METHODOLOGICAL ISSUES ARISING FROM THREE STUDIES WHICH INCLUDED CONJOINT ANALYSIS IN VISUALLY IMPAIRED PEOPLE

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OBJECTIVES: The purpose of the study is to compare results of Conjoint analysis from 3 studies in ophthalmology with other standard measures of QoL. METHODS: The 3 choice based conjoint (CBC) studies included two in people with glaucoma (N = 109, N = 74) in which the same attributes but a different presentation order was used, and one in people with Age Related Macular Degeneration (N = 126). Other QoL measures included time trade off, VF-14, NEI-VFQ 25 and EuroQol. RESULTS: In all 3 studies the top two attributes were ‘reading’ and ‘getting about outside’. For the two glaucoma studies, lower ranked attributes changed position under different presentation order.

A simpler version of the conjoint task using only 3 of the 5 attributes was given to selected AMD patients with poor vision and showed the same rank order of attributes as in the 5 attribute task. There were very low correlations between individual conjoint measures and other QoL measures. (e.g. only 2 out of 65 intercorrelations between NEI and conjoint scores reached p < 0.05). In time trade off, only around 50% of AMD patients and 20% of glaucoma patients were prepared to trade any remaining years and in both cases it was those with poorer vision (Snellen acuity > 6/12) who were willing to trade (p < 0.01). All studies showed two subgroups of patients with priorities in ‘reading’ and ‘getting about outdoors’. Shifts of attribute preference for changing levels of visual acuity and visual field occurred but not changes in rank order. CONCLUSION: Results from 3 studies (2-glaucoma, 1 ARMD) show little relationship between Conjoint QoL measures and TTO, VF-14, NEI-VFQ 25 and EuroQol suggesting they are assessing different aspects of QoL.

ASSESSMENT OF THE PERSISTENCE DEGREE IN PATIENTS WITH ANTIGLAUCOMA AGENTS AS FIRST LINE MONOTHERAPIES IN SPAIN

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OBJECTIVES: To evaluate the persistence degree (period of time with continuous medication intake) of glaucoma patients with monotherapy prostaglandins treatment (latanoprost, bimatoprost, travoprost). METHODS: An interim analysis of an observational and retrospective study was performed; 99 patients (from 4 ophthalmology services) were included and followed through a period of 24 months, studying the moment in which patients drop out of treatment. Needed parameters were obtained from medical records. A descriptive analysis, a Kaplan-Meier survival analysis and a Cox regression model were carried out, in order to determine: firstly, the antiglaucoma agent that is related with a higher persistence degree; and secondly, to detect those variables that involve a significant variation on the persistence of these patients. RESULTS: In both the descriptive analysis and the survival curves, latanoprost was associated with a higher persistence degree in the glaucoma treatment: 81% vs. 43.9% for bimatoprost and travoprost (p < 0.0003). The persistence degree was significantly influenced by the following variables: the antiglaucoma agent used as monotherapy, with a 3-times higher hazard of treatment withdrawal during the follow-up period due to receiving a travoprost or bimatoprost treatment instead of a