Conclusion: This paper presents a clearer picture of the current practice on the assessment of competences in rheumatology in key countries and the underlying rationale of trainers' and trainees' priorities. This work informed the EULAR Points-to-Consider for the assessment of competences in rheumatology training across Europe.

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THU0584

CASE-BASED ONLINE EDUCATION SIGNIFICANTLY INCREASES CLINICIAN COMPETENCE IN ASSESSING SSC-ILD DISEASE PROGRESSION AND IMPLEMENTING APPROPRIATE THERAPY

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Background: Due to the heterogeneity in both the initial manifestations of systemic sclerosis (SSc) and progression with SSc-associated interstitial lung disease (SSc-ILD), diagnosis and prognosis can be challenging in clinical practice. Clinicians need expert case-based guidance on how best to monitor patients with SSc and the treatment implications.

Objectives: This study was conducted to determine whether online case-based independent medical education could improve rheumatologists' and pulmonologists' competence in evaluating and monitoring SSc-ILD progression and initiating the right treatments when progression is identified.

Methods: Rheumatologists and pulmonologists participated in two comprehensive online case studies, using a 'test then teach' approach and completed all pre- and post-questions.¹ The effects of the education on knowledge and competence were assessed using a 3-question, repeated pairs, pre-assessment/post-assessment study design. For all questions combined, the chi-square test assessed differences from pre- to post-assessment. P values <.05 are statistically significant. The activity launched on September 24, 2019, and data were collected through December 9, 2019.

Results: Overall significant improvements were seen after participation for both rheumatologists (average correct response rate of 65% at pre-assessment vs 97% at post-assessment; P<.001, N=89), and pulmonologists (average correct response rate of 64% at pre-assessment vs 95% at post-assessment; P<.001, N=71). Specifically, significant improvements were observed in clinicians' competence in assessing response to therapy and monitoring for disease progression; and managing evidence of disease worsening (figure).

Changes in Competence Amongst Rheumatologists and Pulmonologists After Participating in Education About SSc-ILD Progression

Figure.

After participating in the activity, 54% of rheumatologists and 51% of pulmonologists had measurable improved confidence related to communicating with patients with SSc-ILD about the possibility of disease progression.

Given that only around half of clinicians provided correct responses at baseline, it will be important to continue to reinforce these learnings in ongoing education.

Conclusion: This study demonstrates the success of online, case-based education in improving rheumatologists' and pulmonologists' competence in managing

patients with SSc-ILD. This could lead to earlier changes in therapeutic approach for those with signs of progression and result in improved overall outcomes for these patients.

References:

- [1] Denton C. When SSc-ILD Starts Progressing: Monitoring and Managing Those at Risk for Poor Prognosis. Launched: 9/24/2019. Data as of 12/9/2019. Available at www.medscape.org/viewarticle/918465

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ONLINE EDUCATION YIELDS SIGNIFICANT GAINS IN RHEUMATOLOGISTS' KNOWLEDGE OF THE JAK INHIBITORS MODE OF ACTION AND CLINICAL TRIAL DATA

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Background: Physicians face challenges staying up-to-date with the latest research and accessing the ever-growing field of knowledge is time-consuming. Online education can make these clinician's tasks more efficient and less time-consuming.

Objectives: This study assessed whether the online CME accredited round-table-discussion with title "Meet the JAKs: Understanding the Role of Janus Kinase Inhibition in RA" improves physicians' understanding mechanism of action (MOA) of current and emerging Janus kinase (JAK) inhibitors and rationale for their development in rheumatoid arthritis (RA).

Methods: Rheumatologists participated in an online CME activity (<https://www.medscape.org/viewarticle/913625>) consisting of a 30-minute video discussion between 2 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 June 4, 2019, and the data were collected through September 3, 2019.

Results: A total of 107 rheumatologists completed the pre- and post activity assessments. Overall the activity had a significant impact (P <.001) on rheumatologists' knowledge of JAK inhibitors and related clinical trial data with a Cramer's V value of 0.319 indicating an extensive educational impact. The average percentage of correct responses rose from 47% pre-activity to 78% post-activity. The repeated pairs analysis (each individual learner tracked pre- and post-education) showed that 34% of learners improved their knowledge and 44% reinforced their knowledge. The change in percentage of correct responses from pre- to post-assessment achieved statistical significance for all 3 questions presented: (1) understanding the MOA of JAK inhibitors vs biologics (64% at baseline rising to 82% post activity; P <.01), (2) understanding the specificity of different JAK inhibitors (49% at baseline rising to 85% post activity; P <.001), (3) knowledge of clinical trial outcomes with JAK inhibitors (29% at baseline rising to 67% post activity; P <.001) and (4) 60% of rheumatologists gained confidence in their ability to describe the MOA of current and emerging JAK inhibitors.

Conclusion: This online CME activity significantly improved rheumatologists' understanding of JAK inhibitors mode of action. However, there is clearly room for further improving physicians' knowledge of clinical trial outcomes with these agents, since one third of rheumatologists provided incorrect answers to question 3 post-activity) and this topic can be further addressed in future education.

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