yet been fully met in Belgium. Despite the success of the policy, adjustments are desirable, especially with respect to the broad definition of cheap medicines. Given the fact that all groups of physicians reached their quota quite easily, together with the increased possibility of prescribing cheap medicines due to the entrance of new, generic medicines, the government decided to raise the minimum criteria in 2011.

PHP81 FUNDING SOURCES ANALYSIS RESULTS (REGIONAL AND FEDERAL LEVELS) OF PHARMACEUTICAL MARKETS PER REGIONS OF RUSSIAN FEDERATION

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OBJECTIVES: To analyze state funding sources of drug provision all over RF for the period of 2009-2010. METHODS: Different sources of drug funds were summed up during 2009-2010. Financial data were taken from the open sources including auctions of the federal and regional level, orders of the Ministry of Public Health and Social Development, analysis of regional programs of the drug provision and etc. RESULTS: Interactive map of the RF was developed due to this analysis of the collected data, it shows information on each region of the RF, the number of privilegues people, population of the region, sum of the budget by the ONLS (reimbursement program), the sum of the budget according to the regional reimbursement, sum of the hospital budgets, sum of the special programs of the region (if such programs approved in the region), sum of the budget by the program “7 nosologies” (special reimbursement program), with the detailed separation of the budget according to the nosologies. Such map clearly demonstrates difference in the funding system between regions. The ranges of color distinction by regions were put into the map for more convenient usage, it allows visually demonstrate difference in funding in the terms of price with the RF. Several programs where data was validated, this process showed complete conformity of the existing data with the official budgets of the regions. CONCLUSIONS: Nowadays this research represents unique product in acceptance of administrative decisions for the administration of health sector of the RF. Also for the further improvement of the given analytical system it is necessary to adjust the collecting of the corresponding data for 2011 and to analyze the budget of regions on the Federal Health Modernization Program 2011-2012.

PHP82 A STUDY EXPLORING THE GENERAL PUBLIC PERCEPTIONS TOWARDS MEDICINES

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OBJECTIVES: General public perceptions will affect on their behavior towards medicines. Therefore, this study aims to evaluate the general public perceptions towards medicines in the state of Penang Malaysia. METHODS: A cross sectional study using convenience sampling technique was used. Appropriate descriptive and inferential statistics were used to find the differences among the respondents. All data were analyzed at alpha value of 0.05. RESULTS: Seven hundred respondents were successfully responded to the survey. More than one third of the respondents 37% stated that they understand what is meant by conventional medicines and less than 1% 3% of the respondents 3% stated that they understand traditional medicines and only1% 3% understand what is meant by generic medicines. On the other hand, 36% see doctor once they have minor illness and 30% prefer to go to OTC drugs from the community pharmacy. Furthermore, 62% believe that more expensive drugs are of better quality, and only 50% believe that advertising affect on their perceived quality of medicines as well as the country of the manufacturer affects on their selection of the drugs. Previous experience, physician’s recommendations, pharmacist’s recommendations, friend’s recommendations, cost of the medicine and medical insurance coverage were the main factors that affect on their perceptions. CONCLUSIONS: General public in Penang are very concerned about the medicine chosen. General public education on various types of medicines is important to correct misconceptions and give them the knowledge that they need to make an informed decision. Hence, physicians, pharmacists and other health care providers play vital roles in educating the general public about medicines.

PHP83 THE ECONOMIC BURDEN OF DISEASE RELATED MALNUTRITION IN EUROPE

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OBJECTIVES: Disease related malnutrition (DRM) is a frequent but often unrecognized problem, even in the developed world. The objective of this study was to estimate the burden of disease related malnutrition (BoDRM) in Europe. METHODS: An Expert Panel was assembled to estimate direct and indirect health care costs for the DRM burden (including increased mortality and reduced quality of life) due to DRM. The monetary value of the health burden was calculated by multiplying the QALY loss with explicit or implicit (2x GDP/capita) cost effectiveness thresholds in each country. Collection of input variables involved a wide spectrum of current data sources: international databases, PubMed, congress abstracts, references from published papers. Ten primary diseases were incorporated into the model: stroke, breast cancer, COPD, dementia, depression, colorectal cancer, musculoskeletal disorders, head and neck cancer, coronary heart disease, chronic pancreatitis. RESULTS: For the 835 million European citizens, the direct financial BoDRM is over 31 billion EUR annually. The estimated annual health burden is approximately 5.7 million life years or 9.1 million QALYS. The total monetary value of the health and financial BoDRM is 306 billion EUR. The burden in chronic diseases is greater than in acute diseases, and is also greater than the financial burden. In acute diseases, the financial burden is greater than the health burden.

CONCLUSIONS: In Europe, DRM is a considerable health and financial burden and represents a significant contribution to the total burden of disease, estimated by WHO to be over 5 million DALYs. Therefore, there is a need to improve nutritional care in all aspects of patient management. The availability of scientific data on DRM is limited, especially regarding the relative mortality risk and quality of life impact. Policy makers should support programmes to extend the clinical and economic evidence base for nutritional care.