B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS

1. Respondent Universe and Sampling Methods

The universe for this experimental study is members of the Synovate Internet panel. Synovate's Internet panel consists of 600,000 households that are recruited by a variety of means to reflect all segments of the U.S. population and have agreed to participate in Internet research studies. Typical panel members receive three or four invitations per month to participate in research projects.

The 2,400 participants for this study would be drawn from the pool of over 6,000 panel members. Quotas will be used so that the overall sample is in proportion to the U.S. adult population on gender and race/ethnicity. A range of participants over the age of 40 will be selected to approximate a reasonable sample of individuals for whom high blood pressure may be a concern. At least 30% of the sample will have achieved a high school education or less.

FDA does not intend to generate nationally or locally representative results or precise estimates of population parameters from this study. The sample used is a convenience sample, rather than a probability sample. Despite the attempt to match between the study's sample and known population characteristics, matching is used solely to produce samples with a reasonable degree of diversity in key demographic characteristics. Furthermore, no legitimate weights can be constructed from non-probability samples such as the one used here. Hence, the Agency does not construe this sample or the results generated from this sample as nationally or locally representative. Rather, the strength of the experimental study lies in its internal validity, on which meaningful estimates of differences across conditions can be produced and generalized.

Overview

Our goal is to investigate the overall and interactive role of visual images and text presentations during the audio presentation of risk information in television DTC ads. We will create a variety of ads for a new (fictitious) brand of high blood pressure medication. The ads will vary only in the type of information shown on screen during the presentation of required risk information (the "major statement"). Participants will view one version of the ad two times. They will then answer questions about the ad, including information about product risks and benefits, whether they intend to ask the doctor about the product, basic comprehension of the risk and benefit information, and their general attitudes toward the product. This experimental design will allow for comparisons between conditions in a controlled presentation where only the visual information varies.

Design

• Independent Variables

To operationalize our investigation of distraction in television ads, two proposed designs incorporate three independent variables. The first variable is the *visual consistency with audio risks* (VCAR). The description of product risks in the ad's audio (required by law and regulation), is the section of the ad that details the most serious and/or frequent side effects (see 21 C.F.R. 202.1(e)(1)). We define VCAR as visual information that either reinforces the product's risks (*consistent* conditions) or reinforces the product's benefits (*inconsistent* conditions). In two "*consistent*" ("very" and "somewhat") VCAR conditions, participants will see the words of the risks on the screen as they are being spoken. In "*inconsistent*" conditions, participants will see blood pressure numbers decreasing from a high, dangerous number (e.g., 200/112), to an ideal number within a normal range (e.g., 120/80). The degree or magnitude of consistency or inconsistency will be manipulated by including fewer pieces of any information,

interspersed with images of the fictitious drug logo. A comparison or "*neutral*" condition will be created in which the brand logo is the only thing displayed during the entire risk presentation.

The second independent variable we will investigate is *tonal consistency with audio risks* (TCAR). In many DTC ads, scenes of patients "living their lives," including socializing with family and friends and enjoying recreational activities are shown during the audio presentation of risk information. Critics of DTC complain that these scenes are inappropriate. However, FDA is not aware of empirical data demonstrating that these images distract viewers from processing the risk information. This independent variable is designed to examine this question. It is unrealistic to show visual images of patients experiencing side effects. Instead, we propose to compare visuals that evoke a mildly positive tone to visuals that evoke a strongly positive tone. These conditions will be contrasted with the neutral ad showing simply the logo of the drug (identical to the neutral VCAR manipulation).

The third independent variable is the presence of superimposed text (SUPERs) during the risk presentation. Specifically, we are interested in whether the presence of a super that reinforces the audio risk information will alleviate any potential distraction from tonally inconsistent visual images. We will compare a less prominent SUPER condition with more prominent and control (no SUPER) conditions.

Because of resource constraints, potential confounds, and differential interest in the importance of certain interactions of these variables, we have designed the study to look at the independent variables in the following manner:

VCAR 5 cells

Very Consistent
Somewhat Consistent
Neutral (Control)
Somewhat Inconsistent
Very Inconsistent

3 x 3 (TCAR x SUPER)

……..**SUPER**…….				
		None	Level 1	Level 2
TCAR	Neutral (Control)			
	Mildly Positive			
	Strongly Positive			

• Dependent Variables

The primary dependent variables are recall and comprehension of risk and benefit information. We will also investigate behavioral intention and attitudes toward the fictitious brand. These variables can be seen in the proposed questionnaire, Attachment 2.

Comprehension of risk information in comparison to the comprehension of benefit information is the key to understanding whether an ad meets the requirement that it presents a "fair balance" of information about risks and information about benefits. Therefore, we will include questions about both risks and benefits.

Behavioral intention is not our primary measure but can help inform us of the nature of the decision process that viewers undergo when watching this television ad. If the comprehension measures do not display variability but the behavioral intention measures do, either our comprehension questions are not sufficiently sensitive, or there is some other factor

influencing intent to act. As this is initial research, we will not be able to parse these explanations, but we hope to glean additional information from these variables.

Attitudes toward the brand are investigated here to determine their relationship to comprehension variables. Although brand attitude is not our primary dependent variable, we discuss attitudes here because this measure prompted the most comment during the first public comment period. Critics of DTC charge that positive scenes during the risk information may detract from the serious risk-benefit analysis required for a patient to consider whether it is appropriate to have a conversation with the doctor about a given medication. If we find that some experimental conditions reduce comprehension, we can compare this finding to participants' attitudes about the brand in each condition. If very positive attitudes correlate strongly with poor comprehension of risks, then there is reason to suspect that positive images may have a negative impact. The FDA Amendments Act of 2007 (FDAAA) directs FDA to ensure that the major statement is conveyed in a clear, conspicuous and neutral manner. A better understanding of how attitude may transfer from the images in the ad to the brand itself will inform us about the relationship of visuals' presentation to the messages about the product's risks and benefits.

Our primary method of investigating this variable will utilize traditional explicit attitude measures (see Attachment 2). In an effort to make use of cutting-edge cognitive research, however, we will conduct a sub-experiment with additional participants, using an implicit measure called the Attitude Misattribution Procedure (AMP, Payne, et al., 2005). Explicit measures involve asking questions directly, which might be subject to social desirability biases. In contrast, implicit attitude measures infer attitudes through measurement of behavior toward the attitude exemplars. In this case, the AMP will measure affective reactions to images of the

fictitious brand, which will then allow us to infer a respondent's attitude, rather than asking directly about the attitude, which leaves open the possibility of social desirability biases related to willingness to admit to drug brand attitudes. These brand images will be paired with abstract symbols during the measurement procedure. Participants will be told that the images are simply warning signals for the symbols, and that their task is to rate how positive or negative the symbols are (see Attachment 3 for exact wording of instructions to participants). Previous research has shown that participants are influenced by the images even when warned specifically not to pay attention to them. Because we are extending the use of the AMP to a novel application (i.e., the viewing of an ad that includes the brand images paired with the abstract symbols), we have responded to the concerns in the public comments by making this exploration supplemental rather than the cornerstone of the study.[1] Our intent is to see whether the AMP is validated in this context for use in future studies.

Hypotheses

Visual Consistency with Audio Risks (VCAR)

- Participants in visually consistent conditions will score higher on recall of product information than participants in visually inconsistent conditions;
- Participants in visually consistent conditions will score higher on comprehension of product information than participants in visually inconsistent conditions;
- Participants in visually consistent conditions will report more negative attitudes toward the brand than participants in visually inconsistent conditions;

[1] We will use the AMP in the following five conditions (see page 30): In the VCAR design, in the Very Consistent and Very Inconsistent conditions; in the TCAR x SUPER design, in the Neutral, Mildly positive, and Strongly positive conditions with no SUPER.

• Direction of influence of visual consistency on behavioral intention is exploratory. We have no specific hypotheses.

Tonal Consistency with Audio Risks (TCAR)

• Participants in tonally positive conditions will score lower on recall of product information than participants in the tonally neutral condition. Participants in the strongly positive condition will score lower on recall of product information than participants in the mildly positive tonal condition;

• Participants in tonally positive conditions will score lower on comprehension of product information than participants in the neutral condition;

• Participants in the strongly positive condition will show a more positive attitude toward the brand than participants in the neutral and mildly positive conditions;

• Participants in tonally positive conditions will report higher intention to act on the ad than participants in neutral condition. Participants in the strongly positive condition will report higher intention to act on the ad than participants in the mildly positive tonal condition.

Superimposed Text (SUPER)

• Participants in the prominent SUPER condition will score higher on recall of product risks than participants in the less prominent SUPER condition, who in turn will score higher on recall of product information than participants in the control SUPER condition;

• Participants in the prominent SUPER condition will score higher on comprehension of product information than participants in the less prominent SUPER condition, who will score higher on recall than participants in the control SUPER condition;

• Participants in prominent SUPER condition will report more negative attitudes toward brand than participants in the less prominent SUPER condition, who will report more negative attitudes toward the brand than participants in the control SUPER condition;

• Direction of influence of SUPER on behavioral intention is exploratory. We have no specific hypotheses.

Tonal Consistency with Audio Risks (TCAR) x Superimposed Text (SUPER)

• Participants in the neutral (control) condition with a prominent SUPER will score highest on recall of product information. Participants in the strongly positive tonal condition with no SUPER will score lowest on recall of product information;

• Participants in the neutral (control) condition with a prominent SUPER will score highest on comprehension of product information. Participants in the strongly positive tonal condition with no SUPER will score lowest on comprehension of product information;

• Participants in the strongly positive tonal condition with no SUPER will report the most positive attitudes toward the brand. Participants in the neutral (control) tonal condition with a prominent SUPER will report the least positive attitudes about the brand.

Power

This section illustrates the power levels provided by equal cell sizes of 150.

For the main effects, some planned comparisons involve two proportions (2 cells). For a test of two proportions (p1, p2) such that is greater than p1 with $\alpha = .05$ and equal sample sizes n; 150 per cell), the power to detect various effect sizes (differences in proportions) follows:

p1	p2	Power
.55	.60	.21
.50	.60	.43

.45	.60	.83
.40	.60	.97

Again for the main effects, some planned comparisons involve two proportions where one proportion is based on two cells (e.g., neutral tone (no SUPER) vs both tone (TCAR) conditions (no SUPER)).

For a test of two proportions such that p2 is greater than p1 with α = .05 and unequal sample sizes n; 150 for p1 and 300 for p2), the power for these proportions is as follows:

p1	p2	Power
.55	.60	.26
.50	.60	.64
.45	.60	.91
.40	.60	.99

We will look at interaction effects for a 3x3 fixed-effects factorial with cell sizes of 150 (N=1350; interaction df = 4).

For the interaction term, the "adjusted" sample size (n) for the interaction (given two main effects in the model) for table entries in a primary power handbook (n', Cohen, 1988, pg. 365)[2] is 269 ([1350-9]/[4+1] + 1). Rounding to 270 with *df* = 4, the power of the F test at α(alpha) = .05, for various "small" effects is estimated to be:

	f		
	.05	.10	.15
Power	.27	.85	.99

…where effect size is given by f, standard deviation of standardized means, or

[2] Cohen, Jacob (1988). *Statistical Power Analysis for the Behavioral Sciences, Second Edition*. Hillsdale, NJ: Lawrence Erlbaum Associates.

. $f^2 = [\Sigma(\alpha\beta_{ij})^2] / [(a)(b)] / [\sigma^2_{S/AB}]$

Given cell sizes of 150, these reveal very high power for smallish effects in ANOVAs and reasonable power levels for medium effects in tests of proportion.

Pretesting of Stimuli

Key to our study is the reasonableness and appropriateness of the stimuli we use to approximate television DTC prescription drug ads. Because the particular images are subjective, we will conduct extensive pretesting with consumers similar to our main target audience. This pretesting will involve 800 individuals in four waves. The purpose of the pretesting is to ensure that the images evoke the meaning that the research team has assigned to them. For example, we want to make sure that consumers report more positive emotions after viewing our strongly positive tonal condition compared to our mildly positive condition. During the pretesting stage, the primary dependent variable will be the success of the particular manipulation. The pretesting will allow us to make changes in the ad stimuli before the actual study commences, thus making participants' time more valuable.

Pretesting of Methodology

We received comments from both the public and peer reviewers that our stimuli should be shown in a clutter-reel, rather than as a stand-alone piece. We believe there are good reasons to present the stimuli as a stand-alone piece, just as there are good reasons for presenting the stimuli as part of a clutter-reel. To empirically address this issue, we propose to test the stimuli in both a clutter-reel and stand-alone environment. This will serve as a test of the methodology. We anticipate this pretesting will involve up to 800 consumers in four waves.

2. <u>Procedures for the Collection of Information</u>

Respondents will participate in the study via the Internet (see sampling criteria above). They will initially watch one version of the advertisement two times. In the main study (without the AMP), participants will then answer questions, as shown in Attachment 2. In the supplemental study (with the AMP), participants will respond to an abbreviated set of questions, shown in Attachment 3. The whole procedure, regardless of AMP administration, will take no more than 15 minutes.

3. Methods to Maximize Response Rates and to Deal with Issues of Non-Response

This experimental study will use an existing Internet panel to draw a sample. The panel includes people who have expressed interest in sharing their opinions via the Internet and do so regularly. The expected participation rate for the Internet panel is 55 percent when responding to a specific study. To help ensure that the participation rate is as high as possible, FDA will:

- Design an experimental protocol that minimizes burden (short in length, clearly written, and with appealing graphics);
- Administer the experiment over the Internet, allowing respondents to answer questions at a time and location of their choosing;
- Administer the experiment to individuals who have expressed interest in participating in Internet studies;
- Email a reminder to the respondents who do not complete the protocol four days after the original invitation to participate is sent;
- Provide contact information on where to get help for respondents who may have questions as they complete the experiment.

4. Test Procedures

The contractor will run nine participants through the procedure to assess questionnaire wording, basic glitches in the programming and execution of the study. This pretest is designed to ensure that questionnaire wording is clear and that procedures for viewing stimuli and proceeding through the experiment are as planned. The stimuli will be tested in waves of 300 participants to ensure that the images evoke the meaning that the research team has assigned to them.

5. Individuals Involved in Statistical Consultation and Information Collection

The contractor, Synovate, will collect the information on behalf of FDA as a task order under the Quick-Turn-Around Research Services contract. Leigh Seaver, Ph.D., is the Senior Study Director for Synovate, telephone (703) 663-7240. Data analysis will be conducted primarily by the Research Team, Division of Drug Marketing, Advertising, and Communications (DDMAC), Office of Medical Policy, CDER, FDA, and coordinated by Nancy Ostrove, Ph.D., of the Office of the Commissioner, 301-827-9279, and Kathryn J. Aikin, Ph.D., 301-796-0569 and Amie C. O'Donoghue, Ph.D., 301-796-0574, of DDMAC.

Attachment 1

Screener and questionnaire, main study

Questionnaire, Distraction Study (Main Study)

Interview Protocol.

{Programming notes}
Questionnaire will be administered by computer.

Section I. Instructions

Thank you for agreeing to participate in this study today.

This study is about advertising for a new product. You will see an ad for a new product and answer some questions about it. Your answers are anonymous, which means that no one will ever connect your name with your answers. So please answer as openly and honestly as you can.

Now you will see an ad for a new product. You will see the ad twice and then move on to the next part of the study.

[PROGRAMMER: Show ad twice]

Now please answer the following questions.

Q1. Based on this ad, what are your initial feelings about Zintria?

[PROGRAMMER: *randomize order of a,b,c*]

a. Do you feel…
    1. very good … about Zintria,
    2. somewhat good,
    3. neither good nor bad,
    4. somewhat bad, or
    5. very bad …about Zintria?
    6. DK/RF

b. Do you feel…
    1. very negative … about Zintria,
    2. somewhat negative,
    3. neither negative nor positive,
    4. somewhat positive, or
    5. very positive …about Zintria?
    6. DK/RF

c. Do you feel…
    1. very unpleasant … about Zintria,
    2. somewhat unpleasant,
    3. neither unpleasant nor pleasant,

4. somewhat pleasant, or
5. very pleasant…about Zintria?
6. DK/RF

Q2. (Behavioral Intention) How likely or not likely you are to do each of the following behaviors?

	Not at all likely	Somewhat likely	Very likely	Extremely likely
a. Look for more information about Zintria				
b. Talk to your doctor about Zintria				
c. Ask your doctor about getting a sample of Zintria				
d. Ask your doctor to prescribe Zintria				

[PROGRAMMER: COUNTERBALANCE Q3a and Q3b]

Q3a. (Comprehension of risks)
Select the best answer.

[PROGRAMMER: *randomize*]

i. Why should you *NOT* stop taking Zintria suddenly?

a. This can lead to unusual changes in behavior
b. Your eyes will have trouble adjusting to the immediate change in pressure
c. You may have a temporary loss of coordination
d. You may experience chest pain

ii. When you first take Zintria, why should you avoid activities that require you to be alert?

a. You may have a temporary loss of coordination
b. A common side effect of Zintria is dizziness
c. A common side effect of Zintria is nervousness
d. You may have a temporary loss of consciousness

iii. Why might you have blurry vision when taking Zintria?

a. Zintria lowers the pressure in the eye
b. Zintria increases the likelihood of chronic dry eye
c. Zintria lowers the concentration of red blood cells in the eye
d. Zintria increases sensitivity to light

Q3b. (Comprehension of benefits)
Select the best answer.

[PROGRAMMER: *randomize*]

i. What advantage does Zintria have over other treatments for this condition?

a. Zintria helps lower blood pressure
b. Zintria is approved to treat more types of high blood pressure
c. Zintria helps lower cholesterol
d. Zintria helps prevent heart attacks

ii. Why is high blood pressure bad?

a. High blood pressure increases the risk of liver damage
b. High blood pressure increases the likelihood of anxiety
c. High blood pressure increases the risk of strokes
d. High blood pressure increases the likelihood of joint pain

iii. Why might your doctor prescribe Zintria over other treatments for this condition?

a. Zintria lowers blood pressure faster
b. Zintria is approved for all age groups
c. Zintria is safer acting
d. Zintria helps prevent strokes

[PROGRAMMER: COUNTERBALANCE Q4a and Q4b]

Q4a. Answer the following questions as best you can.
(Take-away risk beliefs)

[PROGRAMMER: *randomize*]

	Yes	No	Not Sure
a. Taking some kinds of over-the-counter cough medicines at the same time as taking Zintria increases your risk of having a heart attack.			
b. Zintria may cause excitability.			

c. If you have a very slow heart rate, you should not take Zintria.			
d. Zintria may cause you to have blurry vision.			
e. Patients with a history of liver disease can take Zintria if they are monitored by a doctor.			
f. Antibiotics may not work as well if you use Zintria at the same time.			
g. You should have regular eye exams when you take Zintria.			
h. Zintria is approved to treat children.			

Q4b. Answer the following questions as best you can.
(Take-away benefit beliefs)
[PROGRAMMER: *randomize*]

	Yes	No	Not Sure
a. Your high blood pressure can increase your risk of having a stroke.			
b. High blood pressure can damage the lining of the liver.			
c. Zintria is given by IV injection.			
d. Zintria is proven to help prevent strokes.			
e. Zintria is a fast-acting treatment.			
f. Zintria is proven to help prevent heart attacks.			
g. Zintria is approved to treat all age groups			

Q5. (Risk/benefit tradeoff) Please indicate your level of agreement or disagreement with the following statements.

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
a. The side effects of Zintria are worse					

than having high blood pressure.					
b. If I lowered my blood pressure *a lot* with Zintria, I would be willing to deal with the side effects of the drug.					
c. If I lowered my blood pressure *a little* with Zintria, I would be willing to deal with the side effects of the drug.					

Q6. (Manipulation checks) Answer each question as best you can based on the information in the ad.

[PROGRAMMER: *randomize*]

	Excellent	Good	Fair	Poor
a. How well do the words on the screen match up with the risks that are spoken out loud?				
b. How well do the images shown match up with the words on the screen during the risk information?				
c. How well do the images shown match up with the risks that are spoken out loud?				

Q7. (Manipulation checks)

a. Overall, how would you rate the images in the ad?

Very Happy	Somewhat Happy	Neither Happy nor Sad	Somewhat Sad	Very Sad
1	2	3	4	5

b. This ad had many happy scenes.

Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
1	2	3	4	5

Q8. Are you currently taking a prescription medicine for high blood pressure?

A) Yes
B) No (*do not ask Q9*)
C) Don't know or uncertain

Q9. Before you started treatment, how severe was your high blood pressure? Would you describe it as:

A) Very mild
B) Mild
C) Moderate
D) Serious
E) Very serious

Q10. How severe is your high blood pressure now? Would you describe it as:

A) Very mild
B) Mild
C) Moderate
D) Serious
E) Very serious

Q11. In general, how much do you feel you know about high blood pressure? Would you say you know:

A) A lot
B) A good bit
C) Some
D) Only a slight amount
E) Nothing at all

Q12. Have you ever seen any advertising for Zintria before today?

A) Yes
B) No
C) Don’t Remember

[Q13. Are you:

- Hispanic or Latino
- Not Hispanic or Latino

Q14. Which of these best represents your ethnic group? You may choose one or more. Would you say that you are:

- American Indian or Alaska Native
- Asian

- Black or African-American
- Native Hawaiian or Other Pacific Islander
- White

--In screener]

Q15. Gender

1 Male 2 Female

[End time: _____]

You have been very helpful. Thank you very much for your participation!

ATTACHMENT 3

Questionnaire with AMP instructions

AMP Sub-study

Section I. Instructions

This study is about how people make simple but quick judgments. Your answers are anonymous, which means that no one will ever connect your name with your answers. So please answer as openly and honestly as you can. Any questions?

Now you will see an ad for a new product. You will see the ad twice and then move on to the next part of the study.

[PROGRAMMER: Show double ad series]

TO BE UPDATED: Remember, the study is about how people make simple but quick judgments. You will watch a series of pairs of pictures flashed one after the other. The first one will be a real-life picture and the second will be a Chinese character. The real-life picture is just a warning signal for the Chinese character, so you don't need to do anything with the real-life picture. Your job is to judge the visual pleasantness or unpleasantness of each Chinese character. The pictures will go by very quickly because we only want your first impression—don't put too much thought into it. After each character appears, press the # key if you think it was visually *pleasant* or the # key if you think it was visually *unpleasant*. Then the next symbol will appear, and the next. You will do this 30 times.

[PROGRAMMER: Run AMP program.]

Q1. Based on this ad, what are your initial feelings about Zintria?

[PROGRAMMER: *randomize*]

d. Do you feel…
   1. very good,
   2. somewhat good,
   3. neither good nor bad,
   4. somewhat bad, or
   5. very bad …about Zintria?
   6. DK/RF

e. Do you feel…
   1. very negative,
   2. somewhat negative,
   3. neither negative nor positive,
   4. somewhat positive, or
   5. very positive …about Zintria?
   6. DK/RF

f. Do you feel…

1. very unpleasant,
2. somewhat unpleasant,
3. neither unpleasant nor pleasant,
4. somewhat pleasant, or
5. very pleasant…about Zintria?
6. DK/RF

Q2. (Behavioral Intention) Please rate how likely or not likely you are to do each of the following behaviors based on the scale on this sheet

[PROGRAMMER: *randomize*]

	Not at all likely	Somewhat likely	Very likely	Extremely likely
a. Talk to your doctor about Zintria				
b. Ask your doctor about getting a sample of Zintria				
c. Look for more information about Zintria				
d. Ask your doctor to prescribe Zintria				

Q6. (Manipulation checks) Answer each question as best you can based on the information in the ad.

[PROGRAMMER: *randomize*]

	Excellent	Good	Fair	Poor
a. How well do the words on the screen match up with the risks that are spoken out loud?				
b. How well do the images shown match up with the words on the screen during the risk information?				
c. How well do the images shown match up with the risks that are spoken out loud?				

Q7. (Manipulation checks)

c. Overall, how would you rate the images in the ad?

Very Happy	Somewhat Happy	Neither Happy nor Sad	Somewhat Sad	Very Sad
1	2	3	4	5

d. This ad had many happy scenes.

Strongly Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
1	2	3	4	5

Q8. Are you currently taking a prescription medicine for high blood pressure?

A) Yes
B) No (*do not ask Q9*)
C) Don't know or uncertain

Q9. Before you started treatment, how severe was your high blood pressure? Would you describe it as:

A) Very mild
B) Mild
C) Moderate
D) Serious
E) Very serious

Q10. How severe is your high blood pressure now? Would you describe it as:

A) Very mild
B) Mild
C) Moderate
D) Serious
E) Very serious

Q11. In general, how much do you feel you know about high blood pressure? Would you say you know:

A) A lot
B) A good bit
C) Some
D) Only a slight amount
E) Nothing at all

Q12. Have you ever seen any advertising for Zintria before today?

A) Yes
B) No
C) Don't Remember

Q13. Are you:

- Hispanic or Latino
- Not Hispanic or Latino

Q14. Which of these best represents your ethnic group? You may choose one or more. Would you say that you are:

- American Indian or Alaska Native
- Asian
- Black or African-American
- Native Hawaiian or Other Pacific Islander
- White

[Q13 and Q14 are also in screener]

Q15. Gender

1 Male 2 Female

[End time: _____]

You have been very helpful. Thank you very much for your participation!