

Educational Outcomes in Multidisciplinary Care of HER2-Altered NSCLC: A Global Analysis of Practice-Related Learning Gaps

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Presented at the **2026 World Conference on Lung Cancer (WCLC)**, September 12-15, 2026; Poster #EP12.25

BACKGROUND

The expanding role of *HER2* alterations as actionable targets in non–small cell lung cancer (NSCLC) has introduced new diagnostic and therapeutic considerations across the multidisciplinary care team (MDT). This study evaluated the effects of a series of online continuing medical education (CME) activities on global clinicians' practice related to *HER*-altered NSCLC.



METHODS

The intervention consisted of 3 CME-certified interventions. Educational impact was assessed using paired pre-/post-education multiple-choice questions evaluating knowledge, competence, and confidence across common themes from the activities. Data from oncologists (oncs), pathologists (paths), pulmonologists (pulms), nurse practitioners (NPs), physicians' assistants (PAs) practicing in the United States (US) or outside of the US (OUS) who completed assessments were included and compared. Relative changes in percentage of correct responses were used to measure improvement. A McNemar test assessed significance ($P < .05$). The activities originally launched between November 2024 and December 2025. Data were collected through March 2026.



Oncologists
(n = US: 87-126; OUS: 105-182)



Pathologists
(n = US: 72-148; OUS: 58-115)



Pulmonologists
(n = US: 27-64; OUS: 55-100)



Nurse Practitioners/Physician Assistants (NPs/PAs)
(n = US: 290-593; OUS: 116-216)



RESULTS

EDUCATIONAL GAINS BY LEARNING THEME, CLINICIAN TYPE, AND REGION

- Across all audiences, the most consistent improvements were in assessing clinical evidence and implementing guideline-recommended *HER2* testing in NSCLC, with significant gains observed in nearly all groups.

- OUS clinicians showed larger relative improvements in working as part of the larger team.

- Oncologists** demonstrated consistent and significant improvements across all measured domains in both regions.

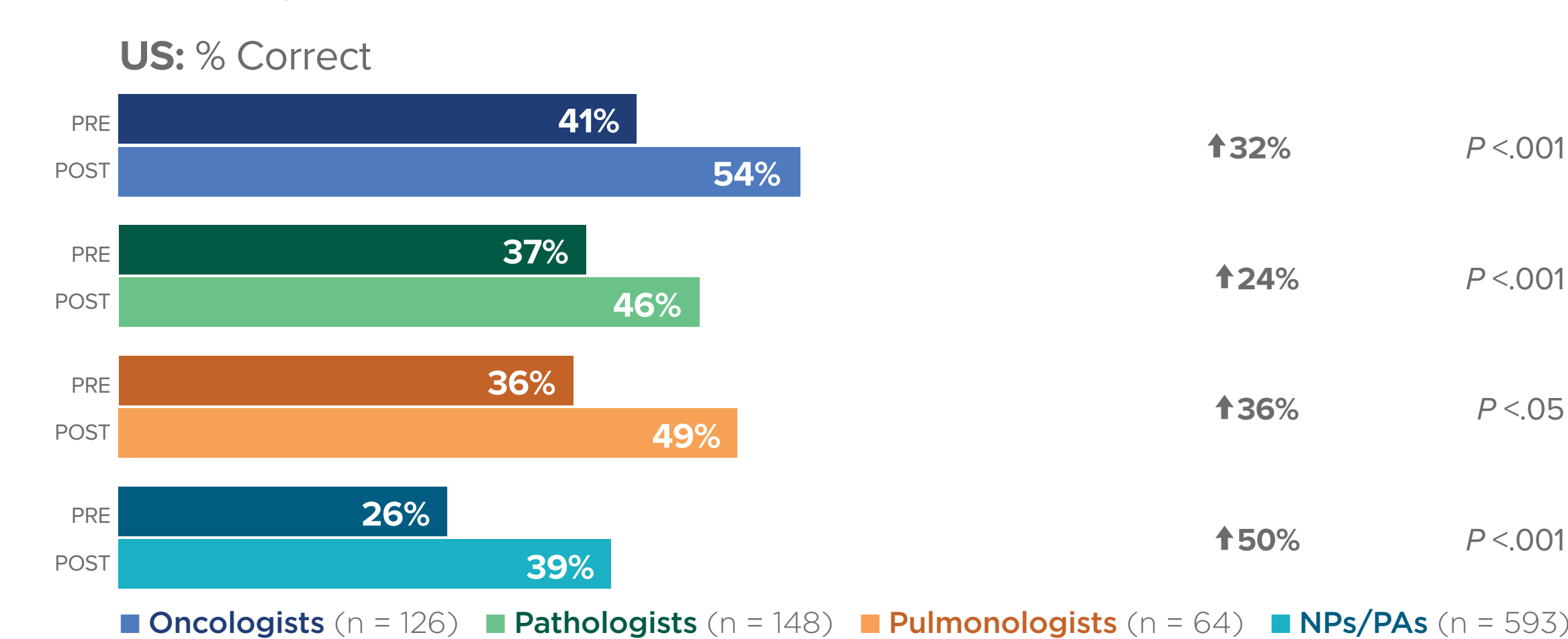
- Pathologists** demonstrated some of the largest relative improvements.

- Pulmonologists** demonstrated only moderate improvements.

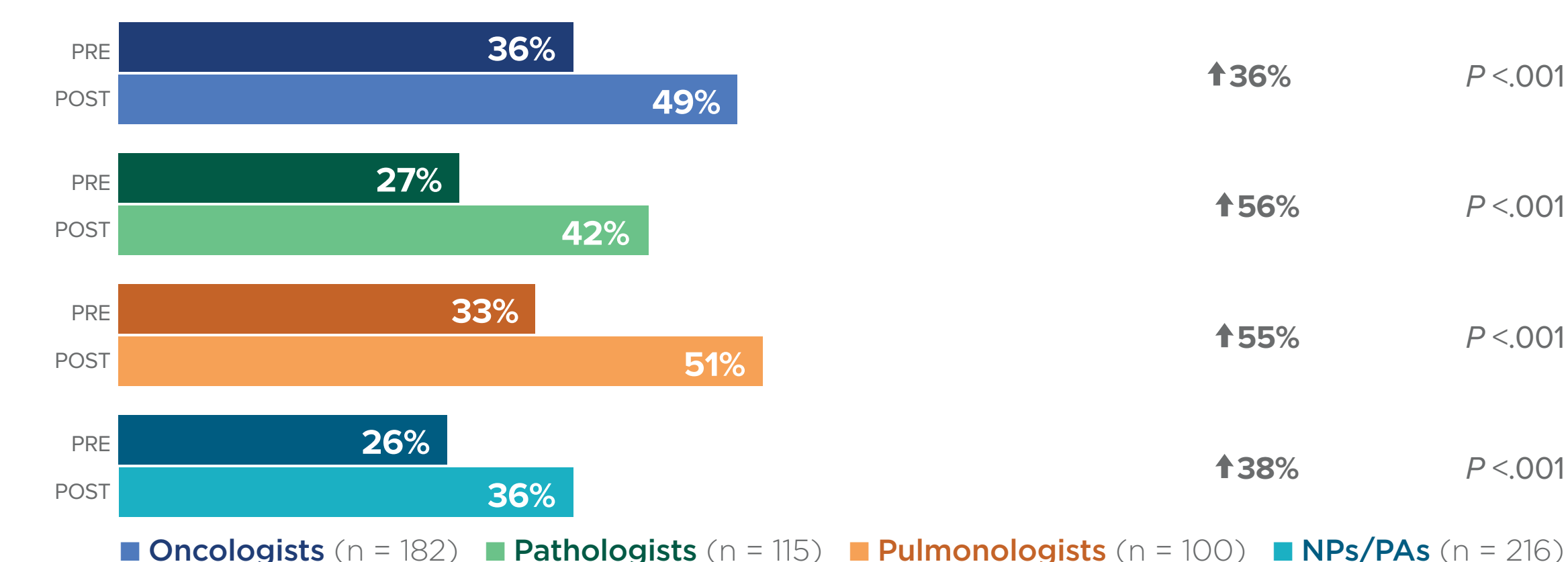
- NPs/PAs** reported lower confidence in integrating *HER2*-directed therapies into MDT care.

LEARNING THEME:

Assessing clinical evidence on *HER2*-directed therapies

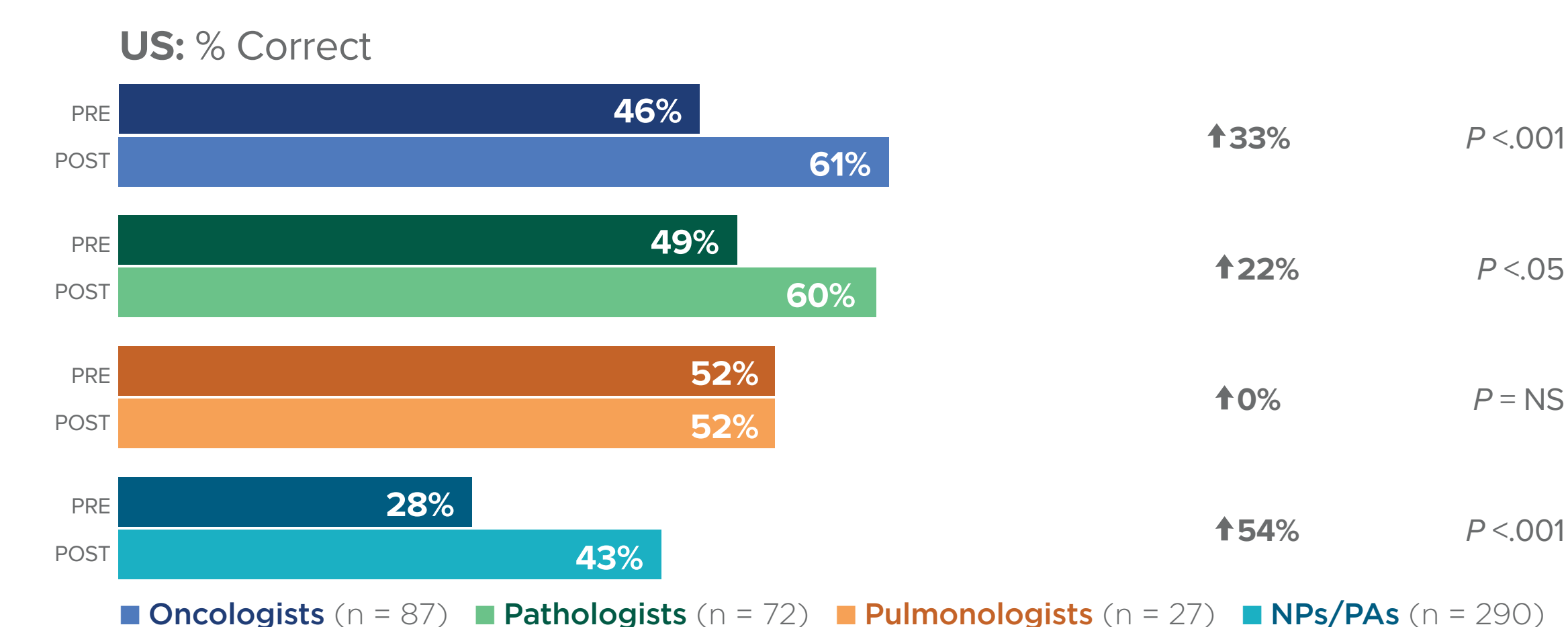


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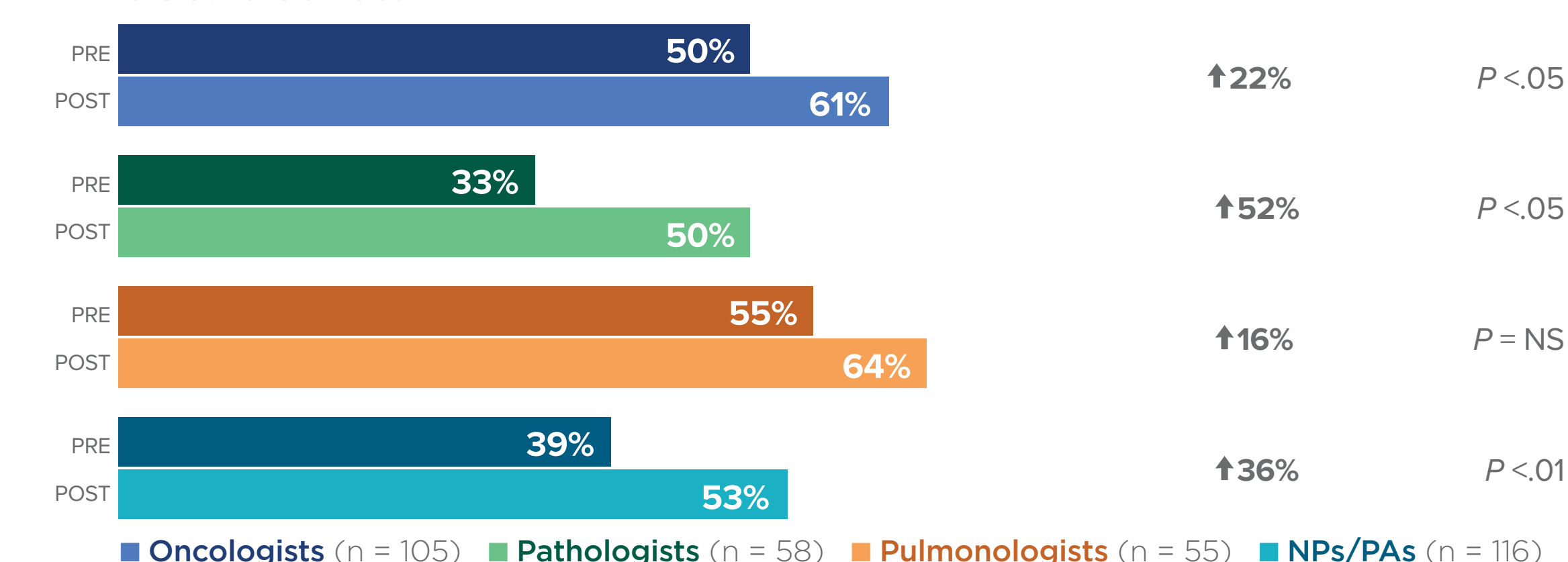


LEARNING THEME:

Making evidence-informed treatment decisions for *HER2*-mutated NSCLC

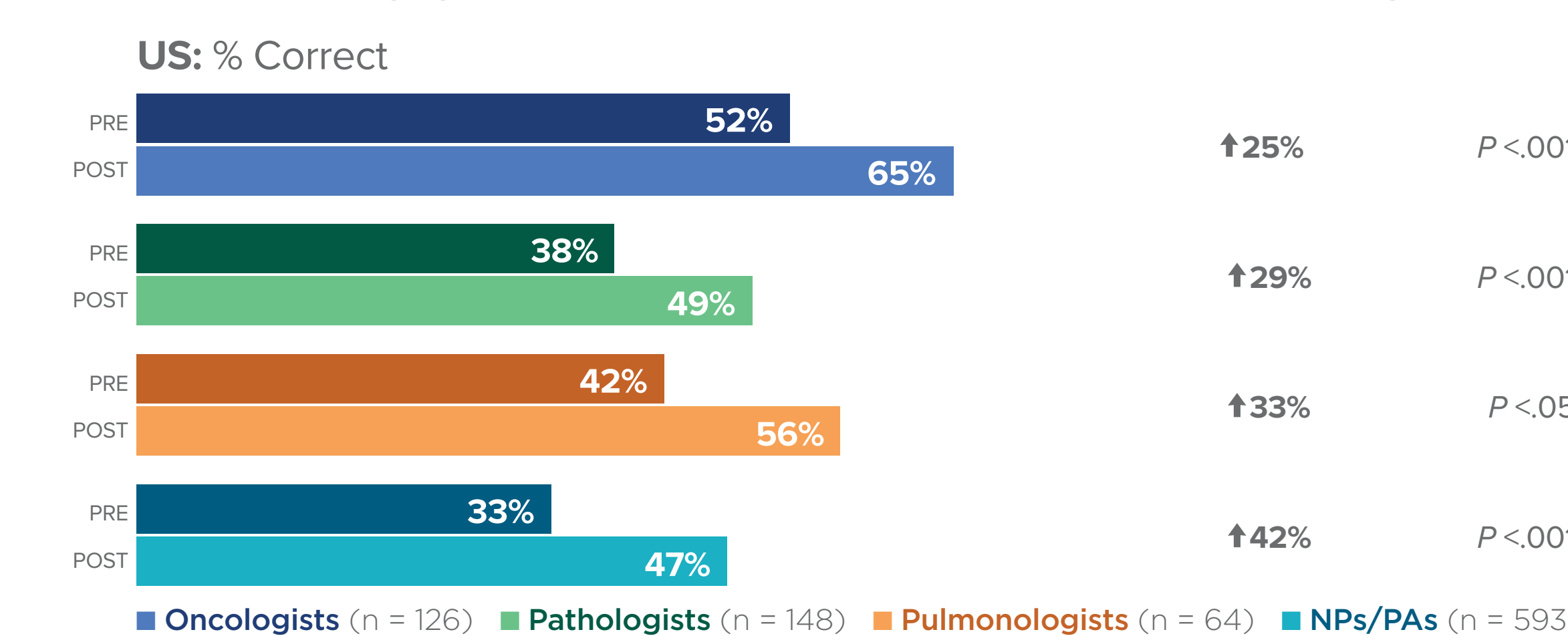


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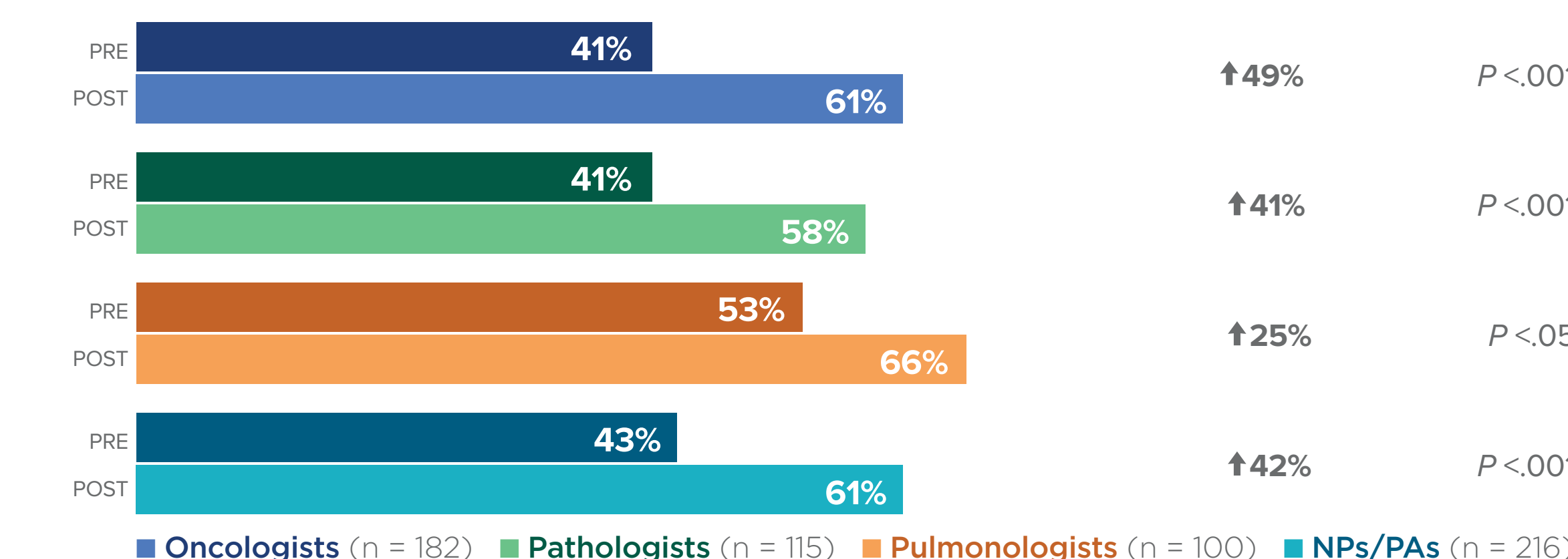


LEARNING THEME:

Implementing guideline-recommended *HER2* testing in NSCLC



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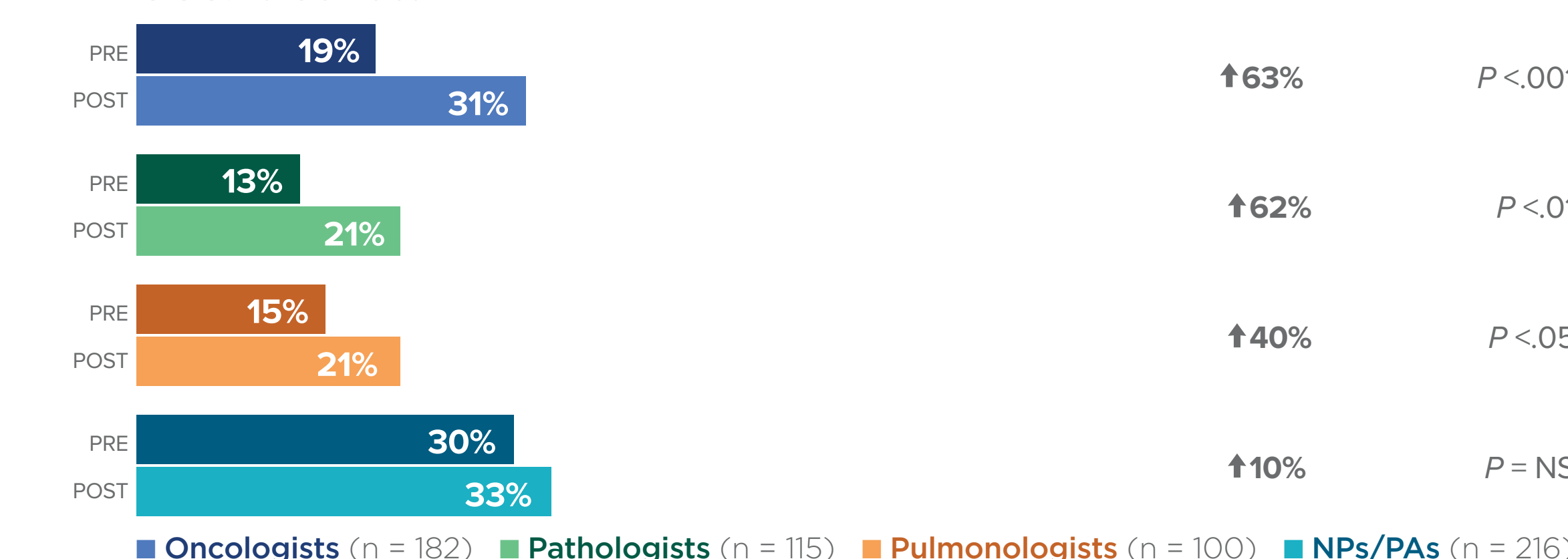


LEARNING THEME:

Confidence in integrating *HER2*-directed therapies into multidisciplinary NSCLC care



OUS: % Correct



CONCLUSIONS

- Participation in online CME was associated with measurable improvements in clinicians' understanding of *HER2*-directed management in NSCLC.
- The pattern of improvement differed across clinician types, reflecting the distinct responsibilities each group holds in the NSCLC care continuum.
- Collectively, these findings indicate that while education can strengthen foundational understanding of *HER2*-directed strategies, future initiatives may benefit from tailoring educational content to the specific clinical roles and decision points encountered by different members of the NSCLC care team to promote more consistent application of biomarker-driven management.

ACKNOWLEDGEMENTS

The related accredited programs were supported by Bayer.

ARTIFICIAL INTELLIGENCE (AI) USE DISCLAIMER

Artificial intelligence tools were not used for the collection, processing, analysis, interpretation, or reporting of the data in this study.

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