

P1 T2.13

### Cost-utility of a cardiovascular prevention programme in highly educated adults: a randomised controlled trial

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**Purpose:** Little is known about the costs and the effects of cardiovascular prevention programmes targeted at medical and behavioural risk factors. The aim was to evaluate the cost-utility of a cardiovascular prevention programme in a general sample of highly educated adults after one year of intervention. **Methods:** The participants were randomly assigned to intervention (n=208) and usual care conditions (n=106). The intervention consisted of medical interventions and optional behaviour change interventions (e.g. a tailored website). Cost data were registered from a health care perspective and questionnaires were used to determine effectiveness (e.g. quality adjusted life years (QALYs)). **Results:** When adjusting for baseline utility differences, the incremental cost was €433 and the incremental effectiveness was 0.016 QALYs. The incremental cost-effectiveness ratio (ICER) was €26,910 per QALY. **Conclusion:** The intervention was cost-effective compared to usual care in this sample of highly educated adults after one year of intervention. Increased participation would make this intervention highly cost-effective.

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P1 T2.14

### Developing a web-based health promotion program for adoption in community colleges: the role of student diversity

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**Purpose:** There is limited health promotion research conducted with 2-year community colleges (vs. 4-year colleges), yet these college settings offer an opportunity to reach a large and growing number of diverse students. To promote adoption of intervention programs by community colleges, it is crucial to gain insight into important program design factors from an organizational level perspective. This qualitative study examined administrators' perspectives of interest in, design characteristics of, and ways to promote a web-based program targeting nutrition and physical activity to community college students. **Methods:** We conducted 21 individual key informant interviews among student services and health center personnel at 15 community colleges in one state in the USA. A priori and emergent themes were coded to provide a rich description of the data. **Results/Findings:** Findings revealed five emergent themes related to student diversity that would need to be incorporated into intervention development: (1) multiple roles played by students, (2) limited access to financial resources, (3) varied student demographics, (4) different levels of understanding, and (5) commuting to campus. Participants also noted several salient factors that would promote adoption in the community college setting. These included ensuring a fit with student needs, promoting participation, and demonstrating effectiveness in promoting the targeted behaviors. **Conclusions:** These data indicate that health promotion programs designed for community colleges need to specifically address the diverse nature of community college students in order to increase the potential of adoption. The Internet is a promising channel for these programs.

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