Consensus was defined as ≥75% voting 'agree' or 'strongly agree'. Some questions were posed as multiple-choice where several responses could be selected, for which results are presented as consensus when chosen by ≥75% of panellists. Some questions were open-ended to allow for the development of consensus statements in a subsequent round of voting, and statements that did not reach consensus were rephrased and then revoted on in subsequent surveys. Statements that reached the consensus threshold are indicated in **bold** in the following tables.

Table SI: What do you consider to be the goal(s) of treatment for AK?

Please select all that apply. If you select 'Other', please explain in the comment box.

• **Clearing/controlling field of cancerisation (12/12)**
• **Removal of lesion (11/12)**
• **Reducing risk of progression to SCC (11/12)**
• **Reducing impact of the disease on the patient (11/12)**
• **Reducing risk of lesion of recurrence (10/12)**
• **Improving skin appearance (9/12)**
• Minimising local skin reactions (7/12)
• Minimising unsightly cosmetic effects (7/12)
• Minimising cost (6/12)
• Other (3/12)

AK: actinic keratoses; SCC: squamous cell carcinoma.

Table SII. Which of the following factors do you consider important to discuss with patients to set realistic treatment expectations?

Please select all that apply. If you select 'Other', please explain in the comment box.

• **Disease severity (12/12)**
• **Patient's previous experience of treatment (12/12)**
• **Patient's understanding of disease chronicity (11/12)**
• **Preventive treatments (11/12)**
• **Immunosuppression status (10/12)**
• **Patient's desire for good cosmetic outcomes (10/12)**
• **Patient's willingness to undergo treatment (9/12)**
• **Patient's previous clinical response to treatment (9/12)**
• **Patient's ability to tolerate treatment (9/12)**
• **Previous AK history (9/12)**
• **Expected treatment duration (9/12)**
• **Expected treatment frequency (9/12)**
• AK lesion distribution (7/12)
• Patient's comorbidities (8/12)
• Patient's and/or caregiver's preferences for treatment (7/12)
• Other (0/12)

AK: actinic keratoses.

Table SIII. Which of the following factors would you consider important when determining suitable AK treatment(s) for an individual patient?

Please select all that apply. If you select 'Other', please explain in the comment box.

• **Location of the lesion (12/12)**
• **Extent of the lesion(s) (12/12)**
• **Treatment duration (12/12)**
• **Patient's risk of progression to SCC (11/12)**
• **Patient preference (11/12)**
• **Patient's comorbidities (10/12)**
• **Ability to treat large fields of cancerisation (10/12)**
• **Treatment frequency (9/12)**
• **Patient's lifestyle (9/12)**
• **Logistics e.g., follow-up consultations (9/12)**
• Patient's skin phototype (8/12)
• Patient's current sun exposure (8/12)
• Patient's historical sun exposure (8/12)
• Aesthetic/cosmetic concerns (8/12)
• Individual cost of one-time treatment (6/12)
• Cumulative cost of treatment over the long-term (6/12)
• Quality of life (8/12)
• Other (0/12)

AK: actinic keratoses; SCC: squamous cell carcinoma.

Table SIV. What factors are involved in the ongoing management of your patients with AK?

Please select all that apply. If you select 'Other', please explain in the comment box.

• **Patient's previous experiences with treatment (12/12)**
• **Patient's risk of progression to SCC (11/12)**
• **Choice of lesion-directed vs field-directed treatment (11/12)**
• **Patient's previous adherence to treatment (11/12)**
• **Prevention of further photodamage or new lesion development (10/12)**
• **Need for subsequent treatments influencing current treatment choice (9/12)**
• Follow-up frequency required (8/12)
• Patient's lifestyle (7/12)
• Other (1/12)

AK: actinic keratoses; SCC: squamous cell carcinoma.