



Title Home Visits to Patients with Severe COPD

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Aim

To determine the effectiveness of home visits to patients with severe chronic obstructive pulmonary disease (COPD).

Conclusions and results

Overall, the results show that home visits have several positive consequences and can be considered a good service. Nevertheless, stronger evidence is needed, especially concerning the economic aspects. Hospitals offering home visits carry out check-ups on a large number of patients, including severely ill patients that would normally require horizontal transport. This is one of the main reasons for arranging home visits to check oxygen consumption. The technology for oxygen-related home visits is available and applicable as a relevant service to COPD patients and other patient groups. The results of 4 subanalyses suggest that general developments in establishing advanced services are especially relevant in this case. The hospital-based approach (reported in all cases) is attributed to the need of hospital management to maintain an overview of oxygen consumption and the patient's situation. This suggests improved communications and greater coordination of services between the parties involved in planning different types of care for this patient group. Hence, the technology involved in arranging home visits represents the beginning of a sound trend towards "shared care" between the specialized hospital-based service, the oxygen suppliers, the home nursing system, and the general practitioner.

Recommendations

There is a need to further strengthen services for patients with chronic diseases. Organizationally, the development of home visit arrangements suggests that further interpretation and adaptation of the organization and delivery of this function is recommended.

Methods

Primary data were collected, which involved keeping records of oxygen consumption check-ups during a

4-month period at three hospitals offering home visits and two hospitals not offering home visits. During this 4-month period, 783 patients connected with the hospitals received home visits and 439 patients did not.

Further research/reviews required

Overall, this study suggests that home visits are a good service. The evolution of treatment and management of patients with severe COPD needs to be evidence based, which would require more extensive studies of sufficient strength to demonstrate statistically significant results.