pumps. Most initiatives included nursing services (n=47) and telepharmacy/home delivery (n=24). Thirty-five articles evaluated the impact of home services in treatment adherence (n=9), PROs (n=23) and/or economic outcomes (n=14). ***Conclusions:*** In general, findings showed a positive impact of home interventions on patients' adherence to medication, satisfaction and quality of life. Additionally, some of the evaluations outlined that HBC led to substantial health care costs savings in comparison with hospital setting.

### PMU47
### PATIENT SATISFACTION AND WILLINGNESS TO PAY FOR PRIMARY DENTAL CARE SERVICES IN THE PREFERCTURE OF DRAMA, GREECE

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***Objectives:*** Patients have an increasingly active role in assessing dental care provided at the primary and secondary care system and participate in decision making process. The aim of this study is to evaluate the satisfaction of users of public dental services, the factors that affect them, and their willingness to pay for various dental operations in the Prefecture of Drama. ***Methods:*** A cross-sectional survey was conducted from January 1st to end of February 2020 (two month period), in the 90% of the public dental care services of the prefecture of Drama, where primary dental care is provided. A structured questionnaire was used comprising of 51 questions, (5-point Likert scale), covering demographic, socio-economic, dental and nursing satisfaction, administrative services, facilities, accessibility, overall satisfaction and willingness to pay. ***Results:*** The 40% of the sample visited dental services for fillings, and only 13% visited for preventive screening. Patient satisfaction was particularly high (92%). The majority of the sample, 97% would visit again public dental services. A high proportion 51% would prefer to visit the private dental sector. Regarding the willingness to pay, the 75% of the population would be willing to pay a fee for dental prostheses with an average price of 124.3 ± 75.3 €, a 72% would pay 484.7 ± 367.5 € for orthodontic work and the 73% would pay on average 62.2 ± 65.7 € for endodontic work. The results of the multivariate analysis showed that income is not a factor influencing the willingness to pay, while people with a higher educational level would pay higher amount of money. ***Conclusions:*** Patient satisfaction in public primary dental care services in prefecture of Drama is very high. Impressions of dental care are getting the highest rate and facilities are getting the lower rate of satisfaction.

### PMU48
### TRENDS IN ANTIEMETIC USE IN HEMATOLOGY-ONCOLOGY BASED ON CANCEROLOGY DATA IN FRANCE

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***Objectives:*** The last two decades witnessed significant advances in antiemetic therapy for prevention of chemotherapy-induced nausea and vomiting (CINV). The aim of this study is to describe the trends in antiemetic drugs use in treated cancer patients between 2007 and 2017. ***Methods:*** This cross-sectional study used data from Cancerology database in France. Physicians were asked to complete case report forms for treated cancer patients. Data were extrapolated to the entire French population based on hospital activity level and type of hospital. Analyses focused on antiemetic medication use and emetogenicity of antineoplastic drugs as defined according to the European Society of Medical Oncology and the Multinational Association of Supportive Care in Cancer classification system. ***Results:*** In the overall population of 335,671 patients in 2007 and 428,242 patients in 2017, 5-hydroxytryptamine type-3 receptor antagonists (5HT3-RAs)/setrons were the most commonly prescribed antiemetic drugs. Between 2007 and 2017, antiemetic drugs use decreased for all types of drugs except aprepitant. Specifically, 5HT3-RAs/setrons use decreased from 71.7% to 51.2%, classic antiemetic drugs decreased from 39.4% to 21.2%, and corticosteroids indicated for CINV prophylaxis decreased from 56.0% to 36.0%. Aprepitant use increased from 14.3% to 31.3%. Use of low emetogenic antineoplastic treatment regimens increased by 2.8%, and that of minimally, moderately and highly emetogenic regimens decreased by 0.9%, 3.0% and 2.5% respectively. The overall trends in antiemetic therapy use were similar across all cancer types except for kidney cancer where corticosteroids use increased. Antiemetic prophylaxis decreased in myeloma, melanoma, bone cancer and soft-tissue sarcoma for all drugs including aprepitant and increased in uterus cancer for all drugs except classic antiemetic agents. ***Conclusions:*** According to our French Cancerology data, antiemetic drugs use has decreased but remains significant despite the emergence of targeted therapy and immunotherapy with low emetogenic risk in cancer treatment.

### PMU49
### INCORPORATING CLINICAL NOTES TO UNCOVER ETIOLOGICAL PATTERNS IN SURGICAL ICU PATIENTS WITH PRESSURE INJURIES

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***Objectives:*** Current guidelines for hospital-acquired pressure injury (HAPrI) prevention, management, and care are built on the prevailing thought of "outside-in" etiology, i.e., that localized damage to the skin as a result of external pressure. However, some researchers postulate that HAPrIs are instead a type of organ system failure caused from the "inside-out" by inadequate delivery of oxygen-rich blood, resulting in tissue ischemia. The purpose of this study was to use data from progress notes to determine whether HAPrI occurred in a temporal pattern with other types of organ system failure in critical care patients. ***Methods:*** We analyzed intake history and physical (HP) and progress notes from 5,101 critical care patients, including 399 patients with HAPrI. Notes were linked to (EHR) data on patients and both quantified and parsed via key phrases and natural language processing (NLP). ***Results:*** For these 5,101 patients, we linked 4,983 history and physical notes and 293,244 progress notes. Patients with HAPrIs had significantly more HP notes ($p<0.0001$) and progress notes ($p<0.0001$). Additionally, we identified differential distributions of mentions of organ system failure and disease progression within 72 hours of HAPrI formation. ***Conclusions:*** Although not conclusive, organ system failure and HAPrI may share a common etiologic pathway, likely related to altered delivery of oxygen-rich blood (ischemia) and subsequent tissue damage. HAPrI may require prevention approaches beyond relieving local pressure. Work is still ongoing to cluster and classify organ system mentions and longitudinal progress.

## Multiple Diseases - Health Technology Assessment

### PMU50
### A REVIEW OF EXCEPTIONAL CIRCUMSTANCES MARKETING AUTHORISATIONS GRANTED BY THE EUROPEAN MEDICINES AGENCY

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***Objectives:*** Certain conditions are so rare that it is not possible to collect comprehensive efficacy and safety data for new therapies. In these situations, or where it is unethical or unfeasible to collect such information, marketing authorization (MA) under exceptional circumstances (EC) may be a pathway to market approval in Europe. This study reviewed therapeutic medicines authorised under EC, and the subsequent health technology assessment (HTA) decisions made in England by the National Institute for Health and Care Excellence (NICE). ***Methods:*** Medicines currently licensed under EC were identified from the EMA website. Data on indication, orphan status, clinical trial design, and post-authorisation obligations were extracted from the European Public Assessment Reports. HTA decisions were identified from the NICE website. ***Results:*** Twenty-eight therapeutic products granted EC authorisation were identified. Five of these were withdrawn: three for commercial reasons by the marketing authorisation holder, one for being unable to provide the additional efficacy and safety data requested, and one for being unable to reproduce clinical efficacy in a further study. The majority were for treatment of genetic disorders (75%) or cancers (14%), and 82% of therapies were designated orphans at the time of MA. At least one randomized controlled trial was included in 54% (15/28) of authorisations as a pivotal clinical trial; 93% of these were placebo-controlled. NICE has appraised only 14% (4/28) of the therapies authorised through EC, all of which reached positive decisions, and all of which were for paediatric conditions. ***Conclusions:*** The exceptional circumstances pathway provides an opportunity for the approval of drugs for which applicants cannot reasonably be expected to generate comprehensive efficacy and safety data, such as for very rare genetic disorders. Those drugs assessed by NICE have been approved for use, and several more have NICE guidance currently under development.

### PMU51
### MAPPING OF APPROVAL AND REIMBURSEMENT PATHWAYS FOR ORPHAN DRUGS - AN ACCESS ANALYSIS OF MUSCULOSKELETAL DISEASE THERAPIES

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***Objectives:*** In many countries, approval and reimbursement for orphan drugs (ODs) can be a challenging process, leaving patients waiting a long time for essential treatments. We consider access journeys in the UK and Germany – countries with well-defined OD access pathways – for three rare musculoskeletal disease (MD) therapies. ***Methods:*** MD was considered because of the readily available range of approved ODs and reimbursement decision data. The therapies were selected because their approval pathways were considered representative of the OD reimbursement process. We conducted desk research reviewing Health Technology Assessments (HTAs) and reimbursement decision documents for asfotase alfa, burosumab-twza and nusinersen in the UK and Germany. Mapping out the different pathways taken by each drug per country, we identified any challenges encountered. With insight into each treatment's journey we further compared the processes across both countries, outlining key areas for consideration for future OD launches. ***Results:*** Germany provided a single reimbursement pathway, while the UK offered three; the Highly Specialised Technologies pathway being most common in the latter. OD pricing in Germany was directed by statute, whereas the UK offered four different price negotiation routes. Timeframes for approval were shorter in Germany, where two out of three therapies gained approval within 12 months. In contrast,