Long-Term Oxygen Therapy - BTS Guidelines

The following statement is provided as a source of information for those who are seeking guidance on the continued prescription of long-term oxygen therapy (LTOT) where patients continue to smoke.

BTS notes that the current NICE COPD guidelines provide recommendations in relation to new prescriptions of LTOT but that the position in relation to patients who continue to smoke is not covered. NICE guidance states “Do not offer long-term oxygen therapy to people who continue to smoke...”. The guidelines (including the rationale and evidence review sections) do not state whether or not oxygen should be removed from current smokers.

BTS Home Oxygen guidelines provide a pragmatic approach to oxygen prescription (see recommendations and Good practice points at https://www.brit-thoracic.org.uk/quality-improvement/guidelines/home-oxygen/).

BTS recognises there are strong divergent views both in the UK and internationally. We also recognise that Trusts have to justify practice that is not in line with NICE guidance. BTS does not support the withdrawal of LTOT from current smokers who meet criteria for LTOT, and who have been risk assessed, informed of the risks and given written safety advice, signed to accept the risks and where no concerns about adherence to safety advice or LTOT have arisen.

A risk assessment should be completed in line with BTS guidance and with local requirements – template risk assessment forms are available here https://www.brit-thoracic.org.uk/quality-improvement/guidelines/home-oxygen/:

The risk assessment includes the patient, cohabitants and dwelling (fire service risk assessment is a separate exercise), and oxygen should be removed if concerns arise that the risks outweigh the benefits: this includes both failure to comply with safety advice, or failure to adhere to oxygen sufficiently to gain benefit (despite further explanation and warning).

This information is provided as an aid for those who are developing local policies.

BTS April 2019