

## PASS Information

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Country(-ies) of study	Denmark, the Netherlands, Spain, Sweden, and the United Kingdom
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Approval Date: 27-Mar-2014 GMT

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# 1. Abstract

## **Title**

Physician Survey to Reassess Effectiveness of Strattera Risk Minimisation Activities

## **Keywords**

Atomoxetine, Risk minimization effectiveness, Cardiovascular risk, Assessment survey

## **Rationale and background**

Cardiovascular risk concerns related to changes in blood pressure and heart rate among some users of Strattera® (atomoxetine) led to an update in risk minimisation activities. To increase awareness and minimise the risks associated with increased blood pressure and heart rate among users of Strattera, a Dear Healthcare Professional (DHCP) communication was distributed in 2011, which included updated language for the Summary of Product Characteristics (SmPC), a physician guide, and additional tools to assist in monitoring and managing blood pressure and heart rate to facilitate appropriate monitoring for cardiac and vascular safety during treatment. The initial risk minimisation effectiveness assessment survey was conducted in 2012. This second physician survey reassesses the effectiveness of Strattera risk minimisation activities.

## **Research question and objectives**

This survey reassessed awareness and retained knowledge of the cardiovascular or cerebrovascular disorder contraindication and recommendations to monitor blood pressure and heart rate in all patients at baseline and during treatment with Strattera.

## **Study design**

To assess the impact of the DHCP communication, a survey was conducted among a sample of European Union (EU) physicians in Denmark, Sweden, the Netherlands, Spain, and the United Kingdom (UK), who prescribe and/or monitor patients on Strattera. The risk minimisation activities are considered successful if the majority of physicians participating in the survey report that they are aware of and are prescribing Strattera in accordance with the cardiovascular/cerebrovascular contraindications, warnings and precautions and the recommendation to monitor blood pressure and heart rate in all patients at baseline and during treatment with Strattera.

## **Setting**

This was an online survey.

## **Subjects and study size, including dropouts**

This online survey was administered among a representative sample of 550 practicing physicians (specialists, general practitioners [GPs]) in Denmark, Sweden, the Netherlands, Spain, and the UK. Only physicians that prescribe and/or monitor patients using Strattera were eligible to participate.

**Variables and data sources**

Summary tables include descriptive statistics and no formal hypothesis testing was conducted.

**Results**

Of the 550 participating physicians, more than 96% reported that they would not prescribe Strattera for a patient with severe cardiovascular or cerebrovascular disorders whose conditions would be expected to deteriorate if they experience increases in blood pressure or heart rate that could be clinically important. A majority perform a cardiovascular risk assessment (78.9%) on most or all of their patients before prescribing Strattera whereas 69.1% of physicians perform a physical exam to assess for the presence of cardiac disease. Measurement and recording of heart rate and blood pressure is performed by approximately 80%. More than 90% reported that they were somewhat or very knowledgeable of the physician's guide and more than 75% of physicians reported that they were somewhat or very knowledgeable of both the checklist for actions to take before prescribing Strattera and checklist for monitoring to manage cardiovascular risks. Reported knowledge (somewhat or very knowledgeable) of the content of the tools which included the checklist for actions to take before prescribing/dispensing or administering Strattera, the measurements recording chart, and the checklist to manage cardiovascular risks for this reassessment was approximately 75%.

**Discussion**

The results of this reassessment show that the majority of physicians in the total sample have maintained awareness, knowledge, and practice in accordance with the cardiovascular/cerebrovascular contraindications, warnings, and precautions since the initial assessment. They are aware of and adhere to the recommendation to monitor blood pressure and heart rate in all patients at baseline and during treatment with Strattera. These findings are similar to the results from the initial assessment where that the majority of physicians were aware of and reported adherence to recommendations outlined in the DHCP communication.



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## 2. List of abbreviations

Term	Definition
<b>ADHD</b>	attention deficit/hyperactivity disorder
<b>CHMP</b>	Committee for Medicinal Products for Human Use
<b>DHCP</b>	Dear Healthcare Professional
<b>EMA</b>	European Medicines Agency
<b>EU</b>	European Union
<b>GPs</b>	general practitioners
<b>HCPs</b>	healthcare professionals
<b>MAH</b>	Marketing authorisation holder
<b>MHRA</b>	Medicines and Healthcare Products Regulatory Agency
<b>SmPC</b>	Summary of Product Characteristics
<b>UK</b>	United Kingdom

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## 5. Milestones

<b>Milestone</b>	<b>Planned date</b>	<b>Actual date</b>	<b>Comments</b>
Start of data collection	01 Sept 2013	16 Sept 2013	N/A
End of data collection	30 Nov 2013	22 Nov 2013	N/A
Registration in the EU PAS register	15 Aug 2013	15 Aug 2013	N/A
Study progress report 1	Not Applicable	Not Applicable	N/A
Interim report 1	Not Applicable	Not Applicable	N/A
Final report of study results	31 March 2014	31 March 2014	N/A

Abbreviations: EU = European Union; N/A = not applicable; PAS = post-authorisation study.

## **6. Rationale and background**

In response to the Committee for Medicinal Products for Human Use (CHMP) Pharmacovigilance Working Party recommendations of September 2011, Eli Lilly and Company (Lilly) implemented additional risk minimization activities beyond amendments to the SmPC for Strattera. These activities were implemented as a result of an extensive analysis of cardiovascular data from the Lilly clinical trial database which indicated more clinically significant effects on blood pressure and heart rate in some patients than had previously been noted. The purpose of the additional risk minimisation activities was to support and foster appropriate Strattera prescribing and patient monitoring of cardiovascular parameters. In particular, the physician communication, associated checklists and measurement recording chart informed physicians of the cardiovascular or cerebrovascular disorder contraindication and the recommendation to monitor blood pressure and heart rate in all patients at baseline and during treatment with Strattera.

The original risk minimisation effectiveness assessment survey was conducted in 2012. This reassessment evaluated healthcare provider sustained knowledge and awareness of the need to appropriately screen and monitor patients in relation to cardiovascular risks with atomoxetine treatment.

## 7. Research question and objectives

Research question: Are Strattera risk minimisation activities effective in facilitating sustained knowledge and awareness over-time of risk messages provided as a part of the Strattera risk minimization plan?

The main objective of this assessment was to use a survey to reassess the effectiveness of the Strattera risk minimisation activities among physicians who prescribe Strattera and/or monitor patients being treated with Strattera. The risk minimisation activities reassessed by this survey included sustained knowledge and awareness of the risk messages provided by the following tools:

- Physician's guide for assessing and monitoring cardiovascular risk when prescribing Strattera
- Checklist for actions to take before prescribing/dispensing or administering Strattera
- Checklist for monitoring to manage cardiovascular risks with Strattera treatment
- Measurements recording chart for blood pressure and heart rate.

The survey also included an assessment of awareness and adherence to the changes in the 2011 SmPC requirements specific to cardiovascular risks and monitoring including:

- Severe cardiovascular/cerebrovascular disorder contraindication
- Warnings and precautions
- The recommendation to monitor blood pressure and heart rate in patients at baseline and during treatment with Strattera.

## **8. Amendments and updates**

Not applicable.



## 9. Research methods

### 9.1. Study design

This cross-sectional survey was administered in Denmark, Sweden, the Netherlands, Spain, and the UK among physicians (Paediatricians, Child/Adolescent Psychiatrists or other Non-Paediatricians and GPs) who prescribe Strattera and/or monitor patients treated with Strattera. Participants were identified either via address lists used for the distribution of the DHCP communication (provided by Lilly where available) or via open recruiting using a panel of healthcare professionals (HCPs) within the network of HCPs who have agreed to participate in market research (when address lists were unavailable due to privacy or contractual constraints). Participants were invited to participate by phone and email, and if they agreed to participate, then a link to the online survey was emailed to them.

The reassessment of physicians' understanding and behavior regarding cardiovascular risk assessment covered the following topics:

- Assessment of physicians' awareness and knowledge of the cardiovascular risk information communicated in the SmPC and associated tools that are available to monitor patients
  - awareness and knowledge of the medical information
  - usage of tools provided to physicians
- Assessment of awareness of and adherence to the SmPC requirements specific to cardiovascular risks and monitoring
  - adherence to Strattera SmPC associated warnings and precautions
  - awareness of the need for and performance of careful patient assessment and examination before prescribing and when monitoring patients taking Strattera
  - awareness of contraindications
  - awareness and performance of latest recommended practice as communicated in the SmPC

The questionnaire used in the initial assessment was also used for this reassessment. In this reassessment, Question Q4: Recommended and performed time period of clinical practices was modified to have better alignment with the SmPC. One option was reworded from "Stopping treatment for a while to reassess ADHD symptom" to "reevaluate the need for continued therapy."

The questionnaire is provided in [Annex 2](#).

### 9.2. Setting

Physicians that prescribe and/or monitor patients on Strattera were invited to participate via email and/or phone to complete the survey. This online survey targeted paediatricians, child/adolescent psychiatrists or other non-paediatricians, and GPs who received a Strattera DHCP communication. The survey was designed to take no more than 10 minutes to complete and was fielded for 2 months in Denmark, Sweden, the Netherlands, Spain, and the UK.

Participating HCPs had the option of receiving compensation for their time. The amount varied by country and was determined by the standard maximum allowed for each country.

### 9.3. Subjects

Eligibility criteria included the following:

- the physician must be a Paediatrician, Child/Adolescent Psychiatrist, other Non-Paediatrician Psychiatrist or General Practitioner,
- the physician was not currently employed or contracted by regulatory bodies (for example, the European Medicines Agency [EMA] or Medicines and Healthcare Products Regulatory Agency [MHRA] or other country specific regulatory agencies), Lilly, or GfK Healthcare,
- the physician either prescribed Strattera or managed/monitored patients taking Strattera
- the physician treats patients in Denmark, Sweden, the Netherlands, Spain, and the UK

Screening questions were included at the beginning of the survey to ensure that the respondent met defined eligibility criteria. As this was a reassessment of a pool of physicians, it is possible that respondents may have participated in the initial assessment however this information was not captured. Physicians treating patients in Germany was included in the initial assessment; however, this country was not included in this assessment due to changes in local laws. For details on this see Section 12.

### 9.4. Variables

This reassessment evaluated sustained knowledge and awareness of risk messages, as well as adherence to the changes in the SmPC over time.

Awareness, knowledge, and adherence were evaluated and results are expressed as proportions.

### 9.5. Data sources

The data for this reassessment was obtained using an online survey of HCPs from Denmark, Sweden, the Netherlands, Spain, and the UK.

### 9.6. Bias

Several measures had been taken to avoid any biases to the results:

- At the beginning of the interview physicians were encouraged to complete the interviews in 1 session and were asked to answer all questions frankly and to the best of their knowledge.
- Incorrect or irrelevant answers were included as options as a means to measure physician's knowledge.

Despite measures taken to mitigate any potential bias it is difficult to remove all bias.

## 9.7. Study size

[Table 1](#) lists the number of specialists who were surveyed compared to GPs.

**Table 1. Country and specialty - actual distribution**

	All countries	UK	Sweden	Spain	Netherlands	Denmark
<b>GPs PCPs</b>	200	100	0	0	50	50
<b>Specialists</b>						
Child/Adolescent Psychiatrist	78	21	8	24	15	10
Other Non-Paediatricians Psychiatrist	134	29	27	26	20	32
Paediatrician	138	50	15	50	15	8
<b>Total per country</b>	<b>550</b>	<b>200</b>	<b>50</b>	<b>100</b>	<b>100</b>	<b>100</b>

Abbreviations: GPs = general practitioners; PCPs = primary care physicians; UK = United Kingdom.

The total sample of physicians for this second assessment of paediatric prescribers was 550, which included health care providers from Denmark, Sweden the Netherlands, Spain, and the UK. These countries were selected because they represent a significant market share of Strattera prescriptions in Europe. In the initial assessment Germany was included; however this country was not included in this assessment due to changes in local laws. For details on this see [Section 12](#).

## 9.8. Data transformation

Surveys were completed online and data were stored on a secure server. Survey participants logged in using unique login identification. Every effort was made to protect participant confidentiality. Participant identifiers were not disseminated or placed on any reports from this study. The analysis was conducted with anonymised data.

## 9.9. Statistical methods

### 9.9.1. Main summary measures

Data analysis was descriptive and entailed tabular displays of values and the frequency distribution of item responses. Awareness, knowledge, and adherence were evaluated and results are expressed as proportions and means. Summary tables include descriptive statistics for continuous variables (means, standard deviations) and categorical variables (frequencies, percentages).

Detailed tables of results per country can be found in [Annex 3](#); an overview of physicians' survey responses is provided below.

### **9.9.2. Main statistical methods**

Results were analyzed on an item-by-item or variable-by variable basis. These descriptive statistics allow for the assessment of how rates vary for each of the items evaluated as well as between each specialty. No formal hypothesis testing was conducted. The findings from this reassessment are described and reported alongside findings from the initial assessment to evaluate changes or maintenance of trends in knowledge, awareness and adherence among surveyed health care providers over time.

The risk minimisation activities are considered successful if a majority of physicians participating in the survey report that they are aware of and prescribing Strattera in accordance with the cardiovascular/cerebrovascular contraindications, warnings and precautions, and the recommendation to monitor blood pressure and heart rate in all patients at baseline and during treatment with Strattera.

### **9.9.3. Missing values**

Results were analyzed on an item-by-item or variable-by variable basis. No additional methods were used to address missing values.

### **9.9.4. Sensitivity analyses**

Not applicable.

### **9.9.5. Amendments to the statistical analysis plan**

Not applicable.

## **9.10. Quality control**

All fieldwork suppliers undergo ongoing evaluation and quality control. The following quality control mechanisms are implemented for all quantitative surveys:

- error prevention by intelligent programming (among others filtering, error messages)
- consistency checks of the respondents' individual data files regarding plausibility (data logic) and completeness
- re-contacting of respondents after the interviews in order to keep evidence that interviews are really done by the agreed (panel) participants

Under suspicion of any irregularities (for example, detection of equivocal response patterns or consecutive answers of the same multiple choice answer), the data file would be tentatively excluded from analysis and further investigated by the responsible project manager. This did not occur during this assessment.

To minimize bias in the survey instrument, the sample of survey participants, and other survey procedures, the following measures were taken, as appropriate:

- evaluation of survey to ensure that questions are not ambiguous or leading
- randomisation of response options presented in a list to reduce positional bias
- monitoring of regional spread of respondents to minimise regional bias
- exclusion of participants employed or contracted by regulatory bodies (such as the EMA), Lilly, or the vendor conducting survey
- quality control measures: for example, exclusion of flatliners (always ticking same answer options in statement batteries)
- assessment of demographic information provided by respondents in order to assess geographical representation. If over representation of any one area is identified, additional sampling from other areas may be necessary for a more balanced sample.

## 10. Results

### 10.1. Participants

This is a descriptive analysis that included a sample of 550 completed surveys. The majority of participants were specialists, which included paediatricians, child/adolescent psychiatrists, other non-paediatrician psychiatrists (see [Table 2](#)).

**Table 2. Study population**

	Sample Sizes
<b>Specialists</b> (Paediatricians, Child/Adolescent Psychiatrists, Other Non-Paediatrician Psychiatrists)	n=350
<b>GPs</b>	n=200
<b>Total</b>	n=550

Abbreviation: GPs = general practitioners.

### 10.2. Descriptive data

The age and gender distribution of health care providers participating in this reassessment of risk minimization efforts is displayed in [Table 3](#). The majority of participants in this survey were male (72.9%) and the largest proportion of participants were aged 46 to 55 years (32.2%). Of the 550 survey participants, the majority were specialists. The demographics for the physicians participating in this reassessment were similar to the participants in initial survey.

**Table 3. Age and gender distribution of HCPs**

	Total n (%)	Specialist n (%)	GP n (%)
<b>Gender</b>			
Male	401 (72.9%)	235 (67.1%)	166 (83.0%)
Female	149 (27.1%)	115 (32.9%)	34 (17.0%)
<b>Age</b>			
Up to 35 years	66 (12.0%)	39 (11.1%)	27 (13.5%)
36 - 45 years	156 (28.4%)	100 (28.6%)	56 (28.0%)
46 - 55 years	177 (32.2%)	119 (34.0%)	58 (29.0%)
56 - 65 years	140 (25.5%)	86 (24.6%)	54 (27.0%)
66 years or older	11 (2.0%)	6 (1.7%)	5 (2.5%)
<b>Total (100%)</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>

Abbreviations: GP = general practitioner; HCPs = healthcare professionals.

Results in [Table 4](#) shows that in the initial assessment the majority of the total physicians surveyed (72.7%) were prescribing Strattera and/or monitoring patients taking Strattera in a small proportion of their attention deficit/hyperactivity disorder (ADHD) patients (<25% of ADHD patients). This trend is very similar for this reassessment, as approximately 68% of total

physicians surveyed are prescribing Strattera and/or monitoring patients taking Strattera for less than 25% of their ADHD patients.

**Table 4. Question Q1: Physicians classification by percentage of ADHD patients prescribed Strattera or managed/monitored on Strattera (question asked to all physicians)**

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>Q1: What percentage of your ADHD patients do you either prescribe Strattera and/or manage/monitor on Strattera (atomoxetine)?</i>						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
<25%	373 (67.8%)	238 (68.0%)	135 (67.5%)	545 (72.7%)	407 (74.0%)	138 (69.0%)
25-50%	136 (24.7%)	88 (25.1%)	48 (24.0%)	162 (21.6%)	115 (20.9%)	47 (23.5%)
51%-75%	28 (5.1%)	15 (4.3%)	13 (6.5%)	29 (3.9%)	17 (3.1%)	12 (6.0%)
>75%	13 (2.4%)	9 (2.6%)	4 (2.0%)	14 (1.9%)	11 (2.0%)	3 (1.5%)

Abbreviations: ADHD = attention deficit/hyperactivity disorder; GP = general practitioner.

### 10.3. Main results

Table 5 shows how many (number and percent) of the physicians surveyed indicated they are performing activities that represent latest recommended practice for patients who may take or are taking Strattera. The trends in the initial assessment were maintained for the reassessment.

In both specialists and GP physician groups there were consistent trends across both surveys.

- More than 90% perceive the following 2 statements to represent the latest recommended practice:
  - Strattera should be used with caution in patients whose underlying medical conditions could be worsened by increases of blood pressure or heart rate (for example, patients with hypertension, tachycardia, or cardiovascular or cerebrovascular disease).
  - Strattera should not be used in patients with severe cardiovascular or cerebrovascular disorders whose condition would be expected to deteriorate if they experienced increases in blood pressure or heart rate that could be clinically important.
- Measured as average across physicians surveyed, approximately 90% of the participating physicians perceive the following statements to represent the latest recommended practice:
  - A baseline patient history and physical examination is needed to assess for the presence of cardiac disease before prescribing Strattera.
  - Heart rate and blood pressure should be measured and recorded in all patients before the Strattera treatment/after each adjustment of dose.

- Patient should be referred for further specialist evaluation in the event the patient developed a new cardiovascular disorder or a worsening of a pre-existing cardiovascular disorder.

The proportion of participants correctly responding to the remaining statements on recommended practice was a similar to the results for the initial assessment. For this reassessment, greater than 80% responded correctly to 14 out of the 16 questions on awareness of the recommended practices. The two remaining practices referred to the use of the checklists where approximately 70% responded correctly. Overall, specialists scored better than GPs; however, the differences were usually less than 10%.



**Table 5. Question P1: Awareness of latest recommended practice as communicated by RMP (question asked to all physicians)**

Green, bold frames tag correct answers

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.</i>						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
Strattera should be used with caution in patients whose underlying medical conditions could be worsened by increases of blood pressure or heart rate (e.g. patients with hypertension, tachycardia, or cardiovascular or cerebrovascular disease)	<b>516 (93.8%)</b>	335 (95.7%)	181 (90.5%)	<b>712 (94.9%)</b>	529 (96.2%)	183 (91.5%)
Strattera should not be used in patients with severe cardiovascular or cerebrovascular disorders whose condition would be expected to deteriorate if they experienced increases in blood pressure or heart rate that could be clinically important	<b>496 (90.2%)</b>	314 (89.7%)	182 (91.0%)	<b>702 (93.6%)</b>	520 (94.5%)	182 (91.0%)
A baseline patient history and physical examination is needed to assess for the presence of cardiac disease before prescribing Strattera	<b>503 (91.5%)</b>	327 (93.4%)	176 (88.0%)	<b>695 (92.7%)</b>	521 (94.7%)	174 (87.0%)
Heart rate and blood pressure should be measured and recorded in all patients before the Strattera treatment/after each adjustment of dose	<b>509 (92.5%)</b>	331 (94.6%)	178 (89.0%)	<b>693 (92.4%)</b>	515 (93.6%)	178 (89.0%)

**Question P1: Awareness of latest recommended practice as communicated by RMP (question asked to all physicians) (continued)**

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.</i>						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
Patient should be referred for further specialist evaluation in the event the patient developed a new cardiovascular disorder or a worsening of a pre-existing cardiovascular disorder	<b>499 (90.7%)</b>	329 (94.0%)	170 (85.0%)	<b>691 (92.1%)</b>	522 (94.9%)	169 (84.5%)
If Strattera is considered, a detailed history and careful physical examination is needed to assess for the presence of cardiac disease of concomitant medications including past and present co- morbid medical disorders or symptoms	<b>487 (88.5%)</b>	319 (91.1%)	168 (84.0%)	<b>687 (91.6%)</b>	516 (93.8%)	171 (85.5%)
Adverse reactions suspected to be associated with the use of Strattera should be reported to a Regulatory Agency	<b>476 (86.5%)</b>	311 (88.9%)	165 (82.5%)	<b>685 (91.3%)</b>	510 (92.7%)	175 (87.5%)
Heart rate and blood pressure should be measured and recorded in all Strattera patients at least every 6 months during treatment	<b>486 (88.4%)</b>	322 (92.0%)	164 (82.0%)	<b>668 (89.1%)</b>	502 (91.3%)	166 (83.0%)
There is a risk of increased blood pressure and increased heart rate with the use of Strattera	<b>502 (91.3%)</b>	323 (92.3%)	179 (89.5%)	<b>667 (88.9%)</b>	491 (89.3%)	176 (88.0%)

**Question P1: Awareness of latest recommended practice as communicated by RMP (question asked to all physicians) (continued)**

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.</i>						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
If Strattera is considered, a detailed history and careful physical examination is needed to assess for the presence of cardiac disease of concomitant medications including family history of sudden cardiac or unexplained death or malignant arrhythmia	<b>482 (87.6%)</b>	312 (89.1%)	170 (85.0%)	<b>660 (88.0%)</b>	494 (89.8%)	166 (83.0%)
If Strattera patients develop symptoms suggestive of cardiac disease during treatment they should be referred for prompt specialist cardiac evaluation	<b>471 (85.6%)</b>	320 (91.4%)	151 (75.5%)	<b>660 (88.0%)</b>	503 (91.5%)	157 (78.5%)
If Strattera is considered, a detailed history and careful physical examination is needed to assess for the presence of cardiac disease of concomitant medications including physical exam to assess for the presence of cardiac disease	<b>468 (85.1%)</b>	297 (84.9%)	171 (85.5%)	<b>654 (87.2%)</b>	483 (87.8%)	171 (85.5%)
Patients should be referred for specialist cardiac evaluation if initial findings suggest a history or presence of cardiac disease	<b>455 (87.2%)</b>	302 (86.3%)	153 (76.5%)	<b>631 (84.1%)</b>	481 (87.5%)	150 (75.0%)

**Question P1: Awareness of latest recommended practice as communicated by RMP (question asked to all physicians) (concluded)**

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.</i>						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
Patients should be referred to further specialist evaluation if they develop new neurologic signs or symptoms	<b>451 (82.0%)</b>	290 (82.9%)	161 (80.5%)	<b>615 (82.0%)</b>	458 (83.3%)	157 (78.5%)
For patients receiving Strattera, a checklist for monitoring cardiovascular risks should be followed	<b>388 (70.5%)</b>	248 (70.9%)	140 (70.0%)	<b>495 (66.0%)</b>	358 (65.1%)	137 (68.5%)
A checklist for actions to take before prescribing/dispensing or administering Strattera should be followed	<b>371 (67.5%)</b>	241 (68.9%)	130 (65.0%)	<b>458 (61.1%)</b>	335 (60.9%)	123 (61.5%)
A reevaluation of the need for ADHD therapy is recommended when patients are continuing treatment with Strattera at 3 months	<b>308 (56.0%)</b>	187 (53.4%)	121 (60.5%)	<b>299 (39.9%)</b>	200 (36.4%)	99 (49.5%)
It is not necessary to use Strattera cautiously with pressor agents or medications that may increase blood pressure	<b>97 (17.6%)</b>	71 (20.3%)	26 (13.0%)	<b>109 (14.5%)</b>	76 (13.8%)	33 (16.5%)
Before prescribing/dispensing or administering Strattera, an echocardiography is needed	<b>55 (10.0%)</b>	38 (10.9%)	17 (8.5%)	<b>66 (8.8%)</b>	47 (8.5%)	19 (9.5%)
Heart rate and blood pressure should be only measured by a cardiac specialist	<b>37 (6.7%)</b>	23 (6.6%)	14 (7.0%)	<b>34 (4.5%)</b>	23 (4.2%)	11 (5.5%)

Abbreviations: ADHD = attention deficit/hyperactivity disorder; GP = general practitioners; RMP = risk management plan.

Table 6 describes physician knowledge of the risk minimization tools distributed in 2011 and available upon request through the country affiliate. Overall, knowledge of the tools was higher for this reassessment than for the initial assessment. More than 90% of all surveyed physicians were at least somewhat knowledgeable of the physicians' guide for assessing and monitoring cardiovascular risks for the reassessment, which is approximately a 10% increase from the initial survey. A higher proportion of respondents for this reassessment reported being at least somewhat knowledgeable of each of the checklists. In the initial survey, approximately 60% of respondents were at least somewhat knowledgeable while for the reassessment approximately 75% of respondents were at least somewhat knowledgeable. Overall, specialists were more knowledgeable compared to general practitioners.

**Table 6.**                      **Question P3: Knowledge of medical information (question asked to all physicians)**

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>P3: Please have a look at the following documents. In general, how knowledgeable are you with the content of the following medical information provided for Strattera?</i>						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
<i>Physician's guide for assessing and monitoring cardiovascular risks when prescribing Strattera</i>						
(1) Not knowledgeable	<b>50 (9.1%)</b>	12 (3.4%)	38 (19.0%)	<b>131 (17.5%)</b>	82 (14.9%)	49 (24.5%)
(2) Somewhat knowledgeable	<b>343 (62.4%)</b>	201 (57.4%)	142 (71.0%)	<b>435 (58.0%)</b>	305 (55.5%)	130 (65.0%)
(3) Very knowledgeable	<b>157 (28.5%)</b>	137 (39.1%)	20 (10.0%)	<b>184 (24.5%)</b>	163 (29.6%)	21 (10.5%)
<i>Checklist for actions to take before prescribing / dispensing or administering Strattera</i>						
(1) Not knowledgeable	<b>136 (24.7%)</b>	64 (18.3%)	72 (36.0%)	<b>315 (42.0%)</b>	215 (39.1%)	100 (50.0%)
(2) Somewhat knowledgeable	<b>286 (52.0%)</b>	183 (52.3%)	103 (51.5%)	<b>293 (39.1%)</b>	212 (38.5%)	81 (40.5%)
(3) Very knowledgeable	<b>128 (23.3%)</b>	103 (29.4%)	25 (12.5%)	<b>142 (18.9%)</b>	123 (22.4%)	19 (9.5%)
<i>Checklist for monitoring to manage cardiovascular risks with Strattera treatment</i>						
(1) Not knowledgeable	<b>134 (24.4%)</b>	67 (19.1%)	67 (33.5%)	<b>306 (40.8%)</b>	203 (36.9%)	103 (51.5%)
(2) Somewhat knowledgeable	<b>288 (52.4%)</b>	181 (51.7%)	107 (53.5%)	<b>313 (41.7%)</b>	235 (42.7%)	78 (39.0%)
(3) Very knowledgeable	<b>128 (23.3%)</b>	102 (29.1%)	26 (13.0%)	<b>131 (17.5%)</b>	112 (20.4%)	19 (9.5%)
<i>Measurements recording chart</i>						
(1) Not knowledgeable	<b>140 (25.5%)</b>	73 (20.9%)	67 (33.5%)	<b>299 (39.9%)</b>	196 (35.6%)	103 (51.5%)
(2) Somewhat knowledgeable	<b>260 (47.3%)</b>	157 (44.9%)	103 (51.5%)	<b>276 (36.8%)</b>	203 (36.9%)	73 (36.5%)
(3) Very knowledgeable	<b>150 (27.3%)</b>	120 (34.3%)	30 (15.0%)	<b>175 (23.3%)</b>	151 (27.5%)	24 (12.0%)

Abbreviation: GP = general practitioner.

Table 7 provides new information in this reassessment. These questions were not asked in the initial assessment. The goal of these questions was to better understand why physicians were not knowledgeable of the tools provided. Overall, for each of the tools the majority of physicians indicated they were not aware that the medical information listed was available. As a means to address this, participants were made aware that the risk minimisation tools were available through their local Lilly affiliate.

**Table 7.**                      **Question P3a: Knowledge of medical information (question asked to physicians indicating they were not knowledgeable of the medical information provided for Strattera described in Table 6)**

	<b>Reassessment</b>		
	<b>Total n (%)</b>	<b>Specialist n (%)</b>	<b>GP n (%)</b>
<i>P3a: Which statement best describes why you are not knowledgeable of the content of the following medical information provided for Strattera:</i>			
<i>Physician's guide for assessing and monitoring cardiovascular risks when prescribing Strattera</i>			
<b>Total</b>	<b>50 (100%)</b>	<b>12 (100%)</b>	<b>38 (100%)</b>
(1) I was not aware this information is available	<b>29 (58.0%)</b>	10 (83.3%)	19 (50.0%)
(2) I am aware this information is available but do not remember the content	<b>21 (42.0%)</b>	2 (16.7%)	19 (50.0%)
<i>Checklist for actions to take before prescribing / dispensing or administering Strattera</i>			
<b>Total</b>	<b>136 (100%)</b>	<b>64 (100%)</b>	<b>72 (100%)</b>
(1) I was not aware this information is available	<b>99 (72.8%)</b>	49 (76.6%)	50 (69.4%)
(2) I am aware this information is available but do not remember the content	<b>37 (27.2%)</b>	15 (23.4%)	22 (30.6%)
<i>Checklist for monitoring to manage cardiovascular risks with Strattera treatment</i>			
<b>Total</b>	<b>134 (100%)</b>	<b>67 (100%)</b>	<b>67 (100%)</b>
(1) I was not aware this information is available	<b>105 (78.4%)</b>	56 (83.6%)	49 (73.1%)
(2) I am aware this information is available but do not remember the content	<b>29 (21.6%)</b>	11 (16.4%)	18 (26.9%)
<i>Measurements recording chart</i>			
<b>Total</b>	<b>140 (100%)</b>	<b>73 (100%)</b>	<b>67 (100%)</b>
(1) I was not aware this information is available	<b>122 (87.1%)</b>	66 (90.4%)	56 (83.6%)
(2) I am aware this information is available but do not remember the content	<b>18 (12.9%)</b>	7 (9.6%)	11 (16.4%)

Abbreviation: GP = general practitioner.



Among the 50 (9%) physicians that were not knowledgeable of the content of the medical information provided for Strattera; 29 (58%) were not aware this information was available. This includes 10 of the 12 specialists who indicated they were not aware and 19 of the 38 GPs indicated they were not aware. Overall, 21 (42%) were aware but did not remember the content (16% Specialists, 50% GPs).

For the checklist for actions to take before prescribing/dispensing or administering Strattera 136 (25%) physicians indicated they were not knowledgeable. Among this group, 99 (72.8%) were not aware this information is available, this includes 49 (76.6%) of specialists and 50 (69.4%) of GPs.

For the checklist for monitoring to manage cardiovascular risks with Strattera treatment, 134 (24%) were not knowledgeable. Of the 134 that were not knowledgeable, 105 (78.4%) were not aware this information is available (83.6% of Specialists; 73.1% of GPs).

For the measurements recording chart, 140 (25%) physicians were not knowledgeable. Of the 140 that were not knowledgeable, 122 (87.1%) were not aware this information is available (90.4% of Specialists; 83.6% of GPs).

[Table 8](#) shows the responses to the frequency that each risk minimisation tool is used by physicians who prescribe Strattera or manage/monitor patients taking Strattera.

Table 8.

**Question P4: Usage of provided tools (question asked to physicians indicating they knowledgeable of the medical information provided for Strattera described in Table 6)**

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>P4: What best describes your use of the following tools, provided to physicians, when prescribing Strattera or managing/monitoring treatment with Strattera?</i>						
<i>Physicians guide for assessing and monitoring cardiovascular risks when prescribing Strattera</i>						
<b>Total</b>	<b>500 (100%)</b>	<b>338 (100%)</b>	<b>162 (100%)</b>	<b>619 (100%)</b>	<b>468 (100%)</b>	<b>151 (100%)</b>
(1) Never use	165 (33.0%)	112 (33.1%)	53 (32.7%)	163 (26.3%)	121 (25.9%)	42 (27.8%)
(2) Sometimes use	172 (34.4%)	122 (36.1%)	50 (30.9%)	222 (35.9%)	166 (35.5%)	56 (37.1%)
(3) Frequent use	116 (23.2%)	72 (21.3%)	44 (27.2%)	157 (25.4%)	117 (25.0%)	40 (26.5%)
(4) Always use	47 (9.4%)	32 (9.5%)	15 (9.3%)	77 (12.4%)	64 (13.7%)	13 (8.6%)
<i>Checklist for actions to take before prescribing/dispensing or administering Strattera</i>						
<b>Total</b>	<b>414 (100%)</b>	<b>286 (100%)</b>	<b>128 (100%)</b>	<b>435 (100%)</b>	<b>335 (100%)</b>	<b>100 (100%)</b>
(1) Never use	122 (29.5%)	89 (31.1%)	33 (25.8%)	82 (18.9%)	63 (18.8%)	19 (19.0%)
(2) Sometimes use	126 (30.4%)	87 (30.4%)	39 (30.5%)	144 (33.1%)	110 (32.8%)	34 (34.0%)
(3) Frequent use	106 (25.6%)	67 (23.4%)	39 (30.5%)	123 (28.3%)	94 (28.1%)	29 (29.0%)
(4) Always use	60 (14.5%)	43 (15.0%)	17 (13.3%)	86 (19.8%)	68 (20.3%)	18 (18.0%)
<i>Checklist for monitoring to manage cardiovascular risks when prescribing Strattera</i>						
<b>Total</b>	<b>416 (100%)</b>	<b>283 (100%)</b>	<b>133 (100%)</b>	<b>444 (100%)</b>	<b>347 (100%)</b>	<b>97 (100%)</b>
(1) Never use	129 (31.0%)	88 (31.1%)	41 (30.8%)	109 (24.5%)	86 (24.8%)	23 (23.7%)
(2) Sometimes use	133 (32.0%)	94 (33.2%)	39 (29.3%)	140 (31.5%)	106 (30.5%)	34 (35.1%)
(3) Frequent use	102 (24.5%)	65 (23.0%)	37 (27.8%)	121 (27.3%)	97 (28.0%)	24 (24.7%)
(4) Always use	52 (12.5%)	36 (12.7%)	16 (12.0%)	74 (16.7%)	58 (16.7%)	16 (16.5%)

**Question P4: Usage of provided tools (question asked to physicians indicating they knowledgeable of the medical information provided for Strattera described in Table 6) (concluded)**

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>P4: What best describes your use of the following tools, provided to physicians, when prescribing Strattera or managing/monitoring treatment with Strattera?</i>						
<i>Measurements recording chart</i>						
<b>Total</b>	<b>410 (100%)</b>	<b>277 (100%)</b>	<b>133 (100%)</b>	<b>451 (100%)</b>	<b>354 (100%)</b>	<b>97 (100%)</b>
(1) Never use	<b>144 (35.1%)</b>	99 (35.7%)	45 (33.8%)	<b>106 (23.5%)</b>	81 (22.9%)	25 (25.8%)
(2) Sometimes use	<b>111 (27.1%)</b>	74 (26.7%)	37 (27.8%)	<b>126 (27.9%)</b>	100 (28.2%)	26 (26.8%)
(3) Frequent use	<b>84 (20.5%)</b>	52 (18.8%)	32 (24.1%)	<b>109 (24.2%)</b>	83 (23.4%)	26 (26.8%)
(4) Always use	<b>71 (17.3%)</b>	52 (18.8%)	19 (14.3%)	<b>110 (24.4%)</b>	90 (25.4%)	20 (20.6%)

Abbreviation: GP = general practitioner.

In the initial survey at least 70% of all surveyed physicians who had self-reported knowledge of the tools used them at least sometimes. Among physicians participating in the reassessment there was a small decrease in the proportion reporting use of these tools. Usage ranged between 65% to 70%.

Among the 500 physicians participating in the reassessment who were knowledgeable of the physician's guide for assessing and monitoring cardiovascular risks, 67% use it at least sometimes and 33% report never using it. This is compared to the findings in the initial assessment where 73.7% of 619 respondents that reported using it at least sometimes and 26.3% reporting never using the physician's guide for assessing and monitoring cardiovascular risks.

Among the 414 physicians participating in the reassessment who were knowledgeable of the checklist for actions to take, 70.5% use it at least sometimes and 29.5% report never using it. This is compared to the findings in the initial assessment where 81.1% of 435 respondents that reported using it at least sometimes and 18.9% reporting never using it.

Among the 416 physicians participating in the reassessment who were knowledgeable of the checklist for monitoring to manage cardiovascular risks, 69% use it at least sometimes and 31% report never using it. This is compared to the findings in the initial assessment where 75.5% of 444 respondents that reported using it at least sometimes and 24.5% reporting never using it.

Among the 410 physicians participating in the reassessment who were knowledgeable of the measurements recording chart, 64.9% use it at least sometimes and 35.1% report never using it. This is compared to the findings in the initial assessment where 76.5% of 451 respondents that reported using it at least sometimes and 23.5% reporting never using it.

Table 9 shows physicians' adherence to the Strattera label warnings and precautions. Among participating physicians, the proportion of physicians that conduct a careful consideration of cardiovascular family medical history for most or all patients for whom they consider for Strattera was similar for the initial assessment and this reassessment which was 74.2% and 76.3% respectively.

**Table 9. Question Q2: Adherence to SmPC warnings and precautions (Awareness of the need for and performance of careful patient assessment and examination before prescribing Strattera) (question asked to all physicians)**

Green, bold frames tag correct answers

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
<i>Careful consideration of cardiovascular family medical history</i>						
(1) None (0%)	<b>50 (9.1%)</b>	18 (5.1%)	32 (16%)	<b>78 (10.4%)</b>	37 (6.7%)	41 (20.5%)
(2) Some (less than 50%)	<b>80 (14.5%)</b>	44 (12.6%)	36 (18%)	<b>116 (15.5%)</b>	78 (14.2%)	38 (19.0%)
(3) Most (50% but less than 100%)	<b>141 (25.6%)</b>	86 (24.6%)	55 (27.5%)	<b>173 (23.1%)</b>	120 (21.8%)	53 (26.5%)
(4) All (100%)	<b>279 (50.7%)</b>	202 (57.7%)	77 (38.5%)	<b>383 (51.1%)</b>	315 (57.3%)	68 (34.0%)
<i>Comprehensive medical history of the patient's past and present co-morbid medical disorders or symptoms</i>						
(1) None (0%)	<b>38 (6.9%)</b>	10 (2.9%)	28 (14.0%)	<b>49 (6.5%)</b>	19 (3.5%)	30 (15.0%)
(2) Some (less than 50%)	<b>51 (9.3%)</b>	21 (6.0%)	30 (15.0%)	<b>53 (7.1%)</b>	31 (5.6%)	22 (11.0%)
(3) Most (50% but less than 100%)	<b>127 (23.1%)</b>	68 (19.4%)	59 (29.5%)	<b>165 (22.0%)</b>	107 (19.5%)	58 (29.0%)
(4) All (100%)	<b>334 (60.7%)</b>	251 (71.7%)	83 (41.5%)	<b>483 (64.4%)</b>	393 (71.5%)	90 (45.0%)
<i>Cardiovascular risk assessment (heart problems, heart defects, irregular heartbeat, high blood pressure, or low blood pressure)</i>						
(1) None (0%)	<b>38 (6.9%)</b>	9 (2.6%)	29 (14.5%)	<b>68 (9.1%)</b>	31 (5.6%)	37 (18.5%)
(2) Some (less than 50%)	<b>78 (14.2%)</b>	43 (12.3%)	35 (17.5%)	<b>83 (11.1%)</b>	58 (10.5%)	25 (12.5%)
(3) Most (50% but less than 100%)	<b>141 (25.6%)</b>	92 (26.3%)	49 (24.5%)	<b>180 (24.0%)</b>	124 (22.5%)	56 (28.0%)
(4) All (100%)	<b>293 (53.3%)</b>	206 (58.9%)	87 (43.5%)	<b>419 (55.9%)</b>	337 (61.3%)	82 (41.0%)

**Question Q2: Adherence to SmPC warnings and precautions (Awareness of the need for and performance of careful patient assessment and examination before prescribing Strattera) (question asked to all physicians) (continued)**

	<b>Reassessment</b>			<b>Initial Assessment</b>		
	<b>Total n (%)</b>	<b>Specialist n (%)</b>	<b>GP n (%)</b>	<b>Total n (%)</b>	<b>Specialist n (%)</b>	<b>GP n (%)</b>
Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
<i>Physical examination to assess for the presence of cardiac disease</i>						
(1) None (0%)	<b>77 (14.0%)</b>	<b>43 (12.3%)</b>	<b>34 (17.0%)</b>	<b>125 (16.7%)</b>	<b>77 (14.0%)</b>	<b>48 (24.0%)</b>
(2) Some (less than 50%)	<b>93 (16.9%)</b>	<b>57 (16.3%)</b>	<b>36 (18.0%)</b>	<b>111 (14.8%)</b>	<b>80 (14.5%)</b>	<b>31 (15.5%)</b>
(3) Most (50% but less than 100%)	<b>123 (22.4%)</b>	<b>73 (20.9%)</b>	<b>50 (25.0%)</b>	<b>122 (16.3%)</b>	<b>71 (12.9%)</b>	<b>51 (25.5%)</b>
(4) All (100%)	<b>257 (46.7%)</b>	<b>177 (50.6%)</b>	<b>80 (40.0%)</b>	<b>392 (52.3%)</b>	<b>322 (58.5%)</b>	<b>70 (35.0%)</b>
<i>Measurement and recording of heart rate</i>						
(1) None (0%)	<b>50 (9.1%)</b>	<b>21 (6.0%)</b>	<b>29 (14.5%)</b>	<b>75 (10.0%)</b>	<b>43 (7.8%)</b>	<b>32 (16.0%)</b>
(2) Some (less than 50%)	<b>53 (9.6%)</b>	<b>30 (8.6%)</b>	<b>23 (11.5%)</b>	<b>76 (10.1%)</b>	<b>50 (9.1%)</b>	<b>26 (13.0%)</b>
(3) Most (50% but less than 100%)	<b>120 (21.8%)</b>	<b>70 (20.0%)</b>	<b>50 (25.0%)</b>	<b>136 (18.1%)</b>	<b>85 (15.5%)</b>	<b>51 (25.5%)</b>
(4) All (100%)	<b>327 (59.5%)</b>	<b>229 (65.4%)</b>	<b>98 (49.0%)</b>	<b>463 (61.7%)</b>	<b>372 (67.6%)</b>	<b>91 (45.5%)</b>
<i>Measurement and recording of blood pressure</i>						
(1) None (0%)	<b>37 (6.7%)</b>	<b>13 (3.7%)</b>	<b>24 (12.0%)</b>	<b>59 (7.9%)</b>	<b>29 (5.3%)</b>	<b>30 (15.0%)</b>
(2) Some (less than 50%)	<b>56 (10.2%)</b>	<b>31 (8.9%)</b>	<b>25 (12.5%)</b>	<b>61 (8.1%)</b>	<b>39 (7.1%)</b>	<b>22 (11.0%)</b>
(3) Most (50% but less than 100%)	<b>116 (21.1%)</b>	<b>68 (19.4%)</b>	<b>48 (24.0%)</b>	<b>135 (18.0%)</b>	<b>84 (15.3%)</b>	<b>51 (25.5%)</b>
(4) All (100%)	<b>341 (62.0%)</b>	<b>238 (68.0%)</b>	<b>103 (51.5%)</b>	<b>495 (66.0%)</b>	<b>398 (72.4%)</b>	<b>97 (48.5%)</b>

**Question Q2: Adherence to SmPC warnings and precautions (Awareness of the need for and performance of careful patient assessment and examination before prescribing Strattera) (question asked to all physicians) (concluded)**

	<b>Reassessment</b>			<b>Initial Assessment</b>		
	<b>Total n (%)</b>	<b>Specialist n (%)</b>	<b>GP n (%)</b>	<b>Total n (%)</b>	<b>Specialist n (%)</b>	<b>GP n (%)</b>
Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
<i>Check thyroid hormone with lab test</i>						
(1) None (0%)	<b>147 (26.7%)</b>	92 (26.3%)	55 (27.5%)	<b>183 (24.4%)</b>	126 (22.9%)	57 (28.5%)
(2) Some (less than 50%)	<b>133 (24.2%)</b>	86 (24.6%)	47 (23.5%)	<b>163 (21.7%)</b>	113 (20.5%)	50 (25.0%)
(3) Most (50% but less than 100%)	<b>141 (25.6%)</b>	83 (23.7%)	58 (29.0%)	<b>144 (19.2%)</b>	98 (17.8%)	46 (23.0%)
(4) All (100%)	<b>129 (23.5%)</b>	89 (25.4%)	40 (20.0%)	<b>260 (34.7%)</b>	213 (38.7%)	47 (23.5%)
<i>Check bone age on X-rays</i>						
(1) None (0%)	<b>365 (66.4%)</b>	238 (68.0%)	127 (63.5%)	<b>556 (74.1%)</b>	411 (74.7%)	145 (72.5%)
(2) Some (less than 50%)	<b>113 (20.5%)</b>	64 (18.3%)	49 (24.5%)	<b>142 (18.9%)</b>	103 (18.7%)	39 (19.5%)
(3) Most (50% but less than 100%)	<b>51 (9.3%)</b>	34 (9.7%)	17 (8.5%)	<b>39 (5.2%)</b>	29 (5.3%)	10 (5.0%)
(4) All (100%)	<b>21 (3.8%)</b>	14 (4.0%)	7 (3.5%)	<b>13 (1.7%)</b>	7 (1.3%)	6 (3.0%)
<i>Check testosterone and estradiol circulating levels</i>						
(1) None (0%)	<b>364 (66.2%)</b>	245 (70.0%)	119 (59.5%)	<b>547 (72.9%)</b>	412 (74.9%)	135 (67.5%)
(2) Some (less than 50%)	<b>128 (23.3%)</b>	70 (20.0%)	58 (29.0%)	<b>156 (20.8%)</b>	114 (20.7%)	42 (21.0%)
(3) Most (50% but less than 100%)	<b>45 (8.2%)</b>	28 (8.0%)	17 (8.5%)	<b>30 (4.0%)</b>	16 (2.9%)	14 (7.0%)
(4) All (100%)	<b>13 (2.4%)</b>	7 (2.0%)	6 (3.0%)	<b>17 (2.3%)</b>	8 (1.5%)	9 (4.5%)

Abbreviations: GP = general practitioners; SmPC = Summary of Product Characteristics.

Of the total physicians participating in this reassessment, 83.8% do a comprehensive medical history of the patient's past and present comorbid medical disorders or symptoms before prescribing Strattera on most or all of their patients. This is compared to 86.4% during the initial

assessment. Although there is a slight decrease in the proportion of physicians reporting doing this comprehensive medical history most or all the time the trend for never doing this remained the same over time (6.9% reassessment, 6.5% initial assessment). Alternatively, approximately 93% of physicians participating in this reassessment report doing a comprehensive medical history of the patient's past and present comorbid medical disorders or symptoms before prescribing Strattera on most or all of their patients some or all of the time.

In relation to cardiovascular risk assessment, the majority of all physicians (78.9% in the reassessment and 79.9% in the initial assessment) do this for most or all patients; 6.9% in the reassessment and 9.1 in the initial assessment report never doing this assessment.

A physical examination to assess for the presence of cardiac disease was conducted for most or all patients by 69.1% of all physicians in the reassessment and 68.6% in the initial assessment; 14% versus 16.7% during the initial assessment of physicians reported never conducting the examination before prescribing Strattera.

Measurement and recording of heart rate is done for most or all patients by approximately 80% (81.3% reassessment and 79.8% initial assessment) whereas approximately 10% never do this measurement and recording (initial assessment: 10%; reassessment: 9.1%).

Blood pressure is measured and recorded before a Strattera prescription for most or all; 83.1% and 84.0% of physicians for the reassessment and initial assessment, respectively.

As observed in the initial assessment, specialists scored better than GPs for each of the questions regarding adherence. Overall, adherence to SmPC warnings and precautions was maintained over time.

[Table 10](#) describes the physicians' awareness of the cardiovascular Strattera contraindications. Of the total physicians, 96.4% would, in line with latest recommendations, not prescribe Strattera when a patient has severe cardiovascular or cerebrovascular disorders whose conditions would be expected to deteriorate if they experience increases in blood pressure or heart rate that could be clinically important. This is very similar to the findings from the initial assessment (95.3%).

Eighty-four percent would not prescribe Strattera for a patient with pheochromocytoma.

The majority of both specialists and GPs (at least 65%) are aware of contraindications for prescribing Strattera.

The findings for each of these contraindications are very similar between the initial assessment and this reassessment.



**Table 10. Question Q3: Awareness of contraindications**

Green, bold frames tag correct answers

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>Q3: When would you not prescribe Strattera? When a patient has...</i>						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
Severe cardiovascular or cerebrovascular disorders whose conditions would be expected to deteriorate if they experience increases in blood pressure or heart rate that could be clinically important	<b>530 (96.4%)</b>	338 (96.6%)	192 (96.0%)	<b>715 (95.3%)</b>	528 (96.0%)	187 (93.5%)
Pheochromocytoma	<b>462 (84.0%)</b>	294 (84.0%)	168 (84.0%)	<b>641 (85.5%)</b>	477 (86.7%)	164 (82.0%)
Narrow angle glaucoma	<b>373 (67.8%)</b>	231 (66.0%)	142 (71.0%)	<b>490 (65.3%)</b>	359 (65.3%)	131 (65.5%)
Thyroid hormone replacement drug treatment	<b>140 (25.5%)</b>	83 (23.7%)	57 (28.5%)	<b>174 (23.2%)</b>	122 (22.2%)	52 (26.0%)
Comorbid tics	<b>114 (20.7%)</b>	55 (15.7%)	59 (29.5%)	<b>124 (16.5%)</b>	79 (14.4%)	45 (22.5%)
A history of febrile seizures	<b>102 (18.5%)</b>	59 (16.9%)	43 (21.5%)	<b>113 (15.1%)</b>	68 (12.4%)	45 (22.5%)
Mild and well controlled hypertension	<b>89 (16.2%)</b>	47 (13.4%)	42 (21.0%)	<b>102 (13.6%)</b>	69 (12.5%)	33 (16.5%)

Abbreviations: GP = general practitioners.

Table 11 shows physicians awareness of recommended patient monitoring actions and associated periodicity.

Approximately 49% of physicians reported that heart rate and blood pressure should be checked at each visit. Another 14% of physicians state that heart rate and blood pressure should be checked after each dose adjustment and then every 6 months, and 24.9% state that heart rate and blood pressure should be checked every 6 months.

Over half (51.5%; 59.7% of specialists and 37% of GPs) indicate that the patient should, at each visit, be checked for signs/symptoms for the development of new neurological signs/symptoms.

Over half (51.5%) of all physicians indicate that the patient should be checked for signs/symptoms of the development of new cardiovascular disorder or worsening of a pre-existing cardiovascular disorder at each visit. An additional 32.9% state this should be done every 6 months or after each dose adjustment and then every 6 months.

In the initial assessment 60.1% of all physicians were aware that Strattera treatment should be stopped for a while to reassess ADHD symptoms at least every 12 months. This question was evaluated and rephrased for the reassessment to align better with the SmPC language and when asked how often to reevaluate the need for continued therapy, 98.4% responded that they reassess ADHD symptoms at least every 12 months. This difference might be a result of the change in the wording of the question from “Stopping treatment for a while to reassess ADHD symptom” to “reevaluate the need for continued therapy.”

**Table 11. Question Q4: Recommended and performed time period of clinical practices (question asked to all physicians)**

Green, bold frames tag correct answers

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>Q4: Please indicate how often these clinical practices should be performed after Strattera is prescribed to a patient.</i>						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
<i>Checks of the heart rate and blood pressure</i>						
(1) At each visit	<b>267 (48.5%)</b>	190 (54.3%)	77 (38.5%)	<b>412 (54.9%)</b>	318 (57.8%)	94 (47.0%)
(2) Every 6 months	<b>137 (24.9%)</b>	78 (22.3%)	59 (29.5%)	<b>170 (22.7%)</b>	119 (21.6%)	51 (25.5%)
(3) Every 12 months	<b>40 (7.3%)</b>	15 (4.3%)	25 (12.5%)	<b>48 (6.4%)</b>	21 (3.8%)	27 (13.5%)
(4) After each dose adjustment and then every 6 months	<b>77 (14.0%)</b>	51 (14.6%)	26 (13.0%)	<b>88 (11.7%)</b>	72 (13.1%)	16 (8.0%)
(5) After each dose adjustment and then every 12 months	<b>21 (3.8%)</b>	12 (3.4%)	9 (4.5%)	<b>19 (2.5%)</b>	11 (2.0%)	8 (4.0%)
(6) None of these	<b>8 (1.5%)</b>	4 (1.1%)	4 (2.0%)	<b>13 (1.7%)</b>	9 (1.6%)	4 (2.0%)
<i>Check for signs/symptoms for the development of new neurologic signs/symptoms</i>						
(1) At each visit	<b>283 (51.5%)</b>	209 (59.7%)	74 (37.0%)	<b>391 (52.1%)</b>	312 (56.7%)	79 (39.5%)
(2) Every 6 months	<b>119 (21.6%)</b>	66 (18.9%)	53 (26.5%)	<b>153 (20.4%)</b>	103 (18.7%)	50 (25.0%)
(3) Every 12 months	<b>40 (7.3%)</b>	16 (4.6%)	24 (12.0%)	<b>72 (9.6%)</b>	43 (7.8%)	29 (14.5%)
(4) After each dose adjustment and then every 6 months	<b>56 (10.2%)</b>	30 (8.6%)	26 (13.0%)	<b>64 (8.5%)</b>	43 (7.8%)	21 (10.5%)

**Question Q4: Recommended and performed time period of clinical practices (question asked to all physicians) (continued)**

	<b>Reassessment</b>			<b>Initial Assessment</b>		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>Q4: Please indicate how often these clinical practices should be performed after Strattera is prescribed to a patient.</i>						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
<i>Check for signs/symptoms for the development of new neurologic signs/symptoms (concluded)</i>						
(5) After each dose adjustment and then every 12 months	<b>24 (4.4%)</b>	12 (3.4%)	12 (6.0%)	<b>27 (3.6%)</b>	17 (3.1%)	10 (5.0%)
(6) None of these	<b>28 (5.1%)</b>	17 (4.9%)	11 (5.5%)	<b>43 (5.7%)</b>	32 (5.8%)	11 (5.5%)
<i>Check for signs/symptoms of the development of new cardiovascular disorder or worsening of a pre-existing cardiovascular disorder</i>						
(1) At each visit	<b>283 (51.5%)</b>	209 (59.7%)	74 (37.0%)	<b>421 (56.1%)</b>	330 (60.0%)	91 (45.5%)
(2) Every 6 months	<b>112 (20.4%)</b>	62 (17.7%)	50 (25.0%)	<b>154 (20.5%)</b>	109 (19.8%)	45 (22.5%)
(3) Every 12 months	<b>50 (9.1%)</b>	22 (6.3%)	28 (14.0%)	<b>61 (8.1%)</b>	32 (5.8%)	29 (14.5%)
(4) After each dose adjustment and then every 6 months	<b>69 (12.5%)</b>	41 (11.7%)	28 (14.0%)	<b>68 (9.1%)</b>	51 (9.3%)	17 (8.5%)
(5) After each dose adjustment and then every 12 months	<b>27 (4.9%)</b>	14 (4.0%)	13 (6.5%)	<b>21 (2.8%)</b>	14 (2.5%)	7 (3.5%)
(6) None of these	<b>9 (1.6%)</b>	2 (0.6%)	7 (3.5%)	<b>25 (3.3%)</b>	14 (2.5%)	11 (5.5%)

**Question Q4: Recommended and performed time period of clinical practices (question asked to all physicians) (concluded)**

	Reassessment			Initial Assessment		
	Total n (%)	Specialist n (%)	GP n (%)	Total n (%)	Specialist n (%)	GP n (%)
<i>Q4: Please indicate how often these clinical practices should be performed after Strattera is prescribed to a patient.</i>						
<b>Total</b>	<b>550 (100%)</b>	<b>350 (100%)</b>	<b>200 (100%)</b>	<b>750 (100%)</b>	<b>550 (100%)</b>	<b>200 (100%)</b>
	<b><i>*Reevaluate the need for continued therapy</i></b>			<b><i>*Stopping treatment for a while to reassess ADHD symptoms</i></b>		
(1) At each visit	<b>233 (42.4%)</b>	161 (46.0%)	72 (36.0%)	<b>20 (2.7%)</b>	12 (2.2%)	8 (4.0%)
(2) Every 6 months	<b>147 (26.7%)</b>	85 (24.3%)	62 (31.0%)	<b>73 (9.7%)</b>	44 (8.0%)	29 (14.5%)
(3) Every 12 months	<b>55 (10.0%)</b>	30 (8.6%)	25 (12.5%)	<b>232 (30.9%)</b>	173 (31.5%)	59 (29.5%)
(4) After each dose adjustment and then every 6 months	<b>82 (14.9%)</b>	55 (15.7%)	27 (13.5%)	<b>57 (7.6%)</b>	42 (7.6%)	15 (7.5%)
(5) After each dose adjustment and then every 12 months	<b>24 (4.4%)</b>	14 (4.0%)	10 (5.0%)	<b>69 (9.2%)</b>	44 (8.0%)	25 (12.5%)
(6) None of these	<b>9 (1.6%)</b>	5 (1.4%)	4 (2.0%)	<b>299 (39.9%)</b>	235 (42.7%)	64 (32.0%)

Abbreviations: ADHD = attention deficit/hyperactivity disorder; GP = general practitioners.

\* This question was rephrased for the reassessment.

#### 10.4. Other analyses

Not applicable.

#### 10.5. Adverse events/adverse reactions

The survey was conducted via the Internet (online interviews). Respondents were recruited via email and/or phone. Adverse events and/or product complaints associated with Strattera could be reported while in conversation with the physician during the phone contact for recruitment purposes. If an adverse event and/or product complaint was mentioned, GfK or the GfK fieldwork associate was to document and to report the adverse event and/or product complaint according to Lilly's reporting requirements within the timeframe specified by Lilly.

No adverse events or product complaints were reported.

## 11. Discussion

### 11.1. Key results

Key summaries from the survey:

- 550 physicians participated in the study: 350 specialists and 200 GPs.
- 67.8% of the physicians in this reassessment compared to 72.7% of physicians in the initial survey prescribe Strattera or manage/monitor less than 25% of their ADHD patients on Strattera.
- More than 90% of physicians in this reassessment compared to 82.5% of physicians in the initial survey reported they were somewhat or very knowledgeable of the physician's guide.
- Approximately 75% of physicians in this reassessment compared to 58% of physicians in the initial survey reported that they somewhat or very knowledgeable of the checklist for actions to take before prescribing Strattera.
- Approximately 76% of physicians in this reassessment compared to 59% of physicians in the initial survey reported that they somewhat or very knowledgeable of the checklist for monitoring to manage cardiovascular risks.
- Approximately 96% of physicians in this reassessment compared to 95% of physicians in the initial survey would not prescribe Strattera for a patient with severe cardiovascular or cerebrovascular disorders whose conditions would be expected to deteriorate if they experience increases in blood pressure or heart rate that could be clinically important.
- 84% in this reassessment compared to 85.5% of physicians in the initial survey would not prescribe Strattera for a patient with pheochromocytoma.
- 67.8% in this reassessment compared to 65.3% of physicians in the initial survey would not prescribe Strattera for a patient with narrow angle glaucoma.
- Measurement and recording of heart rate and blood pressure are performed by 81.3% of physicians in this reassessment compared to 79.8% of physicians in the initial survey for most or all of their Strattera treated patients.
- A majority of physicians perform a cardiovascular risk assessment, 78.9% in this reassessment compared to 79.9% of physicians in the initial survey on most of their patients before prescribing Strattera.
- 69.1% of physicians in this reassessment compared to 68.6% of physicians in the initial survey perform a physical exam to assess for the presence of cardiac disease.
- There is a general decrease in use of the risk minimisation tools that are available upon request through local affiliates (see [Table 8](#)). Even though the use of tools has decreased, knowledge and awareness of cardiovascular risks and compliance with SmPC recommendations have been maintained over time.

Overall, the results between the initial survey and the reassessment were similar. The majority of physicians maintained awareness and knowledge, and practice in accordance with the cardiovascular/cerebrovascular contraindications, warnings and precautions. They are aware of and adhere to the recommendation to monitor blood pressure and heart rate in all patients at

baseline and during treatment with Strattera. In general, specialists were more knowledgeable of the content compared to general practitioners. For each of the tools 10% to 25% of participating physicians indicated they were not knowledgeable of the content this is compared to approximately 20% to 40% of participants in the initial assessment. Within this group the majority who were not knowledgeable of the content of the tools indicated they were not aware that the medical information was available.

## **11.2. Limitations**

The representativeness of an online survey may be biased because of the exclusion of internet nonusers. This potential limitation on this survey is negligible due to fact that there is an almost complete internet penetration among physicians in all involved countries. A limitation to the use of an online survey is that in order to project a favorable image and to avoid incorrect answers physicians may have searched the needed information on the internet; they may have used supportive materials. In addition, a potential limitation is that the survey methods did not take into account the number of participating physicians that have participated in both the initial assessment and the reassessment. Because there were several years between assessments, this should not have an impact on the findings.

## **11.3. Interpretation**

The objective of this survey was to reassess sustained knowledge and awareness of the risk messages provided by the risk minimisation tools and to reassess awareness and adherence to the changes in the SmPC requirements specific to cardiovascular risks and monitoring. Success was defined as the majority of physicians participating in the survey reporting that they are aware of and are prescribing Strattera in accordance with the cardiovascular/cerebrovascular contraindications, warnings and precautions, and the recommendation to monitor blood pressure and heart rate in all patients at baseline and during treatment with Strattera. The results of this reassessment show that the majority of physicians have maintained awareness and knowledge, and practice in accordance with the cardiovascular/cerebrovascular contraindications, warnings and precautions in the SmPC. Physicians are aware of and adhere to the recommendation to monitor blood pressure and heart rate in all patients at baseline and during treatment with Strattera, regardless of knowledge and use of the tools made available to them.

## **11.4. Generalisability**

The participating physicians are a sample of physicians in the EU that prescribe to or monitor/manage patients on Strattera. This sample should provide results that are generalisable to the population of physicians in the EU who prescribe Strattera and/or monitor patients being treated with Strattera.

## 12. Other information

As stated in this study's protocol, the original wave 1 risk minimisation effectiveness assessment survey conducted in 2012 included a total of 750 physicians (200 from Germany). A new German law, the Medicinal Products Act, The Drug Law, Section 67, requires the sponsor to provide competent higher federal authority, the Federal Association of Panel Doctors, the Central Federal Association of the health insurance funds, as well as the Association of Private Health Insurance Funds payers with a listing detailing each participating physician name, lifelong physician ID number, mailing and email address, and professional institution in advance of survey initiation. Because the methodology of this reassessment protocol is dependent upon candid and anonymous physician spontaneous responses to survey questions, the logistical requirement to contact each Germany physician twice to obtain a written contract outlining remuneration and inform the physician of the required payer disclosure, the sponsor does not believe responses from physicians in Germany would have been comparable to other countries without these requirements, nor comparable to wave 1 assessment responses from Germany. As a result, this wave 2 assessment did not include Germany because of the sponsor's concern that unbiased, comparable survey responses cannot be obtained from physicians in Germany as a result of this new German law. The total sample of physicians for this reassessment is 550, which included health care providers from Denmark, Sweden, the Netherlands, Spain, and the UK, and did not include 200 physicians from Germany. As this is a descriptive survey, a sample of 550 completed surveys is sufficient to measure maintenance of risk minimisation effectiveness and the reassessment results with the exclusion of Germany still provides meaningful results to assist in understanding the effectiveness of risk minimisation efforts.



### **13. Conclusion**

The results of this reassessment show that the majority of physicians have maintained awareness and knowledge, and practice in accordance with the cardiovascular/cerebrovascular contraindications, warnings, and precautions. Although use of the tools to assist in monitoring and managing blood pressure and heart rate to facilitate appropriate monitoring for cardiac and vascular safety during treatment decreased, physicians are aware of and adhere to the recommendation to monitor blood pressure and heart rate in all patients at baseline and during treatment with Strattera, indicating that core risk minimisation activities conducted so far, particularly appropriate labeling, are effective in managing these cardiovascular risks.

## 14. References

None.

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## **Annex 1. List of standalone documents**

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Not applicable.

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## Annex 2. Additional information

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### Strattera Risk Minimization Assessment Study Questionnaire

*Good morning / afternoon, Dr. ....*

GfK Health - an independent agency - is conducting a research study on behalf of Eli Lilly and Company, a pharmaceutical company who developed the medicinal product Strattera (atomoxetine) for the treatment of ADHD. The information obtained from this study will be used to assess the effectiveness of the important product safety information provided to prescribers and those who monitor patients on Strattera. We would appreciate your assistance in this important research study.

Please be assured that any information you give will be treated in confidence. This research conforms to the Data Protection Act, and any information you provide will be combined with responses received from other survey participants in order to provide an overall picture of views. Your identity will not be revealed to the company sponsoring this research. Aggregate results will be provided to regulatory agencies and the company sponsoring this research. This research doesn't involve any promotional material.

You have the right to withdraw from the study at any time during the survey process and to withhold information. Your answers will not affect your ability to prescribe Strattera. You will not be contacted for marketing purposes based on your answers to the survey. Neither the survey sponsor nor its contractors will sell or rent your information.

*Prog UK only*

We are required to pass on to our client, the company sponsoring this study, details of adverse events/product complaints that are mentioned during the course of market research. Although what you say will, of course, be treated in confidence, should you raise during the discussion an adverse event/product complaint in a specific patient or group of patients, we will need to report this even if it has already been reported by you directly to the company or the regulatory authorities using the MHRA's 'Yellow Card' system.

In such a situation you will be asked whether or not you are willing to waive confidentiality given to you under the Market Research Codes of conduct specifically in relation to that adverse event/product complaint. Everything else you say during the course of the survey will continue to remain confidential, and you will still have the option to remain anonymous if you so wish.

*Prog all*

Now we would like to ask you a few questions to ensure you qualify to complete the survey.

**Thank you!**

**A. Screening**

**S1** What is your primary medical specialty?

- (1) Child/Adolescent Psychiatrist
- (2) Other Non-Pediatricians Psychiatrist
- (3) Pediatrician
- (4) General Practitioner (GP)
- (5) Other, namely \_\_\_\_\_

➔ end if "(5)"

**S2** Are you currently employed or contracted by regulatory bodies (e.g. EMA or [UK: MHRA; add name of local regulatory agency], Lilly, or GfK Healthcare?

- (1) Yes ➔ end if "(1) yes"
- (2) No

**S3** Do you prescribe Strattera, or manage/monitor patients using Strattera?

- (1) Yes
- (2) No

➔ end if "no"

**S4** Do you typically....:

- (1) ... Both prescribe Strattera AND monitor patients taking Strattera
- (2) ... Only prescribe Strattera but NOT monitor patients taking Strattera
- (3) ... Only monitor patients who have already initiated Strattera treatment but NOT prescribe Strattera
- (4) .... Neither prescribe Strattera nor monitor patients taking Strattera

➔ end if #4 is selected

**Introduction**

Thank you for agreeing to participate in this study.

The survey should take up to a maximum of 10 minutes to complete.

You may receive compensation of [Please insert] which is commensurate with the time needed to complete this survey. You may also choose not to accept the monetary compensation.

We would be very grateful if you could spend these 10 minutes of your valuable time to assist in our understanding of the effectiveness of Strattera product literature.

***Prog all countries***

If you wish to contact us about this survey, please contact: \_\_\_\_\_

If you are interested in GfK's privacy policy, we will provide you with this information upon your request. GfK adheres to the official European Society for Opinion and Market Research (ESOMAR) code of conduct for market research:

<http://www.esomar.org/index.php/codes-guidelines.html>

***Prog UK only***

You are about to enter a market research survey.

We are required to pass on to our client, the company sponsoring this study, details of adverse events/product complaints that are mentioned during the course of market research. Although what you say will, of course, be treated in confidence, should you raise during the discussion an adverse event/product complaint in a specific patient or group of patients, we will need to report this even if it has already been reported by you directly to the company or the regulatory authorities using the MHRA's 'Yellow Card' system.

In such a situation you will be asked whether or not you are willing to waive confidentiality given to you under the Market Research Codes of conduct specifically in relation to that adverse event/product complaint. Everything else you say during the course of the survey will continue to remain confidential, and you will still have the option to remain anonymous if you so wish.

Are you happy to proceed with the survey on this basis?

- (1) Yes – **Proceed**
- (2) No – **Terminate**

"Please click the ""YES"" button, if you agree to participate in the survey.

***Prog all countries but UK***

You are about to enter a market research survey.

We are required to pass on to our client, the company sponsoring this study, details of adverse events/product complaints that are mentioned during the course of market research. Although what you say will, of course, be treated in confidence, should you raise during the discussion an adverse event/product complaint in a specific patient or group of patients, we will need to report this even if it has already been reported by you directly to the company or the regulatory authorities.

In such a situation you will be asked whether or not you are willing to waive confidentiality given to you under the Market Research Codes of conduct specifically in relation to that adverse event/product complaint. Everything else you say during the course of the survey will continue to remain confidential, and you will still have the option to remain anonymous if you so wish.

Are you happy to proceed with the survey on this basis?

- (1) Yes – **Proceed**
- (2) No – **Terminate**

***Prog all countries***

We ask you to consider completing this survey in one sitting. If you should need to interrupt and continue with the survey at a later stage, please be sure to click the original link you received for this survey and you will return to where you left off. Please note that you will not be able to go back to questions once you have submitted a response."

## Main Questionnaire

*Prog:*

- 1. Response time per question to be measured*
- 2. No back buttons*
- 3. , Netherlands; DENMARK: Address base split – first half of addresses for first wave; 2<sup>nd</sup> half for 2<sup>nd</sup> wave.*



**Q1** What percentage of your ADHD patients do you either prescribe Strattera and/or monitor on Strattera (atomoxetine)?

- (1) <25%
- (2) 25-50%
- (3) 51-75%
- (4) >75%

**Q2** Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.

*Prog: ~~Grid—please build 1 staple with items and another 4 staples per answer code...~~*

- (1) None (0%)
- (2) Some (less than 50%)
- (3) Most (50% or more but less than 100%)
- (4) All (100%)

*Do not Prog this comment: This section addresses adherence to SmPC warnings and precautions*

	Relevant steps before treatment	Response
Q2.1	Careful consideration of cardiovascular family medical history	
Q2.2	Comprehensive medical history of the patient's past and present co-morbid medical disorders or symptoms	
Q2.3	Check thyroid hormones with lab test	
Q2.4	Cardiovascular risk assessment (heart problems, heart defects, irregular heartbeat, high blood pressure, or low blood pressure)	
Q2.5	Physical examination to assess for the presence of cardiac disease.	
Q2.6	Check bone age on X-rays	
Q2.7	Measurement and recording of heart rate	
Q2.8	Measurement and recording of blood pressure	
Q2.9	Check testosterone and estradiol circulating levels	

\*Note: Relevant answers in green font

**Do not Prog this comment: This section addresses awareness of contraindications**

**Q3** When would you **not** prescribe Strattera?

*Please select all that apply*

		Response
Q3.	<b>When a patient has....</b>	
Q3.1	Pheochromocytoma	.
Q3.2	Severe cardiovascular or cerebrovascular disorders	<input type="checkbox"/>
Q3.3	Thyroid hormone replacement drug treatment	<input type="checkbox"/>
Q3.4	Mild and well controlled hypertension	<input type="checkbox"/>
Q3.5	A history of febrile seizures	<input type="checkbox"/>
Q3.6	Comorbid ties	<input type="checkbox"/>
Q3.7	Narrow angle glaucoma	<input type="checkbox"/>

\*Note: Correct answers in green font

**Q4** Please read the clinical practices described below. Please indicate how often these clinical practices should be performed after Strattera is prescribed to a patient?

*Prog: ask per medication. Build Grid*

*Do not prog: This section addresses awareness of the contents of the monitoring checklist for monitoring to manage CV risks with Strattera treatment*

- (1) At each visit
- (2) Every 6 months
- (3) Every 12 months
- (4) After each dose adjustment and then every 6 months
- (5) After each dose adjustment and then every 12 months
- (6) None of these

	<b>Actions taken</b>	<b>Strattera (atomoxetine)</b> <i>Prog: do not program this column</i>
Q4.1	Re-evaluate the need for continued therapy.	Every 12 months
Q4.2	Checks of the heart rate and blood pressure	After each dose adjustment and then every 6 months
Q4.3	Check for signs/symptoms for the development of new neurologic signs /symptoms	At each visit
Q4.4	Check for signs/symptoms of the development of new cardiovascular disorder or worsening of a pre-existing cardiovascular disorder	At each visit

## Awareness of RMP (Prog: do not show this headline)

**P1** Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.

*Prog: grid format*

*[Prog: Randomize order of items]*

- (1) Yes
- (2) No
- (3) Do not know

	Information	<i>Prog: do not program this column</i> Response
P1.1	There is a risk of increased blood pressure and increased heart rate with the use of Strattera	Y
P1.2	Strattera should not be used in patients with severe cardiovascular or cerebrovascular disorders	Y
P1.3	Strattera should be used with caution in patients whose underlying medical conditions could be worsened by increases of blood pressure or heart rate (e.g. patients with hypertension, tachycardia, or cardiovascular or cerebrovascular disease)	Y
P1.4	A baseline patient history and physical examination is needed to assess for the presence of cardiac disease before prescribing Strattera	Y
P1.5	Heart rate and blood pressure should be measured and recorded in all patients before the Strattera treatment / after each adjustment of dose	Y
P1.6	If Strattera patients develop symptoms suggestive of cardiac disease during treatment they should be referred for prompt specialist cardiac evaluation	Y
P1.7	Adverse reactions suspected to be associated with the use of Strattera should be reported via the national reporting system	Y
P1.8	Patients should be referred for specialist cardiac evaluation if initial findings suggest a history or presence of cardiac disease	Y
P1.9	Heart rate and blood pressure should be measured and recorded in all Strattera patients at least every 6 months during treatment	Y
P1.10	A checklist for actions to take before prescribing/dispensing or administering Strattera should be followed	Y
P1.11 a	If Strattera is considered, a detailed history and careful physical examination is needed to assess for the presence of cardiac disease of concomitant medications including past and present co-morbid medical disorders or symptoms	Y for all

P1.11 b	If Strattera is considered, a detailed history and careful physical examination is needed to assess for the presence of cardiac disease of concomitant medications including family history of sudden cardiac or unexplained death or malignant arrhythmia	Y for all
P1.11 c	If Strattera is considered, a detailed history and careful physical examination is needed to assess for the presence of cardiac disease of concomitant medications including physical examination is needed to assess for the presence of cardiac disease	Y for all
P1.12	It is not necessary to use Strattera cautiously with pressor agents or medications that may increase blood pressure	N
P1.13	A re-evaluation of the need for ADHD therapy is recommended when patients are continuing treatment with Strattera at 3 months.	N
P1.14	For patients receiving Strattera, a checklist for monitoring cardiovascular risks should be followed	Y
P1.15	Patients should be referred to further specialist evaluation if they develop new neurologic signs or symptoms	Y
P1.16	Patient should be referred for further specialist evaluation in the event the patient developed a new cardiovascular disorder or a worsening of a pre-existing cardiovascular disorder	Y
P1.17	Heart rate and blood pressure should be only measured by a cardiac specialist	N
P1.18	Before prescribing/dispensing or administering Strattera, an echocardiography is needed	N

We want to focus on your awareness of medical information regarding the treatment of ADHD patients with Strattera.

**P3** Please have a look at the following documents. In general, how knowledgeable are you with the content of the following medical information provided for **Strattera**? Please tick the answer that apply  
(Single answer per item)

*Prog: please show screenshot of these documents*

Medical Information	Response
<i>Physicians guide for assessing and monitoring cardiovascular risks when prescribing Strattera</i>	<input type="checkbox"/>
<i>Checklist for actions to take before prescribing/dispensing or administering Strattera</i>	<input type="checkbox"/>
<i>Checklist for monitoring to manage cardiovascular risks with Strattera treatment</i>	<input type="checkbox"/>
Measurements recording chart (for blood pressure and heart rate)	<input type="checkbox"/>

- (1) Not knowledgeable
- (2) Somewhat knowledgeable
- (3) Very knowledgeable

*Filter: Ask If awareness is “not knowledgeable” (Code 1) in P3 for Strattera*

P3\_A. Which statement best describes why you are not knowledgeable of the content of the following medical information provided for Strattera:

- (1) I was not aware this information is available
- (2) I am aware this information is available but do not remember the content

*Filter: Ask If awareness at least “somewhat knowledgeable” (Code 2-3) in P3 for Strattera*

*Prog: please show screenshot of these documents*

**P4.** What best describes your use of the following tools, provided to physicians, when prescribing Strattera or managing/monitoring treatment with Strattera?

<b>Tools</b>	<b>Response</b>
Physicians guide for assessing and monitoring cardiovascular risks when prescribing Strattera	<input type="checkbox"/>
Checklist for actions to take before prescribing/dispensing or administering Strattera	<input type="checkbox"/>
Checklist for monitoring to manage cardiovascular risks with Strattera treatment	<input type="checkbox"/>
Measurements recording chart (for blood pressure and heart rate)	<input type="checkbox"/>

- (1) Never use
- (2) Sometimes use
- (3) Frequently use
- (4) Always use

**>>All documents are available upon request via your local Lilly affiliate.<<**

## Demographics

### DEMOGRAPHICS

office-based, hospital-based physicians

Finally, we have some demographic questions about you. We will use this information for classification only.

#### General questions

A1. Gender

[1] male

[2] female

A4. What proportion of your time do you spend in the office practice and/or hospital?

A2. Year of birth (YYYY)

\_\_\_\_\_

\_\_\_\_\_ % in the office

\_\_\_\_\_ % in hospital

.....

Total = 100 %

A3. Region (please tick one box only)  
(country specific)

[UK]

(1) Greater London

(2) South East (Kent, Surrey,  
Sussex, Hampshire, Isle of  
Wight, Berks, Bucks,  
Oxfordshire, Northants)

(3) South West (Avon,  
Gloucestershire, Wiltshire,  
Somerset, Dorset, Devon,  
Cornwall, Isles of Scilly)

(4) Northern (Northumberland,  
Durham, Cleveland, North  
Yorkshire, West Yorkshire)

A5. When did you start working in your profession?

\_\_\_\_\_ (year)

A6. In addition to your indicated primary specialty, do you have a secondary specialty? If so please list:\_\_\_\_\_



Humberside)

(5) North West (Cumbria,  
Merseyside, Lancashire,  
Greater Manchester, Cheshire)

(6) West Midlands (Birmingham,  
Worcestershire, Warwickshire,  
Staffordshire, Shropshire)

(7) Trent (South Yorkshire,  
Nottinghamshire, Derbyshire,  
Lincolnshire, Rutland,  
Leicestershire)

(8) Eastern (Bedfordshire,  
Cambridgeshire, Essex,  
Hertfordshire, Norfolk, Suffolk)

(9) Wales

(10) Scotland

(11) Northern Ireland

[Spain]

(1) Andalucia

(2) Aragón

(3) Asturias

(4) Islas Baleares

(5) País Vasco

(6) Extremadura

(7) Galicia

(8) Islas Canarias

(9) Cantabria

- |      |                    |
|------|--------------------|
| (10) | Castilla La Mancha |
| (11) | Castilla León      |
| (12) | Cataluña           |
| (13) | La Rioja           |
| (14) | Madrid             |
| (15) | Murcia             |
| (16) | Navarra            |
| (17) | Valencia           |

[Sweden]

- (1) Götaland
- (2) Svealand
- (3) Norrland
- (4) Malmö
- (5) Göteborg
- (6) Stockholm

[Denmark]

- (1) Region Hovedstaden
- (2) Region Sjælland
- (3) Region Syddanmark
- (4) Region Midtjylland
- (5) Region Nordjylland

[NL]

- (1) Noord
- (2) Oost

(3) Midden
(4) Zuid
(5) West

*Prog: show for all:*

*Thank you very much for participating in this survey!*

*Prog: Spain only*

"LA EMPRESA asume el compromiso de informar a todos los profesionales sanitarios entrevistados en sus estudios, de la obligación por parte de los mismos de comunicar a las compañías oportunas, los posibles efectos adversos que pudiesen acaecer de sus productos, por motivos de fármaco-vigilancia"

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## **Annex 3. County-specific survey results**

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**Strattera Risk Management - Wave 2 - All countries / Lilly**

Overview on countries

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>UK</b>	200	100	100	-	-	-	-	-	-	-	-	-	-	-	-	200	100	100
	36.4	28.6	50.0	-	-	-	-	-	-	-	-	-	-	-	-	100.0	100.0	100.0
<b>Netherlands</b>	100	50	50	-	-	-	100	50	50	-	-	-	-	-	-	-	-	-
	18.2	14.3	25.0	-	-	-	100.0	100.0	100.0	-	-	-	-	-	-	-	-	-
<b>Denmark</b>	100	50	50	100	50	50	-	-	-	-	-	-	-	-	-	-	-	-
	18.2	14.3	25.0	100.0	100.0	100.0	-	-	-	-	-	-	-	-	-	-	-	-
<b>Sweden</b>	50	50	-	-	-	-	-	-	-	-	-	-	50	50	-	-	-	-
	9.1	14.3	-	-	-	-	-	-	-	-	-	-	100.0	100.0	-	-	-	-
<b>Spain</b>	100	100	-	-	-	-	-	-	-	100	100	-	-	-	-	-	-	-
	18.2	28.6	-	-	-	-	-	-	-	100.0	100.0	-	-	-	-	-	-	-
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Screening S1: What is your primary medical specialty?

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>(Precoded answers)</b>																		
<b>Child/Adolescent Psychiatrist</b>	78	78	-	10	10	-	15	15	-	24	24	-	8	8	-	21	21	-
	14.2	22.3	-	10.0	20.0	-	15.0	30.0	-	24.0	24.0	-	16.0	16.0	-	10.5	21.0	-
<b>Other Non-Pediatricians</b>	134	134	-	32	32	-	20	20	-	26	26	-	27	27	-	29	29	-
<b>Psychiatrist</b>	24.4	38.3	-	32.0	64.0	-	20.0	40.0	-	26.0	26.0	-	54.0	54.0	-	14.5	29.0	-
<b>Pediatrician</b>	138	138	-	8	8	-	15	15	-	50	50	-	15	15	-	50	50	-
	25.1	39.4	-	8.0	16.0	-	15.0	30.0	-	50.0	50.0	-	30.0	30.0	-	25.0	50.0	-
<b>General Practitioner (GP)</b>	200	-	200	50	-	50	50	-	50	-	-	-	-	-	-	100	-	100
	36.4	-	100.0	50.0	-	100.0	50.0	-	100.0	-	-	-	-	-	-	50.0	-	100.0
<b>Other</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Screening S2: Are you currently employed or contracted by regulatory bodies (e.g. EMA or MHRA), Lilly, or GfK Healthcare?

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>No</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Screening S3: Do you prescribe Strattera, or manage/monitor patients using Strattera?

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0
<b>No</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0



**Strattera Risk Management - Wave 2 - All countries / Lilly**

Screening S4: Do you typically ...

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Both prescribe Strattera AND monitor patients taking Strattera</b>	409 74.4	305 87.1	104 52.0	69 69.0	45 90.0	24 48.0	71 71.0	44 88.0	27 54.0	85 85.0	85 85.0	-	45 90.0	45 90.0	-	139 69.5	86 86.0	53 53.0
<b>Only prescribe Strattera but NOT monitor patients taking Strattera</b>	35 6.4	11 3.1	24 12.0	2 2.0	1 2.0	1 2.0	11 11.0	3 6.0	8 16.0	2 2.0	2 2.0	-	2 4.0	2 4.0	-	18 9.0	3 3.0	15 15.0
<b>Only monitor patients who have already initiated Strattera treatment but NOT prescribe Strattera</b>	106 19.3	34 9.7	72 36.0	29 29.0	4 8.0	25 50.0	18 18.0	3 6.0	15 30.0	13 13.0	13 13.0	-	3 6.0	3 6.0	-	43 21.5	11 11.0	32 32.0
<b>Neither prescribe Strattera nor monitor patients taking Strattera</b>	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	-	- -	- -	-	- -	- -	- -
<b>N/A</b>	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	-	- -	- -	-	- -	- -	- -
<b>Total</b>	550 100.0	350 100.0	200 100.0	100 100.0	50 100.0	50 100.0	100 100.0	50 100.0	50 100.0	100 100.0	100 100.0	-	50 100.0	50 100.0	-	200 100.0	100 100.0	100 100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q0: Are you happy to proceed with the survey on this basis?



Subsample: UK only

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	200	100	100	-	-	-	-	-	-	-	-	-	-	-	-	200	100	100
<b>(Precoded answers)</b>																		
<b>Yes</b>	200	100	100	-	-	-	-	-	-	-	-	-	-	-	-	200	100	100
<b>No</b>	100.0	100.0	100.0	-	-	-	-	-	-	-	-	-	-	-	-	100.0	100.0	100.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	200	100	100	-	-	-	-	-	-	-	-	-	-	-	-	200	100	100
	100.0	100.0	100.0	-	-	-	-	-	-	-	-	-	-	-	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q00: Are you happy to proceed with the survey on this basis?

Subsample: Not in UK

**Base ( 100% )**  
**(Precoded answers)****Yes****No****N/A****Total**

All countries			Denmark			Netherlands			Spain			Sweden			UK		
Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
350	250	100	100	50	50	100	50	50	100	100	-	50	50	-	-	-	-
350	250	100	100	50	50	100	50	50	100	100	-	50	50	-	-	-	-
100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
350	250	100	100	50	50	100	50	50	100	100	-	50	50	-	-	-	-
100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	-	-	-

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q1: What percentage of your ADHD patients do you either prescribe Strattera and/or monitor on Strattera (atomoxetine)?

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>&lt;25%</b>	373	238	135	55	28	27	84	45	39	67	67	-	30	30	-	137	68	69
	67.8	68.0	67.5	55.0	56.0	54.0	84.0	90.0	78.0	67.0	67.0	-	60.0	60.0	-	68.5	68.0	69.0
<b>25-50%</b>	136	88	48	31	17	14	15	5	10	24	24	-	18	18	-	48	24	24
	24.7	25.1	24.0	31.0	34.0	28.0	15.0	10.0	20.0	24.0	24.0	-	36.0	36.0	-	24.0	24.0	24.0
<b>51-75%</b>	28	15	13	8	1	7	1	-	1	8	8	-	1	1	-	10	5	5
	5.1	4.3	6.5	8.0	2.0	14.0	1.0	-	2.0	8.0	8.0	-	2.0	2.0	-	5.0	5.0	5.0
<b>&gt;75%</b>	13	9	4	6	4	2	-	-	-	1	1	-	1	1	-	5	3	2
	2.4	2.6	2.0	6.0	8.0	4.0	-	-	-	1.0	1.0	-	2.0	2.0	-	2.5	3.0	2.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.  
Careful consideration of cardiovascular family medical history

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None ( 0% )</b>	50	18	32	8	2	6	9	4	5	6	6	-	3	3	-	24	3	21
	9.1	5.1	16.0	8.0	4.0	12.0	9.0	8.0	10.0	6.0	6.0	-	6.0	6.0	-	12.0	3.0	21.0
<b>Some ( less than 50% )</b>	80	44	36	16	5	11	20	8	12	15	15	-	6	6	-	23	10	13
	14.5	12.6	18.0	16.0	10.0	22.0	20.0	16.0	24.0	15.0	15.0	-	12.0	12.0	-	11.5	10.0	13.0
<b>Most ( 50% or more but less than 100% )</b>	141	86	55	30	14	16	21	9	12	37	37	-	6	6	-	47	20	27
	25.6	24.6	27.5	30.0	28.0	32.0	21.0	18.0	24.0	37.0	37.0	-	12.0	12.0	-	23.5	20.0	27.0
<b>All ( 100% )</b>	279	202	77	46	29	17	50	29	21	42	42	-	35	35	-	106	67	39
	50.7	57.7	38.5	46.0	58.0	34.0	50.0	58.0	42.0	42.0	42.0	-	70.0	70.0	-	53.0	67.0	39.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.  
Comprehensive medical history of the patient's past and present co-morbid medical disorders or symptoms

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None ( 0% )</b>	38	10	28	7	1	6	8	4	4	2	2	-	3	3	-	18	-	18
	6.9	2.9	14.0	7.0	2.0	12.0	8.0	8.0	8.0	2.0	2.0	-	6.0	6.0	-	9.0	-	18.0
<b>Some ( less than 50% )</b>	51	21	30	14	3	11	16	6	10	3	3	-	5	5	-	13	4	9
	9.3	6.0	15.0	14.0	6.0	22.0	16.0	12.0	20.0	3.0	3.0	-	10.0	10.0	-	6.5	4.0	9.0
<b>Most ( 50% or more but less than 100% )</b>	127	68	59	28	12	16	23	10	13	25	25	-	6	6	-	45	15	30
	23.1	19.4	29.5	28.0	24.0	32.0	23.0	20.0	26.0	25.0	25.0	-	12.0	12.0	-	22.5	15.0	30.0
<b>All ( 100% )</b>	334	251	83	51	34	17	53	30	23	70	70	-	36	36	-	124	81	43
	60.7	71.7	41.5	51.0	68.0	34.0	53.0	60.0	46.0	70.0	70.0	-	72.0	72.0	-	62.0	81.0	43.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.  
Check thyroid hormones with lab test

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None ( 0% )</b>	147	92	55	24	15	9	31	20	11	10	10	-	12	12	-	70	35	35
	26.7	26.3	27.5	24.0	30.0	18.0	31.0	40.0	22.0	10.0	10.0	-	24.0	24.0	-	35.0	35.0	35.0
<b>Some ( less than 50% )</b>	133	86	47	29	16	13	35	16	19	23	23	-	13	13	-	33	18	15
	24.2	24.6	23.5	29.0	32.0	26.0	35.0	32.0	38.0	23.0	23.0	-	26.0	26.0	-	16.5	18.0	15.0
<b>Most ( 50% or more but less than 100% )</b>	141	83	58	18	5	13	23	10	13	36	36	-	6	6	-	58	26	32
	25.6	23.7	29.0	18.0	10.0	26.0	23.0	20.0	26.0	36.0	36.0	-	12.0	12.0	-	29.0	26.0	32.0
<b>All ( 100% )</b>	129	89	40	29	14	15	11	4	7	31	31	-	19	19	-	39	21	18
	23.5	25.4	20.0	29.0	28.0	30.0	11.0	8.0	14.0	31.0	31.0	-	38.0	38.0	-	19.5	21.0	18.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.  
Cardiovascular risk assessment (heart problems, heart defects, irregular heartbeat, high blood pressure, or low blood pressure)

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None ( 0% )</b>	38	9	29	6	-	6	5	2	3	2	2	-	1	1	-	24	4	20
	6.9	2.6	14.5	6.0	-	12.0	5.0	4.0	6.0	2.0	2.0	-	2.0	2.0	-	12.0	4.0	20.0
<b>Some ( less than 50% )</b>	78	43	35	11	3	8	25	12	13	13	13	-	3	3	-	26	12	14
	14.2	12.3	17.5	11.0	6.0	16.0	25.0	24.0	26.0	13.0	13.0	-	6.0	6.0	-	13.0	12.0	14.0
<b>Most ( 50% or more but less than 100% )</b>	141	92	49	25	9	16	25	13	12	39	39	-	8	8	-	44	23	21
	25.6	26.3	24.5	25.0	18.0	32.0	25.0	26.0	24.0	39.0	39.0	-	16.0	16.0	-	22.0	23.0	21.0
<b>All ( 100% )</b>	293	206	87	58	38	20	45	23	22	46	46	-	38	38	-	106	61	45
	53.3	58.9	43.5	58.0	76.0	40.0	45.0	46.0	44.0	46.0	46.0	-	76.0	76.0	-	53.0	61.0	45.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0



**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.  
Physical examination to assess for the presence of cardiac disease

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None ( 0% )</b>	77	43	34	12	6	6	21	15	6	7	7	-	4	4	-	33	11	22
	14.0	12.3	17.0	12.0	12.0	12.0	21.0	30.0	12.0	7.0	7.0	-	8.0	8.0	-	16.5	11.0	22.0
<b>Some ( less than 50% )</b>	93	57	36	20	11	9	27	13	14	19	19	-	7	7	-	20	7	13
	16.9	16.3	18.0	20.0	22.0	18.0	27.0	26.0	28.0	19.0	19.0	-	14.0	14.0	-	10.0	7.0	13.0
<b>Most ( 50% or more but less than 100% )</b>	123	73	50	26	8	18	18	7	11	27	27	-	7	7	-	45	24	21
	22.4	20.9	25.0	26.0	16.0	36.0	18.0	14.0	22.0	27.0	27.0	-	14.0	14.0	-	22.5	24.0	21.0
<b>All ( 100% )</b>	257	177	80	42	25	17	34	15	19	47	47	-	32	32	-	102	58	44
	46.7	50.6	40.0	42.0	50.0	34.0	34.0	30.0	38.0	47.0	47.0	-	64.0	64.0	-	51.0	58.0	44.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.  
Check bone age on X-rays

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None ( 0% )</b>	365	238	127	79	45	34	73	40	33	48	48	-	39	39	-	126	66	60
	66.4	68.0	63.5	79.0	90.0	68.0	73.0	80.0	66.0	48.0	48.0	-	78.0	78.0	-	63.0	66.0	60.0
<b>Some ( less than 50% )</b>	113	64	49	17	5	12	21	10	11	24	24	-	7	7	-	44	18	26
	20.5	18.3	24.5	17.0	10.0	24.0	21.0	20.0	22.0	24.0	24.0	-	14.0	14.0	-	22.0	18.0	26.0
<b>Most ( 50% or more but less than 100% )</b>	51	34	17	3	-	3	5	-	5	21	21	-	2	2	-	20	11	9
	9.3	9.7	8.5	3.0	-	6.0	5.0	-	10.0	21.0	21.0	-	4.0	4.0	-	10.0	11.0	9.0
<b>All ( 100% )</b>	21	14	7	1	-	1	1	-	1	7	7	-	2	2	-	10	5	5
	3.8	4.0	3.5	1.0	-	2.0	1.0	-	2.0	7.0	7.0	-	4.0	4.0	-	5.0	5.0	5.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.  
Measurement and recording of heart rate

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None ( 0% )</b>	50	21	29	8	2	6	11	6	5	6	6	-	3	3	-	22	4	18
	9.1	6.0	14.5	8.0	4.0	12.0	11.0	12.0	10.0	6.0	6.0	-	6.0	6.0	-	11.0	4.0	18.0
<b>Some ( less than 50% )</b>	53	30	23	12	3	9	15	7	8	11	11	-	3	3	-	12	6	6
	9.6	8.6	11.5	12.0	6.0	18.0	15.0	14.0	16.0	11.0	11.0	-	6.0	6.0	-	6.0	6.0	6.0
<b>Most ( 50% or more but less than 100% )</b>	120	70	50	19	7	12	25	12	13	30	30	-	6	6	-	40	15	25
	21.8	20.0	25.0	19.0	14.0	24.0	25.0	24.0	26.0	30.0	30.0	-	12.0	12.0	-	20.0	15.0	25.0
<b>All ( 100% )</b>	327	229	98	61	38	23	49	25	24	53	53	-	38	38	-	126	75	51
	59.5	65.4	49.0	61.0	76.0	46.0	49.0	50.0	48.0	53.0	53.0	-	76.0	76.0	-	63.0	75.0	51.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.  
Measurement and recording of blood pressure

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None ( 0% )</b>	37	13	24	6	2	4	6	3	3	5	5	-	2	2	-	18	1	17
	6.7	3.7	12.0	6.0	4.0	8.0	6.0	6.0	6.0	5.0	5.0	-	4.0	4.0	-	9.0	1.0	17.0
<b>Some ( less than 50% )</b>	56	31	25	11	3	8	16	8	8	12	12	-	3	3	-	14	5	9
	10.2	8.9	12.5	11.0	6.0	16.0	16.0	16.0	16.0	12.0	12.0	-	6.0	6.0	-	7.0	5.0	9.0
<b>Most ( 50% or more but less than 100% )</b>	116	68	48	20	6	14	24	11	13	33	33	-	2	2	-	37	16	21
	21.1	19.4	24.0	20.0	12.0	28.0	24.0	22.0	26.0	33.0	33.0	-	4.0	4.0	-	18.5	16.0	21.0
<b>All ( 100% )</b>	341	238	103	63	39	24	54	28	26	50	50	-	43	43	-	131	78	53
	62.0	68.0	51.5	63.0	78.0	48.0	54.0	56.0	52.0	50.0	50.0	-	86.0	86.0	-	65.5	78.0	53.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q2: Please state the percentage (%) of Strattera patients for whom you carry out the following examinations prior to initiating treatment (prescribing) Strattera.  
Check testosterone and estradiol circulating levels

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None ( 0% )</b>	364	245	119	76	45	31	76	42	34	51	51	-	41	41	-	120	66	54
	66.2	70.0	59.5	76.0	90.0	62.0	76.0	84.0	68.0	51.0	51.0	-	82.0	82.0	-	60.0	66.0	54.0
<b>Some ( less than 50% )</b>	128	70	58	19	5	14	20	8	12	30	30	-	6	6	-	53	21	32
	23.3	20.0	29.0	19.0	10.0	28.0	20.0	16.0	24.0	30.0	30.0	-	12.0	12.0	-	26.5	21.0	32.0
<b>Most ( 50% or more but less than 100% )</b>	45	28	17	4	-	4	4	-	4	16	16	-	-	-	-	21	12	9
	8.2	8.0	8.5	4.0	-	8.0	4.0	-	8.0	16.0	16.0	-	-	-	-	10.5	12.0	9.0
<b>All ( 100% )</b>	13	7	6	1	-	1	-	-	-	3	3	-	3	3	-	6	1	5
	2.4	2.0	3.0	1.0	-	2.0	-	-	-	3.0	3.0	-	6.0	6.0	-	3.0	1.0	5.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q3: When would you not prescribe Strattera? Please select all that apply. When a patient has...

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Pheochromocytoma</b>	462	294	168	77	35	42	86	43	43	90	90	-	43	43	-	166	83	83
	84.0	84.0	84.0	77.0	70.0	84.0	86.0	86.0	86.0	90.0	90.0	-	86.0	86.0	-	83.0	83.0	83.0
<b>Severe cardiovascular or cerebrovascular disorders</b>	530	338	192	98	49	49	99	49	50	95	95	-	47	47	-	191	98	93
	96.4	96.6	96.0	98.0	98.0	98.0	99.0	98.0	100.0	95.0	95.0	-	94.0	94.0	-	95.5	98.0	93.0
<b>Thyroid hormone replacement drug treatment</b>	140	83	57	22	8	14	32	10	22	30	30	-	7	7	-	49	28	21
	25.5	23.7	28.5	22.0	16.0	28.0	32.0	20.0	44.0	30.0	30.0	-	14.0	14.0	-	24.5	28.0	21.0
<b>Mild and well controlled hypertension</b>	89	47	42	9	4	5	13	3	10	22	22	-	4	4	-	41	14	27
	16.2	13.4	21.0	9.0	8.0	10.0	13.0	6.0	20.0	22.0	22.0	-	8.0	8.0	-	20.5	14.0	27.0
<b>A history of febrile seizures</b>	102	59	43	11	6	5	18	6	12	24	24	-	5	5	-	44	18	26
	18.5	16.9	21.5	11.0	12.0	10.0	18.0	12.0	24.0	24.0	24.0	-	10.0	10.0	-	22.0	18.0	26.0
<b>Comorbid tics</b>	114	55	59	18	9	9	28	7	21	15	15	-	3	3	-	50	21	29
	20.7	15.7	29.5	18.0	18.0	18.0	28.0	14.0	42.0	15.0	15.0	-	6.0	6.0	-	25.0	21.0	29.0
<b>Narrow angle glaucoma</b>	373	231	142	65	27	38	75	35	40	71	71	-	37	37	-	125	61	64
	67.8	66.0	71.0	65.0	54.0	76.0	75.0	70.0	80.0	71.0	71.0	-	74.0	74.0	-	62.5	61.0	64.0
<b>N/A</b>	4	2	2	-	-	-	-	-	-	-	-	-	2	2	-	2	-	2
	0.7	0.6	1.0	-	-	-	-	-	-	-	-	-	4.0	4.0	-	1.0	-	2.0
<b>Total</b>	1814	1109	705	300	138	162	351	153	198	347	347	-	148	148	-	668	323	345
	329.8	316.9	352.5	300.0	276.0	324.0	351.0	306.0	396.0	347.0	347.0	-	296.0	296.0	-	334.0	323.0	345.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q4: Please read the clinical practices described below. Please indicate how often these clinical practices should be performed after Strattera is prescribed to a patient?  
Re-evaluate the need for continued therapy

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>(Precoded answers)</b>																		
<b>1) At each visit</b>	233	161	72	35	23	12	43	27	16	39	39	-	26	26	-	90	46	44
	42.4	46.0	36.0	35.0	46.0	24.0	43.0	54.0	32.0	39.0	39.0	-	52.0	52.0	-	45.0	46.0	44.0
<b>2) Every 6 months</b>	147	85	62	23	9	14	29	12	17	26	26	-	11	11	-	58	27	31
	26.7	24.3	31.0	23.0	18.0	28.0	29.0	24.0	34.0	26.0	26.0	-	22.0	22.0	-	29.0	27.0	31.0
<b>3) Every 12 months</b>	55	30	25	24	11	13	3	-	3	6	6	-	3	3	-	19	10	9
	10.0	8.6	12.5	24.0	22.0	26.0	3.0	-	6.0	6.0	6.0	-	6.0	6.0	-	9.5	10.0	9.0
<b>4) After each dose adjustment and then every 6 months</b>	82	55	27	10	3	7	18	9	9	23	23	-	8	8	-	23	12	11
	14.9	15.7	13.5	10.0	6.0	14.0	18.0	18.0	18.0	23.0	23.0	-	16.0	16.0	-	11.5	12.0	11.0
<b>5) After each dose adjustment and then every 12 months</b>	24	14	10	6	2	4	6	2	4	4	4	-	1	1	-	7	5	2
	4.4	4.0	5.0	6.0	4.0	8.0	6.0	4.0	8.0	4.0	4.0	-	2.0	2.0	-	3.5	5.0	2.0
<b>6) None of these</b>	9	5	4	2	2	-	1	-	1	2	2	-	1	1	-	3	-	3
	1.6	1.4	2.0	2.0	4.0	-	1.0	-	2.0	2.0	2.0	-	2.0	2.0	-	1.5	-	3.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q4: Please read the clinical practices described below. Please indicate how often these clinical practices should be performed after Strattera is prescribed to a patient?  
Checks of the heart rate and blood pressure

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>(Precoded answers)</b>																		
<b>1) At each visit</b>	267	190	77	34	19	15	39	20	19	62	62	-	26	26	-	106	63	43
	48.5	54.3	38.5	34.0	38.0	30.0	39.0	40.0	38.0	62.0	62.0	-	52.0	52.0	-	53.0	63.0	43.0
<b>2) Every 6 months</b>	137	78	59	28	14	14	31	13	18	22	22	-	7	7	-	49	22	27
	24.9	22.3	29.5	28.0	28.0	28.0	31.0	26.0	36.0	22.0	22.0	-	14.0	14.0	-	24.5	22.0	27.0
<b>3) Every 12 months</b>	40	15	25	15	5	10	3	2	1	4	4	-	2	2	-	16	2	14
	7.3	4.3	12.5	15.0	10.0	20.0	3.0	4.0	2.0	4.0	4.0	-	4.0	4.0	-	8.0	2.0	14.0
<b>4) After each dose adjustment and then every 6 months</b>	77	51	26	15	8	7	19	12	7	8	8	-	10	10	-	25	13	12
	14.0	14.6	13.0	15.0	16.0	14.0	19.0	24.0	14.0	8.0	8.0	-	20.0	20.0	-	12.5	13.0	12.0
<b>5) After each dose adjustment and then every 12 months</b>	21	12	9	6	2	4	6	3	3	2	2	-	5	5	-	2	-	2
	3.8	3.4	4.5	6.0	4.0	8.0	6.0	6.0	6.0	2.0	2.0	-	10.0	10.0	-	1.0	-	2.0
<b>6) None of these</b>	8	4	4	2	2	-	2	-	2	2	2	-	-	-	-	2	-	2
	1.5	1.1	2.0	2.0	4.0	-	2.0	-	4.0	2.0	2.0	-	-	-	-	1.0	-	2.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0



**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q4: Please read the clinical practices described below. Please indicate how often these clinical practices should be performed after Strattera is prescribed to a patient?  
Check for signs/symptoms for the development of new neurologic signs/symptoms

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>(Precoded answers)</b>																		
<b>1) At each visit</b>	283	209	74	43	23	20	43	25	18	74	74	-	31	31	-	92	56	36
	51.5	59.7	37.0	43.0	46.0	40.0	43.0	50.0	36.0	74.0	74.0	-	62.0	62.0	-	46.0	56.0	36.0
<b>2) Every 6 months</b>	119	66	53	19	10	9	26	10	16	15	15	-	8	8	-	51	23	28
	21.6	18.9	26.5	19.0	20.0	18.0	26.0	20.0	32.0	15.0	15.0	-	16.0	16.0	-	25.5	23.0	28.0
<b>3) Every 12 months</b>	40	16	24	11	4	7	6	3	3	2	2	-	3	3	-	18	4	14
	7.3	4.6	12.0	11.0	8.0	14.0	6.0	6.0	6.0	2.0	2.0	-	6.0	6.0	-	9.0	4.0	14.0
<b>4) After each dose adjustment and then every 6 months</b>	56	30	26	9	2	7	11	5	6	7	7	-	3	3	-	26	13	13
	10.2	8.6	13.0	9.0	4.0	14.0	11.0	10.0	12.0	7.0	7.0	-	6.0	6.0	-	13.0	13.0	13.0
<b>5) After each dose adjustment and then every 12 months</b>	24	12	12	7	2	5	7	4	3	2	2	-	3	3	-	5	1	4
	4.4	3.4	6.0	7.0	4.0	10.0	7.0	8.0	6.0	2.0	2.0	-	6.0	6.0	-	2.5	1.0	4.0
<b>6) None of these</b>	28	17	11	11	9	2	7	3	4	-	-	-	2	2	-	8	3	5
	5.1	4.9	5.5	11.0	18.0	4.0	7.0	6.0	8.0	-	-	-	4.0	4.0	-	4.0	3.0	5.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question Q4: Please read the clinical practices described below. Please indicate how often these clinical practices should be performed after Strattera is prescribed to a patient?

Check for signs/symptoms of the development of new cardiovascular disorder or worsening of a pre-existing cardiovascular disorder

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>(Precoded answers)</b>																		
<b>1) At each visit</b>	283	209	74	39	24	15	43	25	18	73	73	-	31	31	-	97	56	41
	51.5	59.7	37.0	39.0	48.0	30.0	43.0	50.0	36.0	73.0	73.0	-	62.0	62.0	-	48.5	56.0	41.0
<b>2) Every 6 months</b>	112	62	50	24	12	12	21	7	14	13	13	-	6	6	-	48	24	24
	20.4	17.7	25.0	24.0	24.0	24.0	21.0	14.0	28.0	13.0	13.0	-	12.0	12.0	-	24.0	24.0	24.0
<b>3) Every 12 months</b>	50	22	28	13	4	9	10	4	6	5	5	-	4	4	-	18	5	13
	9.1	6.3	14.0	13.0	8.0	18.0	10.0	8.0	12.0	5.0	5.0	-	8.0	8.0	-	9.0	5.0	13.0
<b>4) After each dose adjustment and then every 6 months</b>	69	41	28	13	5	8	16	10	6	9	9	-	4	4	-	27	13	14
	12.5	11.7	14.0	13.0	10.0	16.0	16.0	20.0	12.0	9.0	9.0	-	8.0	8.0	-	13.5	13.0	14.0
<b>5) After each dose adjustment and then every 12 months</b>	27	14	13	9	4	5	8	4	4	-	-	-	5	5	-	5	1	4
	4.9	4.0	6.5	9.0	8.0	10.0	8.0	8.0	8.0	-	-	-	10.0	10.0	-	2.5	1.0	4.0
<b>6) None of these</b>	9	2	7	2	1	1	2	-	2	-	-	-	-	-	-	5	1	4
	1.6	0.6	3.5	2.0	2.0	2.0	2.0	-	4.0	-	-	-	-	-	-	2.5	1.0	4.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
There is a risk of increased blood pressure and increased heart rate with the use of Strattera

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	502	323	179	91	49	42	89	44	45	89	89	-	47	47	-	186	94	92
	91.3	92.3	89.5	91.0	98.0	84.0	89.0	88.0	90.0	89.0	89.0	-	94.0	94.0	-	93.0	94.0	92.0
<b>No</b>	17	14	3	1	1	-	2	2	-	8	8	-	2	2	-	4	1	3
	3.1	4.0	1.5	1.0	2.0	-	2.0	4.0	-	8.0	8.0	-	4.0	4.0	-	2.0	1.0	3.0
<b>Do not know</b>	31	13	18	8	-	8	9	4	5	3	3	-	1	1	-	10	5	5
	5.6	3.7	9.0	8.0	-	16.0	9.0	8.0	10.0	3.0	3.0	-	2.0	2.0	-	5.0	5.0	5.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
Strattera should not be used in patients with severe cardiovascular or cerebrovascular disorders

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	496	314	182	91	47	44	86	40	46	96	96	-	42	42	-	181	89	92
	90.2	89.7	91.0	91.0	94.0	88.0	86.0	80.0	92.0	96.0	96.0	-	84.0	84.0	-	90.5	89.0	92.0
<b>No</b>	25	20	5	3	2	1	8	6	2	3	3	-	5	5	-	6	4	2
	4.5	5.7	2.5	3.0	4.0	2.0	8.0	12.0	4.0	3.0	3.0	-	10.0	10.0	-	3.0	4.0	2.0
<b>Do not know</b>	29	16	13	6	1	5	6	4	2	1	1	-	3	3	-	13	7	6
	5.3	4.6	6.5	6.0	2.0	10.0	6.0	8.0	4.0	1.0	1.0	-	6.0	6.0	-	6.5	7.0	6.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
Strattera should be used with caution in patients whose underlying medical conditions could be worsened by increases of blood pressure or heart rate

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	516	335	181	92	47	45	95	49	46	98	98	-	44	44	-	187	97	90
	93.8	95.7	90.5	92.0	94.0	90.0	95.0	98.0	92.0	98.0	98.0	-	88.0	88.0	-	93.5	97.0	90.0
<b>No</b>	15	10	5	3	3	-	1	1	-	1	1	-	4	4	-	6	1	5
	2.7	2.9	2.5	3.0	6.0	-	1.0	2.0	-	1.0	1.0	-	8.0	8.0	-	3.0	1.0	5.0
<b>Do not know</b>	19	5	14	5	-	5	4	-	4	1	1	-	2	2	-	7	2	5
	3.5	1.4	7.0	5.0	-	10.0	4.0	-	8.0	1.0	1.0	-	4.0	4.0	-	3.5	2.0	5.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
A baseline patient history and physical examination is needed to assess for the presence of cardiac disease before prescribing Strattera

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Pre-coded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	503	327	176	91	46	45	88	44	44	96	96	-	46	46	-	182	95	87
	91.5	93.4	88.0	91.0	92.0	90.0	88.0	88.0	88.0	96.0	96.0	-	92.0	92.0	-	91.0	95.0	87.0
<b>No</b>	24	13	11	3	2	1	8	4	4	3	3	-	3	3	-	7	1	6
	4.4	3.7	5.5	3.0	4.0	2.0	8.0	8.0	8.0	3.0	3.0	-	6.0	6.0	-	3.5	1.0	6.0
<b>Do not know</b>	23	10	13	6	2	4	4	2	2	1	1	-	1	1	-	11	4	7
	4.2	2.9	6.5	6.0	4.0	8.0	4.0	4.0	4.0	1.0	1.0	-	2.0	2.0	-	5.5	4.0	7.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
Heart rate and blood pressure should be measured and recorded in all patients before the Strattera treatment/after each adjustment of dose

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	509	331	178	92	47	45	93	46	47	94	94	-	47	47	-	183	97	86
	92.5	94.6	89.0	92.0	94.0	90.0	93.0	92.0	94.0	94.0	94.0	-	94.0	94.0	-	91.5	97.0	86.0
<b>No</b>	16	11	5	3	3	-	3	1	2	5	5	-	2	2	-	3	-	3
	2.9	3.1	2.5	3.0	6.0	-	3.0	2.0	4.0	5.0	5.0	-	4.0	4.0	-	1.5	-	3.0
<b>Do not know</b>	25	8	17	5	-	5	4	3	1	1	1	-	1	1	-	14	3	11
	4.5	2.3	8.5	5.0	-	10.0	4.0	6.0	2.0	1.0	1.0	-	2.0	2.0	-	7.0	3.0	11.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
If Strattera patients develop symptoms suggestive of cardiac disease during treatment they should be referred for prompt specialist cardiac evaluation

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	471	320	151	81	45	36	72	38	34	94	94	-	44	44	-	180	99	81
	85.6	91.4	75.5	81.0	90.0	72.0	72.0	76.0	68.0	94.0	94.0	-	88.0	88.0	-	90.0	99.0	81.0
<b>No</b>	33	14	19	7	4	3	18	6	12	3	3	-	1	1	-	4	-	4
	6.0	4.0	9.5	7.0	8.0	6.0	18.0	12.0	24.0	3.0	3.0	-	2.0	2.0	-	2.0	-	4.0
<b>Do not know</b>	46	16	30	12	1	11	10	6	4	3	3	-	5	5	-	16	1	15
	8.4	4.6	15.0	12.0	2.0	22.0	10.0	12.0	8.0	3.0	3.0	-	10.0	10.0	-	8.0	1.0	15.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0



**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
Adverse reactions suspected to be associated with the use of Strattera should be reported via the national reporting system

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	476	311	165	91	47	44	79	42	37	87	87	-	42	42	-	177	93	84
	86.5	88.9	82.5	91.0	94.0	88.0	79.0	84.0	74.0	87.0	87.0	-	84.0	84.0	-	88.5	93.0	84.0
<b>No</b>	21	13	8	2	1	1	7	3	4	3	3	-	3	3	-	6	3	3
	3.8	3.7	4.0	2.0	2.0	2.0	7.0	6.0	8.0	3.0	3.0	-	6.0	6.0	-	3.0	3.0	3.0
<b>Do not know</b>	53	26	27	7	2	5	14	5	9	10	10	-	5	5	-	17	4	13
	9.6	7.4	13.5	7.0	4.0	10.0	14.0	10.0	18.0	10.0	10.0	-	10.0	10.0	-	8.5	4.0	13.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
Patients should be referred for specialist cardiac evaluation if initial findings suggest a history or presence of cardiac disease

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	455	302	153	82	44	38	70	33	37	93	93	-	40	40	-	170	92	78
	82.7	86.3	76.5	82.0	88.0	76.0	70.0	66.0	74.0	93.0	93.0	-	80.0	80.0	-	85.0	92.0	78.0
<b>No</b>	50	28	22	9	5	4	19	11	8	3	3	-	5	5	-	14	4	10
	9.1	8.0	11.0	9.0	10.0	8.0	19.0	22.0	16.0	3.0	3.0	-	10.0	10.0	-	7.0	4.0	10.0
<b>Do not know</b>	45	20	25	9	1	8	11	6	5	4	4	-	5	5	-	16	4	12
	8.2	5.7	12.5	9.0	2.0	16.0	11.0	12.0	10.0	4.0	4.0	-	10.0	10.0	-	8.0	4.0	12.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
Heart rate and blood pressure should be measured and recorded in all Strattera patients at least every 6 months during treatment

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	486	322	164	83	45	38	87	43	44	94	94	-	44	44	-	178	96	82
	88.4	92.0	82.0	83.0	90.0	76.0	87.0	86.0	88.0	94.0	94.0	-	88.0	88.0	-	89.0	96.0	82.0
<b>No</b>	30	17	13	8	4	4	4	3	1	4	4	-	3	3	-	11	3	8
	5.5	4.9	6.5	8.0	8.0	8.0	4.0	6.0	2.0	4.0	4.0	-	6.0	6.0	-	5.5	3.0	8.0
<b>Do not know</b>	34	11	23	9	1	8	9	4	5	2	2	-	3	3	-	11	1	10
	6.2	3.1	11.5	9.0	2.0	16.0	9.0	8.0	10.0	2.0	2.0	-	6.0	6.0	-	5.5	1.0	10.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
A checklist for actions to take before prescribing/dispensing or administering Strattera should be followed

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	371	241	130	61	31	30	49	22	27	73	73	-	36	36	-	152	79	73
	67.5	68.9	65.0	61.0	62.0	60.0	49.0	44.0	54.0	73.0	73.0	-	72.0	72.0	-	76.0	79.0	73.0
<b>No</b>	67	46	21	16	10	6	23	15	8	6	6	-	4	4	-	18	11	7
	12.2	13.1	10.5	16.0	20.0	12.0	23.0	30.0	16.0	6.0	6.0	-	8.0	8.0	-	9.0	11.0	7.0
<b>Do not know</b>	112	63	49	23	9	14	28	13	15	21	21	-	10	10	-	30	10	20
	20.4	18.0	24.5	23.0	18.0	28.0	28.0	26.0	30.0	21.0	21.0	-	20.0	20.0	-	15.0	10.0	20.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Again please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
If Strattera is considered, a detailed history and careful physical examination is needed to assess for the presence of cardiac disease of concomitant medications including past and present co-morbid medical disorders or symptoms

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	487	319	168	89	46	43	80	39	41	95	95	-	45	45	-	178	94	84
	88.5	91.1	84.0	89.0	92.0	86.0	80.0	78.0	82.0	95.0	95.0	-	90.0	90.0	-	89.0	94.0	84.0
<b>No</b>	32	21	11	4	2	2	11	9	2	4	4	-	1	1	-	12	5	7
	5.8	6.0	5.5	4.0	4.0	4.0	11.0	18.0	4.0	4.0	4.0	-	2.0	2.0	-	6.0	5.0	7.0
<b>Do not know</b>	31	10	21	7	2	5	9	2	7	1	1	-	4	4	-	10	1	9
	5.6	2.9	10.5	7.0	4.0	10.0	9.0	4.0	14.0	1.0	1.0	-	8.0	8.0	-	5.0	1.0	9.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Again please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
If Strattera is considered, a detailed history and careful physical examination is needed to assess for the presence of cardiac disease of concomitant medications including family history of sudden cardiac or unexplained death or malignant arrhythmia

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	482	312	170	83	42	41	82	38	44	95	95	-	43	43	-	179	94	85
	87.6	89.1	85.0	83.0	84.0	82.0	82.0	76.0	88.0	95.0	95.0	-	86.0	86.0	-	89.5	94.0	85.0
<b>No</b>	37	27	10	10	5	5	10	8	2	5	5	-	5	5	-	7	4	3
	6.7	7.7	5.0	10.0	10.0	10.0	10.0	16.0	4.0	5.0	5.0	-	10.0	10.0	-	3.5	4.0	3.0
<b>Do not know</b>	31	11	20	7	3	4	8	4	4	-	-	-	2	2	-	14	2	12
	5.6	3.1	10.0	7.0	6.0	8.0	8.0	8.0	8.0	-	-	-	4.0	4.0	-	7.0	2.0	12.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Again please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
 If Strattera is considered, a detailed history and careful physical examination is needed to assess for the presence of cardiac disease of concomitant medications including physical examination is needed to assess for the presence of cardiac disease

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	468 85.1	297 84.9	171 85.5	80 80.0	40 80.0	40 80.0	75 75.0	33 66.0	42 84.0	87 87.0	87 87.0	-	44 88.0	44 88.0	-	182 91.0	93 93.0	89 89.0
<b>No</b>	50 9.1	38 10.9	12 6.0	11 11.0	6 12.0	5 10.0	17 17.0	13 26.0	4 8.0	10 10.0	10 10.0	-	4 8.0	4 8.0	-	8 4.0	5 5.0	3 3.0
<b>Do not know</b>	32 5.8	15 4.3	17 8.5	9 9.0	4 8.0	5 10.0	8 8.0	4 8.0	4 8.0	3 3.0	3 3.0	-	2 4.0	2 4.0	-	10 5.0	2 2.0	8 8.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550 100.0	350 100.0	200 100.0	100 100.0	50 100.0	50 100.0	100 100.0	50 100.0	50 100.0	100 100.0	100 100.0	-	50 100.0	50 100.0	-	200 100.0	100 100.0	100 100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Again please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
It is not necessary to use Strattera cautiously with pressor agents or medications that may increase blood pressure

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	97	71	26	19	14	5	14	7	7	20	20	-	13	13	-	31	17	14
	17.6	20.3	13.0	19.0	28.0	10.0	14.0	14.0	14.0	20.0	20.0	-	26.0	26.0	-	15.5	17.0	14.0
<b>No</b>	374	238	136	67	30	37	74	37	37	74	74	-	27	27	-	132	70	62
	68.0	68.0	68.0	67.0	60.0	74.0	74.0	74.0	74.0	74.0	74.0	-	54.0	54.0	-	66.0	70.0	62.0
<b>Do not know</b>	79	41	38	14	6	8	12	6	6	6	6	-	10	10	-	37	13	24
	14.4	11.7	19.0	14.0	12.0	16.0	12.0	12.0	12.0	6.0	6.0	-	20.0	20.0	-	18.5	13.0	24.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0



**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Again please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
A re-evaluation of the need for ADHD therapy is recommended when patients are continuing treatment with Strattera at 3 months

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	308	187	121	56	27	29	68	32	36	47	47	-	31	31	-	106	50	56
	56.0	53.4	60.5	56.0	54.0	58.0	68.0	64.0	72.0	47.0	47.0	-	62.0	62.0	-	53.0	50.0	56.0
<b>No</b>	162	125	37	31	19	12	18	12	6	42	42	-	14	14	-	57	38	19
	29.5	35.7	18.5	31.0	38.0	24.0	18.0	24.0	12.0	42.0	42.0	-	28.0	28.0	-	28.5	38.0	19.0
<b>Do not know</b>	80	38	42	13	4	9	14	6	8	11	11	-	5	5	-	37	12	25
	14.5	10.9	21.0	13.0	8.0	18.0	14.0	12.0	16.0	11.0	11.0	-	10.0	10.0	-	18.5	12.0	25.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Again please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
For patients receiving Strattera, a checklist for monitoring cardiovascular risks should be followed

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	388	248	140	60	28	32	57	28	29	77	77	-	36	36	-	158	79	79
	70.5	70.9	70.0	60.0	56.0	64.0	57.0	56.0	58.0	77.0	77.0	-	72.0	72.0	-	79.0	79.0	79.0
<b>No</b>	75	49	26	21	12	9	21	10	11	7	7	-	9	9	-	17	11	6
	13.6	14.0	13.0	21.0	24.0	18.0	21.0	20.0	22.0	7.0	7.0	-	18.0	18.0	-	8.5	11.0	6.0
<b>Do not know</b>	87	53	34	19	10	9	22	12	10	16	16	-	5	5	-	25	10	15
	15.8	15.1	17.0	19.0	20.0	18.0	22.0	24.0	20.0	16.0	16.0	-	10.0	10.0	-	12.5	10.0	15.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Again please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
Patients should be referred to further specialist evaluation if they develop new neurologic signs or symptoms

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	451	290	161	81	38	43	74	37	37	87	87	-	41	41	-	168	87	81
	82.0	82.9	80.5	81.0	76.0	86.0	74.0	74.0	74.0	87.0	87.0	-	82.0	82.0	-	84.0	87.0	81.0
<b>No</b>	56	40	16	10	8	2	18	10	8	10	10	-	5	5	-	13	7	6
	10.2	11.4	8.0	10.0	16.0	4.0	18.0	20.0	16.0	10.0	10.0	-	10.0	10.0	-	6.5	7.0	6.0
<b>Do not know</b>	43	20	23	9	4	5	8	3	5	3	3	-	4	4	-	19	6	13
	7.8	5.7	11.5	9.0	8.0	10.0	8.0	6.0	10.0	3.0	3.0	-	8.0	8.0	-	9.5	6.0	13.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Again please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
 Patient should be referred for further specialist evaluation in the event the patient developed a new cardiovascular disorder or a worsening of a pre-existing cardiovascular disorder

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	499 90.7	329 94.0	170 85.0	93 93.0	49 98.0	44 88.0	88 88.0	44 88.0	44 88.0	93 93.0	93 93.0	-	46 92.0	46 92.0	-	179 89.5	97 97.0	82 82.0
<b>No</b>	25 4.5	14 4.0	11 5.5	4 4.0	1 2.0	3 6.0	7 7.0	3 6.0	4 8.0	4 4.0	4 4.0	-	3 6.0	3 6.0	-	7 3.5	3 3.0	4 4.0
<b>Do not know</b>	26 4.7	7 2.0	19 9.5	3 3.0	-	3 6.0	5 5.0	3 6.0	2 4.0	3 3.0	3 3.0	-	1 2.0	1 2.0	-	14 7.0	-	14 14.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550 100.0	350 100.0	200 100.0	100 100.0	50 100.0	50 100.0	100 100.0	50 100.0	50 100.0	100 100.0	100 100.0	-	50 100.0	50 100.0	-	200 100.0	100 100.0	100 100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Again please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
Heart rate and blood pressure should be only measured by a cardiac specialist

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	37	23	14	6	3	3	5	1	4	5	5	-	2	2	-	19	12	7
	6.7	6.6	7.0	6.0	6.0	6.0	5.0	2.0	8.0	5.0	5.0	-	4.0	4.0	-	9.5	12.0	7.0
<b>No</b>	496	322	174	91	47	44	94	49	45	94	94	-	46	46	-	171	86	85
	90.2	92.0	87.0	91.0	94.0	88.0	94.0	98.0	90.0	94.0	94.0	-	92.0	92.0	-	85.5	86.0	85.0
<b>Do not know</b>	17	5	12	3	-	3	1	-	1	1	1	-	2	2	-	10	2	8
	3.1	1.4	6.0	3.0	-	6.0	1.0	-	2.0	1.0	1.0	-	4.0	4.0	-	5.0	2.0	8.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P1: Again please consider the point at which you initiate treatment with Strattera and the subsequent period of monitoring of the patient receiving treatment and indicate which of these statements represent the latest recommended practice.  
Before prescribing/dispensing or administering Strattera, an echocardiography is needed

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs	Total	Specialists	GPs PCPs
<b>Base ( 100% )</b> <b>(Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Yes</b>	55	38	17	7	4	3	5	2	3	10	10	-	9	9	-	24	13	11
	10.0	10.9	8.5	7.0	8.0	6.0	5.0	4.0	6.0	10.0	10.0	-	18.0	18.0	-	12.0	13.0	11.0
<b>No</b>	427	284	143	85	45	40	87	44	43	79	79	-	39	39	-	137	77	60
	77.6	81.1	71.5	85.0	90.0	80.0	87.0	88.0	86.0	79.0	79.0	-	78.0	78.0	-	68.5	77.0	60.0
<b>Do not know</b>	68	28	40	8	1	7	8	4	4	11	11	-	2	2	-	39	10	29
	12.4	8.0	20.0	8.0	2.0	14.0	8.0	8.0	8.0	11.0	11.0	-	4.0	4.0	-	19.5	10.0	29.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P3: In general, how knowledgeable are you with the content of this medical information provided for Strattera?  
Physicians guide for assessing and monitoring cardiovascular risks when prescribing Strattera

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>(Precoded answers)</b>																		
<b>Not knowledgeable</b>	50	12	38	16	1	15	8	4	4	4	4	-	2	2	-	20	1	19
	9.1	3.4	19.0	16.0	2.0	30.0	8.0	8.0	8.0	4.0	4.0	-	4.0	4.0	-	10.0	1.0	19.0
<b>Somewhat knowledgeable</b>	343	201	142	65	34	31	71	32	39	50	50	-	18	18	-	139	67	72
	62.4	57.4	71.0	65.0	68.0	62.0	71.0	64.0	78.0	50.0	50.0	-	36.0	36.0	-	69.5	67.0	72.0
<b>Very knowledgeable</b>	157	137	20	19	15	4	21	14	7	46	46	-	30	30	-	41	32	9
	28.5	39.1	10.0	19.0	30.0	8.0	21.0	28.0	14.0	46.0	46.0	-	60.0	60.0	-	20.5	32.0	9.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P3a: Which statement best describes why you are not knowledgeable of the content of the following medical information provided for Strattera:  
Physicians guide for assessing and monitoring cardiovascular risks when prescribing Strattera

Subsample: Not knowledgeable (P3)

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	50	12	38	16	1	15	8	4	4	4	4	-	2	2	-	20	1	19
<b>(Precoded answers)</b>																		
<b>I was not aware this information is available</b>	29	10	19	6	1	5	8	4	4	3	3	-	1	1	-	11	1	10
	58.0	83.3	50.0	37.5	100.0	33.3	100.0	100.0	100.0	75.0	75.0	-	50.0	50.0	-	55.0	100.0	52.6
<b>I am aware this information is available but do not remember the content</b>	21	2	19	10	-	10	-	-	-	1	1	-	1	1	-	9	-	9
	42.0	16.7	50.0	62.5	-	66.7	-	-	-	25.0	25.0	-	50.0	50.0	-	45.0	-	47.4
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	50	12	38	16	1	15	8	4	4	4	4	-	2	2	-	20	1	19
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0



**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P3: In general, how knowledgeable are you with the content of this medical information provided for Strattera?  
Checklist for actions to take before prescribing/dispensing or administering Strattera

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>(Precoded answers)</b>																		
<b>Not knowledgeable</b>	136	64	72	35	15	20	33	13	20	19	19	-	5	5	-	44	12	32
	24.7	18.3	36.0	35.0	30.0	40.0	33.0	26.0	40.0	19.0	19.0	-	10.0	10.0	-	22.0	12.0	32.0
<b>Somewhat knowledgeable</b>	286	183	103	50	26	24	59	34	25	44	44	-	23	23	-	110	56	54
	52.0	52.3	51.5	50.0	52.0	48.0	59.0	68.0	50.0	44.0	44.0	-	46.0	46.0	-	55.0	56.0	54.0
<b>Very knowledgeable</b>	128	103	25	15	9	6	8	3	5	37	37	-	22	22	-	46	32	14
	23.3	29.4	12.5	15.0	18.0	12.0	8.0	6.0	10.0	37.0	37.0	-	44.0	44.0	-	23.0	32.0	14.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P3a: Which statement best describes why you are not knowledgeable of the content of the following medical information provided for Strattera:  
Checklist for actions to take before prescribing/dispensing or administering Strattera

Subsample: Not knowledgeable (P3)

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	136	64	72	35	15	20	33	13	20	19	19	-	5	5	-	44	12	32
<b>I was not aware this information is available</b>	99	49	50	23	13	10	29	11	18	15	15	-	2	2	-	30	8	22
	72.8	76.6	69.4	65.7	86.7	50.0	87.9	84.6	90.0	78.9	78.9	-	40.0	40.0	-	68.2	66.7	68.8
<b>I am aware this information is available but do not remember the content</b>	37	15	22	12	2	10	4	2	2	4	4	-	3	3	-	14	4	10
	27.2	23.4	30.6	34.3	13.3	50.0	12.1	15.4	10.0	21.1	21.1	-	60.0	60.0	-	31.8	33.3	31.3
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	136	64	72	35	15	20	33	13	20	19	19	-	5	5	-	44	12	32
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P3: In general, how knowledgeable are you with the content of this medical information provided for Strattera?  
Checklist for monitoring to manage cardiovascular risks with Strattera treatment

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>(Precoded answers)</b>																		
<b>Not knowledgeable</b>	134	67	67	32	15	17	37	20	17	14	14	-	7	7	-	44	11	33
	24.4	19.1	33.5	32.0	30.0	34.0	37.0	40.0	34.0	14.0	14.0	-	14.0	14.0	-	22.0	11.0	33.0
<b>Somewhat knowledgeable</b>	288	181	107	55	29	26	52	25	27	51	51	-	20	20	-	110	56	54
	52.4	51.7	53.5	55.0	58.0	52.0	52.0	50.0	54.0	51.0	51.0	-	40.0	40.0	-	55.0	56.0	54.0
<b>Very knowledgeable</b>	128	102	26	13	6	7	11	5	6	35	35	-	23	23	-	46	33	13
	23.3	29.1	13.0	13.0	12.0	14.0	11.0	10.0	12.0	35.0	35.0	-	46.0	46.0	-	23.0	33.0	13.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P3a: Which statement best describes why you are not knowledgeable of the content of the following medical information provided for Strattera:  
Checklist for monitoring to manage cardiovascular risks with Strattera treatment

Subsample: Not knowledgeable (P3)

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	134	67	67	32	15	17	37	20	17	14	14	-	7	7	-	44	11	33
<b>I was not aware this information is available</b>	105	56	49	22	11	11	33	18	15	11	11	-	6	6	-	33	10	23
	78.4	83.6	73.1	68.8	73.3	64.7	89.2	90.0	88.2	78.6	78.6	-	85.7	85.7	-	75.0	90.9	69.7
<b>I am aware this information is available but do not remember the content</b>	29	11	18	10	4	6	4	2	2	3	3	-	1	1	-	11	1	10
	21.6	16.4	26.9	31.3	26.7	35.3	10.8	10.0	11.8	21.4	21.4	-	14.3	14.3	-	25.0	9.1	30.3
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	134	67	67	32	15	17	37	20	17	14	14	-	7	7	-	44	11	33
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P3: In general, how knowledgeable are you with the content of this medical information provided for Strattera?  
Measurements recording chart (for blood pressure and heart rate)

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>(Precoded answers)</b>																		
<b>Not knowledgeable</b>	140	73	67	36	18	18	45	23	22	14	14	-	10	10	-	35	8	27
	25.5	20.9	33.5	36.0	36.0	36.0	45.0	46.0	44.0	14.0	14.0	-	20.0	20.0	-	17.5	8.0	27.0
<b>Somewhat knowledgeable</b>	260	157	103	53	25	28	39	18	21	51	51	-	16	16	-	101	47	54
	47.3	44.9	51.5	53.0	50.0	56.0	39.0	36.0	42.0	51.0	51.0	-	32.0	32.0	-	50.5	47.0	54.0
<b>Very knowledgeable</b>	150	120	30	11	7	4	16	9	7	35	35	-	24	24	-	64	45	19
	27.3	34.3	15.0	11.0	14.0	8.0	16.0	18.0	14.0	35.0	35.0	-	48.0	48.0	-	32.0	45.0	19.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P3a: Which statement best describes why you are not knowledgeable of the content of the following medical information provided for Strattera:  
Measurements recording chart (for blood pressure and heart rate)

Subsample: Not knowledgeable (P3)

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	140	73	67	36	18	18	45	23	22	14	14	-	10	10	-	35	8	27
<b>I was not aware this information is available</b>	122	66	56	27	16	11	42	21	21	12	12	-	10	10	-	31	7	24
	87.1	90.4	83.6	75.0	88.9	61.1	93.3	91.3	95.5	85.7	85.7	-	100.0	100.0	-	88.6	87.5	88.9
<b>I am aware this information is available but do not remember the content</b>	18	7	11	9	2	7	3	2	1	2	2	-	-	-	-	4	1	3
	12.9	9.6	16.4	25.0	11.1	38.9	6.7	8.7	4.5	14.3	14.3	-	-	-	-	11.4	12.5	11.1
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	140	73	67	36	18	18	45	23	22	14	14	-	10	10	-	35	8	27
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P4: What best describes your use of the following tools, provided to physicians, when prescribing Strattera or managing/monitoring treatment with Strattera?

All documents are available upon request via your local Lilly affiliate.

Physicians guide for assessing and monitoring cardiovascular risks when prescribing Strattera

Subsample: Somewhat knowledgeable/Very knowledgeable (P3)

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	500	338	162	84	49	35	92	46	46	96	96	-	48	48	-	180	99	81
<b>(Precoded answers)</b>																		
<b>1) Never use</b>	165	112	53	25	19	6	44	22	22	20	20	-	14	14	-	62	37	25
	33.0	33.1	32.7	29.8	38.8	17.1	47.8	47.8	47.8	20.8	20.8	-	29.2	29.2	-	34.4	37.4	30.9
<b>2) Sometimes use</b>	172	122	50	34	22	12	27	15	12	35	35	-	22	22	-	54	28	26
	34.4	36.1	30.9	40.5	44.9	34.3	29.3	32.6	26.1	36.5	36.5	-	45.8	45.8	-	30.0	28.3	32.1
<b>3) Frequently use</b>	116	72	44	18	6	12	15	6	9	27	27	-	9	9	-	47	24	23
	23.2	21.3	27.2	21.4	12.2	34.3	16.3	13.0	19.6	28.1	28.1	-	18.8	18.8	-	26.1	24.2	28.4
<b>4) Always use</b>	47	32	15	7	2	5	6	3	3	14	14	-	3	3	-	17	10	7
	9.4	9.5	9.3	8.3	4.1	14.3	6.5	6.5	6.5	14.6	14.6	-	6.3	6.3	-	9.4	10.1	8.6
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	500	338	162	84	49	35	92	46	46	96	96	-	48	48	-	180	99	81
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P4: What best describes your use of the following tools, provided to physicians, when prescribing Strattera or managing/monitoring treatment with Strattera?

All documents are available upon request via your local Lilly affiliate.

Checklist for actions to take before prescribing/dispensing or administering Strattera

Subsample: Somewhat knowledgeable/Very knowledgeable (P3)

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	414	286	128	65	35	30	67	37	30	81	81	-	45	45	-	156	88	68
<b>(Precoded answers)</b>																		
<b>1) Never use</b>	122	89	33	15	9	6	24	16	8	15	15	-	20	20	-	48	29	19
	29.5	31.1	25.8	23.1	25.7	20.0	35.8	43.2	26.7	18.5	18.5	-	44.4	44.4	-	30.8	33.0	27.9
<b>2) Sometimes use</b>	126	87	39	26	15	11	22	11	11	27	27	-	11	11	-	40	23	17
	30.4	30.4	30.5	40.0	42.9	36.7	32.8	29.7	36.7	33.3	33.3	-	24.4	24.4	-	25.6	26.1	25.0
<b>3) Frequently use</b>	106	67	39	18	10	8	13	6	7	19	19	-	10	10	-	46	22	24
	25.6	23.4	30.5	27.7	28.6	26.7	19.4	16.2	23.3	23.5	23.5	-	22.2	22.2	-	29.5	25.0	35.3
<b>4) Always use</b>	60	43	17	6	1	5	8	4	4	20	20	-	4	4	-	22	14	8
	14.5	15.0	13.3	9.2	2.9	16.7	11.9	10.8	13.3	24.7	24.7	-	8.9	8.9	-	14.1	15.9	11.8
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	414	286	128	65	35	30	67	37	30	81	81	-	45	45	-	156	88	68
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0



**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P4: What best describes your use of the following tools, provided to physicians, when prescribing Strattera or managing/monitoring treatment with Strattera?

All documents are available upon request via your local Lilly affiliate.

Checklist for monitoring to manage cardiovascular risks with Strattera treatment

Subsample: Somewhat knowledgeable/Very knowledgeable (P3)

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	416	283	133	68	35	33	63	30	33	86	86	-	43	43	-	156	89	67
<b>1) Never use</b>	129	88	41	19	13	6	26	11	15	19	19	-	18	18	-	47	27	20
	31.0	31.1	30.8	27.9	37.1	18.2	41.3	36.7	45.5	22.1	22.1	-	41.9	41.9	-	30.1	30.3	29.9
<b>2) Sometimes use</b>	133	94	39	26	13	13	23	13	10	26	26	-	14	14	-	44	28	16
	32.0	33.2	29.3	38.2	37.1	39.4	36.5	43.3	30.3	30.2	30.2	-	32.6	32.6	-	28.2	31.5	23.9
<b>3) Frequently use</b>	102	65	37	18	8	10	9	4	5	25	25	-	7	7	-	43	21	22
	24.5	23.0	27.8	26.5	22.9	30.3	14.3	13.3	15.2	29.1	29.1	-	16.3	16.3	-	27.6	23.6	32.8
<b>4) Always use</b>	52	36	16	5	1	4	5	2	3	16	16	-	4	4	-	22	13	9
	12.5	12.7	12.0	7.4	2.9	12.1	7.9	6.7	9.1	18.6	18.6	-	9.3	9.3	-	14.1	14.6	13.4
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	416	283	133	68	35	33	63	30	33	86	86	-	43	43	-	156	89	67
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Question P4: What best describes your use of the following tools, provided to physicians, when prescribing Strattera or managing/monitoring treatment with Strattera?

All documents are available upon request via your local Lilly affiliate.

Measurements recording chart (for blood pressure and heart rate)

Subsample: Somewhat knowledgeable/Very knowledgeable (P3)

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	410	277	133	64	32	32	55	27	28	86	86	-	40	40	-	165	92	73
<b>(Precoded answers)</b>																		
<b>1) Never use</b>	144	99	45	23	15	8	26	14	12	20	20	-	21	21	-	54	29	25
	35.1	35.7	33.8	35.9	46.9	25.0	47.3	51.9	42.9	23.3	23.3	-	52.5	52.5	-	32.7	31.5	34.2
<b>2) Sometimes use</b>	111	74	37	25	12	13	19	9	10	27	27	-	6	6	-	34	20	14
	27.1	26.7	27.8	39.1	37.5	40.6	34.5	33.3	35.7	31.4	31.4	-	15.0	15.0	-	20.6	21.7	19.2
<b>3) Frequently use</b>	84	52	32	11	4	7	2	-	2	20	20	-	8	8	-	43	20	23
	20.5	18.8	24.1	17.2	12.5	21.9	3.6	-	7.1	23.3	23.3	-	20.0	20.0	-	26.1	21.7	31.5
<b>4) Always use</b>	71	52	19	5	1	4	8	4	4	19	19	-	5	5	-	34	23	11
	17.3	18.8	14.3	7.8	3.1	12.5	14.5	14.8	14.3	22.1	22.1	-	12.5	12.5	-	20.6	25.0	15.1
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	410	277	133	64	32	32	55	27	28	86	86	-	40	40	-	165	92	73
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Demographics A1: Gender

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Male</b>	401	235	166	73	28	45	82	41	41	67	67	-	27	27	-	152	72	80
	72.9	67.1	83.0	73.0	56.0	90.0	82.0	82.0	82.0	67.0	67.0	-	54.0	54.0	-	76.0	72.0	80.0
<b>Female</b>	149	115	34	27	22	5	18	9	9	33	33	-	23	23	-	48	28	20
	27.1	32.9	17.0	27.0	44.0	10.0	18.0	18.0	18.0	33.0	33.0	-	46.0	46.0	-	24.0	28.0	20.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Demographics A2: Age

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Open answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Up to 35 years</b>	66	39	27	6	5	1	4	2	2	20	20	-	2	2	-	34	10	24
	12.0	11.1	13.5	6.0	10.0	2.0	4.0	4.0	4.0	20.0	20.0	-	4.0	4.0	-	17.0	10.0	24.0
<b>36 - 45 years</b>	156	100	56	16	7	9	26	15	11	31	31	-	10	10	-	73	37	36
	28.4	28.6	28.0	16.0	14.0	18.0	26.0	30.0	22.0	31.0	31.0	-	20.0	20.0	-	36.5	37.0	36.0
<b>46 - 55 years</b>	177	119	58	27	14	13	34	19	15	33	33	-	18	18	-	65	35	30
	32.2	34.0	29.0	27.0	28.0	26.0	34.0	38.0	30.0	33.0	33.0	-	36.0	36.0	-	32.5	35.0	30.0
<b>56 - 65 years</b>	140	86	54	44	22	22	33	11	22	16	16	-	19	19	-	28	18	10
	25.5	24.6	27.0	44.0	44.0	44.0	33.0	22.0	44.0	16.0	16.0	-	38.0	38.0	-	14.0	18.0	10.0
<b>66 years or older</b>	11	6	5	7	2	5	3	3	-	-	-	-	1	1	-	-	-	-
	2.0	1.7	2.5	7.0	4.0	10.0	3.0	6.0	-	-	-	-	2.0	2.0	-	-	-	-
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0
<b>Mean value</b>	48.2	48.3	48.1	53.4	52.6	54.1	50.9	50.2	51.7	45.3	45.3	-	52.5	52.5	-	44.7	46.0	43.3

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Demographics A3: Region

Subsample: UK only

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	200	100	100	-	-	-	-	-	-	-	-	-	-	-	-	200	100	100
<b>(Precoded answers)</b>																		
<b>Greater London</b>	29	15	14	-	-	-	-	-	-	-	-	-	-	-	-	29	15	14
	14.5	15.0	14.0	-	-	-	-	-	-	-	-	-	-	-	-	14.5	15.0	14.0
<b>South East (Kent, Surrey, Sussex, Hampshire, Isle of Wight, Berks, Bucks, Oxfordshire, Northants)</b>	34	16	18	-	-	-	-	-	-	-	-	-	-	-	-	34	16	18
	17.0	16.0	18.0	-	-	-	-	-	-	-	-	-	-	-	-	17.0	16.0	18.0
<b>South West (Avon, Gloucestershire, Wiltshire, Somerset, Dorset, Devon, Cornwall, Isles of Scilly)</b>	8	4	4	-	-	-	-	-	-	-	-	-	-	-	-	8	4	4
	4.0	4.0	4.0	-	-	-	-	-	-	-	-	-	-	-	-	4.0	4.0	4.0
<b>Northern (Northumberland, Durham, Cleveland, North Yorkshire, West Yorkshire Humberside)</b>	12	6	6	-	-	-	-	-	-	-	-	-	-	-	-	12	6	6
	6.0	6.0	6.0	-	-	-	-	-	-	-	-	-	-	-	-	6.0	6.0	6.0
<b>North West (Cumbria, Merseyside, Lancashire, Greater Manchester, Cheshire)</b>	18	9	9	-	-	-	-	-	-	-	-	-	-	-	-	18	9	9
	9.0	9.0	9.0	-	-	-	-	-	-	-	-	-	-	-	-	9.0	9.0	9.0
<b>West Midlands (Birmingham, Worcestershire, Warwickshire, Staffordshire, Shropshire)</b>	23	16	7	-	-	-	-	-	-	-	-	-	-	-	-	23	16	7
	11.5	16.0	7.0	-	-	-	-	-	-	-	-	-	-	-	-	11.5	16.0	7.0
<b>Trent (South Yorkshire, Nottinghamshire, Derbyshire, Lincolnshire, Rutland, Leicestershire)</b>	15	5	10	-	-	-	-	-	-	-	-	-	-	-	-	15	5	10
	7.5	5.0	10.0	-	-	-	-	-	-	-	-	-	-	-	-	7.5	5.0	10.0
<b>Eastern (Bedfordshire, Cambridgeshire, Essex, Hertfordshire, Norfolk, Suffolk)</b>	23	13	10	-	-	-	-	-	-	-	-	-	-	-	-	23	13	10
	11.5	13.0	10.0	-	-	-	-	-	-	-	-	-	-	-	-	11.5	13.0	10.0
<b>Wales</b>	17	7	10	-	-	-	-	-	-	-	-	-	-	-	-	17	7	10
	8.5	7.0	10.0	-	-	-	-	-	-	-	-	-	-	-	-	8.5	7.0	10.0
<b>Scotland</b>	15	5	10	-	-	-	-	-	-	-	-	-	-	-	-	15	5	10
	7.5	5.0	10.0	-	-	-	-	-	-	-	-	-	-	-	-	7.5	5.0	10.0
<b>Northern Ireland</b>	6	4	2	-	-	-	-	-	-	-	-	-	-	-	-	6	4	2
	3.0	4.0	2.0	-	-	-	-	-	-	-	-	-	-	-	-	3.0	4.0	2.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Demographics A3: Region

Subsample: UK only



**Base ( 100% )**  
**(Precoded answers)**

**Total**

All countries			Denmark			Netherlands			Spain			Sweden			UK		
Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
200	100	100	-	-	-	-	-	-	-	-	-	-	-	-	200	100	100
200	100	100	-	-	-	-	-	-	-	-	-	-	-	-	200	100	100
100.0	100.0	100.0	-	-	-	-	-	-	-	-	-	-	-	-	100.0	100.0	100.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Demographics A3: Region

Subsample: Denmark only

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	100	50	50	100	50	50	-	-	-	-	-	-	-	-	-	-	-	-
<b>(Precoded answers)</b>																		
<b>Region Hovedstaden</b>	32	23	9	32	23	9	-	-	-	-	-	-	-	-	-	-	-	-
	32.0	46.0	18.0	32.0	46.0	18.0	-	-	-	-	-	-	-	-	-	-	-	-
<b>Region Sjaelland</b>	11	3	8	11	3	8	-	-	-	-	-	-	-	-	-	-	-	-
	11.0	6.0	16.0	11.0	6.0	16.0	-	-	-	-	-	-	-	-	-	-	-	-
<b>Region Syddanmark</b>	21	11	10	21	11	10	-	-	-	-	-	-	-	-	-	-	-	-
	21.0	22.0	20.0	21.0	22.0	20.0	-	-	-	-	-	-	-	-	-	-	-	-
<b>Region Midtjylland</b>	23	6	17	23	6	17	-	-	-	-	-	-	-	-	-	-	-	-
	23.0	12.0	34.0	23.0	12.0	34.0	-	-	-	-	-	-	-	-	-	-	-	-
<b>Region Nordjylland</b>	13	7	6	13	7	6	-	-	-	-	-	-	-	-	-	-	-	-
	13.0	14.0	12.0	13.0	14.0	12.0	-	-	-	-	-	-	-	-	-	-	-	-
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	100	50	50	100	50	50	-	-	-	-	-	-	-	-	-	-	-	-
	100.0	100.0	100.0	100.0	100.0	100.0	-	-	-	-	-	-	-	-	-	-	-	-

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Demographics A3: Region

Subsample: Sweden only



	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	50	50	-	-	-	-	-	-	-	-	-	-	50	50	-	-	-	-
<b>Göteborg</b>	13	13	-	-	-	-	-	-	-	-	-	-	13	13	-	-	-	-
<b>Svealand</b>	26.0	26.0	-	-	-	-	-	-	-	-	-	-	26.0	26.0	-	-	-	-
<b>Norrland</b>	6	6	-	-	-	-	-	-	-	-	-	-	6	6	-	-	-	-
<b>Malmö</b>	12.0	12.0	-	-	-	-	-	-	-	-	-	-	12.0	12.0	-	-	-	-
<b>Göteborg</b>	13	13	-	-	-	-	-	-	-	-	-	-	13	13	-	-	-	-
<b>Stockholm</b>	26.0	26.0	-	-	-	-	-	-	-	-	-	-	26.0	26.0	-	-	-	-
<b>N/A</b>	3	3	-	-	-	-	-	-	-	-	-	-	3	3	-	-	-	-
	6.0	6.0	-	-	-	-	-	-	-	-	-	-	6.0	6.0	-	-	-	-
	10	10	-	-	-	-	-	-	-	-	-	-	10	10	-	-	-	-
	20.0	20.0	-	-	-	-	-	-	-	-	-	-	20.0	20.0	-	-	-	-
	5	5	-	-	-	-	-	-	-	-	-	-	5	5	-	-	-	-
	10.0	10.0	-	-	-	-	-	-	-	-	-	-	10.0	10.0	-	-	-	-
<b>Total</b>	50	50	-	-	-	-	-	-	-	-	-	-	50	50	-	-	-	-
	100.0	100.0	-	-	-	-	-	-	-	-	-	-	100.0	100.0	-	-	-	-



**Strattera Risk Management - Wave 2 - All countries / Lilly**

Demographics A3: Region

Subsample: Netherlands only



	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Precoded answers)</b>	100	50	50	-	-	-	100	50	50	-	-	-	-	-	-	-	-	-
<b>Noord</b>	14	9	5	-	-	-	14	9	5	-	-	-	-	-	-	-	-	-
	14.0	18.0	10.0	-	-	-	14.0	18.0	10.0	-	-	-	-	-	-	-	-	-
<b>Oost</b>	13	9	4	-	-	-	13	9	4	-	-	-	-	-	-	-	-	-
	13.0	18.0	8.0	-	-	-	13.0	18.0	8.0	-	-	-	-	-	-	-	-	-
<b>Midden</b>	21	11	10	-	-	-	21	11	10	-	-	-	-	-	-	-	-	-
	21.0	22.0	20.0	-	-	-	21.0	22.0	20.0	-	-	-	-	-	-	-	-	-
<b>Zuid</b>	22	10	12	-	-	-	22	10	12	-	-	-	-	-	-	-	-	-
	22.0	20.0	24.0	-	-	-	22.0	20.0	24.0	-	-	-	-	-	-	-	-	-
<b>West</b>	30	11	19	-	-	-	30	11	19	-	-	-	-	-	-	-	-	-
	30.0	22.0	38.0	-	-	-	30.0	22.0	38.0	-	-	-	-	-	-	-	-	-
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	100	50	50	-	-	-	100	50	50	-	-	-	-	-	-	-	-	-
	100.0	100.0	100.0	-	-	-	100.0	100.0	100.0	-	-	-	-	-	-	-	-	-

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Demographics A3: Region

Subsample: Spain only

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% )</b>	100	100	-	-	-	-	-	-	-	100	100	-	-	-	-	-	-	-
<b>(Precoded answers)</b>																		
<b>Andalucía</b>	20	20	-	-	-	-	-	-	-	20	20	-	-	-	-	-	-	-
	20.0	20.0	-	-	-	-	-	-	-	20.0	20.0	-	-	-	-	-	-	-
<b>Aragón</b>	1	1	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-
	1.0	1.0	-	-	-	-	-	-	-	1.0	1.0	-	-	-	-	-	-	-
<b>Asturias</b>	1	1	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-
	1.0	1.0	-	-	-	-	-	-	-	1.0	1.0	-	-	-	-	-	-	-
<b>Cantabria</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Castilla-León</b>	7	7	-	-	-	-	-	-	-	7	7	-	-	-	-	-	-	-
	7.0	7.0	-	-	-	-	-	-	-	7.0	7.0	-	-	-	-	-	-	-
<b>Castilla La Mancha</b>	5	5	-	-	-	-	-	-	-	5	5	-	-	-	-	-	-	-
	5.0	5.0	-	-	-	-	-	-	-	5.0	5.0	-	-	-	-	-	-	-
<b>Cataluña</b>	16	16	-	-	-	-	-	-	-	16	16	-	-	-	-	-	-	-
	16.0	16.0	-	-	-	-	-	-	-	16.0	16.0	-	-	-	-	-	-	-
<b>Ceuta y Melilla</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Extremadura</b>	1	1	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-
	1.0	1.0	-	-	-	-	-	-	-	1.0	1.0	-	-	-	-	-	-	-
<b>Galicia</b>	4	4	-	-	-	-	-	-	-	4	4	-	-	-	-	-	-	-
	4.0	4.0	-	-	-	-	-	-	-	4.0	4.0	-	-	-	-	-	-	-
<b>Islas Baleares</b>	4	4	-	-	-	-	-	-	-	4	4	-	-	-	-	-	-	-
	4.0	4.0	-	-	-	-	-	-	-	4.0	4.0	-	-	-	-	-	-	-
<b>Islas Canarias</b>	1	1	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-
	1.0	1.0	-	-	-	-	-	-	-	1.0	1.0	-	-	-	-	-	-	-
<b>Madrid</b>	21	21	-	-	-	-	-	-	-	21	21	-	-	-	-	-	-	-
	21.0	21.0	-	-	-	-	-	-	-	21.0	21.0	-	-	-	-	-	-	-
<b>Murcia</b>	4	4	-	-	-	-	-	-	-	4	4	-	-	-	-	-	-	-
	4.0	4.0	-	-	-	-	-	-	-	4.0	4.0	-	-	-	-	-	-	-
<b>Navarra</b>	1	1	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-
	1.0	1.0	-	-	-	-	-	-	-	1.0	1.0	-	-	-	-	-	-	-
<b>Pais Vasco</b>	1	1	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-
	1.0	1.0	-	-	-	-	-	-	-	1.0	1.0	-	-	-	-	-	-	-

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Demographics A3: Region

Subsample: Spain only

**Base ( 100% )**  
**(Precoded answers)**

**La Rioja****Valencia****N/A****Total**

All countries			Denmark			Netherlands			Spain			Sweden			UK		
Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
100	100	-	-	-	-	-	-	-	100	100	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
13	13	-	-	-	-	-	-	-	13	13	-	-	-	-	-	-	-
13.0	13.0	-	-	-	-	-	-	-	13.0	13.0	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
100	100	-	-	-	-	-	-	-	100	100	-	-	-	-	-	-	-
100.0	100.0	-	-	-	-	-	-	-	100.0	100.0	-	-	-	-	-	-	-

## Strattera Risk Management - Wave 2 - All countries / Lilly



demographics A4: What proportion of your time do you spend in the office practice and/or hospital?  
% in the office

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Open answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None at all (= 0%)</b>	56	50	6	16	16	-	20	14	6	6	6	-	6	6	-	8	8	-
	10.2	14.3	3.0	16.0	32.0	-	20.0	28.0	12.0	6.0	6.0	-	12.0	12.0	-	4.0	8.0	-
<b>1 - 9%</b>	7	5	2	-	-	-	1	1	-	-	-	-	-	-	-	6	4	2
	1.3	1.4	1.0	-	-	-	1.0	2.0	-	-	-	-	-	-	-	3.0	4.0	2.0
<b>10 - 19%</b>	36	29	7	4	4	-	10	6	4	3	3	-	1	1	-	18	15	3
	6.5	8.3	3.5	4.0	8.0	-	10.0	12.0	8.0	3.0	3.0	-	2.0	2.0	-	9.0	15.0	3.0
<b>20 - 29%</b>	58	52	6	4	4	-	14	9	5	9	9	-	3	3	-	28	27	1
	10.5	14.9	3.0	4.0	8.0	-	14.0	18.0	10.0	9.0	9.0	-	6.0	6.0	-	14.0	27.0	1.0
<b>30 - 39%</b>	20	20	-	-	-	-	3	3	-	7	7	-	1	1	-	9	9	-
	3.6	5.7	-	-	-	-	3.0	6.0	-	7.0	7.0	-	2.0	2.0	-	4.5	9.0	-
<b>40 - 49%</b>	20	20	-	2	2	-	-	-	-	8	8	-	3	3	-	7	7	-
	3.6	5.7	-	2.0	4.0	-	-	-	-	8.0	8.0	-	6.0	6.0	-	3.5	7.0	-
<b>50 - 59%</b>	24	23	1	-	-	-	3	3	-	13	13	-	3	3	-	5	4	1
	4.4	6.6	0.5	-	-	-	3.0	6.0	-	13.0	13.0	-	6.0	6.0	-	2.5	4.0	1.0
<b>60 - 69%</b>	10	6	4	-	-	-	3	2	1	2	2	-	-	-	-	5	2	3
	1.8	1.7	2.0	-	-	-	3.0	4.0	2.0	2.0	2.0	-	-	-	-	2.5	2.0	3.0
<b>70 - 79%</b>	20	17	3	-	-	-	1	-	1	11	11	-	6	6	-	2	-	2
	3.6	4.9	1.5	-	-	-	1.0	-	2.0	11.0	11.0	-	12.0	12.0	-	1.0	-	2.0
<b>80 - 89%</b>	20	15	5	1	-	1	2	1	1	4	4	-	4	4	-	9	6	3
	3.6	4.3	2.5	1.0	-	2.0	2.0	2.0	2.0	4.0	4.0	-	8.0	8.0	-	4.5	6.0	3.0
<b>90 - 99%</b>	69	35	34	8	4	4	5	1	4	14	14	-	6	6	-	36	10	26
	12.5	10.0	17.0	8.0	8.0	8.0	5.0	2.0	8.0	14.0	14.0	-	12.0	12.0	-	18.0	10.0	26.0
<b>100%</b>	210	78	132	65	20	45	38	10	28	23	23	-	17	17	-	67	8	59
	38.2	22.3	66.0	65.0	40.0	90.0	38.0	20.0	56.0	23.0	23.0	-	34.0	34.0	-	33.5	8.0	59.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0
<b>Mean value (excl.0)</b>	71.5	59.5	90.2	89.8	75.9	99.2	66.6	49.6	80.4	66.2	66.2	-	76.8	76.8	-	67.1	42.1	90.0
<b>Mean value (incl.0)</b>	64.2	51.0	87.5	75.4	51.6	99.2	53.2	35.7	70.8	62.2	62.2	-	67.6	67.6	-	64.4	38.8	90.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

demographics A4: What proportion of your time do you spend in the office practice and/or hospital?  
% in the office

**Base ( 100% )**  
**(Open answers)**

**Std.dev.**  
**Median**

All countries			Denmark			Netherlands			Spain			Sweden			UK		
Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
39.0	38.2	27.8	40.7	46.7	3.2	43.4	38.5	41.2	32.8	32.8	-	36.1	36.1	-	38.0	32.8	22.3
90	43	100	100	40	100	50	20	100	70	70	-	80	80	-	90	25	100

## Strattera Risk Management - Wave 2 - All countries / Lilly



demographics A4: What proportion of your time do you spend in the office practice and/or hospital?  
% in hospital

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Open answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>None at all (= 0%)</b>	211	79	132	65	20	45	38	10	28	24	24	-	17	17	-	67	8	59
	38.4	22.6	66.0	65.0	40.0	90.0	38.0	20.0	56.0	24.0	24.0	-	34.0	34.0	-	33.5	8.0	59.0
<b>1 - 9%</b>	27	11	16	5	2	3	2	-	2	3	3	-	2	2	-	15	4	11
	4.9	3.1	8.0	5.0	4.0	6.0	2.0	-	4.0	3.0	3.0	-	4.0	4.0	-	7.5	4.0	11.0
<b>10 - 19%</b>	44	24	20	3	2	1	3	1	2	11	11	-	4	4	-	23	6	17
	8.0	6.9	10.0	3.0	4.0	2.0	3.0	2.0	4.0	11.0	11.0	-	8.0	8.0	-	11.5	6.0	17.0
<b>20 - 29%</b>	27	23	4	1	-	1	3	1	2	9	9	-	7	7	-	7	6	1
	4.9	6.6	2.0	1.0	-	2.0	3.0	2.0	4.0	9.0	9.0	-	14.0	14.0	-	3.5	6.0	1.0
<b>30 - 39%</b>	13	10	3	-	-	-	-	-	-	7	7	-	3	3	-	3	-	3
	2.4	2.9	1.5	-	-	-	-	-	-	7.0	7.0	-	6.0	6.0	-	1.5	-	3.0
<b>40 - 49%</b>	8	5	3	-	-	-	3	2	1	1	1	-	-	-	-	4	2	2
	1.5	1.4	1.5	-	-	-	3.0	4.0	2.0	1.0	1.0	-	-	-	-	2.0	2.0	2.0
<b>50 - 59%</b>	25	24	1	-	-	-	3	3	-	13	13	-	3	3	-	6	5	1
	4.5	6.9	0.5	-	-	-	3.0	6.0	-	13.0	13.0	-	6.0	6.0	-	3.0	5.0	1.0
<b>60 - 69%</b>	23	23	-	2	2	-	-	-	-	8	8	-	3	3	-	10	10	-
	4.2	6.6	-	2.0	4.0	-	-	-	-	8.0	8.0	-	6.0	6.0	-	5.0	10.0	-
<b>70 - 79%</b>	37	35	2	2	2	-	6	4	2	10	10	-	2	2	-	17	17	-
	6.7	10.0	1.0	2.0	4.0	-	6.0	8.0	4.0	10.0	10.0	-	4.0	4.0	-	8.5	17.0	-
<b>80 - 89%</b>	41	36	5	2	2	-	12	9	3	6	6	-	2	2	-	19	17	2
	7.5	10.3	2.5	2.0	4.0	-	12.0	18.0	6.0	6.0	6.0	-	4.0	4.0	-	9.5	17.0	2.0
<b>90 - 99%</b>	39	31	8	4	4	-	10	6	4	3	3	-	1	1	-	21	17	4
	7.1	8.9	4.0	4.0	8.0	-	10.0	12.0	8.0	3.0	3.0	-	2.0	2.0	-	10.5	17.0	4.0
<b>100%</b>	55	49	6	16	16	-	20	14	6	5	5	-	6	6	-	8	8	-
	10.0	14.0	3.0	16.0	32.0	-	20.0	28.0	12.0	5.0	5.0	-	12.0	12.0	-	4.0	8.0	-
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0
<b>Mean value (excl.0)</b>	57.7	63.0	36.8	70.3	80.7	8.2	75.4	80.4	66.4	48.4	48.4	-	49.1	49.1	-	53.6	66.6	24.4
<b>Mean value (incl.0)</b>	35.6	48.7	12.5	24.6	48.4	0.8	46.8	64.3	29.2	36.8	36.8	-	32.4	32.4	-	35.6	61.3	10.0

**Strattera Risk Management - Wave 2 - All countries / Lilly**

demographics A4: What proportion of your time do you spend in the office practice and/or hospital?  
% in hospital

**Base ( 100% )**  
**(Open answers)**

**Std.dev.**  
**Median**

All countries			Denmark			Netherlands			Spain			Sweden			UK		
Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
38.9	38.2	27.8	40.7	46.7	3.2	43.4	38.5	41.2	32.4	32.4	-	36.1	36.1	-	38.0	32.8	22.3
10	53	-	-	60	-	50	80	-	30	30	-	20	20	-	10	75	-

**Strattera Risk Management - Wave 2 - All countries / Lilly**

Demographics A5: When did you start working in your profession?

	All countries			Denmark			Netherlands			Spain			Sweden			UK		
	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs	Total	Specia- lists	GPs PCPs
<b>Base ( 100% ) (Open answers)</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
<b>Under 11 years</b>	100	61	39	15	10	5	20	11	9	23	23	-	6	6	-	36	11	25
	18.2	17.4	19.5	15.0	20.0	10.0	20.0	22.0	18.0	23.0	23.0	-	12.0	12.0	-	18.0	11.0	25.0
<b>11-20 years</b>	211	139	72	28	12	16	38	22	16	36	36	-	22	22	-	87	47	40
	38.4	39.7	36.0	28.0	24.0	32.0	38.0	44.0	32.0	36.0	36.0	-	44.0	44.0	-	43.5	47.0	40.0
<b>21-30 years</b>	159	98	61	34	18	16	28	11	17	28	28	-	13	13	-	56	28	28
	28.9	28.0	30.5	34.0	36.0	32.0	28.0	22.0	34.0	28.0	28.0	-	26.0	26.0	-	28.0	28.0	28.0
<b>31+ years</b>	80	52	28	23	10	13	14	6	8	13	13	-	9	9	-	21	14	7
	14.5	14.9	14.0	23.0	20.0	26.0	14.0	12.0	16.0	13.0	13.0	-	18.0	18.0	-	10.5	14.0	7.0
<b>N/A</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total</b>	550	350	200	100	50	50	100	50	50	100	100	-	50	50	-	200	100	100
	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	-	100.0	100.0	100.0
<b>Mean value</b>	19.4	19.3	19.6	22.1	21.3	22.9	19.1	17.7	20.5	18.0	18.0	-	20.9	20.9	-	18.5	19.5	17.5