

# Rethinking outcomes: A novel approach to gathering outcomes data

#### Novel Outcomes Approach

**CHALLENGE:** CME outcomes metrics are often limited to a single educational initiative, which creates a challenge when attempting to assess outcomes across multiple IME grants to understand overall educational impact.

**GOAL:** This outcomes study was conducted to gain a broad understanding of the impact CME activities associated with 10 Sunovion supported IME grants on knowledge and practice of neurologists in the management of patients with Parkinson's Disease (PD) experiencing "OFF" episodes. The study allowed for an independent assessment of educational impact while identifying areas for continued education.



# **Clinical Background**

For patients with PD, OFF episodes, or periods of symptom return or worsening, can occur predictably 🍙 — 🕻 or unpredictably. As PD progresses, many patients experience OFF episodes. Several newer therapies to manage OFF episodes have emerged over the past few years.

CME has played an important role for clinicians regarding identification of OFF episodes, becoming familiar with new and emerging treatments, and best approaches for individualizing management.

# Identifying Participants

258 neurologists accessed the survey; completing questions about CME participation. 1 in 5 identified as a participant in at least one of the activities associated with the grants supported by Sunovion.

#### <u>Non-participant</u> (n = 101)



#### <u>Participants</u> in Sunovion-supported CME on PD (n = 53)

Single activity

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Multiple activities

A quota of 101 non-participants was set, additional non-participants screened out.

### **Respondent Demographics**

The sample was split into general neurologists and movement disorder specialists (MDS) to better understand differences associated with education for each group.

	Neuro NP (n = 84)	Neuro P (n = 25)	MDS NP (n = 17)	MDS P (n = 28)
Patients with PD seen per week; mean	9	16	28	32
Years of practice; mean	17	17	15	18
In academic practice (%)	29%	32%	53%	57%

# Methods



#### How were participants identified?

- Sunovion provided a list of supported IME grants with activities occurring over the previous 12 months
- $\succ$ Questions were included at the start of the survey to assess if respondents had participated in any programs



The survey was sent via email to a random sample of US neurologists during June 2021. Neurologists had to be currently managing patients with PD.

#### **Critical Success Factors**

There were several factors that were critical to executing this approach to assessing outcomes





1. Having a broad reach to US clinician audiences with the survey logic and screening capabilities to identify participants across programs that have occurred over the 12-month period of activities that were included in this assessment.



2. Working with clinical experts to ensure the survey cases and questions were clinically relevant and data gathered represented practice elements that affect patient care.

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79%

Participation in CME on PD, but not activities supported by Sunovion





### Educational Impact

In comparing non-participant (NP) and participant (P) responses, the impact of education was seen relative to several key points among both general neurologists and MDS: Increased likelihood to utilize a standard tool when assessing OFF symptoms and higher reported familiarity with new therapies for managing OFF episodes. Additionally for MDS increases were seen in: Likelihood to use adjunctive or on-demand therapy for a patient with unpredictable OFF episodes and in confidence in aspects of managing patients with PD.



# Implications

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This approach to assessing outcomes provides data beyond the individual activity level to demonstrate more broadly ··• •• •• how CME support is "moving the needle" to impact clinical practice and improve patient care. This study demonstrated that educational efforts increased knowledge regarding new therapies and enhanced approaches to assessing OFF symptoms in patients with PD. Further, the data allowed for the identification of areas for continued educational need as well as insights into the population of physicians who had not engaged in CME to understand best approaches to engaging a broader population of physician learners.

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