patients and one of caregivers. CONCLUSIONS: Most study abstracts reporting on the humanistic burden in dementia in 2014 did not specify use of a dementia-specific instrument. Only 25% of studies assessed burden on caregivers, and utility values were rarely reported.

PMH40
PATIENT, CAREGIVER AND TREATMENT FACTORS ASSOCIATED WITH MEDICATION SATISFACTION AMONG TREATED PATIENTS IN THE CAREGIVER PERSPECTIVE: ONTARIO PSYCHIATRIC AD MD (OPAAM) STUDY IN EUROPE
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OBJECTIVES: To evaluate the association between caregiver's reported attention-deficit/hyperactivity disorder (ADHD) medication satisfaction (MS) and child and caregiver characteristics, ADHD severity and treatment adherence. METHODS: Using a questionnaire containing information about occupational status, job related stress, monthly net income of less than 800 GP compared to 13.2% of the group with no mental health disorders. Additionally, among other handicaps - more often from these handicaps than untreated - presumably because of their more financial economic situation. Individuals who are under treatment suffer more influence reimbursement at national/regional level were interviewed. RESULTS: As a result, it is essential to encourage payers to think beyond the price tag, and to maximize familiarity with the drug (especially in the UK), a belief that the treatment goal should be abstinence, and preference for another pharmaceutical. Furthermore, 20% of all surveyed EUS psychiatrists cite maintaining abstinence/reducing relapse as the greatest unmet need in the pharmacological treatment of alcohol addiction, whereas 38% (France) to 30% (Spain) of respondents cite these factors, respectively, as a top three consideration. The former could be decreased and the latter increased if therapies were dosed less frequently. A long-acting buprenorphine injection, such as Currus/Branseum Pharmaceuticals® CAM-2038, could, therefore, appeal to both payers and prescribers. Indeed, 86-96% of surveyed physicians are willing to prescribe CAM-2038 if it establishes a similar efficacy, safety, and tolerability profile to existing buprenorphine formulations. CONCLUSIONS: The opioid addiction market is dominated by generic products. However, while payers and prescribers are constrained by tight healthcare budgets, our primary research indicates that new brands such as long-acting depot CAM-2038 could gain traction via powerful market-making factors that focus on their ability to reduce patient non-adherence, provide existing efficacy and safety standards are maintained.

PMH43
REDUCING CONSUMPTION VERSUS MAINTAINING ABSTINENCE: MARKET ACCESS CHALLENGES FACING A NOVEL TREATMENT PATHWAY FOR ALCOHOL ADDICTION IN THE EU
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OBJECTIVES: Nalmefene (Lundbeck’s Selincro) is the only marketed drug that aims to reduce alcohol consumption rather than maintain abstinence in alcohol-dependent patients. By examining reimbursement and uptake of nalmefene in the EU, the market strategies for the novel drug are assessed. METHODS: In February 2015, 253 psychiatrists in France, Germany, Italy, Spain, and the UK were surveyed regarding their prescribing of nalmefene. In addition, 15 EUS payers involved in determining and regulating access to alcohol addiction treatments were employed or a parent with ADHD. All 81 cities in Turkey have been collected. The data include IMS sales (standard unit sales data of all products indicated for AD - memantine, rivastigmin, donepezil, galantamin), demographic (age distribution, education level, population density etc.), health policy (number of family physicians and specialists, hospital beds, nursing houses, average hospital admission rate) and affordability data (social security coverage rate). We calculated “utilization score” for all cities, dividing the number of standard units sold by the number of subjects who are assumed to have AD. A composite “indicator score” was calculated for all cities, summing the weighted values of all indicators. The relationship of the indicators and the composite indicator scores with “utilization score” were analyzed by means of Pearson and Spearman correlation analysis as needed. Then, a multivariate regression model was built to determine the degree of impact of each indicator. RESULTS: We found significant differences in the relative utilization of AD treatments among cities and regions. Generally industrialized and larger cities had higher utilization than smaller and/or less-developed cities by means of infrastructure. It is seen that healthcare infrastructure is less influential on utilization disparity, which has been found to be highly driven by socio-economics factors including affordability, population density (disperse residence) and household size (indicative indicator for socio-economy and family member to provide caregiver service in Turkish culture).