allowances and health care services) is covered by the state budget. Of the mean annual cost is incurred by families, while 53% (including disability economic crisis and austerity.

PIH9

€9,630. The average cost of originator combination and trade name dominated dispensing. Generics were on average 69 years). Only 9.92% of products were linked to ICD-10 codes. Of these, diseases of products). Most products were tablets, followed by suspensions (2.85%). The combination of amoxicillin with clavulanic acid (co-amoxiclav) is pre-prescribed for a wide range of bacterial infections. It is available commercially in various fixed-dose combinations. The primary aim was to analyse the dispensing of a co-amoxiclav product, in the context of Randomized Controlled Trials on various fixed-dose combinations. METHODS: A retrospective drug utilisation study was conducted on a South African dispensing database for 2013. First, patients 60 years old and older were ana-lysed. RESULTS: A total of 51 951 co-amoxiclav products were dispensed to 37 949 elderly patients at a cost of R6 548 743.70. Patients were dispensed on average 7.3 co-amoxiclav combination products during the year. The average age of the respondents was 69.27 (SD = 7.74) years. More products were costed to male patients (56.47% of products). Most products were tablets, followed by suspensions (2.85%). The average cost per product was R126.60 (SD = 851.11). The average cost of originator products was R166.02 compared to R107.86 for generic equivalents. Prescribing peaked in the winter months (May to August; 39.09% of products). Ten different dosage strengths and formulations were dispensed. The combination of 125 mg clavulanic acid and 875 mg amoxicillin in tablet form was the most frequently dispensed (59.94% of all products), followed by 125 mg clavulanic acid and 500 mg amoxicillin (14.70% of all products). One trade name product accounted for 31.29% of all co-amoxiclav products dispensed. The 62.5 mg clavulanic acid and 250 mg amoxicillin per 5 ml suspension was the most frequently suspended suspension. Interestingly, most suspensions (81.24%) were dispensed to older patients (60 to 69 years). Only 9.92% of products were linked to ICD-10 codes. Of these, diseases of the respiratory system (I) were the most common (28.02%). One specific combination and trade name dominated dispensing. Generics were on average two-thirds of the cost of originator products.

NEUROLOGICAL DISORDERS – Clinical Outcomes Studies

PN1

+10 Nettiem, Maidenhead, UK

OBJECTIVES: To analyze the Treatment Discontinuations due to Adverse Effects (AE) of all intervention in the context of Randomized Controlled Trials on Chronic Migraine. We analyzed Treatment Discontinuation due to Adverse Effects (AE). RESULTS: There was a significant (p<0.05) difference in both interventions, favouring Onabotulinum toxin. Being the most common AEs diazepam, pain, constipation

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