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RESEARCH POSTER ABSTRACTS – SESSION I • MONDAY, 3 SEPTEMBER: 8:30AM-8:30PM

education, occupation and duration of disease. There was, however, a significant increase in the participants' levels of knowledge about hypertension ( $10.26 \pm 1.11$ ,  $P < 0.001$ ) and medication adherence ( $3.24 \pm 0.93$ ,  $P < 0.001$ ) among the IG after the completion of the intervention. Significant association was also reported in the intra-IG group comparison ( $P < 0.001$ ). A significant decrease in overall HRQoL in the IG [ $39.69 \pm 30.25$ ,  $P < 0.001$ ], inter- and intra-group comparison] was observed after the completion of the intervention programme. **CONCLUSIONS:** The pharmacist-led intervention led to a significant increase in the participants' levels of knowledge about hypertension and a positive impact on medication adherence. Therefore, the role of pharmacists in patient education must be formalized and acknowledged as an official part of the health care system.

## PCV33: SELF-REPORTED HEALTH STATUS AMONG TAIWANESE HYPERTENSIVE ELDERLY

Yu IW<sup>1</sup>, Wu MP<sup>2</sup>, Lin HW<sup>2</sup>, <sup>1</sup>China Medical University Hospital, Taichung, Taiwan, <sup>2</sup>China Medical University, Taichung, Taiwan

**OBJECTIVES:** The elderly have accounted for more than 10% of the population in Taiwan. It is unknown about the impact of hypertension (HTN) on the quality of life and cognitive functions among the elderly in Taiwan. This study was initiated to explore the elderly self-reported health statuses among the hypertensive elderly population. **METHODS:** We utilized the data obtained from the 2005 National Health Interview Survey (NHIS) in Taiwan. The study subjects contain those who reported to have the diagnosis of HTN among a total of 2727 elderly individuals (i.e., age 65 years). The descriptive analysis with sampling weights was applied on data including basic demographics, self-reported health status, and health care utilization. **RESULTS:** While 42.8% of the survey participants reported to have HTN (accounted for 907,062 Taiwanese elderly), 89% of them were prescribed with antihypertensive agents, 85% took medications regularly, 21% perceived poor control of HTN. Up to 25% of them had other co-morbidities (e.g., DM), 24% had fall events, up to 14% had somewhat difficulties on general activities of daily living, and up to 48% had difficulties on the instrumental activities. For the past one year, up to 23% of them had visited the inpatient and emergency departments, and less than 5% had utilized long term care services. While 2 to 19% of them had always perceived to have bad mood, 4 to 25% reported to take sedatives, hypnotics, painkillers, and dietary supplements, and 31% did not receive any free elderly health check in Taiwan. **CONCLUSIONS:** With approximately 40% of the elderly population perceived to have hypertension, substantial portion of them were warranted for their elderly care regarding health and functional statuses, and medication use for HTN and for central nerves systems. Further exploration of the associations between HTN control and health statuses for the elderly is needed.

## PCV34: HEALTH-RELATED QUALITY OF LIFE IN CHINESE PATIENTS WITH STABLE ANGINA PECTORIS

Han Y<sup>1</sup>, Wu J<sup>1</sup>, Xu J<sup>2</sup>, Cong H<sup>3</sup>, Zheng J<sup>3</sup>, Sun H<sup>1</sup>, <sup>1</sup>Tianjin University, Tianjin, China, <sup>2</sup>Southwestern University of Finance and Economics, Chengdu, China, <sup>3</sup>Tianjin Chest Hospital, Tianjin, China

**OBJECTIVES:** To examine the health-related quality of life (HRQoL) and associated factors in Chinese patients with stable angina pectoris (SAP), in comparison with those of the general population. **METHODS:** A cross sectional HRQoL survey of both SAP patients recruited from general hospitals ( $n=411$ ) and the general population recruited from Physical Examination Centers ( $n=549$ ) was conducted from July to December, 2011 in Tianjin and Chengdu cities. The general health status was assessed using EQ-5D, EQ-VAS, and SF-6D instruments. SAP-specific health status was assessed using the Seattle Angina Questionnaire (SAQ). Socio-demographic, clinical and life style information were also collected from the participants. Hierarchical multiple regression analyses were carried out to explore the associated factors of HRQoL of SAP patients, in which clinical characters including SAP-specific health status, socio-demographic data and life style variables were included via stepwise method. **RESULTS:** Compared with the general population ( $44.2 \pm 10$  years, 49.91% females), SAP patients ( $68.1 \pm 12$  years, 50.36% females) had significantly lower HRQoL scores in EQ-5D index ( $0.75 \pm 0.19$  vs.  $0.90 \pm 0.20$ ,  $p < 0.05$ ), SF-6D utility index ( $0.68 \pm 0.12$  vs.  $0.85 \pm 0.11$ ,  $p < 0.05$ ) and EQ-VAS ( $71.2 \pm 12.3$  vs.  $83.9 \pm 10.9$ ,  $p < 0.05$ ). The differences after controlling for demographic characteristics were  $-0.050$  for EQ-5D,  $-9.3$  for EQ-VAS and  $-0.133$  for SF-6D. SAQ scores showed that the patients experienced impaired disease-specific health status, especially in the dimension of angina stability ( $40.5 \pm 34.6$ ). Hierarchical multiple linear regression analyses indicated SAP-specific health status explained most of the variance, in which, disease perception, physical limitation and angina stability were the strongest predictive variables for HRQoL. Among other

control variables, more exercises and better sleep were positively related with better HRQoL. **CONCLUSIONS:** SAP patients experienced poorer HRQoL with lower health utility scores compared with the general population. Enhancing disease education and good life habits are helpful to improve the HRQoL of SAP patients.

## PCV35: CORRELATION AMONG PRE-OPERATIVE CONDITIONS, WAITING TIME AND OUTCOME OF ELECTIVE PATIENTS IN CABG WAITING LIST IN HARAPAN KITA HOSPITAL 2011

Permanasari VY, Sangkot HS, School of Public Health University of Indonesia, Depok, Indonesia

**OBJECTIVES:** To assess the correlation among Pre-operative Condition, Waiting Time and Post-operative Outcome (mortality and morbidity) in Elective Patients registered in the waiting list of CABG cases in Harapan Kita Hospital 2011. **METHODS:** The study used quantitative method with retrospective design, combined by qualitative method by doing indepth interview, observation and document review. Samples for quantitative method are those who experienced CABG since January until September 2011 (252 patients), and the operations were not categorized as the emergency ones. **RESULTS:** The study results showed that out of 4 pre-operative conditions, only stenosis left main which has significant correlation with waiting time. The composite of overall risk-score had no significant correlation with both waiting time and post-operative outcome (mortality and morbidity). In addition, there is no significant correlation between waiting time and outcome. This study also found that there is no waiting time management system which is based on the patients' pre-operative condition. Other findings are: lack of operating room, lack of beds in ICU, limited heart surgeons, to many patients register for CABG in this hospital, and individual system (not teamwork system) which is applied in managing the surgeons. These findings lead to quite long waiting time (25 days) for CABG patients to be operated. **CONCLUSIONS:** This study suggests to Heart Surgery Unit to combine between individual and teamwork or collective system, to develop information system which is based on patients' pre-operative conditions in determining schedule of surgery/operation. Suggestion also goes to Hospital Director, in order to increase the number of operating rooms, beds in ICU, heart surgeons, nurses. Finally this study suggest to the Ministry of Health to develop or build capacity of several other hospitals located in Jakarta or outside Jakarta to become heart centers.

## PCV36: VALIDATION AND COMPARISON OF THE SF-6D AND EQ-5D IN CHINESE PATIENTS WITH STABLE ANGINA PECTORIS

Wu J<sup>1</sup>, Han Y<sup>1</sup>, Gao Y<sup>2</sup>, Zhou J<sup>3</sup>, Chen Z<sup>4</sup>, Sun H<sup>1</sup>, <sup>1</sup>Tianjin University, Tianjin, China, <sup>2</sup>Southwestern University of Finance and Economics, Chengdu, Sichuan, China, <sup>3</sup>Tianjin Chest Hospital, Tianjin, China, <sup>4</sup>Affiliated Hospital of Logistics University of Chinese People's Armed Police Force, Tianjin, China

**OBJECTIVES:** To validate and compare the psychometric properties of two generic preference-based HRQoL instruments, EuroQol (EQ-5D) and Short-Form 6D (SF-6D) among stable angina pectoris (SAP) patients in China. **METHODS:** Validity of the EQ-5D and SF-6D was examined with eight a priori hypotheses from a consecutive sample ( $n=411$ , mean age  $68.1 \pm 11.3$ ) of SAP patients in conjunction with Seattle Angina Questionnaire (SAQ). Responsiveness was tested using the effect size (ES), relative efficiency (RE) and receiver operating characteristic (ROC) curves. Agreement between EQ-5D and SF-6D was tested using intra-class correlation coefficient (ICC) and Bland-Altman plot. Factors affecting utility difference were explored with multiple liner regression analysis. **RESULTS:** The mean utility scores (SD) were  $0.75(0.19)$  for EQ-5D and  $0.68(0.12)$  for SF-6D. Validity was demonstrated by the moderate to strong correlation coefficients (range:  $0.404-0.594$ ,  $P < 0.001$ ) for four of the eight hypotheses in both EQ-5D and SF-6D. There were no serious ceiling effects for EQ-5D and SF-6D but floor effects for EQ-5D were large. SF-6D showed a better discriminative capacity ( $ES=0.573-1.179$ ) between groups with different SAP-specific health status than EQ-5D ( $ES=0.385-0.851$ ). RE showed that SF-6D ( $32.7-218.7\%$ ) was more efficient than EQ-5D. The areas under ROC of them all exceeded 0.5 ( $0.661-0.814$ ,  $P < 0.001$ ). Poor agreement between them was observed with ICC ( $0.477$ ,  $P < 0.001$ ) and Bland-Altman plot analysis. Multiple liner regression showed that clinical variables significantly ( $P < 0.05$ ) influenced differences in utility scores between EQ-5D and SF-6D. **CONCLUSIONS:** This study provides evidence that EQ-5D and SF-6D are valid and sensitive preference-based HRQoL instruments in Chinese SAP patients. SF-6D may be a more effective tool with lower flooring effect and greater sensitivity. Further study is needed to compare other properties, such as reliability and longitudinal response.