

Results. Among the respondents the following eating habits were reported:

- (i) Thirty-one percent drank milk and twenty-eight percent consumed chocolate four to six times per week;
- (ii) Forty-three percent consumed fast food least seven times per week; and
- (iii) Forty-two percent ate vegetables and thirty-four percent ate fruits one to three times per week.

In terms of oral hygiene practices, sixty-one percent of respondents used toothpaste and thirty-nine percent used tooth powder. Seventy-eight percent of respondents brushed their teeth once a day and twenty-four percent brushed twice daily. The mean number of decayed, missing (due to caries), and filled permanent teeth was 1.47.

Conclusions. The relationship between oral health, dietary practices, nutritional status, and general health is complex, with many interrelated factors. To help children develop healthy eating patterns from an early age, it is important that the food and eating patterns to which they are exposed, both inside and outside the home, promote positive attitudes to good nutrition.

PP188 Prevalence And Severity Of Erectile Dysfunction In Patients With Benign Prostatic Hyperplasia In China: A Cross-Sectional Survey

Liqun Zhou, Zhengcun Pei, Xingqiao Wen, Yanlei Zhang (zhang_yan_lei@lilly.com), Peng Li and Siyan Zhan

Introduction. Erectile dysfunction (ED) and benign prostatic hyperplasia (BPH) are highly prevalent among aging men. However, the rate of coexistence of these two conditions in China is still unclear, especially among men aged 45 to 60 years. Instruments such as the abbreviated five-item version of the International Index of Erectile Function (IIEF-5) and the International Prostate Symptom Score (IPSS) can be used to determine the presence of ED and the symptoms and severity of BPH, respectively. This study aimed to estimate the prevalence of ED in men with BPH and to assess its impact on the quality of life (QoL) of these patients.

Methods. Between October 2018 and March 2019 we enrolled 650 patients aged 45 to 65 years who were diagnosed with BPH by a urologist in nine first- and second-tier cities in China. Information on patients' demographics, lifestyle, comorbidities, and medication use was collected through an electronic clinical outcome assessment tool. Patients with an IIEF-5 score of less than twenty-two were considered to have ED. The IPSS and the five-level EuroQol questionnaire (EQ-5D-5L) were used to assess BPH severity and overall health-related QoL.

Results. We enrolled 650 patients with BPH. Of these, only the 607 men who reported sexual intercourse attempts (mean age of 56.6 years, standard deviation 5.5) were included in the analysis because it was assumed that the other patients did not have ED. Signs of ED were present in ninety-seven percent of patients

(IIEF-5 score < 22), and eighty-four percent had at least mild to moderate impairment (IIEF score < 17). Up to nineteen percent reported having physician-diagnosed ED previously, and twenty-eight percent had used medication for ED in the past six months. Compared to men without ED, those with ED and BPH had higher IPSS scores (13.2 versus 6.7, $p < 0.05$) and lower EQ-5D-5L scores (0.90 versus 0.97, $p < 0.05$).

Conclusions. Although the prevalence of ED in men with BPH in China is high, it is still underdiagnosed and undertreated. Co-existing ED in patients with BPH is associated with more severe BPH symptoms and lower quality of life.

PP189 Operational Evaluations Of Laminar Flow Cabinets

Benicio Grossling Vallejos (beniciogrossling@hotmail.com), Ronald Rivas and Pedro Galván

Introduction. Laminar flow cabinets (LFC) are designed to maintain an area free of particles and contaminants that could damage the environment during the preparation of sensitive materials. Several regulations detail the types and frequency of tests that must be performed to ensure the proper functioning of LFCs. The objective of this work was to evaluate the operational and functional status of LFCs.

Methods. A descriptive study was carried out in which three tests were selected for evaluating LFCs: the high-efficiency particulate air (HEPA) filter integrity test; the air speed and uniformity test; and the general physical verification test. In selecting these tests, we relied on recommendations established in international standards and the manufacturers' technical manuals.

Results. During testing it was possible to verify the existence of leaks in the periphery of the HEPA filters due to a mismatch in their assembly, as well as a poor seal in the side panels of the cabinet through which particles were entering the work area. It was also discovered that the equipment lighting system (fluorescent tubes) was inadequate.

Conclusions. The use of these tests was very important for detecting certain faults in the equipment, which allowed us to introduce corrective actions to maintain sterile conditions in the cabinet. It is recommended to include these tests in the maintenance regimen of LFCs to pre-empt future failures.

PP193 Research On The Correlation Mechanism Between The Psychological Contract Of Physicians In Public Hospitals And Their Medical Professionalism

Chao Lyu (19211020103@fudan.edu.cn) and Ping Zhou

Introduction. Guiding and motivating doctors' attitudes and behaviors in the public welfare of public hospitals is the key to promoting medical reform. This study explored the correlation

between the hospital responsibilities perceived by physicians and their medical professionalism practices in Chinese public hospitals, and the moderating effects of variables such as sex, hospital level, working period, department, and reason for career choice on the correlation model.

Methods. A pre-developed, reliable, and valid scale for the physicians' psychological contract was developed. Survey data from 123 public hospitals in three provinces in the east, central, and west areas of China were analyzed. The authors constructed and tested the correlation mechanism model and then analyzed the effects of particular variables.

Results. The fulfillment of hospital ideological responsibility has a significant positive effect on physicians' medical professionalism practices, with occupational satisfaction mediating the effect. In addition, hospital transactional, developmental, and relational responsibility can improve physicians' medical professionalism practices through fairness perception and work pleasure. Hospital level, working period, department, and reason for career choice had a moderating effect on the correlation mechanism model, with the effects varying between different paths.

Conclusions. The fulfillment of hospital responsibilities can have a positive effect on physicians' practices of medical professionalism, especially in the domain of ideological responsibility where the largest and most direct impact was observed. Furthermore, the results suggested that hospital administrators need to consider the differences between various types of physicians in order to improve the effects of guidance and motivation in these health professionals.

PP194 Research On The Correlation Mechanism Between The Psychological Contract Of Physicians In Public Hospitals And Their Turnover Intention

Chao Lyu (19211020103@fudan.edu.cn) and Ping Zhou

Introduction. Guiding and motivating doctors' attitudes and behaviors in the public welfare of public hospitals is the key to promoting medical reform. This study explored the correlation between the hospital responsibilities perceived by physicians and their turnover intention in Chinese public hospitals, as well as the moderating effects of variables such as sex, hospital level, working period, department, and reason for career choice on the correlation models.

Methods. A pre-developed, reliable, and valid scale for the physicians' psychological contract was developed. Survey data from 123 public hospitals in three provinces in the east, central, and west areas of China were analyzed. The authors constructed and tested the correlation mechanism model and then analyzed the effects of particular variables.

Results. The fulfillment of hospital transactional and developmental responsibility had a significant negative effect on the intent of physicians to leave the hospital and front-line clinical practice, respectively. Working pleasure, fairness perception, and occupational satisfaction were mediator variables in the impact.

In addition, hospital level, working period, department, and reason for career choice had a moderating effect on the correlation mechanism model, with the effects varying between different paths.

Conclusions. The fulfillment of hospital transactional responsibility had a more negative effect on the intent of physicians to leave the hospital than other responsibilities, whereas fulfillment of hospital developmental responsibility had a more negative impact on the intent of physicians to leave front-line clinical practice. Furthermore, the results suggested that hospital administrators need to consider the differences between various types of physicians in order to improve the effects of guidance and motivation in these health professionals.

PP229 Surrogate Outcomes In Health Technology Assessments Of Oncology Drugs: The Osimertinib Case

Milton Rodriguez-Zuniga (milton_rz@hotmail.com), Paola Rivera-Ramirez and Fabian Fiestas-Saldarriaga

Introduction. Decision making in publicly funded healthcare systems must rely on patient-relevant outcomes that directly measure clinical benefit, such as overall survival and quality of life (QoL). However, studies that support market authorization of oncology drugs usually assess surrogate outcomes, without having previously demonstrated that these intermediate outcomes reliably predict clinical outcomes. As part of an HTA process, we evaluated the clinical benefit of osimertinib, compared with platinum-pemetrexed combination chemotherapy, in patients with epidermal growth factor receptor (EGFR) T790M mutation-positive advanced non-small cell lung cancer (NSCLC) that has progressed after first-line EGFR tyrosine kinase inhibitor (TKI) therapy.

Methods. We conducted a systematic search of the PubMed database for randomized controlled trials (RCT) published from inception to January 2019. The clinical outcomes of interest were overall survival and QoL. Where trials reported surrogate outcomes, we conducted additional PubMed searches for evidence of validity for predicting clinical outcomes and used guidance on surrogate outcome validation in oncology from the Institute for Quality and Efficiency in Health Care.

Results. Evidence on osimertinib, compared with chemotherapy, for patients with T790M-positive advanced NSCLC that has progressed after EGFR-TKI therapy was obtained from the AURA3 trial. In this study, overall survival data were immature and the results for QoL and symptom domains were not clinically meaningful. In addition, median progression-free survival (PFS) was six months longer for osimertinib than for chemotherapy. However, to date, no study has demonstrated that PFS reliably predicts longer survival or better QoL.

Conclusions. Our HTA suggested that, unless proven, PFS should not be used as a valid surrogate outcome for decision making in public health. For example, the results of the AURA3 trial showed that osimertinib has an effect on the surrogate outcome of PFS in patients with EGFR T790M-positive advanced NSCLC that has progressed after first-line EGFR-TKI therapy, but not on the