PRM11
ANÁLISE DE SIGNIFICÂNCIA DO BANCO DE DADOS DA SAÚDE SUPLEMENTAR – SS NO BRASIL, SOB AS PERSPECTIVAS DOS ATENDIMENTOS EM HOSPITAIS E DEMAIS PRESTADORES PARTICULARES

Rodrigues SR[1], Paiva EC[2], Paloni Ed[2], Rocha ML[2], Neto LA[2]
[1]Universidade de São Paulo, São Paulo, Brazil, [2]Orizon, Barueri, Brazil

INTRODUCTION: A constante evolução das novas tecnologias disponíveis no mercado da saúde evidenciou a necessidade de se analisar a viabilidade da incorporação destas técnicas tanto no sistema público quanto na iniciativa privada. Neste contexto, as bases de dados privadas surgem como uma alternativa no oferecimento de serviços e informações em relação aos custos, benefícios e eficiência acerca das novas técnicas em saúde, baseando-se nas resoluções da Agência Nacional de Saúde – ANS e os parâmetros de utilização das operadoras de saúde como referência. **OBJECTIVES:** Avaliar a representatividade e completude das informações geridas pela Orizon, em relação à Saúde Suplementar – SS no Brasil. **METHODS:** Análise observacional quantitativa da base de dados da Saúde Suplementar – SS no Brasil geridos pela Orizon em relação aos dados da ANS. A completude dos campos das informações recebidas foi analisada a partir dos dados quantitativos relacionados à quantidade de vidas e dados durante o período de janeiro de 2016 a dezembro de 2016. **RESULTS:** No ano de 2016, a base de dados de contas médicas da Orizon apresentou dados de 12 MM de vidas na Saúde Suplementar, representando aproximadamente 25% dentre as 47.8 MM vidas da ANS, sendo a distribuição por região: 14% no Norte, 21% no Nordeste, 18% no Centro Oeste, 26% no Sudeste e 9% no Sul. Os dados de completude das guias de Internação e Ambulatorial como: sexo e idade do beneficiário, CID 10 da patologia, descrição das despesas envolvendo o consumo de mat/med, procedimentos, exames, taxas e outros gastos, tipo de atendimento (eletivo/urgência) e tipo alta, serão apresentados no painel. **CONCLUSIONS:** A representatividade e completude de campos apresentados pela base de dados de contas médicas da Orizon demonstraram ser satisfatório como também o grande potencial para a utilização em estudos em farmacoeconomia, mesmo com as limitações inerentes à regulamentação vigente.

PRM12
BIBLIOMETRIC ANALYSIS OF THE WORLDWIDE RESEARCH PRODUCTIVITY ON ORAL HEALTH RELATED QUALITY OF LIFE (OHRQL)

Hernández-Vásquez A[1], Huarez B[2], Azañedo D[3]
[1]Universidad Privada del Norte, Lima, Peru, [2]Instituto Nacional de Salud, Lima, Peru, [3]Centro de Estudios de Población, Universidad Católica los Ángeles de Chimbote, Chimbote, Peru

OBJECTIVES: Worldwide scientific production on Oral Health Related Quality of Life (OHRQL) has not been explored. The objective of this study was to perform a bibliometric analysis of global research productivity on OHRQL. **METHODS:** An electronic search for original articles was conducted using the Web of Science database, with the terms: "Oral Health Related Quality of Life" AND "OHRQL". Bibliometric indicators were investigated by analyzing annual research output, languages, countries, journals, authors, institutions, and citations. **RESULTS:** Bibliographic research retrieved 1099 papers for the period 1996-2016. The yearly quantitative distributions of articles were highly correlated (R2=0.90). The mostly used languages were English (1084 articles), Portuguese (6 articles) and German (5 articles). Retrieved articles were published by 73 different countries. The largest contributors are the USA (182), Brazil (168), and England (158). In Latin America (without Brazil), Peru (9), Chile (8), Mexico (5), and Colombia (2), were other countries with a scientific production. The articles were published in 188 journals. The top three journals which published the most articles were Community Dentistry and Oral Epidemiology (102), Health and Quality of Life Outcomes (48), and Journal of Oral Rehabilitation (47), responsible for 18% of the publication. The total number of authors for all articles was 2876. John MT. published the most documents in this field (49 articles), followed by Locker D. (43 articles), and McGrath C. (39 articles). The three most prolific institutions were University College London (62) University of Hong Kong (59) and University of Toronto (49). The citation count was 16430. Average citations per item were 14.95, and the h-index was 54. **CONCLUSIONS:** These results shown an idiomatic, regional and intraregional gap on OHRQL research production, and articles has been published in journals with high international reputation in Oral Health and QoL. Brazil has special contributions to the body of OHRQL.

PRM13
ASSESSING COMPARABILITY AND PATIENT PROFILE OF TWO CLAIMS DATABASES IN ONCOLOGY IN BRAZIL

Julian GS, Saad R, de Oliveira RW, MoreiraEd
Evidências - Kantar Health, São Paulo, Brazil

OBJECTIVES: In Brazil, digitalized real world data (RWD) sources are scarce. Some electronic medical records' (EMRs) systems are currently being implemented, but most of them are still in an early phase. EMRs and claim data have an important role in generating RWD (especially when compared with classical retrospective studies) due to their ability to compile data on large samples of patients and to speed up study conduction. This study aims to assess and compare the profile of patients from two different cancer claims databases in Brazil (Auditron and FOSP). **METHODS:** Auditron is an auditing claims database of the private healthcare setting and FOSP database includes all cancer diagnoses of 76 institutions in the state of São Paulo. In order to compare both databases, we considered only FOSP patients that underwent chemotherapy and/or hormone therapy, once imported data from Auditron referred exclusively to oncology prescriptions. For both FOSP and Auditron databases, we analyzed data for the year 2015 from the state of Sao Paulo. Descriptive analyses were performed based on the most common types of tumors. **RESULTS:** We identified 14,742 patients in FOSP database and 1,519 patients with 2,835 prescriptions in Auditron database. Among FOSP patients, 13,554 and 1,189 were from the public and private settings, respectively, while all Auditron patients were from the private setting. The most common cancer types were breast cancer (24.9%, n=3,662), prostate cancer (8.5%, n=1,254), and lung cancer (6.1%, n=892) in FOSP, and breast cancer (29.1%, n=823), prostate cancer (11.6%, n=328),

and myeloid leukemia (9.3%, n=263) in Auditron. **CONCLUSIONS:** Although limited to the state of Sao Paulo, FOSP database provides substantial information on cancer treatment, from a large number of patients. Auditron presents a larger geographic coverage on the country and more detailed information on prescriptions, while FOSP does not provide detailed information on prescriptions.

PRM14
WORLDWIDE RESEARCH PRODUCTIVITY ON BIOSIMILARS: A BIBLIOMETRIC ANALYSIS

Hernández-Vásquez A[1], Díaz-Seijas D[2]
[1]Universidad Privada del Norte, Lima, Peru, [2]Instituto Nacional Cardiovascular-INCOR-EsSalud, Lima, Peru

OBJECTIVES: Evaluation of worldwide scientific output on biosimilars has not been explored. Therefore, the objective of this study was to perform a bibliometric overview of global research productivity on biosimilars. **METHODS:** An electronic search for original articles was conducted using the Web of Science database, with the term "biosimilar". Bibliometric indicators were investigated by analyzing annual research output, languages, countries, journals, authors, institutions, citations, and funding agencies. **RESULTS:** Bibliographic research retrieved 501 papers for the period 2005-2016. The yearly quantitative distributions of articles were highly correlated (R2=0.88). The mostly used languages were English (475 articles), French (12 articles) and German (7 articles). Retrieved documents were published by 63 different countries. The largest contributors in absolute number of articles are the USA (160), Germany (75), and England (51). The articles were published in 140 journals. The top three journals which published the most of the biosimilars articles were Biodrugs, Mabs, and Biopharm International, responsible for 12% of the publication. The total number of authors for all articles was 2525. Chow, S.C. published the most documents in this field (14 articles), followed by Abraham, I. (8 articles), and Fareed, J., MacDonald, K., Rathore, A.S., and Schellenkens, H., all with six articles. A total of 19 articles were from Duke University, 18 corresponded to Amgen, Hexal AG and Pfizer, both with 12. The sum of the citations relates to articles published was 3332. Average citations per item were 6.65. Finally, Sandoz (33) and Pfizer (27) were the two major funding agencies of publications. **CONCLUSIONS:** In summary, biosimilars have been a hot topic in the last decade. Biosimilar therapies may help to reduce the healthcare costs with similar clinical outcomes, thereby more research is needed.

PRM15
VALIDAÇÃO DO MÉTODO SIMPLE EXPONENTIAL SMOOTHING WITH ADDITIVE PARA REALIZAÇÃO DE PREVISÕES DE GASTO COM IMPORTAÇÃO DE PRODUTOS FARMACÊUTICOS

Bernuci MP[1], Buzeti L[2], Bortolozzi F[3], Almeida IC[4]
[1]UniCesumar-ICETI, Maringa, Brazil, [2]UniCesumar, Maringa, Brazil, [3]UniCesumar/ICETI, Maringa, Brazil, [4]UniCesumar/ICETI, Maringá, Brazil

OBJECTIVES: Validar método para realização de previsões de gasto com importação de Produtos Farmacêuticos. **METHODS:** Para realizar a validação do método de previsões, foi aplicado o modelo de descoberta do conhecimento - Buzeti, baseado no Knowledge Discovery in Databases (KDD). **RESULTS:** Foi feita a escolha do método Simple Exponential Smoothing with additive erros - ETS(A,N,N) para realizar a previsão de 2016. Para tal, foram aplicadas quatro das cinco etapas descritas no modelo Buzeti: (1) Seleção de dados públicos do período de 2009 até 2015, disponibilizados pelo Sistema AliceWeb, de importação de fármacos do Capítulo 30 da Nomenclatura Comum do Mercosul (Produtos farmacêuticos); (2) Pré-processamento e limpeza dos dados, com a execução de processos de eliminação, redução e modificação no banco de dados; (3) Transformação dos dados para realizar a análise desses por meio de séries temporais; (4) Mineração de dados onde foram realizados as seguintes fases: (a) análise de séries temporais com linha de tendência, (b) estudo de correlação entre as variáveis dólar e Kg das mercadorias, (c) classificação das correlações das mercadorias e a frequência relativa destas; (d) relação das mercadorias cujas variáveis dólar e Kg possuem correlações baixas ou negativas; (e) foi escolhido o método ETS(A,N,N) dentre os métodos Sazonal Naïve, Média, Naïve, Holt Alpha, SES e ARIMA(1,1,1) para realizar a previsão, confrontando a simulação do ano de 2015 com dados reais deste ano e, finalmente, (f) realização da previsão para gastos em dólar no ano de 2016. **CONCLUSIONS:** Foi validado o método ETS(A,N,N) como o mais adequado para realizar a simulação de previsões de gasto com importação de produtos farmacêuticos. Para tal, foi necessário aplicar o modelo de descoberta do conhecimento - Buzeti, que permitiu a seleção, o pré-processamento e limpeza, a transformação e a mineração de dados públicos disponibilizados pelo sistema AliceWeb.

PRM16
COST OF ACUTE MYOCARDIAL INFARCTION IN COLOMBIA (2014)

Dávila FA, Barajas FD, Valenzuela E
Sanofi, Bogotá, Colombia

OBJECTIVES: To estimate Acute Myocardial Infarction (AMI) risk and cost of illness for Colombia During 2014 from third payer perspective. **METHODS:** Data bases from the National Administrative Department of Statistics (DANE), Health system (SISPRO), tariff manual of medical, surgical and hospital procedures (SOAT) and the system of information of prices of medicines (SISMED) were integrated to evaluate the Incidence, mortality and cost (from a case base) of the AMI acute management (ER and ICU) during 2014.Incidence of AMI were estimated from the number of patients seen in the emergency department during 2014 (ICD I20 to I25), mortality from non-fetal Deaths of DANE; costs of care from the resources consumption reported on the Survey of management strategies in Acute Coronary Syndrome on the Access study and cost from SISMED and SOAT databases. **RESULTS:** During 2014, 10,643 people were treated at the emergency department with AMI, concentrating 1.45 events by person (15,428 attentions by AMI). With an incidence of 4.8 x 10,000 inhabitants. The overall mortality rate for this entity was 10.1 x 100,000 inhabitants older than 18 year of age.The estimated costs of care (given the consumption risk from the Access Study) for the year 2014 were $ 13,883,087,744 COP or $ 5,675,021