Abstracts 697

OBJECTIVE: Chronic skin diseases have a heavy impact on the physical and mental well-being of the patient. This is confirmed by the large number of quality of life studies that exist. Paradoxically, no study has evaluated depressive symptomatology in Spanish patients with dermatosis. This was why it was decided to carry out, in association with Accion Psoriasis (a Spanish Patient Support Group), an evaluation of the depressive symptomatology of patients suffering from psoriasis. METHODS: The CES-D scale (Center for Epidemiologic Studies—Depression scale) was developed in the USA at the National Institute of Mental Health to perform epidemiological studies of depressive symptomatology in the general population. The CES-D scale was sent to 1300 patients with psoriasis, members or supporters of Accion Psoriasis. The completed questionnaires were returned in prepaid envelopes. RESULTS: Out of the 1300 questionnaires sent out in March 2003. At mid-March 2003, 300 questionnaires were returned: response rate 23%. The presented results concerned the 106 first questionnaires analysed. The male/female gender ratio was as follows 54/46. Depressive symptomatology was observed in 44% of men (average score 17.8) and 55% of women (average score 21). This difference between men and women was not statistically significant. An evaluation according to the age at diagnosis was also carried out: 2 groups were identified: diagnosis at 16 years of age or younger versus a group diagnosed after the age of 16. Depressive symptomatology was observed in 54% of patients in the first group versus 46% of patients in the second group. CONCLUSION: These preliminary results show the importance of the psychological impact of dermatosis, especially psoriasis. Global management of patients seems essential for patients suffering from chronic dermatosis.

## PMH22

## PSORIASIS AND DEPRESSIVE SYMPTOMATOLOGY: ITALIAN RESULTS

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OBJECTIVE: Chronic skin diseases have a heavy impact on the physical and mental well-being of the patient. This is confirmed by the large number of quality of life studies that exist. Paradoxically, no study has evaluated depressive symptomatology in Italian patients with dermatosis. This was why it was decided to carry out, in association with ADIPSO (an Italian Patient Support Group), an evaluation of the depressive symptomatology of patients suffering from psoriasis. Tools: the CES-D scale (Center for Epidemiologic Studies—Depression scale) was developed in the USA at the National Institute Of Mental Health to perform epidemiological studies of depressive symptomatology in the general population. METHOD: The CES-D scale was remitted by Italian Dermatologists to the first

5000 patients with psoriasis coming to their office. The completed questionnaires were returned in prepaid envelopes. RESULTS: Out of the 5000 questionnaires remitted in February and March 2003. At mid-March 2003, 3000 questionnaires were returned: response rate 60%. The presented results concerned the 100 first questionnaires analysed. The male/female gender ratio was as follows 61/39. Depressive symptomatology was observed in 34% of men (average score 17.2) and 62% of women (average score 21). This difference between men and women was statistically significant (p = 0.007). An evaluation according to the education level was also carried out: Two groups were identified: patients having a primary/secondary education level (n = 69) versus patients having a higher education level (n = 31). Depressive symptomatology was observed in 51% of patients in the first group versus 32% of patients in the second group. This difference according to the education level was statistically significant (p < 0.02). CONCLUSION: These preliminary results show the importance of the psychological impact of dermatosis, especially psoriasis. Global management of patients seems essential for patients suffering from chronic dermatosis.

PMH23

## DEVELOPMENT AND ASSESSMENT OF HEALTH STATE UTILITIES FOR ATTENTION DEFICIT/HYPERACTIVITY DISORDER IN CHILDREN USING PARENT PROXY REPORT

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OBJECTIVES: Attention deficit/hyperactivity disorder (ADHD) is a behavioral disorder, originating in childhood, with broad impairment in academic performance, social functioning, and quality of life. ADHD health state utilities have not previously been assessed using parent ratings. Health state utilities are needed to calculate quality-adjusted life years (QALYs), a critical measure of outcomes in cost-effectiveness studies. The purpose of this study was to use standard gamble (SG) utility methodology to assess parent preferences for ADHD health states. METHODS: Parents of children diagnosed with ADHD completed SG utility interviews, in which they rated their child's current health and 11 hypothetical health states (e.g., untreated ADHD; stimulant treatment; atomoxetine treatment, a new non-stimulant). The hypothetical health states were developed based on physician interviews, published literature, and unpublished clinical trial data. Parents reported children's symptoms using the 18-item ADHD-RS. Construct validity and health state differences were examined with correlations, t-tests, and ANOVAs. **RESULTS:** Participants were 43 parents of children with ADHD. The mean parent SG rating of their child's