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**Title:** Audit of survival on long-term oxygen therapy

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**Body:** Aims: UK survival data for patients prescribed long-term oxygen therapy (LTOT) is sparse. We aimed to assess: adherence to BTS 2006 guidelines (1) for the assessment of LTOT; and equability of survival benefit of LTOT throughout the Sheffield area and to compare the survival rate for Sheffield patients with the gold standard studies; Methods: Patients prescribed LTOT >15 h/day between 2005-2011 were identified from our database. Date of prescription, demographics, assessment, smoking status, post code, and date of death were used for Kaplan-Meier survival curves. Results: 41% had an initial oxygen assessment. Survival compared well with the randomised controlled trials of LTOT.

No significant difference in survival was noted for gender, smoking status or deprivation. Median survival of COPD patients was 3 times that of interstitial lung disease. Initial assessment of patients for LTOT was below the recommended standard. but the Oxygen Service has now expanded and a full assessment of all patients on LTOT in Sheffield will be carried out in the next 18 months. Conclusions: Survival of Sheffield patients on LTOT was amongst the best reported(2) and survival benefit appears equitable across city. A re-audit is planned for 2 years time. References 1. British Thoracic Society (2006). Clinical component for the home oxygen service in England and Wales 2. Ringbaek TJ. (2006). Dan Med Bull. 53: 310-315.