

CONCLUSIONS:

Patient aspects can be incorporated into rapid HTAs using systematic and pragmatic approaches to identifying and summarizing qualitative literature. Future rapid HTAs by SHTG may include syntheses of qualitative studies rather than summaries. Patient submissions are also being piloted as a method of collating patient experiences.

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PD22 Behavioral Factors Mediating Between Socioeconomic Status And Obesity

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INTRODUCTION:

China has the largest obese population in the world and its prevalence is increasing faster and faster. The researchers are investigating the association between the socioeconomic status (SES) and obesity in several ways. However, SES may not only play a direct impact on obesity but influences health behaviors which, in turn, affect obesity. The mediating factors have rarely been studied. This study investigates the association between SES and obesity mediated by behavioral factors among adults in China.

METHODS:

The longitudinal data including 110,449 individuals were obtained from the eight waves of the China Health and Nutrition Survey from 1991–2011. The outcome of obesity was measured using Body Mass Index (BMI). The SES factors include education and income (low, medium and high). Mediating factors include alcohol consumption, smoking status, diet and physical activity. A variety of statistical models were used to investigate the association between SES and obesity. Age/gender-adjusted prevalence of obesity was calculated and multiple-logistic regression was used.

RESULTS:

To some extent, SES influenced BMI directly, positively in men and inversely in women, respectively. SES may also operate through behavioral factors. These

associations were not always straightforward, and changes in SES might create some offsetting risks. Behavioral factors including alcohol consumption, smoking status, diet and physical activity were associated with SES indicators in all groups. In addition, the prevalence was higher in urban areas than rural areas in China. Several pathways for different SES groups leading to obesity were simulated.

CONCLUSIONS:

Higher SES groups are more likely to have higher BMI compared to lower SES groups. Different SES groups have different significant mediating risk factors. The pathways between SES and obesity are complex. This study suggests that it is necessary to apply different interventions to different SES individuals especially focused on the disadvantaged populations according to their different behaviors and preference.

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PD24 Data Collection By Patient Groups To Provide Patient Input

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INTRODUCTION:

The Canadian Agency for Drugs and Technologies in Health (CADTH) Common Drug Review and pan-Canadian Oncology Drug Review programs incorporate perspectives and experiences from patients and family members who might be affected by the resulting funding recommendation. Perspectives are provided by patient groups who use different approaches to gather patient input.

METHODS:

We analyzed a random sample of ninety-three patient input submissions, drawn from a sampling frame of 532 submissions given to CADTH between June 2010 and June 2016. We looked at how groups described their information gathering methods in the original submissions or the published Clinical Guidance Reports.

RESULTS:

Approaches were categorized according to whether they involved primary (n = 86) or secondary data