

**INTRODUCTION**

Dear Doctor,

Stethos, a market research company specialising in the pharmaceutical sector, is conducting a nation-wide survey among Physician Specialists in Dermatology and Physician Specialists in Allergology on the subject of **Chronic Spontaneous Urticaria**,

The survey has no promotional or commercial purposes and aims to analyse in depth how this disease is managed and what motivations guide clinicians in their decision to commence a pharmacological therapy in affected patients. If you agree to take part, we would kindly ask you to complete the following questionnaire by answering some questions concerning your personal experience and your opinions about this disease. In addition to the questionnaire, we also ask you to complete a very short patient diary for each of the last 5 CSU patients you have assessed.

The expected time commitment is approximately 20 minutes.

**PRIVACY STATEMENT**

Please be assured that:

- Our actions will comply with all the laws on privacy (Italian Law no. 196/03) for the protection of personal data and the guidelines issued by the "Market Research Society/European Pharmaceutical Marketing Research Association/ESOMAR".
- Your answers will be used exclusively for the purposes of market research.
- Your answers will be combined with those of other respondents and will be analysed in anonymous and pooled form.
- Your answers will be handled with maximum confidentiality and will not be used for any purpose other than those indicated, nor will they be disclosed to any third party without your consent.
- You have the right to terminate the interview at any time.

**PHARMACOVIGILANCE-RELATED INFORMATION**

We guarantee that any information supplied will be handled with maximum confidentiality and anonymity. Only in the case that you should describe an adverse event in a specific patient, we will ask you for permission to collect this information and forward it to our client (even if you have already reported the event in accordance with the Italian regulations in force). Therefore, in this case, you will be asked to waive your right to confidentiality in compliance with the rules expressed in the ESOMAR Code of Conduct. Any other information provided in the course of the interview shall be considered absolutely confidential.

**Q. 0 Are you willing to take part in the interview?**

- YES → continue  
 NO → close

**RESPONDENT'S PROFILE AND DETAILS OF CENTRE**

1. NAME \_\_\_\_\_
2. SURNAME \_\_\_\_\_
3. HOSPITAL \_\_\_\_\_
4. Email address \_\_\_\_\_
5. Telephone number \_\_\_\_\_

**CSU caseload****Q. 1. Do you personally conduct the diagnosis and treatment of patients affected by Chronic Spontaneous Urticaria (CSU)?**

- Yes → go on to Q.2  
 No → close, interview not valid. Not in target population.

**Q. 2. Overall, how many CSU patients do you care for in a year, including during your ambulatory activity? |\_\_|\_\_|\_\_|****Q. 3. How many of these patients are also affected by angioedema? |\_\_|\_\_|\_\_|****Q. 4. On average, how many new cases of CSU do you diagnose in a year? |\_\_|\_\_|\_\_|****Q. 5. What percentage of your CSU patients receive no specific treatment for CSU?  
untreated patients |\_\_|\_\_|\_\_| %****Q. 6. Taking into consideration your treated CSU patients only, how are they distributed with regard to their pharmacological treatment?**

only H1-antihistamine (standard dose)	_ _ _ %
only H1-antihistamine (increased-dose)	_ _ _ %
H1-antihistamine in combination with leukotriene antagonist/H2-antihistamine	_ _ _ %
steroids (alone or in combination with other drugs)	_ _ _ %
systemic calcineurin inhibitors (cyclosporin)	_ _ _ %
other drugs than those listed	_ _ _ %

**Q. 7. Are you aware of the existence of specific guidelines on the management and treatment of patients affected by CSU?**

- 1  Yes, I know the guidelines and I apply them regularly
- 2  Yes, I know the guidelines and I apply them, though not regularly
- 3  Yes, I know the guidelines but I don't apply them
- 4  No, I don't know the guidelines

**If Q.7.=1,2,3**

**Q.7.A Which guidelines are you referring to?** \_\_\_\_\_ open \_\_\_\_\_

**Q.7.B Based on your clinical experience, what is the treatment sequence for a patient affected by CSU? Below you will find a list of the different types of pharmacological treatments: please order them starting from the treatment you normally prescribe first.**

Graphically, the same list shown in Q. 6 will appear and the doctor will have to indicate the order for each item on the list (1 / 2 / 3 ...)

- Treatment 1
- Treatment 2
- Treatment 3
- Treatment 4
- Treatment 5

**Q.7C. Does this treatment sequence change in the case of a CSU patient also affected by angioedema? If so, could you indicate how it changes?**

- No it remains unchanged
- Yes, the sequence is changed as follows
  - Treatment 1
  - Treatment 2
  - Treatment 3
  - Treatment 4
  - Treatment 5

**Q. 8. For each treatment, approximately how many patients remain symptomatic during the pharmacological treatment (incomplete control)?**

	% refractory patients
only H1-antihistamine (standard dose)	_ _ _ % symptomatic patients
only H1-antihistamine (increased-dose)	_ _ _ % symptomatic patients
H1-antihistamine in combination with leukotriene antagonist/ H2-antihistamine	_ _ _ % symptomatic patients
steroids (alone or in combination with other drugs)	_ _ _ % symptomatic patients
systemic calcineurin inhibitors (cyclosporin)	_ _ _ % symptomatic patients

**Management of the CSU patient**

**Q. 9. On average, how long does it take to arrive at a diagnosis of Chronic Spontaneous Urticaria? In other words, how much time elapses between when the patient presents to you with the symptoms and when CSU is diagnosed?**

|\_|\_| months |\_|\_| years

**Q. 10. Below you will find some statements describing physicians' possible attitudes and approaches to the management of a patient presenting with symptoms potentially related to Chronic Spontaneous Urticaria. Please rate them based on the extent to which you identify with each statement. Give a score from 1 to 10 where 1 indicates "strongly disagree / not true for me at all" and 10 indicates "strongly agree / very true for me".**

• If a patients has the symptoms of CSU <b>I directly send him to other colleague</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>
• <b>I autonomously manage the therapy</b> to a CSU patient • (without seeking a consultation/discussion with colleagues)	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>
• To diagnosis CSU <b>I usually prefer to consult with a colleague</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>

If the last item of Q.10 was rated >5 proceed with Q.10.A

**Q.10.A**

**Which specialist/colleague do you seek advice from? \_\_\_\_\_ open \_\_\_\_\_**

**Q.10.B What is the level of complexity and difficulty in formulating a diagnosis of CSU? Give a rating from 1 to 10 where 1 indicates "not at all complex" and 10 indicates "extremely complex". In answering, consider the various steps and tests/investigations that are required before a diagnosis of CSU can be confirmed.**

1 2 3 4 5 6 7 8 9 10

If Q.10.B was rated >5

**Q.10.C What reasons led you to give this rating? In other words, what elements do you consider to be most impacting and burdensome in the diagnostic process?**

\_\_\_\_\_ open \_\_\_\_\_

**Q.10.D Below you will find the major severity scales used worldwide to rate and determine the level of CSU severity. For each scale, please indicate whether you are familiar with it and whether you use it in your practice.**

• <b>UAS</b> (urticaria activity score)	<input type="checkbox"/> I'm not familiar with it <input type="checkbox"/> I'm familiar with it but I don't use it <input type="checkbox"/> I use it
• <b>UAS 7</b> (urticaria activity score 7 days)	<input type="checkbox"/> I'm not familiar with it <input type="checkbox"/> I'm familiar with it but I don't use it <input type="checkbox"/> I use it
• <b>CU-QoL</b> (chronic urticaria - quality of life)	<input type="checkbox"/> I'm not familiar with it <input type="checkbox"/> I'm familiar with it but I don't use it <input type="checkbox"/> I use it

**Q. 10.E Are there any elements /instruments /unmet needs that could possibly facilitate you in diagnosing the disease?**

\_\_\_\_\_ open \_\_\_\_\_

**Treatment-decision drivers**

**Q. 11. Think about when you decide what treatment to initiate in a patient affected by CSU. What are the main treatment goals that you hope to achieve for a CSU patient? Please indicate at least the first 2 treatment goals by placing them in order of importance.**

1st treatment goal | \_\_\_\_\_ |  
 2nd treatment goal | \_\_\_\_\_ |  
 Other treatment goals | \_\_\_\_\_ |

**Q. 12. And, more in detail, what elements do you take into account when deciding on a treatment?**

**Below you will find several characteristics of a pharmacological treatment. For each characteristic, please indicate how important you believe it to be by rating it from 1 to 10, where 1 indicates "not at all important" and 10 indicates "definitely important".**

characteristics	rating
-----------------	--------

Rapidity of drug action	___/10
Duration of drug action	___/10
Efficacy of treatment	___/10
Way of administration	___/10
Frequency of administration	___/10
Drug safety	___/10
Impact of the treatment on the patient's quality of life	___/10
Cost of the treatment	___/10
Patient monitoring required after beginning the treatment	___/10

If Q.12 "impact of the treatment on the patient's quality of life" was rated  $\geq 6$

**Q.12.A What aspects/elements does the patient consider to be most critical, difficult to cope with and having the greatest impact on his/her life? Please indicate the first 3 aspects in order of importance.**

- |   | 1st | 2nd | 3rd |
|---|-----|-----|-----|
| <ul style="list-style-type: none"> <li>• itching</li> <li>• angioedema</li> <li>• unpredictability of symptoms</li> <li>• impact of disease on physical appearance</li> <li>• depression</li> <li>• hives</li> <li>• impact of the disease on social relations</li> <li>• headache</li> </ul> |     |     |     |

**Q. 13. Now please rate the main pharmacological therapies available to clinicians for the treatment of CSU, from the point of view of the characteristics rated in Q.12. Rate them from 1 to 10, where 1 indicates a "definitely negative" rating and 10 indicates a "definitely positive" rating of the therapy in relation to the characteristic.**

Characteristic	ANTIHISTAMINES	CYCLOSPORIN	ANTIHISTAMINES + STEROIDS	ANTIHISTAMINES + LEUKOTRIENE ANTAGONISTS
Rapidity of action drug	___/10	___/10	___/10	___/10
Duration of action drug	___/10	___/10	___/10	___/10
Efficacy of treatment	___/10	___/10	___/10	___/10
Way of administration	___/10	___/10	___/10	___/10
Frequency of administration	___/10	___/10	___/10	___/10
Drug Safety	___/10	___/10	___/10	___/10
Impact of the treatment on the patient's quality of life	___/10	___/10	___/10	___/10
Cost of the treatment	___/10	___/10	___/10	___/10
Patient monitoring required after beginning the treatment	___/10	___/10	___/10	___/10

**Q. 14. More in general, how much does a patient's request for treatment affect your decision to start a therapy? When answering, give a rating from 1 to 6, where 1 indicates that "the patient's request has no influence" and 6 indicates that "the patient's request has a strong influence".**

Patient's request \_\_\_ / 6

**Q. 15. Still on the subject of CSU, do you know of any pharmaceutical products currently being tested or about to be launched that are indicated for this disease? If so, what pharmaceuticals do you know of? Indicate the brand and/or the company.**

YES → which \_\_\_\_\_

NO

**Below is a product profile**

Product profile

- **INDICATION:** the product is a new targeted monoclonal antibody therapy indicated for patients aged 18 years or older with chronic spontaneous urticaria (CSU) who remain unresponsive to standard care
- **DOSAGE AND ADMINISTRATION:** Administration of the product is by subcutaneous injection via pre-filled syringe. The drug is administered once monthly at a dose of 300 mg.
- **EFFICACY:** A clinically relevant improvement of itching was achieved in 1-2 weeks
  - ❖ Itching decreased to 72% at 12 weeks compared with baseline versus 37% with standard care
  - ❖ 44% of patients (vs 9% with standard care) remained free of itching for 12 weeks
  - ❖ DLQI score at 12 weeks decreased to 79% compared to 48% with standard care
- **SAFETY:** the product was well tolerated in the cohort of approximately 700 treated patients enrolled in the Phase III CSU trial

**Q. 16. Do you know which pharmaceutical product the profile refers to?**

- Yes | \_\_\_\_\_ open \_\_\_\_\_ | → go to Q.17  
 No → proceed to Q.18

If Q.16=yes

**Q. 17. Through what sources of information did you learn about the product? More than one answer is possible**

- pharmaceutical sales representatives / company's medical department
- meetings /conferences
- journal publications
- internet
- clinical trials
- other \_\_\_\_\_ open \_\_\_\_\_

**Q. 18. Based on your current knowledge / on the description supplied to you, how do you rate your opinion about this medicinal product for the treatment of CSU?**

- Extremely positive
- Positive
- Somewhat positive
- Neither positive nor negative
- Somewhat negative
- Negative
- Extremely negative

**Q. 19. What are the main strengths of this product?** | \_\_\_\_\_ open \_\_\_\_\_ |

**Q. 20. And its weaknesses?** | \_\_\_\_\_ open \_\_\_\_\_ |

**Q. 21. Based on your knowledge / on the product profile provided, what could be a typical CSU patient profile for this pharmaceutical product?**

| \_\_\_\_\_ open \_\_\_\_\_ |

**Q. 22. With the advent of this new pharmaceutical product for the treatment of CSU, what do you think would be the ideal treatment sequence? In other words, relative to the sequence you indicated previously what would be the position of the new product?**

- only H1-antihistamine (standard dose)
- only H1-antihistamine (increased-dose)
- H1-antihistamine in combination with leukotriene antagonist/H2-antihistamine
- steroids (alone or combined with other drug)
- systemic calcineurin inhibitors (cyclosporin)
- new pharmaceutical product
- other pharmaceutical product than those listed

**Q. 23. Would this treatment sequence change in the case of a CSU patient also affected by angioedema? If yes, could you indicate how?**

- No, it would remain unchanged
- Yes, it would change as follows
  - Treatment 1
  - Treatment 2
  - Treatment 3
  - Treatment 4
  - Treatment 5

**Q. 24. What would induce you to use this product as a second-line treatment? What elements would you take into account for its use as a second-line treatment?**

\_\_\_\_\_ open \_\_\_\_\_

**Q. 25. Considering all of your CSU patients, how many of them might be eligible for treatment with the new product?**

|\_|\_|\_|

**Q. 26. We have reached the end of the questionnaire. Think of all the treatments available and imagine that the new product is already on the market. Based on your current knowledge and information, rate your willingness to prescribe this medicinal product. To answer, use a scale from 1 to 10 where 1 indicates "I would definitely not prescribe it" and 10 indicates "I would definitely prescribe it".**

1    2    3    4    5    6    7    8    9    10

**Q. 27. We have reached the end of the questionnaire. Based on your experience and clinical practice, what are the needs and requirements that remain unmet by the currently available treatments? Below you will find a series of elements. For each, please rate the extent to which the need has not been met by the available treatments. Use a scale from 1 to 10 where 1 indicates "this is not a critical element/this need has been met" and 10 indicates "absolutely critical element/this need has definitely not been met".**

Item 9 appears if Q.10.D UAS ≠ I'm not familiar with it

Item 10 appears if Q.10.D UAS 7 days ≠ I'm not familiar with it

characteristics	rating
1 The possibility to achieve complete control of the disease	___/10
2 The possibility to control the symptoms of the disease	___/10
3 Improvement of patient's QoL – in terms of practical aspects/physical activity	___/10
4 Improvement of patient's QoL – in terms of psychological aspects	___/10
5 Drugs specifically approved for CSU	___/10
6 Drugs with a low frequency of administration	___/10
7 Drugs with acceptable safety and tolerability levels	___/10
8 Fast-acting drugs	___/10
9 Improvement of patient on UAS (urticaria activity scale)	___/10
10 Improvement of patient on UAS 7 (urticaria activity scale 7 days)	___/10

**Q. 28. Before proceeding with the patient diaries, as a very last effort, we would like you to indicate, if you wish, the details of the Specialist Physicians (in Dermatology or Allergology) that you consider to be reference physicians in Italy for the treatment of CSU.**

**1** name | \_\_\_\_\_ | surname | \_\_\_\_\_ | hospital | \_\_\_\_\_ | city | \_\_\_\_\_  
**2** name | \_\_\_\_\_ | surname | \_\_\_\_\_ | hospital | \_\_\_\_\_ | city | \_\_\_\_\_  
**3** name | \_\_\_\_\_ | surname | \_\_\_\_\_ | hospital | \_\_\_\_\_ | city | \_\_\_\_\_

*The questionnaire is complete. Please access section two to compile a very short diary for the last 5 CSU patients you have assessed.*