### Figure 5: Overview of the Survey Questionnaire

<table>
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<th>Section</th>
<th>Example information included</th>
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| I. Background and HAE medical history | • Demographic/clinical characteristics  
• HAE type and disease severity (e.g., frequency, location and duration of attacks, impact on ability to perform routine activities) |
| II. Treatment information and medical services used for HAE | • Treatments utilized in a hospital setting for most recent attack  
• Experience with preventative medications  
• Reasons for discontinuing medication  
• Medical resources used |
| III. The impact of HAE on work and school | • Impact on employment prospects, absenteeism and loss of productivity, both during and between attacks  
• Impact on attendance at school as well as well as reaching education potential |
| IV. The use of helpers due to HAE | • Types of assistance required  
• Impact on family members and other helpers including their loss of productivity  
• Hiring home healthcare assistants |
| V. Satisfaction with your HAE treatment and quality of life | • Whether patient identifies HAE as well-controlled with current treatment  
• Overall impact on HRQoL |
| VI. Additional questions | • Physical and emotional impacts associated with HAE attacks  
• Current anxiety and depression as measured with the Hospital Anxiety and Depression Scale (HADS) |