OBJECTIVES: To develop an EQ-5D-3L Value set for Trinidad and Tobago

METHODS: A Choice Experiments Design (CE) design was developed. Patients who were enrolled in the pilot study undertaken in Trinidad and Tobago previously. The design comprised 20 pairs of EQ-5D-3L states. A 5-state Time Trade Off (TTO) exercise was included in the elicitation protocol. The mean TTO values were converted to utility coefficients obtained from a representative sample of 300 respondents completed the warm up tasks, TTO and DCE elicitation exercises. RESULTS: Analysis of the data produce an internally valid model with characteristics similar to the model obtained in the pilot (in terms of the relative levels of importance among the 5 dimensions). CONCLUSIONS: The protocol developed for this study can be easily used in the other small developing health systems of the Caribbean which would allow resource allocation decision making to be based on the preferences of the populations of such countries.

PIH17

HEALTH RELATED QUALITY OF LIFE IN A COMMUNITY DWELLING ELDERLY SAMPLE IN BRAZIL

Monteiro A1, Versa B1, Santos B1, Gomes J2, Furtado S2, Furtado H1, Santos M1
1Instituto de Nacional de Cardiologa, Rio de Janeiro, Brazil, 2Secretaria de Enfme dos Ssaud Eletronicos e la Qualidade de Vida, Rio de Janeiro, Brazil. Universidade Castelo Branco, Rio de Janeiro, Brazil

OBJECTIVES: To explore and characterize Health Related Quality of Life (HRQoL) in a community dwelling elderly sample and to investigate the determinants of HRQoL assessed by EQ-5D-3L.

METHODS: Data was collected from a sample of newly admitted elderly participants of a social program that takes place in Rio de Janeiro, Brazil. This dataset includes data from 149 individuals older than 60 years, interviewed from May 2014 to November 2014. The interview comprised information on sociodemographic characteristics, life style, medical history and general health. The HRQoL was assessed using the EQ-5D-3L. Cognitive impairment was assessed using the Mini Mental State Examination (MMSE) and social support was measured using the MOS Social Support Survey. Participants with cognitive impairment were excluded from this analysis. An exploratory analysis and literature research were used to identify potential HRQoL predictors to be included in the model. The Mann Whitney U test was used to examine the differences between means categories. Ceiling and floor effects, represented by the proportion of participants with the best and worst theoretical scores respectively, were also examined. EQ-5D Index Values were estimated using the weights from the Brazilian VAS. The overall utility mean was 0.76 (SD = 114) and the EQ-VAS was 79.7 (SD = 17.83). While floor effects found for both EQ-5D descriptive system and EQ-VAS were negligible (less than 1% in both measures), the ceiling effects were considerable (12.5% on EQ-VAS and 21.5% on Descriptive System). Men (0.81, SD = 0.09) presented higher HRQoL (Z = 2.581, p = 0.009) than women (0.75, SD = 0.11). Several variables were tested, but only diabetes (β = 0.05, depression (β = 0.09) and cancer (β = 0.08), and cancer (β = 0.08) and cancer (β = 0.08), and cancer (β = 0.08), were integrated the final model [F = 16.35 (p = 0.001), df1 = 4, df2 = 139, adj R2 = 0.304)]. CONCLUSIONS: Chronic diseases were identified as predictors of HRQoL in our sample. These results are consistent with the literature.

PIH18

INTERREGIONAL VALUATION OF PATIENT SATISFACTION WITH PHARMACEUTICAL CARE AS A TOOL FOR INCREASING QUALITY MANAGEMENT IN COMMUNITY PHARMACY AND PATIENTS QUALITY OF LIFE

Minakorova D1, Malovecká J1, Foltan V1, Bielik J2, Psenkova M3
1Comenius University, Bratislava, Slovak Republic, 2Trencin University, Trencin, Slovak Republic, 3Pharmo Ltd, Bratislava, Slovak Republic

OBJECTIVES: New role of pharmacist based on the concept of changing the pharmacist’s focus from drug providing and distributing services to more patient-oriented approaches with positive impact on patient’s quality of life.

METHODS: Interregional valuation of patient satisfaction with pharmaceutical care based on previous extended literature research, on studies with psychometrical analysis that focuses on items from Management of therapy (15), Interpersonal relationship (9) and General satisfaction dimension (4). A 5-point Likert scale (from strongly agree (1) – till strongly disagree (5)) was used to measure the extent patients’ attitudes and expectations with the pharmaceutical care provided in community pharmacies. Descriptive and inferential statistics were used to analyse the data.

RESULTS: Essential reasons for visiting the pharmacy were: patient had a prescription (34%); wanted to buy OTC products (20%); food supplements (7.8%); and medicine (1.2%). The reasons for visiting the pharmacy in western countries were based on previous extended literature research, and patients with chronic diseases. The results were made. Cross-tabulations were generated, charts created; interpretation and implication of the results were made. The study showed that slightly more than half i.e. 58% (702/1201) of the respondents knew and were currently using about 11 family planning methods. The use of vasectomy 4% (34/668) respectively. CONCLUSIONS: Knowledge of family planning methods is a prerequisite for making a decision to start contraceptive use. Most emphasis is placed on women because they have the greatest level of exposure to the risk of pregnancy and most methods of contraception are designed for women. Although the study is a small scale, it points out the need for better family planning methods in future. Similar studies indicate that the above three widely used methods are still the most preferred family planning methods in future among women of reproductive age.

PIH20

KNOWLEDGE AND CONTRACEPTIVE USE AMONG CURRENTLY MARRIED WOMEN AGED 15-49 IN WESTERN KENYA

Mogere DM

Great Lakes University of Kigoma, Kigoma, Tanzania

OBJECTIVES: Knowledge of family planning methods is a prerequisite for making a decision to start contraceptive use. This can also help the couple to delay or avoid unplanned pregnancy. The objective of the study was to establish the knowledge and use of various modern family planning methods among married women in western Kenya. METHODS: A household baseline survey was carried out in two provinces in western Kenya e.g. Nyamira and Western in which 1201 currently married women were interviewed on the type of family planning methods known and currently being used. Data analysis was done using SPSS version 16.0 in which cross-tabulations were generated, charts created; interpretation and implication of the results were made. RESULTS: The study showed that slightly more than half i.e. 58% (702/1201) of the respondents knew and were currently using about 11 family planning methods. The use of vasectomy 4% (34/668) respectively. CONCLUSIONS: Knowledge of family planning methods is a prerequisite for making a decision to start contraceptive use. Most emphasis is placed on women because they have the greatest level of exposure to the risk of pregnancy and most methods of contraception are designed for women. Although the study is a small scale, it points out the need for better family planning methods in future. Similar studies indicate that the above three widely used methods are still the most preferred family planning methods in future among women of reproductive age.

PIH21

CAMBIOS EN LA PERCEPCION DE LA CALIDAD DE VIDA RELACIONADA CON LA SALUD POR DIFERENCIAS EN EL ACCESO Y EL RÉGIMEN DE AFILACIÓN EN BOGOTÁ

Huerano LM1, Romero M2
1Salutia Foundation - Research center in economy, management and health technologies, Bogota, Colombia, 2Salutia Foundation, Bogotá, Colombia

OBJECTIVOS: Establecer las diferencias en la percepción de calidad de vida relacionada con la salud por acceso y régimen de afilación en población usuaria de los servicios de salud en la ciudad de Bogotá. METODOLOGÍA: Se desarrolló un estudio transversal utilizando una encuesta que incluía los datos generales del paciente, el instrumento EQ-5DLS, la escala visual analoga y preguntas relacionadas con la percepción de calidad de vida en los nuevos modelos de financiamiento. La muestra se obtuvo mediante el análisis de diferencias de medias, teniendo en cuenta estudios previos colombianos que usaron EQ-5DLS. La población objetivo fue captada en centros de atención de salud de cada régimen. Fueron analizadas las diferencias entre las medidas cualitativas de calidad de vida y las características de acceso. RESULTADOS: Se recolectó un total de 154 encuestas, 77 en cada régimen. La mediana promedio de calidad de vida para los afiliados al sistema conLeast Capacidad de capital media visual analoga (1112) contra EQ-5DLS frente a 79,5 y 11122 en los afiliados al sistema subsidiado, respectivamente. Al relacionar con el nivel de acceso la mediana de la EVA cambio de acuerdo al nivel de acceso (p < 0,05) contribuyendo al cambio. El estudio no presenta cambios. El análisis univariado mostró que las variables: estar enfermo, tener afiliación, estar discapacitado son de mayor impacto en las variaciones de la percepción de calidad de vida. El análisis multivariado mostró que las variables: estar enfermo, tener afiliación, estar discapacitado presentan cambios. El análisis multivariado mostró que las variables: estar enfermo, tener afiliación, estar discapacitado son de mayor impacto en las variaciones de la percepción de calidad de vida. El análisis multivariado mostró que las variables: estar enfermo, tener afiliación, estar discapacitado presentan cambios.

REFERENCE:
Comenius University, Bratislava, Slovak Republic, 2Trencin University, Trencin, Slovak Republic, 3Pharmo Ltd, Bratislava, Slovak Republic

OBJECTIVES: The pharmacists’ role in the health care systems has grown and changed in the last years to encompass areas beyond the dispensing function. These new role is based on the concept of changing the pharmacist’s focus from drugs to patient. The objective of the study was to establish the knowledge and use of various modern family planning methods among married women in western Kenya. METHODS: A household baseline survey was carried out in two provinces in western Kenya e.g. Nyamira and Western in which 1201 currently married women were interviewed on the type of family planning methods known and currently being used. Data analysis was done using SPSS version 16.0 in which cross-tabulations were generated, charts created; interpretation and implication of the results were made. RESULTS: The study showed that slightly more than half i.e. 58% (702/1201) of the respondents knew and were currently using about 11 family planning methods. The use of vasectomy 4% (34/668) respectively.

CONCLUSIONS: Knowledge of family planning methods is a prerequisite for making a decision to start contraceptive use. Most emphasis is placed on women because they have the greatest level of exposure to the risk of pregnancy and most methods of contraception are designed for women. Although the study is a small scale, it points out the need for better family planning methods in future. Similar studies indicate that the above three widely used methods are still the most preferred family planning methods in future among women of reproductive age.