Pharmaceutical Medicine

Awareness and Experience of DHPC and RMP educational material among HCPs in Finland

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Supplementary information: Questionnaire

[Translated from original Finnish version]

Welcome to participate in the survey on communication and materials related to pharmacovigilance

Dear healthcare professional,

Direct healthcare professional communication (DHPC) and additional risk minimization materials (aRMM) are important tools for managing risks associated with medicinal products. The aim of this research is to examine the knowledge of Finnish healthcare professionals about direct healthcare professional communication and additional risk minimization materials. In addition, this research aims to specify and complement the findings of our two previous studies (Regulation Awareness and Experience of Additional Monitoring among Healthcare Professionals in Finland, Sandberg et.al., 2021; Under-reporting of Adverse drug Reactions in Finland, Sandberg et. al., 2022). The results of the research will be published in a scientific journal and used to plan future educational programs.

This survey is conducted anonymously, and no personal data is collected. Only information relevant to the research is collected and stored on a password-protected server at the University of Helsinki.

The survey consists of 24 questions, including multiple-choice and open-ended questions, and will take approximately 10-15 minutes to complete. The questions focus on your current perceptions and opinions, and you don't have to search for information to answer the survey. You can stop answering the survey at any time before completing it.

Your professional and/or regional association agreed to forward this survey to its members on behalf of the research group. Your contact information has not been disclosed to the researchers. **Responding to the survey is voluntary; by responding, you give your informed consent to participate in this research.**

This researcher-driven research is a part of my specialization studies at the University of Helsinki and is entirely independent of the activities carried out by pharmaceutical companies (including my current employer, GlaxoSmithKline Oy). I am happy to answer questions you may have about the survey and the research conducted.

If you decide to participate in the survey, we kindly request that you submit your responses by 31st of August 2023.

Best regards,
Heli Sandberg
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Background

1. What is your education?
    a. Pharmacist (B.Sc. Pharm)
    b. Pharmacist (M.Sc. Pharm)
    c. Physician
    d. Specialist Physician
    e. Nurse
    f. Other, what?
2. How many years have you been in your profession?
    a. Less than 5 years
    b. 5-9 years
    c. 10-19 years
    d. Over 20 years
3. What is your primary workplace?
    a. Open pharmacy
    b. Hospital Pharmacy
    c. Hospital
    d. Health center
    e. Private medical clinic
    f. Healthcare institution
    g. Pharmaceutical industry
    h. Government
    i. Other, what?

General information regarding pharmaceutical safety

4. Do you feel that you receive enough up to date safety information about medicinal products (e.g. a new contraindication or common adverse reaction)?
    a. Yes
    b. No
5. Via what channel do you prefer to receive the latest safety information about medicinal products?
6. At what point would you like to receive this information?
    a. As soon as it is available
    b. Once a month
    c. When prescribing/administering/dispensing a medicinal product
    d. I don't feel I need this information
    e. Other time, when?

7. Would you like to receive additional training on how to assess the safety of medicinal products and minimize the risks associated with them? Could you briefly tell us which area you would be particularly interested in?
8. Do you consider that the training included in the training program of the institution from which you graduated was sufficiently comprehensive in terms of pharmacovigilance topics (adverse reaction reporting, additional monitoring of medicinal products, DHPC, aRMM)?
    a. Yes
    b. No
9. If not, could you briefly describe which pharmacovigilance topics you think should be focused more on?

Direct healthcare professional communication (DHPC)

10. What is direct healthcare professional communication (DHPC)? Select the correct statements (one or more).
    a. The communication describes potential concerns regarding the safety and quality of a medicinal product.
    b. The Finnish Medicines Agency (Fimea) publishes the communication on its website.
    c. The marketing authorization holder of a medicinal product aims to increase the sales of its product with the communication.
    d. The communication is intended for the training of healthcare professionals.
    e. Healthcare professionals can propose topics to Fimea for future communication.
    f. This communication contains important information on the safety of a medicinal product.
    g. For example, the communication may instruct healthcare professionals to take the necessary measures to ensure the safety of the medicinal product.
    h. The communication provides information on changes in the price and reimbursement of a medicinal product.
    i. I don't know.
11. What topics related to medicinal products would you like to be informed about as soon as possible?
12. How many direct healthcare professional communications (DHPCs) have you received during your career?
    a. None
    b. 1-5
    c. 6-10
    d. Over 10
    e. I don't know
13. Have the direct healthcare professional communications (DHPCs) you received been relevant to your work?
    a. Yes
    b. No

c. I have not received / I don´t know if I have received direct healthcare professional communication

14. Could you briefly tell us how you think direct healthcare professional communication (DHPC) could be improved?
15. Through which channel would you like to receive direct healthcare professional communication (DHPC)?

Additional risk minimization material (aRMM)

16. The purpose of additional risk minimization material (aRMM) is, for example (you can choose one or more):
    a. To guide healthcare professionals and patients on the correct use of a medicinal product
    b. To market a medicinal product
    c. To highlight the good efficacy of a medicinal product
    d. To report medicinal product study results
    e. To minimize the risks associated with the use of a medicinal product
    f. To report a shortage of a medicinal product
    g. To better identify potential adverse drug reactions
    h. To notify of changes in the reimbursement of a medicinal product
    i. I don't know
17. How many times have you used additional risk minimization material (aRMM) during your career?
    a. Never
    b. 1-5 times
    c. 6-10 times
    d. Over 10 times
    e. I don't know
18. Where can you check if a medicinal product has additional risk minimization material (aRMM)?
    a. Fimea's website
    b. Terveysportti *[=National health database]*
    c. Package leaflet inside the outer carton of a medicinal product
    d. I don't know
19. What kind of risks related to medicinal products do you think should be addressed with separate material?
20. When would you like to receive information about additional risk minimization material (aRMM) of a medicinal product?
    a. As soon as it is available
    b. Once a month
    c. When prescribing/administering/dispensing a medicinal product
    d. I don't feel I need this information
    e. Other time, when?

21. What do you think would be the most accessible storage location for additional risk minimization materials (aRMM) for your work?
22. Do you find it easy to locate information related to the safety of medicinal products (e.g. adverse reactions, additional risk minimization materials (aRMM), direct healthcare professional communications (DHCP)) in Terveysportti *[=National health database]*?
23. How would you improve Terveysportti *[=National health database]* in matters related to the safety of medicinal products?
24. Anything else you would like to highlight?