

# Re-Imagining Educational Design in a Virtual World: Leveraging a Small Group Learning Format to Educate Community-Based HCPs on the Optimal Management of Ovarian Cancer with PARP Inhibitors



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## BACKGROUND

Oncology HCPs lack sufficient knowledge of evidence concerning new strategies to manage ovarian cancer. Specifically, they are not aware of the applications of PARP inhibitor-based strategies across lines of care, as well as the changing role of genetic testing and how to optimize timely testing in tandem with treatment. Managing toxicities in real-world practice also requires clinicians to adhere to evidence-based recommendations, and navigate challenges observed in clinical practice outside of a controlled trial.

Additionally, the COVID-19 pandemic presented limited opportunities for small group learning and expert-learner interaction. This provided the rationale for the Reflective Case-Based Oncology Collective™, which allowed community practitioners to virtually engage, consult, and reflect with experts on the management of advanced forms of ovarian cancer.

## EDUCATIONAL DESIGN

We designed a series of 5 virtual activities made available from March – July 2021.

- Total 2 credit hour programs combined 45 mins of didactic curriculum and 75 mins of case review
- Limited to 12 HCPs and 2 faculty per program
- Learner and faculty interaction was maximized with cameras on for entirety of program
- De-identified patient cases from clinical practice were used to reflect on past and future practice
- Each activity included unique pre-/post-activity assessment questions, as well as open-ended questions regarding challenges to optimal care and planned changes to practice

## PARTICIPATION



TOTAL HCP PARTICIPANTS:

=47

## ACKNOWLEDGEMENTS

PER® acknowledges GlaxoSmithKline for their educational grant support of this initiative, in addition to the faculty, staff, and learners of this CME-certified activity.

## RESULTS

### Key Improvements in Knowledge and Competence

- 1 23% improvement in competence to appropriately manage adverse events resulting from PARP inhibitor therapy
- 2 9% improvement in knowledge of trial data related to efficacy of a PARP inhibitor in patients with ovarian cancer
- 3 12% increase in knowledge of approved agents for patients with recurrent ovarian cancer

### Challenges Learners are Faced With

What are the top clinical challenges you face in the management of ovarian cancer?

- There are still too few options for platinum resistant disease and no clear options for maintenance after progression on PARPs and bevacizumab
- Conflicting data
- Still challenging when patients are tired of feeling tired to convince them to start maintenance that may cause fatigue and nausea, even for a limited time.

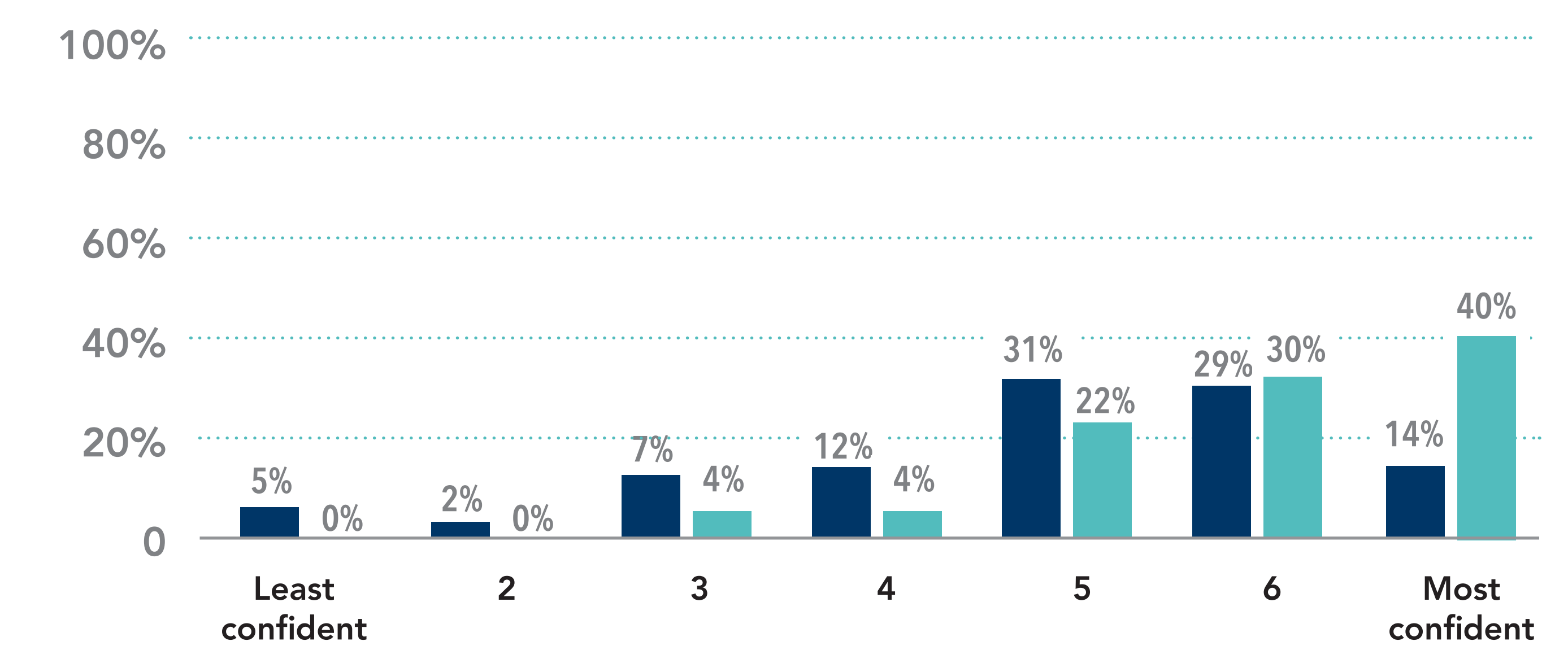
### Planned Treatment Strategies for The Future

What management strategies to you plan to implement for the future?

- Communicating w/ IR to ensure adequate tissue sampling
- Plan to implement follow up assessment on weekly basis for all patients on PARP inhibitor for the first month, regardless of which PARP inhibitor
- Enlist multidisciplinary team such as PCP or cardio for management of side effects
- Include palliative care as an introduction for symptom management including emotional health so patient understands palliative means symptom, not end of life

### Key Improvements in Confidence

QUESTION: How confident are you with your skills in managing ovarian cancer?



## LIMITATIONS

- Limited sample size and some drop off in participation between pre- and post-test questions
- True impact to practice requires follow-up surveys and higher level outcomes assessment

## CONCLUSIONS

Small group-based learning environments have the potential to improve knowledge retention and confidence in recall. The high number of responses to the open-ended questions illustrate that learners are committed to improving care by implementing changes to their practice, and identifying challenges that may be preventing them from doing so.

To better understand the impact of this live program to practice, PER has planned to collect Level 5 information from participants of this program. Further analysis of data from this pilot program and other classroom-style learning programs is warranted to identify how educational design can be further adapted to improve learner and patient outcomes.