





Follow-up questionnaire week 4 (Translation from German)



Physician-patient communication on health behaviour

(Please answer the questions on the following pages point-by-point and tick off the answers that apply to you)

 Please try to recall your last consultation with your general practitioner / family doctor, about 4 weeks ago. You kindly participated in a short survey, which was conducted by an employee of the Institute of General Practice (ifam).

Have you made one or more attempt(s) to quit smoking **since this last consultation 4 weeks ago**? Please choose **only one answer**.

□ Yes

 $\Box$  No  $\rightarrow$  continue with question 9

Please <u>only answer the following questions 2-8</u> if you have made at least one attempt to quit smoking since your last appointment with your general practitioner <u>about 4 weeks ago</u> (= if you answered question 1 with "Yes").

 Can you specify when (since this last consultation with your general practitioner about 4 weeks ago) you have started your <u>last</u> quit attempt? In case you cannot recall, please try to approximate. Please choose <u>only one answer</u>.

\_\_\_\_\_days ago or \_\_\_\_\_\_weeks ago

- Can you recall what the main reason for this <u>last</u> quit attempt was? Please choose <u>only one</u> <u>answer</u>.
- □ My general practitioner's advice to quit was the main reason
- □ Smoking became too expensive for me
- □ Smoking is harmful to my health
- □ Someone from my family or circle of acquaintances has quit smoking
- □ The health warnings on cigarette or tobacco packages
- Someone from my family or circle of acquaintances got a disease that can be caused by smoking (e.g., cancer)
- □ The fact that smoking is being banned at more and more places
- Another main reason



- 4.) How long did this <u>most recent</u> quit attempt last before you went back to smoking? Please choose <u>only one answer</u>.
- □ I am still not smoking
- Less than a day
- □ Less than a week
- □ Less than a month
- 5.) Have you consulted your general practitioner <u>since our survey</u> about 4 weeks ago <u>mainly or</u> <u>solely</u> to get behavioural support for smoking cessation? Please choose <u>only one answer</u>.
- Yes, \_\_\_\_\_ times (please only state the number of consultations <u>mainly or solely because of</u> your attempt to quit smoking since our last survey)
- □ No
- 6.) Which of the following products / methods have you tried to assist this <u>last</u> quit attempt? <u>Multiple answers allowed.</u>
- □ Nicotine replacement product (e.g., nicotine patches or nicotine gums)
- □ The drug Zyban (Bupropion)
- The drug Champix (Varenicline)
- Behavioural therapy for smoking cessation (e.g., single or group therapy)
- □ Telephone counselling for smoking cessation
- □ E-Cigarettes with nicotine
- □ E-Cigarettes without nicotine
- A book on smoking cessation (e.g., "Easyway" by Allen Carr)
- An app or internet program for smoking cessation (on a smartphone, tablet or computer)
- □ Acupuncture
- □ Hypnotherapy
- □ Alternative practitioner / naturopath
- $\square$  None of the above mentioned products / methods  $\rightarrow$  continue with question 9



7.) Can you recall how much money you spent <u>in total</u> for these products / methods to assist this <u>last</u> quit attempt? <u>Multiple answers allowed.</u>

\_\_\_\_\_\_€ for nicotine replacement therapy (e.g., nicotine patches, nicotine gums, nicotine sprays)

\_\_\_\_\_ € for drugs (e.g., Zyban, Champix)

\_\_\_\_\_€ for e-cigarettes (if used as an aid to quit smoking)

\_\_\_\_\_ € for behavioural therapy (e.g., single or group therapy)

\_\_\_\_\_ € for other treatment (e.g., acupuncture, hypnotherapy, alternative practitioner / naturopath)

\_\_\_\_\_ € for other products/methods (e.g., book on smoking cessation or chargeable app)

 $\Box$  I spent <u>no</u> money  $\rightarrow$  continue with question 9

 $\Box$  I cannot remember  $\rightarrow$  continue with question 9

- 8.) In case you spent money on one or more of these products / methods during this <u>last</u> quit attempt, did health insurance reimburse any of it?
  - □ Yes, a total of \_\_\_\_\_€
  - $\Box$  No, I paid everything out of my own pocket
  - □ I don't know if my health insurance offers such reimbursement
  - □ I did not submit any request for reimbursement to my health insurance
  - $\Box$  I cannot remember





# The following final set of questions is related to your current general state of health\*

**9.)** Under each heading, please tick the ONE box that describes your health **TODAY** best. Please choose **only one answer** per heading **A) to E).** 

## A) MOBILITY / FLEXIBILITY

- $\hfill\square$  I have no problems in walking around
- □ I have slight problems in walking around
- □ I have moderate problems in walking around
- □ I have severe problems in walking around
- □ I am unable to walk around

### **B) SELF-CARE**

- □ I have no problems washing or dressing myself
- □ I have slight problems washing or dressing myself
- □ I have moderate problems washing or dressing myself
- □ I have severe problems washing or dressing myself
- □ I am unable to wash or dress myself

### C) USUAL ACTIVITIES (e.g., work, study, housework, family or leisure activities)

- □ I have no problems doing my usual activities
- □ I have slight problems doing my usual activities
- □ I have moderate problems doing my usual activities
- □ I have severe problems doing my usual activities
- □ I am unable to do my usual activities

### **D) PAIN / DISCOMFORT**

- $\Box$  I have no pain or discomfort
- □ I have slight pain or discomfort
- □ I have moderate pain or discomfort
- $\Box$  I have severe pain or discomfort
- □ I have extreme pain or discomfort





E) ANXIETY / DEPRESSION	The best health
$\Box$ I am not anxious or depressed	you can imagine
$\Box$ I am slightly anxious or depressed	<u> </u>
$\Box$ I am moderately anxious or depressed	<u> </u>
$\Box$ I am very anxious or depressed	
$\Box$ I am extremely anxious or depressed	90
	± 85
	=
	80
10.)We would like to know how good or poor your health <b>TODAY</b> .	75
<ul> <li>Imagine a scale (like a standing up ruler)</li> </ul>	
	65
• The top of the scale is marked with 100, the bottom with zero (0)	<u> </u>
<ul> <li>100 (top) means the <u>best</u> health you can imagine.</li> </ul>	±
0 (bottom) means the <u>worst</u> health you can imagine.	55
	50
<ul> <li>Mark an X on the scale to indicate how is your health today</li> </ul>	45
• Now, please note the number your marked in the box below.	Ŧ
	40
	35
	30
YOUR HEALTH TODAY =	
	<u>–</u> 25
	20
	5
	<b>—</b>
	<u> </u>

The worst health you can imagine.

\*Rabin R, de Charro F. EQ-5D: a measure of health status from the EuroQol Group. Ann Med 2001;33:337-43.