psychostimulants, and received significantly higher doses of psychostimulants, suggesting disparities in AD/HD treatment between boys and girls that may affect quality of care.

THE EFFECTS OF ETHNICITY AND ANTIPSYCHOTIC AGENT ON MEDICATION ADHERENCE IN A MEDICAID POPULATION

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**OBJECTIVES:** Clinicians treating schizophrenia face increasingly diverse populations, with different ethnic groups having different medication adherence patterns. The Texas Medicaid population with schizophrenia includes large numbers of patients from several ethnic groups, having broad use of the prevalent antipsychotic medications within each ethnic group. The purpose of this study was to assess the association between ethnicity and adherence among Texas Medicaid clients with schizophrenia, and to assess whether adherence within or across ethnic groups differed depending on which antipsychotic was used, after controlling for other factors. **METHODS:** Texas Medicaid claims were retrieved for persons, age 21 to 65, diagnosed with schizophrenia or schizoaffective disorder, initiating treatment with olanzapine (N = 1875), risperidone (N = 982), or haloperidol (N = 726) between 1/1997 and 8/1998. For each of the three pairings of these medications, the association between ethnicity and adherence was assessed using multivariate linear regression and days use of the medication in the year following initiation was assessed using multivariate linear regression. Covariates included other patient demographics, region, comorbid health conditions, and prior medication and health care resource use. **RESULTS:** Overall mean adherence was 177 of 365 days (48.5%). African Americans and Mexican Americans were significantly less adherent than Caucasians in the haloperidol versus olanzapine and risperidone versus olanzapine comparisons (p < 0.05 for each comparison). For patients of all ethnicities, olanzapine was associated with 19 more adherent days than haloperidol (p < 0.001 for each pairwise comparison). **CONCLUSIONS:** When other factors were controlled for 1) ethnicity was a significant predictor of adherence following initiation on an antipsychotic medication and 2) patients of all ethnicities were most adherent when taking olanzapine, less adherent when taking risperidone, and least adherent when taking haloperidol.

**MENTAL HEALTH—Quality of Life**

**PMH20**

**IMPROVING THE MEASUREMENT PROPERTIES OF THE QUALITY OF LIFE IN DEPRESSION SCALE**

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**OBJECTIVES:** The Quality of life in Depression Scale (QLDS) is the most widely used measure of quality of life (QoL) in clinical trials and studies of depression. The instrument has been validated in 18 languages. The instrument, which adopts the needs model, is highly sensitive to changes in QoL and is well accepted by respondents. Since its development new statistical models have been introduced into instrument development. The present study was designed to adapt the QLDS using item response theory in order to improve its measurement properties further. **METHODS:** Existing datasets were subjected to Rasch analysis to identify misfitting items and to look for gaps in the range of measurement. As weaknesses were identified at the extremes (very good or very poor QoL) additional interviews were conducted with patients scoring either high or low on the QLDS and new qualitative analyses were made of the 40 original interview transcripts. Potential new items were added to the QLDS and poorly performing ones removed. This version was administered to samples of depressed patients in the UK, US, France and Germany. The data were again subjected to Rasch analysis and a final version identified. Its psychometric properties were then assessed in a second postal survey. **RESULTS:** A 30-item version was identified with little item misfit or differential item functioning in the different countries. This version had excellent psychometric properties including reproducibility and construct validity. The main gain was an increase in the measurement range from 2.5 to 4.3 logits, an increase of 72%. **CONCLUSIONS:** The measurement properties of the QLDS have been improved, ensuring it provides valid scores on a unidimensional QoL scale. The increased measurement range makes the instrument more suitable for use across the full range of depression severity and hence more valid for use in antidepressant maintenance studies.

**MENTAL HEALTH—Healthcare Policy**

**PMH22**

**ADHD HAS A SIGNIFICANT BURDEN UPON THE INDIVIDUAL, FAMILY AND SOCIETY IN EUROPE**

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**OBJECTIVE:** An international literature review assessed the epidemiology, treatment patterns and cost associated