E. Andrews, B. Calingaert, E. Davenport, D. Wolin, and L. Zografos are full-time employees of RTI Health Solutions, which received funding from Bayer AG to conduct this study. The contract between RTI Health Solutions and the sponsor includes independent publication rights. RTI conducts work for government, public, and private organizations, including pharmaceutical companies. Z. Vassilev is a full-time employee of Bayer; the funder of this study.

**Received and Review of Materials**

- Per the screening criteria, all physicians had either prescribed (91%) and/or administered (83%) aflibercept educational materials.
- Data analyses were descriptive and focused on summarizing the questionnaire responses by country and safe use.

**Analysis**

- The questionnaire was developed using best practices for instrument development and was tested through cognitive interviews with physicians in each country.
- The study was an observational, cross-sectional survey of knowledge and understanding among physicians to assess whether physicians received the aflibercept educational materials and evaluate their knowledge of key safety and important information.

**Study Design**

- To assess whether physicians received the aflibercept educational materials and evaluate their knowledge of safety and important information.

**Overview of Study Design**

- The study was an observational, cross-sectional survey of knowledge and understanding among physicians with recent access to aflibercept in France, Germany, Italy, Spain, and the United Kingdom (UK).

**Objective**

- The questionnaire was validated in three languages as part of the protocol for the overall study, which also included a patient survey component.

**Data collection and Administration**

- The questionnaire included 27 closed-ended items including the following content areas: (1) experience with aflibercept; (2) physician characteristics; (3) knowledge of aflibercept storage and preparation, dosing and monitoring, safe use, injection procedure, and side effects; (4) receipt and use of aflibercept educational materials; (5) ratings of aflibercept education materials; and (6) physician use of product booklet.

**Methods**

- The questionnaire included 27 closed-ended items including the following content areas: (1) experience with aflibercept; (2) physician characteristics; (3) knowledge of aflibercept storage and preparation, dosing and monitoring, safe use, injection procedure, and side effects; (4) receipt and use of aflibercept educational materials; (5) ratings of aflibercept education materials; and (6) physician use of product booklet.

- The questionnaire was developed using best practices for instrument development and was tested through cognitive interviews with physicians in each country.

**Analysis**

- The survey question was validated in three languages as part of the protocol for the overall study, which also included a patient survey component.

**Knowledge Questions**

- Most physicians reported that they received the SmPC and prescriber guide. The relatively low level of reported receipt of the video and booklet may be due to either poor recall, if the materials had indeed been received, or else various reasons if the materials actually were not received.

- In general, physicians’ knowledge of storage and preparation guidelines, safe use, and injection procedures was high.

- Knowledge on dosing guidelines varied by indication, which may reflect knowledge and/or a factor of the recency of indication approval and/or the status of drug reimbursement.

- Two-thirds of the physicians responded incorrectly that monitoring is required during the first 12 months of aflibercept treatment for wAMD, demonstrating a more conservative approach to monitoring than is actually required.

**Conclusions**

- Reported receipt of the SmPC and prescriber guide was high, and the high level of knowledge suggests that the key safety information is available to the treating physicians.

- Some of the most important information communicated in the aflibercept educational materials is related to side effects. For most questions on this topic, more than 80% of physicians responded correctly.

- Knowledge was lower for topics less frequently encountered (e.g., use in women of childbearing potential) and for more complex aspects of safe use (e.g., dosing and monitoring) for which we assume that physicians would consult the label and/or prescriber guide rather than relying on recall.

**References**


**Contact Information**