through the inclusion of studies identified in references lists. Of these 27 studies, only one provided a statistical regression model describing a relationship between FACT-G and EQ-5D in individuals with malignant melanoma. While the analyses and data used were described appropriately and satisfied the majority of recommendations in the published checklist, the preference-based utility weights used were not obtained from the samestudy as the objective measure of QoL. METHODS: The aim of the study was to investigate the impact of health status on treatment-related decisions for patients with mCRPC. This study confirms there is very little evidence which could be used to generate preference-based utility scores from FACT data. Although one relationship was identified, it could not be used to estimate proxy preference-based utility scores; it is not ideal for the UK.

PCN113

OBJECTIVES: As part of the Lilly Oncology Patient Access to Cancer care Excellence (PACE) initiative, the 2014 PACE Cancer Perceptions Index survey was conducted to identify general public perceptions of cancer and its treatment in South Korea.

METHODS: The general public consisted of a nationally representative sample of 500 respondents aged ≥18 years who participated in telephone interviews initiated by random digit dialing from March 25 to April 22, 2014. Responses were evaluated by analysis of frequencies of responses and mean scores.

RESULTS: Less than half (39%) of the general public expressed satisfaction with progress in cancer treatment, and most (82%) believe it takes too long for new cancer medicines to become available in their country. Only 46% of the general public believe the clinical trials offered patients a chance to receive better treatments than those currently available, and the majority (82%) would be willing to participate in a clinical trial if they might receive an experimental treatment. Most of the general public strongly agreed on the need for coordination of efforts across national borders (96%), and greater collaboration among government, academic institutions, non-profit organizations, and pharmaceutical companies (96%), in the development of new cancer medicines.

CONCLUSIONS: The general public in South Korea is ambivalent toward overall progress in the fight against cancer, and impatient with the pace of progress. Despite some differences in perceptions in South Korea compared to those previously published for PACE surveys in the United States, France, Germany, Italy, Japan, and the United Kingdom, the general public in South Korea is consistent with the general public in the other six countries in identifying cancer as a health priority, and wanting greater investment in addressing the disease as well as faster availability of new medicines.

PCN114

QUALITATIVE METHODS FOR ASSESSING PATIENT, CAREGIVER, AND PHYSICIAN-REPORTED EXPERIENCES WITH ORAL MEDICATIONS FOR TREATMENT OF METASTATIC CAstration-RESTraint PROSTATE CANcer (MCRPC)

Hazel Fernandez LA, Uribé C, Flanders S, Suhel B, Dye T1

1Comprehensive Health Insights, Louisville, KY, USA, 2Astellas Scientific and Medical Affairs, Tokyo, Japan

OBJECTIVES: Studies designed to assess the psychosocial factors affecting patients with mCRPC are sparse. Understanding this area may help patients and caregivers navigate the cancer journey more effectively with their physicians. We used qualitative research methods to explore patient, caregiver, and physician experiences with oral oncology therapy.

METHODS: Our ecological approach postulates that patient, caregiver, and physician treatment experiences are influenced by their role in the cancer journey, and that these experiences result from multiple factors impacting individuals via social, organizational, community, governmental policy, and economic influences. Interview guides were developed and tested using core interviews of patients, caregivers, and health care providers. Interviews were conducted among three relevant stakeholder groups: 30 patients with mCRPC, 26 caregivers, and an independent sample of 30 physicians (oncologists and urologists) who actively treat mCRPC.

Patients and physicians were identified from a national claims database and caregiver participants were identified through their information obtained from the national claims database. Thirty-five patients (78% male, median age 63 years), 31 caregivers (65% male, median age 58 years), and 30 physicians (73% male, median age 47 years) participated in the survey (78% male, median age 63 years, 82% currently receiving CT). Patients completed low treatment toxicity as most important (45% relative importance, MAL analysis), followed by ability to self-care (32%) and an improvement in quality of life (23%). The MLR analysis showed high validity (certainly 50%, chi square p < 0.001) older (36.56), women's attitudes about the vaccine. The study was performed with 2-test and t-test as a statistical method besides 95% probability (p < 0.05). We performed SPSS version 20.0 program.

RESULTS: 85.5% of the respondent women had cervical smear tests. 89.2% of respondent women reported an annual visit for screening. Their average age was 22.7±5.43 BDP years. Women who have undergone cervical cancer screening are less likely to screen for cervical cancer (x2=19.20, p=0.001) were significantly better informed on the issue than single mothers. 85% of the respondent women heard about papillomavirus vaccination against HPV infection from their parents. 10% women aged >34 years received HPV vaccination, and significantly more women over 34 years of age would require vaccination for themselves (x2=28.01, p<0.001) than those who never took part in (26.62). Five questions in the survey concerned knowledge on HPV. On the basis of these questions only 27.9% of the women had adequate knowledge. The majority of women (80.8%) knew the meaning of the acronym HPV, at the same time only 29.2% of them knew that the acronym HPV can be used in this study were not obtained from the UK population.

CONCLUSIONS: There are numerous myths related to HPV vaccination, and significantly more women over 34 years of age would require vaccination for themselves (x2=28.01, p<0.001) than those who never took part in (26.62). Five questions in the survey concerned knowledge on HPV. On the basis of these questions only 27.9% of the women had adequate knowledge. The majority of women (80.8%) knew the meaning of the acronym HPV, at the same time only 29.2% of them knew that the acronym HPV can be used in this study were not obtained from the UK population.