

# **Supplementary Material - "Exploring outcome priorities and real life management of chemotherapy-induced peripheral neurotoxicity: a survey of the Italian Association for the Study of Pain members".**

Salvatore Sardo<sup>1</sup>, Giustino Varrassi<sup>2</sup>, Mario Scartozzi<sup>3</sup>, Maria Caterina Pace<sup>4</sup>, Vittorio Schweiger<sup>5</sup>, Stefano Tamburin<sup>6</sup>, Mario Musu<sup>1</sup> and Gabriele Finco<sup>1</sup>

<sup>1</sup>Department of Medical Sciences and Public Health, University of Cagliari, Monserrato, Italy;

<sup>2</sup>Paolo Procacci Foundation, Rome, Italy; <sup>3</sup>Medical Oncology Unit, University Hospital and

University of Cagliari, Monserrato, Italy; <sup>4</sup>Department of Anesthesia and Pain Medicine, University

of Napoli, Napoli, Italy; <sup>5</sup>Department of Anesthesia and Pain Medicine, University of Verona,

Verona, Italy; <sup>6</sup>Department of Neurosciences, Biomedicine and Movement Sciences, University of Verona, Verona, Italy

Correspondence: Salvatore Sardo. Department of Medical Sciences and Public Health, University of Cagliari, Monserrato, Italy; Email: salvatore.sardo@unica.it

## **Supplementary Figures S1-S10**

The following pictures show the original survey template designed with REDCap.<sup>1,2</sup>

## **References**

1. Harris PA, Taylor R, Thielke R, et al. Research Electronic Data Capture (REDCap)-A Metadata-Driven Methodology and Workflow Process for Providing Translational Research Informatics Support. *J Biomed Inform.* 2009;42:377–381.
2. Harris PA, Taylor R, Thielke R, et al. Research electronic data capture (REDCap)-A metadata-driven methodology and workflow process for providing translational research informatics support. *Journal of Biomedical Informatics.* 2009;42(2):377–81.

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## Chemotherapy-induced peripheral neuropathy: a practice survey <sup>Page 1</sup>

Dear Colleague, this survey is designed to get a real-world snapshot of the practice and beliefs of the clinical community on the treatment of chemotherapy-induced peripheral neuropathy (CIPN).

Eligible professionals are those involved in the care or research of patients with CIPN.

We will collect anonymously all responses, and the data will be stored on a secure database (REDCap electronic data capture tools hosted at the University of Cagliari).

None of your data will be collected if you decide to respond to this survey.

To send your form, click on "Invia".

This survey will be available until September 10, 2022 (23:59 Central European Time)

This survey was designed and approved by the University of Cagliari.

It has been endorsed by AISD 'Associazione Italiana per lo Studio del Dolore', Italian chapter of the International Association for the Study of Pain IASP.

The Institutional Research Board (IRB) of the University of Cagliari considered this research to be exempt from formal IRB evaluation.

Thank you for your valuable collaboration with this project.

For any inquiry, do not hesitate to contact us

Salvatore Sardo, Department of Medical Sciences and Public Health, University of Cagliari, Monserrato, 09042, Italy

salvatore.sardo@unica.it

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**Figure 1 Supplementary Figure S1**

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**Dear colleague we are going to ask you a few details to understand your practice setting**

Are you a health care professional involved in the care of patients affected by cancer or a researcher interested in Chemotherapy-induced peripheral neuropathy (CIPN)?

- Yes
- No

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What is your role?

- Resident or Fellow
- Consultant Physician
- Primary care Physician
- Private practice Physician
- Clinical lead / Director
- Nurse
- Matron/Patron/Director Nurse
- Anesthesia technician
- Healthcare facility administrator
- Clinical psychologist
- Physiotherapist / physical therapist
- Non-physician researcher
- Other

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If you choose "Other", could you specify your role?

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In which country do you practice?

- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Antigua & Deps
- Argentina
- Armenia
- Australia
- Austria
- Azerbaijan
- Bahamas
- Bahrain
- Bangladesh
- Barbados
- Belarus
- Belgium
- Belize
- Benin
- Bhutan
- Bolivia
- Bosnia Herzegovina
- Botswana
- Brazil
- Brunei
- Bulgaria
- Burkina
- Burundi
- Cambodia
- Cameroon
- Canada
- Cape Verde
- Central African Rep
- Chad
- Chile
- China
- Colombia
- Comoros
- Congo
- Congo {Democratic Rep}
- Costa Rica
- Croatia
- Cuba
- Cyprus
- Czech Republic
- Denmark
- Djibouti
- Dominica
- Dominican Republic
- East Timor
- Ecuador
- Egypt
- El Salvador
- Equatorial Guinea
- Eritrea
- Estonia
- Ethiopia
- Fiji
- Finland
- France
- Gabon
- Gambia
- Georgia
- Germany
- Ghana
- Greece
- Grenada
- Guatemala
- Guinea

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Figure 3 Supplementary Figure S3

- Guinea-Bissau
- Guyana
- Haiti
- Honduras
- Hungary
- Iceland
- India
- Indonesia
- Iran
- Iraq
- Ireland {Republic}
- Israel
- Italy
- Ivory Coast
- Jamaica
- Japan
- Jordan
- Kazakhstan
- Kenya
- Kiribati
- Korea North
- Korea South
- Kosovo
- Kuwait
- Kyrgyzstan
- Laos
- Latvia
- Lebanon
- Lesotho
- Liberia
- Libya
- Liechtenstein
- Lithuania
- Luxembourg
- Macedonia
- Madagascar
- Malawi
- Malaysia
- Maldives
- Mali
- Malta
- Marshall Islands
- Mauritania
- Mauritius
- Mexico
- Micronesia
- Moldova
- Monaco
- Mongolia
- Montenegro
- Morocco
- Mozambique
- {Burma}
- Namibia
- Nauru
- Nepal
- Netherlands
- New Zealand
- Nicaragua
- Niger
- Nigeria
- Norway
- Oman
- Pakistan
- Palau
- Panama
- Papua New Guinea
- Paraguay
- Peru
- Philippines
- Poland

**Figure 4 Supplementary Figure S4**

- Portugal
- Qatar
- Romania
- Russian Federation
- Rwanda
- St Kitts & Nevis
- St Lucia
- Saint Vincent & the Grenadines
- Samoa
- San Marino
- Sao Tome & Principe
- Saudi Arabia
- Senegal
- Serbia
- Seychelles
- Sierra Leone
- Singapore
- Slovakia
- Slovenia
- Solomon Islands
- Somalia
- South Africa
- South Sudan
- Spain
- Sri Lanka
- Sudan
- Suriname
- Swaziland
- Sweden
- Switzerland
- Syria
- Taiwan
- Tajikistan
- Tanzania
- Thailand
- Togo
- Tonga
- Trinidad & Tobago
- Tunisia
- Turkey
- Turkmenistan
- Tuvalu
- Uganda
- Ukraine
- United Arab Emirates
- United Kingdom
- United States
- Uruguay
- Uzbekistan
- Vanuatu
- Vatican City
- Venezuela
- Vietnam
- Yemen
- Zambia
- Zimbabwe

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How many years do you practice (including residency program, postgraduate training or fellowship)?

- 0-5 years
- 5-10 years
- 10-15 years
- 15-30 years
- >30 years

**Figure 5 Supplementary Figure S5**

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What is your main medical specialty or setting of practice?

- Allergology
- Anesthesiology
- Cardiology
- Cardiothoracic Surgery
- Child and Adolescent Psychiatry
- Clinical Neurophysiology
- Dermatology and Venereology
- Emergency Medicine
- Endocrinology
- Gastroenterology
- Geriatrics
- Gynecology and Obstetrics
- Infectious Diseases
- Internal Medicine
- Laboratory Medicine / Medical Biopathology
- Medical Genetics
- Medical Microbiology
- Medical Oncology
- Nephrology
- Neurology
- Neurosurgery
- Nuclear Medicine
- Occupational Medicine
- Ophthalmology
- Oro-Maxillo-Facial Surgery
- Orthopedics & Traumatology
- Otorhinolaryngology
- Paediatric Surgery
- Paediatrics
- Pathology
- Pharmacology
- Physical and Rehabilitation Medicine
- Reconstructive and Aesthetic Surgery
- Pneumology
- Psychiatry
- Public Health Medicine
- Radiology
- Radiation Oncology and Radiotherapy
- Rheumatology
- Surgery
- Thoracic Surgery
- Urology
- Vascular Surgery

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Is Pain Medicine your main subspecialty (eg you work in a Pain Service Unit) or the main focus of your research?

- Yes
- No

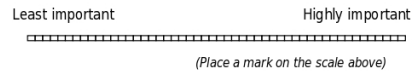
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Is Pain the main topic of your research?

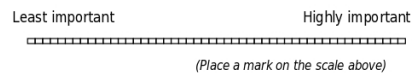
- Yes
- No

**Dear Colleague, in the following questions we will ask you to provide us with an estimate of the importance you give to the following outcomes in your clinical practice or research on CIPN:**

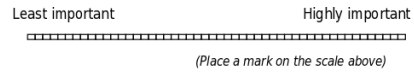
How important is survival or life-expectancy in choosing the therapeutic strategy to manage or prevent CIPN pain in your oncologic patients?



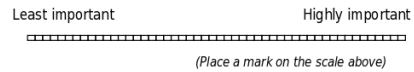
How important is the severity of sensory impairment in choosing the therapeutic strategy to manage or prevent CIPN pain in your oncologic patients?



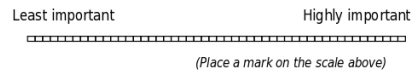
How important is the severity of motor impairment in choosing the therapeutic strategy to manage or prevent CIPN pain in your oncologic patients?



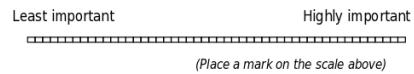
How important is the severity of autonomic impairment in choosing the therapeutic strategy to manage or prevent CIPN pain in your oncologic patients?



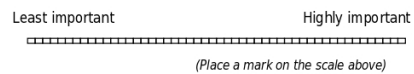
How important is the severity of pain in choosing the therapeutic strategy to manage or prevent CIPN pain in your oncologic patients?



How important is the CIPN-related quality of life in choosing the therapeutic strategy to manage or prevent CIPN pain in your oncologic patients?



How important is the chemotherapy completion rate\* in choosing the therapeutic strategy to manage or prevent CIPN pain in your oncologic patients?  
\* chemotherapy actually delivered to the patient in comparison to the planned dose



**Figure 7 Supplementary Figure S7**

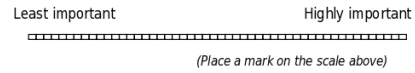


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How important is safety\* in choosing the therapeutic strategy to manage or prevent CIPN pain in your oncologic patients?

\* a safe therapy could be considered as a therapy with a low incidence of moderate-severe adverse effects



**Dear Colleague, in the following questions we will ask you to rank each of the following outcomes according to the relative importance you give them your clinical practice or research on CIPN.**

	Rank 1 MOST important	Rank 2	Rank 3	Rank 4	Rank 5	Rank 6	Rank 7	Rank 8 LEAST important
1 Survival or life expectancy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 Pain intensity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3 Severity of sensory impairment (non-painful positive symptoms and negative symptoms)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4 Severity of motor impairment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5 Severity of autonomic impairment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6 CIPN-related effects on quality of life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7 Chemotherapy completion rate (chemotherapy actually delivered to the patient in comparison to the planned dose)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8 Safety of the drug or technique (a safe therapy could be considered as a therapy with a low incidence of moderate-severe adverse effects)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Dear Colleague the following section investigates your practice for prevention, treatment and staging of CIPN**

Do you prescribe or administer any drug or supplement to prevent CIPN?  Yes  No

Figure 8 Supplementary Figure S8

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Do you prescribe any of these drugs or supplements to prevent CIPN?	<input type="checkbox"/> Gabapentin <input type="checkbox"/> Pregabalin <input type="checkbox"/> Amitriptyline <input type="checkbox"/> Duloxetine <input type="checkbox"/> Venlafaxine <input type="checkbox"/> Tramadol <input type="checkbox"/> Tapentadol <input type="checkbox"/> Buprenorphine <input type="checkbox"/> Baclofen <input type="checkbox"/> Topical Lidocaine <input type="checkbox"/> Topical Capsaicin <input type="checkbox"/> Vitamin E <input type="checkbox"/> Vitamin B complex <input type="checkbox"/> Vitamin D <input type="checkbox"/> Alpha Lipoic Acid <input type="checkbox"/> Palmythoilethanolamide <input type="checkbox"/> Curcumin
Do you prescribe or administer any drug or supplement to treat CIPN?	<input type="radio"/> Yes <input type="radio"/> No
Do you prescribe any of these drugs or supplements to treat CIPN?	<input type="checkbox"/> Gabapentin <input type="checkbox"/> Pregabalin <input type="checkbox"/> Amitriptyline <input type="checkbox"/> Duloxetine <input type="checkbox"/> Venlafaxine <input type="checkbox"/> Tramadol <input type="checkbox"/> Tapentadol <input type="checkbox"/> Buprenorphine <input type="checkbox"/> Other opioids <input type="checkbox"/> Baclofen <input type="checkbox"/> Topical Lidocaine <input type="checkbox"/> Topical Capsaicin <input type="checkbox"/> Vitamin E <input type="checkbox"/> Vitamin B complex <input type="checkbox"/> Vitamin D <input type="checkbox"/> Alpha Lipoic Acid <input type="checkbox"/> Palmythoilethanolamide <input type="checkbox"/> Curcumin
Do you prescribe or perform any Non-pharmacological therapies to treat CIPN?	<input type="radio"/> Yes <input type="radio"/> No
Do you prescribe or perform any of these Non-pharmacological therapies to treat CIPN?	<input type="checkbox"/> Acupuncture/ Electro-acupuncure <input type="checkbox"/> Cold gloves/cold therapy <input type="checkbox"/> Yoga <input type="checkbox"/> Relaxation techniques <input type="checkbox"/> Sensorimotor exercise <input type="checkbox"/> Aerobic training <input type="checkbox"/> Massage <input type="checkbox"/> Scrambler therapy <input type="checkbox"/> Non-invasive neuromodulation <input type="checkbox"/> Invasive neuromodulation (eg Spinal Cord Stimulation) <input type="checkbox"/> Biofeedback <input type="checkbox"/> Clinical hypnosis <input type="checkbox"/> Psychotherapy

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Figure 9 Supplementary Figure S9

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Do you administer any questionnaire, structured interview or descriptive tool to assess or grade CIPN symptoms severity or impact on quality of life?

- Yes  
 No

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Do you use any of these tools?

- Brief Pain Inventory (BPI)
- Common Terminology Criteria for Adverse Events (CTCAE)
- Douleur Neuropathique 4 (DN4)
- European Organisation for Research and Treatment of Cancer (EORTC) QLQ-CIPN20
- EuroQOL EQ-5D
- Functional Assessment of Cancer Therapy (FACT)
- Functional Assessment of Cancer Therapy/Gynecologic Oncology Group-Neurotoxicity (FACT/GOG-Ntx)
- Identification Pain questionnaire (ID-Pain)
- Instrument on Pattern Identification and Evaluation for CIPN (IPIE-CIPN).
- Leeds Assessment of Neuropathic Symptoms and Signs (LANSS)
- McGill Pain Questionnaire
- Modified Total neuropathy score (mTNS)
- Neuropathic Pain Questionnaire (NPQ)
- Neuropathic Pain Scale (NPS)
- Neuropathic Pain Symptom Inventory (NPSI)
- Pain Quality Assessment Scale (PQAS)
- painDETECT
- Symptom Distress Scale (SDS)
- Total neuropathy score (TNS)
- World Health Organization Quality of Life (WHOQOL)-BREF