

## CONCLUSIONS:

The mixed-methods approach enabled content validity assessment of multiple measures. While these measures were largely relevant, adjustments could strengthen these for use in this fatal pediatric condition population and increase their acceptance within health technology assessment (HTA).

## REFERENCES:

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## VP176 Effectiveness Of Anti-Tumor Necrosis Factor In Patients With Psoriatic Arthritis

### AUTHORS:

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### INTRODUCTION:

Anti-tumor necrosis factor drugs (anti-TNF) are the last line of treatment for psoriatic arthritis (PsA) in the guideline of Brazilian Public Health System (SUS). Data of effectiveness of these drugs are scarce in the Latin American population. This study evaluated the effectiveness of the anti-TNF on a cohort of patients with PA in the SUS.

### METHODS:

PsA patients treated with anti-TNF, were included in an open prospective cohort study. The Bath Ankylosing Spondylitis Disease Activity Index (BASDAI) and Clinical Disease Activity Index (CDAI) were used to assess the effectiveness at six months of follow-up. The anti-TNF

was considered effective when the patient achieves scores of four or less measured for BASDAI or scores of ten or less for CDAI. Frequency distributions were compiled for the sociodemographic variables and mean and standard deviation (SD) was used for clinical variables. The paired Student t-test was established to evaluate the differences between baseline and 6 months evaluated for BASDAI and CDAI.

### RESULTS:

Fifty-four patients with PsA completed six months of follow-up. The mean age of patients was 54.03 years (10.44) and the mean disease duration was 8.00 years (7.49). Furthermore, 50 percent of the patients were female, 61.1 percent white and 59.6 percent married. The most used anti-TNF was adalimumab (63.0 percent), followed by etanercept (20.4 percent) and infliximab (16.7 percent). The anti-TNF reduced disease activity measured by BASDAI and CDAI at six months of follow-up ( $p < .001$ ). The percentage of patients achieving the effectiveness with anti-TNF was 61.1 percent measured by BASDAI and 53.7 percent by CDAI.

### CONCLUSIONS:

Anti-TNF drugs demonstrated to be effective in more than half of patients at six months. This result highlighted the importance of the treatment with the anti-TNF drugs in the Brazilian population. Long-term data are needed to confirm these results.

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## VP177 Older People With Cancer: To Treat Or Not To Treat With Chemotherapy?

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### INTRODUCTION:

Older people with cancer are less likely to receive radical treatment for cancer. We conducted a series of systematic reviews to explore the effectiveness and

tolerability of systemic anti-cancer therapy for older people with cancer. The reviews were conducted on behalf of the National Cancer Equality Initiative to establish an understanding of the current body of research and to enable the development of more personalized treatment protocols for elderly patients that take into account fitness and personal choice.

#### **METHODS:**

We conducted six systematic reviews that considered the effectiveness and tolerability of treatment for older people with cancer (breast, colorectal, lung, renal cell, chronic myeloid leukaemia and non-Hodgkin's lymphoma). Four electronic databases were searched from 2010 to 2013. Data were extracted on a range of outcomes from published studies (randomised controlled trials, subgroup analyses, pooled analyses, cohort studies and retrospective studies).

#### **RESULTS:**

We found a large quantity of published research from a wide range of study types. We included a total of 490 studies (64 randomized controlled trials, 30 subgroup analyses, 24 pooled analyses, 255 cohort studies, and 117 retrospective studies).

Most of the randomized controlled trials enrolled fitter and healthier patients than those seen in routine clinical practice. The evidence indicates that older patients with good performance status can, and do, respond well to chemotherapy, frequently achieving similar survival benefit to younger patients.

We found no consistent definitions of 'old' or 'elderly' and these varied from 50 years to 85 years across studies.

The study results demonstrate that comprehensive geriatric assessment has not been routinely conducted in clinical cancer studies and that readily available assessment tools were not used by study investigators.

#### **CONCLUSIONS:**

Age should not be a barrier to treatment for the older population. Research is needed to determine which treatment regimens offer the appropriate balance of

clinical effect and likelihood of adverse events within older populations. Future randomized controlled trials could be designed to include either higher proportions of older people, or only older people.

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## **VP180 Effect Of Two-Invoice System On Drug Distribution And Price In China**

#### **AUTHORS:**

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#### **INTRODUCTION:**

Drug prices are mainly determined by production costs, commercial circulation and use in medical institutions. In 2015, total sales of the Chinese drug distribution industry was CNY1,613.3 billion (USD248.6 billion at 31 December 2015 exchange rate), with CNY28.3 billion (USD4.4 billion) profit and an average cost rate of 5.4 percent due to high logistics costs (1). Under Multi-invoice Systems in China, drugs are delivered through national, provincial, local agents, with invoiced and prices going up each time (2). The Two-invoice System, which comes up in April 2016, is China's first drug distribution policy aiming to compress circulation, and reduce unrealistically high prices. There will be only two invoices, one from production enterprises to distributors, the other from distributors to medical institutions. The objective of this study is to evaluate the effect of the Two-invoice System on drug distribution and price in China.

#### **METHODS:**

We conducted a literature review of relevant articles and policies in five provinces on China National Knowledge Infrastructure (CNKI), Wanfang, PubMed and government websites. We conducted in-depth individual interviews for qualitative research on policy mechanisms with two government officials and four drug production and distribution enterprise managers. The quantitative study on policy effect measured indicators, namely, number of distributors,