

## Patients' Perception on Internet-Based Research: Results from a Registry of Patients Taking Prescription Medication Containing Oxycodone Immediate Release for Non-Malignant Pain

Crisanta I. Tapia<sup>1</sup>, Wing Chow<sup>2</sup>, Kathryn P. Anastassopoulos<sup>3</sup>, Carmela Benson<sup>2</sup>, Meghan Hufstader<sup>3</sup>, Stacey J. Ackerman<sup>1</sup>, Myoung Kim<sup>2</sup>

<sup>1</sup>Covance Market Access Services, San Diego, CA, United States, <sup>2</sup>Ortho-McNeil Janssen Scientific Affairs, LLC, Raritan, NJ, United States, <sup>3</sup>Covance Market Access Services, Gaithersburg, MD, United States

### Purpose

The Internet is increasingly used to conduct healthcare research. Its use among US adults has increased substantially from 53% in 2000 to 79% in 2009 (18≤age≤29: 72% to 92%, 30≤age≤49: 62% to 87%, 50≤age≤64: 48% to 79%, ≥65: 15% to 42%).<sup>1</sup> However, concerns still exist about potential bias related to age, among other characteristics, in Internet-based research. The purpose of this study was to assess the overall experience of patients completing Internet-based assessments as part of the Oxycodone Users Registry (OUR)<sup>2</sup> and examine whether their perceptions differ by age and other characteristics.

### Method

Follow-up telephone interviews were conducted in 36 of 648 OUR participants who took oxycodone immediate-release and accessed the Internet-based assessment within the protocol mandated allowable time window. Interviews were conducted to assess the participants' overall experience with the Internet-based assessments, such as perception with respect to ease of use, length, preference for Internet-based or paper-based, reasons for withdrawal, and willingness to participate in another similar study. A discussion guide, approved by an Institutional Review Board, was used to facilitate the interviews. Interviews were conducted between February 10, 2010 and April 9, 2010 and took approximately 1 hour each. All interviewees provided written consent to participate in their follow-up interview.

### Results

Among the 36 interviewees, 22 (61.1%) were ≥50 years, the mean age was 52 years (range 23 to 74) and 16 (44.4%) were female. Almost half (47.2%) were taking oxycodone primarily for back/neck pain, 19.4% for arthritis, 19.4% for post-operative pain, 11.1% for pain due to injury/trauma, and 2.8% for neuropathic pain. Over 90% had a high school (HS) education or higher (55.5% HS with or without some post-HS coursework; 36.1% 2-year or higher post-HS degree). All stated that the Internet-based assessments were very easy (30.6%) or easy (69.4%) to complete. This distribution was similar for the different age groups (≥ 50 years: 68.2% easy; < 50 years: 71.4% easy). None thought the assessments were difficult to navigate. Overall, 84.3% did not think that the assessments were time consuming with 75% stating that the length of the assessments was just right and 47.2% reporting completion time of approximately 15 minutes. Slightly more interviewees ≥ 50 years reported the length of the assessments was just right (77.3% vs. 71.4%). However, a greater percent of interviewees ≥ 50 years reported taking more than 15 minutes to complete the assessments than those < 50 years (54.4% vs. 42.7%). Thirty-three (91.7%) reported completing all of the assessments. The 3 that missed an assessment and subsequently dropped out were ≥ 50 years with only 1 reporting difficulty accessing the Internet site to complete the assessment. If given a choice, the majority (91.7%) stated they would prefer Internet-based assessments over paper-based assessments with no difference among the age groups (≥ 50 years: 90.9%; < 50 years: 92.9%). All reported that they would participate in another similar Internet-based study in the future. Lastly, among all consented OUR participants (n=827), only 9% dropped out due to failure to access the Internet-based assessments within the allotted time.

## **Conclusions**

These findings suggest that the Internet-based assessments in the OUR were easy to use for most participants. Their experience with the OUR with respect to ease of use, length, and withdrawal were very similar between the two age groups. Additionally, regardless of age, there is a strong preference for using the Internet over paper forms for completing these types of assessments. There appears to be an increasing level of comfort using the Internet among those  $\geq 50$  years, pointing to a decrease in the presumed bias of conducting healthcare research via the Internet.