

Pathways to Developing Personalized Treatment Regimens for Patients With Advanced Melanoma

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INTRODUCTION

- ✓ Interactive "choose-your-path" digital algorithm
- ✓ Branching logic to facilitate real-time application of new guidelines and treatment options for advanced melanoma
- ✓ Content expands and contracts according to selected clinical and patient characteristics
- ✓ Anchored tool for HCPs ongoing use to validate real-world decision-making

TARGET AUDIENCE

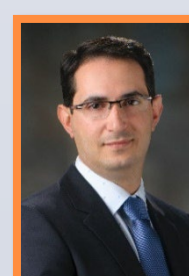
- ✓ Oncologists, dermatologists, and other members of the clinical team who treat patients with melanoma

OBJECTIVES & OUTCOMES METHODOLOGY

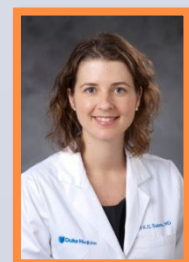
Practice Gap	Learning Objective	Expected Outcome	Measures
Clinicians have suboptimal knowledge of the MOA of LAG-3 inhibitors and the implications for addressing unmet needs in the treatment of advanced melanoma.	Review rationale for use of anti-LAG-3 inhibitors for the treatment of advanced melanoma	Clinicians understand the MOA of LAG-3 inhibitors and their potential synergistic effect in combination with PD-1 inhibitors to improve treatment outcomes in patients with advanced melanoma	Knowledge acquisition of anti-LAG-3 MOA Familiarity with MOA of anti-LAG-3 immunotherapies
Oncologists and other clinicians may not be up to date on the latest clinical trial evidence supporting the use of anti-LAG-3 immunotherapies in melanoma and therefore lack competency in interpreting and applying this evidence towards clinical decision-making.	Apply best practices in appropriate selection of anti-LAG-3 immunotherapy combinations for advanced melanoma, taking into account clinical trial findings, guidelines, and patient characteristics	Clinicians apply updated treatment guidelines and recent clinical trial evidence for LAG-3 inhibitors in clinical practice for patients with advanced melanoma who are appropriate for LAG-3/PD-1 combination therapy	Clinical competency with treatment selection and treatment sequencing Confidence with treatment selection and treatment sequencing Familiarity with clinical trial efficacy and safety profiles of combination immunotherapy
Oncologists and other clinicians treating advanced melanoma need education that addresses differentiating, mitigating, monitoring, and managing immune-related adverse events (irAEs) to improve patient outcomes.	Enhance the role of the multidisciplinary care team in the monitoring, management, and mitigation of adverse events associated with anti-LAG-3 combination therapy	Clinicians manage irAEs in a multidisciplinary manner to optimize ongoing treatment and monitoring of patients with advanced melanoma treated with immune checkpoint inhibitor therapies, including LAG-3/PD-1 combination therapy	Knowledge acquisition of management of irAEs Confidence with the management of irAEs

ACTIVITY DETAILS

FACULTY



Hussein Tawbi, MD, PhD (Chair)
Professor, Department of Melanoma Medical Oncology
Division of Cancer Medicine
The University of Texas MD
Anderson Cancer Center
Houston, TX



April Salama, MD (Faculty)
Associate Professor of Medicine
Medical Oncology
Director of the Melanoma Program
Duke Cancer Institute
Duke University School of Medicine
Durham, NC



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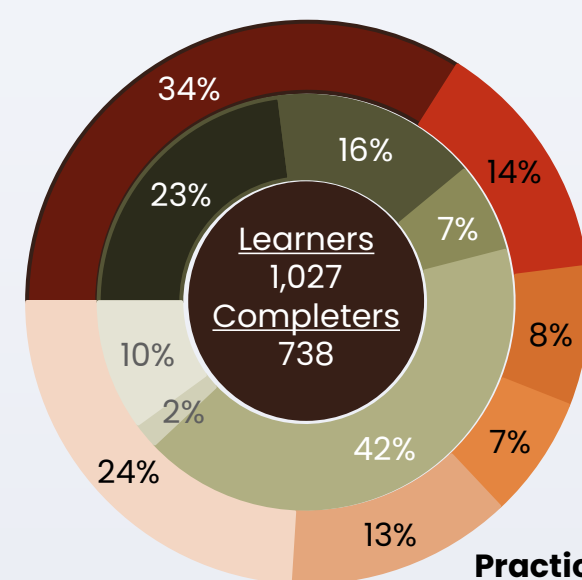
"While we are generally prone to use regimens that demonstrate highest efficacy, we need to balance these choices with incidence of toxicity... we also take into account patient performance status, patient preferences, patient comorbidities, and other social and environmental factors that may be relevant to patient decision-making so we can make the treatment decisions with them. This algorithm can support that effort."
— Hussein Tawbi, MD, PhD

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DEMOGRAPHICS

Specialty

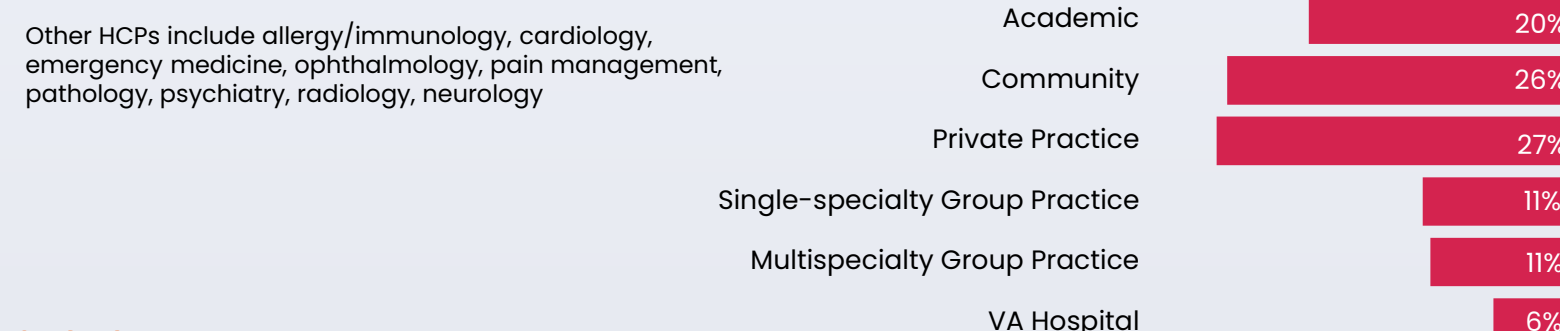
- Oncology
- Dermatology
- Hospitalist
- Surgery
- General Practice
- Other



Profession

- Physician
- Physician Assistant
- Nurse Practitioner
- Nurse
- Pharmacist

Practice Setting (n=843)



ENGAGEMENT

Repeat Learners

Repeat learners are HCPs who returned to the activity at multiple points in time over multiple days. These learners are using the algorithm to validate real-world decision-making by inputting clinical and patient characteristics to support application at the point of care.

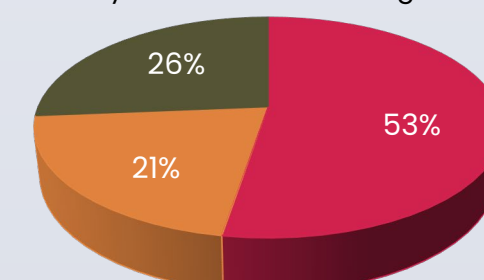
326 Repeat Learners

3.11 average visits among repeat learners

3x higher repeat engagement among oncologists

Application of Treatment Algorithm at Point of Care (n=38)

- Used treatment algorithm in clinical practice
- Considered using treatment algorithm to guide treatment selection
- Have not yet used treatment algorithm



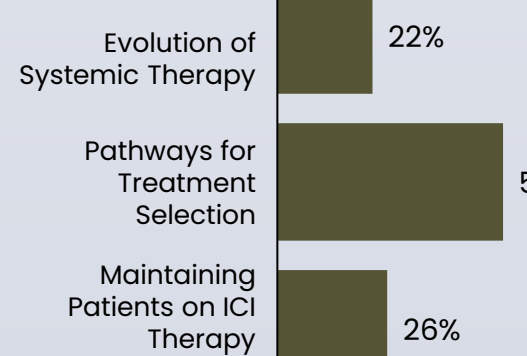
40:22 average length of stay
Most time spent within the "pathways for treatment selection" section

105 learners (10%) downloaded PDFs with data available for future reference

2,103 video views
An average of 2.1 video views per learner

81% media completion rate
Learners who started a video clip watched the video in its entirety 81.26% of the time

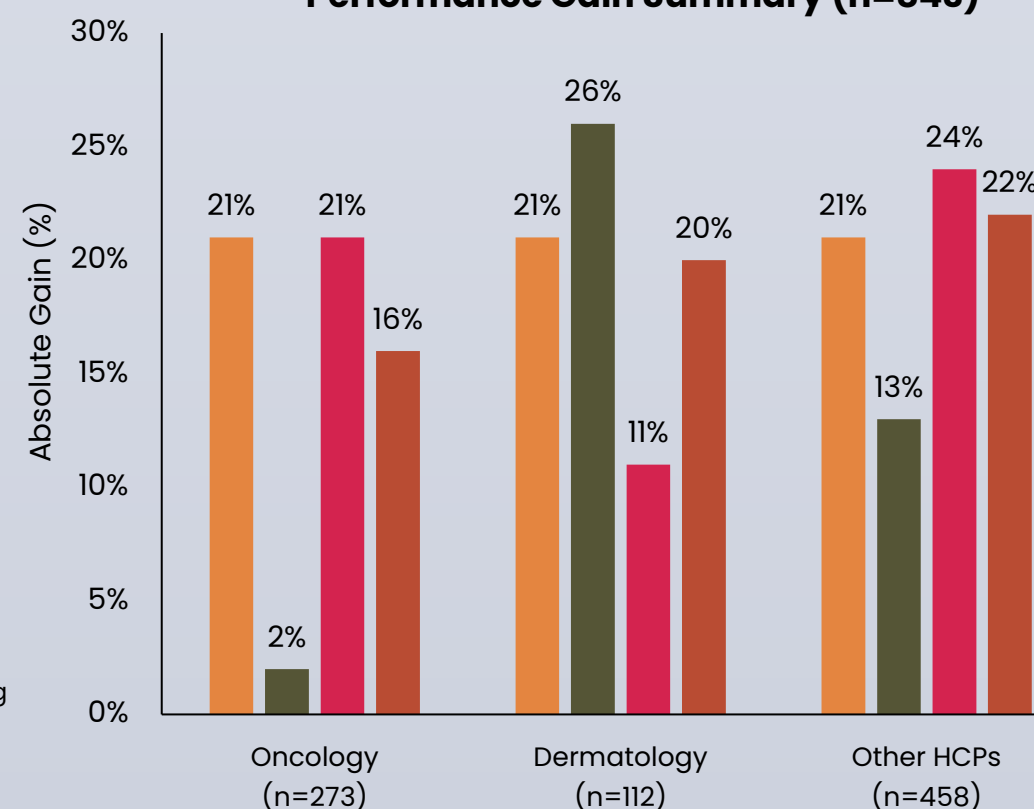
Total Slide Views (n=15,086)



RESULTS

- Mechanism of Action:** Knowledge acquisition: anti-LAG-3 MOA in combination with other immunotherapies
- Treatment Selection:** Clinical competence: treatment selection for advanced melanoma, 1 metastatic disease site at liver, and without an activating BRAF mutation
- Treatment Sequencing:** Knowledge acquisition: evidence from DREAMseq clinical trial
- Management of irAEs:** Knowledge acquisition: educating patients on toxicity profiles, including symptoms and timing

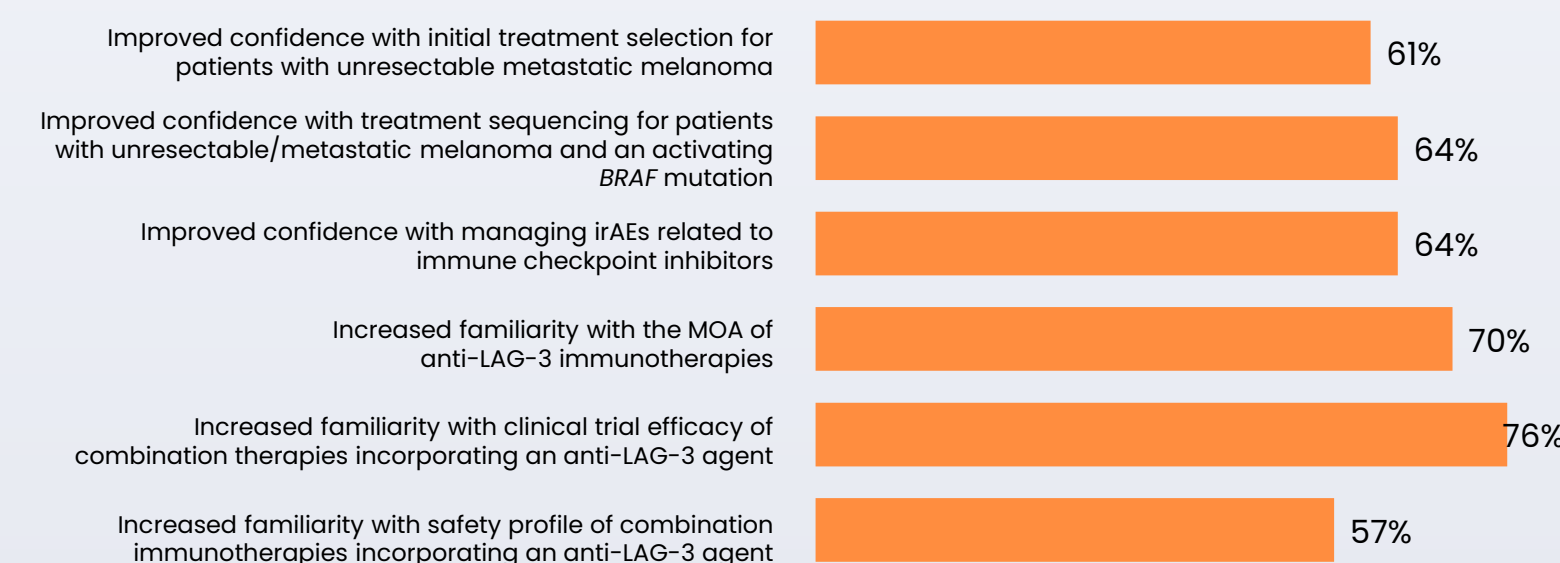
Performance Gain Summary (n=843)



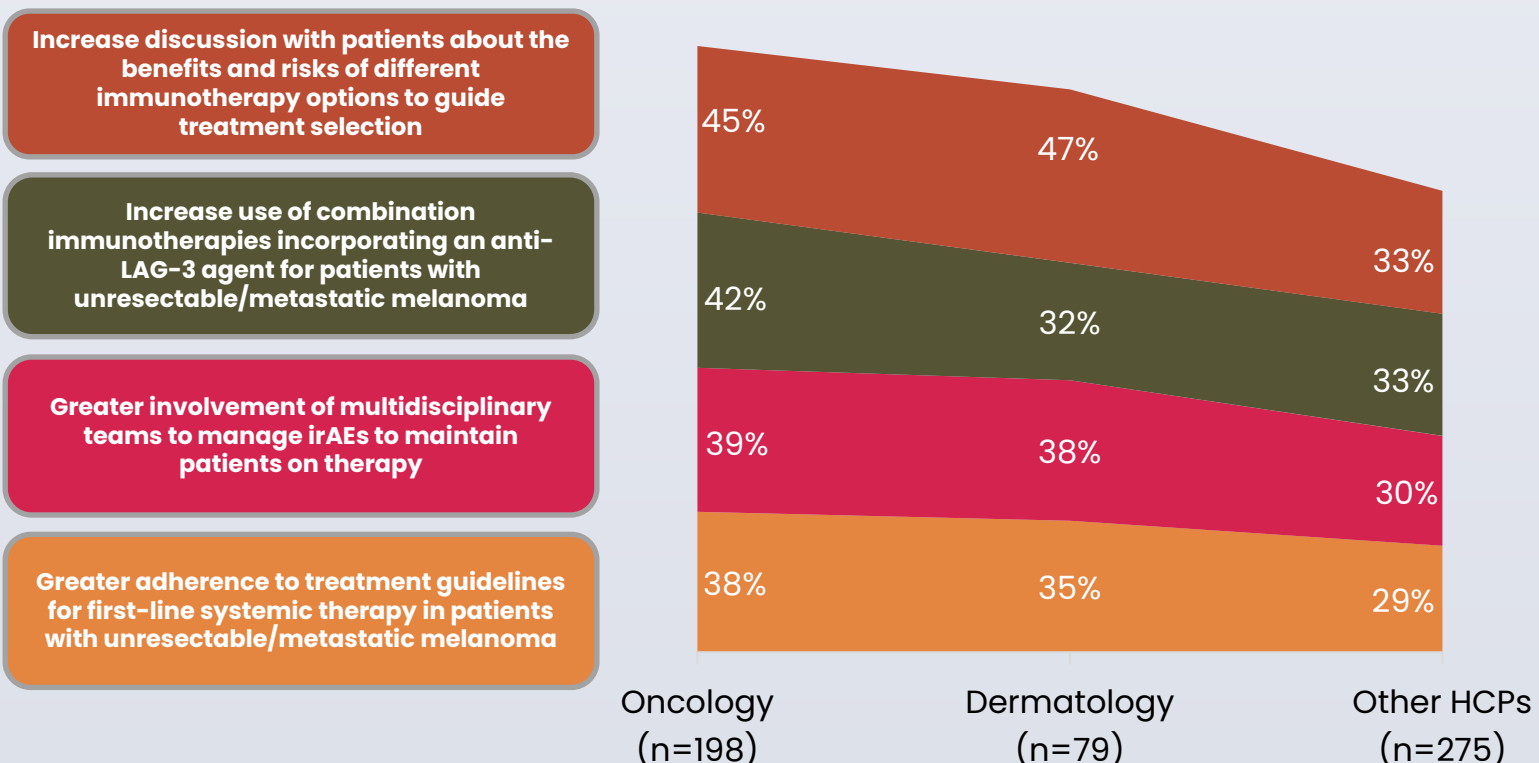
PROGRAM IMPACT

A Cohen's d effect size of 0.62 indicates that participating clinicians are now **39%** more knowledgeable of the content assessed than prior to participating in this education. (Cohen's d [1986]: 0.2=small; 0.5=medium, 0.8=large effect.)

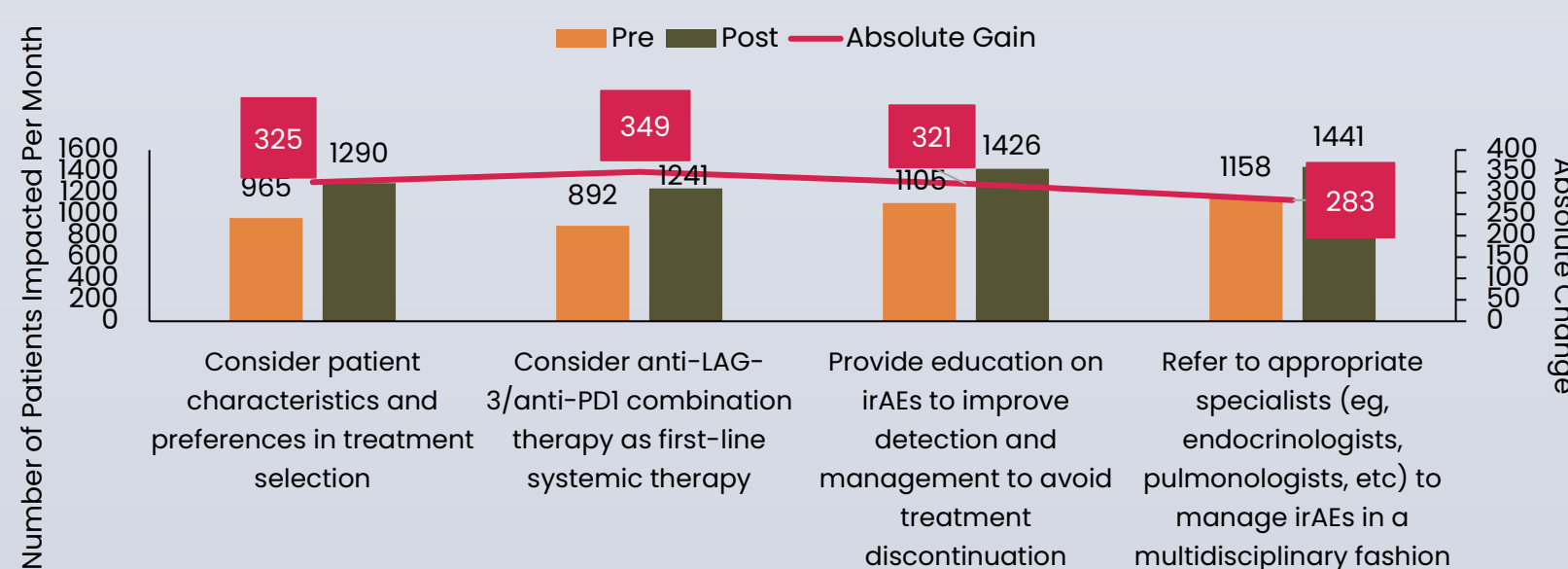
Confidence and Familiarity Gains (n=843)



Intended Practice Changes (n=552)



Average Patients Impacted per Month by Changes in Practice (n=843)



LEARNER-REPORTED TAKEAWAYS

- "Earlier use of LAG-3 inhibitors in combination with ICI"
- "Better efficacy with PD-1 and LAG-3 than single agent PD-1"
- "Synergistic effect mechanisms of anti LAG-3 antibodies"
- "Patient characteristics are the most important thing to consider with regards to balancing treatment efficacy with toxicity concerns."
- "Coordination with non-oncology colleagues is vital in achieving best possible outcomes, given the poor prognostic implications of the disease."
- "I learned that anti-LAG-3 antibodies can promote the release of proinflammatory cytokines. I feel that this may be the reason we've seen so many patients have infusion reactions to nivo + rela vs just nivo alone."