

they were referred, 5% (15/322) arrived the second day, 6% (20/322) third day and over and 7% (24/322) did not arrive in the hospital. **CONCLUSIONS:** The study provides evidence that community health workers if properly trained, equipped and supported would identify sick persons in the households, counsel and refer them to hospitals for specialized care. Patient referral arrival rate on same day is reasonably high because households were regularly visited and sick persons encouraged to seek care. Similar studies carried out in the US and Great Britain suggest that in a population of 1000 adults, 750 will experience an episode of illness, of these 250 will consult a physician of whom 6 will require to be referred to the physician.

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PROVINCIAL ENTRY OF NEW DRUGS IN CHINA

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OBJECTIVES: To improve health care provision whilst containing cost at the same time, Chinese authorities allow the entry of new drugs at provincial level. Whilst different provinces have different economic situation and needs, it is essential for pharmaceutical companies to strategize provincial drug entry. The purpose of this research is to explore province(s) that may provide the best chance for new drug entry. **METHODS:** To capture all the drugs that were newly included in the 2012 National Drug List (NDL) but not the 2009 NDL, multiple databases including the two NDLS, Adis Insight and the Chinese database Yao-zhi Shu-ju were used. Provincial reimbursement status of these drugs was identified using the Chinese database. Provincial population and economic data (including gross domestic product (GDP), health expenditure and consumer price index (CPI)) in 2011 were captured on the National Statistical Database. The correlation between the numbers of provincially reimbursed drugs (with/without restrictions) and GDP per capita, and between the numbers of provincially reimbursed drugs (with/ without restrictions) and regional health expenditure, were investigated. All databases were accessed in September 2013. **RESULTS:** 245 new formulations were identified, among which 35 of them are alternative formulations of 26 new drugs. Among the 23 provinces and 4 municipalities provinces, Anhui (48%) followed by Jiangsu (20%) approved most new drugs without restrictions. Guangxi (21%) was the autonomous region approved most new drugs without restrictions. Among the provincially reimbursed drugs, Jilin (62%) was the province approved most drugs associated with restrictions. The number of approved drugs was not correlated to regional GDP per capita ($p=0.18$, $r^2=0.06$) nor with regional health expenditure ($p=0.78$, $r^2=0.003$). **CONCLUSIONS:** There is a substantial variation in the number of approved new drugs between provinces in China. The economic status of the provinces is not likely to be the sole factor causing such differentiation.

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USING THE ISPOR 2013 EUROPEAN CONGRESS AS A BIG DATA CASE STUDY

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OBJECTIVES: The availability of concentrated big data sets can help researchers analyze current trends in an industry and drive future growth. Over 1,600 poster presentations related to pharmacoeconomics and outcomes research were presented at the 2013 ISPOR European meeting. We analyzed the titles of the posters to find trends in research. **METHODS:** We analyzed the titles and associated sections of all the poster presentations accepted for the ISPOR 2013 European meeting held in Dublin, Ireland. The distribution by sector (research on methods, health care use & policy studies, cancer, cardiovascular, etc) was calculated in addition to the type of study (cost, PRO & patient preference, clinical outcomes, etc.). We also searched the titles of posters for key words to divide studies into the following four categories: cost-effectiveness, budget-impact, burden of illness and literature review. **RESULTS:** In total, 1,679 poster title were analyzed. For the sector distribution, the top three studies were as follows: research on methods (238; 14.18%), health care use & policy studies (217; 12.92%) and cancer (210; 12.51%). The most popular types of studies were: cost studies (617; 36.75%), patient reported outcome & patient preference studies (212; 12.63%), and clinical outcomes studies (200; 11.91%). Of all the posters, cost-effectiveness studies made up 12.27%, while budget impact studies, literature reviews and burden of illness studies made up 2.5%, 1.67% and 6%, respectively. The top three sectors for cost-effectiveness studies were cancer (31; 15.05%), cardiovascular disorders (29; 14.08%), and infections (28; 13.59%). **CONCLUSIONS:** Analyzing trends at conferences may help researchers and key stakeholders understand the current issues in the field. The most common type of study for the 2013 ISPOR European were cost studies. The cost-effectiveness studies were concentrated in cancer, cardiovascular disorders and infections.

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COMMON ILLNESSES IDENTIFIED BY COMMUNITY HEALTH WORKERS IN THE HOUSEHOLDS AND REFERRED TO PRIMARY HEALTH FACILITIES FOR CARE

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OBJECTIVES: To determine common illnesses identified and referred to the health facility for care by community health workers during routine household visitations. **METHODS:** Quasi-experimental study was carried out in two sub-locations in rural Kenya where one hundred community health workers were trained on community based referral and counter referral model and issued with referral tools. Each was assigned 25 households, instructed to regularly visit them in order to identify sick persons counsel and refer them to link hospitals. One hundred villages comprising 2209 households with a population of 11,000 people were covered where the counter referral model was implemented. **RESULTS:** In total the community health workers identified, counseled and referred 322 sick persons to health facilities for health care. Those identified for referrals were categorized as either below or above five years. Under five referrals accounted for 30% (97/322) where the top five reasons for referrals included; general illnesses for under fives, 5.2 (18%); postnatal care for infant, 30 (9.3%); immunization defaulters

(3.1%); malaria, 3 (.9%) and diarrhea, 3 (.9%). Top five reasons for above five referrals included; general illnesses for above fives, 89 (27.6%); ANC clinic 34, (12.7%); health check up, 24 (7.5%); Chronic cough, 19 (5.9%) and PNC for mother 6 (1.9%). **CONCLUSIONS:** Community Health Workers were able to identify, counsel and refer 322 persons with 38 various types of ailments. The study concludes that if CHWs are trained well, supplied with referral tools and provided with regular support supervision, they have the capacity to identify common ailments at household level and provide advice on the appropriate health action required to be taken. It is the view of the authors that community health workers referral model be scaled up.

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AN EVALUATION OF PATIENT SATISFACTION IN PAFOS, CYPRUS WITH THE "EUROPEP" INSTRUMENT

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OBJECTIVES: To evaluate patients' satisfaction with the general practice care provided at the Pafos General Hospital outpatient units. **METHODS:** The EUROPEP questionnaire, standardized and validated into Greek, was distributed to outpatients, with the method of random sampling and filled out with personal interviews, from February to April 2014. EUROPEP includes 23 items and 5 dimensions regarding doctor – patient relationship, medical care, information – support, organization of care and accessibility. The sample size was based on 50% of annual outpatients' visits. For the assessment of the questionnaire internal consistency, the coefficient a Cronbach was used. Student's t-test and analysis of variance have been performed in order to determine the significant differences between the dimensions and sociodemographic characteristics. **RESULTS:** In total 345 out of 383 outpatients filled out the questionnaire (RR=90%). The majority of the sample (61.2%) was female and belonged to the 61-80 years old group. 43.5% of sample answered moderate health condition and 43.8% bad. The Cronbach's alpha of questionnaire met the criterion of 0.858. The doctor – patient relationship, medical care, information – support and organization of care scored 4.09±1, 3.56±0.8, 3.97±0.9 and 4.01±1.2 respectively, which mean 'satisfied'. However, the accessibility regarding the getting through to the practice and waiting time was scored much lower (2.3±0.8), meaning 'dissatisfied'. Statistically significant differences were found between gender and doctor – patient relationship ($p=0.019$), information – support ($p<0.001$) and organization of care ($p=0.003$), while age group was related to information – support ($p<0.001$) and organization of care ($p<0.001$). Patients' health condition was found significant with the doctor – patient relationship ($p=0.004$), medical care ($p=0.007$) and accessibility ($p=0.001$). **CONCLUSIONS:** Patients were satisfied with the provision of general practice and sociodemographic characteristics appear to be significant predictors of satisfaction. Also, problems of accessibility can be solved through the forthcoming reform of primary health care in Cyprus.

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CLINICAL TRIAL ACTIVITY IN GREECE FROM 2010 TO 2012: STILL MISSING THE OPPORTUNITIES?

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OBJECTIVES: Clinical trials (CTs) lead to innovative medical treatments, and present positive externalities both for clinical practice and the economy. The study aimed at portraying the CT activity in Greece for 2012, built upon a previous survey conducted in 2010, and at highlighting any discrepancies. **METHODS:** The survey was conducted among the members of the Hellenic Association of Pharmaceutical Companies (SFEF). Each company was requested to return a structured questionnaire for each interventional CT approved by the National Ethics Committee (NEC) during 2012. Questionnaire items focused on the main characteristics of each CT: duration, phase, budget, number of recruited patients, affiliation of recruiting sites and therapeutic area of the investigational agent. **RESULTS:** All SFEF members participated returning completed questionnaires (response rate: 100%). Data on 70 interventional CTs were received. The majority was phase-III trials (64.3%) as in 2010 (68.3%) with a mean duration of 36.3 months (regardless of phase). Most CT sites were affiliated to a university or NHS hospital (45.7% and 42.3% respectively). A contractionary phase in the CT activity was observed compared to 2010, as demonstrated by the basic characteristics of approved CTs, i.e. average number of patients/trial: 35 vs 98, average number of patient per participating center: 8.68 vs 32.5, average total budget/trial 218,556€ vs 296,598€ for 2012 vs 2010 respectively. **CONCLUSIONS:** In 2012, the health care sector in Greece entered a recession phase due to the severe economic crisis and the subsequent fiscal adjustment program. These measures, accompanied by non-efficient processes in the administrative setting for CT approvals in Greece, appear to have an impact on the country's CT activity. Given that CTs represent vital investments for the human capital and the economy, joint action from all stakeholders is of paramount importance in order to surpass existing hurdles and to promote investment in research.

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PREDICTORS OF WORKING MOTIVATION IN JOB SATISFACTION AMONG NURSES IN CYPRUS

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OBJECTIVES: To investigate factors affecting nurses' working motivation on job satisfaction in public and private hospitals in Pafos. **METHODS:** The study included all hospitals in Pafos, with 410 nurses out of which a random sample was collected from February to March 2013. Two generic, self-administered, instruments have been used. The first questionnaire refers to working motivation in terms of recognition, responsibility, personal development, job interest, working relationships etc, developed by Everard and Morris (1999). The second instrument refers to job satisfaction by Spector (1985). Both instruments score 1: "agree/satisfied very