P3.15-09 Are lung cancer patients receiving education materials? The healthcare-provider perspective on distribution gaps and possible solutions Andrea Ferris, MBA; Upal Basu Roy, PhD, MPH; Kayla Haskins, BA; Margery Jacobson, MBA

Background: While new treatments for lung cancer bring new hope, they can also make understanding a lung cancer diagnosis and making treatment decisions a challenge for both patients and caregivers. Education is imperative to understanding the diagnosis and making informed treatment decisions. However, many patients and their caregivers report that they do not receive materials from their doctors. We fielded a study of healthcare providers (HCP) to understand their attitudes and practices on disseminating patient education for lung cancer.

Methods: We conducted an IRB-approved sequential mixed-method study of 216 HCPs (130 oncologists, and 34 nurse navigators/cancer center clinic administrators [CCC]) from academic research centers, community cancer centers, and private practice to get a full and broad picture of education for lung cancer patients based on the specific role each HCP group plays in the treatment journey. The quantitative survey was followed by a qualitative interview of five HCPs to contextualize the study delved into perception, usage, distribution, and development of education materials.

% <u>Strongly</u> Agree	Oncologists	Pulmonologists	Nurse Nav/ CCC Admin	Not specific enough to patients' s
The many informed my patients are the better their	n=130	n=52	n=34	Not in the language that patien
The more informed my patients are, the better their decision making	34%	67%	85%	Do not have storage space to store m
t is important to me that my patients are active contributors to deciding their treatment program	34%	67%	71%	Not medically approved/sometimes ina
There are many promising new clinical trials and treatments on the horizon for lung cancer	34%	50%	44%	Not written at the patients' reading
Most important decisions around treatment are made by the oncologist	33%	37%	44%	Not in a format that I or my patie
like my patients learning about new treatment options and discussing them with me	29%	50%	not asked	Staff does not have time to distribute during appoir
When it comes to providing patients with info about their treatment options, I trust myself/doctor most	25%	25%	44%	Do not have info to actively engage patient in mea
encourage patients to seek out additional information from non-profit and government organizations	27%	23%	38%	(
When it comes to making a treatment decision, there's no	21%	38%	35%	Institution policy against materials from non-profits
time to waste I like my patients bringing printed materials during their	19%	23%	not asked	advocacy
appointment to discuss with me tell patients not to go online, because the information can	9%	8%	38%	•No single barrier is the predominant h
be misleading or depressing	070	070		up to inaction Specificity (customization to individual)
Oncologists appear to have more lukewarm attitudes	s toward patie	ent education than	do	medically approved information appear
pulmonologists and those in patient support roles.				
Do HCPs distribute patier	nt educ	ation ma	aterials?	Who is actually distribut
				which is actually distribut
HCPs HCPs Oncologists Nurse Nav/CCC Admin			in Oncologists & Pulmonolog	
N=216	N=52	EQ.	N=34	Nurse or Nurse Practitioner 61%
		10	00/	You personally 56%
28% distribute 32%	9%	12	2%	You personally 56% Patient Coordinator 37%
28% do not distribute materials to LC patients	9%	12	2%	

88%



•Overall, over a quarter do not distribute LC patient education materials •Directionally, physicians (oncologists and pulmonologists) are less likely to distribute materials than other HCPs

•The cancer center setting and higher volumes correlate with greater distribution

Distribution practices for educational materials are not standard and tend to be subject to the HCP's own discretion, leading to inconsistent delivery of materials. In-depth interviews with HCPs suggest several possible solutions, including customization to a patient/caregiver's unique type of lung cancer, availability of materials for distribution, and white labeling of materials to allow re-branding to an HCP's unique practice setting. Because HCPs know what they want from educational materials are being developed. Materials that meet the HCPs' needs are more likely to make it to patients. In addition, our study identified gaps in the HCP's office who is in charge of review and material distribution would help alleviate this issue.

materials themselves.

Dietician 8%

Administrative/Front Desk 15%

•Physicians say that nurses most often distribute materials, while nurse navigators and administrators say oncologists most often distribute them, leaving potential gaps in materials actually being distributed.



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Materials on this Topic	Oncologists	Pulmonologists	Nurse Nav/ CCC Admin
	n=89	n=37	n=30
vices for patients and caregivers	48%	59%	30%
ancial resources for patients and caregivers	44%	49%	37%
Information about clinical trials	46%	43%	37%
and management of side effects	39%	46%	40%
Explanation of targeted therapies	39%	41%	47%
Explanation of patient journey	38%	49%	30%
Explanation of the disease	34%	49%	37%
Explanation of immunotherapy	36%	51%	23%
What to expect with radiation	35%	38%	43%
of test results [C-T scans, biopsy, pathology report, MRI, etc.]		38%	40%
hat to expect with chemotherapy	33%	51%	17%
surgery and post-op experience	29%	51%	27%