components of the Wilson Cleary Model. METHODS: 212 persons with a variety of advanced cancer from the McGill University Health Center (MUHC) were evaluated using nine patient-reported outcomes and seven direct measures over a course of 18 months. As an attempt to minimize measurement error, Rasch measurement was used to model symptoms, function, general health perceptions (GHP), and overall quality of life (QOL) latent constructs. Additionally, biological variables were measured. The latent QOL construct was then modeled over time using “group-based modeling”. Probability of group membership was finally predicted using the different statistical, symptoms, function, and GHP constructs of the Wilson-Cleary model at study entry, which coincided with the time of cancer diagnosis. RESULTS: The Rasch QOL model over time resulted in 5 distinct trajectories: a linear increasing trajectory representing 26% of the sample, two flat medium and high trajectories representing 26% and 17%, respectively, a quadratic increasing trajectory representing 25% of the sample, and a linear decreasing trajectory representing 5% of the sample. The latent constructs from the time of diagnosis that statistically significantly predicted group membership were age, sex, cancer type, recall weight loss, CRF, social support, emotional status, and fatigue. CONCLUSIONS: Using Rasch group-based trajectory modeling, and linear regression, we were able to discriminate between relevant QOL subgroups of patients. Most importantly, we were able to identify subgroups that were not detected using traditional methods, enabling us to make preliminary conclusions about the most important contributors to QOL over time, and emphasize the importance in assessing these constructs in people with cancer.

PMR68
BIAS WHEN ADJUSTING FOR SURROGATES OF CONFOUNDERS
Karen H, Chia VM
Amen, Inc, Thousand Oaks, CA, USA
OBJECTIVES: High-dimensional propensity score (HDPS) methods have been used in health studies in an attempt to control confounding by a large number of covariates that may be proxies for unobserved factors. We have previously shown that PS models are biased with non-linear link functions. We conducted a simulation study to estimate the biases of covariates that are children, it brings into focus the maintenance of a healthy body mass index (BMI) in mitigating depression.

PMR71
ANXIETY AND COMORBID OBESITY AND HYPERTENSION IN UNITED STATES
Tevez J1, Shayta FT2
1University of Maryland, Baltimore, MD, USA, 2University of Maryland School of Pharmacy, Baltimore, MD, USA
OBJECTIVES: To investigate the association between anxiety and comorbid obesity and hypertension in US children over a 8-year period using data from the National Health and Nutrition Examination Survey among those with depression after controlling for other factors. This finding has important implications for depression management in children. It brings into focus the maintenance of a healthy body mass index (BMI) in mitigating depression.

PRM72
THE IMPACT OF TWO DIFFERENT CASE DEFINITIONS OF MAJOR CONGENITAL MALFORMATIONS IDENTIFIED FROM QUEBEC (CANADA) ADMINISTRATIVE DATABASES ON THEIR ASSOCIATION WITH ASTHMA CONTROLLER MEDICATIONS TAKEN DURING PREGNANCY
Thisson S, Blais I
University of Montreal, QC, Canada
OBJECTIVES: Accurate identification of major malformations cases from administrative databases is crucial for perinatal epidemiology. In Quebec, most of major malformations are detected in hospital, however administrative databases capture diagnoses data from both hospitals and other medical facilities. We aimed to compare the prevalence of major congenital malformations identified from administrative databases diagnostic codes (ICD-9 and ICD-10) with 2 definitions: diagnoses made in hospital only vs. diagnoses made in hospital and other medical facilities. We evaluated the impact of each definition to quantify the association between maternal use of asthma controller medications and the prevalence of major malformations at birth and during the first year of life. METHODS: A cohort of pregnancies from asthmatic women between 1990 and 2010 was formed through administrative databases diagnostic codes in the case definition is unknown and should be the objective of future research.

PMR73
SURVIVAL MODELING FOR THE ESTIMATION OF TRANSITION PROBABILITIES IN MODEL-BASED ECONOMIC EVALUATIONS IN THE ABSENCE OF INDIVIDUAL PATIENT DATA: A TUTORIAL
Dahlof V1, Adlinis G1, Montero A2
1Florida A&M University, Tallahassee, FL, USA, 2Cleveland Clinic, Cleveland, OH, USA
OBJECTIVES: Survival modeling techniques are increasingly being used as part of decision models informing health economic evaluations. However, when data on survival outcomes are not available, it is imperative for researchers to know about the steps in selecting and using the most suitable ones. This paper is aimed at proposing a tutorial for the application of appropriate survival modeling techniques to estimate transition probabilities, for use in model-based economic evaluations, in the absence of individual patient data. The use of the proposed tutorial is illustrated based on the final progression-free survival (PFS) analysis of BOLERO-2 trial in metastatic breast cancer (mBC). METHODS: An algorithm was adopted from Geyut and colleagues, and was then run in the statistical package R to reconstruct individual patient data (IPD), based on the final