OBJECTIVES: To assess the influence of different treatment schemes of post-stroke spasticity in Russia. METHODS: Analytical model of decision making in Microsoft Excel 2013 was designed for assessing an influence of local standard therapy and different types of botulinum toxin (abobotulinumtoxinA, onabotulinumtoxinA, incobotulinumtoxinA) on the societal costs. Societal costs included direct costs to a greater extent compared with other alternatives. That fact makes abobotulinumtoxinA more beneficial from the societal costs perspective compared with other treatment schemes.

PM33 COMPARING BURDEN OF ILLNESS OF TOPHACEOUS WITH NON-TOPHACEOUS GOUT PATIENTS USING AN ELECTRONIC HEALTH RECORD DATABASE

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OBJECTIVES: Gout is the most common and progressive arthritic condition. Its sever- ity is assumed to have implications for the humanistic and economic burden of the heterogenous people of this study is to examine the burden of gout between patients with and without tophi using electronic health records (EHR). METHODS: The Humedica EHR database was searched starting on January 1, 2008 through February 28, 2013 for patients with a diagnosis of tophaceous gout (A158.1) and a confirmatory gout diagnosis at least 30 days later. Desidentified patients with enrollment from 6-months pre/12-months post initial gout diagnosis and at least one serum uric acid (SUA) level were included in the study. Patients (n=933) with a diagnosis of tophaceous gout (A158.1), and left ventricular hypertrophy (p<0.001). Gout patients with tophi had higher levels of chronic heart disease, obesity, rheumatoid arthritis, and tophaceous gout (p<0.001). CONCLUSIONS: Gout patients with tophi had significantly greater burden of disease and greater frequency of comorbidities than those without. Preventing the development of tophi may reduce comorbidities and frequency of colchicine use and warrants further investigation.

PM34 DISEASE BURDEN OF PSORIATIC ARTHRITIS IN THAIWAN: A POPULATION-BASED ANALYSIS

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OBJECTIVES: Psoriatic arthritis (PsA) is an inflammatory arthritis associated with skin psoriasis. PsA causes swelling, stiffness and pain in joints, it may also affect the spine, ankles and wrists. It is also associated with decreased quality-of-life in its patients. Treatment of PsA includes both pharmacological and non-pharmacological treatments. The research aims to estimate the economic burden of a PsA in Taiwan. The micro-costing model was developed to describe PsA in a claims-based dataset encompassing 99% of Taiwan’s population, was applied. The database measures direct costs to the healthcare system and does not take into account indirect costs such as absenteeism or loss of productivity. We used a micro-costing approach for direct health care costs by estimating the quantities and prices of cost categories. Direct costs included surgeries, ward usage, medical devices and materials, lab tests, surgery and drugs, and quantities of the direct economic burden was calculated based on 2011 data of NHIRD. We identified PsA patients and a control cohort matched 1:4 on demographic and clinical covariates to calculate the incremental cost related to PsA. RESULTS: A total of 4,053 PsA patients were included in the database with incremental total direct cost of $13,282,615. This resulted in an average incremental direct cost of $1,277 per PsA patient. Direct costs were mostly influenced by medication costs ($11,991,479, 90.28%), while lab tests ($576,403, 4.34%), FUVA therapy ($348,741, 2.63%), surgery ($150,471, 1.13%), ward usage ($130,978, 0.99%) and medical devices/ materials ($84,543, 0.64%) made up the balance. Within medication costs, biologic and tablet disease-modifying anti-rheumatic drugs accounted for 45% and 22% of all medication costs, respectively. CONCLUSIONS: Our findings highlight the significant economic burden PsA places on Taiwan’s economy. The direct costs of PsA in Taiwan are driven by medication costs and lab tests. Efficient management of PsA could reduce the economic impact of the disease.

PM35 COST DESCRIPTION OF RHEUMATOID ARTHRITIS TREATMENT IN CHILE FOR PATIENTS WHO HAVE FAILED TO CONVENTIONAL SYNTHETIC DMARDs

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OBJECTIVES: TO STUDY THE COSTS OF RHEUMATOID ARTHRITIS (RA) TREATMENT IN CHILEAN PATIENTS WHO HAVE FAILED CONVENTIONAL SYNTHETIC DMARDs (CS-DMARDs) TREATMENT. METHODS: The objective of this study is to estimate the direct costs associated with RA in patients who have failed CS-DMARDs treatment. The costs were obtained from public tenders and official reports. Comparators were: tocilizumab (Ligwe A158.2)