PRS14
LEVEL OF ASTHMA CONTROL AND HEALTH CARE UTILIZATION IN LATIN AMERICA

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OBJECTIVES: Data on the impact of asthma in Latin American countries is limited. The purpose of this study was to examine the association between partly- and uncontrolled asthma and asthma-related health care outcomes among patients residing in Argentina, Brazil, Mexico, Venezuela and the Common wealth of Puerto Rico. **METHODS:** Adults and parents of adolescents (12-17 years) with physician diagnosed asthma and asthma medication use or asthma attacks in the past year were surveyed as part of the 2011 Latin America Asthma Insights and Management (AIM) survey. Using Global Initiative for Asthma (GINA) guidelines as a reference, respondents were categorized into three levels of asthma control: well-controlled, partly- controlled, and uncontrolled. Chi-square tests and adjusted logistic regression were used to determine odds ratios (ORs) to assess the relation of degree of asthma control with utilization of asthma medications, health care outcomes, and productivity. **RESULTS:** Data was available for 2169 completed surveys. Overall, 7% of the patients surveyed had asthma that was classified as well-controlled, with the highest proportion in Mexico (9.4%) and the lowest in Venezuela (3.0%). Patients whose asthma was not well-controlled were significantly more likely to report use of asthma medications (ORs ranging from 1.5-42) and to have had emergency health care visits or hospitalizations for their asthma in the previous year (ORs ranging from 2.1-5.9). Respondents with uncontrolled asthma also reported significant decreases in productivity due to asthma compared to patients with well-controlled asthma. **CONCLUSIONS:** Patients who did not have well-controlled asthma had greater utilization rates of asthma medications and emergency health care services compared to patients whose asthma was well-controlled. These associations strongly suggest that emphasis on improving asthma control could have substantial effects on patient productivity and utilization of health care resources.

PRS15
CARACTERÍSTICAS SOCIOECONÓMICAS DE PACIENTES CON ENFERMEDAD VASCULAR CEREBRAL Y ANTECEDENTES DE TABAQUISMO TRATADOS EN UN HOSPITAL DE TERCER NIVEL DE MÉXICO

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OBJETIVOS: Determinar las variables socioeconómicas asociadas a pacientes con enfermedad vascular cerebral (EVC) y antecedentes de tabaquismo, tratados en un centro neurológico de tercer nivel en México. **METODOLOGÍAS:** Es un estudio cuantitativo, descriptivo, transversal y retrospectivo. Los pacientes debían tener edades ≥ 35 años, antecedentes de tabaquismo y diagnóstico de EVC; clasificados por el sistema CIE-10 (I60-I69). Se revisaron 174 expedientes del 2011. Se utilizó el análisis de componentes principales para estimar los pesos de las variables socioeconómicas. La adecuación del modelo se realizó mediante la medida de Kaiser-Meyer-Oklin (KMO), la prueba de Bartlett y la consistencia interna mediante el alpha de Crombach (α). **RESULTADOS:** De los 174 pacientes 78(45%) presentaron antecedentes de tabaquismo y de estos 49(63%) fueron hombres, con 58±14 (media, DE) años de edad y 9.4±5.3 de escolaridad, nivel socioeconómico de 2.3±1.1, 71(91%) habita en departamentos populares y 37(47%) se dedicaron al hogar o fueron trabajadores no calificados. Se obtuvo un α =0.80, KMO= 0.78 y Bartlett (p=0.000). Dos componentes explicaron 58.3% de la varianza total. El primero; (42.02%), se integró por las variables servicio intra-domiciliario (Ponderación;0.763), estatus socioeconómico (0.749), escolaridad (0.748), zona de ubicación (0.673), material de construcción (0.707), ubicación de la vivienda (0.673) y ocupación (0.437). el segundo; (16.24%), con el tipo de vivienda (0.564) y número de habitaciones (0.460). **CONCLUSIONES:** Los pacientes atendidos por EVC se caracterizaron por niveles bajos de escolaridad y clasificación socioeconómica, ocupaciones poco remunerables y edad avanzada; que los hace vulnerables a la enfermedad.

SYSTEMIC DISORDERS/CONDITIONS – Clinical Outcomes Studies

PSY1
AGRANULOCYTOSIS DETECTION OUTCOME BY CLOZAPINE TREATMENT (ADOC STUDY) IN PSYCHIATRY: A COST-EFFECTIVENESS STUDY

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OBJECTIVES: White Blood Cell (WBC) monitoring in schizophrenic patients treated by Clozapine aims to prevent agranulocytosis. We assess the cost-effectiveness of WBC monitoring strategies based on three national regulations and an additional weekly short-run monitoring compared to the absence of monitoring. **METHODS:** A decision analytic model was built to perform a cost-utility analysis comparing distinct monitoring strategies from a health care perspective with a 3-year time horizon. Clinical and resources used parameters were based on national Clozapine patients' registries, cohorts, and pharmacovigilance data; health-related quality of life and mortality estimates were derived from literature reviews. Robustness of results was challenged with one-way and probabilistic sensitivity analyses. **RESULTS:** Compared to the absence of monitoring, the number needed to treat of all strategies to avoid one death was 5,000. The gains in survival time adjusted on quality of life were less than 1 day, resulting in prohibitive incremental cost-effectiveness ratios (ICER) of at least 1 million USD per QALY gained,. The ICER increased with higher frequency and longer monitoring duration. The results remain robust in the one-way sensibility analyses and the probabilistic sensitivity analysis indicating that the absence of monitoring strategy has the highest probability of cost-effectiveness **CONCLUSIONS:** Long-run WBC monitoring based on current national detection guidelines is not cost-effective, even by unrealistically high agranulocytosis prevalence. New guidelines are needed to improve WBC monitoring in schizophrenic patients receiving Clozapine.

PSY2
OSTEOTOMIA DE ACORTAMIENTO RADIAL EN LA ENFERMEDAD DE KIENBOCK (SEGUIMIENTO DE 5 AÑOS)

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OBJETIVOS: evaluar los resultados clinicos y funcionales (grado de satisfacción) de paciente con enfermedad de kienbock ttratados con osteotomia de acortamiento radial. **METODOLOGÍAS:** estudio realizado en la umae de traumatologia y ortopedia lomas verdes del imss, en el servicio de cirugia de mano, en un periodo comprendido entre 2000 al 2003, con seguimiento de 5 años.estudio retrospectivo, observacional, transversal. se estudiaron ´18 pacientes de ambos sexos con diagnostico de enfermedad de kienbock utilizando la clasificacion de litchman, evaluados con las escala de wrist mayo score y QDash. pba estadistica de wiscolson **RESULTADOS:** se obtuvieron 18 paciente 9 mujeres y 9 hombres, el 84% obreros 16% al hogar, de acuerdo al resultados de la escla funcional wrist mayo score fueron 56% buenos, 33% excelentes, 5.5% malo, 5% regulares, con 25 puntos de grado de satifaccion de acuerdo al QDash. un paciente fue reintervenido 2 años posteriores al cual se le realizo una artrodesis delas cuatro esquinas. **CONCLUSIONES:** la evaluacion clinica y funcional, sugiere una eficacia aceptable de la osteotomia de acortamiento radial y provee datos alentadorespara continuar con este tipo de tratamiento.

PSY3
THE RELATIONSHIP BETWEEN SPECIFIC ANNUAL BLEED RATES AND HEALTH OUTCOMES AMONG CHILDREN WITH SEVERE HEMOPHILIA A IN LATIN AMERICA

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OBJECTIVES: Recurrent bleeding among severe hemophilia A children can lead to disability and lower health-related quality of life (HRQOL). Little is known about how many bleeds can be endured before patients report an impact on health outcomes. The objective was to assess health outcomes of pediatric patients reporting a zero annual bleed rate (ABR) to identify the impact of higher ABRs on outcomes. **METHODS:** This cross-sectional survey of parents of severe hemophilia A patients aged 2-17 was conducted in Argentina, Chile, Colombia, Mexico and Panama. Eligible, consenting patients completed a questionnaire: from October-November 2009 (Argentina), June-August 2011 (Chile, Colombia, Mexico) and September-October 2012 (Panama). HRQOL was measured by the Pediatric Quality of Life Inventory (PedsQL). ABR, target joints and school days missed were also assessed. **RESULTS:** A total of 211 parents of severe hemophilia A children completed the survey. Compared to patients with a 0 ABR who reported a mean PedsQL Total score of 76.6, patients with ABR categories of: 3-4, 5-10, 11-20, 21-30, 31-50, 51 or more showed significantly worse mean PedsQL Total scores of: 66.4, 63.5, 67.4, 62.5, 62.4 and 59.9 respectively (all p<0.05). Similarly, compared to patients with 0 ABR who reported a mean number of target joints of 0.69, patients with higher ABR categories showed significantly higher mean target joints: 1.49, 2.57, 3.42, 3.47, 3.74, 4.67 (all p<.05). Differences in missed days from school showed the same significant trend when comparing 0 ABR to ABR categories of 3-4 and beyond. There were no significant differences between patients with zero compared to 1-2 ABR on these health outcomes. **CONCLUSIONS:** This analysis suggests that even 3-4 bleeds/year may have a negative impact on a patient's joint health, missed school days and HRQOL. Efforts to maintain a 0 ABR among pediatric patients with severe hemophilia A may help ensure optimal outcomes.

PSY4
EFFICACY AND SAFETY OF BELIMUMAB FOR THE TREATMENT OF SYSTEMIC LUPUS ERYTHEMATOSUS

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OBJECTIVES: To evaluate the efficacy, safety and tolerability of 1 and 10 mg/kg belimumab, a biologic drug, for the treatment of Systemic Lupus Erythematosus (SLE) through a meta-analysis, comparing these treatments with placebo. **METHODS:** A systematic review and meta-analysis of randomized, placebo-controlled trials of belimumab was conducted. Data were collected from several databases until August 2012. Efficacy outcomes included the SELENA-SLEDAI score (Safety of Estrogens in Lupus Erythematosus National Assessment version of the SLE Disease Activity Index), SRI (Systemic Lupus Erythematosus Responder Index), normalization of low C3 (<90 mg/kg), and anti-dsDNA positive to negative. Data on safety included any adverse events, serious adverse events, severe adverse events, death, malignancy, infections, and infusion reactions. We also evaluated withdrawals from treatment due to lack of efficacy or adverse events. **RESULTS:** Fours studies were included in this study. Anti-dsDNA positive to negative was the most significant efficacy outcome in our meta-analysis for both of the evaluated concentrations. No significant differences in the safety data were observed between the belimumab (1 and 10 mg/kg) and placebo groups. Tolerability results revealed no significant differences in withdrawals due to lack of efficacy and adverse events between the belimumab and placebo groups. **CONCLUSIONS:** Belimumab exhibited good efficacy results, especially at 10 mg/kg, a good safety profile, and adequate tolerability, which indicates that this biologic drug is a promising therapy