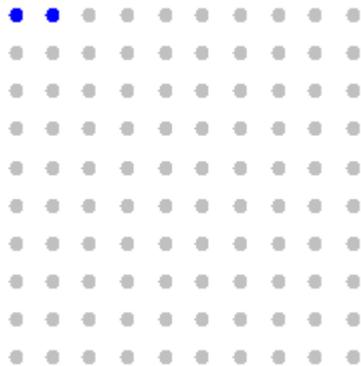


Example of print screens of the values clarification method (VCM) for a male patient. Section 1.

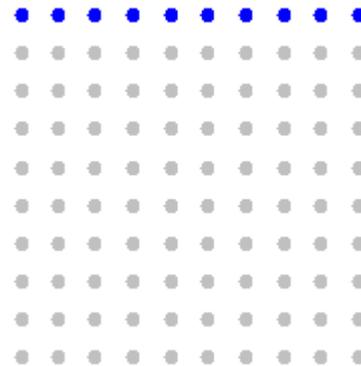


The probability of recurrence of the tumour at the site:

2 of 100 people **will have** a recurrence
(98 of 100 people **will not**)



10 of 100 people **will have** a recurrence
(90 of 100 people **will not**)



or

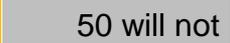
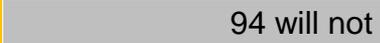
How **important** do you consider this difference in probability of recurrence?

- Not at all important
- Somewhat important
- Important
- Very important

Section 2.

0%  100%

Which of these two situations would you prefer and how strong is this preference?

<p>Recurrence of the tumour at the site of the 100 people:</p> <p>10 will  90 will not </p> <p>Faecal incontinence of the 100 people:</p> <p>50 will  50 will not </p> <p>Sexual dysfunction of the 100 men:</p> <p>50 will  50 will not </p>	or	<p>Recurrence of the tumour at the site of the 100 people:</p> <p>6 will  94 will not </p> <p>Faecal incontinence of the 100 people:</p> <p>65 will  35 will not </p> <p>Sexual dysfunction of the 100 men:</p> <p>70 will  30 will not </p>
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Strong preference for left ----- ----- No preference ----- ----- Strong preference for right

Section 3.

ABEL - STUDY

This overview shows how important you consider the treatment outcomes, according to this questionnaire. The more points a treatment outcome has, the more important you seem to consider this outcome.

Based on your answers, the 100 points are divided as follows:

The number of points for **recurrence of the tumour at the site**

35

The number of points for **fecal incontinence**

39

The number of points for **sexual dysfunction**

27

Click [here](#) to print this overview

Note.

ABEL was the study acronym, which stands for 'Trade-offs in radiotherapy treatment for rectal cancer'.