

## 2) Lay Summary

### Why the research is important

People with IBD do not always take their medicines as prescribed, which is called "**non-adherence**". We have found that non-adherence is not related to factors like age or the severity of a person's illness. Non-adherence can be due to practical problems that make it difficult to take medicines even though the person wants to. For example, it might be difficult to remember to take tablets on holiday. These kinds of problems are called "**practical barriers**". In the past, researchers tried to reduce non-adherence by dealing with practical barriers, but they did not get very good results.

It is also important to consider what people think about their treatment. For example, people might think that medicine is unnecessary or they might be worried about getting side effects. These kinds of thoughts are called "**perceptual barriers**". Although these thoughts are logical, they may not be based on facts. For example, a person might think they have a high risk of getting cancer from a medicine when the risk is really very small.

Every person has their own mixture of perceptual and practical barriers to their medicine. We can measure these barriers using a selection of questionnaires (called PPAT).

We want to make a website to help people overcome their barriers to medicine and to test how well it works. Using a website is a good idea because it costs less than giving people face-to-face advice, and because most people in the UK use the internet. Websites have been effective at helping people with other illnesses.

### Aims of the proposed investigation

1. To develop a website to address perceptual and practical barriers to medicine for IBD.
2. To find out whether the intervention is effective.

### Stage 1: Develop the website and its content (Months 1-15)

The content of the website will be written by a group including people with IBD, researchers at CBM, and doctors. The website itself will be developed by the team at CBM and it will be tested by people with IBD before the trial.

### Stage 2: Trial the website (Months 16-24)

We will invite adults with IBD visiting online support groups to take part in the research.

When a person takes part they will answer our questionnaires (PPAT) and will automatically get advice and exercises to complete based on their questionnaire score and the medication they are prescribed. For example, a person who says they find it difficult to remember their medicines while they're on holiday might be asked to list possible ways that they can solve that problem, and they might be given information about reminder services.

### Outcomes and their measures

1. We will record a person's questionnaire scores before they are given information and compare these to their scores after the trial.
2. We will also record information from the website, and do interviews with some of the people who used it, to see how easy it is to use and how helpful they found it and how we can improve it.

### Potential application of results including benefits for people living with IBD

1. We can use the results of this study to improve the intervention and make an application with the Crohn's and Colitis UK for funding to undertake a larger scale trial.
2. People with Colitis or Crohn's disease will benefit from help with managing their illness, and more effective ways of dealing with side effects and other difficulties surrounding treatment.
3. This website would be available to Crohn's and Colitis UK members.