on the Visual Function Questionnaire – Utility Index and subsequent mapping to BCVA. Both costs (2012 Canadian dollars) and outcomes were discounted (5%). A Canadian panel of clinical experts determined the EQ-5D and SF-6D utilities, and the public payer perspective, respectively, for OZURDEX™ versus observation. Results of the one-way and multivariate analysis indicate that the results were robust. Throughout the 1,000 iterations of the Monte Carlo simulation, the CRVO group consistently fell below a willingness-to-pay threshold of $50,000/QALY gained. Although robust, the model was most sensitive to age of entry and the utilities used for both the best-seen eye and worst-seen eye. CONCLUSIONS: Based on a willingness-to-pay threshold of $50,000/QALY gained, OZURDEX™ is a cost-effective treatment for CRVO compared with observation.

SENSORY SYSTEMS DISORDERS – Patient-Reported Outcomes & Patient Preference Studies

PPS13 VALIDATION AND COMPARISON OF THE SF-6D AND EQ-5D IN CHINESE PATIENTS WITH MODERATE TO SEVERE PSORIASIS
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OBJECTIVES: To validate and compare the psychometric properties of two generic preference-based HRQoL instruments, EuroQol 5 domains (EQ-5D) and Short Form 6D (SF-6D) among psoriasis patients in China. METHODS: Validity of the EQ-5D and SF-6D was assessed with the patient’s concept of the instrument, Dermatology Life Quality Index (DLQI). Responsiveness was tested using the effect sizes (ES), relative efficiency (RE) and receiver operating characteristic (ROC) curves. Agreement between EQ-5D and SF-6D was tested using intra-class correlation coefficient (ICC) and Bland-Altman plot. RESULTS: A total of 150 moderate to severe patients were included with 50% female, mean age of 43.87 years and mean disease duration of 5.19 years. The mean utility scores (SD) were 0.64 (0.32) for EQ-5D and 0.72 (0.12) for SF-6D. There were no serious floor effects for EQ-5D and SF-6D but large ceiling effects for EQ-5D existed. Validity was demonstrated by the moderate to strong correlation coefficients (range 0.50-0.71, P < 0.001) for six of the ten hypotheses in both instruments. Both of EQ-5D and SF-6D showed a well discriminant validity (ES > 0.98-1.27, EQ > 0.99-1.26) between groups with different psoriasis specific health status. RE showed that SF-6D (0.60-39.00%) was more efficient than EQ-5D in three domains of DLQI (recognition, relationships and treatment). Conversely, SF-6D (-1.00 – 13.00%) was less efficient than EQ-5D in three domains of DLQI (symptoms and feelings, daily activities and work and studies). The areas under ROC of them all exceeded 0.5 (0.71 – 0.84, P < 0.001). Poor agreement between them was observed with ICC (0.38, P > 0.01) and Bland-Altman plot analysis. CONCLUSIONS: This study provides evidence that EQ-5D and SF-6D are valid and sensitive preference-based HRQoL instruments in Chinese patients with moderate to severe psoriasis. SF-6D may be a more effective tool with lower ceiling effect. Further study is needed to compare other properties, such as reliability and longitudinal response.

PPS14 HEALTH UTILITY AND ITS AFFECTING FACTORS IN PATIENTS WITH PSORIASIS IN CHINA
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OBJECTIVES: To assess health utilities and examine factors affecting health utilities among patients with moderate to severe psoriasis in China. METHODS: Data were obtained from a cross-sectional HRQoL survey of psoriasis patients in 29 tertiary hospitals of 7 cities in China from June to July, 2012. Eligible patients were assessed with moderate to severe psoriasis by physicians and treated with prescriptions during the visit/hospitalization. Degree of moderate and severe was estimated by physicians and treated with prescriptions. Degree of moderate and severe was estimated by physicians and treated with prescriptions. Degree of moderate and severe was estimated by physicians and treated with prescriptions. Conjoint analysis was used to identify all relevant factors contributing to the utility. RESULTS: A total of 150 patients were included with 50% female, mean age of 43.87 years and mean disease duration of 5.19 years. About 22.67% patients reported having at least one comorbidity with significant impairment in their QoL, hence collection of such data is important for new medical products. PRO instruments such as Impact of vision impairment (used in 7 studies) and Low vision quality of life index. The most commonly used instruments were Impact of vision impairment (used in 7 studies) and Low vision quality of life index. The most commonly used instruments were Impact of vision impairment (used in 7 studies) and Low vision quality of life index. Quality of life and visual function questionnaire, Vision core module 1, and Functional independence emerged as the most relevant concept. A draft conceptual framework was developed based on a literature review, expert opinion and patient input. RESULTS: A total of 101 patients participated. Mean age was 49 years (SD = 14), mean duration of disease was 19 years, and 54% were male. Patients averaged 15% of body surface area involved with PsO. Mean Psoriasis Area and Severity Index score was 8.7 (SD = 8.0) and 46% of patients were receiving biologic therapy. The most frequent patient-reported symptoms were flaking/scaling (non-scalp areas) (90%), itching/scraping (88%), rash (75%), flaking/scaling (scalp area) (65%), skin pain (63%), skin bleeding (59%), and redness (58%). Most bothersome symptoms were itching/scraping, flaking/scaling (non-scalp areas), and skin pain. Nearly all patients reported an emotional (98%) and social (95%) life-impact. Other impacts included professional (69%) and educational (23%), and sexual (21%). Positive and negative treatment-related experiences were reported. CONCLUSIONS: Positive and negative treatment-related experiences were reported. This detail description of PsO symptoms and identify important targets for treatment based on the patient perspective. Significant multidimensional impact on patients’ lives. Recording patient interviews and coding the themes, symptoms, and impacts of PsO provide rich material for analysis of patients’ health-related quality of life.

PPS15 UNDERSTANDING THE PSORIASIS PATIENT PERSPECTIVE: USING A CONCEPTUAL FRAMEWORK OF FUNCTIONAL READING INDEPENDENCE IN GEOGRAPHIC ATROPHY
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OBJECTIVES: To develop a conceptual framework of functional reading independence in Geographic Atrophy (GA). GA is a chronic disease with high importance for patient HRQoL. The objective of this study was to review, analyze, and understand trends in the PRO instruments used in patients with Glaucoma. METHODS: A systematic literature search for Glaucoma trials with PROs endpoints was undertaken for the databases PubMed, Embase, Biosis, Google Scholar and Cochrane. Data was collected for the study size, interventions, year, PRO instrument and results for PROs. Analysis was conducted to identify trends in commonly used PRO instruments and categorize results as positive, neutral or negative. RESULTS: Thirty-one studies with a total of 9819 patients were identified. In these studies there were eleven different PRO instruments that were identified as Glaucoma health perception index, Glaucoma quality of life questionnaire (Glau-QoL), Glaucoma visual function index-51 items, National eye institute visual function index-19 items, National eye institute visual function index-51 items, National eye institute visual function index-19 items, Quality of life and visual function questionnaire, Vision core module 1, and Quality of life index. The most commonly used instruments were Impact of vision impairment (used in 7 studies) and Low vision quality of life questionnaire (used in 4 studies). CONCLUSIONS: Patients with glaucoma have significant impact in their Qol, hence collection of such data is important for new medical products. PROs such as Impact of vision impairment and Low vision quality of life questionnaire have been commonly used to generate evidence to show which therapies improve patient Qol.
and items. Feedback on the questionnaire was also obtained from the patient interviewers, clinical experts and a translation expert. The conceptual framework and questionnaire were subsequently revised. RESULTS: The conceptual framework represented a unidimensional construct. Eleven functional reading activities have a direct effect on functional reading independence: 1) reading written print; 2) reading for a check; 3) reading in order to take notes from reading instructions; 4) reading labels; 6) reading to play games; 7) reading to make or receive a telephone call; 8) reading words or numbers on the screen while watching television; 9) reading when using a computer; 10) reading street signs; and 11) reading instructions. For meaningful learning to occur, functional reading activity may be completely independent, or may involve the use of vision aids, behavior changes to accommodate vision problems, and/or receiving assistance from another person. CONCLUSIONS: This is the first conceptual framework specifically representing functional reading independence from the perspective of patients with GA. The conceptual framework may evolve once empirical evidence is available. The questionnaire based on the conceptual framework is currently being tested in a Phase II clinical trial.

OBSERVATIONAL USTEKINUMAB DOSING PARADIGM IN PSORIASIS: EVIDENCE OF STEP-UP AND STEP-DOWN EVENTS

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OBJECTIVES: Usteekinumab is dosed at 45mg or 90mg (patient weight-dependent) in moderate-to-severe plaque psoriasis. The study objective was to assess observed increases (step-up from 45mg to 90mg) or decreases (step-down from 90mg to 45mg) in ustekinumab dosing. METHODS: Truven Health MarketScan Commercial and Medicare Supplemental databases were utilized to evaluate patients with: 1) ustekinumab index medical/pharmacy claim (09/25/2009-10/31/2010); age ≥18 years at index; ≥6 months pre-index continuous enrollment; and/or received ustekinumab as a single, or pre-index code for step-down dosing events and distribution of subsequent doses at each fill (doses 2-4) were assessed based on index dose received. Time to step-up or step-down was reported in days. RESULTS: Of 1,000 psoriasis patients receiving ustekinumab, step-up and step-down dosing events at any time were evident in 3.9% (n=40) and 6.8% (n=68), respectively. Median (means±SD) time to step-up from index dose was 119 (113±76) days. Median (means±SD) time to step-down from index dose was 49 (60±52) days. Of patients with step-up events, 37.4% returned to their original 45mg dose after step-up (mean±66 days). Of patients with step-down events, 39.7% returned to their original 90mg dose after step-down (mean±158 days). Proportion of 45mg use by index 90mg patients spanned 6.1%-7.8% across doses. Proportion of 90mg use by index 45mg patients spanned 1.4%-16.8% across doses. CONCLUSIONS: In this observational study, <10% of psoriasis patients receiving ustekinumab had evidence of step-up/step-down dosing at any time. Over 1/3 of patients with either event returned to initial dose. Mean time to step-up was longer than mean time to step-down from initial dose by approximately 6 weeks. Step-up patients returned to lower initial dosing in a shorter period of time compared to step-down patients, indicating higher dosing. Step-up/step-down dosing should be explored further in the context of weight, effectiveness, and safety.

THE PROFILE OF THE ACTINIC KERATOSIS (AK) PATIENTS IN THE CITY OF SÃO PAULO – PROJECT PILOT

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OBJECTIVES: Actinic keratoses are characterized by dysplastic epidermal lesions that occur in pale-skinned individuals chronically exposed to intense sunlight. This is one of the most commonly treated skin conditions but its prevalence in the Brazilian population is still unknown. The objective of this research is to describe the profile of the patients diagnosed with AK in São Paulo city. METHODS: A two months health survey was performed in the city of São Paulo in which 10 dermatologists registered the profile of the patients diagnosed with actinic keratosis. RESULTS: The dermatologists saw 4961 patients in two months, 5.4% of patients visited other doctors because of a fail which was related to their vision impairment. CONCLUSIONS: Our analyses showed that 38-45% of patients were dissatisfied with their current treatment. Very few patients who required assistance were able to have a caregiver to help them day-to-day. Paid services were also barely utilized.

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