mote its use. The audience includes those who develop, submit or use budget impact
models and committees who evaluate reimbursement submissions. With a
use of Guidelines for Pharmacoeconomic Evaluations, ISPOR Guidelines and proposed
bia template (which will be published in the updated version of the Guidelines for
Pharmacoeconomic Evaluations) the quality of submissions to the HIF in Serbia
would be raised and the decision time could be reduced.
PHP93
THE SUSTAINABILITY OF IRISH PHARMACEUTICAL EXPENDITURE
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OBJECTIVES: The recent economic crisis has threatened the sustainability of many
inter national economies as well as their health care systems. The objective of this
to quantify recent cost containment measures used to reduce Irish pub-
lic pharmaceutical expenditure in light of the ongoing fiscal restraint. METHODS: Phar-
maceutical spend across the EU was briefly examined using the most
current OECD data. The main pharmaceutical cost containment measures recently
adopted in Ireland were identified under the headings of drug prices, fees/mark-ups
and coverage/co-payments with savings of
€
380m in 2011. The main
$cost containment measures used including price cuts of up to 40% on off-patent and
generic drugs leading
to an estimated
€
380m saving, 2) pharmacy dispensing fees and mark-ups via a
new dispensing fee structure and reducing both retail and wholesale mark-ups with
a scheme covering 75% of co-payments including
restricting scheme coverage for persons over 70 years and increasing the level of
co-payments with savings of
€
80m. CONCLUSIONS: There use of pharmaceutical

cost containment measures to decrease health expenditure is a trend that is likely
to continue for some time yet.

PHP94
BASIC ATTITUDE TOWARDS HEALTH CARE RESOURCE ALLOCATION DECISION MAKING IN JAPANESE PEOPLE -UTILITARIANISM OR EQUALITARIANISM?
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OBJECTIVES: Japan is now confronting budget constraints and trying to introduce
economic evaluation into health care resource allocation. To clarify the basic atti-
tude towards health care resource allocation in Japanese people, a national survey
was conducted. METHODS: A survey was carried out in a face-to-face manner with
random sampling on the 50 municipalities in Japan, adjusting for age and sex,
between May 2012 and March 2013. The questions in the first question
1."Imagine that there are two clinical examinations (A: less expensive with
lower power; B: more expensive with high power) and choose from the following two
options: A) All patients receive examination A and subsequently the death of
1,000 people is prevented; option 2: a half of the subjects is selected by lottery and
receives examination B, preventing the death of 1,100 people as a consequence
"question 1."Imagine that there are two types of diseases differing the treatment cost (A: 10
different prices for patients; B: 2 million yen per patient), and allocate 100 million yens to
diseases." RESULTS: Out of 1143 respondents, 601 chose the option 1 in question 1. In
question 2, 217 chose the least utilitarian combination(A,B; 8,10), 139 chose 2nd
combination(A,6; B,8), 289 chose 3rd one(A, 4; B,30), 67 chose 4th one(A, 5; B,40), and
379 chose the most utilitarian option(A, 0, B,50). The weak correlation was observed
in the utilitarian trend and age (r=0.29, p <0.01). Utilitarian tendency to maximize the
health benefit varied among respondents with different educational back-
grounds: CONCLUSIONS: We investigated the basic attitude towards health care
resource allocation in Japanese people by answering to specific scenarios, which
revealed fairly extreme utilitarian selection was the most popular. This utilitarian
tendency correlated with age and education. It seems that the discussion on the
priority setting in health care resource allocation in Japan based on this kind of
electric data become important.

PHP95
RESOURCES SAVED BY THE INTRODUCTION OF DAY SURGERY IN THE GREEK NATIONAL HEALTH SYSTEM
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OBJECTIVES: Day surgery has been introduced in numerous health care systems and
has been proved able to save resources and promote efficiency and effectiveness. The
aim of this study was to estimate the savings that can be realized by the adoption of
day surgery by the Greek National Health System. METHODS: Surgery procedures
were classified according to the type of anesthesia and the post-operative care they
require. The procedures identified as suitable for day surgery, according to the above
criterions, were: the Greek Diagnoses Orthopaedic Surgery (GDSOS). The savings
were calculated on the basis of the marginal cost these procedures impose to hospitals
when treating them as inpatient surgeries. Savings were estimated for both the
health insurance(SI) and for the government. The savings due to the fact that SI
reimburses the capital production factor of each DRG while the labor cost is funded
by the government budget. RESULTS: Sixty-two DRGs were identified as suitable for
day cases. The procedures of the eye (16%), the ear, nose and
throat (13.1%), the myokoskeletal system (9.7%), the kidney and the urinary tract (9.7%)
and the female reproductive system (9.7%). The hospital marginal cost of an increase
in the length of stay by one day was estimated at 563.32 euros (95%CI: 541.6–585.1). The
overall hospital savings were estimated to be €380m in 2011. The main changes
were estimated to have reduced Irish public pharmaceutical expenditure by
€380m in 2011. The main cost containment measures used involved addressing; 1) the ex-factory price
and coverage/co-payments with full year 2011 public savings estimated. RESULTS: 2) the

PHP96
CHRONIC PATIENTS’ PERCEPTIONS ABOUT GENERIC MEDICINES IN GREECE: FINDINGS FROM A CROSS-SECTIONAL STUDY
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OBJECTIVES: The Greek authorities implemented mandatory generic substitution
as a mix of price and volume controls. Collectively, these measures were estimated
to have reduced Irish public pharmaceutical expenditure by
€80m in 2011. The main cost containment measures used including price cuts of up to 40% on off-patent and
generic drugs leading
to an estimated
€200m saving, 2) pharmacy dispensing fees and mark-ups via a
new dispensing fee structure and reducing both retail and wholesale mark-ups with
a scheme covering 75% of co-payments including
restricting scheme coverage for persons over 70 years and increasing the level of
co-payments with savings of
€80m. CONCLUSIONS: There use of pharmaceutical

cost containment measures to decrease health expenditure is a trend that is likely
to continue for some time yet.

PHP97
ANALYSIS OF SPANISH GENERIC MEDICINES MARKET: RECOMMENDATIONS TO ENHANCE LONG-TERM SUSTAINABILITY
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OBJECTIVES: To provide an overview of the Spanish generic medicines retail market and
to identify policy measures which impede its development. Finally, recommen-
dations for health care systems are proposed. METHODS: We carried out a
cross-sectional study among 1600 patients from four chronic illness groups
(HTN, Diabetes, COPD and Alzheimer mild to moderate stage). Logistic regression analysis
was used to determine the factors associated with chronic patients’ per-
ceptions. RESULTS: Of 1600 patients, 1594 responded to the survey (99.6%). Only 67%
has current generics in the past. 39.3% considers them safe, 38.3% thinks that
the generics have the same quality standards as the originals and 37.3% believes
that they have the same treatment outcomes. 63% exposed concern on potential
adverse drug reactions. 58% argues that the drug’s country of origin affects the
safety. Statistical analysis revealed that generics quality has a statistical significant
relationship with patient’s income (OR 1.24, 95% CI 1.00-1.19), age (OR 0.99, 95% CI
0.98-1.00), gender (OR 0.73, 95% CI 0.59-0.94) and health status (OR 1.00; 95% CI 1.00-
1.02) while generics effectiveness was positively related with the patient’s income
(OR 1.10; 95% CI 1.02-1.20), gender (OR 0.70, 95% CI 0.55-0.90) and health (OR 1.00,
95% CI 1.00-1.01). Women and the elderly are less likely to consider that the gener-
cics have the same standards as the originals. CONCLUSIONS: Our findings reveal
that chronic patients express reservations towards generic medicines which in an
extent can probably explain the low generic market share in Greece. Perceptions about
generics were found significant related mostly with patients’ demographic
characteristic. The latter can be considered as useful information as it assists stake-
holders to identify on which chronic patients groups should direct campaigns in
order to encourage generic drug use as a means to control expenditures and to save
resources for innovative drugs.

PHP98
ACCEPTABILITY OF INDIRECT EVIDENCE SUPPORT TO DRUG REIMBURSEMENT IN AUSTRALIA
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OBJECTIVES: When there are no direct head-to-head trials versus an appropriate
comparator, indirect comparisons are commonly performed to support a clinical
effectiveness claim. Current pricing pressure on the Pharmaceutical Benefits
Advisory Committee’s (PBAC) decision-making process relating to government reimbursement of medicines, have been published since July 2005. A review of PBAC’s specific to drugs where the primary claim was
based on indirect evidence was undertaken to assess the success of the approach and