

# Biosimilars: Changing the Treatment Landscape for Inflammatory Conditions

## Introduction & Gaps

**Introduction:** As biosimilars become available in the market to potentially lower costs of inflammatory conditions and increase patient access to highly effective and targeted therapies, NPs can help ensure that patients have access to necessary education and to be a part of their care. As front-line providers, NPs are in a unique position to educate patients on the adoption of biosimilars. Patients will look to NPs as patient advocates to answer their questions regarding the safety and efficacy of biosimilar agents. This educational activity focused on education to ensure that NPs have the tools to answer their patients' questions and guide the successful transition and utilization of biosimilar agents.

- Knowledge Gaps
- Biosimilars are a class of medication approved by the FDA. NPs may be unfamiliar with the concept of biosimilars in relation to their originator drug.
  - NPs require up-to-date targeted education related to appropriately selecting patients who will benefit from switching from originator drugs to biosimilars.
  - As front-line providers, NPs are uniquely positioned to provide patients with the most up-to-date information regarding the safety and efficacy of biosimilar use. NPs must be provided with the tools to provide patients with educational sessions to ensure patients are comfortable with their management

## Program Information & Methods

**Programs:** Training occurred through an accredited monograph hosted on-demand. One unaccredited podcast was produced and hosted on AANP's platform - NP Pulse: The Voice of the Nurse Practitioner®.

**Data Collected:** Changes in knowledge, competence, self-reported changes in confidence and practice habits, and identification of remaining gaps.

**Measurements and analysis:** Questions were asked before and immediately after the activity. A 60-day follow-up survey was sent to participants who completed the activity to identify any practice changes made.

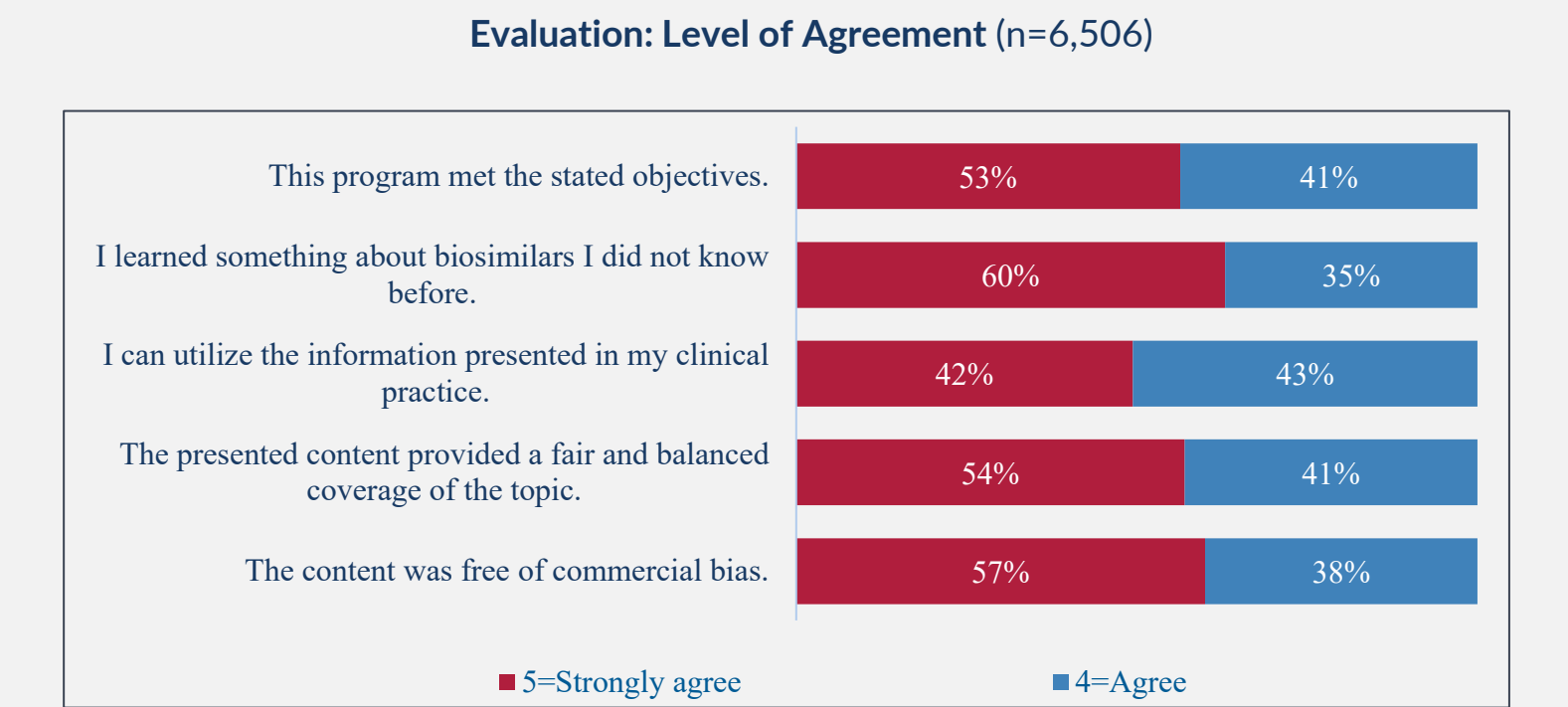
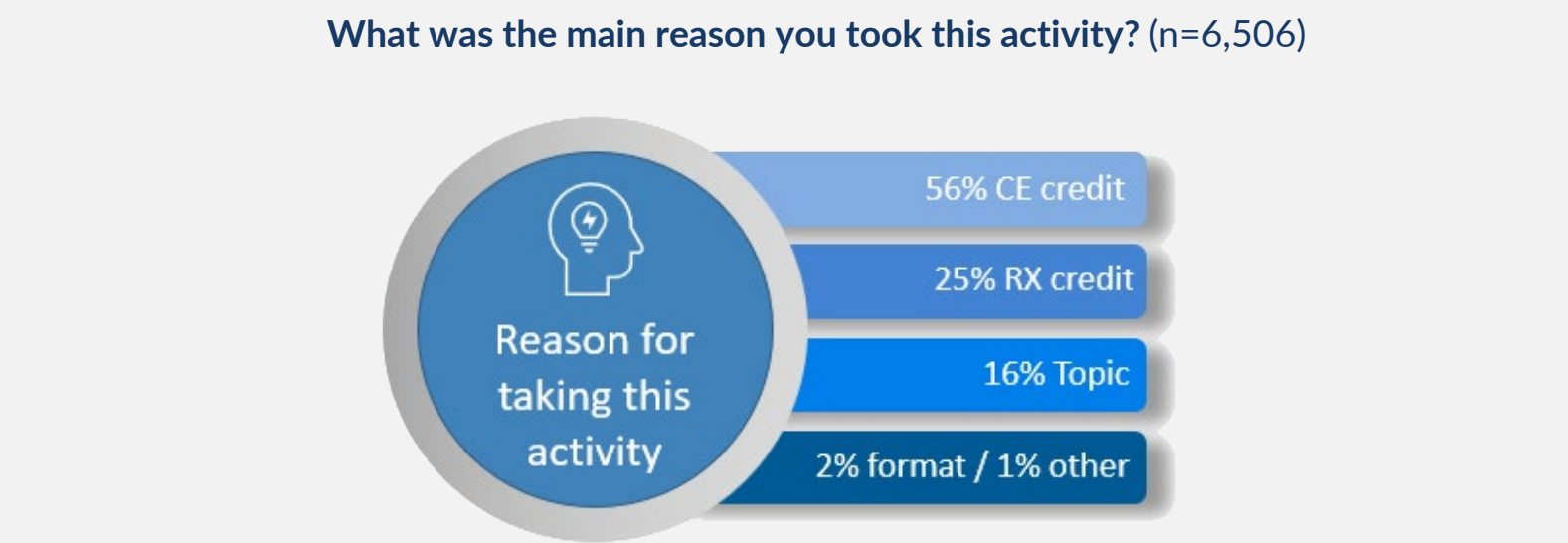
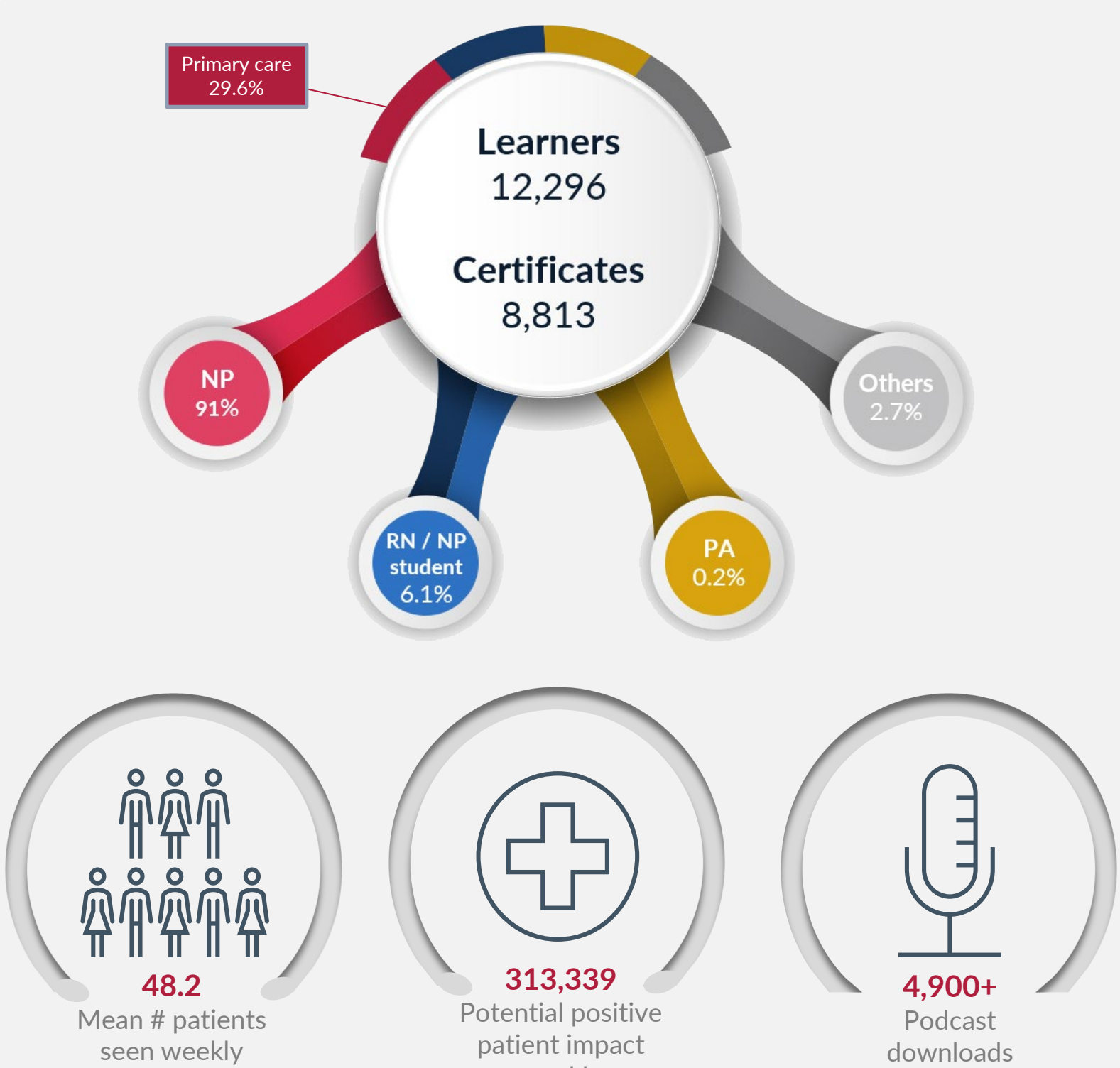
- A paired analysis of pre/post results was conducted. These data were filtered to include only learners who self-reported seeing patients weekly (n=6,506). N=99 for the follow-up survey, of which 78 self-report seeing a combined total of 1,159 patients with inflammatory conditions weekly.
- Demographics (pre), evaluation (post), and follow-up survey results shown here use descriptive statistics
- Tests used to identify statistically significant differences pre to post:
  - McNemar test for each of 10 multiple choice knowledge/case questions
  - Wilcoxon test for % correct knowledge/case questions, and the confidence rating scale questions
- P ≤ 0.05 indicates a statistically significant difference
- Effect Size (ES), to indicate the size of the change, was also calculated as appropriate (Cohen's d): 0.20 = small, 0.50 = medium, 0.80 = large.

## Faculty & Reviewer

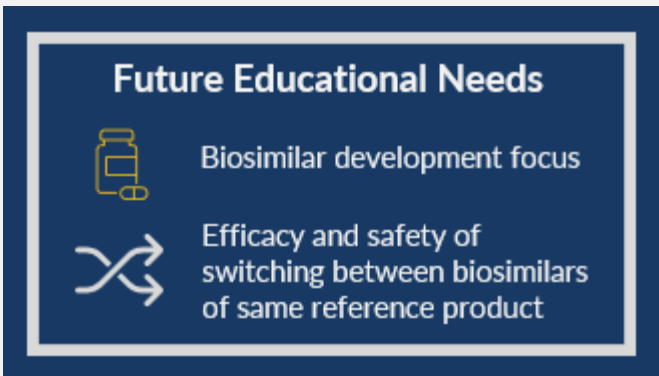
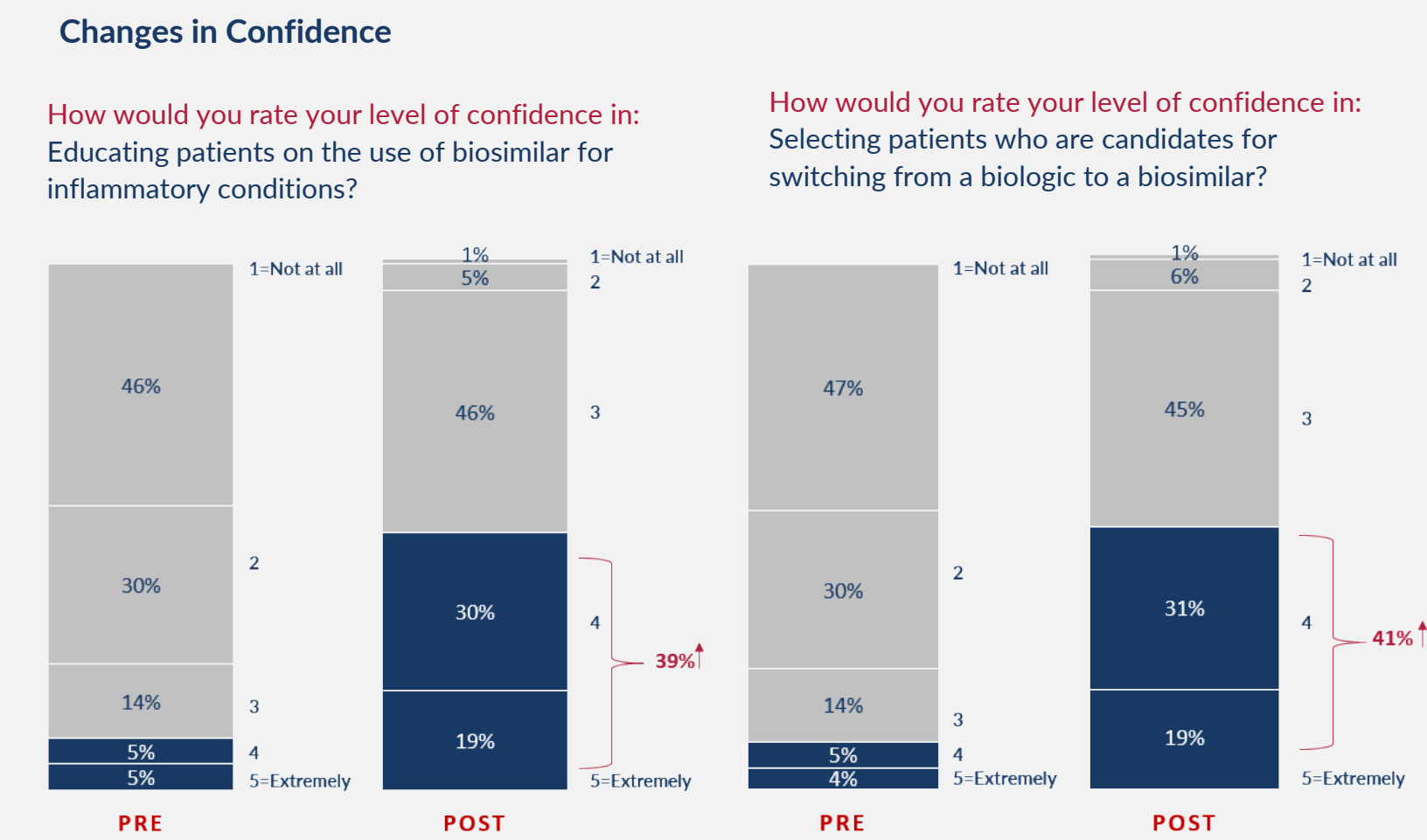
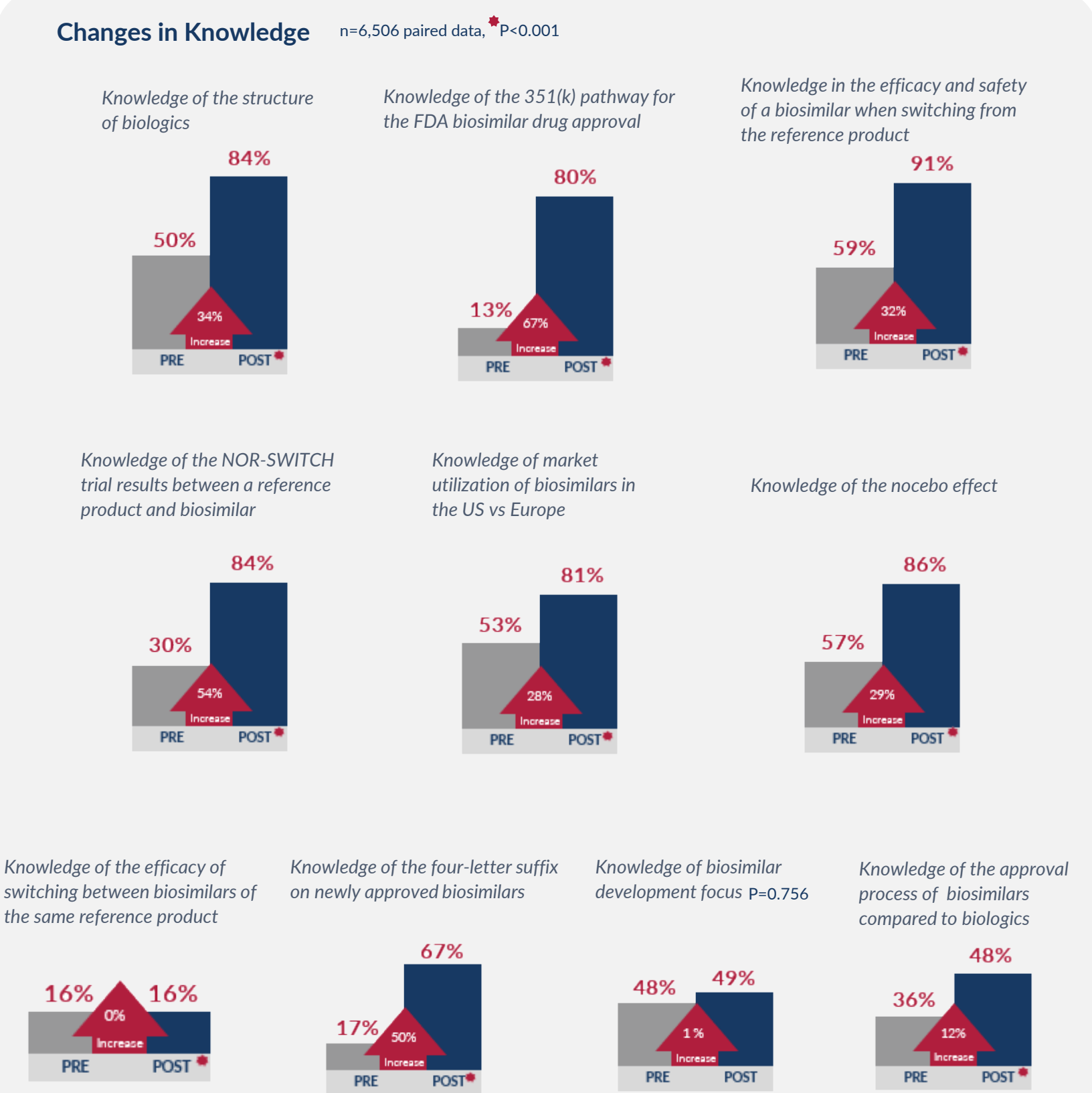
Lisa Kennedy Sheldon, PhD, ANP-BC, AOCNP, FAAN  
Oncology Nurse Practitioner  
St. Joseph Hospital  
Global Nurse Consultant

Expert Reviewer  
Sharon Dudley-Brown, PhD, FNP-BC, FAAN, FAANP  
Associate Professor  
University of Delaware, School of Nursing  
Assistant Professor  
John Hopkins University, School of Medicine

## Learner Demographics and Engagement



## Results



## 60-Day Follow-up (n=99)

