



A SURVEY AMONG PATIENTS AND PHYSICIANS **EU – THE NETHERLANDS**

COMPARING PHYSICIAN AND PATIENT PERSPECTIVES ON COMMUNICATION ABOUT AND MANAGEMENT OF RHEUMATOID ARTHRITIS (RA)



TABLE OF CONTENTS



- Background & Objectives
- Research Method & Report Notes
- **3** Key Findings from patients & rheumatologists in the Netherlands
- **Detailed Findings**
- Appendix





BACKGROUND & OBJECTIVES

BACKGROUND & OBJECTIVES



The RA NarRAtive is an international initiative, aimed at elevating the important role of the patient in the successful management of RA. In collaboration with Pfizer, the RA NarRAtive is supported by a global Advisory Panel comprised of 39 healthcare providers and patient group leaders from 17 countries. Its purpose is to improve rheumatoid arthritis disease management through harnessing the experience of people with RA, physicians and patient advocates to develop solutions that break down communication barriers and create positive change within the RA community.

This report represents the combined storyline from both the patient and physician survey data findings. In August – September 2016 RA patients in the Netherlands completed the online survey about their perspective. All patients were diagnosed with RA by a healthcare professional and were seen by a rheumatologist. The results are, were possible, split up into the severity of symptoms as determined by a health care professional. In October – November 2016 the views and opinions of rheumatologists in the Netherlands were explored. All rheumatologists had seen at least five patients in the past month whose RA is moderately to severely or severely active.

As background, in 2014 and 2015, the RA NarRAtive completed a major survey of adult RA patients worldwide and in 2015 and early 2016, the RA NarRAtive completed a complementary survey that explored the views and opinions of rheumatologists.





RESEARCH METHOD & REPORT NOTES

RESEARCH METHOD - PATIENTS





Method

Online (CAWI) on the GfK online panel



Fieldwork

August 18th – September 12th 2016



Target group

Patients with RA diagnosed by a health care professional, and they have to visit a rheumatologist.



Sample

A total of **424 respondents**, of which:

- 50 respondents with mild RA according to their health care professional
- 306 respondents with moderate to severe RA according to their health care professional
- 68 respondents with severe RA according to their health care professional



Questionnaire

Length of questionnaire: ± 22 minutes





RESEARCH METHOD - RHEUMATOLOGISTS





Method

Online (CAWI) on a sample of rheumatologists by IMS Health



Fieldwork

October 26th - November 30th 2016



Target group

Rheumatologists who see at least 5 patients with RA each month and who have seen at least one patient in the past month with moderate to severe or severe RA



Sample

36 rheumatologists completed the survey



Questionnaire

Length of questionnaire: ± 32 minutes



REPORT NOTES



- This report is based on self-reported diagnoses. For example 7% of the patients reported having Artritis Psoriatica and 1% of the patients reported having Lupus too, but these diagnoses are not possible in combination with RA. It's possible that there are also patients with Artrosis in the sample, because of the variant medication profile compared to the average RA patient.
- The average age of the RA patients in the sample is higher than the average age of RA patients in the Netherlands. The RA patients in the sample are on average 61 years old, while the average RA patient in the Netherlands is 58 years old.
- In order to ensure accurate comparisons between the patient survey and the physician survey, for physician survey data, the **Global Total** includes the same 15 countries as the patient survey (Argentina, Australia, Brazil, Canada, France, Germany, Italy, Japan, South Korea, Hong Kong, Taiwan, Spain, Turkey, the UK, and the US). The EU5 results are the results from Germany, France, Spain, the UK and Italy.





REPORT NOTES (CONTINUED)



In tables and charts:

- ✓ A dash (-) denotes a value of zero
- ✓ An asterisk (*) denotes a value less than one percent but greater than zero
- ✓ Percentages may not add up to 100% due to weighting and/or computer rounding
- ✓ Results based on small samples (n<100) should be interpreted as directional only

Throughout this report:

"RA" refers to "rheumatoid arthritis"



"Rheumatologists" refers to rheumatologists who see at least 5 patients with RA each month and who have seen at least one patient in the past month with moderate to severe or severe RA



"Patients" refers to people with RA who are being primarily treated by a rheumatologist (unless otherwise noted, e.g., patients currently taking prescription medication)



"Compared" refers to questions asked of both physicians and patients



KEY FINDINGS NETHERLANDS



KEY MESSAGE 1: GAPS BETWEEN BELIEF AND PRACTICE IN SETTING GOALS

Patients are affected quite severely by their RA and most of them have set goals for managing their disease. However, the majority have not set treatment goals with their physician.

- RA has a major influence on the patients with this disease:
 - Only a third can perform all activities in daily life without assistance;
 - More than half (53%) have stopped participating in certain activities due to the RA;
 - Also, 25% of the patients are unable to work due to a disability or illness and for 62% this was caused by the RA.
- 86% (EU5:71%) of rheumatologists in the Netherlands believe setting treatment goals is very important or absolutely essential for successful management of RA, while only 50% (EU5: 68%) think the same about developing a disease management plan with their patients.
- In the Netherlands, 94% (EU5: 98%) of RA patients indicate they have goals for managing their RA, however, only about 4 in 10 (43%; EU5: 37%) have set treatment goals with their rheumatologist. With the severe RA patients, treatment goals are set somewhat more often but still only 53%.



11

KEY MESSAGE 2: SEVERE PATIENTS INDICATE THEY CAN BE TREATED BETTER; OTHER PATIENTS ARE SETTLING (1)



Many patients with severe RA are not completely satisfied with their medication regimen, but they settle for "good enough" according to rheumatologists.

- Only 60% of the RA patients in the Netherlands report being satisfied with their current medication. In addition to this, more than one third of the RA patients (36%) indicate that their RA is active and 13% indicate that this is not under control. Feelings of patients with severe RA about their medication are somewhat more negative: 53% of the patients with severe RA are satisfied, almost half of the severe RA patients (49%) indicate their RA is active and a third (34%) that this is not under control.
- More than three quarters of rheumatologists in the Netherlands (78%; EU5: 63%) say their moderate to severe patients often settle for a treatment that makes them feel "good enough" despite other treatment options that may make them feel better and that many RA patients say they feel "good enough" even though clinical assessments indicate that their disease is active (78%; EU5: 64%).
- Almost all rheumatologists (97%) and about half (49%) of the RA patients in the Netherlands indicated areas they would ideally change about RA medications. The top 3 ideal changes for both patients and rheumatologists:

	Rheumatologists NL	Patients NL	Rheumatologists EU 5	Patients EU5
1. Number of side effects	75%	21%	60%	31%
2. Severity of side effects	72%	16%	66%	23%
3. The number of medications I need to take	56%	15%	35%	22%





KEY MESSAGE 2: SEVERE PATIENTS INDICATE THEY CAN BE TREATED BETTER; OTHER PATIENTS ARE SETTLING (2)



Many patients with severe RA are not completely satisfied with their medication regimen, but they settle for "good enough" according to rheumatologists.

- All rheumatologists (100%) and two third (66%) of the RA patients note areas where the relationship between patient and rheumatologist could be improved in order to help more successfully manage their RA. Suggestions made most often by patients are:
 - Discussing symptoms or experiences since their last visit (35%; rheumatologists: 50%)
 - More information about the RA treatment options that are available to the specific patient (21%; rheumatologists: 31%)
- Rheumatologists think supplemental or additional visits with other health care professionals (58%) help the most in more successfully managing RA (patients: 17%)





KEY MESSAGE 3: TREATMENT AND COMMUNICATION FOCUS VARIES BETWEEN RHEUMATOLOGIST AND PATIENT (1)



Data indicate that one reason for a disconnect between patient and rheumatologist communication in the Netherlands is the focus of the rheumatologist on the medication and possible side effects and less focus on important aspects for the patient as pain and ability to participate normally in daily life.

- When thinking about what "successful" treatment means, rheumatologists focus primarily on achieving remission (92%; EU5: 83%), while patients want to eliminate pain (70%; EU5: 68%), decrease joint swelling/inflammation (62%; EU5: 68%) and reduce interference with daily activities (61%; EU5: 54%).
- This doesn't mean that rheumatologists aren't concerned with patient reported outcomes. In fact, more than 9 in 10 rheumatologists in the Netherlands (92%; EU5: 93%) agree it is crucial to evaluate patient reported outcomes when determining a treatment plan for RA, and three quarter (75%; EU5: 83%) say they regularly encourage their RA patients to discuss the impact of their RA on various aspects of their lives, such as work, sleep and personal relationships.
- However, to determine if patients are satisfied with their medication regimen, all rheumatologists ask if the patients experience any side effects (100%; EU5: 80%), while only 78% (EU5: 71%) ask the patient directly if they are satisfied or not.



KEY MESSAGE 3: TREATMENT AND COMMUNICATION FOCUS VARIES BETWEEN RHEUMATOLOGIST AND PATIENT (2)



Data indicate that one reason for a disconnect between patient and rheumatologist communication in the Netherlands is the focus of the rheumatologist on the medication and possible side effects and less focus on important aspects for the patient as pain and ability to participate normally in daily life.

- Additionally, when it comes to discussing the medication with their physician, physicians are more likely to discuss:
 - 1. Side effects (97%; EU5: 83%)
 - 2. The impact of RA on patients' job/career or ability to work (89%; EU5: 71%)
 - 3. Whether or not patients' have stopped participating in certain activities as a result of their RA (86%; EU5: 54%)
- Both patients (34%; EU5: 56%) and rheumatologists (69%; EU5: 65%) wish they talked more about patient RA goals and treatment.





KEY MESSAGE 4: DISCONNECT BETWEEN COMMUNICATION SATISFACTION AND RAISING CONCERNS



Despite the fact that quite some patients feel uncomfortable raising concerns and fears with their rheumatologist, many patients and rheumatologists in the Netherlands indicate that they are satisfied with their communication about RA treatment.

- Patients are in general satisfied with the communication with their rheumatologists about RA treatment (87%; EU5: 82%), and so are rheumatologists (94%; EU5: 91%). Yet, there are some aspects that could be improved:
 - 34% wish their rheumatologist and they themselves talked more about the RA goals and treatment (rheumatologists 69%)
 - 28% wish they could visit their rheumatologist more often (rheumatologists: 42%)
 - 15% feel that their rheumatologist often ignores their concerns about medications or alternative treatment plans
- More than 4 in 10 patients in the Netherlands (44%) report feeling uncomfortable raising concerns and fears with their rheumatologist. Nearly 1 in 5 (19%) worry that if they ask too many questions, their physician will see them as a difficult patient and it will affect the quality of their care.
- All rheumatologists in the Netherlands (100%) agree that RA patients who are involved in making treatment decisions tend to be more satisfied with their treatment experience than those who are not as involved.







KEY MESSAGE 5: UNDERUTILIZATION OF VALUABLE COMMUNITY RESOURCES

While patient advocacy groups and patient support groups can be used as a way to gather more information and support, few patients utilize these local resources.

- The health care professional is seen as the most important source of information and advice about the RA treatment by patients (83%), in particular the rheumatologist. 93% of the RA patients relies on the rheumatologist regularly for information and advice.
- Most rheumatologists (92%) recommend their RA patients to refer to RA advocacy groups, but both RA advocacy groups (28%) and RA patient groups (10%) seem to be underused as source of information by patients. The patients with severe RA make use of the RA support groups a bit more often: 18% of the patients with severe RA rely on them as one of their information sources.
- About two third of rheumatologists in the Netherlands (67%; EU5: 81%) believe patients who participate in RA support groups tend to be better able to live with and manage their RA. Three quarters (75%; EU5 78%) of rheumatologists think participation in an RA support group is at least somewhat important for successful management of RA while only 17% feels it's absolutely essential or very important.



17

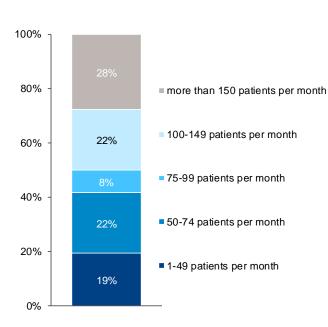
DETAILED FINDINGS

PATIENT PROFILE AND ASSESSMENT METRICS

RHEUMATOLOGIST TREAT ABOUT 94 RA PATIENTS PER MONTH. ALMOST HALF OF THESE PATIENTS ARE IN REMISSION

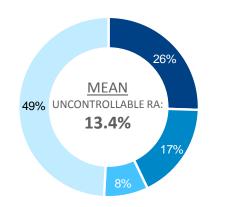


Number of Rheumatoid arthritis patients



MEAN of RA patients
per month:
GLOBAL TOTAL = 92.0
EU 5 = 80.8
NL = 94.2

Rheumatologists estimate that **38%** of RA patients have a caregiver



- Mildly active
- Moderately to severely active
- Severely active
- In Remission

Q630. Approximately how many unique patients do you see in your practice each month who have the following conditions?

Q640. About how many RA patients have you seen in the $\underline{past\ month}$ whom you would categorize as...?

Q645. What proportion of all your RA patients have RA that is uncontrollable? Q800. As far as you know, approximately what proportion of your moderate to severe and severe RA patients has a caregiver?

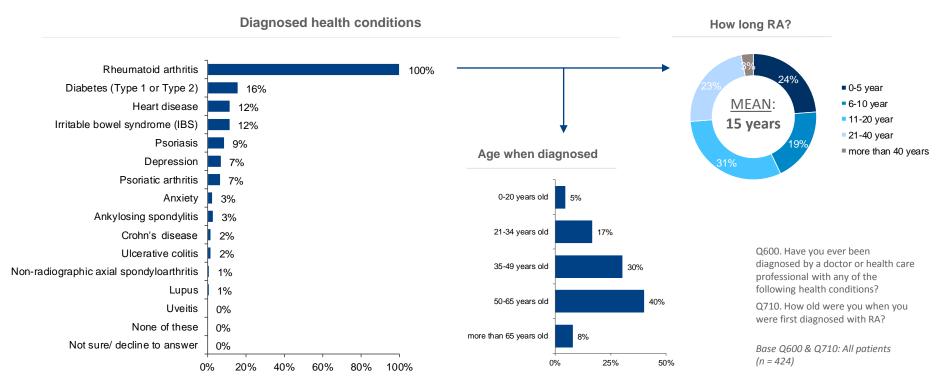
Base: All rheumatologists (n = 36)



20

MOST COMMON CO-MORBIDITIES ARE DIABETES, HEART DISEASE AND IBS. 70% OF RA PATIENTS WERE FIRST DIAGNOSED ON THE AGE OF 35 – 65 YEAR





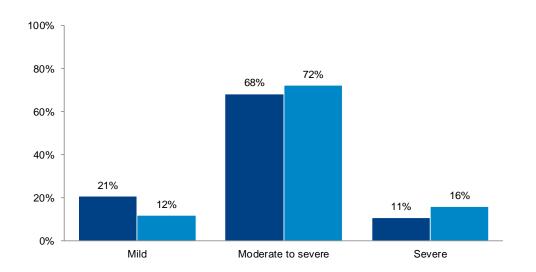




PATIENTS DESCRIBE THEIR RA MORE OFTEN AS MILD THAN HEALTH CARE PROFESSIONALS



Current situation RA*



- Patient described
- Health care professional described

*It is not possible to compare these results with the global and EU5 outcomes, because in the Netherlands we asked the severity of the RA as a separate single question

Q715. How would you currently describe your RA? And how would your doctor or healthcare professional describe your RA?

Base: All patients (n = 424)

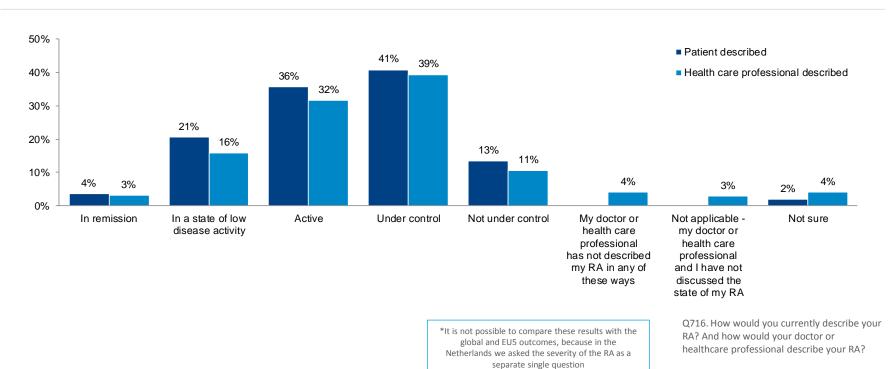




3% OF PATIENTS HAVE NOT DISCUSSED THE STATE OF THEIR RA



Current situation RA*



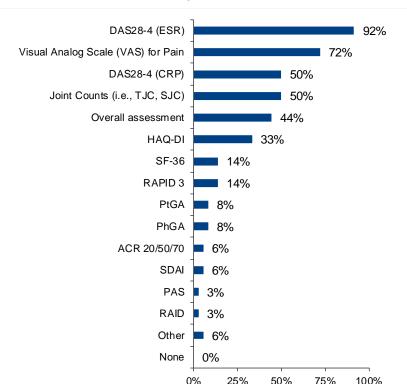


Base: All patients (n = 424)





Determination of severity/current state RA



Q905. Which of the following methods for assessing the severity or current state of patients' RA do you most commonly use with your RA patients?

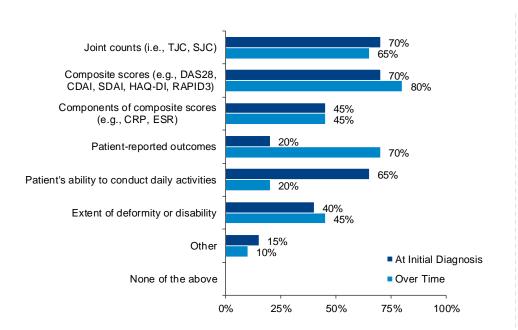
Base: All rheumatologists (n =36)



CURRENT STATE IS MOSTLY DETERMINED BY JOINT COUNTS OR COMPOSITE SCORES AT INITIAL DIAGNOSIS, OVER TIME PATIENT REPORTED OUTCOMES BECOME MORE IMPORTANT



Determination of severity/current state RA



	Global Total		EU S	
	At Initial Diagnosis	Over Time	At Initial Diagnosis	Over Time
Components of composite scores	76%	83%	78%	85%
Joint counts	74%	80%	79%	83%
Patient's ability to conduct daily activities	69%	79%	68%	80%
Extent of deformity or disability	67%	75%	68%	77%
Composite scores	67%	77%	80%	84%
Patient-reported outcomes	50%	59%	53%	62%
Other	7%	7%	7%	7%
None	1%	*	*	*

Q910. How do you determine the severity or current state of your patients' RA?

Base: All rheumatologists (n =20)

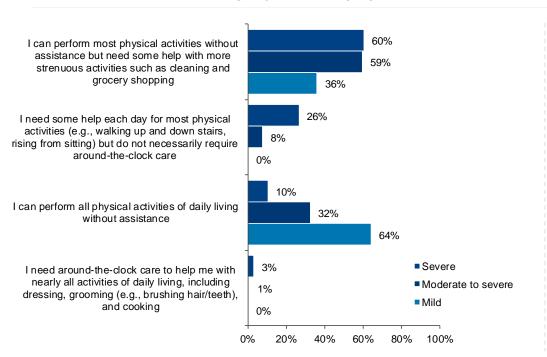


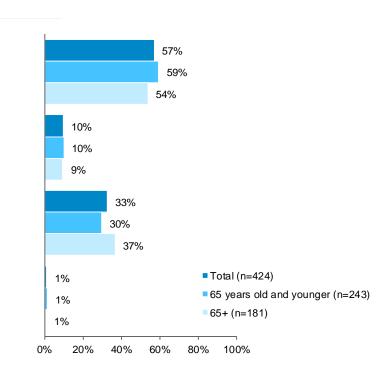
25





Ability to perform everyday activities





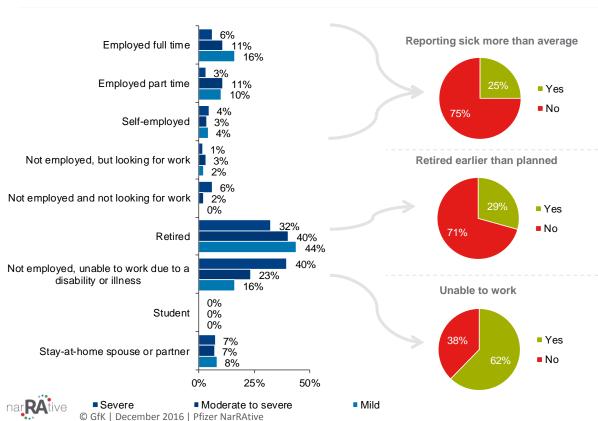




RA HAS A PROFOUND IMPACT ON THE WORKING LIFE OF THE PATIENTS



Employment status + consequences of RA



Q1410a. Which one of the following best describes your employment status?

Q1410b. Do you have to report sick more than average because of your RA?

Q1410d. Did you retire earlier than you planned to retire due to your RA?

Q1410c. Are you unable to work due to your RA?

Base Q1410a: All patients (n = 424)

Base Q1410b: Is employed (full time/part time/self-employed) (n = 100)

Base Q1410d: Is retired (n = 167)

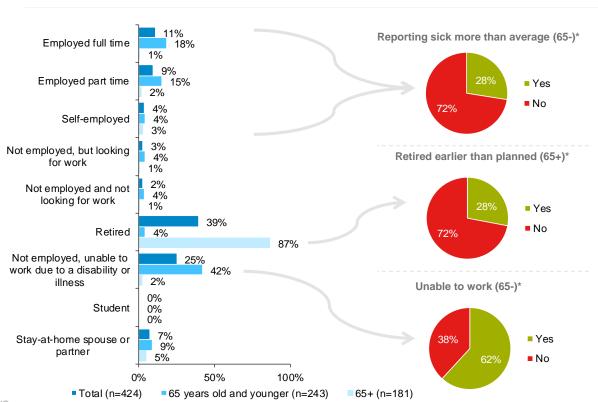
Base Q1410c: Is unemployed (n = 106)



RA PATIENTS OF 65 YEARS AND YOUNGER COMPARED TO 65+



Employment status + consequences of RA – 65 years and younger vs 65+



Q1410a. Which one of the following best describes your employment status?

Q1410b. Do you have to report sick more than average because of your RA?

Q1410d. Did you retire earlier than you planned to retire due to your RA?

Q1410c. Are you unable to work due to your RA?

Base Q1410a: All patients (n = 424)

Base Q1410b: Is employed (full time/part time/self-employed) and 65 years or younger (n = 91)

Base Q1410d: Is retired and 65^+ (n = 157)
Base Q1410c: Is unemployed and 65 years old or younger (n = 102)

*Questions could only be reported for the mentioned age group, because the n of the other age group was too small



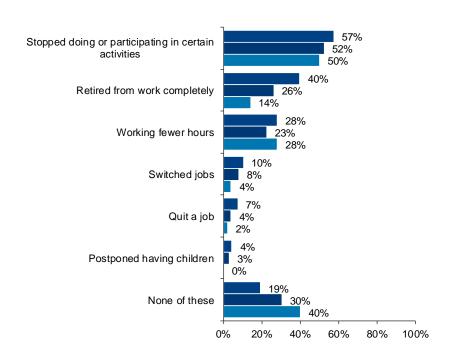
• • •

© GfK | December 2016 | Pfizer NarRAtive

MOST OF THE PATIENTS HAVE MADE ADJUSTMENTS IN THEIR LIVES DUE TO THEIR RA



Consequences of RA



Severe

■ Moderate to severe

Mild

Q726. Have you done any of the following as a result of your RA?

Base: All patients (n = 424)

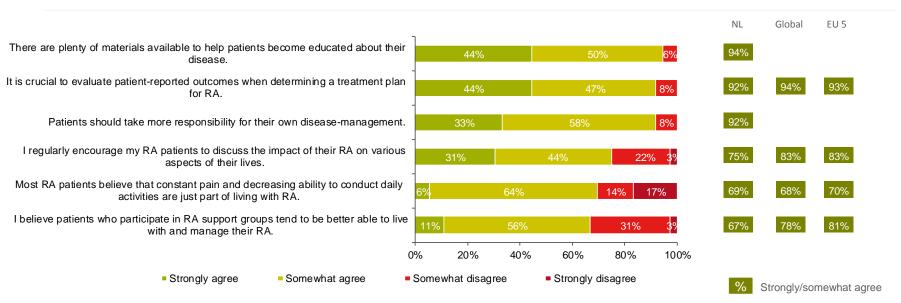


92% OF THE RHEUMATOLOGISTS AGREE THAT PATIENTS SHOULD TAKE MORE RESPONSIBILITY FOR THEIR OWN DISEASE-MANAGEMENT





Statements about RA



Q1005. How much do you agree or disagree with each of the following statements?



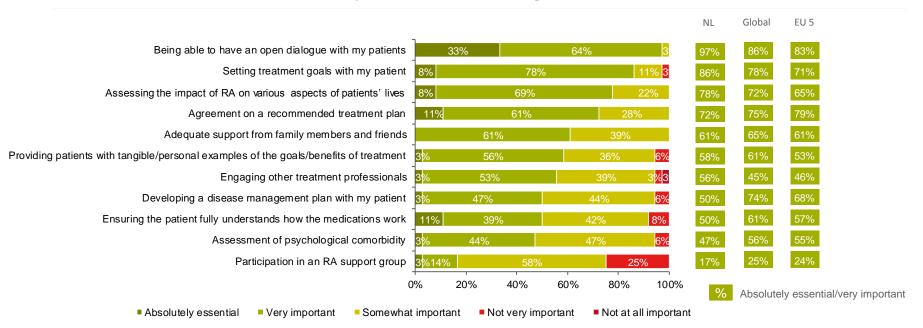
30

RA MANAGEMENT



ONE THIRD OF THE RHEUMATOLOGISTS THINK AN OPEN DIALOGUE IS ABSOLUTELY ESSENTIAL FOR SUCCESSFUL MANAGEMENT OF RA

Important for successful management of RA



Q1030. How important, if at all, are each of the following for successful management of RA?

Base: All rheumatologists (n = 36)

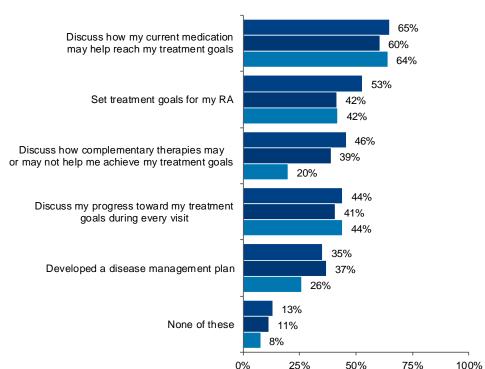




ABOUT HALF OF THE PATIENTS DON'T SET TREATMENT GOALS WITH THEIR RHEUMATOLOGIST FOR THEIR RA



Actions with rheumatologist



	NL Total	Global Total	EU 5
Discuss how my current medication may help reach my treatment goals	62%	44%	39%
Set treatment goals for my RA	43%	37%	37%
Discuss how complementary therapies may or may not help me achieve my treatment goals	38%	32%	31%
Discuss my progress towards my treatment goals during every visit	42%	44%	45%
Developed a disease management plan	35%	30%	30%
None of these	11%	17%	14%

- Severe
- Moderate to severe
- Mild

Q818. Which of the following, if any, have you done/do you do with your rheumatologist?

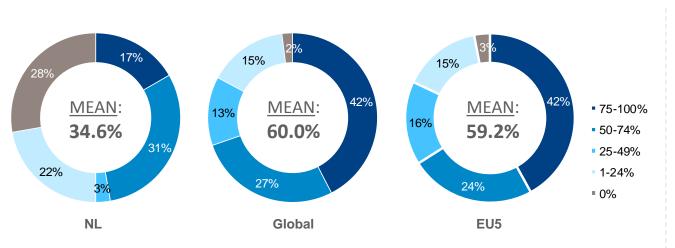
Base: All patients (n = 424)



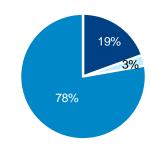




Proportion of RA patients with disease management plan







- Objective clinical measures of disease status
 Patient-reported assessments of disease impact
- Both are equally important

	NL	Global	EU5
MEAN	34.6%	60.0%	59.2%
Patients* who developed DM plan with rheumatologist	35%	30%	30%

Q1010. Approximately what proportion of your RA patients whose RA is moderately to severely active or severely active have a disease management plan that they developed with you?

Q1015. In your opinion, which of these is most important when determining a treatment plan for moderate to severe and severe RA?

Q818. Which of the following, if any, have you done/do you do with your rheumatologist?

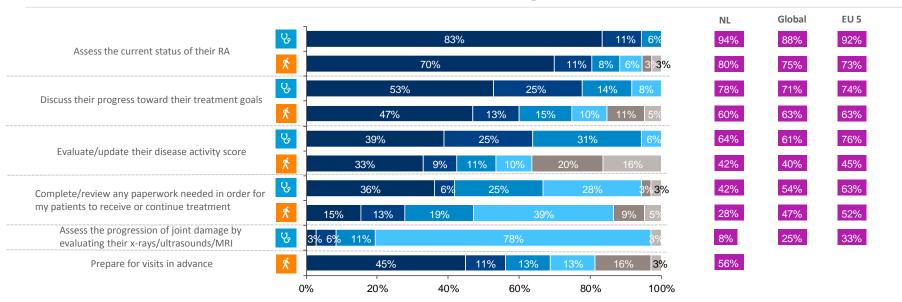


Base Q1010 and Q1015: All rheumatologists (n = 36) Base Q818: All patients (n = 424)

RHEUMATOLOGISTS SAY THEY DO DIFFERENT ACTIONS, LIKE ASSESSING THE PATIENTS' CURRENT RA STATUS, MORE OFTEN THAN PATIENTS EXPERIENCE



Actions with rheumatologist



During every visit During more than half of visits During about half of visits During less than half of visits Never Not sure

% = during every visit / during more than half of visits

Q819. How often do you do each of the following with your rheumatologist?

Base: All patients (n = 424)

Q900. How often do you do each of the following with your RA patients whose RA is moderately to severely active or severely active?

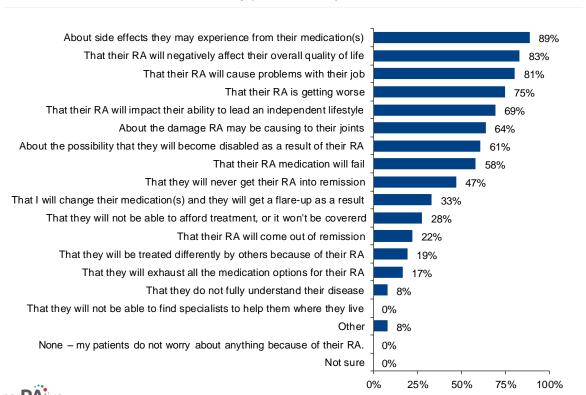
Base: All rheumatologists (n = 36)



RHEUMATOLOGISTS THINK PATIENTS WORRY ABOUT THE SIDE EFFECTS THEY MAY EXPERIENCE FROM THEIR PRESCRIPTION RA MEDICATION(S)



"My patients worry ..."



Q725. Based on your conversations with your RA patients, which of the following, if any, do your patients worry about because of their RA? Please continue to think about your experiences treating patients in your practice whose RA is moderately to severely active or severely active. Please select all that apply.

"My patients worry..."

Base: All rheumatologists (n = 36)



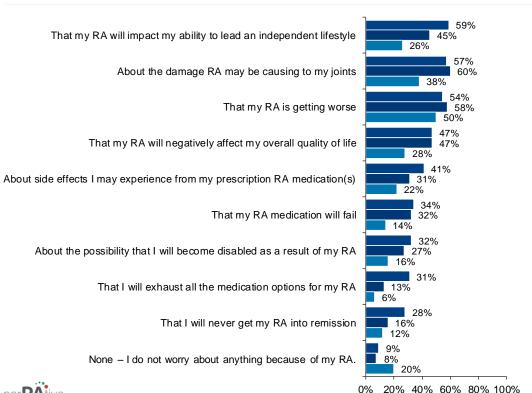
OGfK | December 2016 | Pfizer NarRAtive

PATIENTS HAVE LOTS OF CONCERNS ABOUT THEIR RA, ESPECIALLY ABOUT THE CONSEQUENCES FOR THEIR LIFESTYLE AND FOR THEIR BODY





Worries because of RA



- Severe
- Moderate to severe
- Mild

Q730. Which of the following, if any, do you worry about because of your RA?

Base: All patients (n = 424)

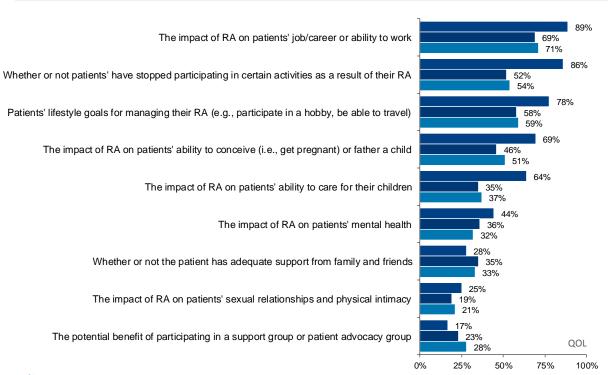
NB. These are the most mentioned worries, the other worries can be found in the appendix.

COMMUNICATION:TOPICS DISCUSSED

MOST IMPORTANT ASPECTS DISCUSSED REGARDING QUALITY OF LIFE ARE THE IMPACT ON THE ABILITY TO WORK AND TO PARTICIPATE IN VARIOUS **ACTIVITIES**



Aspects discussed with moderate/severe RA patients (1)



NI

Global

EU5

Q715. Which of the following aspects of your patients' experiences with RA, if any, do you discuss with your moderate to severe and severe RA patients?

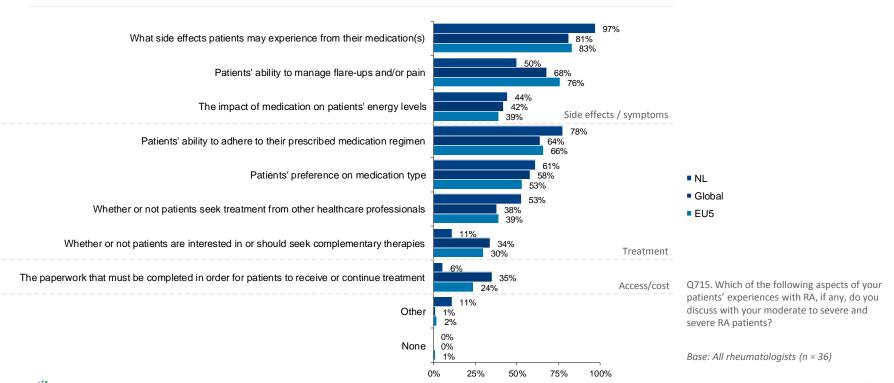
Base: All rheumatologists (n = 36)



ALMOST ALL RHEUMATOLOGISTS DISCUSS THE SIDE EFFECTS PATIENTS MAY EXPERIENCE. PATIENTS PREFERENCES ON MEDICATION TYPE IS DISCUSSED BY 6 OUT OF 10 RHEUMATOLOGISTS



Aspects discussed with moderate/severe RA patients (2)



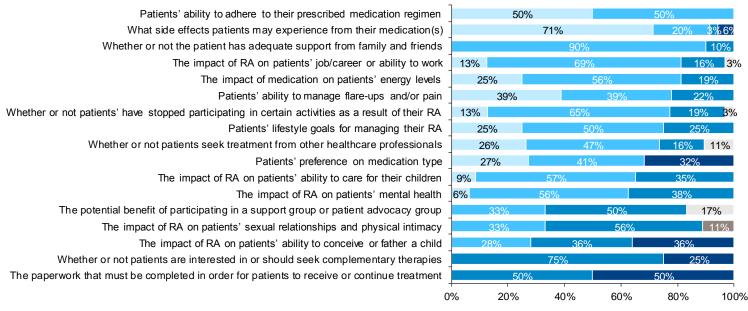




THE EXPERIENCED SIDE EFFECTS ARE DISCUSSED AT EVERY VISIT BY 71% OF THE RHEUMATOLOGISTS



Moment of discussing with moderate to severe RA patients





Only when making a change in medication

■ Not sure

Only at diagnosis/initial consultation

Never



Q720. When do you typically discuss each of the following with your moderate to severe and severe RA patients? Base: All rheumatologists (n = 36)



On a regular basis as part of managing RA

[■] When the patient asks/initiates the discussion

GLOBAL AND EU5 RESULTS





							▼				
	Only at diagnosis/ initial consultation		Only when making a change in medication		When the patient asks/ Initiates the discussion		On a regular basis as part of managing RA		At every visit		
	Global	EU	Global	EU	Global	EU	Global	EU	Global	EU	
Whether or not patients seek treatment from other Healthcare professionals	5%	3%	4%	5%	23%	22%	55%	57%	10%	11%	
Patients' ability to manage flare-ups and/or pain	2%	3%	5%	3%	11%	9%	54%	52%	28%	32%	
The impact of RA on patients' job/career or ability to work	7%	7%	2%	3%	22%	21%	51%	56%	16%	13%	
Patients' lifestyle goals for managing their RA	5%	7%	4%	3%	25%	25%	50%	50%	14%	14%	
Whether or not patients have stopped participating in certain activities as a result of their RA	6%	6%	3%	3%	19%	21%	49%	52%	20%	17%	
Patients' ability to adhere to their prescribed medication regimen	3%	2%	11%	9%	4%	3%	47%	50%	35%	37%	
Whether or not the patient has adequate support from family and friends	12%	12%	5%	3%	24%	29%	46%	46%	9%	9%	
The impact of RA on patients' mental health	6%	6%	4%	4%	26%	32%	45%	44%	15%	11%	
The impact of medication on patients' energy levels	2%	1%	11%	7%	21%	27%	44%	45%	20%	18%	
Whether or not patients are interested in/should seek complementary (non-medication) therapies	6%	5%	5%	5%	33%	31%	44%	46%	11%	9%	
What side effects patients may experience from their medication(s)	2%	2%	18%	14%	5%	8%	41%	40%	33%	35%	
Patients' ability to afford other treatment needs	8%	6%	14%	11%	27%	27%	39%	30%	10%	11%	
The impact of RA on patients' ability to care for their children	7%	5%	5%	5%	34%	35%	38%	42%	12%	10%	
Patients' preference on medication type	6%	8%	38%	39%	12%	10%	35%	35%	9%	7%	
The impact of RA on patients' sexual relationships and physical intimacy	5%	2%	7%	7%	47%	49%	33%	35%	5%	4%	
Patients' ability to afford their medication(s)	4%	-	31%	27%	21%	31%	32%	31%	10%	6%	
The paperwork that must be completed in order for patients to receive or continue treatment	9%	11%	36%	30%	13%	13%	32%	33%	9%	10%	
The potential benefit of participating in support/patient advocacy group	19%	25%	7%	4%	28%	23%	30%	38%	7%	5%	
The impact of RA on patients' ability to conceive or father a child	14%	10%	21%	22%	31%	37%	27%	25%	5%	5%	

BOTH RHEUMATOLOGISTS AND PATIENTS THINK THE CURRENT RA STATUS AND EXPECTATIONS FROM THE MEDICATIONS ARE MOST IMPORTANT TO FULLY EXPLAIN



Top 5 Aspects of Managing RA Physicians Think are Important to Fully Explain to Patients Top 5 Aspects of RA Patients Say Their Health Care Professional Fully Explained to Them

- 1. What they should expect from their RA medication(s) in particular (83%)
- 2. Their current RA status/whether their RA has gotten better or worse (81%)
- 3. Where to turn for reliable information and advice (78%)
- 4. The benefits and risks of aggressive treatment early on in the disease (75%)
- 5. Their test results (67%)
- 1. Their current RA status/whether their RA has gotten better or worse (71%)
- 2. Their test results (68%)
- 3. The benefits and risks of aggressive treatment early on in the disease (65%)
- 4. What they should expect from their RA medication(s) in particular (64%)
- 4. All the various medications available for RA (64%)
- 5. Lifestyle changes (e.g., diet, exercise) (57%)
- 1. The benefits and risks of aggressive treatment early on in the disease (71%)
- 2. Their current RA status/whether their RA has gotten better or worse (68%)
- 3. What they should expect from their RA medication(s) in particular (64%)
- 4. Their test results (61%)
- 4. All the various medications available for RA (61%)
- 5. What they should expect from their overall RA management plan (58%)



- 1. My current RA status/whether my RA has gotten better or worse (65%)
- 2. What I should expect from my RA medication(s) in particular (59%)
- 3. My test results (54%)
- 4. All the various medications available for RA (38%)
- 5. What I should expect from my RA medication(s) in particular (35%)



- 1. My test results (58%)
- 2. My current RA status/whether my RA has gotten better or worse (48%)
- 3. All the various medications available for RA (42%)
- 4. Lifestyle changes (e.g., diet, exercise) (41%)
- 5. What I should expect from my RA medication(s) in particular (36%)



- 1. My test results (54%)
- 2. My current RA status/whether my RA has gotten better or worse (42%)
- 3. All the various medications available for RA (39%)
- 3. What I should expect from my RA medication(s) in particular (39%)
- 4. Lifestyle changes (e.g., diet, exercise) (35%)
- 5. What I should expect from my overall RA management plan (28%)



Q1020. Which of the following aspects of managing your patients' RA, if any, do you think are important to *fully explain* to your RA patients? Q815. Which of the following aspects of managing your RA, if any, has your doc rheumatologist *fully explained* to you?

Base: All patients (n = 424)

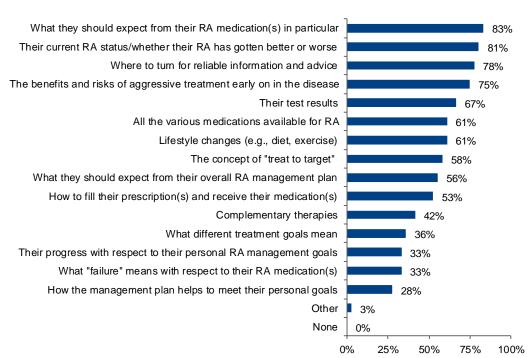
Base: All rheumatologists (n = 36.



RHEUMATOLOGISTS THINK IT'S MOST IMPORTANT TO FULLY EXPLAIN TO PATIENTS WHAT THEY SHOULD EXPECT FROM THEIR MEDICATION AND WHETHER THEIR RA HAS GOTTEN BETTER OR WORSE



Important to fully explain to RA patients



Q1020. Which of the following aspects of managing your patients' RA, if any, do you think are important to *fully explain* to your RA patients?

Base: All rheumatologists (n = 36)

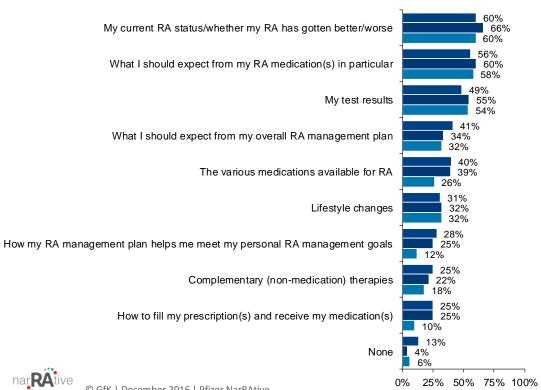


44

13% OF THE PATIENTS WITH SEVERE RA SAY THAT THEIR RHEUMATOLOGIST HAS NOT FULLY EXPLAINED ANY ASPECT OF MANAGING RA



Aspects fully explained by rheumatologist



- Severe
- Moderate to severe
- Mild

Q815. Which of the following aspects of managing your RA, if any, has your doc rheumatologist fully explained to you?

Base: All patients (n = 424)

NB. These are the most mentioned aspects, the other aspects can be found in the appendix.





HOW THE MEDICATION(S) WORK SEEMS MORE IMPORTANT TO PATIENTS THAN RHEUMATOLOGISTS ASSUME



Top 5 Aspects of All the Various Medications Available for RA Physicians Think are Important to Explain to Patients

- 1. What to do if they experience a side effect from a medication (92%)
- 2. Side effects of medication(s) (86%)
- 3. How to manage their medication regimen properly (78%)
- 3. The importance of taking their medication/ following their treatment plan exactly as prescribed (78%)
- 4. The differences between DMARDs that can be used on their own, and DMARDs that must be taken in combination with other DMARDs (69%)
- 5. How the medication(s) work (56%)
- 1. Side effects of medication(s) (85%)
- 2. What to do if they experience a side effect from a medication (75%)
- 3. The importance of taking their medication/ following their treatment plan exactly as prescribed (74%)
- 4. How to manage their medication regimen properly (69%)
- 5. The differences between DMARDs that can be used on their own, and DMARDs that must be taken in combination with other DMARDs (49%)
- 1. Side effects of medication(s) (88%)
- 2. What to do if they experience a side effect from a medication (81%)
- 3. How to manage their medication regimen properly (78%)
- 4. The importance of taking their medication/ following their treatment plan exactly as prescribed (75%)
- 5. How to know if the medication is working or not working (50%)

Top 5 Aspects of All the Various Medications Available for RA Patients Say Their Health Care Professional Explained to Them

- 1. How the medication(s) work (71%)
- 2. Side effects of medication(s) (70%)
- 2. The importance of taking my medication/following my treatment plan exactly as prescribed (70%)
- 3. How to manage my medication regimen properly (64%)
- 4. What to do if I experience a side effect from a medication (61%)
- 5. The differences between DMARDs that can be used on their own, and DMARDs that must be taken in combination with other DMARDs (49%)
- 1. Side effects of medication(s) (65%)
- The importance of taking my medication/following my treatment plan exactly as prescribed (63%)
- 3. How the medication(s) work (59%)
- 4. How to manage my medication regimen properly (58%)
- 5. What to do if I experience a side effect from a medication (49%)
- 1. The importance of taking my medication/following my treatment plan exactly as prescribed (66%)
- 2. How the medication(s) work (55%)
- 3. Side effects of medication(s) (52%)
- 4. How to manage my medication regimen properly (46%)
- 5. Oral versus injectable medications (42%)

EU5

Global

NL

Q1025. Which of the following do you think are important to explain to moderate to severe or severe RA patients regarding all the various medications available for RA? Base: All rheumatologists (n = 36)

Q817. Which of the following did your rheumatologist explain about the medications available for RA? Base: Is informed of available medication for RA (n = 160) © GfK | December 2016 | Pfizer NarRAtive

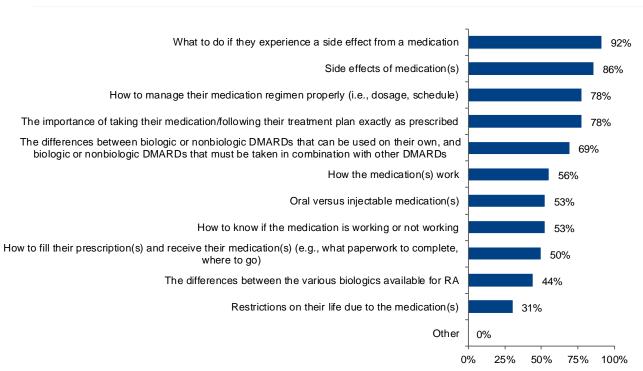


RHEUMATOLOGISTS THINK SIDE EFFECTS ARE MOST IMPORTANT TO EXPLAIN TO THEIR RA PATIENTS REGARDING THE VARIOUS MEDICATIONS AVAILABLE





Important to explain to moderate and severe RA patients



Q1025. Which of the following do you think are important to explain to moderate to severe or severe RA patients regarding all the various medications available for RA?

Base: All rheumatologists (n = 36)

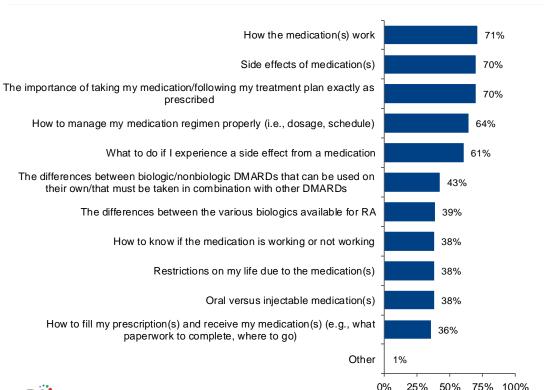


AT LEAST A QUARTER OF THE PATIENTS DID NOT GET AN EXPLANATION ABOUT BASIC INFORMATION, LIKE HOW MEDICATION WORKS AND THE SIDE EFFECTS





Medications explained by rheumatologist



Q817. Which of the following did your rheumatologist explain about the medications available for RA?

Base: Is informed of medication that is available for the treatment of RA (n = 160)

NB. Chart is reported on total, because the n of the subgroups is too small.

nar**RA**tive

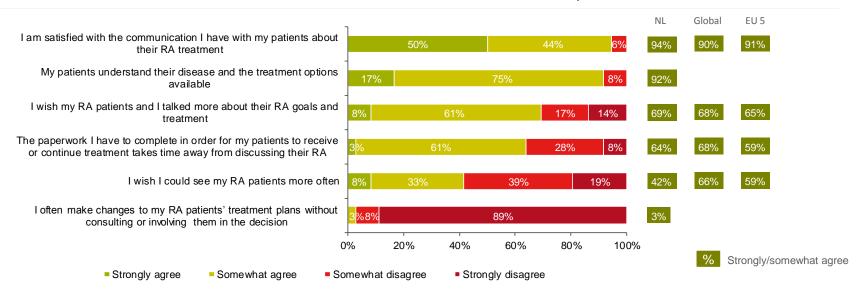
OGfK | December 2016 | Pfizer NarRAtive

COMMUNICATION: SATISFACTION

ALMOST 70% OF THE RHEUMATOLOGISTS WISH TO TALK MORE ABOUT THE RA GOALS AND TREATMENT WITH THEIR PATIENTS



Statements about communication moderate and severe RA patients



Q730. With respect to your communication with your moderate to severe and severe RA patients, how much do you agree or disagree with each of the following statements?

Base: All rheumatologists (n = 36)

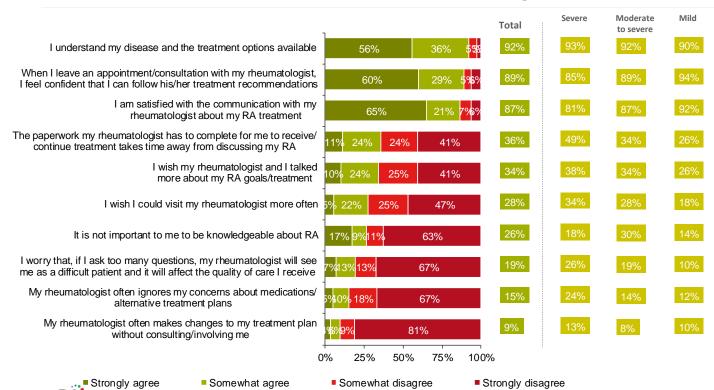




ONE THIRD OF THE PATIENTS WISHES THEIR RHEUMATOLOGIST TALKED MORE WITH THEM ABOUT THEIR RA TREATMENT AND GOALS



Statements communication with rheumatologist



Q830. With respect to your communication with the rheumatologist responsible for managing your RA, how much do you agree or disagree with each of the following statements?

Base: All patients (n = 424)

% Strongly/somewhat agree





BOTH RHEUMATOLOGISTS AND PATIENTS SEE INCREASED DISCUSSION AS A WAY TO MORE SUCCESSFULLY MANAGE RA

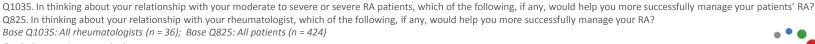


Top 5 Aspects of Relationship with Patients That Would Help Physicians More Successfully Manage Patients' RA

- 1. Supplemental or additional visits with other health care professionals (58%)
- 2. Discussing whether or not they take their medication(s) exactly as prescribed (53%)
- 2. Clarity on what different treatment goals mean (53%)
- 2. Clarity on their personal treatment goals and whether or not they are meeting them (53%)
- 3. Discussing their symptoms or experiences since their last visit (50%)
- 4. Longer visits (42%)
- 5. Feeling more comfortable having an open dialogue about RA (39%)
- 5. Advice on where to get reliable information to help them to manage their disease (39%)
- 1. Discussing whether or not they take their medication(s) exactly as prescribed (54%)
- 2. Discussing their symptoms or experiences since their last visit (47%)
- 3. Less paperwork for me to complete in order for my RA patients to receive or continue treatment (46%)
- 4. Clarity on their personal treatment goals and whether or not they are meeting them (41%)
- 4. Longer visits (41%)
- 5. More information about RA in general (40%)
- 1. Discussing whether or not they take their medication(s) exactly as prescribed (49%)
- 2. Longer visits (48%)
- 3. Discussing their symptoms or experiences since their last visit (43%)
- 4. Clarity on their personal treatment goals and whether or not they are meeting them (41%)
- 5. Less paperwork for me to complete in order for my RA patients to receive or continue treatment (38%)
- 5. More information about RA in general (38%)

Top 5 Aspects of Relationship with their Health Care Professional That Would Help Patients More Successfully Manage Their RA

- 1. Discussing my symptoms or experiences since my last visit (35%)
- 2. More information about the RA treatment options that are available to me (22%)
- 3. Clarity on my personal treatment goals and whether or not I am meeting them (17%)
- 3. Discussing whether or not I take my medication(s) exactly as prescribed (17%)
- 4. Clarity on what different treatment goals mean (17%)
- 4. Supplemental or additional visits with other health care professionals (17%)
- 5. More information about RA in general (15%)
- 1. Discussing my symptoms or experiences since my last visit (37%)
- 2. More information about RA in general (35%)
- 3. More information about the RA treatment options that are available to me (33%)
- 4. Clarity on my personal treatment goals and whether or not I am meeting them (27%)
- 5. Feeling more comfortable having an open dialogue about RA (26%)
- 5. Easier access to doctor visits (26%)
- 1. Discussing my symptoms or experiences since my last visit (33%)
- 2. More information about the RA treatment options that are available to me (31%)
- 3. More information about RA in general (25%)
- 4. Clarity on my personal treatment goals and whether or not I am meeting them (24%)
- 4. Easier access to doctor visits (24%)
- 5. More frequent visits (23%)
- 5. Supplemental or additional visits with other health care professionals (23%)
- 5. Clarity on what different treatment goals mean (23%)



NL

Global

EU5

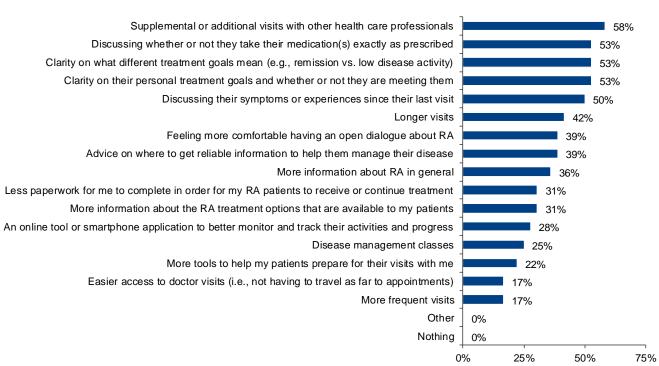


© GfK | December 2016 | Pfizer NarRAtive

MORE THAN HALF OF THE RHEUMATOLOGISTS WANT TO INVOLVE OTHER HEALTH CARE PROFESSIONALS TO HELP PATIENTS MORE SUCCESSFULLY MANAGE THEIR RA



How to more successfully manage patients' RA



Q1035. In thinking about your relationship with your moderate to severe or severe RA patients, which of the following, if any, would help you more successfully manage your patients' RA?

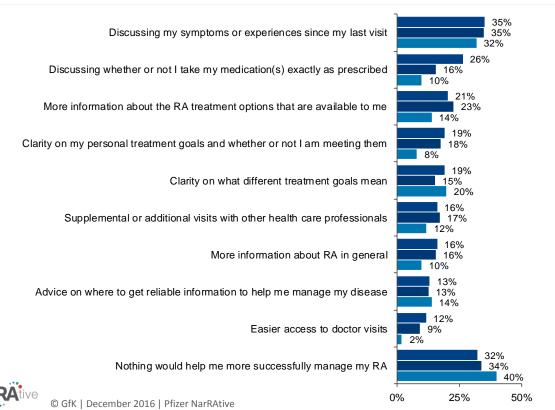
Base: All rheumatologists (n = 36)



FOR MORE SUCCESSFULLY MANAGING THEIR RA, PATIENTS LIKE TO DISCUSS THEIR EXPERIENCES AND WHETHER OR NOT THEY TAKE THEIR MEDICATION AS PRESCRIBED



Means to more successfully manage RA



- Severe
- Moderate to severe
- Mild

Q825. In thinking about your relationship with your rheumatologist, which of the following, if any, would help you more successfully manage your RA?

Base: All patients (n = 424)

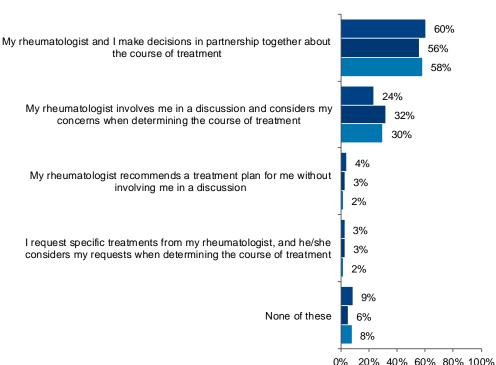
NB. These are the most mentioned means, the other means can be found in the appendix.

ABOUT 40% OF THE PATIENTS DON'T EXPERIENCE A PARTNERSHIP WITH THEIR RHEUMATOLOGIST IN MAKING DECISIONS ABOUT THE COURSE OF TREATMENT





Role of rheumatologist



	NL Total	Global Total	EU 5
My rheumatologist and I make decisions in partnership together about the course of treatment	57%	33%	37%
My rheumatologist involves me in a discussion and considers my concerns when determining the course of treatment	30%	47%	41%
My rheumatologist recommends a treatment plan for me without involving me in a discussion	3%	12%	14%
I request specific treatments from my rheumatologist, and he/she considers my requests when determining the course of treatment	3%	6%	6%
None of these	6%	1%	1%

- Severe
- Moderate to severe
- Mild

Q812. Which of the following, if any, best describes the role of the rheumatologist responsible for managing your RA?

Base: All patients (n = 424)



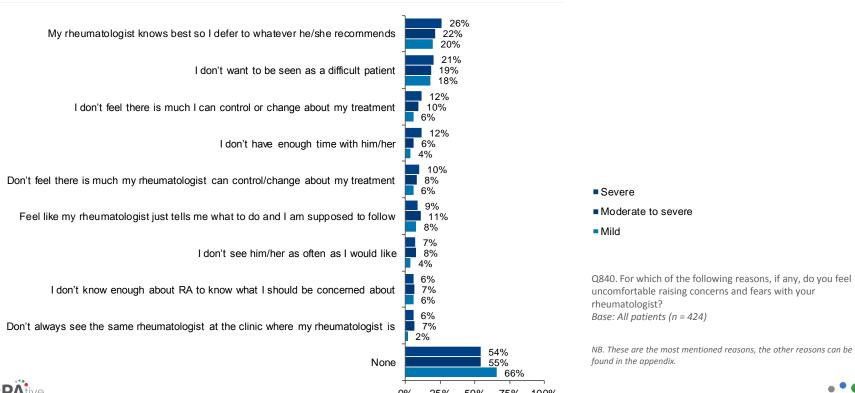
5.5

COMMUNICATION:BARRIERS

MORE THAN 20% OF THE PATIENTS FEEL UNCOMFORTABLE RAISING CONCERNS, BECAUSE THEY THINK THEIR RHEUMATOLOGIST KNOWS BEST



Reasons for feeling uncomfortable raising concerns



COMPARISON WITH GLOBAL AND EU5 RESULTS



Reasons for feeling uncomfortable raising concerns

	NL Total	Global Total	EU5	
DEFER TO HCP				
My health care professional knows best so I defer to whatever he/she recommends	22%	23%	26%	
I feel like my health care professional just tells me what to do and I am supposed to follow	10%	15%	16%	
QUALITY OF CARE/ DON'T FEEL COMFORTABLE/ DON'T WANT TO BE DIFFICULT				
I don't want to be seen as a difficult patient	19%	22%	25%	
I worry that it will affect the quality of care I receive from him/her	3%	13%	10%	
l just don't feel comfortable with him/her	5%	9%	8%	
LACK OF TIME/VISITS				
I don't have enough time with him/her	7%	15%	12%	
I don't see him/her as often as I would like	7%	11%	16%	
LACK OF CONTROL				
I don't feel there is much I can control or change about my treatment	10%	14%	13%	
I don't feel there is much my doctor or health care professional can control or change about my treatment	8%	12%	14%	
I am worried he/she will tell me that the treatment is failing	4%	18%	17%	
LACK OF KNOWLEDGE/UNDERSTANDING				
I don't know enough about RA to know what I should be concerned about	6%	11%	7%	
I don't understand the information my health care professional gives me	1%	4%	4%	
I don't always see the same health care professional when I go to the clinic where my primary health care professional is	6%	9%	9%	
Other	2%	2%	3%	
None - I feel comfortable raising concerns and fears with my doctor or health care professional	56%	38%	29%	



•

COMMUNICATION: GOAL-SETTING

RHEUMATOLOGISTS SEEM TO LISTEN TO PATIENTS' GOALS; BOTH RHEUMATOLOGISTS AND PATIENTS MENTION PAIN REDUCTION AS MOST IMPORTANT GOAL



Top 5 Patients' Goals for Managing Their RA, per Physicians

- 1. Reduce their pain (92%)
- 2. Put their RA into remission (83%)
- 2. Be able to conduct daily activities more comfortably (83%)
- 3. Reduce further joint damage (78%)
- 4. Increase their level of physical activity (75%)
- 4. Reduce joint swelling or inflammation (75%)
- 5. Be able to return to work (69%)
- 1. Reduce their pain (88%)
- 2. Be able to conduct daily activities more comfortably (79%)
- 3. Reduce joint swelling or inflammation (74%)
- 4. Prevent disability (71%)
- 5. Put their RA into remission (68%)
- 1. Reduce their pain (87%)
- 2. Reduce joint swelling or inflammation (73%)
- 2. Be able to conduct daily activities more comfortably (73%)
- 3. Prevent disability (70%)
- 4. Be able to return to work (69%)
- 5. Put their RA into remission (67%)

NL

- Top 5 Goals for Managing Their RA, per Patients
- 1. Reduce my pain (63%)
- 2. Reduce my fatigue (50%)
- 3. Reduce further joint damage (49%)
- 4. Be able to conduct daily activities more comfortably (48%)
- 5. Reduce joint swelling or inflammation (46%)



- 1. Reduce my pain (67%)
- 2. Reduce further joint damage (53%)
- 3. Be able to conduct daily activities more comfortably (52%)
- 4. Reduce joint swelling or inflammation (50%)
- 5. Reduce my fatigue (46%)



- 1. Reduce my pain (71%)
- 2. Reduce joint swelling or inflammation (50%)
- 2. Be able to conduct daily activities more comfortably (50%)
- 3. Reduce my fatigue (48%)
- 4. Reduce further joint damage (46%)
- 5. Reduce my morning stiffness (41%)



Q705. Based on what your patients tell you, what are your RA patients' goals for managing their RA? Q727. What are your goals for managing your RA? Please select all that apply.

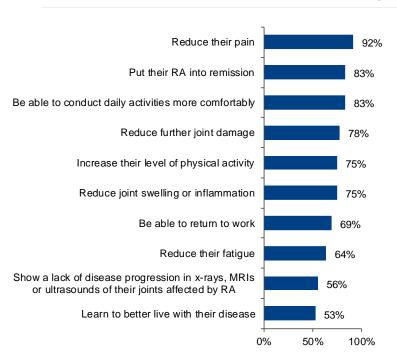
Base: All rheumatologists (n = 36) Base: All patients (n = 424)

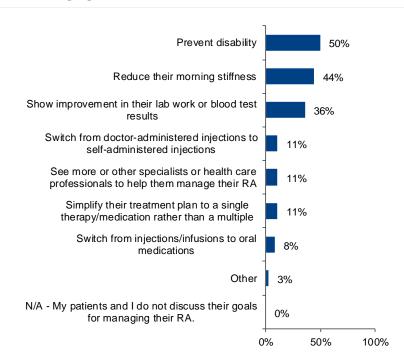


ALL RHEUMATOLOGISTS SAY THEY DISCUSS GOALS FOR MANAGING RA WITH THEIR PATIENTS. MOST IMPORTANT GOAL PATIENTS WANT TO ACHIEVE IS REDUCTION OF PAIN



RA patients' goals for managing RA





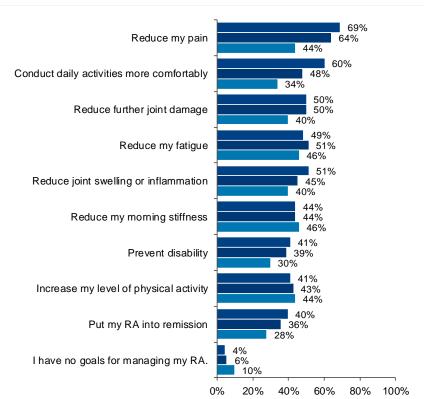




MOST IMPORTANT GOAL IS TO REDUCE THE PAIN



Goals for managing RA



- Severe
- Moderate to severe
- Mild

Q727. What are your goals for managing your RA? Please select all that apply.

Base: All patients (n = 424)

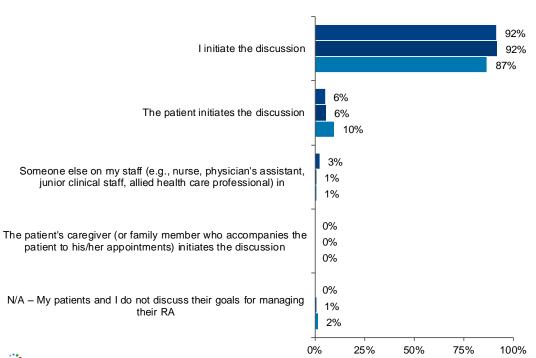
NB. These are the most mentioned goals, the other goals can be found in the appendix.



IN MORE THAN 9 OUT OF 10 CASES THE RHEUMATOLOGIST INITIATES THE DISCUSSION ABOUT GOALS FOR MANAGING PATIENTS' RA



Initiation of discussion of goals for managing RA



■ NL

■ Global

EU5

Q710. When you and your RA patients discuss their goals for managing their RA, who typically initiates the discussion?

Base: All rheumatologists who discuss the patients' goals for managing their RA (n = 36)



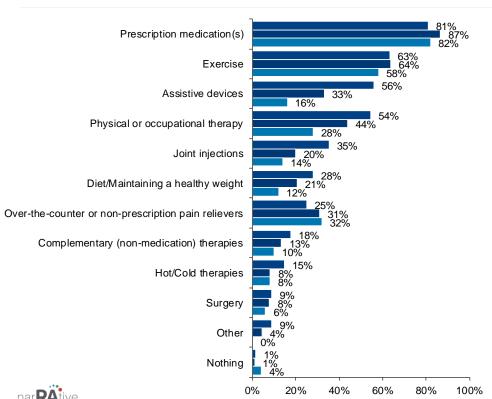


TREATMENT: GENERAL

ALMOST 20% OF THE PATIENTS DON'T USE ANY PRESCRIPTION MEDICATION(S) CURRENTLY



Current actions to treat RA



	NL Total	Global Total	EU 5
Prescription medication(s)	85%	75%	74%
Exercise	63%	55%	48%
Assistive devices	35%	18%	23%
Physical or occupational therapy	44%	31%	32%
Joint injections	22%	23%	26%
Diet/ Maintaining a healthy weight	21%	45%	42%
Over-the-counter or non-prescription pain relievers	30%	30%	23%
Complementary (non-medication) therapies	14%	25%	20%
Hot/Cold therapies	9%	25%	23%
Surgery	8%	6%	10%
Other	4%	3%	3%
Nothing	1%	2%	1%

- Severe
- Moderate to severe
- Mild

Q905. Which of the following, if any, are you *currently* doing, using, planning, or taking to treat your RA?

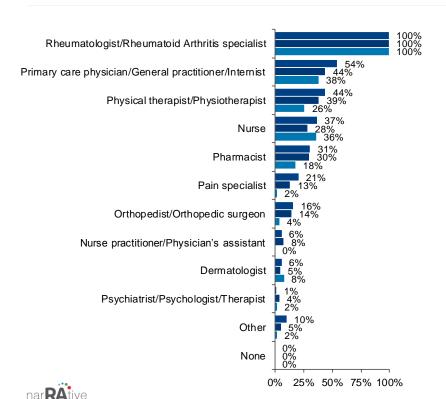
Base: All patients (n = 424)



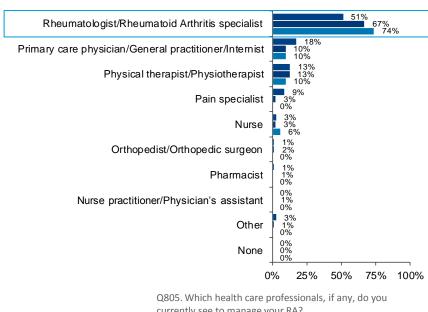
PATIENTS WITH MORE SEVERE SYMPTOMS ARE MORE OFTEN TREATED BY A HEALTH CARE PROFESSIONAL OTHER THAN A RHEUMATOLOGIST



Health care professional seen to manage RA



Health care professional mostly responsible for managing RA*



Severe

■ Moderate to severe

Mild

currently see to manage your RA?

Q807. Which health care professional is mostly responsible for managing your RA?

Base Q805 & Q807: All patients (n = 424)

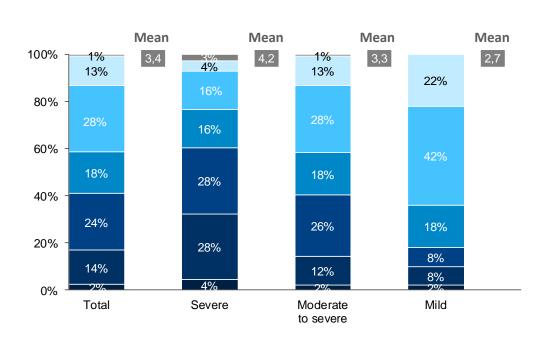
NB. Only mentioned options are displayed.



THE MORE SEVERE THE RA, THE MORE A PATIENT VISITS THE RHEUMATOLOGIST



Visits rheumatologist



- 0 times per year
- 1 times per year
- 2 times per year
- 3 times per year
- 4 times per year
- 5-10 times per year
- more than 10 times per year

Q810. How many times per year do you visit your rheumatologist as part of treating your RA? If you are not sure, please provide your best estimate.

Base: All patients (n = 424)

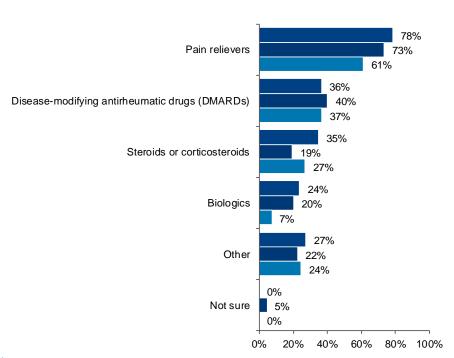




PAIN RELIEVERS ARE THE MOST PRESCRIBED DRUGS



Presciption medication(s) currently taking for RA



- Severe (n=55)
- Moderate to severe (n=265)
- Mild (n=41)

Q907. Which of the following types of prescription medication(s) are you currently taking for your RA?

Base: Patients who use medication (n = 361)



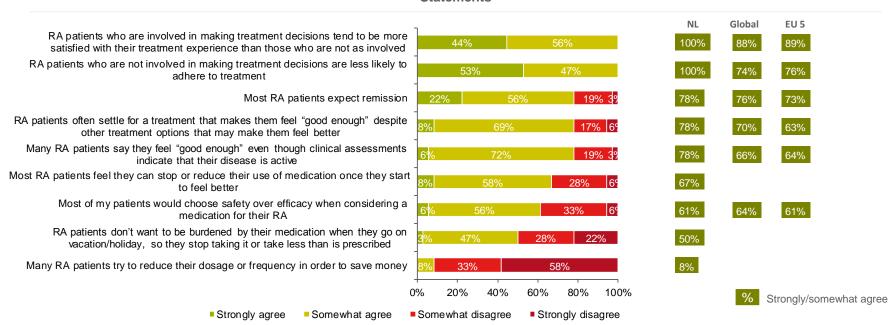
TREATMENT: EXPECTATIONS

ALL RHEUMATOLOGISTS AGREE THAT RA PATIENTS WHO ARE INVOLVED IN MAKING TREATMENT DECISIONS ARE MORE SATISFIED AND MORE LIKELY TO ADHERE TO TREATMENT





Statements



Q1000. How much do you agree or disagree with each of the following statements?

Base: All rheumatologists (n = 36)





TREATMENT: ADHERENCE

BOTH RHEUMATOLOGISTS AND PATIENTS MENTIONED SIDE EFFECTS AS TOP REASONS FOR NON-ADHERENCE. EFFICACY SEEMS TO BE LESS IMPORTANT





Top 5 Reasons Why Patients Don't RA Medication(s) Exactly as Prescribed, per Physicians

- 1. Patients don't feel it helps or works (72%)
- 2. Concern about potential side effects (69%)
- 2. The side effects are difficult to manage (69%)
- 3. Gets in the way of patients' daily routing (56%)
- 4. Patients don't take medication(s) with them while traveling or on vacation (53%)
- 5. Needs to be taken more than once daily (47%)
- 1. Concern about potential side effects (57%)
- 2. The side effects are difficult to manage (45%)
- 3. Patients don't see the importance of taking it exactly as prescribed (34%)
- 4. Patients cannot afford their medication(s) (32%)
- 4. Patients don't feel it helps or works (32%)
- 5. It is hard for patients to remember to take their medication(s) (28%)
- 1. Concern about potential side effects (62%)
- 2. The side effects are difficult to manage (48%)
- 3. Patients don't feel it helps or works (43%)
- 4. Patients don't see the importance of taking it exactly as prescribed (32%)
- 5. Patients experience reactions at the injection site(s) (30%)

NL

Top 4 Reasons Why Patients Don't Take RA Medication(s) Exactly as Prescribed, per Patients

- 1. Concern about potential side effects (5%)
- 2. It is hard to remember to take my medication(s) (4%)
- 3. The side effects are difficult to manage (3%)
- 4. Needs to be taken more than once daily (3%)
- 1. Concern about potential side effects (13%)
- 2. The side effects are difficult to manage (8%)
- 2. Gets in the way of my daily routine (8%)
- 3. The injections are painful (6%)
- 3. It is hard to remember to take my medication(s) (6%)
- 4. Requires regular monitoring by a doctor or health care professional (5%)
- 4. I have to administer it (i.e., inject) myself (5%)
- 4. Needs to be taken more than once daily (5%)
- 4. Requires taking other pills/medications (5%)
- 1. Concern about potential side effects (14%)
- 2. The side effects are difficult to manage (10%)
- 2. Requires regular monitoring by a doctor or health care professional (10%)
- 3. Needs to be taken more than once daily (8%)
- 3. Requires taking other pills/medications (8%)
- 4. The injections are painful (6%)
- 4. It is hard to remember to take my medication(s) (6%)

EU5

Global

Q1125. Which of the following do you think are the top reasons why your patients don't take their RA medication(s) exactly as prescribed? Q925. What are the most important reasons why you don't take your RA medication(s) exactly as prescribed?

Base: All patients (n = 424)

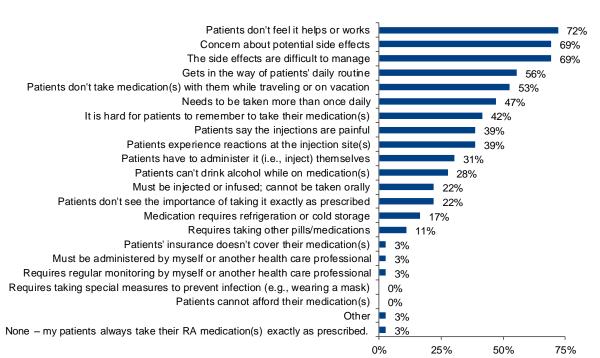
Base: All rheumatologists (n = 36)



RHEUMATOLOGISTS THINK PATIENTS DON'T TAKE THEIR MEDICATION AS PRESCRIBED BECAUSE THEY DON'T FEEL IT HELPS OR WORKS AND BECAUSE OF (POTENTIAL) SIDE EFFECTS



Top reasons for not taking RA medication



Q1125. Which of the following do you think are the <u>top reasons</u> why your patients don't take their RA medication(s) *exactly as prescribed*?

Base: All rheumatologists (n = 36)

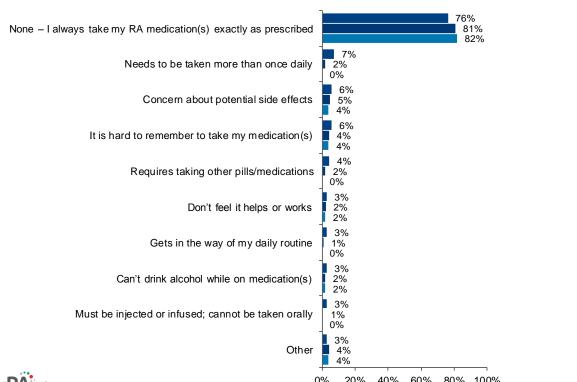


73

ABOUT 20% OF THE PATIENTS DON'T ALWAYS TAKE THEIR RA MEDICATION **EXACTLY AS PRESCRIBED**



Reasons for not taking medication as prescribed





■ Moderate to severe

■ Mild

Q925. What are the most important reasons why you don't take your RA medication(s) exactly as prescribed?

Base: All patients (n = 424)

NB. These are the most mentioned reasons, the other reasons can be found in the appendix.



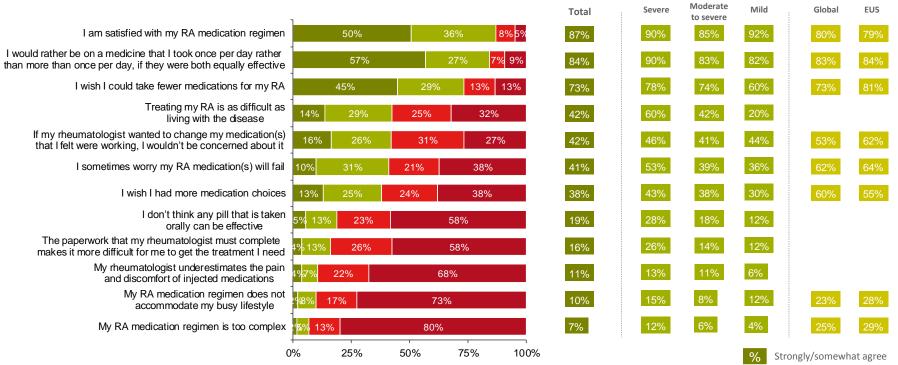


TREATMENT: SATISFACTION

ALMOST THREE QUARTER OF THE PATIENTS WISHES THEY COULD TAKE FEWER MEDICATIONS FOR THEIR RA



Statements about RA medication(s)





Strongly agree

Somewhat agree

Somewhat disagree

Strongly disagree

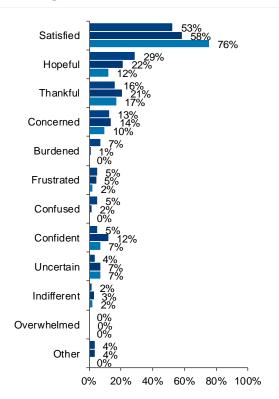
Q940. How much do you agree or disagree with each of the following statements about your RA medication(s)? Base: All patients (n = 424)



ONLY 60% OF THE PATIENTS ARE SATISFIED WITH THEIR PRESCRIPTION **MEDICATION**



Feelings about medication for RA



	NL Total	Global Total	EU 5
Satisfied	60%	38%	29%
Hopeful	22%	39%	27%
Thankful	20%	24%	16%
Concerned	13%	19%	26%
Burdened	2%	9%	8%
Frustrated	4%	8%	11%
Confused	2%	6%	9%
Confident	11%	34%	29%
Uncertain	7%	14%	17%
Indifferent	3%	6%	2%
Overwhelmed	0%	5%	3%
Other	3%	3%	1%

- Severe (n=55)
- Moderate to severe (n=265)
- Mild (n=41)

Q920. In general, how do you feel about the prescription medication regimen you are currently taking for your RA?

Base: Patients who use medication (n = 361)

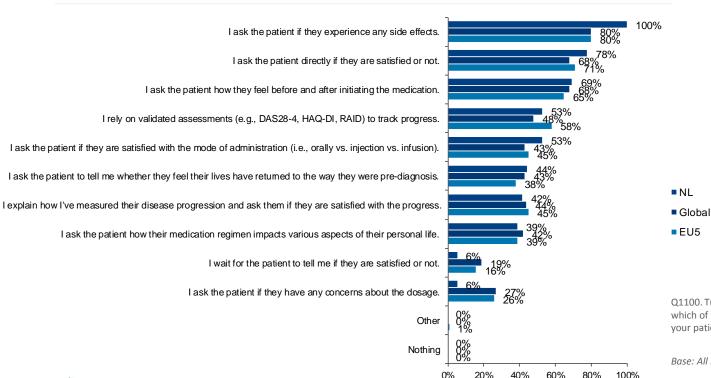


ALL RHEUMATOLOGISTS ASK THEIR PATIENTS IF THEY EXPERIENCE ANY SIDE EFFECTS TO DETERMINE THEIR SATISFACTION WITH THE MEDICATION REGIMEN





How to determine if patients are satisfied with regimen



Q1100. Turning your attention to medication specifically, which of the following do you typically do to determine if your patients are satisfied with their medication regimen?

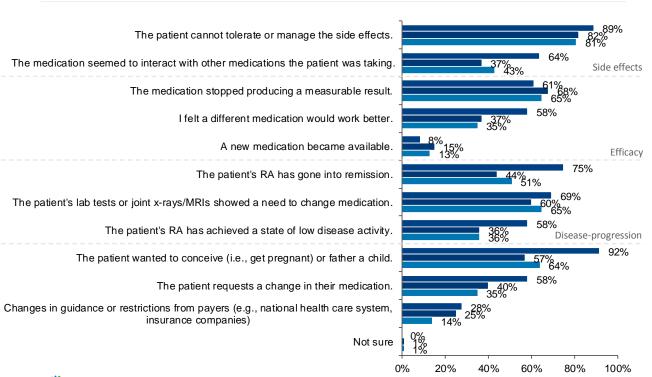


TREATMENT: CHANGES IN MEDICATION REGIMEN

MOST COMMON REASONS FOR CHANGING PATIENTS' MEDICATION BY RHEUMATOLOGISTS ARE PREGNANCY AND NOT TOLERATING SIDE EFFECTS



Most common reasons for changing patients' medication



■ NI

Global

EU5

Q1110. Which of the following are the most common reasons why you change your RA patients' medication?



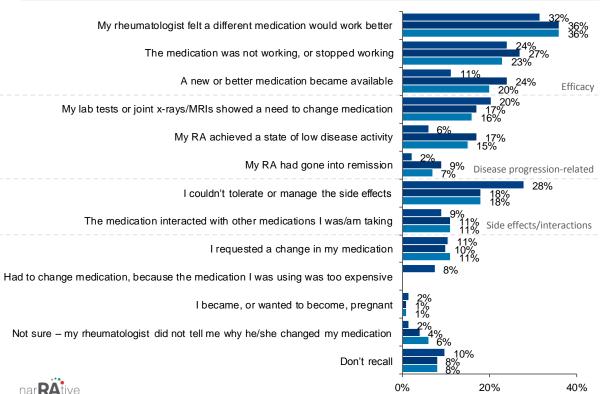


ALMOST ONE THIRD OF THE PATIENTS HAD TO SWITCH MEDICATION BECAUSE THEIR RHEUMATOLOGIST THOUGHT A DIFFERENT MEDICATION WORKS BETTER





Reasons for changing medication by rheumatologist



NL

Global

FU5

Q909. For which of the following reasons, if any, did your rheumatologist change your medication?

Base: Patients who worry about changes in medication (n = 133)

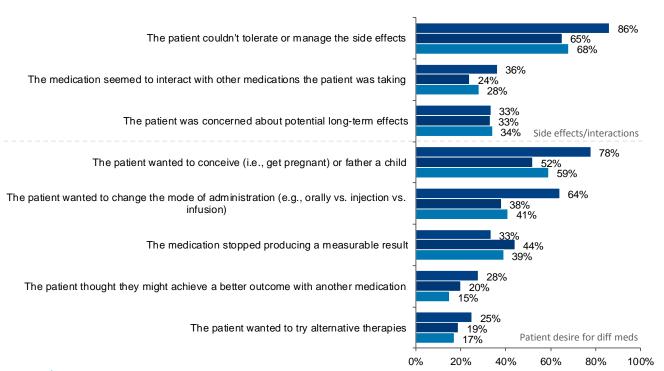
NB. Chart is reported on total, because the n of the subgroups is too small.



MOST COMMON REASON PATIENTS REQUEST A CHANGE IS NOT TOLERATING OR MANAGING THE SIDE EFFECTS



Most common reasons for patients requesting a change in medication (1)



NI Global

EU5

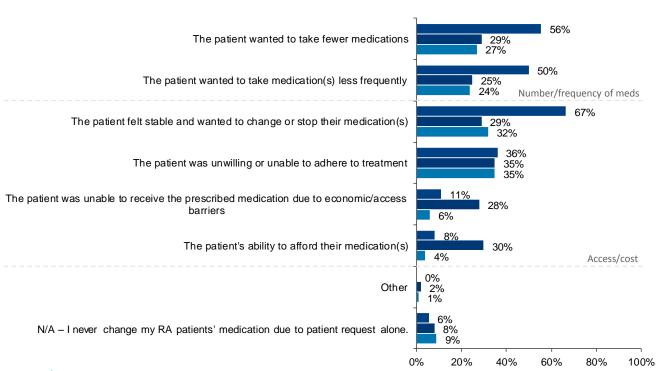
Q1120. When you change your RA patients' medication due to a patient request, what are the most common reasons your patients request a change?



TWO THIRD OF PATIENTS WANT TO CHANGE OR STOP THEIR MEDICATION(S) BECAUSE THEY FELT STABLE



Most common reasons for patients requesting a change in medication (2)



NI

Global

EU5

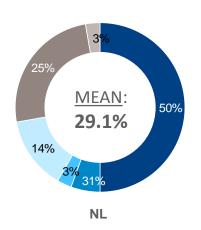
Q1120. When you change your RA patients' medication due to a patient request, what are the most common reasons your patients request a change?

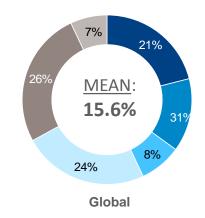


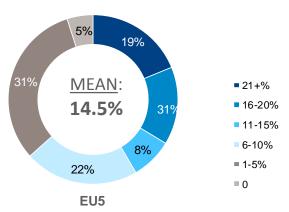
ALMOST 3 OUT OF 10 RHEUMATOLOGISTS HAVE EVER CHANGED OR INITIATED A MEDICATION SPECIFICALLY DUE TO PATIENT REQUEST



Proportion changed or initiated a medication





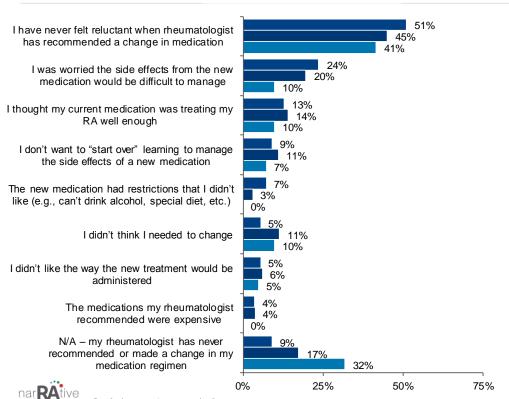


Q1115. Thinking about all the moderate to severe and severe RA patients you currently see in your practice each month, for what proportion have you ever changed or initiated a medication specifically due to patient request?

MOST MENTIONED REASON FOR BEING RELUCTANT ABOUT CHANGES IN THE MEDICATION REGIMENT IS WORRIES ABOUT THE SIDE EFFECTS OF THE NEW MEDICATION



Reasons for being reluctant



	NL Total	Global Total	EU 5
I have never felt reluctant when my rheumatologist has recommended a change in medication	45%	31%	41%
I was worried the side effects from the new medication would be difficult to manage	19%	24%	20%
I thought my current medication was treating my RA well enough	13%	16%	15%
I don't want to "start over" learning to manage the side effects of a new medication	10%	12%	11%
The new medication had restrictions that I didn't like	3%	8%	11%
I didn't think I needed to change	10%	11%	12%
I didn't like the way the new treatment would be administered	6%	10%	8%
The medications my rheumatologist recommended were expensive	3%	14%	10%
N/A - my rheumatologist has never recommended or made a change in my medication regimen	18%	20%	13%

- Severe (n=55)
- Moderate to severe (n=265)
- Mild (n=41)

Q910. For which of the following reasons, if any, have you been reluctant when your rheumatologist has recommended or made a change in your medication regimen? Base: Patients who use medication (n = 361)

TREATMENT:



NUMBER AND SEVERITY OF SIDE EFFECTS ARE MOST WANTED CHANGES TO CURRENT RA MEDICATIONS FOR BOTH RHEUMATOLOGISTS AND PATIENTS





Top 5 Ideal Changes to Currently Available RA Medications, per Physicians

- 1. Number of side effects (75%)
- 2. Severity of side effects (72%)
- 3. The number of medications they need to take (56%)
- 4. How often patients need to receive injections/infusions (47%)
- 4. How well the medication(s) works to relieve patients' symptoms (47%)
- 5. The cost or coverage available from the health care system (42%)
- 1. Severity of side effects (65%)
- 2. Number of side effects (56%)
- 3. The cost or coverage available from the health care system (50%)
- 4. Does not require me to complete a lot of paperwork in order for patients to receive or continue treatment (41%)
- 5. How well the medication(s) works to relieve patients' symptoms (39%)
- 1. Severity of side effects (66%)
- 2. Number of side effects (60%)
- 3. How well the medication(s) works to relieve patients' symptoms (39%)

© GfK | December 2016 | Pfizer NarRAtive

- 4. The number of medications they need to take (35%)
- 4. How their medication(s) is/are administered (35%)
- 5. How often patients need to receive injections/infusions (30%)



Top 5 Ideal Changes to Their Current RA Medication(s), per Patients

- 1. Number of side effects (21%)
- 2. Severity of side effects (16%)
- 3. The number of medications I need to take (15%)
- 4. How well the medication(s) works to relieve my symptoms (13%)
- 5. Being able to take it without other medications for my RA (8%)
- 5. Does not require my rheumatologist to complete a lot of paperwork in order for me to receive or continue treatment (8%)
- Global
- 1. Number of side effects (27%)
- 2. Severity of side effects (26%)
- 3. The cost or coverage available from my health care system (21%)
- 3. How well the medication(s) works to relieve my symptoms (21%)
- 4. The number of medications I need to take (20%)
- 5. How often I need to take oral medication(s) (12%)



- 1. Number of side effects (31%)
- 2. Severity of side effects (23%)
- 3. The number of medications I need to take (22%)
- 4. How well the medication(s) works to relieve my symptoms (19%)
- 5. The cost or coverage available from my health care system (17%)



Q1130. Ideally, what would you most like to change, if anything, about currently available medications for RA?

Q935. Ideally, what would you most like to change, if anything, about your current RA medication(s)?

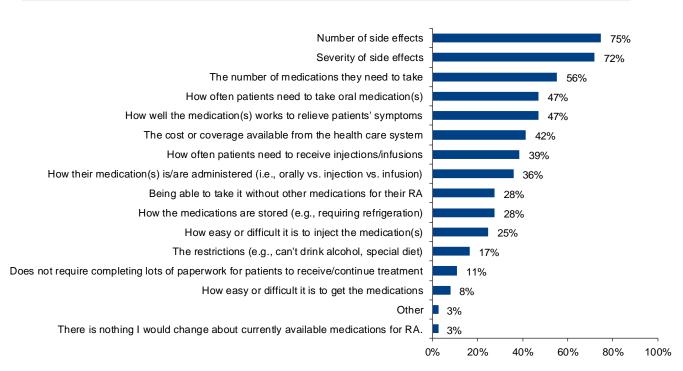
Base: All rheumatologists (n = 36)

Base: All patients (n = 424)





Proportion changed or initiated a medication



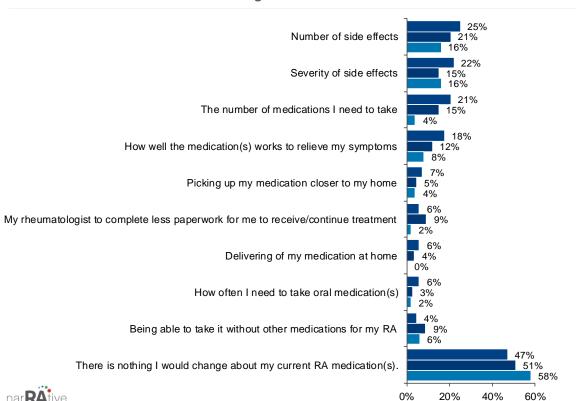
Q1130. Ideally, what would you most like to change, if anything, about currently available medications for RA?



JUST LIKE RHEUMATOLOGIST, PATIENTS WOULD LIKE TO CHANGE THE SIDE EFFECTS OF THEIR CURRENT RA MEDICATION(S), BOTH NUMBER AND SEVERITY



Desire to change about current medication



- Severe
- Moderate to severe
- Mild

Q935. Ideally, what would you most like to change, if anything, about your current RA medication(s)?

Base: All patients (n = 424)

NB. These are the most mentioned changes, the other changes can be found in the appendix.



BRINGING THE RA IN A STATE OF REMISSION IS FAR MORE IMPORTANT FOR RHEUMATOLOGISTS THAN FOR PATIENTS. PATIENTS WANT TO BE ABLE TO PERFORM DAILY ACTIVITIES NORMALLY WITHOUT PAIN



Top 5 Indicators of "Successful" Treatment, per Physicians

- 1. Patient's RA is in a state of remission (92%)
- 2. Patient is no longer in pain (72%)
- 3. Patient is able to get back to doing the things they like to do (69%)
- 3. Patient's RA does not interfere with their daily activities (69%)
- 4. Patient meets the specific treatment goals we have discussed (67%)
- 4. Patient's joint swelling or inflammation has decreased (67%)
- 5. Patient can increase their level of physical activity (61%)
- 1. Patient's RA is in a state of remission (81%)
- 2. Patient is no longer in pain (70%)
- 3. Patient's joint swelling or inflammation has decreased (68%)
- 4. Patient's RA is in a state of low disease activity (63%)
- 4. Patient's RA does not interfere with their daily activities (63%)
- 5. Patient is able to get back to doing the things they like to do (61%)
- 1. Patient's RA is in a state of remission (83%)
- 2. Patient is no longer in pain (65%)
- 3. Patient's joint swelling or inflammation has decreased (63%)
- 4. Patient's RA does not interfere with their daily activities (62%)
- 5. Patient's RA is in a state of low disease activity (60%)
- 5. Patient is able to get back to doing the things they like to do (60%)

© GfK | December 2016 | Pfizer NarRAtive



Top 5 Indicators of "Successful" Treatment, per Patients

- 1. I am no longer in pain (70%)
- 2. My joint swelling or inflammation has decreased (62%)
- 3. My RA does not interfere with my daily activities (61%)
- 4. I am able to get back to doing the things I like to do (57%)
- 5. I am better able to move (55%)



- 1. My joint swelling or inflammation has decreased (69%)
- 2. I am no longer in pain (68%)
- 3. My RA does not interfere with my daily activities (60%)
- 4. I can increase my level of physical activity (55%)
- 5. I am able to get back to doing the things I like to do (53%)
- 1. My joint swelling or inflammation has decreased (68%)
- 1. I am no longer in pain (68%)
- 2. My RA does not interfere with my daily activities (54%)
- 2. I am able to get back to doing the things I like to do (54%)
- 3. I can increase my level of physical activity (52%)
- 4. My rheumatologist tells me my RA is in a state of remission (40%)
- 5. My rheumatologist tells me my RA is in a state of low disease activity (32%)





Q1140. When thinking about the RA medications that are currently available, what does "successful" treatment mean to you? Q955. When thinking about your RA medication(s), what does "successful" treatment mean to you?

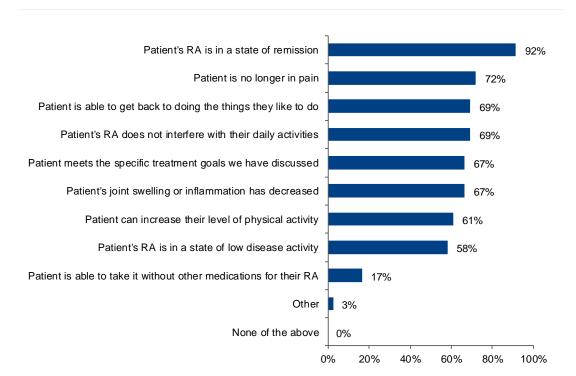
Base: All rheumatologists (n = 36) Base: All patients (n = 424)



RHEUMATOLOGISTS THINK THE TREATMENT IS A SUCCESS WHEN PATIENTS' RA IS IN A STATE OF REMISSION



What does "successful" treatment mean



Q1140. When thinking about the RA medications that are currently available, what does "successful" treatment mean to you?

Base: All rheumatologists (n = 36)

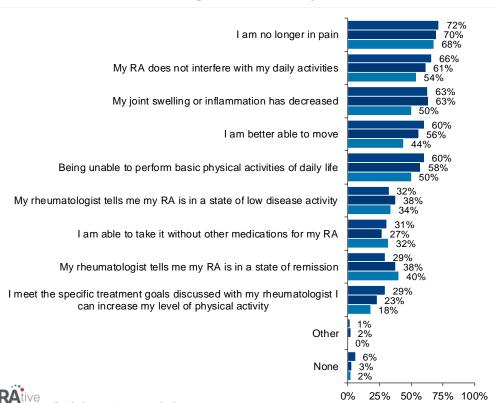


91

TREATMENT SUCCESS IS ASSOCIATED WITH NO PAIN AND BEING ABLE TO PERFORM DAILY ACTIVITIES NORMALLY



Meaning of 'successful' by medication



- Severe
- Moderate to severe
- Mild

Q955. When thinking about your RA medication(s), what does "successful" treatment mean to you?

Base: All patients (n = 424)



DISEASE PROGRESSION COMMONLY IS FOR BOTH RHEUMATOLOGISTS AS PATIENTS AN INDICATOR OF "FAILURE"



Top 5 Indicators of "Failure," per Physicians

- 1. Having continued flare-ups (94%)
- 2. Joint damage continues (86%)
- 3. Joint swelling or inflammation is worsening or not improving (81%)
- 4. Unable to perform basic physical activities (67%)
- 5. Joint pain is worsening or not improving (58%)
- 5. Having to stop taking a medication because the patient cannot tolerate the side effects (58%)
- 1. Joint swelling or inflammation is worsening or not improving (76%)
- 2. Having continued flare-ups (75%)
- 3. Joint damage continues (74%)
- 4. Joint pain is worsening or not improving (72%)
- 5. Having continued pain (61%)
- 1. Joint swelling or inflammation is worsening or not improving (77%)
- 2. Having continued flare-ups (75%)
- 3. Joint damage continues (74%)
- 4. Joint pain is worsening or not improving (71%)
- 5. Having continued pain (56%)





- 1. Joint pain is worsening or not improving (62%)
- 2. Joint swelling or inflammation is worsening or not improving (54%)
- 3. Having continued pain (53%)
- 4. Joint damage continues (52%)
- 5. Being unable to perform basic physical activities of daily life (47%)



- 1. Having continued pain (67%)
- 2. Joint pain is worsening or not improving (66%)
- 3. Joint swelling or inflammation is worsening or not improving (61%)
- 4. Joint damage continues (60%)
- 5. Being unable to perform basic physical activities of daily life (52%)



- 1. Joint pain is worsening or not improving (70%)
- 2. Having continued pain (69%)
- 3. Joint swelling or inflammation is worsening or not improving (63%)
- 4. Being unable to stay as active as I want to be (57%)
- 5. Joint damage continues (56%)



Q1135. When thinking about the RA medications that are currently available, what does "failure" mean to you? Q950. When thinking about your RA medication(s), what does "failure" mean to you?

© GfK | December 2016 | Pfizer NarRAtive

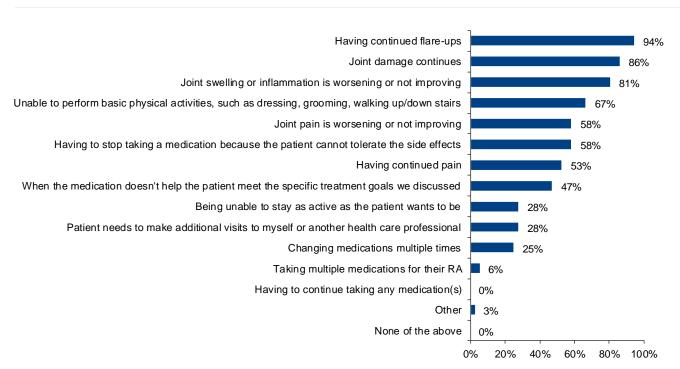
Base: All rheumatologists (n = 36) Base: All patients (n = 424)



FOR RHEUMATOLOGISTS FAILURE IS ASSOCIATED WITH HAVING CONTINUED FLARE-UPS AND WITH WORSENING OR NOT IMPROVING JOINT SWELLING AND JOINT DAMAGE



What does "failure" mean



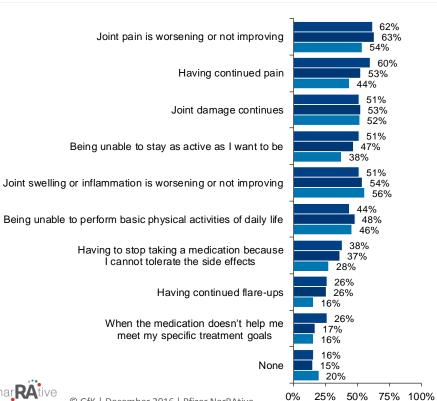
Q1135. When thinking about the RA medications that are currently available, what does "failure" mean to you?





FOR PATIENTS FAILURE IS ASSOCIATED WITH NOT IMPROVING OR WORSENING (JOINT) PAIN AND JOINT DAMAGE

Meaning of 'failure' by medication



- Severe
- Moderate to severe
- Mild

Q950. When thinking about your RA medication(s), what does "failure" mean to you?

Base: All patients (n = 424)

NB. These are the most mentioned meanings, the other meanings can be found in the appendix.



KNOWLEDGE AND RESOURCES

92% OF RHEUMATOLOGISTS RECOMMEND RA ADVOCACY GROUPS, WHILE ONLY 28% OF RA PATIENTS RELY ON THESE GROUPS



Top 5 Resources Physicians Recommend Patients Refer to for Info and Advice re: RA Treatment



- 1. RA advocacy groups (92%)
- 2. Other Healthcare professionals (86%)
- 3. Materials in my waiting room (64%)
- 4. Online resources (47%)
- 4. RA patient support groups (47%)
- 5. Adherence/patient support programs offered by pharmaceutical companies (19%)
- 1. Materials in my waiting room (54%)
- 2. RA advocacy groups (49%)
- 2. Online resources (49%)
- 3. RA patient support groups (43%)
- 3. Other Healthcare professionals (43%)
- 4. Adherence/patient support programs offered by pharmaceutical companies (39%)
- 5. Educational seminars (30%)
- 1. Materials in my waiting room (62%)
- 2. RA advocacy groups (61%)
- 3. Other Healthcare professionals (55%)
- 4. RA patient support groups (54%)
- 5. Online resources (38%)



- 1. Health care professionals (83%)
- 2. RA advocacy groups (28%)
- 3. Online resources (e.g., Internet search engines, health websites, etc.) (26%)
- 4. Other people (friends, family, acquaintances) who have RA (18%)
- 5. Materials in doctor or health care professional waiting rooms (17%)

- Global
- 1. Health care professionals (72%)
- 2. Online resources (e.g., Internet search engines, health websites, etc.) (41%)
- 3. News (e.g., newspapers, magazines, TV shows, radio broadcasts, etc.) (28%)
- 4. Friends and/or family (27%)
- 5. Materials in doctor or health care professional waiting rooms (26%)

EU5

- 1. Health care professionals (78%)
- 2. Online resources (e.g., Internet search engines, health websites, etc.) (39%)
- 3. News (e.g., newspapers, magazines, TV shows, radio broadcasts, etc.) (27%)
- 4. Friends and/or family (25%)
- 5. Materials in doctor or health care professional waiting rooms (21%)
- 5. Other people (friends, family, acquaintances) who have RA (21%)



Q805. What resources, if any, do you recommend your moderate to severe and severe RA patients refer to for information and advice about their RA treatment? Base: All rheumatologists (n = 36)

Q800. What resources, if any, do you rely on *regularly* for information and advice about your RA treatment?

Base: All patients (n = 424)

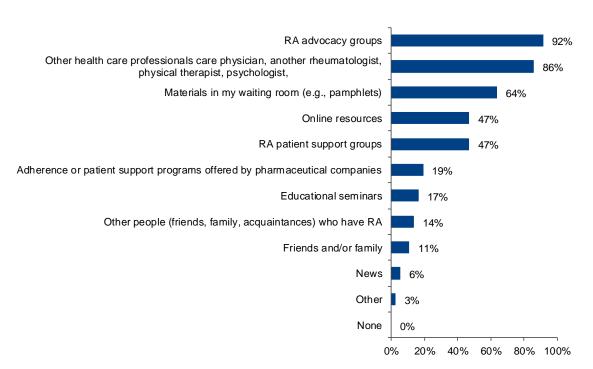


RHEUMATOLOGISTS RECOMMEND RA ADVOCACY GROUPS FOR INFORMATION AND ADVICE





Recommended resources for moderate and severe RA patients



Q805. What resources, if any, do you recommend your moderate to severe and severe RA patients refer to for information and advice about their RA treatment?

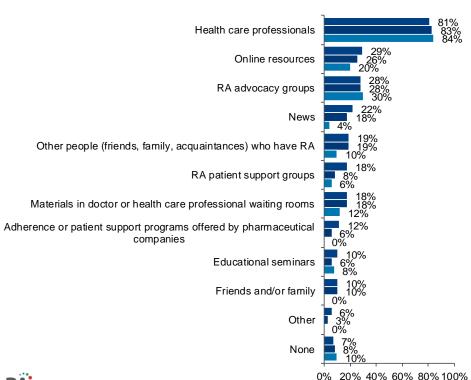




MOST PATIENTS RELY ON HEALTH CARE PROFESSIONALS FOR INFORMATION AND ADVICE ABOUT THEIR RA TREATMENT

Pfizer GFK

Resources for information/advice about RA treatment



- Severe
- Moderate to severe
- Mild

Q800. What resources, if any, do you rely on *regularly* for information and advice about your RA treatment?

Base: All patients (n = 424)

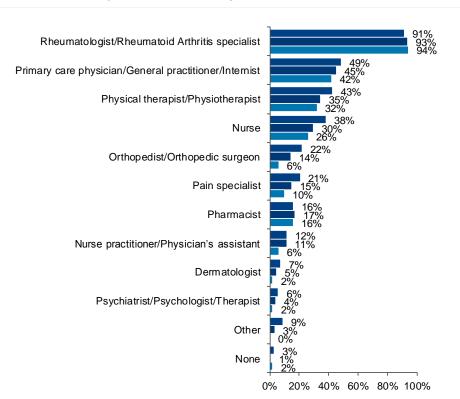




MORE THAN 90% OF THE PATIENTS RELY ON A RHEUMATOLOGIST OR A RHEUMATOID ARTHRITIS SPECIALIST FOR INFORMATION



Health care professionals to rely on for information about RA



- Severe
- Moderate to severe
- Mild

Q802. Which health care professionals in particular do you rely on regularly for information and advice about your RA treatment?

Base: All patients (n = 424)

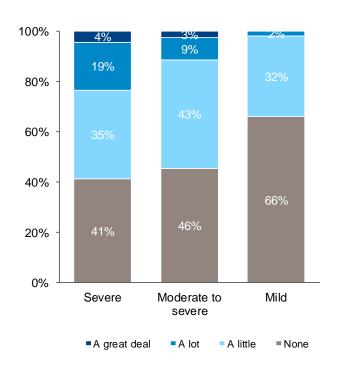




AT LEAST ONE THIRD OF THE PATIENTS THINK THERE IS ANY STIGMA ASSOCIATED WITH RA



Any stigma associated with RA



Q860. Do you think there is any stigma associated with having RA? By stigma, we mean social shame or disapproval

Base: All patients (n=424)





DEMOGRAPHICS

DEMOGRAPHICS PATIENTS



GENDER	Global Total	EU5	Total NL	Severe	Moderate to severe	Mild
Male	36%	43%	30%	26%	29%	40%
Female	64%	57%	70%	74%	71%	60%
Respondent left blank	-	-	-	-	-	-
AGE	Global Total	EU5	Total NL	Severe	Moderate to severe	Mild
18-44	31%	31%	8%	10%	7%	6%
45-54	25%	25%	14%	16%	14%	14%
55-64	23%	19%	35%	40%	34%	36%
65+	21%	24%	43%	34%	44%	44%
MEAN	51.5	51.8	61.3	59.7	61.4	62.3
MARITAL STATUS	Global Total	EU5	Total NL	Severe	Moderate to severe	Mild
Never married	13%	14%	8%	15%	8%	4%
MARRIED/ LIVING WITH PARTNER (NET)	71%	64%	70%	62%	70%	78%
Married or civil union	66%	59%	64%	56%	64%	74%
Living with partner	5%	6%	5%	6%	6%	4%
Divorced/ separated	12%	19%	14%	15%	14%	12%
Widow/Widower	4%	2%	9%	9%	9%	6%
Respondent left blank	-	-	-	-	-	-

Q364. What is your current marital status?

Base NL: All patients (n = 424)





DEMOGRAPHICS RHEUMATOLOGISTS



GENDER	NL Total	Global Total	EU 5
Male	56%	64%	63%
Female	44%	36%	37%
AGE	NL Total	IL Total Global Total	
20 - 24	-	*	*
25 - 29	-	1%	-
30 - 34	-	8%	6%
35 - 39	17%	20%	16%
40 - 44	19%	17%	18%
45 - 49	31%	15%	19%
50 - 54	6%	15%	16%
55 - 59	17%	12%	14%
60 - 64	8%	7%	8%
65 and over	3%	5%	2%
MEAN	48.08	46.8	47.2

GRADUATED FROM MED SCHOOL	NL Total	Global Total	EU 5
1961 - 1970	-	1%	1%
1971 - 1980	3%	10%	6%
1981 - 1990	9%	25%	25%
1991 - 2000	29%	32%	44%
2001 - 2010	50%	31%	23%
2011 - 2015	9%	1%	1%
COMPLETED RESIDENCY	NL Total	Global Total	EU 5
	TVE TOTAL	Global Total	LUJ
1961 - 1970	-	*	-
1961 - 1970 1971 - 1980			- 2%
	-	*	-
1971 - 1980	- 3%	* 5%	- 2%
1971 - 1980 1981 - 1990	- 3% 9%	* 5% 19%	- 2% 18%

Q8702. The next series of questions is for classification purposes only. Are you ...?

Q8704. In what year were you born?

Q8710. In what year did you graduate from medical school?

Q8712. In what year did you complete your residency?





DEMOGRAPHICS RHEUMATOLOGISTS

TYPE OF MEDICAL PRACTICE	NL Total	Global Total	EU 5
Mostly office- or clinic-based	22%	51%	25%
Mostly hospital- or lab-based	44%	22%	26%
Exclusively hospital- or lab-based	33%	14%	32%
Equally hospital-based and office/clinic-based	-	13%	15%
Mostly hospice-based	-	*	1%
Mostly long-term care facility-based	-	-	-
Other	-	*	*
DESCRIPTION OF OFFICE OR CLINIC	NL Total	Global Total	EU 5
Multi-specialty partnership or group (2 or more physicians)	75%	43%	31%
Solo practice	-	31%	34%
Single-specialty partnership or group (2 or more physicians)	25%	26%	35%
NUMBER OF PATIENTS PER WEEK	NL Total	Global Total	EU 5
1-49	6%	11%	12%
50-74	22%	22%	27%
75-99	33%	17%	19%
100-149	31%	23%	23%
150+	8%	27%	20%
MEAN	95.7	127.2	105.3
PATIENT POPULATION	NL Total	Global Total	EU 5
18 years or younger (pediatric)	-	1%	*
19 years to 64 years (adult)	36%	25%	30%
19 years and older (adult and geriatric)	61%	55%	51%
65 years and older (geriatric)	-	8%	5%

3%

12%

13%



NUMBER OF PRESCRIPTIONS PER WEEK	NL Total
0	-
1-25	3%
26-50	22%
51-75	25%
76-100	31%
101-150	19%
MEAN	81.5

Q8716. Which of the following best describes your medical practice? Q8719. How would you describe your office or clinic?

Q8722. On average, how many patients do you see in a typical week? If you are not sure, your best estimate will do.

Q8725. Which of the following best describes the ages of your patient population?

Q8728. On average, about how many prescriptions do you write (or medications do you dispense) in a week?



RESULTS QUESTIONNAIRE QUALITATIVE RESEARCH

TABLES QUESTIONNAIRE PATIENT INTERACTION



- Rheumatologists think patients don't need to talk more than they already do about their objective of the RA treatment
- They would like themselves to talk less or the same on the RA treatment objective
- They are satisfied with their own communication with RA patients on their RA treatment

Respondents (E= Empathic oriënted rheumatologist & S= Scientific oriented rheumatologist)											
Statements (Totally disagree 1 - totally agree 4)	1 S	2 E	3 S	4 E	5 E	6 E	7 S	8 S	9 S	10 E	Mean
1a I would appreciate patients who would like to talk more about their treatment objective.	2	3	3	3	2	2	2	3	1	2	2,3
1b I myself would like to talk more about the treatment objective with my patient.	2	3	3	2	2	1	1	3	1	1	1,9
2 I am satisfied with my communication with my patients concerning their RA treatment.	3	3	3	4	4	3	3	4	2	4	3,3
3 I regularly change the treatment plan of my RA patients without consulting them or let them codecide.	4	1	1	1	1	1	1	1	1	2	1,4
4 I would like to have more appointments with my RA patients.	4	4	1	2	1	1	1	1	1	1	1,7
5 My patients understand their disease and the available treatment options.	3	2	3	3	3	3	3	3	3	3	2,9
6 Time for patient contact suffer from time consuming administrative registration procedures belonging to the treatment of RA patients.	3	3	4	4	2	4	4	1	3	1	2,9

- The majority changes the treatment plan regularly without consulting the patients or letting them co decide
- The majority want to see their RA patients more often
- They think patients do not fully understand their disease and the treatment options
- The majority feels that patient contact suffers from administration procedures linked with RA treatment

No major differences found in opinions of 'empathic' or 'scientific' oriented rheumatologists in patient involvement in RA treatment



TABLES QUESTIONNAIRE ON TREATMENT AND PATIENT ORIENTED APPROACH





- The majority of rheumatologists encourage patients to talk about the impact of RA on their everyday life
- They think the consideration and interpretation of patient reported observations of utmost importance for the treatment plan
- They don't think that patients consider constant pain and loss of self-reliance an inseparably linked to life with RA

Respondents (E= Empathic oriënted rheumatologist & S= Scientific oriented rheumatologist)											
Statements (Totally disagree 1 - totally agree 4)	1 S	2 E	3 S	4 E	5 E	6 E	7 S	8 S	9 S	10 E	Mean
I encourage patients to discuss the influence of RA on their life (e.g. job, night's rest and personal relations)	3	4	3	3	3	3	4	4	2	2	3,1
2 In deciding on the RA treatment plan it is of major importance to consider and interpret the patient reported observations (e.g. patient experience on pain or the influence pain is having impact on every day life).	3	4	4	2	4	4	4	4	4	3	3,6
3 The majority of patients consider constant pain and loss of self-reliance as inseparably linked to a life with RA.	2	3	3	2	3	2	1	2	1	3	2,2
4 Patiënts should take more responsibility for the management of their disease (here: RA).	3	2	3	1	2	2	3	3	4	1	2,4
5 Patiënts who are member of an patient organization are better able to cope or learn to cope with their disease (here: RA).	1	2	1	2	2	2	2	2	1	1	1,6
6 Sufficiently information material is available to inform patients on their disease (here: RA).	3	3	3	3	4	3	3	4	4	3	3,3

- If patients should take more responsibility for the management of their disease (RA) rheumatologists have different opinions
- They don't feel that patients who are member of a patient organization are more able to cope with their disease (RA)
- They think sufficient information material is available to inform patients on their disease

Rheumatologists consider patient experiences and observations in the treatment of RA





APPENDIX



CROSSINGS CURRENT SITUATION RA



Current situation RA

	According to doctor/health care professional								
е		Mild	Moderate to severe	Severe	In remission	In a state of low disease activity	Active	Under control	Not under control
According to me	Mild	86%	14%	1%	77%	43%	11%	21%	4%
	Moderate to severe	14%	83%	43%	23%	57%	72%	72%	60%
	Severe	0%	3%	56%	0%	0%	17%	7%	36%
	In remission	22%	1%	1%	92%	1%	0%	2%	0%
	In a state of low disease activity	36%	21%	6%	8%	85%	10%	12%	2%
	Active	16%	36%	49%	0%	12%	87%	19%	42%
	Under control	38%	45%	22%	15%	21%	21%	86%	7%
	Not under control	0%	11%	34%	8%	6%	10%	2%	82%

	According to doctor/health care professional							
According to me		Mild	Moderate to severe	Severe				
ling	Mild	49%	50%	1%				
corc	Moderate to severe	2%	88%	10%				
Ac	Severe	0%	17%	83%				

Q715 + Q716. How would you currently describe your RA? And how would your doctor or healthcare professional describe your RA?

Base: All patients (n = 424)

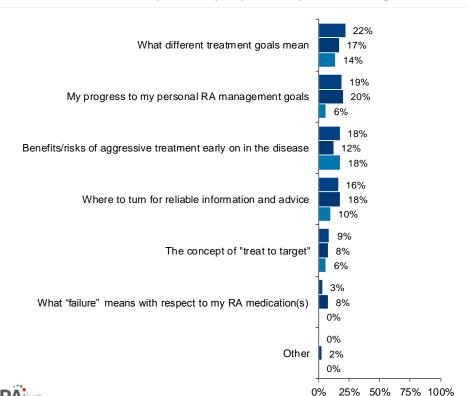


111

OTHER ANSWERS: ASPECTS FULLY EXPLAINED BY RHEUMATOLOGIST



Aspects fully explained by rheumatologist



Severe

■ Moderate to severe

Mild

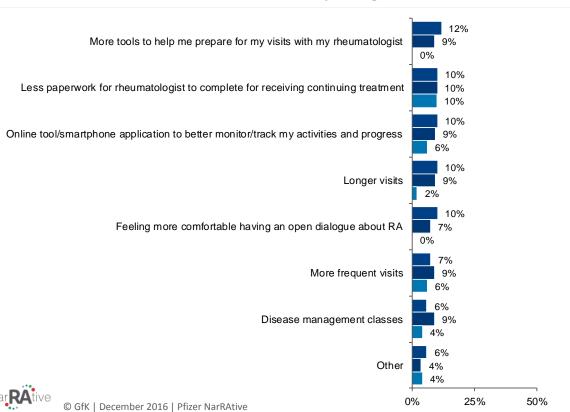
Q815. Which of the following aspects of managing your RA, if any, has your doc rheumatologist fully explained to you?



OTHER ANSWERS: MEANS TO MORE SUCCESSFULLY MANAGE RA



Means to more successfully manage RA



- Severe
- Moderate to severe
- Mild

Q825. In thinking about your relationship with your rheumatologist, which of the following, if any, would help you more successfully manage your RA?

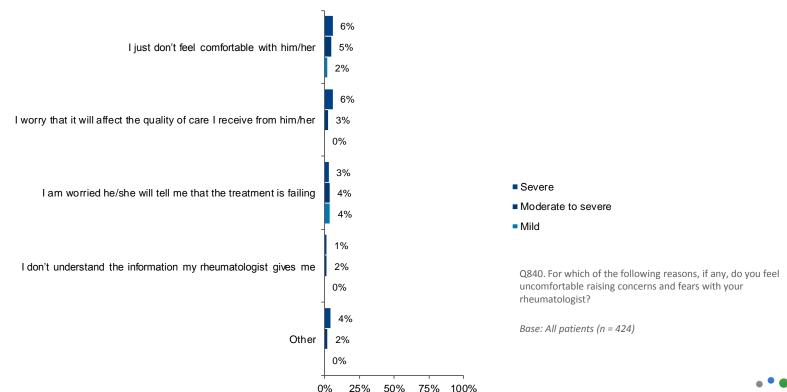


OTHER ANSWERS: REASONS FOR FEELING UNCOMFORTABLE RAISING CONCERN





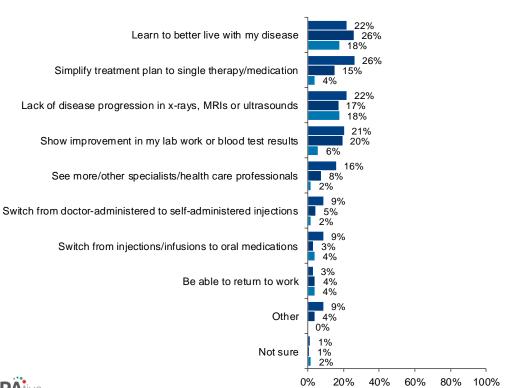
Reasons for feeling uncomfortable raising concerns



OTHER ANSWERS: GOALS FOR MANAGING RA



Goals for managing RA



- Severe
- Moderate to severe
- Mild

Q727. What are your goals for managing your RA? Please select all that apply.

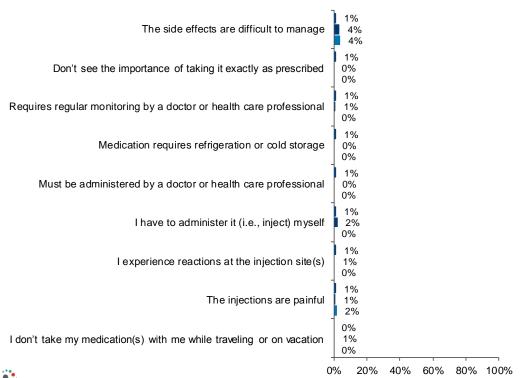




OTHER ANSWERS: REASONS FOR NOT TAKING MEDICATION AS PRESCRIBED



Reasons for not taking medication as prescribed



- Severe
- Moderate to severe
- Mild

Q925. What are the most important reasons why you don't take your RA medication(s) *exactly as prescribed*?

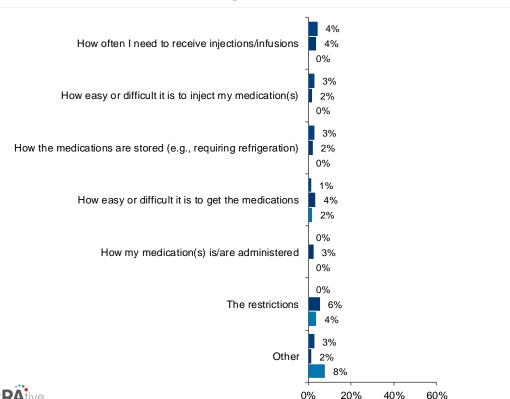




OTHER ANSWERS: DESIRE TO CHANGE ABOUT CURRENT MEDICATION



Desire to change about current medication



- Severe
- Moderate to severe
- Mild

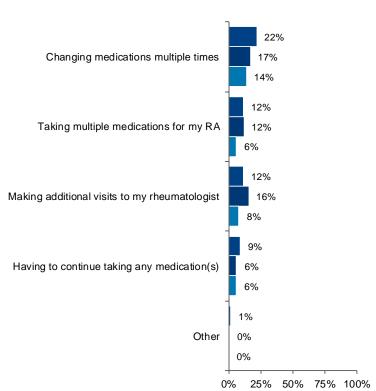
Q935. Ideally, what would you most like to change, if anything, about your current RA medication(s)?



OTHER ANSWERS: MEANING OF "FAILURE" BY MEDICATION



Meaning of 'failure' by medication



- Severe
- Moderate to severe
- Mild

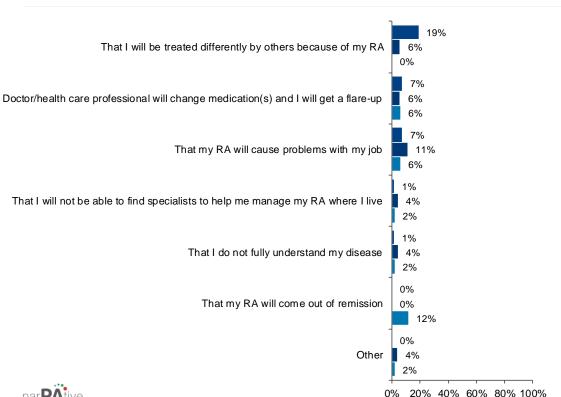
Q950. When thinking about your RA medication(s), what does "failure" mean to you?



OTHER ANSWERS: WORRIES BECAUSE OF RA



Worries because of RA



- Severe
- Moderate to severe
- Mild

Q730. Which of the following, if any, do you worry about because of your RA?



CERTIFICATION

CERTIFICATION



- The study was conducted in accordance with GfK's quality system that is certified according to the standard of NEN-EN-ISO 9001, ISO 20252 and 23632. GfK abides by the code of conduct of ESOMAR (European Society for Opinion and Market Research) and is a member of the professional organization MOA (Center for Information Based Decision Making & Marketing Research) (see http://www.moaweb.nl)
- It is permitted to publish the outcomes of a study externally. Under the condition that in such a case the source is indicated as 'GfK <month and year of the study>'.
- Exclusivity of the collected data is based on the Code of Conduct of the MOA, art. 5 (see http://www.moaweb.nl).





CONTACT

CONTACT





Edwin Bas Industry Lead Health

Edwin.Bas@gfk.com +31 (0)35 - 6257697



Lisanne van Knippenberg Research Executive

Lisanne.vanKnippenberg@gfk.com +31 (0)35 - 6258463

