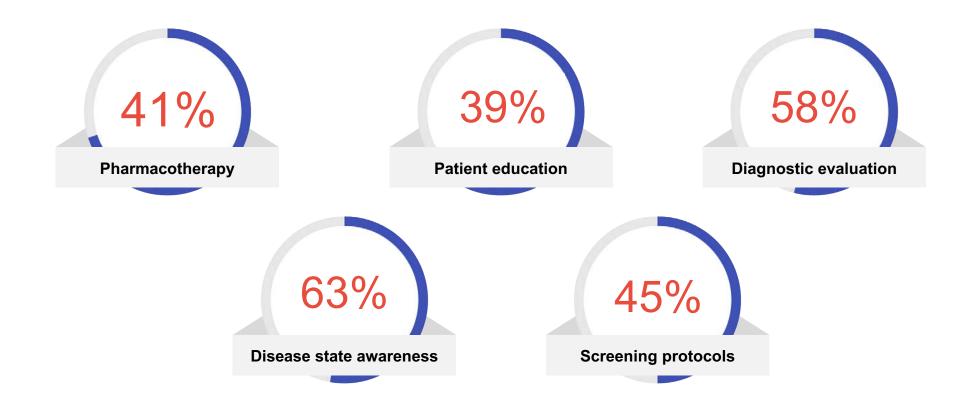
In a patient with pulmonary sarcoidosis who has worsening dyspnea and progressive infiltrates on chest imaging despite prednisone 10 mg a day, what should be the next step?

P Value: <0.05



(4-week Post Assessment)

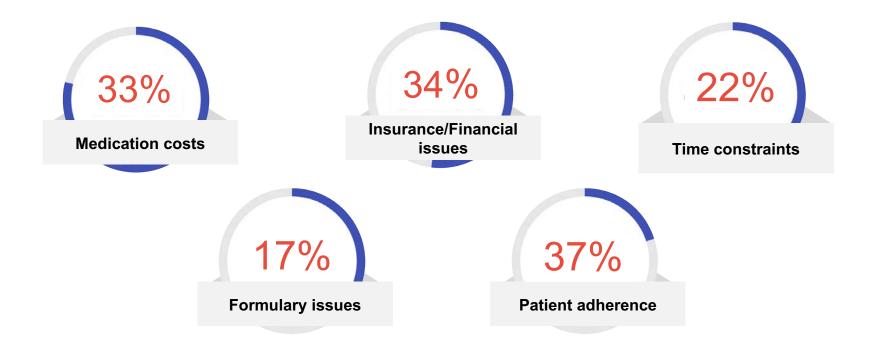
Please select the specific areas of *skills, or practice behaviors*, you have improved regarding the screening, diagnosis and treatment of Sarcoidosis since this CME activity. (Select all that apply.) N=81





#### (4-week Post Assessment)

What specific *barriers* have you encountered that may have prevented you from successfully implementing screening, diagnosis and treatment of Sarcoidosis since this CME activity? (Select all that apply) N=81





## **Participant Educational Gains**

113% increase in recognizing complete heart block as the feature of sarcoidosis for which consensus recommends initiation of systemic therapy

79% increase in appropriate selection of next step treatment for a patient with worsening symptoms of sarcoidosis 100% increase is identification of the most prevalent patient phenotype associated with a diagnosis of sarcoidosis

21% increase in identifying appropriate next diagnostic steps in a case presented



### **Persistent Educational Gaps After 4 Weeks**

Recognition of complete heart block as the feature for which consensus exists that systemic therapy should be initiated

Recognition of appropriate next step treatment for a patient with worsening dyspnea and chest infiltrates despite prednisone therapy

Loss of initial improved confidence following the presentation





## **Key Take-home Points**

After 4 weeks, gains in recognition of the prevalence of disease in a specific patient phenotype was not only maintained but improved, suggesting integration of this knowledge into practice

98% of learners indicated that they gained new knowledge as a result of the presentation, identifying disease state awareness and diagnostic evaluation as skills that they have specifically improved. Learners had significant gains in all knowledge areas immediately following the presentation, although some gains were not sustained at 4 weeks, indicating a need for more education on this topic

After an initial gain in confidence regarding care of the patient with sarcoidosis, confidence levels slipped at 4 weeks, from a high of moderate confidence (46%) post-presentation to a high of "slight" confidence (52%), indicating a need for more education on this topic.

