PCN116
PILOT STUDY FOR EVALUATION OF OUTCOMES OF BREAST CANCER WITH SPECIAL FOCUS ON ECONOMIC IMPACT AND QUALITY OF LIFE
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OBJECTIVES: A pilot study was conducted to evaluate the outcomes of breast cancer and its treatment focusing on economic impact and quality of life in a hospital setting.

METHODS: Patient interviews were held to measure the economic outcome and quality of life in a hospital setting.

RESULTS: A total of 61.91% of patients declared having their first episode of HSFR. The mean age was 56.5 years and the population was represented by 75% of female. The distribution of respondents according to TNM staging of breast cancer was observed as first stage (none), stage II (29.62%), stage III (40.74%), and stage IV (14.81%). Patients were treated with different treatment regimens. CONCLUSIONS: Breast cancer is a disease, where there is a scope of pharmaceutical care in order to improve the functional scales and global health and to decrease symptoms scales of breast cancer patients. Key words: Breast cancer, outcomes, quality of life.

PCN117
QUALITY OF LIFE SCALE FOR PATIENTS WITH HAND-FOOT SYNDROME: FIRST RESULTS
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OBJECTIVES: The aim of this study is to develop and validate a hand-foot syndrome-specific quality of life scale to be able to measure the impact of this condition on patients and to be able to assess the value of certain specific treatments in this indication.

METHODS: Forty-four patients were included during clinical consultation.

RESULTS: A total of 61.91% of patients declared having their first episode of HSFR. The mean age was 56.5 years and the population was represented by 75% of female. A total of 22.69%, 28.75%, 25.78% of patients graded 0, 1, 2, 3, respectively. The distribution of respondents according to TNM staging of breast cancer was observed as first stage (none), stage II (29.62%), stage III (40.74%), and stage IV (14.81%). All patients were treated with different treatment regimens. CONCLUSIONS: Breast cancer is a disease, where there is a scope of pharmaceutical care in order to improve the functional scales and global health and to decrease symptoms scales of breast cancer patients. Key words: Breast cancer, outcomes, quality of life.

PCN118
USING DISCRETE CHOICE EXPERIMENTS TO ESTIMATE THE MARGINAL WILLINGNESS TO PAY FOR INSURANCE PREMIUM FOR STOMACH CANCER TREATMENT IN KOREA
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OBJECTIVES: This study, using DCE method, figures out the characteristics of the decision-making for stomach cancer treatment and investigates the attributes affecting the respondent's choice. Also it ascertains marginal willingness to pay and relative preferences for stomach cancer treatment among the general population of 600 respondents in Korea.

METHODS: In the survey, the respondents are asked to choose more than one discrete choice option, resulting in multiple observations for each individual. For each pair-wise comparison of choice set, the respondent will make a choice among three alternatives; A, B, or opt out. Thus, the nested-logit model using full maximum likelihood allows us to empirically estimate multi-levels of dependent variables. For the robustness check of our empirical results, we try considering the nature of distribution of error terms in the utility function in several ways. The survey questionnaire includes four attributes associated with stomach cancer in Korea (incidence rates, survival rates in five years after treatment, total treatment costs, and monthly insurance premium), socio-economic status, antecedent variables, along with questions regarding risk averseness and subjective health evaluation.

RESULTS: The estimates of MWTP between survival rate and monthly insurance premium, and between survival rate and survival rate, by employing “Hybrid Conditional Fixed Effects Logit Model” to figure out the existence of heterogeneity of any observed and unobserved components, are reflecting reasonable range of 176 KRW∼1,324 KRW, and 23,690 KRW∼49,495 KRW, respectively. CONCLUSIONS: Compared to female counterparts, male respondents have higher MWTP of monthly insurance premium for two related attributes. Besides, currently married respondents, with higher income, and higher educational attainments have more MWTP. One interesting point is that dependents’ MWTP is higher than that of insurance premium payers even after controlling for any other variables.