



A NOVEL ONLINE DECISION SUPPORT TOOL TO DETERMINE PRACTICE PATTERNS AND CONCORDANCE WITH EXPERTS IN THE TREATMENT OF PATIENTS WITH IMMUNE THROMBOCYTOPENIA

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INTRODUCTION

- When treatment for immune thrombocytopenia (ITP) is warranted, corticosteroids are typically first-line therapy
- Steroid-refractory patients eventually require **alternative treatments**, including thrombopoietin receptor agonists (TPO-RA), fostamatinib, intravenous immunoglobulin (IVIG), or rituximab
- The alternatives have not been rigorously compared in clinical trials
- To assist healthcare professionals (HCPs) in **ITP management** we developed an online interactive decision support tool to provide expert recommendations for treatment

AIM

To analyze **practice patterns** among HCPs and experts for ITP cases after initial therapy failure and evaluate the **impact of expert recommendations** on HCP decisions

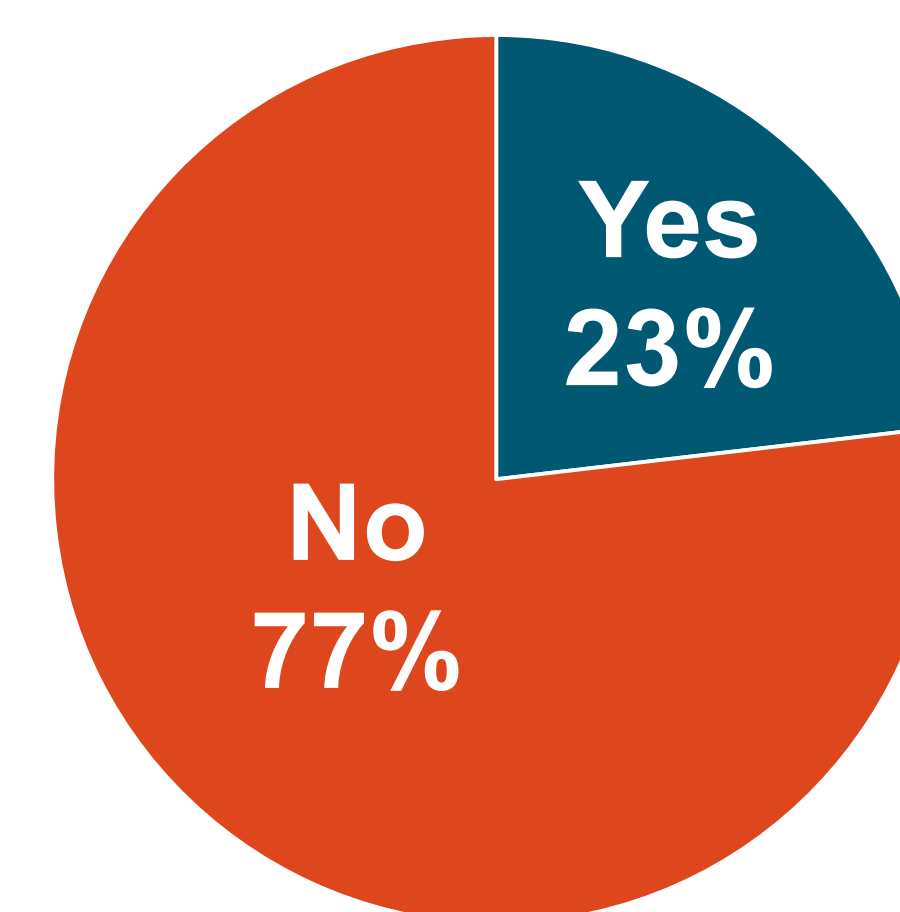
METHODS

- An online tool developed with 4 experts provided **recommendations on management of ITP** in unique cases based on patient- and disease-specific factors that the experts considered relevant to making treatment decisions
- HCPs entered **patient case details** including age, treatment setting, platelet count, current presentation, and presence of risk factors for bleeding along with **their intended management approach** before being shown expert recommendations

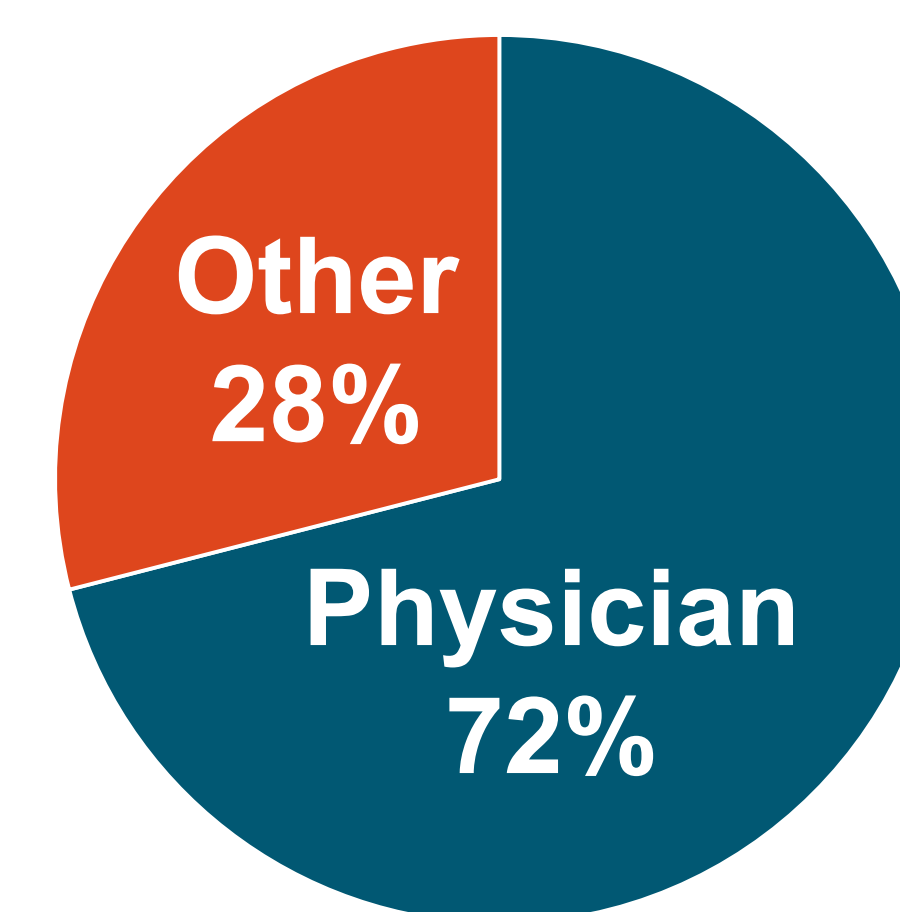
RESULTS

Patient Cases Entered Into Online Tool:
194 Cases in Treatment-Exposed Patients

From North America



Role of HCP



Characteristics of Patient Cases Entered by HCPs

Case Characteristics, n (%)	Age < 21 (n = 50)	Age ≥ 21 (n = 144)
Potential or actual risk for bleeding		
▪ No	27 (54)	86 (60)
▪ Yes	23 (46)	58 (40)
Symptoms or clinical manifestations		
▪ No	16 (32)	27 (37)
▪ Yes	34 (68)	46 (63)*
Platelet count#		
▪ <20 pL/mcL	15 (30)	25 (35)
▪ 20-50 pL/mcL	35 (70)	46 (65)#

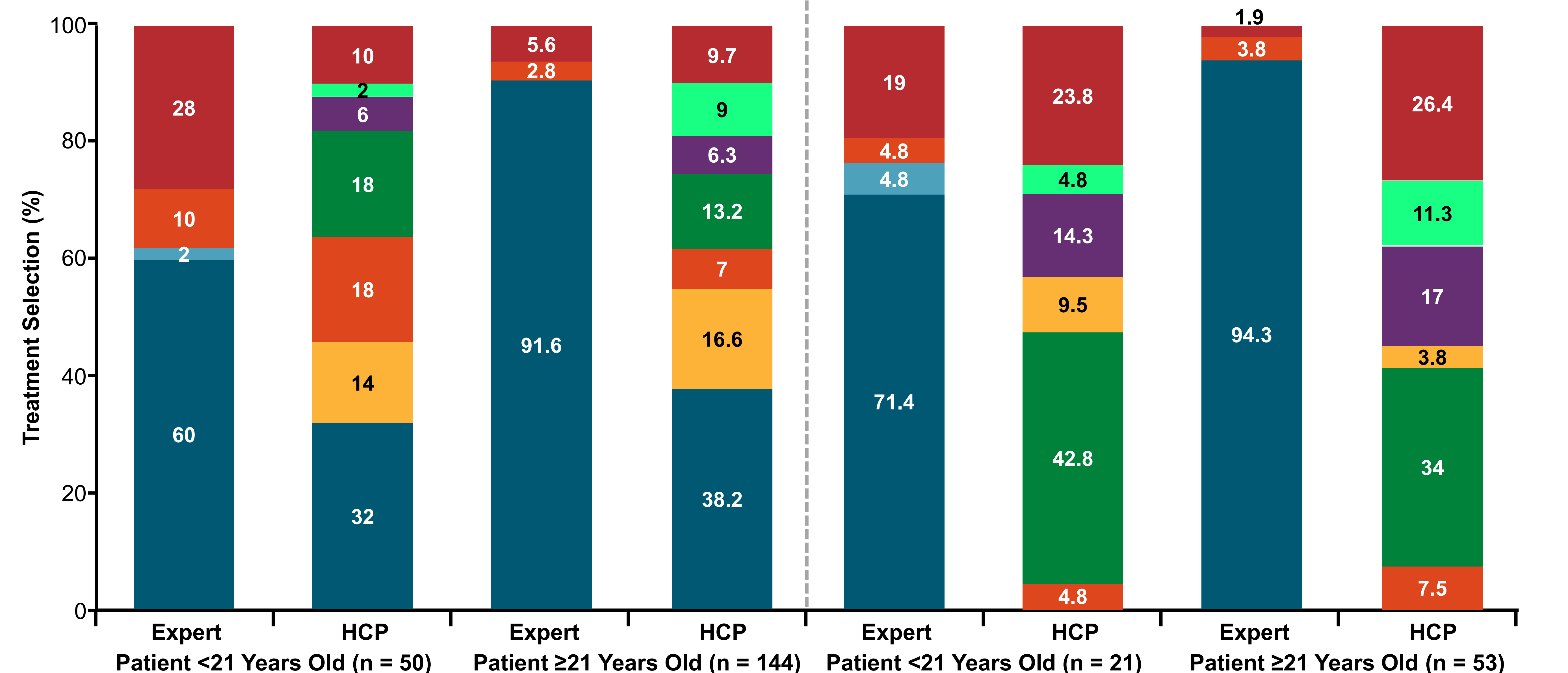
*Symptoms for age ≥ 21 n = 73 #Platelet count for age ≥ 21 n = 71

- There was strong alignment between **HCP treatment selection** and at least 1 **expert recommendation** (69%; $P = .0001$).
- HCPs indicated there were **barriers to implementation** in 7% of cases

ACKNOWLEDGEMENTS

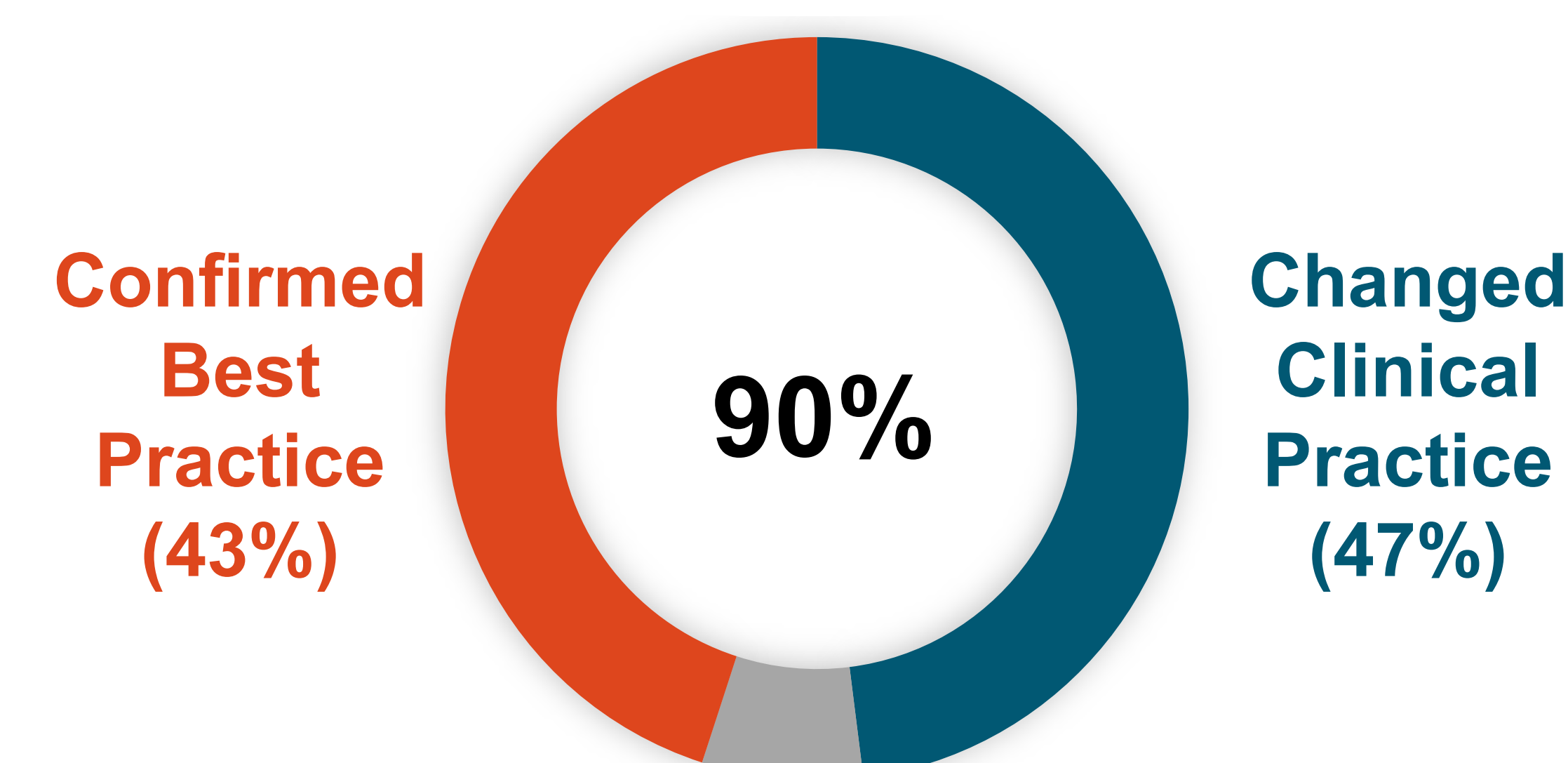
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Treatment Choices by Experts and HCPs for Patients Receiving Any Prior Treatment (All Cases)



■ TPO-RA ■ Corticosteroid ■ Observation ■ IVIG or Anti-D ■ Rituximab ■ Splenectomy ■ Fostamatinib ■ No Consensus/Uncertain

Impact of Education on Practice for Discordant Results



CONCLUSIONS

- Based on our analysis of an online treatment decision tool, practice patterns for the management of patients with ITP aligned between HCPs and at least 1 tool expert in 69% of treatment-experienced cases.
- For previously treated patients, **HCPs were less likely to choose a TPO-RA compared with experts**, although **very few identified barriers** to implementation
- HCPs appeared amenable to practice changes based on expert recommendations.
- Online decision support tools can offer opportunities for HCPs to **obtain education and expert guidance** in choosing optimal treatment regimens for ITP, a condition where treatment guidelines may not address every unique patient scenario.