BALLOON CATHETER DILATION FOR CHRONIC RHINOSINUSITIS DOES NOT INCREASE THE FREQUENCY OF SINUS SURGERIES IN THE UNITED STATES

**OBJECTIVES:** Balloon catheter dilatation (BCD) of sinus ostia performed by surgeons caring for suffering from chronic rhinosinusitis with nasal obstruction (CNOS) has been shown to be safe and effective as an in-office procedure. This procedure provides physicians with the opportunity to treat patients in a low-cost care setting, whereas traditional endoscopic sinonasal surgery is performed in the operating room. Recent publications have raised concerns about the potential for this technology to increase the number of patients surgically treated. The aim of this study was to evaluate the trend of sinus surgeries (including BCD procedures) from 2006 to 2011, to determine whether the introduction of BCD in 2005 increased sinus surgery volumes in the United States. **METHODS:** Two databases were queried from 2006 to 2011 using CPT codes associated with functional endoscopic sinus surgery (FESS; CPT 31254 - 31288) and BCD (CPT 31295 - 31297). Total surgery and procedures counts were analyzed separately, as each surgery could include one or multiple FESS or BCD procedures. A projection methodology developed by Marketscan was applied to estimate US-wide frequencies. Procedural case-mix and total average payment per surgical event were also analyzed for each year of interest. **RESULTS:** Total individual procedural volume growth reached an average compounded annual growth rate (CAGR) of 1.4% from 2006 to 2011. The number of surgeries, however, only grew by a CAGR of 0.9% during that timeframe, a rate comparable to that of the overall US population (0.8%). **CONCLUSIONS:** BCD did not result in significant growth of procedures or surgeries, thus suggesting that the criteria for selecting patients for surgery did not change with the introduction of BCD. The growth in procedures slightly under-estimated the actual number of surgeries, suggesting a potentially larger number of procedures per surgery.

BURDEN OF DISEASE OF SMOKING CESSATION IN RUSSIA: RESULTS FROM 2011 NATIONAL HEALTH AND WELLNESS SURVEY (NHWS)

**OBJECTIVES:** Tobacco smoking is one of the principal risk factors for cancer, respiratory disease, and cardiovascular disease. According to research reported by the World Health Organization, 1 in 5 current smoking adults aged 15 years and older smoke in Russia. We aimed to measure the one-third of those who smoked in the past 12 months who had an attempt to quit smoking. This study is aimed to assess co-morbidities, quality of life (QOL), work productivity and resource utilization in Russian urban adults attempting to quit smoking. **METHODS:** Patients’ self-reported data were collected from 2011 National Health and Wellness Survey (NHWS). Survey represented major urban areas in Russia. QOL was measured by the physical component score (PCS) and mental component score (MCS) of the Short Form-12 (SF-12). Loss of work productivity was measured by the Work Productivity and Activity impairment instrument. Resource utilization was measured by health care provider, ambulance request and hospitalization in the past 6 months. **RESULTS:** Of the 10,039 adult respondents, 6,092 (60.6%) had ever smoked cigarettes (38.2% current smokers, 43.5% former smokers, 16.2% smokers trying to quit smoking and 2.1% no smokers in process to quit). Average age of attempters was 39.5 years (SD: 14.9 years). The rate in smoking cessation was 26.6% work productivity loss compared to 22.3% in those who never smoked. All mentioned productivity loss compared to 22.3% in those who never smoked. **CONCLUSIONS:** Individuals attempting to quit group reported 26.6% work productivity loss and 2.1% no smokers— in process to quit. Average age of attempters was 39.5 years (SD: 14.9 years). The rate in smoking cessation was 26.6% work productivity loss compared to 22.3% in those who never smoked. All mentioned productivity loss compared to 22.3% in those who never smoked.