PM24
EXPLORING THE INTERRELATIONSHIP BETWEEN UNINTENTIONAL AND INTENTIONAL NONADHERENCE AMONG 24,071 ADULTS WITH CHRONIC DISEASE
Gadkari A, McHorney C
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OBJECTIVES: The purpose of this study was to explore the interrelationship between important and unintentional non-adherence via 4–6 patients’ medication beliefs and scores. We conducted a cross-sectional case-control study of 255 patients with chronic disease. The study group consisted of 126 patients who were taking medication and who had no missed appointments. The control group consisted of 129 patients who were taking medication and who had no missed appointments. Overall, mean MPR for the test group was found to be significantly higher (0.48 vs 0.37) as compared to the control group (p<0.05). Additionally, across all the Top 10 medication classes, the test group patients’ mean MPR was significantly higher than that of control group patients.

PM25
PSYCHOMETRIC COMPATIBILITY OF SINGLE ITEM AND GRID FORM ADMINISTRATION OF THE SF-36V2™ HEALTH SURVEY
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OBJECTIVES: Over the past two decades use of the traditional paper-and-pencil survey has waned as options for electronic data collection have been shown to be rigorous and more cost-effective. Although research supports equivalence of paper and electronic data collection has waned as options for electronic data collection have been shown to be rigorous and more cost-effective. Although research supports equivalence of paper and electronic data collection have been shown to be rigorous and more cost-effective. Although research supports equivalence of paper and
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OBJECTIVES: To comprehensively search for SF-12 utility scorings and for EQ-5d scorings that can be applied to SF-12 data converted to EQ-5d responses using Gray's (2006) algorithm. To apply quality/dominance criteria to the identified scorings, apply the scorings of good quality to 3 large US data sets including the A512

PM26
IMPACT OF A WEB PORTAL TOOL ON DRIVING PATIENT ADHERENCE
Yao J, Khanderwal N, Korchek R, Duncan I
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OBJECTIVES: To determine the value of a web portal by quantifying the differences in medication adherence between web-users and non-web-users. Patients who were enrolled in similar health plans but never used the web portal to fill their prescriptions comprised the control group. All eligible patients included in this analysis were continuously enrolled during the study period. Differences in medication possession ratio (MPR), defined as the sum of days that patient possessed any maintenance medication divided by the total number of days in the follow-up period, was calculated during the observation period and compared using a paired t-test. Additionally, MPRs for the Top 10 therapeutic medication classes were computed and compared across test and control group. RESULTS: A total of 2,333,635 eligible patients were included in the study. Among them 53,018 patients met the criteria and the test group and accounting for 80.6% of the sample group. Overall mean MPR for the test group was found to be significantly higher (0.48 vs 0.37) as compared to the control group (p<0.05). Additionally, across all the Top 10 medication classes, the test group patients’ mean MPR was significantly higher than that of control group patients. Patients, who filled their prescriptions via the web portal, have higher adherence rates as compared to those who do not choose this channel to fill their scripts. Further studies aimed at evaluating key drivers for the differential adherence rate are required to gain additional insights about the importance of web-portal as a tool for refilling prescriptions.

PRM27
VALIDATION OF THE SF-36V2™ HEALTH SURVEY: SCORINGS TO 3 LARGE DATA SETS
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Pacific Institute for Research & Evaluation, Columbia, MD, USA, 2Pacific Institute for Research & Evaluation, Neurulie, WA, USA
OBJECTIVES: To determine the value of a web portal by quantifying the differences in medication adherence between web-users and non-web-users. Patients who were enrolled in similar health plans but never used the web portal to fill their prescriptions comprised the control group. All eligible patients included in this analysis were continuously enrolled during the study period. Differences in medication possession ratio (MPR), defined as the sum of days that patient possessed any maintenance medication divided by the total number of days in the follow-up period, was calculated during the observation period and compared using a paired t-test. Additionally, MPRs for the Top 10 therapeutic medication classes were computed and compared across test and control group. RESULTS: A total of 2,333,635 eligible patients were included in the study. Among them 53,018 patients met the criteria and the test group and accounting for 80.6% of the sample group. Overall mean MPR for the test group was found to be significantly higher (0.48 vs 0.37) as compared to the control group (p<0.05). Additionally, across all the Top 10 medication classes, the test group patients’ mean MPR was significantly higher than that of control group patients.

PM28
CREATION OF A NEW PSORIASIS QUALITY OF LIFE MEASURE FROM FIVE PREEXISTENT INSTRUMENTS USING RASCH ANALYSIS: THE CALIPOPS QUESTIONNAIRE
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OBJECTIVES: To create a new instrument to evaluate quality of life (Qol) in patients with psoriasis, from five preexistent instruments, using Rasch analysis. METHODS: A Rasch analysis was performed on five Qol instruments, in a group of 936 patients with psoriasis, recruited in a dermatological hospital. Two instruments were dermatology-specific [Skindex-29 and Dermatology Life Quality Index (DLQI)], and three were psoriasis-specific [Psoriasis Disability Index (PDI), Psoriasis Life Stress Inventory (PLSI), and Impact of Psoriasis questionnaire (IPSO)]. The total number of items was 85. The number of categories was reduced to three in each instrument on the basis of threshold probability curves. Having identified threshold and item parameters for each scale separately, items from all five scales were analyzed together. Items were eliminated on the basis of poor fit to the model, dependencies amongst items, item location and qualitative meaning of the items, with the overall goals of obtaining a uniform and wide spread of the items as possible, and a hierarchy among the different items. RESULTS: We obtained a final questionnaire of 30 items: 4 symptom, 9 emotion, 10 functioning, and 7 social items. Fifteen out of 29 items came from the Skindex-29, 8 from the DLQI, 3 from the PDI, 2 from the PLSI, and 3 from the IPSO. The fit of these items to the Rasch model was satisfactory. The final Person Separation Index (PSI) was 0.916. CONCLUSIONS: The advantages of this new instrument are that data for it fit the Rasch model, and that it summarizes information from five questionnaires (i.e., 85 items) with just 30 items. Moreover, the 30-item questionnaire is working better than the five instruments together, as the properties we analyzed show. The new instrument will be validated on a new sample of 300 patients with psoriasis.

PM29
METHODOLOGICAL DIFFERENCES IN EQ-5D SCORING SYSTEMS: A SYSTEMATIC REVIEW AND ANALYSIS
Perampaladus K, Doble BM, Xie Y
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OBJECTIVES: The EQ-5D is one of the most widely used instruments to estimate utility values. The scoring system of the EQ-5D were developed from valuation studies, which estimate a scoring function for all EQ-5D health states based on the general population’s preference for a subset of health states. Due to the wide