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| **High Rates of Medication Adherence in Patients with Pulmonary Arterial Hypertension: An Integrated Specialty Pharmacy Approach**  **Supporting information: Study variables** |
| Age |
| Gender (male/female) |
| Race   * Caucasian * African American * American Indian/Alaska Native * Asian * Native Hawaiian or other Pacific Islander * Unknown/not reported |
| PDE-5 Inhibitor   * Sildenafil * Tadalafil |
| Smoking status   * Never smoker * Current smoker * Previous smoker |
| Insurance type   * Commercial * Government (Medicare/Medicaid) |
| Financial assistance (yes/no) |
| Type of financial assistance   * Co-pay card/manufacturer assistance * Vanderbilt medication access program * Foundation assistance |
| Concomitant medication   * Endothelin receptor antagonist * Prostanoid * Soluble guanylate cyclase stimulator * Calcium channel blocker * Prostacyclin receptor agonist |
| Out-of-pocket cost |
| Adverse event (yes/no) |
| Adverse event, type   * Headache * Nausea and vomiting * Diarrhea * Leg pain * Fatigue * Dizziness |
| Adverse event, other (free text response) |
| Hospitalization (yes/no) |
| Number of hospitalizations |
| Chief complaint for hospitalization   * Shortness of breath * Hypervolemia * Hypovolemia * Syncope * Medication side effect * Heart failure |
| Chief complaint for hospitalization, other (free text) |
| Prescription data (used to calculate proportion of days covered)   * For *each* prescription dispensed for *each* patient:   + The number of days since the first dispense   + The amount of medication supplied |
| Duration of observation period   * Number of days between first dispense and date the last dispense is exhausted or end of study period (*earlier of the two*) |
| Status at end of study period   * Living * Deceased |