Table 5. Level of attributes for the three existing acromegaly treatments.

	lanreotide or octreotide	pasireotide	pegvisomant
IGF-I level control	6 out of 10 patients	3 out of 10 patients	9 out of 10 patients
Tumour control	Reduces tumour size	Reduces tumour size	Does not reduce tumour size
Administration methods	Monthly self-administered or primary care/hospital nurse-administered injection*	Monthly nurse-administered injection in primary care/hospital	Daily self-administered injection at home
Pain associated with the administration method	Minimal injection pain and no redness/ bruising/ skin hardening	Minimal injection pain and no redness/ bruising/ skin hardening	Minimal injection pain and no redness/ bruising/ skin hardening
Adverse events, diarrhoea	Diarrhoea in 4 out of 10 patients	Diarrhoea in 3 out of 10 patients	Diarrhoea in 1 out of 10 patients
Blood sugar control	Blood sugar (or diabetes) or blood sugar medication unaffected	Blood sugar higher (or diabetes onset), blood sugar medication may be required/up-dosed	Improved blood sugar (or diabetes) improved, or blood sugar medication down-dosed
Storage conditions	Cold storage (fridge)	Cold storage (fridge)	Storage at room temperature
Quality of life	Improved quality of life	Improved quality of life	Improved quality of life

* To estimate patient preference for octreotide and lanreotide, treatments were unified; however, octreotide can only be nurse-administered in primary care/hospital .