years. If 25 latanoprost patients were treated instead with travoprost, one new VFD would be avoided over 5 years. CONCLUSION: According to our model, the better control of both mean IOP and IOP variance by travoprost should better preserve patient vision. Prospective data collection should be performed to confirm our findings.

**MEDICAL OUTCOME OF GLAUCOMA TREATMENT IN FRANCE**

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OBJECTIVE: To estimate the medical outcome of glaucoma/ocular hypertension (OH) treatment in France according to usual practice. METHODS: Ophthalmologists selected at random had to include 4 consecutive patients older than 18 seen in consultation during a week, with glaucoma and 2 with OH. Socio-demographics, general and eye comorbidities, glaucoma risk factors, visual acuity (VA), papilla, and visual fields were collected. A visual field defect (VFD) was defined as a deterioration of papilla exam and visual field since diagnosis. A treatment switch was defined as adding a new drug or changing any of the current treatments. Time to failure of a treatment regimen, broken out by the number of treatment switches, was compared using the likelihood ratio applied to survival curves. RESULTS: One hundred and twenty seven of the 337 patients included by the 84 ophthalmologists had their full treatment documented from diagnosis. Twelve patients developed a new VFD after diagnosis (average follow-up: 2.5 years). No statistically significant difference on the known confounding factors of VFD was found between patients with and without VFD. Patients with VFD had a lower VA (−1.23; P < 0.08). At 3 years, 2.7% of the patients with no treatment switch had a VFD, compared to 22.6% with one treatment switch and 46.3% with >2 treatment switches. The difference between the three groups was statistically significant (P < 0.01). CONCLUSION: Patients with fewer treatment switches have less VFD. Under isotropic hypotheses, effective treatment strategies should be used first line in order to avoid visual field defect and therefore protect long-term patient vision.

**PSORIASIS AND DEPRESSIVE SYMPTOMATOLOGY**

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Skin diseases have a strong impact on physical and mental well-being of the patient. These diseases can appear at any age and, generally speaking, they have a greater repercussions on the quality of life of women. Dermatological conditions often alter the patient’s own body image, which can cause psychological problems such as depression, anxiety and even suicide. OBJECTIVE: To evaluate the depressive symptomatology (DS) of patients with psoriasis. The CES-D (Center for Epidemiologic Studies—Depression scale), a short self-report scale composed of 20 items, is a questionnaire designed to measure DS in the general population. The CES-D is widely used in epidemiological surveys on large populations. METHOD: One thousand five hundred CES-D questionnaires were sent via a psoriasis patients support group: the APLCP. The questionnaires once completed were sent back trough a prepaid envelope. RESULTS: Six hundred thirty-seven questionnaires were returned: response rate: 42.5%. The frequency of DS in patients (54.3% versus 42.4%)—no answers (1.5%). Current episode of psoriasis is linked with higher frequency of DS (54.3% versus 42.4%). Psoriasis had a greater impact on patients with episode: CES-D score: 22.8 (sd:12.74) than patients without present episode CES-D score : 19.22 (sd:11.96). This difference was significant (p < 0.0003). CONCLUSION: Psoriasis patients have an increased risk of DS compared to the general population (48% versus 19%). A recent episode of psoriasis results in a more important frequency of DS in patients (54.3% versus 42.4%). Appropriate disease management and any treatment that could reduce flare-up frequency would improve patients’ quality of life and help them face their psoriasis.

**VISION RELATED QUALITY OF LIFE OF FRENCH PATIENTS IS AFFECTED BY TOPICAL GLAUCOMA TREATMENT SIDE EFFECTS**

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OBJECTIVES: To evaluate the consequences of local anti-glaucoma drug side effects on the vision-related quality of life of French patients. METHODS: A mail survey was sent to 20,000 homes belonging to the Sofres panel (representative of the French population according to the quota method) asking whether one member of the family was treated with one of the available topical anti-glaucoma drugs. A computer-assisted telephone interviewing system was used to confirm self-reported glaucoma treatment, to describe the disease and its treat-