Endometrial Cancer (EC) Online Survey Questions, Specialist

Format:

- 21 question online survey, with questions in the form of multiple choice, scale, or open ended.

Objectives:

1. Identify the knowledge gaps of highest importance amongst Canadian EC treaters
2. Gain insight on immunotherapies as a prospective treatment strategy for patients with advanced and/or recurrent EC
3. Evaluate potential educational initiatives and resources to best support EC practitioners

Immunotherapy Use and Familiarity

1. How would you rate your comfort in prescribing immunotherapies in general?
    a. Very uncomfortable
    b. Uncomfortable
    c. Somewhat comfortable
    d. Comfortable
    e. Very comfortable

2. What information would increase your confidence when prescribing a novel immunotherapy for EC? Select all the apply:
    a. Mechanism of action of the drug
    b. Safety/toxicity profile of the drug
    c. Clinical data that supports the use of drug
    d. Information of patient profile that is best suited for the drug
    e. Toxicity management algorithms
    f. Other (please specify)
    g. I don't have enough experience with immunotherapies to answer

3. What clinical data would be of interest to you regarding emerging immunotherapies? Select all that apply:
    a. Toxicity studies for each drug
    b. Pharmacokinetic and dosing studies for each drug
    c. Ongiong clinical trial information of unapproved EC drugs
    d. Sub analyses of specific patient populations for each drug
    e. Other (please specify)

Management of immune related adverse events (irAEs)

4. How would you rate your comfort managing irAEs when prescribing an immunotherapy?
    a. Very uncomfortable
    b. Uncomfortable
    c. Somewhat comfortable
    d. Comfortable
    e. Very comfortable
    f. I have not managed a patient on immunotherapy

5. Are there specific types of irAEs you would like to learn about most?
    a. The most common of any grade
    b. The irAEs that require changes in management
    c. All irAEs regardless of grade and occurrence rate
    d. Other (Please specify)

6. What are the irAEs you feel **most confident** managing? (Open answer)

7. What are the irAEs you feel **least confident** managing? (Open answer)

8. What information would increase your confidence when managing irAEs? Select all that apply.
    a. Mechanism of action of irAEs
    b. Time course of irAEs
    c. Monitoring strategies for irAEs
    d. Management recommendations for irAEs
    e. Other (please specify)
    f. I don't know enough about immune related adverse events to answer

9. What programming, materials or resources would facilitate your management of irAEs? (Open answer)

10. Within your practice, who is primarily responsible for communicating information about irAEs to the patient?
    a. Physician
    b. Nurse
    c. Both
    d. Other (please specify)
11. What information about irAEs do you think would be beneficial for patients? Select all that apply
    a. Background information about immunotherapies and associated irAEs
    b. Information on identifying irAEs
    c. Guides for when to reach out to HCPs for worsening irAEs
    d. Warning signs for severe irAEs
    e. Other (please specify)

12. What programming, materials or resources would you find useful to better educate patients about irAEs and their management? (Open answer)

13. Are there any additional knowledge gaps regarding the use of immunotherapies and their associated AEs? (Open answer)

Knowledge Gaps in EC Diagnostic Procedures

14. What information is most important for determining the appropriate treatment pathway for a patient?
    a. Clinical factors
    b. Demographic factors
    c. Histopathology

   d. Biomarker data
   e. Other (please specify)

15. How often is biomarker testing (Hormone receptor status, HER2, p53, dMMR/MSI-H etc) performed in newly diagnosed patients?
    a. Never
    b. Rarely
    c. Sometimes
    d. Frequently
    e. Always

16. How often is biomarker testing (Hormone receptor status, HER2, p53, dMMR/MSI-H, etc.) performed upon recurrence?
    a. Never
    b. Rarely
    c. Sometimes
    d. Frequently
    e. Always

17. How would you rate your familiarity with biomarker testing procedures and the clinical implications of their results?
    a. Very unfamiliar
    b. Unfamiliar
    c. Somewhat familiar
    d. Familiar
    e. Very familiar

18. What information about molecular subtypes would be beneficial to you when managing EC patients? Select all that apply.
    a. Academic information on molecular subtypes
    b. Clinical manifestations of molecular subtypes
    c. Prognosis of molecular subtypes
    d. Specific course of treatment for molecular subtypes
    e. Other (please specify)

19. What do you think is the largest unmet need for EC patients in Canada? (Open answer)

20. Are there any additional knowledge gaps in the management of EC? Consider the clinician, allied healthcare professional and patient perspectives (Open answer)

Educational Support Moving Forward

21. For continued education about EC and immunotherapies, select the top 3 medical education services that would appeal to you the most:
    a. National advisory boards (live or virtual)
    b. Regional consultancy meetings (live or virtual)
    c. Case-sharing opportunities
    d. Lecture series (mix of live and virtual)
    e. Digital seminars or broadcasts
    f. Self-study material (e.g. recordings, podcasts, reading)

g. Mentorship programs
h. Reference/tip sheets