Healthcare Professionals' Perceptions of Oxygen Therapy in Palliative Care: A qualitative study.

**Background:** The role of oxygen therapy to palliate dyspnoea is controversial. Without clear evidence base oxygen is commonly prescribed, sometimes detrimentally for patients. Contemporary studies and guidelines propose an influencing culture whereby oxygen is given to alleviate breathlessness and confusion regarding its use exists, yet there is no evidence to substantiate these claims. The problem may self-perpetuate as erroneous beliefs influence patients', carers' and the general public's expectations.

**Aim:** To explore Healthcare Professionals' (HCPs) perceptions of oxygen therapy in palliative care to inform and direct future research, education and practice.

**Method**: Semi-structured interviews were undertaken with 33 HCPs, including doctors, nurses, pharmacists and paramedics. Self-reported beliefs and behaviours were recorded, transcribed and analysed using interpretative phenomenological analysis (IPA).

**Results**: Despite most HCPs being well informed about oxygen therapy *per se,* all recognised the role of oxygen in palliative care setting as important. The overarching theme of *compassion* identified sub-themes of *'comfort'*, *'do anything and everything'*, and *'family benefit'*. The use of oxygen in the palliative care setting was not without its dilemmas however, as additional sub-themes of *'controversy'*, *'doubt'* and *'dependency'* illustrated. The WordCloud in Figure 1 depicts common vocabulary.

**Conclusion:** These findings suggest the use of oxygen therapy in palliative care poses on on-going dilemma for HCPs striving to provide optimum care. It seems patients and families often expect and welcome oxygen but the overwhelming perception of oxygen as a solution to dyspnoea can conflict with HCPs own doubt and experiences.

Figure 1:

