JOHNS HOPKINS SICKLE CELL DISEASE TELE-ECHO® CLINIC CONFERENCE SERIES

Rosalyn Stewart, MD, MS, MBA
Associate professor

JOHNS HOPKINS
SCHOOL *of* MEDICINE

FUNDED BY

SiNERGē
NORTHEAST REGIONAL
SICKLE CELL COLLABORATIVE

SUMMARY

Johns Hopkins Sickle Cell Disease ECHO seeks to increase the quality of care for individuals living with sickle cell disease

185 providers reached

Inception 9/1/2015

Increased Provider Confidence in treating Sickle Cell Disease

Established Supportive Learning Community

Meet the Expert Panel

Lydia Pecker

Pediatric Sickle Cell Expert

Rosalyn Stewart

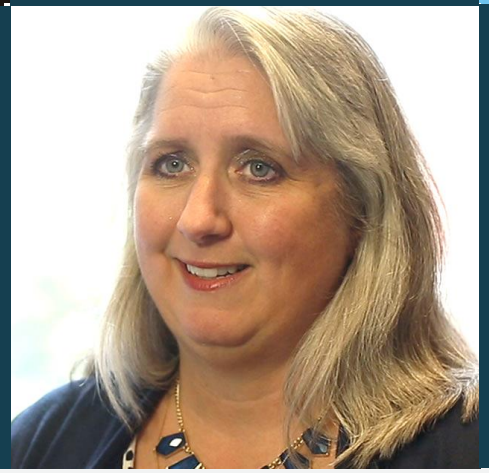
Primary Care and Care Coordination Expert

Nikia Vaughan

Community Health Worker Expert

Sophie Lanzkron

Adult Sickle Cell Expert



Pat Carroll

Pain and Psychiatric Expert

Weekly SCD teleECHO® Clinic Schedule

Introductions

~30 min. Case 1

10-14 min. Didactic

~ 30 min. Case 2

1.25 hours

Didactic Topic Sampling

Pain Management

- Opioid Equivalency
- Non-opioid Pharm
- Pain and Addiction

Fundamental Sickle Cell Care

- Iron Overload
- Practical Guide to Acute Chest Syndrome
- Transfusion Reaction
- Hydroxyurea for Sickle Cell Disease

Panoptic Sickle Cell Care

- Stigma
- Primary Prevention
- Behavioral Interviewing

By the Numbers

98 Clinics

123 hours

95 didactics given by 14 individuals

175 Case presentations of 159 unique patients

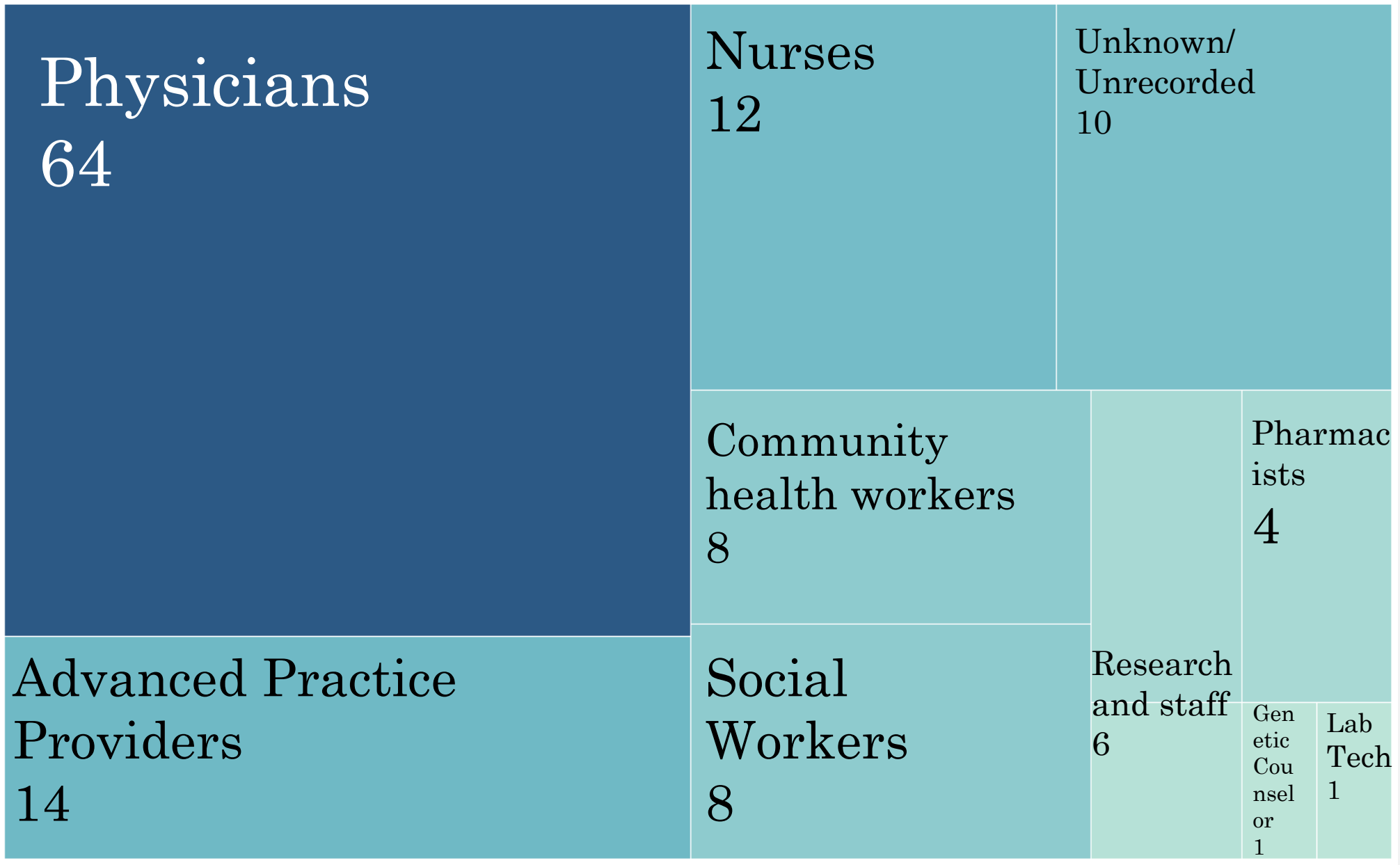
196 CME Hours

50 Spokes

185 unique participants

Since inception: 9/1/2015

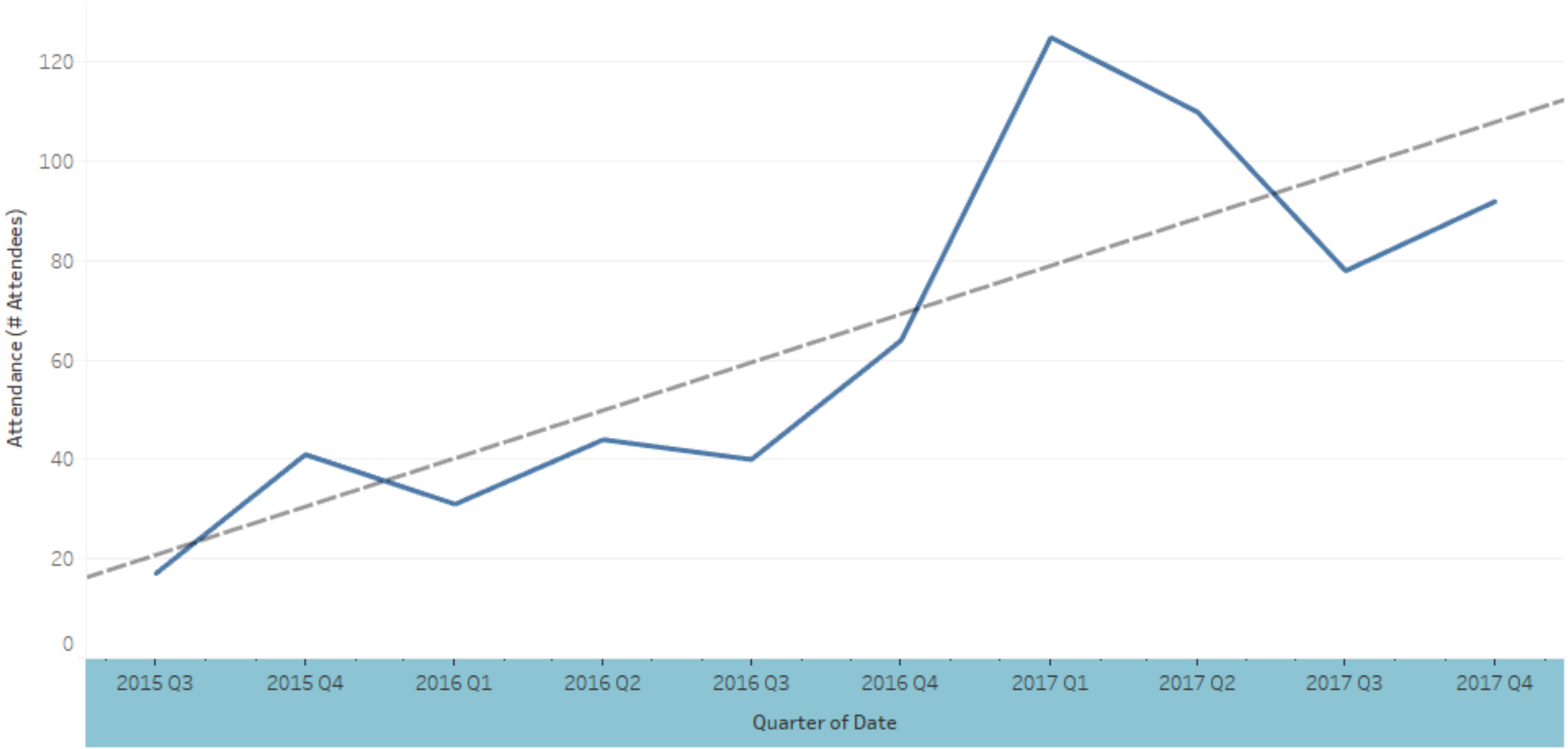
Interdisciplinary Attendees



Reach

Reach

Attendance Over Time



Recruitment

- Word of mouth
- Flyer distribution at local sickle cell events
- Promotion at Grand Rounds and Academic Presentations
- Advertising, Journal Articles, Press
    - *ACP Hospitalist*

produce an effect, so interrupting treatment is unlikely to prolong a hospitalization for sickle cell crisis, according to Dr. Hassell. "From a hospitalist's perspective, don't worry about getting an emergency formulary approval, but continue giving it if it is available," she said.

The therapeutic pipeline

Many more sickle cell therapies are on the horizon, and some already are in late-stage trials.

One promising candidate is rivipansel, a small molecule that stops sickle erythrocytes from adhering to the vascular endothelium by inhibiting the adhesion molecules P-selectin and E-selectin.

In a double-blind phase 2 trial, treatment with the pan-selectin inhibitor shortened the duration of vaso-occlusive crisis by 63 hours compared with placebo. The most common treatment-emergent adverse effects were gastrointestinal symptoms and rash, but rates of serious adverse events were similar between study arms, researchers reported in

Project ECHO offers free remote sickle cell consults

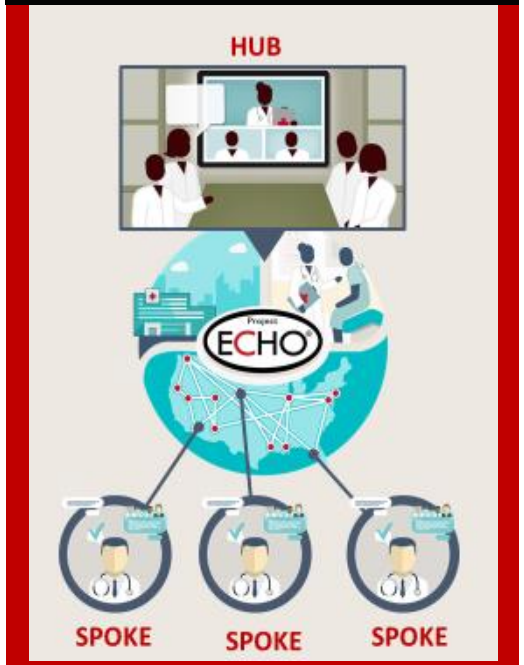
Hospitalists who need guidance on managing patients with sickle cell disease can join free weekly virtual telementoring rounds offered by Project ECHO, said Sophie M. Lanzkron, MD, who leads one of the project's hubs and is an associate professor of medicine and oncology at Johns Hopkins School of Medicine in Baltimore.

Each videoconference includes sickle cell cases presented by hospitalists and other clinicians seeking treatment suggestions. An expert offers advice plus a short didactic lecture. "We have found that the best way to help our hospitalist colleagues is to work with them to develop patient-specific treatment plans," Dr. Lanzkron said. "Once these are in place, it is much easier for everyone, including the patient, to understand and set appropriate expectations."

The program is free and hospitalists can join ad hoc—no ongoing commitment is required. To learn more, email Dr. Lanzkron.

Project ECHO®

Johns Hopkins University School of Medicine



Johns Hopkins Sickle Cell Disease ECHO® Clinics

Who should participate in the Johns Hopkins Sickle Cell Disease ECHO®?

Primary Care Providers, Hematologists, Emergency Department Providers, Nurses, Social Workers, Hospitalists, and Advanced Practice Providers who would like to learn more or become experts in Sickle Cell Disease care.

What is a typical Johns Hopkins Sickle Cell Disease ECHO® Clinic like?

Participants connect to this highly interactive telementoring video conference by phone, tablet, pc, phone or in person. During each clinic we discuss **two cases** presented by participants. In between the case discussions, there is a brief **didactic presentation** on an aspect of sickle cell care. These topics might include Acute Chest Syndrome, Neurological complications, ED Management, Pain Management, among many more.

The ECHO® Clinic is hosted virtually
Every Wednesday
1:00pm-2:15pm

How can I find out more information or register to attend on the Johns Hopkins Sickle Cell Disease ECHO®?

Contact Bailey House at bailey.house@jhmi.edu or 443-287-0608

Challenges

- Spoke recruitment
- Cases

Success

Participant Self Reported Evaluations I am confident in my ability to:	Pre-ECHO	Post-ECHO (>=6 months)	Change	Percent Change
Recognize acute chest syndrome	5.00	6.11	1.11	18%
Recognize the indications for hydroxyurea	5.27	6.00	0.73	12%
Initiate hydroxyurea management	4.80	5.67	0.87	15%
Titrate hydroxyurea dosing	4.80	5.78	0.98	17%
Understand a sickle cell crisis can occur without objective findings	5.60	6.56	0.96	15%
Manage chronic pain in patients with sickle cell disease	4.40	5.78	1.38	24%
Manage acute pain in patients with sickle cell disease	4.80	6.22	1.42	23%

Success

- Made a formal agreement with one spoke to start
- Responsive to spoke needs
- Experience is free and convenient
- Offer CMEs
- Form a community of care
- Access to team of experts for consultation in safe space

NEXT STEPS

- *Test polling features*
- *MOC*
- *Increase spoke case presentation rate*
- *Continued recruitment*