# Interview schedule for Lynch syndrome interviews

Thank you for agreeing to take part. Just before we start the interview, I’d like to quickly go over some key points about your rights as a participant in this study. It is completely fine if at any point you would like to stop the interview, or if you do not want to answer a question, please just let me know. You can also withdraw from the study at any point and you do not have to provide a reason for why. Just to remind you the interview will be recorded, but anything you say to me today will be kept confidential, and if you are quoted in any of our reports your name will not be used and instead you will be given a pseudonym, which is a fake name. I will also anonymise anything identifiable, like places, you mention as well. After the interview, if you have any further questions about anything we discussed today, please feel free to contact me. I can also provide a debrief sheet at the end with website links with further information on this topic in case you are interested in reading more. Are you happy to continue?

## Lynch syndrome qualitative interviews

As you read on the information sheet, the study is aiming to understand what people with Lynch syndrome think about using aspirin for cancer prevention, including the reasons why people may or may not be willing to use it. First, before we start the interview questions, I would just like to briefly read a section of the guidelines for bowel cancer which have been adopted by NHS England. The guidance says:

“Consider daily aspirin, to be taken for more than 2 years, to prevent colorectal cancer in people with Lynch syndrome.”

Another section of the guideline states some of the side-effects of taking aspirin daily:

“Long-term use of aspirin may slightly increase the risk of bleeding.”

I will now move onto the interview questions, which will explore your thoughts on using aspirin regularly for cancer prevention. Just a reminder before we start, no prior knowledge on the use of aspirin for cancer prevention is needed or expected of you, we are just interested in hearing your initial thoughts.

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| **Domains** | **Interview questions** |
| Knowledge  Enviromental context and resources  Intentions  Social influences | Had you heard of the use of aspirin for cancer prevention before this interview?  If yes, where and how did you hear about this?  If no, how would you find such information? Prompts: from what sources? Internet? A healthcare professional?  Who would you like to tell you about this information? Prompt: Any particular healthcare professionals, e.g. your GP?  *[If they are aware of aspirin for cancer prevention, then ask:]*  Do you already take aspirin regularly for cancer prevention?  *[If no]* Is there any particular reason why you don’t take it?  *[If yes]* What factors influenced your decision to use aspirin?  Have you ever been encouraged or discouraged by someone to take aspirin regularly for cancer prevention? Prompt: Why was this? |
| Optimism  Beliefs about consequences  Emotions  Enviromental context and resources | In your opinion, do you think using aspirin would be a good way to reduce your risk of developing bowel cancer in the future? Prompt: Why do you think this?  Do you have any concerns about taking aspirin regularly? Prompts: How do you feel about the side-effects?  What kind of information do you think you would need to help you make a decision on whether to take aspirin regularly for cancer prevention?  Where would you go to get this information? Prompts: What would your first step be to obtain this information? Internet? Healthcare professionals? |
| Beliefs about consequences | I mentioned before one of potential side-effects of regular aspirin use can be internal bleeding. There are several risk factors that make a person more likely to experience internal bleeding from regular aspirin use. These include:   * Active or previous peptic ulceration * Bleeding disorders * Over the age of 65 * Uncontrolled hypertension * Previous history of stroke * Abnormal liver or renal function * Experience indigestion on aspirin   If you had any of these risk factors, your doctor may offer you an additional medication to reduce your risk of internal bleeding.  What are your thoughts on taking regular aspirin alongside another medication to reduce your risk of bowel cancer? |
| Skills  Beliefs about capabilities  Emotion  Reinforcement  Enviromental context and resources | If you were interested in taking aspirin for cancer prevention, do you know how you would obtain a prescription for daily aspirin? Please describe how you would go about this. Prompts: What would your first step be?  How comfortable would you feel about going through this route to get a prescription for aspirin?  *[If they mention they already have prescription/ tried to get prescription for aspirin]*  Have you previously encountered any problems trying to get a prescription for daily aspirin? If yes, please describe these problems.  Is there anything about this experience that makes you more or less likely to take aspirin regularly in the future? |
| Goals  Memory, attention and decision processes | How much of a priority is taking aspirin for cancer prevention to you? Prompts: how high or low a priority is it?  Are there any other higher priorities? Prompt: Prevention priorities? What are they? |

## Brief quantitative questions

Thank you so much for your answers so far. Just before we end the interview, there are several brief demographic questions that I would just like to go through with you. If you do not want to answer one these questions, please let me know and we can skip it.

1. What is your age?
2. Please describe your gender? Male; Female; Non-binary; Another identity; Prefer not to say.
3. How would you describe your ethnicity? Examples include White British, Indian, Mixed – White and Black Caribbean
4. What country in the UK do you live?
5. Year of Lynch syndrome diagnosis?
6. Have you previously been diagnosed with cancer?

## Debrief

Thank you for all your help with answering my questions. We really appreciate your time and hope that it will be useful in the future when we are trying to support people when making a decision about whether to use aspirin for cancer prevention. Before we end, do you have any questions you would like to ask me?

If you would like more information on the topic of the use of aspirin for cancer prevention, I can email you an information sheet with website links with this further information. If you would like to ask me further questions on the study, please do not hesitate to contact me.