



Prevention & Therapies for Hepatitis and Chronic Liver Disease Seminars

June 5, 12, 19, 2021 - Webinar

This activity was created to address the professional practice gaps listed below:

- Identifying effective vaccines and promising therapeutic agents for Hepatitis B which could help control the spread of the virus and reduce patient suffering.
- Recognizing the early signs of Hepatitis A and be more widely versed in the pathways of infection and prevention.
- Identifying possible Hep D cases that may have otherwise been missed or diagnosed later in the disease state.
- Applying clinical guidelines and best practice screening procedures and treatment approaches for end-stage liver disease (ESLD).
- Utilizing current and emerging technologies to determine liver disease that could reduce the need for invasive diagnostic testing.

1. Please respond regarding how much you agree or disagree that the gaps listed above were addressed.

	Disagree		Agree	
Participating in this educational activity changed your KNOWLEDGE in the professional practice gaps listed above. [6-3.83]	(0)	(0)	(1) 16.67%	(5) 83.33%
Participating in this educational activity changed your COMPETENCE in the professional practice gaps listed above. [6-3.83]	(0)	(0)	(1) 16.67%	(5) 83.33%
Do you feel participating in this educational activity will change your PERFORMANCE in the professional practice gaps listed above? [6-3.83]	(0)	(0)	(1) 16.67%	(5) 83.33%

2. Please elaborate on your previous answers. (3)

A yearly overview of common liver diseases always focuses on what is old and new so you continually offer a solid product to your liver patients.

Every session I gained insight into something I can use to help patients. Living in a rural area tips like it taking 20-30 minutes for a liver US for HCC screening is a simple question I can ask patients on where to guide them to direct care. I use the Fib-4 for treating simple Hep C patients, but putting it into my notes for NAFL patients with meaningful Fibrosis scores is helpful very helpful that I can create a smart phrase. Hep B is still very tricky, but getting Hep B Surf Ag, Surf Ab, Core Ab on every Hep C patient and they're more meaningful now. Considering LAL and considering PBC and PSC and

performing more smart lab tests to rule out other causes for liver issues and not presuming it's related to NAFL. Wonderful conference.

this is a very good program and lots of information was given

3. Please evaluate the effectiveness of the following speakers in improving your knowledge, competence and/or performance. (Poor = 1, Excellent = 4)

	Poor	Fair	Good	Excellent
Paul Pockros, MD [6-4.00]	(0)	(0)	(0)	(6)100%
Catherine Frenette, MD [6-4.00]	(0)	(0)	(0)	(6)100%
Julio Gutierrez, MD [6-4.00]	(0)	(0)	(0)	(6)100%
Paul Martin, MD [6-4.00]	(0)	(0)	(0)	(6)100%
Barbra Cave, PhD, FNP-BC [6-4.00]	(0)	(0)	(0)	(6)100%
Mazen Nourredin, MD [6-4.00]	(0)	(0)	(0)	(6)100%
Hugo Vargas, MD [6-4.00]	(0)	(0)	(0)	(6)100%

4. Please elaborate on your previous answers. (4)

What can I say, talented; they are "smart and work hard".

It's a shame there weren't more attendee's. Clearly a wealth of knowledge and experience. Wonderful presentations.

Well done lectures

nothing to add

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.) (6)

Start using the fib-4 score

Because of the huge problem of NAFL and NASH, my practice if full these patients, the update and use of monitoring protocols are essential. Hoping for approved drugs. A multi-disciplinary focus is essential, but rarely available.

Adding a table including Fib-4 into my chart notes for Fib-4. I work in a rural area trying to work with my system to get a Fibroscan which I started a month ago with a great deal of resistance. Many of the lectures referenced the utility of it and I'm hopeful to use some material to generate a better argument to get the device.

Timing of post-treatment Hep C PCR testing

feel more confident in assessing nash patients

short (simple) Hep C treatment protocol to pts who qualifies.

6. How certain are you that you will implement this change?

(6)

Certain ⁽²⁻
33.33%)

Very Certain ⁽⁴⁻
66.67%)

7. What topics do you want to hear more about, and what issues(s) in your practice will they address? (3)

Autoimmune Hepatitis and overlap.

Hepatitis B to understand the screening process. Would be interested to know the pathophysiology behind Hepatorenal Syndrome and the appropriateness of using pressors like Midodrine in an outpatient setting. Best practices in liver care in rural areas without access to advanced imaging like Fibroscan, MRI Elastography. We have one visiting gastroenterologist that comes to the area two days a week primarily to perform EGD's and Colonoscopy's.

Autoimmune hepatitis, PBC

8. Were the patient recommendations based on acceptable practices in medicine?

(6)

Yes ⁽⁶⁻
100.00%)

10. Do you think the presentation was without commercial bias?

(6)

Yes ⁽⁶⁻
100.00%)

12. Please provide any additional comments you may have about this educational activity. (3)

I really appreciate the virtual format especially if you do not live near a live presentation city. I would be nice to be offered this option in the future. Thank You very, very much.

I would love to hear about future CME opportunities that are online from the University of Louisville online given I'm in Oregon. Thank you again. I recently participated in a 16 week Hep C treatment and elimination through Oregon Health and Science University which this lecture certainly increased my knowledge and will make me a better healthcare provider.

Thank you for the presentations

As one of the participants of this educational activity, we want to encourage you to implement those ideas that were appropriate to your healthcare environment.

This evaluation is confidential and no individual will be identified by this office (Continuing Medical Education and Professional Development). It will only be used for quality improvement.

We look forward to seeing you at future University of Louisville events. Thank you very much.

Prevention & Therapies for Hepatitis and Chronic Liver Disease Seminars

July 23-24, 2021 - Louisville, KY

This activity was created to address the professional practice gaps listed below:

- Identifying effective vaccines and promising therapeutic agents for Hepatitis B which could help control the spread of the virus and reduce patient suffering.
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- Identifying possible Hep D cases that may have otherwise been missed or diagnosed later in the disease state.
- Applying clinical guidelines and best practice screening procedures and treatment approaches for end-stage liver disease (ESLD).
- Utilizing current and emerging technologies to determine liver disease that could reduce the need for invasive diagnostic testing.

1. Please respond regarding how much you agree or disagree that the gaps listed above were addressed.

	Disagree		Agree	
Participating in this educational activity changed your KNOWLEDGE in the professional practice gaps listed above. [12-4.00]	(0)	(0)	(0)	(12)100%
Participating in this educational activity changed your COMPETENCE in the professional practice gaps listed above. [12-3.92]	(0)	(0)	(1) 8.33%	(11) 91.67%
Do you feel participating in this educational activity will change your PERFORMANCE in the professional practice gaps listed above? [12-4.00]	(0)	(0)	(0)	(12)100%

2. Please elaborate on your previous answers. (5)

N/A

Will apply new knowledge and research further.

Good new information on viral hepatitis and fibrosis markers.

As a primary care provider, I will make referrals sooner based on several factors I learned.

This is a good series. The thorough updates is why I keep coming back.

3. Please evaluate the effectiveness of the following speakers in improving your knowledge, competence and/or performance. (Poor = 1, Excellent = 4)

	Poor	Fair	Good	Excellent
Craig McClain, MD [11-3.91]	(0)	(0)	(1) 9.09%	(10) 90.91%
Matt Cave, MD [12-3.92]	(0)	(0)	(1) 8.33%	(11) 91.67%
Anotosh Barve, MD [12-3.67]	(0)	(1) 8.33%	(2) 16.67%	(9) 75.00%
Barbra Cave, PhD, APRN [12-3.92]	(0)	(0)	(1) 8.33%	(11) 91.67%
Loretta Jophlin, MD [12-3.92]	(0)	(0)	(1) 8.33%	(11) 91.67%

4. Please elaborate on your previous answers. (9)

Dr. Barve was a bit pressed for time and was unable to make it through all of the material on Hepatitis B.

With Dr. Barve's accent, he should speak slower.

Excellent speakers

All excellent speakers

All great speakers. Everyone well-prepared.

Clear presentations

Barbra Cave was very engaging, and spoke to various psychosocial considerations not only clinical knowledge pearls.

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all very engaging

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.) (9)

The only changes I can attempt to make is with protocols where the transplant process is concerned.

New protocols

surveillance ultrasounds for all HBV patients

Address skin issue proactively

Will continue watching for NASH treatments

Better use of NITs

Learned a good deal about primary biliary cholangitis, and will definitely use Fib 4 calculator Dr. McClain mentioned. Also, when working in primary will likely make referrals sooner now to hepatology. Also, interesting mentioning potential future use of Ozempic or Wegovy for treatment of NASH. I work on the side for a medical weight loss clinic, so this interested me very much.

Being able to discuss the newer treatments for HCC

n/a, no longer in clinical practice

6. How certain are you that you will implement this change?

(10)

Very Certain (3-30.00%)

Certain (6-
60.00%)

N/A (1-
10.00%)

7. What topics do you want to hear more about, and what issues(s) in your practice will they address? (9)

Hepatitis B specifically. It would address potential treatment where transplant is concerned.

ESRD and changes to treatment

NASH, Alcoholic hepatitis

Viral hepatitis elimination, both micro and macro-levels. More info on syndemics and how additional influences impact disease outcomes for alcohol, viral hepatitis, and other diseases.

NASH

Realize this might be considered more environmental medicine than traditional Western allopathic model, but I would love if someone had touched on the role of herbicides/pesticides such as glyphosate (active ingredient in RoundUp) as a probable culprit of hepatic steatosis. Learned at recent autism conference that glyphosate is nearly identical molecular structure to glycine and hence adipocytes and hepatocytes are inadvertently through molecular mimicry becoming cellularly toxic leading to hepatic steatosis development at younger ages. There has been several papers written on said topic by Stephanie Senef from MIT. Know that Dr. Matt Cave is sitting on a large repository of hepatic tissues with which studies could also be performed on this ever increasing environmental exposure greatly impact ourselves and our growing children.

What ever is the new data-driven trends

all liver disease

8. Were the patient recommendations based on acceptable practices in medicine?

(12)

Yes (12-
100.00%)

9. If you answered No on the question above, please explain which recommendation(s) were not based on acceptable practices in medicine? (2)

N/A

Not applicable

10. Do you think the presentation was without commercial bias?

(12)

Yes (11-
91.67%)

No (1-
8.33%)

11. If you answered No on the above question, please list the topics that were biased?

(3)

N/A

Not applicable

This is the first year, that I know of, that there were industry-sponsored talks, which, I didn't care for. I was unaware that this was going to happen. I don't have problems with industry-sponsored talks, but, the way this was done was not good. The academic speakers (in this instance, about HDV) were preempted by the industry-sponsored speaker. I believe that was in very poor taste. I feel there is no problem in having an industry sponsored talk, but, it should ONLY be after ALL the main presentations have been given, and it should be made very clear how that presentation is different. The academic presentations are why I'm there. It was not made completely clear that it was an industry-sponsored program, other than the speaker said at the beginning that we wouldn't be able to get CME. Overall, bad form, and gave me a somewhat more negative view of the program. I plan to come back again next year, but, I'd prefer a little more considerations be given the academic talks.

12. Please provide any additional comments you may have about this educational activity. (4)

N/A

It was too chilly.

As above in #7

Room was way too cold. I understand that this was not the fault of the organizer, or the host, necessarily, but, it might be good to check up on about who to call, if temp, or something else needs to change, during the talks.

As one of the participants of this educational activity, we want to encourage you to implement those ideas that were appropriate to your healthcare environment.

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We look forward to seeing you at future University of Louisville events. Thank you very much.

Prevention & Therapies for Hepatitis and Chronic Liver Disease Seminars

August 27-28, 2021 - Costa Mesa, CA

This activity was created to address the professional practice gaps listed below:

- Identifying effective vaccines and promising therapeutic agents for Hepatitis B which could help control the spread of the virus and reduce patient suffering.
- Recognizing the early signs of Hepatitis A and be more widely versed in the pathways of infection and prevention.
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1. Please respond regarding how much you agree or disagree that the gaps listed above were addressed.

	Disagree		Agree	
Participating in this educational activity changed your KNOWLEDGE in the professional practice gaps listed above. [6-3.83]	(0)	(0)	(1) 16.67%	(5) 83.33%
Participating in this educational activity changed your COMPETENCE in the professional practice gaps listed above. [6-3.67]	(0)	(0)	(2) 33.33%	(4) 66.67%
Do you feel participating in this educational activity will change your PERFORMANCE in the professional practice gaps listed above? [6-3.67]	(0)	(0)	(2) 33.33%	(4) 66.67%

2. Please elaborate on your previous answers. (4)

I learned a lot about NAFLD, HCC, PBC, PSC and viral hepatitis that will allow me to take of patients with liver disease better

To know hepatitis D and E,

Excellent presentations

learned new diagnostics and meds

3. Please evaluate the effectiveness of the following speakers in improving your knowledge, competence and/or performance. (Poor = 1, Excellent = 4)

	Poor	Fair	Good	Excellent
Mazan Nourredin, MD [6-3.67]	(0)	(0)	(2) 33.33%	(4) 66.67%

Timothy Morgan, MD [6-3.83]	(0)	(0)	(1) 16.67%	(5) 83.33%
Tammy Harper, PA-C [6-3.50]	(0)	(1) 16.67%	(1) 16.67%	(4) 66.67%

4. Please elaborate on your previous answers. (4)

All speakers were excellent; knowledgeable and gave excellent presentations

Good informations, Sounds are bad, Unable to hear what speaker talk.

Dr Morgan and Dr Nourredin were excellent

The speakers were very knowledgeable

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.) (6)
better assessment and treatment for NAFLD. Use of higher dose UDCA for PSC. COVID vaccinations for patients with liver transplant and cirrhosis.

Increased knowledge

More screening for potential cases of Hepatitis D

Be more aware of Hepatitis in population. screening more often about Hepatitis ABCDE.

new medications once approved

new meds

6. How certain are you that you will implement this change?

(6)

Certain ⁽⁵⁻
83.33%)

Very Certain ⁽¹⁻
16.67%)

7. What topics do you want to hear more about, and what issues(s) in your practice will they address? (3)

Hepatitis B treatment

Cirrhosis and Liver transplant

ID

8. Were the patient recommendations based on acceptable practices in medicine?

(5)

Yes ⁽⁵⁻
100.00%)

10. Do you think the presentation was without commercial bias?

(5)

Yes ⁽⁵⁻
100.00%)

12. Please provide any additional comments you may have about this educational activity. (2)

You might consider a 1-day presentation. 1.5 days is quite long. Including MOC credit is important for most physicians

Good in general, Start time on the first day is not convenient.

As one of the participants of this educational activity, we want to encourage you to implement those ideas that were appropriate to your healthcare environment.

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We look forward to seeing you at future University of Louisville events. Thank you very much.



Prevention & Therapies for Hepatitis and Chronic Liver Disease Seminars

September 10-11, 2021 - Kansas City, MO

This activity was created to address the professional practice gaps listed below:

- Identifying effective vaccines and promising therapeutic agents for Hepatitis B which could help control the spread of the virus and reduce patient suffering.
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- Identifying possible Hep D cases that may have otherwise been missed or diagnosed later in the disease state.
- Applying clinical guidelines and best practice screening procedures and treatment approaches for end-stage liver disease (ESLD).
- Utilizing current and emerging technologies to determine liver disease that could reduce the need for invasive diagnostic testing.

1. Please respond regarding how much you agree or disagree that the gaps listed above were addressed.

Disagree

Agree

Participating in this educational activity changed your KNOWLEDGE in the professional practice gaps listed above. [9-4.00] (0) (0) (0) (9)100%

Participating in this educational activity changed your COMPETENCE in the professional practice gaps listed above. [9-4.00] (0) (0) (0) (9)100%

Do you feel participating in this educational activity will change your PERFORMANCE in the professional practice gaps listed above? [9-3.89] (0) (0) (1) 11.11% (8) 88.89%

2. Please elaborate on your previous answers. (8)

Monitor platelets number with ast for early detect liver disease

So good! These topics really helped with the homeless population I work with.

HCV screening and LFT workups

Knowing the reemergence of Hepatitis A, I will be more dedicated in promoting that my pts get vaccinated when appropriate.

Straightforward, informative, and helpful discussions throughout the program.

Excellent course with multiple in depth topics

Knowledge of scope of viral hepatitis will cause referrals. Knowledge of evolution of fatty liver disease will have a major impact on my practice

3. Please evaluate the effectiveness of the following speakers in improving your knowledge, competence and/or performance. (Poor = 1, Excellent = 4)

	Poor	Fair	Good	Excellent
Bradley Freilich, MD [8-3.88]	(0)	(0)	(1) 12.50%	(7) 87.50%
Ryan Taylor, MD, MS [9-4.00]	(0)	(0)	(0)	(9)100%
Nancy Todd, APRN [9-3.67]	(0)	(1) 11.11%	(1) 11.11%	(7) 77.78%

4. Please elaborate on your previous answers. (6)

Case studies with bald with early detection

Brad Feilich was not there. Dr. Pandya was substitute. With short notice to fill in, he is very knowledgeable, but would prefer more enthusiasm. Dr. Taylor was excellent! Very knowledgeable and enthusiastic. Nancy Todd needed more enthusiasm.

Freilich was not there, so this reflects Dr. Pandya

Excellent speakers

Dr. Freilich had a DH and I found the web speakers to be better than the local speakers.

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.) (9)

Monitor platelets number with combined with liver function test for early identification of liver disease

I will be applying for grants to get our area homeless shelters hepatitis A vaccine. I will be doing a liver specific chronic health questionnaire screening tool upon admission into our homeless shelter those seeking care in our clinic. Also drug interactions were very helpful

new protocols

Recommend Mediterranean diet for NAFLD pts.

n/a; no practice care

Helpful to review new/emerging therapies for HBV, NASH, HCC.

Would be nice to have over just one day

I will be better versed to screen and identify candidates for early treatment of NAFLD/NASH

6. How certain are you that you will implement this change?

(9)

Very Certain ⁽⁵⁻ 55.56%)

Certain ⁽³⁻ 33.33%)

N/A ⁽¹⁻ 11.11%)

7. What topics do you want to hear more about, and what issues(s) in your practice will they address? (9)

Non alcohol fatty liver disease

Diabetes

none

Still awaiting meds for NAFLD.

This was a very comprehensive review and great to be a part of.

Recommend section on drug induced liver disease.

Drug induced liver injury

Combination of obesity, metabolic syndrome and fatty liver disease. GLP1 plus treatments of the obesity epidemic

8. Were the patient recommendations based on acceptable practices in medicine?

(9)

Yes ⁽⁹⁻ 100.00%)

10. Do you think the presentation was without commercial bias?

(9)

Yes ⁽⁷⁻ 77.78%)

No ⁽²⁻ 22.22%)

11. If you answered No on the above question, please list the topics that were biased?

(1)

The two nonCME talks were biased

12. Please provide any additional comments you may have about this educational activity. (7)

Practical usage with more common labs for detection

It really was packed full of good educational information

It was great to have local speakers and easily accessible venue in Kansas City.

This was a very comprehensive review and great to be a part of. I hope it comes back to KC again.

Excellent course.

I really liked the dual opportunity to hear local speakers and if desired, defer to national speakers. My honest opinion is that the enduring material speakers were so much better, I would think hard about virtual meetings in the future with national and local speakers without overhead. I would definitely attend this type of meeting more than once a year.

As one of the participants of this educational activity, we want to encourage you to implement those ideas that were appropriate to your healthcare environment.

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We look forward to seeing you at future University of Louisville events. Thank you very much.



Prevention & Therapies for Hepatitis and Chronic Liver Disease Seminars

September 17-18 - Phoenix, AZ

This activity was created to address the professional practice gaps listed below:

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1. Please respond regarding how much you agree or disagree that the gaps listed above were addressed.

	Disagree		Agree	
Participating in this educational activity changed your KNOWLEDGE in the professional practice gaps listed above. [5-4.00]	(0)	(0)	(0)	(5)100%
Participating in this educational activity changed your COMPETENCE in the professional practice gaps listed above. [5-4.00]	(0)	(0)	(0)	(5)100%
Do you feel participating in this educational activity will change your PERFORMANCE in the professional practice gaps listed above? [5-4.00]	(0)	(0)	(0)	(5)100%

2. Please elaborate on your previous answers. (3)
 Information presented supports what I have previously learned
 Exceptional presentations overall.

I learn the importance of fibrosis screening even when not required

3. Please evaluate the effectiveness of the following speakers in improving your knowledge, competence and/or performance. (Poor = 1, Excellent = 4)

	Poor	Fair	Good	Excellent
Hugo Vargas, MD [5-4.00]	(0)	(0)	(0)	(5)100%
Richard Manch, MD [5-4.00]	(0)	(0)	(0)	(5)100%
Ann Moore, NP [5-4.00]	(0)	(0)	(0)	(5)100%

4. Please elaborate on your previous answers. (3)
 All of the speakers were very knowledgeable in their prospective fields
 Top level presenters and experts in liver disease.
 Clear & relavent

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.) (3)
 Pay extra attention to lab results
 Not currently in clinical practice.
 Utilize new information on HCV, HBV

6. How certain are you that you will implement this change?

(3)

Very Certain ⁽¹⁻ 33.33%)

N/A ⁽¹⁻ 33.33%)

Certain ⁽¹⁻
33.33%)

7. What topics do you want to hear more about, and what issues(s) in your practice will they address? (4)

How to improve testing for HCV in people, populations at risk

Viral hepatitis.

Hep A

NASH, Hepatitis D

8. Were the patient recommendations based on acceptable practices in medicine?

(4)

Yes ⁽⁴⁻
100.00%)

9. If you answered No on the question above, please explain which recommendation(s) were not based on acceptable practices in medicine? (2)

NA

N/A

10. Do you think the presentation was without commercial bias?

(4)

Yes ⁽³⁻
75.00%)

No ⁽¹⁻
25.00%)

11. If you answered No on the above question, please list the topics that were biased?

(2)

NA

N/A

12. Please provide any additional comments you may have about this educational activity. (2)

The speakers provided information that can be used in the clinical and research settings.

Excellent program.

As one of the participants of this educational activity, we want to encourage you to implement those ideas that were appropriate to your healthcare environment.

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We look forward to seeing you at future University of Louisville events. Thank you very much.
