

Role and Testing-Based Differences in HER2-Altered NSCLC: Analyzing the Impact of Online Continuing Medical Education

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BACKGROUND

- The treatment landscape for non–small cell lung cancer (NSCLC) is rapidly evolving, with molecularly targeted therapies expanding opportunities for personalized treatment approaches
- HER2* alterations have emerged as actionable biomarkers in NSCLC, creating a need for accurate biomarker identification, appropriate testing strategies, and integration of *HER2*-directed therapies into clinical practice
- As therapeutic options continue to evolve, clinicians require ongoing education to optimize *HER2* alteration detection, treatment selection, and patient management



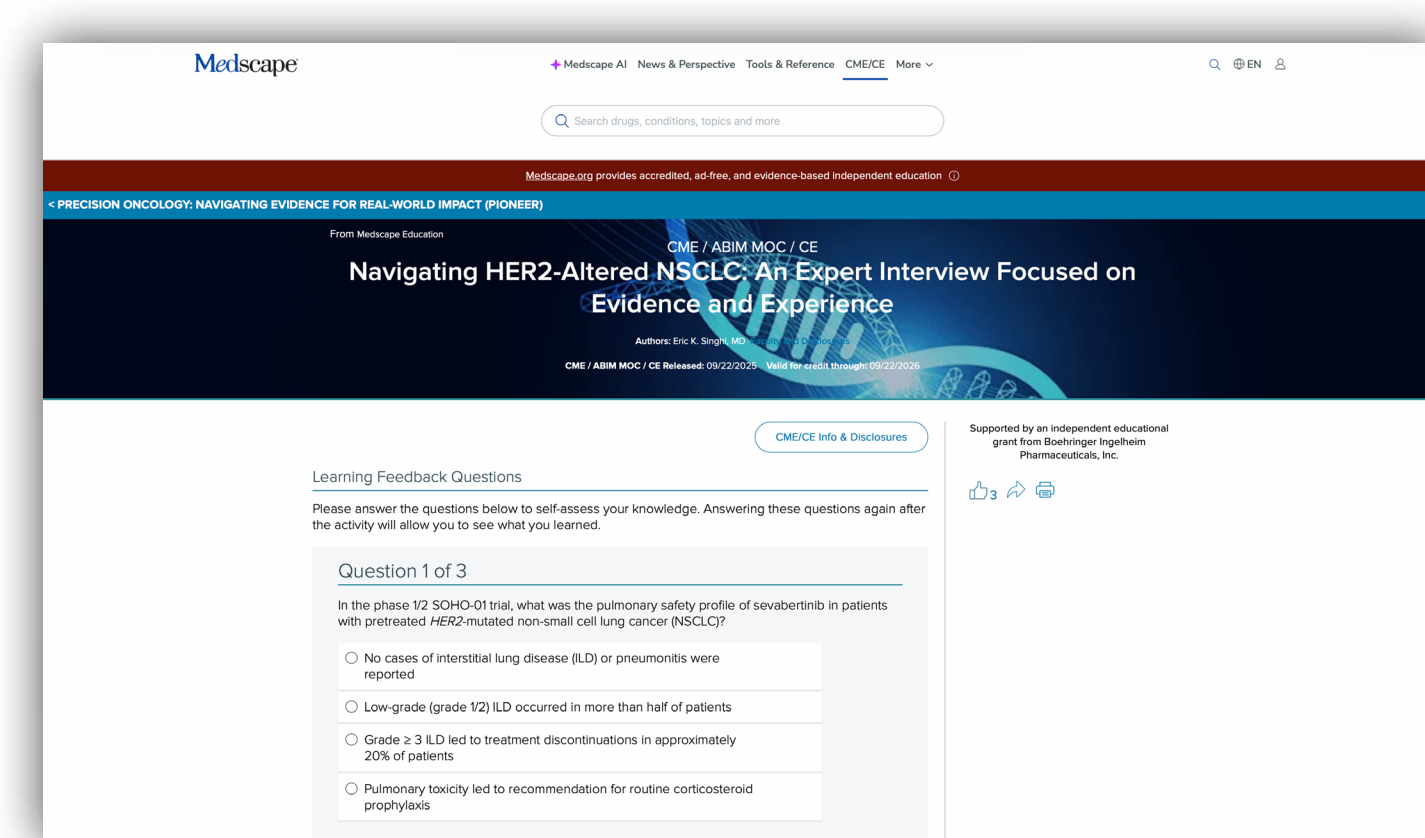
OBJECTIVE



The objective was to assess the impact of online continuing medical education (CME) on clinicians' management of HER2-altered NSCLC and identify persistent educational gaps.

METHODS

- Intervention consisted of an online, text-based CME-certified expert interview
- Educational impact was assessed using paired pre-/post-education multiple-choice questions evaluating knowledge, competence, and confidence
- Data from oncologists, pathologists, pulmonologists, nurse practitioners (NPs), physicians' assistants (PAs) who completed assessments were included
- Relative changes in percentage of correct responses were used to measure improvement
- A McNemar test assessed significance ($P < .05$)
- Activity launched September 22, 2025; data were collected through July 2026



RESULTS

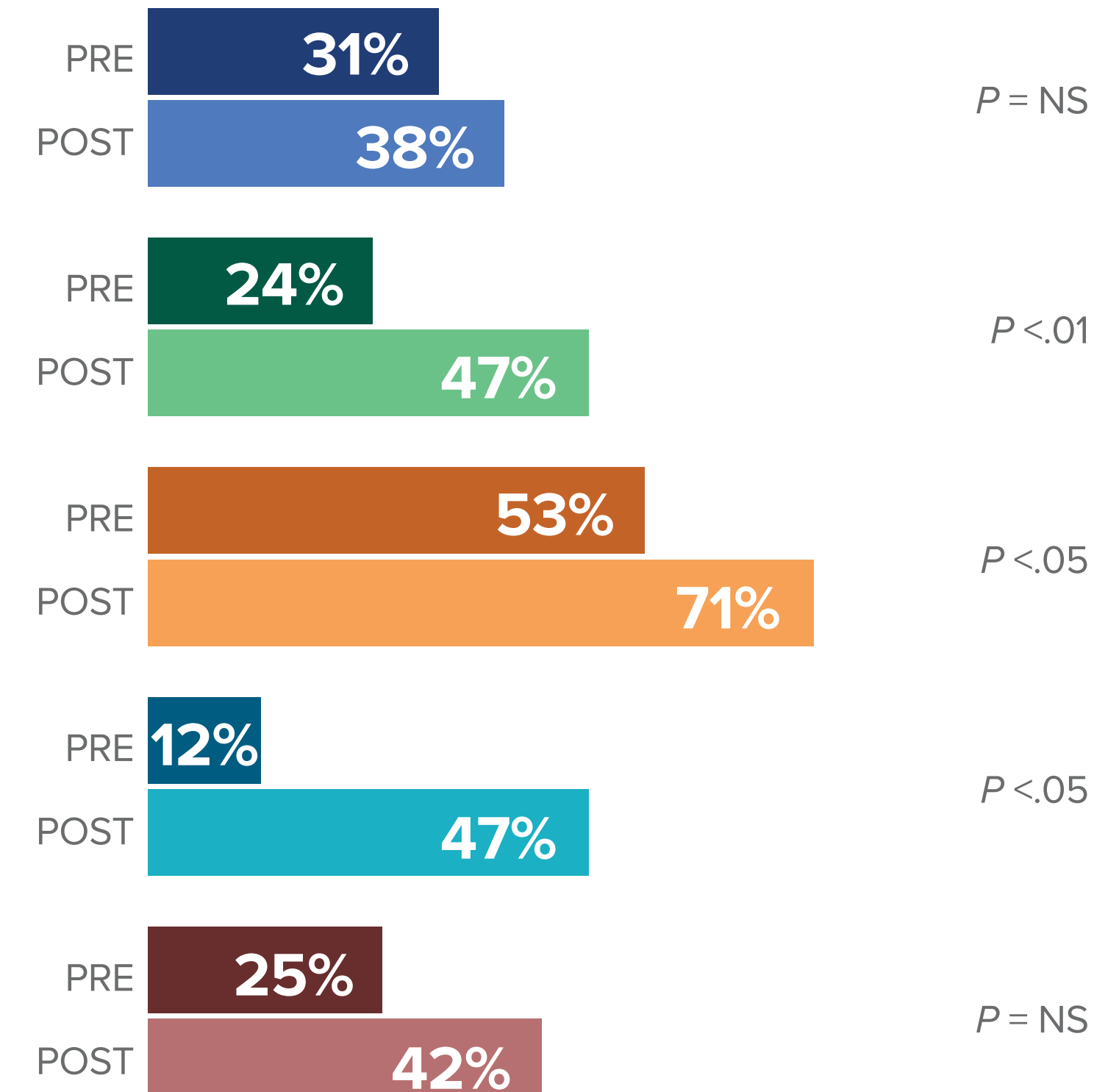
EDUCATIONAL GAINS BY LEARNING THEME AND *HER2* TESTING INVOLVEMENT

HER2 Testing Involvement

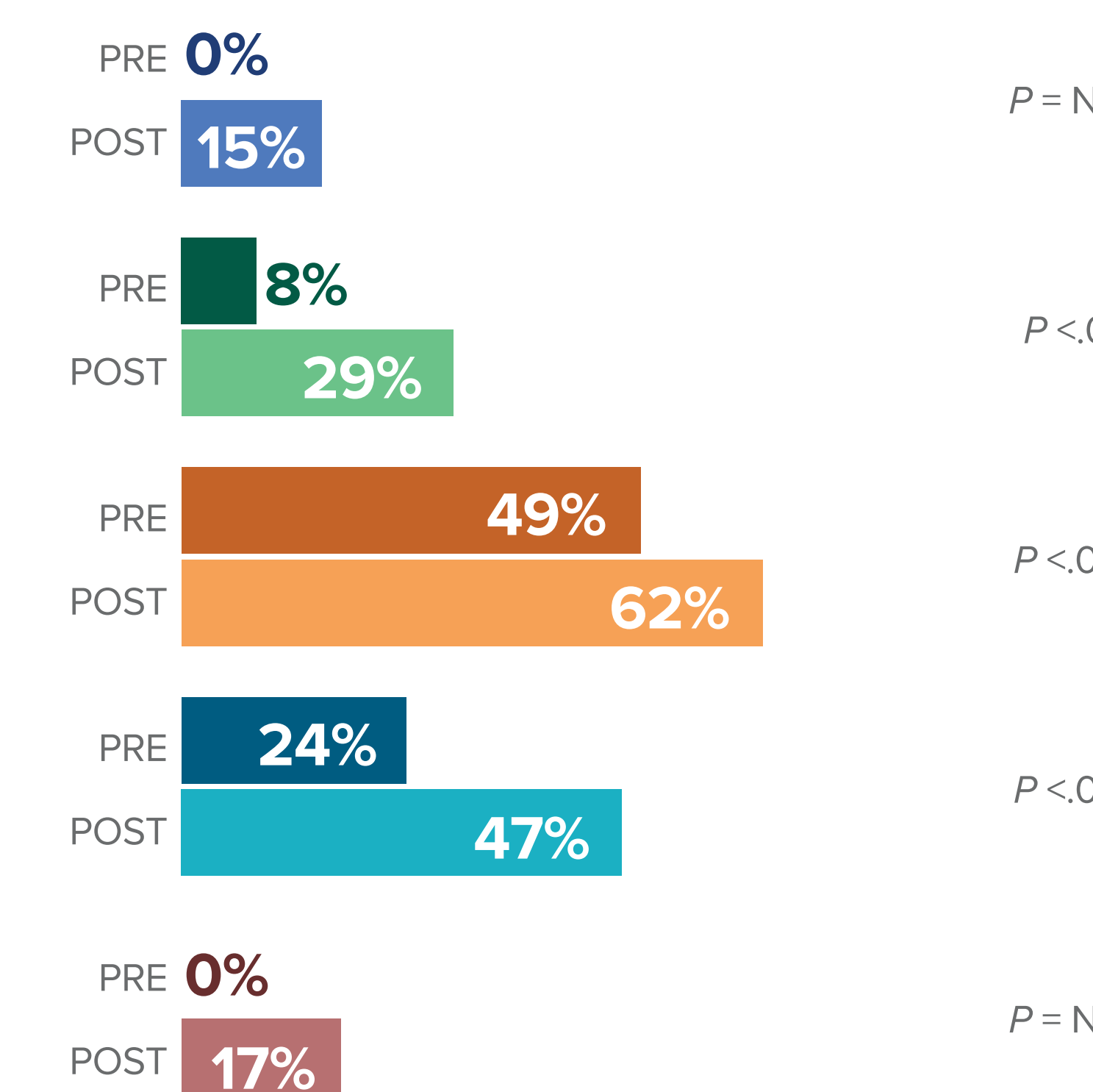
- Involved in treatment decisions, aware of *HER2* status, refer patients but does not order or interpret** ($n = 13$)
- Does not routinely test or not involved in testing or treatment decisions** ($n = 38$)
- Routinely tests for *HER2* alterations using NGS or comprehensive panels** ($n = 45$)
- Supports *HER2* testing with NGS or other modalities** ($n = 17$)
- Selectively tests or uses limited panels** ($n = 12$)

Learning Theme

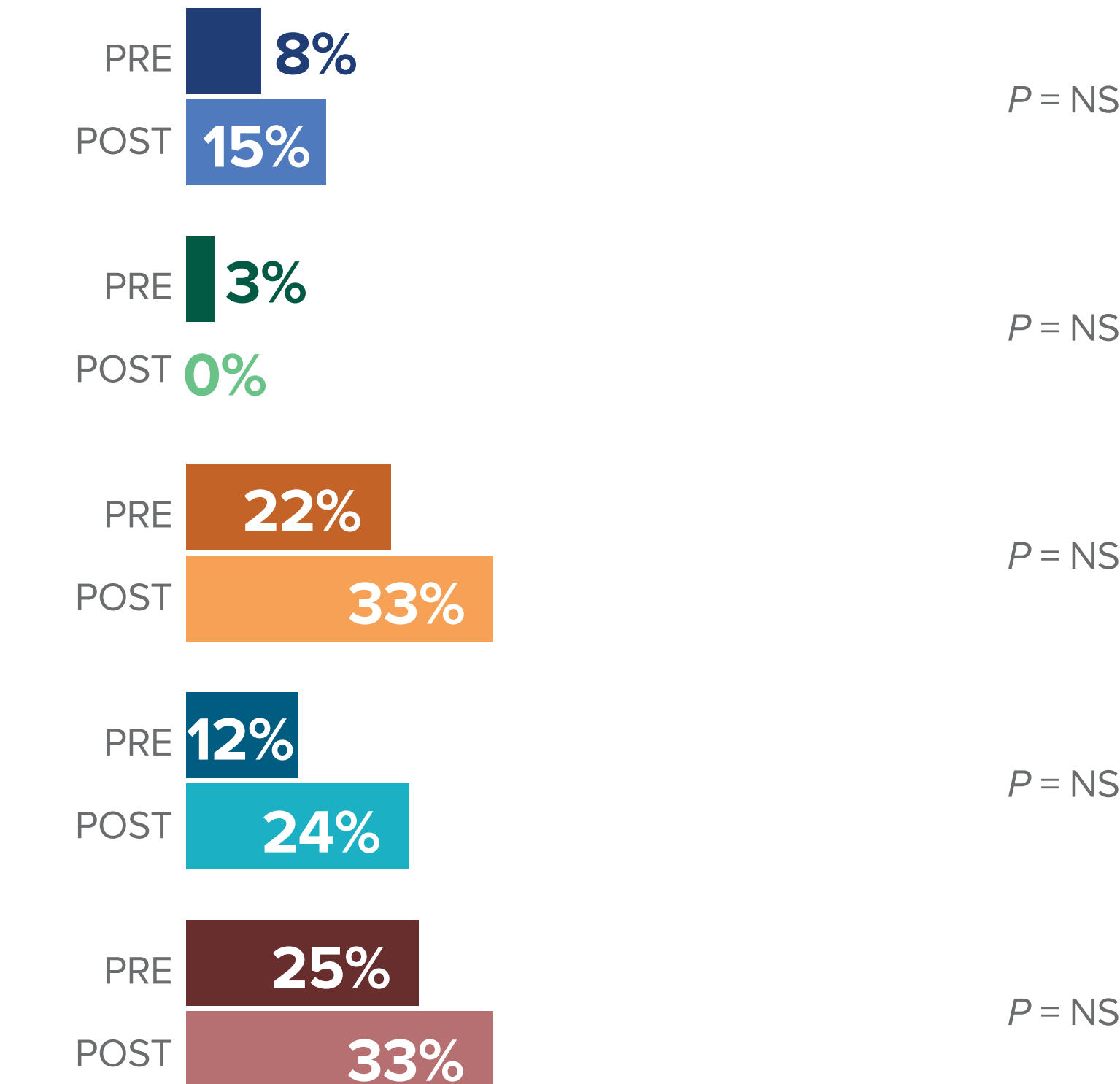
Review the most recent advancements
% CORRECT



Develop informed treatment decisions
% CORRECT



Identify best practices for managing care in the real-world
% CORRECT



EDUCATIONAL GAINS BY LEARNING THEME AND CLINICIAN SPECIALTY



Oncologists
($n = 38$)



Pathologists
($n = 37$)



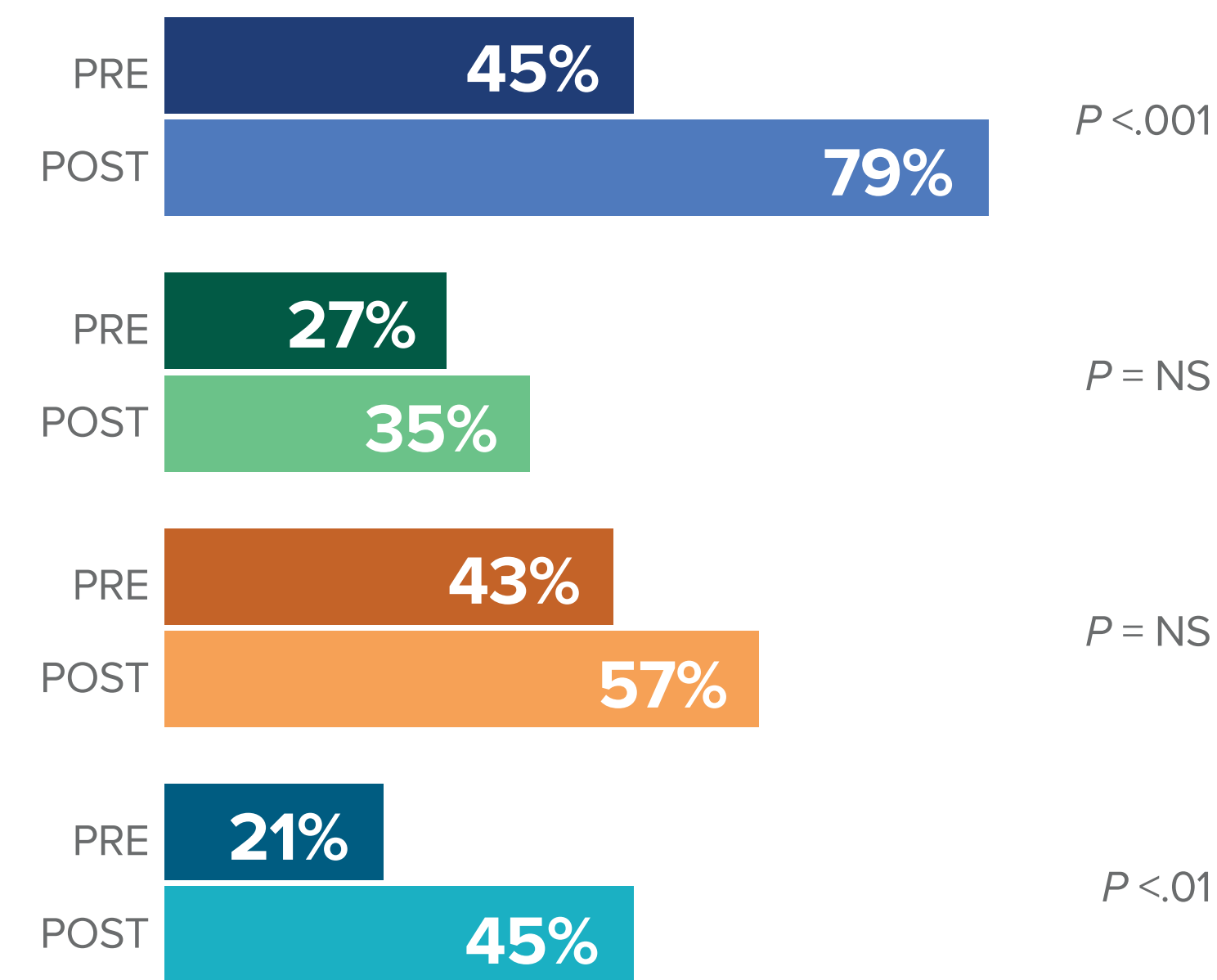
Pulmonologists
($n = 21$)



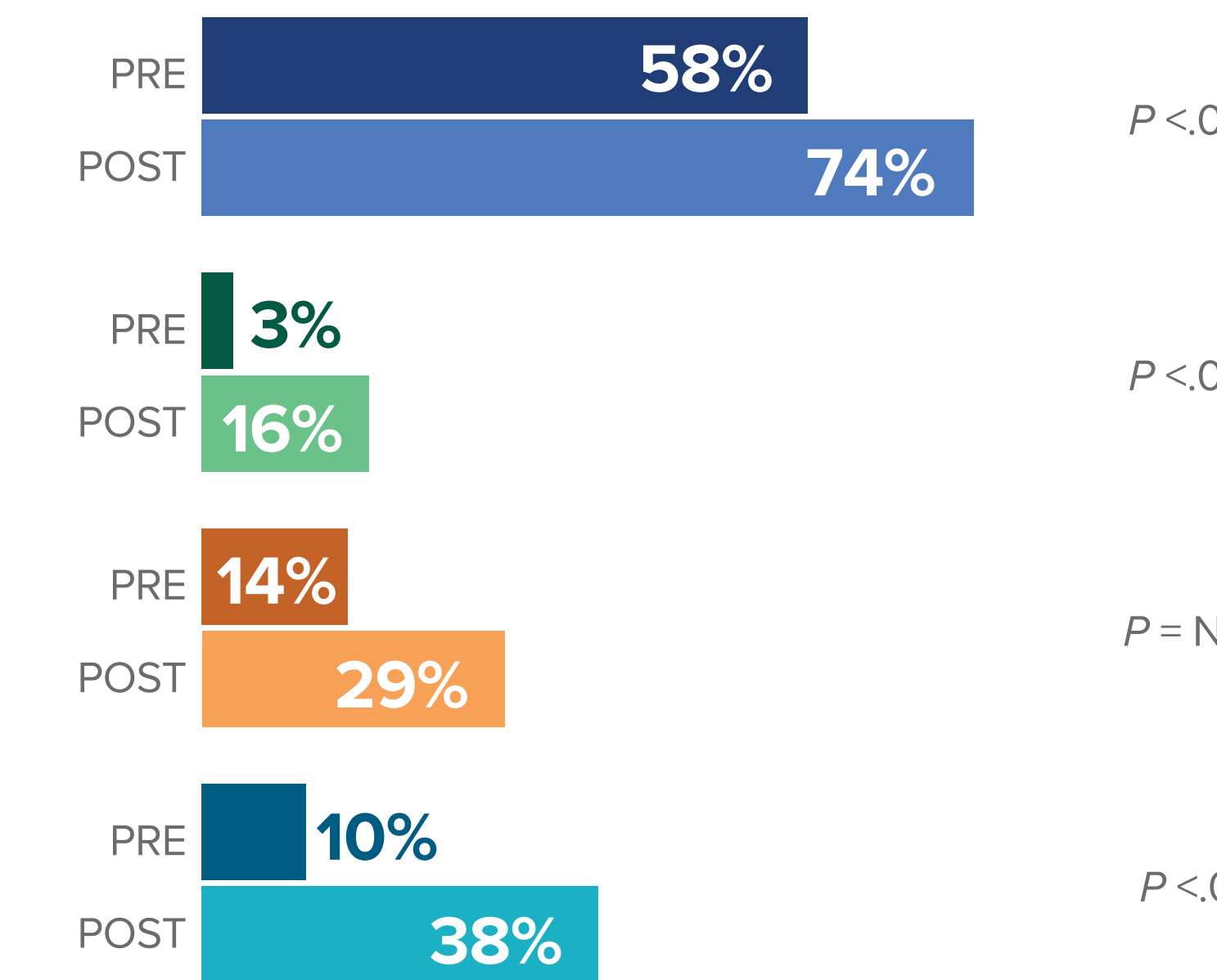
**Nurse Practitioners/
Physician Assistants**
($n = 29$)

Learning Theme

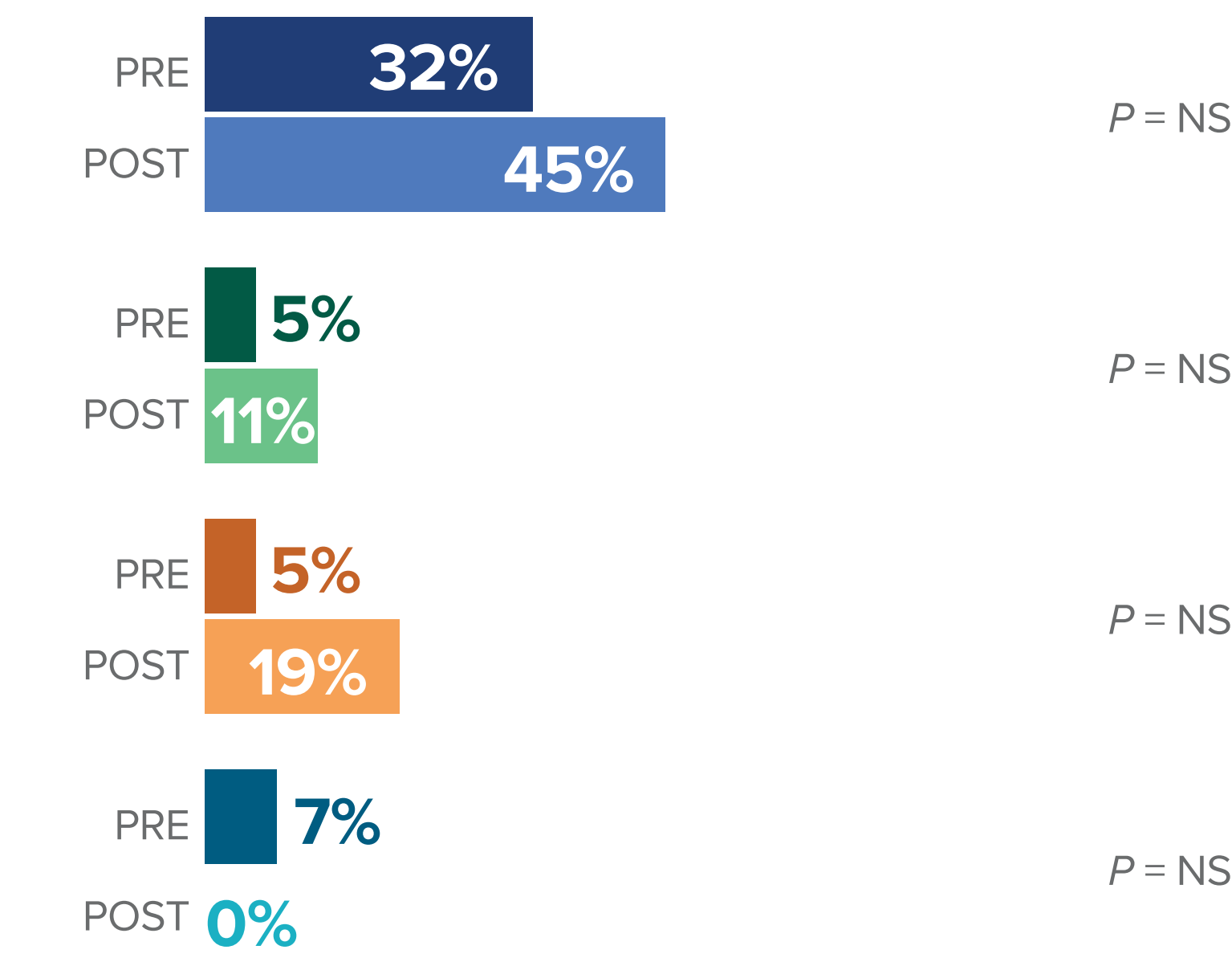
Review the most recent advancements
% CORRECT



Develop informed treatment decisions
% CORRECT



Identify best practices for managing care in the real-world
% CORRECT



CONCLUSIONS

- Educational impact varied by *HER2* testing involvement and clinician specialty, supporting tailored strategies across the multidisciplinary NSCLC care team
- Clinicians routinely utilizing next-generation sequencing (NGS) or comprehensive biomarker panels demonstrated the greatest understanding of emerging *HER2* data and treatment integration
- Persistent gaps remained among clinicians with limited biomarker testing involvement, highlighting opportunities to improve *HER2* testing application and interpretation
- Despite meaningful gains, limited gains in real-world treatment integration and clinical management strategies indicate ongoing unmet educational needs
- Findings highlight the importance of role-specific, practice-based education to optimize biomarker-driven care, strengthen multidisciplinary alignment, and improve implementation of *HER2*-directed strategies in NSCLC

ACKNOWLEDGEMENTS

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ACTIVITY URL:

<https://www.medscape.org/viewarticle/navigating-her2-altered-nsclc-expert-interview-focused-2025a1000obf>

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