effectively target interventions to improve arthritis management in the Medicare managed care population.

PM57 THE USE OF ADVANCED REPORTING INTEGRATING BIG DATA (COREREPORTS): THE CASE OF OSTEOPOROSIS

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OBJECTIVES: To describe prevalence and to evaluate pattern of use and sanitary costs of patients treated with osteoporosis drugs, using advanced reporting tools and methodologies integrating Big Data (CoreReports).

METHODS: Starting from ANMO Observatorio, an Italian Database that collects health data on a population of 13 million Italian citizens, a new automated analytical tools (CoreReports) has been developed in order to manage, catalog and find the strategic indicators of healthcare providers care pathways related to Diseases. Populations, Drugs, with benchmarking among different geographical areas. All web-based Reports are automatically generated on-the-fly according to analytical needs and validated by a Scientific Committee with experts in various diseases. Among different diseases national average pass rate on the Healthcare effectiveness Data and Infone (HEDIS) measure over 10 subjects over 40 years, 176,831 (prevalence 3.3%) were treated with osteoporosis drugs with the following pattern of use: bisphosphonates (80%), strontium ranela- 

tium (18%), parathyroid hormone (1.2%), SERMs (0.8%), denosumab (0.4%). A consid-

erable percentage (21.8%) didn’t received vitamin D supplements in association. Patients with osteoporosis received many drugs expression of comboridity (cardiovascular drugs 8 of patients, corticosteroids 25%, nervous system drugs 33%). More than 1/6 of patients were hospitalized during 2012 (fracture rate 0.2%). Less than 50% of patients controlled their serum calcium levels in the last three years, 34% per- 

formed a densitometry. The average yearly cost/patient was 237.3% 37% due to drugs (30% specific drugs, 70% others). 45% due to hospitalization and 18.8% to labs tests and diagnostic examinations.

CONCLUSIONS: Osteoporosis represents a condition of high epidemiological prevalence and with a strong impact on the social welfare, prevention and management are necessary. The infrastructure represents a tool to evaluate patient care pathways with osteoporosis and estimate cost of illness and can be a valid instrument to support clinical governance.

PM57 PATIENT CHARACTERISTICS ASSOCIATED WITH PASSING OR FAILING THE HEDIS MEASURE FOR POST-FRACTURE OSTEOPOROSIS MANAGEMENT

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OBJECTIVES: Despite an estimated 2 million osteoporosis (OP)-related fractures occurring annually, achievement of post-fracture OP quality measures is low. In 2013, the national average pass rate on the Healthcare effectiveness Data and Infone (HEDIS) measure “Osteoporosis Management in Women who had a Fracture” was 137.46%. The primary objective of this study was to assess proportion and pattern of patients who passed the OP management HEDIS measure and its association with patient characteristics.

METHODS: All 4Q2012 patients who were recently treated with a biologic as part of usual care. Physicians were screened for practice-duration and patient characteristics of those with available data, recent disease severity scores differed between those in remission in the EU and US; the characteristics of these RA patients in remission were found mostly similar between these geographic clusters, despite the potential variations in healthcare systems and modalities of care delivery, possibly attributed by ACR/EULAR efforts in standardizing the outcome definitions and care delivery.

PM58 PATTERNS OF DISEASE REMISSION AMONG PATIENTS WITH RHEUMATOID ARTHRITIS TREATED WITH BIOLOGIC THERAPIES IN JAPAN

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OBJECTIVES: To compare RA patients on disease remission in the EU and US among those receiving a biologic treatment as part of usual care. METHODS: A multi-country multi-center medical chart-review study of RA patients was conducted among physicians (rheumatologists) in hospitals/private practices to collect de-identified data on patients who were recently treated with a biologic as part of usual care. Physicians were screened for practice-duration and patient characteristics of OP-treated patients. More than 1/6 of patients were hospitalized during 2012 (fracture rate 1.8%). A higher percentage of black women were found mostly similar between these geographic clusters, despite the potential variations in healthcare systems and modalities of care delivery, possibly attributed by ACR/EULAR efforts in standardizing the outcome definitions and care delivery.