some point during the course of the disease. Within the latter group, stenosis was found to be correlated with the higher indirect costs. DISCUSSIONS: The treatment pathway for low back pain has not been modelled in such a comprehen-
sive manner before. However, the model demands detailed data not currently available in most countries. There is a need for further data collection to be able to provide more reliable estimates for the burden of spinal disease.

PMS25
THE BURDEN OF ILLNESS OF OSTEOPOROSIS PATIENTS IN THE UNITED STATES MEDICARE POPULATION
Xie L1, Wang L2, Li L, Wang Y2, Basu O1
1STATMedResearch, Ann Arbor, MI, USA, 2STATMedResearch, Dallas, TX, USA

OBJECTIVES: To examine the economic burden and health care utilizations of osteoporosis in the U.S. Medicare population. METHODS: Osteoporosis patients were identified using International Classification of Diseases, 9th Revision (ICD-9-CM) code: 733.03a from the U.S. national Medicare claims database from January 1, 2008 through December 31, 2010. The first osteoporosis diagnosis date was designated as the index date. One-year continuous enrollment was required for the patients evaluated by absenteeism and presenteeism, which is the decreased productivity of patients. For the indirect burden, we estimated the rate of absenteeism and presenteeism from a patient survey and the average salary from official statistics. Costs were presented in 2013 USD ($1 USD = 0.85 EUR). A total of 141,833 patients (average age 78.1 years) were included in the study sample. Osteoporosis patients in the Medicare population were more likely to be female (88.9%), White (88.4%) and reside in the Southern U.S. region (38.7%). The average direct-CE cost was $15,934. Cost of hospitalization (the most common site of care), diagnosed with osteoporosis and acute or chronic obstructive pulmonary disease (23.8%). Osteoporosis patients had a high percentage of prescriptions for alendronate sodium (12.0%), levonorgestrel (10.9%) and tramadol (9.0%) within 60 days post-index date. Health care utilizations analysis showed the following results: Medicare carrier (99.4%), durable Medical Equipment (DME, 36.9%), Home Health Agency (HHA, 18.5%), outpatient visits (81.6%) and inpa-
tients (69.6%). Skilled Nursing Facility (SNF, 12.3%), and drug prescription drug claims (part D event) (56.3%). Health care costs for osteoporosis patients were determined as follows: Medicare carrier ($4,387), DME ($393), HHA ($1,126), outpatient ($10,836), inpatient ($5,728), ambulatory (10.8), and total costs ($27,013). CONCLUSIONS: Patients diagnosed with osteoporosis in the Medicare population have a high percentage of carrier and outpatient visits. The current study evidenced that high health care utilizations result in considerable expenditures.

PMS28
SOCIODEMOGRAPHIC AND CLINICAL CHARACTERISTICS OF TAY-SACHS DISEASE PATIENTS IN THE U.S. MEDICARE CLAIMS DATABASE
Xie L1, Wang L1, Li L1, Liu L2, Wang Y1, Basu O1
1STATMedResearch, Dallas, TX, USA, 2STATMedResearch, Ann Arbor, MI, USA

OBJECTIVES: To examine the socioeconomic and clinical characteristics of Tay-Sachs disease patients in the U.S. Medicare database. METHODS: MEDICARE and supplementary MEDICAID claims were searched from inception to December 2013, using terms for Tay-Sachs disease. Review articles were also examined. Studies that were not published in English were excluded. Data extracted included: patient age and sex, diagnosis date, date of death, months of life since diagnosis date, DME usage, SNF usage, hospitalization, hospice admissions, home health agency visits and other health care visits. RESULTS: The study included 205 patients. The average age at diagnosis was 24.7 years. 181 patients died within the observation period. OF 205 patients, 59% were male and 41% were female, with a mean age at diagnosis of 24.7 years. They lived an average of 21.4 years in the U.S. The most common symptoms in the patients were weakness (72.7%), ataxia (70.7%), blindness (69.5%) and blindness (69.5%). The last symptom to develop was blindness (69.5%). CONCLUSIONS: Tay-Sachs disease patients are primarily male and have a mean age at diagnosis of 24.7 years. Weakness, ataxia, blindness and hypotonia were the most common symptoms in the patients. Future studies should focus on improving the quality of life of these patients.