



DIA 2018
GLOBAL ANNUAL MEETING
BOSTON | JUNE 24-28

The Caregiver Factor

Understanding the Medical Journey of the Caregiver
and their Information and Support Needs

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Presenter

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Background and Purpose

Understand the Role of Caregivers in Medical Decisions and How Best to Support their Journey

Caregivers often play a vital role in treatment decisions for their loved one. The purpose of this research is to better understand the dynamics of this role and what caregivers need as they embark on the care journey and as they gain more confidence in their role.

While caregiver experiences and needs may vary based on a number of factors, the research is designed to identify commonalities across a wide range of people who provide voluntary care to patients (adults and children) with chronic conditions.



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Methodology



IRB approved 15-20 minute online survey of 633 caregivers



U.S. residents age 18+
Provide voluntary care to adult or child with chronic condition
Involved in medical decisions/treatment choices



April 16 to May 31, 2018

Extent to which caregiver is involved in discussions about medical choices and/or treatment decisions for care recipient

Very involved	91%
Somewhat involved	7%
Not very involved	1%
Not involved at all	<i>Not qualified for survey</i>



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Methodology (continued)



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To ensure a wide representation of U.S. caregivers, a variety of online recruitment methods were used:

- ▶ Distribution of the survey link to partner organizations' membership (email, newsletters, social media)
- ▶ Outreach to diverse disease, caregiver groups and social media influencers
- ▶ Targeted Facebook advertisements



Survey results are representative of caregivers who were reached by these methods and who responded to the survey

Our Partners

Acres Global
Alagille Syndrome Alliance
Alkermes
American Cancer Society –
Cancer Action Network
American Chronic Pain Association
American Heart Association
American Medical Women's
Association
American Syringomyelia and
Chiari Alliance Project
Amgen
Angelman Biomarkers and
Outcome Measures Alliance
Cancer Support Community
CancerCare
Caregiver Action Network
Charlotte and Gwenyth Gray
Foundation to Cure Batten Disease
Cholangiocarcinoma Foundation

Colorectal Cancer Alliance
Critical Mass
DC Outreach
EMD Serono
The End Brain Cancer Initiative
Enzyvant
Epilepsy Foundation
Evans Syndrome Foundation
Family Voices
First Descents
Food Allergic Adults Support Group
g6pd Deficiency Foundation
Global Genes
HealthyWomen.org
Hereditary Neuropathy Foundation
(HNF Cure)
Hermansky-Pudlak Syndrome
Network
Horizon Pharma

Ionis Patient Advocacy
Kite Pharma
Les Turner ALS Foundation
Leukemia & Lymphoma Society
Luck Fupus
Medical Education Institute
Mended Hearts
Mended Little Hearts
Merck
MS Focus
National Alliance for Caregiving
National Alliance on Mental Illness
National Blood Clot Alliance
National Osteoporosis Foundation
National Register of Health
Service Psychologists
National Stroke Association
NTMinfo
Parent Project Muscular Dystrophy

Parkinson's Resource Organization
Patvocates
Patient Empowerment Network
(Powerful Patients)
PTC Bio
RUN -Rare & Undiagnosed Network
Sage Therapeutics
Santhera
Sharsheret
Short Bowel Syndrome Foundation
Sofia Sees Hope
Spark
Teen Cancer America
Tesarro
The Samfund
Ulman Cancer Fund for Young Adults
US Pain Foundation
Vestibular Disorders Association
Wilson's Disease Association



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Caregiver and Care Recipient Characteristics

Caregivers

	n=633
Gender	
Female	82%
Male	18%
Age	
<40	9%
40-49	15%
50-59	30%
60-69	31%
70+	16%
Married	78%
College grad +	79%
Employed full/part time	48%
Race/ethnicity	
White or Caucasian	81%
Black or African-American	3%
Hispanic, Latino, or Spanish	9%
Other	3%
Prefer not to say	4%

Care Recipients

	n=633
Patient relationship to caregiver	
Spouse / Significant other / Partner	52%
Parent/parent in-law	27%
Child or stepchild	9%
Adult child	6%
Someone else	6%
Patient Gender	
Female	41%
Male	59%
Patient Age	
<20	8%
20-29	6%
30-39	4%
40-49	6%
50-59	13%
60-69	21%
70-79	19%
80+	23%



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Caregivers Represented Patients with Wide Variety of Conditions

	n=633
Condition that most drives care recipient's needs (top mentions)	
Stroke, Trans Ischemic Attack (TIA), or post-stroke symptoms	39%
Alzheimer's disease, mild cognitive impairment or dementia	20%
Chronic Pain	14%
Heart disease, including heart failure, post-heart attack care	14%
Blood cancers such as Leukemia, Lymphoma, Myeloma	13%
Mental health, including depression, anxiety disorders, bipolar disorder, schizophrenia, etc.	12%
Diabetes or related complications	12%
General age-related issues / elder care	11%
Cancer, other than blood cancers	9%
Muscular Dystrophy, Duchenne Muscular Dystrophy	7%
Kidney disease	6%
Osteoporosis	6%
Bowel disorders	6%
Disability due to trauma/accident or neuromuscular disease	5%
Autoimmune disease (lupus, rheumatoid arthritis)	5%
Seizure disorder	5%



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Care Dynamics

Nearly three-quarters of surveyed caregivers live in the same household as their care recipient; the majority of those who do not live within close proximity.

Most have been involved in care choices/treatment decisions for more than 3 years.

	n=633
Caregiver and care recipient currently live in same HH	74%
<i>Among those who do not live in the same household</i>	n=158
Distance to care recipient	
Walking distance/10-15-minute drive	49%
1 hour drive	26%
1-4 hour drive	8%
4+ hour drive	5%
Not within driving distance	12%
	n=633
Years of involvement in making care choices and treatment decisions	
Less than 1 year	6%
Between 1 and 2 years	14%
Between 3 and 5 years	25%
Between 6 and 10 years	24%
Between 11 and 20 years	20%
More than 20 years	12%



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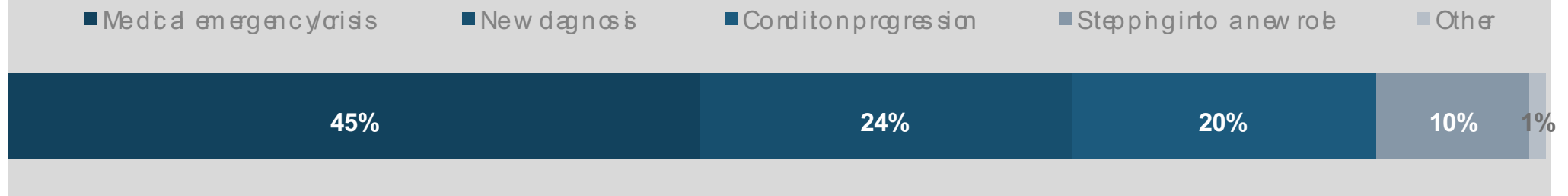


Most caregivers are thrust into the role suddenly with a medical emergency or new diagnosis



Situation When Care Role First Became Apparent

One response permitted, among all answering, n=632



69% stepped into their caregiving role based on an emergency or new diagnosis



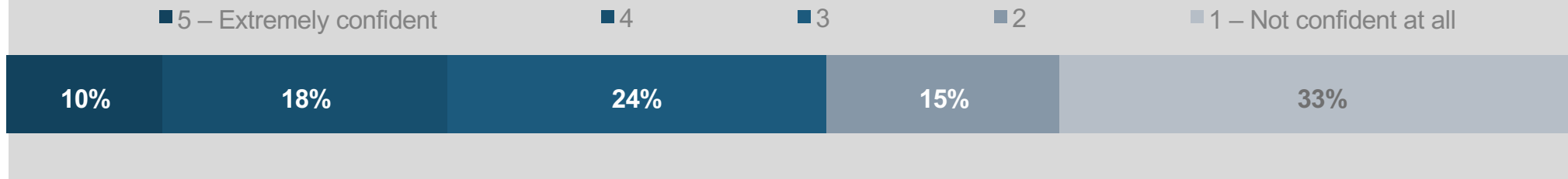
Caregivers are not fully prepared for their role in medical decisions at the outset



Caregiver Confidence in Having All Information Needed to Make Medical Decisions/Treatment Choices:

When first involved as caregiver

One response permitted, among all answering, n=631



Only **28%** felt they had the information they needed to medical decisions/treatment choices at the outset



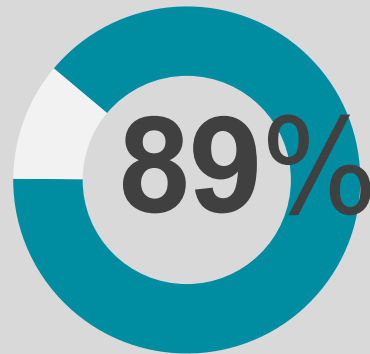
While actively seeking information, few could claim expertise when they moved into the caregiver role

Caregiver Agreement with Statements: When first involved as caregiver

% Strongly/somewhat agree

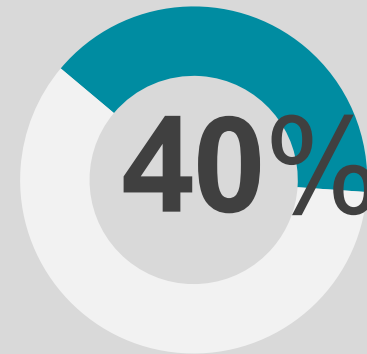
I was frequently searching for more information about their medical condition(s), medications and treatment options

Among all answering, n=631



I considered myself to be an expert on their medical condition(s), medications and treatment options

Among all answering, n=631



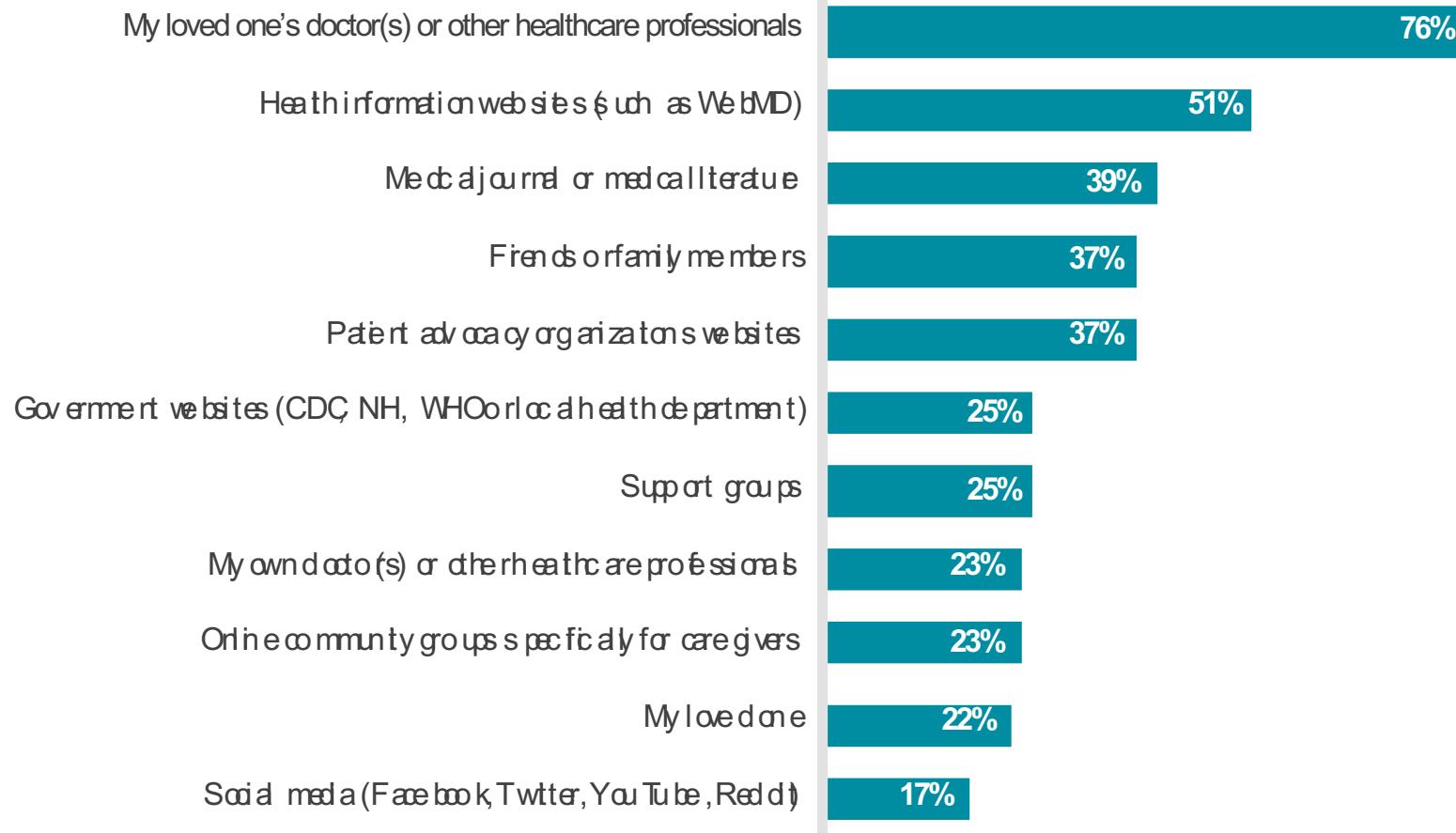
HCPs play an important role in helping caregivers learn about care options and treatment choices



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Sources used to learn more about care options/treatment choices when first became involved as caregiver

Multiple responses permitted, top mentions shown, n=631



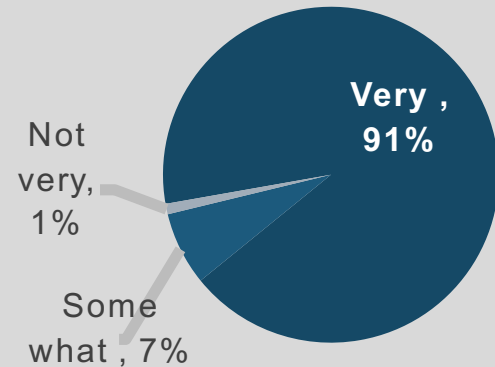
Caregivers are highly involved in treatment decisions and are becoming more so



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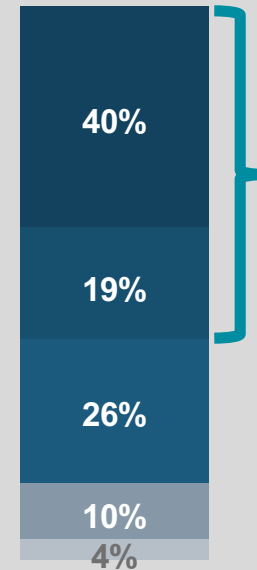


Extent of involvement in medical choices and/or treatment decisions
Among all answering, n=633



Change in role in medical choices and/or treatment decisions over past year
Among all answering, n=630

- Increased significantly
- Increased a little
- No change
- Decreased a little
- Decreased significantly



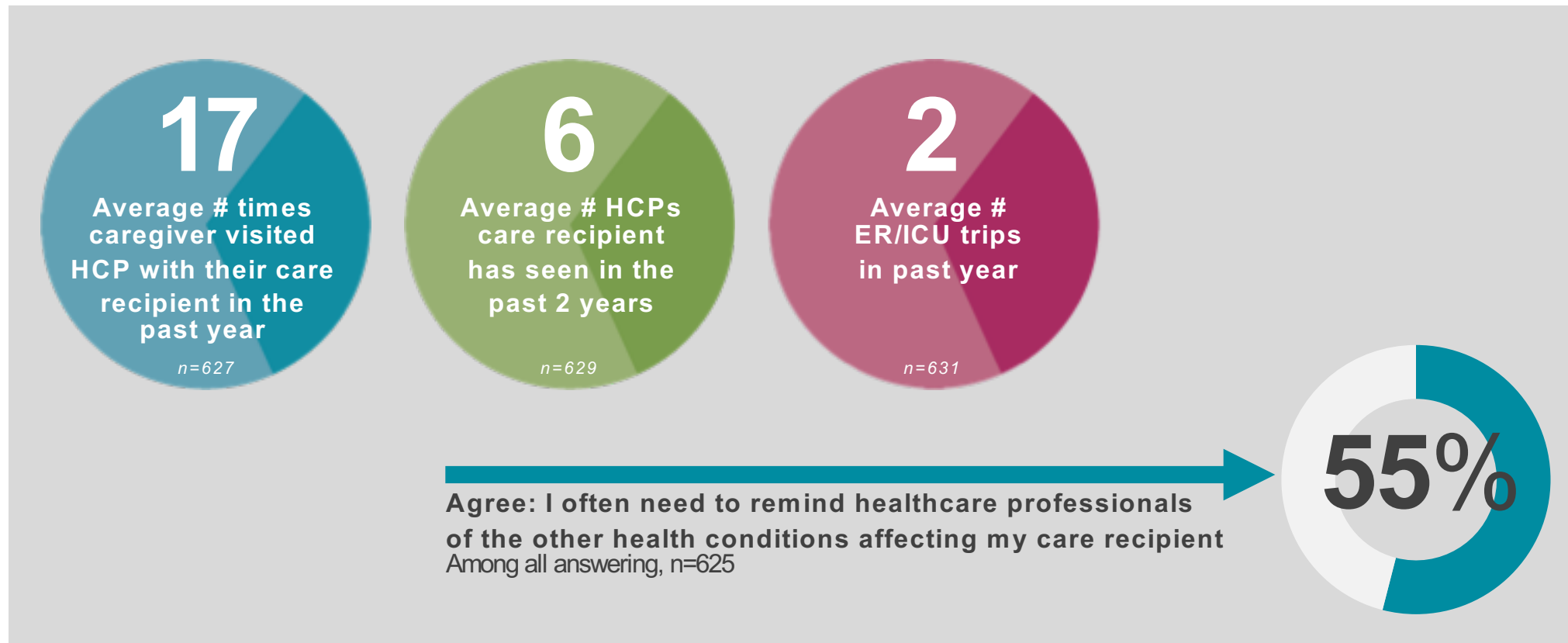
59% report an increasing role in medical decisions

Q7. To what extent are you involved in discussions about medical choices and/or treatment decisions the person you care for?
Q32. Over the past year or so, how has your role in medical and/or day-to-day support and decision making changed (if at all)?

Caregivers are often the “point person” for care, participating in HCP appointments, coordinating across specialists, and responding to emergencies



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Q38. In the past two years, which of the following types of healthcare professionals have seen the person you care for in any setting – including office visits, hospital stays, etc.? Please choose all that apply.

Q39. In the past year, how many times have you visited a doctor or healthcare professional with the person you care for – excluding trips to the hospital or emergency room? Your best estimate is fine.

Q39. In the past year, how many times have you visited a doctor or healthcare professional with the person you care for – excluding trips to the hospital or emergency room? Your best estimate is fine.

Q41. On the scale below, please indicate how much you agree or disagree with the following statements about the healthcare professionals of the person you care for. Scale: Strongly disagree. Somewhat disagree, Somewhat agree, Strongly agree

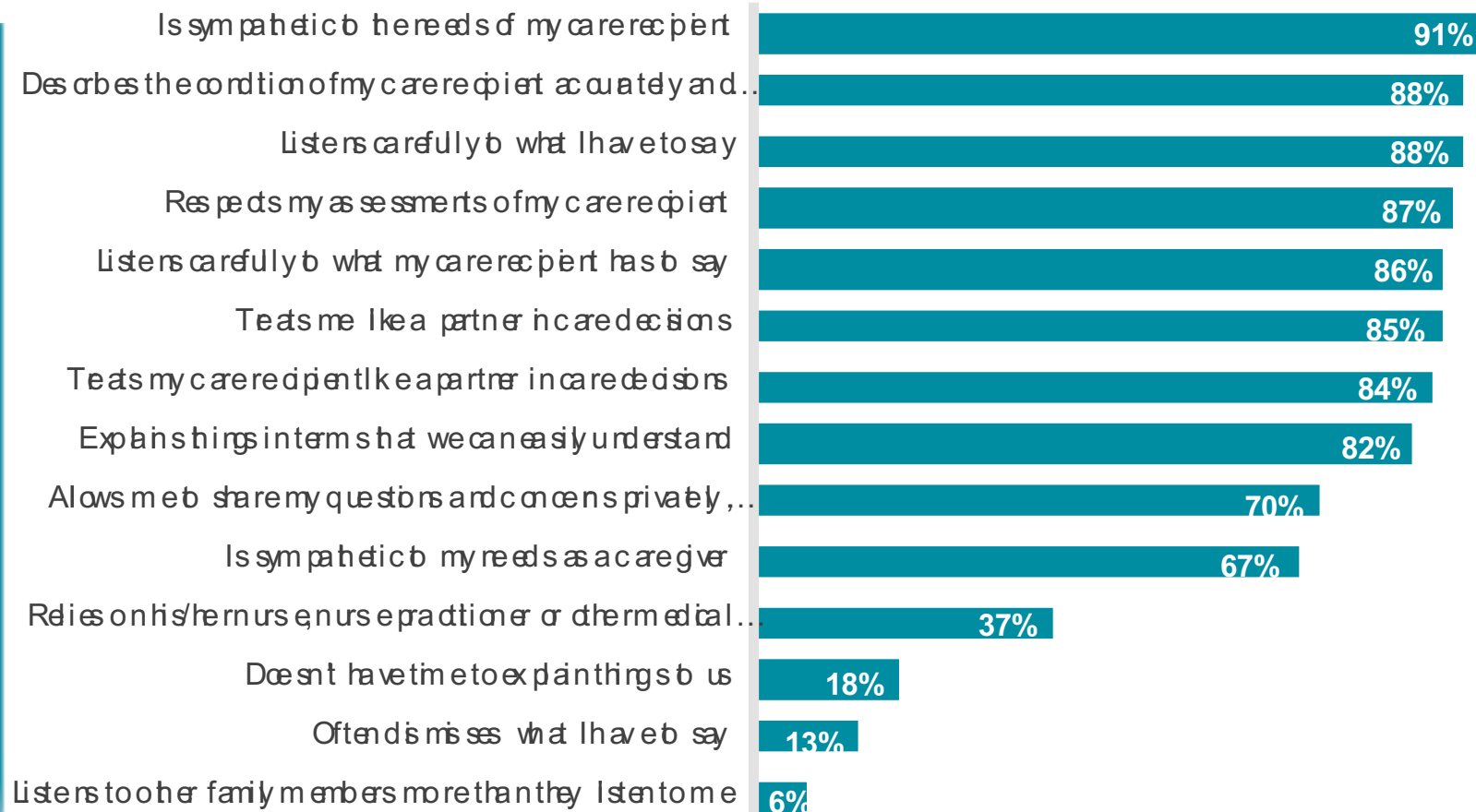
Overall, caregivers have very positive perceptions of their care recipient's primary physician



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Agree: The doctor who is most knowledgeable about my care recipient...

Among all answering, n=620-626

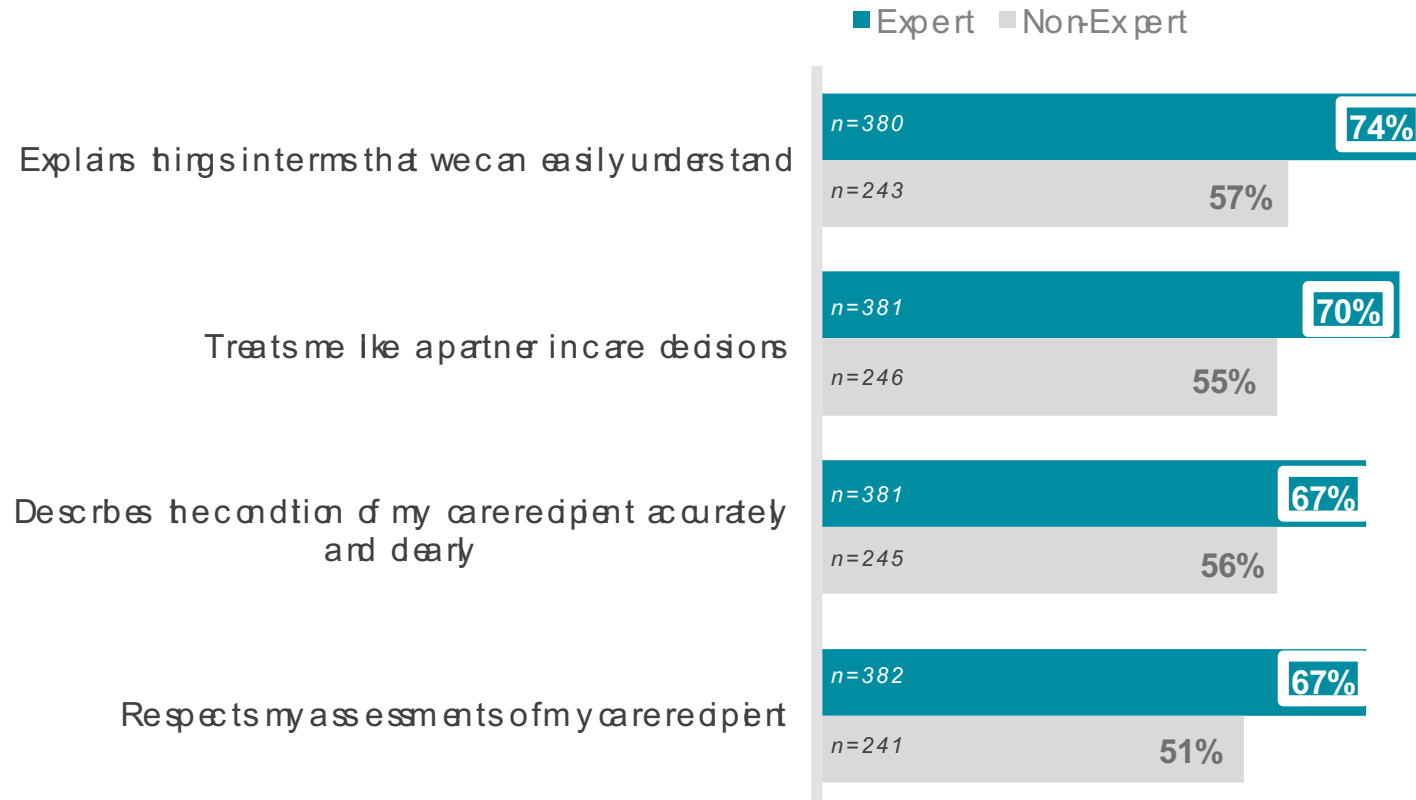


Caregivers who are confident in their condition/treatment expertise report better communication with their care recipient's doctor



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Strongly Agree:
The doctor who is most knowledgeable about my care recipient...



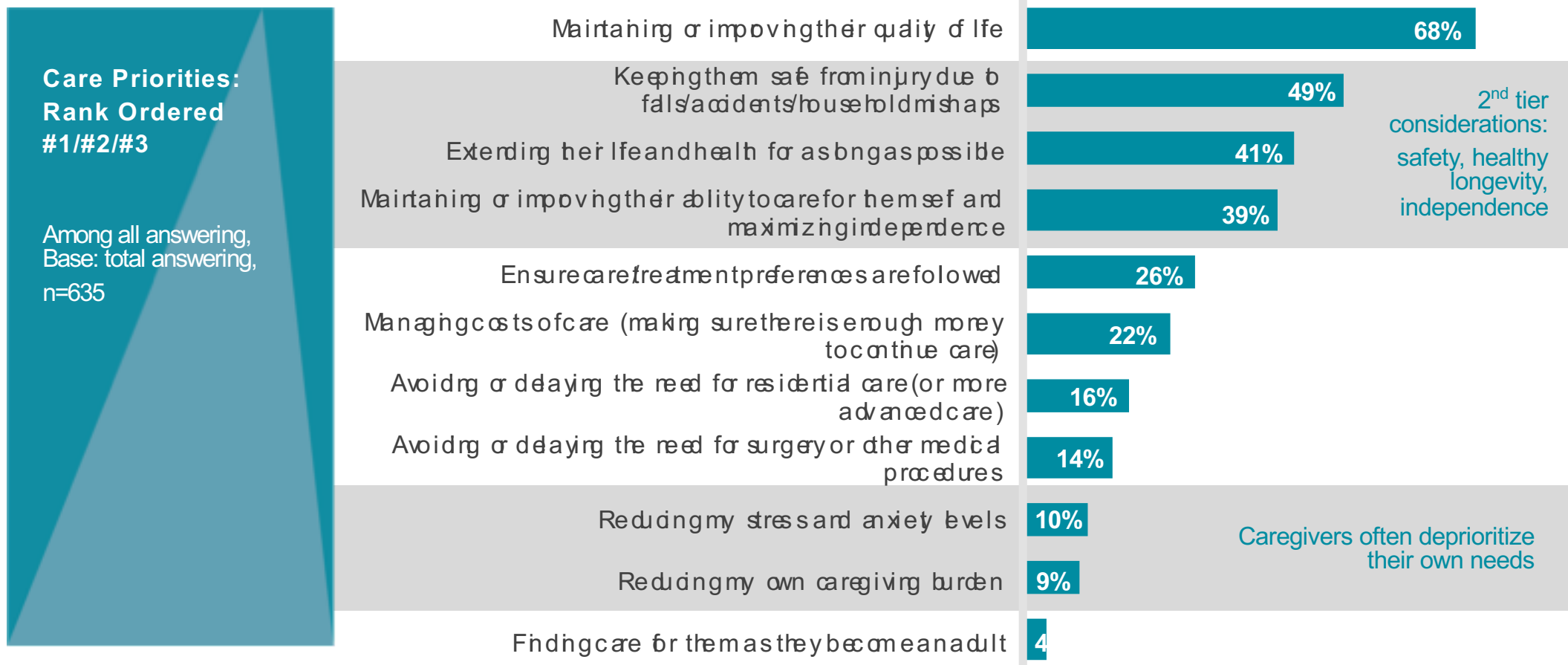
Boxes indicate statistically higher percentages at the 95% level of confidence

Expert = agree with statement: I consider myself to be an expert on their medical condition(s), medications and treatment options
Q42. Please indicate how much you agree with the following statements about the physician who is most knowledgeable about your care recipient.
Scale: Strongly disagree, Somewhat disagree, Somewhat agree, Strongly agree

Top priority patient quality of life, lowest priority caregiver burden



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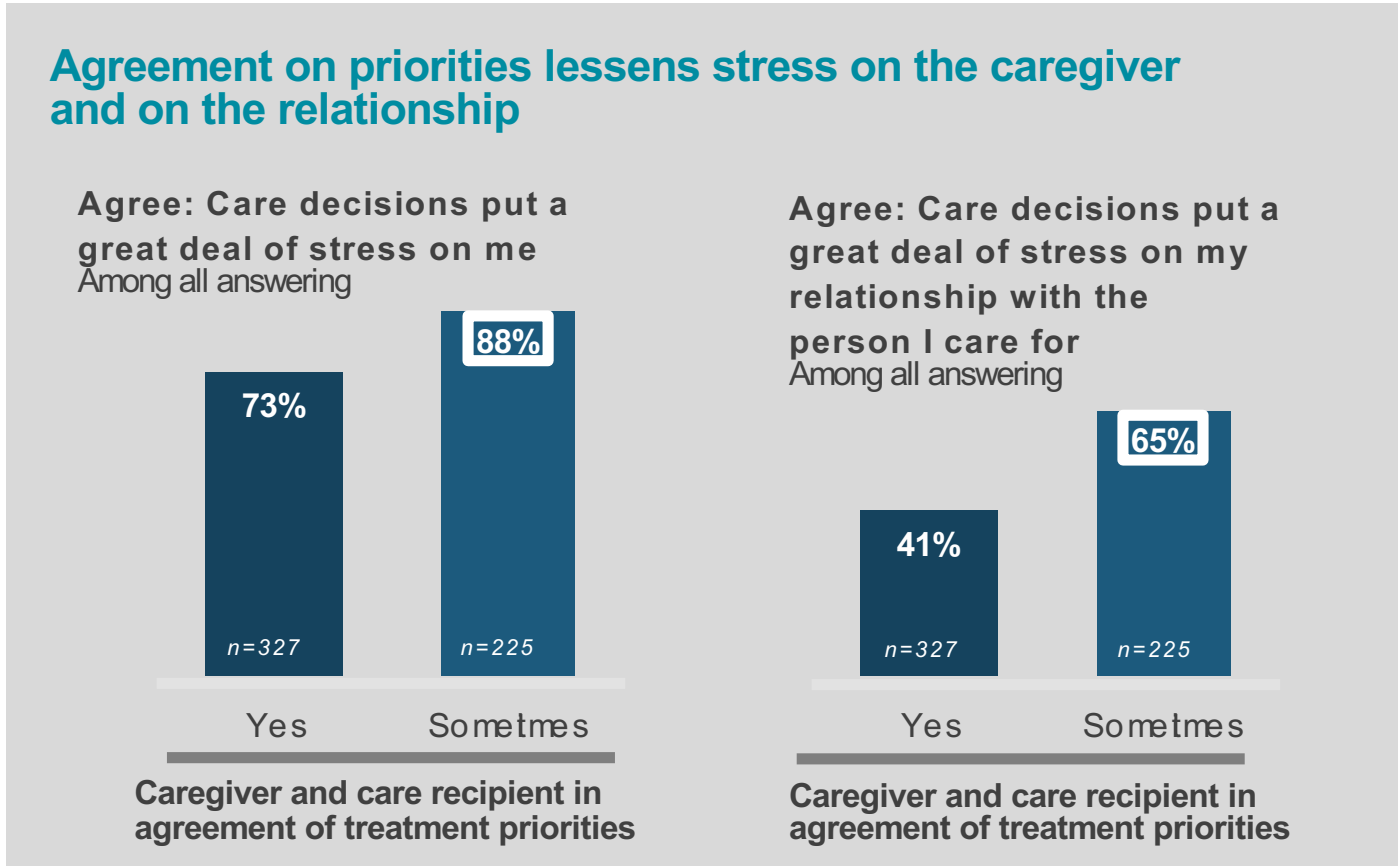
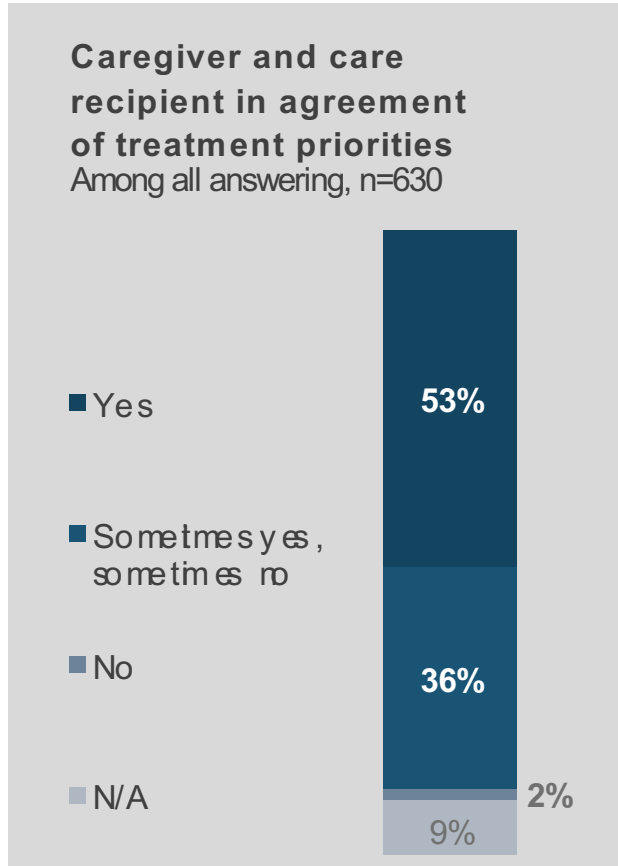


Q34. We would like to know what factors you personally consider when deciding on care and treatment options for your care recipient. Please rank order the items below by placing a "1" next to the one that is the most important, a "2" next to the second most important factor, etc. If you are not actively involved in these decisions, please rank order based on what your priorities would be if you were involved.

Caregivers and recipients are often in agreement on care priorities



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Boxes indicate statistically higher percentages at the 95% level of confidence

Q35. Are you and the person you care for in agreement with these care priorities?

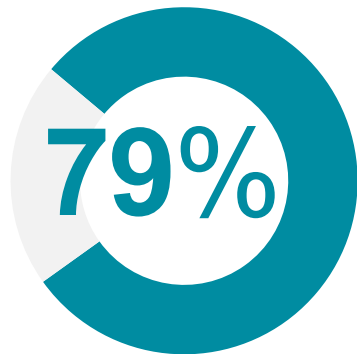
Q37. On the scale below, please indicate the degree to which you agree or disagree with the following statements. Scale: Strongly disagree, Somewhat disagree, Somewhat agree, Strongly agree

Caregivers continue to seek information throughout their journey



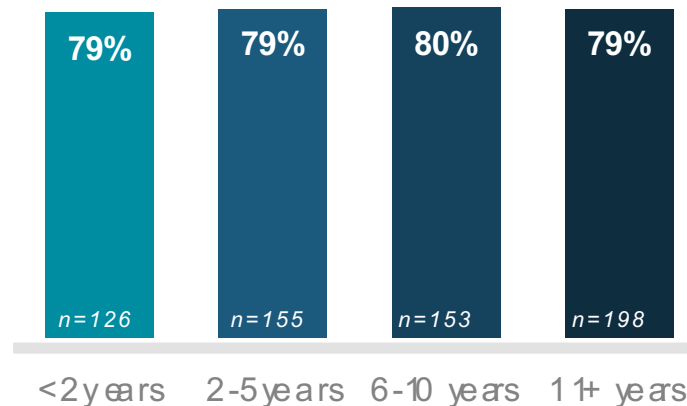
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Agree: I am frequently searching for more information about their medical condition(s), medications, and treatment options
Among all answering, n=632



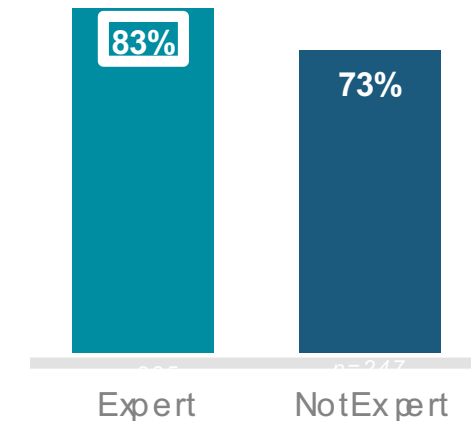
... regardless of years of experience with medical decisions

By years of involvement in making care choices and treatment decisions



... or their perceptions of their own expertise. In fact, “experts” are even more likely to be information seekers.

By perceptions of condition expertise



Boxes indicate statistically higher percentages at the 95% level of confidence

Expert = agree with statement: I consider myself to be an expert on their medical condition(s), medications and treatment options
Q17. For how many years have you been involved in medical care choices and treatment decisions for your care recipient?
Q29. On the scale below, please indicate the degree to which you agree or disagree with the following statements. *Scale: Strongly disagree, Somewhat disagree, Somewhat agree, Strongly agree*

Caregivers will continue to seek information to help them in the next step of their journey

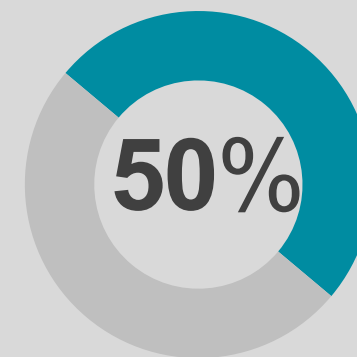


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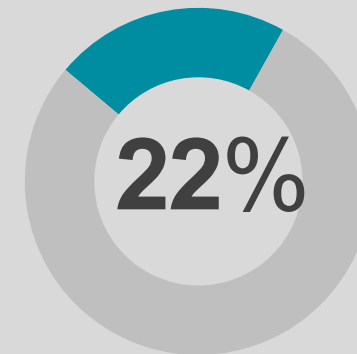
Information about...	Information Sought in the Past	Information Helpful for Future
New treatment options and medications	57%	69%
Support programs for caregivers like me	53%	63%
Alternative treatment options	45%	56%
Treatment options being studied in clinical trials	44%	55%
In-home caregivers, assisted living or skilled nursing facilities	43%	54%
Information about temporary or respite care facilities	30%	51%

Caregivers express interest in clinical trial information, but few claim expertise in this area

Agree: I am frequently searching for more information about clinical trials and drugs in development
Among all answering, n=631



Agree: I consider myself to be an expert on clinical trial options and drugs in development for them
Among all answering, n=630



Q30. What types of information have you sought in the past, and what types of information would be most helpful to you in planning for future caregiving needs?

Q29. On the scale below, please indicate the degree to which you agree or disagree with the following statements. *Scale: Strongly disagree, Somewhat disagree, Somewhat agree, Strongly agree*



▶ **Crisis Leads to Central Role in Decision Making**

Most caregivers are thrust into the role suddenly, increase their role over time, are very involved in medical decisions and doctor visits and are on point in a crisis.

▶ **Respect for Physician Grows with Knowledge and Confidence**

Caregivers who are confident in their overall condition/treatment expertise report better communication with their care recipient's doctor. Overall, very positive perceptions of physician.

▶ **Treatment Goals for Patient More Important than Personal Goals**

Caregivers put their patient's needs and goals first and work to gain consensus when decisions need to be made. Decisions put stress on the caregiver, their relationship with their care recipient, and others in the family – but agreement on care priorities lessens these stress levels.

▶ **Caregivers Constantly Searching Throughout Journey**

Even those who feel confident – even “expert” -- in their knowledge of their care recipient's condition continue to seek information that can help them be more confident in medical decisions. They will continue to do so as they move to the next step in their journey, whether that involves new/different treatments for their care recipient, additional care options, or ways in which they can find support for themselves in their care role.





- ▶ **Need for crisis support and education at time of diagnosis to help caregiver adjust to unforeseen role**
- ▶ **Physicians have an ally in an informed caregiver and could benefit from engaging them in shared decision-making**
- ▶ **Providing patient and caregiver tools to gain consensus on treatment paths could ease stress and decision-making**
- ▶ **Triaging information to the caregiver aligned with various stages of medical decision making would ease the caregiver journey**



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