outside the abdomen, or nothing at all. Participants most commonly circled at least one portion of the abdomen (89.8%) and/or lower (92.2%) regions; 63% participants (49.9%) circled the median and lower abdomen only. 73 participants (17.8%) circled an area inclusive of at least a portion of all nine regions of the abdomen; of these participants, 28 (38.4%) had a self-reported history of disease(s) with abdominal symptoms, pain, and/or gastrointestinal difficulties. 25 participants (63.8%) circled at least four body regions (i.e., over 80% of possible body distributions) with the following exceptions: 15 participants (37.5%) circled at least five body regions, and 34 participants (84.4%) circled at least three body regions. Yet the deeper regions of the abdomen (lower; i.e., below pelvic floor and lower regions of the abdomen exclusively). Therefore, to obtain accurate reports of symptoms pertaining to a specific abdominal location, it would be useful for instrument developers to define and identify (e.g., through an illustration), the precise anatomical area of interest, which should improve the reliability and validity of the PRO measures.

PIH60

USABILITY TESTING OF AN INTEGRATED GLUCOMETER AND HANDHELD ELECTRONIC PATIENT-REPORTED OUTCOME SYSTEM

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OBIELEINES FOR PAIN, MIGRAINE, RHEUMATOID ARTHRITIS, AND SYSTEMIC LUPUS ERYTHEMATOSUS: EUROPE VS. UNITED STATES

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OBJECTIVES: To evaluate the Satisfaction with life among general population of Pakistan. METHODS: A cross sectional, descriptive study was undertaken with study population responding to internet survey, living all over Pakistan. Satisfaction with life was assessed using Ed diener SWLS scale. Descriptive analytis was used to elaborate people's demographic characteristics while inferential statistics were applied to report the association among study variables. RESULTS: Out of 2033 questionnaires filled 1507 were from Pakistan. Gender distribution was 761 (50.5%) males. Most popular age group of study participants was 20-25 years (46.6%) with 340 (22.6%) married and 669 (44.4%) having graduate level education. Overall 460 (30.5%) participants were satisfied with their lives and 190 (12.6%) were extremely satisfied from their lives. One hundred and sixty seven (11.1%) and 38 (2.5%) participants were dissatisfied and extremely dissatisfied from their lives respectively. Age and marital status had no association with satisfaction of life. Profession is one factor in dissatisfaction towards life. People in urban areas have a positive trend of satisfaction when compared with the rural ones. CONCLUSIONS: This study provides baseline assessment for the Satisfaction with life of general population of Pakistan and the results could be applied in clinical practice. The study also highlights the impact of the following confounding factors on Satisfaction with life domains measured: Education, work, personal income & Locality. Overall the percentage of Pakistani people who are satisfied with their life (67%) is almost as compared to the percentage of dissatisfied people. Satisfaction with life of general population of Pakistan could be further improved if better job and education opportunities are provided.

PIH65

DIFFERENTIALS IN CONTRACEPTIVE USE AMONG CURRENTLY MARRIED WOMEN BY SOCIO-DEMOGRAPHIC CHARACTERISTICS IN WESTERN KENYA

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CAPTURING EMOTIONAL CONCEPTS DURING CONCEPT ELICITATION

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OBJECTIVES: For the first time, we make a number of contributions for PRO instruments. Concept elicitation (CE), which underpins the development of PRO instruments, often relies on exploring patient experience through the lens of the patient as it relates to the burden and impact of lower quality of daily living. Yet the deeper emotional experience of patients is missed. We address this gap in methodology by reviewing the use of a structured model for emotions can improve PRO instru-

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