Electronic Supplementary Material

Patient Preference and Adherence

Development of an electronic tool to assess patient preferences in geriatric polypharmacy (PolyPref)

Annette Eidam¹, Anja Roth¹, Eduard Frick², Michael Metzner², Anette Lampert^{2,3}, Hanna M. Seidling^{2,3}, Walter E. Haefeli^{2,3}, Jürgen M. Bauer^{1,4}

¹Center for Geriatric Medicine, Heidelberg University, AGAPLESION Bethanien Hospital Heidelberg, Heidelberg, Germany

²Department of Clinical Pharmacology and Pharmacoepidemiology, Heidelberg University, Heidelberg, Germany

³Cooperation Unit Clinical Pharmacy, Heidelberg University, Heidelberg, Germany

⁴Network Aging Research (NAR), Heidelberg University, Heidelberg, Germany

Correspondence:

Dr. med. Annette Eidam

Center for Geriatric Medicine, Heidelberg University, AGAPLESION Bethanien Hospital Heidelberg, Heidelberg, Germany

Tel: +49 (0) 6221-319-1795

Fax: +49 (0) 6221-319-1505

Email: Annette. Eidam@agaplesion.de

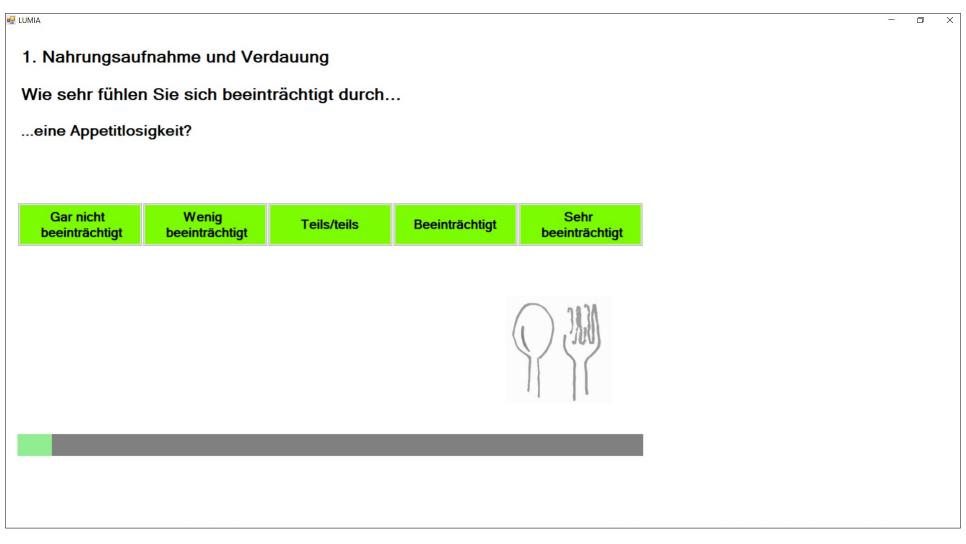


Figure S1 Screenshot of PolyPref stage 1 – section 1 (short-term health outcomes): "Loss of appetite". Respondents are asked to rate how strongly they are affected by this symptom (Not affected – Slightly affected – Partly affected – Very much affected).

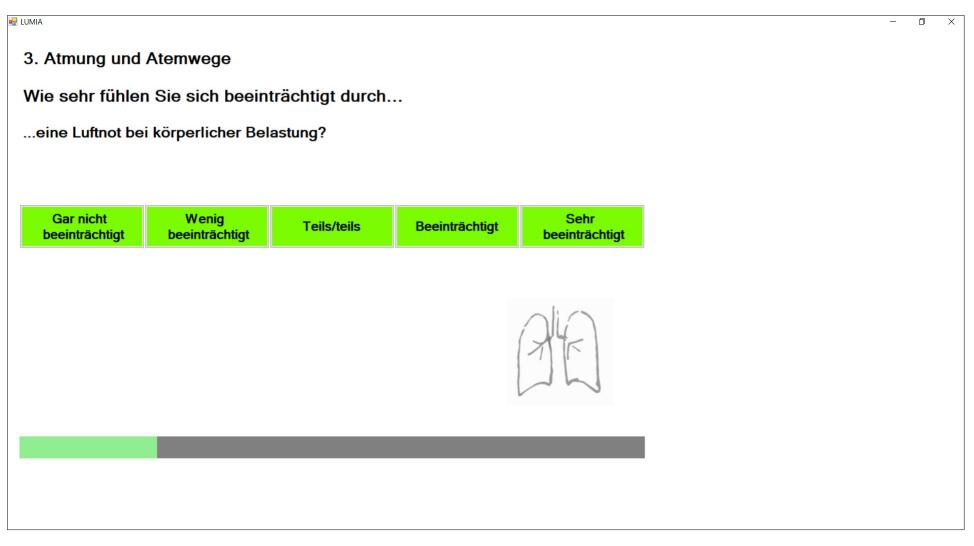


Figure S2 Screenshot of PolyPref stage 1 – section 1 (short-term health outcomes): "Effort dyspnea". Respondents are asked to rate how strongly they are affected by this symptom (Not affected – Slightly affected – Partly affected – Very much affected).

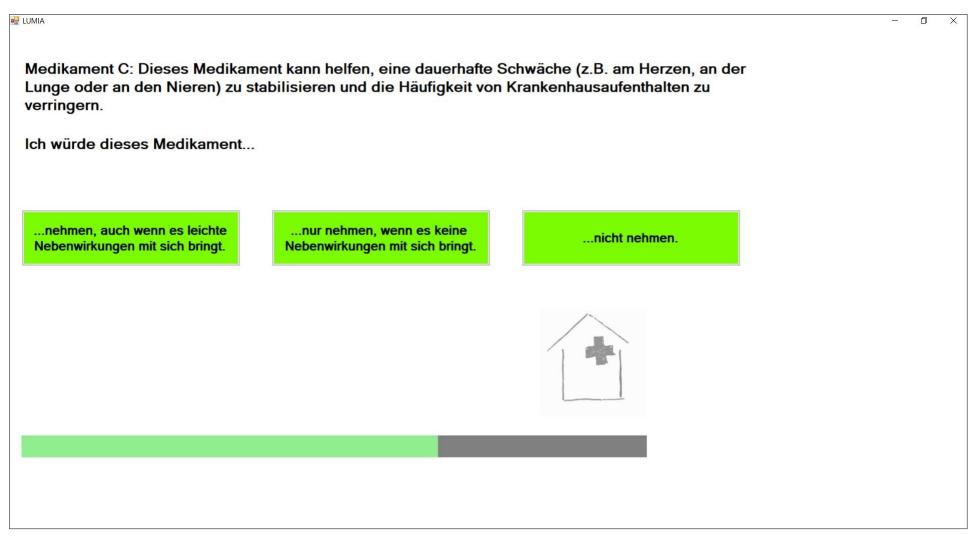


Figure S3 Screenshot of PolyPref stage 1 – section 2 (long-term health outcomes): Example of a hypothetical medicine that may help to stabilize a chronic illness (eg, of the heart, lungs, or kidneys) and to reduce the number of hospitalizations. Respondents are asked if they are willing to take this medicine and if they are willing to accept mild adverse drug reactions for the benefit of prevention.



Figure S4 Screenshot of PolyPref stage 1 – section 3 (medication regimen characteristics): "Splitting of tablets". Respondents are asked to rate how strongly they are bothered by this medication regimen characteristic on a 5-point Likert scale.

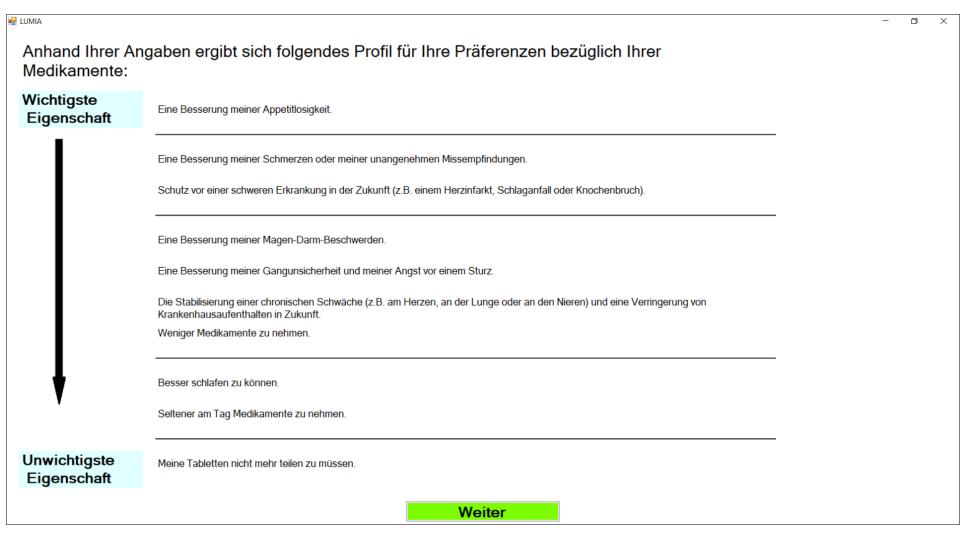


Figure S5 Screenshot of a final result of preference assessment with PolyPref. In this example, the respondent had selected 10 attributes of drug therapy during stage 1 that are relevant to him/her. After completing stage 2 of the preference task, these attributes are now listed from most important ("Wichtigste Eigenschaft") to least important ("Unwichtigste Eigenschaft") within five Q-sort importance categories with 1:2:4:2:1 attributes.