ONLINE EDUCATION SIGNIFICANTLY IMPROVED RHEUMATOLOGISTS’ UNDERSTANDING AND INTERPRETATION OF COMPARATIVE TREATMENT DATA FOR AS
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Background: With multiple therapeutic options now available for patients with ankylosing spondylitis (AS), clinicians and payers require evidence to guide their decision-making. Head-to-head randomized controlled trials (RCTs) are considered to provide the best evidence to inform treatment decisions, but in the absence of such trials, physicians often rely on their own experience and clinical trial data from single RCTs. In the absence of head-to-head RCTs, data from comparative studies such as network meta-analysis and matching adjusted indirect comparisons can be useful to help inform treatment choices.

Objectives: This study assessed whether the online CME accredited round-table-discussion with title “Comparing Treatment Alternatives in Ankylosing Spondylitis” improves physicians’ understanding and interpretation of comparative effectiveness data for AS.

Methods: Rheumatologists participated in an online CME activity consisting of a 30-minute video roundtable discussion between 3 experts with accompanying slides. Educational effect was assessed using a 4-question repeated pairs, pre-post-assessment. A chi-square test was used to determine if a statistically significant improvement (P < .05 significance level) existed in the number of correct responses from the pretest and posttest scores. Cramer’s V was used to estimate the level of impact of the education. The CME activity launched on December 20, 2017, and the data were collected through March 6, 2018.

Results: A total of 328 rheumatologists completed the pre- and post activity assessments. Overall the activity had a significant impact (P <.001) on rheumatologists’ understanding of comparative effectiveness data in AS with a Cramer’s V of 0.189 indicating a considerable effect of the education. The average percentage of correct responses rose from 22% pre-activity to 39% post-activity. A linked learning assessment (each individual tracked pre and posteducation) showed that 24% of learners improved their knowledge and 15% reinforced their knowledge. The change in percentage of correct responses from pre- to post-assessment achieved significant statistical significance (P <.05) for all 3 questions presented: (i) recommendations for biologic DMARD use in AS according to the ASAS-EULAR 2016 guidelines (34% at baseline rising to 67% post activity; P <.001), (ii) understanding the impact of treatment with biologic DMARDS on radiographic progression in AS (17% at baseline rising to 26% post activity; P <.01), (iii) understanding comparative analysis of RCTs in AS (14% at baseline rising to 24% post activity; P <.001) and (iv) a quarter of rheumatologists gained confidence in their ability to select a biologic DMARD based on comparative data and individual patient needs, with an average confidence shift of 14%.

Conclusion: This online CME activity significantly improved rheumatologists’ understanding of how to compare treatments and interpret comparative effectiveness data in AS which may lead to improved treatment selection and better patient outcomes. However, there is clearly room for further improving physicians’ knowledge of treatments & radiographic progression and comparative analysis of RCTs (since 75% of rheumatologists provided incorrect answers to questions 2 and 3 post-activity) which can be addressed in future education.

REFERENCE

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SAT0694 QUALITATIVE ANALYSIS OF MOBILE APPS DIRECTED FOR LUPUS PATIENTS
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Background: Systemic lupus erythematosus (SLE) is chronic disease that requires lifelong treatment with a multidisciplinary approach. Increasingly, patients use the internet and associated technology to access health-related information. Smartphone applications (apps) have become essential tools in this age and are widely-accessed by patients. These apps can be very helpful tools to inform patients about their illness, support them in their treatment plan, and help them connect with others. Unfortunately, healthcare apps remain largely unregulated.

Objectives: We aim to evaluate the overall quality of patient-directed lupus apps with a focus on the accuracy and appropriateness of the health information contained in these apps.

Methods: The 2 most commonly used app stores are Apple Store and Google Play. These stores were searched for the terms “lupus” and “SLE” during December 2018. The resulted apps (Patient oriented, English language, and free of charge) were analyzed and the following data was collected: app type (informational, tool, or both), features, and