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Title: Home mechanical ventilation (HMV) discontinuation: Mortality, adherence and transfer

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Body: Background: There is limited data in the literature reporting reasons for discontinuation of HMV. We investigated the specific causes for HMV removal. Methods: From a HMV database of prospectively entered data, we undertook retrospective data analysis of patients who discontinued HMV from January 2010 to December 2012. Results: There were 1167 patients on HMV. Over the 2 years, 205 had HMV withdrawn. In 61%, (125/205) death was the cause of removal. 22% were non-adherent to treatment, 17% were discharged. Of the 46 coded as non-adherent, 24% (11/46) stopped HMV due to interface issues, 11% due to disturbed sleep, 17% had limited clinical symptoms requiring HMV. 15% stopped HMV due to weight loss, 24% had no documentation for discontinuation and 9% gave other reasons.

Of the 34 coded as discharged, 22 (65%) had care transferred due to the commuting distance, 15% were discharged as they had no clinical symptoms but demonstrated compliance of 7(\pm 2.6) hours a night, 12% had significant weight loss and did not require HMV. Conclusion: The primary reason for discontinuation of HMV was death, major causes of non-adherence are interface issues and sleep disruption. There is a small group with minimal symptoms but adhere to the ventilator prescription. The other major cause of HMV discontinuation is weight loss, albeit this can be discontinuation through non-adherence or clinical instruction.