call after the prioritization workshop and the search for evidence in the literature. The call involved an amount of BRL one million (USD 280,442), and seventeen research projects were financed, including two systematic reviews, seven rapid reviews, and eight economic evaluations.

## **CONCLUSIONS:**

The promotion of research by the BMH has enabled the search for scientific evidence to support public policies and decision making in health services.

# OP125 Increasing Capacity For Utilization Of Health Technology Assessment

## **AUTHORS:**

John Vianney Amanya (jamanya21@gmail.com), Joshua Wamboga

# **INTRODUCTION:**

Increased capacity for utilization of Health Technology Assessment (HTA) is key to ensuring highimpact; affordable health technologies reach the people who need them most. It also enables an environment for research in access to lifesaving technologies and innovations. The number of people suffering from one or more chronic diseases is rapidly increasing and the existing systems of care are not adequately addressing this increase. Increased HTA visibility provides an opportunity for a formal connection of Health Technologies (HTs), building a new working relationship among patients and healthcare professionals, health system strengthening, engagement of patients /consumers and health care professionals for follow up on existing HTs, and assessing new Health Technology innovations.

#### **METHODS:**

We reviewed existing HTA literature, and hosted a meeting of fifty participants at the first HTA meeting representing different health stakeholders including patients. The meeting explored innovative synergies that addressed best practices in health policy and technological decision making, and opportunities for integrating HTA in Uganda's Health system.

#### **RESULTS:**

Induced practical skills in coordinating a number of uncoordinated health technologies to over forty participants, an HTA strategy developed to complement national HTA initiatives and to generate information and tools to facilitate the start of hospital-based HTA initiatives in hospitals countrywide and regionally, to improve quality and efficiency of current initiatives. An HTA association, "Uganda Association of Health Technology Assessment - UAHTA" was formed, and a work plan for piloting hospital based HTA was developed.

#### **CONCLUSIONS:**

A Health Technology Assessment (HTA) system will enable comprehensive patient-centered, integrated (as opposed to simultaneous but independent) assessment of complex health technologies. There is a need for increased capacity and partnerships towards evidence generation, and accountability measures.

# OP126 Shared Decision-Making Influences Patients' Adoption Of Stents In China

# **AUTHORS:**

Jian Ming (jming14@fudan.edu.cn), Yan Wei, Yingyao Chen, Jiayan Huang

#### **INTRODUCTION:**

Shared decision-making (SDM) is an essential component of patient-centered care, involving communication and discussions between physicians and patients on various options to meet their health needs. This study examines the current situation of patients' participation in decision-making in relation to the clinical application of drug-eluting stents (DES). Further, the impact of patients' involvement in decision-making on patients' adoption of DES was analyzed, with a view to providing research outcomes to guide clinical practice.

# **METHODS:**

A cross-sectional study was conducted from July to December 2016 in selected hospitals in Fujian Province, Sichuan Province, and Shanghai in China. Patients with coronary heart disease completed a survey, which contained the 9-item Shared Decision-Making Questionnaire (SDM-Q-9) about satisfaction with decision-making processes, and questions on DES. Data were analyzed with cluster analysis, correlation analysis, multivariate logistic regression, and multivariate linear regression.

## **RESULTS:**

One hundred and seventy-nine patients with coronary heart disease from 15 hospitals in the three regions completed the questionnaire. There were good validity and reliability for SDM-Q-9, with Cronbach's alpha as 0.96 and intra-class correlations 0.59–0.79 (all P < 0.01). Among these respondents, 42.1 percent adopted DES, 83.4 percent were supportive of SDM and 61.33 percent thought they had better communication with physicians regarding decision-making. Patients' level of SDM involvement was found to be positively associated with their satisfaction with the decision-making process (P < 0.001) and their adoption of DES (P < 0.05). Also, satisfaction with shared decision-making regarding treatment was positively associated with adoption of DES (P < 0.001).

## **CONCLUSIONS:**

Most of the patients with coronary heart disease preferred SDM, and SDM was found to be an important predictor of patients' satisfaction with decision-making processes and adoption of DES. Better communication between physicians and patients is needed in order to improve patients' satisfaction and promote the appropriate use of DES technology in China.

# OP128 Evaluating The NPS MedicineWise Medicines Information Phone Service

# **AUTHORS:**

Lauren Humphreys (jdartnell@nps.org.au), Nerida Packham, Suzanne Blogg, Nicole Gonzaga, Scott Dickinson, Renee Granger

## **INTRODUCTION:**

The NPS MedicineWise pharmacist-delivered phone service, Medicines Line, aims to provide evidence-based medicines information to consumers. We evaluated outcomes of the Medicines Line, including common

consumer inquiries and resultant decision-making, and explored consumer motivations for seeking medicines information.

#### **METHODS:**

The evaluation involved conducting paper-based and telephone surveys of a sample of 200 Medicines Line callers, and semi-structured telephone interviews of a subset of twenty callers. Quantitative data were analyzed using SPSS software. Qualitative data were analyzed using content analysis.

# **RESULTS:**

Preliminary analysis found that the majority of callers thought the Medicines Line had improved their knowledge (ninety-six percent), confidence (eightytwo percent) and decision-making (eighty-nine percent). The most common reasons for calling the Medicines Line were inquiries about side effects or medicine compatibility. The medicines most commonly asked about were antidepressants (twenty percent), analgesics (thirteen percent) and antibiotics (nine percent). Questions about sertraline accounted for thirty-six percent of antidepressant inquiries. Interview themes regarding motivations for using the service included: trust; efficiency and convenience; specialized drug knowledge; and reporting adverse drug reactions to protect others from medicinerelated harm. Medicines Line was perceived to be especially useful as an alternative to family physician or specialist consultations when consumers had a nonurgent inquiry about a medicine, and as a service to provide medicines information in remote communities.

## **CONCLUSIONS:**

These results indicate that pharmacist-delivered medicines information telephone services are an effective and efficient way of handling medicines inquiries. Medicines information telephone services are effective in improving health literacy, by increasing callers' knowledge and confidence to source evidence-based medicines information and improving their ability to make informed decisions about medicine use. This evaluation identified knowledge gaps in medicine side effects and antidepressant use. Identifying such knowledge gaps may be useful in informing future health professional education programs, community campaigns, and shared decision-making resources.