perception was highly modified by a number of factors, most significantly order of presentation of risks and benefits and comprehension of a drug's risks and benefits. Showing the favourable effects first could halve the odds ratio of a more negative score, with all other factors held constant. Better comprehension always led to more positive perception. Other significant factors included negative mood at time of evaluating and more negative responses retrieved in the order of presentation led to more negative answers. Impact of presentation type was highly dependent on the therapeutic area.

CONCLUSIONS: The perception of a drug's benefit-risk can be heavily impacted by how it is presented to the patient. These results underline the importance of using an understandable presentation format in the communication of benefits and risks of drugs in order to support patients to make informed decisions regarding their treatment choice.

PCN308

COST OF QUESTIONNAIRE-BASED PROCESS TO IDENTIFY OCCUPATIONAL EXPOSURES AMONG PATIENTS WITH LUNG CANCER

Perrier L1, Nechba A1, Perol M2, Perrier A1

1Canstein Centre Léon Bérard, Lyon Cedex 08, France, 2Hopital civil de Lyon, Pierre Bonte, France

OBJECTIVES: Between 10 and 25% of lung cancer (LC) are supposed to be attributable to occupational exposures. However, LC of occupational origin remains underreported. To improve the identification and compensation of occupational LC, we implemented at the Léon Bérard Cancer Centre, a questionnaire-based process to systematically identify LC patients potentially exposed at the workplace and to be seen in an “occupational cancer” consultation. Selection was based on patients’ reporting of exposure to carcinogens or potentially exposed occupational setting. The aim of this study was to assess the cost of this process. METHODS: Cost assessment was performed prospectively. Three situations were analyzed: questionnaire returned by the patient (up to one reminder), consultation required (situation 1), questionnaire not returned (up to one reminder), no consultation required (situation 2), questionnaire not returned (up to one reminder) (situation 3). Cost calculations were strictly based on a micro costing approach according to the hospitals’ point of view. Data on consumption of resources were collected from 310 patients enrolled from March 2014 to May 2015. 9 patients without lung cancer were excluded. The measured costs per patient were in average £179 (SD: 53) for situation 1 (n = 77), 400 (SD: 16) for situation 2 (n = 82), and 124 (SD: 7) for situation 3 (n = 142). Sensitivity analyses showed that the unit costs of physician and duration of consultations had a major role in the process’ costs. CONCLUSIONS: The implementation of our approach increased the identification and the compensation of occupational lung cancer. Our approach respects the objectives of the National Cancer Plan and helps to improve the overall care of patients with cancer.

PCN309

INTERNATIONAL COMPARISON OF INTERNET INFORMATION SOURCE IN BREAST CANCER

Ogawa H1, Onishi Y2, Watanabe K3, Hisada K4, Watanabe K5, Bodzi M2, Peeters B1, Perrier L1, Nechba A1

1Canstein Centre Léon Bérard, Lyon Cedex 08, France, 2Hopital civil de Lyon, Pierre Bonte, France, 3Canstatt Le Mauncha University, Toulouse, 4Centre de Recherche Clinique, 5Canstatt Le Mauncha University, Toulouse, France

OBJECTIVES: The proportion of internet sources by six categories was calculated and compared in three countries: Japan, UK and USA. The objective of the study is to evaluate the proportion of internet sources related to breast cancer available online in Japan, UK and USA. The objective of the study is to evaluate the proportion of internet sources related to breast cancer available online in Japan, UK and USA. METHODS: The proportion of internet sources by six categories was calculated and compared in three countries: Japan, UK and USA. The objective of the study is to evaluate the proportion of internet sources related to breast cancer available online in Japan, UK and USA. RESULTS: The proportion of internet sources by six categories was calculated and compared. This comparative survey provides an overview of information sources related to breast cancer available on the internet. The number of top-rated information sources by public institutions, academic associations and NGOs/NPOs was 21% compared to UK and USA. There were a few information sources by NGO/NPO in Japan.

PCN310

CLINICAL AND HEALTH-ECONOMIC CRITERIA FOR THE ASSESSMENT OF NEW IMMUNE-ONCOLOGIC DRUGS IN SPAIN

López-Sánchez J1, Bispo JF2, Sánchez Martínez F1, González García P2

1Cáritta La Mancha University, Talavera de la Reina, Spain, 2Cáritta La Mancha University, Toledo, Spain, 3Murcia University, Murcia, Spain, 4Bristol-Myers Squibb, Madrid, Spain

OBJECTIVES: Clinical and health-economic criteria to accurately assess the value of new immune-oncology (IO) drugs are needed. The aim of this study was to assess the current knowledge about these criteria among the Spanish scientific community. METHODS: The Delphi method was used to survey a multi-disciplinary group of Spanish oncologists [melanoma, lung, or genitourinary-specialists [hospital/regional managers]], hospital pharmacists (Genesys and/or GEDECO) and health-economists [universities/public entities]. RESULTS: A total of 47 experts participated in the first round of this study with a Likert’s scale (9 = full agreement). Consensus was considered when more than two-thirds of the responses were in the same tercile. RESULTS: A total of 101 experts invited were (40.6% oncologists; 44.6% hospital pharmacists and 14.8% health-economists). 91% of the respondents participated in the first round. These results underline the importance of using an understandable presentation format in the communication of benefits and risks of drugs in order to support patients to make informed decisions regarding their treatment choice.