Supplementary file 1 Main interview questions and procedures for the individual interviews (t_1 and t_2) and focus groups (t_2). Most aspects of the methods of t_1 and t_2 are adopted from the original Belgian study*

Context questions

- What type of treatment are you currently receiving?
- Have there been any changes in your treatment plan? If so, why and what type of changes?

Individual interviews at t1

Preparatory phase (5 to 10 minutes)

To set the scene for the interview, participants were asked to write down as many keywords describing:

- the impact of rheumatoid arthritis (RA) on their life
- which outcomes of their illness and treatment they considered most important.

Start of the interview

The interviews began by discussing participants' written answers to those 2 questions. Participants were asked to elaborate on their keywords:

- Can you tell me how RA affects your daily life?
- Which outcomes of your illness and antirheumatic treatment are important to you at this moment?

Proceeding of the interview

The order of the other interview questions was determined by the participants' answers during the interview.

- How has the treatment been working for you so far?
- How do you decide whether or not your treatment is working?
- What made you decide to start treatment?
- What were your expectations of your antirheumatic treatment at the start of treatment?
- To what extent do the expectations you had at the start of your treatment match your current expectations?

Three questions were added after the first interviews: Other patients talked about 1) taking less medication, 2) returning to a normal life, 3) feeling better. Is this something you recognize? What do you feel about that?

Probing questions: Could you tell me more about that? Could you give an example?

End of the individual interview

Is there anything else you would like to add?

Focus groups at t_2

Round 1: preparatory phase (5 to 10 minutes)

The moderator introduced the phenomenon of interest, after which each group member was asked to independently prepare answers to the question below by writing down as many keywords as possible. Each answer was written on a separate sticky note.

- Which outcomes of your illness and antirheumatic treatment are important to you at this moment?

Next, participants were asked to try to order their sticky notes on a vertical scale, from most important (top) to least important (bottom).

Participants were simultaneously asked to think about the following questions:

- What important treatment results have already been achieved?
- At present, is there anything you would like to change or improve regarding your disease or treatment?

Round 2, step 1: round-robin listing

All group members were asked to reveal and clarify, one by one, their personally preferred outcomes in order of importance. Meanwhile, the observer wrote these outcomes on a flipchart in front of the group.

- Who would like to share your personally valued outcomes with the group, in order of importance?
- Could you please clarify why these outcomes of your disease and antirheumatic treatment are important to you?
- Why did you designate that specific outcome to be the most important?
- Is there anything else you would like to add?

Round 2, step 2: developing a group list of patient-preferred outcomes

The group was asked to generate a consensus list by reviewing and merging all recorded outcomes and agreeing on the name and properties of each outcome on the list.

- Could any of the individual expectations be grouped?
- Who would like to suggest a name and meaning for this outcome?
- Do you think all the important outcomes are mentioned on the group list?
- Is there anything else you would like to add?

Round 2, step 3: eliciting personal preferred outcomes

Starting from the consensus list of patient-preferred outcomes that resulted in step 2, each group member was asked to independently try to select his or her 5 top outcomes from this list, using the sticky note ordering scheme.

Round 2, step 4: eliciting preferred outcomes in the actual stage of RA

The group was then asked to discuss a collective top 5 outcomes and to consider influencing factors.

- Looking at the group list, what outcome would you order as most important?
- What outcome would you order second...fifth?
- Can you tell us why this outcome is either important to you or not?

End of round 2

That is it for the second round. Is there anything else to add?

Round 3: exploring the view of participants on the evolution of their patient-preferred outcomes over the past year

The focus groups ended by exploring the participants' views on potential changes in personally preferred outcomes over time. During the individual interview of last year, you were asked for your preferred illness and treatment outcomes. In the meantime, you have gained more experience with your disease and treatment and the critical disease stage has passed.

- Do you feel that other results are now more important to you than the ones you identified at the start or during your interview last year?
- Could you explain why this has or has not changed?
- Are there outcomes that are now more, less, or no longer important to you?
- Why do you think that these are now more or less important than a year ago, or are no longer important? What may have caused this change in importance?
- Do you have an example of an outcome that has changed in importance compared to that outcome in the early disease stage? Why do you think this has changed? Could you clarify this in more detail?
- In general you mention (more or less) similar/different outcomes of importance compared to last year (in the early disease stage). What is your opinion on this observation?

End of round 3

This is the end of the third round. Is there anything else to add?

Probing questions: Is this outcome also important or not important to other group members? Are there any suggestions from other group members? Is there anyone who has a different opinion on the matter? Is it difficult for you to share your opinion on this? Does everyone agree? Who agrees or disagrees and why? Who would like to add something?

End of the focus group

- What is your general conclusion about today's focus group on preferred and important outcomes of disease and treatment in the actual disease stage?
- To summarize, you talked about [...]. Do you agree with this summary of today's focus group?

Individual interviews at to

Preparatory phase (5 to 10 minutes)

Please, consider the next 5 to 10 minutes the question below by writing down as many keywords as possible. The interviews will begin by discussing your written answers to this question:

- Which outcomes of your illness and antirheumatic treatment are important to you at this moment?

Start of the interview

- Can you tell me what you have written down? So, which outcomes of your illness and antirheumatic treatment are important to you at this moment?

Proceeding of the interview

Exploring patient-preferred outcomes

- How has the treatment been working for you so far?
- To what extent do the expectations you had at the start of your treatment match your current expectations?

- Do you feel that other results are now more important to you than the ones you identified at the start or during your interview last year? Could you explain why this has or has not changed?
- Are there outcomes that are now more, less, or no longer important to you?
- Why do you think that these are now more or less important than a year ago, or are no longer important? What may have caused this change in importance?
- Do you have an example of an outcome that has changed in importance compared to that outcome in the early disease stage? Why do you think this has changed? Could you clarify this in more detail?

Patient-preferred outcomes compared to the focus groups at t2

During the focus groups the following 5 treatment outcomes were found to be most important: 1) preferred outcome; 2) preferred outcome; 3) preferred outcome; 5) preferred outcome.

- I wonder if you recognize yourself in this? Could you explain why this is or is not the case? End of the individual interview

Is there anything else you would like to add?

 t_1 : time point 1= 3-6 months after start of the initial treatment for early rheumatoid arthritis;

t₂: time point 2= 12-18 months after start of the initial treatment for early rheumatoid arthritis.

*Van der Elst K, Meyfroidt S, De Cock D, et al. Unraveling Patient-Preferred Health and Treatment Outcomes in Early Rheumatoid Arthritis: A Longitudinal Qualitative Study. Arthritis Care Res (Hoboken) 2016;68(9):1278-87.