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Cost-effectiveness of ambulatory oxygen in improving quality of life in fibrotic lung disease: preliminary evidence from the AmbOx Trial

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Ambulatory oxygen may be cost-effective in improving quality of life in fibrotic lung disease. To be more conclusive, we need to understand societal willingness to pay for quality of life improvements and whether improvements are sustained. <http://bit.ly/2pAiBji>

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To the Editor:

Fibrotic interstitial lung diseases (ILDs) are chronic and often progressive conditions resulting in substantial impact on morbidity, health-related quality of life (HRQoL), and health system costs. Ambulatory oxygen (AO) used during routine daily activities could lead to improved exercise performance, reduced symptoms and improved mobility in daily life. A UK prospective, multicentre, mixed method, randomised controlled crossover trial in patients with fibrotic ILD (AmbOx trial: NCT02286063), the first study on AO effects in daily life, reported improved HRQoL after 2 weeks of AO compared to no intervention, when measured by the King's Brief ILD (K-BILD) questionnaire [1–3]. Although AO is used in ILD, evidence supporting its health-economic impact is absent. Here, we evaluate the cost-effectiveness of AO in patients with ILD, using data collected alongside the AmbOx Trial.