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Objective

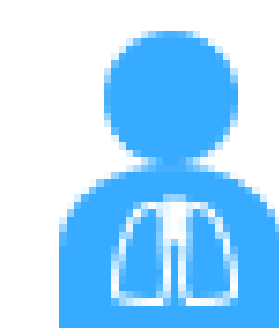
- Widespread availability of FDA-approved targeted therapies makes biomarker testing a critical aspect of diagnosing and selecting treatments for lung cancer.
- Next generation sequencing (NGS) biomarker test reports filled with medical jargon create challenges for patients and clinicians.
- An exploratory audit of 16 reports revealed variation across structure, format, language, and content.²
- Gaining qualitative insights on patient/provider experiences may inform how to address barriers in helping patients understand how biomarker results guide treatment selection.

Intervention

- Applied qualitative analysis with focus groups regarding structural aspects and/or components of biomarker:
- Two focus groups with people with lung cancer from diverse backgrounds (LUNGevity-connected and General patients) who had biomarker testing.
- Two focus groups with multi-disciplinary HCPs with experience ordering, receiving, and reading NGS reports.



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What Patients Want

To know that all appropriate testing was done

Clearly see what they have that is actionable

Understand therapy options that are indicated (not what is not)

Clear explanation of resistance

That clinical trials available

Detail on what pertains to them (not detail on what does not)

What does it mean if no biomarkers detected

“I wish there was a patient version. Take all that external info out & just provide the patient with a small not 10, 12 pages, but just with patient information. So it's easy for them to read.”

**ONCOLOGY NURSE
PRACTITIONER**



What HCPs Want

Process that helps prepare patients in advance of results

Directs patients to appropriate resources

Identifies the most important markers and treatments

Drills down to the essentials – what is relevant for that patient

Explains resistance, but avoids statistics/generalization

Introduces clinical trials into the conversation early

“When I first saw that I was PD-L1 negative, I was relieved. I just said, ‘Oh God, at least I don't have to worry about that.’ And then it was only subsequently I realized, ‘Well, you're missing out on a world of treatments when your PD-L1 is zero.’”

PERSON WITH LUNG CANCER

Findings

- Patients need support understanding report content and how results factor into treatment selection.
- Patient facing summaries and simplified reports with clear terminology support shared decision making between patients/providers.
- Patients prefer reports to clearly identify the actionable biomarker and FDA-approved therapy options, indicate if clinical trials are available, provide an explanation of acquired resistance, and explain what it means if no biomarkers are detected.
- There are inconsistencies with how, when, and by whom discussions on biomarker report results are initiated, conducted and shared with patients (electronically or in person by HCP).

Conclusions

- Educational resources at a variety of literacy levels are needed for patient understanding of biomarker reports and to encourage dialogue between patients and HCPs.
- Patient friendly NGS reports, including patient-facing summaries that accompany provider-directed reports, could enhance communication with HCPs on treatment path.

We are grateful to the lung cancer survivor community and providers for participating in the focus groups, and to Edge Research for conducting the focus groups. Thank you to APSHO, ACCC, IASLC, and AMP for provider introductions.