

Article title: **Patient and physician perceptions of painful diabetic peripheral neuropathy in South-East Asia**

Journal name: **Advances in Therapy**

Author names: **Rayaz A. Malik, Emre Aldinc, Siew-Pheng Chan, Chaicharn**

Deerochanawong, Chii-Min Hwu, Raymond L. Rosales, Chun-Yip Yeung, Koichi Fujii, and Bruce Parsons

Email of corresponding author: emre.aldinc@pfizer.com

Affiliation of corresponding author: **Pfizer Inc, New York, NY, USA**

PATIENT SURVEY

ONLINE INTRODUCTION

This research will involve participation in a 20-minute online survey to understand your health condition. As the survey is conducted online, you will be able to complete it at a time, and location, convenient to you. Your views are very important because they could set the direction for this therapy area in the future and lead to the development of new treatments.

Before we proceed with the survey, we would like to ask you a few questions for categorisation purposes and to make sure you meet the criteria we need. This will take approximately 2-3 minutes.

S1. Where do you currently reside? [*SINGLE RESPONSE ONLY*]

Hong Kong	1	Continue
Malaysia	2	
Philippines	3	
Taiwan	4	
Thailand	5	
Others	6	TERMINATE

S1b. Please select your preferred language: [*ASK ONLY IN MALAYSIA*]

English	1
Simplified Chinese	2
Malay	3

S2. Are you a...? [*SINGLE RESPONSE*]

Male	1	Continue
Female	2	

S3. What is your age as at your last birthday?

Below 18	1	TERMINATE
18-25	2	Continue
26-30	3	
31-35	4	
36-40	5	
41-45	6	
46-50	7	
51-55	8	
56-60	9	
61-65	10	
Over 65	11	TERMINATE

S4a. Which of the following conditions (if any) have you been diagnosed with? *[MULTIPLE RESPONSES POSSIBLE]*

Arthritis	1	Go to S4b if code 4 (Diabetes) is selected. If code 4 is not selected, TERMINATE
Asthma	2	
Depression	3	
Diabetes	4	
Heart condition / disease	5	
Hepatitis	6	
High cholesterol	7	
Hypertension (high blood pressure)	8	
Osteoporosis	9	
Stomach ulcer	10	
Any other condition	11	
None of the above <i>[single response]</i>	12	TERMINATE

S4b. *[Ask if S4a = code 4]* Which type of the following diabetes have you been diagnosed?
[SINGLE RESPONSE ONLY]

Diabetes (Type 1)	1	Continue
Diabetes (Type 2)	2	
None of the above / not sure	3	TERMINATE

S4c. [Ask if S4a = code 4 AND S4b = code 1 OR code 2] Do you suffer from any form of chronic pain after being diagnosed with diabetes? [SINGLE RESPONSE ONLY]

Yes	1	Continue
No	2	TERMINATE
Don't know	3	TERMINATE

Q3.3. [Ask if S4c = code 1] Which of the following best described the chronic pain that you experience after been diagnosed with diabetes? Please review the following list. Please indicate which of the following words or terms you used to describe your pain.

[MULTIPLE RESPONSES POSSIBLE]

Burning sensation	1	<input type="checkbox"/>	Continue if coded at least 2 out of code 1 to 6
Numbing sensation	2	<input type="checkbox"/>	
Electric shocks	3	<input type="checkbox"/>	
Tingling pain	4	<input type="checkbox"/>	
Sharp or stabbing	5	<input type="checkbox"/>	
Pins & needles	6	<input type="checkbox"/>	
Dull ache	7	<input type="checkbox"/>	TERMINATE
Throbbing pain	8	<input type="checkbox"/>	
Other, please specify [open ended]	97	<input type="checkbox"/>	
None of these [single response]	99	<input type="checkbox"/>	

S5. Are you currently seeking treatment in managing your chronic pain? [SINGLE RESPONSE ONLY]

Yes	1	Continue
No	2	TERMINATE

S5c. Are you currently seeing a physician in treating your chronic pain? [*SINGLE RESPONSE ONLY*]

Yes	1	Continue
No	2	

S5b. Have you ever been diagnosed by a physician with your chronic pain? [*SINGLE RESPONSE ONLY. SOFT QUOTA: n = 40 respondents from each country must code 1*]

Yes	1	Continue
No	2	

S4d. Have you been diagnosed by a physician with any of the following conditions? [*MULTIPLE RESPONSES POSSIBLE*]

Painful diabetic peripheral neuropathy (DPN)	1	Continue
Diabetic autonomic neuropathy (DAN)	2	Continue
Diabetic proximal neuropathy (DPrN)	3	
Diabetic focal neuropathy (DFN)	4	
None of the above [<i>single response</i>]	5	Continue
Don't know [<i>single response</i>]	6	

Definition

Painful diabetic peripheral neuropathy (DPN)	Causes pain or loss of feeling in the toes, feet, legs, hands, and arms. The pain is commonly described as burning, electric shocks, pins & needles, tingling/crawling ants, painful cold.
Diabetic autonomic neuropathy (DAN)	Causes changes in digestion, bowel and bladder function, sexual response, and perspiration. It can also affect the nerves that serve the heart

	and control blood pressure, as well as nerves in the lungs and eyes.
Diabetic proximal neuropathy (DPrN)	Causes pain in the thighs, hips, or buttocks and leads to weakness in the legs.
Diabetic focal neuropathy (DFN)	Causes sudden muscle weakness or sudden pain, inability to focus the eye (double vision or aching behind one eye), paralysis on one side of the face, severe pain in the lower back or pelvis, pain in the front of a thigh or in the chest, stomach, or side, pain on the outside of the shin or inside of the foot.

FOR ONLINE

IF QUALIFY:

Thank you very much for answering these short initial questions. You will now be directed to the main questionnaire which is to understand your experience before, during and after being diagnosed with diabetes related chronic pain. Your views are most important because they could set the direction for this therapy area in the future. This will take approximately 20 minutes to complete.

IF SCREENED OUT:

Thank you for answering these questions and your interest in our survey. Unfortunately we do not have any more questions for you at this stage. Thank you for your time. We look forward to your participation in future surveys.

CLOSE.

INTRODUCTION ONLINE

Thank you for agreeing to participate in this study. This interview is being conducted by Kantar Health, an independent market research agency to investigate patients' experience before, during and after being diagnosed with diabetes-related chronic pain in Asia.

The interview will last approximately 20 minutes. Your responses will be kept strictly confidential and your contact information will not be included in any market research report. Your opinions are important to us and would be very much appreciated. Please note that this interview is being carried out strictly for market research purposes and is in no way intended as a promotional exercise for any third party.

Kantar Health is abided by the Market Research Society guidelines and relevant data protection regulations. In line with these, you should be aware that:

- This Market Research is sponsored by a pharmaceutical company, this research study is not designed to be promotional in anyway, you have the right to withdraw from the interview at any time and withhold any information.
- Patient safety monitoring is important to our client. Should you mention any side effects or unexpected event while on treatment we may need to report this information to our client's drug safety department, even if it has already been reported by you to your physician.
- Do you agree with us reporting your contact details to our client if you mention any side effects or unexpected event during the research? This will not affect your participation in this survey; you will be able to participate whether you agree or disagree.

Yes	1	Continue
No	2	

Please click the button below to continue.

SECTION 1: BACKGROUND DISEASE UNDERSTANDING

Q1.1. When were you first diagnosed with diabetes? Please indicate the year you were first diagnosed with diabetes

[4 digits]

Q1.2. How long after you were diagnosed with diabetes did you develop chronic pain? (i.e. noticed the first symptoms of chronic pain?)

years months

Q1.3. Where did you experience your first pain symptoms? Please indicate the site (or sites) where you first experienced pain from as a result of your chronic pain [*MULTIPLE RESPONSES POSSIBLE*]

Feet	1
Legs	2
Arm	3
Hands	4
Fingers and/or toes	5
Others, please specify <i>[open ended]</i>	97

Q1.3b. Which of these sources of information did you refer to in order to have a better understanding about chronic pain? [*MULTIPLE RESPONSES POSSIBLE*]

Family	1
Friends / colleagues	2
Doctors	3
Pharmacist	4
Internet, please specify which website <i>[open ended]</i>	5
Others, please specify <i>[open ended]</i>	97

Q1.4. *[Ask if S5c code 1]* Approximately how long did you wait before discussing these pain symptoms with your doctor?

year/s month/s week/s [2 digits each]

Q1.5. Would you describe the pain you generally suffer from your chronic pain as mild, moderate, or severe? *[SINGLE RESPONSE ONLY]*

Mild pain (nagging, annoying, interferes with my daily activities)	1
Moderate pain (interferes significantly with my daily activities)	2
Severe pain (disabling, unable to perform my daily activities)	3

Q1.6. Apart from your diabetes, do you suffer from any of the following conditions? *[MULTIPLE RESPONSES POSSIBLE]*

Chronic heart disease	1
Obesity	2
Hypertension	3
Arthritis	4
Kidney disease	5
None of the above <i>[single response]</i>	99

SECTION 2: IMPACT OF CHRONIC PAIN

Q2.1. What do you believe is the impact of chronic pain on your quality of life?

←Negligible			Very Serious→			
1	2	3	4	5	6	7
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q2.2. Which of the following conditions do you suffer from as a direct result of your chronic pain? *[MULTIPLE RESPONSES POSSIBLE]*

Sleep problems	1
Reduced ability to carry out normal duties at work	2
Reduced ability to perform exercise	3
Depression	4
Anxiety	5
Poor appetite	6
Reduced sexual desire	7
Increased cases of anger (i.e. due to frustration)	8
Decreased desire to interact with others	9
Increased difficulty in holding concentration	10

SECTION 3

Q3.1. *[Ask if S5c = code 1]* Thinking back to when you first starting discussing your chronic pain with your doctor, who initiated the conversation? *[SINGLE RESPONSE ONLY]*

I initiated the conversation	1
The doctor proactively initiated the conversation	2

Q3.2. *[Ask if S5c = code 1]* When you first discussed your pain with your doctor how easy did you find it to clearly describe this pain, without any prompting from the doctor?

←Very hard to describe			Very easy to describe→			
1	2	3	4	5	6	7
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q3.4a. *[Ask if S5c = code 1]* Which, if any, of the following tools were provided to you by your doctor to help you more easily describe your chronic pain? *[MULTIPLE RESPONSES POSSIBLE]*

Q3.4b. *[Ask all]* Which of these following tools would be helpful in helping you to describe your pain to your doctor if provided? *[MULTIPLE RESPONSES POSSIBLE]*

	3.4a	3.4b
List of local language descriptions (to help you more clearly describe your pain specifically)	1	1
Pain scale (to help you clearly describe the level or intensity of pain you were experiencing)	2	2
Pain questionnaire (to help your doctor collect more information about your experience of pain)	3	3
Please indicate any tools that your doctor used to help him/ her better understand your pain <i>[open ended]</i>	97	97
Please indicate any tools that your doctor used to help	NA	98

him/ her better understand your pain <i>[open ended]</i>		
--	--	--

SECTION 4: CHRONIC PAIN DIAGNOSIS

Q4.1. *[Ask if S5b = code 1]* You mentioned earlier that you were diagnosed with diabetes in *[pipe in answer from Q1.1.]*. How long after this were you formally diagnosed with chronic pain?

years months

Q4.2. *[Ask if S5b = code 1]* Which specialty of doctor formally diagnosed you with chronic pain? *[SINGLE RESPONSE ONLY]*

A cardiologist	1
An endocrinologist / diabetologist	2
A pain specialist	3
A nephrologist	4
An orthopedic surgeon	5
A general practitioner / primary care practitioner	6
Other, please specify <i>[open ended]</i>	97

Q4.3. *[Ask if S5b = code 1]* Below are the tests for diagnosing chronic pain. Which of the following you can recall that you underwent? *[MULTIPLE RESPONSES POSSIBLE]*

Clinical examination	1
Symptom observation	2
Nerve conduction test	3
Foot examination	4
Monofilament test	5
Medical history	6
Risk factors, please specify <i>[open ended]</i>	96
Others, please specify <i>[open ended]</i>	97

Q4.4. [Ask if S5b = code 1] How long did it take for you to get a final diagnosis, from the time you first discussed with your doctor about your pain? [SINGLE RESPONSE ONLY]

Doctor gave me a diagnosis the first time I saw him / her	1
<1 month	2
>1–3 months	3
>3–6 months	4
>6–9 months	5
>9–12 months	6
>1–2 years	7
>2–4 years	8
>4 years	9
Can't recall	99

Q4.5. Currently where do you typically suffer pain as a result of your chronic pain? Please indicate the site (or sites) where you suffer pain from your chronic pain. [MULTIPLE RESPONSES POSSIBLE]

Feet	1
Legs	2
Arm	3
Hands	4
Fingers and/or toes	5
Others, please specify [open ended]	97

Q4.6. How motivated are you in general to manage your chronic pain compared to your other existing conditions?

←Not motivated at all			Extremely motivated→			
1	2	3	4	5	6	7
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q4.7a. *[Ask if S5b = code 1]* Did your doctor monitor your condition upon your diagnosis on chronic pain? *[SINGLE RESPONSE ONLY]*

Yes	1 <i>[Ask Q4.7b]</i>
No	2 <i>[Jump to Q5.1]</i>

Q4.7b. *[Ask if Q4.7a = code 1]* How long did your doctor monitor your condition for? *[SINGLE RESPONSE ONLY]*

<1 month	1
>1–3 months	2
>3 months up to 1 year	3
>1 year up to 2 years	4
>2 years	5

Q4.7c. *[Ask if Q4.7a = code 1]* Is your doctor currently monitoring your chronic pain? *[SINGLE RESPONSE ONLY]*

Yes	1
No	2

SECTION 5: MANAGEMENT AND TREATMENT OF CHRONIC PAIN

Q5.1. *[Ask if S5c = code 1]* Which doctor do you primarily consult with to help manage your chronic pain? *[SINGLE RESPONSE ONLY]*

Cardiologist	1
Endocrinologist / diabetologist	2
Pain specialist	3
Nephrologist	4
Orthopedic surgeon	5
General practitioner / primary care practitioner	6
Others, please specify <i>[open ended]</i>	97

Q5.2. *[Ask if S5c = code 1]* Is he/ she the same doctor whom you consult with regarding your diabetes? *[SINGLE RESPONSE ONLY]*

Yes	1
No	2

Q5.3. *[Ask if S5c = code 1]* Does your doctor discuss your chronic pain with you every time you visit him / her? *[SINGLE RESPONSE ONLY]*

Yes	1
No	2

Q5.4. *[Ask if S5c = code 1]* Which of the following (if any) did your doctor recommend to you for your chronic pain to ease symptoms of pain? *[MULTIPLE RESPONSES POSSIBLE]*

Change of lifestyle (diet and exercise change)	1
Prescription medication	2
Traditional medication	3

(e.g. herbs, Chinese medication)	
Vitamin treatment and health supplements	4
Better regulate existing diabetes treatment (i.e. tightening blood sugar control)	5
Other, please specify <i>[open ended]</i>	97

Q5.5. What should be the priority of managing chronic pain compared to other aspects of diabetes?

←Lowest priority			Highest priority→			
1	2	3	4	5	6	7
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 6: STATEMENT TESTING

Q6. [For Q6_1/4/5/6, ask if S5c = code 1; for Q6_2/3, ask if S5b = code 1] To what extent do you agree or disagree with the following statements?

		←Disagree Completely				Agree Completely→		
		1	2	3	4	5	6	7
1	I do not like to discuss my chronic pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Once I was diagnosed with chronic pain I was fearful of additional costs of treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Before my chronic pain diagnosis I was unaware of diabetes specific related pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	I do not think chronic pain is a serious condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Compared to my other conditions chronic pain is unimportant to manage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	During the consultations I have with my doctor to discuss my diabetes there is limited time to address my chronic pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q7. Is there anything else you would like to let us know in order to help those experiencing chronic pain? [OPEN ENDED]

THANK YOU AND CLOSE.