with MTX alone or in combination, to explore their experience. Qualitative analysis was performed (develop a conceptual model of the factors and make a difference to MTX. Based on this model, items were generated using patients’ verbatim, and comprehension tested with 18 RA patients. Acceptability and applicability of the resulting pilot version were then assessed in clinical practice during consultation with rheumatologists, using the CONSALSC (Content and Face validity) Test. RESULTS: Several factors associated with poor adherence to MTX were elicited from the analysis of the exploratory interviews: barriers (practical, physical), emotional factors (side-effects, treatment-related beliefs), patients’ beliefs, expectations and behaviors towards treatment, and external factors. The resulting MTX Adherence Questionnaire included 29 questions, plus three about MTX administration mode and dose, divided into 5 sections: “practical aspects of MTX”, “Me and MTX”, “efficacy of MTX”, “my feelings about MTX”, “my opinion regarding my care”; “MTX treatment in general”. Rheumatologists accepted very well the questionnaire and found it useful to enhance communication with their patients. DISCUSSION: CONCLUSIONS: The MTX Adherence Questionnaire is a self-administered tool that identifies patients facing adherence issues with MTX, and thereby helps clinicians make better-informed treatment decisions. It is suitable for use in clinical practice. A validation study to assess its robustness in research and clinical practice is being set up.

PM184
THE MOST FREQUENT FEARS AND BELIEFS OF 226 PATIENTS WITH RHEUMATOID ARTHRITIS OR SPONDYLOARTHROPATHY, USING A NOVEL QUESTIONNAIRE
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OBJECTIVES: Patients with chronic inflammatory disorders, such as rheumatoid arthritis (RA) or spondyloarthropathy (Spa), have personal sets of fears and beliefs related to their disease that may influence the patient-physician relationship and treatment decisions. The objective was to describe the most frequent fears and beliefs in RA and Spa patients. METHODS: Cross-sectional assessment of unselected patients with a diagnosis of RA (ACR/EULAR criteria) or axial SpA (axSpA) (the latter in France in 2014. The study was proposed to all rheumatologists in France. A self-reported 44-item questionnaire (25 items on fears, 19 on beliefs) was administered. RESULTS: Overall, 226 patients (161 RA, 65 axSpA; 64.4% female) were analysed: mean disease duration 11.9 ± 13.8 years and mean patient’s global assessment 31/100 vs 43/100 for RA vs axSpA patients, respectively. Of the 25 listed fears, the 6 most frequently reported were: “fear of suffering again” (66.7% scored this as ≥7/10), “fear of losing control and autonomy” (61.4%), “fear of being a burden for relatives” (59.6%), “fear of losing all joint mobility” (58.9%), “fear of the spread of the disease to other joints” (58.6%) and “fear of the consequences of my disease on my professional activity” (58.6%). Of the 19 listed beliefs, the 5 most frequently reported were: “flares are triggered by fatigue” (41.7%), “physical activity reduces flares” (41.7%), “the disease is triggered by changes in the weather” (38.7%), “flares are triggered by stress” (37.1%) and “the disease is linked to a genetic cause” (36.9%). CONCLUSIONS: This study highlights the main fears and beliefs from a patient perspective using a novel questionnaire specific to chronic inflammatory arthropathies.

PM185
TOOLS FOR MEASURING WORKABILITY – RESULTS DERIVED FROM LITERATURE AND EXPERT INTERVIEWS
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OBJECTIVES: Currently there is no standardised tool or questionnaire to measure workability and related concepts. Instead, there are various different instruments used in research and practice. The objective of this paper is to identify, describe and evaluate the existing instruments for measuring workability, presenteeism, productivity and related concepts and to assess the status quo regarding the use and awareness of the instruments in Germany. METHODS: We adopted a 2-step-approach: (1) Published, the Cochrane Library and ScienceDirect were searched for relevant articles published before August 2014. Internet search and scanning reference lists complemented our search. Two authors independently reviewed titles, assessed articles’ eligibility and extracted relevant data. Instruments identified in literature were described and evaluated. (2) Experts from rehabilitation, health management, economics and representatives of the medical profession were interviewed on the existing measuring workability instruments and survey instruments and their semi-standardized, structured guideline and conducted by telephone. RESULTS: (1) Systematic review revealed 4665 articles. Thereof 357 were included in further research. In total, we identified 57 instruments (including different versions of single instruments). Instruments vary significantly regarding content, response format, length, etc. Instruments most often used include WPAI, WLQ, SPS, HQP, HQL, WAI and MIDs. (2) Results of the interviews indicate that the WAI and WPAI are the instruments most common and also most often used in Germany. Both tools are considered appropriate for measuring workability and experiences are predominantly positive. However, experts refer to methodological deficits and only few would recommend the use of the instruments in practice. CONCLUSIONS: There are many questionnaires to assess workability and related concepts. However, only few seem to be scientifically sound and valid and at the same time applicable for a broad use in practice.

PM186
DOES ONE SIZE FIT ALL – CHALLENGES FACED WHEN ADAPTING TRANSLATIONS FOR AN ELECTRONIC PLATFORM
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OBJECTIVES: To identify the principal challenges faced during migration from paper to electronic. METHODOLOGY: Principles were identified through structured review of the literature (using ECOA questionnaires will often use placeholders which are replaced by other words/numbers when the software is running (string concatenation)) METHODS: 110 questionnaires used across 22 languages. Language placeholders were identified; problems and resolutions were compared and results were reviewed in order to identify patterns. RESULTS: Just over 40% of languages had issues with the population of software placeholders. Two main problems were encountered: (1) Where the article was deleted before the question was scored the result was too long, and (2) using geographical placeholders.

PM187
PATIENT REPORTED OUTCOMES IN THE DEVELOPMENT OF NEW MEDICATIONS FOR TYPE 2 DIABETES: A REVIEW OF RECENTLY APPROVED PRODUCTS
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OBJECTIVES: Patient-Reported Outcome (PRO) instruments are increasingly being utilized in drug development to provide a holistic understanding of the drug impact. Such data can be beneficial in clinical decision making. This review sought to identify and discuss the PRO instruments used in Phase 3 trials of the newest class of drugs for the treatment of Type 2 diabetes (TZDM). METHODS: A search was conducted in medline, psycinfo, cinahl, and clinicaltrials.gov using 17 drug names contained within the following classes: GLP-1 receptor agonists, however, the majority of DPP-4 inhibitors were supplemented with EASD and ADA abstract database searches from 2012-2014. PRO instruments used in Phase 3 trials were identified and categorized by measurement domains. RESULTS: Twenty PRO instruments have been used, although none in DPP-4 inhibitor trials. PRO instruments were used to measure six separate concepts: analysis of treatment satisfaction (10/17 drugs), health-related quality of life (HRQoLs) (8/17), impact of weight/exercising-related outcomes (6/17), symptoms of diabetes (3/17), psychological well-being (3/17), and cognitive functioning (1/17). Although several PRO instruments were used to measure the same concept, the items and domains that comprised that concept differed across instruments. For example, only two of the seven treatment satisfaction questionnaires contain items pertaining to the injectable therapy device. In addition, some PRO instruments did not comprehensively evaluate the concept that they claimed. For example, an item-level analysis of the EQ-5D, identified as a measurement of HRQoL, suggests that it more accurately measures functional health status, thereby representing only one dimension of HRQoL.. CONCLUSIONS: PRO data are available for many recently approved drugs in TZDM. More work is needed to highlight the relevance and importance of PRO data from pivotal trials as an important consideration for physicians when making treatment decisions.

PM188
A PAPS REPORTING STATEMENT FOR STUDIES MAPPING TO preference-BASED OUTCOME MEASURES
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OBJECTIVES: To develop a checklist of essential items, which authors should consider when reporting studies of mapping to preference-based measures from other outcomes. The aim of the checklist (the Mapping onto Preference-based measures reporting Standards (MAPS) statement) is to promote complete and transparent reporting by researchers. METHODS: A working group of health economists and patient-researchers was established. Candidate items were identified through a structured review of the literature and reviewed by the working group. A modified Delphi survey, with representatives from academia, consultancy, health technology assessment agencies and the biomedical journal editorial community, was used to identify a list of essential reporting items from the set of can-