PSS54
FIRST REAL-WORLD STUDY ASSESSING HEALTH UTILITY VALUES FOR CHRONIC SPONTANEOUS/IDIOPATHIC URTICARIA USING THE EQ-5D

McBride D[1], Chambenoit O[2], Chiva-Razavi S[2], Lynde C[3], Sussman G[4], Chapman-Rothe N[5], Weller K[6], Maurer M[6], Koenders J[7], Knulst AC[8], Elberink JN[9], Halliday A[10], Alexopoulos ST[10], Nakonechna A[11], Abouzakouk M[11], Sweeney C[12], Radder C[12], Wolin D[13], Hollis K[12], Tian H[14], Balp M[15], Grattan C[16]

[1]RTI Health Solutions, Manchester, UK, [2]Novartis Pharmaceuticals Canada Inc., Dorval, QC, Canada, [3]Lynderm Research Inc., Toronto, ON, Canada, [4]1St Michael's Hospital, University of Toronto, Toronto, ON, Canada, [5]Novartis Pharma GmbH, Nuernberg, Germany, [6]Charite - Universitätsmedizin Berlin, Berlin, Germany, [7]Novartis Pharma B.V., Arnhem, The Netherlands, [8]University Medical Center Utrecht, Utrecht, The Netherlands, [9]Unviersity Medical Center Groningen, Groningen, The Netherlands, [10]Novartis Pharmaceuticals UK Limited, Surrey, UK, [11]Hull and East Yorkshire NHS Hospital Trust, Hull, UK, [12]RTI Health Solutions, Research Triangle Park, NC, USA, [13]RTI Health Solutions, Ann Arbor, MI, USA, [14]Novartis Pharmaceuticals Corporation, East Hanover, NJ, USA, [15]Novartis Pharma AG, Basel, Switzerland, [16]Norfolk and Norwich University Hospital, Norwich, UK

OBJECTIVES: Although chronic spontaneous (idiopathic) urticaria (CSU/CIU) is not life threatening, it can significantly impact a patient's life when not adequately controlled by medication. Patients experience disturbing itch, intermittent pain, lack of sleep, occupational disabilities and social isolation with high impact on health-related quality of life (HRQoL). However, data on the humanistic burden associated with symptomatic persistent CSU/CIU is scarce. Here we present data on utility values from the first international burden of illness study in CSU/CIU. **METHODS:** ASSURE-CSU is an observational, non-interventional study which included a 1-year retrospective medical record abstraction and a cross-sectional patient-reported outcomes survey. Adult CSU/CIU patients aged >18 years with disease persisting for ≥12 months despite treatment were assessed. Utility values and domain scores from EQ-5D-3L were described for Canada, Germany, UK and the Netherlands. **RESULTS:** A total of 88, 98, 79 and 99 patients completed the patient survey which included the EQ-5D-3L in Canada, Germany, UK and the Netherlands, respectively. The mean (SD) EQ-5D-3L utility score was 0.71 (0.30) for Canada; 0.71 (0.25) for Germany; 0.72 (0.31) for UK and 0.76 (0.27) for the Netherlands. Among the different dimensions of EQ-5D-3L, pain/discomfort was the most affected with 62.0%, 70.5%, 61.5% and 56.6% of patients reporting moderate to extreme problems, respectively. The second most affected dimension was anxiety/depression for Canada, Germany and UK with 41.8%, 51.6% and 45.6% of patients reporting moderate to extreme problems, respectively. For the Netherlands, usual activities (44.4%) was the second most affected dimension. Impact across all dimensions increased with disease severity and correspondingly utility values decreased. **CONCLUSIONS:** This is the first real-world study to assess utility values in CSU/CIU using EQ-5D. Utility scores were similar among the countries and ranged from 0.71 to 0.76, suggesting that CSU/CIU have significant impact on the patients' health status. Pain/discomfort was the most affected dimension across countries.

PSS55
DISEASE BURDEN, OUTCOMES AND COSTS AMONG ADULTS ADMITTED TO HOSPITAL IN THE UNITED KINGDOM (UK) DUE TO PLAQUE OR ERYTHRODERMIC PSORIASIS

Schaefer C[1], Mamolo C[2], Cappelleri JC[2], Le C[3], Daniel S[4], Mallbris L[5], Griffiths CE[6]

[1]Covance Market Access Services Inc., Gaithersburg, MD, USA, [2]Pfizer Inc., Groton, CT, USA, [3]Covance Market Access Services Inc., San Diego, CA, USA, [4]Covance Market Access Services Inc., Conshohocken, PA, USA, [5]Pfizer Inc., Collegeville, PA, USA, [6]University of Manchester and Manchester Academic Health Science Centre and Salford Royal NHS Foundation Trust, Salford, UK

OBJECTIVES: To evaluate disease burden, clinical and patient-reported outcomes and healthcare costs of patients admitted to hospital for management of plaque or erythrodermic psoriasis. **METHODS:** This observational study enrolled 61 eligible patients from 107 hospital stays across 9 UK hospitals. Sites recorded Psoriasis Area Severity Index (PASI) at admission and discharge, psoriasis treatments, and length of stay (LOS). Patients reported psoriasis-related symptoms, health status (SF-12v2, EQ-5D-3L), mood (HADS), productivity (WPAI), and dermatology-related quality of life (DLQI) at admission, and also reported psoriasis-related symptoms, EQ-5D-3L, and DLQI at discharge. An algorithm assigned cost/hospital stay. Descriptive statistics are based on those responding to each item. Statistical significance evaluated at the 0.05 level. **RESULTS:** Mean age was 45.5 years; 50.8% were male. Mean time since psoriasis diagnosis was 20.0 years. Most (78.7%) had ≥1 previous psoriasis-related hospitalization. Mean number of physician-diagnosed co-morbid conditions was 2.5. At admission, mean SF-12v2 Physical and Mental component summary scores were 35.4 and 32.1, respectively; mean HADS scores were 9.7 (anxiety) and 9.6 (depression) indicating substantial impairment. Forty-five percent reported changing job, role, or position at work due to psoriasis. Mean WPAI activity impairment at admission was 68.7%; among the 35.1% employed for pay, mean WPAI work impairment was 79.2%. Mean PASI improved from admission to discharge (25.2→12.1; p<0.0001). Also, improvement was seen at discharge for EQ-5D-3L (0.34 →0.60), DLQI total score (20.1→12.0), and psoriasis symptom scores (all p<0.05). Mean (range) LOS was 17.0 (2,71) days; for 8 patients achieving a 75% reduction in PASI (PASI75), mean LOS was 18.1 vs. 13.1 days for 27 patients not achieving PASI75 (p=0. 11). Mean (SD) cost/hospital stay was £4,875 (±£3,096). **CONCLUSIONS:** Disease burden, LOS and cost are substantial among patients hospitalized for psoriasis. On average, patients improved during their hospital stay. Nonetheless, they reported suboptimal clinical and patient-reported outcomes at discharge.

PSS56
EVALUATION OF PSORIASIS PATIENTS' ATTITUDE TO RISK: BENEFIT AND THERAPEUTIC TRADEOFFS IN THEIR CHOICE OF TREATMENTS

Eliasson L[1], Bewley T[2], Mughal F[3], Johnston K[4], Kuznik A[5], Lloyd AJ[1]

[1]ICON PRO, Oxford, UK, [2]Whipps Cross University Hospital & the Royal London Hospital, London, UK, [3]Celgene Ltd, Uxbridge, UK, [4]ICON Epidemiology, Vancouver, BC, Canada, [5]Celgene Corporation, Warren, NJ, USA

OBJECTIVES: Treatment options continue to emerge for managing psoriasis, with different risk:benefit profiles and routes of administration. This study was designed to elicit UK patients' relative strength of preference regarding treatment effectiveness, risks of side effects, and mode/frequency of administration. **METHODS:** A stated preference survey (using a discrete choice experiment [DCE]) was designed to present participants with hypothetical treatment choices. Treatments were described in terms of reducing the body surface area (BSA) affected by psoriasis, mode of administration, increase in risk of diarrhea or nausea in the short-term, and 10-year risk of melanoma, tuberculosis, or serious infection (e.g., pneumonia). Standard DCE Methodswith an orthogonal design were used; the survey was pilot-tested in 6 participants. **RESULTS:** Psoriasis patients (n=292; mean age=48.5 years; mean BSA=9.3%; mean Dermatology Life Quality Index=10.5; 25.7% with prior biologic experience and 34.9% with psoriatic arthritis) were recruited in the UK. Participants strongly preferred to avoid increasing their risk of melanoma (odds ratio [OR]=0.44/5% increased 10-year risk), tuberculosis, and serious infections (OR=0.73/5% increased 10-year risk for both) and preferred twice-daily tablets to weekly injections (OR=0.74) or injections every 2 weeks (OR=0.86). Participants preferred to avoid treatments with a risk of diarrhea or nausea in the first few weeks after initiation (OR=0.87/5% increase) and preferred treatments that effectively resolve plaque lesions (OR=0.93 for each hand palm area still affected). All ORs were statistically significant. Biologic-naïve participants were more likely to prefer oral tablets to injections and were less risk-tolerant for serious adverse events. **CONCLUSIONS:** All attributes of treatment considered were found to be significant predictors of choice. Patients showed strong preferences for avoiding treatments with risk of serious toxicities and avoiding injectable therapy, and a lower preference for treatments with greater efficacy. These preferences were consistently stronger in biologic-naïve patients.

PSS57
ASSESSMENT OF DENTAL STATUS AND PERCEPTION TOWARDS ORAL HEALTH AMONG PHARMACY STUDENTS IN QUETTA, PAKISTAN

ul Haq N, Ejaz M, Iqbal Q, Nasim A, Riaz S, Haque N, Akram A
University of Balochistan, Quetta, Pakistan

OBJECTIVES: This study is design to assess the dental status and perception towards oral health among pharmacy students. **METHODS:** The study is questionnaire bases cross sectional study. Study is conducted in Faculty of Pharmacy, University of Balochistan, Quetta by using convenient sampling. The descriptive statistics was used to present the demographic and disease related information. Inferential statistics was used to the evaluation relationship among study variables. All analyses were performed using SPSS 20.0. **RESULTS:** Out of 197 participants 196 (66.0%) were male. Majority of participants 267 (89.9%) having age ranges between 18-24 years. One hundred ninety one (64.3%) describe that they have no problem in chewing and 172 (53.9%) are satisfied with their teeth appearance which shows the satisfaction of participants concerning their oral dental health. Majority of respondents 120 (40.4%) were satisfied with their teeth. One hundred and sixty one (54.2%) respondents were having minor teeth problems. Score for self-rating of dental health in majority of participants 121 (40.7%) was excellent. When discussing the self-rating score no significance difference was found in participants having dental problem, broken filling, broken tooth, cavities, bleeding gums, bad breath, stained teeth, aches and broken denture. **CONCLUSIONS:** Present Study concluded that although the participant were satisfied with their oral dental health, yet they are not aware about the proper hygiene and oral dental health. Awareness program must be initiated for students, focusing primarily on dental/oral health.

PSS58
CHARACTERISTICS OF ACNE VULGARIS IN EUROPEAN ADOLESCENTS AND PATIENTS PERCEPTIONS

Delarue A[1], Zkik A[2], Berdeaux G[2]
[1]Pierre Fabre DermatoCosmétique, Lavaur, France, [2]Pierre Fabre, Boulogne Billancourt, France

OBJECTIVES: Acne vulgaris is one of the most common skin conditions, affecting primarily the adolescents. The psychological impact associated with the condition could be explained by the predominance of lesions in the face. The objective of the present study was to describe the characteristics of the disease and its management in Europe considering the patients' perspective. **METHODS:** A cross-sectional survey was conducted in a sample of individuals residing in Europe and aged 15 to 24. To ensure representativeness, the quota method was applied considering age, sex, residence location and occupational status of the reference person. Study participants were asked to complete an online questionnaire specifically developed for the study and Resultswere analysed descriptively. **RESULTS:** A total of 3099 study participants declared currently having acne. Outside of the face, the back was affected by lesions in 61.05% of individuals on average (65.95% of men and 56.22% of women). Most patients (27.03%) reported their general physician or dermatologist as the main source of information on acne. However, advices were also often sought from relatives and internet. In addition, whereas the diagnosis of acne is generally made by a dermatologist (29.69%), most patients, reporting acne in our study, declared that no medical diagnosis was ever made (39.3%). This can explain why most individuals (28.65%) reported using anti-acne cosmetics advised by their pharmacists instead of prescribed treatments. Finally, according to patients' perspective, acne is generally considered a minor issue however, for 21.3% of individuals it represents a major problem and 1.9% lives it as a real burden. These Resultsare consistent across the selected European countries. **CONCLUSIONS:** Acne is a common disease considered a minor issue by most adolescent patients and commonly self-managed using anti-acne cosmetics. However, patients often sought information and advices from healthcare professionals such as general practitioners, dermatologists or pharmacists.

PSS59
IMPACT OF ALEXITHYMIA AND DISEASE CHARACTERISTICS ON WORK PRODUCTIVITY AND ACTIVITY IN PSORIASIS PATIENTS WITH SHORT DISEASE DURATION: EPIDEPSO MULTICENTRE STUDY

Paul C[1], Girolomoni G[2], Radtke MA[3], Sampogna F[4], Spuls P[5], Kirby B[6], Brunori M[7], Smirnov P[8], Bergmans P[9], Rundle J[10], Lavie F[7], Puig L[11]