

ACBCYW PROVIDER *Ad Hoc* WORKGROUP REPORT

February 2020

WORKGROUP CHARGE

To review activities completed by the previous membership; gather new background information to further improve provider behavior, education and training regarding breast cancer in young women; and advise ACBCYW on prioritizing and supporting ongoing programmatic efforts in the future.

WORKGROUP MEMBERS

- **Kenny Lin, MD, MPH**- *Chair*, Professor of Family Medicine at Georgetown University Medical Center
- **Lindsay Avner**, *Co-Chair*, Founder, Bright Pink
- **Nancy Mautone-Smith** - HRSA Office of Women's Health, US Department of Health & Human Services
- **Shubhada Dhage, MD, FACS**- Breast Surgeon and Associate Director of Diversity in Cancer Research at NYU Perlmutter Cancer Center
- **Deborah Lindner, MD, FACOG**- Chief Medical Officer, Bright Pink
- **Claudine Isaacs, MD**-Medical Oncologist, Medical Director, Fisher Center for Hereditary Cancer and Clinical Genomics Research

ACTIONS TO DATE

Workgroup convened on **October 17, 2019** and discussed:

- The variety of resources that exist to educate providers
- The “audience” for provider education:
 - Providers without a baseline set of knowledge/comfort who could benefit from “101”-type education and resources to refer out
 - Providers with baseline knowledge who feel comfortable testing/counseling patients and need support in more nuanced, one-off cases
- Gaps in quality provider education surrounding specific topic areas including DTC genetic tests.

ACTIONS TO DATE (CONT)

Workgroup then compiled existing resources into a central spreadsheet (including audience, access restrictions, key content areas addressed) and convened again to discuss these on **December 19, 2019**.

Additionally, workgroup identified gaps in education and drafted committee recommendations as follows.

EXISTING PROVIDER EDUCATION RESOURCES

- **Risk assessment**

- Bright Pink <https://www.brightpink.org/healthcare-providers/online-learning/>

- **Genetic testing and counseling**

- Medscape <https://www.medscape.org/viewarticle/919116>
- The Jackson Laboratory <https://www.jax.org/education-and-learning/clinical-and-continuing-education/cancer-risk-assessment-testing-and-management/bcr>
- American Society of Clinical Oncology <https://elearning.asco.org/product-details/hereditary-breast-ovarian-cancer-syndrome>

- **Breast cancer screening – general**

- American College of Radiology <https://www.acr.org/Lifelong-Learning-and-CME/Learning-Activities/Mammography-CME-Module>

- **Inflammatory breast cancer**

- American College of Surgeons/NAPBC <https://www.facs.org/quality-programs/napbc/education/webinars/inflammatory-breast-cancer>



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS



Understanding Early Onset Breast Cancer

A review of EOBC risk factors, assessing EOBC risk in patients, and risk mitigation measures.

This course is one component of a Centers for Disease Control and Prevention (CDC) cooperative agreement to develop innovative provider education materials on early onset breast cancer in high-risk populations, specifically targeting obstetrician-gynecologists (ob-gyn) and other women's healthcare providers including nurses, nurse practitioners (NPs), physician assistants (PAs), and internists.

This elearning is part of the provider-focused portion of the CDC's "Bring Your Brave" campaign, which provides information about breast cancer to women younger than age 45 by sharing real stories about young women whose lives have been affected by breast cancer.



RECOMMENDATIONS

1. Create a "one-stop shop" repository* on the CDC website that houses:
 - All of the current, evidence-based, medically-sound provider educational online learning modules that exist
 - Searchable FAQ with links to medical journals included
 - Democratic, user-friendly comparison of different tests (provider-initiated and DTC)
 - Connections to referrals for genetic counseling, specialists for patients requiring more in-depth review
 - Recommend one login to access all modules; the current need to set up different logins is cumbersome.

* Strong user experience necessary to meet the needs of providers with varying needs and must acknowledge inconsistencies (i.e. because each resource was uniquely authored, different sources informed output)

RECOMMENDATIONS (CONT)

2. Develop simple supplemental provider educational resources to address gaps in content:

- DCIS
- DTC genetic testing
- Pregnant/Post-partum patients
- Pathologic High Risk
- Genetic High Risk
- Atypia
- Other cancers intersecting with breast

RECOMMENDATIONS (CONT)

3. Develop comprehensive promotion plan to amplify the resource and drive greater provider engagement of existing resources.
4. Identify process to ensure regular review and all timely updates are reflected including recommendations, new resources, etc.

THANK YOU!