

1. The term “placebo” is:

- positive.
- neutral.
- negative.
- I do not know.

2. Do you think that physical complaints can get better simply by believing in the effectiveness of the therapy?

- Yes, quite often.
- Yes, but rarely.
- No.
- I do not know.

Please read carefully!

Therapies can have **two modes of action**:

One mode of action is the **pharmacologic action**, i.e., the interaction of compounds in the body via biochemical pathways. For example, diabetics inject insulin to regulate their blood glucose levels.

Another mode of action is the **non-specific action**, which is also known as the placebo effect. In this case, the caring attention of the physician, the desire of the patient to recover and / or the associated circumstances of the therapy causes the patient to get better.

Psychotherapies are excluded from these definitions because they can not be assigned to either action.

3. If you consider the patients who go to a general practitioner in Switzerland, what percentage of the patients wants to be informed about the fact that they receive a drug which *only has a non-specific action*:

% I do not know.

4. Think about a pregnant woman who has heavy nausea over a 2-week period. The woman does not want to endanger her child by possible side effects of drugs. In this situation, you as her physician consider offering a therapy containing no active agent (*harmless sugar tablets*). You hope that her nausea will be relieved because the woman believes in the therapy. Would it be right for you as her physician to offer the therapy with the words: “Try this therapy, it has very few side effects and can help with your nausea”?

- I think it is right.
- I do not think it is right.
- I do not know.

If you like, you can give a reason for your answer:

5. How would you judge the same situation if you as her physician tell the woman: “This is *an effective new agent* that works for nausea and has very few side effects.”

- I think it is right.
- I do not think it is right.
- I do not know.

If you like, you can give a reason for your answer:

6. Please judge the same situation when you as her physician are committed to homeopathic therapies and offer the woman *homeopathic globules* with the words: “Try these homeopathic globules; they can help you with your nausea and have very few side effects”?

- I think it is right.
- I do not think it is right.
- I do not know.

If you like, you can give a reason for your answer:

7. How would you judge the situation in question 6 if you as her physician would *not be a follower of homeopathy* but you would give the woman the same homeopathic remedy?

- I think it is right.
- I do not think it is right.
- I do not know.

If you like, you can give a reason for your answer:

8. Consider a patient who has recurrent abdominal pain with distension and sometimes hard, sometimes soft bowel movements for half a year. Different tests exclude an organic disease so the diagnosis is irritable bowel syndrome. We assume that there is no known therapy for patients with this syndrome that can cure the disease by pharmacologic (substantial) effects. Only treatments for single symptoms are available, e.g. laxatives or anti-flatulent medications that produce unfortunate dissatisfying effects.

As the patient's physician, what would you propose in addition to the symptomatic medication?

Multiple answers are possible, please disregard the costs of the therapy:

- A therapy that I intentionally use for non-specific action and for effects like self healing power.
- Psychotherapy, e.g. relaxation therapy or behaviour therapy.
- No additional therapy.
- I do not know.

9. If you marked the first possibility in question 8, what kind of therapy would you propose?

Multiple answers are possible, please disregard the costs of the therapy:

- An inactive agent, e.g. a sugar tablet.
- An herbal remedy.
- A homeopathic remedy.
- Acupuncture.
- Other therapies not mentioned.
- Something that has worked for you in the past.
- I do not know.

10. If you consider the patients with irritable bowel syndrome that go to a general practitioner in Switzerland – what percentage of the patients in this situation would advocate for a therapy that only works by non-specific action:

%

I do not know.

11. If you consider the patients with irritable bowel syndrome that go to a general practitioner in Switzerland – what percentage of the patients in this situation would advocate for psychotherapy, e. g. relaxation therapy or behaviour therapy:

%

I do not know.

12. Do you actively propose therapies to patients where you intentionally use the advantage of non-specific effects?

Yes, I do so quite often.

Yes, I do so but rarely.

No.

13. Did you use any treatments for your own health problems where you think they predominantly worked by non-specific action?

Yes.

No.

14. Personal data:

Year of birth: 19

Gender: Female Male

Thank you very much for your help.