pecyually challenging. A desire to provide a complete ranking from best to worst was observed. The majority (18.7%) of participants indicated a preference for DCE, as they felt this enabled comparison of alternatives across all profiles. Of those preferring MRA (5.0%) indicated the primary reason was related to the ability of MRA to remove the potential requirement to choose an undesirable characteristic that was part of a package (2, 11.7%) perceived the MRA to be less ethically conflicting, and (3.3%) perceived the MRA to be less burdensome. More participants were consistent for the DCE (22.9%) than MRA (10.4%) repeated task (p = 0.002), for MRA, lack of consistency was not observed to be associated with the choice (best or worst).

CONCLUSIONS: This novel study supports the validity and acceptability of DCE methods for assessing preferences. The findings relating to the application of MRA and TTO methods are definitive than for the traditional choice task. However, important avenues for future research to further clarify the comparative merits of DCE and MRA preference elicitation methods are identified.

PM102

VALIDATION OF THE RUSSIAN VERSION OF SCHIZOPHRENIA QUALITY OF LIFE QUESTIONNAIRE (S-QOL).

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OBJECTIVES: Schizophrenia is a psychiatric illness that associates thought process disintegration and poor emotional responsiveness. The S-Qol is a self-administered questionnaire that assesses quality of life (Qol) among people with schizophrenia. The scale is a 41-item questionnaire with eight subscales (psychological well-being, self-esteem, family relationships, relationship with friends, resilience, physical capability, social capability and mental and emotional sentiment). The objective of the study was to validate the Russian version of S-QOL.

METHODS: The scale was of instrument used in a clinical trial with 260 patients. Statistical examinations covered factor analysis, internal consistency of subscales, construct and discriminant validity. The reproducibility (Test-retest) was assessed with patients whose clinical condition did not change between the baseline and endpoint (10weeks), whereas patients whose health status improved were used to evaluate the sensitivity to changes.

RESULTS: The sample is composed of subjects from Russia with 53% of female. Cronbach’s alphas were estimated to be 0.960 and 0.952 for the Russian and the French version, respectively.

CONCLUSIONS: Overall, the S-Qol, which has sound psychometric properties, is a valid instrument for measuring the disease specific HRQoL of patients with schizophrenia in Russia.

PM103

ESTIMATING HEALTH RELATED QUALITY IN TYPE 2 DIABETIC PATIENTS RECEIVING POLYTHERAPY WITH EQ5D-5L QUESTIONNAIRE.

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OBJECTIVES: Type 2 diabetes mellitus(DM2) and polypharmacy can affect the health related quality of life(HRQoL). A new S-level version of EQ5D instrument is available; it is therefore interesting to evaluate its performance compared to previous EQ5D-3L METHODS: Cross-sectional study of baseline data from a cohort of DM2 patients taking 5 or more drugs (313 patients from a randomized clinical trial to prevent drug inadequacy in DM2 patients). HRQoL was measured using EQ5D-5L instrument and compared to previous EQ5D-3L data from a similar population. Item internal consistency (IIC) and item discriminant validity criteria were met for most items (i.e. IIC was > 0.40, and correlations between items and their respective rest-scores in one dimension were all greater than correlations with another dimension). For the subgroup with no CGI improvement (56 patients out of 260), Test-retest demonstrated a highly correlation (%0.49-0.79) between the two assessments. Assessing the sensitivity on the subgroup of 161 patients for whom an improvement was declared (mean change = −1.47), a significant difference was found for the global score and for all dimensions except the psychology dimension.

CONCLUSIONS: Overall, the S-Qol, which has sound psychometric properties, is a valid instrument for measuring the disease specific HRQoL of patients with schizophrenia in Russia.

PM104

EXAMINATION OF PATIENT PREFERENCE: COMPARISONS OF RESULTS FROM THE TIME TRADE-OFF AND STANDARD GAMBLE INSTRUMENTS.

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OBJECTIVES: The time-trade-off (TTO) and the standard gamble (SG) are two common tools for the direct elicitation of health utilities, the prevailing quantitative unit for the evaluation of health-related quality of life (HRQoL) in a given population. These tools may be administered to patients for the assessment of their current HRQol. Comparisons between TTO and SG outcomes for a patient population were explored in the present systematic review of primary evidence from published studies.

METHODS: A systematic review of the literature was undertaken in Ovid Medline® to identify all publications in English since 1996 reporting both mean TTO and SG outcomes for the same patient population. The literature search and data extraction were independently undertaken by two researchers, using a pre-determined set of inclusion/exclusion criteria to generate a list of relevant publications, with a third researcher acting as adjudicator in case of disagreement. Excluded were reviews or non-original publications, as well as publications reporting health utility outcomes of hypothetical health states. Data were analyzed on study arms (studies) for differences and/or correlation between the TTO- and SG-derived utilities.

RESULTS: The initial literature search identified 170 articles which yielded 56 relevant publications encompassing 26 disease categories, 79 studies and a total of 11,090 patients. The most common disease category, discussed in 18 studies covering 2,258 patients, was ocular disease. The overall weighted mean utility scores were 0.82 and 0.85 for TTO and SG respectively, with 61% of studies reporting higher utility with SG and 6% equal results. Overall, 22% and 33% of studies displayed greater than 10% absolute and relative difference between the two measurement tools, respectively. Spearman’s rho yielded significant positive correlation (r = 0.586).

CONCLUSIONS: The majority of studies displayed little difference in scores between TTO and SG, with significant correlation observed overall.