Results

Guideline Preferences When Requesting Medical Information from Pharma

Figure 1: Top 3 Guidelines/Evidence Types Preferred by Oncologists (N=213)

<table>
<thead>
<tr>
<th>Country</th>
<th>Local Guidelines</th>
<th>National Guidelines</th>
<th>Global Guidelines</th>
<th>Cost of Therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australia</td>
<td>40%</td>
<td>33%</td>
<td>27%</td>
<td>33%</td>
</tr>
<tr>
<td>Brazil</td>
<td>48%</td>
<td>42%</td>
<td>30%</td>
<td>33%</td>
</tr>
<tr>
<td>China</td>
<td>49%</td>
<td>43%</td>
<td>28%</td>
<td>33%</td>
</tr>
<tr>
<td>Germany</td>
<td>44%</td>
<td>38%</td>
<td>30%</td>
<td>33%</td>
</tr>
<tr>
<td>UK</td>
<td>67%</td>
<td>51%</td>
<td>30%</td>
<td>33%</td>
</tr>
</tbody>
</table>

See Table 1 for a full breakdown of responses.

Figure 2: Preferred Content from Guideline/Evidence (N=213)

- Preferences for guidelines used for treatment decision-making in breast cancer vary by region, including which and how many guidelines are referenced, and how strictly the recommendations are followed.
- Global guidelines are most commonly reported as having a significant or large impact on breast cancer drug treatment plans across all regions assessed.
- When assessing regional preferences, the majority of guidelines/studies for breast cancer treatment are interpreted differently by oncologists in the US and Brazil.
- Peer reviewed literature is a key driver of decision-making.

Discussion/limitations

- This study provides insight on region-specific practices regarding cancer treatment guideline use in the breast cancer setting, and suggests the need for medical education/communications to be tailored to country-specific needs.
- Although the most commonly used guidelines are drug treatment decisions, oncologists in the US and Brazil report having more relevant clinical trial data when requesting medical information.
- Reporting of “majority” data may not be reflective of entire population.
- Peer reviewed literature may be interpreted to include guidelines.

Conclusions

- This study aims to identify the level of international utilization of local, regional, and global breast cancer treatment guidelines to direct oncology practice and make treatment decisions for patients.
- This study provides insight on region-specific practices regarding cancer treatment guideline use in the breast cancer setting, and suggests the need for medical education/communications to be tailored to country-specific needs.
- Although the most commonly used guidelines are drug treatment decisions, oncologists in the US and Brazil report having more relevant clinical trial data when requesting medical information.
- Reporting of “majority” data may not be reflective of entire population.
- Peer reviewed literature may be interpreted to include guidelines.

Background

- Globally, clinical practice guidelines are increasingly used to improve the quality of care for patients by providing evidence-based recommendations to be used in health care decision-making.
- Cancer treatment guidelines are created by various groups and may provide guidance at the local, national, and/or global levels. These guidelines may also consider factors such as resource availability and robustness of supporting evidence, which can result in differing recommendations from each guiding body.
- While there is data reporting practitioner adherence to specific guideline recommendations, the literature reports little regarding which guidelines the practitioner is utilizing, and to what extent they are being applied.

The authors have nothing to disclose.

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Methods

- In 2015, an anonymous, web-based survey, approved by Rutgers IRB, was distributed to physicians treating cancer in Australia, Brazil, China, Germany, the United Kingdom, and the United States.
- 38 responses were received from each region via 3rd party vendor.
- Respondents met the following criteria:
  - Has a medical specialty in oncology
  - Provides cancer-related drug treatment to breast cancer patients
  - Has practiced in the cancer setting for 3 or more years
- A 21 question survey assessed the following:
  - Respondent qualifications and demographics
  - Impact of various factors on breast cancer drug treatment plan decisions
  - Current practices regarding guideline/evidence used for breast cancer drug treatment decisions
  - Preferences regarding guidelines/evidence when requesting unsolicited drug information from a pharmaceutical company.
- Endpoints included the reporting of trends based on response metrics.
- “Majority” is defined by highest reported frequency

Results (continued)

DECISION FACTORS

Figure 4: Reasons to Choose an Alternative Treatment Option to Breast Cancer Guideline Recommendations

- Preferences for guidelines used for treatment decision-making in breast cancer vary by region, including which and how many guidelines are referenced, and how strictly the recommendations are followed.
- National guidelines are most commonly reported as having a significant or large impact on breast cancer drug treatment plans across all regions assessed.
- When assessing regional preferences, the majority of guidelines/studies for breast cancer treatment are interpreted differently by oncologists in the US and Brazil.
- Peer reviewed literature is a key driver of decision-making.
- Reporting of “majority” data may not be reflective of entire population.
- Peer reviewed literature may be interpreted to include guidelines.