



EyeConnect: A Multimethod, Interprofessional, CE-Certified Initiative to Improve Diabetic Eye Care Across the Continuum

Alison Kemp; Christine Kocienda; Gincy McDonald | Paradigm Medical Communications, LLC

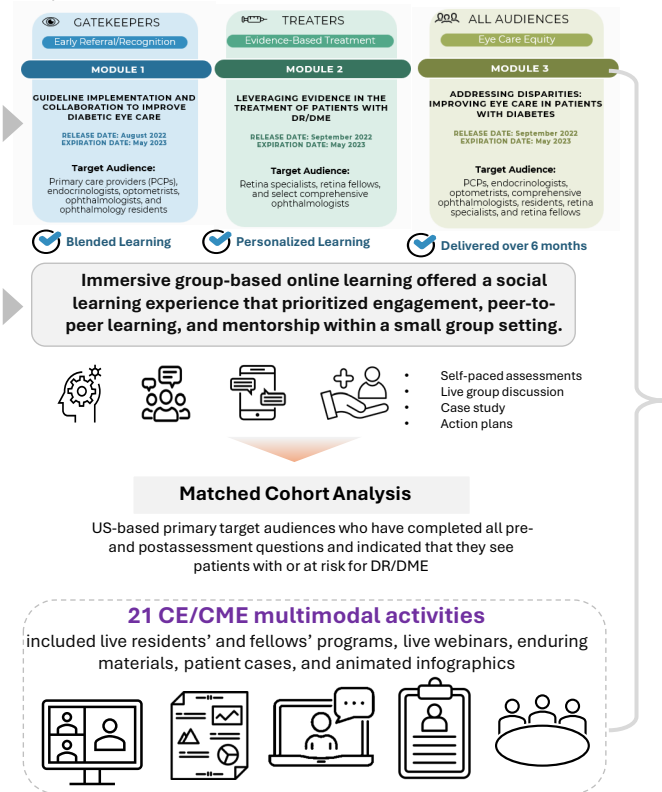


BACKGROUND

Preventable vision loss from diabetic retinopathy (DR) and diabetic macular edema (DME) remains a persistent challenge driven in part by delays in screening, diagnosis, referral, and treatment—particularly among underserved patient populations. [CDC 2020] DR is the leading cause of blindness among working-age adults in the United States. Since these challenges span multiple care settings and specialties, improving outcomes requires proactive engagement from all clinicians who manage patients with or at risk for DR/DME. As a result, Paradigm Medical Communications, LLC, in collaboration with the American Academy of Physician Associates, the American Association of Nurse Practitioners, the California Academy of Family Physicians, Endocrine Society, the National Minority Quality Forum's Center for Sustainable Health Care Quality and Equity, and Salus University Pennsylvania College of Optometry, developed the interprofessional education, CE-certified initiative ***Eye Connect: Take Action to Prevent Blindness for Your Patients With Diabetes***, aiming to improve multidisciplinary collaboration, early recognition, and evidence-based treatment of DR/DME across diverse clinical audiences.

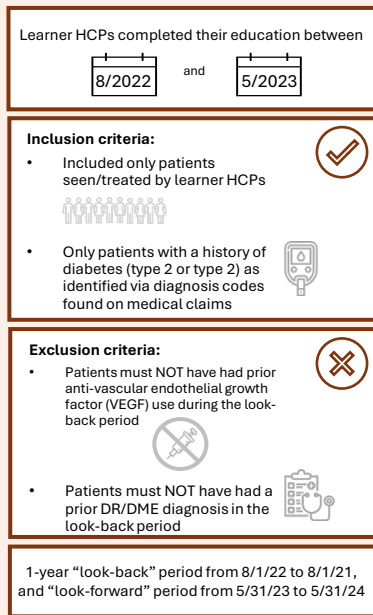
METHODS:

Between **August 2022 and May 2023**, **3 educational modules were launched**, each comprising multiple activities designed to address specific gaps experienced throughout the DR/DME care continuum for **gatekeepers (primary care physicians, endocrinologists, nurse practitioners, physician associates, optometrists, comprehensive ophthalmologists, ophthalmologists, and ophthalmology residents) and treaters (retina specialists and retina fellows)**. Outcomes were evaluated using qualitative and quantitative matched cohort data analyses, including pre/postassessments of knowledge, competence, and confidence, supplemented by a longitudinal study that included real-world clinical behavior comparisons between learners and matched controls.



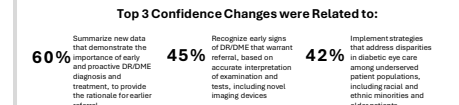
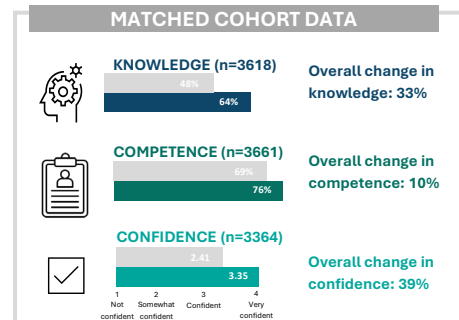
LONGITUDINAL REAL-WORLD STUDY

OBJECTIVE: To measure and assess the impact of medical education programs on the behavior of learner healthcare practitioners (HCPs) as compared with nonlearner HCPs (control group) and assess the impact on outcomes of the patients managed/treated by these learner HCPs via a patient journey analysis



RESULTS

Collectively, **participants reported potentially impacting over 2 million patients annually**, with more than 80% managing individuals with or at risk for DR/DME on a weekly basis. Results from matched cohort pre- and postactivity assessments demonstrated significant improvements:

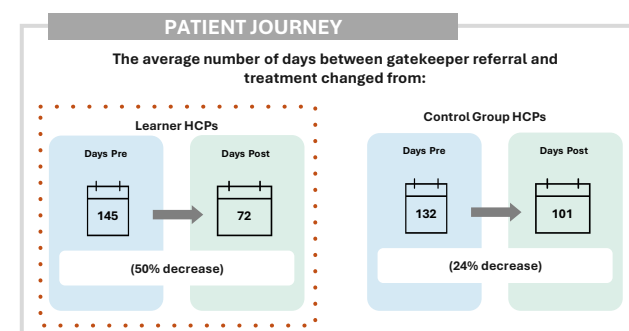
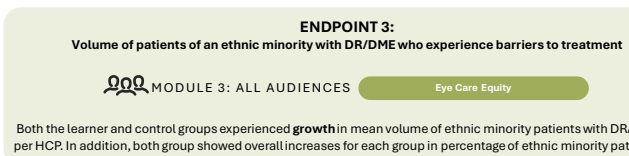
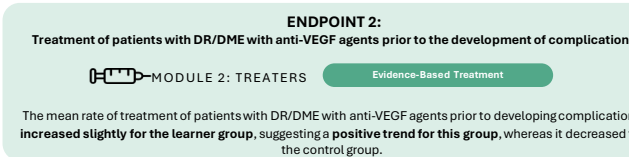
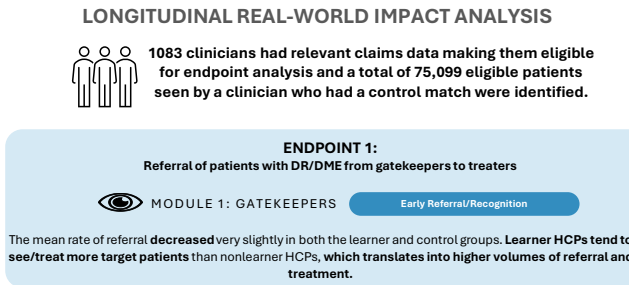


- Immersive Group-Based Online Learning**
- Gatekeeper activity:**
- 300 participating learners
 - 168% knowledge/competence change related to recognizing key factors for patient education that are needed to catalyze uptake of recommended eye care in patients with diabetes
 - 97% reported that they made progress on implementing their action plan
- Treater activity:**
- 150 participating learners
 - 60% knowledge/competence change related to assessing the effects of intravitreal anti-VEGF therapy on DR/DME, as evidenced by recent data and differentiating among new and emerging strategies for more durable dosing of anti-VEGF to treat DR/DME

9756 TOTAL LEARNERS
3519 US-based cohort learners reported seeing a combined total of **49,214 patients with or at risk for DR/DME each week**.

TOP SPECIALTIES

Primary care Ophthalmology Optometry



CONCLUSIONS:

The EyeConnect educational initiative successfully demonstrated the value of CME in addressing complex, multidisciplinary healthcare challenges by equipping clinicians with the tools to recognize and act on early signs of DR/DME, bridging critical gaps in patient care.

The outcomes underscore the need for sustained efforts, including patient advocacy, increased funding for CME programs, and leveraging innovative technologies to enhance patient care. It is imperative to align HCPs so that they are able to work collaboratively to provide optimal eye health care to patients who have or are at risk for developing blindness or other eye-care related complications.

The need for continued education in 3 areas stood out:

- Recognize early signs of DR/DME that warrant referral, based on accurate interpretation of examination and tests, including novel imaging devices
- Identify barriers to diabetic eye care in vulnerable patient populations, such as older patients and racial and ethnic minorities
- Differentiate among new and emerging strategies for more durable dosing of anti-VEGF to treat DR/DME

ACKNOWLEDGMENTS:

This educational initiative was supported by an independent medical educational grant from Regeneron Pharmaceuticals, Inc. Paradigm Medical Communications, LLC extends our sincere gratitude to the expert faculty, steering committee, and reviewers who guided this initiative. We also thank our collaborators:

