

Younger men had significantly better mean UF, UB, and SF domain scores one-year after RP than older men. Men < 55 years old are more likely than older men to experience a severe decline of sexual bother but trend toward a lower risk of a severe urinary bother.

PUK13

GENERIC VS. DISEASE-SPECIFIC SATISFACTION MEASURES: SELECTING A SATISFACTION MEASURE FOR OVERACTIVE BLADDER STUDIES

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OBJECTIVES: To compare the performance of a disease specific satisfaction measure in overactive bladder (OAB-S) to the generic Treatment Satisfaction Questionnaire for Medication (TSQM). **METHODS:** The OAB-S consists of five scales (Expectations with OAB control, Control, Impact on daily living with OAB, Tolerability, and Satisfaction with OAB control) and five global questions related to expectation and satisfaction. The TSQM consists of four scales (Effectiveness, Convenience, Side effects and Global satisfaction). The questionnaires were administered to 134 subjects treated for their OAB with medication at baseline and two weeks later. **RESULTS:** All scales on both questionnaires satisfied the minimum recommended level for internal consistency reliability (Cronbach's alpha >0.70). The test re-test reliability of the all scales and individual items on the OAB-S showed good reliability (ICC > 0.70; weighted Kappa >0.50); however only the Global satisfaction domain of the TSQM demonstrated good reliability (ICC = 0.82). The ability of the questionnaires to discriminate among known groups of patients based on subject-reported OAB symptoms severity was tested and the relative validity (RV) was calculated. The RV was higher for the OAB-S scores compared to the TSQM scores of same content (e.g., TSQM Side effect RV = 0.08 vs OAB-S Tolerability RV = 0.20). The effect sizes for the domains related to the medication effectiveness were similar for both the TSQM and OAB-S (TSQM Effectiveness ES = 0.26 vs. OAB Control ES = 0.25); however, the effect sizes for the other domains were higher for the OAB-S compared to the TSQM indicating better responsiveness for the OAB-S. **CONCLUSION:** The OAB-S is better able to discriminate patients based on their OAB severity level, has better responsiveness to change and better reliability compared to the TSQM. The TSQM is a good measure that is appropriate to assess satisfaction across different disease states, while the OAB-S, a disease-specific measure of satisfaction, is preferable in trials with patients with OAB.

PUK14

WORK PRODUCTIVITY IN PATIENTS WITH OVERACTIVE BLADDER: RESULTS FROM THE MATRIX STUDY

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OBJECTIVE: Previous research has demonstrated that overactive bladder (OAB) impacts 34 million people in the US and results in \$841 million in lost productivity per year. The objective of this study was to determine whether OAB patients receiving the transdermal oxybutynin patch experience productivity improvements. **METHODS:** Data were obtained from participants in the Multicenter Assessment of Transdermal Therapy in Overactive Bladder with Oxybutynin (MATRIX). Patients enrolled in MATRIX received the oxybutynin patch 3.9mg/day

during this six-month, prospective, multicenter, US study. Self-reported work productivity was captured at baseline, three and six-months using the Work Productivity Questionnaire (WPQ), an 8-question subset of the Work Limitations Questionnaire (WLQ). The WPQ includes physical, mental (concentration), time (interruptions and adherence to schedule) and output (ability to handle workload) scales and a mean WPQ Index was computed to estimate overall productivity loss. A productivity loss score was computed to determine the percent reduction of productivity in study participants compared to healthy individuals. **RESULTS:** MATRIX enrolled 2878 patients (53.5% working age [18–64]; 38.9% (n = 1112) employed) at 327 sites. Of the working age population, 92% were female, 81% were Caucasian, and the most common occupations noted were professional (37%), manager/administrator (14.7%) and sales/retail (10.4%). WPQ Index data was available for 740 patients at baseline, 491 at month 3, and 408 at month 6. The mean (SD) WPQ Index score was 8.2 (6.67) at baseline, and decreased significantly at 3-, and 6- months, to 5.8 (5.98), and 5.1 (5.58), respectively (p < 0.0001). Improvements in productivity were observed at 3- and 6-months across time, mental, physical and output domains (p < 0.0001). Overall productivity loss decreased from 7.7% at baseline to 5.5% at month 3 and to 4.8% at month 6. **CONCLUSION:** Transdermal oxybutynin results in improved work productivity in patients with OAB.

POSTER SESSION II

ALLERGY—Health Care Use & Policy Studies

PAL1

DIAGNOSTIC TESTING FOR ALLERGIC RHINITIS: EVALUATING TEST DECISION AND TEST VALUE

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OBJECTIVES: This study uses conjoint analysis to examine clinical factors that influence the decision to use specific IgE blood testing as a diagnostic procedure for patients suspected of having allergic rhinitis. **METHODS:** Participants included a random sample of 50 family physicians in Alabama. For the conjoint analysis physicians evaluated 11 patient profiles (repeated measures) containing four clinical factors: symptom severity, symptom length, patient history, and medication use (prescribed antihistamines, nasal spray, over-the-counter medications). Decisions to test or not test were elicited as dichotomous responses. Visual analog scales were used to support study validity. **RESULTS:** The largest coefficients were obtained for symptom severity (medium = 2.86; high = 5.12) and symptom length (medium = 1.04; high = 1.03) with history and medication use having moderate influence in the decision process. The overall conditional logistic model was significant (X² = 194.8, P < 0.001). All physicians sampled valued testing compared to not testing. For older physicians (age > 50) perceived value compared to not testing was significantly higher (P < 0.05). **CONCLUSIONS:** The value of specific IgE testing is strongly linked to how well test results relate to symptoms (severity, length). Family physicians perceive that specific IgE blood testing is valuable to their practice.