

# European Respiratory Society Annual Congress 2012

**Abstract Number:** 4772

**Publication Number:** P1459

**Abstract Group:** 1.2. Rehabilitation and Chronic Care

**Keyword 1:** COPD - management **Keyword 2:** Quality of life **Keyword 3:** Chronic disease

**Title:** Quality of life in patients receiving home oxygen therapy (HOT) for chronic respiratory diseases (CRD)

Prof. Peter 29536 Frith peter.frith@health.sa.gov.au MD <sup>1</sup>, Dr. Ruth 29537 Sladek ruth.sladek@flinders.edu.au <sup>1</sup>, Dr. Tina 29538 Jones tina.jones@health.sa.gov.au <sup>1</sup>, Prof. Mary 29539 Luszcz mary.luszcz@flinders.edu.au <sup>1</sup>, Ms. Debra 29540 Rowett debra.rowett@health.sa.gov.au <sup>2</sup>, Mr. Paul 29560 Cafarella paul.cafarella@health.sa.gov.au <sup>2</sup>, Dr. Tanya 29576 Effing tanja.effing@health.sa.gov.au <sup>2</sup> and Prof. Paddy 29581 Phillips paddy.phillips@health.sa.gov.au MD <sup>1</sup>. <sup>1</sup> Faculty of Health Sciences, Flinders University, Bedford Park, SA, Australia, 5042 and <sup>2</sup> Respiratory Medicine, Repatriation General Hospital, Daw Park, SA, Australia, 5041 .

**Body:** Introduction: Health related quality of life (HRQL) is impaired in chronic obstructive pulmonary disease (COPD). Less is known about impacts of HOT on health status in patients with CRDs. We hypothesized that health status would be impaired independent of underlying respiratory disease, and physical and mental health status would be lower than population norms. Methods: Patients receiving HOT from 3 hospitals in South Australia completed Australian Karnovsky Performance Scale (AKPS), Short Form 36 (SF36) and Chronic Respiratory Questionnaire (CRQ). Scores were compared to population norms. Correlations were made with Spearman (skewed) or Pearson (normal distributions). Differences in scores between CRD types were evaluated by Student T-test. Results: Data were available from 197 patients (mean age=74.4; SD=9 yrs; 62% male; 155 (78.6%) with COPD, 32 (16.2%) pulmonary fibrosis (IPF), and 10 (6.2%) other CRDs). No differences in HRQL were seen between COPD and IPF. SF36 emotional dimensions were similar to population norms. Physical health dimensions were substantially lower than population norms. Patients' AKPS performance was on average "requiring occasional assistance" (64.8; SD=12.1). CRQ dyspnoea (3.4; 1.6) and fatigue (3.29; 1.17) scores indicated moderate impairment; emotional function (4.4; 1.24) and mastery (4.4; 1.37) were not impaired. CRQ domains (except emotional function) were highly correlated with AKPS and SF36 dimensions ( $p<0.001$ ). Conclusions: Patients receiving HOT for respiratory diseases had severe physical disablement, which correlated closely with dyspnoea and fatigue, but their mental and emotional status were similar to population norms.