A3.20 Medication Preference

As you are aware, (*participant*) has been given a choice as to whether to join this trial or to maintain clinical care with his/her doctor outside of this trial. Their doctor can prescribe the medications we are using in this trial if that is what they wish.

However, noone really knows which medication will work best for (*participant*) or whether indeed he/she may be better off without medication. We very much appreciate (*participant*) joining this trial to help us find out which medication does work for people with dementia.

With this in mind, we would be interested to know how you feel about the person you are caring for being given the medications in this trial.

Please note that in this trial people are allocated a treatment (i.e. placebo, mirtazapine or sertraline) randomly by a computer program set up by an independent group. The information you are providing us with today is not released to this group and so your answer cannot in any way affect the type of medication given in the trial.

Question 1: Antidepressant versus nothing

I strongly prefer him/her to have an antidepressant	I prefer him/her to have an antidepressant	I do not mind	I prefer him/her not to have an antidepressant	I strongly prefer him/her not to have an antidepressant
1	**2**	**3**	**4**	**5**

Question 2: Mirtazapine versus Sertraline

I strongly prefer him/her to have mirtazapine	I prefer him/her to have mirtazapine	I do not mind	I prefer him/her to have sertraline	I strongly prefer him/her to have sertraline
1	**2**	**3**	**4**	**5**