

2.8); average cost of \$312 (median: \$311) per visit. Most (60%) visits occurred from December-May. A total of 7743 ED hours was expended for these visits at a cumulative cost of roughly \$515,000 for one year (average \$429/patient). **CONCLUSIONS:** Only a small percentage of ED visits in one year are for non-emergency problems for homeless persons; however, a considerable cost is generated for problems that could be treated in a less intensive setting.

**PHP31****SAFETY NET ACTIVITIES STRUCTURAL CHARACTERISTICS & MEMBERSHIP IN LOCAL HOSPITAL SYSTEMS**Khan N

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During the 1990's, local hospital systems grew to dominate most urban hospital markets. The systems helped member hospitals' protect against powerful hospitals' rival and growing threat from managed care organizations. If hospitals that serve vulnerable populations, also known as "safety net hospitals", had not joined the systems it is likely that they would have found themselves at a severe competitive disadvantage, threatening the survival of these facilities. **OBJECTIVE:** To examine the ability of urban safety net hospitals to join a local multi-hospital system and to study the determinants of system formation. Primary data sources were the Annual Hospital Survey from the American Hospital Association and Williamson Institute multi-hospital system data for years 1990, 1995 and 2000. Other sources of data included InterStudy Regional Market Analysis database, SMG Marketing Group data, US Census of population and housing data, and hospital discharge data from the Hospital Market Service Area Files and Medicare Provider Analysis and Review file (MedPAR). **METHODS:** Logistic regression analyses were performed to examine local system formation by safety net hospitals. Standard errors were adjusted for clustering on hospital to account for repeated observation. Independent variables included safety net characteristics, factors that measure market forces (e.g., managed care penetration), and hospitals' characteristics (e.g., size, teaching status). **RESULTS:** In 1990, 22% of the hospitals were in a local multi-hospital cluster and by 2000 50% of all urban hospitals in the study were in local multi-hospital systems. The results indicate that safety net activities, especially Medicaid patient load, decrease hospitals' membership in systems. **CONCLUSIONS:** Participation in a local hospital system is viewed as a key element in a strategy to respond to the pressures generated by the managed care industry; a lower involvement of safety net hospitals in the system is indicative of the competitive disadvantage of these hospitals.

**PHP32****TRENDS AND OUTCOMES ASSOCIATE WITH DTCA PRINT SUMMARY FORMATS: A FOUR YEAR STUDY OF PRINT ADS**Sansgiry SS<sup>1</sup>, Kawatkar AA<sup>1</sup>, Chanda S<sup>1</sup>, Jayawant S<sup>2</sup>, Sail K<sup>1</sup><sup>1</sup>University of Houston, Houston, TX, USA; <sup>2</sup>University of Houston College of Pharmacy, Houston, TX, USA

**OBJECTIVES:** To evaluate the trends and changes in the print summary formats of direct-to-consumer prescription drug advertisements (DTCA) in consumer magazines. **METHODS:** Print advertisements appearing in the National Geographic magazine from the period January 2000 to October 2003 were analyzed in this study. Data on advertisement formats, drugs advertised, and manufacturers were collected, coded, and analyzed. National Geographic magazine was selected because of its worldwide readership and appeal. **RESULTS:** A total of 128 advertisements were identified. The print DTCA advertised

included 16 drug products by 9 manufacturers and two different types of print summary formats. The manufacturers accounting for most of the ads were Pfizer (28.91%) followed by GlaxoSmithKline (21.88%), Merck (15.63%) and Aventis (14.84%). Results of the analysis showed that less than half (43.75%) of the print DTCA's appearing in National Geographic were of the new easy to understand format. However, only four drugs were advertised with the new summary format, namely Avandia (15.63%), Viagra (14.06%), Vioxx (12.50%) and Singulair (1.56%). Trend analysis showed that in the year 2000, the percentage of print ads with the new format was 54%, which dropped to 40% in 2001. In 2002, it further dropped to 36%, but has risen to 47% in the year 2003. **CONCLUSIONS:** Companies that have adopted the new format have not done so universally for all their products. These new print DTCA summaries by being user friendly may induce positive attitudes toward the product, thus leading consumers to request more information regarding such drugs from physicians and pharmacists. Further studies are needed to evaluate consumer comprehension with the new summary format in print DTCA.

**PHP33****UTILITY OF MEDIA ON HEALTH PROMOTION AND SELF-MEDICATION**Tasic D<sup>1</sup>, Mladenovska D<sup>2</sup>, Tasic L<sup>1</sup><sup>1</sup>Faculty of Pharmacy, Belgrade University, Belgrade, Serbia and Montenegro; <sup>2</sup>Public Health Center Vrsac, Vrsac, Serbia and Montenegro

**OBJECTIVES:** Concept of self-medication and increased personal responsibility on health was relatively new in Serbia and SEE country. A different media and information resources could be very useful as a tools in promotion of health, drug and self-medication (HDSM). The goals of this investigation were the utility of media as information sources in comparison with health professionals infoserivces items on promotion of HDSM in Serbia population. **METHODS:** The questionnaire with 11 questions was spreaded through public pharmacy in tree provinces of Serbia (Vršac, Belgrade, Kragujevac). The questions included observation of citizen regard: type of media channel; trust on media health information; process of checking information; satisfaction with information; useable of OTC drug news ect. The survey included the 300 people, respectively. **RESULTS:** General analyses of all answers from the tree Serbian provinces showed simillarity. The public trust on media (main media TV, afterthat newspapers) health informations is 66%, and satisfaction 61% . The media channels were explored 71% of his possibility to promote HDSM. In process of selfmedication the valuability and utility of drug product information from media have been several time used (43%), useless (57%) in personal health treatment. Only 12% of population used the internet as a source of HDSM. The main source of informations were health professionals (phisicians and pharmacist) and 83% of Serbian citizens before the selfmedication have had consultation with them. **CONCLUSIONS:** Utility of different media (particular TV) on promotion of HDSM in Serbia was well, but no doubtless on health professionals consultation before the selfmedication.

**PHP34****AN ASSESSMENT OF THE ASSOCIATION BETWEEN UNDERLYING WORKER MEDICAL CONDITIONS AND WORKER ABSENTEEISM IN THE US**Mavros P<sup>1</sup>, Pietri G<sup>2</sup><sup>1</sup>Merck & Co., Inc, Whitehouse Station, NJ, USA; <sup>2</sup>Rutgers University, Piscataway, NJ, USA