



WOMENS' VALUES OF TREATMENT FOR HEAVY MENSTRUAL BLEEDING

Currently there are two possible ways of treating heavy menstrual bleeding (heavy periods) and we need to decide which is better. Although you may not personally experience heavy menstrual bleeding it is important to identify the views of women on the value of different treatment options.

We would be most grateful if you could complete the enclosed questionnaire. It should take no longer than 10 minutes to complete. Once completed please return the questionnaire using the stamped addressed envelope provided.

The questionnaire has two sections. The first section presents you with a scenario of heavy menstrual bleeding and will ask you about how much you would value different treatments for heavy menstrual bleeding. The second section will ask you some general questions about yourself.

There are no right or wrong answers. We are just interested in your views.

Please answer all the questions even if some may seem repetitive or less relevant, as it is important to get complete information.

**The questionnaire is anonymous.
Your answers will remain confidential.**

Thank you for your participation in this study.

Study ID

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Section 1: Valuing treatments for heavy menstrual bleeding

TAKE YOUR TIME TO READ THE DESCRIPTIONS BELOW

The descriptions explain the experience of heavy menstrual bleeding (heavy periods) and the two treatment options.

Please imagine that you start having heavy periods from tomorrow, and what is described to you below is what you will experience up until the change (menopause).

- You have to carry extra sanitary protection and clothes because of the risk of flooding
- Your social life is slightly affected during your cycle. You may have to cancel or modify your plans
- During your cycle you experience some anxiety and worry
- During your cycle you often feel tired and do not feel especially well. You feel concerned about your health
- There are frequent disruptions to your work/daily routine during your cycle
- Your family life/relationships suffer some strain during your cycle

Now, rather than continue to live with heavy periods you could either be treated with Mirena coil (a coil that is designed to treat heavy periods) or Oral Treatment using tablets. Each treatment helps you to manage the bleeding in a different way:

Please turn over for description of treatments

Please check that you have answered each question

Mirena

Mirena is a coil that is inserted into your womb by your GP or other qualified practitioner. The procedure usually takes a few minutes. Mirena can last for up to 5 years but it can be removed before if you wish. If you were given the Mirena, during the first 6 months you may experience irregular periods (bleeding in between periods) and your periods may not improve . Women are advised to persevere as the benefit of treatment can be seen after **6 months and by 12 months most women will have stopped their periods.** At 6 months on average you will:

- Have no practical difficulties, bleed no more than you expect and take no extra precautions
- Your social life is unaffected during your cycle and you can enjoy life as much as usual
- During your cycle you experience some anxiety and worry
- During your cycle you feel well most of the time and are a little concerned about your health
- There are no interruptions to your work/daily routine during your cycle
- Your family life/relationships suffer some strain during your cycle

Oral Treatment

Depending on the Oral Treatment you and your GP choose, you may either have to take tablets every day or just during your period. You may temporarily experience headaches or nausea or changes to your mood. If these persist you could change to a different Oral Treatment. When taking Oral Treatment you will see an **immediate** effect where on average you will:

- Have to carry extra sanitary protection but take no other precautions
- Your social life is slightly affected during your cycle and you may have to cancel or modify plans
- During your cycle you experience some anxiety and worry
- During your cycle you feel well most of the time and are a little concerned about your health
- There are occasional disruptions to your work/daily routine during your cycle
- Your family life/relationships suffer some strain during your cycle

1. Out of these two treatment options Mirena or any Oral Treatment what is your preferred treatment?

Mirena

Oral Treatment

No preference

Please check that you have answered each question

One way of measuring the value of different types of treatment for heavy menstrual bleeding is to ask you how much money you would be willing to pay for it. Of course, the treatments are provided free on the NHS and would stay free. This is simply a method of measuring the value you place on each treatment. So, imagine you do have to pay.

We believe that you should not have to pay for healthcare, other than prescription costs where necessary. The information you provide us will in no way be used to set or change prices for healthcare, it is simply a method of measuring how strongly you feel about the different treatment options and how much you value them.

There are no right or wrong answers. The amount you say could be large or small. Please keep in mind that you will need to provide values that are within your means i.e. please do not state values that you would not actually be able to pay. When thinking of a value assume that you would pay this amount every month until you reach menopause. Generally menopause occurs around 55 years of age.

If you expect menopause to occur earlier or later than 55 years, based on your family history please write the age below and use this age as your basis for duration of monthly payment:

My expected age of menopause is years old

Please check that you have answered each question

PLEASE ANSWER BOTH QUESTIONS

2. What would be the maximum monthly amount you would be willing to pay, out of your own pocket, for Mirena?

Put a circle around the **maximum amount** you would pay

£0
£2
£4
£6
£8
£10
£12
£14
£16
£18
£20
£25
£30
£35
£40
£45
£50
£60
£70
£80
£90
£100
£150
£200
£250
£300
£350
£400
£450
£500

If more than £500 please state the exact amount: £ _____

3. What would be the maximum monthly amount you would be willing to pay, out of your own pocket, for Oral Treatment?

Put a circle around the **maximum amount** you would pay

£0
£2
£4
£6
£8
£10
£12
£14
£16
£18
£20
£25
£30
£35
£40
£45
£50
£60
£70
£80
£90
£100
£150
£200
£250
£300
£350
£400
£450
£500

If more than £500 please state the exact amount: £ _____

The information you provide us will in no way be used to set or change prices for healthcare,

Please check that you have answered each question

4. In the space provided below could you please tell us the reasons behind your answers to question 2 and 3? *(What did you think about when choosing a maximum monthly amount?)*

Please check that you have answered each question

Section 2: General information about yourself

7. Could you please tell us your age?

8. What is your current status?

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Single | <input type="checkbox"/> Divorced |
| <input type="checkbox"/> Married/living with partner | <input type="checkbox"/> Separated |
| <input type="checkbox"/> Widowed | |

9. Would you like to have children in the future?

- Yes No

10. What is your current employment status:

- | | | |
|--|---|---|
| <input type="checkbox"/> Employed (Full -time) | <input type="checkbox"/> Retired | <input type="checkbox"/> Long-term sick |
| <input type="checkbox"/> Employed (Part-time) | <input type="checkbox"/> Student | <input type="checkbox"/> Self-employed |
| <input type="checkbox"/> Unemployed | <input type="checkbox"/> Looking after family or home | |
| <input type="checkbox"/> Other | | |

If other please state: _____

If employed, what is your current occupation? _____

11. Are you the main income earner in the household?

- Yes No

If No, what is the occupation of the main income earner? _____

12. Could you please estimate the annual income of your **household before** deducting tax and national insurance (if you receive any benefits include them as income)?

- | | |
|--|--|
| <input type="checkbox"/> Less than £10,000 | <input type="checkbox"/> £40,001 - £50,000 |
| <input type="checkbox"/> £10,000 - £20,000 | <input type="checkbox"/> £50,001 - £60,000 |
| <input type="checkbox"/> £20,001 - £30,000 | <input type="checkbox"/> £60,001 - £70,000 |
| <input type="checkbox"/> £30,001 - £40,000 | <input type="checkbox"/> More than £70,000 |

13. Have you experienced heavy menstrual bleeding?

- Yes No

Please check that you have answered each question

14. Could you please explain why you are visiting the Birmingham Women's hospital today?

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15. Could you please indicate how satisfied or dissatisfied you are with your life overall: Please tick the box which you feel best describes how satisfied or dissatisfied you are.

- Very unsatisfied
- Slightly unsatisfied
- Neither satisfied nor unsatisfied
- Slightly satisfied
- Very satisfied

Please answer the questions by ticking one box in each group. Please indicate which statement best describes your own health today

Mobility	
I have no problems walking about	<input type="checkbox"/>
I have some problems walking about	<input type="checkbox"/>
I am confined to bed	<input type="checkbox"/>
Self care	
I have no problems with self-care	<input type="checkbox"/>
I have some problems washing or dressing myself	<input type="checkbox"/>
I am unable to wash or dress myself	<input type="checkbox"/>
Usual activities (e.g work, study, housework, family or leisure activities)	
I have no problems with performing my usual activities	<input type="checkbox"/>
I have some problems with performing my usual activities	<input type="checkbox"/>
I am unable to perform my usual activities	<input type="checkbox"/>
Pain/Discomfort	
I have no pain or discomfort	<input type="checkbox"/>
I have moderate pain or discomfort	<input type="checkbox"/>
I have extreme pain or discomfort	<input type="checkbox"/>
Anxiety/Depression	
I am not anxious or depressed	<input type="checkbox"/>
I am moderately anxious or depressed	<input type="checkbox"/>
I am extremely anxious or depressed	<input type="checkbox"/>

16. Would you be willing to take part in an interview, that would last for about 30 minutes, to discuss your answers? *The interview will be conducted at your own convenience at the Birmingham Women's Hospital.*

- No Yes

Please check that you have answered each question

Thank you for completing this questionnaire

Please check that you have answered each question