Exploring barriers to optimal asthma management by physicians Interview guide – The physician's perceptive

« The goal of this interview is to know more about your practice with patients with asthma to better understand, from your clinical experience (and those of other physicians) what are the challenges related to the treatment of asthma, especially the self-management of asthma. We also want to explore the possible solutions to answer those challenges. »

A. INTRODUCTION / ICE BREAKER

A1. In what context of practice do you see patients with asthma?

- A2. How do you describe asthma to your patients?
- A3. For you, what are the objectives to be attain when you treat a patient with asthma?

B. CLINICAL PRACTICE

B1. Could you describe me how you prescribe medication for a patient with asthma?

What are the control medications (*for maintenance*) that you prescribe? How do you prescribe them (e.g.: short-term daily use, long-term, intermittently)? (*Use illustrations if required*) What do you mean by "long-term"?

B2. What has influenced your practice regarding the prescription of control medications? (*e.g.: training, colleagues, professional values, environment, guidelines*) From all the elements that you have mentioned, what is the one that was the most decisive?

B3. Based on your experience, what facilitates the prescription of control medication with your patients? What hinders or makes it more difficult?

B4. (*If relevant and adjust as needed*) What would you think/do if the guidelines for the treatment of asthma recommended that physicians prescribe long-term daily controller medication (*e.g., inhaled steroids/corticosteroids as Flovent, Pulmicort, Qvar, Alvesco or in combination: Symbicort, Advair*) to your patients diagnosed with severe asthma? (*Explore the perception of advantages and disadvantages linked to such practice and if relevant, see what could help or prompt to prescribe them and what would make it more difficult*)

(If the MD says s/he does not follow this recommendation, explore the criteria of diagnosis implemented)

C. COMMUNICATION OF MEDICAL RECOMMENDATIONS

C1. What do you advise your patients to do in case of aggravation of their symptoms? How do you normally transmit those recommendations?

C2. What has influenced your clinical practice concerning your way of communicating with your patients? (*e.g.: training, colleagues, professional values, environment, guidelines*)

C3. Based on your experience, what facilitates the communication of your medical recommendations to your patients? What hinders or makes it more difficult?

C4. (*If relevant*) What do you think of written action plans that can be given to patients? (*Show a model if needed and explore the perception of advantages and disadvantages associated with this practice*)

- What would you think/do if the guidelines for asthma treatment recommended that physicians use written action plans with most of their patients with asthma?
- What would help you -or prompt you- to use them? What would make it more difficult?

D. CHANGES IN THE MEDICAL PRACTICE

D1. Now we would like to discuss about the changes you made all along your clinical practice.

- What are major changes you did since you started working as a MD?
- What moved you to make those changes?
- What did you do to effectively change?
- What's your opinion concerning those changes? Would you say you succeed?
- What do you think that help things work?

E. DOCTOR-PATIENT RELATIONSHIP

E1. How would you say that your practice varies from patient to patient? (*e.g.: age group, control/severity of asthma, SES, culture, patient's attitude*) (*Explore for prescription and for styles of communication/written action plans depending on the relevance*). At equal severity, are there other differences present in your practice?

E2. In your opinion, what makes certain patients follow more (or less) than others medical recommendations? *(Explore for prescription and for styles of communication/written action plans depending on the relevance).*

E3. In your opinion, what is your role in the treatment of asthma? And what is the patient's role?

^{**}All items printed in italic were instructions to the interviewer.