score distributions and indices of reliability and validity. RESULTS: The literature review and in-depth interviews with patients indicated that HS and HSSA are easily understood by patients and characterize their condition well. Forty subjects completed the observational study (females = 58%, Caucasian = 65%, and age [mean] = 41 years). HS and HSSA scores were significantly correlated with well psychometrically with strong evidence of test-retest (ICC = 0.92 and 0.80, respectively) and internal consistency (α = 0.97 and 0.96, respectively) reliability and known groups (P < 0.001 and P < 0.006, respectively) and construct-related validity (via correlations between the target measures and other, concurrently administered tools). CONCLUSIONS: There is robust evidence supporting the HSIA and HSSA as content valid and psychometrically sound questionnaires for assessing symptoms and impacts in patients with HS.

PSS30
SENSITIVITY OF FUNCTIONAL READING INDEPENDENCE (FRI) INDEX TO CHANGE IN SIZE OF GEOGRAPHIC ATROPHY
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OBJECTIVES: Visual acuity does not fully capture the effect of geographic atrophy (GA) on patients’ functional reading abilities. The Functional Reading Independence (FRI) Index is a 7-item patient-reported measure developed for use in GA trials. This study examined the sensitivity of the FRI Index to change in GA size over two years. METHODS: FRI index was derived from MAHALO, a 2 phase study of lampalizumab, a complement factor monoclonal antibody fragment, for treatment of GA. For each reading activity performed in the past week, participants rated the extent to which they required vision aids, adjustments in the activity, or help from another person. The FRI Index yields continuous mean scores (range 1-4) and ordinal level scores from (Level 1 = Unable to do to Level 4 = Totally Independently). Analysis of change in FRI index stratified by mean change in GA lesion size for all patients at 12 months (N = 13) vs less (<0.94mm2) GA lesion growth. RESULTS: At 18 months, the mean change in FRI index score (SD) from baseline for patients with more lesion growth was 0.3 (0.5, n = 13) vs -0.1 (0.7; n = 52) for patients with less growth (P < 0.02). For patients with more growth, 36% declined ≥1 FRI Level vs 18% with less growth (N=54) declined >1 FRI Level vs 18% with less growth (N=11). CONCLUSIONS: In MAHALO, a change in mean FRI Index score of 0.5 differentiated patients with more vs less growth of GA lesion size. FRI level scores were also sensitive to GA lesion growth. These results provide evidence that patient-reported functional reading independence as measured by the FRI Index is linked to GA lesion growth, an objective clinical measure of disease progression.

PSS31
DEMONSTRATING CONCEPTUAL EQUIVALENCE: TRANSLATION OF THE URticAIRIA ACTIVITY AND IMPACT MEASURE (U-AIM) FROM ENGLISH INTO SPANISH
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OBJECTIVES: Translation and linguistic validation of patient reported outcomes (PRO) measures is an essential component of research methodology in preparation for mul- timodal validation and measurement. The Urticaria Activity and Impact Measure (U-AIM) is a disease-specific tool developed in English to assess the impact of chronic urticaria from the patient’s viewpoint. The objective of this work was to translate and linguistically validate the U-AIM from English to Spanish for use in the UK. METHODS: The U-AIM was translated into universal Spanish according to industry standard methodology. After the translation was completed, five Spanish-speaking patients in the US diagnosed with chronic idiopathic urticaria completed the translated questionnaire and participated in a cognitive debriefing interview. Interviews were conducted using a standardized guide to assess the relevance, understandability, and appropriateness of the translations. Qualitative analyses were performed to ensure equivalence and that the content validity of the U-AIM was maintained for the Spanish version. RESULTS: Of the five patients (40% male), the mean age of four was 37 years [one patient did not report his age]. All U-AIM items were well understood and proved relevant to the patients in this sample. Of interest, terms such as, “urticaria,” “hives,” “angioedema,” and “rapid swelling” were clearly understood as intended. CONCLUSIONS: The results indicate that the Spanish version of the U-AIM translation is conceptually equivalent to the English source version and easily understood by the target population in the US. We consider the translation to be acceptable for PRO assessment in research and clinical practice. Future research could include testing of the translated questionnaire in other Spanish-speaking countries to confirm its acceptability beyond the US.

PSS32
PATIENT REPORTED OUTCOMES IN GLAUCOMA A SYSTEMATIC REVIEW
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OBJECTIVES: Patient reported outcomes (PRO) are becoming useful tools for collecting and gauging patient experience with new medical products. This study aimed to show improvement in PROs as a related quality of life (HRQoL). Glaucoma is a chronic disease with high importance for patient HRQoL. The objective of this study was to review, analyze, and understand trends in the PRO instruments used in patients with HS-glaucoma. METHODS: Systematic literature search for Glaucoma trials with PRO endpoints was undertaken for the databases Pubmed, Embase, Biois, Google Scholar and Cochran. Data was analyzed for conducted to identify trends in commonly used PRO instruments and categorize results as positive, neutral or negative. RESULTS: 31 studies with a total of 9819 patients were identified. In these studies there were eleven different PROs instruments identified and used in 4 studies, PROs in 1 case, and no PROs in 3 cases. CONCLUSIONS: Patients with glaucoma have significance impairment in their QoL, hence collection of such data is important for new medical products. PRO instruments such as impact of vision impairment and Low vision quality of life questionnaire have been commonly used to generate evidence to show which therapies improve patient QoL.