score distributions and indices of reliability and validity. RESULTS: The literature review and health professional study size indicated that HSIA is associated with a range of symptoms (e.g., pain, drainage, itchiness) and impacts (e.g., difficulty with movement and interference with sexual activities). These concepts were organized into a conceptual model to facilitate the construction of the questionnaires. Results from a Rasch analysis indicated that both the HSIA and HSIA 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). HSIA and HSIA scores were 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 theoretical measures and other, concurrently administered tools). CONCLUSIONS: There is robust evidence supporting the HSIA and HSIA 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 functional outcomes. Therefore, a new measure of functional decline was developed. 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. METHODS: A cross-sectional study approach was used. The FRI index was validated from MAHALO, a phase 2 study of lamapalumab, a complement factor monoclonal antibody fragment, for treatment of GA. For each reading activity performed in the past 7 days, patients indicated 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 -4 to 4) and ordinal level scores (from Level 1: Unable to do to Level 4: Totally Independent). Analysis of correspondence of change in FRI index scores stratified by more vs less growth of GA lesion size. RESULTS: At 18 months, the mean change in FRI index score (SD) from baseline for patients with more lesion size growth was -0.30 (0.5, n = 14) vs -0.07 (0.26, n = 2) for patients with less growth (P < 0.02). For patients with more growth, 36% declined ≥ 1 FRI Level vs 15% for less growth. Excluding patients at FRI Level 1 at baseline, 41% of patients with more growth (N=54) declined > 1 FRI Level vs 18% with less growth (N=11). CONCLUSIONS: In MAHALO, the mean FRI Index score of 0.92 for 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 URTICARIA 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 multinational clinical trials with PROs. Our research aimed to characterize the benefits of PROs in drug development and clinical practice. Future research could include testing of the questionnaire with patients unable to complete the questionnaire in English and in Spanish.

PSS32
PATIENT REPORTED OUTCOMES IN GLAUCOMA: A SYSTEMATIC REVIEW
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OBJECTIVES: A recent systematic literature review of randomized controlled dermatology-related trials showed that patient-reported efficacy outcomes (PROs) were measured in 60% of 125 trials included in the review. This study aimed to confirm in future studies. Qualitative analyses were performed to ensure equivalence and that the translations were validated for use in future studies. 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.

PSS33
BENEFITS OF PATIENT-REPORTED OUTCOMES IN DERMATOLOGY DRUG DEVELOPMENT
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OBJECTIVES: A recent systematic literature review of randomized controlled dermatology-related trials showed that patient-reported efficacy outcomes (PROs) were measured in 60% of 125 trials included in the review. This study aimed to characterize the benefits of PROs in drug development and clinical practice. Our objective was to translate and linguistically validate the benefits of PROs in drug development and clinical practice. 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.

PSS34
RASCH ANALYSIS OF A NEW PATIENT REPORTED OUTCOME MEASURE FOR PSORIASIS TREATMENT (PROMPT)
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OBJECTIVES: A draft patient-reported outcome measure for psoriasis treatment (PROMPT) was developed through patient interviews and comprised 91 items across seven core domains. This study aims to evaluate the scale’s properties and construct validity of the draft measure using the Rasch measurement model. METHODS: Patients with chronic plaque psoriasis were identified and recruited according to predefined selection criteria and included in the study. The PROMPT was translated into English from Spanish for use in the US. Patients with chronic plaque psoriasis were included in the trial. The PROMPT was validated for use in patients with chronic plaque psoriasis in a clinical setting. The psychometric properties and scoring of the measure should be explored further and confirmed in future studies.