

Supplementary Questionnaire 1

Questionnaire for Adherence to Growth Hormone Therapy “For Physicians”

Patient data

- Date of birth
- Last examination date
- Sex
- Age at diagnosis
- Age at the onset of treatment
- Age at the last examination

Diagnosis

- Isolated growth hormone deficiency
- Multiple pituitary hormone deficiencies (congenital pituitary hormone deficiency)
- Multiple pituitary hormone deficiencies (postoperative pituitary hormone deficiency)
- Turner syndrome
- Small for gestational age
- Skeletal dysplasia
- Chronic kidney insufficiency
- Prader-Willi syndrome
- Other (...)

Current growth hormone dosing?

- How many days in a week does the patient receive injections (6/7 days)
- Daily dose ...mcg/kg daily

The growth rate of the patient over the last year (this may be extrapolated from 3-month measurements at least)

-cm/year

Questionnaire for Adherence to Growth Hormone Therapy “For Families”

Patient data

- Full name
- Date of birth
- Last examination date
- Sex

Maternal educational attainment

- Non-graduated from any school
- Primary school
- Secondary school
- High school
- College
- License or higher education

Paternal educational attainment

- Non-graduated from any school
- Primary school
- Secondary school
- High school
- College
- License or higher education

Household family income?

- Monthly income <2.800 Turkish Liras
- Monthly income \geq 2.800-<5.000 Turkish Liras
- Monthly income \geq 5.000-<10.000 Turkish Liras
- Monthly income >10.000 Turkish Liras

Where did he/she receive training on how to administer growth hormone?

- Patient education nurse from the hospital
- Company-sponsored education nurse
- Physician

Duration of growth hormone therapy?

- 0 to 6 months
- 6 to 12 months
- 1 to 3 years
- >3 years

Who does administer growth hormone injections?

- Mother or father
- Patient himself/herself

Over the last one month, how many times did you missed injections or did not administer growth hormone injections as recommended by your doctor?

- I missed the injection once over the last month
- I missed the injection twice over the last month
- I missed the injection three times over the last month
- I missed the injection four times over the last month
- I missed more than four times
- I never missed an injection

If you missed your dose, what was the reason?

- I forgot
- Injecting every day is tiring/undesirable
- I had a problem with the pen/cartridge
- Have run out of medicine/needle
- Other (please specify)

Has the COVID-19 pandemic exerted a negative impact on your treatment adherence?

- Yes
- No

If Yes, which of followings might be a potentially influencing factor?

- I could not take my medication from the pharmacy.
- I could not get an appointment.
- I discontinued my treatment.
- Other (please specify).

Do you have access to a nurse or physician if you need one?

- Yes
- No