

Discordance in Management of Adverse Events Associated With Oral Therapies in Hormone Receptor–Positive Breast Cancer Among Healthcare Professionals and Experts: Findings From an Online Decision Support Tool

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Background

- Oral targeted therapies inhibiting CDK4/6, PI3K, and mTOR are important options for patients with hormone receptor–positive, HER2-negative breast cancer (HR+ BC)
- Oral agents are associated with various adverse events (AEs), with optimal management being critical to promote patient adherence and achieve the best possible outcomes

Aim

- To determine **knowledge gaps** and **discordance in AE management** among healthcare professionals (HCPs) from an online decision support tool with guidance on best practices for managing these AEs

Methods

- An online tool developed with 5 experts provided **recommendations on management of AEs** associated with CDK4/6, PI3K, and mTOR inhibitors
- HCPs entered patient case details and their management approach** before being shown expert recommendations
- Questions assessing **change in management plan** based on expert recommendations were asked

Conclusions

- HCPs who care for patients with HR+ BC have **significant knowledge gaps** on **optimal management of AEs** associated with CDK4/6, PI3K, and mTOR inhibitors
- Use of **an online decision support tool can enhance** HCP management of these AEs for patients with HR+ BC to **improve patient outcomes**

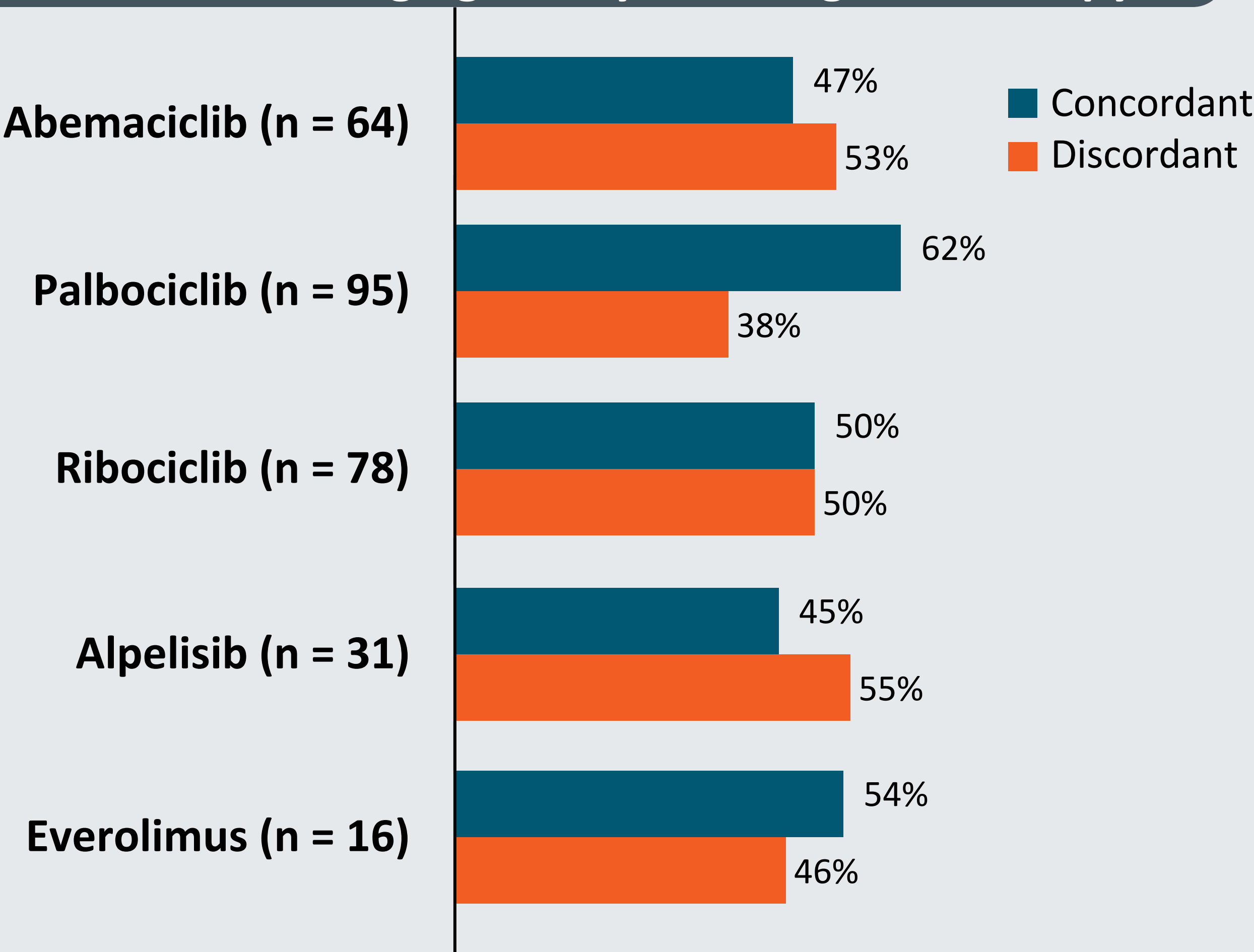


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Supported by an educational grant from Lilly.

Approximately One Half of HCPs Are Not Managing AEs Associated With CDK4/6, PI3K, and mTOR Inhibitors According to Expert Recommendations

Discordance in Managing AEs by Oral Targeted Therapy

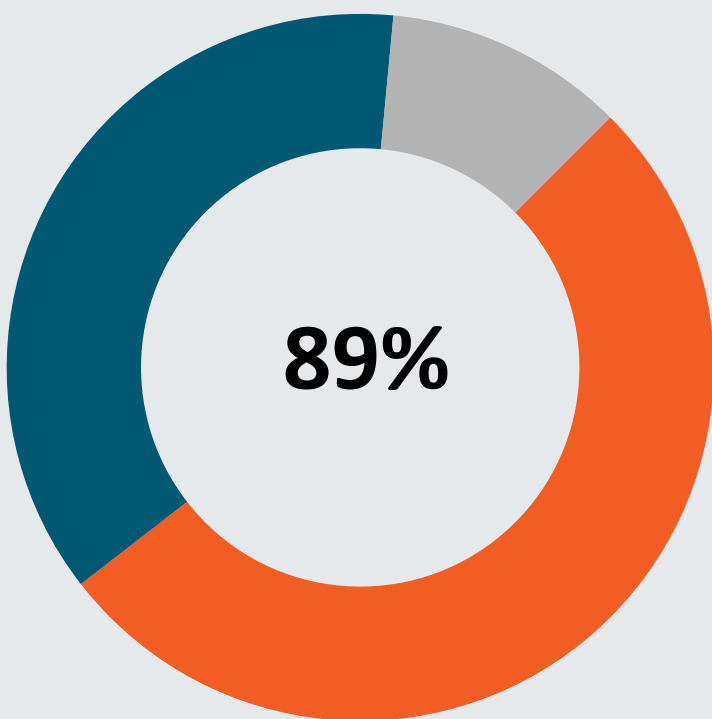


Impact of Education on Practice For Discordant Results

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Confirmed Best Practice (37%)



Changed Clinical Practice (52%)

Find tool on our website



Figure 1. Patient Cases Entered Into Online Tool: 486 Users Entered 764 Cases

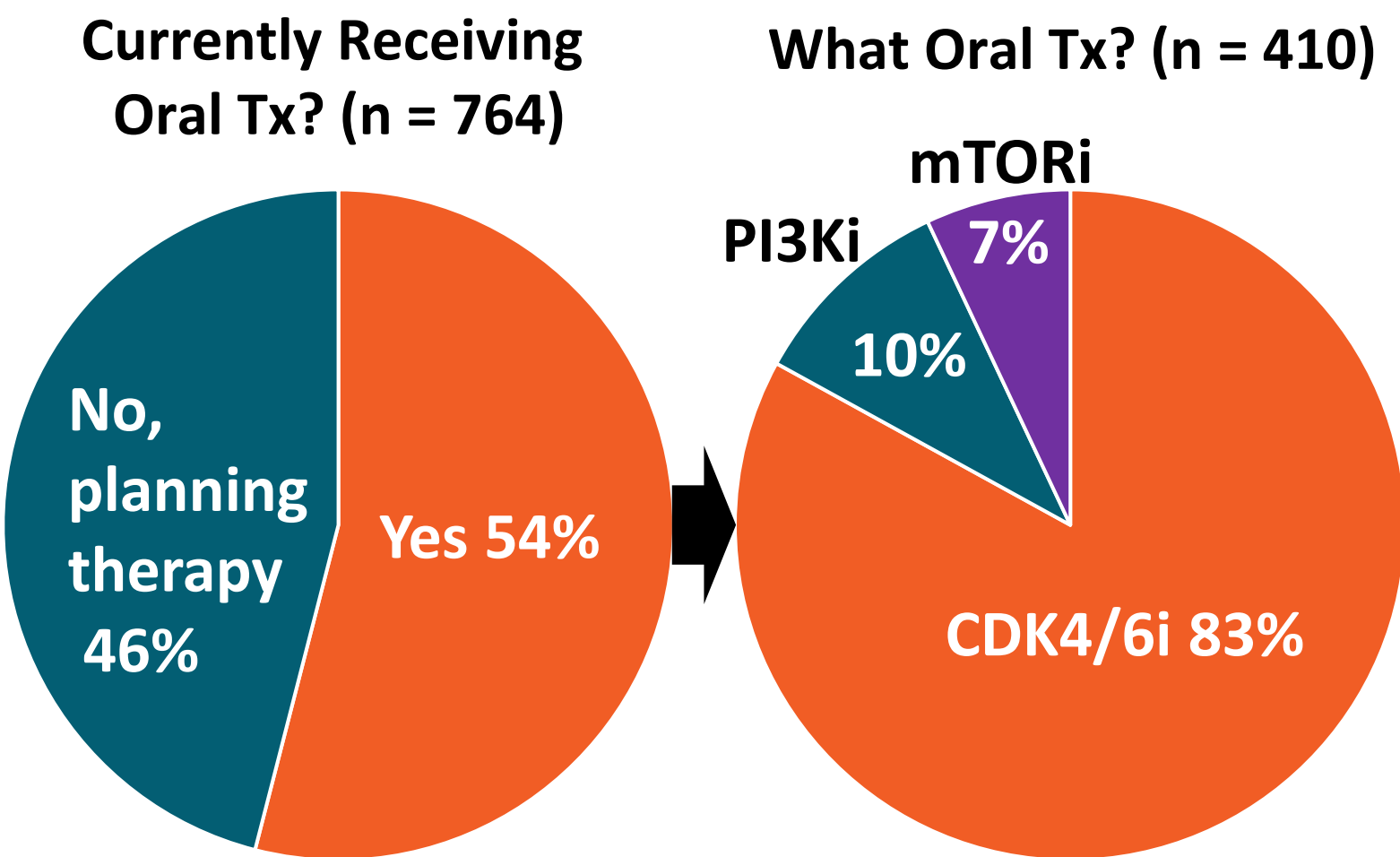
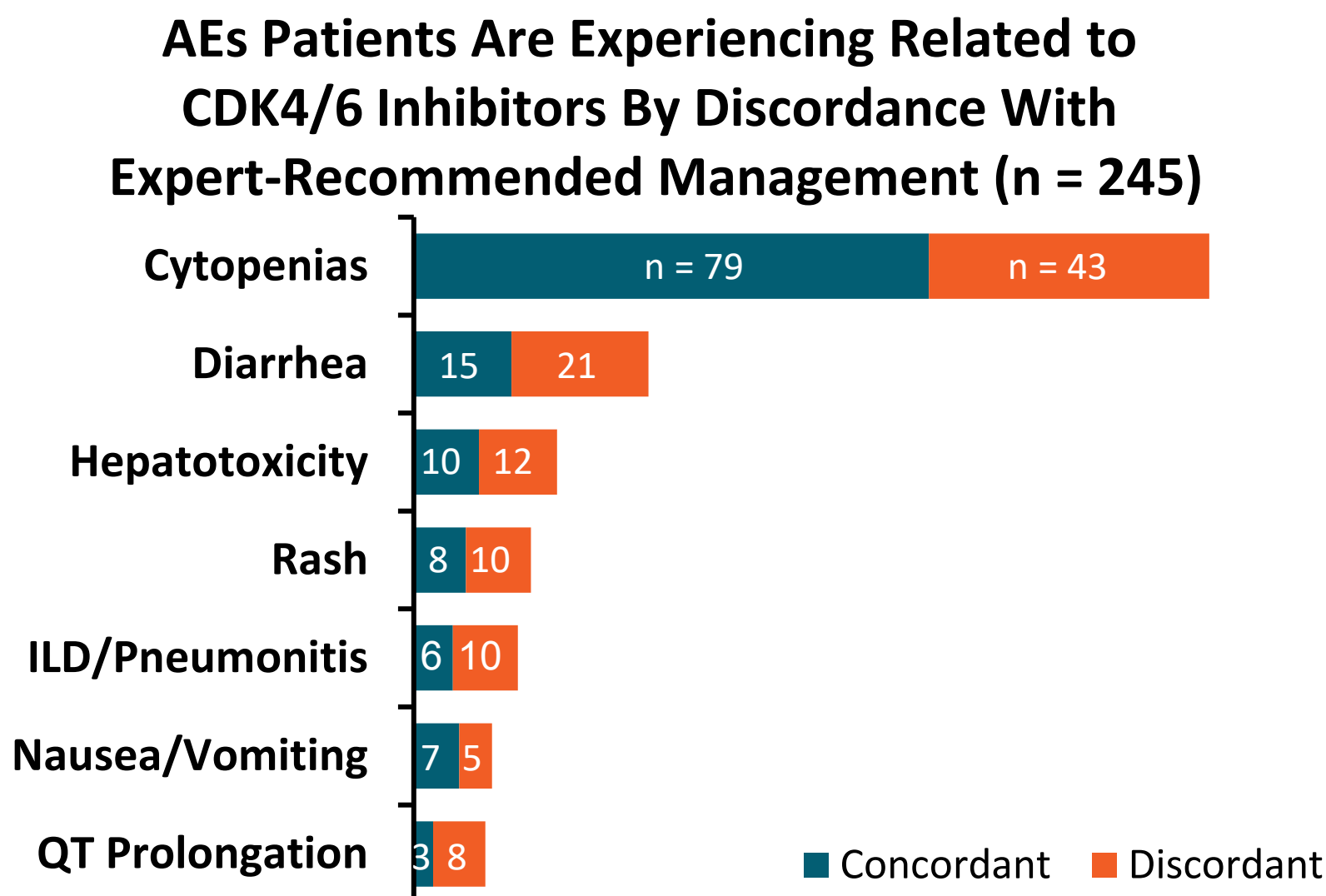
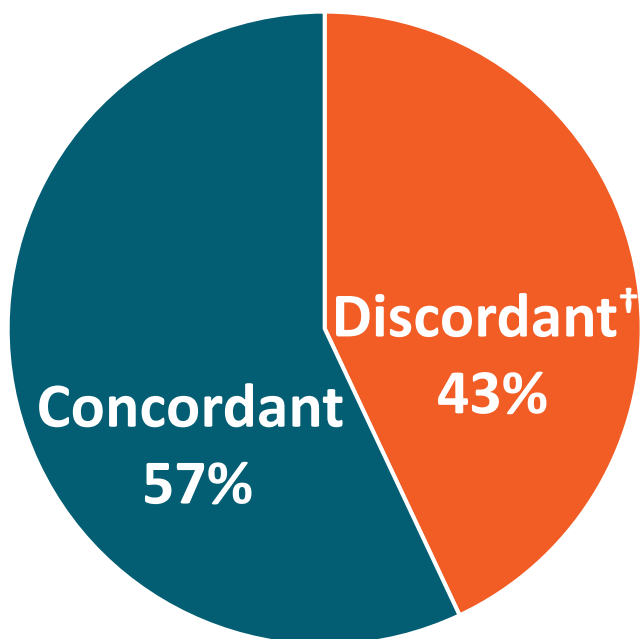
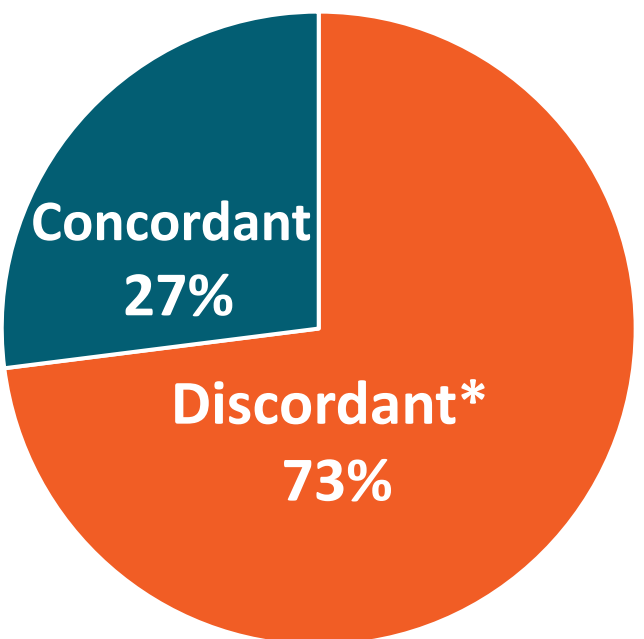


Figure 2. HCP Discordance With Expert Recommendations



Discordance With Expert-Recommended Tx Discontinuation (n = 22)

Discordance With Expert-Recommended Tx Continuation (n = 99)



*Includes plan to continue or hold therapy. †Includes plan to discontinue or hold therapy.