

APPENDIX

Survey text

Below is the text describing the blood and bone marrow tests for MRD in the survey instrument.

The text preceded the questions about MRD testing presented in Figure 5.

Blood Test:

Treatments for CLL can work differently for different people. A treatment that works well for one person may not work as well for another. Your doctor can use standard methods, such as physical examinations, CT scans, or standard blood tests, to see how well you responded to your CLL treatment.

When there are a small number of cancer cells left in the blood or bone marrow, standard tests may not find them.

Currently, there are new tests that have been shown to be at least 100 times more sensitive than the standard test your doctor uses. Using either your blood or bone marrow, these tests can find one single CLL cell among 10,000 normal cells.

These new tests will give your doctor better information on the chance that you will have a long remission (a long time before the cancer comes back). Your doctor could use this information to decide how much monitoring you need and your future treatment strategies.

Bone Marrow Test:

CLL cells can be in your blood and your bone marrow. It is also important for doctors to know how many cancer cells are in your bone marrow. To do the test from bone marrow samples, you will need to have a bone marrow aspiration to remove some of your bone marrow.

During a bone marrow aspiration, doctors will

- numb the skin around your hip,

- insert a hollow needle into your hip bone, and
- remove a small piece of the hip bone and some of the marrow inside the bone.

This process can cause brief but intense pain, even though the skin is numb. Many physicians are interested in their patient's bone marrow status because bone marrow disease is a major concern in patients with CLL.

Results for Ordered Logit Analysis of MRD Testing Questions

Table 3 and Table 4 present the results of the ordered logistic regressions for interest in the blood and bone marrow tests, respectively.

Table 1. Ordered logistic regression for interest in additional blood test (n = 318)

Variable	Estimated parameter	Standard error	P
Age	-0.036*	0.016	0.027
Female	-0.587*	0.246	0.017
College degree	-0.252	0.275	0.358
Income	0.146	0.089	0.098
Urban	0.315	0.781	0.687
Suburban	0.502	0.761	0.509
Rural	1.335	0.797	0.094
Employed full-time	-0.166	0.347	0.632
Employed part-time	0.338	0.452	0.455
Single	1.920	1.528	0.209
Married	0.788	1.430	0.581
Widowed	0.883	1.455	0.544
Divorced	1.073	1.435	0.455
Black	0.625	1.094	0.568
White	0.264	0.936	0.778
Private insurance	0.400	0.304	0.188
Public insurance	0.883*	0.368	0.016
First line	-0.002	0.301	0.994
Relapse	0.211	0.283	0.456
Years since diagnosis	-0.027	0.017	0.107
Cut1	-3.686	1.925	

Cut2	-2.499	1.913
Cut3	-1.356	1.912
Cut4	-0.305	1.909

* $P < 0.05$.

Table 2. Ordered logistic regression for interest in additional bone marrow aspiration test (n = 318)

Variable	Estimated		
	parameter	Standard error	<i>P</i>
Age	-0.020	0.015	0.181
Female	-0.606**	0.221	0.006
College degree	-0.421	0.248	0.090
Income	0.108	0.079	0.171
Urban	1.042	0.750	0.164
Suburban	0.702	0.732	0.338
Rural	1.578*	0.750	0.035
Employed full-time	-0.162	0.321	0.613
Employed part-time	0.957*	0.414	0.021
Single	2.206	1.299	0.089
Married	1.619	1.232	0.189
Widowed	1.547	1.273	0.224
Divorced	1.437	1.233	0.244
Had bone marrow test before	1.299**	0.249	0.000
Black	1.964*	0.997	0.049
White	0.764	0.790	0.334
Private insurance	-0.092	0.270	0.734
Public insurance	0.515	0.330	0.119
First line	-0.124	0.284	0.663

Relapse	-0.341	0.257	0.184
Years since diagnosis	-0.024	0.017	0.165
Cut1	0.053	1.670	
Cut2	1.385	1.671	
Cut3	2.313	1.673	
Cut4	3.376	1.677	

* $P < 0.05$; ** $P < 0.01$.