

Atopic Dermatitis Web Apps: Tethered Tools to Support Patients and Providers in Shared Decision-Making, Self-Management, and Therapy Access

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INTRODUCTION

- Engaging in shared decision-making (SDM) and accounting for patient-reported outcomes in treatment decisions can improve the assessment and management of atopic dermatitis (AD), optimizing patient-centered care.¹ Effective patient-provider communication and education are critical components of SDM.²
- Unfortunately, several barriers to the achievement of optimal outcomes in AD exist at the patient, provider, and payer levels.³⁻⁶
- Effective tools are needed to support patients and providers in SDM and navigating access to appropriate therapies. We developed and evaluated educational patient and provider web apps (available at https://ad.care) that present users with aligned content designed to close gaps in SDM and timely treatment. Opt-in survey items are included to assess patient/ provider perceptions and actions. Here we report key insights from results of these surveys.

METHODS

- We developed patient and provider web apps that present aligned education on evidence-based treatment recommendations for AD, combined with tools and strategies for applying SDM and navigating managed care processes.
- The web apps were reviewed by a dermatologist, a patient with AD, and representatives from the Academy of Managed Care Pharmacy (AMCP) Foundation to ensure relevance across stakeholders.
- Pre- and post-education survey items were embedded to evaluate the effectiveness of the tools and to assess patient and provider perceptions of AD treatment and management.
- Users navigating through the web app can bookmark relevant information, tips, and resources to a personalized handout for download.
- The browser-based experience (vs native smartphone app) ensures easy access on any internet-enabled device without the need to download any software or register an account.
- Statistical analysis was done by a chi-square test to assess the differences in responses among patients and providers. All the analyses were performed using SPSS version 24 and a *P* value of \leq .05 was considered statistically significant.



RESULTS

Table 1. Web App User Metrics				
	PATIENT	PROVIDER		
Total web app access	868	4,520		
Unique web app accesses	633	2,154		
Returning accesses	198	1,023		
Patient care guide downloads	66	N/A		

Figure 1. Patient Self-Reported Knowledge and Perceptions (N = 336)



53%

of providers rated their

ability to implement

SDM as good or

very good

N = 805



48%

of providers were

confident in their

ability to navigate

prior authorizations

N = 805

Table 2. Patient Characteristics

Table 3. Provider Characteristics

Nurse practitioner/physician assistant

Monthly AD patient volume, average

AD patients have moderate to severe

Providers who report that \geq 26% of their

PROVIDERS (N = 805)

Nurse/case manager

Allergy/immunology

Discipline

Physician

Pharmacist

Other

Specialty

Primary care

Pediatrics

Other

(range)

disease

PATIENTS (N = 336)	
Female	60%
Mean age (years)	31
Mean AD disease duration (years)	19
Estimated disease severity Mild Moderate Severe	18% 60% 22%
Insurance Medicare/Medicaid Commercial/individual Federal exchange Not sure None	19% 48% 6% 21%
Treatments Moisturizers and lotions Topical steroids Oral steroids Topical calcineurin inhibitor Phosphodiesterase 4 inhibitor Biologic No current treatment Not sure	65% 55% 14% 16% 14% 12% 6% 4%

34%

20%

24%

14%

8%

23%

31%

31%

8%

7%

22 (1-75)

32%

Patients (N = 336)







Providers (N = 805)



AD patients about self-management

 $\mathbf{\hat{\mathbf{O}}}$ **59%** plan to engage AD patients more

frequently in SDM



plan to improve documentation of patient information

CONCLUSIONS

Key findings from the surveys:

- Although 82% of patients rated their AD as moderate or severe, only 12%
- reported that they were taking a biologic. • Patients reported low levels of knowledge about AD, treatment options,
- and insurance. Providers had limited confidence navigating managed care processes, and patients reported a lack of support in doing so. Providers lacked confidence in implementing SDM.
- Discordance between patients and providers was observed in treatment goals, factors influencing therapy selection, and reasons for nonadherence.
- Following engagement with the web app, many providers planned to engage AD patients more in SDM, educate them about self-management, and improve documentation of patient information.

These survey findings can inform strategies to advance AD care. The web apps present a digital solution for patient and provider education, and they may be useful in improving SDM and timely access to evidence-based treatments.



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AUTHOR DISCLOSURES

Peter A Lio, MD FAAD has identified the following relationships with commercial interests to disclose:

Advisory Board/Panel – AbbVie, AOBiome, Amyris, IntraDerm, LEO Pharma, Menlo Therapeutics, National Eczema Association, Pfizer, Pierre Fabre, Realm Therapeutics, Regeneron/Sanofi Genzyme, UCB, Unilever Consultant – AbbVie. Altus/Franklin. Arbonne. Dermira. Eli Lillv and Company, LEO Pharma, Micreos, Regeneron/Sanofi Genzyme, Theraplex Principal Investigator of Research Grant – *AbbVie*, *AOBiome*, Regeneron/Sanofi Genzyme Speaker's Bureau Promotional Education – Galderma, Pfizer, Regeneron/Sanofi Genzyme

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