Cholestasis unveiled: navigating rare liver disorders

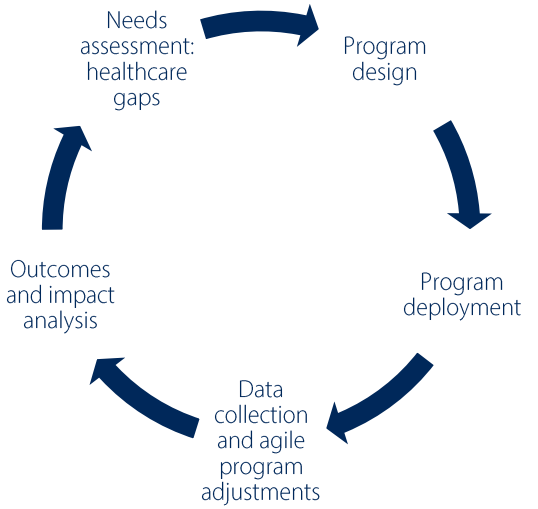
Impact summary 2023 - 2026

Springer Health+ IME

Educational aim: a multi-year, always-on IME program designed to equip clinicians with the knowledge, tools, and confidence to diagnose and manage rare cholestatic liver diseases — spanning primary biliary cholangitis (PBC), late-onset genetic cholestasis, and primary sclerosing cholangitis (PSC) — through evidence synthesis, expert insight, and practical implementation support.

Background / educational design:

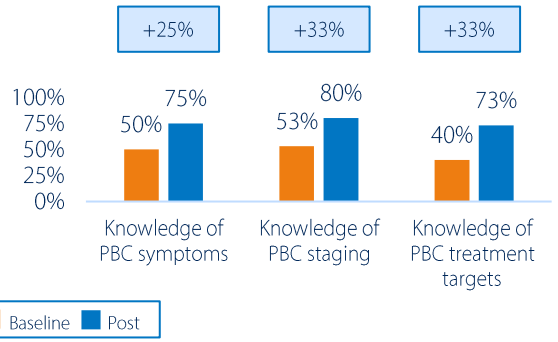
- Originally focused on advancing clinical understanding and management of PBC, the program expanded to incorporate late-onset genetic cholestasis and PSC, creating a comprehensive educational resource across the spectrum of rare cholestatic liver disorders.
- As part of an ongoing needs assessment, outcomes data have been the primary driver of the program's evolution, complemented by literature review and learner surveys to identify persistent educational gaps and unmet needs.
- These insights have directly shaped enhancements to content, formats, and tools.
- The education continues to adapt as new data emerge, ensuring relevance and responsiveness to clinician needs within rapidly evolving disease landscapes.
- The following cycle has been completed 4 times since the program's original conception in 2023, allowing for an ever-adapting central resource for new and returning healthcare professionals:



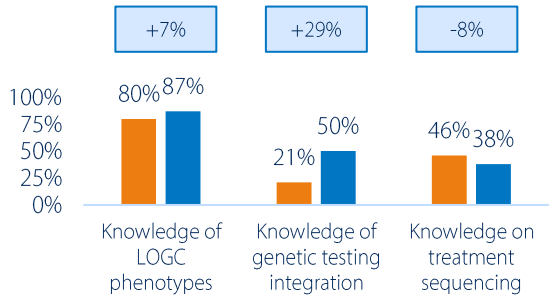
Impact:

1	3	4	12	86+	15,250+
Hub-based microsite	Therapy areas (PBC. Late-onset genetic cholestasis, PSC)	Iterative program cycles	Distinct content formats	Individual content items	Engaged learners

Primary Biliary Cholangitis (PBC)



Late-Onset Genetic Cholestasis



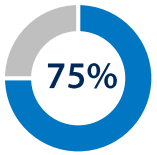
Primary Sclerosing Cholangitis (PSC)

75% report increased knowledge of this subject area

75% report increased confidence in the subject area

75% report improved competencies relevant to their practice

Across all programs, 75% of learners committed to changing their practice by :



- Confidently incorporating the criteria for early and accurate diagnosis of PBC into their clinical practice
- Consider prescribing second-line treatment earlier (where appropriate)
- Using assessment tools to assess the risk for disease progression in patients with PBC
- Integrating genetic testing into [their] diagnostic work-up for unexplained cholestasis
- Periodically reconsidering and monitoring previous diagnoses based on new signs/symptoms or treatment response

Commentary:

- Outcomes-led program evolution allows for the delivery of content that is directly relevant to identified gaps in learner knowledge, and allows for a program that is adaptable to changes in the treatment landscape as they occur.
- Over the course of the 4 years running, and with direct input from learner insights, the program was able to be adaptable to novel therapy approvals that occurred, and HCP uncertainty around treatment sequencing and therapy personalization that arose. The effectiveness of this adaptability was demonstrated with the high percentage of learners (75%) committing to making a change in their clinical practice as a direct result of their learning, with changes committed to including "integrating testing" and "reconsidering diagnoses" among others.
- The extended program proved its effectiveness in increasing knowledge, competence and confidence in range of topics spanning all three disease states, and proved popular with HCPs, drawing in a combined audience of over 15,250 learners, with many as repeat learners returning to the program as new content was published.

This program is made possible thanks to an independent educational grant from Ipsen.