participant responses to the items (n = 926) were found to be understood, interpreted, and responded to as intended by the authors. The item difficulty of the 44 HLQ items was similar to those previously published. The previously collected HLQ data was found to be highly reliable, with only one scale below the acceptable range (CSR > 0.75). The BSEM CFA supported the a priori 9-factor conceptual framework of the HLQ in the prison context (Posterior Predictive P-Value = 0.536; 95% Confidence Interval for the Difference between Observed and Replicated Chi-Square Values = − 122.857–122.044). **Conclusion:** This study created new validity evidence and has significantly contributed to the understanding and use of the HLQ in the prison context. Synthesising the newly generated validity evidence supports, with some minor caveats, the intended interpretation and use of the HLQ in the NSW prison context. Moreover, the data generated from cognitive interviews and the factor analytic approaches provides validity evidence for test content, response processes, and internal structure. Despite the new evidence, validation is an ongoing process. Thus, further studies are required to enhance the evidence base.

(2067) Macedonian Translation and Cross-Cultural Adaptation of the Inhaler Technique Questionnaire (InTeQ)

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Aims: This study aimed to translate and culturally adapt the Inhaler Technique Questionnaire (InTeQ) into the Macedonian language. Considering that poor inhaler technique is a major contributing factor to suboptimal drug delivery in asthma patients and may compromise the effectiveness of treatment, this action represents a significant advancement in medication adherence in North Macedonia. **Methods:** The InTeQ is comprised of five items asking about the frequency of performing key steps when using the inhaler, utilizing a five-level Likert scale (from "Always" to "Never"). Translation and adaptation process followed the Principles of Good Practice for the Translation and Cultural Adaptation Process for Patient-Reported Outcomes (PRO). The steps followed included: obtaining permission for its cross-cultural adaptation; translation from English to Macedonian by two independent translators; reconciliation of the translations; back translation into English; and review against the original questionnaire to evaluate the conceptual equivalence. Subsequently, cognitive debriefing was conducted with 15 asthma patients, and the results were analyzed to finalize the translation process before proofreading and preparing the final report. **Results:** Only one item was subjected to cultural and linguistic adjustments to improve its relevance and ensure it sounded more natural in the Macedonian language. In the two translated versions, there was a difference between the term "fully" regarding the first question. In the second step, reconciliation of the two translated versions, the term "fully" was discussed, and was decided to use a term that refer more to term "completely" because it best fitted Macedonian language context. The result of back translation was very similar to the original English version; therefore, no further changes were required. The patients expressed their satisfaction with the Macedonian version of the InTeQ, finding it very useful, clear, and comprehensive. **Conclusion:** We generated a Macedonian version of the InTeQ conceptually equivalent to the original tool. Additional research is required to confirm that the Macedonian version of the InTeQ exhibits the necessary measurement properties for its intended use. The subsequent phase involves testing the new version with a study in patients from the target setting.

(2068) Frequency of common symptoms immediately after kidney and liver transplantation

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Aims: We compare the frequency of physical and emotional symptoms among incident kidney (KT) and liver transplant (LT) recipients