PHYSICIAN IMPRESSIONS AND USES OF PATIENT-REPORTED OUTCOMES DATA
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OBJECTIVE: Recently there has been increased emphasis on the use of patient-reported outcomes (PRO) as a means of assessing standard medical practice. This research was conducted to evaluate physicians’ perspectives on patient-reported data.

METHODS: We evaluate four programs designed to provide feedback to physicians about their patients’ experiences with different medications. Physicians prescribed a given medication voluntarily completed surveys about their symptoms and the impact of symptoms on their lives before and after using the medication. The prescribing physician received a report summarizing individual patient responses. A sample of physicians who participated in at least one of these programs was interviewed about their impressions of this feedback. This qualitative analysis summarizes their responses. RESULTS: In total, 98 physicians were interviewed. 39% were psychiatrists; 33% rheumatologists; 14% primary care; 12% neurologists; and 2% were pediatricians. Generally, physicians felt that patient-reported information was very important, particularly for guiding treatment decisions and for monitoring treatment response and progress. MDs liked receiving the information, oftentimes indicating, “more information is always better,” though a few felt that patient-reported data obtained in the office setting are sufficient. Though many MDs had similar reactions to receiving patient-reported data, some MDs, and psychiatrists in particular, consistently commented that while information from patients is a critical component of care, its accuracy might be suspect and therefore must be examined in the context of objective, clinical observations. Some reported that having patient feedback helps them feel more comfortable with their prescribing. Physicians were generally supportive of programs that let them help their patients. CONCLUSIONS: Overall, physicians reported strong, positive impressions of patient self-reported outcomes data. Patient-reported data, viewed in the context of clinical presentation, play a role in the diagnosis and treatment of illness, and MDs are interested in programs and initiatives designed to give them that information.

SKIN—Health Care Use & Policy Studies

PATIENTS WITH ATOPIC DERMATITIS: ANALYSIS OF U.S. NATIONAL OUTPATIENT VISIT DATA
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OBJECTIVES: The FDA has recently issued a Public Health Advisory to inform health care providers and patients regarding potential carcinogenic risk from use of topical calcineurin inhibitors: tacrolimus and pimecrolimus in atopic dermatitis (AD), in spite of widespread belief in the medical community about the safety of these medications. The objective of this study was to analyze physician and patient related factors associated with physicians’ prescribing of calcineurin inhibitors for AD in a nationally representative sample of outpatient visits in US.

METHODS: This retrospective, cross sectional study utilized the National Ambulatory Medical Care Survey data from 2000–2003. Office visits were considered to be AD related based on presence of ICD-9 codes and if AD was reported as the reason of visit or if any approved AD medication was prescribed. Weighted logistic regression was used to examine predictors of prescriptions of calcineurin inhibitors versus other AD medications.

RESULTS: Topical calcineurin inhibitors constituted 7% of the total 9 million AD medications prescribed in US outpatient settings between 2000 and 2003. Almost 21,000 prescriptions were written for children under the age of 2 years. The odds of receiving a prescription for calcineurin inhibitors were approximately 7 times (95%CI: 1.40–31.5) higher for patients of white race as compared to other races. Patients who paid out pocket had higher odds of receiving a prescription of calcineurin inhibitors as compared to other patients (OR: 4.66; 95%CI: 1.04–20.9). The odds of dermatologists prescribing calcineurin inhibitors were 27 times (95%CI: 9.12–83.09) higher as compared with non-dermatologists. CONCLUSIONS: Precribing trends indicate that the general medical community seems to recognize the safety of tacrolimus and pimecrolimus despite the warnings put out by the FDA. Rigorous safety and efficacy data collection may be warranted before the use of these medications can be approved for children below two years.

PHYSICIAN AND PATIENT RELATED DETERMINANTS OF PRESCRIBING TOPICAL CALCINEURIN INHIBITORS FOR PATIENTS WITH ATOPIC DERMATITIS: ANALYSIS OF U.S. NATIONAL OUTPATIENT VISIT DATA

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PSK1

PATTERNS FOR PHOTOTHERAPY USE IN TREATMENT OF MODERATE-TO-SEVERE PSORIASIS
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OBJECTIVES: Highlight the diminishing utilization of phototherapy as a treatment option for patients with moderate-to-severe psoriasis.

METHODS: Survey data collected by the National Psoriasis Foundation between November and December 2004 was used to assess study objective. A total of 400 interviews were held with psoriasis and psoriatic arthritis respondents. Interviews were conducted over the phone (n = 188) and online (n = 212). Respondents were screened for a mix of gender and age. Severity of psoriasis, as measured by Body Surface Area (BSA) was self-reported by patients as number of patient’s palms covering area affected by psoriasis. BSA between 3% to 10% is indicative of moderate psoriasis, while greater than 10% is indicative of severe psoriasis. The respondents were queried on the medications they were currently using. Descriptive data were generated to determine the demographic characteristics of the study population and attain study objectives.

RESULTS: Approximately 75% of the population had moderate to severe psoriasis as measured by BSA. Only about 9% of the entire study population was on some form of phototherapy. Almost 7% of respondents with moderate psoriasis (n = 86) were on some form of phototherapy, while 11% with severe psoriasis (n = 212) were on some form of phototherapy. CONCLUSIONS: Phototherapy as a treatment option is underutilized. Phototherapy is safer than other treatment strategies for psoriasis, with efficacy rates among the highest of all available treatment options. Prior proven safety, efficacy and cost effectiveness of phototherapy makes it an attractive and beneficial treatment option that should be considered by patients, physicians, and payors.