

APPENDIX: SURVEY

Preliminary questions

1. Primary specialty
 - a. Medical oncology
 - b. Radiation oncology
 - c. Urologic oncology
 - d. Urology
 - e. Other
2. Practice setting
 - a. Community health centre/hospital
 - b. Private practice
 - c. Teaching hospital/centre of excellence
 - d. Other
3. Years in practice
 - a. Less than 5 years
 - b. 5 to 10 years
 - c. 11 to 20 years
 - d. 21 to 30 years
 - e. More than 30 years
4. Number of patients with prostate cancer typically treated in a month
 - a. 1 to 10 patients
 - b. 10 to 25 patients
 - c. 25 to 50 patients
 - d. More than 50 patients
5. Which of the following is the most challenging when treating prostate cancer patients with ADT?
 - a. Achieving and maintaining appropriate castrate testosterone levels
 - b. Achieving and maintaining appropriate PSA levels
 - c. Addressing biochemical failure
 - d. Managing comorbidities and/or associated medications
 - e. Managing long-term use of ADT
 - f. Managing the side effects of ADT
 - g. Maintaining quality of life
 - h. Maintaining treatment adherence

Physicians' likelihood to screen and manage metabolic, cardiac, and bone health

1. Likelihood of screening and managing the following conditions in patients on ADT instead of involving their family doctor or a specialist (ranked; 1= unlikely, 5 = extremely likely)
 - a. Cardiovascular disease
 - b. Diabetes
 - c. Dyslipidemia
 - d. Hypertension
 - e. Obesity
 - f. Osteopenia/osteoporosis

Patient profiles

1. Patient age [Free text]
2. Testosterone level measurements
 - a. No
 - b. Yes
 - c. Most recent testosterone level measurement (nmol/L) [Free text]
3. Smoker
 - a. Current
 - b. Previous
 - c. No
 - d. Unknown
4. BMI
 - a. BMI [Free text]
5. Bone mineral density (BMD)
 - a. Above or equal to -1 (normal)
 - b. Between -1 and -2.5 (osteopenia)
 - c. Below or equal to -2.5 (osteoporosis)
 - d. Unknown
6. A1C
 - a. A1C (%) [Free text]
7. Blood pressure
 - a. Blood pressure, systolic (mmHg) [Free text]
 - b. Blood pressure, diastolic (mmHg) [Free text]
8. HDL-C
 - a. HDL-C (mmol/L) [Free text]
 - b. LDL-C (mmol/L) [Free text]

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9. Triglycerides
 - a. Triglycerides (mmol/L) [Free text]
10. Other conditions
 - a. Cardiovascular disease
 - b. Diabetes
 - c. Hypercholesterolemia
 - d. Hypertriglyceridemia
 - e. Hypertension
 - f. Obesity
 - g. Osteopenia/osteoporosis
11. Patients with multiple other conditions
 - a. Number of patients with ≥ 3 conditions
 - b. Number of patients with ≥ 1 of the following: diabetes, dyslipidemia, hypertension, obesity
12. Current stage of prostate cancer
 - a. Localized (T1 or T2, N0, M0)
 - b. Localized advanced (T3 or T4, N0, M0 or any T, N1, M0)
 - c. Metastatic (M1)
 - d. Non-metastatic CRPC
 - e. Metastatic CRPC
13. Indication for current ADT regimen
 - a. Adjuvant to radiation therapy
 - b. Biochemical failure
 - c. Metastatic disease

Patient management of metabolic, cardiac, and bone health

1. Initiated preventative or therapeutic interventions for
 - a. Cardiovascular disease
 - b. Diabetes
 - c. Metabolic syndrome
 - d. Decreased BMD/Osteoporosis
2. Interventions used to reduce the risk of metabolic and/or CVD
 - a. Recommended education or counselling
 - i. Letter to the family physician advising on the management of ADT
 - ii. Nutritional counseling
 - iii. Patient education on cardiovascular health and risks
 - iv. Psychosocial or behavioural counselling
 - b. Initiated therapy

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- i. Acetylsalicylic acid
 - ii. Anti-hyperglycemic therapy
 - iii. Anti-hypertensive therapy
 - iv. Lipid-lowering therapy
 - v. Selection of intermittent ADT instead of continuous ADT
 - vi. Dietary modifications
 - vii. Physical exercise
 - viii. Smoking cessation
 - ix. Referral to a specialist
 - c. Used other interventions
 - d. Used no interventions
- 3. Interventions used to prevent the loss of BMD
 - a. Pre-treatment BMD scan using DXA
 - b. Pre-treatment assessment of fracture risk
 - c. Dietary supplementation of vitamin D and calcium
 - d. Letter to the family physician advising on the management of ADT
 - e. Lifestyle modifications
 - f. Oral bisphosphonates
 - g. Patient education on bone health and risk of loss of BMD
 - h. Physical exercise
 - i. Other interventions
 - j. No interventions