

# WILLINGNESS TO PAY QUESTIONNAIRE

Version 1.0 dated 12/03/2018

## EMPOWER: EMesis in Pregnancy - Ondansetron With mEtoclopRamide

### Valuing the benefits of improving symptoms of moderate to severe nausea and vomiting in pregnancy

During pregnancy, some women experience Nausea and Vomiting. Women with mild symptoms are usually able to look after themselves at home without too much difficulty. Women with more severe Nausea and Vomiting can become dehydrated, unable to do the things they would usually do and often need a doctor at hospital to prescribe them medicines to help manage their symptoms. Also, moderate to severe Nausea and Vomiting in Pregnancy can cause lots of other problems for sufferers. For example, it can mean that women need to organise someone to help look after their other children or they may lose income because they are too ill to work. There may also be impacts on partners or other family members e.g. if they have to take time off work to help look after other children.

We are interested in your views about moderate to severe Nausea and Vomiting in Pregnancy. We would like to know your opinion on how valuable it would be to improve symptoms of Nausea and Vomiting in Pregnancy. The questions that follow will help us better understand the importance of effective treatment to pregnant women suffering from severe Nausea and Vomiting.

The information you provide will be treated as STRICTLY CONFIDENTIAL. Anything that we publish regarding this survey will not include your name or any details about you personally that could be used to identify you.

If you have any questions regarding this questionnaire please contact:

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]



Please **tick** (✓) the appropriate boxes and answer the more detailed questions where relevant.

In order for us to understand more about the symptoms you have experienced recently in your pregnancy, we would like you to think about the different aspects of your life that have been affected when you have had symptoms of Nausea and Vomiting in your Pregnancy.

**Q1. From the list below choose those aspects that have TYPICALLY AFFECTED YOU RECENTLY.**

	<i>(Please tick all that apply)</i>
Severe nausea <i>(e.g. Unable to keep down any food and fluids)</i>	<input type="checkbox"/>
Severe vomiting <i>(e.g. Unable to keep down any food and fluids)</i>	<input type="checkbox"/>
Moderate nausea <i>(e.g. Able to keep down some food and fluids)</i>	<input type="checkbox"/>
Moderate vomiting <i>(e.g. Able to keep down some food and fluids)</i>	<input type="checkbox"/>
Feeling down	<input type="checkbox"/>
Feeling tired/lethargic	<input type="checkbox"/>
Difficulty doing activities of daily life	<input type="checkbox"/>
Negative effect on family life	<input type="checkbox"/>
Reduced ability to work	<input type="checkbox"/>
Difficulty taking part in social activities	<input type="checkbox"/>
Other symptoms or activities affected <i>(please, specify)</i>	..... .....

In the next part of this questionnaire, we will be using monetary values as a way to measure how important reducing symptom severity of Nausea and Vomiting in

Pregnancy is to you. This information helps us to understand the effect that Nausea and Vomiting in Pregnancy has had on your life in monetary terms. We would like to know what monetary value you would place on improved symptom severity.

We would like to know the **maximum amount** you would be willing to spend as a **one-off lumpsum payment** to experience improved symptom severity for a 10 week duration. When you answer this question, you can assume that this 10 week period of improved symptoms covers the period of really intense symptoms in your pregnancy.

**Improvement in symptoms varies across women, but it could mean the following:**

- 1. you are able to drink enough to not become dehydrated**
- 2. you will be able to eat and hold down more food than you are at present**
- 3. you are vomiting no more than twice daily and there may even be days where you do not vomit**
- 4. you are able to get out of bed and take care of yourself at home**
- 5. your nausea is less severe**

The **maximum amount** you are willing to spend to improve your symptoms for 10 weeks compared with other things you might spent your money on also gives us an indication of the value that you place on improving symptoms.

You will not be asked to pay anything towards your health care; we simply want to know the monetary value that women place on a 10 week duration of improved symptoms of Nausea and Vomiting in Pregnancy.

**Q2. We would like you to imagine a hypothetical scenario.**

**Think about how bad the nausea and vomiting was when you entered the EMPOWER study. Imagine that you are 5 to 10 weeks pregnant and suffering the same symptoms of nausea and vomiting as when you entered the EMPOWER study. Imagine that your hospital consultant offered you medication that will improve your symptoms for a 10 week duration covering the period of really intense symptoms in your pregnancy.**

**Would you be willing to pay a one-off sum of money to have improved symptom severity from Nausea and Vomiting in Pregnancy for a 10 week duration? (Please tick one box)**

**Yes** <Go to Q3>

**No** <GO to Q6>

**Q.3 We would like to know the maximum amount you are willing to spend, as a one-off payment, to have improved symptom severity from nausea and vomiting for a 10 week duration.**

**For each of the amounts shown below, please place a tick only if you are sure you would be willing to pay the amount stated to have improved symptom severity over a 10 week duration. Stop ticking when you have reached your maximum willing to pay.**

*(For example if you were willing to pay up to £750 you would tick £20, £100, £200, £500, and £750)*

Amount	I would <b>definitely</b> be prepared to pay the amount	
£20	<input type="checkbox"/>	Go to Q.4
£100	<input type="checkbox"/>	
£200	<input type="checkbox"/>	
£500	<input type="checkbox"/>	
£750	<input type="checkbox"/>	
£1,000	<input type="checkbox"/>	
£1,250	<input type="checkbox"/>	
£2,000	<input type="checkbox"/>	
£3,000	<input type="checkbox"/>	
£5,000	<input type="checkbox"/>	
£6,500	<input type="checkbox"/>	
£8,000	<input type="checkbox"/>	
More than £8,000	<input type="checkbox"/>	Go to Q.4

**Q4. Referring back to your answer in Q3, please state the maximum amount you would be willing to pay to have improved symptom severity from nausea and vomiting for a 10 week duration.**

*(For example, if you ticked £750 but not £1,000, then please state the highest amount you would be willing to pay between £750 and £1,000)*

Maximum you are willing to pay      £ 

--	--	--	--	--

**On the following scale of 1 to 5, please state how difficult or easy it was to provide the value above (the maximum one-off amount you would be willing to pay).**

**Please circle one number only**

Extremely Easy					Extremely Difficult
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	

**Q5. When answering how much you were willing to pay to have improved symptom severity from nausea and vomiting for a 10 week duration, what was/were the most important factors you were considering when thinking of your maximum willingness to pay?**

	<i>(Please tick <u>all</u> boxes that apply)</i>
Personal income/savings	<input type="checkbox"/>
Other financial commitments	<input type="checkbox"/>
Unpleasantness of symptoms	<input type="checkbox"/>
Impact of symptoms on family life	<input type="checkbox"/>
Impact of symptoms on ability to work	<input type="checkbox"/>
Other <i>(please, specify)</i>	.....

**Please now go to Question 7**

**Q6. If you answered No in Question 2 - Please state the reasons you are not prepared to pay to have improved symptom severity, from nausea and vomiting for a 10 week duration.**

*(please tick **all** boxes that apply)*

I do not place any value on improved symptom severity over a 10 week duration	<input type="checkbox"/>
I believe that healthcare should be free	<input type="checkbox"/>
Lack of budget	<input type="checkbox"/>
Other reason (please specify below)	<input type="checkbox"/>

**Q7. Please select the category that best describes your current employment status**

<b>Your current employment status</b>		<i>(Please tick <b>one</b> box for you and <b>one</b> box for your partner (if applicable))</i>	
		<b>Yourself</b>	<b>Your partner</b>
In full or part-time employment/Maternity leave		<input type="checkbox"/>	<input type="checkbox"/>
Looking after home and family full time		<input type="checkbox"/>	<input type="checkbox"/>
Unemployed		<input type="checkbox"/>	<input type="checkbox"/>
Short term sick <i>(absence as lasting less than 28 calendar days)</i>	Was the absence from work related to your pregnancy?  Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Long term sick <i>(absence as lasting 28 or more calendar days) or disabled</i>	Was the absence Related to your pregnancy?  Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Full/part-time study		<input type="checkbox"/>	<input type="checkbox"/>
Retired from paid work altogether		<input type="checkbox"/>	<input type="checkbox"/>
Other (please, specify)		.....	.....

**Q8. Could you please provide an estimate of your annual household income from all sources (before tax and including your partner/spouse)? (Please ✓ appropriate box). This information is needed to account for earning ability on the willingness-to-pay value provided earlier (*it will not be used for any other purpose*).**

Less than £15,000	<input type="checkbox"/>
£15,001 to £20,000	<input type="checkbox"/>
£20,001 to £25,000	<input type="checkbox"/>
£25,001 to £30,000	<input type="checkbox"/>
£30,001 to £35,000	<input type="checkbox"/>
£35,001 to £40,000	<input type="checkbox"/>
£40,001 to £45,000	<input type="checkbox"/>
£45,001 and greater	<input type="checkbox"/>

**Q9: Do you have access to private health insurance?**

		(Please tick <b>one</b> box)
No		<input type="checkbox"/>
Yes		<input type="checkbox"/>

**Q10. Are there any comments that you would like to make about how Nausea and Vomiting in Pregnancy symptoms affects you?**

.....

.....

.....

.....

**Thank you for taking the time to complete this questionnaire**