

Survey: How pulmonologists use biomarker testing

The American College of Chest Physicians (ACCP) recently partnered with Boehringer Ingelheim Pharmaceuticals, Inc. (BIPI) on a survey exploring how pulmonologists from the ACCP incorporate biomarker testing into the care of patients with lung cancer; a similar survey was also conducted by Boehringer Ingelheim among pathologists. The survey results point to an increased role of these physicians in biomarker testing, as well as greater multidisciplinary collaboration. They also reveal an opportunity to improve how soon these tests are requested and to identify challenges with testing, including collecting a sufficient amount and quality of lung tissue.

Biomarker testing is critical in the diagnosis of lung cancer, as it helps physicians determine a patient's specific type of cancer and inform a personalized treatment approach.

The results from the two surveys reflect responses and experiences of 100 ACCP pulmonologists and 250 pathologists practicing in the United States. The surveys were conducted online by Harris Interactive in November and December 2012.

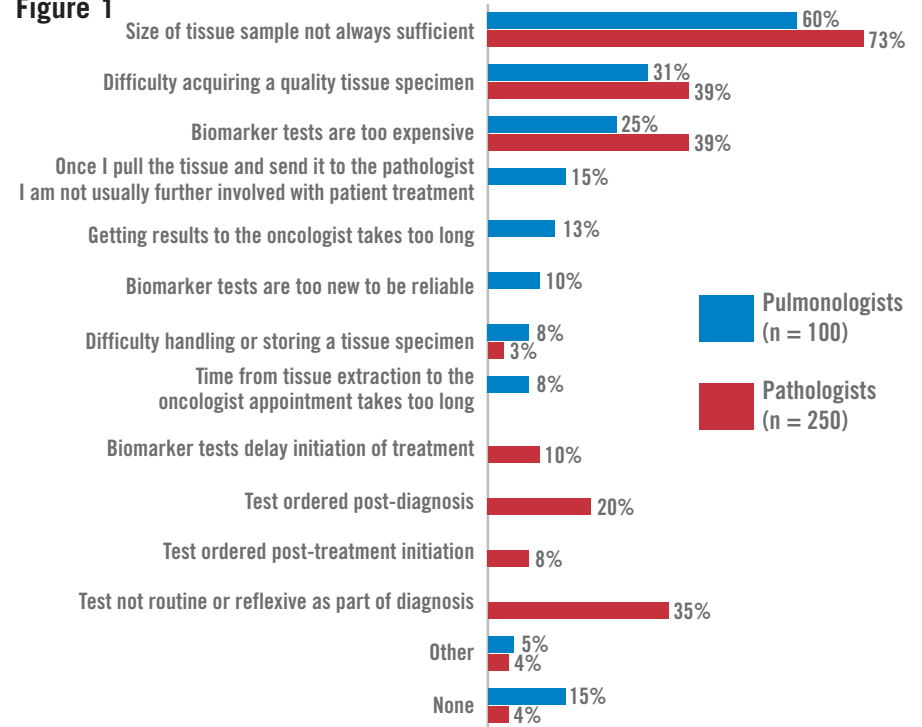
Facing similar challenges

The two surveys revealed the potential need for consistent guidelines on the size and quality of tissue needed to perform biomarker testing. Both pulmonologists and pathologists said the biggest challenges with biomarker testing include not always acquiring a tissue sample that is sufficient in size (60% and 73%, respectively) or quality (31% and 39%, respectively). About half of pulmonologists surveyed (41%) do not believe they have enough information about the size of tissue needed (Fig 1).

Differing opinions

Survey responses highlighted a difference in opinions around the most appropriate tissue acquisition methods: 51% of pulmonologists believed endoscopy biopsy to be the method yielding the most appropriate balance between quantity and quality of tissue and risk to the patient; just 15% of pathologists agreed. In contrast, one-third of pulmonologists (33%) believed fine needle aspiration to be the best method, with only 10% of pathologists agreeing. Interestingly, 63% of pathologists and 44% of pulmonologists believe core

Figure 1



Source: Boehringer Ingelheim

IMNG Medical Media

Biggest challenges regarding biomarker testing. Results taken from two surveys conducted online by Harris Interactive in late 2012, including 100 ACCP pulmonologists and 250 pathologists, respectively.

biopsy to be the most appropriate method.

These findings suggest a need for

greater guidance around the proper techniques to obtain tissue samples

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New Guidelines Now Available

Diagnosis and Management of Lung Cancer, 3rd Edition

New and updated lung cancer guidelines are now available, published in May 2013 as a supplement to *CHEST*. The 3rd edition includes innovative procedural and methodological advancements that have changed previous recommendations, including:

- The most recent staging system and methods for staging.
- Recommendations for tobacco dependence treatment in lung cancer patients.
- A more critical approach to guideline development, employing the latest standards of evidence-based medicine.
- Focus on advancements in symptom management and palliative and end-of-life care.
- Focus on outcomes deemed patient-important.

The **print version** of the guidelines includes the executive summary, introduction, and methodology for the development.

The **online version** features the complete guidelines, including articles on individual topics, evidence profile tables, and more.

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of adequate size and quality at first biopsy. This is not only important for an accurate and rapid diagnosis, which can help inform treatment decisions, but also important for patients who would otherwise be subjected to additional risk by undergoing more than one invasive procedure to gather enough tissue samples for testing.

Opportunity for greater adoption of 'reflex' testing exists

Through reflex – or automatic – testing in advanced non-small cell lung cancer (NSCLC), tissue samples are tested for biomarkers immediately after diagnosis, with the goal of allowing oncologists to review the results before the patient's first visit. The re-

sults from surveyed pulmonologists and pathologists suggest that they have started to embrace reflex testing, but there is potential to increase its use.

Specifically, nearly half (43%) of pulmonologists and one-third (33%) of pathologists implement reflex testing in their practice or local health-care community for patients with NSCLC (Fig 2).

Greater collaboration with the multidisciplinary team

In what should be good news for patients, the survey also showed that pulmonologists and pathologists are increasingly utilizing a multidisciplinary approach to care. In fact, pulmonologists and pathologists report having increased discussions with a multidisciplinary team over the past 5

years (65% and 57%, respectively), and most pulmonologists and pathologists report consulting with oncologists (85% and 92%, respectively) (Fig 3).

"The medical community is moving in a positive direction, but an opportunity exists for greater collaboration in incorporating biomarker testing into a patient's care early on, with the goal of initiating an appropriate lung cancer treatment plan as soon as possible," said Kevin Lokay, vice president and business unit head, Oncology, Boehringer Ingelheim Pharmaceuticals, Inc. "It is encouraging to see how a multidisciplinary approach to testing is becoming more common in the diagnosis and care of cancer patients."

The surveys complement Boehringer Ingelheim's Let's Test ini-

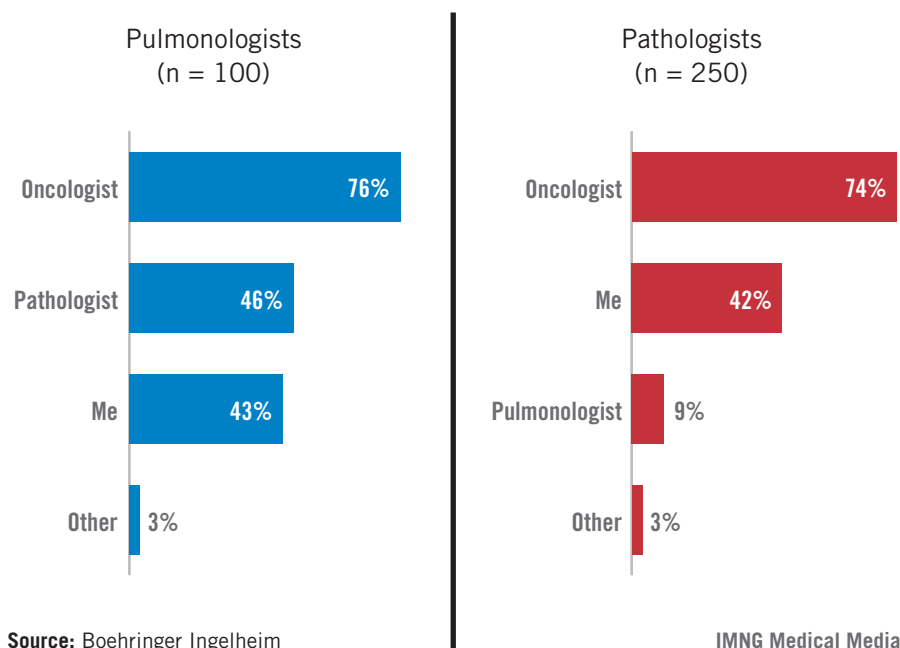
tiative, which aims to educate health-care professionals about the important role they play in the diagnosis and treatment of NSCLC, and the critical role of biomarker testing.

If you would like to learn more about what ACCP is doing in the area of caring for patients with lung cancer, the new ACCP Lung Cancer Guidelines, 3rd edition, has been published as a supplement to *CHEST* in May 2013.

For more information, visit journal.publications.chestnet.org/.

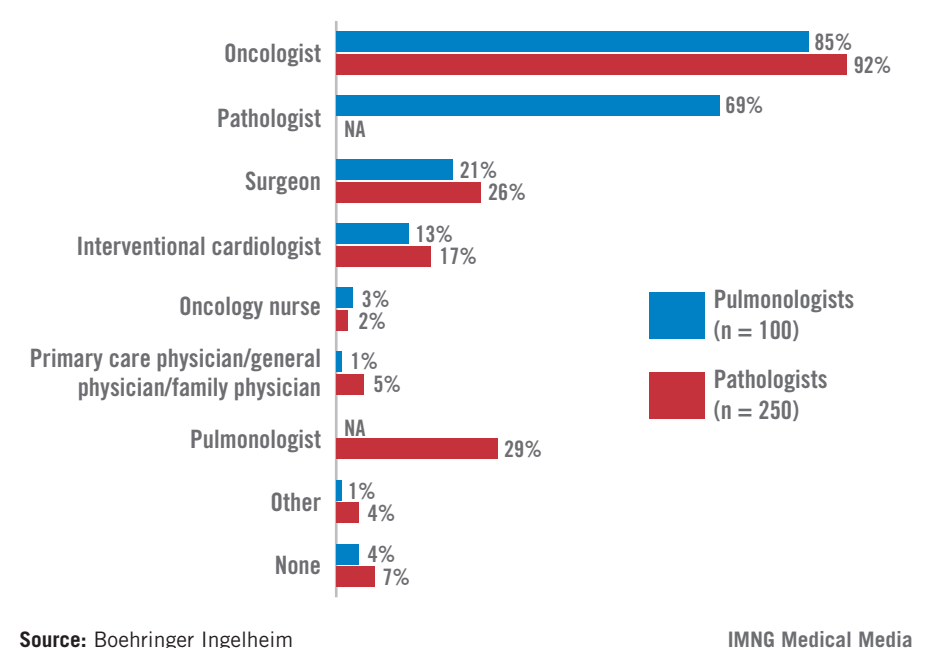
Disclaimer: The data obtained from these surveys are self-reported and subjective; the ACCP was not directly involved in the writing of the survey questions, but rather participated by facilitating the collection of anonymous responses from its members.

Figure 2



Physicians who order biomarker tests for lung cancer patients. Results taken from two surveys conducted online by Harris Interactive in late 2012, including 100 ACCP pulmonologists and 250 pathologists, respectively.

Figure 3



Consulting with various health-care professionals about biomarker testing. Results taken from two surveys conducted online by Harris Interactive in late 2012, including 100 ACCP pulmonologists and 250 pathologists, respectively.

Share knowledge through ACCP PREP® programs

In today's health-care environment, our industry sales teams do not get a second chance to establish their credibility and knowledge. From the outset, they must be prepared and confident to truly engage with clinicians.

ACCP PREP is an intense clinical immersion program geared to help sales representatives understand the critical thinking that goes into the diagnosis and treatment of a disease state. Taught by clinicians and built by ACCP members, PREP gives sales teams the core clinical knowledge and behavioral insights they need to help health-care professionals achieve the best possible outcomes for patients.

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ACCP PREP uses leading hospitals as the learning environment, so teams can experience the pressures and choices that clinicians face on a daily basis. Conducted at one site or multiple sites, after participants complete PREP, they're better equipped to perform their daily duties and affect patient outcomes. They're able to communicate more effectively with health-care teams and are more confident to begin the conversation. Most important, upon meeting all requirements, participants become certified by ACCP in a specific disease state for 3 years.

PREP's value to ACCP's mission

As a resource for evidence-based clinical practice guidelines and a world leader in forward-looking medical education, the ACCP is known for its ability to translate the latest data into clinical practice. Most recently, ACCP members helped develop and deliver a VTE PREP program. The ACCP would like to extend thank s to the following:

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ACCP PREP programs help promote the education of our industry partners and help financially support the mission of the College. For more information or to become involved, contact Noreen Matthews at nmatthews@chestnet.org.