

Supplementary Online Content

Truesdale MD, Osterberg EC, Gaither TW, et al. Prevalence of pubic hair grooming–related injuries and identification of high-risk individuals in the United States. *JAMA Dermatol*. Published online August 17, 2017. doi:10.1001/jamadermatol.2017.2815

eAppendix. Personal Grooming Injuries Questionnaire

This supplementary material has been provided by the authors to give readers additional information about their work.

eAppendix. Personal Grooming Injuries Questionnaire

Personal Grooming Injuries
November 2013
- Questionnaire -

[DISPLAY]

Study Title: Pubic Hair Grooming Behaviors among American Men and Women: A Study of Injuries Relating to Grooming Practices

Thank you for continuing to be part of the KnowledgePanel®.

This survey is being conducted by The University of California, San Francisco. The study will help researchers understand more about pubic hair grooming behavior among men and women in the United States. About 7,500 people will participate in this study.

What will happen if I take part in this study?

If you agree to be in this study, you will complete a survey online. It will take you about 5-10 minutes to complete the survey.

You will receive 1,000 points for completing this survey. (This is the cash-equivalent of \$1.)

Are there any risks to me or my privacy?

Some of the survey questions may make you feel uncomfortable or raise unpleasant memories. You are free to skip any question.

As with all KnowledgePanel® surveys, your response to this survey, or any individual question in the survey, is completely voluntary. You will not be individually identified and your responses will be used for analyses only.

Your responses will be linked to an identification number. No identifiable information is associated with your responses.

Can I say “No”?

Yes, you do not have to complete a survey. All surveys, as well as all survey items, are completely voluntary. KnowledgePanel members are not required to participate in any particular survey to be eligible for and remain a member of the panel. Survey participants are able to stop at any time and finish the survey later within the data collection period. During that time, we send up to 2 email reminder prompts to participants who have not completed the survey. No other action will be taken with nonrespondents.

Who can answer my questions about the study?

If you have questions about your rights as a participant in this survey, or are dissatisfied at any time with any aspect of the survey, you may contact the KnowledgePanel Panel Member Support at 800-782-6899.

If you wish to speak directly to the investigator in charge of this study you can email Dr. Benjamin Breyer, MD at BBreyer@urology.ucsf.edu.

If you wish to ask questions about the study or your rights as a research participant to someone other than the researchers or if you wish to voice any problems or concerns you may have about the study, please call the Office of the Committee on Human Research at 415-476-1814.

By clicking the next button, you are giving your consent to participate in the study and complete the survey.

[DISPLAY]

This survey is aimed to gather information about pubic hair grooming behavior among **[IF PPGENDER=1 INSERT: men / IF PPGENDER=2 INSERT: women]**. We are particularly interested in understanding injuries related to pubic hair grooming and the situations in which these injuries may occur. All your responses are completely anonymous. Thank you for your honesty.

Please note that some questions in this survey contain drawings of genitalia, therefore we advise you take this survey in private.

[GRID; SP ACROSS]

Q1. On a scale from 1 to 7.....

	Currently do not have a partner / Don't know 0	Not at all hairy 1	2	3	Average hairiness 4	5	6	Very hairy 7
a. How hairy are you?	[DO NOT SHOW RADIO BUTTON HERE]							
b. How hairy is your partner?								

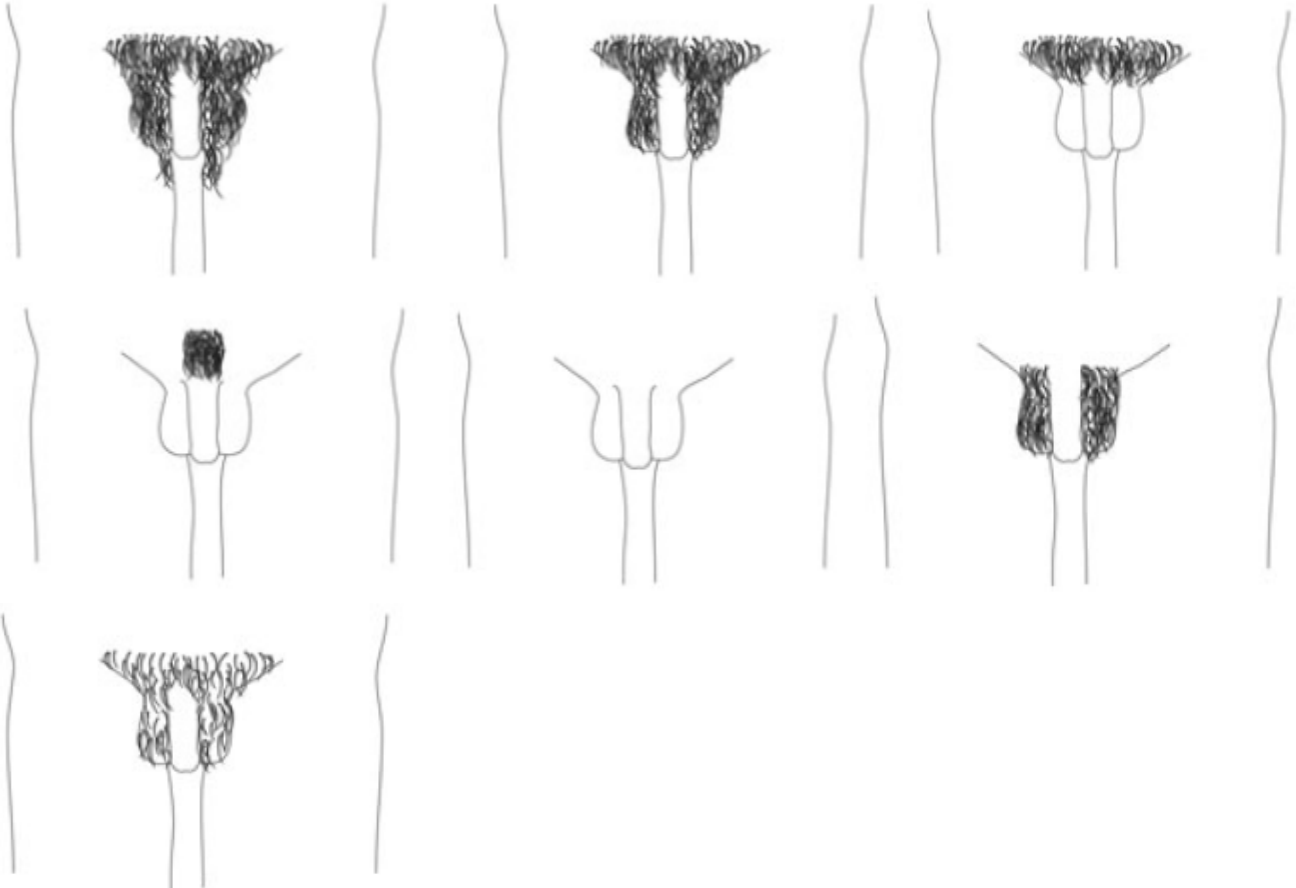
PROGRAMMING NOTE: FOR Q2, Q2A AND Q2B, SHOW THE FOLLOWING TEXT AS A FOOTNOTE AT THE BOTTOM OF EACH SCREEN, ABOVE THE "NEXT" BUTTON:

Images adapted from Ramsey S, Sweeney C, Fraser M, and Oades G. Pubic hair and sexuality: A review. J Sex Med 2009;6:2102–2110.

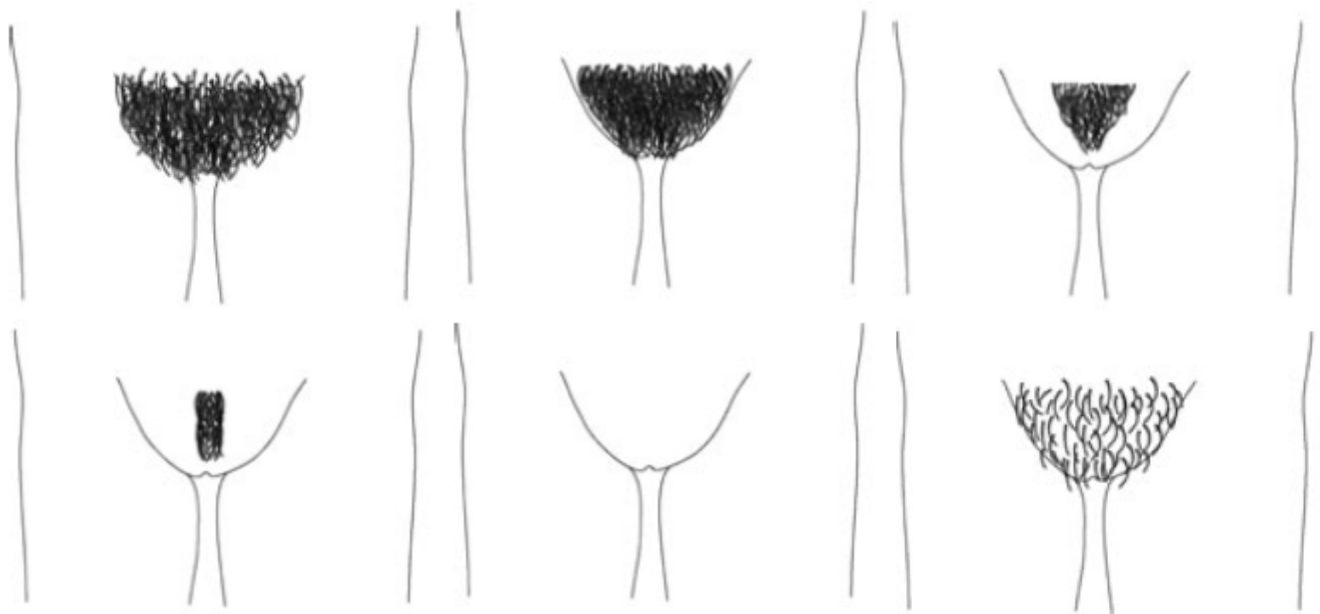
[SP; SHOW RADIO BUTTON BELOW EACH IMAGE]

Q2. Please select the image below which best represents your natural hair pattern.

[SHOW MALE IMAGES IF PPGENDER=1]

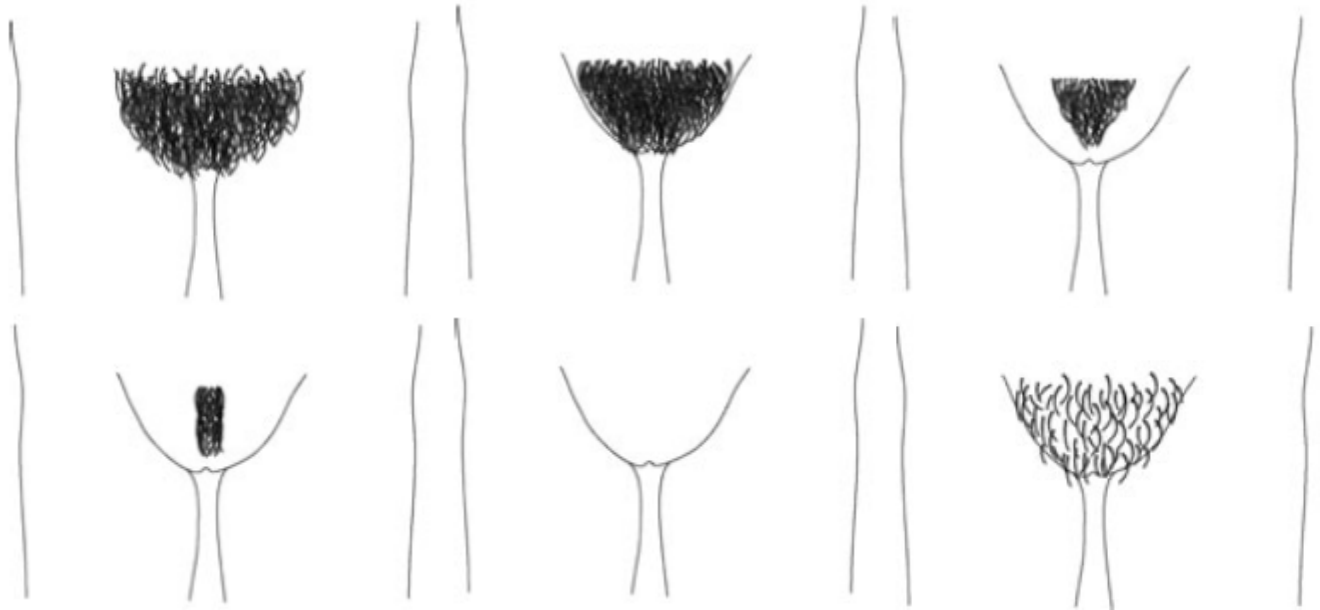


[SHOW FEMALE IMAGES IF PPGENDER=2]



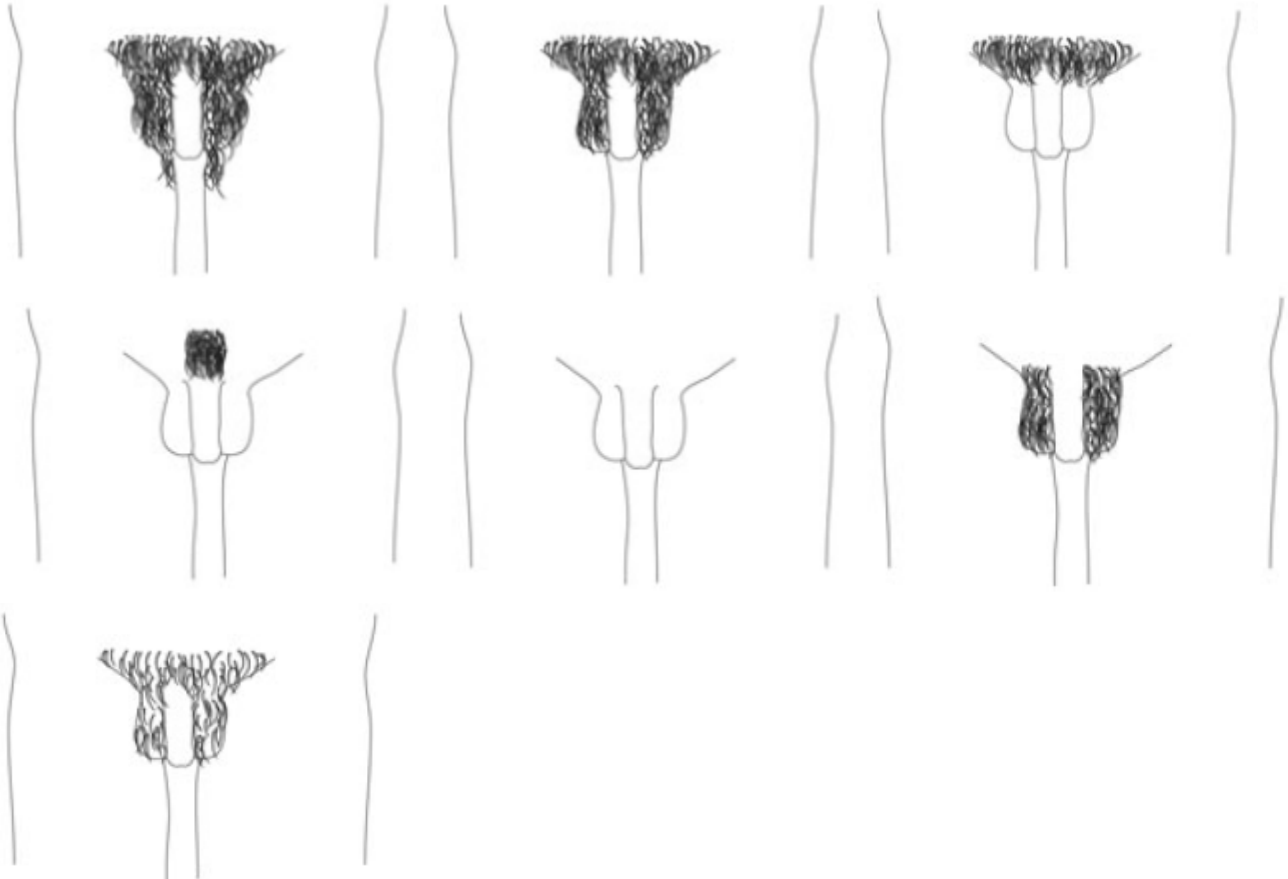
[SP; SHOW RADIO BUTTON BELOW EACH IMAGE]

Q2a. Please select the image below which represents your ideal female hair pattern.



[SP; SHOW RADIO BUTTON BELOW EACH IMAGE]

Q2b. Please select the image below which represents your ideal male hair pattern.



[SP]

Q3. Have you ever removed or trimmed your pubic hair?

1. Yes
2. No

[ONLY ASK Q4 TO Q17 ONLY IF Q3=1]

[SP]

Q4. Have you removed some (not all) of your pubic hair over the last year?

1. Not at all
2. 1 time
3. 2-5 times
4. 6-10 times
5. 11+ times

[SP]

Q5a. How regularly do you groom (remove or trim) your pubic hair?

1. Daily
2. Weekly
3. Monthly
4. Every 3-6 months
5. Every year
6. I do not groom regularly

[MP]

Q6a. Please select any and all events that you have trimmed or removed your pubic hair for. You may select more than one.

1. Sex
2. Trip to the doctor
3. Vacation
4. Other (please list) **[TEXT]**
5. I have never trimmed or removed my pubic hair for events. **[SP]**

[SP]

Q7. Have you ever removed all your pubic hair?

1. Not at all
2. 1 time
3. 2-5 times
4. 6-10 times
5. 11+ times

[MP]

Q9. What modes of pubic hair removal have you used?

1. Non electric blade razor with shaving cream
2. Non electric blade razor with soap
3. Electric razor with a guard
4. Electric razor without guard
5. Wax
6. Scissors
7. Electrolysis
8. Laser hair reduction
9. Other (please list) **[TEXT]**

[SP]

[ASK IF AT LEAST TWO SELECTIONS ARE MADE IN Q9 AND ONLY SHOW OPTIONS THAT ARE SELECTED IN Q9]

[IF ONLY ONE ANSWER IS SELECTED IN Q9, AUTOPUNCH THAT AS THE ANSWER IN Q8 AND SKIP Q8]

Q8. What is the mode of pubic hair removal that you most often use?

1. Non electric blade razor with shaving cream
2. Non electric blade razor with soap
3. Electric razor with a guard
4. Electric razor without guard
5. Wax
6. Scissors
7. Electrolysis
8. Laser hair reduction
9. Other (please list) **[TEXT]**

[MP]

Q10. Who performs your pubic hair grooming?

1. Self
2. Partner
3. Friend
4. Professionally done
5. Other (please list) **[TEXT]**

[MP]

Q11. What position(s) do you groom in?

1. Squatting
2. Sitting
3. Laying on back
4. Standing
5. Other (please list) **[TEXT]**

[MP]

Q12. Do you groom by direct visualization (either mirror or looking at the area) of the area you are grooming?

1. Mirror
2. Direct visualization of genitals
3. Don't look, just feel

[MP]

[ASK IF PPGENDER=1]

Q13a. Areas that I groom:

1. Hair above penis
2. Penile shaft
3. Hair from penis to navel ("happy trail")
4. Scrotum
5. Inner thighs
6. Hair between scrotum and anus
7. Hair around anus
8. Buttocks

[MP]

[ASK IF PPGENDER=2]

Q13b. Areas that I groom:

1. Hair above vagina
2. Hair around vagina
3. Hair below belly button
4. Inner thighs
5. Hair around anus
6. Buttocks
7. Hair between vagina and anus

[NUMBER BOX; RANGE 1-100]

Q14. How old were you when you first started pubic hair grooming?

[SP]

Q15. Who introduced you to pubic hair grooming?

1. Friend
2. Partner
3. Myself
4. Saw on TV/movie/magazine
5. Other (please list) **[TEXT]**

[MP]

Q16. Why do you groom your pubic hair?

1. Part of grooming routine
2. Hygienic/cleaner
3. Partner prefers this
4. **[INSERT IF PPGENDER=1: Makes my penis look longer / INSERT IF PPGENDER=2: Makes my vagina look nicer]**
5. Oral sex is easier
6. Anal sex is easier
7. History of pubic lice/STI
8. Other (please list) **[TEXT]**

[SP]

Q17. Have you ever had a pubic hair grooming related injury such as a cut, burn, rash, laceration with blood, injury requiring medical care, infection, abscess, other not listed?

1. Yes
2. No

[PROGRAM NOTE: ONLY ASK Q23 TO Q25 IF Q17=1]

[SP]

Q23. Have you experienced a pubic hair grooming injury more than once?

1. Yes
2. No

[IF Q23=1]

[NUMBER BOX; RANGE 2-100]

Q23a. How many times have you experienced a pubic hair grooming injury?

[IF Q23=1]

[MP]

Q18. What grooming instrument were you using when you were injured? (If you have been injured more than once, please select all instruments that apply.)

1. Non electric blade razor with shaving cream
2. Non electric blade razor with soap
3. Electric razor with a guard
4. Electric razor without guard

5. Wax
6. Scissors
7. Electrolysis
8. Laser hair reduction
9. Other (please list) [TEXT]

[NUMBER BOX; INSERT ALL ITEMS SELECTED IN Q18]

Q19. How long had you been performing pubic hair grooming before you were injured? (If you have been injured more than once, please list the duration of time you have been grooming for each injury.)

[INSERT Q18] _____ year(s) [RANGE: 0-65]

[INSERT Q18] _____ year(s) [RANGE: 0-65]

[INSERT Q18] _____ year(s) [RANGE: 0-65]

[MP]

Q20. What was your pubic hair grooming injury? (If you have been injured more than once, please select all injuries that apply.)

1. Burn
2. Rash
3. Laceration with blood
4. Injury requiring medical care
5. Infection
6. Abscess
7. Other (please list) [TEXT]

[MP]

Q21. Where were you injured? (If you have been injured more than once, please select all locations that apply.)

1. [INSERT IF PPGENDER=1: Scrotum / INSERT IF PPGENDER=2: Labia majora]
2. [INSERT IF PPGENDER=1: Penis / INSERT IF PPGENDER=2: Labia minora]
3. Anus
4. Perineum (area between the [INSERT IF PPGENDER=1: penis / INSERT IF PPGENDER=2: vagina] and anus)
5. Inner thigh
6. Pubis (area above [INSERT IF PPGENDER=1: penis / INSERT IF PPGENDER=2: vagina])
7. Other (please list) [TEXT]

[SP]

Q22. Have you ever sought or needed medical treatment for a pubic hair grooming injury?

1. Yes
2. No

[SP]

Q24. Have you ever required antibiotics for a pubic hair grooming injury?

1. Yes

2. No

[SP]

Q25. Have you ever required a surgical procedure for a pubic hair grooming injury including abscess drainage, stitches other intervention?

1. Yes
2. No

[SP]

Q26. Do you have a history of skin infections/abscesses anywhere on your body?

1. Yes
2. No

[SP]

Q27. Have you ever been diagnosed with a bacterial infection called MRSA (Methicillin resistant Staphalacoccus Aureus)?

1. Yes
2. No

[MP]

Q28. In the last 6 months have you...?

1. Worked in a hospital
2. Been hospitalized
3. Worked in a nursing home or long care facility
4. Been admitted to a nursing home or long care facility
5. Participated in contact sports
6. Participate in a military training camp or lived in military barracks
7. Worked in a jail or prison
8. Been imprisoned or jailed
9. Worked in a child care or day care center
10. None of the above **[SP]**

[SP]

Q29. Do you have (a) regular sexual partner/partners?

1. Yes
2. No

[IF Q29=1]

[SP]

Q30. Does/Do your partner(s) prefer your pubic hair to be groomed?

1. Yes
2. No
3. Unsure
4. Unsure but I think they do

[SP]

Q31. Do you prefer your sexual partner(s) to perform pubic hair grooming?

1. Yes
2. No
3. Doesn't matter
4. I'm not sexually active

[NUMBER BOX; RANGE: 0-100]

Q32. How many times per week does someone other than yourself see you naked?

[GRID; SP ACROSS]

[ASK IF PPGENDER=1]

Q33a. How satisfied are you on a scale from 1-7 with your...

Extremely dissatisfied 1	Very dissatisfied 2	Somewhat dissatisfied 3	No feeling one way or the other 4	Somewhat satisfied 5	Very satisfied 6	Extremely satisfied 7
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- a. Length of erect penis
- b. Girth of erect penis
- c. Size of flaccid penis
- d. Color of genitals
- e. Shape of glans (head)
- f. Location of urethra
- g. Texture of skin
- h. Curvature of penis
- i. Circumcision status
- j. Size of testicles
- k. Genital veins
- l. Amount of pubic hair
- m. Amount of semen
- n. Scent of genitals

[GRID; SP ACROSS]

[ASK IF PPGENDER=2]

Q33b. On a scale from 1-7, how much do you agree or disagree with the following statements?

Strongly disagree 1	2	Disagree 3	Neutral 4	Agree 5	6	Strongly agree 7
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- a. I feel positively about my genitals.
- b. I am satisfied with the appearance of my genitals.
- c. I would feel comfortable letting a sexual partner look at my genitals.

- d. I think my genitals smell fine.
- e. I think my genitals work the way they are supposed to work.
- f. I feel comfortable letting a healthcare provider examine my genitals.
- g. I am not embarrassed about my genitals.

[GRID; SP ACROSS]

Q34. On a scale from 1-7, how much do you agree or disagree with the following statements?

Strongly disagree 1	2	Disagree 3	Neutral 4	Agree 5	6	Strongly agree 7
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- a. I groom because my partner expects it.
- b. Sex is better when I groom.
- c. My **[INSERT IF PPGENDER=1: penis looks longer / INSERT IF PPGENDER=2: vagina looks better]** when I groom.
- d. I **[INSERT IF PPGENDER=1: look better / INSERT IF PPGENDER=2: feel sexier]** when I groom.
- e. I feel younger when I groom.
- f. I'm embarrassed if people see me when I HAVE groomed.
- g. I'm embarrassed if people see me when I have NOT groomed.
- h. Most **[INSERT IF PPGENDER=1: men / INSERT IF PPGENDER=2: women]** groom their pubic hair.

[GRID; SP ACROSS]

Q35. Please select Yes or No for the following.

	Yes	No
a. My best friend grooms.		
b. My partner grooms.		

[SP]

Q36. Are you sexually active with...?

- 1. Men
- 2. Women
- 3. Both
- 4. Not sexually active

[ASK IF (Q36=1-3 OR REFUSED) AND PPGENDER=1]

[MP]

Q37a. Sexual activities you have engaged in over the last year:

- 1. Penetrative vaginal sex
- 2. Penetrative anal sex
- 3. Performed oral genital sex (felatio/"blowjob" or cunnilingus)
- 4. Received oral genital sex (felatio or "blowjob")
- 5. Received anal sex
- 6. Performed oral anal sex (analingus or "rimming")
- 7. Received oral anal sex (analingus or "rimming")

[ASK IF (Q36=1-3 OR REFUSED) AND PPGENDER=2]

[MP]

Q37b. Sexual activities you have engaged in over the last year:

1. Receptive vaginal sex
2. Receptive anal sex
3. Performed oral genital sex (felatio/“blowjob” or cunnilingus)
4. Received oral genital sex (cunnilingus)
5. Performed oral anal sex (analingus or “rimming”)
6. Received oral anal sex (analingus or “rimming”)

[ASK IF (Q36=1-3 OR REFUSED)]

Q38. Frequency of sexual activity:

1. Daily
2. 1 – 3 times per week
3. Monthly
4. Every 3 months or less often

[ASK IF (Q36=1-3 OR REFUSED)]

[NUMBER BOX; RANGE: 0-1000]

Q39a. Number sexual partners in the last year:

[ASK IF (Q36=1-3 OR REFUSED)]

[NUMBER BOX; RANGE: 1-1000]

Q39b. Number sexual partners in your lifetime:

[SP]

Q40. Have you ever had this skin condition called molluscum contagiosum?



1. Yes
2. No

[SP]

Q41. Have you ever contracted a sexually transmitted disease?

1. Yes
2. No

[IF Q41=1]

[SP]

Q42. What is the total number of STDs that you have had in your lifetime?

1. 1
2. 2-3
3. 4-6
4. 7-10
5. Greater than 10

[IF Q41=1]

[MP]

Q42a. Do you or have you ever had the following infections?

1. Human immunodeficiency virus (HIV)
2. Chlamydia
3. Gonorrhea

4. Syphilis
5. Human papilloma virus (HPV)
6. Genital herpes (HSV)
7. Vaginal warts
8. Anal warts
9. Lice (crabs)
10. Molluscum contagiosum
11. None of the above **[SP]**

[IF Q41=1]

[SP]

Q43. Were you performing pubic hair grooming at the time of your STD infection?

1. Yes
2. No
3. Unsure

[IF Q43=1]

[MP]

Q44. What method(s) of hair removal were you using at the time of your STD infection?

4. Non electric blade razor with shaving cream.
5. Non electric blade razor with soap
6. Electric razor with a guard
7. Electric razor without guard
8. Wax
9. Scissors
10. Electrolysis
11. Laser hair reduction
12. Other (please list) **[TEXT]**

[KN STANDARD CLOSE]