ness, and content validity. Items were edited based on feedback from the patients.

**RESULTS:** Focus group participants had a mean age of 68.1 years; were 35.9% female, and had a range of COPD severity levels (GOLD Stages): 7.4% GOLD I (mild), 55.6% GOLD II (moderate), 14.8% GOLD III (severe), 22.2% GOLD IV (very severe). A sizeable majority (N=24; 88.8%) experienced COPD symptoms at night. Focus group data supported saturation of concepts to evaluate how patients experience COPD symptoms at night. Items were generated for the Nighttime Symptoms of COPD instrument using patient terminology. Subsequent cognitive debriefing with patients demonstrated that the items were understandable, relevant, and interpretable. **CONCLUSIONS:** The Nighttime Symptoms of COPD instrument is a PRO instrument developed to evaluate nighttime symptoms of COPD with documented evidence of content validity. Psychometric testing is planned in order to evaluate the instrument’s measurement properties.

**PRS21**

**EVALUATING THE IMPACT OF PHYSICIAN-PROVIDED ASTHMA EDUCATION ON ABSENTEEISM IN CHILDREN: USING DATA FROM THE NATIONAL HEALTH INTERVIEW SURVEY (NHIS)**

Howe JL, Potvin P, Vaidya VA

**OBJECTIVES:** To evaluate the effects of physician-provided asthma education on absenteeism due to pediatric asthma. **METHODS:** This study was conducted using data from the 2008 National Health Interview Survey, Sample Child Data Set (NHIS). Children were included in the study if they were diagnosed with asthma, reported to have taken any form of the survey, had an asthma attack in the past 12 months, and were excluded if there was no data available on absenteeism. A composite score (0-6) was assigned for the comprehensiveness of the physician-provided education. The dependent variable was the number of school/work days missed for asthma over the last 12 months. The independent variables include gender, age, race, ER visit, prescription inhaler use and extent of physician-provided education. Descriptive statistics were used to describe the population and the amount of physician-provided education. Logistic regression was used to evaluate the effects of physician-provided education on absenteeism over 12 months.

CONCLUSIONS: The questionnaire about knowledge, awareness and perception of tuberculosis was constructed in order to have a positive impact on absenteeism among this population, suggesting that education is an integral component of asthma management in addition to drug therapy.

**PRS20**

**KNOWLEDGE, AWARENESS AND PERCEPTION OF TUBERCULOSIS (TB) AMONG STUDENTS RESIDING IN UNIVERSITY HOSTELS**

Asif M1, Sulaiman A1, Saleem F1, Ahmad N1, Asif M2, Usman M2

**OBJECTIVES:** To evaluate knowledge, awareness and perception of TB among students residing in university hostels. **METHODS:** A cross sectional study was designed. A total of 502 students (200 from males and 302 from females) living in hostels of The Islamia University of Bahawalpur, Bahawalpur, Pakistan participated in the questionnaire about knowledge, awareness and perception of tuberculosis was constructed, content validated and used for data collection. Descriptive analysis was done by using SPSS 16. **RESULTS:** Sixty (30%) of males and 215 (71.2%) of females have heard about TB. Less than half (n=99) of females stated that malnutrition is one major factor for occurrence of TB. 44.5% of males and 68.9% of females knew that persistent cough, low grade fever and weight loss are symptoms of tuberculosis. A total of 45% of males and 42.1% of females knew that TB spreads by sneezing and coughing. Less than 75% of both respondents knew that TB is curable but knowledge about TB vaccine was very poor (~25%). Two males and one female reported that they suffering from tuberculosis and no precautionary measures have been taken by their room mates. 70.3% of males and 23.1% of females were sharing utensils and other items with their room mates. Majority of students (80.9% males, 88.8% females) stated that quality of life in the hostels was poor as it is over crowded. Almost all of male and female students reported that they were not screened for tuberculosis and other communicable illness before and after registration in university. **CONCLUSIONS:** This study demonstrated a strong need of health education programs for general public especially at schools, colleges and university levels. Students need more awareness regarding tuberculosis cases like tuberculosis before registration.

**PRS30**

**COMPARISON OF CLINICAL AND PATIENT-REPORTED OUTCOME MEASURES IN CHRONIC OBSTRUCTIVE PULMONARY DISEASE**

Yen HY, Pickens A, Young F, Bai ZJ

**OBJECTIVES:** Our aim was to evaluate the construct validity of generic and disease-specific measures of health in chronic obstructive pulmonary disease (COPD) with a specific focus on the relative ability of the measures to discriminate between clinically defined stages of COPD. **METHODS:** We analyzed data collected from 120 patients with a diagnosis of COPD in a Veterans Affairs hospital. Patients self-completed 2 generic measures (EQ-5D and SF-36), and the disease-specific measure St. George’s Respiratory Questionnaire (SGRQ). Known groups comparisons for the SGRQ, EQ-5D and SF-36 subscores were conducted using the Chi-square test. Patients were grouped according to Global Obstructive Lung Disease (GOLD) stages based on forced expiratory volume in one second (FEV1). Pearson’s correlation was used to assess the association between clinical and HRQoL measurements. Relative efficiency ratios (REs) were used to assess the statistical efficiency of each summary score in discriminating among levels of clinical severity of COPD. **RESULTS:** Mean PCS-12, EQ-VAS and SGRQ total scores significantly declined with stage of severity (p<0.05). The SGRQ was more discriminatory than EQ-5D and SF-36 in the severe stages. The generic summary scores demonstrated trivial correlations with FEV1 (<0.2) whereas SGRQ showed a moderate correlation (r=0.43). The SGRQ exhibited a stronger correlation with Borg dyspnea score (r=0.5) than the generic summary scores. Using SGRQ as the reference, PCS-36, MCS-36, EQ index, EQ-VAS all had REs of <1. **CONCLUSIONS:** The SGRQ demonstrated greater ability to discriminate among different levels of severity stages of COPD and is more strongly correlated with clinical measures of COPD than generic measures of health, an important consideration when selecting measures in studying patients with COPD.

**PRS31**

**DEVELOPMENT OF A QUESTIONNAIRE ASSESSING THE BURDEN OF PRURITUS**

Taieb C

**OBJECTIVES:** The severity of pruritus may be modest, but it may also be very significant and cause considerable discomfort to the patient. In an acute economic context, the public health burden is increasingly often a legitimate concern for health authorities. A tool designed to evaluate the burden needs to be made available to health professionals in order to conduct an objective assessment. To explore this concept, in the first step, a generic pruritus (itching or pruritus) questionnaire was constructed using a PRF (Burden of Scratching, Itching and Pruritus) questionnaire to improve the content of the questionnaire. **RESULTS:** Exploratory assessments showed that the concept of burden could be structurally described under 2 modules: frequency and severity for the first module; daily life, family and person relationships, work and psychological impact for the second module. Forty-two preliminary items were identified following a first discussion. A first analysis managed to reduce these items to 29 whilst conserving the 2 modules. A second analysis was conducted in order to identify the concepts related to the pathology. **CONCLUSIONS:** This questionnaire was developed following a strict methodological process, involving a multidisciplinary team incorporating various players (patients, nurses, social workers) who are involved in the treatment of patients and caring for their families in order to guarantee its credibility and reliability. A review of the literature and discussions with the children and their families were conducted in order to identify the concepts related to the pathology. **OBJECTIVES:** To determine pruritus in patients with a diagnosis of COPD in a Veterans Affairs hospital. Patients self-reported selected pulmonary symptoms during at least one outpatient visit. **RESULTS:** The mean number of school days missed was 2 (mean 4.3, SD 7.9) and mean composite score was 3.28. Children whose parents received a higher than average comprehensive education (OR=2.18; CI=1.12-4.24) and a rescue inhaler (OR=2.27; CI=1.44-3.60) were more likely to have a lower number of missed school days than those with less comprehensive education and not using a rescue inhaler. Lower absenteeism was reported among children who had an EB visit due to asthma (p<0.001). **CONCLUSIONS:** When comprehensive in nature, asthma education provided by physicians was found to have a positive impact on absenteeism among this population, suggesting that education is an integral component of asthma management in addition to drug therapy.