Supplementary material 1: Topic Guide for Qualitative Semi-Structured In-depth Interviews

- Introduce self, research study funded by Barts Charity and Rosetrees Trust.
- Purpose of the research.
- Introduce audio recorder.
- Stress all identifiable information will be kept confidential, but anonymised quotes may be published/presented.

• Family composition
  Q: Who lives at home? Tell me about your relationships?
  P: Partner, children, parents, siblings, ages

• Support network
  Q: Tell me about people who are important to you that give you support/advice when you need it.
  P: Friends, family, support groups, religion

• Occupation
  Q: How would you describe your occupation?
  P: Full time, part time, paid, unpaid

• Hobbies
  Q: How do you fill your spare time? What do you do in your spare time?

• How she found out she had a genetic mutation/was found to be at increased risk of ovarian/breast cancer.
  Q: How did you find out that your chances of developing ovarian/breast cancer was higher than others?
  P: How long she has known

• Effect on individual and family members.
  Q: How did you take that news? How did your family take that news?
  P: Partner, children, extended family, psychological

• Change in lifestyle choices since finding out she is at increased risk of ovarian/breast cancer.
  Q: What lifestyle changes have you made, if any, since finding out you carry a faulty gene/are at increased risk of developing ovarian cancer? What has changed?
  P: smoking, drinking, exercise, diet, vitamins, herbal/complementary therapy

• Reason(s) for change in lifestyle choices.
  Q: Why do you think you made changes?
  P: Family, friends, cultural expectations

• Importance of health to the individual.
  Q: How important is being healthy to you?

• Motivations for staying healthy.
  Q: What motivates you to stay healthy? Why is it important?
  P: Family, friends, duty to self, cultural expectations

• Previous knowledge of RRESDO/RRSO/RRM/combined surgery.
  Q: Were you aware of the different types of surgery available to reduce ovarian cancer/breast cancer risk? Where did you get your information from?
  P: health professionals, reading, attending support group events

• Initial thoughts on hearing about RRESDO/RRSO/RRM.
  Q: What were your initial thoughts on hearing about this? Why did you feel this way?

• Reasons RRESDO/RRSO/RRM/combined surgery acceptable
  Q: Why do you think you chose to have RRESDO/RRSO/RRM +/- reconstruction/no surgery?
  P: fertility, premature menopause, surgical risk, ovarian/breast cancer risk reduction, ovarian/breast cancer worry, femininity, self-esteem,
Q: What are your thoughts on combining both ovarian and breast cancer surgery in a single operation?
P: practicality of combined surgery, psychological impact, post-op recovery
- Reasons RRESDO/RRSO/RRM not acceptable
  Q: Talk me through why RRESDO/RRSO/RRM +/- reconstruction/no surgery was not the right decision for you.
P: fertility, premature menopause, surgical risk, ovarian/breast cancer risk reduction, ovarian/breast cancer worry
- Does acceptability change with age
  Q: How might your decision have been different if you were older/younger?
- Reaction of family/friends in relation to her having surgery/no surgery.
- Surgery timing for individuals not choosing surgery at present
  Q: Do you think you may consider surgery in the future to reduce your risk of getting ovarian/breast cancer?
P: When, type of surgery, if no surgery why
- Ease of coming to a decision
  Q: How easy was it to come to a decision?
P: what made it easy/difficult
- Satisfaction with decision
  Q: How satisfied/happy are you with your decision?
P: Why satisfied/not satisfied
- Likelihood of future regret
  Q: How do you think you will feel about your decision in a few months/years? Are there any circumstances which may make you regret your decision?
P: reasons for regret

- Overall satisfaction with the counselling process prior to making decision to have/not have risk reducing surgery for ovarian/breast cancer prevention.
  Q: Overall how satisfied are you with the counselling/information/support you received from health professionals before you made your decision?
P: Did counselling help make a decision, why did it help, what else helped
- Areas for improvement.
  Q: Is there anything the clinical team could have done better to help you make your decision? How would you improve the counselling that is provided?
- Advice she would give to someone trying to make a decision about risk reducing surgery for ovarian/breast cancer prevention.
  Q: What advice would you give to someone faced with having to make a similar choice as yourself?

Final steps:
- Thank the participant. Check whether they have remaining questions or comments about the topic
- Reassurance about confidentiality and anonymity
- PROTECTOR contact details should they want further information

RRSO – risk reducing salpingo-oophorectomy; RRESDO – risk reducing early salpingectomy with delayed oophorectomy; RRM – risk reducing mastectomy