

VITILIGO FAMILY QUESTIONNAIRE

This should be filled in by (or for) one person in your family who has vitiligo. Please write clearly. If there is not enough room for your answers, please continue on a sheet of paper and attach it to this form. Note: **all personal information will be kept in confidence and not used for anything other than this study.**

Important: When we ask about brothers, sisters, parents etc, we mean "blood"-relatives (not relatives by marriage or adoption). Similarly, "brothers / sisters" means people with the same mother and father, not half-brothers etc.

1. If you are the person with vitiligo, please go to question 2. If you are filling in this form for a child or for someone else, please enter **their** name here:

(in which case, **from question 3 onwards, "you" means the person with vitiligo**).

2. Please enter **your** name and address. _____

3. What is your age? _____, sex? _____, and age when vitiligo first appeared? _____

4. How much of your skin would you say is affected by vitiligo at present? Tick one box.

Up to 25% 26-50% 51-75% 76-100%

5. Would you be willing to be in this project by giving a small blood or saliva sample?

Of course you are free to change your mind later about this.

If you can't or won't give blood or saliva, please go to question 10.

6. Please may we have some contact details (**strictly for this study**; they will not be given to anyone else)? Tel: Daytime _____ Evening _____

E-mail address _____

7. Do you have a brother(s) or sister(s) willing to give a blood or saliva sample? If so, please provide the following for each one:

Name	Age	Sex	Age when vitiligo first appeared (write N if they never had vitiligo)
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8. Is your mother alive? _____ If so, would she be willing to give a blood or saliva sample? _____

9. Is your father alive? _____ If so, would he be willing to give a blood or saliva sample? _____

10. Who else in your family has vitiligo? Please give their age when it first appeared, if known. For example, Mother (10), son (5). _____

11. Please briefly describe any special medical conditions that you or any of your relatives have, such as diabetes, pernicious anaemia or thyroid problems (not infections or injuries). For diabetes, please say whether it began in childhood or as an adult, and whether insulin was needed, if known.

Condition	Who has condition (for example, aunt, me)
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_____	_____
_____	_____
_____	_____

12. How many brothers do you have? _____ How many sisters? _____

13. How many brothers does your mother have? _____ How many sisters? _____

14. How many brothers does your father have? _____ How many sisters? _____

15. How many children do you have? _____

16. If you have a child with vitiligo, is their other parent willing to give blood /saliva? _____

And are you and your child willing for the child to give blood/saliva? _____

17. Has your spouse/partner ever had vitiligo? _____ Has anyone else in their family ever had vitiligo? _____

18. Please tick whichever of the following ethnic groups fits you best

- | | | |
|---|--------------------------------------|---|
| <input type="checkbox"/> Afro-Caribbean | <input type="checkbox"/> Pakistani | <input type="checkbox"/> White/ Caucasian |
| <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Mixed race |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Other Asian | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Indian | <input type="checkbox"/> Turkish | _____ |

19. If you answered Mixed race, please explain

If there is any other information you think may be useful to us, please add it here.

Thank you very much for your help.